

# **REFLECTIONS OF THREE FOUNDING NCF MEMBERS**

*Based on hearings from  
February 2015 – August 2016*

**Dr Elizabeth Calder  
Ms Stella Everingham  
Professor Kay Hampton**

**October, 2016**

## 1 INTRODUCTION

This report has been written by three of the original members of the National Confidential Forum (hereafter referred to as NCF or the Forum) and draws on 84 Hearings held between February 2015 and August 2016.

The report also provides a background to NCF, giving some insight into key developments prior to its establishment. This is then followed by the three members' collective reflections on what was heard. It is recognised that these reflections are informed by our individual professional backgrounds- social worker; psychiatrist and human rights specialist – as well as by our work together in these hearings.

This report does not provide a detailed analysis of what we recorded. This report is instead our limited narrative pertaining to the 84 hearings. It was not possible within our timescale to cover everything that we heard or conduct a theoretical analysis of the hearings during that period.

This report is intended to give an insight into some of the key issues that stood out for us. What follows describes a collection of specific issues raised by participants and explains how we perceived them.

A section that explains how the Forum developed the model used between February 2015 and August 2016 follows our reflections.

## 2 BACKGROUND TO NCF

The campaign for acknowledgement and reparation for victims of historic child abuse has been a long one in Scotland. Several steps have been taken to address historic issues relating to children in residential care. In 2004, the then First Minister, Jack McConnell, called the abuse of children in care "*Scotland's shame*" and issued an apology on behalf of the people of Scotland for past child abuse in care homes.

The Scottish Government created a *National Strategy for Survivors of Childhood Sexual Abuse*. In 2009 the Scottish Human Rights Commission (SHRC) was commissioned by the Scottish Government to develop a human rights framework for the design and implementation of an *Acknowledgement and Accountability Forum*.

In late 2009 the Scottish Government announced that there would be a pilot for a forum which would listen to and validate survivors' experiences, create a historical record, signpost to services available and test out a confidential committee model. The *Time To Be Heard Forum* was launched as a pilot and reported on its work in 2011. Building on the success of the pilot, the Government announced the establishment of NCF, which was legislated for in the Victims and Witnesses (Scotland) Act 2014.

### **3 THE NCF**

Given that the campaign for a comprehensive response to historic child abuse had already spanned more than a decade, the Forum faced a significant challenge in persuading potential participants that it would be completely independent and true to their expectations. A considerable time was spent reflecting on the delivery of a model for operation which would be sensitive yet deliver social justice for those who had been in care.

The members were agreed that NCF should exist for the care-experienced, be shaped by their expectations and have positive outcomes from them. They would tell the Forum what sort of justice they sought and what they would like it to do with the information received during their participation.

It was understood that each experience would be unique and individual, but that there may be some commonalities of experiences, which might provide indicators for redress and avenues for learning. This would serve as an opportunity for the care experienced, as civic citizens to be involved in shaping future care services.

The NCF, as it has functioned in the period reported here, was tailored to reflect the values, principles and standards that were set as requisites by the care experienced, in the human rights framework published by SHRC in 2010 and the subsequent *Action Plan for Justice for Victims of Historic Abuse of Children* published by SHRC and the Centre for Excellence for looked after children in Scotland (CELCIS) following the InterAction process in 2012/13.

The human rights framework was underpinned by extensive research, which not only explored different models used elsewhere (Canada, Ireland, New Zealand and Australia), but outlined essential elements necessary for the creation of the Forum. The founding members aimed to shape the structure and operations of the forum to closely meet these requirements, while operating within the legislative framework which had been established.

### **4 CREATING THE NCF MODEL**

The Forum began by conducting a scoping exercise. The team reviewed a vast amount of available literature pertaining to legal, social care and human rights aspects, so that it had a robust understanding of the context within which the Forum was to be created. The team also spent considerable time ensuring that the legislation that created the Forum was accurately reflected in the work of the Forum.

Advice was sought from Senior Counsel on interpretation of the disclosure and confidentiality requirements and the handling of sensitive information before, during and after hearings. The team also consulted with members of the Pilot (*Time To Be Heard*) and a number of individuals with experience of being in care in Scotland.

The team met care providers and took advice on making the Forum as accessible as possible. We were aware from the beginning that the model adopted would not be suitable to all those who have been in care, but undertook to ensure that every effort would be made to reach and share information about the Forum to as many people as possible.

A key function of the NCF was to create a safe space for people who were care-experienced to share their experiences in a dignified and safe manner. This was emphasised throughout our consultation, and the research conducted by SIRCC<sup>1</sup> noted the following as being important aspects of the model as expressed by the care experienced

- For the Forum to allow each individual survivor to determine how they contribute to it; (*person-centred*)
- For the Forum to be a body of reconciliation, mediation, healing, understanding that would allow survivors, agencies, the religious orders and individuals to move on; (*being heard*)
- For the Forum to ensure that other groups and individuals can hear and understand what is going on for survivors, including the police, medical professionals and the institutions; (*Institutional Understanding of what happened to them and the effects*)
- For the Forum to provide a space where survivors can tell/report their experiences (*Safe environment*)
- For the Forum to provide 'justice' for those who are unable to get this through the courts. (*Public acknowledgement*)
- For the Forum to provide support prior to hearings, during hearings and post hearings (*Health in Mind*)

It is therefore by design that the NCF was modelled as *person-centred* with an aim to provide a *safe space for being heard*, with *support before, during and after hearings*. It was intended that an appropriate report would be written (*public acknowledgement - a form of social justice*) at the end of the process to highlight what happened to children in care in the past. For more information on how this model was used in practice, during hearings, see *Appendix: Hearings in Practice*.

