



6 April 2020

Dear Sir/Madam,

Re: Inquiry into Forced Adoptions in Victoria

In my work both as a GP & as a counsellor, I have treated a number of people affected by forced adoption as well as having several friends who were thus affected. I have undertaken specialised training by VANISH in order to provide trauma-informed & adoption-informed care.

Until I took VANISH's training, I had little knowledge of the psychological effects of adoption practices on individuals other than that which I had acquired personally from friends' and patients' testimonies. My experience in speaking to medical colleagues and to therapists is that the understanding of the psychological effects of adoption is extremely poorly recognised. I have treated a number of people affected by forced adoption whose previous experience of therapists had added to rather than subtracted from their trauma.

The myths about adoption practices & effects prevalent in society in general seem to be just as prevalent among professionals providing psychological support. For example, the assumption that if adoptees are well treated in their adoptive home that they will have few, if any psychological sequelae from the process. I have seen several adoptees whose previous therapists have shut them down when they attempted to talk about their distress from their adoption story with the implication or overt comment that they were being ungrateful. The practice of forced adoption is in my experience, not understood by the majority of my colleagues & they adhere to the myth of relinquishing parents being unfit so the adoptee has had a 'lucky escape' by being adopted.

As a counsellor, I have studied & take into account in my work both attachment theory and a deepening understanding of trauma-informed practice. The severity of attachment wounding and experience of trauma to the baby's nervous system when a baby is taken from its birth mother cannot in my opinion be overestimated. The majority of doctors and in my experience, a large number of professionals working with psychological therapies are inadequately trauma-informed & are unaware or dismissive (the latter due to the aforementioned myths & several others) of the depth of attachment wounding.

I belong to an international email list of trauma therapists & even in that forum, the understanding of the wounding caused by adoption practices is variable. Society's belief that adoption is a blessing for both the child and for the adoptive parents in my opinion does untold harm to those experiencing adoption & particularly those for whom adoption was forced. While such unhelpful beliefs are held by professionals handling people who have experienced forced adoption, insult will continue to be added to injury in the therapeutic setting.

In my opinion, individuals who have been affected by past adoption practices require longterm, trauma-informed & adoption-informed therapy, preferably including somatic techniques that are more effective for treating trauma that was experienced before language developed in the individual (implicit as opposed to explicit memory). Contemporary neuroscience is elucidating the neurological basis for severe attachment wounding and therapeutic approaches can incorporate this cutting-edge knowledge.

I propose that training such as that provided by VANISH (not by generic providers, as they do not have specific adoption-informed experience) should be routinely included in training of those involved in psychological services, including the medical training. Raising awareness of the issue among these professions would go a long way to changing societal attitudes, in my opinion.

Yours Faithfully,

Dr Rosemary Saxton MB ChB (Sheffield UK), FACRRM, Dip SOC, Dip Comm Serv.

