Abuse in Care
Royal Commission of Inquiry

PART 2

JUNE 2024

Whanaketia

Context

He auhi nō te puku

THROUGH PAIN AND TRAUMA, FROM DARKNESS TO LIGHT

Cover image is the lyrics to a song "Hey Mama" written by Margaret Yzxnzt and her survivor papa.

Presented to the Governor-General by the Royal Commission of Inquiry into
Historical Abuse in State Care and in the Care of Faith-based Institutions on 25 June 2024

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Whakairihia ki te tihi o Maungārongo

He karakia

E tāmara mā, koutou te pūtake o ēnei kōwhiringa, kua horaina nei
E tohe tonu nei i te ara o te tika
E ngaki tonu ana i te māra tipu
Anei koutou te whakairihia ki te tihi o
Maungārongo, kia tau te mauri.

Rukuhia te pū o te hinengaro
kia tāea ko te kukunitanga mai o te whakaaro nui.
Kia piere ko te ngākau mahora
kia tūwhera mai he wairua tau.

Koinei ngā pou whakairinga i te tāhuhu
o te Whare o Tū Te Mauriora.
Te āhuru mōwai o Te Pae o Rehua,
kaimuru i te hinapōuri,
kaitohu i te manawa hā ora,
kaihohou i te pai.

Nau mai e koutou kua uhia e ngā haukino
o te wā, kua pēhia e ngā whakawai a ngā tipua nei,
a te Ringatūkino rāua ko te Kanohihuna.

Koutou i whītiki i te tātua o te toa,
i kākahu i te korowai o te pono,
i whakamau i te tīpare o tō mana motuhake,
toko ake ki te pūaotanga o te āpōpō e tatari mai nei i tua o te pae,
nōu te ao e whakaata mai nei.

Kāti rā, ā te tākiritanga mai o te ata,
ā te huanga ake o te awatea,
kia tau he māramatanga,
kia ū ko te pai, kia mau ko te tika.
Koinei ko te tangi a te ngākau e Rongo,
tūturu ōwhiti whakamaua
kia tina, tina!
Hui e, tāiki e!

– Waihoroi Paraone Hōterene

To you upon whom this inquiry has been centered
Resolute in your pursuit of justice
Relentless in your belief for life
You have only our highest regard and respect,
may your peace of mind be assured.

Look into the deepest recesses of your being
and discover the seeds of new hope,
where the temperate heart might find solace,
and the blithe spirit might rise again.

Let these be the pillars on which the House of Self,
reconciliation can stand.
Safe haven of Rehua,
dispatcher of sorrow,
restorer of the breath of life,
purveyor of kindness.

Those of you who have faced the ill winds
of time and made to suffer,
at the hands of abusers and the hidden faces of persecutors, draw near.

You who found courage,
cloaked yourselves with your truth,
who crowned yourself with dignity,
a new tomorrow awaits beyond the horizon,
your future beckons.

And so, as dawn rises, and a new day begins,
let clarity and understanding reign,
goodness surrounds you and
justice prevails.
Rongo god of peace, this the heart desires,
we beseech you,
let it be,
it is done.

– Waihoroi Paraone Hōterene

He auhi nō te puku

The name of this Part comes from a line from the waiata that refers to the extreme grief and sorrow caused by the abuse and neglect suffered in care. It is used as the title for this Part, to capture the pain and sorrow felt when reflecting on the wider context that led to the many forms of abuse and neglect occurring.

Pānui whakatūpato

Ka nui tā mātou tiaki me te hāpai ake i te mana o ngā purapura ora i māia rawa atu nei ki te whāriki i ā rātou kōrero ki konei. Kei te mōhio mātou ka oho pea te mauri ētahi wāhanga o ngā kōrero nei e pā ana ki te tūkino, te whakatūroro me te pāmamae, ā, tērā pea ka tākirihia ngā tauwharewarenga o te ngākau tangata i te kaha o te tumeke. Ahakoa kāore pea tēnei urupare e tau pai ki te wairua o te tangata, e pai ana te rongo i te pouri. Heoi, mehemea ka whakataumaha tēnei i ētahi o tō whānau, me whakapā atu ki tō tākuta, ki tō ratongo Hauora rānei. Whakatetia ngā kōrero a ētahi, kia tau te mauri, tiakina te wairua, ā, kia māmā te ngākau.

Distressing content warning

We honour and uphold the dignity of survivors who have so bravely shared their stories here. We acknowledge that some content contains explicit descriptions of tūkino – abuse, harm and trauma – and may evoke strong negative, emotional responses for readers. Although this response may be unpleasant and difficult to tolerate, it is also appropriate to feel upset. However, if you or someone in your close circle needs support, please contact your GP or healthcare provider. Respect others' truths, breathe deeply, take care of your spirit and be gentle with your heart.

Ngā take

Contents

Kuputaka
Glossary

Term	Explanation
assimilation	Government policy referring to the process through which individuals and groups of a minority culture are made to change their attitudes, beliefs, practices and ways of life and must acquire the habits, attitudes and ways of life of the majority culture.
borstal	Institutions for young offenders (aged 15 to 21), aimed at reforming behaviour and preventing offenders from becoming "habitual criminals". Borstals ran from 1924 until 1981 under the Prevention of Crime Act (Borstal Institutions Establishment) Act 1924.
cultural racism	Negative attitudes to the culture and lifestyles of indigenous and minority culture.
deinstitutionalisation	The process of closing institutions that housed disabled people based on government policy.
disablism	Conscious, direct discrimination against people who are disabled, based on their disability.
eugenics	A pseudo-science that aims to improve the genetic quality of the human population. This included altering gene pools by excluding people and groups deemed to be 'inferior'.
institutional racism	Discriminatory policies and practices of institutions that routinely produce racially inequitable outcomes for certain groups based on race, ethnicity, skin colour or national origin, and advantage other groups for the same reasons.
Inquiry period	1 January 1950–31 December 1999

Term	Explanation
mental distress	A mental or emotional state that causes disruption to daily life and that can vary in length of time and intensity.
oralism	The system of teaching deaf people to communicate by the use of speech and lip-reading rather than sign language.
psychopaedic	Outdated Aotearoa New Zealand term to distinguish people with a learning disability from people experiencing mental distress.
tāngata whaikaha Māori	A reo Māori term for disabled people. It reflects a definition of people who are determined to do well.
whānau hauā Māori	A reo Māori term for a person with disabilities, which reflects te ao Māori perspectives and collective orientation.
whāngai	A reo Māori term for Māori customary adoption or fostering of children or young people.

"The most insidious and destructive form of racism, though, is institutional racism. It is the outcome of monocultural institutions which simply ignore and freeze out the cultures of those who do not belong to the majority."

Māori Perspective Advisory Committee, Puao-te-Ata-Tū

Ūpoko | Chapter 1
He whakataki
Introduction

1. This Part focuses on the social attitudes, care practices, how government operated and important events that influenced the care systems in Aotearoa New Zealand. It is not intended to be a comprehensive history, but highlights key themes and topics that are important context to what this Inquiry heard.
2. Chapter 2 covers traditional societal attitudes to care, including Māori, Pacific Peoples and Pākehā.
3. Chapter 3 looks at Māori relationships and interactions with faiths and the Crown including the signing of He Whakaputanga o te Rangatiratanga o Niu Tirene – the Declaration of Independence and te Tiriti o Waitangi.
4. Chapter 4 discusses the social attitudes, values and beliefs present before and during the Inquiry period (1950–1999) that were reflected in legislation, policy, and operational practice around care settings.
5. Chapters 5–7 cover the decades of the Inquiry period with a focus on key events and developments for Māori, Pacific Peoples, Deaf, disabled people and people experiencing mental distress. They also explore areas such as human rights and understandings of child development, neurodivergence and trauma. It also looks at poverty, available social support and economic conditions in each decade.
6. Chapter 8 looks at available data on Māori, Deaf, disabled people, people experiencing mental distress and Pacific Peoples during the Inquiry period and how these populations changed over time. It also looks at the changes in religious affiliation between 1950–1999.
7. Chapter 9 gives an overview of how government makes decisions and operates in Aotearoa New Zealand, and of how the State sector was organised and run during the Inquiry period.
8. Chapter 10 covers the State and faith-based care system frameworks. This includes the relevant legislation, approaches to care, the different types of care settings, the governance structures of the faiths and key roles and responsibilities within State and faith-based care settings.
9. Chapter 11 outlines the different types of care settings that existed in Aotearoa New Zealand during the Inquiry period.

Ūpoko | Chapter 2
Ngā waiaro ā-pāpori tuku iho ki te taurimatanga
Traditional societal attitudes to care

Ngā waiaro o te Māori ki te taurimatanga
Māori attitudes to care

Ngā tikanga a te Māori ki te whakatipu tamariki
Traditional Māori models of parenting

10. Māori traditionally lived in papakāinga (village settlements) consisting of whānau groups of 30 to 45 people. These were normally made up of kuia and kaumātua (female and male elders), pākeke (senior adults such as parents, uncles and aunts), and tama and tamāhine together with their spouses and tamariki (children). Everyone helped to raise the tamariki. This practice reflected a fundamental belief that "the child is the child of the tribe".[1]

11. Caring for and raising tamariki as a collective, with whānau members having different roles and responsibilities, meant that tamariki were brought up in an environment that knitted the whānau together. It also meant that multiple people were observing each other as a further way to ensure care for tamariki Māori.[2]

12. Tamariki were generally treated with reverence in traditional Māori society and it was rare for adults to be violent towards them. Traditional whakataukī purākau speak to the high regard held for children. Dr Rawiri Taonui notes "the most insidious and destructive form of racism, though, is institutional racism. It is the outcome of monocultural institutions which simply ignore and freeze out the cultures of those who do not belong to the majority".[3] Wāhine (women) and tamariki were the bearers of future generations and any violence against them was generally viewed as a transgression against whakapapa.[4]

1 Jenkins, K & Mountain Harte, H, Traditional Māori parenting (Te Kahui Mana Ririki, 2011, page 27).
2 Jenkins, K & Mountain Harte, H, Traditional Māori parenting (Te Kahui Mana Ririki, 2011, page 27).
3 Taonui, R, Whakapapa – genealogy: What is whakapapa? (Te Ara – The Encyclopedia of New Zealand, 2015, page 1), http://www.TeAra.govt.nz/en/whakapapa-genealogy/page-1; Rawiri Taonui, Mana tamariki; cultural alienation Māori child homicide and child abuse (An international journal of indigenous peoples, 2010, page 192).
4 Wilson, D, "Transforming the normalisation and intergenerational whānau (family) violence," Journal of Indigenous Wellbeing, 1(2), (December 2016, pages 32–43, page 33).

13. As noted in Part 1, this is not to suggest that traditional Māori society did not have instances of abuse. What is clear from narratives within pūrākau (myths and legends), waiata (songs), and whakataukī (proverbs), as well as tikanga, is that abuse was not something condoned and that it carried consequences. There were culturally acceptable behaviours concerning the care, nurturing and protection of tamariki and other whānau members in traditional Māori society.[5] Knowledge passed down through generations of pukenga (experts) speak to this.

14. Early written material about care within Māori society has also been collected and published by non-Māori academics and researchers who studied and often lived with Māori communities. Many European traders and missionaries recorded observations in the early 19th century of the loving care given to pēpi (babies) and tamariki by parents and other adults. Māori fathers were nurturers and caregivers of young children in Māori society. Reverend Samuel Marsden observed in 1814 that Māori were "kind to their women and children. I never observed a mark of violence on any of them".[6] Trader Joel Polack noted that "the [Māori] father is devotedly fond of his children, they are his pride, his boast, and peculiar delight".[7]

15. Dr Edward Shortland, a colonial administrator and interpreter,[8] observed in the 1840s that "a parent is seldom seen to chastise his child, especially in families of rank".[9] Practices associated with tikanga Māori concepts including tapu, mana, utu and muru helped influence behaviour.

16. Dr Shortland observed that, were a parent to physically punish a child, a relative would probably interfere to protect the child "and seek satisfaction for the injury inflicted on the child by seizing some of the pigs or other property".[10]

5 Savage, C, Moyle, P, Kus-Harbord, L, Ahuriri-Driscoll, A, Hynds, A, Paipa, K, Leonard, G, Maraki, J & Leonard, J, Hāhā-uri, hāhā-tea: Māori involvement in State care 1950–1999 (Ihi Research, 2021, pages 34–36).
6 Marsden, S, Journal – Reverend Samuel Marsden's first visit to New Zealand in December 1814 (Marsden Online Archive, last modified October 3, 2014), http://www.marsdenarchive.otago.ac.nz/MS_0176_001.
7 Polack, J, New Zealand being a narrative of travels and adventures during a residence in that country between the years 1831 and 1837 (Richard Bentley, 1887, page 374).
8 Atholl, A, Shortland, Edward, Dictionary of New Zealand Biography (Te Ara – The Encyclopedia of New Zealand, first published 1990, updated December 2013, page 1), https://teara.govt.nz/en/biographies/1s11/shortland-edward.
9 Shortland, E, Traditions and superstitions of the New Zealanders: With illustrations of their manners and customs (Longman, Brown, Green, Longman and Roberts, 1856, page 156).
10 Shortland, E, Traditions and superstitions of the New Zealanders: With illustrations of their manners and customs (Longman, Brown, Green, Longman and Roberts, 1856, page 156).

Ngā waiaro me ngā rautaki o te Māori ki te hauora me te whaikaha
Māori attitudes and approaches to health and disability

17. Traditional Māori attitudes to hauora (health and wellness) had multiple dimensions, including hauora hinengaro (mental health and wellbeing), hauora tinana (physical health and wellbeing), hauora whānau (family health and wellbeing) and connection to whenua (land).

18. Wellness required a state of balance in all spiritual aspects of a person, including their tapu, mana, mauri and wairua. Traditional Māori healing operated within this broader holistic context. Tohunga (expert, healer) addressed the root cause and the symptoms rather than trying to treat a single underlying cause.[11]

19. The Western medical concept of disability had no equivalent within te ao Māori (the Māori world).[12] For example, Māori oral histories suggest that being kāpō (blind) was seen not as a disability but a source of greatness or special power to be shared with their hapū.[13] There is limited evidence about attitudes to disability and Deafness in te ao tawhito (the ancient Māori world).[14] Tāngata Turi likely experienced limited but functional participation in Māori society pre-colonisation.

20. The arrival of European missionaries and settlers disrupted Māori systems of health and wellbeing.[15]

Ngā waiaro o te Māori ki te iatanga me te hemahematanga
Māori attitudes towards gender and sexuality

21. Before colonisation, both Māori men and women were regarded as essential parts of the collective whole, with evidence of fluid conceptions of gender and sexuality in pre-colonial Māori society.[16]

22. Ancestral names could be gender neutral, emphasising the importance of whakapapa rather than gender. Sexual expression was integrated into various aspects of life, both spiritual and social, and was regularly discussed and depicted in carvings. Additionally, relationships of a sexual nature served as a means to strengthen and forge alliances and relationships.[17]

11 Durie, M, Whaiora: Māori Health Development (2nd edition, Oxford University Press, 1998, page 7), in Waitangi Tribunal, Ko Aotearoa tēnei: A report into claims concerning New Zealand law and policy affecting Māori culture and identity, Te taumata tuarua: Volume 2 (2011, page 602).
12 Kaiwai, H & Allport, T, Māori with disabilities (Part two): Report commissioned by the Waitangi Tribunal for the Health Services and Outcomes Inquiry (Wai 2575), (2019, pages 17–18).
13 Tikao, K, Higgins, N, Phillips, H & Cowan, C, "Kāpo (blind) Māori in the ancient world," MAI Review, 2(4), (2009, page 11).
14 Smiler, K & McKee, RL, "Perceptio of Māori deaf identity in New Zealand," Journal of Deaf Studies and Deaf Education, 12(1) (2007, page 94).
15 Kaiwai, H & Allport, T, Māori with disabilities (Part two): Report commissioned by the Waitangi Tribunal for the Health Services and Outcomes Inquiry (Wai 2575), (2019, page 18).
16 Kerekere, E, Part of the Whānau: The emergence of takatāpui identity – He Whāriki Takatāpui, Doctoral Thesis, Victoria University of Wellington (2017, pages 21 and 33).
17 Salmond, A, Tears of Rangi: Experiments across worlds (Auckland University Press, 2017, pages 387 and 199).

Ngā waiaro o ngā iwi Pasifika ki te taurimatanga
Pacific Peoples' attitudes to care

Ngā tikanga o ngā iwi Paskifika ki te whakatipu tamariki
Pacific models of parenting

23. Pacific cultures treated infants with attention and understanding. Raising children was a collective effort. "Parents are fairly remote figures to young children, and they are not necessarily the ultimate authority figures; older members of the household may be."[18] This included older siblings who could play a significant role in raising children.[19]

24. Children were expected to learn their place in the family and in the community. They learned through observing and listening to others. Through this learning, children would mature to "assume responsibility" and to be contributors to the collective.[20] Part of this responsibility was learning the importance of service, and it was "widely understood that one's existence is to honour, serve and protect their family."[21]

Ngā waiaro me ngā rautaki o ngā iwi Pasifika ki te hauora me te whaikaha
Pacific Peoples' approaches to health and disability

25. Before colonisation, Pacific cultures did not consider mental illness to come only from within a person. They viewed mental distress as 'spiritual possession' caused by the breach of a sacred covenant between people and their gods.[22]

26. Since colonisation and Christianity, some Pacific attitudes towards disability and mental distress have changed. Christian perspectives tended to see disability as a punishment for sin and this may have influenced Pacific Peoples' views towards disabled people.[23] Pacific disabled people can face discriminatory attitudes from people within their own communities, attitudes that are based on beliefs in divine punishment, and breaches of tapu.[24] These beliefs express themselves in attitudes of cultural stigma and shame.[25]

18 Schoeffel, P & Meleisa, M, "Pacific Island Polynesian attitudes to child training and discipline in New Zealand: Some policy implications for Social Welfare and Education," in Social Policy Journal of New Zealand, (6), (1996, page 7).
19 Schoeffel, P & Meleisa, M, "Pacific Island Polynesian attitudes to child training and discipline in New Zealand: Some policy implications for Social Welfare and Education," in Social Policy Journal of New Zealand, (6), (1996, page 8).
20 Schoeffel, P & Meleisa, M, "Pacific Island Polynesian attitudes to child training and discipline in New Zealand: Some policy implications for Social Welfare and Education," in Social Policy Journal of New Zealand, (6), (1996, page 7).
21 Witness statement of Folasāitu Dr Apaula Ioane (21 July 2021, page 10).
22 Suaalii-Sauni, T, Wheeler, A, Etuate, S, Robinson, G, Agnew, F, Warren, H, Erick, M & Hingano, T, "Exploration of Pacific perspectives of Pacific models of mental health service delivery in New Zealand," Pacific Health Dialog, 15(1), (2009, pages 18–27, page 19).
23 Ministry of Health, Pacific Peoples' experience of disability: A paper for the Pacific Health and Disability Action Plan review (2008, page 24).
24 Ministry of Health, Pacific Peoples' experience of disability: A paper for the Pacific Health and Disability Action Plan review (2008, page 24).
25 Ministry of Health, Pacific Peoples' experience of disability: A paper for the Pacific Health and Disability Action Plan review (2008, page 24).

27. Pacific Peoples still see mental distress and disability as not just a medical issue with a physical cause but as an inseparable part of overall wellbeing involving "body, soul and spirit".[26]

Ngā waiaro o ngā waiaro manene ki te taurimatanga
Settlers' attitudes towards care

28. Europeans came to Aotearoa New Zealand in four main waves in the 19th century. Before 1840, European settlement had consisted of small numbers of missionaries, whalers, traders and some government officials. After 1840 there were large waves of officials and colonists (land purchasers), people assisted to emigrate by the New Zealand Company and its affiliates, imperial soldiers, and people who came for opportunities such as the goldrush. In the 19th century many people left Britain and Ireland to escape worsening economic conditions and social upheaval. Ninety percent of the 500,000 or so people who came to Aotearoa New Zealand from 1840 to 1945 were from Britain and Ireland.[27] They brought beliefs and ways of doing things with them, some of which influenced how care settings developed in Aotearoa New Zealand.

Te taurima i te hunga e rongo ana i te wairangitanga
Caring for people experiencing mental distress

29. Before the mid-18th century in Britain, Deaf, disabled people and people experiencing mental distress were part of the community, cared for by a patchwork of family and Christian charity.[28] If they were thought to be a risk to themselves or others they might be cared for in a hospital, or jailed. The State intervened sometimes in the case of landowners experiencing mental distress to protect the land title.[29]

30. After the dissolution of the monasteries and abbeys that had traditionally provided care, and the enclosures and advances in agricultural technology that led to the loss of labouring jobs, more and more people became dependent on parish relief, moved to towns or formed dispossessed, homeless groups who were seen as a threat to social order. The State responded with more institutional forms of social control such as workhouses and asylums.[30] Outdoor relief (aid delivered to people in their homes) was used until the 19th century, when the new Poor Laws focused more on provision of aid through the workhouse.[31]

26 Ministry of Health, Pacific Peoples and mental health: A paper for the Pacific Health and Disability Action Plan review (2008, page 11).
27 Ministry for Culture and Heritage, Overview: immigration to New Zealand 1840–1914 (updated 26 May 2023), https://nzhistory.govt.nz/culture/immigration/home-away-from-home/summary.
28 Scull, A, The most solitary of afflictions: Madness and society in Britain, 1700–1900 (Yale University Press, 2005, pages 1 and 11).
29 Scull, A, The most solitary of afflictions: Madness and society in Britain, 1700–1900 (Yale University Press, 2005, pages 11–12).
30 Scull, A, The most solitary of afflictions: Madness and society in Britain, 1700–1900 (Yale University Press, 2005, pages 27–3 1).
31 Wilson, AN, The Victorians (Hutchinson, 2002, page 12).

31. Disruption to social structures from population growth and urbanisation meant that "consequently, while a family-based system of caring for the mad may never have worked especially well, one suspects that by the turn of the [19th] century it was likely to have been functioning particularly badly".[32]

32. This carried over into Aotearoa New Zealand. By the end of the 19th century, there were gaps in Pākehā extended family networks due to people having fewer extended family members living nearby. This led the Inspector of Lunatic Asylums to complain that many patients were in the asylums only because they had no one else to look after them.[33] The 19th century was also when mental distress began to define a person as an identity.[34]

33. Awareness of conditions inside early asylums in Aotearoa New Zealand prompted the establishment of some private hospitals for people experiencing mental distress. Ashburn Hall (now Ashburn Clinic), for example, was founded in 1882 "as a humanitarian alternative to state hospital care of the day".[35]

Te taurima tamariki
Caring for children

34. The way people cared for children in Britain and Ireland, and the ideas about this they brought with them to Aotearoa New Zealand, were influenced by circumstances such as wealth, class and poverty. Parents loved their children and did what they could to protect them but were sometimes limited in what they could do by wider social and economic conditions.[36]

35. Children made an important contribution to the household economy for many working families. Until the middle of the 19th century, "children's lives were dominated not by schooling but by labour".[37]

36. The decline in disease had a big impact on childhood and on the child's place in the family. In 18th century Europe, mortality rates before reaching puberty were sometimes as high as 45 percent. As medicine, hygiene and nutrition progressed, parents could afford to focus on emotional and psychological as well as physical wellbeing.[38]

32 Scull, A, The most solitary of afflictions: Madness and society in Britain, 1700–1900 (Yale University Press, 2005, page 33).
33 Fairburn, M, The ideal society and its enemies: The foundations of modern New Zealand society 1850–1900 (Auckland University Press, 1989, page 233).
34 Grinker, RR, Nobody's normal – how culture created the stigma of mental illness (WW Norton and Company, 2021 pages 18–19).
35 Ashburn Clinic website, Ashburn Clinic History (accessed 29 April 2024), https://www.ashburn.co.nz/about/.
36 Fass, PS, "Is there a story in the history of childhood?," in Fass, PS (ed), The Routledge history of childhood in the Western world (Routledge, 2013, page 4).
37 Fass, PS, "Is there a story in the history of childhood?," in Fass, PS (ed), The Routledge history of childhood in the Western world (Routledge, 2013, page 5).
38 Fass, PS, "Is there a story in the history of childhood?," in Fass, PS (ed), The Routledge history of childhood in the Western world (Routledge, 2013, page 12).

37. A belief in the possibility of childhood for all children emerged in the 18th century and was developed in the 19th century. Through this period reformers were horrified by child labour in factories and worried about children as future citizens. They lobbied for legislation to protect them. Childhood became a public concern and institutions and laws associated with it grew.[39]

Te orokohanga o ngā whakaritenga taurima i Aotearoa
Origins of care settings in Aotearoa New Zealand

38. Social policy in Aotearoa New Zealand, including those in care settings, originated from the 1837 House of Commons Select Committee on Aborigines.[40] The Committee was established to investigate the living conditions, treatment and welfare of indigenous populations in Britain's colonies, and had a major influence on assimilation policy, including in Aotearoa New Zealand."[41]

39. The Committee saw Britain as having a responsibility to spread European civilisation and Christianity to other peoples and believed that influencing aboriginal children was the best way to do this.[42] The House of Commons Committee was also influenced by the 1834 Royal Commission (Poor Law Report) in Britain. This report recommended ending in-home charitable aid in Britain in favour of institutionalising the poor in workhouses.

Te mākohakoha me te taurima i te hunga rawakore i te rautau 19 i Piritana
Charity and care for the poor in 19th century Britain

40. The 1834 Poor Law changed how welfare was provided to people in poverty in Britain. Instead of providing support to the poor in their own homes (outdoor relief), a new chain of workhouses was built across the country.[43] Workhouses had already existed for more than a century alongside outdoor relief, but from 1834 workhouses would be the main form of support available to the poor and were built using architectural models based on prisons.[44]

41. Conditions in workhouses were designed to be worse than those outside to discourage people from claiming poor relief. There were strict rules and minimal food or comfort. Families were separated, with husbands, wives and children housed in separate sections.[45]

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39 Fass, PS, "Is there a story in the history of childhood?," in Fass, PS (ed), The Routledge history of childhood in the Western world (Routledge, 2013, page 7).
40 Armitage, A, Comparing the policy of Aboriginal assimilation: Australia, Canada, and New Zealand (University of British Columbia Press, 1995, page 8).
41 Armitage, A, Comparing the policy of Aboriginal assimilation: Australia, Canada, and New Zealand (University of British Columbia Press, 1995, page 186).
42 Armitage, A, Comparing the policy of Aboriginal assimilation: Australia, Canada, and New Zealand (University of British Columbia Press, 1995, pages 196 and 204).
43 Wilson, AN, The Victorians (Hutchinson, 2002, page 12).
44 UK Parliament, Poor Law reform website (accessed 28 November 2023), https://www.parliament.uk/about/living-heritage/transformingsociety/livinglearning/19thcentury/overview/poorlaw/.
45 Derin, B, The nineteenth century British workhouse: Mission not accomplished (Dominican University of California, 2019, page 10).

42. Both the Poor Law Report and the House of Commons Committee were concerned about how to deal with people that were considered unproductive and potentially a source of disorder. The preferred solutions included:

> asserting control
> integrating outsiders into British society and economy (including institutions)
> appointing protectors and overseers
> removing children from their parents (as children were considered particularly open to education and salvation).[46]

43. These views would come to influence care settings in Aotearoa New Zealand. Due to the settlers' dislike of workhouses and their desire to build a 'Brighter Britain', workhouses were not established here for providing aid to the poor.[47] However, their influence could be seen in the industrial schools established for children in Aotearoa New Zealand in the 19th century.[48]

Te taurimatanga me te tokoora i te rautau 19 Aotearoa
Care and welfare in 19th century Aotearoa New Zealand

44. In the 19th century, faith-based care was often the only available option for care outside of the family unit, particularly for Pākehā with few or no family networks. For most of the 19th century, the State did not see itself as responsible for the care of those in need, preferring to leave that to the individual's family or church community.[49] Provincial governments also provided financial relief, subsidised existing institutions, or set up their own institutions such as the Otago Benevolent Institution.[50]

45. Churches were also trusted institutions, seen as safe places that could provide good care for children, young people and adults in care. The faiths have a long history of providing care.[51] Faith-based care was motivated by a sense of charity for the destitute as well as a desire to spread Christian values and beliefs.

46. The 1877 Destitute Persons Act reinforced the existing principle of family responsibility for the care of the poor, making both 'near relatives' and more distant relations of a destitute person responsible for supporting them.[52]

46 Armitage, A, Comparing the Policy of Aboriginal assimilation: Australia, Canada, and New Zealand (University of British Columbia Press, 1995, page 3).
47 Garlick, T, Social developments: An organisational history of the Ministry of Social Development and its predecessors, 1860–2011 (Steele Roberts Aotearoa, 2012, page 24).
48 Garlick, T, Social developments: An organisational history of the Ministry of Social Development and its predecessors, 1860–2011 (Steele Roberts Aotearoa, 2012, page 27).
49 Lineham, PJ, "Trends in religious history in New Zealand: From institutional to social history," History Compass 12(4), (2014, pages 333–343, page 336).
50 Clarke, A, Orphanages and children's homes in Otago and Southland (University of Otago 2013, page 13).
51 Bloy, M, The 1601 Elizabethan Poor Law (The Victorian Web, 2002).
52 Garlick, T, Social developments: An organisational history of the Ministry of Social Development and its predecessors, 1860–2011 (Steele Roberts Aotearoa, 2012, page 24).

47. From 1867, children and young people charged in the Courts with being 'neglected', 'uncontrollable' or 'criminal' could be sent to one of a series of industrial schools.[53] The list of 'offences' that could lead to a child's committal to industrial school included 'begging', 'wandering about or frequenting any street or public place', being homeless, and 'associating with prostitutes, drunkards, thieves or vagrants.'[54] In 1880, the newly-established Department of Education took over control of the industrial schools.[55]

48. In 1885, the government established a system of district Charitable Aid Boards. The boards' powers included control of charitable institutions in their districts, and the guardianship of children in the care of industrial schools.[56]

49. Institutionalisation was not the only option for children who committed offences or were charged with being a neglected child in the late 19th century. From 1882, children sentenced to industrial schools could be boarded out to foster homes or placed into service, which meant farm labour for boys and domestic service for girls.[57]

50. Fostering or 'boarding out' came to be governments' favoured option for such young people, as it created both a 'family environment' for the child, and a cheaper alternative to institutional care.[58]

51. There were issues with abuse in these early care settings. For example, a 1908 inquiry into the Te Oranga Girls' Home (called Kingslea Girls' Training Centre from 1965) in Ōtautahi Christchurch heard evidence of physical abuse,[59] while the Catholic Sunnybank Boys' Home (called Garindale from 1975) in Nelson had reports of physical and sexual abuse in the 1940s.[60]

53 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 16).
54 Neglected and Criminal Children Act 1867, section 13.
55 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 17).
56 Tennant, M, Paupers & providers: Charitable aid in New Zealand (Allen & Unwin, Department of Internal Affairs, 1989, page 32).
57 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, pages 17–18).
58 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 18).
59 Hughes, B, The Enquiry into the Te Oranga Girls Home, 1908, Women's Studies Journal, Volume 4:1 (1988, pages 33–34).
60 Postance, P, Sunnybank – the forgotten Boys' Home, Nelson Historical Society journal, Volume 8:2 (2016, pages 60–71).

"a crushing conformity, enforced by intense levels of formal and informal social control and fear of appearing different, fear of not belonging to and fear of being rejected by this tightly drawn homogenous community".

JOHN PRATT
Criminologist

"Māori Deaf children are still not treated the same as Pākehā children."

WHITI RONAKI
Māori (Te Arawa)

Whiti Ronaki

Hometown: Tāmaki Makaurau Auckland	**Age when entered care:** 6 years old
Year of birth: 1954	**Time in care:** 1959–1969
Care facility: Kelston School for the Deaf in Tāmaki Makaurau Auckland	
Ethnicity: Māori (Te Arawa)	
Whānau background: Whiti was an only child. He was raised by his birth mother's cousin and his adoptive father. He has eight sisters and nine brothers to the same parents in his birth family.	
Currently: Whiti lives in Tāmaki Makaurau Auckland and does a lot of volunteer work with the Māori Deaf community. He is close to his children and grandchildren.	

When I was 3 years old, I got the measles and lost my hearing.

Growing up, they called me mischief. I had difficulty understanding whānau – I didn't understand how they were communicating with me. It was a problem. They thought I was being cheeky and I used to get hit and yelled at, but I was Deaf. My father would physically attack me, which made me so scared. He used weapons, anything he could get his hands on.

The doctor said I was Deaf, not Deaf and dumb. Because I couldn't hear, I had to learn everything with my eyes.

I arrived at Kelston in 1959, then aged 6 years old. I was a boarder, and I was scared at the beginning. There were heaps of Deaf kids, and they were all signing. I didn't know how to, so I sat in the corner watching and learning. Most of them were Pākehā. I was stiff, I couldn't relax.

At dinner, I didn't know how to use a knife and fork and a teacher hit the back of my hand with the blade of a knife. That night before bed, I learnt about toothbrushes – I had never used one before.

When I went to Kelston, sign language was banned. If you tried to sign you were strapped. You had to be oral and talk. We had to wear hearing aids. I didn't like it. In the break, we would hide in the playground to sign, and if we saw a teacher we would stop. We learned to sign by watching each other. We made up our own way of communicating.

Even the Government banned sign language. It wasn't fair. This made learning in the classroom hard. I didn't know what the teacher was saying, and I wasn't allowed to sign and ask for help. I couldn't understand, I couldn't see what she was saying. The teacher would growl at me – she said we had to listen. The whole class had to learn how to lip read, but the teachers didn't know how to lip read.

It took me a long time to learn how to say hello – they said my tongue was lazy, but I was trying my best and it wasn't fair. I had to put a feather in front of my mouth and spit on it to make it move and make the right sounds. It was very difficult.

There was no Māori culture or te reo Māori taught at school. It was the 1960s, so we didn't have to be taught our language and culture. I was confused about my identity – I didn't know I was Māori and Mum and Dad didn't explain anything to me.

The staff were Pākehā. The cook was Māori. She used to take us in the kitchen and give us big bowls of ice cream. We would give her big hugs. It was just what we needed. One staff member knew she was feeding us. They would ask, "Where have you been?" It was like being in a prison cell for all us Māori.

Some staff didn't like Māori children and didn't treat us the same as the Pākehā children – the Pākehā kids got toothpaste, but the Māori kids got soap. They would smell your mouth to make sure you brushed with soap. I was frightened. I complained to the principal, but he didn't believe me. The complaint failed even though I told the truth, and it was abuse.

There was a staff member that I hated, and another man too. At bath time they would use the soap and wash you for a long time then put their hands up your bum. The boys in the bath would play with each other, too. I felt yuck. The other kids would tell their parents what was going on, and they'd go to the principal, but he didn't believe it. I think there were other kinds of abuse. We were all too scared to do anything about it.

Having grown up with the abuse, I would fight with gangs, fight with whānau. It was wrong, no one taught me — not my parents, whānau, friends. I had to teach myself, and I was trouble.

I found out about my biological family when I was 18 years old. One day I asked my real dad why he gave me away. He told me to get out and closed down. He was so angry. His words hurt me, but I had the right to ask. That's why I got into the gangs and fighting when I was young – I was frustrated with my life. I was attracted to the gangs because it was a place that I had power and mana that I didn't have before.

When I was in the gang, the police were hard on me. I used to go to the pub on payday and I'd be drinking a jug of beer when they came in. I couldn't communicate with them, so they would grab me and put me in the truck. I'd be confused. They'd get my cards out of my wallet to find out my name. I didn't understand the way they communicated or the words they used. They would make up stories, like saying I pissed in the garden. I'd be charged and have to go to court. They would write a report that I didn't understand, and there were no interpreters to communicate with me. It was all oral, and even though I tried to lip read, I couldn't follow what was going on.

They were all Pākehā, picking on me because I am Māori. It was so frustrating and I would get angry. I didn't know why they treated me like that.

I met another Deaf man and I told him I was in the gangs. He said, "What are you doing that for? Come to the Deaf club. You can talk, and we do fun things. We play sports, you should come." I went to Deaf club without my patch, and I met heaps of people I went to school with. It was great talking and seeing them again.

When I left the gang life at age 25, the Māori Turi community pressured me to change. It made me relax from the police always getting at me. I did some self-reflection and realised I wanted to join the Māori Turi community to help them and the young ones. Now, I take my patch and talk to Māori Turi youth about my stories and my journey in gangs. I tell them to not get involved, to think and be careful.

I feel that Māori Turi children are still not treated the same as Pākehā children. You have to be careful when you talk to Māori Turi children. They read facial expressions, and when some of the staff yell at the children that makes them feel uncomfortable. We need to help, support and train more staff and teach good communication skills that will help the children.

My most recent job was at Kelston school as a voluntary kaumatua. I visited a 10-year-old girl at school who was always in trouble. She was shocked, as she had not met a Māori Turi man before. She told me her teacher was Pākehā and didn't understand Māori ways. I told the teacher and said if the teacher couldn't teach the girl, to get a Māori staff member or someone else. They asked me to come back and volunteer one day a week.

Before I got the job, the children feared me because I was covered in tattoos. I went to WINZ and asked if I could get them removed. It cost me $20. When I got the job, the children asked where my tattoos had gone. I said they were butterflies and they flew away. I had changed – I became positive.

Some things have changed at Kelston that make it better and safer for the children. But lots of the Māori Turi children are not happy because the staff are all Pākehā. Some of the Pākehā staff are good and some are not. I tell the children that they have to accept it for now.

Due to how and what I was taught at Kelston, I was alienated from both the Deaf and the Māori communities. I couldn't understand the Deaf community because I wasn't allowed to learn in sign language. I was alienated from the Māori community, because I wasn't taught any language or cultural practices that would help me understand and be able to live as a Māori man. I had to learn later in life.

There is a disconnect between Deaf and Hearing people. A long time ago my daughter wanted to be an interpreter, so she signed up for a course. The teacher was Hearing, and I objected – I told him the class should be taught by the Deaf.

I think there is also a disconnection when Māori Turi attend events on the marae. Māori sign language needs more interpreters, as not many are fluent in te reo Māori and sign language.

When I sign in Māori I include Māori concepts, and mix it with English. When I do the karakia, on the marae, I sign in te reo. It should be voiced in te reo by the interpreter – to me it doesn't sound right to voice my karakia in English. If you visit my marae, my whare, my pōwhiri, that is my culture. When people understand that switch in thinking, they get it.

I think sign language should be adapted to represent Māori concepts and this work should be done by Māori Turi, for Māori Turi. We need to help each other and get everyone's different perspectives.[61]

61 Witness statement of Whiti Ronaki (20 June 2022).


RANGIURU
RSC EST 1893

Ūpoko | Chapter 3
Ngā mihinare me te tīmatanga o te tāmitanga
Missionaries and the start of colonisation

Te taenga mai o ngā mihinare ki Aotearoa
Arrival of missionaries in Aotearoa New Zealand

52. Part of the history of care settings in Aotearoa New Zealand relates to the arrival of Christian missionaries.

53. Christian missionaries arrived in Aotearoa New Zealand as early as 1814. From 1815 to 1840, the Anglicans, Methodists and Roman Catholics established several missions across the Far North, close to Māori communities.[62] In the early years, missionaries were generally seen by Māori as useful members of their communities. Māori engaged with the missionaries to increase their collective status, mana and economic and military advantage (including access to trading and muskets),[63] and chiefs often provided land for missionary residences.[64]

54. Missionaries developed a reputation for mediating between rivals, providing a way out from the cycle of utu.[65] This was a reciprocal relationship, with the missionaries often relying on hapū for food, shelter and protection. Missionaries also taught domestic values based on the model of the nuclear family as part of their wider efforts to Christianise and civilise Māori.[66] Missionaries influenced Māori converts to Christianity to abandon polygamy.[67]

62 Waitangi Tribunal, Muriwhenua Land Report (1997, page 48).
63 Waitangi Tribunal, Muriwhenua Land Report (1997, page 48); Waitangi Tribunal, He Whakaputanga me Te Tiriti: The Declaration and the Treaty: Report on stage 1 of the Te Paparahi o Te Raki Inquiry (2014, page 251).
64 Rigby, B, The Muriwhenua North Area and the Muriwhenua claim: A historical report commissioned by the Waitangi Tribunal (Wai 45), (1990, page 6).
65 Waitangi Tribunal, Muriwhenua Land Report (1997, page 48).
66 Brookes, B, A history of New Zealand women (Bridget Williams Books, 2016, page 47).
67 Ballantyne, T, Entanglements of empire: Missionaries, Māori, and the question of the body (Auckland University Press, 2015, page 6).

Ngā whakaaro o te Māori ki te Karaitianatanga
Māori responses to Christianity

55. Māori responses to the Christian teachings varied but during the 1830s some Māori adapted and absorbed aspects of Christianity into their own spirituality, "incorporating Christianity into their own belief systems at least as much as they were being converted by it".[68] Missionaries relied on Māori co-operation, not just to live, but also to spread their message.

56. Māori evangelist teachers, or kaiwhakaako, became the intermediaries between the missionaries and iwi. Some kaiwhakaako, such as Taumata-a-kura (Ngāti Porou), had a significant impact in spreading the Christian gospel while working within their own cultural frameworks.[69] Once ordination of Māori ministers (minita) began, some of the first minita were also tohunga who blended indigenous practice with Christianity.[70]

Ka tīmata te Kāwanatanga ki te tuku pūtea tautoko mō te mātauranga
State begins to fund education

57. Schools were an early tool for converting Māori to Christianity, with the first missionary school opening in 1816.[71]

58. Under the 1847 Ordinance Act, the State began funding church-run boarding schools.[72] State funding for church-run schools continued under the Native Schools Acts of 1858 and 1867.[73] Although the 1858 Act "upheld English as the dominant language", in many areas missionaries initially taught in te reo Māori.[74] Both the State and missionaries shared the goal of making their schools "centres for civilisation".[75] During Parliamentary debates on the Bill that later became the Native Schools Amendment Act 1871, Minister of Native Affairs Donald McLean stated that "the principle of teaching English would be adhered to, because the education of the Māori race in the English language was the factor most likely to 'bridge over' the gap existing between two races".[76]

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68 Waitangi Tribunal, He Whakaputanga me Te Tiriti: The Declaration and the Treaty: Report on stage 1 of the Te Paparahi o Te Raki Inquiry (2014, page 254).
69 Kaa, H, Te Hahi Mihinare: The Māori Anglican Church (Bridget Williams Books, 2020, pages 26–29 and 37).
70 Kaa, H, Te Hahi Mihinare: The Māori Anglican Church (Bridget Williams Books, 2020, pages 47–49).
71 Pihama, L, Tīhei mauri ora honouring our voices – mana wahine as a kaupapa Māori theoretical framework, Doctoral Thesis, University of Auckland (2001, page 208).
72 Pihama, L, Tīhei mauri ora honouring our voices – mana wahine as a kaupapa Māori theoretical framework, Doctoral Thesis, University of Auckland (2001, page 208).
73 Walker, R, "Reclaiming Māori education" in Hutchings, J & Lee-Morgan, J (eds), Decolonisation in Aotearoa: Education, research and practice (2016, pages 23–24).
74 Pōtiki, MK, Te Hū o Moho – The contributing factors to the death of the Māori language at Ōtākou, Doctoral Thesis, University of Otago (2023, page 201).
75 Barrington, JM & Beaglehole, TH, Māori schools in a changing society – An historical review, No 52 (New Zealand Council for Educational Research, 1974, page 68).
76 Barrington, JM & Beaglehole, TH, Māori Schools in a Changing society, An Historical Review (Wellington, 1974, page 106), cited in Pōtiki, MK, Te Hū o Moho – The contributing factors to the death of the Māori language at Ōtākou, Doctoral Thesis, University of Otago (2023, page 2002).

59. Māori supported the schools in the hope that their children might gain access to the benefits of settler society.[77] Māori leaders, wanting the benefits from the education system, "had to ask the Government to establish a school in their district and provide sufficient land for that school, but had no say in the curriculum".[78]

Te taenga o ngā mihinare ki te Moana nui a Kiwa Arrival of the missionaries in the Pacific

60. In the late 18th and early 19th centuries, missionaries began arriving in the South Pacific region. Although Pacific Peoples' experiences of colonisation and Christianity varied, the missionaries' impact on Pacific societies was far-reaching.

61. Many Pacific societies adopted Christianity and it became a core element of their cultural identities. Like Māori, some Pacific Peoples incorporated Christianity into their own belief systems.[79]

62. Christianity had a strong influence on Pacific Peoples' parenting practices, to the extent that physical punishment to discipline children became seen as normal and justified. Although the well-known phrase 'spare the rod and spoil the child' is not actually in the Bible, it is widely attributed to the gospels and shaped the approach some Pacific Peoples took to parenting.[80]

77 Walker, R, "Reclaiming Māori education" in Hutchings, J & Lee-Morgan, J (eds), Decolonisation in Aotearoa: Education, research and practice (2016, page 24).
78 Walker, R, "Reclaiming Māori education" in Hutchings, J & Lee-Morgan, J (eds), Decolonisation in Aotearoa: Education, research and practice (2016, page 24).
79 Yengoyan, AA, "Christianity and Austronesian transformations: Church, polity and culture in the Philippines and the Pacific" in Bellwood, P, Fox, JJ & Tryon, D (eds), The Austronesians: Historical and comparative perspectives (The Australian National University Press, 2006, page 361).
80 Schoeffel, P & Meleisa, M, "Pacific Island Polynesian attitudes to child training and discipline in New Zealand: Some policy implications for Social Welfare and Education," Social Policy Journal of New Zealand, No 6 (1996, page 6).

Te Tiriti o Waitangi – te orokohanga, te hainatanga me ngā pāpātanga
Te Tiriti o Waitangi – origins, signing and impacts

He Whakaputanga o te Rangatiratanga o Niu Tireni
The Declaration of Independence

63. Northern Māori had had the experience of signing an international document before they signed te Tiriti o Waitangi. In 1835, 34 rangatira (chiefs), mostly from the Bay of Islands and Hokianga, signed He Whakaputanga o te Rangatiratanga o Niu Tireni – the Declaration of Independence.

64. The declaration emphasised their rangatiratanga, Kīngitanga and mana and asserted that no other person or group could make laws within their territories or exercise the functions of government except under their authority and in accordance with tikanga Māori.[81]

65. The declaration and Te Whakaminenga o Ngā Hapū o Niu Tireni (the Confederation of United Tribes) were a political response to the changes brought about by contact with Europeans. Te Whakaminenga o Ngā Hapū o Niu Tireni represented a "coming together of the tribes", in which hapū worked together to protect and reinforce their autonomy. The intent was "for Māori to control their own changes in the new world".[82]

66. The British Colonial Office (the government department that oversaw the colonies) recognised Aotearoa New Zealand's independence through several statutes and official acknowledgement of He Whakaputanga o te Rangatiratanga o Niu Tireni. This meant that if the British chose to intervene more formally, the independent and sovereign status of the country would have to be nullified, by a treaty if possible.[83]

81 Waitangi Tribunal, He Whakaputanga me Te Tiriti, The Declaration and the Treaty: Report on stage 1 of the Te Paparahi o Te Raki Inquiry (2014, pages 12, 154 and 501).
82 Waitangi Tribunal, He Whakaputanga me Te Tiriti, The Declaration and the Treaty: Report on stage 1 of the Te Paparahi o Te Raki Inquiry (2014, page 176).
83 Orange, C, The Treaty of Waitangi (Bridget Williams Books, 2011, pages 21, 30–32).

Te orokohanga o Te Tiriti
Te Tiriti o Waitangi origins

67. In 1840, te Tiriti o Waitangi was signed by over 40 rangatira Māori and Captain William Hobson on behalf of the British Crown. After the signing at Waitangi, te Tiriti o Waitangi was taken around the country and gathered additional signatures. By the end of 1840 over 500 rangatira had signed. Most signed te Tiriti o Waitangi, but at Waikato Heads and Manukau only the English text was available and was signed by 39 rangatira.

68. Te Tiriti o Waitangi is Aotearoa New Zealand's founding document and sets out the relationship between Māori and the British Crown.

69. Te Tiriti o Waitangi is an enduring and living document that sets out the Crown's obligations to hapū and Māori and affirms the pre-existing rights of Māori as tangata whenua. It is well-established that te Tiriti o Waitangi has two texts, in te reo Māori and English. Although neither text is a direct translation of the other and there is debate over their differences, one scholar has recently argued that the texts are not irreconcilable.[84]

70. Te Tiriti o Waitangi guaranteed hapū the right to autonomy and self-government (tino rangatiratanga) and the right to manage the full range of their affairs in accordance with their own tikanga.[85] Te Tiriti o Waitangi gave the Crown, through the new kāwana (governor) the right to exercise authority (kāwanatanga) over British subjects and keep the peace and protect Māori interests.

71. The original understanding of te Tiriti o Waitangi by rangatira was that Māori self-government (rangatiratanga) could co-exist with Crown sovereignty (kāwanatanga). Rangatira who signed te Tiriti o Waitangi did so on the basis that they and the governor would be equals, and that the two parties would have distinct roles and different spheres of influence.[86] As the Waitangi Tribunal has explained, "the Treaty was an acknowledgement of Māori existence, of their prior occupation of the land and of an intent that the Māori presence would remain and be respected".[87]

72. See Part 1 for how the Inquiry applied te Tiriti o Waitangi and its principles to its work.

84 Fletcher, N, The English text of the Treaty of Waitangi (Bridget Williams Books, 2022, pages 470–471).
85 Waitangi Tribunal, Te Mana Whatu Ahuru: Report on Te Rohe Pōtae claims parts I and II (2018, page 189).
86 Waitangi Tribunal, He Whakaputanga me Te Tiriti: The Declaration and the Treaty: Report on stage 1 of the Te Paparahi o Te Raki Inquiry (2014, page 499).
87 Waitangi Tribunal, Report of the Waitangi Tribunal on the Motunui-Waitara claim (1983, page 52).

Te kore whakahōnore i te Tiriti me te whai i te whenumitanga
Failure to honour te Tiriti o Waitangi and pursuing assimilation

73. For a short period after te Tiriti o Waitangi was signed tikanga Māori co-existed with the new colonial legal system. The colonial government made provisions for resolving issues where the two came into conflict.[88]

74. This approach changed from the mid-1840s. Governor Grey in particular believed that the best way forward for Aotearoa New Zealand was to assimilate Māori as quickly as possible. The 1852 Constitution Act established the first colonial parliament. It largely excluded Māori, as the collective nature of Māori land ownership meant that most did not individually have the right to vote.[89]

75. In response to settler pressure Grey chose not to implement a provision in the Constitution Act for self-governing Māori districts. After 1852, an assimilation policy was pursued together with the acquisition of Māori land under the Crown's pre-emptive right.[90] Māori resistance to this and land-selling eventually led to the foundation of the Kīngitanga (Māori King movement) in 1858.[91]

76. Legislation and policy after 1852 further paved the way for assimilation, including:

- the establishment of the Native Department in 1861. The department's purpose was to provide a political means of undermining the Kiingitanga movement, establish a government presence in Māori communities and undercut the political appeal of Māori chiefs[92]
- the Native Land Acts of 1862 and 1865. This led to the establishment of the Native Land Court in 1865 to determine customary ownership and convert Māori land into a freehold title that could be sold on the open market. The Native Land Court was key to assimilation and greatly facilitated the purchase of the bulk of Māori land in the North Island, converting it from collectively owned to individual title
- The Native Schools Acts of 1867 and 1871. This established schools for Māori children to prepare the next generation for assimilation
- the Māori Representation Act 1867. This act reserved four seats in the legislature for Māori representatives and established a separate Māori electoral roll.[93]

88 Fletcher, N, The English text of the Treaty of Waitangi (Bridget Williams Books, 2022, pages 470–471).
89 Waitangi Tribunal, Te Roroa Report (1992, page 28).
90 Williams, DV, "The continuing impact of amalgamation, assimilation and integration policies," Journal of the Royal Society of New Zealand 49(1) (2019, page 3); Boast, R, Te tango whenua: Māori land alienation (Te Ara – The Encyclopedia of New Zealand, 2008, updated 2015), http://www.TeAra.govt.nz/en/te-tango-whenua-maori-land-alienation.
91 Armitage, A, Comparing the policy of Aboriginal assimilation: Australia, Canada, and New Zealand (University of British Columbia Press, 1995, page 155); Waitangi Tribunal, Te Roroa Report (1992, page 28).
92 Armitage, A, Comparing the policy of Aboriginal assimilation: Australia, Canada, and New Zealand (University of British Columbia Press, 1995, page 171).
93 Armitage, A, Comparing the policy of Aboriginal assimilation: Australia, Canada, and New Zealand (University of British Columbia Press, 1995, page 156).

77. These laws and policies, among other Crown actions or omissions including the New Zealand Land Wars and confiscation of Māori land, undermined hapū and iwi authority and resulted in the mass alienation of Māori land. This affected Māori models of social organisation. The rapid pace of migration of European settlers especially from the 1850 onwards also made it increasingly difficult for whānau, hapū and iwi to effectively use and retain their remaining lands and way of life.[94]

78. Most hapū and iwi were deprived of their economic base, transforming them into a labouring class 'in half a generation'.[95] By 1920, most Māori were living in rural poverty as a result of 19th century legislation and Crown actions or omissions.[96]

Ka kōkiri te Māori i ngā whanaketanga
Māori advocate for change

79. In the face of these challenges, Māori found and proposed new solutions for themselves.

80. A new generation of leaders rose, including the prophets Rua Kēnana and Tahupōtiki Wiremu Rātana, Young Māori Party members Sir Āpirana Ngata, Māui Pōmare, Te Rangi Hīroa (Sir Peter Buck), and Te Puea Hērangi.[97] These leaders took very different approaches but were each instrumental in advocating for Māori.

