

Review of Claims of Abuse of Children in State Care

Final Report – Round 4

November 2014

Acknowledgements

The contribution of the following individuals in completing the Tasmanian Claims of Abuse in State Care Program and preparing this report is gratefully acknowledged:

Past and present Premiers and Ministers, for their ongoing support for the program and concern for those individuals who have been affected by abuse as children in State Care.

Independent Assessor

Arnold Shott

Program Manager

Tim Vaatstra

Senior Counsellors

Rebecca Dwyer, Jane Dunsford, Suzanne Botak, Sheila Banks, Katarina Ferguson and Kate Wilson

Administrative Assistants

Janice Martin, Lyn Bartels, Lisa Matteson and Glenda Wright

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Foreword

Assuming the role of a corporate parent and providing quality care for children outside of their family home is a challenging task for Government. Children subject to, or at risk of abuse within their home, deserve the opportunity to grow and reach their potential in a safe, nurturing and stable environment. A quality Out of Home Care system should facilitate these opportunities, but regrettably this has not always been the case. Out of Home Care systems have, at times, failed those they intended to protect; exposing already vulnerable children to further abuse and neglect. This should never happen.

The Tasmanian Claims of Abuse in State Care Program was established to address these failures and Tasmania's commitment to the program remains unmatched amongst Australian jurisdictions. Our program was the first ex gratia payment program initiated in Australia and has had the longest duration with almost 10 years in operation. Over 1800 ex gratia payments were awarded totalling almost \$55 million.

Recognition must go to those courageous individuals who willingly came forward to share their stories and expose the most tragic and painful parts of their lives. The distress, alienation and hurt that they endured as children is inconceivable to many of us and it is the sincere hope of the Tasmanian Government that their courage has led to some measure of personal healing that will endure.

In addition to personal redress, the Program has also served another important purpose. The collective stories disclosed through the Program have acted as a powerful spotlight, exposing the inadequacies and failures of our past Out of Home Care systems. The lessons learnt from listening to those who were placed in Out of Home Care in the past have been many, and we continue to use these lessons to help us improve our current and future services. The rigours of carer recruitment, assessment, training, review and monitoring have steadily improved over time. The introduction of a standardised tool for assessing prospective carers, a robust process for responding to allegations of abuse in care and the adoption of the National Standards for Out of Home Care within Tasmania are all examples of improvements to the Out of Home Care system.

However, we will work to continuously improve our Out of Home Care system and our vigilance in this endeavour must surely come by keeping one eye on the past. Government must learn the lessons of past failures. We must ensure that both current and future children in Out of Home Care are not only kept safe but are supported in such a way as to realise their full potential as individuals.



Mr Michael Pervan
Acting Secretary DHHS

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I. Background to Round 4

Tasmania's Claims of Abuse in State Care Program (the Program) was first announced by the Tasmanian Government in July 2003. The Program operated for 10 years over four separate rounds, and has helped more than 1 800 people with ex gratia payments worth over \$54 million. The first two rounds of the Program were a joint undertaking by the Tasmanian Ombudsman's office and the Department of Health and Human Services (DHHS). Round 3 was delivered by the Department of Premier and Cabinet (DPAC) in partnership with DHHS and round 4 of the Program was administered by DHHS alone.

The immediate catalyst for the Program was a case involving child sexual abuse dating back many years which was aired on the ABC Television current affairs program Stateline on Friday, 11 July 2003. On the program the then Minister for Health and Human Services announced that the Tasmanian Ombudsman had agreed to carry out an independent review of claims of abuse suffered by adults who had been in State care as children.¹ The involvement of The Tasmanian Ombudsman provided an impartial mechanism for the review of abuse in care claims. Although the Ombudsman ceased involvement after round 2, the ongoing involvement of an Independent Assessor ensured all claims continued to receive impartial review.

The below table provides an overview of claims and payments under the Program since 2003.

Round	Years	Claims	Ex gratia payments	Total amount
1	2003-04	364	247	\$9.4 M
2	2005-06	514	423	\$14.6M
3	2007-10	995	784	\$25.3M
4	2011-13	541	394*	\$5.5M*
Total (all rounds)		2414	1848	\$54.8M

*Includes 4 ex gratia payment offers which as at 31st of December 2013 had not yet been accepted by claimants.

As a result of claimants continuing to come forward new rounds of the Program were initiated to respond to the additional claims. Round 3 of the Program was finalised in December of 2010. On 21 August 2008, while round 3 was underway the then Minister for Health and Human Services, the Hon. Lara Giddings MP, announced that a fourth and final round would follow on from round 3. Round 4 of the Program commenced reviewing applications in January 2011. It followed a similar process of assessment with an Independent Assessor responsible for making determinations and recommendations regarding claims. A major difference in round 4 was that ex gratia payments were capped at \$35,000, whereas all other rounds had been capped at \$60,000. The lesser amount was considered necessary for the sustainability of the round 4 program given it was established with no fixed end date. The sum of \$35,000 represents the average payment made to claimants for the three previous rounds of the Program.