## 5 REFLECTIONS

We found each hearing to be unique, and there was no such thing as a 'typical' or 'average' hearing. Participants responded to the opportunity in their own way, shaped by the experiences they came to talk about. Participants demonstrated an enormous capacity and drive to reflect on their childhood and on the impact this has had on their adulthood.

---

<sup>1</sup> Hawthorn M and Kendrick A, 2012, National Confidential Forum for Adult Survivors of Childhood Abuse, Scoping project on Childcare in Scotland between 1930-2005, SIRCC

Although some participants shared experiences that took place before the enshrining of the European Convention into domestic law, and at a time when the commitment of the Government and public services to international human rights standards was less well established, it is nevertheless imperative that Scotland acknowledges these experiences within this framework. Many experiences shared with the Forum were nothing less than inhuman and degrading, in whatever historical context.

Hearing participants share their experiences was a privilege. We were moved by the generosity of spirit of participants who almost without exception voiced their wish that no other child should suffer what they had.

In developing the Survivor Strategy the Government paid particular attention to human rights. Our reflections have been framed within a human rights framework. Article 8 stipulates that:

*“Everyone has the right to respect for his private and family life, his home and his correspondence...”*

Liberty, the Human Rights organisation, defines Article 8 as a broad ranging right which includes the following:

*“...respect for private and confidential information, particularly the storing and sharing of such information...”*<sup>2</sup>

In many cases, experiences shared with the Forum reflected what appeared to be serious breaches of Article 8.

#### **5.1 Access to Records** (“respect for private and confidential information, particularly storing and sharing of such information”)

Many told us about their struggle to locate records about their time in care. While some did not know where to start looking for their records, others discovered that their records were destroyed or incomplete. Participants felt that in the absence of records, they were unable to understand their childhood and family life. Many spoke of a sense of lost childhood and of a sense of not belonging.

*“...My brother and I think we should have photographs...house parents didn't keep records, I have no information about what life was like in there...”*

There was also a strong sense of a lack of identity. Comments in this regard included, for example:

---

<sup>2</sup> <https://www.liberty-human-rights.org.uk/human-rights/what-are-human-rights/human-rights-act/article-8-right-private-and-family-life>

*"...so hard to make sense of your childhood and who you belong to..."*

*"...Just like a nomad, constantly trying to fit in all the time...never felt like I belonged, that's horrible..."*

*"...Still feel I do not belong anywhere..."*

*"...A human instinct of wanting to belong somewhere-whether a school or a football club a need to belong..."*

For some who were placed in institutions outside Scotland, or within a religious or cultural setting different from their own family of origin, this was experienced as profoundly distressing and abusive of their sense of self.

*"...my country stolen from me...matters even more now I have my own son...love to walk in Scotland, ...one special place, I know the history and I feel such a connection but I'm not connected...just needed to be on my own, just looking. Crying, I just thought 'all gone' ..."*

Those who managed to locate records, expressed a range of emotions: some were confused and others angry at the way in which they were portrayed. Some felt that they were labelled in a negative and insensitive manner:

*"...hated the way they described me in the files..."*

Another...

*"...I was described as 'sullen and unsmiling'...I didn't have much to smile about..."*

Participants expressed the view that they were misrepresented as they could not recognise themselves in the descriptive note written by Social Workers (hereafter referred to as SW) and Care Staff:

*"...I was not even seen as a child, actually no even as a human. She looked at me as a big problem with no human feelings or thoughts...I was just bad..."*

Others described the deep hurt of accessing records, desperate to find something of the person who was their mother, their father, and what circumstances had led to their separation - only to find these longed for figures dismissed in pejorative language.

Even those who had some recollection and did not have an idealised image of their mother or father, described hurt at the use of judgemental language in their records, and a feeling that they were themselves somehow held to be blighted by the connection. Many spoke of the stigma they had felt as a child in care.

We found that the ways in which various professionals frame ordinary childhood behaviours and feelings once a child is in the care system can taint assumptions made about vulnerable young people, sometimes with terrible consequences and have a lifelong effect on adults who have been in care.

The forum heard of young girls who were repeatedly raped being labelled as promiscuous. Some described running away to escape abuse but in doing so unwittingly exposed themselves to even greater danger.

They spoke of a process of being "*caught*" by police and returned, and of being left in no doubt that they were seen as somehow responsible for these appalling sexual assaults. Many described being punished after "*absconding*"; few spoke of any empathic enquiry as to what was driving them to run away from what was meant to be a place of safety and care.

Both men and women described the effect of being subjected to sexual attacks by adults responsible for their care at an early age. Often starved of love and affection, and too young to have any understanding of their own or others sexuality, they were readily exploited. Those who left care precipitously, after a placement breakdown close to leaving age, seemed particularly liable to fall prey to persons waiting to exploit their confusion and vulnerability. We heard many accounts of how people have continued to struggle with intimate adult relationships.

We heard from men who described themselves as frightened young men in hostile environments (secure units or homeless at 16 years) protecting themselves in ways that were described as aggressive. The impact of the language whether in notes, the daily records or minutes of case conferences, not only crept into everyday usage, but also became a defining feature of the cared for children in adult life.