81. Māori religious movements such as Pai Mārire and Ringatū in the 19th century and Rātana in the 20th century combined Māori beliefs with Christianity and became important spiritual, social and political movements.[98]

94 Boast, R, Te tango whenua: Māori land alienation (Te Ara – the Encyclopedia of New Zealand, 2008, updated 2015) http://www.TeAra.govt.nz/en/te-tango-whenua-maori-land-alienation.
95 Williams, J, "Build a bridge and get over it – the role of colonial dispossession in contemporary indigenous offending and what we should do about it," speech for the Robin Cooke Memorial Lecture 2019, reproduced in the New Zealand Journal of Public and International Law 18 (2020, page 3).
96 Binney, J, Basset, J & Olssen, E, The people and the land, Te Tangata me te Whenua: An illustrated history of New Zealand 1820–1920 (Bridget Williams Books, New Zealand 1993, page 214).
97 Williams, J, "Build a bridge and get over it – the role of colonial dispossession in contemporary indigenous offending and what we should do about it," speech for the Robin Cooke Memorial Lecture 2019, reproduced in the New Zealand Journal of Public and International Law 18 (2020, page 12); Shirley, I, Koopman-Boyden, P, Pool, I & St John, S, "Family change and family policies: New Zealand," in Kamerman, SB & Kahn, AJ (eds), Family change and family policies in Great Britain, Canada, New Zealand and the United States (Clarendon Press, 2007, page 209).
98 Ross, M, "The throat of Parata," in Kiddle, R, Elkington, B, Jackson, M, Mercier, O R, Ross, M, Smeaton, J & Thomas, A, Imagining decolonisation (Bridget Williams Books, 2020, page 30).

Ūpoko | Chapter 4
Ngā waiaro ā-pāpori whai pānga ki te wā Pakirehua
Societal attitudes relevant to the Inquiry period

82. Churches contributed to building the new settler society in Aotearoa New Zealand, including upholding a social order based on British laws and influenced by Christian values and morals.[99]

83. These societal attitudes meant that during much of the 20th century, Aotearoa New Zealand society expected people to fit in and conform to a narrow definition of what was normal.[100] This contributed to discrimination against indigenous and minority groups.[101]

84. Criminologist John Pratt highlights Aotearoa New Zealand's high rate of imprisonment across the Inquiry period compared to other OECD nations. He describes Aotearoa New Zealand as intolerant and overly punitive, resulting from:

> *"a crushing conformity, enforced by intense levels of formal and informal social control and fear of appearing different, fear of not belonging to and fear of being rejected by this tightly drawn homogenous community".*[102]

85. Key societal attitudes (power and control, racism, ableism and disablism, rigid gender roles and homophobia) that persisted across the Inquiry period are outlined below. The Inquiry returns to these attitudes throughout this report, demonstrating how they influenced who went into care and the experiences of children, young people and adults within the care system.

99 Tennant, M, "Magdalens and moral imbeciles: Women's homes in nineteenth-century New Zealand," Women's Studies International Forum, 9(5-6), (1986, pages 493-494); Lineham, P, "Trends in religious history in New Zealand: From institutional to social history," History Compass 12(4), (2014, page 336).

100 Guy, L, "'Straightening the queers' – medical perspectives on homosexuality in mid-twentieth century New Zealand," in Health and History, Volume 2, No 1 (2000, pages 101–120, page 108); Pratt, J, "The dark side of paradise: Explaining New Zealand's history of high imprisonment," British Journal of Criminology 46 (2006, page 553).

101 Guy, L, "'Straightening the queers' – medical perspectives on homosexuality in mid-twentieth century New Zealand," in Health and History, Volume 2, No 1 (2000, pages 101–120, page 108).

102 Pratt, J, "The dark side of paradise: Explaining New Zealand's history of high imprisonment," British Journal of Criminology 46 (2006, page 553).

Te mana me te aupēhitanga o te tokoiti o te pāpori
Power and control held by certain members of society

86. Power and control were common themes across the Inquiry period. In relation to care settings, power and control was exercised in different forms:

- State control – laws and policies, removing children from the home and disabled people from society
- Faith-based control – moral authority, trusted to take care of children and young people
- institutional control – hierarchical culture, ableist practices, seclusion, restraint and abusive practices
- individual control – moral authority and power imbalance.

87. In the 20th century, judges, politicians, police officers, doctors, clergy and other church leaders were highly respected, giving them power and influence over people. For example, doctors had the power to influence who went into disability and mental health settings. They were trusted by many in society to know what was best.[103] This included trust in the treatment they provided, as seen in the Beautiful Children: Inquiry into the Lake Alice Child and Adolescent Unit report. The Inquiry found that "staff at the unit had largely unchecked power over vulnerable patients".[104] Similarly, police officers, social workers and judges in the Children's Courts held power over who came before the court and what sentences they received. The churches and those who represented them operated with a high degree of impunity because of their standing in the community.[105]

103 Brookes, B, "Cherishing hopes of the impossible: Mothers, fathers, and disability at birth in mid-twentieth century New Zealand," in Light, T, Brookes, B & Mitchinson, W (eds), Bodily subjects: Essays on gender and health, 1800–2000 (McGill-Queen's University Press, 2014, pages 187–90), cited in Kaiwai, H & Allport, T, Māori with disabilities (Part two): Report commissioned by the Waitangi Tribunal for the Health Services and Outcomes Inquiry (Wai 2575), (2019, page 28).

104 Royal Commission of Inquiry into Abuse in Care, Beautiful children: Inquiry into the Lake Alice Child and Adolescent Unit (2022, pages 35 and 254).

105 Royal Commission of Inquiry into Abuse in Care, Stolen Lives, Marked Souls: The inquiry into the Order of the Brothers of St John of God at Marylands School and Hebron Trust (2023, page 323).

Kaikiri
Racism

Kaikiri torowhare
Institutional Racism

88. A 1986 report to the Minister of Social Welfare, titled Puao-te-Ata-Tū, found that New Zealand institutions – rooted in Pākehā values, systems, and viewpoints – had alienated Māori from their own lands and broken down traditional Māori society.[106] The report noted the history of colonisation was a "history of institutional decisions being made for, rather than by, Māori".[107]

89. Institutional racism refers to patterns of discrimination and unequal treatment of certain groups based on their race, ethnicity, skin colour or national origin, and results in unequal outcomes for these groups.[108] Researchers have described institutional racism as happening when a powerful group enforces its beliefs on others.[109] These beliefs are then built into State and institutional policy and practice such as in education, healthcare and law enforcement.

90. In Aotearoa New Zealand, the effects of institutional racism are shown in social statistics, for example, negative statistics in education, crime, child abuse, infant mortality, health and employment. The Puao-te-Ata-Tū Report of 1988 defined institutional racism as:

> *"The most insidious and destructive form of racism … It is the outcome of monocultural institutions which simply ignore and freeze out the cultures of those who do not belong to the majority."* [110]

91. Numerous reports and inquiries have shown that institutional racism in criminal justice (including the courts and NZ Police), social welfare and psychiatric systems contributed to the over-representation of young Māori in these settings.[111]

106 Māori Perspective Advisory Committee, Puao-te-ata-tu (day break): The report of the Ministerial Advisory Committee on a Māori perspective for the Department of Social Welfare (Department of Social Welfare, 1988, pages 18 and 57).
107 Māori Perspective Advisory Committee, Puao-te-ata-tu (day break): The report of the Ministerial Advisory Committee on a Māori perspective for the Department of Social Welfare (Department of Social Welfare, 1988, page 18).
108 National Museum of African American History and Culture website, Being antiracist (accessed 5 May 2022), https://nmaahc.si.edu/learn/talking-about-race/topics/being-antiracist.
109 Lee, J, Jade Taniwha: Māori-Chinese identity and schooling (Rautaki, 2007, pages 29–30).
110 Māori Perspective Advisory Committee, Puao-te-ata-tu (day break): The report of the Ministerial Advisory Committee on a Māori perspective for the Department of Social Welfare (Department of Social Welfare, 1988, page 19).
111 Hampton, RE, Delinquency and social processes: labelling theory and the police decision to prosecute juveniles, Master's Thesis, (University of Auckland 1973); in Witness statement of Dr Oliver Sutherland (15 October 2019, page 2); Savage, C, Moyle, P, Kus-Harbord, L, Ahuriri-Driscoll, A, Hynds, A, Paipa, K, Leonard, G, Maraki, J & Leonard, J, Hāhā-uri, hāhā-tea: Māori involvement in State care 1950–1999 (Ihi Research, 2021, pages 136, 149, 231, 271); Māori Perspective Advisory Committee, Puao-te-ata-tu (day break): The report of the Ministerial Advisory Committee on a Māori perspective for the Department of Social Welfare (Department of Social Welfare, 1988, pages 16, 24).

92. Pacific Peoples also experienced strong institutional racism during the Inquiry period, particularly for their children and youth population. Racism and European society's attitudes towards perceived juvenile delinquency led to the over-surveillance of Pacific children and young people, bringing them to the attention of social welfare and youth justice agencies.

93. Racism was also present in faith-based care settings. For example, the Inquiry's interim report Stolen Lives, Marked Souls refers to evidence of racism within the Order of the Brothers of St John of God.[112]

Kaikiri ā-ahurea
Cultural racism

94. Cultural racism is found in fixed philosophies and beliefs. "Cultural racism is manifested by negative attitudes to the culture and lifestyle of a minority culture."[113]

95. In Aotearoa New Zealand, cultural racism appears as a widespread belief that Pākehā culture, lifestyle and values are better than other cultures. It has directed practices of colonisation and assimilation and is passed on to successive generations.[114]

Kaikiri (Matawhaiaro)
Racism (personal)

96. Personal racism happens when an individual is directly diminished or discriminated against on grounds of race. In Aotearoa New Zealand this could look like:

- jokes, disparaging comments and prejudiced attitudes
- being denied access to resources and opportunities in areas of society such as rental housing, work, health and education.

97. Personal racism attacks an individual's identity and wellbeing and destroys their self-worth.[115] The Inquiry's previous reports discussed racism experienced by Māori and Pacific survivors in care settings, reflecting the widespread discrimination and racism in society.[116]

112 Royal Commission of Inquiry into Abuse in Care, Stolen Lives, Marked Souls: The Inquiry into the Order of the Brothers of St John of God at Marylands School and Hebron Trust (2023, pages 152–153).
113 Māori Perspective Advisory Committee, Puao-te-ata-tu (day break): The report of the Ministerial Advisory Committee on a Māori perspective for the Department of Social Welfare (Department of Social Welfare, 1988, page 19).
114 Māori Perspective Advisory Committee, Puao-te-ata-tu (day break): The report of the Ministerial Advisory Committee on a Māori perspective for the Department of Social Welfare (Department of Social Welfare, 1988, pages 18, 57 and 77).
115 Māori Perspective Advisory Committee, Puao-te-ata-tu (day break): The report of the Ministerial Advisory Committee on a Māori perspective for the Department of Social Welfare (Department of Social Welfare, 1988, page 77).
116 Royal Commission of Inquiry into Abuse in Care, He Purapura Ora, he Māra Tipu: From Redress to Puretumu Torowhānui, Volume 1 (2021, pages 36–39); Royal Commission of Inquiry into Abuse in Care, Beautiful children: Inquiry into the Lake Alice child and adolescent unit (2022, pages 136–138); Royal Commission of Inquiry into Abuse in Care, Stolen Lives, Marked Souls: The Inquiry into the Order of the Brothers of St John of God at Marylands School and Hebron Trust (2023, page 153).

Te hāpai toiora me te whakatoiharawhaikaha
Ableism and disablism

98. During the Inquiry period, the settlers' and faiths' focus on creating a better society emphasised the importance of physical and mental fitness. This drew attention to people whose bodies and minds were seen as different.[117] The connected concepts of ableism and disablism describe the way that society's beliefs had a profound effect on how disabled people were treated. Although the words ableism and disablism are sometimes used interchangeably, some disabled people prefer the definitions set out below.[118]

99. Ableism is a belief system that values certain physical and mental characteristics, based on what society views as 'normal', productive and desirable.[119] Ableism values non-disabled people over disabled people. The beliefs underpinning the eugenics movement are an example of ableism. Ableism continues to be widespread and systemic in Aotearoa New Zealand, and directed affects how society treats disabled people. These values and attitudes are so ingrained in society's structures and institutions that many people are not aware they are thinking in an ableist way.

100. Disablism is the acts of discrimination against, and abuse or neglect of, disabled people that result from the ableist belief that they are less 'valuable' than non-disabled people. Examples of disablism include:

- using a slur or derogatory word to describe a disabled person
- thinking that disabled people are helpless or a burden on society
- ignoring someone who is disabled or speaking condescendingly to them
- denying a disabled person medical treatment or treating them differently to non-disabled patients
- assuming that a disabled person cannot do something.

101. For Deaf people, disablism can also take the form of audism. The ableist belief that values oral communication of non-oral communication (such as sign language) results in audism – discrimination against Deaf people and hard of hearing people. Examples of audism include:

- forcing someone to use oral communication instead of sign language
- assuming someone is not intelligent if they do not use oral communication
- assuming that being Deaf or hard of hearing is a 'tragedy'.

117 Kaiwai, H & Allport, T, Māori with disabilities (Part two): Report commissioned by the Waitangi Tribunal for the Health Services and Outcomes Inquiry (Wai 2575), (2019, page 18).
118 Sense: The National Deafblind and Rubella Association website, Ableism and disablism (November 2022), https://www.sense.org.uk/information-and-advice/ableism-and-disablism.
119 Mirfin-Veitch, B, Tikao, K, Asaka, U, Tuisaula, E, Stace, H, Watene, FR & Frawley, P, Tell me about you: A life story approach to understanding disabled people's experiences in care (1950–1999), (Donald Beasley Institute, 2022, page 15).

Te kaupapa tutū ira me te tauira hauora whaikaha
The eugenics movement and medical model of disability

102. Eugenics was a social and political 19th and 20th century movement that believed unwanted genetic characteristics could be bred out of the human population. These characteristics included traits and behaviours considered undesirable, such as committing crimes, being poor, having sex outside of marriage, mental distress, learning difficulties and having a small stature.[120]

103. Over the early decades of the 20th century, the eugenics movement influenced State measures to identify, classify, group and segregate disabled people and people who experienced mental distress from the rest of society.[121]

104. Society also held a general fear of mental distress that was perpetuated by the State, faiths and widespread acceptance of the medical model of disability. This refers to disability being seen as "an individual's problem, something wrong or broken that could be cured or contained".[122] The model is explored further in the Inquiry's Beautiful Children: Inquiry into the Lake Alice Child and Adolescent Unit report.[123]

120 Witness statement of Dr Hilary Stace to support evidence given at the Inquiry's Contextual Hearing (1 November 2019, paras 24–37); Moore, A & Tennant, M, Who is responsible for the provision of support services for people with disabilities? A discussion paper commissioned by the National Health Committee (1997, page 17).
121 Swarbrick, N, Care and carers: Care of people with disabilities (Te Ara – The Encyclopedia of New Zealand 2011, page 4), http://www.TeAra.govt.nz/en/care-and-carers/page-4.
122 Sullivan, M & Stace, H, A brief history of disability in Aotearoa New Zealand (Office for Disability Issues, 2020, page 18).
123 Royal Commission of Inquiry into Abuse in Care, Beautiful children: Inquiry into the Lake Alice child and adolescent unit (2022).

Ngā waiaro ki te hunga Turi
Attitudes towards Deaf people

105. As discussed in Part 1, many Deaf people do not consider they are disabled, rather they are part of a cultural and linguistic group for whom sign language is a key marker of identity.

106. In the 19th century Deaf people were often referred to as "deaf-mutes" or "deaf and dumb" and seen as infirm.[124] In 1880, the Milan Conference declared that sign Language in Deaf education be abolished.[125] In its place, it recommended oralism, which focused on lipreading and speaking aloud rather than sign Language.

107. That same year, the Sumner Institution for the Deaf and Dumb opened in Ōtautahi Christchurch. It changed its name to Van Asch College in 1980, and to the Van Asch Deaf Education Centre in 1995. In 2020 it combined with Kelston Deaf Education Centre in Tamaki Makaurau Auckland to become Ko Taku Reo: Deaf Education New Zealand.

108. Aotearoa New Zealand, like many countries, chose to follow the recommendation to stop teaching any form of sign language in schools[126] and the practice continued until the mid-1970s. Up until 1979, the Department of Education (now the Ministry of Education) banned sign language from the classroom. In some schools, it was banned in the playground and in boarding residences.[127]

124 Smiler, K & McKee, RL, "Perceptions of Māori deaf identity in New Zealand," Journal of Deaf Studies and Deaf Education 12(1), (2007, pages 93–111).
125 McKee, R, People of the eye: Stories from the Deaf world (2001), in Powell, D & Hyde, M, "Deaf Education in New Zealand: Where we have been and where we are going," Deafness & Education International, 16(3), (2014, pages 129–145, page 130).
126 Powell, D & Hyde, M, "Deaf Education in New Zealand: Where we have been and where we are going," Deafness & Education International, 16(3), (2014, pages 129–145, page 130).
127 Hopkins, R, Listening eyes, speaking hands: The story of Deaf education in New Zealand (Ministry of Education, 2018).

He māramatanga ki te kanorautanga ā-hinengaro, te mate waipiro ki te kōpū me te wharaūpoko
Understanding of neurodiversity, foetal alcohol spectrum disorder and head injury

109. For some survivors, their entry into care may have been due to undiagnosed neurodivergence, foetal alcohol spectrum disorder (FASD) or head injuries (traumatic brain injury), which are a common cause of disability for children and young people in Aotearoa New Zealand.[128]

110. These conditions were poorly understood for much of the Inquiry period and diagnosis and treatment was limited. The conditions were generally considered incurable, so the people were congregated and separated from society instead.[129]

111. Before 1980, autistic children were often misdiagnosed as having childhood schizophrenia. The characteristics associated with being autistic, such as intense anxiety and escalating behaviours, often resulted in children and young people who were in care being sedated, restrained or kept in seclusion.[130] This was also the case for autistic adults.[131]

112. For children with attention deficit hyperactive disorder, a lack of understanding of the condition meant that many people did not see them as having additional support needs but rather as difficult and needing to be disciplined. They could be seen as too hard to manage and institutionalised in special schools or psychopaedic hospitals. Like autistic people, they were often sedated or disciplined for their behaviour.[132]

113. The Inquiry heard from expert witnesses that without correct diagnosis, neurodiversity can look like aggression or misbehaviour. Today it is understood that neurodivergent people in care could be experiencing anxiety and distress due to being in environments inappropriate for their needs.[133]

114. It was not until the Diagnostic and Statistical Manual of Mental Disorders (DSM) was revised in 1987 that a clinical understanding of autism spectrum disorder and neurodiversity was available.

128 Witness statement of Dr Teuila Percival (6 June 2022, page 10).
129 Webb, OJ, The likely impact of prevailing conditions and environments on people now considered to be neurodiverse, between 1950 and 1990, Paper prepared for the Royal Commission of Inquiry into Abuse in Care (2022, page 10).
130 Webb, OJ, The likely impact of prevailing conditions and environments on people now considered to be neurodiverse, between 1950 and 1990, Paper prepared for the Royal Commission of Inquiry into Abuse in Care (2022, pages 8–9).
131 Webb, OJ, The likely impact of prevailing conditions and environments on people now considered to be neurodiverse, between 1950 and 1990, Paper prepared for the Royal Commission of Inquiry into Abuse in Care (2022, page 10).
132 Webb, OJ, The likely impact of prevailing conditions and environments on people now considered to be neurodiverse, between 1950 and 1990, Paper prepared for the Royal Commission of Inquiry into Abuse in Care (2022, page 12).
133 Witness statement of Dr Teuila Percival (6 June 2022, page 9).

115. Traumatic brain injury affects the parts of the brain that help with self-regulation and self-control. It also increases the risk of behavioural issues and mental distress.[134] It is the leading cause of long-term disability in children. In Aotearoa New Zealand, a 2013 study found that children (aged 0–14), and young people and young adults (aged 15–34) made up almost 70 percent of all traumatic brain injury cases.[135] Some international evidence shows that young people in custody have a greater incidence of traumatic brain injury than is found in the general population.[136]

116. Aotearoa New Zealand does not have any specific study on traumatic brain injury in children or young people in foster care or the youth residential system. However, traumatic brain injuries have been shown to be more common in people in the justice system than in the public in Aotearoa New Zealand. A 2017 paper prepared by the Justice sector found that people with traumatic brain injuries accounted for 34 percent of people facing police proceedings and 46 percent of people imprisoned, compared with 13 percent of the general population.[137]

117. FASD is still not well understood or recognised by health professionals today.[138] However, there is increasing awareness worldwide that people with FASD are over-represented in the criminal justice system.[139]

118. While interacting with institutional structures and systems and without adequate support, children, young people and adults in care with FASD may find it difficult to reason, use judgement, make decisions, match their emotions and behaviour to social situations and think through consequences.[140]

134 Witness statement of Dr Teuila Percival (6 June 2022, page 12).
135 Feigin, VL, Theadom, A, Barker-Collo, S, Starkey, NJ, McPherson, K, Kahan, M, Dowell, A, Brown, P, Parag, V, Kydd, R, Jones, K, Jones, A, Ameratunga, S & BIONIC Study Group, Incidence of traumatic brain injury in New Zealand: a population-based study, The Lancet Neurology, Volume 12:1 (2013, pages 53–64).
136 Witness statement of Dr Teuila Percival (6 June 2022, page 12).
137 Horspool, N, Crawford, L & Rutherford, L, Traumatic brain injury and the criminal justice system: Crime and justice insights (Justice Sector, 2017, page 1).
138 Witness statement of Dr Teuila Percival (6 June 2022, page 9).
139 Lambie, I, What were they thinking? A discussion paper on brain and behaviour in relation to the justice system in New Zealand (Office of the Prime Minister's Chief Science Advisor, 2020, page 24).
140 Witness statement of Dr Valerie McGinn (29 May 2022, page 6).

Te whakahāwea wāhine, kōtiro hoki
Discrimination against women and girls

119. Europeans came to Aotearoa New Zealand at a time when the idea of the nuclear family with the husband/father figure as the household leader was emerging. European women did not have independent legal identities and their bodies and children were considered the property of their husbands.[141] Women carried the main responsibility for childcare and housekeeping and faced legal and social barriers to participation in civil life and employment.[142]

120. In the 19th century, churches established women's homes in response to concerns about prostitution and women's sexuality, to address what they saw as unhealthy sexual behaviour and a threat to morality. Missionaries sought to 'rescue' women seen to be at risk.

121. The rigid gender roles of the 19th century continued into the 20th century. For a large part of the 20th century, unmarried mothers were viewed as a social problem and as incapable of providing adequate care for their children.

122. In the 1950s, after the disruption of the Second World War, gender and class roles became more tightly enforced. Society often discriminated against working women, unmarried mothers and sexually active young women. There was growing public concern about rising sexual promiscuity among teens, particularly focused on the behaviour of teenage girls.[143]

123. Access to contraception was restricted for the first two decades of the Inquiry period due to a combination of moral concerns and a continuing State focus on social stability through the nuclear family, traditional gender roles and sustaining the Pākehā birth rate.[144] Both unmarried and married women could struggle to access birth control, with doctors described as "the guardians of health and to some degree the morals of the community."[145]

124. Women's wages were lower than men's across the Inquiry period. For at least the first three decades of the Inquiry period women had a limited range of low wage career options, including teaching, nursing clerical work, cleaning, sewing and shop work.[146] Combining work with caring for children and other family members added further challenges to women's ability to be financially independent.[147] By 1970, women were still facing barriers to participation in society including gendered violence and limited access to some public spaces (such as bars), childcare for working mothers, and healthcare.[148]

141 Salmond, A, Tears of Rangi: Experiments across worlds (Auckland University Press, 2017, pages 388, 390).
142 Brookes, B, A, history of New Zealand women (Bridget Williams Books, 2016, pages 16 and 18 – 19).
143 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, pages 190–191).
144 Smyth, Helen, Rocking the cradle: contraception, sex and politics in New Zealand (Steele Roberts Ltd, 2000, pages 67–70).
145 Smyth, Helen, Rocking the cradle: contraception, sex and politics in New Zealand (Steele Roberts Ltd, 2000, page 29).
146 Brookes, B, A history of New Zealand women (Bridget Williams Books, 2016, pages 309, 425).
147 Brookes, B, A history of New Zealand women (Bridget Williams Books, 2016, page 386).
148 Dann, C, Up from under: women and liberation in New Zealand 1970–1985 (Allan and Unwin, 1985, pages 5, 8–9, 10, 14).

Te whakahāwea i runga i te aronga hemahematanga me te tuakiri ia
Discrimination on the basis of sexual orientation and gender identity

125. Homosexuality was considered a psychiatric disorder until 1973 in Aotearoa New Zealand.[149] Medicalisation of homosexuality peaked in the 1950s and 1960s and included conversion practices with the aim of changing a person's sexual identity or gender expression.[150]

126. Sexual relations between adult men were decriminalised in Aotearoa New Zealand in 1986. Before 1993, there was no legal protection from discrimination in employment, education, access to public places, provision of goods and services, and housing and accommodation on the grounds of sexual orientation or gender identity.[151]

127. Sexual relations between adult women were not illegal, but many lesbians suffered the same social discrimination as gay men. Data collection in New Zealand on sexual orientation and gender identity was non-existent, meaning there was no ability for rainbow people to be counted. This lack of visibility was a barrier to receiving specific targeted funding and assistance.

149 Included in the Diagnostic and Statistical Manual of Mental Disorders (DSM) until 1973.
150 Bennett, J & Brickell, C, Surveilling the mind and body: Medicalising and de-medicalising homosexuality in 1970s New Zealand (Cambridge University Press, 2018, page 199).
151 Human Rights Act 1993.

Ngā waiaro ki ngā tamariki me ngā rangatahi
Attitudes towards children and young people

128. Social attitudes towards children and young people during the Inquiry period could be harsh.

129. David Ausubel, an American psychiatrist and psychologist who was a Fulbright scholar at Victoria University in Te Whanganui-ā-Tara Wellington in the late 1950s, described adult-child relationships in Aotearoa New Zealand as still being Victorian.[152]

130. He thought Aotearoa New Zealand had an "authoritarian, moralistic and punitive approach" to youth and that normal child and adolescent misbehaviour were dealt with by overly strict discipline.[153] His perception as a visitor to Aotearoa New Zealand was that New Zealanders did not seem to value open, warm relationships with children and young people and that their rights and dignity were not respected.[154]

131. These attitudes were also reflected in Aotearoa New Zealand's low age of criminal responsibility. In 1950, the age of criminal responsibility was 7 years old. It was raised to 10 years old in 1961 and remained at that age for the rest of the Inquiry period.[155] Children and young people aged from 7 to 14 could be convicted of an offence if the court considered that they knew what they had done was wrong.[156]

132. Children and young people in care settings were often viewed as troublemakers, inferior and flawed. Some people considered children and young people in care as beyond reform and deserving of punishment.[157]

133. Harsh attitudes could criss-cross with other prejudices. Although most girls entering the care system had experienced prior sexual assault,[158] this was often attributed to their own promiscuity and characterised as deviant sexual behaviour. Māori girls were particularly singled out by authorities as having a lax attitude toward sex and considered to be delinquent in nature.[159]

152 Ausubel, D, The fern and the tiki: an American view of New Zealand national character, social attitudes and race relations (Holt, Rinehart and Winston Inc, 1960, page 42).
153 Ausubel, D, The fern and the tiki: an American view of New Zealand national character, social attitudes and race relations (Holt, Rinehart and Winston Inc, 1960, page 54).
154 Ausubel, D, The fern and the tiki: an American view of New Zealand national character, social attitudes and race relations (Holt, Rinehart and Winston Inc, 1960, pages 54–55).
155 Crimes Act 1961, section 21.
156 Crimes Act 1961, section 22(1).
157 Maxwell, G, Youth offenders: Treatment of young offenders, 1840 to 1980s (Te Ara – The Encyclopedia of New Zealand, 2011, page 2), http://www.TeAra.govt.nz/en/youth-offenders/page-2.
158 Von Dadelszen, J, Sexual abuse study: an examination of the histories of sexual abuse among girls currently in the care of the Department of Social Welfare (Department of Social Welfare, 1987).
159 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, pages 190–191).

Ngā waiaro ki ngā tāngata e noho pōhara ana
Attitudes towards people living in poverty

134. Families and communities experiencing poverty often faced judgement, multiple stressors such as issues with income and housing instability, and lacked the time and resources to forge strong social connections.[160] Social stories and beliefs about poverty in Aotearoa New Zealand – for example, in the media – represented poor families as a dangerous social underclass characterised by moral decline, welfare-dependency, large families and criminality.[161] The Inquiry heard from Pākehā, Māori and Pacific survivors who were impacted by these attitudes, along with their wider families.

135. Research shows poverty is a significant contributing factor for children entering care, and for families and communities experiencing generations of State and faith-based involvement. The report Cracks in the Dam looks at how social and economic forces impacted the care system in Aotearoa New Zealand, stating that:

> *"compared to children in the richest fifth of local areas, children in the poorest fifth areas have 13 times the rate of 'substantiation' (a finding by child protection officials that abuse has occurred). They are also six times more likely to be placed out of their family's care".*[162]

136. These higher rates of findings that abuse has occurred can be due to factors such as negative attitudes towards poorer communities, over-surveillance, racism and bias and lack of services that support families.[163]

160 Rashbrook, M & Wilkinson, A, Cracks in the dam: The social and economic forces behind the placement of children into care (2019, pages 4–5).
161 Beddoe, L, "Feral families, troubled families: The spectre of the underclass in New Zealand," New Zealand Sociology, Volume 29, Issue 3 (2014, pages 52–53).
162 Rashbrook, M & Wilkinson, A, Cracks in the dam: The social and economic forces behind the placement of children into care (2019, page 6).
163 Rashbrook, M & Wilkinson, A, Cracks in the dam: The social and economic forces behind the placement of children into care (2019, page 6); Hyslop, I & Keddell, E, Changes needed to the current system of child protection and care in Aotearoa, Expert opinion prepared for the Royal Commission of Inquiry into Abuse in Care (7 June 2022, page 8).

Te wāhi o te ao pāpāho ki te whakaū i ngā waiaro ā-pāpori
Media's role in enforcing societal attitudes

137. Throughout the Inquiry period media depictions often reinforced negative stereotypes towards Māori, Pacific Peoples, and disabled people who experienced poverty and people who experienced mental distress.

Ngā arotoka whakakino mō te Māori i whakaū
Negative stereotypes of Māori were reinforced

138. Māori have consistently been discriminated against through the media. This started with colonial news media wanting to depict Māori as threatening, immoral and violent to fit with the view that Māori needed civilising and to "discredit their struggle for land and rights".[164]

139. From 1950 to 1999 the media continued discriminating against Māori, often with sensationalised stories. A 1952 article in The Press discussing the health of Māori children quoted a Department of Health official who suggested that Māori mothers spent the child benefit on sweets, taxis and gambling and were partially to blame for Māori infant mortality.[165]

140. Consistent themes used by the media during the Inquiry period include:

- the 'Māori violence' theme, which portrays Māori as more likely to be violent and in need of control on account of their presumed 'danger'
- the 'stirrers' theme, which depicts Māori who challenge the status quo as troublemakers
- the 'good Māori/bad Māori' theme, which portrays Māori who resist, demand recognition or seek restitution as bad
- the 'Māori resources' theme, which constructs potential or actual Māori control of land, fisheries or money as a threat to others
- the 'financial probity' theme, which involves persistent depictions of Māori as corrupt or economically incompetent.[166]

141. The 'Māori violence' theme is the most significant when considering how tamariki and rangatahi Māori were removed from whānau and entered the care system. The media contributed to sustaining the narrative that Māori parents were more likely to be violent by having a disproportionate focus on child abuse and crime relating to tamariki and rangatahi Māori.[167] This is a continuation of racist 19th century views of Māori, particularly Māori men, as primitive and savage.[168]

164 McCreanor, T, Rankine J, Moewaka Barnes, A, Borell, B, Nairn, R & McManus A-L, "The association of crime stories and Māori in Aotearoa New Zealand print media," Sites: New Series 11(1) (2014, pages 121–144, page 123).
165 "Health of Māori children: Shorter expectation of life," The Press (5 April 1952, page 2).
166 McCreanor, T, Rankine J, Moewaka Barnes, A, Borell, B, Nairn, R & McManus A-L, "The association of crime stories and Māori in Aotearoa New Zealand print media," Sites: New Series 11(1) (2014, pages 121–144, page 125).
167 Rankine, J, Nairn, R, Moewaka Barnes,A, Gregory, M, Kaiwai, H, Borell, B & McCreanor, T, Media & Te Tiriti o Waitangi 2007 (Tamaki Makaurau/Auckland: Kupu Taea: Media and Te Tiriti Project, 2008, page 10).
168 Hokowhitu, B, Tackling Māori Masculinity: A Colonial Genealogy of Savagery and Sport, The Contemporary Pacific, Volume 4:2 (2004, pages 264–265).

I kaha ake te whakatoihara i te hunga penihana
Prejudice against people on benefits was heightened

142. Media stories during the Inquiry period tended to heighten fear and prejudice about 'dangerous' and welfare-dependent families and communities.[169] From the 1970s there was prejudice towards solo mothers receiving the Domestic Purposes Benefit (DPB). Five years after it was introduced, the State established the Domestic Purposes Review Committee to look at the reason for the rising number of parents receiving the DPB and whether "the provision of the benefit was influencing marital and reproductive behaviour".[170]

143. The media often framed any stories on the Committee's findings negatively, even though the data used by the Committee was incorrect and misleading.[171] For example, the media focused on the costs to the taxpayer[172] and whether the benefit provided an incentive for women to leave their husbands.[173]

144. Newspapers also discussed cases where women were seen to be "ripping off" the system by receiving a benefit while in a de facto relationship.[174] People on the benefit were often referred to as bludgers[175], spongers[176] or milking the system.[177] These attitudes intersected with racism where narratives about Māori and poverty combined to represent a double burden in how Māori were depicted in the media.[178]

169 Beddoe, L, Feral families, troubled families: The spectre of the underclass in New Zealand, New Zealand Sociology, Volume 29, Issue 3 (2014, page 53).
170 Goodger, K, "Maintaining sole parent families in New Zealand: An historical review," Social Policy Journal of New Zealand, Issue 10 (June 1988, page 15).
171 Goodger, K, "Maintaining sole parent families in New Zealand: An historical review," Social Policy Journal of New Zealand, Issue 10 (June 1988, pages 15–16).
172 Brown, K, "Pregnant teenagers," The Press (18 December 1981, page 12); "Effects of the DPB," The Press (15 December 1984, page 18); "Benefit cost deplored," The Press (23 May 1977, page 2); "Spending 'must be pared'," The Press (8 May 1989, page 3).
173 Swain, D, "Children, families, law and social policy in Aotearoa New Zealand," Journal of Comparative Family Studies, 18(2) (1987, pages 175–206, page 195); Saville-Smith, K, "Women and the state," in Cox, S (ed), Public and private worlds: Women in contemporary New Zealand (Allen and Unwin, 1987, page 206); "Minister defends counselling," The Press, (15 July 1977, page 4); "Mr Walker promises to prevent abuses," The Press (24 March 1977, page 4).
174 "Mr Walker promises to prevent abuses," The Press (24 March 1977, page 4); "Illegal benefit admissions," The Press (27 March 1976, page 2); "Police will not prosecute," The Press (25 May 1976, page 12).
175 "Spending 'must be pared'," The Press (8 May 1989, page 3).
176 "Mr Walker promises to prevent abuses," The Press (24 March 1977, page 4).
177 "Mr Walker promises to prevent abuses," The Press (24 March 1977, page 4).
178 Berenston-Shaw, J, Telling a new story about child poverty in New Zealand, report prepared for the Policy Observatory (Auckland University Press, 2018, page 5).

Te whakahāwea i ngā tāngata e rongo ana i te wairangitanga
Discrimination against people experiencing mental distress

145. For people suffering from mental distress, media depictions often portrayed them as dangerous and linked mental distress with "violence, failure, and unpredictability."[179]

146. A study into how Aotearoa New Zealand print media discriminated against people suffering from mental distress found that the public got most of their information about mental illness from the media.[180]

147. People suffering from mental distress rarely had their personal perspectives shared. The media usually used the perspectives of medical professionals or people without lived experience to create the narrative.[181] The second Mason Report in 1996 reported the Association of Crown Health Enterprise (CHE) Mental Health Managers as saying:

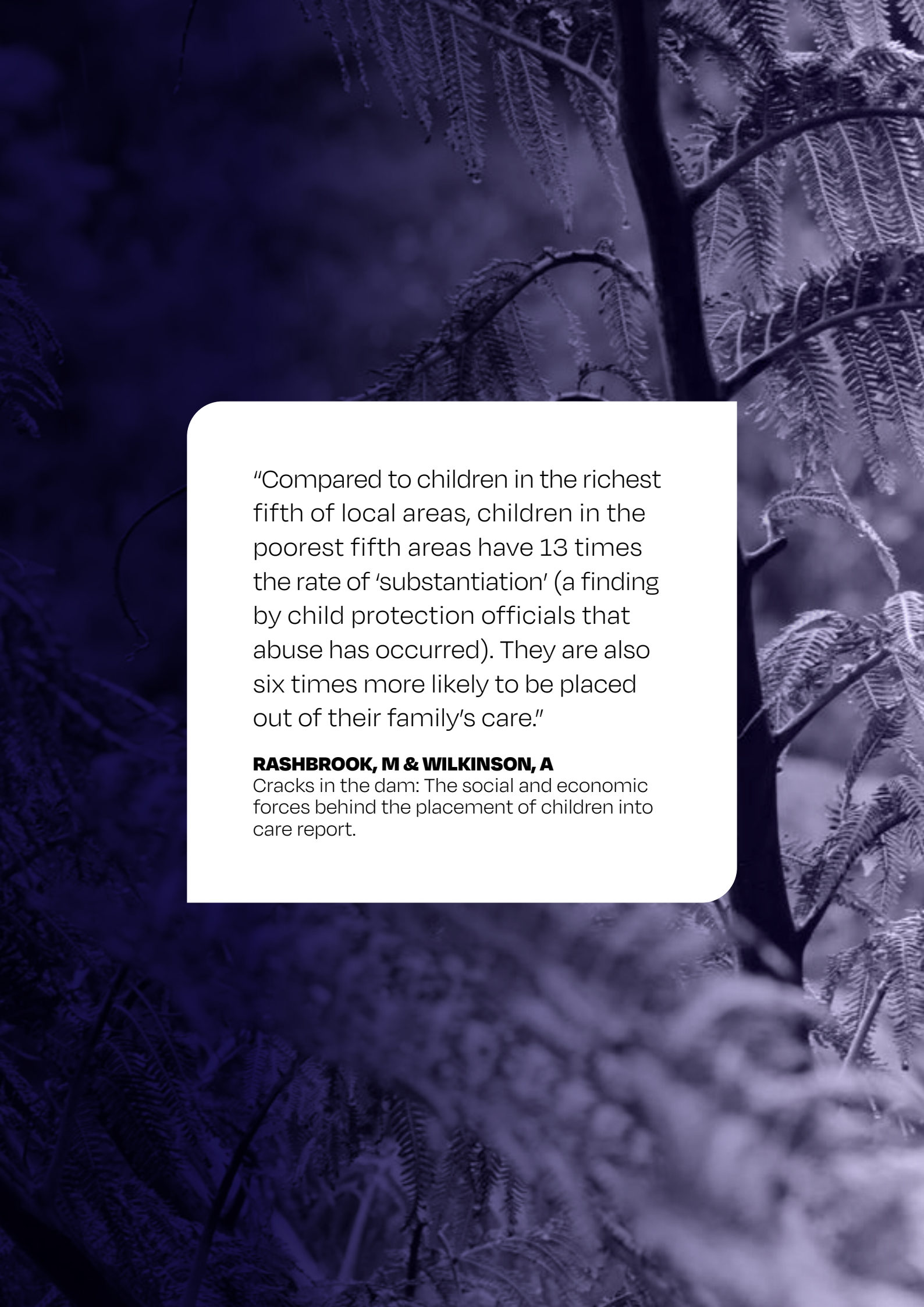
> *"There is also some concern that the media and political portrayal of psychiatric patients as offenders, paedophiles, etc. will deter some people from using the service when needed – either because of fear of other patients or of being seen as one of that group.*
>
> *Negative publicity commonly leads to a breach of clients' rights in that they are discriminated against (often not intentionally) due to the anxiety provoked within the public."*[182]

179 Nairn, R, Coverdale, J & Claasen, D, "From source material to news story in New Zealand print media: a prospective study of the stigmatizing processes in depicting mental illness," Australian and New Zealand Journal of Psychiatry, 35(5), (2001, pages 654–659, page 654).

180 Nairn, R, Coverdale, J & Claasen, D, "From source material to news story in New Zealand print media: a prospective study of the stigmatizing processes in depicting mental illness," Australian and New Zealand Journal of Psychiatry, 35(5) (2001) pages 654–659, page 654).

181 Nairn, R, "Does the use of psychiatrists as sources of information improve media depictions of mental illness? A pilot study," Australian and New Zealand Journal of Psychiatry, 33(4), (1999, pages 583–589, page 584).

182 Mason, K, Report of the Ministerial Inquiry to the Minister of Health Hon Jenny Shipley – Inquiry under section 47 of the Health and Disability Services Act 1993 in respect of certain mental health services (Information Centre, Ministry of Health, 1996, page 163).



"Compared to children in the richest fifth of local areas, children in the poorest fifth areas have 13 times the rate of 'substantiation' (a finding by child protection officials that abuse has occurred). They are also six times more likely to be placed out of their family's care."

RASHBROOK, M & WILKINSON, A
Cracks in the dam: The social and economic forces behind the placement of children into care report.


"It was
a big shame
I could never fulfil
my potential because
nobody gave a shit."
DEBBIE MORRIS-JENKINS
Survivor

Debbie Morris-Jenkins

Hometown: Ōtautahi Christchurch **Year of birth:** 1976

Time in care: 1981–1983

Type of care facility: Children's home – Christchurch Methodist Children's Home; foster homes – private faith foster homes.

Whānau background: Debbie is third of five children, and three of them went into care. Her parents did not have a happy marriage, and her father spent time in Sunnyside Hospital.

Currently: Debbie has a supportive partner, and her children know about her childhood and have told her they are proud of what she's come through and achieved. The consequences of the trauma she experienced continue to impact both Debbie and her whānau, and often create friction within the whānau including outbursts and arguments. After going through church redress, she received financial compensation from the Methodist Church.

Mum and Dad had been in the Cooperites – Neville Cooper's Christian community in Springbank. We escaped after they saw things going wrong in the community, but we didn't have a lot of support. Dad would do house painting to try and get by, but Mum was disabled – she had hip replacements – and couldn't care for five children. Basically, their marriage fell apart, they couldn't cope and started drinking, so people at their church encouraged them to send us to the Methodist Children's Home in Christchurch.

My oldest sister and the baby stayed with Mum but the rest of us were put in the home.I didn't have much to take aside from a nightie and a wee panda bear. The bear was special, it was the only real possession I had.

My caregiver at the home was mean and horrible. One night I vomited on my panda bear, and she made me throw it away. If I wet the bed, she'd give me a smack and make me sleep in it. Given the slightest chance, she'd ridicule and punish us. Once, my brother and I didn't want to eat some pumpkin, so we dropped it under the table. She made us eat it off the floor like dogs.

In the Cooperites, your hair was your crowning glory and Mum had always said, "Don't ever cut your hair or I'll never speak to you again". But in the home, we had to line up outside in the freezing cold with bowls on our head to get a haircut. I bawled my eyes out, but they just smacked me.

We were targeted horrendously at school, even by the teachers, who would whack us with their rulers. And if we were punished at school, we'd also get punished at the home. I felt like I was punished the whole time.

In the school holidays we were told someone would pick us up and then we had to go with those people, not knowing who they were. When I was about 6 or 7 years old, a couple took me for two weeks. She wasn't around a lot, and he raped me daily. They lived in a grey brick house, with flats down the back. He would put a towel on the bed, give me a dolly and use it to show me what we were going to do. Then he'd just get on me and rape me. I was just a little girl and I'd be screaming in pain, wondering why the neighbours couldn't hear me as they were so close. Then he'd say, "Don't tell anyone, it's our secret".

I think I was there near the end of my stay at the children's home because I remember when Dad got me from the home, I thought, "Thank God I won't have to go back to that foster couple again".

The thought he might have done it to someone else has tormented me over the years.

When I was 13 or 14, I broke down and told Mum what had happened. I had never told anyone else, it was such a shameful thing. She took me to the police and I was so mortified, embarrassed and ashamed that I just clammed up and didn't speak much. They told Mum they wouldn't pursue it as there wasn't any evidence – it was my word against his.

I trusted the police and they didn't listen to what I was saying. They just assumed I was making things up and wasting police time. Years later I saw the police report and the reasons for not prosecuting my foster carer. It said the police doctor found that I'd lost my virginity but could've lost it riding a horse or falling off a bike. I ended up burning the report because it was so traumatising.

I was a rebellious teenager, but I started to rebel even more after that. I got expelled from school at one stage – surely adults should have wondered why? I mean, if you've had a normal life and everything's going okay, you don't do things like that.

A few months after I told the police, my mother's boyfriend drugged and raped me. We had to go back to the police station again, but he'd used a date rape drug that leaves your system quite quickly, so there was no evidence and he got away with it. After that, I started to rebel even more, hanging out with gangs and bad people. I ended up being gang raped by the Road Knights. But that was just my life – I thought there was no point in telling anyone because when I did, no one listened. I thought it was my fault because it happened so much, and I must have put myself in that situation. So I didn't go to the police, I just kept it to myself.

I think through all that hardship I must be a born fighter – otherwise I would've gone the other way and ended up in jail or worse. But what happened while I was under the care of the children's home, and afterwards, built up inside me for years. It affected my life. I've had anger issues, eating disorders and attempted to kill myself. I thought my parents didn't have faith in me, and being bashed and raped was all I was good for. I have felt unworthy and not good enough, and that I will never amount to anything. It wasn't a very blessed, fulfilled life.

That children's home was like a haven for sexual predators. It's just not acceptable to give a child to any person that says, "I'll take a kid" and thinks, "you can pay me while I rape them for two weeks".

A Methodist representative looked at records from the children's home and there's actually a note saying that foster couple wasn't suitable to care for children, yet I was still sent there. There was also a note saying I had specifically asked not to go back to them. I have wished someone else would come forward and say they were also raped by that man because it would validate me, would know in my heard it was true.

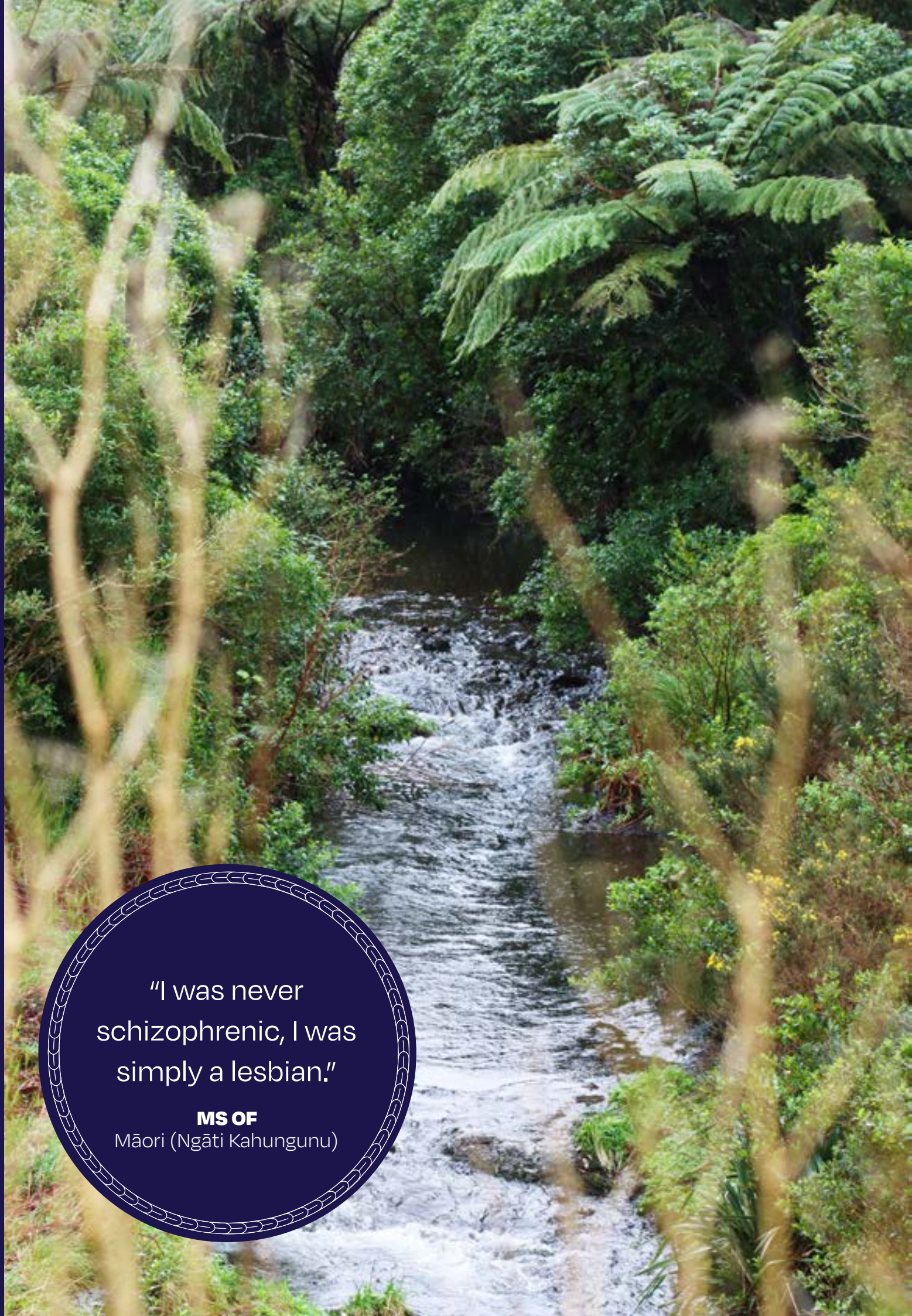
Not being believed extended into my whole life – I thought I was never going to be able to fulfil any dreams or succeed at anything. If things had been different, I could have become a police officer like I wanted to. It was a big shame I could never fulfil my potential because nobody gave a shit.

In late 2019, we heard the Methodist Church was looking for people to come forward for church redress. I never asked for money, so getting that was a bonus. The impact of the abuse meant my whole life and earning ability had been affected and I was never going to have a chance to make that money myself.

However, for me, the redress was about finally being heard, listened to and hearing them say they had failed me. It was about the recognition, the record and the apology.

All I wanted was to be heard.[183]

183 Witness statement of Deborah Morris-Jenkins (21 June 2022).



"I was never schizophrenic, I was simply a lesbian."

MS OF
Māori (Ngāti Kahungunu)

Ms OF

Hometown: Waihopai Invercargill	**Age when entered care:** 17 years old
Year of birth: 1960	**Time in care:** 1974 to 1984

Type of care facility: Psychiatric hospital – Ward 12 Southland Hospital in Waihōpai Invercargill, Cherry Farm Psychiatric Hospital in Ōtepoti Dunedin.

Ethnicity: Māori (Ngāti Kahungunu).

Whānau background: Growing up, Ms OF's home life could be violent, but she knew she was loved and supported. She is close to her brother and four sisters. Ms OF was the only child to go into care, and her parents were devastated to find out what happened to her at Cherry Farm. Her mother has since passed away, and her father still lives in Invercargill. They have a reasonable relationship.

Currently: Ms OF has a partner, who encouraged her to study. She also has a daughter in her thirties, and a grandson. She was friends with her daughter's father but not in a relationship with him. Her daughter has been diagnosed as being on the autism spectrum.

⚠ I was in Cherry Farm on and off for 10 years. I was told I was crazy, and treated like I was crazy, but I wasn't crazy when I went in there.

Growing up, I had a family that loved me, but it wasn't the best environment. There was the normal sort of argy-bargy with my brother and sisters, and my parents fought a lot, but it was a violent home. There was no engagement with te ao Māori or with my culture. My father was frustrated with how Pākehā treated Māori.

Several factors combined to make me depressed and angry, including being sexually abused by a friend's father for about three years from 6 years old, struggling with my sexuality, and my best friend moving away when I was around 16 years old. As a result, I got into trouble a lot at school. I wasn't stupid but I was put in the 'cabbage' class. I think I was treated pretty unfairly throughout school simply because I am Māori.

I began attempting to take my own life and was admitted to hospital – and they just sent me over to Ward 12. I was admitted maybe three times that year. Before that, I had seen a school counsellor but not a psychiatrist. I had been involved with Ward 12 for probably for a year before an incident that led to police involvement. I was then remanded to Cherry Farm for psychiatric assessment.

I was 16. Up until then I had probably been depressed, but not psychotic.

On my first day, a woman who'd had a lobotomy picked me up and threw me, for no reason. In the showers, women would smack me in the back of the head, and nothing was done. I was in with a bunch of very unwell women.

I saw a counsellor when I was admitted. I remember being told I was a lesbian because I had penis envy, and that I came out of my mother's body the wrong way and got damaged on the way out. I was diagnosed as schizophrenic. However, I was never schizophrenic, I was simply a lesbian.

They focused on the schizophrenia and what they described as my 'personality disorder'. This involved constant treatment. I would act up about a lot of it, but they would simply increase my medication or add something new.

I don't believe my parents consented to me receiving ECT treatments. I don't think they even knew about it until they came to visit. But they wouldn't have challenged it because doctors were gods. Everyone's view of doctors at the time was the same.

A normal course of ECT was three times a week for two weeks but I would go four or five times a week for weeks on end. We'd be herded into a room and one after another we'd go in and then be trolleyed out. I was given anaesthetic, which contained a muscle relaxant to ensure I was asleep, and electrodes were put on my head. After the shock I would be zombified.