Round 4 of the Program closed to new applications on the 15th of February 2013 with the announcement of a support service to be made available for eligible individuals who come forward after the Program closure.

¹Ombudsman Tasmania, 2004; Review of Claims of Abuse from Adults in State care as Children, Report by the Tasmanian Ombudsman, Tasmania, page 1.

The round 4 claims process

The claims process under round 4 of the Program has been structured as follows:

1. Application received.
2. Determination of eligibility for assessment.
3. Assessment interview and report.
4. Decision by Independent Assessor.
 - Ineligible for ex gratia payment – claimant notified of outcome.
 - Eligible for ex gratia payment – process continues.
5. Minister advised of decision and approves payment.
6. Letter of offer sent to claimant by Premier.
7. Offer accepted by claimant → claim finalised.
8. Offer not accepted and claimant seeks a review.
9. Review of offer by Independent Assessor and Steps 4 – 7 are completed again → claim finalised.

Program eligibility criteria and definitions

Claimants who were eligible to have their claims considered under round 4 of the program were:

- aged 18 or over on 11 July 2003
- in 'State Care' in Tasmania as a child
- placed in an institution or home established for the care of children
- had not been a claimant in a previous round of the Abuse in Care Program.

The eligibility criteria were set at the beginning of round 1 of the Abuse in Care Program which commenced in July of 2003. At the time the then Minister for Health and Human Services, the Honourable David Llewellyn, invited adults who were over 18 years of age to come forward.² The age criteria remained the same through all rounds of the program.

'State Care' refers to a child or young person who was in the care of the Tasmanian Department of Health and Human Services (the Department) or its predecessors in one of the following ways:

- subject to a legal order transferring guardianship to the Director/ Secretary of the Department; or
- placed by the Department in a Departmental Receiving Home, Family Group Home or foster care on a legal or voluntary status; or
- placed by the Department in an Approved Children's Home (i.e. homes certified under an Act for the care of children) on a legal or voluntary status; or
- on a relative placement approved and supervised by the Department at the request of another state department; or
- placed in temporary care under the *Domestic Assistance Service Act 1947* (known as 'Res DA'); or
- child migrants who came under the auspices of the Commonwealth Immigration (Guardianship of Children Act 1946 where guardianship was delegated to the Director of the Department).

Adults who were privately placed in Approved Children's Homes or homes certified for the care of children were not eligible. Nor were adults who were adopted as children and were not otherwise in the care of the State.

'Abuse' is defined in the *Children, Young Persons and Their Families Act 1997* and means:

- sexual abuse; or
- physical or emotional injury or other abuse, or neglect to the extent that:
 - The injured, abused or neglected person has suffered, or is likely to suffer, physical or psychological harm detrimental to the person's wellbeing; or
 - The injured, abuse or neglected person's physical or psychological development is in jeopardy.

²Ombudsman Tasmania, 2004; Review of Claims of Abuse from Adults in State care as Children, Report by the Tasmanian Ombudsman, Tasmania, page 1.

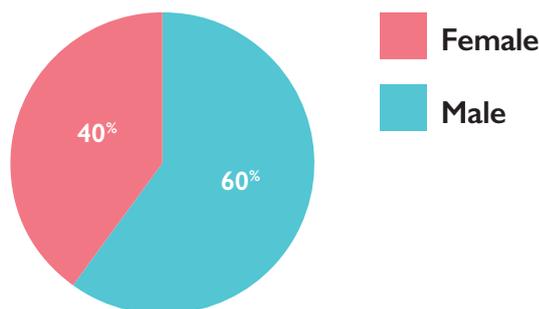
2. Profile of Eligible Claimants

A total of 541 claimants applied to the program; of these claimants, 445 were eligible for assessment. Of the 445 eligible claimants the following demographic information is available.