*"... You can't blame the care system for everything but they need to learn. Let children have their say, believe them when they say they are miserable...don't have favourites...I did bend rules, to get attention, but I never got any. No one protected me, I was vulnerable and I got into risky situations. (Describes an incident with a stranger in which she believes she could have died). A lot of people in care didn't survive. I'd have been just another child with a sad story..."*

Grown men talked of how they hated the violence they saw in themselves or how bitterly they spoke of having become so like the adults who ruined their childhoods, and now their adult lives too. They did not speak this way to excuse themselves, nor in any way to aggrandise their actions. Instead they spoke of it as a profound loss, having wanted to be a better person and to having ended up hating what they saw in their own actions.

In the absence of records, or with records that contained an account that did not tally with their own interpretation of early life, many participants grappled with understanding why they were placed in care, or in a particular setting. For example, some participants spoke of truanting from school or running away from a

dysfunctional family home. They noted that this was given as a reason for being placed in care. They felt that had their circumstances been further explored by social workers, the reason for running away might have been better understood and more appropriately addressed.

For example, some participants endured serious bullying because they had learning difficulties, and this was viewed as *"unmanageable behaviour"* and resulted in placement in a secure unit. In many cases, they were even more vulnerable and liable to be targeted in this kind of environment. For some, a failure to identify the nature of *"challenging behaviours"* led to an escalation in their behaviour and a lifetime of institutionalisation in the form of secure units and eventually prisons:

*"... being institutionalised from day one, it still brings things back...that's why it's affected me...because I have been institutionalised all my life. It's made me be back in jail all my life committing the same offence...(inside) there are nae worries and nae problems. Outside you've got a lot of problems, you got a life out there you don't know much people, but you got a family, it's not enough...in here (prison) you know a lot of people, no worries, a good job..."*

While many participants expressed a strong desire to access their records, they believed that this was at the gift of institutions. It seems many people do not realise their legal entitlement to access personal information; for example date and place of birth and information about biological family. Participants said that social workers and providers have not been sufficiently pro-active in considering how to discharge their responsibilities to those who were in their care as children in the past.

## **5.2 Family and Relationships**

*"Article 8 also provides the right to respect for one's established family life. This includes close family ties, although there is no pre-determined model of a family or family life. It includes any stable relationship, be it married, engaged, or de facto; between parents and children; siblings; grandparents and grandchildren etc. This right is often engaged, for example, when measures are taken by the State to separate family members (by removing children into care, or deporting one member of a family group)."*<sup>3</sup>

Participants spoke at length about family and relationships, the pain of being separated from siblings, of not knowing their biological parents. They had limited contact with family members while in care. They did not realise that their rights in this regard were breached.

The description of relationships and their central importance to all aspects of life came across strongly. Over the six decades of care spanned by those to whom we

---

<sup>3</sup> <https://www.liberty-human-rights.org.uk/human-rights/what-are-human-rights/human-rights-act/article-8-right-private-and-family-life>

have spoken, this has shown through as the most significant. Many participants expressed strong feelings about the need to know one's own parents, brothers and sisters. There were various and broad ranging experiences around this.

Participants spoke of systematic practices of hiding the existence of siblings or purposefully separating and disrupting these bonds. This was mirrored by keeping children away from parents, denying contact and information, and in some cases failing to pass on messages. This created anguish for some in adult life of denied opportunities to forge relationships:

*"...it seemed that once you were out of the care of your parents, your parents did not matter, they didn't exist, they did not have a right to have any in-put into your life at all. I think it's wrong..."*

A palpable grief came across in many of these accounts. One person was placed overseas and only in his middle age found records of his birth mother and father, brothers and sisters. He said:

*"...there's a whole life there..."* (I didn't know of)

We heard some deeply moving accounts of the lasting damage done to sibling relationships. Some, on finding each other in later life had found it was impossible to re-forge the connection past guilt, envy, and un-shared pain. We heard about how these damaged relationships had deprived a new generation of children of contact with aunts, uncles and cousins, and of any shared family heritage.

One woman told us of how she now has children, a good marriage, a happy home, but feels excluded from some conversations

*"...Mum, what colour hair did you have when you were wee?..."* (in a conversation about family resemblance)

We heard some heart-breaking accounts of both fleeting and treasured contacts between children within an institution who only found out afterwards, sometimes years afterwards, that they were siblings- and who never found each other again.

Some spoke of feeling as a child (in an abusive or otherwise unhappy placement) that they were utterly alone in life, only to find out later they had brothers, sisters, sometimes within the very same institution. One man described reading in his records a passing reference to an older sibling being moved

*"... it was as if it didn't matter..."*

Others made clear the care required in defining "*family*" for a child raised within an institution. One person spoke of the boys with whom he spent his early childhood (who was part of the same group of child migrants):

*"...if a child gets close to someone try to keep that friendship going. I lost all those boys and they were my brothers..."*

He and others spoke of the difficulty in trying to trace people with whom as a child they had the most, perhaps the only cherished relationship. Yet because they were not actual family or were adopted separately or across different jurisdictions, it was not possible to trace them. All of those people wanted to see legislation introduced to give greater recognition to their particular right to family life.

Alongside this we also heard of children being forced to be in contact and being made to go home to abusive and incapable parents, often with an absence of any discussion with the children.

*"...I was glad to be back with them (brothers) but not to be back with my mum, a difficult woman, lots of attitude problems...screaming and swearing at kids was the norm..."*

This re-enforced their complete powerlessness in the face of decisions taken by those who did not appear to care about them.