We did a deep sleep programme in the narcosis unit where they filled us up with highly addictive barbiturates and didn't tell us much. I wasn't asked for my consent. It probably went on for six weeks, but it could have been several months. I was so out of it that I really can't remember a lot of what went on.

I do remember going to court when I was about 18 or 19. There was no social worker or support person, just nurses. I think I had to sign something after they decided what was going to happen to me. I believe I was put under a section of the Health Act where I had no say.

The punishments at Cherry Farm were horrendous, and I started cutting myself because of them. I hadn't been a slasher before that. We'd be put in seclusion, which meant being put in a room with windows and a cardboard potty for up to 12 days – they wouldn't tell you how long it would be for. You'd be naked with only a horse blanket, and they'd observe you. I hated isolation and I don't like locked doors because of it.

I was never sexually assaulted at Cherry Farm but there was some physical harm. Once I had a serious cut on my wrist, which the doctor stitched without anaesthetic, on purpose. The pain was excruciating but I didn't want that bastard doctor to see me cry. A student nurse was watching, and she cried.

When I first went to Cherry Farm, there were separate units for males and females. Once, as punishment, I was taken to the male ward. There were rapists, murderers and child molesters in there. Men would also do stuff to your clothes in the drying room and your clothes would be covered in whatever.

I was afraid of men even before I went to Cherry Farm. I didn't like being around them, except for my brother and father. I think the staff knew about my fear. Male staff would observe me when I was naked and supervise baths and showers. We couldn't do anything because if we misbehaved, we'd be dragged down to seclusion again.

I did make some friends in there and I was close with some of the nurses. One gave me a hug once, but a senior nurse saw it, so the nurse was shipped off to another unit. I thought it was weird they couldn't even show affection.

Mum and Dad came to visit every month and it was traumatising for them. It was clear I wasn't getting any better, and they couldn't understand it. Dad told me how one time I was dribbling and incoherent. I don't remember that, but he said it was simply heartbreaking. They were devastated when they found out what happened to me. Mum died thinking it was their fault. I've told Dad we can't go back and change it, but I do feel sorry they feel so guilty.

I got out because one of the doctors saved me. She took me under her wing, got me off the drugs and into a job. She said she understood this wasn't right and that a young woman shouldn't be like this.

When I left, I initially went home to my parents, then moved in with my sister and got a job. It was hard because I didn't know how to function properly and I had a lot of issues, particularly with alcohol. This became too much so I went to AA and got sober.

I had my daughter in 1989. I was friends with her father, but we weren't in a relationship. I wasn't taking any drugs while I was pregnant but was still getting injected with a very strong anti-psychotic drug every few months. I said I wouldn't take it anymore because of what it might do to my baby. They said it wouldn't do anything major, but they were wrong. She was in neonatal for over a week, twitching, with low body temperature and wouldn't feed. I did some research and found getting the injection in the first and second trimester can cause this.

My daughter has some issues and has been diagnosed on the autism spectrum. She isn't living the life I'd like her to, but she's okay.

I met my partner, and she encouraged me to go to a polytech open night, which led me to start studying. I now have two degrees and have worked in public health for 14 years, including for the DHB that locked me up, which is ironic.

Once, when I was in seclusion, I was extremely distressed and could only think of the life I wanted. This included having someone I love, children and grandchildren, travelling and being educated. The staff at Cherry Farm said I'd never have these things, but now I do. I did it all without their 'help'. Without their drugs.

I am very proud of who I have become, but I am extremely frustrated at how I was treated, like a piece of shit, like a nutter. There was no schizophrenia, it was just a waste of years. You simply wouldn't do that to a 16-year-old now.

I do have survivors' guilt. So many in there died, a lot of them by their own hands, and I didn't die. I still have nightmares about being there and trying to get out. I still get anxious, and some smells take me back.

Thank goodness those places have gone but the issue remains the same – no one listens. We must listen to those with mental health issues.[184]

184 Witness statement of Ms OF (21 November 2022).

"Thank goodness those places have gone but the issue remains the same – no one listens. We must listen to those with mental health issues."

MS OF
Māori (Ngāti Kahungunu)

Ūpoko | Chapter 5
1900–1950 – Ka tīmata te Kāwana ki te kuhu ki waenga i te whānau
1900–1950 – The State begins to intervene in family life

148. The 50 years before the Inquiry period saw two world wars, economic hardship for many, increasing urban migration for Māori and the beginnings of Pacific Peoples' large-scale migration to Aotearoa New Zealand. The heterosexual nuclear family was seen as the preferred, natural model and diversity was often not tolerated. These decades also saw the beginnings of widespread State welfare and the growth of large institutions.

Ngā raraunga tukupū mō te Māori i ngā pūnaha taurima i mua i te 1950
General data on Māori in care before 1950

149. Few tamariki or rangatahi Māori lived in any form of State or faith-based care before the 1940s.

150. A 1942 study of church homes noted that there were "no orphanages for Māori children", and that there was little demand for such homes among Māori.[185] In addition, some private children's homes refused to admit Māori.[186]

151. There is little information available on the number of tāngata whaikaha Māori / whānau hauā Māori admitted to State or faith-based care during the first half of the 20th century. Given Māori understandings of and attitudes to disability, it is likely that they were integrated into their whānau and cared for alongside all other members.

185 Mathew, HC, The institutional care of dependent children in New Zealand (New Zealand Council for Educational Research, 1942, page 83).
186 Mathew, HC, The institutional care of dependent children in New Zealand (New Zealand Council for Educational Research, 1942, page 85).

152. Prior to the 1940s, the number of Māori residing in psychiatric hospitals was low. In 1909, Māori made up just more than 1 percent of 3,549 psychiatric inpatients nationwide, increasing to 1.8 percent of 7,797 in 1938.[187] A decade later, in 1948, the number of Māori in psychiatric hospitals had increased to 2.6 percent of the total psychiatric patient population.[188]

153. Before the Inquiry period there were proportionally fewer Māori in psychiatric hospitals compared to non-Māori. Available data shows that for every 100,000 people in Aotearoa New Zealand, there were 208 Māori in psychiatric care, compared to 510 non-Māori.[189]

154. Reasons for this may include the preference of whānau to care for members experiencing mental distress at home using the resources of extended kin. Some Māori did not trust Western medicine and preferred to consult tohunga for their ailments.[190]

155. Other reasons may have included the fact that public hospitals charged fees and that some barred Māori patients, on the grounds of non-rates payment.[191] The number of Māori patients entering public hospitals of all types increased markedly after the State introduced free hospital care in 1939.[192]

187 Gassin, T, Māori Mental Health – A report commissioned by the Waitangi Tribunal for the Health Services and Outcomes Kaupapa Inquiry (Wai 2575, B26), (Waitangi Tribunal, 2019, page 6).
188 Gassin, T, Māori Mental Health – A report commissioned by the Waitangi Tribunal for the Health Services and Outcomes Kaupapa Inquiry (Wai 2575, B26), (Waitangi Tribunal, 2019, page 6).
189 Gassin, T, Māori Mental Health – A report commissioned by the Waitangi Tribunal for the Health Services and Outcomes Kaupapa Inquiry (Wai 2575, B26), (Waitangi Tribunal, 2019, page 6).
190 Cram, F, Te Huia, B, Te Huia, T, Williams, M & Williams, N, Oranga and Māori Health Inequities 1769–1992: A report commissioned by the Ministry of Health for stage two of the Waitangi Tribunal's Health Services and Outcomes Kaupapa Inquiry (Wai 2575, B25), (Waitangi Tribunal, 2019, page 31).
191 Lange, R, Te hauora Māori i mua – History of Māori health: Health improves, 1900 to 1920 (Te Ara – The Encyclopedia of New Zealand, 2011, page 3), https://teara.govt.nz/en/te-hauora-maori-i-mua-history-of-maori-health/page-3.
192 Lange, R, Te hauora Māori i mua – History of Māori health: Health improves, 1900 to 1920 (Te Ara – The Encyclopedia of New Zealand, 2011, page 3), https://teara.govt.nz/en/te-hauora-maori-i-mua-history-of-maori-health/page-3.

Te pikinga o ngā uauatanga i ngā hāpori Māori
Increasing hardship in Māori communities

156. During the first half of the 20th century there were several factors that led to whānau and hapū Māori experiencing increased financial and social hardship. For example, there was a significant loss of Māori life in the First and Second World Wars. This, the lack of support available to Māori veterans, and the introduction of mass trauma into whānau, hapū and communities from men returning home from war untreated negatively affected whānau, hapū and iwi.

157. The State encouraged Māori urban migration from the mid to late 1940s partly because of the view that it would help the goal of full assimilation. The Department of Māori Affairs provided incentives for Māori to move to the cities, in the form of housing assistance and job opportunities. It also facilitated access to social services and welfare support.[193] Hostels, some established and managed by churches, were set up from the mid-1940s for Māori seeking work in towns and cities.[194]

158. While many of those who moved to the cities returned regularly to their whenua, moving between the two worlds,[195] the policy of urbanisation contributed to the breakdown of whānau, hapū and iwi and decline of te reo Māori. Tribal organisational structures were still important, and new collective entities were established.[196] But urbanisation and other impacts of colonisation had a direct impact on the health of Māori and their culture. This included the ability for Māori to maintain and uphold traditional family structures, cultural values and practices, including the use of mātauranga (knowledge).

159. Throughout the 20th century, Māori would often be empowered by the State to develop policies and programmes, but only to the extent that these met criteria set by the State.[197] This is a pattern that persisted throughout the Inquiry period and beyond, one where "the illusion of self-government exists, but the reality is mainstream control".[198]

160. This pattern took the form of periods of change and increased power for Māori followed by a wave of Crown actions to decrease their level of autonomy.

193 Hill, RS, Māori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 2).
194 Nightingale, RB, Māori at work: the shaping of a Māori workforce within the New Zealand state 1935–1975, Doctoral Thesis, Massey University (2007, pages 135 and 137).
195 Williams, M, Panguru and the city: Kainga Tahi, Kainga Rua (Bridget Williams Books, 2014, pages 162–163).
196 Hill, RS, Māori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 2).
197 Armitage, A, Comparing the policy of Aboriginal assimilation: Australia, Canada, and New Zealand (University of British Columbia Press, 1995, page 241).
198 Armitage, A, Comparing the policy of Aboriginal assimilation: Australia, Canada, and New Zealand (University of British Columbia Press, 1995, page 241).

161. During the Second World War, Sir Āpirana Ngata's Māori War Effort Organisation showed the potential for Māori to work independently and cultivate kotahitanga, or unity. Towards the end of the war, Māori leaders argued that, based on this success, an independent tribal committee system should take over from the Department of Native Affairs.[199]

162. As the war ended and Māori support was no longer as critical, the State became concerned at the power Māori leadership had achieved. The Māori Social and Economic Advancement Act of 1945 established a network of official Tribal Committees and Tribal Executives operating within the Department of Native Affairs (the Department of Māori Affairs after 1947, which oversaw general issues relating to Māori development).[200]

163. Māori communities had to join the new system to gain official recognition for their tribal committees, which had to "follow European administration and meeting procedure".[201] In 1949, the department characterised the main purpose of the Māori Social and Economic Advancement Act as being "to facilitate the full integration of the Māori race into the social and economic structure of the country".[202]

164. The Māori Women's Welfare League was formed in 1951 to assist with issues such as health, housing and discrimination faced by Māori, and helped the voice of Māori women to be heard at a national level.[203] This was largely in response to increased urbanisation of Māori during the 1930s and 1940s.

165. However, continued policies of assimilation and integration affected the ability of hapū and iwi to enforce and uphold important cultural controls, supports and practices. This contributed to an environment where tamariki and rangatahi Māori and whānau members could experience abuse and neglect inflicted in families and wider communities.

199 Hill, RS, Māori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, pages 12–13).
200 Hill, RS, Māori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 1).
201 Hill, RS, Māori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 13).
202 Hill, RS, Māori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 17).
203 Māori Women's Welfare League website, About us (2023), https://www.mwwl.org.nz/about; Brookes, B, A history of New Zealand women (Bridget Williams Books, 2016, page 289).

Te whakatāuke i te hunga whaikaha me te hunga e rongo ana i te wairangitanga
Segregation for disabled people and people who experienced mental distress

166. As mentioned in Chapter 3, the eugenics movement promoted the idea that some individuals were better suited to having children than others. Eugenicists argued that disabled people should be separated from the rest of society to prevent them from breeding a "subnormal" race.[204] This occurred at the same time as people were becoming concerned about a decline in the European birth rate.

167. Eugenics gained momentum and popularity in the second half of the 19th century and continued into the 20th century. It was supported by some prominent figures in science and politics, including Plunket founder Sir Truby King.

168. Training institutions and detention centres were opened for "those who could be brought up to … standard, and the segregation of those who could not".[205] The Education Act 1914 required parents, as well as officials, teachers and police, to report "mentally defective" children to the Department of Education.[206]

169. The mass recruitment for the First World War resulted in 57 percent of men rejected for service on medical grounds, focussing State attention on the health of the nation and on children in particular.[207]

170. In 1925, the Committee of Inquiry into Mental Defectives and Sexual Offenders addressed anxiety about "the number of mental defectives becoming a charge upon the State and the alarming increase in their numbers through the uncontrolled fecundity of this class".[208]

171. Eugenics was condemned after the Second World War following the horrors of the Nazi regime, but its ideas still influenced laws, policies and attitudes during the Inquiry period. For example, the use of contraception without consent in care settings and the segregation of disabled people away from their communities can be seen as echoing the ableist beliefs underlying the eugenics movement, that non-disabled people are more valuable than disabled people.[209]

204 Tennant, M, "Disability in New Zealand: An historical survey" New Zealand Journal of Disability Studies, 2 (1996, pages 3–33, pages 12–14).
205 Tennant, M, "Disability in New Zealand: An historical survey" New Zealand Journal of Disability Studies, 2 (1996, pages 3–33, page 14).
206 Education Act 1914, sections 127–129.
207 Goodyear, R, Sunshine and fresh air: An oral history of childhood and family life in interwar New Zealand, Doctoral Thesis, University of Otago (1998, page 5).
208 Pomare, M, Mental defectives and sexual offenders report: Report of the Committee of Inquiry appointed by the Hon Sir Maui Pomare, Appendix to the Journals of the House of Representatives, 1925 Session I, H-31A.
209 Witness statement of Dr Hilary Stace (1 November 2019, para 17); Turda, M, "Legacies of Eugenics: confronting the past, forging a future," Ethic and Racial Studies, Volume 45, No 13 (Taylor and Francis, 2022, page 2474).

Ka rongo pea te hunga Turi, te hunga whaikaha me te hunga wairangi i te rawakoretanga mō te roanga o ō rātou oranga

Deaf, disabled people and people experiencing mental distress could experience lifelong poverty

172. During the Inquiry period, Deaf, disabled people and people who experienced mental distress often experienced lifelong poverty that impacted their life options. They were generally excluded from mainstream work. When work was available, it was often low paid, part time or temporary, with poor working conditions and few career opportunities.[210]

173. The Soldiers' Civil Re-establishment League established workshop-based employment for returned servicemen considered unfit to resume former occupations from the 1930s.[211] Sheltered workshops were also established for other disabled New Zealanders, and these continued operating throughout the Inquiry period. See Part 2 Chapter 12 for more information on sheltered workshops.

210 Beatson, P, "The seven impaired samurai: Life options for the disabled," New Zealand Journal of Disability Studies, No 4 (1996, page 10).

211 Derby, M, Veterans' assistance: Economic rehabilitation (Te Ara – The Encyclopaedia of New Zealand, 20 June 2012, page 2), https://teara.govt.nz/en/veterans-assistance/page-2.

Te hūnuku o ngā iwi Pasifika ki Aotearoa
Pacific Peoples' migration to Aotearoa New Zealand

Te whanaungatanga i waenganui i a Aotearoa me ngā whenua Pasifika
Relationships between Aotearoa New Zealand and the Pacific nations

174. Aotearoa New Zealand has longstanding historical relationships with Pacific Peoples that predate European contact. Māori and Pacific Peoples share whakapapa and a common history of migration across the South Pacific region. However, these connections have not always extended to how some New Zealanders and the State viewed and treated Pacific Peoples.

175. The historic relationship with Pacific nations has tended to be paternalistic, with Aotearoa New Zealand "doing what was best for the immature, incapable and unknowing children, with or without their consent".[212] This relationship included a civilising agenda and led to the colonisation of some Pacific nations.

176. Pacific Peoples have had a unique experience as a migrant community in Aotearoa New Zealand. This is due to the relationship between Pacific Peoples and Māori, and Aotearoa New Zealand's colonial relationship with the Pacific nations.

177. Pacific Peoples have a history of migration to Aotearoa New Zealand, especially from the Realm countries with citizenship rights. Aotearoa New Zealand is called a Realm because it is a monarchy. The Realm of New Zealand includes Aotearoa New Zealand, Tokelau, the Ross Dependency (in Antarctica) and the self-governing states of the Cook Islands and Niue.[213]

178. Aotearoa New Zealand annexed the Cook Islands and Niue in 1901 and began an administration of Tokelau in 1926, before annexing it in 1948.[214] The Cook Islands declared independence in 1965 and Niue in 1974, but both continued to have a formal relationship with Aotearoa New Zealand.[215] Tokelau is still a territory of Aotearoa New Zealand. People born in Niue, Tokelau or the Cook Islands are New Zealand citizens, and Aotearoa New Zealand has a legal duty to them.[216]

212 Salesa, DA, "Pacific destiny: New Zealand's overseas empire 1840–1945," in Mallon, S, Māhina-Tuai, K & Salesa, D (eds) Tangata o le Moana: New Zealand and the people of the Pacific (Te Papa Press, 2012, pages 97–121).
213 The Governor General of New Zealand, New Zealand's Constitution (accessed 2023), https://gg.govt.nz/office-governor-general/roles-and-functions-governor-general/constitutional-role/constitution/constitution.
214 Salesa, DA, "Pacific destiny: New Zealand's overseas empire 1840–1945," in Mallon, S, Māhina-Tuai, K & Salesa, D (eds) Tangata o le Moana: New Zealand and the people of the Pacific (Te Papa Press, 2012, pages 97–121).
215 Fraenkel, J, Pacific Islands and New Zealand: Cook Islands, Niue, Tokelau and Nauru (Te Ara – The Encyclopedia of New Zealand, 2012, page 5), https://teara.govt.nz/en/pacific-islands-and-new-zealand/page-5.
216 Parliamentary Counsel Office, Letters patent constituting the Office of Governor-General of New Zealand (1983).

"The general population appears to have a very distorted image of psychiatric patients. This image is influenced by a lack of education and knowledge of the major psychiatric disorders and a misconception that psychiatric illness is inextricably linked with dangerousness."

MASON, K
Report of the Committee of Inquiry into Procedures Used In Certain Psychiatric Hospitals In Relation To Admission, Discharge Or Release On Leave Of Certain Classes Of Patients

179. Aotearoa New Zealand also has a special relationship with Samoa because of its formal administration of the nation from 1920 to 1962 (under a League of Nations mandate from 1920, and as a United Nations Trust Territory from 1946). This administration was resisted almost from its beginning by the Mau movement, culminating in the Aotearoa New Zealand administration opening fire on peaceful protestors in 1929 and killing several people.[217]

180. Samoa obtained independence in 1962 and the two countries signed a Treaty of Friendship, pledging to work closely together to promote the welfare of the Samoan people.[218]

181. Large-scale immigration of Pacific Peoples to Aotearoa New Zealand began in the 1950s and increased rapidly.[219] The State initially actively recruited Pacific Peoples for low-skilled, low-paid jobs.[220] Pacific Peoples also participated in the New Zealand armed forces in both the First and Second World Wars, and some of these veterans returned and settled in New Zealand.[221]

182. While Pacific Peoples took up the opportunity for a new life in Aotearoa New Zealand, some found the migration challenging. Economic hardship and racism made it hard to adjust to a new way of living and affected the ability of aiga or kainga (family) to enforce and uphold important cultural controls, values, supports and practices.[222]

Ka tipu haere ngā mōtika tamariki
Children's rights begin to increase

183. From the late 19th century children increasingly became seen as human beings in their own right and in need of protection, and the State began to take a more active role in child welfare.[223] By the early 20th century there was general acceptance in Aotearoa New Zealand that the State had a role in intervening in families to promote child welfare, resulting in legislation that concerned children and their rights specifically, such as the Infant Life Protection Act 1908 and the Child Welfare Act 1925.

217 Ministry for Culture and Heritage, Black Saturday – New Zealand in Samoa (accessed 2020), https://nzhistory.govt.nz/black-saturday-nz-police-open-fire-on-mau-protestors-in-apia-nine-samoans-killed.

218 Ministry of Foreign Affairs and Trade website, Apia: Our story (accessed 2022), https://www.mfat.govt.nz/en/about-us/mfat75/75-our-story/apia/; Anae, M, "All power to the people: Overstayers, Dawn Raids and the Polynesian Panthers" in Mallon, S, Māhina-Tuai, K & Salesa, D (eds), Tangata o le Moana: New Zealand and the people of the Pacific (Te Papa Press, 2012, pages 221–239).

219 Pacific Peoples also notably participated in the New Zealand armed forces in both WWI and II, and some of these veterans returned and settled in New Zealand, as discussed by Māhina-Tuai, K, "FIA (Forgotten in action)" in Mallon, S, Māhina-Tuai, K & Salesa, D (eds), Tangata o le Moana: New Zealand and the people of the Pacific (Te Papa Press, 2012).

220 Salesa, D, Island time: New Zealand's Pacific futures (Bridget Williams Books, 2017, page 12).

221 Māhina-Tuai, K, "FIA (Forgotten in action)," in Mallon, S, Māhina-Tuai, K & Salesa, D (eds) Tangata o le Moana: New Zealand and the people of the Pacific (Te Papa Press, 2012).

222 Māhina-Tuai, K, "A land of milk and honey? Education and employment migration schemes in the Postwar Era," in Mallon, S, Māhina-Tuai, K & Salesa, D (eds), Tangata o le Moana: New Zealand and the people of the Pacific (Te Papa Press, 2012, page 177).

223 Black, R, "The changing value of the child – A review of the literature regarding social perceptions of sick and dying children," Sociology Compass, 7/9 (2013, pages 738–750, page 741); Melling, J, Adair, R & Forsythe, B, "A proper lunatic for two years: Pauper lunatic children in Victorian and Edwardian England, Child admissions to the Devon County asylum, 1845–1914," Journal of Social History (1997, pages 371–405, page 371); Gavin, A & Humphries, A, Worlds enough and time: The cult of childhood in Edwardian fiction (Palgrave Macmillan, London, 2009, page 1); Pollock, K "Childhood," (Te Ara – The Encyclopaedia of New Zealand, 2011), https://teara.govt.nz/en/childhood.

Te mārama haere ki te whanaketanga tamariki
Growth in the understanding of child development

184. During the Second World War, British psychiatrist John Bowlby studied what happened to children who were separated from their caregivers. His research showed the importance of the relationship between children and their caregivers. He called this 'attachment theory' and it helped people understand the bond between children and their caregivers, including in Aotearoa New Zealand.[224]

185. Attachment is the bond (physical and psychologically) that babies develop with their caregivers, and helps the developing child feel safe and secure.[225] Attachment shapes early brain development and is so fundamental to human development that failure to develop, or loss of, these bonds can create distress in babies, serious developmental delay and heightened risk of long-term mental illness.[226]

186. Attachment is expressed and understood differently across cultures. European approaches have a more individualised view of the process of attachment, particularly regarding the mother-to-child bond.[227]

187. Te ao Māori understandings of attachment are more collective. While parent to child attachments are integral, these are only some of many crucial relationships essential to developing a sense of self, including connection to wider whānau, hapū, iwi , whenua and wairuatanga (spirituality). Pacific Peoples' views of attachment are also more collective.

188. The ability to form, develop and maintain key relationships is vital for any child's healthy growth.[228] By the 1950s, State and other officials would have been aware of the theory that children needed secure, loving care from parents or other familiar caregivers. For example, even the 1954 Mazengarb Report, which was very critical of children and young people's motivations and behaviour,[229] noted the importance of the psychological link between mother and child.[230] Despite this understanding, there was a sharp rise in the number of children and young people being removed from their families into care settings from the 1950s through to the 1980s. Parts 3 and 4 cover the removal of children in Aotearoa.

224 Cargo, T, The impact on attachment when mokopuna are removed from whānau, hapū and iwi, and placed in foster care (June 2022, page 7).
225 Calvert, S, Attachment and related issues, Expert opinion report prepared for the Royal Commission of Inquiry into Abuse in Care (8 June 2022, pages 1–2).
226 Calvert, S, Attachment and related issues, Expert opinion report prepared for the Royal Commission of Inquiry into Abuse in Care (8 June 2022, pages 2 and 22).
227 Calvert, S, Attachment and related issues, Expert opinion report prepared for the Royal Commission of Inquiry into Abuse in Care (8 June 2022, pages 13–14).
228 Calvert, S, Attachment and related issues, Expert opinion report prepared for the Royal Commission of Inquiry into Abuse in Care (8 June 2022, pages 2–3).
229 Mazengarb, O, Report of the Special Committee on moral delinquency in children and adolescents (Government Printer, 1954, pages 15–16.
230 Mazengarb, O, Report of the Special Committee on moral delinquency in children and adolescents (Government Printer, 1954, page 37).

Ūpoko | Chapter 6
1950–1970 – Te whakawehi matatika me te tupu o te whenua tokoora
1950–1970 – Moral panic and the growth of the welfare state

189. The first 20 years of the Inquiry period involved increased urban migration, assimilationist State policies and the beginning of the modern care settings network. This was during a period of relative economic and social stability with strong population growth due to the baby boom following the Second World War. Care settings grew both in the range of settings and the numbers of children, young people and adults taken and placed in them. Māori and Pacific Peoples were increasingly placed in all care settings, becoming over-represented.

Te urutau a te Māori ki te noho tāone
Māori adapting to an urban way of life

190. By 1966, 62 percent of Māori lived in towns and cities compared to 9 percent in 1929. Within a few decades, Māori had become "a predominately urban people".[231] This was due to a combination of factors, including the impact of government policy on Māori farming, growing numbers of jobs in the cities and, after 1962, encouragement from the State to move to the cities.

191. Throughout the 1950s, many Māori raised issues with the way their mana and organisational capacities were being undermined by the State.[232] At the same time, Māori were adapting State initiatives to their own ends. By mid-century, the tribal committee system under the Māori Social and Economic Advancement Act 1945 was achieving results in areas such as improvements to meeting houses, marae complexes, sports facilities and interactions with the Department of Māori Affairs.[233]

231 Belich, J, Paradise reforged: A history of the New Zealanders from the 1880s to the Year 2000 (University of Hawai'i Press, 2001, pages 471–472).
232 Hill, RS, Māori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 65).
233 Hill, RS, Māori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 15).

192. The 1945 Act also provided for Māori Wardens, volunteers who were authorised to enforce "order and regularity". Wardens came to play a significant role in the life of whānau, hapū iwi and hāpori Māori by, organising events, acting as intermediaries with government agencies and assisting with legal matters.[234]

193. The State encouraged organisations such as Māori Wardens and the Māori Women's Welfare League in part because it saw them as a way to help Māori adjust to life in the city. Support could be withdrawn if they were considered to have gone outside their official briefs.[235]

194. A wave of laws were passed in the 1950s aimed at further assimilation. These included:

- the Māori Purposes Act 1950, which allowed the leasing of any Māori lands considered unproductive
- the abolition of the Māori Land Boards, and the introduction of the Māori Affairs Act 1953, which gave the Māori Trustee the power to buy interests in land which the State deemed to be uneconomic[236]
- Māori customary marriage being invalidated in 1953
- the Adoption Act 1955 weakened customary adoption (whāngai) by promoting secrecy about family origins and legally severing any links between birth and adoptive families[237]
- in 1962 the Adoption Act was amended to remove the Māori Land Court's jurisdiction in adoptions and applicants were forced to go to the more formal Magistrates' Court.[238]

195. In 1960, then Prime Minister Walter Nash asked the Department of Māori Welfare to do a stocktake of the state of Māoridom to inform future policy.[239] The review was charged with recommending changes to assist departmental operations and the State's immediate, medium-term, and ultimate goals for Māori.

196. The resulting report, known as the Hunn Report, made it clear that Māori were essentially marginalised and continued to lag behind Pākehā in all socioeconomic indicators.[240] The State saw increased attempts at assimilation and integration as the solution. A number of Māori commentators criticised the Hunn Report for failing to recognise tino rangatiratanga. The Māori Synod of the Presbyterian Church challenged the report's assumption that it was Māori, rather than Pākehā, who needed to adjust.[241]

234 Hill, RS, Māori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 20).
235 Hill, RS, Māori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, pages 52–55).
236 Hill, RS, Māori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, pages 31–34).
237 Hill, RS, Māori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 34.)
238 Hill, RS, Māori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 105).
239 Hill, RS, Māori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 89).
240 Hunn, JK, Report on Department of Māori Affairs: with statistical supplement, 24 August 1960 (Government Printer, 1961), in Hill, RS, Māori and the State: Crown-Māori relations in Aotearoa New Zealand 1950–2000 (Victoria University Press, 2009, page 91).
241 Hill, RS, Māori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 99).

Te hunga Turi, whaikaha me te hunga i rongo i te wairangitanga
Deaf, disabled people and people who experienced mental distress

Te whaikaha
Disability

197. From the 1940s, there was a growing public concern about disabled people entering institutions both nationally and internationally. In 1949, the Intellectually Disabled Children's Parent's Association was founded and advocated for schools and community facilities to keep their children and young people out of institutions.[242]

198. The Minister of Education, Hon Ronald Algie, set up a Consultative Committee in 1951 to review education for disabled people. This was led by Dr Robert Aitken and the resulting report became known as the Aitken Report. The Aitken Report promoted putting disabled children, young people and adults into large-scale facilities (approximately 400 to 500 people) as the best model of care.[243]

199. The New Zealand Branch of the British Medical Association released a report in 1959 (known as the Burns Report) criticising the State's policy of putting people into institutions. The report instead advocated for community-based care.

200. The Burns Report described the State's policies towards children with learning disabilities as "based on outworn and outmoded ideas" and doing little to improve the lives of disabled people.[244] It was particularly critical of the practice of admitting very young children into institutions.[245]

201. Despite this growing public and professional concern, health policy for disabled people from 1952 to 1972 largely followed the direction of the Aitken Report.[246] Following its publication, and until the early 1970s, large-scale institutions became the State's preferred option for housing disabled people, particularly those with learning disabilities.[247]

242 Sullivan, M & Stace, H, A brief history of disability in Aotearoa New Zealand (Office for Disability Issues, 2020, page 9).
243 Aitken, RS, Caughley, JG, Lopdell, FC, McLeod, GL, Robertson, JM, Tothill, GM & Hull, DN, Intellectually handicapped children report: Report of the consultative committee set up by the Minister of Education in August 1951 (Department of Education, 1953, page 38).
244 Millen, J, Breaking barriers: IHC's first 50 years (IHC New Zealand, 1999, page 45).
245 Millen, J, Breaking barriers: IHC's first 50 years (IHC New Zealand, 1999, page 46).
246 Aitken, RS, Caughley, JG, Lopdell, FC, McLeod, GL, Robertson, JM, Tothill, GM & Hull, DN, Intellectually handicapped children report: Report of the consultative committee set up by the Minister of Education in August 1951 (Department of Education, 1953).
247 Witness statement of Dr Hilary Stace (1 November 2019, paras 11–12).

202. In 1967 the Government set up a royal commission of inquiry to look at developing a scheme to ensure people who acquired a disability had fair and equal access to income support, care and treatment.[248] The resulting report, known as the Woodhouse Report, recommended a public insurance scheme where people would get ongoing care and support from a single system, no matter how they acquired their impairment (whether through an accident or otherwise), what their age was, or whether they were working.[249] The Woodhouse Report eventually led to the establishment of the Accident Compensation Corporation (ACC) in 1974. The original recommendations in the Woodhouse Report were for the system to include support for people whose impairments did not result from an accident – these were never fully implemented, and the resulting system created ongoing inequities between people disabled by accident, and people with who acquired their disability in other ways.[250]

Te wairangitanga
Mental distress

203. Rates of admissions to psychiatric hospitals peaked in Aotearoa New Zealand during the 1940s and the 1950s, a time when rates of institutionalisation for mental distress among non-Māori were among the highest in the world.[251]

204. At the end of 1953, there was a combined total of 9,742 people in the country's psychiatric hospitals – a population average of 478 per 100,000 of population.[252] These numbers fell over the next few decades, partly due to the introduction of new and effective drugs to treat common conditions such as depression and schizophrenia, as well as the growing popularity of individual and group therapy.[253]

248 Woodhouse, A, Bockett, H & Parsons, G, Report of the Royal Commission of Inquiry, Compensation for personal injury in New Zealand (Government Printer, 1967, page 12).
249 Forster, W, Removing disabling experiences: a vision for the future of our people (New Zealand Law Foundation, 2022, foreword, page 1).
250 Accident Compensation Corporation. Our history, (ACC, 2018), https://www.acc.co.nz/about-us/who-we-are/our-history#1972--the-accident-compensation-act.
251 Durie, M, Mauri ora: The dynamics of Māori health (Oxford University Press, 2001, page 19).
252 Stats NZ, New Zealand Official Yearbook 1955.
253 Brunton, W, Mental health services: Lunatic asylums, 1840s to 1900s (Te Ara – The Encyclopaedia of New Zealand, 2011, page 2), https://teara.govt.nz/en/mental-health-services/page-2.

"The courts had an attitude, and the police had an attitude, too. The court acted differently to young Māori compared to young Pākehā offenders. The court was more willing to give second chances and lighter sentences to Pākehā offenders."

MR SO
Social Worker

Te hunga Turi
Deaf

205. Kelston School for Deaf children was established in 1958 in Tāmaki Makaurau Auckland, replacing temporary State schools for Deaf children and young people at Mount Wellington and Titirangi (Lopdell House). Like Sumner in Ōtutahi Christchurch, (later named van Asch college and then Van Asch Deaf Education Center), Kelston School followed the oralist method of education. Two epidemics of maternal rubella in the 1960s increased Deaf student numbers, with maternal rubella thought to account for half of hearing loss in the 1960s. Kelston School had a high proportion of tāngata Turi Maori and Pacific students. In 1974, 35 percent of students at Kelston School were recorded as "Polynesian".[254] As with Van Asch College, "Polynesian" was not defined.

I kaha te whāia o ngāi Pasifika
Pacific Peoples increasingly targeted

206. As more Pacific families migrated to Aotearoa New Zealand and settled in urban areas, Pacific children and young people became more visible to authorities. Over surveillance led to increased court appearances and reports of abuse and neglect in Pacific families during this time.[255] Niuean survivor Tigilau Ness told the Inquiry:

> *"It was not uncommon to walk down Karangahape Road and see Pacific Islanders being stopped randomly and questioned by the Police. It was not uncommon for Pacific Islanders to get picked up for no reason by the Police and be charged with idle and disorderly offences. Some of our children would be taken."*[256]

207. Pacific children and young people began appearing before the courts in increasing numbers from the 1960s. Similar to tamariki and rangatahi Māori, Pacific children and young people were more likely than non-Pacific youth to be targeted by Police and prosecuted.[257]

254 Stewart, PA, To turn the key: The history of deaf education in New Zealand, Unpublished Master's Thesis, University of Otago (1982, page 211).
255 Witness statement of Tigilau Ness (11 June 2021, pages 4–5).
256 Witness statement of Tigilau Ness (11 June 2021, pages 4–5).
257 Mitchell, J, Immigration and national identity in 1970s New Zealand (University of Otago, 2003, page 4).

Te āmaimai mō te taiharatanga rangatahi
Concern about juvenile delinquency

208. In the 1950s there were heightened anxieties about juvenile delinquency. This was due to the increase in the country's youth population (approximately 13 – 19 years) and a separate youth culture developing in the main cities, combined with rising rates of youth crime.[258] Deepening fears about youth behaviour were part of wider social unease about how things were changing, including "adolescent independence, gendered social shifts and weakening family control".[259]

209. Two events in 1954 triggered these anxieties: the murder of an Ōtautahi Christchurch mother by two teenage girls, one of them her daughter,[260] and the uncovering of a supposed "teenage sex ring" in Te Awa Kairangi ki Tai Lower Hutt.[261] Both attracted wide media coverage and fuelled a growing unease about teenage behaviour.[262]

210. The State responded by appointing lawyer Oswald Mazengarb to chair a Special Committee on Moral Delinquency in Children and Adolescents. A few months later, after interviewing 145 witnesses and taking 120 written submissions, the Committee released what is known as the Mazengarb Report. A copy of the report was sent to every household in the country. This further fuelled public anxieties about young people.[263]

211. The report said, "juvenile immorality" was "uncertain in origin, insidious in growth, and [had] developed over a wide field".[264] It particularly focussed on perceived promiscuity or immorality of girls as an issue and linked juvenile delinquency to girls being more open and confident about their sexuality.[265] The report recommended broadening the Child Welfare Act 1925 so State authorities could undertake preventive work. Its recommendations were quickly enacted into law and included the addition of sexual acts between children to the list of care and protection issues in the Act.[266]

258 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, pages 178–181).
259 Brickell, C, Teenagers: The rise of youth culture in New Zealand (Auckland University Press, 2017, page 245).
260 Krzanich, A, Murder, Mazengarb and a moral panic: The intersection of "juvenile delinquency" and the media in 1950s New Zealand, Te Mata Koi Auckland University Law Review, Volume 16 (2010, pages 164–191).
261 Brickell, C, Teenagers: The rise of youth culture in New Zealand (Auckland University Press, 2017, page 254).
262 Brickell, C, Teenagers: The rise of youth culture in New Zealand (Auckland University Press, 2017).
263 Soler, J, Drifting towards moral chaos: The 1954 Mazengarb Report – a moral panic over "juvenile immorality," Master's Thesis, Massey University (1988).
264 Mazengarb, O, Report of the Special Committee on moral delinquency in children and adolescents (Government Printer, 1954, page 27).
265 Mazengarb, O, Report of the Special Committee on moral delinquency in children and adolescents (Government Printer, 1954, page 15).
266 Child Welfare Amendment Act 1954, section 2.

Ka whanake te hauora hinengaro tamariki
Child psychiatry develops

212. At the beginning of the Inquiry period, psychology was still a relatively new discipline and standards of care for children and young people focused less on mental health and more on the importance of a healthy diet, routine, exercise, and fresh air.[267]

213. Throughout the Inquiry period, as research and understanding grew, people started to pay more attention to children and young peoples' emotional, as well as physical, wellbeing.[268] Some physical discipline of children and young people was accepted for a large part of the Inquiry period but the law noted that this should be "reasonable force".[269]

214. Globally, the influence of culture on child development was well established by the 1950s, based on works such as those of cultural anthropologist Margaret Mead, Carl Murchison's Handbook of Child Psychology and Leonard Carmichael's Manual of Child Psychology. B.F. Skinner's experimental work, and its focus on observable behaviour and how it can be shaped using reward and punishment, was highly influential. John Bowlby's attachment theory was further developed by researchers such as Mary Ainsworth over the 1960s.

215. Child psychiatry developed as a separate branch of psychiatry after the Second World War. In 1959, senior lecturer in psychiatry, Dr Wallace Ironside, wrote that child psychiatry was "an almost unknown specialty" in Aotearoa New Zealand.[270]

216. Psychologists based in Aotearoa New Zealand and elsewhere were researching and publishing on local child development issues from at least the late 1950s.[271] At the end of the 1960s the Association for the Study of Childhood held a conference that included papers on the role of the family in personality, and intellectual development.[272]

217. In the 1960s there was a high demand for mental health services for youths but very few child psychiatrists. In 1972, it was estimated, based on population, that Aotearoa New Zealand needed at least 60 child psychiatrists to meet local need. Six were available.[273] More information on child psychiatry is contained in the Inquiry's 2022 interim report, Beautiful Children – Inquiry into the Lake Alice Child and Adolescent Unit.[274]

267 Wolfe, R, The time of our lives: Growing up in New Zealand (Random House, 2003, page 10).
268 Brookes, B, A history of New Zealand women (Bridget Williams Books, 2016, page 323).
269 Crimes Act 1969, section 59.
270 "Mental group work," The Press (29 April 1958, page 7), in Royal Commission of Inquiry into Abuse in Care, Beautiful children: Inquiry into the Lake Alice Child and Adolescent Unit (2022).
271 Earle, MJ, "Rakau children: From six to thirteen years", Psychology, No 11, Monographs on Māori social life and personality, No 4 (1958); Ausubel, DP, "Acculturative stress in modern Māori adolescence," Child Development, 31(4), (1960, pages 617–631).
272 Methven, RJ, "The family and personality development," Paper 4 in The New Zealand Family and Child Development, the 1968 lectures delivered to the Association for the Study of Childhood (New Zealand University Press, 1969, pages 40–49); Lawrence, PJ, "The family and intellectual development," Paper 5 in The New Zealand Family and Child Development, the 1968 lectures delivered to the association for the Study of Childhood (New Zealand University Press, 1969, pages 50–64).
273 Position statement of the Australian and New Zealand College of Psychiatrists, Child Psychiatric Services in Australia and New Zealand (September 1972, page 3). Referenced in Royal Commission of Inquiry into Abuse in Care, Beautiful children: Inquiry into the Lake Alice Child and Adolescent Unit (2022).
274 Royal Commission of Inquiry into Abuse in Care, Beautiful children: Inquiry into the Lake Alice Child and Adolescent Unit (2022).

Te iti o te aroā ki te tūkino tamariki
Little awareness of child abuse and neglect

218. Data collection and published statistics on abuse varied over the Inquiry period, and it is not always easy to paint an accurate picture of its frequency.

219. During the early part of the Inquiry period, societal awareness of child abuse and child sexual abuse was often limited or, in the case of child discipline, was not considered abuse by many. Using physical force to correct bad behaviour in schools and the family environment was legal and socially acceptable for most of the Inquiry period.

220. However, throughout the Inquiry period many of the forms of abuse the Inquiry heard about were against the law. Under the Crimes Act 1961, which largely continued provisions under the Crimes Act 1908, it was a crime to:

- rape or have unconsented, unlawful sexual connection with another person[275] or to have sex with a child under the age of 16[276]
- ill-treat or neglect a child[277]
- wound, injure or assault anyone.[278]

221. In annual reports published by the Division of Child Welfare from 1950 to 1966, there was little mention of child abuse, other than a more general reference to protecting children under the age of 6 in foster care from ill-treatment.

222. At least some level of parental physical discipline was seen as acceptable by the Child Welfare division during this time, although it was acknowledged that there were better alternatives to disciplining a child than "thrashing".[279]

223. The division's research unit began collecting data on child abuse in the community from the early 1960s.[280] By the mid-1960s, division staff were investigating, on average, between 300 and 400 incidents of suspected abuse per year. Child welfare officers believed that the true scale was vastly underestimated due to the lack of reporting.[281]

224. In 1967 the first nationwide survey of physical child abuse in Aotearoa New Zealand was conducted.[282] The survey did not collect data on child sexual abuse.

275 Crimes Act 1961, section 128.
276 Crimes Act 1961, sections 132 and 134.
277 Crimes Act 1961, section 195.
278 Crimes Act 1961, sections 188, 189 and 193.
279 Department of Education, Annual report on child welfare, State care of children, special schools and infant-life protection: For the year ended 31 March 1959 (RE Owen, Government Printer, 1959, page 17).
280 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, pages 250–251).
281 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 251).
282 Dalley, B, Child abuse (Te Ara – The Encyclopedia of New Zealand, 5 May 2011), https://teara.govt.nz/en/child-abuse.

Te haere tonutanga o ngā wero me ngā porotū
Continuing challenges and activism

225. During the 1960s and 1970s, several groups, including Māori, human rights, gay rights and disability rights activists and Pacific Peoples placed the State's care and protection system under increased scrutiny and broadly challenged the status quo.

226. In the late 1960s, a number of emerging movements and ideas influenced Māori activism:

- Pākehā anti-racist groups and emerging Māori protest movements joined together in response to the ban of Māori rugby players from the 1960 All Blacks tour of South Africa[283]
- Māori activists, including Ngahuia Te Awekotuku and Donna Awatere Huata advocated for the rights of wāhine Māori[284]
- the surge in strikes and class struggles influenced the political awareness of Māori workers. Te Hokioi and the Māori Organisation on Human Rights (MOOHR) aimed to unite Māori and working-class activism. They highlighted issues in housing, sports, employment, and Māori political rights, addressing Treaty of Waitangi concerns and advocating for a bicultural Aotearoa New Zealand.[285]

227. Blind people mobilised in response to the nature of the cradle-to-grave provision of services to blind people, and the numerous allegations of sexual abuse of blind children.[286] Blind Citizens NZ was founded in 1945 (as the Dominion Association for the Blind) to advance the interests of blind people. Only blind people could be members. Its achievements included:

- the 1958 abolition of the means test for blind people applying for the invalid's benefit
- beginning talking-book services, radio for the blind, and magazine taping
- training members to use speech and braille programmes on computers.[287]

228. Due to the State and society often devaluing Pacific Peoples, they created their own support systems and communities to rely on. Churches often became the hearts of Pacific communities.[288] These support systems were often formed from the ground up and were community or worker focused – for example, a community support group for immigrating Pacific teachers.

283 Te Ahu, The Evolution of Maori Protest (The Anarchist Library, 1998, page 4).
284 Te Ahu, The Evolution of Maori Protest (The Anarchist Library, 1998, page 5).
285 Te Ahu, The Evolution of Maori Protest (The Anarchist Library, 1998, page 6).
286 For example, the case of Clutha Mackenzie in Hansen, P, Mackenzie, Clutha Nantes, Dictionary of New Zealand Biography (Te Ara – The Encyclopedia of New Zealand, first published in 1998, updated February 2006), https://teara.govt.nz/en/biographies/4m17/mackenzie-clutha-nantes.
287 Sullivan, M, Disability and disability organisations (Te Ara – The Encyclopedia of New Zealand, 2018), https://teara.govt.nz/en/disability-and-disability-organisations.
288 Macpherson, C, Pacific churches in New Zealand: Programmes and services (Te Ara – The Encyclopedia of New Zealand, 2018) , https://teara.govt.nz/en/pacific-churches-in-new-zealand/page-2.

229. Pacific Peoples developed resilience in the face of racism, and civil rights activists fought back against discrimination. In 1964, the Citizens Association for Racial Equality was established. It was made up of Māori and Pacific Peoples and aimed to devote equal attention to racial questions in Aotearoa New Zealand and abroad. They considered the problems faced by Māori and Pacific Peoples moving to the cities.[289]

230. The 1960s saw the beginnings of gradual change towards the realisation of rights for Takatāpui, Rainbow and MVPFAFF+ New Zealanders. The Dorian Society, Aotearoa New Zealand's first social club for homosexual men, was formed in Te Whanganui-ā-Tara Wellington in 1962.[290] In 1967, a group of lawyers formed the New Zealand Homosexual Law Reform Society. It presented a petition to Parliament urging homosexual law reform in 1968.[291] Internationally, in 1969 homosexual men and women resisted arrest during the Stonewall Riots in New York City. This is regarded as the start of the gay liberation movement.[292]

Kāore he tautoko tokoora, ka heke ngā āhuatanga ohanga
No dedicated welfare support, economic conditions decline

231. Before the 1970s, there were few dedicated benefits for single parents or parents with disabled children under 16.[293] Those in households with no wage earner, or with additional needs, could find themselves dependent on a system of discretionary benefits, tax abatements and welfare services.[294]

232. Discretionary welfare included assistance such as food, blankets, cash grants and support with life stress such as family relationships, children's behaviour and parenting advice. The community in the form of family members, friends and neighbours were also a source of care and support to individuals in need.

289 Consedine, R, Anti-racism and Treaty of Waitangi activism: Government and community anti-racism organisations (Te Ara – The Encyclopedia of New Zealand, 5 May 2011, revised 28 May 2018, page 5), https://teara.govt.nz/en/anti-racism-and-treaty-of-waitangi-activism/page-5.
290 Lesbian and Gay Archives of New Zealand, "Legislating homosexuality," in Laurie, A & Evans, L (eds), Twenty years on: Histories of homosexual law reform in New Zealand (Massey University, 2009, page 95).
291 Lesbian and Gay Archives of New Zealand, "Legislating homosexuality," in Laurie, A & Evans, L (eds), Twenty years on: Histories of homosexual law reform in New Zealand (Massey University, 2009, pages 95–97).
292 Lesbian and Gay Archives of New Zealand, "Legislating homosexuality," in Laurie, A & Evans, L (eds), Twenty years on: Histories of homosexual law reform in New Zealand (Massey University, 2009, pages 95–97).
293 Disabled Persons Community Welfare Act 1975, No 122, sections 13 and 31.
294 Wright, M, Illustrated history of New Zealand (David Bateman, 2013, page 214).

233. In 1967, Aotearoa New Zealand faced a short recession.[295] Throughout the 1970s, issues such as the oil shocks, increasing prices and the rising costs of land and property reduced buying power.[296] Families receiving discretionary welfare support rose from 7,150 in 1950 to 39,759 by 1965.[297] The universal family benefit, introduced in 1946 and payable to families for each child under 16, was not indexed to inflation and decreased in value over the period.[298]

234. Women whose husbands had died were eligible for the Widow's Benefit from 1911, with additional payments for dependent children.[299] There was also support available for women whose husbands had abandoned them.[300] There was no equivalent support for widowers or solo fathers, creating a loophole in government policies that meant many solo fathers were unable to support their children at home. An unemployment benefit was available from 1938 for both men and women. Qualifying criteria included not being unemployed without a good reason, being available for work and taking reasonable steps to find employment.[301] In practice the Department of Social Security was reluctant to grant the unemployment benefit to unmarried mothers, partly out of concerns about creating long term welfare dependency.[302]

235. During the Inquiry period the State funded many social services in New Zealand, but a significant quantity of social services was also funded by charities and church organisations. These and the available State supports were uncoordinated and offered mostly targeted assistance. Targeted assistance often fails to address the social and economic barriers that prevent the most disadvantaged from thriving and at best functions as a stop gap rather than a long term solution. These barriers include factors such as the national economic framework, gender dynamics, power disparities, racial biases, political beliefs, and community influences.

236. Multiple State agencies, departments and charities could be involved with a family, each unaware of what the others were doing. The Child Welfare division of the Ministry of Education could be involved because of concerns with a child's behaviour at school, Internal Affairs and the Justice Departments could be involved through the Family Guidance Council if marriage counselling was needed. Various charities such as Catholic Social Services, The Salvation Army, Rotary, Mayoral Relief Committees and the Society for the Protection of Women and Children might also be involved too.[303]

295 Wright, M, Illustrated history of New Zealand (David Bateman, 2013, page 189).
296 Wright, M, Illustrated history of New Zealand (David Bateman, 2013, page 290).
297 Labrum, B, "Persistent needs and expanding desires: Pākehā families and State welfare in the years of prosperity," in Dalley, B & Labrum, B (eds), Fragments: New Zealand cultural and social history (Auckland University Press, 2000, page 193).
298 Kia Piki Ake Welfare Expert Advisory Group, A brief history of family support payments in New Zealand (July 2018, page 4).
299 Widows Pension Act 1911, section 3; Kia Piki Ake Welfare Expert Advisory Group, A brief history of family support payments in New Zealand (July 2018, page 4).
300 McKenzie, A, Social assistance chronology 1844–2003 (Ministry of Social Development, 2023, page 77).
301 Social Security Act 1938, sections 51 and 54.
302 McClure, M, A civilised community: A history of social security in New Zealand 1898–1998 (Auckland University Press, 1998, page 156).
303 McClure, Mt, A civilised community: A history of social security in New Zealand 1898–1998 (Auckland University Press, 1998, pages 148 –149).

237. Author Margaret McClure summed up the number of agencies a family in need could interact with in seeking support with her example of the Rowlands family:

"While the father was away for five weeks the mother and family of five children lived and paid rent out of the family benefit alone. When Mr Rowlands returned home he was arrested for failing to support his family. His wife withdrew the charge when she realised that he would be imprisoned and unable to work … the maintenance officer refused to act for her in future if her husband left again, which would make her ineligible for a full deserted wives' benefit. The Social Security officer refused to grant help from the special assistance fund because the husband had returned home and had a job. The Child Welfare officer suggested that in view of the father's drinking … Child Welfare should support the family … claiming that short-term help could save the mother from breakdown, and was cheaper than the long-term institutionalisation of the children."[304]

238. Government grants to the non-profit sector grew from the 1960s. By the late 1960s central government was providing around $3.9 million ($144 million in 2024) to the non-governmental sector for services like churches' work for Pacific migrants, kindergartens, Marriage Guidance, Prisoners' Aid and Rehabilitation, the Māori Education Foundation and youth groups such like Girl Guides. By the mid-1980s, 68 percent of this funding was pre-allocated, meaning it rolled over to the same providers year on year.[305] This funding included grants to faith-based organisations providing care for tamariki and rangatahi who were in care or otherwise not living with their families.

304 McClure, M, A civilised community: A history of social security in New Zealand 1898 – 1998 (Auckland University Press, 1998, pages 144 –145).

305 Tennant, M, O'Brien, M & Sanders, J, The history of the non-profit sector in New Zealand (Office for the Community and Voluntary Sector, 2008, page 21).

Ūpoko | Chapter 7
1970–1999 – Te akaakatanga ā-ōhanga me te panonitanga pāpori
1970–1999 – Economic upheaval and social change

239. From the 1970s there was increasing pressure for Aotearoa New Zealand to become a more diverse and more accepting society. Across the last thirty years of the Inquiry period there were advances in human rights, in line with international developments, and some recognition of te Tiriti o Waitangi. Legislation was updated to recognise some rights and needs of people.

240. The State was reorganised along free market principles between 1984 and 1999, and increasingly sought to contract out services previously provided by the State.

