

Michele Hutchins – Submission to Inquiry into Responses to Historical Forced Adoptions in Victoria

1. Introduction

Thank you for receiving my submission to the Inquiry into Historical Forced Adoption Practices.

The purpose of my submission is to offer the perspective of an arts psychotherapist working with people affected by adoption in Victoria. I have been an arts therapist since 2009. In 2017 and 2018, with funding received through Forced Adoption Support Services, VANISH engaged me to run separate Creative Expressive programs for mothers and adult adoptees affected by historical adoption practices. It is my intention in this submission to describe some of the impacts of separation and adoption, and to illustrate the foundation and merits of arts therapy and arts psychotherapy for this type of trauma.

Other information relevant to this submission:

I facilitated the VANISH adoptee support group once a month for approximately three years from 2009 to 2012.

In 2008 I completed the Anglicare Foster Care training program and more significantly the Australian Childhood Foundation's Therapeutic Foster Care training. The program, quite ground-breaking at the time, drew heavily on Dr Bruce D. Perry's work in the area of developmental trauma, behaviour and neurobiology.

My interest in this area has continued with much personal research and also through studies at IKON Institute of Australia in Arts Psychotherapy in 2019 and currently a Master's in Therapeutic Arts Practice with MIECAT, with the intention of continuing to specialise my arts therapy practice in this area.

I am myself an adoptee, although not adopted in Victoria. I was born in New Zealand in 1968 during the height of closed adoption practices.

And finally, on a personal note, in addition to all of the many complex grief and loss experiences across the lifespan for an adoptee, I have also experienced the loss of a young child to cancer many years ago. Whilst it is by no means the same experience, I do feel that the depth of grief I experienced has increased my capacity to hold space for the mothers I have worked with in this area.

2. Consideration of the scope of 'forced adoption'

The first thing I would like to address in my submission is the definition of *forced adoption* practices.

In the context of the Creative Expressive program with Mothers that I ran in 2018, I had the great privilege of hearing their stories in considerable detail. It was overwhelmingly transparent that when they were young pregnant women, as a matter of course, they were

shamed, blamed, bullied, lied to, coerced and manipulated into the so-called *relinquishment* of their children. In reality they most certainly did not feel any sense of *choice* in what took place.

In their innocence and naivety, in an era where young women were most often given no sex education or information about procreation, they spoke of the great weight of shame heaped upon them. Rejected by their families and sent away from their communities, they were abandoned at their time of greatest vulnerability and need.

In their own words they spoke of the lifelong agony of reconciling with having been duped. They spoke of being praised by their trusted elders and community for sacrificing their child so that the child could have a better life, only to go on to spend the rest of their lives feeling judged and blamed for that so-called *choice*, by the selfsame society (and often the adult child, if they had found them).

Having myself experienced the overwhelming grief of losing a child, I cannot imagine what that must be like when a) you are expected to get on with your life and everyone around you is acting as though the birth of your child never happened and b) knowing that your child is still out there somewhere (and being told in no uncertain terms they are no longer your child and you will never see them again).

When your one slim solace in all of that is the belief that despite your lifelong pain, your child would go on to have a better life, then in turn you meet them and discover how damaging the experience was for them and/or how unable they are to create a healthy bond with you, it must be a harrowing reconciliation.

I'm sure from the many submissions you have received these are all words you have already read over and over, along with the many tragic stories of the complexities around reunion, if indeed reunions were possible.

From the perspective of someone working with mothers in a healing capacity, it was an extraordinary honour to build a trusting therapeutic relationship, to be a witness to their raw pain, anger and rage, as well as their invincible spirit, and to give them the space and opportunity to be fully heard and emotionally met. Their experiences are often harrowing and tragic and their grief and suffering is lifelong with enormous implications. Quite the opposite of what they were told; that by *relinquishing* their child they will be free to get on with their lives and forget about their "mistake".

There is a great sense of justice in an inquiry that allows them to share their testimonies, to finally have a voice, and to be heard.

As to the experience of the adoptee, they were in every instance forced to live with the lifelong, extremely complex and often debilitating consequences of separation and adoption, with very little, if any, follow up, support or education given to them or their adoptive parents.

For the remainder of my submission, I will focus on the experience of the adoptee and the benefits of arts therapy and psychotherapy for adoptees as this is my passion and area of expertise. This is in no way intended to diminish the immense grief and trauma experienced by mothers and in some cases fathers and the therapeutic potential of creative expression for their healing.