Some participants have described childhoods completely bereft of any remotely affectionate figures. In referring to a complete lack of affection, one participant asked:

*"...How can a child grow without basics?..."*

One person told us about the need for more than superficial 'good care':

*"...truck loads of toys.... but kids need to know they matter and that they are loved..."*

Another had this to say about the lack of affection:

*"...Physically we were not ill-treated but punishments were always restrictive in an already restrictive environment. There was no counselling, no careers advice, separated from parents and not expected to complain, we did not like to bother them. We developed sturdy independence, it is true, but we missed out on a great deal of love and kindness in the process of growing up..."*

It made us reflect on how challenging it must be to find a way to relate to others in loving and compassionate ways when there is no picture of what that looks like. So many lives were distorted and harmed by the careless disregard, lack of compassion or brutality of adults that the participants should have been able to trust. One participant spoke of how difficult it was to even contemplate to go and live with a foster family:

*"...the nicer they were, the harder I found it...and I just felt that I was the sad thing living in a normal family, was an alien family...did not know how to function in it..."*

The importance of caring relationships in childhood was strongly supported by some participants who had positive experiences. Participants spoke of house-parents or residential workers who showed them love, warmth, care and affection, and they believed that this helped them turn their lives around.

One described a precious time, being cared for by a gentle and loving house-parent, visited many years later as an adult and, although he subsequently had unhappy experiences, said:

*"... a beautiful place.... I walk in confidence there..."*

Some participants mentioned inspirational figures who showed them that they mattered by nurturing, providing treats, fun and showing a desire for them to succeed.

*" ...that is the sole purpose of me being here, I hear about children being abused, as if that's all that happens...people need to know, it's not all like that. I believe there is more good in the world than bad, but we only hear about the bad...there are people in social work doing a great job working really hard..."*

One participant told us of a social worker remarking on how " lucky " he has been. He thinks it is unacceptable for social workers and people generally to have such low expectations of good outcomes for people who spent childhood in care. They should not be prepared to accept a good outcome as being down to random chance, rather than really looking at what makes a difference.

We heard little that indicated the responsibility of the state as a parent (currently known as corporate parenting) was fulfilled as children came to the point of leaving care. We often heard that leaving care was not planned, was rushed and the bewilderment that was experienced about how to handle the next stage of participants lives. This was the case even in circumstances where care had generally been a positive experience. This rose for them questions about why there was no sense of responsibility for them when they were adults from those who made all the choices about them as children.

One participant described as starting life as an adult: at the age of 16 when leaving care:

*" ...like an alien, no parents, no family, no history and no preparation for life. Not support. I did not have choices or anyone I could turn to...I couldn't call up parents, family, friends and say could you just help me up..."*

Their return to local authorities or care providers was met with very mixed responses, whether this was for seeking their records or support. They felt they were often greeted with suspicion and a lack of care. Some participants had fallen very

quickly through any net and ended up destitute and homeless; some were involved in activities of which they felt ashamed.

Some of the most poignant accounts we heard related to people who described their own experiences as parents. Without exception, these were people who were absolutely determined that their child would have a different life, a better childhood. But we heard how hard it was to manage that when you have

*"...no understanding of how to be in a family..."*

Some described an almost unbearable anxiety throughout their children's growing up, lest they slip up in some way, and their child end up in care. One spoke of finding herself in floods of tears which she could not understand on her daughter's 16th birthday - till she realised she felt such relief that she had got her there safe, beyond the reach of Children's Services.

Others, particularly men, spoke of just not knowing how:

*"... I've lost touch with my kids and I won't go looking for them because I destroyed their lives same as they (abusers) destroyed mine. I was terrified of my kids, to lift them, anything, I had no idea how to be with them..."*

### **5.3 Neglect, Cruelty and Exploitation** (*"...the right not to be physically interfered with..."*)

We did hear about abuse in every possible manifestation. This ranged from some very clearly descriptions of regimes where children were abused physically and emotionally.

A number of participants spoke of neglect, extreme forms of cruelty, exploitation, in the form of grooming, severe punishment, (lashings, forced to eat food and re-eat vomited food) and degrading treatment (carrying soiled bed-linen for others to see). Such treatment was dished out as far as the participant was concerned for the sole purpose of causing maximum pain and to degrade them.

*"...If a child cried, we were not allowed to comfort them. We were not allowed to call each other by our first names. During my time at **X (a resident)** I was consistently made to feel unloved, alone, scared and hopeless as a human being, that it was normal for all children to be punished this way... I feel that **Y (an abuser)** stole my childhood and that if it was not for the love of other people who helped me,. I don't think I would be here today to write this ..."*

Incidents of serious prolonged neglect were noted, physical injury (corporal punishment and lashings with various improvised weapons) and emotional abuse. Emotional abuse often took the form of cruel taunts that the child was unwanted, unloved, had been abandoned by their mother because they were bad or unlovable.

One participant was told that

*"...I was nothing, would be nothing would end up an alcoholic just like my mother..."*

Some participants described particularly cruel and apparently calculated goading and taunting about their mother or other family. Some described staff encouraging other children to do the same, or to name-call. Visits were sometimes used as a means of inflicting emotional pain - a much-anticipated visit cancelled at the very last minute, being told parents had not visited because the child was so unloved.

In some instances, years later after accessing records, people found that visits had been restricted by the authorities, and both parent and child were told the hurtful untruth that it was because the other had said they no longer wanted the visits.

One person told us that such a lie had irretrievably damaged his relationship with his mother, to whom he had been particularly close, to the extent that, although he cared for her at the end of her life, he could never again tell her he loved her, and this has caused him such bitter regret since she died.