241. It is also the period when understanding and awareness about abuse, neglect and trauma became better recognised and understood. There were increasing numbers of reports drawing attention to abuse and neglect in care settings, and from the mid-1980s some of the large children's homes and psychiatric institutions began to close.

Ka kaha ake te hononga o te Māori me te Karauna
Māori–Crown relationship grows

242. The Māori Renaissance in the 1970s led to a resurgence of Māori identity and autonomy. Activism among Māori and some Pākehā was fuelled by events such as the eviction at Bastion Point in Tāmaki Makaurau Auckland.[306] In the 1970s and 1980s, significant changes were initiated, including the revision of Māori land law and increased Māori community participation in planning and management of State programmes.

306 Hill, RS, Māori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 172).

243. Kara Puketapu, Secretary of the Department of Māori Affairs from 1977 to 1983, initiated the Tū Tangata programme, which focused on community-based Māori development. The overall aim of the programme was to promote cultural and economic advancement through encouraging self-reliance and self-determination at community levels.[307] The 1988 Puao-te-Ata-Tū Report also resulted in an increased focus on biculturalism in the public sector.[308]

244. Legislative references giving legal recognition to the Treaty began with the Treaty of Waitangi Act 1975, the State-Owned Enterprises Act 1986 and in early environmental law.[309] These legislative provisions are commonly referred to as "Treaty clauses".

245. In 1985 an amendment to the Treaty of Waitangi Act extended the jurisdiction of the Waitangi Tribunal to cover claims for historical breaches of te Tiriti o Waitangi from 6 February 1840 onwards.[310] Before this, its jurisdiction had only covered contemporary claims for breaches of te Tiriti o Waitangi. The modern Treaty settlements era began in the 1990s. The first major settlements occurred in the 1990s with the Treaty of Waitangi (Fisheries Claims) Settlement Act in 1992 and the Waikato-Tainui and Ngāi Tahu settlements in 1995 and 1998.

246. Treaty clauses have two common forms:

- general, requiring decision makers or those exercising functions under an Act to consider or act in accordance with the Treaty principles
- specific, referencing the Crown's Treaty responsibilities and prescribing how these are given effect to in the Act.[311]

247. Research shows that once tamariki and rangatahi Māori were brought to the attention of the State, they were more likely than non-Māori to be taken into social welfare care. This was for both care and protection and youth justice purposes.

248. While many of the efforts to recognise Māori culture and calls for self-determination were genuine, some commentators suggest that these only amounted to changes in the State's strategies to achieve policy goals "that do not depart significantly from 19th-century assimilationist goals".[312]

307 Hill, RS, Maori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 196).
308 Hill, RS, Maori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 213).
309 The Office for Māori Crown Relations – Te Arawhiti, Providing for the Treaty of Waitangi in legislation and supporting policy design: questions for policy makers (2022, page 1).
310 Treaty of Waitangi Amendment Act 1985, section 3.
311 The Office for Māori Crown Relations – Te Arawhiti, Providing for the Treaty of Waitangi in legislation and supporting policy design: questions for policy makers (2022, page 1).
312 Fleras, A cted in Armitage, A, Comparing the policy of Aboriginal assimilation: Australia, Canada, and New Zealand, (University of British Columbia Press, 1995, page 241); Cleland, A, "Care of Children Act 2004: Continuation of cultural assimilation", Victoria University of Wellington Law Review, Volume 54 (2023, page 697).

249. In 1989, the State proposed a partnership model with iwi, aimed at transforming the Māori–Crown relationship and devolving social services to iwi.[313] The newly formed Ministry of Māori Affairs was charged with encouraging Māori expression of rangatiratanga, although this expression would be subject to it enhancing Aotearoa New Zealand's economic, social and cultural life as defined by the State. The Runanga Iwi Act 1990 was enacted to provide for iwi to become 'authorised voices' enabled to exercise powers granted to them under the Act by the State to deliver social, economic and cultural programmes.[314]

250. Despite the proposals to devolve services, power was still in in State hands. Many saw this as institutional assimilation rather than the partnership the Crown claimed it was seeking with iwi; "'a denial of rangatiratanga rather than progress towards it".[315] Others argued that making "provision for Māori cultural preferences...[as] an "extra"" within existing State frameworks was rooted in colonial notions of cultural superiority.[316]

251. The move towards devolution was diverted in the 1990s, with the Government emphasising mainstreaming State service delivery to Māori instead. Services were organised around supporting the not-for-profit sector and providing for Māori entities to tender for Crown contracts.[317] Although the number of Māori service providers rose from "almost zero to more than a thousand",[318] Māori argued that the State's procurement rules constrained the exercise of rangatiratanga, and thus fell short of the partnership required under the Treaty of Waitangi:[319]

> ***"...any resources or powers conceded to Māori communities could be taken back if the actions of the recipients displeased ministers or officials".***[320]

313 Hill, RS, Maori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 234).
314 Hill, RS, Maori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, pages 236–237).
315 Hill, RS, Maori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 26).
316 Māori Perspective Advisory Committee, Puao-te-ata-tu (day break): The report of the Ministerial Advisory Committee on a Māori perspective for the Department of Social Welfare (Department of Social Welfare, 1988, page 77); Cleland, A, "Care of Children Act 2004: Continuation of cultural assimilation", Victoria University of Wellington Law Review, Volume 54 (2023, pages 676 and 697).
317 Hill, RS, Maori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, pages 248 and 250).
318 Durie, M, Ngā Tai Matatū: Tides of Māori Endurance (Melbourne, Oxford University Press, 2005, page 50), cited in Tennant, M, O'Brien, M & Sanders, J, The history of the non-profit sector in New Zealand (Office for the Community and Voluntary Sector, 2008, page 27).
319 Tennant, M, O'Brien, M & Sanders, J, The history of the non-profit sector in New Zealand (Office for the Community and Voluntary Sector, 2008, page 21).
320 Hill, RS, Maori and the State: Crown-Māori relations in New Zealand/Aotearoa, 1950–2000 (Victoria University Press, 2009, page 194).

Ka tīmata te tino kite i te Māori i ngā pūnaha taurima
Māori begin to be over-represented in care

252. During the Inquiry period, once tamariki and rangatahi Māori were brought to the attention of the State, they were more likely than non-Māori children to be taken into social welfare care. Once in social welfare care, Māori were more likely to be criminalised or placed in a harsher environment, and less likely to receive intensive support, than non-Māori.[321]

253. At the Inquiry's Contextual Hearing, expert witnesses Dr Moana Jackson and Dr Rawiri Waretini-Karena highlighted this over-representation as an integral part of colonisation, assimilation, and racism in Aotearoa New Zealand.[322]

254. In the 1970s NZ Police were more likely to apprehend and prosecute tamariki and rangatahi Māori than their Pākehā counterparts for similar offences.[323] These biases also existed in the courts. Mr SO, a social worker during the 1970s and 1980s, saw institutional racism in the courts' treatment of Māori:

> *"The courts had an attitude, and the police had an attitude, too. The court acted differently to young Māori compared to young Pākehā offenders. The court was more willing to give second chances and lighter sentences to Pākehā offenders."*[324]

255. Throughout the 1970s and 1980s, there were increasing concerns about issues such as poor conditions, ill-treatment and racism in overcrowded social welfare institutions.[325]

256. There was also growing understanding that the care and protection and youth justice systems operated in direct opposition to Māori concepts of whānau and tino rangatiratanga.[326]

321 Savage, C, Moyle, P, Kus-Harbord, L, Ahuriri-Driscoll, A, Hynds, A, Paipa, K, Leonard, G, Maraki, J & Leonard, J, Hāhā-uri, hāhā-tea: Māori involvement in State care 1950–1999 (Ihi Research, 2021, page 138).
322 Witness statements of Dr Rawiri Waretini-Karena (30 October 2019, pages 9, 13–14) and Dr Moana Jackson (29 October 2019, pages 7–8).
323 Savage, C, Moyle, P, Kus-Harbord, L, Ahuriri-Driscoll, A, Hynds, A, Paipa, K, Leonard, G, Maraki, J & Leonard, J, Hāhā-uri, hāhā-tea: Māori involvement in State care 1950–1999 (Ihi Research, 2021, page 181).
324 Witness statement of Mr SO (4 May 2021, paras 7–10).
325 Doolan, M, "Practice notes: Understanding the purpose of youth justice in New Zealand," Aotearoa New Zealand Social Work, Issue 3 (2008, page 65). Mike Doolan is the former chief social worker of the Department of Child, Youth and Family Services.
326 Māori Perspective Advisory Committee, Puao-te-ata-tu (day break): The report of the Ministerial Advisory Committee on a Māori perspective for the Department of Social Welfare (Department of Social Welfare, 1988, page 7).

Ngā pāpātanga ki ngā iwi Pasifika i ngā urutomotanga atatū
Pacific Peoples impacted by Dawn Raids

257. As a relatively wealthy country with educational and economic opportunities, Aotearoa New Zealand was known to some people in the Pacific Islands as "the land of milk and honey".[327] For New Zealanders, the Pacific Islands represented a source of cheap labour.[328]

258. The economic downturn of the 1970s led to a State focus on Pacific Peoples and made their "place in Aotearoa New Zealand both difficult and precarious".[329] Pacific Peoples faced increasing discrimination and backlash. The State falsely accused "overstaying" Pacific Peoples of both taking New Zealanders' jobs and being a burden on society through unemployment.[330]

259. This led to what is now known as the Dawn Raids, which involved NZ Police raiding the homes and workplaces of Pacific Peoples, often in the early hours of the morning, and "...employing aggressive or intimidatory tactics" to find overstayers with expired work permits.[331]

260. The Dawn Raids began in 1974 under the Labour Government. A new series of Dawn Raids occurred in 1976 after the National Government was elected in 1975 and had drawn on racist stereotypes to distort societal views of Pacific Peoples.[332] These raids were carried out at any time of the day or night by NZ Police specifically targeted Pacific Peoples rather than other groups of workers who had also overstayed their visas.[333]

261. Pacific communities were distressed by the raids. Imprisonment and deportation disrupted families' and individuals' lives. Children and young people could find themselves alone while parents and caregivers were processed as overstayers.[334] Some enduring effects of the Dawn Raids included Pacific Peoples and the term overstayer being seen as one and the same, and experiences of ongoing and widespread racism.

327 Māhina-Tuai, K, "A land of milk and honey? Education and employment migration schemes in the postwar era," in Mallon, S, Māhina-Tuai, K & Salesa, D (eds), Tangata o le Moana: New Zealand and the People of the Pacific (Te Papa Press, 2012, pages 161–177).

328 Māhina-Tuai, K, "A land of milk and honey? Education and employment migration schemes in the postwar era," in Mallon, S, Māhina-Tuai, K & Salesa, D (eds), Tangata o le Moana: New Zealand and the People of the Pacific (Te Papa Press, 2012, pages 161–177).

329 Salesa, D, Island time: New Zealand's Pacific futures (Bridget Williams Books, 2017, page 12).

330 Anae, M, "All power to the people: Overstayers, Dawn Raids and the Polynesian Panthers" in Mallon, S, Māhina-Tuai, K & Salesa, D (eds), Tangata o le Moana: New Zealand and the People of the Pacific (Te Papa Press, 2012, pages 221–240, page 221).

331 Anae, M, "All power to the people: Overstayers, Dawn Raids and the Polynesian Panthers," in Mallon, S, Māhina-Tuai, K & Salesa, D (eds), Tangata o le Moana: New Zealand and the People of the Pacific (Te Papa Press, 2012, pages 221–240, page 222).

332 Anae, M, "All power to the people: Overstayers, Dawn Raids and the Polynesian Panthers" in Mallon, S, Māhina-Tuai, K & Salesa, D (eds), Tangata o le Moana: New Zealand and the People of the Pacific (Te Papa Press, 2012, pages 221–240).

333 Barber, S & Naepi, S, "Sociology in a crisis: Covid-19 and the colonial politics of knowledge production in Aotearoa New Zealand," Journal of Sociology, 56(4) (2020, pages 693–703, page 701).

334 Anae, M, "All power to the people: Overstayers, Dawn Raids and the Polynesian Panthers," in Mallon, S, Māhina-Tuai, K & Salesa, D (eds), Tangata o le Moana: New Zealand and the People of the Pacific (Te Papa Press, 2012, pages 221–240, page 238).

262. The Dawn Raids also affected Pacific Peoples' relationships with authorities. The Dawn Raids lasted until 1976, only stopping after strong community protests and criticism.[335]

263. Despite the challenges they faced, Pacific Peoples remained resilient and built their own support systems. Pacific churches became both spiritual and community hubs. For many, churches replaced the village structures of their previous homes.[336] The significance of the church to Pacific Peoples increased the number of pastoral care relationships between clergy and young people.

Ngā panonitanga ki ngā penihana tokoora me te whakahouhia ōhanga
Changes to welfare benefits and economic restructuring

Ka whakauruhia te penihana take kāinga
Domestic Purposes Benefit introduced

264. By the 1970s, social attitudes towards single motherhood were changing and more babies born to unmarried mothers stayed with their mothers than were placed up for adoption.[337]

265. The 1973 introduction of the Domestic Purposes Benefit, for which unmarried mothers and other sole parents were eligible, was a sign of some relaxation of social attitudes towards sex outside of marriage and made it easier for single women to keep their babies.[338] Both single parents and women leaving relationships benefited from the DPB once it was introduced.

266. These changes came out of the recommendations of the Royal Commission of Inquiry into Social Security. Established in 1969, the Commission reported back in 1972 with the core principle that the State should "ensure … that everyone is able to enjoy a standard of living much like that of the rest of the community and thus is able to feel a sense of participation and belonging to the community".[339] Other changes included an increase in the Family Benefit from $3 to $6 a week,[340] equivalent to around $80 in 2024.[341]

335 Anae, M, "All Power to the People: Overstayers, Dawn Raids and the Polynesian Panthers," in Mallon, S, Māhina-Tuai, K & Salesa, D (eds), Tangata o le Moana: New Zealand and the People of the Pacific (Te Papa Press, 2012, pages 221–240, page 233).
336 Macpherson, C, Pacific churches in New Zealand: Programmes and services (Te Ara – The Encyclopedia of New Zealand, 2018, page 2), https://teara.govt.nz/en/pacific-churches-in-new-zealand/page-2.
337 Else, A, A question of adoption: Closed stranger adoption in New Zealand, 1944–1974 (Bridget Williams Books, 1991, page 159).
338 Tennant, M, The fabric of welfare: Voluntary organisations, government and welfare in New Zealand, 1840–2005 (Bridget Williams Books, 2007, page 120); Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 33)7.
339 Royal Commission of Inquiry into Social Security, quoted in Welfare Expert Advisory Group, A brief history of family support payments in New Zealand (Welfare Expert Advisory Group, 2018, page 5).
340 Welfare Expert Advisory Group, A brief history of family support payments in New Zealand (Welfare Expert Advisory Group, 2018, page 5).
341 Calculated from the Reserve Bank of New Zealand inflation adjustment calculator using General CPI as a comparator, Reserve Bank of New Zealand Inflation Calculator https://www.rbnz.govt.nz/monetary-policy/about-monetary-policy/inflation-calculator, (accessed March 2024).

Ka whakauruhia he tautoko mō te hunga whaikaha
Support for disabled people introduced

267. The 1967 Woodhouse Report, which had recommended a public insurance scheme for people with impairments, was the foundation for the passage of the Accident Compensation Act 1972 and the establishment of the Accident Compensation Commission (later Corporation), ACC, in 1974. The new ACC system removed an individual's right to sue an individual or organisation in relation to injuries caused by accident and replaced it with public funding for the costs of living and rehabilitation.

268. The ACC system only covered people whose impairment had been acquired by an accident or certain criminal acts. People who were congenitally Deaf or born with a disability were excluded.[342]

269. The original recommendations in the Woodhouse Report were for the system to include support for people whose impairments did not result from an accident, and a later attempt was made to extend the scope of ACC.[343] The system created ongoing inequities between people disabled by accident, and people with who acquired their disability in other ways, who were not covered by ACC.[344]

270. The Disabled Persons Community Welfare Act 1975 was introduced to further promote access to community-based supports and services for disabled people.[345] It provided some support and assistance for disabled people not covered by ACC.

271. It introduced accessible building standards and provided for home alterations, motor vehicle purchase and vehicle modification and other financial assistance. This was to increase accessibility for disabled people within the community. Under this regime, training facilities for people with learning disabilities and short-term care for disabled children were provided.[346]

272. A Handicapped Child Allowance was introduced in 1978 for people looking after children with a severe physical or mental disability. Initially set at $8 per week, it was later increased to $14.50 per week.[347]

273. Despite these changes, many disabled people "had considerable difficulties in proving their eligibility to access services and other resources, and therefore were unable to access adequate supports to be able to fully participate in their community."[348]

342 Forster, W, Removing disabling experiences: a vision for the future of our people (New Zealand Law Foundation, 2022, foreword and page 1).
343 Duncan, D, "50 years on from the Woodhouse Report – workers' health in New Zealand's ACC scheme", Policy Quarterly, 15(1) (2019, pages 54–60).
344 Accident Compensation Corporation. Our history, (ACC, 2018), https://www.acc.co.nz/about-us/who-we-are/our-history/#1972--the-accident-compensation-act.
345 Disabled Persons Community Welfare Act 1975, No 122, section 4.
346 Disabled Persons Community Welfare Act 1975, No 122, Part 4, General provisions.
347 Welfare Expert Advisory Group, A brief history of family support payments in New Zealand (Welfare Expert Advisory Group, 2018, page 5).
348 Georgeson, S, The Disabled Person's Assembly 1983–1999: Successes, Challenges and Lessons for the Disability Movement in New Zealand, Master's Thesis, Massey University (2000, page 53).

Ngā whakahoutanga o ngā tau 1980
1980s reforms

274. In 1984 the new Labour Government began restructuring the economy and transforming how the State sector was run. This restructure was influenced by neoliberal ideas and was an attempt to address long-standing issues with the structure and performance of Aotearoa New Zealand's economy.[349]

275. The restructure had an immediate social effect. State sector restructuring alone added 40,000 unemployed to the benefit queue, while major manufacturing industries such as forestry declined by 67 percent.[350]

276. All of this had a disproportionately negative impact on social and economic outcomes for Māori and Pacific Peoples.[351] Māori have been described as the "shock absorbers" of these reforms, bearing the brunt as many worked in the industries most affected by the economic restructure as well as government jobs in forestry, the post office and the railways that were disestablished in the restructures.[352] The resulting unemployment levels for Māori increased educational, health and socioeconomic disparities between Māori and non-Māori.[353] It also made them more likely to experience State intervention in their family life.[354] There was a corresponding negative impact social and economic outcomes for Pacific Peoples.

Ngā awenga o te paheketanga ōhanga i ngā tau 1990
Impacts of recession in the 1990s

277. The economic reforms begun in 1984 under the fourth Labour Government and continued into the 1990s under the fourth National Government. In 1991, the State began a programme of economic and welfare reform.[355] This negatively impacted all children and young people, but disproportionately affected Māori and Pacific children and young people.[356]

278. The reforms increased unemployment and widened the gap between rich and poor. From the mid-1980s to mid-2000s, the increase in inequality in Aotearoa New Zealand was the greatest recorded anywhere in the developed world.[357]

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349 The Treasury, Economic management: Part Two – Policy and organisational issues (14 July 1984, pages 103–104).
350 Shirley, I, Koopman-Boyden, P, Pool, I & St John, S, "Family change and family policies: New Zealand," in Kamerman, SB & Kahn, AJ (eds), Family change and family policies in Great Britain, Canada, New Zealand and the United States (Clarendon Press, Oxford 2007, page 294).
351 Poata-Smith, ETA, "Inequality and Māori," in Rashbrooke, M (ed), Inequality: A New Zealand crisis (Bridget Williams Books Limited, 2013, pages 148–158).
352 Pōmare, E, Keefe-Ormsby, V, Ormsby, C, Pearce, N, Reid, P, Robson, B & Watene-Haydon, N, Hauora: Māori standards of health 3: A study of the years 1970–1991 (Te Rōpū Rangahau Maori Research Centre, 1995, page 149); Williams, J, "Build a bridge and get over it – the role of colonial dispossession in contemporary indigenous offending and what we should do about it," speech for the Robin Cooke Memorial Lecture 2019, reproduced in the New Zealand Journal of Public and International Law 18 (2020, page 14).
353 Smith, LT, The native and the neoliberal down under: Neoliberalism and "endangered authenticities" in Indigenous experience today (Routledge, 2020, pages 333–352).
354 Hyslop, I & Keddell, E, Changes needed to the current system of child protection and care in Aotearoa, Expert opinion prepared for the Royal Commission of Inquiry into Abuse in Care (7 June 2022, page 8).
355 Belgrave, M, in Dalley, B & Tennant, M (eds), Past judgement: Social policy in New Zealand history (Otago University Press, 2004, page 37).
356 Rashbrook, M & Wilkinson, A, Cracks in the dam: The social and economic forces behind the placement of children into care (2019, page 27).
357 Rashbrooke, M (ed), Inequality: A New Zealand Crisis (Bridget Williams Books, 2013, page 1).

Ka kapi haere ngā whare hauora hinengaro, hauora hinengaro tamariki hoki
Psychiatric and psychopaedic hospitals begin to close

279. The Mental Health Foundation was established in 1977, at a time when mental distress was not generally spoken about openly. The Foundation had its roots in the belief that early developmental experiences are critical to people's lifelong mental health and was formed to promote the mental health and wellbeing of all New Zealanders.[358]

280. The public's fear of mental distress continued throughout the 1980s and 1990s. The 1988 Mason Report stated that:

> *"The general population appears to have a very distorted image of psychiatric patients. This image is influenced by a lack of education and knowledge of the major psychiatric disorders and a misconception that psychiatric illness is inextricably linked with dangerousness."*[359]

281. The 1980s and 1990s also featured increased recognition of the lack of appropriate care and resourcing for people who experienced mental distress. including inquiries into the mental health system in the mid-1980s and 1990s.[360]

282. The Mental Health Act 1992 provided a new definition of mental disorder and set out patients' rights and processes, reviews and inquiries to protect them.[361] The intent was to provide compulsory treatment in the least intrusive and restrictive way, but medical professionals could still require compulsory treatment and incarceration.

283. The State set up an Inquiry in 1995 to investigate serious shortcomings in the mental health system. The resulting second Mason Report was released in 1996 and highlighted issues with funding, discrimination and the workforce.[362]

> *"The Mental Health strategy is basically a fairly good document, but it has no legs. If it remains standing still it is nothing more than a vision statement."*[363]

358 Mental Health Foundation, Change in mind: Kia puawai a mua, a history of the Mental Health Foundation of New Zealand (2008, pages 12–13 and page 17).
359 Mason, K, Report of the Committee of Inquiry into procedures used in certain psychiatric hospitals in relation to admission, discharge or release on leave of certain classes of patients (Ministry of Health, 1988, page 138).
360 Mason, K, Report of the Committee of Inquiry into procedures used in certain psychiatric hospitals in relation to admission, discharge or release on leave of certain classes of patients (Ministry of Health, 1988); Mason, K, Report of the Ministerial Inquiry to the Minister of Health Hon Jenny Shipley – Inquiry under section 47 of the Health and Disability Services Act 1993 in respect of certain mental health services (Information Centre, Ministry of Health, 1996).
361 Mental Health (Compulsory Assessment and Treatment) Act 1992, sections 2, 57–63 and Part VI.
362 Gawith, L & Abrams, P, "Long journey to recovery for Kiwi consumers: Recent developments in mental health policy and practice in New Zealand," Australian Psychologist (2006, pages 140–148, page 142).
363 Mason, K, Report of the Ministerial Inquiry to the Minister of Health Hon Jenny Shipley – Inquiry under section 47 of the Health and Disability Services Act 1993 in respect of certain mental health services (Information Centre, Ministry of Health, 1996, page 3).

284. Following the second Mason Report, the Mental Health Commission was established in 1996 and the State increased funding for community mental health support services. The Mason Report advised that the Mental Health Commission should be a single organisation responsible for mental health planning, including policy, purchases and service provision.[364]

285. The State did not implement this advice but tasked the Commission to monitor the national mental health strategy. The Mason Report's support for an anti-stigma campaign led to the establishment of the Like Minds – Like Mine programme in 1997.[365]

286. From the 1970s to the 1990s, large scale institutions were slowly replaced with smaller group settings. By 1996, almost all psychopaedic and psychiatric hospitals had closed.

287. By the early 1990s, IHC was providing residential and other forms of disability support to 10,500 adults with learning disabilities.[366]

288. Mental health services were largely devolved to a range of outpatient services and community providers.[367]

289. Despite shifting towards smaller scale care, many of the same issues experienced in large institutions were the same in these new care settings, including a regimented routine, isolation, discrimination, disablism, ableism and a lack of self-determination.

364 Mason, K, Report of the Ministerial Inquiry to the Minister of Health Hon Jenny Shipley – Inquiry under section 47 of the Health and Disability Services Act 1993 in respect of certain mental health services (Information Centre, Ministry of Health, 1996, page 3).
365 Ministry of Health, Like minds, like mine: National plan 2007–2013: Programme to counter stigma and discrimination associated with mental illness (2007, page 1).
366 National Advisory Committee on Health and Disability, To have an 'ordinary' life: Kia whai oranga 'noa': Background papers to inform the National Advisory Committee on Health and Disability (2004, page 16).
367 Gassin, T, Māori Mental Health – a report commissioned by the Waitangi Tribunal for the Health Services and Outcomes Kaupapa Inquiry (Waitangi Tribunal, 2019, page 10).

"Brother Michael put his arm around my shoulder and pulled me in close. When everyone had closed their eyes and started to pray the rosary, he slid his hand through the back of my pyjamas...I took on this abuse and internalised it as something I had done wrong."

LEONIE JACKSON
Survivor

Ka piki te aroā ki te whanaketanga me te tūkinotanga tamariki
Increasing awareness of child development, abuse and trauma

Te whakapiki mātauranga o te whanaketanga tamariki
Increasing knowledge of child development

290. Ideas and understandings of child development continued to grow during this period. During the 1970s Albert Bandura's social learning theory integrated behavioural and cognitive approaches by focusing on the impact of observing others' behaviour and its consequences. In the late 1970s, Russian psychologist L. S. Vygotsky's Mind in Society proposed that society shapes the mind's internal processes, influencing perception, memory and interaction with the world. Russian-American psychologist Urie Bronfenbrenner published The Ecology of Human Development, critiquing traditional developmental research and introducing an ecological systems theory that focused on development and behaviour within the context of different social systems.[368] From the 1970s, James and Jane Richie, psychologists teaching at the University of Waikato, argued for physical discipline of children to be made illegal and that it was damaging both to children and society.[369]

291. Te ao Māori concepts in child development and the kōhanga reo movement played an important part in understandings of child development in the 1980s and 1990s. Dr Arapera Royal Tangaere described Māori theory of child development and learning in 1993, likening the concepts behind the poutama steps design – commonly found in tukutuku panels – to Vygotsky's zone of proximal development, and the tuakana-teina concept to the concept of scaffolding in Western learning and development theory.[370]

292. Dr Tangaere also related Bronfenbrenner's ecological systems theory to Rangimarie Turuki (Rose) Pere's conception of Mai i Rangiatea, emphasising the importance of learning mātauranga Māori to child development:

> *"In doing so, the internalisation process depicts the way the child will interact in relation to the spiritual world, to people, to the land, and to the environment. Te reo Māori is the key to this knowledge."*[371]

368 Bronfenbrenner, U, "The ecology of human development," page 19, in Shonkoff, JP & Phillips, DA (eds), From neurons to neighborhoods: The science of early childhood development (Committee on Integrating the Science of Early Childhood Development, 2000, page 58).
369 Ritchie, J & Ritchie, JE, Spare the rod (Allen & Unwin, 1981).
370 Tangaere, AR, "Māori human development learning theory," in Te Whāiti, P, McCarthy, B & Durie, A (eds), Mai i rangiātea: Māori wellbeing and development (Auckland University Press, 1997, pages 46–60).
371 Tangaere, AR, "Māori human development learning theory," in Te Whāiti, P, McCarthy, B & Durie, A (eds), Mai i rangiātea: Māori wellbeing and development (Auckland University Press, 1997, page 58).

Ka nui haere te aroā ki te tūkinotanga tamariki
Greater awareness of child abuse

293. Throughout the 1970s, a growing societal awareness of abuse led to more suspected cases of child abuse being reported. The number of notifications to the Department of Social Welfare rose to nearly 20,000 by the end of the 1990s.[372]

294. A birth cohort study looking at a century of sexual abuse victimisation found that the highest prevalence for child sexual abuse was for the cohort born from 1951 to 1960 at 28.7 percent. Prevalence remained high for the period from 1961 to 1980 and was about 20 percent from 1980 onwards.[373]

295. As understanding and awareness grew, State agencies involved in care delivery progressively incorporated responses to risks and issues related to child sexual abuse into their policies.

Ka tipu te māramatanga ki te whakahapatanga
Understanding of trauma grows

296. Understandings of trauma and its impacts began to grow from the 1970s. Post-traumatic stress disorder (PTSD) was added to the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM) in 1980, although it was thought at the time to be limited to people with experience of war and human-made disasters such aeroplane crashes.[374] The diagnostic criteria for PTSD were revised in 1987 and 1994, with the recognition that it was much more common than originally believed and including symptoms specific to children. A definition of trauma as a separate diagnosis from PTSD was not available until 2013.[375]

372 Dalley, B, Child abuse (Te Ara – The Encyclopedia of New Zealand, 5 May 2011), https://teara.govt.nz/en/child-abuse.
373 Fanslow, J, Hashem, L, Gulliver, P & McIntosh, T, "A century of sexual abuse victimisation: A birth cohort analysis," Social Science and Medicine (2021, page 4).
374 Friedman, MJ, PTSD History and Overview (US Department of Veterans Affairs accessed 9 March 2024), https://www.ptsd.va.gov/professional/treat/essentials/history_ptsd.asp.
375 American Psychiatric Association, Diagnostic and Statistical Manual of Mental Disorders (5th edition, American Psychiatric Association, 2013).

He whakamārama mō te whakahapatanga
Some understanding of neglect

297. Throughout the Inquiry period there was some understanding, domestically and internationally, of the factors that could lead to neglect. Neglect often proved hard to define or detect, and different parenting practices across cultures added to the difficulties in reaching a common definition for childhood neglect.[376] Understanding of the consequences of neglect began to be better understood from the 1990s, with advances in understanding of brain development and studies such as the Bucharest Early Intervention Project which studied outcomes for children in Romanian orphanages.[377] A 2010 paper by the Ministry of Social Development noted that neglect still received less scientific and public attention compared to other forms of maltreatment.[378]

Te tipu o te aroā ki ngā mōtika tangata
Increased awareness of human rights

298. Since becoming a member of the United Nations in 1945, Aotearoa New Zealand has actively participated in international forums and organisations to promote human rights.[379] Aotearoa New Zealand contributed to the drafting and adoption of key human rights instruments such as the Universal Declaration of Human Rights in 1948 and played a role in negotiating and ratifying international human rights treaties during the latter half of the 20th century.[380]

299. Despite its international reputation, Aotearoa New Zealand could be slow in promoting human rights treaties domestically.[381] Human rights protections in Aotearoa New Zealand's domestic laws are set out in a variety of statutes and the common (court-made) law.[382] This means they are not all in one place and not all human rights have been incorporated into Aotearoa New Zealand's domestic law.

300. If individuals in Aotearoa New Zealand believe their rights have been violated, they can complain to Te Kāhui Tika Tangata Human Rights Commission, which offers a free and confidential dispute resolution service for complaints about prohibited behaviours under the Human Rights Act 1993. If an individual is unable to resolve their complaint through the Te Kāhui Tika Tangata Human Rights Commission, they can file a claim with the Human Rights Review Tribunal.

376 Ministry of Social Development, Recognising and responding to child neglect in New Zealand (Ministry of Social Development 2010, page 10).
377 Weir, Kirsten, The lasting impact of neglect (American Psychological Association Monitor on Psychology, June 2014, Vol 45, No.6).
378 Ministry of Social Development, Recognising and responding to child neglect in New Zealand (Ministry of Social Development 2010, page 2).
379 McGregor, J, Bell, S & Wilson, M, Fault lines: Human rights in New Zealand (Auckland University of Technology 2018, pages 13 and 14).
380 McGregor, J, Bell, S & Wilson, M, Fault lines: Human rights in New Zealand (Auckland University of Technology 2018, page 175).
381 United Nations, Concluding observations of the Committee on Economic, Social and Cultural Rights: New Zealand E/C.12/NZL/CO/4 (2018, para 6).
382 Glazebrook, S, Baird, N & Holden, S, "New Zealand: Country Report on Human Rights," Victoria University of Wellington Law Review, Volume 40 (2009, page 58).

301. Those unable to resolve their complaints through domestic pathways can seek resolution through United Nations human rights bodies, noting the decisions from these bodies are not legally binding. Aotearoa New Zealand reports on its human rights progress every four to five years through the Universal Periodic Review (UPR) process. The UPR provides the opportunity for each member State to update on the measures they have taken to enhance human rights domestically and to fulfil their human rights obligations.[383]

302. Aotearoa New Zealand took a number of steps during the Inquiry period to specifically incorporate rights from some human rights instruments into domestic law:

- in 1971 the Office of the Race Relations Conciliator was established to promote positive race relations in Aotearoa New Zealand, and to settle complaints of racial discrimination and racial harassment
- in 1977, the New Zealand Human Rights Commission was formed to promote a wider range of human rights issues.[384] The Human Rights Commission exercises its functions through a mix of measures such as public advocacy, training and education campaigns, public statements on important human rights issues, submissions to Parliament and litigation[385]
- the New Zealand Bill of Rights Act 1990 is the key source of legal obligation for human rights in Aotearoa New Zealand.[386] It gives legal effect to core civil and political rights but rights from the international convention on economic, social and cultural rights are excluded
- the Human Rights Act 1993 aimed to improve on the New Zealand Bill of Rights Act and better protect human rights: for example, by adding disability as grounds for discrimination. This was the result of many years of lobbying by disabled people.[387]

303. Numerous issues were raised across the later part of the Inquiry period with human rights abuses in care settings, including the use of solitary confinement and allegations of torture.[388]

383 McGregor, J, Bell, S & Wilson, M, Fault lines: Human rights in New Zealand (Auckland University of Technology, 2018, page 135).
384 Consedine, R, Anti-racism and Treaty of Waitangi activism: Government and community anti-racism organisations (Te Ara – The Encyclopedia of New Zealand, page 5), https://teara.govt.nz/en/anti-racism-and-treaty-of-waitangi-activism/page-5.
385 Royal Commission of Inquiry into the terrorist attack on Christchurch masjidain on 15 March 2019, "Ko tō tātou kāinga tēnei: Report of the Royal Commission of Inquiry," Volume 1: Parts 1–3 (2020, page 84).
386 Royal Commission of Inquiry into the terrorist attack on Christchurch masjidain on 15 March 2019, "Ko tō tātou kāinga tēnei: Report of the Royal Commission of Inquiry," Volume 1: Parts 1–3 (2020, page 82).
387 National Advisory Committee on Health and Disability, To have an 'ordinary' life, Kia whai oranga 'noa': Background papers to inform the National Advisory Committee on Health and Disability (2004, page 27).
388 Witness statement of Dr Oliver Sutherland (4 October 2019, page 20); United Nations, Decision adopted by the Committee under article 22 of the Convention concerning communication No 852/2017 CAT/C/68/D/852/2017 (2020, para 9.7); United Nations, Decision adopted by the Committee under article 22 of the Convention, concerning communication No 934/2019 CAT/C/73/D/934/2019 (2022, para 8.8).

Mōtika Māori
Māori rights

304. Ongoing calls by Māori for change raised awareness of the racism and discrimination Māori consistently faced, and some changes came about as a result.[389] Māori calls for change were the catalyst for the Treaty of Waitangi Act 1975 and establishment of the Waitangi Tribunal in 1975. These provided a legal process for historic te Tiriti o Waitangi claims and breaches to start to be investigated.

305. Ngā Tamatoa (The Warriors) was a Māori activist group formed in the 1970s to promote Māori rights. It protested breaches of te Tiriti o Waitangi. Its tactics included nationwide petitions to have the Māori language taught in schools, and submissions on State policy.[390]

306. Te Rōpū Matakite o Aotearoa campaigned against the loss of Māori land and organised the 1975 Māori land march. The Women's Anti-Racism Action Group was formed in 1984 to report on institutional racism in the Department of Social Welfare.

307. The Auckland Committee on Racism and Discrimination (ACORD) worked to bring attention to abuse in care, highlighting the appalling treatment of tamariki and rangatahi Māori within foster care and institutions.[391]

308. In the 1980s, Māori continued to raise concerns about tamariki and rangatahi Māori in social welfare care settings.[392] In 1983, the Department of Social Welfare started the Maatua Whāngai programme to place tamariki and rangatahi Māori in Māori homes rather than social welfare institutions.[393]

309. Amid calls from Māori for tino rangatiratanga, the State set up a ministerial advisory committee in 1985 to gain a Māori perspective on how the Department of Social Welfare was operating.[394] This resulted in the Puao-te-Ata-Tū Report. That report promoted a philosophy of self-help and gave a name to institutional racism. Chairman John Rangihau concluded:

> *"At the heart of the issue is a profound misunderstanding or ignorance of the place of the child in Māori society and its relationship with whānau, hapū, and iwi structures."*[395]

389 Consedine, R, Anti-racism and Treaty of Waitangi activism: Government and community anti-racism organisations (Te Ara – The Encyclopedia of New Zealand, page 5), https://teara.govt.nz/en/anti-racism-and-treaty-of-waitangi-activism/page-5.
390 Te tai – Treaty Settlement Stories, Ngā Tamatoa and Te Reo Māori society (Te Ara – the Encyclopedia of New Zealand, 2023), https://teara.govt.nz/en/te-tai/te-mana-o-te-reo-maori-nga-tamatoa.
391 Witness statement of Dr Oliver Sutherland (4 October 2019, page 9).
392 Savage, C, Moyle, P, Kus-Harbord, L, Ahuriri-Driscoll, A, Hynds, A, Paipa, K, Leonard, G, Maraki, J & Leonard, J, Hāhā-uri, hāhā-tea: Māori involvement in State care 1950–1999 (Ihi Research, 2021, page 14).
393 Waitangi Tribunal, He Pāharakeke, He Rito Whakakīkīnga Whāruarua: Oranga Tamariki Urgent Inquiry, pre-publication version (Wai 2915), (2021, page 32).
394 Māori Perspective Advisory Committee, Puao-te-ata-tu (day break): The report of the Ministerial Advisory Committee on a Māori perspective for the Department of Social Welfare (Department of Social Welfare, 1988, page 7).
395 Māori Perspective Advisory Committee, Puao-te-ata-tu (day break): The report of the Ministerial Advisory Committee on a Māori perspective for the Department of Social Welfare (Department of Social Welfare, 1988, page 7).

310. The Puao-te-Ata-Tū Report recommended that Mātua Whāngai be adequately and appropriately funded through tribal authorities to focus on nurturing children within their family groups as the primary alternative to a child going into care.[396]

311. The Puao-te-Ata-Tū Report and the resulting legislation — the Children, Young Persons, and Their Families Act 1989 — were considered ahead of their time.[397] The Department of Child, Youth and Family Services was established, and the report and the legislation were intended to make whānau, hapū and iwi central to addressing the issue of children and young people risk.

312. There were issues with the implementation of the Children, Young Persons, and Their Families Act 1989. Experts at this Inquiry's hearings said that the transformative change envisioned by Puao-te-Ata-Tū and the Children, Young Persons, and Their Families Act 1989 never eventuated. They attributed this to a lack of momentum to sustain the changes needed, a lack of resourcing, a change in governmentand a political focus on family responsibility and business efficiency in State services in the 1990s. This analysis has been echoed by historians.[398]

Mōtika Turi
Deaf rights

313. During the first half of the Inquiry period, Deaf children, young people and adults were actively discouraged or banned from speaking sign language in care settings, particularly schools. By the 1970s, Aotearoa New Zealand and the international community were aware that the policy of oralism (undertaken for the past 100 years) needed to change.[399]

314. This led to the introduction in 1979 of the Total Communication approach into the education system. Total Communication used some signing but mirrored English language and grammar. It continued to prohibit Deaf people from communicating in the way they wanted to.[400] It was not until the late 1980s that the State and general public were increasingly aware and accepting that Deaf people had their own language and culture.[401]

396 Māori Perspective Advisory Committee, Puao-te-ata-tu (day break): The report of the Ministerial Advisory Committee on a Māori perspective for the Department of Social Welfare (Department of Social Welfare, 1988, pages 12 and 34).
397 Smale, A, "The Misery-Go-Round" (North & South, September 2022).
398 Transcript of evidence of Chief Ombudsman Peter Boshier (26 August 2022, pages 1041–1042); Hyslop, I & Keddell, E, Changes needed to the current system of child protection and care in Aotearoa, Expert opinion prepared for the Royal Commission of Inquiry into Abuse in Care (7 June 2022, page 5); Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, pages 265 – 266).
399 Powell, D & Hyde, M, "Deaf Education in New Zealand: Where we have been and where we are going," Deafness & Education International, 16(3) (2014, pages 129–145, page 131).
400 Hopkins, R, Listening eyes, speaking hands: The story of Deaf Education in New Zealand (Ministry of Education, 2018, page 1).
401 Powell, D & Hyde, M, "Deaf Education in New Zealand: Where we have been and where we are going," Deafness & Education International, 16(3) (2014, pages 129–145, page 131).

315. Some other developments during this period included:

- 1977 – Deaf Association of New Zealand formed
- 1983 – first national Deaf awareness week held
- 1985 – first training course for NZSL interpreters
- 1993 – first national hui for tāngata Turi Māori held
- 1995 – the Ako report, commissioned by Te Pūni Kōkiri, finds that tāngata Turi Māori suffer additional discrimination due to being both Deaf and Māori, and that this needed to be recognised for tāngata Turi Māori to fully exercise their tino rangatiratanga in order to fulfil their aspirations in both the Māori and Deaf communities.[402]

316. Tāngata Turi identify as both Māori and Deaf, and face barriers including a lack of trained interpreters who know both New Zealand Sign Language and te reo Māori. While they are overrepresented in Deaf statistics, tāngata Turi perspectives are underrepresented in Deaf policies.[403]

Mōtika whaikaha
Disability rights

317. During the 1960s and 1970s, the disability rights movement challenged the State's policies and approach to the care of disabled people. Internationally, disabled people developed the social model of disability in response to the traditional medical model and attitudes.[404] The social model "asserts that a person is disabled by society rather than by their body or abilities".[405]

318. The social model of disability, with its emphasis on removing attitudinal and physical barriers to participation, led to policy shifts that enabled the closure of large institutions. The movement to deinstitutionalise Aotearoa New Zealand began through the advocacy of several groups and individuals. Deinstitutionalisation was first proposed in the third report of the Royal Commission into Hospital and Related Services in 1973. This report was highly critical of putting people into institutions and recommended community-based care.[406]

319. From 1974, the State stopped building new psychiatric and psychopaedic hospitals.[407] Existing institutions remained open and continued to be used. Closing psychiatric and psychopaedic institutions took more than 30 years, with Kimberley, the last of the big psychopaedic hospitals, closing in 2006.

402 Deaf Aotearoa website, History (accessed 11 March 2024), https://www.deaf.org.nz/about/history/.
403 Bennion Law, amended Statement of Claim, Wai 2575 and Wai 2143 (Bennion Law 2019 pages 3–4).
404 Oliver, M, The politics of disablement (Springer, 1990, pages 1–11).
405 Webb, OJ, The likely impact of prevailing conditions and environments on people now considered to be neurodiverse, between 1950 and 1990, Paper prepared for the Royal Commission of Inquiry into Abuse in Care (25 November 2022, page 11).
406 Third Report of the Royal Commission of Inquiry into hospital and related services, services for the mentally handicapped (1973, page 15).
407 Millen, J, Breaking barriers: IHC's first 50 years (IHC New Zealand, 1999, page 81).

320. The first pan-disability advocacy group, the Disabled Persons Assembly, was established in 1983. This was shortly after the United Nations International Year of Disabled Persons in 1981. Other disabled person's organisations joined this growing movement, including what eventually became Deaf Aotearoa.[408]

321. The Aotearoa Network of Psychiatric Survivors was created in 1990 to support users of mental health services and improve the mental health system. It lobbied for deinstitutionalisation of care and community-based housing for former patients.[409]

322. Māori disability rights activists note that despite having higher rates of disability than non-Māori, Māori are not always represented in advocacy and activist groups for disability.[410] In addition, disability frameworks such as the social model view disability as largely individual. This is at odds with indigenous perspectives, which are holistic and collective.[411]

323. The growing trend towards mainstreaming the education of learning-disabled children led the Department of Education's special residential school rolls to shrink during the 1980s.[412] The Education Act 1989 formalised the move away from special residential schools to the State education system by increasing provisions for disabled children in mainstream education.[413] However, the Secretary of Education could still direct a disabled child to attend a special school or class.

324. In 1994 the State passed the Health and Disability Commissioner Act. As part of moves to ensure that consumers of health and disability services would have the right to be treated fairly, a Code of Health and Disability Consumer's Rights was produced. An independent commissioner was appointed, assisted by a free, independent national advocacy service to support people to make complaints under the code.[414]

325. The 1992 Mental Health Act established the Mental Health Review Tribunal, an independent body appointed by the Minister of Health to decide among other things, whether patients are fit to be released from compulsory status, investigate complaints about breaches of patient rights, and appoint second-opinion psychiatrists.[415]

326. The international disability rights movement was also at the forefront of disability policies, with "Nothing about us without us" becoming the international slogan.[416] Aotearoa New Zealand established a Minister for Disability Issues in 1999.

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408 Sullivan, M & Stace, H, A brief history of disability in Aotearoa New Zealand (Office for Disability Issues, 2020, page 22).
409 Sullivan, M, Disability and disability organisations (Te Ara – The Encyclopedia of New Zealand, 2018), https://teara.govt.nz/en/disability-and-disability-organisations.
410 Hickey, H & Wilson, D, Whānau hauā: reframing disability from an indigenous perspective, MAI Journal (2017, pages 1 and 7).
411 Hickey, H & Wilson, D, Whānau hauā: reframing disability from an indigenous perspective, MAI Journal (2017, page 1).
412 Craig, T & Mills, M, Care and control: The role of institutions in New Zealand (New Zealand Planning Council, 1987, page 44).
413 Moore, D, Anderson, A, Timperley, H, Macfarlane, A, Brown, D, Thomson, C & Glynn, T, "Caught between stories: Special Education in New Zealand" (New Zealand Council for Educational Research, 1999), in Selvaraj, JA, "Inclusive education in New Zealand: rhetoric and reality," History of Education Review 45(1), (2016, pages 54–68, page 61).
414 National Health & Disability Advocacy Service website, About us (accessed 2023), https://advocacy.org.nz/about-the-advocacy-service/.
415 Mental Health (Compulsory Assessment and Treatment) Act 1992, sections 101 and 102(1).
416 Charlton, JI, Nothing about us without us: Disability oppression and empowerment (University of California Press, 1998, page 3).

Mōtika Takatāpui
Gay rights

327. The psychiatric profession's position on homosexuality as a mental illness began to shift by the 1970s. Psychiatric bodies in several countries removed homosexuality from their catalogues of mental disorders. In Aotearoa New Zealand, some of the key events in these decades included:

> 1973 – the first national lesbian organisation, Sisters for Homophile Equality (SHE), was formed
> 1970s – Aotearoa New Zealand Gay Pride Week and march begins
> 1985 – Fran Wilde, Labour Member of Parliament for Te Whanganui-ā-Tara Wellington, introduced the Homosexual Law Reform Bill. It passed in 1986, decriminalising sexual relations between adult men
> 1993 – the Human Rights Act was passed and included the prohibition of discrimination based on sexual orientation.[417]

Mōtika tamariki
Rights of children

328. Specific rights for children and young people increased across the last three decades of the Inquiry period. The Children and Young Persons Act 1974 allowed the Children's Court to remand children and young people in penal institutions if there was no suitable alternative.[418] This was changed in 1985 when only those aged 16 years and over who committed violent offences could be sent to a penal institution.[419]

329. The Children, Young Persons, and Their Families Act 1989 established the role of the Children's Commissioner.[420] The Commissioner's role is to assess and monitor the policies and practices provided under the Children, Young Persons, and Their Families Act 1989 and the outcomes being achieved for children in care.[421]

330. Aotearoa New Zealand ratified the United Nation Convention of the Rights of the Child (UNCROC) in 1993. UNCROC defines a child as every human below the age of 18 years. Article 19 specifies the child's right to protection from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse.[422]

417 Lesbian and Gay Archives of New Zealand, "Legislating homosexuality," in Laurie, A & Evans, L (eds), Twenty years on: Histories of homosexual law reform in New Zealand (Massey University, 2009, pages 95–97).
418 Children and Young Persons Act 1974, section 20(1).
419 Criminal Justice Act 1985, section 8.
420 Children, Young Persons, and Their Families Act 1989, section 410.
421 Children, Young Persons, and Their Families Act 1989, section 411.
422 United Nations General Assembly, Convention on the Rights of the Child (entry into force on 2 September 1990), (page 5).

331. The convention reflected decades of activism and growing awareness of children's rights. It set out children's rights and the responsibility of parents, adults and governments to ensure children receive these entitlements. The convention was instrumental in creating a new perspective toward children in the countries that signed up. Aotearoa New Zealand signed the convention in 1993.[423]

332. The United Nations Committee on the Rights of the Child (UNCROC) expressed its concern in 1997 that Aotearoa New Zealand's minimum age for charging a child with serious offences did not conform with the definition of the child in the UNCROC and recommended "that the [New Zealand] Government pursue the process of bringing existing legislation into line with the principles and provisions of the Convention".[424]

Mōtika iwi Pasifika
Pacific Peoples' rights

333. Pacific Peoples born in Aotearoa New Zealand formed the Polynesian Panther Party in response to the growing racism and discrimination they faced.[425] The Polynesian Panther movement was the major opposer of the Dawn Raids and fought for a fairer immigration policy, and for better conditions for Pacific migrant workers.

334. Through their efforts they drew national attention to the poor conditions of Pacific migrants and the discrimination they faced.[426]

423 Ministry of Justice, United Nations Convention on the Rights of the Child (2020).
424 United Nations, Committee on the Rights of the Child: Concluding observations of the Committee on the Rights of the Child: New Zealand CRC/C/15/Add.71 (1997, page 4, para 23).
425 Anae, M, "All power to the people: Overstayers, Dawn Raids and the Polynesian Panthers" in Mallon, S, Māhina-Tuai, K & Salesa, D (eds), Tangata o le Moana: New Zealand and the People of the Pacific (Te Papa Press, 2012, pages 221–240).
426 Anae, M, "All power to the people: Overstayers, Dawn Raids and the Polynesian Panthers" in Mallon, S, Māhina-Tuai, K & Salesa, D (eds), Tangata o le Moana: New Zealand and the People of the Pacific (Te Papa Press, 2012, pages 221–240).

Ūpoko | Chapter 8
Ngā raraunga hangapori mō te wā Pakirehua
Demographic data for the Inquiry period

335. This chapter sets out general demographic data about the Inquiry period and its three key cohorts. This data is separate from any data about the care settings and the Inquiry's collected data.

Raraunga e hāngai ana ki te iwi Māori
Data relating to Māori

336. The Māori population increased from 1950 to 1999, both in numbers and as a proportion of Aotearoa New Zealand's total population. The 1951 census recorded almost 6 percent of the population as Māori[427] compared to almost 9 percent in 1976, and 14 percent in 1996.[428] Questions relating to ethnicity asked in the census changed during the Inquiry period, impacting who was counted as Māori.

337. For much of the Inquiry period, blood percentage, rather than Māori concepts of whakapapa, were used to define who was counted as Māori in the census. For example, figures prior to 1981 comprised people who "specified themselves as half or more New Zealand Māori".[429]

338. Māori had a disproportionately young population during this time. In 1966, over half (50.3 percent) of the Māori population were under 15 years old, compared with 32.6 percent of the total population being under 15 years old.[430]

339. In his evidence to the Waitangi Tribunal, statistician Len Cook explained that this meant "for every Māori person aged 65 and over, there were 25 children aged under 15 years".[431] He also noted that "the fastest growth in the number of Māori children aged under 15 occurred when their number doubled from 1951 and 1966".[432] By 1996 this growth had slowed, with 37.5 percent of Māori aged under 15, compared with 19.3 percent of people with a European background.[433]

427 Stats NZ, New Zealand Official Yearbook 1978, Population (1978).
428 Stats NZ, New Zealand Official Yearbook 1998, Table 5.1 population growth, Table 5.15 ethnic composition (1998).
429 Cook, L, A statistical window for the justice system: Putting a spotlight on the scale of State custody of generations of Māori (Victoria University of Wellington – Te Herenga Waka, 2020, pages 6–7).
430 Stats NZ, New Zealand Official Yearbook 1972, New Zealand Maori population (1972).
431 Cook, L, A statistical window for the justice system: Putting a spotlight on the scale of State custody of generations of Māori (Victoria University of Wellington – Te Herenga Waka, 2020, page 5).
432 Cook, L, A statistical window for the justice system: Putting a spotlight on the scale of State custody of generations of Māori (Victoria University of Wellington – Te Herenga Waka, 2020, page 6).
433 Stats NZ, New Zealand Official Yearbook 1998, Table 6.28 Comparison of age structure of major ethnic groups, 1996 census (1998).