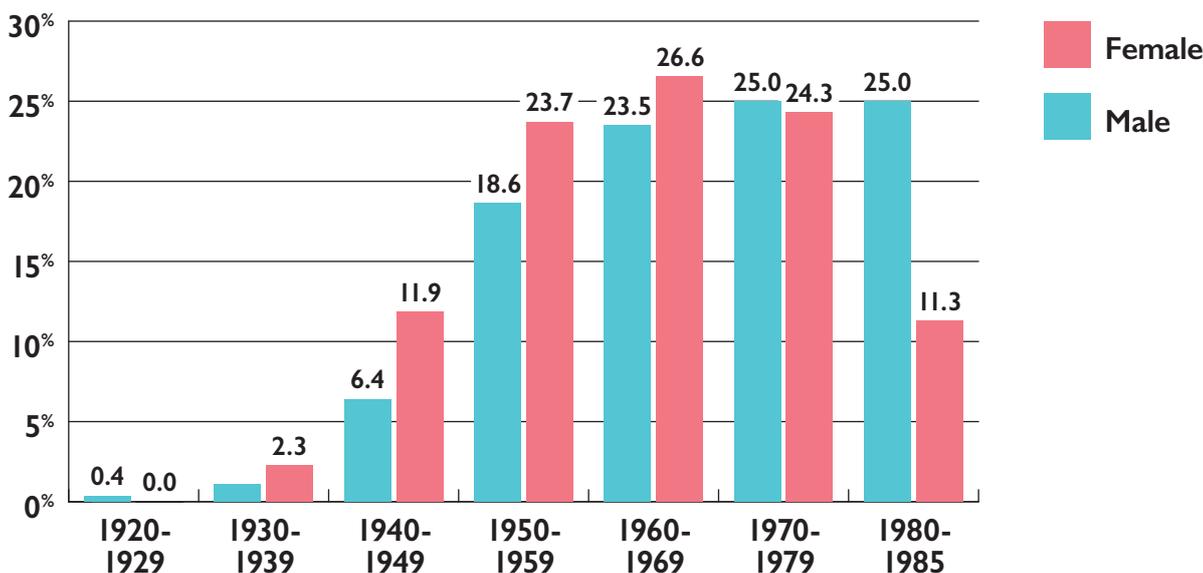
Gender and age demographics

From 445 claimants, 268 claimants were male and 177 were female.

Under round 4 there were 20 per cent more male claimants than females. The gender breakdown amongst claimants from round 1 was relatively even; whereas round 2 claimants had a similar trend in gender distribution to round 4.



Age distribution for male and female claimants



The oldest claimant was 87 years of age, and the youngest claimant was 28 years of age. Round 4 appears to have had a younger population demographic when compared with other rounds.

In round 4 male claimants tended to be younger than female claimants.

Geographical distribution of claimants

The below table demonstrates the geographical distribution of claimants at the time their claims were completed. The majority of claimants still reside in Tasmania (71.7%). 27.2% of claimants were now living interstate, with Queensland having the highest proportion of claimants outside of Tasmania.

For rounds 1 and 2, the geographical distribution of claimants demonstrated a lower proportion of claimants who resided outside of Tasmania in comparison to round 4. Round 1 and 2 had no claimants apply that resided internationally.

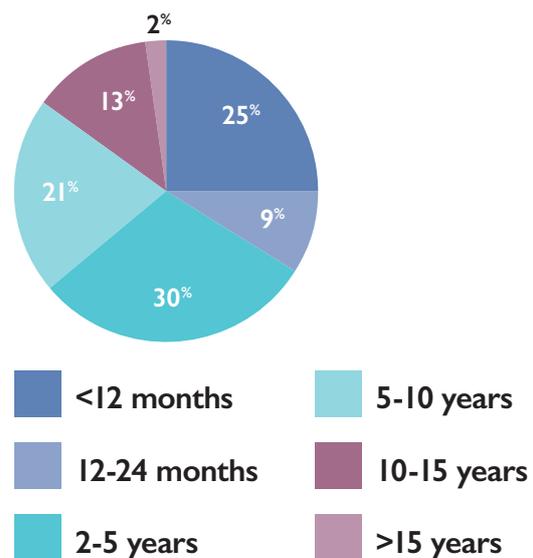
Location	# of claimants
Tasmania	319
Australian Capital Territory	2
New South Wales	12
Queensland	52
South Australia	4
Victoria	39
Western Australia	12
International	5

Placement history for claimants

Many claimants experienced time in State Care across a number of different placements and placements types (such as receiving homes, foster care and institutional care). Also, many claimants were admitted and discharged from placements many times. For example, a young person may have experienced living in three different Family Group Homes and was admitted to these three particular homes eight times throughout the years they were in State Care.

The duration of time claimants spent in State Care is depicted below. Half of all claimants had spent between 2–10 years in State Care. A quarter of all claimants were in State Care for less than 12 months.

Duration of time in state care



Incarceration rates

A proportion of all claimants were incarcerated at the time of application. For these claimants it was necessary to conduct their process in liaison with staff at correctional facilities both in Tasmania and interstate.

At the time of claims being finalised 27 claimants were incarcerated throughout Australia. Of these 27 individuals:

- 2 were female and 25 were male
- 16 were born between 1980 and 1985, 5 were born between 1970 and 1979, 6 were born between 1950 and 1969
- 22 of these claimants were placed within departmental institutions during their childhood
- 21 were incarcerated at Risdon Prison in Tasmania.