Other instances were described of apparently casual cruelty in terms of a lack of comfort or kindness when sick or having had some kind of hurt, through to the most calculated and planned cruelty - setting a small child up to hope for a special Christmas present, and then laughing when an empty box with a cruel joke inside, is opened in front of everyone.

The following comments reflect the nature of treatment some participants received while in care:

*"...My hair was pulled out, I was belted and slapped so hard, red marks would be left on my body..."*

*"... she was dangerous, she should never have been near children..."*

*"... I was always getting it from this...hit with anything, table leg...the pain never goes away...had to stand with pants over head, naked..."*

*"...one occasion she caught me buying a barley sugar and said 'you ain't having that you ain't having any treats as you are such a bad girl that nobody wants..."*

One participant recalled being utterly petrified:

*"...she set upon me savage beating, then grabbed the thing for lighting the water boiler, a like a flame thrower... she held my face close to it... I lived in daily terror of this (person)..."*

Some experiences were nothing less than torture:

*"...He had a golf club and he was screaming and I just looked up and he whacked me and did'nae miss and he caught me. He hit me again that hard that he snapped the metal head of the club and he was in a rage and he could'na stop..."*

*"...It was a systematic torture chamber...systematic abuse..."*

The force and brutality of this were startling, mirrored by the powerlessness and invisibility of children who appeared not to matter.

In their testimonies participants spoke regularly and clearly of their inability to talk about the abuse they had endured, as they were terrified of the consequences. The perpetrators were in positions of power. No one listened, no one believed them - they were unable to trust anyone.

Feelings of powerlessness were mentioned frequently as was a culture of collusion. Participants commented that sometimes staff not directly engaged in abuse were present or aware or saw evidence of attacks, but did nothing to protect the child or to stop the abuse. Many participants felt unable to complain for fear of victimisation. The following were experiences expressed in participants' own voices:

*"... the children didn't have a voice then and they didn't have rights then according to the people who worked there, it was their way or no way and they would tell you when to get up and when to go to bed and when you can have a snack and when you can have lunch...there was no element of choice..."*

*" ...I could tell no one because he had power...can't say nothing, if you say something, you will be in trouble, they will send you to bed..."*

Others spoke of the fear of far worse consequences. Some participants were abused within religious institutions, by figures of authority within their church. They spoke of the particularly pernicious effect of abuse directed within and employing, the tenets of their faith, and spoke of the consequences for their spiritual life, and for some an enduring and unshakeable feeling that they were somehow inherently bad and to be blamed.

*" ...though I look at my grandchild now, six like I was then, and wonder how could I have been to blame..."*

One participant gave a detailed description of how they were treated by the nuns:

*"...I grew up believing that my mum must have looked at me (at birth) and seen badness in me, that she saw the devil in me and did not want me...we were the ones that no one wanted, that's what the nuns told us, we were bastards. I thought my name was bastard. It's all I heard myself called those early years...they told me, if you don't stop blaspheming you will go to hell and I would think, how can that be when I am in hell already..."*

Those in care during the last three decades spoke less of actual severe beatings and more of the use of severe restraint for very small misbehaviour. These are best described in participants' own words:

*"...it disgusts me, the whole care system is a shambolic, lamentable farce... see when you are in care it doesn't make any difference who you complaint to...getting belted down on the bloody floor, getting carpet burns, sometimes three or four staff holding me down, that's overzealous to hold down one skinny wee guy..."*

*"...I want to explain the level of restraint that occurred there and other places I have been, that was because I could not cope when people grabbed me and held on to me...restraint was an almost daily event...never stopped until I apologised for whatever stupid thing I did, how can you when people induce maximum pain..."*

Participants spoke of being deliberately provoked by staff so that they could be "pinned down" or locked up in a darkened room with no bed, let out only for the toilet. Many participants described care staff as "sadists".

One participant told us about a prolonged period of seclusion and isolation:

*"...I thought I was going to go mad, in a way I think I did...I remember feeling utterly broken..."*

We heard how such harsh treatment led to some individuals using violence as adults and the havoc and misery this caused to their partners, children, family and bystanders. There was no self-justification in their recounting of this, but sadness in what they felt they had become.

Indeed, the effect of such dehumanising treatment was broad ranging. For some it was an inability to pursue education, for others difficulties in adult relationships or an inability to engage with authority and services.

*"...Been there, done it, wore the T shirt...begged borrowed and stole but never claimed social security..."*

The inability to trust those in authority set them up for an adult life spent in a cycle of destructive and often escalating engagement problems. While many participants spoke of being labelled of behaving in an aggressive or confrontational way with services, we did not experience this. On the contrary we found that participants were well able to regulate and manage their own emotions and responses when given the time, space and support to do so.

#### **5.4 Lifelong Impact of Abuse**

Participants wanted to explain how let down they felt by support services as adults. Many had experienced severe mental health difficulties, multiple physical

difficulties, relationship problems and inability to build homes, families and careers. When seeking support, they found barriers placed in their way by statutory services assessments and reassessments, and waiting lists.

For example, one participant described the difficulties he had accessing services, given his mental health problems: as follows:

*"...because they are hidden. They want you to go down the Jobcentre, sit in the waiting room with all those people. I can't do that...I go into spasms; my mind goes blank... the government don't understand - they should put more into mental health instead of making people feel that mental health problems mean you are useless. I am not useless..."*

In this regard, participants felt that they were not trusted to know what worked for them. A significant number of participants also talked about third sector agencies which supported them effectively and gave them opportunities to meet with others who had the same experiences. In more than one case a participant described having their life saved by having access to such services.