Ngā raraunga e hāngai ana ki te hunga Turi, whaikaha me te hunga e rongo ana i te wairangitanga
Data relating to Deaf, disabled people, and people experiencing mental distress

340. This Inquiry received little evidence of reliable data about Deaf, disabled people and people experiencing mental distress before or during the Inquiry period. The most recent data prior to the Inquiry period was the 1916 census.[434] This census recorded information on:

> deaf-mutism
> blindness
> feeble-mindedness
> lunacy (information provided by mental-hospital authorities).[435]

341. Of the total population in 1916, 6,359 people (or 5.78 people in every 1,000) were recorded as having one or more of these impairments. Of this group 206 people were recorded as deaf-mutes, 566 people recorded as blind, 4,275 people recorded as lunatics and 1,312 people recorded as feeble-minded.[436]

342. It was noted there was a general increase in all numbers apart from deaf-mutes and that this was due largely to "the direct and indirect effects of the [First World] war".[437]

343. During the Inquiry period, some care settings recorded some data on impairments, but after 1916 little national information was recorded in the Aotearoa New Zealand census until 1996. The 1996 census provided the ability for people to record themselves or dependents as disabled for the first time since 1916.[438]

344. By 1996 out of a total of population of 3,618,303 people, 517,212 (14 percent of the population) indicated they or their dependents were disabled. Of this, 411,477 indicated they or their dependents had a long-term disability.[439]

434 Census and Statistics Office, Report on the results of a census of the population of the Dominion of New Zealand taken for the night of the 15th October, 1916, Section VIII – Infirmity, Chapter 45.
435 Census and Statistics Office, Report on the results of a census of the population of the Dominion of New Zealand taken for the night of the 15th October, 1916, Section VIII – Infirmity, Chapter 45.
436 Census and Statistics Office, Report on the results of a census of the population of the Dominion of New Zealand taken for the night of the 15th October, 1916, Section VIII – Infirmity, Chapter 45.
437 Census and Statistics Office, Report on the results of a census of the population of the Dominion of New Zealand taken for the night of the 15th October, 1916, Section VIII – Infirmity, Chapter 45.
438 Stats NZ, 1996 Census classification counts (1996 Census of Population and Dwellings) – People (1996, page 3).
439 Stats NZ, 1996 Census classification counts (1996 Census of Population and Dwellings) – People (1996, page 3).

Raraunga e hāngai ana ki ngā iwi Pasifika
Data relating to Pacific Peoples

345. The Pacific population in Aotearoa New Zealand increased during the Inquiry period, influenced by migration from Pacific islands and establishment of Pacific communities in Aotearoa New Zealand. The Pacific population went from 0.2 percent of the total population in 1951, to almost 2 percent in 1976 and 4.8 percent in 1996.[440]

346. Pacific Peoples also had a young population during the Inquiry period with 41.3 percent under 15 years old in 1981 and 35.1 percent under 15 years old in 1996.[441] This, alongside racism and attitudes to poverty at the time, increased the visibility of Pacific children and young people to authorities and their likelihood being taken into care.

Raraunga e hāngai ana ki ngā tūhono whakapono
Data relating to religious affiliation

347. In general, there were significant changes in the religious landscape during the Inquiry period. In the 1950s, Christianity was the main religion in Aotearoa New Zealand, with about 90 percent of the population identifying as Christian.[442]

348. This figure declined over the Inquiry period, with the 1996 census recording about 56 percent identifying as Christian.[443] At the same time, the proportion of New Zealanders reporting they had no religion increased from 1 percent in 1951 to 25 percent in 1996.[444]

440 Stats NZ, 1996 census of population and dwellings: ethnic groups (Stats New Zealand page 10).
441 Stats NZ, New Zealand Official Yearbook 1983, Pacific Island Polynesian population (1983); Stats NZ, New Zealand Official Yearbook 1998, Table 6.28 Comparison of age structure of major ethnic groups, 1996 census (1998).
442 Stats NZ, New Zealand Yearbook 1953, Religious professions (1953).
443 Stats NZ, New Zealand Yearbook 1998, Table 6.26. Religious affiliations (1998).
444 Stenhouse, J, Religion and society: Towards secularism and religious diversity, 1970–21st century, Religious adherence, 1878–2013 (Te Ara – The Encyclopedia of New Zealand, 2018), https://teara.govt.nz/en/interactive/28422/religious-adherence-1878-2013.


"Rather than help me, it was easier to just send me away somewhere."
MR NL
Pākehā

"I peeked through the window and cried for my parents."

ANDREW BROWN
Māori, Moriori, English, Welsh

Andrew Brown

Hometown: Te Whanganui-ā-Tara Wellington **Year of birth:** 1960

Age when entered care: 9 years old

Time in care: On and off from 1970 to around 1988

Type of care facility: Berhampore Family Home; boys' homes – Epuni Boys' Home in Te Awa Kairangi ki Tai Lower Hutt, Hokio Beach School near Taitoko Levin, Holdsworth Boys' Home in Whanganui, Ōwairaka Boys' Home in Tāmaki Makaurau Auckland; psychiatric hospital – Oakley Hospital in Tāmaki Makaurau Auckland.

Ethnicity: Māori, Moriori, English, Welsh.

Whānau background: Andrew's mother is Māori and Moriori, from the Chatham Islands, and his father is of English / Welsh descent. He has five older brothers and two younger sisters.

Current: Andrew is a single parent and is also raising a family member, who has been with him since birth.

I've been waiting for this chance to share my story and reclaim my voice.

I've been waiting for this chance to share my story and reclaim my voice.

I was nine years old when I was taken from home by a social worker. My file notes that I was the subject of a Court Order for not being under proper control. Social Welfare didn't even bother to explain why they took me away from my family. But I'd been wagging school a bit and fighting – I'd stayed for nearly two years with my grandparents on the Chatham Islands and didn't seem to fit in at school back in Wellington. I also experienced racism at school. I didn't realise at the time that's what it was, I just knew that I had to fight back. That's why I was in the principal's office all the time.

My first placement was a Presbyterian Family Home in Berhampore, with lots of other kids all under 14. I remember being the only brown kid at the home. There was a lot of praying and I was forever cleaning shoes – I must have cleaned 40 to 50 pairs a day. I was sexually abused by the older girls. I was sad, lonely and miserable, and I just wanted to go home to my family. I tried to run away with some other boys, but the police stopped us and took us back.

After that I was taken to Epuni Boys' Home in Lower Hutt. I was 10 years old. They put me in the secure unit – a concrete room with holes in the wall, windows that you couldn't close. The room was concrete with a plastic cover on the mattress and pillow. There were holes in the wall, windows that you couldn't close. I didn't know what was going on. I remember peeking through the window crying for my parents.

The room reminded me of a prison – it was horrible. I remember feeling cold and listening to the sound of the wind howling all the time. You were only allowed out of your cell for one hour. So, you basically went from standing in one concrete room to another.

I think I was in secure for about 10 or 14 days. I felt totally isolated – I remember hearing kids screaming, yelling and crying outside, but I couldn't actually see anybody. I don't recall any books and anything to read – all you could do all day was sit there and stare out into a field. I was abused by the staff, but I felt too afraid and unsafe to say anything to anyone about it. I thought I was going to die in there.

At Epuni, we were forced to clean volleyball courts with a toothbrush – they took two weeks to clean. We had to mix up a big drum full of caustic soda to clean them with. The staff would make us stand in it and the acid would eat the skin off your feet. We spent all week cleaning, folding clothes and working in the kitchen. On Saturdays we played sports whether you liked it or not. I was small for my age and often the youngest, so sports would be very brutal for me.

Some of the staff were sexually abusing boys. One of them came into my secure unit and tried to comfort me when I was crying. He sat me on his knee, tried to cuddle and feel me too. He and other staff used to go around and visit all the boys' rooms. They would come into the shower block and say they were checking to see if our balls had dropped.

I didn't go to school while I was at Epuni, school was only for when "you are good". I tried to run away a couple of times, so they stuck me in a cage, like I was cattle. After another attempt to run away, they stuck me in the pound and I was beaten to a pulp. The beatings I endured were severe and savage. After a while, I was sent home to my parents. By then I was feral, I felt like I was constantly fighting for survival. Epuni taught me how to fight and when I went home my behaviour was the same. It was no good putting me into school, I had missed so much education and would fight anyone who came at me. Eventually I ended up back in Epuni.

When I was 10 or 11, I was transferred to Hokio – another State institution run by bullies and nasty people. The violence was severe, and a couple of times I nearly died. I was constantly fighting to keep myself safe from violence and sexual abuse by other boys.

After a few months I was transferred to Holdsworth. It was a 'survival of the fittest' mentality there – we all made knives to protect ourselves. I remember the staff and social workers at Holdsworth by the abuse they inflicted. It is unlikely that there was a single person employed there who could claim they didn't know about the emotional, physical and sexual abuse. I saw a lot of boys mentally break at Holdsworth. For me, I turned to violence – there was no one to talk to about the abuse, so the only thing I could do was to pick up a knife.

I spent what I thought was about two years in total at Holdsworth. During that time, I was sent home. I had been there over a year before I got to go home. When you're 11 years old, not being able to see your family is lonely and isolating. At home, I went to the local intermediate school, but I was struggling and couldn't integrate, I couldn't read and write very well – I had spent years cleaning, scrubbing and folding laundry instead of getting an education. I used to love learning and was considered intelligent by the teachers in my younger days, but I wasn't coping at school because the State deprived me of an education.

After my second stint in Holdsworth, my father was transferred from Wellington to Auckland because of his job and we moved up there. I'd got involved in stealing cars – I was pretty much stealing cars every weekend, and making good money too. It wasn't long before I ended up in Ōwairaka Boys' home. I was 14 years old.

Ōwairaka was a nasty place, and like other State-run institutions I had been in, there was a kingpin system – a pecking order based on size and how mean and nasty you could be. Housemasters not only encouraged this, they set it up and used violence and aggression to control you. At Ōwairaka, the staff organised a boxing ring with the biggest, meanest boy, built like a huge gorilla. They made us fight like adults – I knew I was going to get bashed and fought as hard as I could. If you complained the staff would bash you. There were no doctors or nurses around. It was the sort of place where you had to harden up.

I had no voice at Ōwairaka, but when I got out I told my parents about what had happened there. They went to the police, which is what you are supposed to do, but the police refused to believe them. We felt helpless, like we had no voice. I turned to drugs and alcohol to numb the pain I felt.

I ended up overdosing a couple of times and getting in trouble with the police for petty crime. I was 17 or 18 when the court ordered me to be sent to Oakley Hospital. I was there because I was using drugs and booze to numb my pain. It was another abusive place, with staff who hit, hurt and abused patients. They diagnosed me with schizophrenia, but I think the doctor was just saying whatever he needed to, to tick the box.

The staff would load you up with prescription drugs and say "just take them" when I asked what the drugs were for. They'd walk around with jars of pills and just give them out like lollies. I got addicted to the pills and would manufacture symptoms to get more. I became quite resourceful and could manipulate the doctors to prescribe whatever I needed.

Sexual abuse there was horrific – there were guys getting raped every single day by other patients. Staff knew what was going on and didn't do a thing about it. Staff threatened us with shock treatment or they would make threats to send us off to Lake Alice.

I felt too unsafe to talk to the authorities about what I'd seen, I didn't think they'd believe me, and there were no complaint processes.

I spent the bulk of my youth locked up in in State institutions. I was incarcerated into Mt Eden when I was in my mid-twenties. All up, I did three stints inside, including at Pāremoremo because I had escaped from Mount Eden Prison. During my time in prison, I'd regularly meet up with the boys I had known in the boy's home.

I continue to bear the scars of the physical and emotional torment inflicted on me by the State's failure to keep me safe. I had no voice. No-one listened to me or believed the horrors I experienced as a child.

I was entitled by the State to an education. I didn't receive one – I had to educate myself by reading lots of books. I have experienced an enormous amount of racism right throughout my life.

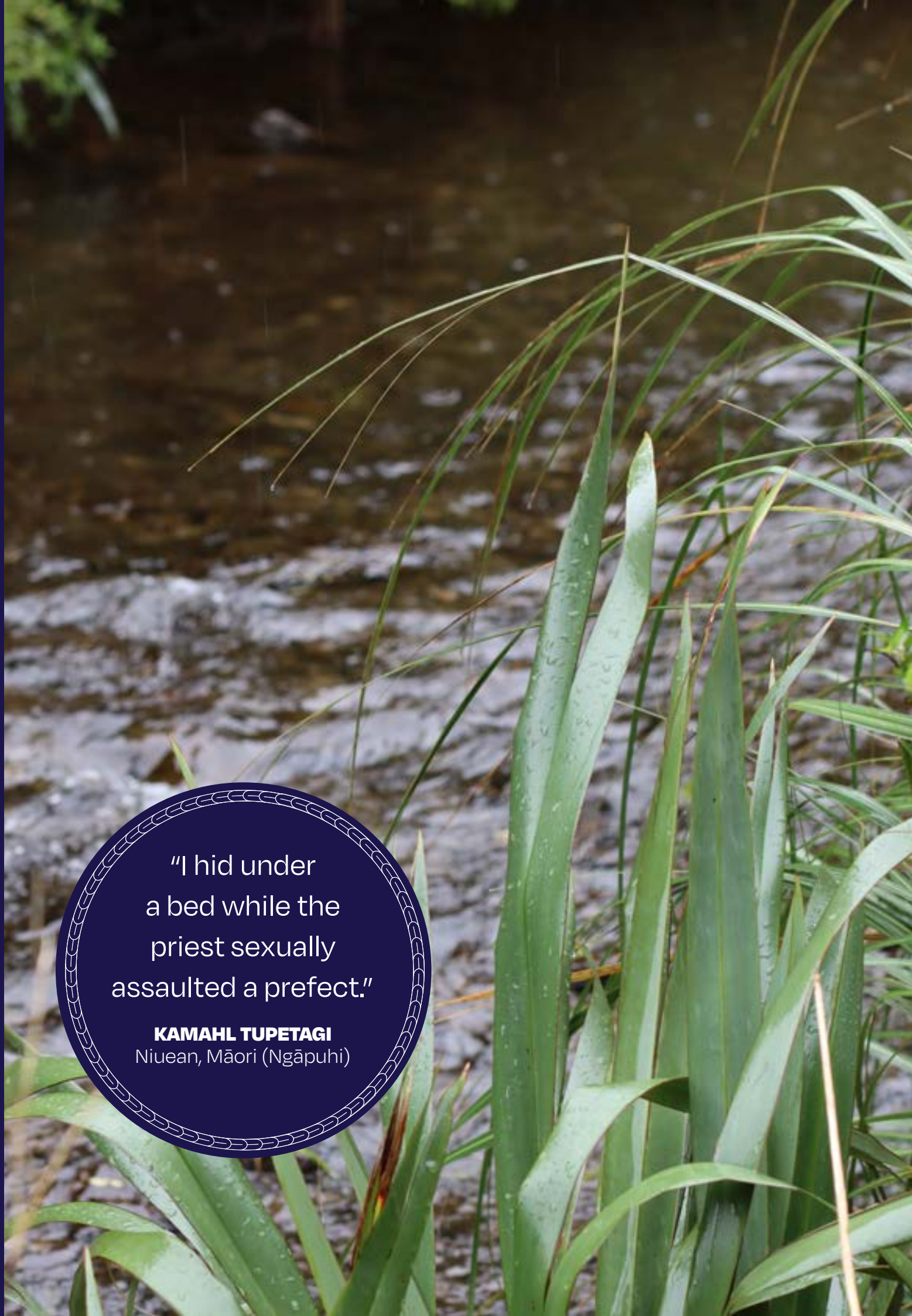
My relationships with other people don't last, so I prefer to work with plants. I worked at Auckland City Council, eventually becoming the head gardener at Western Springs managing six different gardening teams.

The institutions I was in were brutal, and I feel fortunate that I survived. What happened to me in care has affected me throughout my life and made me determined that no child of mine would ever end up in State care. Despite the failure by the State to take care of me, I raised my son without any support, and he's a good man.

No child should be taken off their parents. Don't put a child in a concrete box with rusted bars and expect some white guy to have empathy for the little brown boy. We were taken from our whānau by the State. No one should have to experience what I went through.

Children have the right to be cared for, to be loved, to be protected, to be valued. If someone had made the effort to treat me as a person, rather than as a little brown boy, there could have been a totally different outcome. I often wonder how I might have turned out if I was given some better opportunities. I could have won a gold medal.[445]

445 Witness statement of Andrew Brown (13 July 2022).



"I hid under a bed while the priest sexually assaulted a prefect."

KAMAHL TUPETAGI
Niuean, Māori (Ngāpuhi)

Kamahl Tupetagi

Currently lives in: Australia

Age when entered care: 3 years old

Year of birth: 1973

Time in care: 1977 to 1994

Type of care facility: Family home – Nayland Family Home, St Andrews Family Home, Tahunanui Family Home; foster care; boys' home – Dunedin Boys' Home (Lookout Point Boys' Home) in Ōtepoti Dunedin; Māori boarding school – Hato Pāora College (Catholic) in Manawatū-Whanganui.

Ethnicity: Niuean and Māori (Ngāpuhi).

Whānau background: Kamahl has seven siblings. One was adopted to maternal grandparents. Kamahl has a twin sister.

⚠ Life with my mum and dad was quite abusive and difficult. I ended up going to hospital more than once, and I'm surprised I didn't come to the attention of the state authorities. I was also sexually abused by people who came to our house for parties, and later sexually abused at a family home.

Life with my mum and dad was quite abusive and difficult. I ended up going to hospital more than once, and I'm surprised I didn't come to the attention of the authorities. I was also sexually abused by people who came to our house for parties, and later sexually abused at a family home.

My father left our family when I was young and went back to Niue. I last saw him when I was about 18 years old. I didn't have a lot of connection with the Niuean side of my family growing up, and I don't now. My mother is Māori. She had a disagreement with her family before I was born, and moved down south. We had some contact with her family but I didn't spend a lot of time on the marae, and I didn't have a lot of cultural knowledge or understanding as I was growing up.

Social Welfare got involved with my family after our school noted that my older siblings were truanting regularly. My family was placed under the preventive supervision of Social Welfare in 1977 when I was 3 years old, and I was made a State ward aged 9 years old. My mother voluntarily placed us kids into Social Welfare care for six months, with the intention that we'd be home again by Christmas. Mum's emotional health was a problem, as well as our poor financial situation and unsettled accommodation.

We were placed in the St Andrew's Family Home. I was treated well there and wasn't abused, but I had a lot of anxiety during that time. I didn't really know that I was in State care. Mum visited but we never went back to living with her again. When she did visit, it was quite emotional because of the long periods of separation.

Later I went to the Nayland Family Home. I shared a room with an older boy there who repeatedly sexually assaulted me. He later stole my bike and took off, and I never saw him again. I reported it to my social worker, and I think I told him about the boy sexually abusing me, but I don't think anything came of it. If you talked about these things, people didn't believe you. I was physically abused by another boy there too.

Foster placements didn't go well, so I was enrolled at Hato Pāora College in 1987 and was there until 1989. I didn't want to go. The social worker attributed the problems I'd had in foster care to a "difference in cultural values and perception", and he thought that sending me to Hato Pāora would give me an opportunity to explore my Māori culture and make Māori friends. But I had been brought up in a Pākehā environment. I'd never learned te reo and had no understanding of Māori culture or my Niuean culture before I arrived at the school. I asked to go to my relatives in the north, to one aunty in particular. She'd agreed I could stay there, but this was never explored by my social workers.

The decision to send me to Hato Pāora was the worst decision Social Welfare could have made for me. I was horrifically abused while I lived there, by both the students and the staff members.

Violence and bullying were endemic to Hato Pāora. Staff knew it was happening, and treated victims of bullying as blameworthy, telling us to grow up or man up. They wouldn't intervene unless there was some serious blood spilt, and it was best not to speak up in fear of repercussion. You never knew when the punishment was going to be delivered or who gave the instruction. At times it was like being assaulted by a gang knowing there were tactics being used and nothing you could do about it.

Punishments were severe, from senior students and staff. Seniors would clear their mouths and nostrils with the ugliest snot and saliva they could muster, to have you wipe it up with your hand and eat it. My teeth were damaged after being forced at times to brush them with toilet cleaner.

We were punished if we made mistakes during culture practice or sang the wrong words or didn't know the words, or did the wrong actions. A metal ruler was used as a knuckle punishment. We had to hold our arms out with hands palms down, and the metal ruler was turned on its side and cracked onto our knuckles hard enough to cause hand injuries and create tears, which would only create more reasons to be punished.

Culture was so important at Hato Pāora. It was so much a part of everything we did, and because I knew nothing about it when I got to Hato Pāora, I became a target. If I did not speak Māori properly or do the haka properly, senior students would pick up the nearest desk or chair and hit me with it, or find a stick to punish me with. I'd be forced to stand for hours and have my legs slapped or my hands hit.

I've been disconnected from my Pacific and Māori culture for most of my life. I think being involved with my own culture would have given me a sense of myself and a sense of belonging. I didn't know any Niuean or Māori language growing up, which I think would have helped me as well. My cultural learning was done at Hato Pāora, at a time when I experienced an enormous amount of abuse.

I was regularly sexually abused by a priest at Hato Pāora – several times a week, sometimes several times a day. He realised I had no contact person or anyone I could tell, because I was never visited by a social worker. It was worse during the school holidays because I was often left behind. He did whatever he wanted to me because he knew no one cared about me.

There was an open bathroom with a bath on one end. Boys would often be in the bath while the priest fondled them, even with people walking around. I think he was sexually assaulting boys so often that it was considered normal.

A lot of older boys also sexually abused younger boys. I was sexually assaulted multiple times by a senior boy. He was older and bigger, and I was too scared to refuse him.

I became a target for sexual abuse when other boys noticed how much attention the priest paid me. Once, I was summoned to the prefect's dorm and told to strip down to my underwear. We heard the priest coming and the boy told me to hide under the bed. I had to stay there while the priest sexually assaulted the prefect.

I ran away with two other boys several times. Both of them had talked about abuse from the priest and from other boys. They were State wards as well, and we all felt quite helpless. There was no one we could turn to.

I became so mentally exhausted by the abuse that I faked having appendicitis. The priest drove me home from surgery. I was in the infirmary for two weeks and he abused me there too.

I know that some survivors of abuse have unclear memories of the things that happened to them. Unfortunately, I have very clear memories of everything that happened. I also have physical responses to things, such as smells I associate with the priest.

So many of my Social Welfare records from my time at Hato Pāora indicate I was being abused. A social worker wrote a note saying I was "unlikely to develop the strength to be able to survive at a boarding school" as I might be "the subject of all types of physical abuse," and "observing him, his beautiful piano playing, lack of sporting interests, and delicate gestures – it is easy to accept that he would have difficulties with bullies at boarding school".

I was finally allowed to leave Hato Pāora after telling my social worker I was going to kill myself. I was sent down south because my mum was based down there, and Social Welfare had changed its policy and kids had to go back to their parents or extended family. That was awful because we'd been estranged from Mum for a very long time.

I was enrolled at a high school where I experienced a lot of racism because we were the only dark-coloured students in the entire school. We were called 'black bitch', 'black bastard', 'black c**t' every single day.

I started to go to counselling in 1989. I also spoke to my social worker at the time about the abuse at Hato Paora and I was interviewed by the police, but it does not look like the priest was charged in relation to my complaints at that time. It looked like my social worker believed I'd been sexually abused at Hato Pāora, so I don't know why police didn't pursue it.

I was sent to live with an aunty. By that time I was so unhappy that I set the house on fire because I wanted to kill myself. I was in a very bad state, and very distressed. They took me to hospital and then I was sent to Lookout Point Boys' Home. I was depressed and seeing a psychiatrist every week.

I spoke to a staff member there about the sexual abuse I experienced at Hato Pāora, and I signed a report about it. It's not clear whether anything was done with it. My records from this time mostly talk about me being depressed. A progress report said that while I was clearly very depressed, I had none of the anti-social behavioural problems that the home usually dealt with, and I was inappropriately placed there.

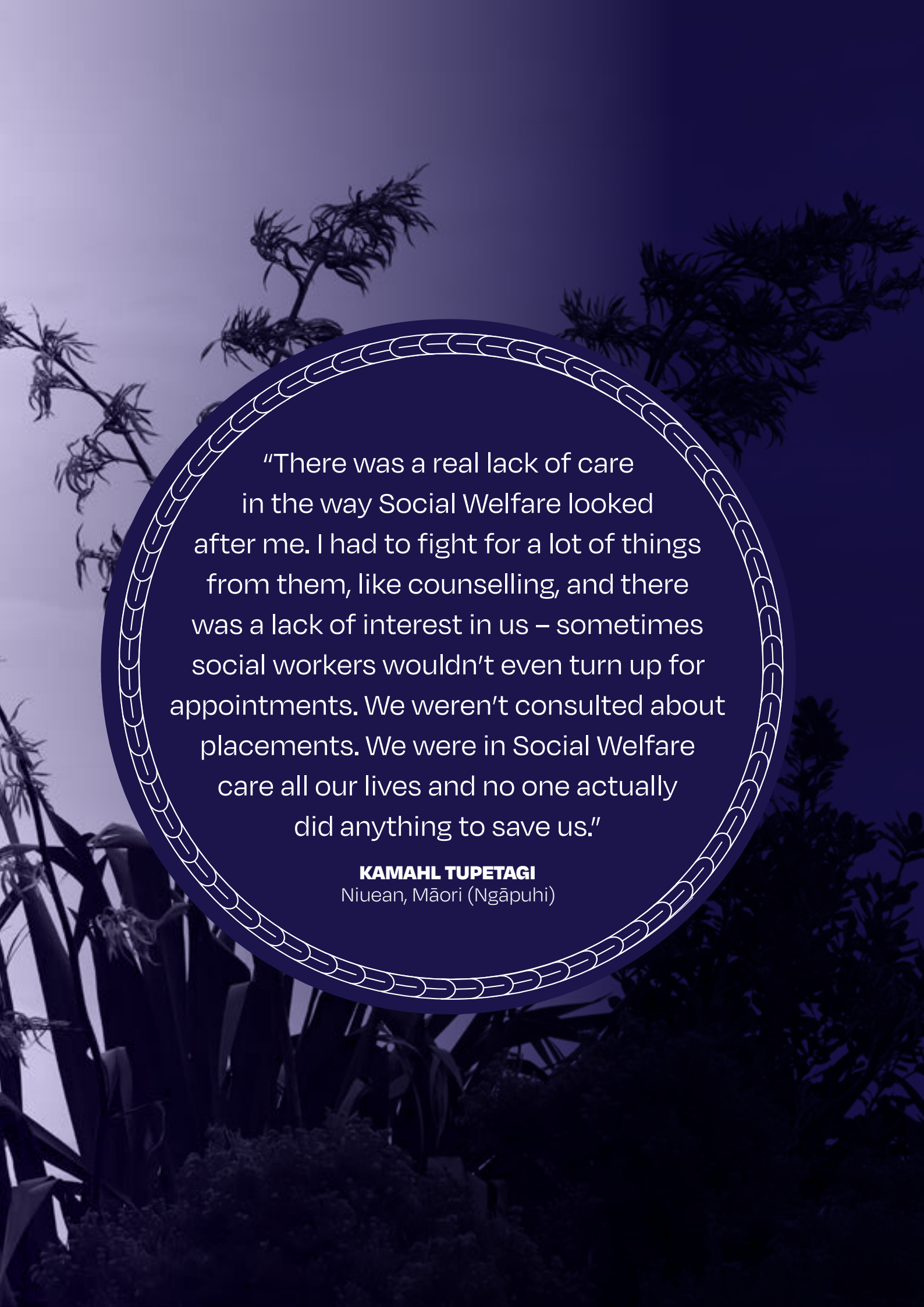
I had just bounced around the whole country, and I didn't have any power to make decisions for myself.

Eventually a 'family preservation agreement' was signed, which gave me some money for flatting and expenses, and I was to apply for the Independent Youth Benefit. I had someone who was a real advocate for me, and she helped me lodge an ACC claim. But I was pretty much on my own.

There was a real lack of care in the way Social Welfare looked after me. I had to fight for a lot of things from them, like counselling, and there was a lack of interest in us – sometimes social workers wouldn't even turn up for appointments. We weren't consulted about placements. We were in Social Welfare care all our lives and no one actually did anything to save us.

I left New Zealand and went to Australia when I was about 17 years old. I had to get away from everything that had happened because I felt suicidal. I've had many attempts at self-harm, and it wasn't until I left New Zealand that I had an opportunity to change my life.[446]

446 Witness statement of Kamahl Tupetagi (September 2021).



"There was a real lack of care in the way Social Welfare looked after me. I had to fight for a lot of things from them, like counselling, and there was a lack of interest in us – sometimes social workers wouldn't even turn up for appointments. We weren't consulted about placements. We were in Social Welfare care all our lives and no one actually did anything to save us."

KAMAHL TUPETAGI
Niuean, Māori (Ngāpuhi)

Ūpoko | Chapter 9
Te pūnaha kāwana o Aotearoa
Aotearoa New Zealand's system of government

349. This Part gives a short overview of Aotearoa New Zealand's system of government, and how the public service was administered during the Inquiry period. This overview explains how government decision-making works and provides a sense of who was responsible for the government departments involved in providing care during the Inquiry period.

350. Aotearoa New Zealand's system of government is known as a Westminster model, because it is modelled on the United Kingdom's parliamentary system. Under the Westminster model, government is organised into three distinct branches – legislative, executive and judicial:

- legislature branch – 'Parliament' (formerly known as the House of Representatives). It consists of all Members of Parliament that have been elected. The Legislature is responsible for making laws.
- judiciary branch – 'Courts and Tribunals'. It consists of all judges and judicial officers hearing cases and deciding cases. The Judiciary is responsible for interpreting and applying laws.
- executive branch – 'Government'. It consists of Ministers of the Crown (both inside and outside of Cabinet) and is chaired by the Prime Minister. The Executive is responsible for developing policy, proposing draft laws to Parliament and administering laws.

351. Each branch of government performs the functions allocated to it and generally does not assume or intrude on the functions of another branch.

352. Aotearoa New Zealand has a Governor-General. The Sovereign King or Queen of Britain is the head of State, and the Governor-General is the Sovereign's representative in Aotearoa New Zealand. The Governor-General is responsible for:

- granting Royal assent to the bills passed by the House of Representatives, thus passing them into law (Legislative branch)
- appointing judges (Judicial branch)
- appointing the prime minister after each election and appointing all other ministers, making regulations proposed by the Executive Branch, and confirming the appointments of public service chief executives (Executive branch).

353. The Aotearoa New Zealand system of government is based on the separation of powers between the three branches of government. This separation provides checks and balances on the exercise of power.

He turepapa kāwana ā-kupu tā Aotearoa
Aotearoa New Zealand has an unwritten Constitution

354. Aotearoa New Zealand does not have a written constitution like the United States, Canada and Australia. Aotearoa New Zealand's constitution is made up of a number of documents, constitutional conventions (ways of doing things), principles that have evolved through judicial decisions and Acts of Parliament such as the Constitution Act 1986 and the New Zealand Bill of Rights Act 1990. Aotearoa New Zealand's constitutional arrangements recognise te Tiriti o Waitangi / Treaty of Waitangi as a founding document.[447]

355. In Aotearoa New Zealand only a small number of provisions within a few laws (for example, relating to the term of Parliament, the division of Aotearoa New Zealand into general electorates, the minimum voting age of 18 all set out in the Electoral Act 1993) require a super majority (75 percent) of all members of parliament to change those provisions. Otherwise, laws in Aotearoa New Zealand can be changed in a single sitting of Parliament.[448] The change to MMP has not fully addressed concerns about the lack of checks and balances on the power of the Executive.[449]

Pāremata (Te whakature)
Parliament (The Legislature)

356. The Parliament of Aotearoa New Zealand consists of the Sovereign in right of Aotearoa New Zealand and the House of Representatives. The House of Representatives is the popularly elected part of Parliament. During the Inquiry period up until 1996, members of parliament were chosen in the general election to represent electoral districts using the first-past-the-post electoral system. In 1996, Aotearoa New Zealand changed its electoral system to mixed member proportional (MMP). This means that members of parliament are chosen in a general election to represent electoral districts and party list members.

357. The role of members of parliament in the House of Representatives is to represent the people of Aotearoa New Zealand, provide the Government from among its members, make new laws and update old laws, examine and approve Government taxes and spending, and hold the Government to account for its policies and actions through parliamentary questions, debates and select committee inquiries, considering petitions and examining international treaties.[450]

447 Palmer, G, New Zealand's constitution in crisis: reforming our political system (John McIndoe Limited, 1992, pages 4 and 5).
448 Palmer, G, New Zealand's constitution in crisis: reforming our political system (John McIndoe Limited, 1992, page 49).
449 Kumarasingham, H, Executive Power: 60 Years On Has Anything Changed?, Policy Quarterly, Volume 6:4 (2010, page 47).
450 McGee, D, "The Parliament of New Zealand," Parliamentary Practice in New Zealand 2023 (Clerk of the House of Representatives, 2023).

Pūnaha whakawā
Judiciary

358. The Judiciary operates independently of the Executive and the Legislature. The Governor-General appoints members of the judiciary. The role of the Judiciary is to interpret and apply the law. There are two main sources of law: statutes (the laws passed by Parliament) and the 'common law'. The common law has been developed over time by judges and may be altered by judges from time to time to meet the circumstances of the day.

Kāwanatanga (Te peka whakahaere)
Government (The Executive Branch)

359. The Executive branch of government, or often referred to as the Government, is responsible for governing Aotearoa New Zealand. The Government has decision-making authority and control over the State's resources. The Government decides policy and proposes laws (which must be approved by the Legislature). The Government is responsible to the House of Representatives for its policies and performance. It can only function with the confidence of the House.[451]

360. The prime minister heads the Executive branch and chooses members to hold office as Ministers of the Crown. Ministers are appointed by the Governor-General to specific portfolios. Ministers carry out the day-to-day work of governing the country. They act individually and collectively, either in Cabinet or as part of the Executive Council.

361. Cabinet is the central decision-making body of executive government. It is made up of senior ministers and is chaired by the prime minister and provides a collective forum for ministers to decide significant government issues.[452]

362. Ministers are also members of Cabinet Committees. Cabinet Committees exist for specific subjects to allow discussion of particular issues before referring decisions to Cabinet for approval.[453] Ministers are accountable to Parliament for the performance of the agencies in their portfolios. Ministers set policy for the government of the day, including policy relating to the care of children, young people and adults in care.[454]

451 McGee, D, "Government," Parliamentary Practice in New Zealand 2023 (Clerk of the House of Representatives, 2023).
452 Te Kawa Mataaho Public Service Commission website, How the public sector is organised (accessed January 2024), https://www.publicservice.govt.nz/system/system-architecture-and-design/how-the-public-sector-is-organised.
453 McGee, D, "Government," Parliamentary Practice in New Zealand 2023 (Clerk of the House of Representatives, 2023).
454 Witness statement of Peter Hughes (24 August 2022, page 3).

Te rāngai tūmatawhānui
The public service

363. The public service is part of the Executive branch. In 1912, the Aotearoa New Zealand public service was established under the Public Service Act 1912. In 1962, after the Royal Commission of Inquiry into State Services in New Zealand chaired by Justice Thaddeus McCarthy, a new Public Service Act 1962 came into force. It established a Minister for State Services and introduced the State Service Commission as a department of state.[455]

364. The role of the public service is to:

- support constitutional and democratic government
- enable current and successive governments to develop and implement their policies
- deliver high-quality and efficient public services
- support the Government to pursue long-term public interest
- facilitate active citizenship
- act in accordance with the law.[456]

365. The State Services Commission, for most of the Inquiry period (1950–1988), was the employer of all State servants such as drivers, nurses, teachers and heads of department.

366. Aotearoa New Zealand had a highly centralised traditional public administration and rules-based approach and was not well placed to respond to the demands of modern society. The public service went through major changes in the 1980s and 1990s. A new legislative framework was introduced through the State Sector Act 1988 and Public Finance Act 1989, with the aim to reorient the public service towards delivering results for people and to increase its efficiency and transparency.

367. The public service transformed from a single organisation with one employer into separate departments, each with their own chief executive responsible for their department's performance.

368. In the 1990s, the new public management approach focused on results, people as customers, stronger business disciplines, and opening government to competition. This resulted in an important shift from inputs to outputs.

369. The Government created agencies that were incentivised to work independently as singular agencies rather than collectively across the public service.

455 Te Kawa Mataaho Public Service Commission website, How the public service has changed over time (accessed May 2024) https://www.publicservice.govt.nz/news/how-the-public-service-has-changed-over-time.
456 Public Service Act 2020, section 11.

370. Along with the State Services Commission, The Treasury and the Department of Prime Minister made up the three central agencies. The Treasury led on overall economic and financial advice and the Department of the Prime Minister led on policy agenda. The State Services Commissioner's role was to set the ethics and values of the State services, employ heads of departments and ministries, provide advice on industrial relations and the machinery of government.

371. Notably the employment of State servants was transferred to heads of departments and ministries with direct accountability to ministers for the delivery of advice and / or services for the public. This was outlined in a purchase agreement with the minister. All departments and ministries issued a statement of intent and annual report. All departments and ministries had an annual audit. Heads of departments and ministers were required to attend Select Committee (the Parliament) for an annual review.

372. In 1995 and again in 2000, the public service invited Dr Alan Schick to review the changes to the public services. While the level of transparency had grown and there was a clear line of accountability for outputs, the State services were criticised for the lack of focus on achieving outcomes for the country and for individuals.

373. This led to a re-aligning of agencies over time and central agencies asking departments and ministries to work together for the achievement of outcomes (called managing for outcomes) through their statements of intent.

Te Kawa Mataaho
The Public Service Commission

374. The public service was led by the Public Service Commissioner (previously the State Services Commissioner) as the head of Te Kawa Mataaho Public Service Commission (before 2020, the State Services Commission). The Public Service Act 2020 replaced the State Sector Act 1988.[457] Te Kawa Mataaho Public Service Commission is responsible for overseeing, managing, and improving the performance of the Aotearoa New Zealand public service.[458] It plays a leadership role in reviewing and supporting performance in the public service.[459]

375. The following paragraphs cover four further Departments and an office of Parliament whose work sits across the public sector. Departments responsible for parts of the care system during the Inquiry period are covered in Chapter 10.

457 Public Service Act 2020.
458 Te Kawa Mataaho Public Service Commission Nga Tohutohu mo te Minita Tomo Mai, Briefing to the Incoming Minister 2023, Te Kawa Mataaho (New Zealand, 2023) page 6.
459 Te Kawa Mataaho Public Service Commission Nga Tohutohu mo te Minita Tomo Mai, Briefing to the Incoming Minister 2023, Te Kawa Mataaho (New Zealand, 2023) page 7.

Te Tai Ōhanga
The Treasury

376. The Treasury administers the Public Finance Act 1989, which sets out the legal structure governing government borrowing and expenditure.[460]

377. The Treasury's core statutory and operational responsibilities include:

- being the lead economic and financial advisor to the Government and steward of the public service's financial management system
- supporting the management of State services and public finances
- providing leadership for the public service alongside the Department of the Prime Minister and Cabinet and Te Kawa Mataaho Public Service Commission.[461]

Te tari o te Pirimia me te Komiti Matua
Department of the Prime Minister and Cabinet

378. The Department of the Prime Minister and Cabinet (DPMC) was set up on 1 January 1990 by merging several separate offices including the Cabinet Office.

379. DPMC provides advice and support to the government of the day, supporting the effective functioning of executive government and co-ordinating the national security and risk systems. DPMC is focused on meeting the prime minister's priorities and from time to time will be responsible for shaping and progressing emerging high-priority issues.[462]

380. The Cabinet Office as part of the DPMC plays a central role in government decision-making by offering impartial secretariat services to bodies like Cabinet. It advises the Governor-General, the prime minister and ministers on constitutional, policy, and procedural matters.[463]

Te Tari o te Tumuaki o te Mana Arotake
The Office of the Auditor General

381. Under the Public Audit Act 2001, the Controller and Auditor-General undertakes annual audits, performance audits, assurance services, and inquiries. The Auditor-General is an independent Officer of Parliament and operates through two units: the Office of the Auditor-General and Audit New Zealand. Their role is to provide Parliament and the public with an impartial perspective on how public organisations are functioning.[464]

460 Public Finance Act 1989
461 Treasury, Briefing to the Incoming Minister of Finance 2023 (The Treasury, 2023, pages 18–19).
462 Department of the Prime Minister and Cabinet, Briefing to the Incoming Prime Minister 2023 (2023, pages 3–6).
463 Department of the Prime Minister and Cabinet, Briefing to the Incoming Prime Minister 2023 (2023, page 4).
464 Controller and Auditor General website, What we do (accessed February 2024), https://www.oag.parliament.nz/about-us/what-we-do.

382. The Auditor-General reports to Parliament annually. They have extensive information-gathering powers, including the authority to enter premises and obtain information under oath. Protections are in place for individuals providing information to the Auditor-General.[465]

Te whakahaerenga Kāwanatanga 1950–1999
State administration 1950–1999

383. State administration changed during the Inquiry period. Reforms through the 1980s into the 1990s meant the way departments were organised and run changed in the last decade of the Inquiry period.

Ngā tau 1950–1980: Mai i te waeture ki te whakahou
1950–1980s: From regulation to reform

384. From 1950 to the late 1980s, Aotearoa New Zealand had a highly centralised, rules-based approach to how government and the public service were run. The economy was heavily regulated by the State. The public sector, overseen by the State Services Commission, had an integrated career structure, strong preference for internal appointees over outsiders, and a promise of lifelong employment.[466]

385. Ministers were the link between the Government and agencies. Ministers were collectively accountable for the performance of the Government as a whole, and individually accountable for the performance of their particular agencies.

386. The public service had two major responsibilities to the Government:

- to advise it objectively and rigorously on the policy issues of the day, and
- to implement decisions in the most effective way possible.[467]

387. The State Services Commission employed almost all public servants and set service wide terms and conditions of employment, training and development.[468]

388. The Treasury was the State's financial advisor, including advising the Minister of Finance on departmental spending proposals,[469] and was responsible for the control of expenditure appropriated by Parliament in the annual budget cycle.[470] Before the Public Finance Act 1989, the financial aspects of each department's work was controlled by The Treasury through its administration of the Public Revenues Act 1953, the Treasury Regulations 1953 and the Treasury Instructions 1953, which covered the use of public money down to details such as morning tea for visitors and parking fees.[471]

465 The Treasury, Briefing to the Incoming Government 1984, Part 2: Economic Management (1984, page 289).
466 McKinlay, P, The New Zealand reforms: They worked in theory, what about the practice? (McKinlay Douglas Limited, 2000, page 3).
467 The Treasury, Briefing to the Incoming Government 1984, Part 2: Economic Management (1984, page 287).
468 The Treasury, Briefing to the Incoming Government 1984, Part 2: Economic Management (1984, page 289).
469 Department of Education, Child Welfare Division Field Officers' Manual, part 1 (1953, page 98).
470 The Treasury, Briefing to the Incoming Government 1984, Part 2: Economic Management (1984, page 289).
471 Department of Education, Child Welfare Division Field Officers' Manual, part 1 (1953, page 98).

389. The Audit Department monitored departmental expenditure and ensured it aligned with the spending authority given by Parliament. The focus was mainly on regulating inputs, particularly the amount of labour used, while outputs and performance in achieving objectives received less attention.[472]

390. Departments were overseen by permanent heads (now called chief executives), accountable to the State Services Commission and ministers for the efficient management of their departments. Permanent heads had limited influence over salary or terms of employment for their staff, and restricted ability to manage staff performance. They also had little scope to recruit skilled and experienced staff from outside the public service above basic grade positions.[473] Instead, these functions sat with the State Services Commission.

391. In 1962, Aotearoa New Zealand was the fourth country in the world to appoint an ombudsman under the Parliamentary Commissioner (Ombudsman) Act. At that time, the ombudsman was restricted to investigating complaints about central government departments and organisations.[474]

392. In 1984 the new Labour Government began restructuring the economy and transforming how the State sector was run. This restructure was influenced by neoliberal ideas and was an attempt to address long-standing issues with the structure and performance of Aotearoa New Zealand's economy.[475]

393. The 1980s' State sector reforms were shaped by two sets of concepts, one stemming from management principles and the other from economic theories. Managerial reform was based on the idea that managers could only be held accountable for outcomes if they were given the freedom to make decisions, allocate resources and manage their organisations within established budgets.[476] The Treasury's brief to the incoming minister in 1984 stated that the way departments had been organised and run meant that departmental management had little freedom to change the way their departments operated to meet their goals, to use their judgement to produce the best outcome or to address poor performance in senior management.[477]

472 The Treasury, Briefing to the Incoming Government 1984, Part 2: Economic Management (1984, page 289).
473 The Treasury, Briefing to the Incoming Government 1984, Part 2: Economic Management (1984, page 290).
474 Office of the Ombudsman, About the Ombudsman: Past, present and future (15 September 2020), https://www.ombudsman.parliament.nz/about-ombudsman/past-present-and-future.
475 The Treasury, Economic management: Part Two – Policy and organisational issues (1984, pages 103–104).
476 Schick, A, The spirit of reform: Managing the New Zealand State sector in a time of change (State Services Commission, 1996, pages 16–17).
477 The Treasury, Briefing to the Incoming Government 1984, Part 2: Economic Management (1984, page 289).

Mai i te tau 1989: Te whakaurunga o te whāomo me te kirimana
From 1989: the introduction of efficiency and contracting

394. Under the State Sector Act 1988 and the Public Finance Act 1989, heads of government departments (now called chief executives) were no longer lifelong career public servants. Instead, the State Services Commission contracted them for specific outputs as part of their performance agreements.[478]

395. Accountability for resources and results was now maintained through contract-like arrangements within government. Performance agreements between ministers and chief executives set out standards and expectations for department heads; purchase agreements between ministers and departments specified the outputs to be produced during the year.[479]

Te tiaki kōrero me te tuari mōhiotanga
Record keeping and information sharing

396. Information and record keeping requirements evolved through the Inquiry period. The sections below cover some of the legislation and agencies with a role in record keeping and information requirements. These are Archives New Zealand, the Official Information Act and the Privacy Act.

Te Rua Mahara o te Kāwanatanga
Archives New Zealand

397. As discussed in the Inquiry's redress report, He Purapura Ora, he Māra Tipu: From Redress to Puretumu Torowhānui and in Part 4 of this report, the Inquiry heard evidence from many parties about how historical data and record keeping by the State was inadequate.

398. Formal requirements around public record keeping evolved from 1950 to 1999. The Archives Act 1957 established the National Archives within the Department of Internal Affairs.[480] There had been an increasing focus on government records management since the beginning of the century, and the final trigger for creating a nationwide service occurred with the fire at the Hope Gibbons building in 1952 that destroyed many State records.[481]

478 Schick, A, The spirit of reform: Managing the New Zealand State sector in a time of change (State Services Commission, 1996, page 3).
479 Schick, A, The spirit of reform: Managing the New Zealand State sector in a time of change (State Services Commission, 1996, page 3).
480 Archives Act 1957, section 5.
481 Ministry of Social Development, Record keeping history of the Ministry of Social Development and its predecessor agencies: Part One agency structure, records systems and procedures (n.d., page 7).

399. The Act established a framework for public records management, including the requirement that all public records 'of sufficient value' had to be deposited within the archives 25 years after their creation. This included records relevant to the 'organisation, functions, and transactions' of the government office where they were created or received. The Act allowed the chief archivist to give instructions to government offices about the efficient and economic management, and safe preservation of public records and public archives.[482]

400. The Act also gave the chief archivist sole power to approve the disposal of official records (including their destruction).[483] Two Records Advisory Officers were appointed in 1961 to assist government departments with records management practice.[484] However, the Archives Act of 1957 did not include a statutory obligation on public offices to create and maintain full, accurate and accessible records, which was not established until the Public Records Act 2005. The State Services Commission also used its mandate to establish records management expectations within government.[485]

401. In 1984, National Archives criticised the state of records management in the public service, leading to the first comprehensive review of Aotearoa New Zealand recordkeeping since 1913. The resulting 1987 report revealed outdated classification systems, lack of emphasis on records management, and a shortage of qualified staff.

402. The capacity of the Records Management Branch to run training and advisory initiatives was increased. However, there was a loss of institutional knowledge about records in departments after sector-wide restructuring, including the Department of Social Welfare in 1992, and a shortage of staff within departments meant these functions stopped in 1993.[486]

403. The earlier reforms of the State Sector Act 1988 had placed responsibility for recordkeeping with chief executives. The Privacy Act 1993 added protections for personal information but agencies' recordkeeping duties and an explicit regulatory role for the Chief Archivist were not in place until 2005.

482 Archives Act 1957, section 8.
483 Archives Act 1957, sections 15–17.
484 Ministry of Social Development, Record keeping history of the Ministry of Social Development and its predecessor agencies: Part One agency structure, records systems and procedures (n.d., page 8).
485 Ministry of Social Development, Record keeping history of the Ministry of Social Development and its predecessor agencies: Part One agency structure, records systems and procedures (n.d., page 8).
486 Ministry of Social Development, Record keeping history of the Ministry of Social Development and its predecessor agencies: Part One agency structure, records systems and procedures (n.d., page 9).

Te Ture Kōrero Muna Ōkawa 1957 me Te Ture Mōhiotanga Ōkawa 1982
The Official Secrets Act 1957 and the Official Information Act 1982

404. Until 1982 the provision of State information was governed by the Official Secrets Act 1951. Under the Act, official information was the property of the State and could not be shared without good reason.[487] Unauthorised disclosure of State information carried fines and prison terms under the Act.[488] Public servants had to sign a declaration when they started employment confirming they were aware of the Act's requirements.[489]

405. By 1978 attitudes had changed in favour of more openness with official information.[490] In 1978, the Government established a Committee on Official Information to review the availability of official information to the public. The committee reported back in 1980 recommending the Official Secrets Act be replaced with a more open Official Information Act.[491]

406. The Official Information Act was passed in 1982. It is built around the principle that official information should be made available unless there are good reasons to withhold it. These reasons include the interests of the country as a whole, the interests of individuals and organisations, and the interests of effective government and administration.[492]

407. The types of agencies covered by the Act include:

- ministers of the Crown
- government departments and organisations, including the Police
- crown entities and some state-owned enterprises
- district health boards
- boards of trustees of State schools
- information produced by third parties as a result of being contracted by agencies to do work on their behalf.[493]

487 Committee on Official Information, Towards open government (Government Printer, 1981, page 13).
488 Official Secrets Act 1951, section 15.
489 Committee on Official Information, Towards open government (Government Printer, 1981, page 13).
490 Committee on Official Information, Towards open government (Government Printer, 1981, pages 14–15).
491 Committee on Official Information, Towards open government (Government Printer, 1981, page 24).
492 Official Information Act 1982, sections 6, 7, 9, 10 and 18.
493 Official Information Act 1982, section 2 and Schedule 1.

Te Ture Tūmataiti 1993
The Privacy Act 1993

408. Concerns around privacy grew during the Inquiry period, linked to the growth of computer technology and implications for individual's privacy.[494] Aotearoa New Zealand passed the Privacy Act in 1993, creating the role of the privacy commissioner and establishing information privacy principles.[495] These principles, applicable to public and private agencies, governed the collection, use, and disclosure of personal information.[496]

409. The Privacy Act gave individuals rights, including access to and correction of personal information (although this release could not include information that would reveal information about other individuals)[497], with redress options for privacy violations.[498] The Act aligned with Aotearoa New Zealand's human rights obligations.[499]

410. The Act introduced a simple complaints mechanism with ombudsman-like investigations. Among other things the Act included the ability for New Zealanders to access their own medical records, the requirement for businesses and agencies to be transparent about personal data use,[500] and provided that outsourcing and privatisation did not diminish people's privacy rights around data previously held by government agencies.[501]

494 Stewart, B, Necessary and desirable, Privacy Act 1993 review (Office of the Privacy Commissioner, 1997, page 1).
495 Privacy Act 1993, section 6, 12.
496 Privacy Act 1993, section 6.
497 Privacy Act 1993, section 29(1)(a).
498 Privacy Act 1993, section 6.
499 Stewart, B, Necessary and desirable, Privacy Act 1993 review (Office of the Privacy Commissioner, 1997, page 1).
500 Privacy Act 1993, section 6.
501 Privacy Act 1993, section 2. The Privacy Act 1993 was replaced by a new Privacy Act in 2020.

"I've
been disconnected
from my Pacific and Māori
culture for most of my life.
I think being involved with my
own culture would have given
me a sense of myself and
a sense of belonging."