Child migrants

Under the program claimants were also eligible if they arrived in Tasmania as child migrants under the auspices of the *Commonwealth Immigration (Guardianship of Children) Act 1946* where guardianship was delegated to the Director of the Department.

Within round 4 of the Program, four successful claimants had arrived under the child migrant scheme. Of these, two were brought to Tasmania and taken into care within specific programs that supported child migrants at the time, namely: Tresca Home and the Big Brother Movement. The other two claimants were brought to Tasmania and placed in care within an Approved Children's Homes.

Policy shifts throughout the period of time in which Tasmania was accepting and supporting child migrants resulted in a distinction between child migrants who arrived and were placed in 'State Care', and those that arrived and were placed in 'private placements' within Tasmania to allow for their care-givers to establish themselves in the state. Claimants who were placed privately were ineligible to have their claims assessed.

3. Profile of Ineligible Claimants

Applications received by the round 4 Program were initially assessed against the eligibility criteria (see page 4).

Of the 541 claimants who applied to be assessed 96 did not meet the eligibility criteria due to the following reasons:

Reason deemed ineligible	# of claimants
Claimants in a previous round	12
Did not meet the age criteria	25
No evidence of being in state care	59

Claimants who were deemed ineligible were contacted via letter to inform them of their ineligibility with reasons and were given information about other support services available to them.

4. Profile of Placements

Claims of abuse were made against a variety of State Care placements, with the range of placements named by claimants being significantly larger than in previous rounds of the Program. The type of placements fall into the following categories:

Receiving/ Family Group Homes were Department managed and intended primarily for the accommodation of children pending more permanent placements, and for children in transit.³

Foster Care is a home-based service provided to children and young people up to 18 years of age who are temporarily or permanently unable to live with their families of origin. The term 'foster care' superseded 'boarding out'.⁴

Departmental Institutions were Department managed, specialist facilities designed to meet the needs of a specialized group of children for whom the resources of foster homes and Approved Children's Homes were inadequate. These institutions were regarded as training institutions with the task of rehabilitating the child/young person back into the family home. The Ashley Youth Detention Centre, which today provides for children and young people who are on remand or have been convicted of criminal acts, is operational under the *Youth Justice Act 1997*. Children and young people on remand/ detention may also be subject to orders in accordance with the *Children, Young Persons and their Families Act 1997*.⁵

Approved Children's Homes were homes certified under Section 15 of the *Infants Welfare Act 1935* or approved under Section 10 of the *Child Welfare Act 1960*. They were operated by churches or voluntary organizations and accepted Wards of State from the Department. The children remained under the guardianship of the Director of the day, but some of the functions were delegated to the controlling body of the Home. In the 1970s a number of Approved Children's Homes began to introduce care in family units in cottages.⁶ A few organisations still provide cottage care across the state for the Department.

Hostel was a general term used to describe a variety of accommodation for young people. In Tasmania, a hostel could be used to accommodate young people in transition from a home to paid employment, children with disabilities, and children 'cared' for by the Government under the Domestic Service Assistance Scheme.⁷

Child Migrant Scheme The term 'child migrant' refers to children between the ages of 8 and 13, although some were younger, who were sent to Australia as part of various British Child migrant schemes.⁸

The following tables represent a complete list of successful claims made against a particular placement. Overall there are 650 claims against placements, a number of claimants made claims against more than one placement.

³Ombudsman Tasmania, 2006; Review of Claims of Abuse from Adults in State Care as Children, Final Report – Phase 2 Tasmanian Ombudsman, Tasmania, page 4.

⁴Find and Connect Tasmania www.findandconnect.gov.au/tas/biogs/TE00011b.htm cited 5th August 2013.

⁵Ombudsman Tasmania, 2006; Review of Claims of Abuse from Adults in State Care as Children, Final Report – Phase 2 Tasmanian Ombudsman, Tasmania, page 4.

⁶Ombudsman Tasmania, 2006; Review of Claims of Abuse from Adults in State Care as Children, Final Report – Phase 2 Tasmanian Ombudsman, Tasmania, page 4.

⁷Find and Connect Tasmania www.findandconnect.gov.au/tas/biogs/TE00258b.htm cited 5th August 2013.

⁸Find and Connect www.findandconnect.gov.au/australia/biogs/FE00084b.htm cited 5th August 2013.