Participants also wanted us to understand how the abuse they suffered shaped their adult life.

*"...I did not realise how much they had taken from me, they have taken everything...even now with the life I have had, I cannot comprehend somebody doing that to a six year old child..."*

Participants expressed that the lifelong impact of constant physical, emotional and psychological abuse was due to both individuals and systems in place. Many spoke of the impact of abuse on their self-confidence, self-esteem, their ability to form relationships in adult life and their ability to manage their life.

A number of people described very powerfully how it was to embark on adulthood, without the dip in, dip out support available to their peers who grew up within a stable family home, with the cumulative disadvantages of friendships and education disrupted by sometimes frequent, unplanned and distant placement moves.

Others spoke of being perceived sometimes as "*damaged goods*" not because they had done any wrong, only because they were in care.

*"...What happened to me during my time there has affected not only my life, but the lives of my family and more importantly my children. I still feel guilty over the effect this has had on my children and their lives as they were growing up and believe that what happened was my fault..."*

*"...no matter what you call it, I was institutionalised...I could not mix with society properly that's why a lot of kids do drugs and alcohol..."*

*"... I was left a broken person..."*

*"...not a day goes by without it affecting me. I do not have a childhood, I do not have an adulthood..."*

Some participants still fear certain circumstances as it triggers frightful memories, for example being cold in snow; being in a dark locked room or even taking public transport.

*"...you live in fear all the time...to put it in a nutshell, it affected self-confidence, my inner strength..."*

A number of people described very clearly how their disadvantage continues today, in accessing services, and redress. Some who cannot sit in a busy or noisy waiting room have great difficulty regulating their emotional response when stressed or anxious, especially in a busy, public or official setting, who cannot undergo an intimate medical examination by a male doctor.

Others who are still both hampered and feel shamed by the difficulty they have with reading, because they were failed in their access to education. Some of the people who told us this have only survived by going to great lengths to conceal their difficulties.

Some participants mentioned that being terrorised, beaten and not listened to resulted in them becoming angry adults, uncaring and hard.

*"... maybe if that man hadn't abused me, I would be a different man, it changed me in the head..."*

*"...worth nothing then, worth nothing now..."*

Participants spoke of services not being interested in what had happened to them as children even though it shaped them as adults.

*"...I went from wanting to be...a person who wanted a caring home to a vicious, vicious person..."*

*"...violence was their answer, violence my answer.... they made me who I am..."*

Others talked of being stressed, being addicted and leading a life of criminality. Many described suicidal thoughts or attempts.

Participants also spoke about the impact of their experience in education. For some education had been a respite whilst in care, where they could meet other children and feel normal for a while. For a very few there were special relationships formed here that helped throughout their time in care.

For many, education was a wasted opportunity that left them ill prepared for life. There was no sense of aspiration for them or an understanding of their potential.

*"...they weren't interested in me, I was one of the unwanted ones..."* (Left school unable to read)

*"...I really regret not having an education. I wasn't encouraged..."*

*"...I lost so much education at that time...the home education side of it was a total waste of time ...mainly basket weaving and knitting...I know how to knit..."*

Some expressed a sense of relief after speaking to the Forum, as they were unable to share their experiences with others for fear of not being believed or being judged. One participant indicated that he had not spoken about his experiences for 40 years and felt that a sense of masculinity stopped some men from acknowledging the abuse they experienced.

## **5.5 The Right to Effective Remedy**

*"Everyone whose rights and freedoms as set forth in this Convention are violated shall have an effective remedy ..."*<sup>4</sup>

Regarding remedies, participants wanted fair hearings and fair trials including the removal of time bars for civil claims. In terms of social justice, participants mentioned public acknowledgement, effective redress and an apology law.

Others spoke of wanting communities to hear and acknowledge the legacy of the stories of children who were living in places that were in the heart of towns and villages. Some spoke bitterly of the way in which these places had been perceived and portrayed, as respectable, pillars of the community.

One spoke of returning to the site of his childhood abuse, and seeing a street named after a member of staff.

*"...and they have named a street after this man. I feel so angry I could rip the sign down..."*

Even where people had been compensated, some participants felt that money could not remedy the abuse they suffered. Similarly participants were at pains to impress upon us that not all those who were in care sought material compensation. Participants wanted different forms of justice: some wanted their experiences in care to be in the public domain:

*"...It's a silent world, no one knows what happened to you..."*

---

<sup>4</sup> *European Convention on Human Rights Article 13*

*“...what they did ...they got away with it...when death comes, I will be happy so I can get away from it all...we have been crying and crying out...government did nothing... don't want people to feel sorry for me ...What's happened has happened...it's about acknowledgement...”*

They wanted to raise public awareness of what children were subjected to in care. Others wanted an apology from government for not conducting regular scrutiny on care received. Some who sought for acknowledgement and accountability felt that they were insulted, misused and let down by the slowness of those in authority to respond. They felt there was a massive cover-up:

*“... Hope that someone will get help, I did not...”.*

Another participant said that he had been pursuing his case for 22 years but feels that he is getting nowhere:

*“...it eats away at me...”*

## **6 CONCLUDING COMMENTS**

One of the key aims in establishing the Forum was that the testimonies would form part of a national record and have its place in Scottish history.