3. The need for education and support systems for adoptees (and the mental health sector)

In Appendix 1 I have attached some information from a presentation I gave on the importance of touch, as just one component of the developmental sequence of the infant brain. It is difficult to consider this information as an adoptee, knowing that I spent the first critical seven weeks of my life in an overcrowded 'baby home', at a time when they did not cradle and interact with the babies too much as it was felt this might compromise their bond with their eventual adoptive families. Having had two newborns myself, as any mother would tell you, the intensity and relentlessness of their care is like no other life experience. There is no distinction between night and day, and you are lucky if you can get a two-hour break in a twenty-four-hour period, for endless days, weeks and even months. I wonder how all of that translates into the hospital environment with the regular shift changes of the nursing staff. How long does that one baby have to wait to have the urgency of its needs attended to? And what effect does that have?

As adults, seeking support through the Adoptee Only Support Group run by VANISH, I noticed that very few participants seemed aware of the developmental trauma they had experienced. If they had any inkling, it was usually as a consequence of the self-sabotaging patterns that were playing out in their life and, in particular, in their most intimate relationships.

With little community understanding, recourse to educational materials, or practical help from the health and wellbeing sector (who are usually astonishingly ignorant to the implications of adoption) they are left floundering, often deeply distressed and feeling hopeless. Add to that all the complexities and unique challenges of their actual familial relationships and they very often experience profound emotional isolation and segregation – no one else experiences life as they do, and no one, not even they themselves, understand why they struggle so.

The Adoptee Only Support Group that VANISH provides is without doubt an essential service. For the facilitators, it is a very complex space to hold. Adoptees have very complicated and multi-faceted experiences to share and, no doubt in an effort to assimilate and make sense of these experiences, they can expend a lot of energy in describing and seeking to explain them.

As a facilitator, it is a delicate balance of meeting the profound emotional landscape within each person's story, giving each enough space, recognising where the individuals are on

the continuum of adoption awareness per se, validating them, acknowledging their strengths and gently creating opportunities for growth-oriented learning and development.

4. Arts Therapies / Arts Psychotherapy

My arts therapy training incorporates aspects of many psychological, philosophical and therapeutic models, (including Maslow, Stanislav Groff, Ken Wilber, Roberto Assagioli, Rogerian, Jungian, R.D. Laing, Gestalt Therapy, Emotion-Based Therapy, Existential-Humanistic Therapy, Psychodrama and Client-Centred Therapy), but primarily it is somatic work, and it is deeply rooted in a phenomenological approach.

The Creative Expression Program I delivered is also informed by my personal experience of healing using arts therapies, more than twenty years of daily meditation and mindfulness practices, and practical studies into the ancient Eastern and Western Wisdom traditions.

As I proceed through my studies, I inevitably find myself integrating the research and learnings through the lens of the adoptee. Where possible, I take the opportunity to raise awareness of the impacts of separation and adoption with other professionals who are, or who will be, working in the mental health sector. To this end, and to assist in informing the inquiry, I have also included (Appendix 2) the slides from a short presentation given on the benefits of using drama therapy to work with adult adoptees.

5. Core Concepts of Creative Expressive work

Arts Therapy and Creative Expressive techniques are well suited to the adoptee experience as they are designed :

- To provide healing by creating pathways into the worlds of individuals and groups which allow them to map & dialogue with aspects of themselves and their worlds using creative means
- To facilitate self-actualisation which moves people toward a higher level of functioning, in which their resources and potentials are recognized & integrated; to create growth, personal power and meaning
- To set up conditions that facilitate the bridging of worlds so that healing occurs through the transcendence of alienation... self-alienation and social alienation
- Last, but most important, is that arts therapies can be construed as core-work, wherein the principles which vitalise us and illuminate the world as a vibrant field for our living fully are discovered, engaged and expressed

In the truest possible sense, arts therapy is an ideal medium to focus on accessing the authentic and true self of individuals. Arts therapy techniques enable us to tap into abilities and potentials in creative ways limited only by imagination.

These techniques circumvent the cognitive aspect of mind, which our society so heavily relies upon, offering unique opportunities for felt-sense experiential insight and the integration of new understandings.

In its very principles it is not about adaptation, (adapting the individual to the common way), but about acknowledging the individual's reality. It is about recognizing that 'social norms' are merely a construct of mind, not reality per se.

6. Creative Expressive Work with Adoptees

The program I created has a multi-modal approach, using many creative and expressive techniques, including movement, music, two-dimensional visual arts, sculpture and three-dimensional visual arts, meditative and visualization exercises, and group work.