Claims against DHHS placements

Placement	# of claims against	Type of placement
Abermere	4	Receiving/ Family Group Home
Amarilla	1	
Argyle Street Recreation Home	1	
Bethany	1	
Bevis Marks	3	
Binowee	3	
Casablanca	8	
Conellen	3	
Cornwell	2	
Cottage Home (West Hobart)	1	
Danbury	1	
Garthfield	4	
Glenview	2	
Glynnhyfyd	4	
Haldon	3	
Kangara	1	
Karadi	1	
Kiah	3	
Laroon	2	
Lismore	1	
Malmsbury	12	
Marden	3	
Miranda	1	
Miroma	1	
Monomeeth	4	
Mosely	1	
Narmarrindi	2	
Omaru	1	
Reeve House	3	
Rochebank	5	
Rowella	1	
Summerhill	2	
Woodlands	1	
Miscellaneous Family Group Homes ⁹	8	
Foster Care	126	Foster Care
Specialist Foster Care	2	
Ashley Boys Home/ Ashley Youth Detention Centre	172	Departmental Institution
Wybra Hall	50	
West Winds Boys Home	8	
Weeroona Girls Home	20	
Risdon Prison	9	

⁹Some claimants made claims against Family Group Homes but were unable to identify the exact Home where the abuse occurred. Usually in these instances the claimant had been placed in numerous Family Group Homes over a short period of time.

Claims against approved children's homes and hostels

Placement	# of claims against	Placement managed by
Aikenhead House (later St Josephs Child Care)/ St Josephs Orphanage	15	Catholic Church
Boys Town (Savio College) (St John's Bosco Boys Town)	3	
Mount Saint Canice (Magdalen Home)	13	
Barrington Boys Home	8	The Salvation Army
Barrington Cottage Care	1	
Maylands Girls Home	11	Anglican Church
Clarendon Children's Home	9	
Roland Boys Home	10	
Glenhaven Children's Home	3	Christian Brethren
Waterton Hall	2	Catholic/ St Vincent de Paul
Kennerley Boys Home (later known as Kennerley Children's Home)	23	Community Board of Management
Launceston Girls Home	5	
Northern Tasmanian Home for Boys (also known as Glenara Children's Home)	19	
Glendel Children's Home	1	
Roseneath Girls Home	1	
Youth Hostels and Guest Houses	6	Miscellaneous organizations
Griston Farm	1	
Tresca Fairbridge Home	1	Child Migrant Scheme
Big Brother Movement	1	

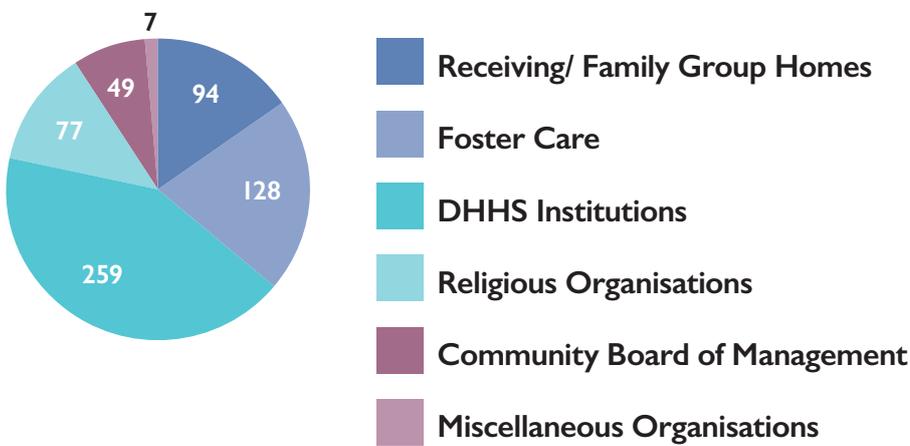
In addition to the above claims relevant to a specific placement; there were 36 successful claims that did not relate to a specific placement, including claims against:

- departmental workers (usually child welfare officers)
- a claimant's family members
- medical professionals
- police
- a mental health institution.

Summary of placement information

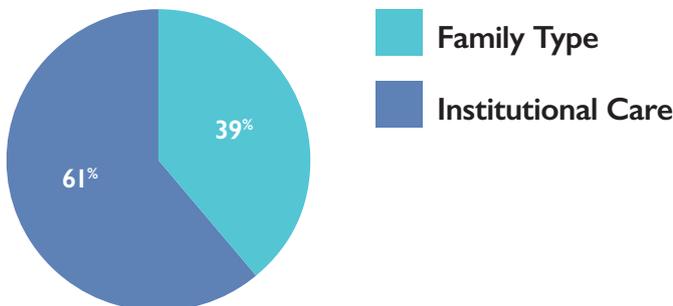
- 74% of all placements against which claims were made were managed by the Department, within this:
 - 19.6% were made against Receiving/ Family Group Homes
 - 26.6% were made against Foster Care placements
 - 53.8% were made against Departmental Institutions.
- 20% of all placements against which claims were made were managed by Community Boards and Religious organisations.

Placement type



Round 4 received a number of claims made against family type placements inclusive of Foster Care, Receiving/ Family Group Homes and Approved Children’s Homes. These account for 39% of all successful claims compared with 61% of claims that related to institutional placements (inclusive of the Departmental institutional placements and those managed by other organisations).