KAMAHL TUPETAGI
Niuean, Māori (Ngāpuhi)

Overview of Governments: 1949-2023

1949 – 1957

National

3 Terms

PM: Sidney Holland (1949 – 1957)

1957 – 1960

Labour

1 Term

PM: Walter Nash (1957 – 1960)

1960 – 1972

National

4 Terms

PM: Keith Holyoake (1960 – 1972)

1972 – 1975

Labour

1 Term

PM: Norman Kirk (1972 – 1974)

PM: Bill Rowling (1974 – 1975)

1975 – 1984

National

3 Terms

PM: Robert Muldoon (1975 – 1984)

1984 – 1989

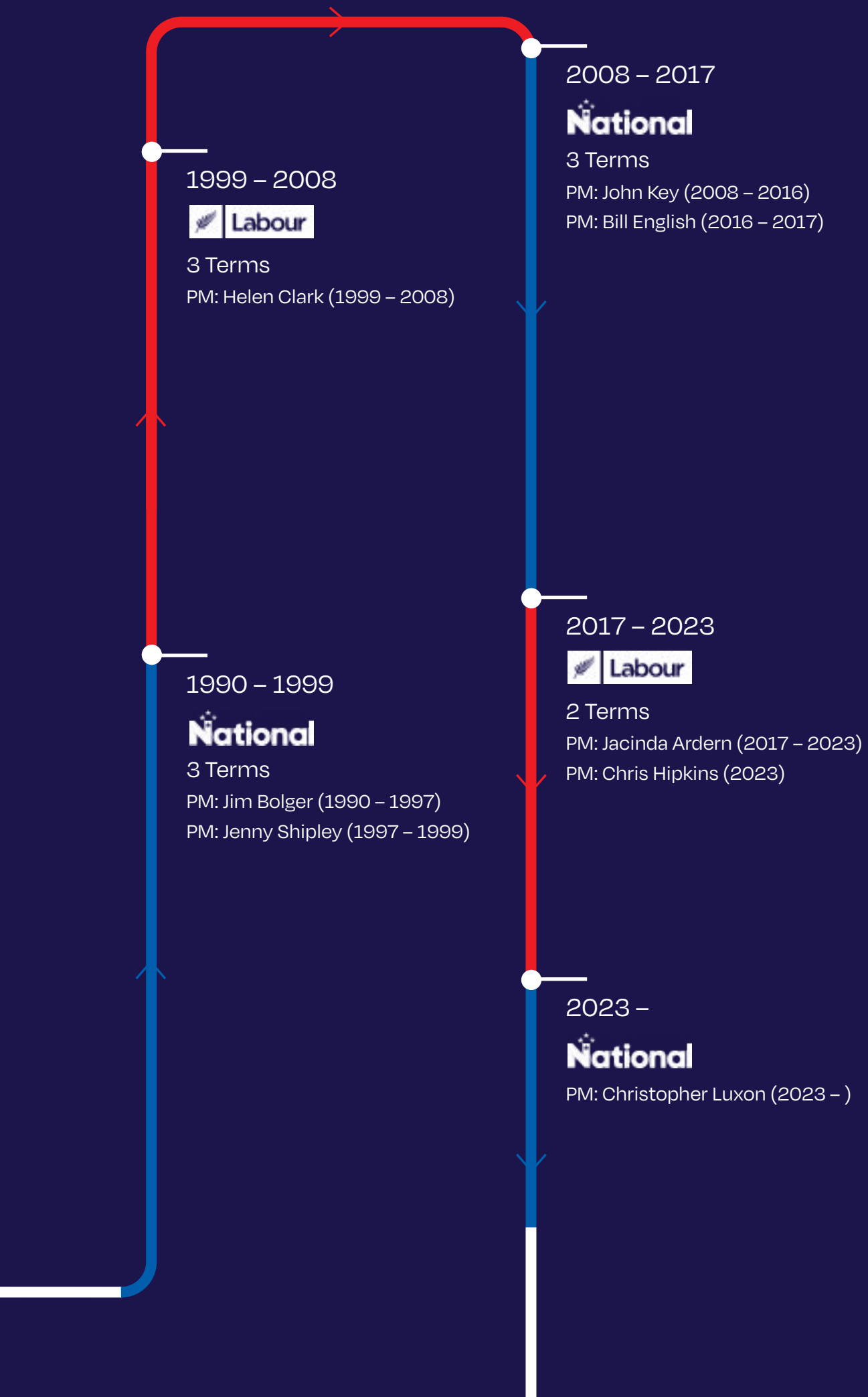
Labour

2 Terms

PM: David Lange (1984 – 1989)

PM: Geoffrey Palmer (1989 – 1990)

PM: Mike Moore (1990)


2008 – 2017
National
3 Terms
PM: John Key (2008 – 2016)
PM: Bill English (2016 – 2017)
1999 – 2008
Labour
3 Terms
PM: Helen Clark (1999 – 2008)
2017 – 2023
Labour
2 Terms
PM: Jacinda Ardern (2017 – 2023)
PM: Chris Hipkins (2023)
1990 – 1999
National
3 Terms
PM: Jim Bolger (1990 – 1997)
PM: Jenny Shipley (1997 – 1999)
2023 –
National
PM: Christopher Luxon (2023 –)

"No child should be taken off their parents. Don't put a child in a concrete box with rusted bars and expect some white guy to have empathy for the little brown boy. We were taken from our whānau by the State. No one should have to experience what I went through"

ANDREW BROWN
Māori, Moriori, English, Welsh

Overview of Ministerial portfolios and Chief Executives during the Inquiry period

National Government 1949 – 1957

PM: Sidney Holland (1949 – 1957) / PM: Keith Holyoake (1957)

Ministerial portfolio	Minister and tenure	Head of Department / Chief Executive	Relevant legislation
Social Welfare	N/A	N/A	N/A
Education (Education + Child Welfare Division)	Ronald Algie (1949–1957)	Director of Education: Clarence E Beeby (1940–1960) Superintendent of Child Welfare: Charles E Peek (1950–1963)	Education Act 1914 Child Welfare Act 1925 Adoption Act 1955
Health	Jack Watts (1949–1951) Jack Marshall (1951–1954) Ralph Hanan (1954–1957)	Director-General of Health: Dr John Cairney (1950-1959)	Mental Defectives Act 1911
Justice	Clifton Webb (1949–1954) Jack Marshall (1954–1957)	Secretary for Justice: Samuel Thompson Barnett (1949–1960)	Prevention of Crime (Borstal Institutions Establishment) Act 1924 Penal Institutions Act 1954 Criminal Justice Act 1954
Police	Sidney Holland (1949–1950) Wilfred Fortune (1950–1954) Sidney Holland (1954 –1956) Dean Eyre (1956-1957)	Commissioner of Police: James Cummings (1944–1950) John Bruce Young (1950–1952) Eric Henry Compton (1953–1955) Controller-General: Samuel Thompson Barnett (1955–1958)	Police Act 1958
Corrections	N/A	N/A	N/A
Finance	Sidney Holland (1949–1954) Jack Watts (1954–1957)	Secretary to the Treasury: Sir Bernard C Ashwin (1939–1955) Ted Greensmith (1955–1964)	Public Revenues Act 1953
Prime Minister (incl State Services)	Sidney Holland (1949-1957)	Chairman of the Public Service Commission: Richard Campbell (1946–1953) George Bolt (1953–1958)	Public Service Act 1912

Labour Government 1957 – 1960

PM: Walter Nash

Ministerial portfolio	Minister and tenure	Head of Department / Chief Executive	Relevant legislation
Social Welfare	N/A	N/A	N/A
Education (Education + Child Welfare Division)	Philip Skoglund (1957–1960)	Director of Education: Clarence E Beeby (1940–1960) Superintendent of Child Welfare: Charles E Peek (1950–1963)	Education Act 1914 Child Welfare Act 1925 Adoption Act 1955
Health	Rex Mason (1957–1960)	Director-General of Health: Dr John Cairney (1950-1959) Dr Harold Turbott (1959–1964)	Mental Defectives Act 1911
Justice	Rex Mason (1957–1960)	Secretary for Justice: Samuel Thompson Barnett (1949–1960)	Prevention of Crime (Borstal Institutions Establishment) Act 1924 Penal Institutions Act 1954 Criminal Justice Act 1954
Police	Phil Connolly (1957–1960)	Commissioner of Police: Willis Spencer Brown (1958–1961)	Police Act 1958
Corrections	N/A	N/A	N/A
Finance	Arnold Nordmeyer (1957–1960)	Secretary to the Treasury: Ted Greensmith (1955–1964)	Public Revenues Act 1953
Prime Minister (incl State Services)	Walter Nash (1958-1960)	Chairman of the Public Service Commission: Leonard Atkinson (1958–1962)	Public Service Act 1912

National Government 1960 – 1972

PM: Keith Holyoake (1960-1972) / PM: Jack Marshall (1972)

Ministerial portfolio	Minister and tenure	Head of Department / Chief Executive	Relevant legislation
Social Welfare	N/A	N/A	N/A
Education (Education + Child Welfare Division)	Blair Tennant (1960–1963) Arthur Kinsella (1963–1969) Brian Talboys (1969–1972) Lorrie Pickering (1972)	Director of Education: Arnold E Campbell (1960–1966) Director-General of Education: Dr Keith J Sheen (1966–1971) A N V (Ned) Dobbs (1971–1975) Superintendent of Child Welfare: Charles E Peek (1950–1963) L G Anderson (1964–1972)	Education Act 1914 Education Act 1969 Child Welfare Act 1925 Adoption Act 1955
Health	Norman Shelton (1960–1962) Don McKay (1962–1972) Lance Adams-Schnieder (1972)	Director-General of Health: Dr Harold Turbott (1959–1964) Dr D P Kennedy (1965 -1972)	Mental Health Act 1969
Justice	Ralph Hanan (1960–1969) Dan Riddiford (1969–1972) Roy Jack (1972)	Secretary for Justice: Samuel Thompson Barnett (1949–1960) Dr John Lochiel Robson (1960-1970) Eric A Missen (1971–1974)	Prevention of Crime (Borstal Institutions Establishment) Act 1924 Penal Institutions Act 1954 Criminal Justice Act 1954
Police	Dean Eyre (1960–1963) Percy Allen (1963–1969) David Thommson (1969–1972) Percy Allen (1972)	Commissioner of Police: Carl Leslie Spencer (1961–1967) George Colin Urquhart (1967-1969) Sir Angus Sharp (1970–1974)	Police Act 1958
Corrections	N/A	N/A	N/A
Finance	Harry Lake (1960–1967) Robert Muldoon (1967–1972)	Secretary to the Treasury: Ted Greensmith (1955–1964) Doug Barker (1965–1966) Noel Davis (1967–1968) Henry Lang (1969–1977)	Public Revenues Act 1953
State Services	Keith Holyoake (1963-1972)	Chairman of the Public Service Commission: Leonard Atkinson(1958–1962) Chairman of the State Services Commission: Leonard Atkinson (1963– 1966) Adrian Rodda (1967–1970) Ian Lythgoe (1971–1974)	Public Service Act 1912 State Services Act 1962

Labour Government 1972 - 1975

PM: Norman Kirk (1972 – 1974) / PM: Bill Rowling (1974 – 1975)

Ministerial portfolio	Minister and tenure	Head of Department / Chief Executive	Relevant legislation
Social Welfare	Norman King (1972–1975)	Director-General of Social Welfare: Ian D J MacKay (1972 –1976)	Adoption Act 1955 Children and Young Persons Act 1974
Education	Phil Amos (1972–1975)	Director-General of Education: A N V (Ned) Dobbs (1971–1975) William (Bill) L Renwick (1975–1988)	Education Act 1969
Health	Bob Tizard (1972–1974) Tom McGuigan (1974–1975)	Director-General of Health: Dr H J H Hiddlestone (1973–1983)	Mental Health Act 1969 Disabled Persons Community Welfare Act 1975
Justice	Martyn Finlay (1972–1975)	Secretary for Justice: Eric A Missen (1971–1974) Gordon S Orr (1974-1979)	Prevention of Crime (Borstal Institutions Establishment) Act 1924 Penal Institutions Act 1954 Criminal Justice Act 1954
Police	Mick Connelly (1972–1975)	Commissioner of Police: Sir Angus Sharp (1970–1974) Ken Burnside (1974–1978)	Police Act 1958
Corrections	N/A	N/A	N/A
Finance	Bob Rowling (1972–1974) Bob Tizard (1974–1975)	Secretary to the Treasury: Henry Lang (1969–1977)	Public Revenues Act 1953
State Services	Jack Marshall (1972) Bob Tizard (1972-1974) Arthur Faulkner (1974-1975)	Chairman of the State Services Commission: Ian Lythgoe (1971–1974) Robin Williams (1975–1981)	State Services Act 1962

National Government 1975 - 1984

PM: Robert Muldoon

Ministerial portfolio	Minister and tenure	Head of Department / Chief Executive	Relevant legislation
Social Welfare	Bert Walker (1975–1978) George Gair (1978–1981) Venn Young (1981–1984)	Director-General of Social Welfare: Stanley J Callahan (1977–1982) John Grant (1983–1990)	Adoption Act 1955 Children and Young Persons Act 1974 Disabled Persons Community Welfare Act 1975
Education	Les Gandar (1975–1978) Merv Wellington (1978–1984)	Director-General of Education: William (Bill) L Renwick (1975–1988)	Education Act 1969
Health	Frank Gill (1975–1978) George Gair (1978–1981) Aussie Malcolm (1981–1984)	Director-General of Health: Dr H J H Hiddlestone (1973–1983)	Mental Health Act 1969 Disabled Persons Community Welfare Act 1975
Justice	David Thomson (1975–1978) Jim McLay (1978–1984)	Secretary for Justice: John Fraser Robertson (1979–1983) Stanley J Callahan (1983–1986)	Penal Institutions Act 1954 Criminal Justice Act 1954 Criminal Justice Amendment Act 1975 Penal Institutions Amendment Act 1980
Police	Allan McCready (1975–1978) Frank Gill (1978–1980) Ben Couch (1980–1984)	Commissioner of Police: Ken Burnside (1974–1978) Robert Josiah Walton (1978–1983) Ken Thompson (1984-1986)	Police Act 1958
Corrections	N/A	N/A	N/A
Finance	Robert Muldoon (1975–1984)	Secretary to the Treasury: Henry Lang (1969–1977) Noel Lough (1977–1980) Bernie Galvin (1980–1986)	Public Revenues Act 1953
State Services	Peter Gordon (1975-1978) David Thomson (1978-1984)	Chairman of the State Services Commission: Ian Lythgoe (1971–1974) Robin Williams (1975–1981) Mervyn Probine (1981 - 1985)	State Services Act 1962

Labour Government 1984 - 1990

PM: David Lange (1984–1989) / PM: Geoffrey Palmer (1989–1990) / PM: Mike Moore (1990)

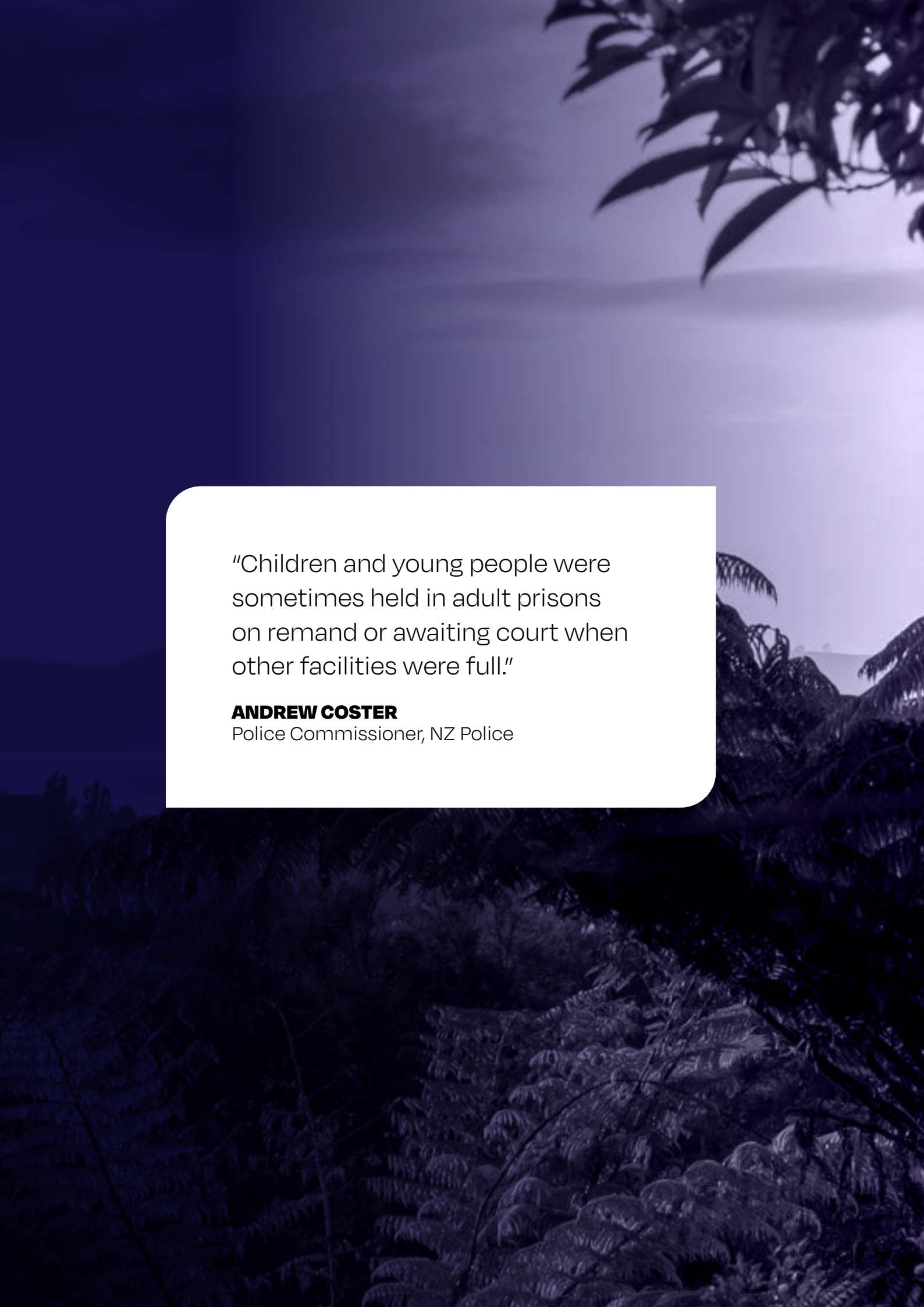
Ministerial portfolio	Minister and tenure	Head of Department / Chief Executive	Relevant legislation
Social Welfare	Ann Hercus (1984–1987) Michael Cullen (1987–1990)	Director-General of Social Welfare: John Grant (1983-1990)	Adoption Act 1955 Children and Young Persons Act 1974 Disabled Persons Community Welfare Act 1975 Children, Young Persons, and Their Families Act 1989
Education	Russell Marshall (1984–1987) David Lange (1987–1989) Geoffrey Palmer (1989) Phil Goff (1989–1990)	Director-General of Education: William (Bill) L Renwick (1975–1988) Dr Russ Ballard (1988–1989) Secretary for Education: Dr Maris O'Rourke (1989-1997)	Education Act 1969 Education Act 1989
Health	Michael Bassett (1984–1987) David Caygill (1987–1989) Helen Clark (1989–1990)	Director-General of Health: Dr Ronald A Barker (1983-1986) Dr George Salmond (1986-1991)	Mental Health Act 1969 Disabled Persons Community Welfare Act 1975
Justice	Geoffrey Palmer (1984–1989) Bill Jeffries (1989–1990)	Secretary for Justice: Stanley J Callahan (1983–1986) David Oughton (1986–1994)	Penal Institutions Act 1954 Criminal Justice Act 1954 Criminal Justice Amendment Act 1975 Penal Institutions Amendment Act 1980
Police	Ann Hercus (1984–1987) Peter Tapsell (1987–1989) Roger Douglas (1989–1990) Richard Prebble (1990)	Commissioner of Police: Ken Thompson (1984-1986) Malcolm Churches (1987–1989) John Anderson Jamieson (1989–1993)	Police Act 1958
Corrections	N/A	N/A	N/A
Finance	Roger Douglas (1984–1988) David Caygill (1988–1990)	Secretary to the Treasury: Graham Scott (1986–1993)	Public Revenues Act 1953 Public Finance Act 1989
State Services	Stan Rodger (1984–1990) Clive Matthewson (1990)	Chairman of the State Services Commission: Mervyn Probine (1981 - 1985) Roderick Deane (1985–1986) Don Hunn (1986–1987) Chief Commissioner of the State Services Commission: Don Hunn (1988) State Services Commissioner: Don Hunn (1989 - 1997)	State Services Act 1962 State Sector Act 1988

National Government 1990 - 1999

PM: Jim Bolger (1990 – 1997) / PM: Jenny Shipley (1997 – 1999)

Ministerial portfolio	Minister and tenure	Head of Department / Chief Executive	Relevant legislation
Social Welfare	Jenny Shipley (1990–1996) Roger Sowry (1996–1999)	Director-General of Social Welfare: Andrew Kirkland (1991–1993) Margaret Bazley, (1993–1999)[502]	Adoption Act 1955 Disabled Persons Community Welfare Act 1975 Children, Young Persons, and Their Families Act 1989 Protection of Personal Property Rights Act 1988
Education	Lockwood Smith (1990–1996) Wyatt Creech (1996–1999) Nick Smith (1999)	Secretary for Education: Dr Maris O'Rourke (1989-1996) Howard Fancy (1996–2006)	Education Act 1989
Health	Simon Upton (1990–1993) Bill Birch (1993) Jenny Shipley (1993–1996) Bill English (1996–1999) Wyatt Creech (1999)	Director-General of Health: Dr George Salmond (1986-1991) Dr Christopher Lovelace (1992–1995) Dr Karen Poutasi (1995–2006)	Mental Health Act 1969 Mental Health (Compulsory Assessment and Treatment) Act 1992 Health and Disability Commissioner Act 1994
Justice	Doug Graham (1990–1999)	Secretary for Justice: David Oughton (1986–1994) John Belgrave (1994–1997) Colin Keating (1997-2000)	Penal Institutions Act 1954 Criminal Justice Act 1954 Criminal Justice Amendment Act 1975 Penal Institutions Amendment Act 1980 Bill of Rights Act 1990 Human Rights Act 1993
Police	John Banks (1990–1994) John Luxton (1994–1996) Jack Elder (1996–1998) Clem Simich (1988–1999)	Commissioner of Police: John Anderson Jamieson (1989 -1993) Richard Macdonald (1994 -1996) Peter Doone (1996-2000)	Police Act 1958
Corrections	Paul East (1996–1997) Nick Smith (1997–1999) Clem Simich (1999)	Chief Executive: Mark Byers (1995–2005)	–
Finance	Ruth Richardson (1990–1993) Bill Birch (1993–1999) Bill English (1999) Bill Birch (1999)	Secretary to the Treasury: Graham Scott (1986–1993) Dr Murray Horn (1993–1997) Dr Alan Bollard (1998–2002)	Public Finance Act 1989
State Services	Bill Birch (1990-1993) Paul East (1993-1996) Jenny Shipley (1996-1997) Paul East (1997) Simon Upton (1997-1999)	State Services Commissioner: Don Hunn (1989–1997) Michael Wintringham (1997–2004)	State Sector Act 1988

502 Margaret Bazley worked at Tokanui Psychiatric Hospital, Seacliff Lunatic Asylum and Sunnyside Hospital as a psychiatric nurse in the 1960s-1970s



"Children and young people were sometimes held in adult prisons on remand or awaiting court when other facilities were full."

ANDREW COSTER
Police Commissioner, NZ Police

Ūpoko | Chapter 10
Ngā whakaritenga taurima ā-Kāwanatanga i te wā Pakirehua
State-based care settings during the Inquiry period

411. Throughout the Inquiry period there were many different State care settings, managed by different government departments and involving a huge range of different staff, professions, legislation, policy and practice. A single survivor could move from foster care to a children's short-stay facility, to a long-term facility and then on to a borstal, corrective training or a psychiatric institution.

Tokoora Pāpori — Social welfare 1950–1999

Te ture Tokoora Tamariki — Child Welfare legislation

412. There were three key Acts across the Inquiry period governing child welfare and out of home placements. The first was the Child Welfare Act 1925.[503] The 1925 Act did not separate the care and protection of children from youth justice issues. Whether children and young people had broken the law or were in an unsuitable home environment, the State viewed them as in need of care and protection.[504]

413. The Children and Young Persons Act 1974 replaced the Child Welfare Act 1925. Like the 1925 Act, the 1974 Act did not distinguish between youth justice and care and protection. The 1974 Act did, however, distinguish between children (those under 14 years old) and young people (15 to 16 years old) with the intention of diverting children away from the court system.[505]

414. The Children, Young Persons and Their Families 1989 Act placed a focus on working with a child's whānau in an attempt to give them more authority and power to make decisions about their children. That decision-making process was intended to be bolstered by the establishment of family group conferences where whānau could participate in the decision-making process.[506]

503 Children and Young Persons Amendment Act 1983, sections 4A, 4B and 4C.
504 Child Welfare Act 1925.
505 Frater, M, Why and how children went into care: a legal analysis of the legislative framework for care: Background paper for the Royal Commission of Inquiry into Abuse in Care (2019, page 29).
506 Frater, M, Why and how children went into care: a legal analysis of the legislative framework for care: Background paper for the Royal Commission of Inquiry into Abuse in Care (2019, page 29).

Te Tari me āna kaiārahi
The Department and its leadership

415. Departmental responsibility for administering child welfare legislation underwent several changes during the Inquiry period. For the first two decades of the Inquiry period, the Child Welfare Branch within the Department of Education was responsible for the welfare of all children and young people, under the Child Welfare Act 1925.[507]

416. From 1972, the newly established Department of Social Welfare took over responsibility for child welfare from the Department of Education. The Children and Young Persons Act 1974 governed the department's work until 1989, with the introduction of the Children, Young Persons, and Their Families Act 1989.

417. Between 1950 and 1999, the following people were responsible for the administration of child welfare in New Zealand:

- between 1950 and 1972, the superintendent of the Child Welfare Division within the Department of Education. The superintendent was appointed by the State Services Commission and was answerable to the Minister of Education through the Director of Education.[508] The superintendent was responsible for administering the Child Welfare Act 1925, Part V of the Infants Act 1908 relating to Infant homes,[509] as well as the Child Welfare Division of the Department of Education.[510]
- The Child Welfare Act 1925 encouraged the use of community-based care rather than institutional care through the use of supervision orders where a Child Welfare Officer (social worker from 1971) would monitor a child at home.[511] Under this Act, the superintendent could become the person responsible for children and young people if the superintendent entered an agreement with a parent or other guardian to take responsibility for a child or young person.[512] Judges in the Children's Court could also make a committal order, making the superintendent responsible for the care of children and young people.[513] Under either of these arrangements, the superintendent became the sole guardian of the child or young person[514] and had a duty to act with due expertise, skill and care in making any decisions which affected the child or young person's wellbeing, care and development.[515]

507 Parker, W, Social Welfare residential care 1950–1994, Volume I: National policies and procedures (Ministry of Social Development, 2006, page 9).
508 Department of Education, Child Welfare Division Field Officers' Manual, part 1, chapter 2 (1953, page 4).
509 Child Welfare Act 1925, section 3; Department of Education, Child Welfare Division Field Officers' Manual, part 1, chapter 2 (1953, page 4); The Infants Act 1908 was repealed in 1989.
510 Parker, W, Social Welfare residential care 1950–1994, Volume I: National policies and procedures (Ministry of Social Development, 2006, page 9).
511 Parker, W, Social Welfare residential care 1950-1994, Volume I: National policies and procedures (Ministry of Social Development, 2006, page 9).
512 Child Welfare Act 1925, section 12(1).
513 Child Welfare Act 1925, section 13(4).
514 Child Welfare Act 1925, section 16.
515 Earl White v Attorney General, HC, Wellington, CIV-2001-485-864 (28 November 2007, para 346).

- From 1974 to 1989, the director-general was the administrative head of the Department of Social Welfare,[516] responsible for providing care, protection, education, training[517, 518]
- Where the director-general was the child's or young person's sole guardian, they were responsible for decisions about where and with whom the child or young person lived.[519]
- Under the Children, Young Persons, and Their Families Act 1989 the director-general (known as the chief executive from the early 1990s) was responsible for a comprehensive approach to the welfare and protection of children and young persons, considering cultural diversity, preventing child abuse, and maintaining high standards in service provision.[520]

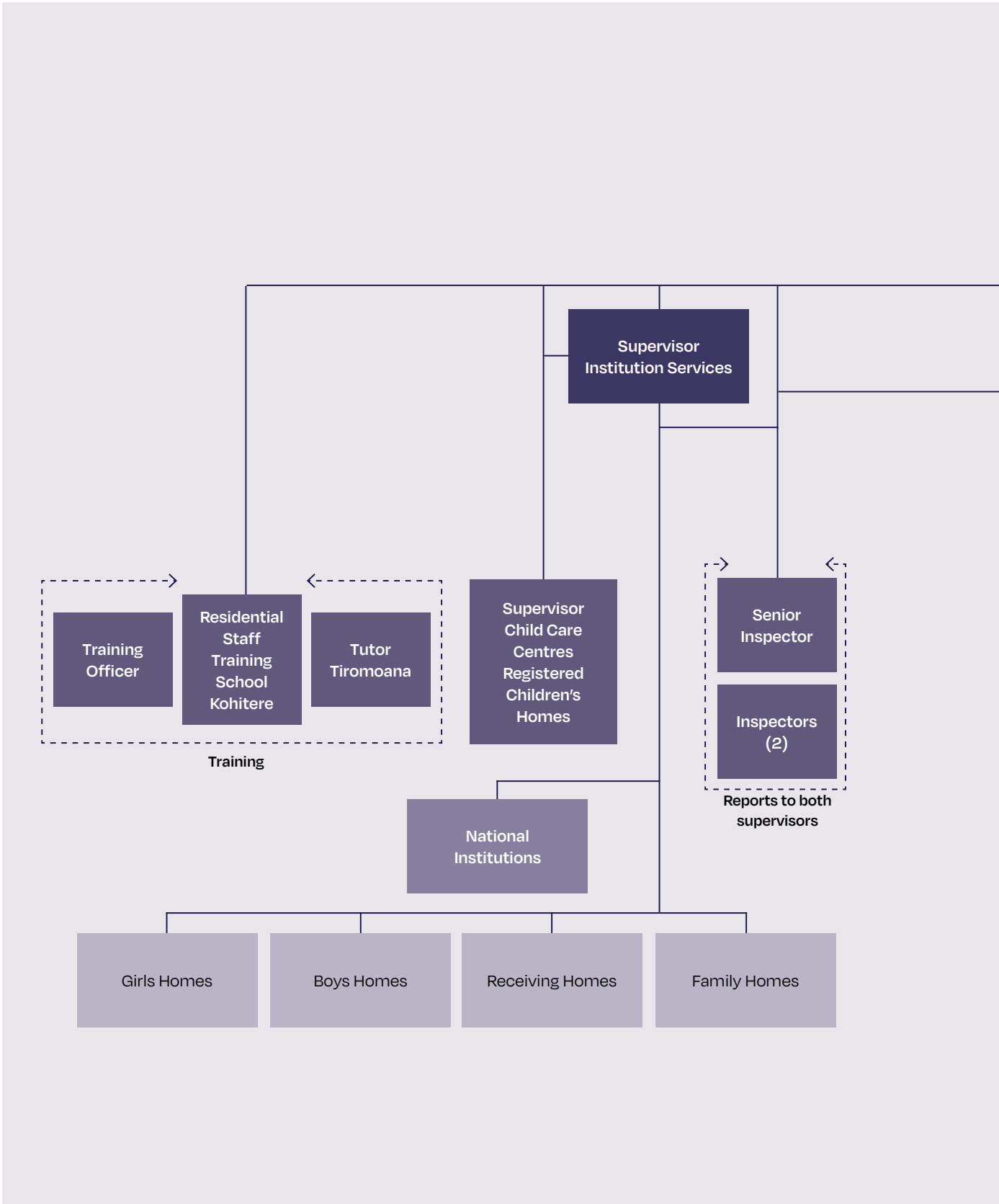
Ngā kaimahi me te whakahaerenga 1950– 1999
Staff and structure 1950– 1999

418. The Child Welfare Division was organised into administrative, field, institution and clerical workers. Head office in Te Whanganui-ā-Tara Wellington was responsible for national administration, and included the superintendent, a deputy superintendent, and two supervisors responsible for social welfare facilities and field services (the work of social workers in each district). A senior inspector oversaw the performance of district offices and social welfare facilities. A senior boys' welfare officer and senior child welfare officer were responsible for staff training and supervision of case work respectively.[521]

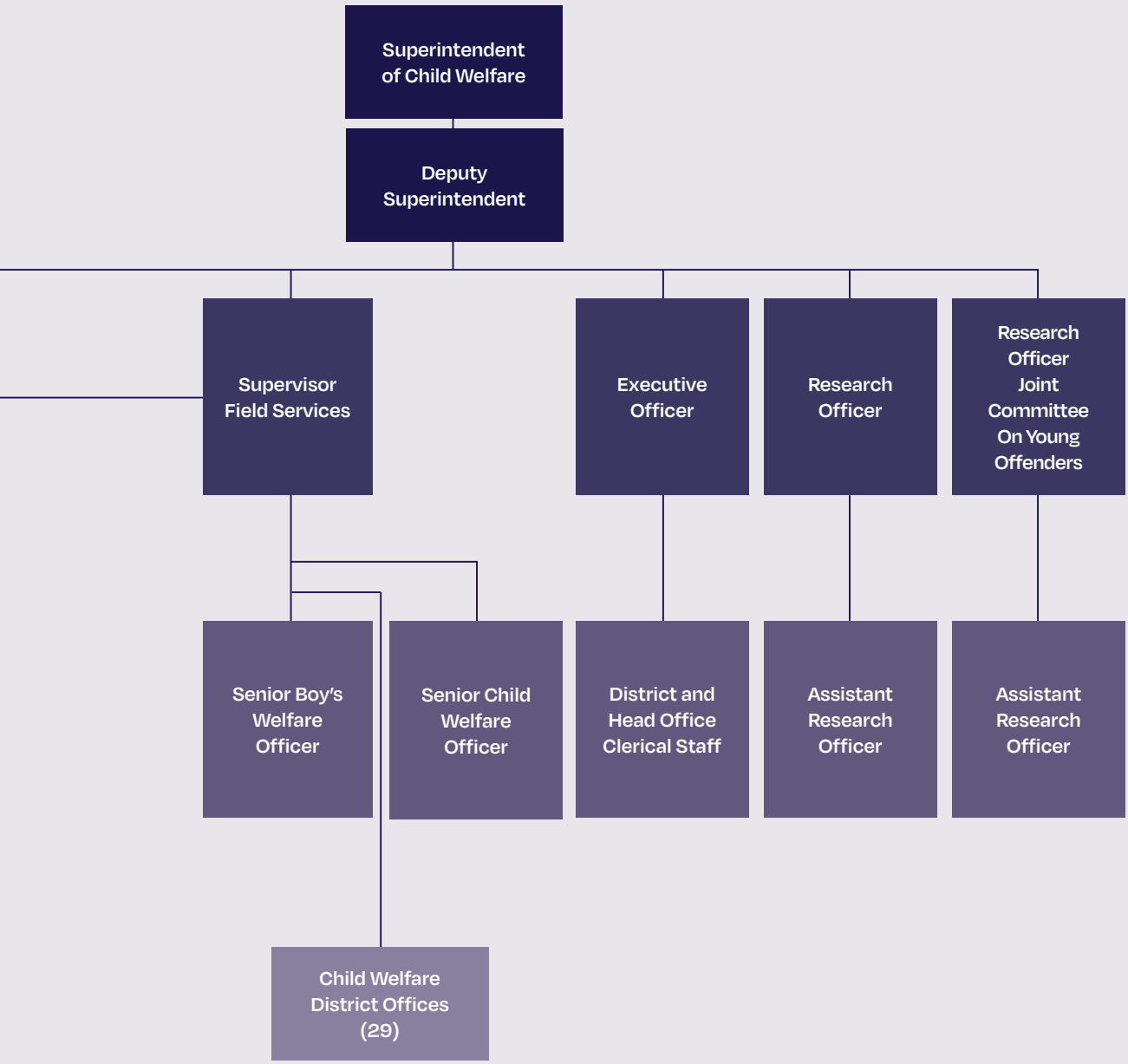
419. Field work was carried out by district offices around Aotearoa New Zealand, with each district office under the control of a district child welfare officer. They were responsible, among other things, for boys' and girls' homes, receiving homes and Family Homes in their district, as well as the Child Welfare Offices attached to their district.[522] District child welfare officers reported to National Office in Te Whanganui-ā-Tara Wellington, and carried out functions on behalf of the superintendent.[523]

516 Department of Social Welfare Act 1971, section 6.
517 Children and Young Persons Act 1974, section 49(4).
518 Children and Young Persons Act 1974, section 5(1).
519 Earl White v Attorney General, HC, Wellington, CIV-2001-485-864 (28 November 2007, para 346).
520 Children, Young Persons, and Their Families Act 1989, section 7.
521 Department of Education, Child Welfare Division Field Officers' Manual, part 1 (1953, page 104).
522 Department of Education, Child Welfare Division Field Officers' Manual, part 1 (1953, page 106).
523 Department of Education, Child Welfare Division Field Officers' Manual, part 1 (1953, page 106); Ministry of Social Development, Record keeping history of the Ministry of Social Development and its predecessor agencies: Part One agency structure, records systems and procedures (n.d., page 37).

Structure chart for the Child Welfare Division before 1972[524]



524 Ministry of Social Development, Record keeping history of the Ministry of Social Development and its predecessor agencies: Part One agency structure, records systems and procedures (n.d., page 46).


Superintendent of Child Welfare
Deputy Superintendent
Supervisor Field Services
Executive Officer
Research Officer
Research Officer Joint Committee On Young Offenders
Senior Boy's Welfare Officer
Senior Child Welfare Officer
District and Head Office Clerical Staff
Assistant Research Officer
Assistant Research Officer
Child Welfare District Offices (29)

420. While the day-to-day care of children and young people was the responsibility of the residential staff or caregiver, the superintendent, director-general or chief executive relevant to the time was legally responsible for their well-being. They carried out part of that responsibility through delegation to departmental officers and employees such as child welfare officers and social workers.[525]

421. Child welfare officers were supervised in district offices by the district child welfare officer (DCWO).[526] Principals of district facilities reported to the local district director while principals of the four national facilities (Kohitere Boys' Training Centre, Kingslea Girls' Training Centre , Hokio Beach School and Fareham House) reported directly to the director-general.[527]

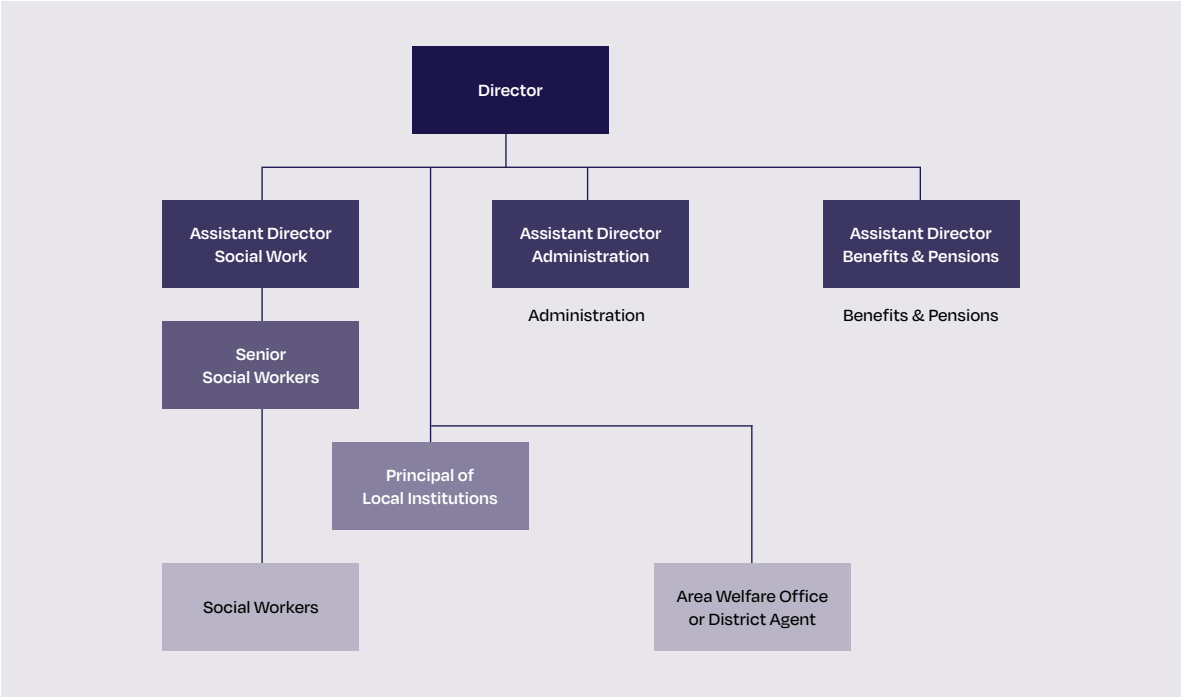
422. Under the Child Welfare Act 1925, child welfare officers had broad powers to investigate the circumstances of children and their families, to oversee children under court-ordered supervision, and to inquire into the living situations of illegitimate children and their mothers.[528] A police officer or child welfare officer could apply to the Children's Court for a warrant to remove children and young people from their home.[529]

423. The superintendent (or any child welfare officer acting with their delegated authority) had the discretion to place a child or young person who was under a court order in any care setting, anywhere in Aotearoa New Zealand, and they could move them at any time.[530] The superintendent or director-general had to personally approve placements for particular settings.[531]

424. By the mid-1980s child welfare officers were known as social workers. Head Office was focused on overall administration of services, planning and advising the government. Directors of Social Work, Residential Services and Institutions and Family Homes reported to the director-general. District offices used a mix of specialist and general social work staff to carry out field work around Aotearoa New Zealand.[532]

525 Child Welfare Act 1925, section 6(1).
526 Parker, W, Social Welfare residential care 1950–1994, Volume I: National policies and procedures (Ministry of Social Development, 2006, page 11).
527 Department of Education, Child Welfare Division Field Officers' Manual, part 1 (1953, page 106).
528 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 97); Parker, W, Social Welfare residential care 1950–1994, Volume I: National policies and procedures (Ministry of Social Development, 2006, page 9).
529 Child Welfare Act 1925, (No 22), section 13 (2).
530 Child Welfare Act 1925, sections 13 (9) and 20(1), (Repealed); Children and Young Persons Act 1974, section 49(4); Children, Young Persons, and Their Families Act 1989, sections 105 and 362.
531 Department of Social Welfare, Social Workers Manual (1984, page 47); Department of Social Welfare, Social Workers Manual (1985, page 83); Department of Social Welfare, Social Workers Manual (1989, page 81).
532 Sagar, M, Psychologists and the Department of Social Welfare (publisher unknown, 1986, pages 2–3).

Department of Social Welfare District Office Structure 1986[533]



425. In 1992 the Department of Social Welfare was restructured into several different business units, including:

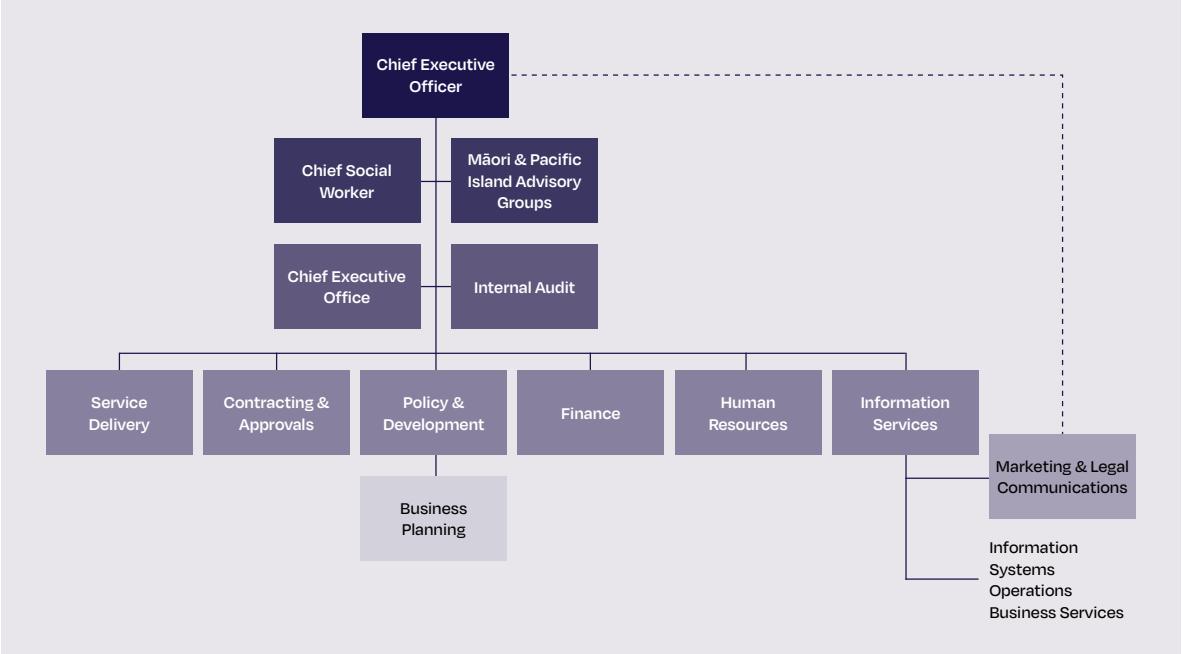
- the New Zealand Children and Young People's Service, responsible for care and protection, youth justice and adoption services
- the New Zealand Community Funding Agency, responsible for third-party service providers
- the Social Policy Agency, responsible for provision of policy advice and review across core service divisions.[534]

426. The Minister for Social Welfare was responsible for these business units through the Department of Social Welfare as the parent agency.

427. There were further restructures throughout the 1990s, and by 1999 the New Zealand Community Funding Agency had merged with the Children, Young Persons and Their Families to become The Department of Children, Young Persons and Their Families Services (CYPFS). The Department of Social Welfare was disestablished, with CYPFS supported by the Ministry of Social Policy.[535] These restructures would continue past 1999 into the following decades.[536]

533 Sagar, M, Psychologists and the Department of Social Welfare (publisher unknown, 1986, page 3).
534 Ministry of Social Development, Record keeping history of the Ministry of Social Development and its predecessor agencies: Part One agency structure, records systems and procedures (n.d., pages 125–126).
535 Ministry of Social Development, Record keeping history of the Ministry of Social Development and its predecessor agencies: Part One agency structure, records systems and procedures (n.d., pages 125–156).
536 Garlick, T, Social developments: An organisational history of the Ministry of Social Development and its predecessors, 1860–2011 (Steele Roberts Aotearoa, 2012, pages 278 and 283–286).

The structure of Child Youth and Family as of October 1999[537]



Te huarahi whakanoho tamariki me ngā rangatahi ki ngā tokoora pāpori
How children and young people were placed in social welfare care

428. The Child Welfare Act 1925 set up a system of Children's Courts to make decisions for children and young people who came to the attention of the State. Judges in the Children's Court could deliver a range of judgements for children, bought before the court, for care and protection matters or offences, including placing them in State care. Under the Children and Young Persons Act 1974, the Children and Young Person's Court heard cases on youth offending, while care and protection matters were heard by the Family Court.[538]

429. Under the Children, Young Persons, and Their Families Act 1989, youth justice proceedings were dealt with by a new Youth Court and care and protection proceedings in the Family Court.[539]

537 Ministry of Social Development, Record keeping history of the Ministry of Social Development and its predecessor agencies: Part One agency structure, records systems and procedures (n.d., page 157).
538 Garlick, T, Social developments: An organisational history of the Ministry of Social Development and its predecessors, 1860–2011 (Steele Roberts Aotearoa, 2012, pages 53 and 93).
539 Garlick, T, Social developments: An organisational history of the Ministry of Social Development and its predecessors, 1860–2011 (Steele Roberts Aotearoa, 2012, page 132).

430. From 1950 to 1974, the Child Welfare Act 1925 set out four key ways children and young people could be committed to social welfare care.

- **by agreement:** The superintendent could make agreements with a child or young person's parents to take control of them.[540] In such cases, the superintendent held the same powers and responsibilities as if the child were placed under their care through the Child Welfare Act of 1925, excluding guardianship.[541] The superintendent would only assume guardianship if a committal order was issued after a complaint or application to the Children's Court[542]
- **by complaint:** A constable or child welfare officer could file a complaint with the Children's Court for children or young people who were neglected, indigent (poor), delinquent, or living in an environment detrimental to their well-being. Children's Court judges could summon custody holders and issue warrants for the child or young person to be temporarily placed in a social welfare residence such as a borstal or youth prison.[543] Following an investigation a hearing would be held. If the complaint was upheld, the judge could order the child or young person committed to the superintendent or director-general's care, or supervision by a child welfare officer or social worker[544]
- **by application:** A constable or child welfare officer could bypass the complaint and summons process by directly requesting a committal order from the Children's Court based on a report about the child or young person's circumstances.[545] If granted, the court didn't have to specify a facility for the child or young person. Instead, the order gave a constable or child welfare officer authority to take the child or young person to a facility designated by the superintendent, or to the nearest available State institution[546]
- **committal following charge:** If a child or young person faced charges and appeared before the Children's Court, the judge could commit them to the care of the superintendent, treating it similarly to a filed complaint.[547] In such cases, the judge did not need to rule on the charges but could base his or her decision to put the child or young person into care on factors such as the child's parentage, environment, history, education, mentality, disposition and other relevant considerations.[548]

540 Child Welfare Act 1925, section 12(1).
541 Child Welfare Act 1925, section 12(2).
542 Child Welfare Act 1925, section 12(2).
543 Child Welfare Act 1925, sections 13(1) and 13(2).
544 Child Welfare Act 1925, section 13(4).
545 Child Welfare Act 1925, sections 13(5), 13(7).
546 Child Welfare Act 1925, section 13(6).
547 Child Welfare Act 1925, section 13(5).
548 Child Welfare Act 1925, section 31.

431. Under the Children and Young Persons Act 1974, the interests and wellbeing of the child or young person were to be the first and most important consideration of the Court or any other person exercising powers under that Act.[549] In 1983, the Act was amended to provide for a principle in favour of keeping a child or young person with his or her family group, except where expressly required by the Act or impractical.[550]

432. The Children and Young Persons Act 1974 provided for Children's Boards to divert children and young people away from court. Children's Boards involved community members such as police, social welfare officers, a representative appointed by the Secretary for Māori and Island Affairs, and a local resident.[551] They considered reports and made inquiries to decide on appropriate actions, usually if matters were undisputed by the child or parents.[552] Actions could include counselling or professional help or recommending a complaint to the Children and Young Persons Court by the police or a social worker.[553]

433. From 1982 a complaint could only proceed to the Court after being reported to a Children's Board, except when the Court thought that delay was not in the child's or the public's best interest.[554]

434. The Children, Young Persons, and Their Families Act 1989 represented a significant point, both nationally and internationally, in child welfare legislation.[555] It reflected the insights and suggestions outlined in the Puao-te-Ata-Tū Report of 1986, shifting the responsibility for decisions about care and protection for children and young offenders away from the State and toward families and whānau.[556] Beyond outlining general principles, such as prioritising the welfare and interests of the child or young person, the Act also contained specific principles related to care and protection and youth justice matters.[557]

435. At the heart of the Act was the concept of family and whānau decision-making, formalised through the family group conference process.[558] The focus on a child or young person's whānau, hapū, iwi and extended family was intended to give them more authority and power to make decisions about their children and young people.[559]

549 Children and Young Persons Act 1974, section 4.
550 As inserted by the Children and Young Persons Amendment Act 1977 (No 126), section 3.
551 Children and Young Persons Act 1974 (No 72), section 13.
552 Children and Young Persons Act 1974 (No 72), section 15(8).
553 Children and Young Persons Act 1974 (No 72), section 15(7).
554 As inserted by the Children and Young Persons Amendment Act 1977 (No 126), section 7.
555 Transcript of evidence of Chief Ombudsman Peter Boshier (26 August 2022, pages 1041–1042).
556 Frater, M, Why and how children went into care: a legal analysis of the legislative framework for care: background paper for the Royal Commission of Inquiry into Abuse in Care (2019, page 29).
557 Children, Young Persons, and Their Families Act 1989, sections 5 and 13.
558 Children, Young Persons, and Their Families Act 1989, sections 20–38.
559 Frater, M, Why and how children went into care: a legal analysis of the legislative framework for care: background paper for the Royal Commission of Inquiry into Abuse in Care (2019, page 29).

436. The Act divided youth justice and care and protection matters, with youth justice proceedings dealt with by a new Youth Court and care and protection proceedings in the Family Court. It emphasised the accountability of young offenders for their actions and the role of families and whānau in supporting them to change their behaviour.[560]

437. While an attempt was made to reduce the powers of the State under the Children, Young Persons, and Their Families Act 1989, children and young people could still find themselves being placed into social welfare care if a Court found that they were in need of care and protection or there had been youth offending.

438. For care and protection matters, children and young people would now come to the attention of the State following a report of concern. A report of concern was where a person or an entity told a social worker or the police that they believed a child or young person had been harmed or neglected.[561]

439. Reports of concern could trigger an investigation. If the child or young person was considered to be in need of care or protection, a Care and Protection Coordinator could call a family group conference. The conference addressed concerns and decided recommendations and plans for the child or young person and their family.[562]

440. Care and protection co-ordinators sought consensus on the plan made by the family group conference, and if agreed, the Director-General of Social Welfare was required to implement it unless it was impractical or was inconsistent with the child or young person's welfare. Financial assistance could be provided if needed.[563]

441. If no agreement was reached, the co-ordinator would report back to the referrer. Referrers, such as social workers or police officers, could then take appropriate actions under the Children, Young Persons, and Their Families Act 1989, including the use of warrants or pursuit of custody and guardianship orders in the Family Court.[564]

442. The Children, Young Persons, and Their Families Act 1989, like its predecessors, allowed the use of warrants in specific circumstances.[565] Place of safety warrants and warrants to remove a child or young person could be issued if a Judge was satisfied that there were reasonable grounds that a child or young person was suffering, or was likely to suffer, ill-treatment, neglect, deprivation, abuse or harm.[566]

560 Watt, E, A history of youth justice in New Zealand, research paper commissioned by the Principal Youth Court Judge (2003, pages 24–26); Children, Young Persons, and their Families Act 1989 (No 24), section 208.
561 Children, Young Persons, and Their Families Act 1989 (No 24), section 15.
562 Children, Young Persons, and Their Families Act 1989 (No 24), sections 18(1) and 19(3).
563 Children, Young Persons, and Their Families Act 1989 (No 24), sections 30 and 34.
564 Children, Young Persons, and Their Families Act 1989 (No 24), sections 31 and 31(2).
565 Children, Young Persons, and Their Families Act 1989 (No 24), sections 39–40.
566 Children, Young Persons, and Their Families Act 1989 (No 24), sections 39–40.

443. The Children, Young Persons, and Their Families Act 1989 allowed non-government agencies to care for children and young people on behalf of the State. These third-party providers were required to be approved under section 396 of the Act.[567]

444. In 1992 the New Zealand Community Funding Agency (NZCFA) was established within the Department of Social Welfare for the government to purchase social services from the not-for-profit sector. NZCFA inherited roles under the Disabled Persons Community Welfare Act 1975 and the Children, Young Persons, and Their Families Act 1989 and administered regulations, assessed service providers, negotiated contracts, distributed funds, and monitored performance.