Developed for adult adoptees, it consists of three-hour sessions once per week, over six weeks. The groups were usually of five or six people, which proved to be an ideal number. Preparation, setup and the clearing away process (which includes the need for sensitive disengagement with the participants) for each session is very labour intensive.

The ultimate aim of this program is to strengthen participant's recourse to an authentic sense of self and self-worth, that is independent of, whilst intimately connected with, the relationships they have to 'other'. Additionally, the program offers a unique opportunity to 'normalise' the lived experience. In the intersubjective matrix of our process work, participants themselves offer substantial insight to one another and a process of education, transformation and hope is ignited.

The strength of this program is that it is experiential. It offers adoptees much needed opportunities to experience a deep connection with their authentic self, whilst at the same time experiencing being truly 'seen' or witnessed, honoured and celebrated by others, thereby strengthening their capacity for positive and genuine intimacy.

It is well documented that the adoptee's development and sense of self can be negatively impacted by the experience of abandonment during significant developmental milestones. Due to this early life experience, the healthy development of a sense of self in relation to others can be compromised. Fear of abandonment predisposes the adoptee to prioritise the needs of the 'other', rather than to develop a clearly defined sense of their own needs, self-worth and boundaries.

The various forms that 'other' can take in an adoptee's life is an ongoing and extremely complex challenge for them. Family is a uniquely multifaceted web of relationships that tends to continuously antagonise the adoptee's insecurities and primal need for acceptance. The unfolding of an authentic sense of self becomes fraught, as a paradoxical dichotomy is enacted between the adoptee's needs and the adoptee's perception of the needs of the many 'others' they are related to.

The magnitude of emotional turmoil that is triggered as an adoptee contemplates a search for biological family cannot be overstated. This decision is often intimately connected with their profound sense of the loss of an authentic self. It takes phenomenal courage to confront the (often romanticised) *fantasy* biological family one has created, and to open oneself up again to the primal pain of yet another rejection. However that journey may play out, whether the biological family are found and engaged or not, there is no escaping the sense of grief and loss that can become the overwhelming and lifelong landscape that an adoptee traverses.

The program ends on a very beautiful session which is notable for the joy it brings as well as the depth, having traversed such delicate terrain. The potential to expand the program is immense. For example, it would be extremely beneficial to include in the program an opportunity to explore 'name' and what it means to us. As you have no doubt discovered, 'name' is a loaded concept for adoptees and having agency in one's very identity is at the core of this. Behind our original name is very often a cascade of loss and with our new name we were endowed with the role we were expected to play for others.

An opportunity to further explore parts of ourselves that are lost in the world would also be enormously beneficial. A safe space and permission for the adoptee to use creative imagination to explore the life that could have been versus the life that actually is.

Another view of aspects of the self lost in the world is the consideration of ways in which we are not true to ourselves due to the expectations of others or our concern about how others will view us.

Using techniques such as visualisation can put the participant in touch with their wise guide, guardian angel, or higher self. With a focus on honouring the courage and strength that they have called on throughout their life and a view to developing confidence in their own healing capacity and increasing self-worth.

7. Conclusion

On a personal note, adoption has been the genesis of so much struggle in my life and relationships. It has been a life's work to understand the impacts of the experience and to be able to manage them such that I can live a healthy and happy life. For many years therapy was unaffordable and to be honest, I did not appreciate how valuable it could be – in part because there is such a lack of education in this area and lack of knowledge, training and understanding among therapists.

In time and at great personal expense, I managed to find the help I needed. I have a healthy marriage (often considered the holy grail for an adoptee) and a beautiful young daughter whose childhood is free from trauma. After half a century, I have at last reached a stage (and age) in life where I can say I am flourishing.

In closing I will say that the dramatic negative impacts of separation and adoption were well understood by professionals as far back as the 1940s (see Florence Clothier, "The Psychology of the Adopted Child," 1943) but have been consistently ignored, like an inconvenient truth. I find it extremely and actively negligent that even though these complex and disturbing consequences for the adoptee have been increasingly brought to light, very little has been done to assist them and their families, or to educate the general community, or to raise the awareness within the health and well-being sector. So who do they turn to for validation and support in their despair? Clearly, this needs redress. Leaving these innocent victims of circumstance, who at the most vulnerable point in their lives were *forced* into this government sanctioned situation, to largely deal with the consequences on their own, is in my view unjustifiable.

Many thanks again for receiving my submission and best wishes with this very worthy inquiry.