Type of placement where abuse occurred



5. Overview of Abuse Claims

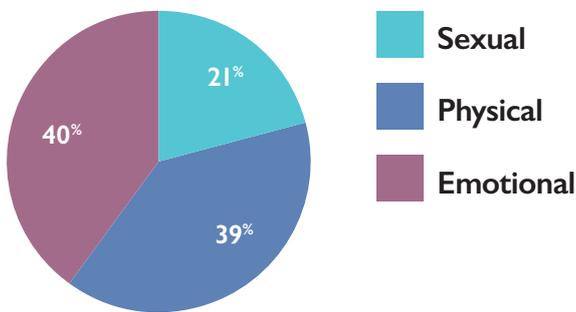
The table below provides an overview of individual claims delineated by abuse type. This includes claims of sexual, physical and emotional abuse, as well as claims that were made against a combination of abuse types which was quite common. Overall there were 205 claims made of a combined emotional and physical nature, resulting in this being the most prevalent type of claim accepted.

As well as individual allegations including more than one type of abuse, many claimants made more than one allegation of abuse; therefore the number of claims is significantly higher than the number of claimants. Overall the 395 successful claimants made 933 claims of abuse.

The below table and chart demonstrate the breakdown of abuse types and prevalence of each one.

	Emotional	Physical	Sexual
# claims	368	365	200
n = 933	39.5%	39.2%	21.4%

Type of placement where abuse occurred



Further analysis of each form of abuse is outlined below:

Sexual abuse claims

Sexual abuse was defined as when: ‘a child has been exposed or subjected to sexual behaviours or acts that are exploitative and/or inappropriate to his or her age and developmental level. Harm that results from sexual maltreatment may include emotional trauma, physical injury or impaired development, although the harm resulting from the maltreatment may not be readily identifiable or apparent’.¹⁰

A total of 200 claims of sexual abuse were accepted within the program made by 167 individuals. Of these 200 claims, 98 were made by male claimants and 69 were made by female claimants.

¹⁰Ombudsman Tasmania, 2004; Review of Claims of Abuse from Adults in State Care as Children, Report by the Tasmanian Ombudsman, Tasmania, page 9.

Amongst the females, 84 claims made were made by 69 claimants. Amongst these:

- 11 claimants had two claims of sexual abuse accepted
- 2 claimants had three claims of sexual abuse accepted.

Amongst the males, 116 claims made were made by 98 males. Amongst there 98 claimants:

- 14 claimants had two claims of sexual abuse accepted
- 2 claimants had three claims of sexual abuse accepted.

Claims of sexual abuse made within round 4 of the Program varied from allegations of vaginal and/or anal rape, through to inappropriate sexual advances. Claims also varied in severity with some the subject of an ongoing predatory relationship by a care giver through to one off opportunistic sexually inappropriate touching by an unknown child or adult. Claims of ongoing sexually abusive relationships by a care giver were less prevalent amongst claimants, but when made they were often alleged by female claimants. Male claimants however made more claims against adults or other children in care alleging one off sexual assaults.

Of the 199 claims of sexual abuse made, 96 were made by claimants while placed in an Institution. This accounts for nearly 50% of all sexual abuse claims.

Physical abuse claims

Physical abuse was defined as: 'significant physical harm or injury experienced by a child as the result of severe and/or persistent actions or inactions, such as:

- injuries such as cuts, bruises, burns and fractures caused by a range of acts including beating or shaking
- inappropriate administration of alcohol or drugs
- attempted suffocation

- excessive discipline or punishment
- deliberate denial of a child's basic needs such as food, shelter or supervision to the extent that injury or impairment to development is indicated.¹¹

Of the 933 claims of abuse made, 365 were physical abuse claims. In relation to physical abuse claims the following can be observed:

- Many claimants who had claims of physical abuse accepted alleged excessive levels of physical punishment/discipline. All claims were considered in the context of the disciplinary standards of the era in which the alleged incidents occurred. Examples of excessive discipline included regular thrashings with canes, use of jug cords and belts to hit children, children being kicked, pushed or dragged by limbs/ clothing/ hair/ ears etc. by caregivers.
- A common claim of physical abuse was the deprivation of physical liberty. Many claimants recalled being locked in rooms overnight without access to bathroom facilities or ample food. There were also examples of children who were in care in Receiving/ Family Group Homes who were locked out of the home during the day and often in inclement weather conditions. Claimants also described being forced to eat foods that they were unable to digest due to the condition of the food or an aversion to the taste. In some extreme cases, claimants recalled being forced to eat food they had regurgitated.
- There were many claimants who described being forced to work excessively undertaking household chores, agricultural work or full time work as part of an institution's work program. For example, Mount Saint Canice was well known for its large scale laundry in which many female claimants recall spending hours working in very harsh conditions to ensure that the work was completed. The work required significant physical strength and the girls were not provided with support nor reimbursement for their work and were disciplined harshly for any lapses in effort.

