

VANISH news bulletin

December 2013

The VANISH Committee of Management and Staff Team wish you all the very best for the festive season. We trust that you will find joy and peace at this time of year and take part in some fun and restful activities. We appreciate that this is a challenging time of year as questions of family become foremost in people's minds and hearts and we reflect on what is and what might have been. We sincerely hope that love and warmth will surround you at this time with dear friends close and comforting things around you.

Apologies

It has been a simply enormous year with the Federal Apology on 21st March by Prime Minister Julia Gillard being the highlight and a time of great acknowledgement, sympathy and appreciation for the sorrowful experiences of mothers, fathers, adopted people and their families.

On 25th October VANISH had a small commemoration of the State Apology and it was good to be together, to remember and to support each other as we journey forwards. We hope to also meet together next year on the anniversary of the Federal Apology.

Workforce Capacity Development Project

At VANISH we were pleased to receive state funding for two years to develop a workforce capacity development project and we are pleased that we now have:

- A new website which is able to offer far more information for professionals and for service users. Please have a browse and let us know what you think. In 2014 we will develop a VANISH Register of Adoption Counsellors and an interactive forum for counsellors.
- A two-day counselling service at VANISH focusses on people undergoing search and contact but also supporting others and providing referral to other counsellors and a secondary consultation service for counsellors across Victoria.
- A two-day a week resource to establish regional support groups. Please contact the office if you would like to speak with our Regional Support Coordinator. Work is well underway and we plan for groups to be forming in 2014 in Geelong, Traralgon and Ballarat.
- A Training Program for allied health practitioners, counsellors, psychologists and psychiatrists. This training has been offered in four Medicare Local regions and has been well attended and well received. In the New Year the training will be offered in four more Medicare Local areas. If you are a clinician with an interest in the experience of separation from a child and in adoption please contact VANISH for details of this free two-day training opportunity. VANISH is engaging Medicare Locals in this training roll-out in order to increase the number of clinicians with a knowledge of what happened to mothers and to adopted people.

Federal Counselling Program: ATAPS Access to Allied Psychological Services (see ATAPS information page 4)

VANISH staff will be happy to help you access this program run through Medicare Locals for the Federal Department of Health. If you require support please ring Diane and she will connect you with Jenny or Liz. You can of course access this program in your own area by asking your GP for a referral to the ATAPS Forced Adoption Funding – referrals are accepted from a broad range of affected people. We recommend this service to you. Funding ceases on 30th June 2014 so you may like to enquire now. The normal access to funding for mental health, through your GP will continue.

Federal funding remaining

The Australian Institute of Family Studies (AIFS) is currently undertaking a scoping study to prepare a report to advise the Federal Department of Social Services and the Federal Implementation Working Group on the best use of the remaining \$3.5 million set aside for service delivery. Please contact us urgently if you wish VANISH to input anything into this study on your behalf – information is on the AIFS website.

National Archives Project

This Federal Project has been seeking broad input across Australia and has a website and a Facebook page through which you can contact them. We believe a new website will be launched on the anniversary of the Federal Apology on 21st March 2014 and the Archives Project will be ready later.

Forgotten Australians Archive Project

This is currently on display at the Melbourne Museum and is a fine project to visit.

Salvation Army Apology

The Salvation Army Australia, Southern Territory, is intending to make a formal apology for their former policies and practices on adoption throughout Victoria, Tasmania, South Australia, Western Australia and the Northern Territory.

In order to ensure the Apology reflects the experience of past policies and practices in adoption, the Salvation Army would like to hear from mothers, fathers and adopted people who have been affected by former policies and practices which occurred in the above states and territories.

If you would like to help inform the content of the apology please contact Liz at VANISH 1800 826 474 or email her at liz@vanish.org.au

Social Events

Two of our intercountry adoptee members are holding the following event to which all adopted persons are all welcome:

END OF YEAR ADOPTEE SOCIAL EVENT

**All adoptees are invited to a casual end-of-year catch up
Sunday 15th December from 2 - 5pm
Village Melbourne, 557 St Kilda Rd (corner of Moubay St), Melbourne
Partners and friends welcome
Hope to see you there!**

ARMS
ASSOCIATION FOR RELINQUISHING MOTHERS (Vic) Inc

On Saturday 7th December 2013 ARMS held a successful and well attended Annual General Meeting at the Centre for Child and Family Welfare in Market Street, Melbourne.