445. The Children, Young Persons, and Their Families Act 1989 also allowed a parent, guardian or other caregiver to make an agreement with the director-general for the temporary or extended care of a child or young person. This could also include an agreement with an iwi or cultural organisation or the director of a Child and Family Support Service. The maximum length of extended care agreements was usually 12 months. If the child or young person was "so mentally or physically disabled that suitable care for that child or young person can be provided only if that child or young person is placed in institutional care",[568] the agreement could be for up to two years and could be extended biennially by a family group conference.

446. Under the Care and Protection Handbook (1996–2002), direction was given to social workers that temporary care agreements were only to be entered into when the child or young person would be returning home on expiry of the agreement.

447. The handbook required the social worker to ensure that people entering into the agreement fully understood it and that alternatives, such as accessing support services, were explored. A temporary care agreement could be entered into with one parent, guardian or caregiver in a "crisis situation" but other parents or guardians were to be notified as soon as possible.[569] It also stated that it was "good practice" to consult with a child over the age of 12 years old.[570]

567 Children, Young Persons, and Their Families Act 1989 (No 24), section 396.
568 Children, Young Persons, and Their Families Act 1989 (No 24), section 141.
569 Child Youth and Family Care and Protection Handbook, 1996-2002, (Version 2.1, June 2000). 10-6.
570 Child Youth and Family Care and Protection Handbook, 1996-2002, (Version 2.1, June 2000). 10-7.

Te wehe i te Taurimatanga Tokoora Pāpori
Exiting Social Welfare Care

448. Until 1961, superintendents decided how long a child or young person stayed in social welfare care. Subsequent Acts introduced changes, allowing requests for discharge from the child, parents, or caregivers.[571] Guardianship under the 1974 Act extended until age 20, subject to the director-general's discretion.[572] The 1989 Act gave courts the ability to issue declaration orders for custody or guardianship, with specific terms.[573]

449. Social worker manuals from 1957, 1970 and 1984 provided general recommendations for transitioning State wards out of residential care and back into their communities.[574]

450. The key criteria points listed in the 1984 Social Worker Manual included more short-term considerations, like whether a State ward's living circumstances were satisfactory and whether employment or benefits had been established.[575] There were no points made about ongoing support by the Department of Social Welfare.

Ngā tamariki whaikaha i pāngia e ngā whakaritenga o roto i te ture
Disabled children affected by provisions in the law

451. Similar to the voluntary agreement in Section 142 of the Disabled Persons Community Act 1975, the Children, Young Persons, and Their Families Act 1989 included separate provisions for the care and protection of disabled children and young people. These provisions applied to those children and young people who were considered to be in need of out of home care due to their disability.[576] Sections 141 and 142 of the 1989 Act enabled out-of-home care placements for disabled children through the Ministry of Health's Disability Support Service. Placement decisions involved the Needs Assessment Service Coordination system, with final approval via a family group conference.

571 Child Welfare Act 1925 (No 22), section 23.
572 Either married, or was adopted other than by a parent (Children and Young Persons Act 1974, No 72, section 49(7)).
573 Children, Young Persons, and Their Families Act 1989, sections 101(1) and (2); Children, Young Persons, and Their Families Act 1989 (No 24), section 110(1)(a)-(e).
574 Department of Education, Child Welfare Division Field Officers' Manual (1957, section J.468); Department of Education, Child Welfare Division Social Workers' Manual (1970, section J27); Department of Social Welfare, Social Work Manual, Volume 2 (1984, section N21).
575 Department of Social Welfare, Social Work Manual, Volume 2 (1984, section N21.3).
576 Children, Young Persons, and Their Families Act 1989 (No 24), section 141.

Ngā whakaritenga tokoora pāpori
Social welfare settings

Te taurimatanga i ngā kāinga atawhai me ngā kāinga whānau
Foster and Family Home care

452. Foster care was the most common State care setting for children and young people during the Inquiry period. Children were placed with families – often unrelated to them – to live as a member of that family. Due to the number of foster placements, it is unclear from the records how many such placements occurred, or their locations.

453. Family Homes were established in the mid-1950s as an extension of fostering, with Family Home caregivers intended to be surrogate parents. Married couples ran Family Homes and cared for multiple children. This type of care setting was thought to be more in keeping with a natural family life. Family Homes also allowed siblings to be kept together.[577] By 1972 there were 78 Family Homes around the country.[578]

454. Family Homes were later developed for more transitional placements. However, the continuous shortage of foster carers meant that some children remained in Family Homes for extended periods.

455. In 1983, the Department of Social Welfare and the Department of Māori Affairs started the Mātua Whāngai programme to place tamariki and rangatahi Māori in Māori homes rather than social welfare residences and non-Māori families. Mātua Whāngai evolved into a community-based initiative focused on reintegrating tamariki and rangatahi Māori into their whānau or iwi and ran until around 1991.

577 Craig, T & Mills, M, Care and control: The role of institutions in New Zealand (New Zealand Planning Council, 1987, page 36).
578 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 173).

Kāinga tokoora
Social welfare residences

456. Social welfare residences were broadly split into national and district institutions, with separate institutions for boys and girls.[579] Each district or major centre had a boys' and girls' home for short- to medium-term placements. National institutions existed for long-term placements.[580]

457. There were six national and 14 district facilities which operated from the early 1950s to 1990. There were also receiving homes (or reception centres) which were short-term residences for babies and very young children.[581]

458. Children placed in district institutions were often between placements or being assessed for placement in a foster or Family Home or national institution. Those placed in national institutions were deemed to need an extended period of institutional training and behaviour management.[582]

459. Some residences were large homesteads, usually with several outbuildings, and dormitory-style accommodation. By the mid-1970s, many of the social welfare residences were overcrowded and in poor repair.[583]

460. Over the 1980s the number of these institutions dropped from 26 to four in the main centres (Weymouth, Epuni, Kingslea and Elliot Street).[584]

579 Parker, W, Social Welfare residential care 1950–1994, Volume. I: National policies and procedures (Ministry of Social Development, 2006, page 10).
580 Parker, W, Social Welfare residential care 1950–1994, Volume I: National policies and procedures (Ministry of Social Development, 2006, page 51).
581 Parker, W, Social Welfare residential care 1950–1994, Volume. I: National policies and procedures (Ministry of Social Development, 2006, pages 50–51); Garlick, T, Social developments: An organisational history of the Ministry of Social Development and its predecessors, 1860–2011 (Steele Roberts Aotearoa, 2012, page 133).
582 Parker, W, Social Welfare residential care 1950–1994, Volume I: National policies and procedures (Ministry of Social Development, 2006, page 51).
583 Carson, R, New horizons: A review of the residential services of the Department of Social Welfare (Department of Social Welfare, 1982, page 59).
584 Garlick, T, Social developments: An organisational history of the Ministry of Social Development and its predecessors, 1860–2011 (Steele Roberts Aotearoa, 2012, page 133); Savage, C, Moyle, P, Kus-Harbord, L, Ahuriri-Driscoll, A, Hynds, A, Paipa, K, Leonard, G, Maraki, J, & Leonard, J, Hāhā-uri, hāhā-tea: Māori involvement in State care 1950–1999 (Ihi Research, 2021, page 92).

Tamaiti atawhai
Adoption

461. Legal adoptions became possible in Aotearoa New Zealand from the late 19th century but remained relatively uncommon before the Second World War. There was a separate legal process for Māori adoptions, which took place through the Native Land Court (the Māori Land Court from 1947). The vast majority of legal adoptions in this era were open, with adoptive children knowing the identity of their biological mother or parents.[585]

462. By 1945 over 1,000 children were adopted annually in Aotearoa New Zealand, growing to 1,880 by 1960.[586] Initially, there were more people wanting to adopt than available children.[587] However, by the early to mid-1960s, State and faith-based institutions were reporting an increase in children being placed up for adoption but extreme difficulties finding adoptive homes.[588]

463. Until 1955 legal adoptions were mainly arranged privately, often by agencies, doctors, maternity homes, hospital matrons or facilitated through faith-based unmarried mothers' homes.[589] Social workers were not required to approve or be involved in adoptions until the Adoption Act 1955 was passed.[590]

464. The State became more involved in adoptions following the Adoption Act.[591] The Act promoted a 'complete break' between birth and adoptive families[592] by providing for closed adoptions by unrelated strangers where "all identifying details of the child's birth parents remained confidential".[593] Birth mothers could consent to adoption 10 days following the birth, one of the shortest periods in any country.[594] The birth father's consent was not required.

465. There were grounds when consent of the parent (almost always the birth mother) or guardian could be dispensed with for adoption to proceed. These were set out in Section 8 of the Adoption Act 1955 and included situations where the parent or guardian had "abandoned, neglected, persistently failed to maintain, or persistently ill-treated the child, or failed to exercise the normal duty and care of parenthood".[595] It also included situations where the parent or guardian was thought to be unable to care for the child due to physical or mental incapacity.[596]

585 Else, A, A question of adoption: Closed stranger adoption in New Zealand, 1944–1974 (Bridget Williams Books, 1991, pages x–xi, page 24).
586 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 224).
587 Else, A, A question of adoption: Closed stranger adoption in New Zealand, 1944–1974 (Bridget Williams Books, 1991, page 48); Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 233).
588 Else, A, A question of adoption: Closed stranger adoption in New Zealand, 1944–1974 (Bridget Williams Books, 1991, paras 67–69).
589 Witness statement of Dr Anne Else (9 October 2019, page 4).
590 Else, A, Adoption: Growth in adoption (Te Ara – The Encyclopedia of New Zealand, 2011, page 2), https://teara.govt.nz/en/adoption/page-2.
591 Adoption Act 1955.
592 Witness statement of Dr Anne Else (9 October 2019, page 5).
593 Haenga-Collins, M, Closed stranger adoption, Māori and race relations in Aotearoa New Zealand, 1955–1985, Doctoral Thesis, Australian National University (March 2017, page 1).
594 Witness statement of Dr Anne Else (9 October 2019, page 5).
595 Adoption Act 1955, section 8(1).
596 Adoption Act 1955, section 8(2).

466. The Child Welfare Division took an active role in identifying the babies of single mothers for adoption, advising its officers to co-operate closely with unmarried mothers' homes. The Field Officers' Manual for 1958 to 1969 advised officers to help the mother "think carefully about the future" and "assist her towards a satisfactory decision".[597] There was a growing reluctance among social workers from the 1960s towards making such intrusive investigations.[598]

467. Between 1984 and 1996, social workers were advised to build a relationship of trust with young mothers while they were still pregnant to help them reach a "realistic decision" that took into regard the child's future.[599] The Social Work Manual warned that because ex-nuptial pregnancies were now more socially acceptable, and a benefit was available, mothers were "frequently confronted by a tempting choice" of alternatives to adoption:

> ***"Unfortunately experience indicates that many of the young girls who decide to keep their babies are the very ones who are least ready to assume the responsibility – and constraints on their social life – of the care of a young child. The Social Worker should not too readily accept the mother's statement that she has already decided the baby's future."***[600]

468. Adoption rates peaked at 3,976 in 1971, comprising 6 percent of live births, and declined to 2,200 by 1979 (4 percent of live births).[601] Most adoptions involved children born to unmarried parents,[602] with a decrease in the percentage over the years (82 percent in 1945, 67 percent in 1971). Even into the 1970s, when social attitudes towards single motherhood began to shift, State financial support remained limited. Few childcare options existed, and women's work was often low paid. This severely constrained single mothers' ability to provide for themselves and their children.[603] An estimated 45,000 closed stranger adoptions occurred between 1955 and 1985.[604]

469. In 1985 the Adult Adoption Information Act 1985 allowed adopted people aged over 20 to obtain their original birth certificate and potentially apply for identifying information about their birth mother and / or father.[605]

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597 Department of Education, Child Welfare Division Field Officers Manual (c. 1958-1969, I.289).
598 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 264).
599 Department of Social Welfare, Social Work Manual (1984, E4.1).
600 Department of Social Welfare, Social Work Manual (1984, E4.1).
601 Else, A, A question of adoption: Closed stranger adoption in New Zealand, 1944–1974 (Bridget Williams Books, 1991, page xii).
602 Witness statement of Dr Anne Else (9 October 2019, para 7).
603 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 223).
604 Haenga-Collins, M, "Creating fictitious family memories: The closed stranger adoption of Māori children into white families," Journal of New Zealand studies (2019, page 37).
605 Adult Adoption Information Act 1985, sections 4 and 9.

Table of legal adoptions during the period of 1943–1979[606]

	1943	1944	1945	1955
Total adoptions	577	1,313	1,191	1,455
Adoptions as % of live births	1.9%	3.91%	3.22%	2.92%
Adoptions known to Child Welfare Divisions/DSW	*	1,065	1,151	1,366
Adoptions involving ex-nuptial births	*	903	973	1,062
Adoptions by strangers	*	*	*	984
Adoptions of children under 1 year old	*	*	*	849

**not available*

Source: Derived from tables compiled by K.C. Griffith (1981) from New Zealand Yearbook and Dept of Social Welfare statistics.

Te Ture Whāngai 1955, te whāngai Māori me te whāngai
The Adoption Act 1955 and Māori whāngai and adoptions

470. Māori traditionally had a system of caring for children among wider whānau and had common and accepted practices such as whāngai or atawhai, which involved tamariki Māori being raised by whānau members.[607] Whāngai also enabled tamariki Māori to maintain connection with their birth whānau and their whāngai whānau and meant the child's and hapū rights and privileges remained protected.[608]

471. From the 1900s Māori adoptions and whāngai became increasingly controlled and regulated by the State. In 1901, Māori adoptions and whāngai were not recognised legally unless they were registered in the Native Land Court, where they had to be approved by a judge.[609] In 1909, it became illegal for Māori to adopt non-Māori. Māori rates of adoption and whāngai were not recorded during this time.

472. The 1955 Act removed the ban on Māori adopting non-Māori, and Māori adoptions were also brought under almost the same rules as adoption. As such, the Act did not recognise Māori whāngai practices.[610]

606 Witness statement of Dr Anne Else (9 October 2019, page 3).
607 Else, A, A question of adoption: Closed stranger adoption in New Zealand, 1944–1974 (Bridget Williams Books, 1991); Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 60).
608 Savage, C, Moyle, P, Kus-Harbord, L, Ahuriri-Driscoll, A, Hynds, A, Paipa, K, Leonard, G, Maraki, J, & Leonard, J, Hāhā-uri hāhā-tea: Māori involvement in State care 1950–1999 (Ihi Research, 2021, page 35).
609 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 233).
610 Else, A, A question of adoption: Closed stranger adoption in New Zealand, 1944–1974 (Bridget Williams Books, 1991, page 180).

1960	1965	1970	1971	1972	1974	1979
1,880	3,088	3,837	3,976	3,642	3,366	2,200
3.39%	5.14%	6.18%	6.17%	5.75%	5.67%	4.21%
1,796	2,835	3,362	3,231	3,280	3,366	2,200
1,377	2,429	2,831	2,674	2,713	2,391	1,375
1,327	2,162	2,286	2,176	2,136	1,821	845
1,321	2,503	2,969	2,872	2,892	2,474	1,258

473. A 1962 amendment transferred Māori adoption hearings from the (open) Māori Land Courts to the (closed) Magistrates Courts. Financial costs and questioning of applicants' personal circumstances disadvantaged whānau Māori.[611] This reduced the number of potential Māori adoptive parents and increased the likelihood of pēpē and tamariki Māori being placed in foster care or being adopted by Pākehā parents.[612]

474. Some pēpē and tamariki Māori adopted out through this closed process lost knowledge of their whakapapa or were even unaware that they were Māori.[613] For tamariki Māori who were adopted out, their iwi were rarely recorded, and their ethnicity was often incorrectly recorded.

475. This was particularly the case where the mother was Pākehā and the father was Māori. Pākehā women increasingly gave their pēpē up for adoption to avoid racial and social discrimination and prejudice, often omitting the name of the Māori fathers on birth certificates.[614] Dr Anne Else told the Inquiry that any claims from the father or wider whānau were often not recognised:

> *"This aspect of the law proved highly significant in cases where the birth mother was Pākehā and the father was of Māori heritage. Māori social workers recalled many cases where the birth father's family, especially the grandparents, wanted to adopt the child, but had no standing and were not permitted to do so."*[615]

611 NZ Press Association, "New Law Reduces Adoptions," The Press (29 July 1966). https://paperspast.natlib.govt.nz/newspapers/CHP19660729.2.36?phrase=2&query=New+Law+Reduces+Adoptions&snippet=true
612 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 234)
613 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 234); Witness statements of Dr Anne Else (9 October 2019, page 18); Ms AF (13 August 2021, paras 3.3–3.5) and Dallas Pickering (n.d., para 27); Haenga-Collins, M, Closed stranger adoption, Māori and race relations in Aotearoa New Zealand, 1955–1985, Doctoral Thesis, Australian National University (March 2017, page 7).
614 Else, A in Savage, C, Moyle, P, Kus-Harbord, L, Ahuriri-Driscoll, A, Hynds, A, Paipa, K, Leonard, G, Maraki, J & Leonard, J, Hāhā-uri hāhā-tea: Māori involvement in State care 1950–1999 (Ihi Research, 2021, page 168).
615 Witness statement of Dr Anne Else (9 October 2019, para 14).

"This aspect of the law proved highly significant in cases where the birth mother was Pākehā and the father was of Māori heritage. Māori social workers recalled many cases where the birth father's family, especially the grandparents, wanted to adopt the child, but had no standing and were not permitted to do so."

DR ANNE ELSE
Author of '*A question of adoption: Closed stranger adoption in New Zealand, 1944–1974*'

476. Māori researchers and experts have noted closed adoption policies were part of a wider context of State policies "oriented towards the nuclear family, domesticity and producing 'ideal citizens'", and supported the prevailing assimilationist agenda.[616]

Whakaritenga whakawhiti, whakaū ture hoki
Transitional and law enforcement settings

477. NZ Police also had children, young people and adults in their care. Children, young people and adults in care for disability or mental distress who were picked up by police officers or were being processed for sentencing or placement in another care setting could find themselves temporarily in police cells, police custody, court cells and transfers to, between, or out of State care residences. Police cells were also used sometimes when there were no beds available in other facilities.[617]

478. Police cells were established as penal institutions under the Penal Institution Act 1954 for holding a person on remand or for short-term sentences.[618] Under the Criminal Justice Act 1954, young people could be sentenced to imprisonment in an adult prison if the judge thought it was appropriate.[619]

479. The role of NZ Police in relation to care was often carried out alongside social workers. Children and young people came to the attention of police officers for a variety of reasons, from perceived antisocial behaviour to notifications and referrals from other agencies.

480. The Child and Young Persons Act 1974 detailed the broad powers of police officers to pick up unaccompanied children in public places if they were in an environment 'which is detrimental to his physical or moral well-being'.[620] Police officers ultimately had discretion to determine whether a situation was harmful to the child or young person's well-being. If a parent or guardian could not be found, police officers could deliver the child or young person to the custody of the Director-General of Social Welfare.[621]

616 Ahuriri-Driscoll, A, Blake, D, Potter, H, McBreen, K & Mikaere, A, "A 'forgotten' whakapapa: historical narratives of Māori and closed adoption, New Zealand Journal of Social Sciences Online," 18(2), (2023, page 136).
617 Children, Young Persons. and Their Families Act 1989 (No 24), sections 241(1)– (2).
618 Penal Institutions Act 1958, sections 12(1)–(2): Sentences of imprisonment for less than one month could be served in a police jail.
619 Criminal Justice Act 1954, section 14(1).
620 Child and Young Persons Act 1974, section 12.
621 Transcript of evidence of Commissioner Andrew Coster for NZ Police at the Inquiry's State Institutional Response Hearing (Royal Commission of Inquiry into Abuse in Care, 16 August 2022, pages 104–105).

481. The Children, Young Persons, and Their Families Act 1989 outlined principles for dealing with young offenders, emphasising that criminal proceedings should be a last resort,[622] not initiated solely for welfare assistance, and designed to strengthen the family group's ability to address offences.[623] Police officers had to consider alternatives such as warnings or formal cautions, with recommendations from family group conferences.[624]

482. Family group conferences offered an opportunity for families to respond to issues involving their young people before matters reached the courts.[625] From the 1990s, family group conferences became the primary means of dealing with young offenders. Of nearly 6,000 family group conferences held in 1990/1991, only 300 cases were referred on to the Youth Court for resolution.[626]

483. Police officers could arrest a child or young person without a warrant for purely indictable (requiring a prison term) offences in the public interest or in specific situations.[627] After arrest, with their agreement, the child or young person could be delivered to an iwi or cultural authority, the director-general, or placed in custody, depending on the circumstances.[628] This could also be done without their agreement, but had to happen within 24 hours[629] unless a senior social worker and member of the police agreed the child or young person was likely to run away or be violent and social welfare did not have suitable facilities for them.[630] In these circumstances, the young person could be detained in police custody until appearing in Court.[631]

Te manatika taiohi
Youth justice

484. From the 1950s to the late 1990s, Aotearoa New Zealand had several types of settings for young people considered to be in need of youth justice care or corrective training. These included borstals, detention centres and youth prisons. Some social welfare residences also had a corrective or training element to them intended to address perceived behavioural issues with children and young people – this included residences such as Hokio, Kohitere and Epuni.

622 Children, Young Persons, and Their Families Act 1989 (No 24), section 208(a).
623 Children, Young Persons, and Their Families Act 1989 (No 24), section 208(b)–(c).
624 Children, Young Persons, and Their Families Act 1989 (No 24), sections 209 and 211.
625 Children, Young Persons, and Their Families Act 1989 (No 24), section 258.
626 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 288).
627 Children, Young Persons, and Their Families Act 1989 (No 24), sections 241(1)–(2).
628 Children, Young Persons, and Their Families Act 1989 (No 24), section 234.
629 Children, Young Persons, and Their Families Act 1989 (No 24), section 235(1).
630 Children, Young Persons, and Their Families Act 1989 (No 24), section 236.
631 Children, Young Persons, and Their Families Act 1989 (No 24), section 236(1).

485. Up until 1995 when the Department of Corrections was formed, the Department of Justice was responsible for overseeing young people in these facilities.[632] If the Department of Social Welfare was transferring a young person from a social welfare residence to a borstal, they were no longer responsible for the young person once the transfer was complete.[633]

486. Borstals were introduced in 1924 with the Prevention of Crime (Borstal Institutions Establishment) Act 1924. Young offenders between 15 and 21 years of age[634] could be sentenced to undergo borstal training for a period of up to three years[635] if they had been convicted of an offence punishable by imprisonment.[636]

487. The purpose of the borstals was to reform young offenders with the goal of diverting them from becoming habitual criminals.[637] A 1969 review of Aotearoa New Zealand Borstals stated that borstals aimed to:

> "keep youths from further offending during a difficult period of their lives"
> "develop moral standards, good work habits, vocational skills, and personal hygiene"
> "train youths to live responsibly as citizens in the community."[638]

488. As their sentence progressed, borstal trainees were gradually awarded privileges, freedoms and responsibilities during their stay to rehabilitate them for life on the outside.[639] However, borstal trainees often had a high rate of reoffending.[640]

489. There was also the option to send young people that had been convicted of an offence punishable by imprisonment to a detention centre for short-term corrective training. At the beginning of the Inquiry period young people between the age of 17 and 23 years could be sent to a detention centre for corrective training for a period of four months.[641] In 1961 the age range was lowered to between 16 and 21 and the length of the programme was reduced to three months.[642]

632 Transcript of evidence of Chief Executive Jeremy Lightfoot for the Department of Corrections at the Inquiry's State Institutional Response Hearing (Royal Commission of Inquiry into Abuse in Care, 25 August 2022, page 894).
633 Transcript of evidence of Chief Executive Jeremy Lightfoot for the Department of Corrections at the Inquiry's State Institutional Response Hearing (Royal Commission of Inquiry into Abuse in Care, 25 August 2022, pages 910–912).
634 Criminal Justice Act 1954, sections 18(1)–(2).
635 Criminal Justice Act 1954, section 20.
636 Criminal Justice Act 1954, section 18(1).
637 Williams, DV, The abolition of borstal training: A penal policy reform or a failure to reform penal policy? (New Zealand Legal Information Institute, 1984, page 78).
638 Hanan, JR, Review of borstal policy in New Zealand (Department of Justice, 1969, page 5).
639 Hanan, JR, Review of borstal policy in New Zealand (Department of Justice, 1969, page 5).
640 Maxwell, G, Youth offenders: Youth justice in the 1990s and 21st century (Te Ara – The Encyclopedia of New Zealand, 2017, page 3), https://teara.govt.nz/en/youth-offenders/page-3; Hanan, JR, Review of borstal policy in New Zealand (Department of Justice, 1969, page 6).
641 Criminal Justice Act 1954, sections 18(16)–(17).
642 Criminal Justice Amendment Act 1960, section 4, brought into force by the Detention Centres Order 1961.

490. Borstals and detention centres were abolished by the Criminal Justice Amendment Act 1975, though this did not come into force until 1981.[643] Though the borstal programme was finished, under the Penal Institutions Amendment Act 1980, some borstals transitioned into youth prisons and became known as Youth Institutions from April 1981.[644]

491. Under the Criminal Justice Act 1954, young people could also be sentenced to imprisonment in an adult prison, if the judge believed that it was appropriate.[645] Children and young people were sometimes held in adult prisons on remand or awaiting court when other facilities were full.[646]

492. There was one borstal for girls, Arohata, which was attached to the women's prison in Te Whanganui-ā-Tara Wellington. It opened in 1944 and closed in 1981. There were five borstals for boys, two in the South Island – Waihōpai Invercargill and Waipiata – and three in the North Island, at Kaitoke, Tongariro and Waikeria. All were closed by 1981.

493. There were also four detention centres, the first of which opened in Waikeria in 1961. The other three were Rangipo and Hautu, both near Tūrangi, and Rolleston in Waitaha Canterbury. By the late 1980s these had also closed.

494. The Children, Young Persons, and Their Families Act 1989 established mixed purpose residences with both youth justice and care and protection, although the two groups were generally cared for separately.

495. Some of the former social welfare residences were adapted to these new mixed purpose residences. These included Kingslea Residential Centre in Ōtautahi Christchurch, Puketai in Ōtepoti Dunedin, Epuni in Te Whanganui-ā-Tara Wellington, Dey Street in Kirikiriroa Hamilton and Northern Residential Centre in Tāmaki Makaurau Auckland (formerly Weymouth). From the mid-1990s there was concern about the mixing of care and protection and youth justice groups[647] and a youth justice-only facility was opened in Te Papaioea Palmerston North in 1997.

496. From the 1990s children and young people charged through the courts could also be sent to third-party providers contracted under section 396 of the Children, Young Persons, and Their Families Act 1989. The main ones which took young offenders in the 1990s were Moerangi Treks in Te Urewera and Whakapakari on Aotea Great Barrier Island. From 1999 the State also funded a residence in Ōtautahi Christchurch, managed by Barnados, for adolescent sex offenders.

643 Criminal Justice Amendment (No 2) Act 1980, section 7, in Williams, DV, The abolition of borstal training: A penal policy reform or a failure to reform penal policy? (New Zealand Legal Information Institute, 1984, page 78).
644 Penal Institutions Amendment Act, 1980, sections 2, 6(2); Williams, DV, The abolition of borstal training: A penal policy reform or a failure to reform penal policy? (New Zealand Legal Information Institute, 1984, page 81).
645 Criminal Justice Act 1954, section 14(1).
646 Transcript of evidence of Commissioner Andrew Coster for NZ Police at the Inquiry's State Institutional Response Hearing (Royal Commission of Inquiry into Abuse in Care, 16 August 2022, pages 119–122).
647 Law Commission, Community Safety: Mental health and criminal justice issues (August 1994, page 107).

Te whaikahatanga me te whaioratanga
Disability and Mental Health

I te Tari Hauora me ngā poari hohipera te haepapa matua
Department of Health and Hospital Boards had overall responsibility

497. Decisions about how the disability and mental health care system operated were usually made at a national level by the Minister of Health, the Director-General of Health or the Department of Health.[648]

498. Ultimate accountability for the disability and mental health care system sat with the Minister of Health, who provided overall direction, oversight and control over the system.[649]

499. During the Inquiry period decisions about what disability and mental health care should look like and how it should be delivered and funded sat variously with the Department of Health (followed by the Ministry of Health from 1993 onwards) and Division of Mental Health / Mental Hygiene, the Director-General of Health and the Director of Mental Hygiene / Mental Health, and a range of devolved decision-makers including Area Health Boards and Crown Health Enterprises.[650]

500. The Director-General of Health was the chief administrative officer of the department, and the Ministry of Health from 1993. Reporting to the Director-General was the Director of Mental Hygiene, later Director of Mental Health, who had specific legislative obligations relating to people in disability and mental health care.[651]

501. Until 1983, hospital services were provided by District Health Offices and Hospital Boards. From 1983 to 1993 there was a decentralisation of purchasing and provision of health care away from the Department of Health to Area Health Boards, and with further reform this changed again to Regional Health Authorities and Crown Health Enterprises and the establishment of Needs Assessment and Service Coordination agencies. In 1998, further reform created the Health Funding Authority and Hospital and Health Services.[652]

502. More localised decisions about how specific institutions or third-party providers should be run were made by individuals such as superintendents or medical officers, or devolved decision-makers such as Area Health Boards and Crown Health Enterprises.

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648 Parliamentary Library, New Zealand health system reforms (Parliamentary Library research paper, 2009, pages 2–3).
649 Parliamentary Library, New Zealand health system reforms (Parliamentary Library research paper, 2009, pages 2–3).
650 Brief of evidence of Dr John Crawshaw (1 April 2021, page 7).
651 Mental Defectives Act 1911, section 5; Mental Health Act 1969, section 3; Mental Health (Compulsory Assessment and Treatment) Act 1992.
652 Brief of evidence of Dr John Crawshaw on behalf of the Ministry of Health at the Inquiry's Institutional Response Hearing (1 April 2021, para 3.24).

503. In 1992 the Needs Assessment and Service Coordination system was set up after a review of the existing disability support services.[653] The funding and delivery of existing support services were redistributed across the four Regional Health Authorities.[654]

504. Under this system, disabled people needed to be assessed to see what funding they were eligible for. This funding then determined the support and resources they could access.[655]

Ngā ngaio hauora me ētahi atu kaimahi taurima
Health professionals and other care workers

505. Most immediate to people in health settings were medical professionals and other health care workers who made decisions about individual treatment, care and other daily activities. Decision-making about how care and treatment was provided both generally and in specific instances by medical professionals and health care workers, including doctors, psychiatrists, nurses and other health care workers.

Ngā ture mō te whaikaha me te hauora hinengaro
Disability and mental health legislation

506. The Mental Defectives Act 1911 set out the conditions for admission into disability and mental health institutions until it was replaced by the Mental Health Act 1969. The Mental Defectives Act 1911 was the first legislation in Aotearoa New Zealand to categorise types of disability, long-term health conditions and mental distress. The Act arranged 'mental defectives' into six categories: persons of unsound mind, mentally infirm, idiots, imbeciles, feeble-minded and epileptics.[656]

507. This was extended by the Mental Defectives Amendment Act 1928 to include a seventh category: persons socially defective (defined as anti-social behaviour requiring supervision).[657]

508. The Mental Health Act 1969 replaced the Mental Health Act 1911 and its amendments but continued the same basic approach. Under the Mental Health Act 1969 anyone who met the definition of 'mentally disordered' in the Act, including those suffering from mental illness or deemed 'mentally infirm' or 'mentally subnormal' could be required to undergo treatment through a compulsory treatment order.[658] The 1969 Act was replaced by the Mental Health (Compulsory Assessment and Treatment) Act 1992.

653 Shipley, J & Upton, S, Support for independence for people with disabilities – A New Deal (Ministers of Health and Social Welfare, 1992).
654 Sullivan, M & Stace, H, A brief history of disability in Aotearoa New Zealand (Office for Disability Issues, 2020, page 15).
655 Sullivan, M & Stace, H, A brief history of disability in Aotearoa New Zealand (Office for Disability Issues, 2020, page 15).
656 Mental Defectives Amendment Act 1911, section 2 (I–VI).
657 Mental Defectives Amendment Act 1928, section 7.
658 Mental Health Act 1969, sections 19–22.

Whare hauora hinengaro
Psychiatric hospitals

509. For people who experienced mental distress during the Inquiry period, placement in psychiatric settings was often compulsory. It was not until the enactment of the Mental Health (Compulsory Assessment and Treatment) Act 1992 that the focus shifted to upholding the rights of those under compulsory treatment.

510. People who experienced mental distress were placed in psychiatric settings by order of the court, on an emergency basis, or through the criminal justice system. Sometimes people entered mental health settings voluntarily or on the advice of their family or clinician.[659]

511. The Mental Health (Compulsory Assessment and Treatment) Act 1992 led to substantial changes in New Zealand's mental health system. It put more importance on the rights of patients, recognising the role of cultural factors in diagnosis and treatment and the right to appeal treatment.[660]

512. The 1992 Act still enabled compulsory mental health assessment or treatment, if someone was judged to be a serious danger to themselves or others, or unable to take care of themselves.[661] People experiencing mental distress could also be compulsorily assessed and treated in the community.

513. The Director of Mental Health became responsible for administration of the Mental Health (Compulsory Assessment and Treatment) Act 1992.[662] The Director-General of Health could also appoint a director of area mental health services for each region, to lead the mental health workforce for their area.[663]

514. By 1911, Aotearoa New Zealand had six asylums – Tāmaki Makaurau Auckland, Porirua, Whakatū Nelson, Sunnyside (Waitaha Canterbury), Seaview (South Island West Coast) and Seacliff (Ōtepoti Dunedin) – with a combined total of 3,913 patients.[664] As the 20th century progressed, these buildings were replaced by villa-type residences, usually located in more rural areas.[665]

515. Psychiatric settings continued to grow as Kingseat (Tāmaki Makaurau Auckland), Tokanui (Te Awamutu), Cherry Farm (Ōtepoti Dunedin) and various inpatient units attached to hospitals were established. By 1996, almost all the large psychiatric hospitals had closed.[666]

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659 Mental Defectives Act 1911, section 39(1), Mental Health Amendment Act 1958, section 2.
660 Brief of Evidence of Dr John Crawshaw (1 April 2021, pages 3-4).
661 Mental Health (Compulsory Assessment and Treatment) Act 1992, sections 28 and 29.
662 Mental Health (Compulsory Assessment and Treatment) Act 1992, section 91.
663 Ministry of Health, Office of the Director of Mental Health Annual Report 2013 (2013, page 6).
664 Campion, M, "Mental health and legal landscapes," in Coleborne, C & Waikato Mental Health History Group, (eds), Changing times, changing places: From Tokanui Hospital to mental health services in the Waikato (Half Court Press Ltd, 2012, page 22).
665 Brunton, W, Mental health services: Mental hospitals, 1910s to 1930s (Te Ara – The Encyclopedia of New Zealand, 2011, page 3), https://teara.govt.nz/en/mental-health-services/page-3.
666 Gassin, T, Māori Mental Health – a report commissioned by the Waitangi Tribunal for the Health Services and Outcomes Kaupapa Inquiry (Waitangi Tribunal, 2019, page 10).

"I did complain once about how I was treated but I guess they didn't believe me because nothing was done, except I got a hiding when they left."

PETER EVAROA
Rarotongan and Pākehā

Whare hauora hinengaro tamariki
Psychopaedic hospitals

516. Psychopaedic was a 20th century Aotearoa New Zealand term to distinguish children, young people and adults with a learning disability from people who experienced mental distress. The main psychopaedic institutions were Templeton (Waitaha Canterbury), Kimberley (Taitoko Levin), Braemar (Whakatū Nelson) and Mangere (Tāmaki Makaurau Auckland).[667] Some psychiatric hospitals such as Tokanui had psychopaedic wards.

517. Families could voluntarily place their disabled family member into one of these hospitals, often because a lack of other supports in the community meant they had no other real options. Authorities such as medical staff often recommended psychopaedic care as the best choice.

518. The large institutions began to close in the 1990s and were replaced with smaller group residential homes. These were mainly run by voluntary organisations contracted by the State, such as the IHC and trusts.[668]

Kāinga mō te hunga whaikaha ā-tinana
Homes for physically disabled people

519. For disabled people with no family support, limited care options existed until the establishment of some group homes in the early 20th century. In 1914, the Elizabeth Knox Home and Hospital opened in Tāmaki Makaurau Auckland, with the specific purpose of caring for disabled people with physical impairments.[669]

520. Pukeora, an institution for children and young adults with physical impairments, was founded near Dannevirke in the late 1950s.[670]

Wāhi mahi āhuru
Sheltered workshops

521. From the early part of the 20th century, sheltered workshops provided employment and training for wounded war veterans, or disabled civilians with learning or physical impairments.[671] The work was menial and repetitive, and payment was tokenistic. However, the workshops became the main source of occupation for many disabled people.

667 Aitken, RS, Caughley, JG, Lopdell, FC, McLeod, GL, Robertson, JM, Tothill, GM & Hull, DN, Intellectually handicapped children report: Report of the consultative committee set up by the Minister of Education in August 1951 (Department of Education, 1953, page 38).
668 Millen, J, Breaking barriers: IHC's first 50 years (IHC New Zealand, 1999, pages 29–41).
669 Swarbrick, N, Care and carers: Care of people with disabilities (Te Ara – The Encyclopedia of New Zealand, 2011, page 4), https://teara.govt.nz/en/care-and-carers/page-4.
670 Sullivan, M & Stace, H, A brief history of disability in Aotearoa New Zealand (Office for Disability Issues, 2020, page 7).
671 Disabled Persons Employment Promotion Act 1960.

522. In 1956, the responsibility for the Occupational Centres, originally founded by the Intellectually Handicapped Children's Parents Association, was transferred to the control of regional Education Boards. These centres became Day Special Schools under the management of the State. Children who had attended day programmes run by voluntary groups could transfer to the special schools. Government funding was provided to the IHC Occupation Workshops catering for the needs of adults with learning disability.[672]

523. Disabled people who worked in sheltered workshops were not given the same rights as other employees and were exempt from legislation designed to protect employees throughout the Inquiry period.[673]

Hōpuni hauora
Health camps

524. Health camps were established in the early 20th century and focused on physical health and nutrition for children and young people, such as recovering from tuberculosis, or to put on weight or increase fitness and learn healthy habits.[674] Responsibility for health camps was shared between the Department of Health and the Department of Education.[675] Health camps were administered by a board and had their own legislation – the King George V Memorial Fund Act 1938 and the Children's Health Camp Act 1972.[676]

525. From the 1960s onwards, the focus turned to children with emotional or behavioural difficulties. Health camps provided respite care, particularly those with difficult home lives. This was in line with the better understanding of children and child psychology emerging at the time.

526. By the 1950s, permanent health camps had been established in Whangarei, Pakuranga, Tairāwhiti Gisborne, Ōtaki, Whakatū Nelson, Ōtautahi Christchurch (Glenelg) and Roxburgh (Ōtākou Otago). Children were referred to them through school nurses, teachers or their family doctor.[677]

527. By the 1980s all the camps were still in use, other than the camp at Whakatū Nelson. In 1983 the Princess of Wales Children's Health Camp was opened in Rotorua. In the late 1990s some of these health camps began to close. In 1999 responsibility for remaining health camps and their liabilities was transferred to a charitable trust, Stand Tu Māia.[678]

672 Ministry of Education, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 422 (17 June 2022, page 82).
673 Disabled Persons Employment Promotion Act 1960.
674 Tennant, M, Voluntary welfare organisations: Depression and the welfare state (Te Ara – The Encyclopedia of New Zealand, 2018, page 4), https://teara.govt.nz/en/voluntary-welfare-organisations/page-4.
675 Children's Health Camps Act 1972.
676 King George V Act 1938; Children's Health Camps Act 1972.
677 Museum of New Zealand Te Papa Tongarewa website, Health Camps and Stamps (accessed 30 April 2024), https://collections.tepapa.govt.nz/topic/2672.
678 Witness statement of Fiona Inkpen (25 September 2020, page 4).

Mātauranga
Education

Te Ture Mātauranga me Te Tari Mātauranga
Education legislation and the Department of Education

528. Up until 1989, the Director-General of Education oversaw the administration of the education sector under the Education Acts 1877, 1914 and 1964, along with their amendments and regulations. The Department of Education had regional offices in Tāmaki Makaurau Auckland, Te Whanganui-a-Tara Wellington, and Ōtautahi Christchurch, each under the control of a superintendent.[679]

529. The Department inspected all schools (State, State integrated and private), organised the recruitment, training and assessment of teachers, and directly controlled departmental special schools, the Correspondence School, and the Psychological Service (a diagnostic, advisory, and counselling service for children whose academic or social progress was causing concern).[680]

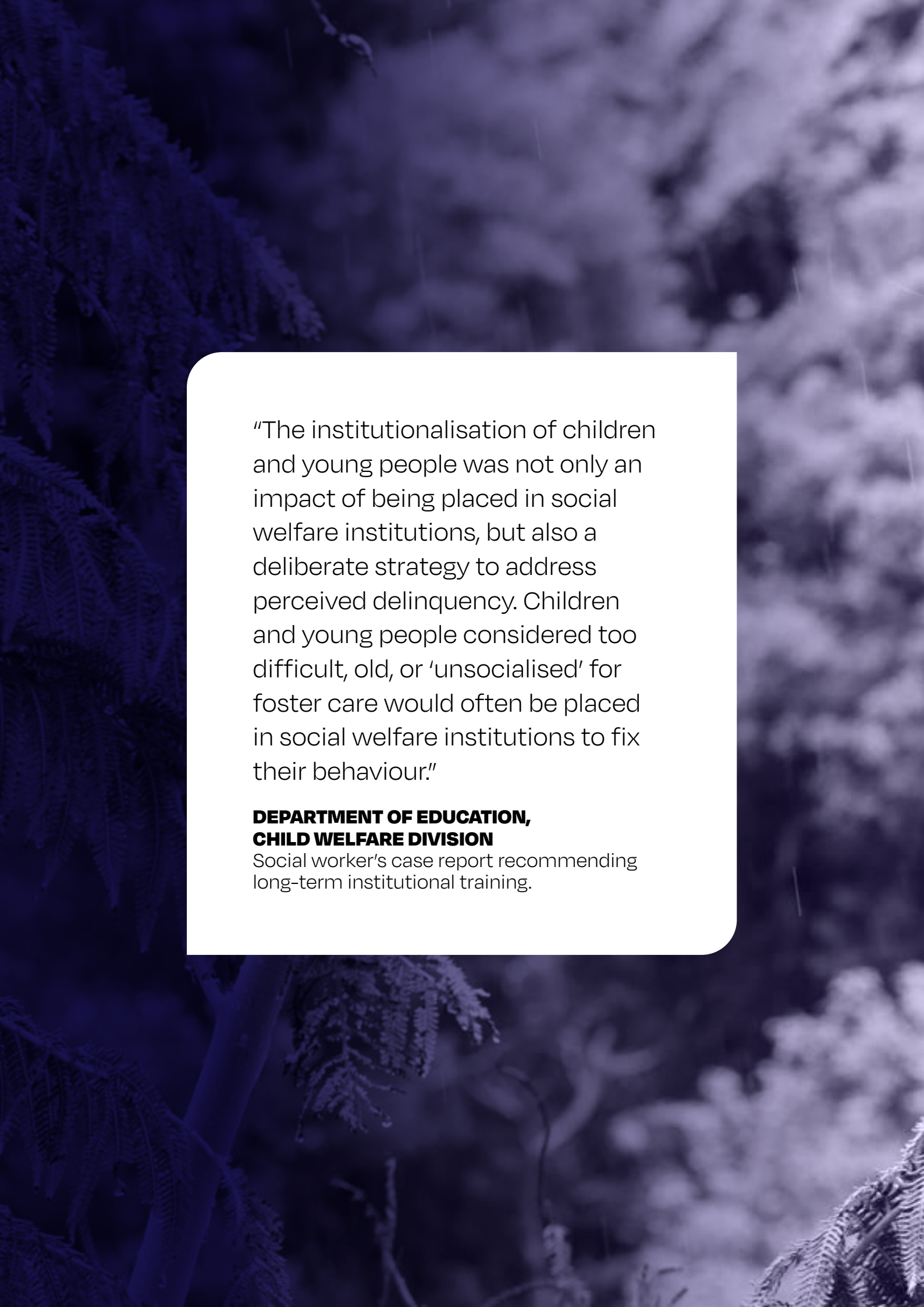
530. Ten regional education boards were responsible for the control and management of State primary schools. Each primary school also had a school committee whose main responsibilities were the maintenance of school buildings, grounds and equipment.[681]

531. State secondary schools were administered by boards of governors (made up of representatives of parents, members of the education board of the district, representatives of other local organisations, and a teacher), which was responsible for the management of the school, including the appointment of the principal and staff.[682]

532. The Education Act 1989 saw a major change in the education sector with the Tomorrow's Schools reforms. These reforms changed the way schools and kura were governed. Decision-making moved away from central government agencies to school communities via self-managing and self-governing locally elected school boards of trustees. The Department of Education was abolished by the Education Act 1989 and replaced by the smaller Ministry of Education.

533. The Education Act 1989 brought in powers to allow the Secretary for Education to intervene in the control and management of schools in trouble, including in some circumstances dissolving the Board and appointing a Commissioner in its place.[683] From 1990 the Secretary of Education had powers of entry and inspection of all registered schools. From 1998 they also had powers to enter private schools suspected of operating while unregistered.[684]

679 Ministry of Education, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 8 (16 June 2020, page 1).
680 Ministry of Education, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 8 (16 June 2020, page 1).
681 Ministry of Education, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 8 (16 June 2020, page 1).
682 Ministry of Education, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 8 (16 June 2020, page 1).
683 Education Act 1989, section 107.
684 Education Act 1989, section 78B inserted under the Education Amendment Act 1998.



"The institutionalisation of children and young people was not only an impact of being placed in social welfare institutions, but also a deliberate strategy to address perceived delinquency. Children and young people considered too difficult, old, or 'unsocialised' for foster care would often be placed in social welfare institutions to fix their behaviour."

DEPARTMENT OF EDUCATION, CHILD WELFARE DIVISION
Social worker's case report recommending long-term institutional training.

Kura kōhure
Special schools

534. Before 1950 the government had established a number of State special schools, units and classrooms for children and young people who were Deaf, blind, had additional learning needs, or had "behavioural management challenges".[685] During the Inquiry period there were five residential special schools overseen by the Department of Education, as well as schools for Deaf, blind and Deafblind students.

535. The first two special schools, Salisbury and Campbell Park, were opened in the 1900s. Campbell Park was located near Oamaru and had a maximum roll of 108. It was for boys aged 10 to 17 years old who were considered emotionally disturbed, 'backward' or aggressive.[686]

536. Salisbury School in Whakatū Nelson could take up to 90 girls aged 8 to 18 years old who were seen as "educationally backward, delinquent or had personal or social problems."[687] Campbell Park and Salisbury took referrals through the Department of Education's psychological service or the Child Welfare Division.

537. Mount Wellington Residential School for Maladjusted Children opened in Tāmaki Makaurau Auckland in 1960, before moving to Bucklands Beach in 1980, when it was renamed Waimokoia. It was intended to cater for children with severe behavioural and social problems.[688]

538. McKenzie Residential School opened in Ōtautahi Christchurch in 1971 for children with serious emotional difficulties.[689] It could take up to 25 children from the ages of 7 to 14 years old.[690]

685 Brief of evidence of Helen Hurst for the Ministry of Education at the Inquiry's State Redress Hearing (27 January 2020, para 3.4).
686 Stanley, E, The road to hell: State violence against children in postwar New Zealand (Auckland University Press, 2016, page 221).
687 Stanley, E, The road to hell: State violence against children in postwar New Zealand (Auckland University Press, 2016, page 221).
688 Francis, C, "Waimokoia 'abuse was systemic,'" Sunday Star Times (8 August 2010).
689 Roberts, M, Residential treatment of emotionally disturbed and socially maladjusted children in New Zealand and adequacy of their subsequent adjustment: A follow-up study of pupils of the McKenzie Residential School 1971–1976 (October 1977, page 7).
690 Roberts, M, Residential treatment of emotionally disturbed and socially maladjusted children in New Zealand and adequacy of their subsequent adjustment: A follow-up study of pupils of the McKenzie Residential School 1971–1976 (October 1977, page 8).

539. Several schools were established for Deaf or blind children and young people.

- Sumner Institution for the Deaf and Dumb, which opened in 1880 (then Van Asch College, combined with Kelston to become Ko Taku Reo: Deaf Education New Zealand in 2020)
- Kelston School for the Deaf, which opened in 1958
- Jubilee Institute, which opened in 1890 and offered the first educational services for blind children in Aotearoa New Zealand, as well as a residential programme and workshops for blind adults.[691] It was opened by the Royal New Zealand Foundation for the Blind at Parnell[692]
- Homai School for the Blind replaced Jubilee Institute for the Blind of New Zealand, opening in 1965. A facility for Deafblind students was added in 1968.

540. Children could be admitted to schools for the Deaf as day pupils at the age of 3 years old and boarding pupils at 5 years old.[693]

541. Under the Education Act 1964 the minister could establish "any special class, clinic or service" and outline conditions for compulsory enrolment of certain children.[694] For disabled children the Act provided alternative education pathways where a regular school may not have provided a suitable education to meet their needs. The Act provided for training teachers for special education purposes and regulations regarding funding and inspections.[695] The Education Department employed educational psychologists, while regional Education Boards employed speech language therapists, to assist children with special education needs who were enrolled in regular schools.[696]

542. The Department of Education was responsible for the education of all children, including disabled children in psychopaedic and psychiatric institutions. However only a small proportion of children in these settings went to a school and received an education. The Department of Health trained and employed training officers in institutions that provided a minimal level of education to children, often focused on behaviour modification using aversion techniques, known during the Inquiry period as aversion therapy.[697]

543. The growing trend towards mainstreaming the education of learning-disabled children led the rolls of the Department of Education's special residential schools to shrink over the 1980s.

691 Sullivan, M, Disability and disability organisations (Te Ara – the Encyclopedia of New Zealand, 2018), https://teara.govt.nz/en/disability-and-disability-organisations.
692 Blind and Low Vision Education Network NZ, Our history (2023), https://www.blennz.school.nz/about-blennz/our-history/.
693 Department of Education, Child Welfare Division Field Officers' Manual (1957, page 15).
694 Education Act 1964, section 98.
695 Education Act 1964, section 100.
696 Ministry of Education, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 422 (17 June 2022, page 78).
697 Aitken, RS, Caughley, JG, Lopdell, FC, McLeod, GL, Robertson, JM, Tothill, GM & Hull, DN, Intellectually handicapped children report: Report of the consultative committee set up by the Minister of Education in August 1951 (Department of Education, 1953, pages 8–10); Witness statement of Caroline Arrell (21 March 2022, page 4).

544. Falling rolls led to some school closures. Campbell Park closed in 1987, and its remaining pupils were transferred to Hogben School (formerly Marylands) or placed into mainstream schools with learning support.

545. The Education Act 1989 formalised the move away from special residential schools to the State education system by increasing provisions for disabled children in mainstream education.

546. The Act signalled a move away from the previous model of segregation in residential institutions towards an inclusive educational environment that aimed to integrate the needs of all students. However, the Secretary of Education could still direct a disabled child to attend a special school or class.

Te Ratonga Hauora Hinengaro
The Psychological Service

547. Established in 1945, the Department of Education's Psychological Service was the main assessment and guidance service available to assist children from birth to their late adolescent years, their parents and their teachers. Schools, parents, child welfare officers, doctors, and government and voluntary agencies could refer children and young people to the service for assessment and advice.[698] After 1989 a new crown entity, the Special Education Service, was created to provide specialist support and interventions to students with special educational needs.

He hononga tō ngā kura ki te tokoora pāpori me ngā kāinga tika rangatahi
Schools attached to child welfare and youth justice residences

548. Many social welfare and youth justice residences had schools onsite, with teachers supplied by the Department of Education. After 1989 these onsite schools were staffed by either staff supplied by the Ministry of Education, or third-party providers contracted to provide education services.[699] They were classified as special schools and provided a mix of primary and secondary education depending on the age mix at the social welfare residence they were attached to.[700] Social welfare staff at the residences were expected to work collaboratively with the onsite teachers to support student learning.[701]

698 Ministry of Education, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 422 (17 June 2022, page 95).
699 Education Review Office, Child youth and family residential schools (2010, page 4).
700 Department of Education and Department of Social Welfare, A handbook on education in Department of Social Welfare institutions (1986, forward and page 63).
701 Brief of evidence of Secretary for Education and Chief Executive Iona Holsted for the Ministry of Education at the Inquiry's State Institutional Response Hearing (8 August 2022, pages 53–54).

Te Tari Arotake Mātauranga
Education Review Office

549. The Education Review Office (ERO) was established in 1989 as part of the Tomorrow's Schools reforms. ERO is a government department with responsibility for evaluating and publicly reporting on the education and care of children and young people in early childhood services and schools. The majority of its reviews are regular, although on occasion ERO will complete a review on a particular matter of concern or as directed by the Minister of Education.[702]

Te Poari Rēhita Kaiako
Teacher Registration Board

550. Before 1989, teachers in State schools were required to be registered and the Teacher's Register was kept by the Director-General of Education.[703]

551. The Teacher Registration Board was established by the Education Act 1989.[704] The Registration Board was established with no functions specified in legislation.

552. The mandate of the Registration Board was to register and certify teachers. The Registration Board could consider cancellation of registration on the grounds of character, fitness to teach or lack of satisfactory training.[705]

Kura Hourua
State integrated schools

553. Prior to the Private Schools Conditional Integration Act 1975, all faith-based schools were private. The Act came into effect in August 1976 and provided the option for private schools to integrate into the State education system. They could then receive government funding and had to teach the New Zealand Curriculum, while being able to maintain their religious or "special character" and offer religious education.[706]

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702 Ministry of Education, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 422 (17 June 2022, page 5).
703 Brief of evidence of Secretary for Education and Chief Executive Iona Holsted for the Ministry of Education at the Inquiry's State Institutional Response Hearing (8 August 2022, pages 21–22).
704 Education Act 1989, section 131.
705 Brief of evidence of Secretary for Education and Chief Executive Iona Holsted for the Ministry of Education at the Inquiry's State Institutional Response Hearing (August 2022, page 6).
706 Brief of evidence of Helen Hurst for the Ministry of Education at the Inquiry's Marylands School (St John of God) Hearing (7 October 2021, para 3.2(c)).