In our experience of the 84 hearings the NCF has held to August 2016, much deeply significant testimony has been heard. People described experiences, for example, in relation to the profound and life limiting effects of:

- an absence of love and affection;
- feeling of no importance to any other human being;
- holes in their life backstory, family history expunged, siblings denied to them even in the knowledge that they exist;
- absence of aspiration and encouragement to achieve their full potential.

The Forum is also able to hear testimony about positive experiences and has done so powerfully. People have wanted the power of positive experiences in care to be heard and recognised, alongside the abuse and neglect in family or other care settings. Participants have recognised what learning may lie in that contrasting experience.

The three members who have been a part or the whole of each of the NCF's first 84 hearings are deeply convinced of the following:

- i) the power of the experience and potential for contributing to the wellbeing of the participant,
- ii) the act of acknowledgement that the Forum carries,

- iii) the act and gravity of establishing a panel of two people with varied skills and experiences appointed by Scottish Ministers to listen to their personal childhood experiences, in private but on behalf of the state.
- iv) the way in which the Forum has operated in which members ensure that what is spoken of rests entirely with the participant is one of the greatest strengths the Forum has in executing its unique remit.

## **APPENDIX: HEARINGS IN PRACTICE**

### **1 Principles Underpinning our Approach**

In 2014 the NCF team came together to establish a way of listening to and acknowledging the experiences of people who had been in institutional care as a child. We came from different professional backgrounds, and a range of experiences, but were all resolved from the start that the individual - each person who contacted us with a wish to participate - was to be at the centre of everything we did, with respect shaping the way we did things.

The way we worked was based on hours of thoughtful conversation, professional knowledge and expertise. We recognised the strength that came with our different professional backgrounds - the initial panel comprised expertise in law, social work, psychiatry, sociology and human rights, and the breadth of experience of those disciplines in a range of settings. No single theoretical understanding, professional model or language took precedence. Risk was carefully evaluated and balanced with each individual's right to make decisions about if and how they wanted to take part. We recognised that the ways in which we had each worked in previous professional settings needed to be suspended to forge a new and particular type of space and experience for those coming to the Forum. The expectations and outcomes of other work were not imposed onto this work. The most important criteria by which we defined our practice were what would work for each individual coming to participate in a Hearing.

### **2 Before Hearings**

This manner of working began with the very first point of contact through to the last. The support staff team and the Panel members had specific roles, but the engagement with each individual was a single engagement. We learned that to do this well, we had to ensure that the team as a whole stayed centred on the work of the Hearings.

We discussed the needs and concerns of each potential participant, took account of any requirements, and shared responsibility for keeping both the physical environment and the collective focus centred on providing a calm, safe, warm and respectful tone. We made a commitment to do everything possible to provide all the information each individual needed to make informed decisions about whether and how to take part.

Once someone came to us and they were eligible and wanted to participate, that was sufficient to make a start on arranging a Hearing. One of our support staff would identify themselves as the person who would work with them throughout, and did so with enthusiasm and encouragement. However we were conscious that the experience was not for everyone. (For example young care leavers having other space such as *Who Cares?* and the through-care and aftercare forum to engage with

in a more young person friendly way.) By exploring from the outset what individuals' expectations were we were able to work with people on whether this was the right step for them and whether it was the right time.

We considered carefully the many practical considerations and arrangements. We believe the physical environment the Forum created in the NCF suite has achieved a good balance of being a calm and serious place while not being intimidating or formal. The Forum created a personal space for before, breaks, and after, and encouraged each participant to view this as " their " space.

We were conscious that those who had experiences of institutional care would all have had very different experiences of authority and official processes, potentially leading to an expectation that you please the official by answering questions with what is wanted to be heard; a need for approval; a fear or expectation of criticism or rejection; or feeling a sense of antagonism generated by past experience. All these we anticipated might be very real difficulties, and we tried to convey at all times that we sought to engage with each participant with respect for a person of value and worth.

We recognised the potential for a sense of obligation, fear, anger and grief all relived in moments of sitting down in a formal setting. We tried to combat this by processes that were about the participant not the organisation, removing barriers and creating a sense of the participants' importance to us.

### **3 The Hearings**

Whilst undertaking the Hearings we became aware that by providing a space for individuals to speak in any way they wanted about their experiences, we had set up a very particular dynamic. It was not an interview, nor a consultation. As Hearing members our purpose was to provide the right experience for the participant, not resolve issues, challenge perceptions, seek the truth (whatever that means). It was to listen and not to judge. Hence we did not enter the Hearings with a set of questions or a schedule of information we were seeking, we aimed to provide something that made it possible for participants to tell us what was important to them and what they wanted us to hear.

In the Hearing, we were not "experts" we were jointly engaged in the Hearing, as one human being with another, working out together with the participant and perhaps their supporter, how this might work for them. We think it was understood that we were responsible for keeping them safe while they used this time as they wished, but beyond that we had no " agenda". We recognised from the start that it was an enormous thing to ask of, or propose to anyone, that they would come and speak of some of the most private and perhaps painful pieces of their life, with strangers with whom they had no previous or continuing relationship, who were offering no remedy of substance. We think that sense of trust was fundamental to the work we did.

Some participants were very clear about what they wanted to share with us and why. Others just that they wanted an opportunity to talk about something they had not opened up about before, or had only done so within a particular and specific context. Some people looked for some guidance and support in how to do this. We tried always to provide this in a way that was empowering. We might offer to ask a few questions, we might reflect back on something already shared, but we tried always to ensure we did so from within what that individual had introduced, or was sufficiently neutral as to not shape or change the direction of what the participant spoke about.