At the meeting, guest speaker Prof Nahum Mushin, chair of the Australian Government's Past Forced Adoptions Implementation Working Group provided information about the Group's activities following the Federal Apology.

Kate Naughtin from National Archives of Australia was also a guest speaker and provided information about the National Archives Forced Adoptions History Project and encouraged everyone to participate at whatever level they felt most comfortable.

Also on display were a number of flags produced by ARMS members which will be eventually donated to the NAA project on Forced Adoptions.

NEW YEAR VOICE EDITION 2014

THANK YOU FOR SHARING WITH US IN 2013

IN 2014 WE WOULD LIKE TO BRING YOU AN EDITION OF VOICE THAT
FEATURES THE WORK OF OUR MEMBERS

PLEASE SEND US IN ORIGINAL OR FULLY REFERENCED

POEMS

SHORT PIECES

PHOTOGRAPHS

NEWS ITEMS

BOOK REVIEWS

PLAY REVIEWS

FILM REVIEWS

ART WORK

THAT YOU WOULD LIKE TO SHARE WITH OTHER MEMBERS
(you are welcome to resubmit something which has been published in a past issue)

Support Groups 2014

Please check our website for dates commencing January 2014 www.vanish.org.au

In the meantime on behalf of our staff team of Diane, Gail, Liz, Mary, Maire, Jenny and Charlotte we wish you all the best for peace and joy at this holiday time and look forward to hearing from you in the New Year.

Warm regards

Coleen Clare

Manager, VANISH



FACT SHEET

ACCESS TO ALLIED PSYCHOLOGICAL SERVICES (ATAPS) PROGRAM- ADDITIONAL TIER 1 FUNDING FOR THE PROVISION OF SERVICES TO PEOPLE AFFECTED BY PAST FORCED ADOPTION PRACTICES WHO HAVE A DIAGNOSED MENTAL DISORDER

Additional funding will be provided to Medicare Locals in 2012-13 and 2013-14, as a one-off funding boost to increase the capacity of existing ATAPS Tier 1 services to respond to an anticipated increase in demand for ATAPS services from people affected by past forced adoption practices following the National Apology on 21 March 2013. The additional funding is a short term response in the post-apology period while the Department of Family, Housing, Community Services and Indigenous Affairs (FaHCSIA) establishes a range of services to support those people in the medium to long term. The response should focus on the person adopted and their mothers and fathers. Some people in this group who have a diagnosed mental disorder may already be accessing ATAPS services and not all of them may publicly identify as such.

People who identify as being affected by past forced adoption practices and who have a diagnosed mental illness of mild to moderate severity should be given priority access under ATAPS Tier 1 (ie should not be placed on a waiting list), but will be subject to the same standard Tier 1 requirements, as other ATAPS clients as outlined below.

Eligibility Requirements:

- Individuals need to have a clinical diagnosis of mental illness of mild to moderate severity (see *Definition of Mental Illness for The Better Outcomes in Mental Healthcare Program* in the ATAPS Operational Guidelines);
- Have a *Mental Health Treatment Plan* in place with the GP or psychiatrist referring the individual to the ATAPS program;
- If and when a person affected by past forced adoption practices identifies as such they should be given priority and not added to a waiting list;
- As with all ATAPS Tier 1 sessions, these sessions are to be provided at no or low cost (maximum copayment of \$30 per session) to the individual;
- As with all ATAPS Tier 1 clients, people affected by past forced adoption practices will be eligible for up to 12 individual sessions per calendar year, and in exceptional circumstances up to an additional six sessions¹; and
- In addition to individual sessions, up to 12 separate services within a calendar year will also be available for group therapy services.

Referral Requirements:

Individuals utilising ATAPS Tier 1 services should be formally referred by a GP or psychiatrist. Where referral by a GP is not possible provisional referrals may be made by allied health professionals who are eligible to provide services under ATAPS. An allied health professional may not refer someone to themselves or to someone operating in the same practice. Referrals may be made face-to-face, by telephone, electronically or by a written referral.

¹ Exceptional circumstances are defined as a significant change in the client's clinical condition or care circumstances which make it appropriate and necessary to increase the maximum number of services. It is up to the discretion of the referring practitioner, who should be guided by their professional ethics and/or Code of Conduct, to determine that the client meets these requirements. In these cases a new referral should be provided and exceptional circumstances noted on that referral.