¹¹Ombudsman Tasmania, 2004; Review of Claims of Abuse from Adults in State Care as Children, Report by the Tasmanian Ombudsman, Tasmania, page 9.

- Some claimants recalled suffering at times due to a lack of medical intervention being provided when they were very ill. One claimant recalls being so unwell she was concerned that she was dying and yet was locked in her bedroom for some days before a medical professional was called to attend. There were a few extreme cases where claimants recall being forced to have unnecessary medical procedures to suit the wishes of their care giver.
- Many claimants provided accounts of childhood bed wetting and harsh punishment they were subjected to as a result. Often claimants recalled that at a very young age they were made to change their sheets themselves, or alternatively being forced to sleep in their wet bedding night after night. A number of claimants also recall being physically hit as a punishment for their bed wetting, which included having their faces rubbed in the wet sheets. Some claimants recalled a fear of going to sleep due to the anxiety that they may wet the bed and be punished the following day. It was also identified by a few claimants that bed wetting was a trauma response to sexual abuse that was occurring.

Emotional abuse claims

Emotional abuse was defined as: 'the significant impairment of a child's social, emotional, cognitive or intellectual development and/or significant disturbances of a child's behaviour resulting from behaviours of family members or caregivers, such as persistent hostility, rejection or scapegoating.'¹²

Of the 933 claims of abuse made, 368 related to emotional abuse. In relation to emotional abuse claims the following can be observed:

- A majority of claims of emotional abuse were as a result of the emotional impact of another form of abuse upon the claimant. Of the 367 claims of emotional abuse, 274 claims were made in combination with physical or sexual abuse claims.
- Many claimants identified emotional abuse in the degradation of their sense of identity. Many claimants referred to being made to feel that their natural families were bad and that they were therefore the product of something inherently 'bad' or 'evil' and deserved to be treated as such. A significant number of claimants recalled being told that they were 'worthless' by carers or staff.
- A number of claimants also recalled that they were prevented from engaging in activities that would have contributed to their sense of identity and future social opportunities. For example some claimants were prevented from engaging in schooling or extra-curricular activities, social activities with friends or extended family members, employment opportunities or recreational activities such as watching television.
- Many claimants recall being ridiculed and alienated by their care givers for personal issues. For example being ridiculed for wetting the bed or having additional medical needs such as wearing of glasses.

¹²Ombudsman Tasmania, 2004; Review of Claims of Abuse from Adults in State Care as Children, Report by the Tasmanian Ombudsman, Tasmania, page 10.

6. Overview of the Impacts of Abuse

An important element of the assessment process has been the opportunity for claimants to discuss the impacts that the abuse has had and continues to have on their lives. During the round 4 program, all claimants were able to describe at least some impacts the abuse has had on their lives and many claimants had significant insight. The impacts described by claimants can be grouped into physical, psychological and social impacts as further outlined below:

Physical impacts

Although not as prevalent as other impacts identified by claimants, the severity of some physical impacts of abuse were exceptionally high. Claimants who have suffered from an ongoing physical impact often described one or more of the following:

- Physical scarring as a result of harsh physical punishments or beatings. This includes scarring from burns and or other weapons utilised by a perpetrator of abuse. It also includes not only skin scarring but also back/arm and leg conditions from being beaten repetitively on these areas of their bodies.
- Ongoing health conditions as a result of poor health treatment in childhood, including dental conditions, eye sight loss and speech impediments.
- Physical deformation as a result of unnecessary medical procedures or accidents as a result of negligence, for example the loss of fingers as a result of machinery use as a child.
- Medical conditions such as arthritis as a result of regular chilblains or undertaking excessive manual work as a child.

In addition to the specific physical impacts, claimants would also identify how these impacts had an effect on their life from childhood until the present day including both social and psychological impacts. Both were always taken into account when assessing claims.

Psychological impacts

Many claimants identified the ways in which the abuse they were subjected to has impacted upon their psychological health. Claimants who have suffered from an ongoing psychological impact often described one or more of the following:

- Mental health conditions which included low level depression, insomnia, self-esteem and self-efficacy issues, nightmares, eating disorders, lower level anxiety and social fears.
- Mental illness conditions of a severe nature which included but were not limited to diagnosed and medicated bi-polar, personality disorders, severe anxiety, high level acute depression, severe obsessive compulsive disorders and acute schizophrenia.
- Trauma triggered responses such as heightened anxiety when presented with situations that remind the claimant of perpetrators, places and situations where they were abused as a child.

Many claimants identified that they had spent periods of time throughout their lives seeking professional assistance for mental illness, with a number having spent time in residential settings receiving treatment.