We think this is an aspect of the work of the Hearings that can be developed further, in terms of helping participants feel prepared and able to use the time best, as they wish. One participant said:

*"... I want everything out in the open...at least I know that everybody knows so at least at the end of the day, I can say well people know about it...I don't have to hide, I don't have to keep asking questions...you know...did I do something wrong...did I say something...I want a near normal life like everyone else..."*

In accepting for our own part that we were not there to fix things or resolve things, we found ourselves free to listen and engage in a much more free and complete way with participants. It was, despite the most unusual premise, a more natural way. We were not there as a social worker, psychologist, researcher, or doctor. We were there to listen, to convey that this was important and mattered, and also that on a human level, we cared.

We were conscious of the power of really being listened to, and that participants might share more than they might have anticipated, and might find it difficult to cope with this afterwards. We did not underestimate the strength and depth of emotion that might be experienced and expressed during the hearing; we were confident that we had a level of expertise, which would allow us to hold each person safely. We were deeply conscious of the responsibility what might be reawakened for people that might be difficult after they left.

One participant described making the decision to take part in the forum when looking back

*"... it was hard to decide because it was a very, long time ago and I was unsure if I would be believed or understood. It was difficult to decide to come because I did not know if it would make me feel bad and how long that would last, or if it would make me feel better..."*

We took great care that people did not unnecessarily re-experience painful episodes. We had no need for participants to tell us details that they did not want to. For those who did want to share details it was important that they felt free to do so, and safe, and respected, that we recognised both the impact and the honour of bearing

witness to these feelings. So we took care to neither inhibit or to seek graphic detail, or historical detail. One participant feeding back how the Hearing had been said:

*"...it was difficult and upsetting to remember how I was treated..."*

We did clarify with individuals that we understood what they were saying and we think this helped to validate the experience. It also helped to assure the individual that we were listening and hearing, with the same respect and gravitas that participants brought to the sharing of their testimony. We found this most humbling. We cannot know exactly what our participants thought of their Hearings. Responses given afterwards, informally, in letter or calls, and in the independent evaluation, indicated that we got it broadly right.

One participant when asked for a positive aspect of the Hearing said

*"...it helped to bring a closure for me. I will never forget my abuse in care, but being open and getting it off my chest to experienced listeners helped me to take one step nearer to being satisfied, that I have been taken seriously..."*

We consulted and considered carefully the duration and timing of hearings - the provision of a boundary of time, the two hours allocated-that being at the disposal of the participant and their control over when to stop. We have found that a break in the middle is helpful and necessary for most hearings. Generally participants were happy to take a break, although some chose not to. Initially, out of concern for keeping the important sense of control being with the participant, we were less inclined to advise a break. It became clear that it was hard for a participant to be able to use the two hours fully, without emotional or physical fatigue or distress without a break. We decided to be a little more directive in suggesting a break, and advised that we would do so, before starting. This has seemed to work well.

Occasionally someone will be clear that they are near finished and do not want to stop, and of course we respect that. We will always pause and take a break if we observe that someone is becoming tired or emotionally affected beyond what seems to be a level they can manage. We have found that so long as we have, throughout the time leading up to a hearing, and then in the hearing itself, encouraged participants to share their needs in this respect with us, we can work with them to keep things within their safe limits.

One participant fed back

*"... I felt uncomfortable about discussing matters on sexual abuse at the Hearing because I hardly knew the Panel..."*

For another:

*" ...off-loading...a burden...carried for a long time..."*

*“easy to speak to strangers and then walk away”*

Another, when asked what the Forum staff, could have done to, further assist them said

*“...no they were very helpful directly and through my supporter. She told everything and used easy words to explain things. All practical details were given, she was caring and careful. She noticed that my day had been long and tiring, checked my train and ordered a taxi due to the bad weather...”*

The Hearings were, as one would expect, characterised by often intense emotion. With two Members involved, it was possible at all times for one to be engaged directly with the person throughout, engaging directly with the range of emotions expressed often sadness, anger, frustration, betrayal, a feeling of complete abandonment - while the other, nominally taking notes, could listen as closely while also being ready to guide and offer pause in response to the intensity and direction of the Hearing.

A relationship of real trust between the Panel Members developed and was integral to feeling confident in enabling the participant to open up as fully as they wished, both in narrative and emotion- so silences were allowed to continue, shared - for as long as needed. A silence was often a way to ponder on long felt emotions and the uncovering of memories unspoken for many years. Crying could be met with warmth and empathy, tears a way of expressing so much without words, and not hushed or tidied away.

We found that people were well able to navigate their emotions with just this space and support. Some had voiced their own concerns about the level of anger and hostility they feel and had often been unable to contain in other settings; we found that while some people did voice profound rage and anger, it was never directed at Hearing Members. We have all reflected on how extraordinary this was, given our combined experience working in other settings.

For some participants their narratives had been often repeated, yet unheard, for others this was the first time some of what they said had been recounted. The overwhelming emotion in many hearings was grief, for all the life and personhood that had been and for some still is lost. Finishing the Hearings was always a delicate balance. Often a mid-way break had served to allow the participant to return to the Hearing room in a different state of mind and emotion-sometimes a sense of calm; sadness, reflective, and ready to draw the Hearing towards a close for themselves. It was not for us to praise or to approve, however to demonstrate gratitude for participants sharing and an affirmation of how important this was. For all of us there were many emotions present, and an acknowledgement of this was important.