POSTSCRIPT:

'IN CARE'

—KILL OR CURE

Rosemary Crossley

Between the writing of my article and its publication in the last issue of Australian Child and Family Welfare my critique of St Nicholas Hospital was overtaken by events.

On September 4th the State Government announced that it was proposing to demolish St Nicholas, sell the site and rehouse the residents in small family group homes in the community. This has since then been confirmed as official government policy.

On September 7th a Supplementary Report to the Report of the Committee of Inquiry to Investigate Claims About Children at St Nicholas Hospital was published. Its authors are members of the staff of Burwood State College. The final recommendation of the Supplementary Report was

> 'That alternative accommodation be found for the children at St Nicholas Hospital—accommodation which will provide each child with the least restrictive environment for achieving his or her optimal level of functioning.'

It is perhaps worth noting that the Government's announcement about the closure of St Nicholas was made in the knowledge of the contents of this report.

The Supplementary report also concluded, *inter alia*, that

> 'The (1980) Committee's general statements pertaining to the functional level of the children can be dismissed . . . (S 2.9.I)'
>
> 'The provision of general care to the children is not optimal. (S 6.4.I)'
>
> 'The provision of physiotherapy has been inadequate and some of the children's deformities may be the result of its absence. (S 6.4.IV)'
>
> 'The current educational provision for the children is inadequate. (S 6.4.V)'
>
> 'Adequate equipment to ameliorate the children's physical disabilities has never been available. (S 6.4.VI)'
>
> 'There is evidence that . . . social work support for the parents has been denied. (S 10.4 V)'
>
> 'There is no evidence . . . that Ms Crossley has harassed, denigrated or given misleading information to any parent. (S 10.4.VI)'
>
> 'Non-relative friends of the children have been discouraged or prevented from continuing their visits to the Hospital (S 11.3.I)'
>
> 'The current provision for safeguarding of human rights within informal institutions such as St Nicholas Hospital is inadequate. (S 12.3.I)'

In my article I spoke about the ban on non-relative visitors to some St Nicholas residents, and mentioned especially the case of Stephen. Stephen, aged 18, had not been visited by his parents since his admission to St Nicholas at the age of 5. However, *all* his friends outside the hospital were banned from visiting him in July 1980. One of Stephen's friends, a social worker once based at St Nicholas Hospital, approached the Ombudsman earlier this year in order to seek permission to visit Stephen. The Ombudsman decided that, in fact, she had been unreasonably excluded, and wrote to the Health Commission asking that she be allowed to see Stephen. He received a phone call from St Nicholas saying that Stephen had died the preceding day—September 8th.

The last issue of Australian Child and Family Welfare contained a review of Annie's Coming Out, a book written by Anne McDonald, a former resident at St Nicholas, and myself.

While the review made some quite extraordinary statements about Anne and myself these are less important and less worrying than the author's concern to defend St Nicholas Hospital. She says

> 'The book has a second purpose which has received as much publicity as Anne, to the distress of parents and staff. It is a critique of St Nicholas Hospital and appears to have reinforced commonly held beliefs and fantasies about institutions for the retarded.'

It appals me that conditions such as those outlined in the Supplementary Report, and such as those suffered by Stephen, could be hushed up to avoid distressing parents and staff. However sympathetic we are to parents who may have had no option other than to place their disabled child at St Nicholas, it cannot be gainsaid that the child has to live there and the parents do not.

This attitude also negates the parents' right to know what is happening to their child. If I had a child living in St. Nicholas I would want to know about the quality of care the child is receiving.

Unfortunately, many professionals who come in contact with disabled children and their parents feel that, because the parents are able to articulate their needs and problems, it is the parents and not the child who is the primary client. The fact that it is the child who will have to bear the brunt of any placement decision made is often forgotten in the otherwise laudable desire to help the parents. Once a professional has placed a child in an institution guilt can often only be avoided by defending the placement and hence the institution. 'The institution has to be all right, otherwise I would have to be cruel to place a child there, and I'm not cruel' is one form of rationalisation.

As I said in my article, it is time that all professionals working with disabled children decided that the needs of the child are paramount, as they are in the case of normal children needing care,