Social impacts

Many claimants identified the ways in which the abuse they were subjected to has impacted upon their social lives. Claimants who have identified social impacts often described one or more of the following:

- Having been prevented from achieving in education and therefore not having the academic achievement required for employment or further studies.
- Having been prevented from participating in extra-curricular activities and therefore never having achieved in music, art, drama, sporting activities and other personal passions.
- Having a very low sense of self-esteem or self-worth.
- Having issues with trusting other people, noted especially in the inability to build and maintain friendships.
- Having issues with maintaining relationships with a significant other. Many people said that they have not been able to sustain marriage or de-facto relationships as a result of trust and interpersonal/ communication difficulties.
- Struggling with parenting and requiring support or intervention from Child Protection services.
- Having drug/ alcohol misuse dependency.
- Participating in criminal behaviours sometimes resulting in incarceration.
- Anger issues and issues with communicating emotions effectively with other people.
- An inability to articulate the abuse and therefore struggling to deal with the impacts of the abuse on their own.
- Having issues with sexual relationships and physical intimacy (often resultant from a history of sexual abuse).
- Having fractured family relationships, also often associated with a confused sense of identity and belonging.

Social impacts were the most common impacts articulated by claimants. The list of possible social impacts is very diverse and the above list is not exhaustive.

7. Overview of Claim Outcomes

The following are the most common outcomes requested by claimants from their participation in the Program:

- An apology.
- An acknowledgement that the abuse occurred.
- An ex gratia payment.
- Access to their personal Departmental files.
- Counselling.
- An assurance that today's system prevents the type of abuse that the claimant suffered.
- An opportunity to tell their story and be believed.

Statistical profile of claim outcomes

Claim outcome	# of claimants
Received ex gratia payment	390
Offered ex gratia payment but yet to be accepted	4*
Ineligible for the Program (see page 8)	96
Ineligible for ex gratia payment	32**
Lost contact with the Program	19
Total	541

*As at 31st December 2013.

**Within the program, there were 32 claimants who were eligible for assessment and were interviewed but were deemed to be ineligible for an ex gratia payment.

Claimant outcomes

All claimants who were assessed and deemed eligible for an ex gratia payment were provided with a letter from the Premier. This letter acknowledged the abuse that the claimant suffered, provided an apology on behalf of the Tasmanian Government and presented the claimant with an offer of ex gratia payment.

Ex gratia payments

As at the 31 December 2013 a total of \$5,503,470 in ex gratia payments had been made to claimants. An additional \$50,750 in ex gratia payments is still yet to be accepted by four claimants.

Overall, of the **541** claimants that applied to the program, **394** were assessed and deemed eligible for an ex gratia payment.

Counselling

All eligible claimants were advised that they were able to access three counselling sessions funded through the program. A small number of claimants took up this opportunity. However, many other claimants accessed counselling support through the Medicare Rebate Scheme. All claimants were also advised of this scheme and how to access it.

Legal support

All claimants who were informed of the outcome of their claim were offered the opportunity to seek legal advice. An amount of up to \$300 per claimant was made available for this purpose. Of all claimants who were offered this option, 11 took up the opportunity.

Claim review processes

Throughout the Program's life, there have been a number of claimants who, after receiving their offer of an ex gratia payment, expressed dissatisfaction with the amount of ex gratia payment offered to them. In certain circumstances, and in accordance with the programs review policy, it was the practice of the Independent Assessor to conduct a thorough review of a claim. The following occurred in relation to reviews:

- 43 claimants were provided with a copy of their assessment report.
- 17 reviews were undertaken.
- 9 claimants had their original offers varied following a review.

8. Conclusion

The purpose of the round 4 Program Report has been to provide an overview of the Program's processes and outcomes and to acknowledge, in general terms, the experiences of claimants who came forward under round 4.

The report also provides an important resolution to the redress program as a whole recognising that after almost 10 years and four rounds, this landmark redress program has now reached a conclusion.

In concluding this final report, it is essential to acknowledge again the strength of the survivors of abuse who have come forward and shared their personal stories and experiences. We wish them well in their ongoing journeys.

Finally, the Tasmanian Government recognises that although significant efforts have been made to promote the Program it is possible that some individuals have not yet come forward. In light of this, the Abuse in State Care Support Service has been established to assist people who experienced abuse in State Care when they were children but who have missed out on redress.

9. References

Find and Connect Tasmania

www.findandconnect.gov.au/tas/biogs/TE00011b.htm

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Ombudsman Tasmania, 2004; Review of Claims of Abuse from Adults in State Care as Children, Report by the Tasmanian Ombudsman, Tasmania, page 1.

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Tasmanian
Government

CONTACT

Adoptions and Permanency Services
Department of Health and Human Services

PO Box 538
Hobart TAS 7001

(03) 6233 2273

www.dhhs.tas.gov.au