Kura tūmataiti
Private schools

554. In 1975, ahead of the Private Schools Conditional Integration Act, around 11 percent of primary and 18 percent of secondary students attended private schools in Aotearoa New Zealand.[707] As discussed in the section on faith-based schools, the number of private schools decreased after integration became an option in 1976.

555. Private schools are both owned and operated by private entities rather than the State. Private schools must follow the law in running the school. They receive some State funding and must be registered, but otherwise have a large amount of flexibility in setting their own curriculum, assessment methods and internal rules.[708]

Kura Noho
Boarding schools

556. By 1997 Aotearoa New Zealand had 102 schools with some form of boarding facility available. Seventy-eight of these were State or State integrated, and 24 were private schools. Most were single sex, for boys or girls only. Around 3 percent of all students attending State and State integrated schools and 16 percent of those attending private schools boarded in hostels connected to those schools.[709] Most boarding schools also had pupils who attended as day students and did not live in boarding hostels during term time.[710] The term boarding school was not legally defined but covered a variety of arrangements for student education and accommodation.[711]

557. Responsibility for boarding hostels in State and State integrated schools varied between boards of trustees / school boards, boards of proprietors, hostel trust boards, private companies, hostel committees and, where a hostel was used by more than one school, trusts made up of appointees from parents, trust boards and the schools concerned. In private schools the hostel was governed by the school trust board.[712] Hostels might be on the same physical site as the school, or in another location.[713] The Education Act 1989 was largely silent about school hostels and the responsibilities of Boards of Trustees for student safety in hostel accommodation.[714] Hostel accommodation was essentially a private commercial arrangement between parents and the hostel management.[715]

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707 Brief of evidence of Helen Hurst for the Ministry of Education at the Inquiry's Marylands School (St John of God) Hearing (7 October 2021, page 5).
708 Brief of evidence of Secretary for Education and Chief Executive Iona Holsted for the Ministry of Education at the Inquiry's State Institutional Response Hearing (8 August 2022, page 22).
709 Educational Review Office, Students in boarding schools: Their safety and welfare (1997, page 2).
710 Educational Review Office, Students in boarding schools: Their safety and welfare (1997, page 3).
711 Educational Review Office, Students in boarding schools: Their safety and welfare (1997, page 3).
712 Educational Review Office, Students in boarding schools: Their safety and welfare (1997, page 4).
713 Educational Review Office, Students in boarding schools: Their safety and welfare (1997, page 3).
714 Educational Review Office, Students in boarding schools: Their safety and welfare (1997, page 7).
715 Educational Review Office, Students in boarding schools: Their safety and welfare (1997, page 7).

" I had no voice at Ōwairaka, but when I got out I told my parents about what had happened there. They went to the police, which is what you are supposed to do, but the police refused to believe them. We felt helpless, like we had no voice. I turned to drugs and alcohol to numb the pain I felt."

ANDREW BROWN
Māori, Moriori,
English, Welsh

Ūpoko | Chapter 11
Ngā whare tūāpapa-whakapono i te wā Pakirehua
Faith-based institutions during the Inquiry period

558. This chapter provides background information and a structural overview on how the different faith-based institutions were set up and run, and key faith settings during the Inquiry period.

I mahi tahi te rāngai whakapono me te Kāwanatanga
Faith and State worked together

559. State and faith-based institutions have a history of working together to provide care, with the State providing financial support to faith-based institutions.

560. Many public servants were active Christians during the Inquiry period.[716] Sometimes this influenced the development of State laws and practices, including legislation governing marriage, sexuality and approaches to child welfare.[717]

561. In the early 20th century, the desire to build a responsible society resulted in what was known as the ecumenical movement – unity and co-operation across different Christian (mainly Protestant) denominations.[718] This movement also strengthened co-operation between the State and faith-based institutions.

562. The First World War and the Great Depression led to widespread unemployment for many people, and religious and voluntary welfare organisations responded to the rising levels of need this created.[719] As the State expanded its own provision of welfare support in the 1930s, it also expanded its support for the voluntary social service sector, including church-run services.[720] While churches had long been active in care provision, this substantial and guaranteed funding stream from the State to church-run services was a change from what had previously been.[721]

716 Buckley, B, 'As loyal citizens...': the relationship between New Zealand Catholicism, the state and politics, 1945–1965, Doctoral Thesis, Massey University (2014, page 202).
717 Adhar R, & Stenhouse, J (eds), God and government: The New Zealand Experience (Otago University Press, 2000).
718 Evans, J, Church state relations in New Zealand 1940–1990, with particular reference to the Presbyterian and Methodist churches, Doctoral Thesis, University of Otago (1992, pages 26 and 54–56).
719 Tennant, M, O'Brien, M & Sanders, J, The history of the non-profit sector in New Zealand (Office for the Community and Voluntary Sector, 2008).
720 Evans, J, "Government support of the church in the modern era," Journal of Law and Religion, 13(2), (1998, pages 517–530, page 518).
721 Evans, J, Church state relations in New Zealand 1940–1990, with particular reference to the Presbyterian and Methodist churches, Doctoral Thesis, University of Otago (1992, page 82).

563. Churches, particularly the Catholic, Anglican, Methodist and Presbyterian churches and The Salvation Army, were involved in care provision during the Inquiry period. In addition to the pastoral care provided by all churches, some also operated schools and / or provided other services such as unmarried mothers homes, adoption, foster care services and some residences for disabled people.

564. The total number of children's homes grew rapidly during the early 20th century. In 1900, five orphanages were registered as charities, but by the mid-1920s, Aotearoa New Zealand had 85 private faith-based institutions and orphanages, housing approximately 4,000 children.[722]

565. By 1950 the State was regularly subsidising Christian social services, including church or charity-run homes for the elderly.[723] Other areas of church social services also received increased financial support.[724] From 1956 the government subsidised faith-based children's homes through a 'capitation subsidy' of 10 shillings a week per child, the equivalent of around $31 dollars in 2024. A subsidy for up to half the cost of any approved building work was also available.[725]

566. With growing pressure on accommodation in the State's institutions over the 1960s and 1970s, private and religious-run homes played an increasingly important role as an 'overflow' for overburdened State institutions. In 1977, around a quarter of the children living in church homes were State wards.[726] Of the children and young people living in homes run by voluntary agencies in 1985, 36 percent were State wards.[727]

567. By the 1970s a distinct church sector had emerged, which operated as a well-resourced component of the non-government, non-profit sector.[728] This formalised partnership meant Christian social services developed their own institutional structures beyond traditional church structures.[729]

568. There were now Christian lobby groups and national associations, such as the New Zealand Council of Christian Social Services. This council improved the bargaining power of the faith-based care sector, advocating for greater funding and more relaxed State regulations and procedures.[730]

722 Dalley, B, Family matters: Child welfare in twentieth-century New Zealand (Auckland University Press, 1998, page 134).
723 Tennant, M, O'Brien, M & Sanders, J, The history of the non-profit sector in New Zealand (Office for the Community and Voluntary Sector, 2008, page 20).
724 Evans, J, "Government Support of the Church in the Modern Era," Journal of Law and Religion, 13(2), (1998, pages 517–530, page 518); Evans, J, Church state relations in New Zealand 1940–1990, with particular reference to the Presbyterian and Methodist churches, Doctoral Thesis, University of Otago (1992, page 43).
725 Cahill, T, Mitchell, A, Nixon, A, Sherry, B & Wetterstrom, J, Church social services: A report of an Inquiry into childcare services (Department of Social Welfare, 1977, page 12).
726 Tennant, M, The fabric of welfare: Voluntary organisations, government and welfare in New Zealand, 1840–2005 (Bridget Williams Books, 2007, page 104).
727 Craig, T & Mills, M, Care and control: The role of institutions in New Zealand (New Zealand Planning Council, 1987, page 37).
728 Evans, J, Church state relations in New Zealand 1940–1990, with particular reference to the Presbyterian and Methodist churches, Doctoral Thesis, University of Otago (1992, page 322).
729 Evans, J, Church state relations in New Zealand 1940–1990, with particular reference to the Presbyterian and Methodist churches, Doctoral Thesis, University of Otago (1992).
730 Lineham, P, "The voice of inspiration? Religious contributions to social policy," in Dalley, B & Tennant, M (eds) Past judgement: Social policy in New Zealand history (Otago University Press, 2004, pages 57–74).

569. By 1977 the capitation subsidy for children in faith-based care was $12.67 a week[731] ($125.55 in 2024)[732], with an additional payment of $24.35 a week if the child was a State ward. The subsidy for approved building works rose to 66 percent of the total cost.[733]

570. A 1977 review by the Department of Social Welfare into Church Social Services identified that an average cost for a child was around $57 a week:

> ***"This means that after taking into account the capitation subsidy, family benefit, and any contribution from parents, the Church agencies are required to find the balance of about $36 a week from their own resources for each child cared for."***[734]

571. Using the consumer price index as a measure, these amounts are the equivalent today of $482.57 for the cost of each child and $304.78 for the funding shortfall.[735]

572. Church activities received substantial State funding until the 1980s, with a large increase in State funding from the 1960s to the 1980s. In 1967, about $3.9 million (about $85.8 million in 2024) was transferred from central government departments to the voluntary social service sector, which included non-church bodies such the Society for Intellectually Handicapped Children and the Crippled Childrens Society. By 1986, a conservative estimate placed this figure at $75.6 million,[736] equivalent to $221.3 million in 2024.[737]

731 Cahill, T, Mitchell, A, Nixon, A, Sherry, B & Wetterstrom, J, Church Social Services: A report of an Inquiry into childcare services (Department of Social Welfare, 1977, page 3).
732 Calculated from the Reserve Bank of New Zealand inflation adjustment calculator using general consumer price index as a comparator, Reserve Bank of New Zealand website, Inflation calculator (accessed February 2024), https://www.rbnz.govt.nz/monetary-policy/about-monetary-policy/inflation-calculator.
733 Cahill, T, Mitchell, A, Nixon, A, Sherry, B & Wetterstrom, J, Church Social Services: A report of an Inquiry into childcare services (Department of Social Welfare, 1977, page 3).
734 Cahill, T, Mitchell, A, Nixon, A, Sherry, B & Wetterstrom, J, Church Social Services: A report of an Inquiry into childcare services (Department of Social Welfare, 1977, page 12).
735 Calculated from the Reserve Bank of New Zealand inflation adjustment calculator using general consumer price index as a comparator, Reserve Bank of New Zealand website, Inflation calculator (accessed February 2023), https://www.rbnz.govt.nz/monetary-policy/about-monetary-policy/inflation-calculator.
736 Tennant, M, O'Brien, M, & Sanders, J, The History of the Non-profit Sector in New Zealand (Office for the Community and Voluntary Sector, 2008, page 20).
737 Both conversions calculated from the Reserve Bank of New Zealand inflation adjustment calculator using general consumer price index as a comparator, Reserve Bank of New Zealand website, Inflation calculator (accessed February 2023), https://www.rbnz.govt.nz/monetary-policy/about-monetary-policy/inflation-calculator.

Ngā whakahaerenga o ngā hāhi
Governance structures of the faiths

573. The Inquiry investigated reports of abuse and neglect in the care of eight faith-based institutions:

- Catholic Church
- Anglican Church
- The Salvation Army in Aotearoa New Zealand
- Methodist Church
- Presbyterian Church
- Gloriavale Christian Community
- Plymouth Brethren Christian Church
- Jehovah's Witnesses.

574. The Inquiry refers to faith-based institutions across all of the eight faiths investigated by including the name of the care setting and identifying the religion, such as the Star of the Sea orphanage (Catholic), or St Andrew's Orphanage (Anglican). Another example is where the Inquiry refers to private schools and State integrated schools with special character, often where the integrated schools was formerly a private school.

575. The degree of church involvement in the settings varied. For example, in some cases there was a less direct relationship with the entities in question and the relationship was largely one of theological or spiritual oversight and affiliation. In other settings, the religious denomination owned or operated the institution referred to. Some schools were operated by faiths, other schools merely had an onsite chaplain or yearly visits from faith officials.

576. In this report the Inquiry does not always make a distinction about the relationship between the faith and the setting described unless particular context and explanation is required for the point being made in the relevant section.

Ngā Pīhopa me ngā kaiārahi whakaminenga o te Hāhi Katorika i Aotearoa

Bishops and congregational leaders of the Catholic Church in Aotearoa New Zealand

577. The worldwide Catholic Church, sometimes called the 'universal church', is made up of many particular or local churches, each under the leadership of a diocesan bishop appointed by the Pope. The Pope, who is the Bishop of Rome, is the leader of all these local churches. The Holy See is the name given to the Catholic Church's central government and is led by the Pope. It operates from the Vatican City State, which is an independent sovereign territory within Italy.[738]

578. The Congregation for the Evangelisation of Peoples has oversight of Aotearoa New Zealand dioceses.[739] Only the Pope can appoint and remove bishops or intervene in dioceses. Diocesan bishops are required to make a profession of faith and oath of fidelity to the Holy See. Bishops in Aotearoa New Zealand direct their contact with the Vatican through a papal emissary.

579. The bishops and congregational leaders of the Catholic Church in Aotearoa New Zealand (which the Inquiry refers to as the Catholic Church in Aotearoa New Zealand) is territorially divided into one metropolitan archdiocese, and five suffragan (regional) dioceses. The Archdiocese of Wellington with the five other dioceses in Aotearoa New Zealand constitutes a province as determined by the Pope. The metropolitan is the senior bishop of the province.[740] Since 2019, the metropolitans around the world, including Paul Martin, as Catholic Archbishop of the archdiocese of Wellington, have had a specific role and responsibility in responding to reports of abuse or failing to respond to a report of abuse by bishops within their province under "Vos Estis Lux Mundi", the new Vatican protocol for dealing with cases of abuse.

580. Dioceses are made up of various parishes, churches, schools, and other affiliated entities and institutions. Each bishop appoints priests and assistant priests, and ensures they fulfil their obligations as priests.

581. Some religious institutions (also referred to as religious orders or congregations) have both religious brothers and priest members (like the Society of Mary, known as the Marist Fathers), some only religious brother members (like the Marist Brothers) or only religious sister members (like the Sisters of Nazareth).

738 The Holy See has ratified a number of international conventions, including the United Nations Convention on the Rights of the Child and the Convention Against Torture and Other Cruel Inhuman or Degrading Treatment or Punishment.
739 Code of Canon Law (1983), canon 333 §1.
740 Code of Canon Law (1983), canons 431–436.

582. The religious institutes operating in Aotearoa New Zealand are not limited by diocesan boundaries and may be in one or more dioceses, depending on the agreement of local bishops. Bishops are required to exercise pastoral care for all the people of faith (Catholics) within a geographical region (diocese), including members of religious institutes. Alongside the dioceses and religious institutes, there are many, mostly independent and self-governing lay organisations. These are both large and small with a variety of ownership structures and legal standing. Catholic schools were owned and operated by dioceses and religious institutes before 1975. From 1975 they were integrated into the State system. The land and buildings continue to be owned by a church authority, such as a bishop, religious institute or trust / company established for this purpose.[741] The bishops, religious superiors / leaders or trust / company continues to have proprietorship of these Catholic schools but are not involved in their day-to-day operation.[742]

583. The National Office for Professional Standards was set up in 2004 and currently manages complaints of sexual abuse or sexual misconduct by clergy or members of religious orders under Te Houhanga Rongo – A Path to Healing protocol. All reports of other forms of abuse are managed by the relevant bishop, religious superior or catholic organisation. Each bishop and religious superior, or leader of a church organisation has the decision-making power in response to all reports of abuse. The image on the following page provides a simple overview structure of the Catholic Church in Aotearoa New Zealand.

741 Witness statement of Cardinal John Dew for the Archdiocese of Wellington and the Metropolitan Diocese (23 September 2020, page 10).
742 Witness statement of Cardinal John Dew for the Archdiocese of Wellington and the Metropolitan Diocese (23 September 2020, page 11).

"Churches, particularly the Catholic, Anglican, Methodist and Presbyterian Churches and The Salvation Army, were involved in care provision during the Inquiry period."

JOHN EVANS
Doctoral Thesis, Church state relations in New Zealand 1940–1990, with particular reference to the Presbyterian and Methodist Churches

HIGH LEVEL STRUCTURE OF THE CATHOLIC CHURCH IN AOTEAROA NEW ZEALAND

Diocese

The one archbishop and five bishops who head the diocese are part of the Aotearoa New Zealand Catholic Bishops Conference. There is currently a total of 271 Catholic parishes in Aotearoa New Zealand.

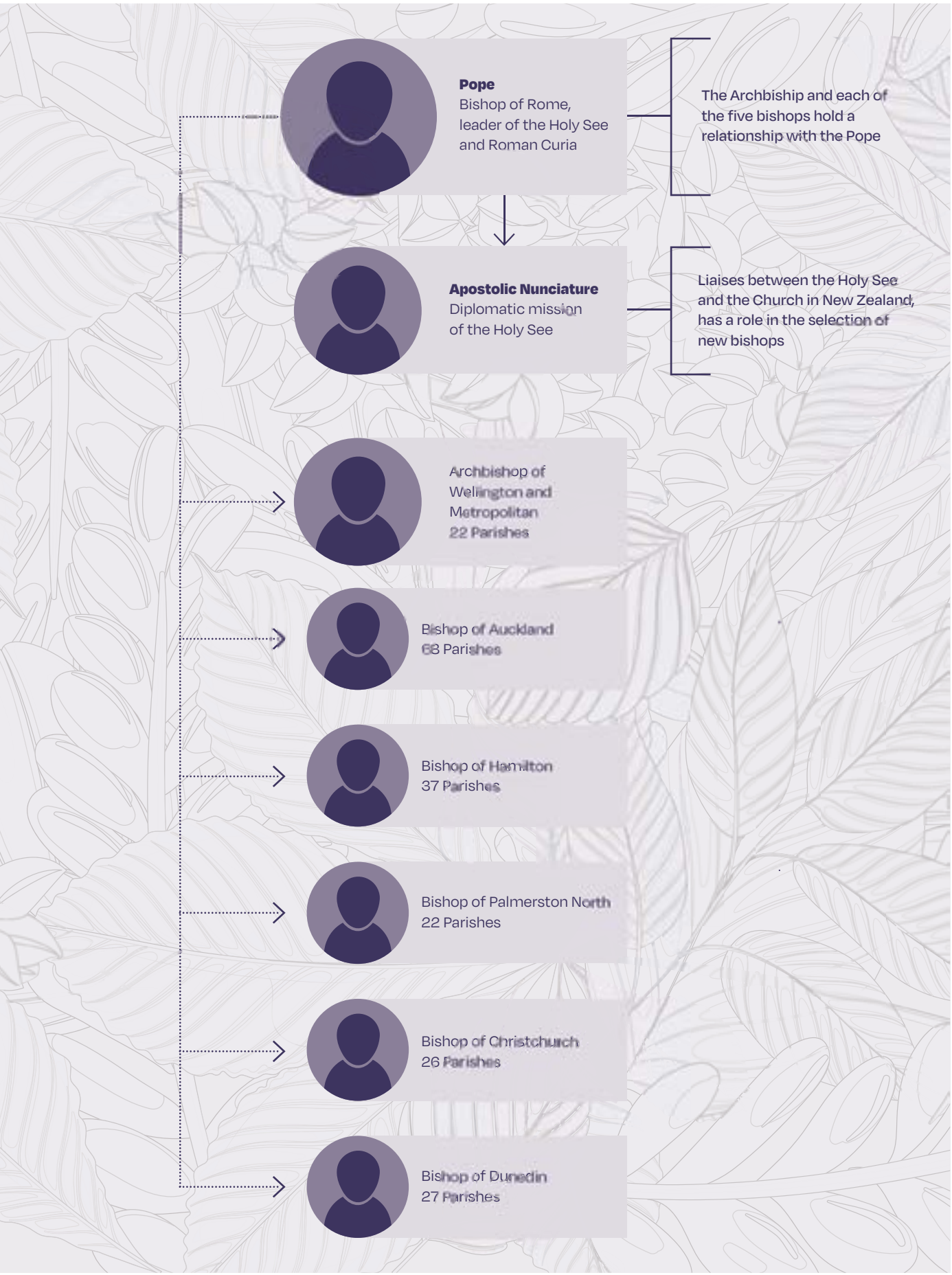
The current Archbishop of Wellington is Cardinal John Dew. Cardinals are the most senior members of the Catholic Church other than the Pope. Since 2019, the metropolitans around the world, including Cardinal Dew, have had a specific role and responsibility in responding to reports of abuse or failures to respond to reports of abuse by bishops.

The National Office for Professional Standards currently manages the receipt of and response to reports of sexual abuse. Each bishop and religious superior maintain the decision-making power in relation to the response to all the reports of abuse.

Religious Institutes

In the Catholic Church, religious institutes, also referred to as religious orders or congregations (for example – Marist Brothers, Christian Brothers and Sisters of Nazareth) operate trans-nationally. The religious institutes that operate in Aotearoa New Zealand are not limited by provincial boundaries and may operate in one or more diocese.

Leaders in institutes are known as superiors or provincials. The religious institutes are represented by Congregational Leaders Conference of Aotearoa New Zealand.


Pope
Bishop of Rome, leader of the Holy See and Roman Curia
The Archbishop and each of the five bishops hold a relationship with the Pope
Apostolic Nunciature
Diplomatic mission of the Holy See
Liaises between the Holy See and the Church in New Zealand, has a role in the selection of new bishops
Archbishop of Wellington and Metropolitan
22 Parishes
Bishop of Auckland
68 Parishes
Bishop of Hamilton
37 Parishes
Bishop of Palmerston North
22 Parishes
Bishop of Christchurch
26 Parishes
Bishop of Dunedin
27 Parishes

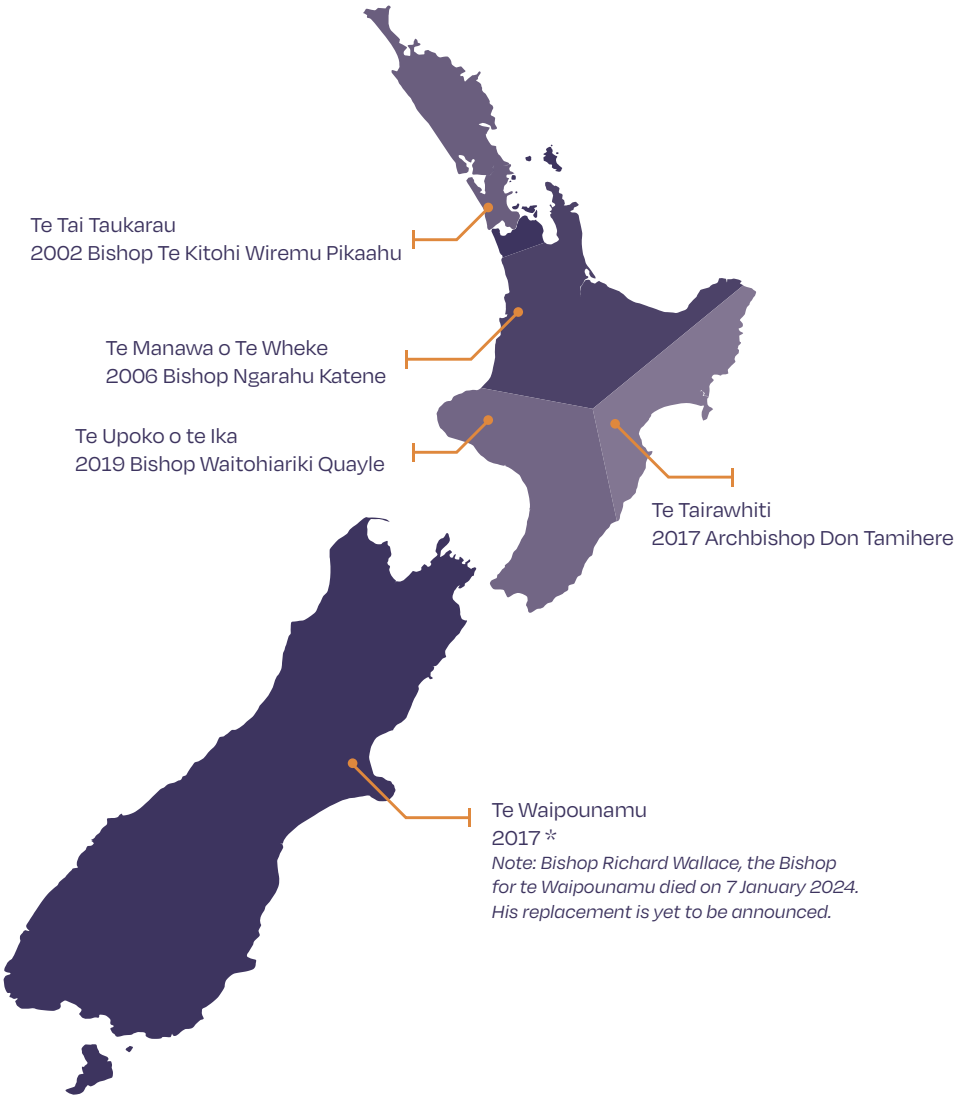
Te Hāhi Mihingare
Anglican Church

584. The Anglican Church is an autonomous branch of the worldwide Anglican Communion and is split into the church and its affiliated entities.[743] Since 1992, the Anglican Church in Aotearoa New Zealand and Polynesia (which the Inquiry refers to as the Anglican Church) has been constitutionally divided into three tikanga: Tikanga Māori, Tikanga Pasifika and Tikanga Pākehā. Three archbishops, one from each of Tikanga Māori, Tikanga Pasifika and Tikanga Pākehā form the Primacy of the Anglican Church, or in other words, lead the church.

585. The geographical division of Tikanga Māori amorangi and Tikanga Pākehā diocese can be seen in the following maps:[744]

Geographical divisions of the Anglican Church

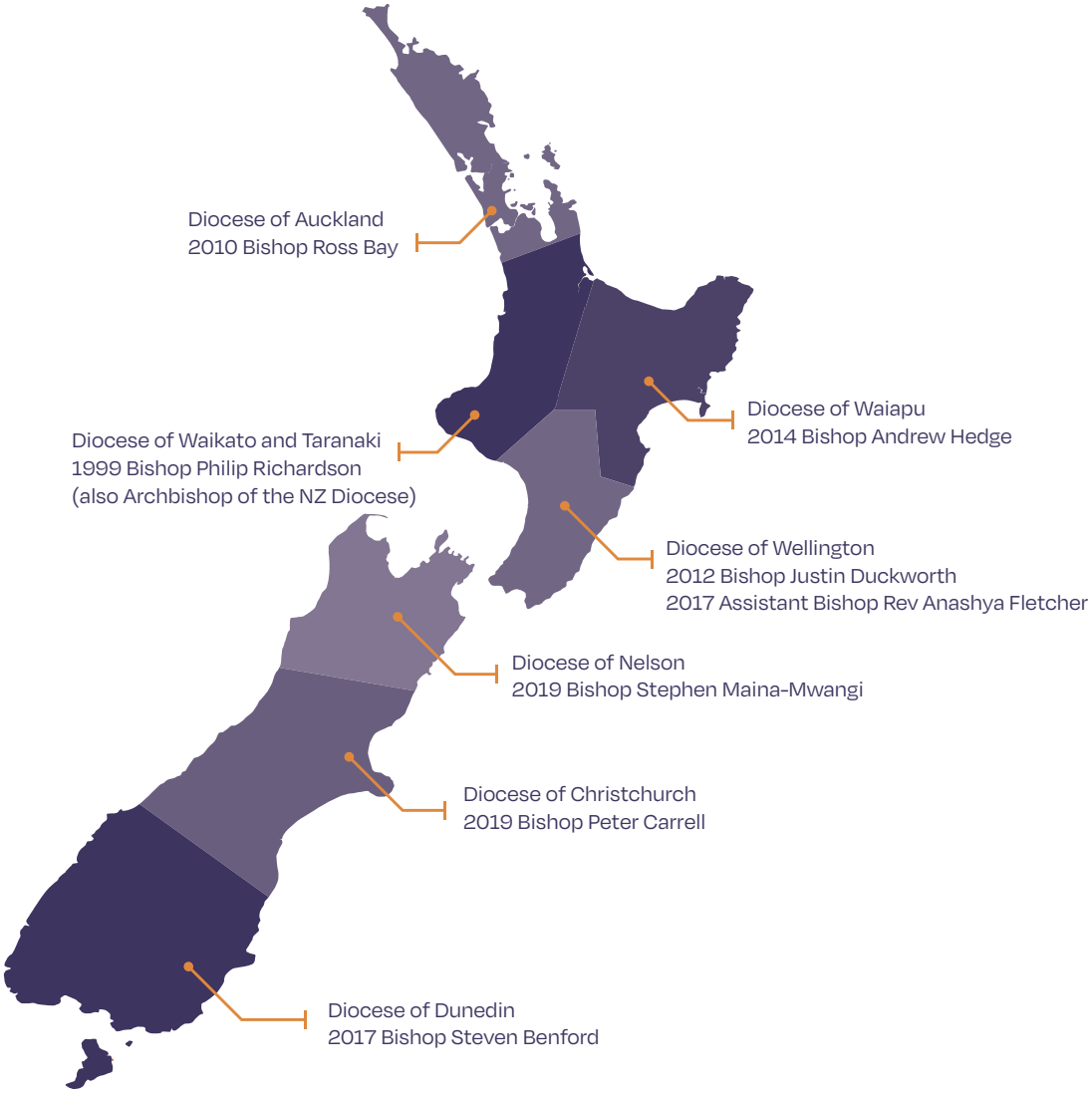
Tikanga Māori amorangi



743 Title G, Canon XIII of Holy Orders in the Anglican Church in Aotearoa, New Zealand & Polynesia (1992), section 6.1. The Anglican Church does not take direction from overseas but presents itself as in full communion with the Church of England and all other churches of the Anglican Communion.

744 Witness statement of Archbishop Philip Richardson for the Anglican Church (12 February 2021, pages 11–12).

Tikanga Pākehā diocese



586. Each diocese or amorangi then consists of ministry units, parishes, schools, chaplaincies and co-operating ventures. The church is estimated to have at least 300 parishes and more than 30 schools associated with the church. The church's primary governing body is the General Synod Te Hinota Whānui, which is made up of three houses: bishops, clergy and laity (non-ordained).

587. Every decision of the General Synod Te Hinota Whānui must be agreed to by each of the three houses and the three tikanga. The General Synod Te Hinota Whānui only meets for a week at a time, every two years. As a result, the process for change to church processes is slow.[745] The Primacy has limited influence to be able to direct change.

745 Witness statement of Archbishop Philip Richardson for the Anglican Church (12 February 2021, pages 9–10).

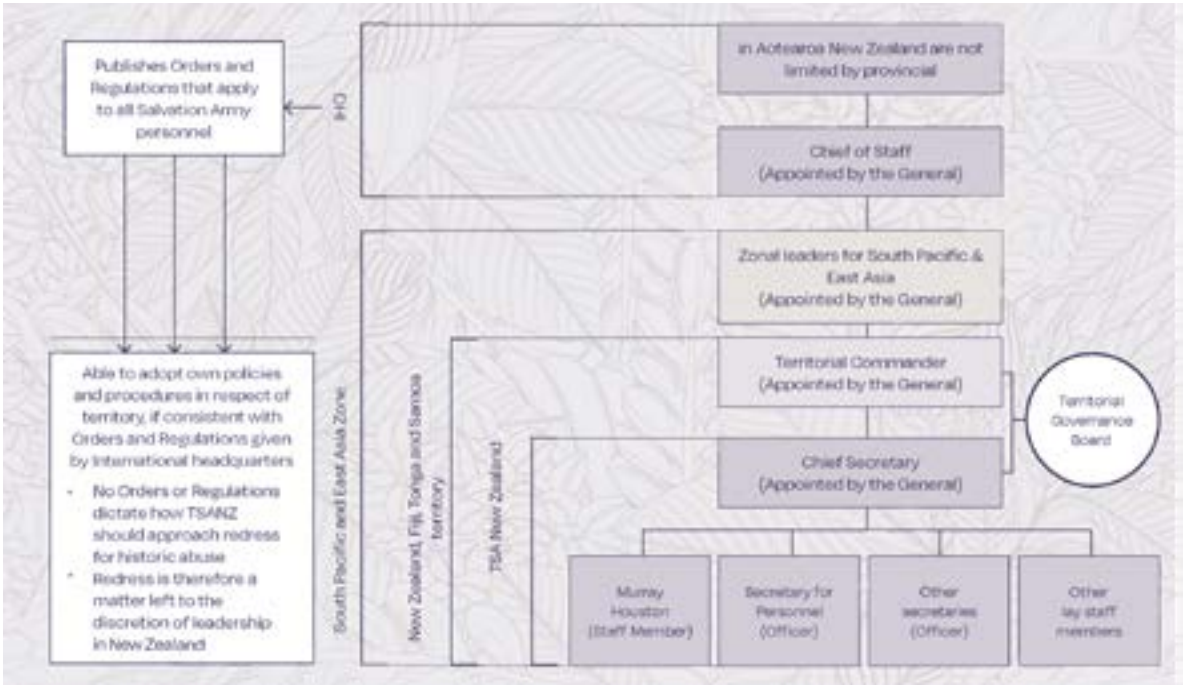
Te Ope Whakaora ki Aotearoa, Whītī, Tonga me Hāmoa
The Salvation Army New Zealand, Fiji, Tonga and Samoan Territory

588. The Salvation Army New Zealand, Fiji, Tonga and Samoan (which the Inquiry refers to as The Salvation Army) has been active in Aotearoa New Zealand since 1883. The world-wide Salvation Army is divided into five zones. These zones are further divided into territories, which are sub-divided into commands or regions. The Salvation Army falls into the South Pacific and East Asia zone, and is part of the New Zealand, Fiji, Tonga and Samoa Territory.[746]

589. The Salvation Army has a quasi-military command structure, headed by an elected general who directs The Salvation Army operations at International Headquarters located in London. Territorial commanders and the Territorial Governance Board are responsible for the work of The Salvation Army within their territories, are subject to the control and direction of International Headquarters, and ultimately report to the general.

590. The Salvation Army in New Zealand can enact policies and procedures if they are consistent with the orders and regulations given by International Headquarters in the United Kingdom.[747]

Overview of structure and functions of The Salvation Army



591. Religious congregations in The Salvation Army are known as corps and church members as soldiers. Ordained clergy are known as officers and hold various military ranks. The Salvation Army's structure is top-down and strongly hierarchical, and all official positions, apart from the general, are appointed, not elected.

746 Witness statement of Colonel Gerry Walker for The Salvation Army (18 September 2020, page 22).
747 Witness statement of Colonel Gerry Walker for The Salvation Army (18 September 2020, page 25).

Te Hāhi Weteriana
Methodist Church

592. The Methodist Church in Aotearoa New Zealand (which the Inquiry refers to as the Methodist Church) has been involved in caring for children in its former children's homes, in foster care placements arranged by those homes, and in foster care placements arranged by the church. The Methodist Church also has one school, Wesley College.

593. The governing body of the Methodist Church is known as Conference. Conference is the primary decision-making body of the church, the final authority on all matters of the church and exercises oversight over entities affiliated with the church.[748] Its decisions are binding on both lay and ordained members of the church in matters pertaining to the operation of the church.[749] Conference meets annually. Until 1983, decisions were made by a 50 percent majority.[750]

594. After 1983, the Methodist Church became a bicultural church, with two equal partners Tauiwi and Te Taha Māori. A decision of Conference after 1983 required an agreement of the two partners by consensus.[751] An increase in Pacific Peoples' presence in the church has seen an increase in their own self-governing synods. During the Inquiry period, there were eleven regional synods with responsibility for the congregations in their region. Separate Tongan, Samoan and Rotuman synods have been added since then, and the total number of regional synods has been reduced to six.

595. The Methodist Lawbook lays down in detail the rules that govern the church. The church authorises leadership roles for presbyters and deacons, who are received into the presbyterate or diaconate.[752] The church can appoint lay members into specified roles, subject to the church's authority.

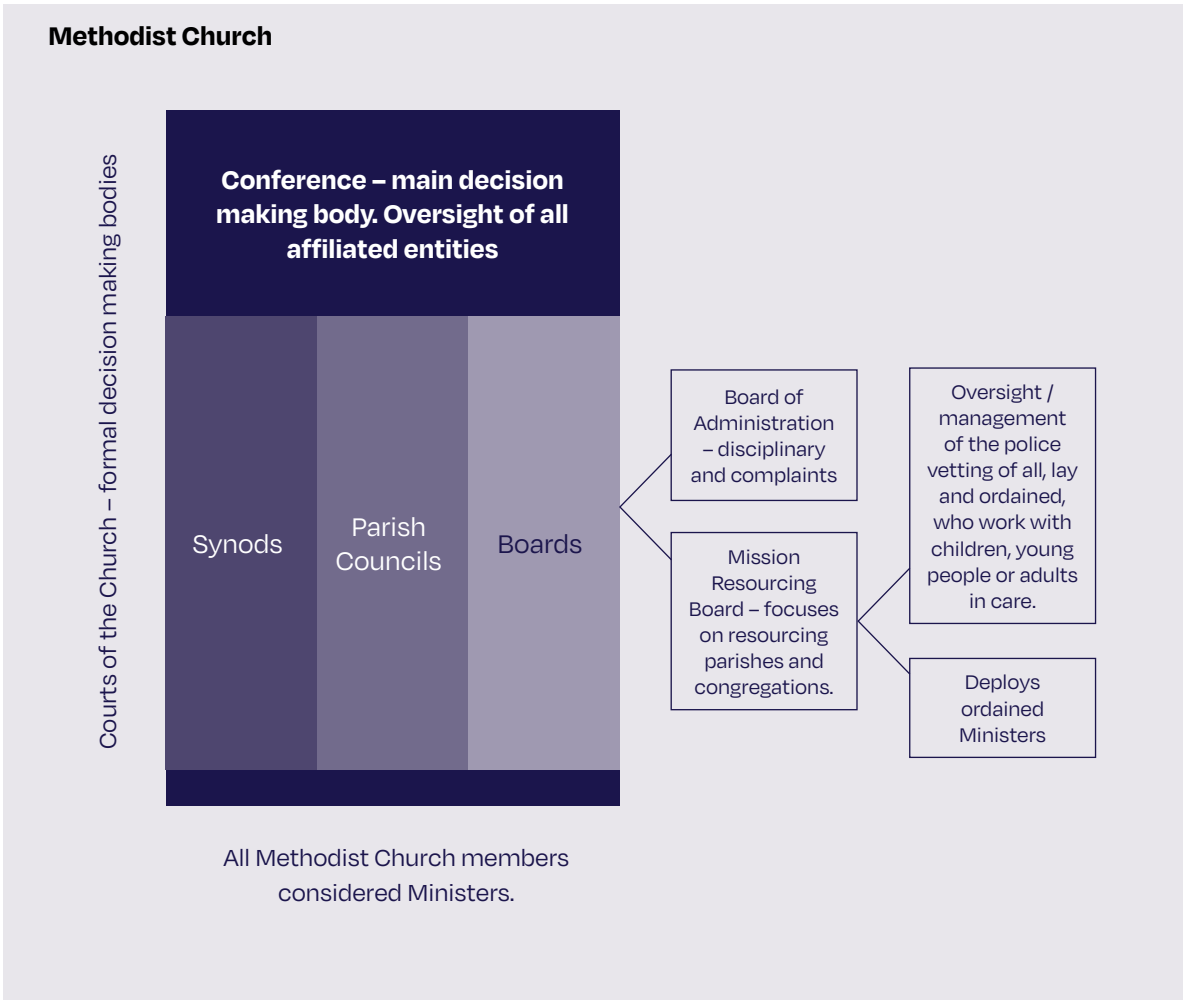
596. The Methodist Church also has formal decision-making bodies (parish councils, synods, and boards) which, along with Conference are known as Courts of the Church.[753] The Laws and Regulations of the church sets out the powers and privileges of church members and courts and how these relate to the church's doctrines.[754]

748 Opening submissions of the Methodist Church of New Zealand, Wesley College Board of Trustees and Wesley College Trust Board (18 October 2022, para 3.4).
749 Methodist Church of New Zealand, Laws and Regulations of the Methodist Church of New Zealand (2021, pages 5 and 84).
750 Methodist Church of New Zealand, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 452 (questions 2–7) (24 May 2022, page 6).
751 Methodist Church of New Zealand, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 452 (questions 2–7) (24 May 2022, page 2).
752 Methodist Church of New Zealand, Laws and Regulations of the Methodist Church of New Zealand (2021, page 5).
753 Methodist Church of New Zealand, Laws and Regulations of the Methodist Church of New Zealand (2021, page 10).
754 Methodist Church of New Zealand, Laws and Regulations of the Methodist Church of New Zealand (2021).

597. The Methodist Conference delegates various functions to its operational boards. The Board of Administration is headed by the general secretary and is the board which manages the disciplinary and complaints processes. The Mission Resourcing Board focuses on resourcing parishes and congregations. This board has a key role in deployment of ordained ministers and has oversight / management of the NZ Police vetting of all, lay and ordained, who work with children, young people or adults in care.[755]

598. There are regional Methodist Missions in many parts of Aotearoa New Zealand. Each mission is autonomous, although the boards are appointed or approved by the Conference. From the 1970s, missions took responsibility for the delivery of all social services in their region. A Conference co-ordinating body, aiming to focus policies, was reorganised in 1999 as Wesley.com and is now named the Methodist Alliance. Responsibility for local operations remains at the regional level.[756]

Overview of structure and functions of the Methodist Church



755 Methodist Church of New Zealand, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 452 (questions 2–7) (24 May 2022, page 4).
756 Methodist Church of New Zealand, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 452 (questions 2–7) (24 May 2022, page 1).

Te Hāhi Perehipitīriana o Aotearoa
Presbyterian Church of New Zealand

599. The Presbyterian Church of Aotearoa New Zealand is governed by three courts – the General Assembly (national level), the Presbytery (regional level) and Session of Elders (local level).[757]

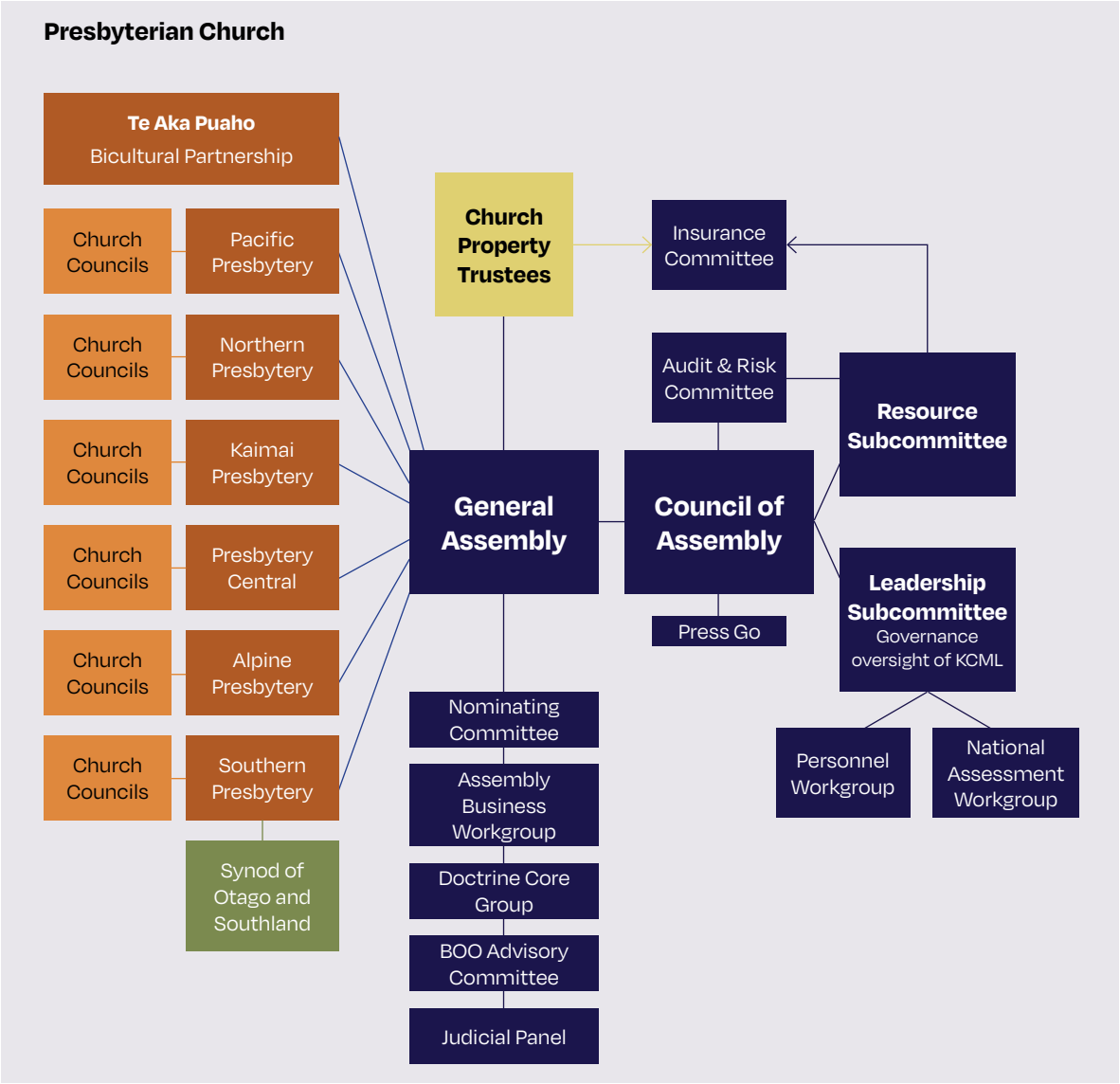
600. The highest court is the General Assembly. It sets the policy and the direction of the church as a whole, as well as approving the various regulations that help the church to operate as an effective organisation. During the Inquiry period, the General Assembly met every year. At present, the General Assembly normally meets once every two years. The Book of Order is the church's body of laws that incorporates all standing General Assembly decisions.

601. In 2000, there were 25 presbyteries, including Te Aka Puaho (founded in 1955), but today this has been reduced to seven presbyteries – five regional, one for Pacific congregations (since 2002) and Te Aka Puaho for Māori. Each local parish reports to its presbytery.[758] Te Aka Puaho can appoint ministers to serve nationally, whereas the other presbyteries can only appoint ministers to specific positions within specific churches.[759]

602. A National Office which supports presbyteries and parishes is based in Te Whanganui-ā-Tara Wellington, led by the Assembly Executive Officer.[760] At parish level, the local church council (made up of elders or other elected people from the congregation) make decisions affecting the local church. If there is a minister, the council is usually led by that minister.[761]

757 Presbyterian Church of Aotearoa New Zealand website, General Assembly.
758 Transcript of submissions of Matthew Hague, counsel for the Presbyterian Church of Aotearoa New Zealand at the Inquiry's Faith-based Institutional Response Hearing (Royal Commission of Inquiry into Abuse in Care, 19 October 2022, pages 295–296).
759 Transcript of submissions of Matthew Hague, counsel for the Presbyterian Church of Aotearoa New Zealand at the Inquiry's Faith-based Institutional Response Hearing (Royal Commission of Inquiry into Abuse in Care, 19 October 2022, page 296).
760 Transcript of submissions of Matthew Hague, counsel for the Presbyterian Church of Aotearoa New Zealand at the Inquiry's Faith-based Institutional Response Hearing (Royal Commission of Inquiry into Abuse in Care, 19 October 2022, page 296).
761 Transcript of evidence of Wayne Matheson for the Presbyterian Church of Aotearoa New Zealand at the Inquiry's Faith-based Institutional Response Hearing (Royal Commission of Inquiry into Abuse in Care, 19 October 2022, page 298).

Overview of structure and functions of the Presbyterian Church



Rōpū tautoko Perehipitīriana
Presbyterian Support

603. In addition to the General Assembly and seven presbyteries, there are seven regional Presbyterian Support Services organisations. From the late 1800s Presbyterian parishes recognised they were not capable of dealing with the increasing numbers of people living in poverty. With no basic social welfare system, these separate support organisations were established.[762]

604. Presbyterian Support Central and Presbyterian Support Otago, two of the seven support organisations, told the Inquiry they were established in the early 1900s, with both organisations initiating projects to care for orphaned and destitute children.[763]

762 Transcript of opening statement from Presbyterian Support Central and Presbyterian Support Otago at the Inquiry's Faith-based Institutional Response Hearing (Royal Commission of Inquiry into Abuse in Care, 19 October 2022, page 240).
763 Transcript of opening statement from Presbyterian Support Central and Presbyterian Support Otago at the Inquiry's Faith-based Institutional Response Hearing (Royal Commission of Inquiry into Abuse in Care, 19 October 2022, page 240).

605. Each Presbyterian Support Services organisation is independently governed. A national council representing the regional Presbyterian Support Services organisations was founded in 1983, and reports to the General Assembly. This reporting is the only formal link between the church and the Presbyterian Support Services organisations.

Te Hapori Karaitiana o Gloriavale
Gloriavale Christian Community

606. Gloriavale Christian Community (which the Inquiry refers to as Gloriavale) was founded in 1969 by Neville Cooper, an Australian-born, evangelical missionary, known within the community as Hopeful Christian.[764] Originally called the Springbank Christian Community, it operated a farm in North Canterbury.[765]

607. In 1991, the community bought 917 hectares of remote farmland on the West Coast. Over the next four years, they built living and dairy farming facilities. The property was named Gloriavale after Hopeful Christian's late wife, Gloria.[766]

608. Gloriavale Christian Community is run by the Shepherds and the Servants. The Overseeing Shepherd is the principal leader. The Overseeing Shepherd is responsible to Christ and Christ alone. While the Bible is the "source of all guidance regarding Church order, doctrine and practical direction for life", the Bible is interpreted by the Community's leaders, ultimately and authoritatively, by the Overseeing Shepherd.[767]

609. Leaders are not elected by the members of the community. Hopeful Christian was self-appointed as the Overseeing Shepherd until his death in 2018.[768]

610. The next level of leadership is three Senior Shepherds who hold financial authority, and below the Senior Shepherds are the Shepherds and the Servants who together comprise a leadership council of 16 men.

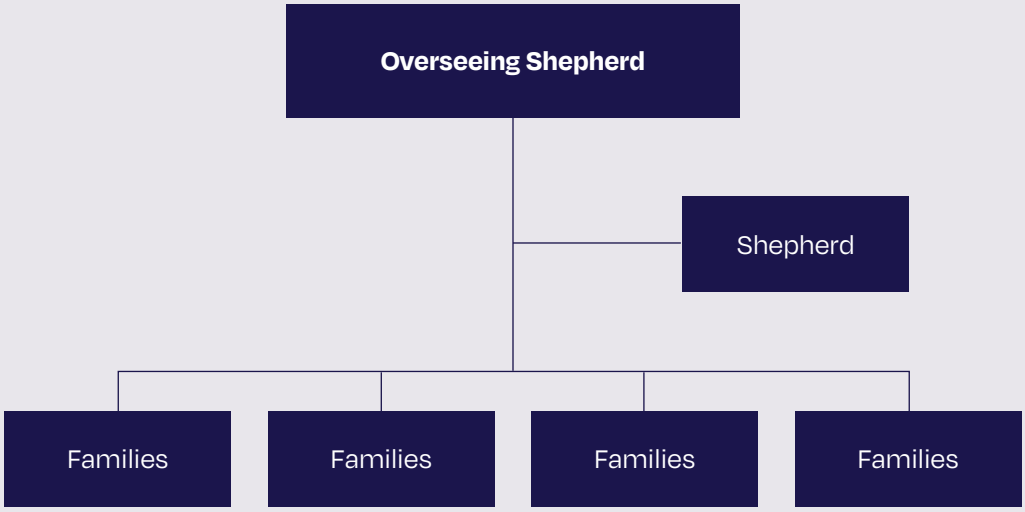
764 Gloriavale Christian Community, A life in common: The experience of the Gloriavale Christian Community, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 1 (2018, page 8).
765 Gloriavale Christian Community, A life in common: The experience of the Gloriavale Christian Community, Response to Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 1 (2018, pages 9–12).
766 Gloriavale Christian Community, A life in common: The experience of the Gloriavale Christian Community, Response to Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 1 (2018, pages 9–12).
767 Gloriavale Christian Community, A life in common: The experience of the Gloriavale Christian Community, Response to Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 1 (2018, page 12).
768 Gloriavale Christian Community, A life in common: The experience of the Gloriavale Christian Community, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 1 (May 2021, page 30).

611. From 1985 to 1995 the Shepherds were Hopeful Christian, Howard Temple and David Courage (who left in 1995) and Fervent Stedfast (who had been appointed shortly prior to David Courage's departure).[769] Hopeful Christian and Fervent Stedfast were the authors of the document titled What We Believe, which was effectively a summary of what the leaders saw as the main principles of New Testament Christianity. The document was prepared from the mid-1980's and first published in 1989.[770]

612. Gloriavale is a strict patriarchal community with a strict hierarchy. The Overseeing Shepherds and each of the Shepherds and Servants must be male. Roles are determined by biblical criteria, emphasising men as decision-makers and breadwinners and women as mothers responsible for running the household.[771]

Overview of structure and functions of the Gloriavale Christian Community

Gloriavale Christian Community, General Structure
1970 – 1999



The structure was dynamic over this period of time as the community idea was still being developed.

769 Transcript of evidence of Howard Wendell Temple and Rachel Stedfast on behalf of Gloriavale Christian Community at the Inquiry's Faith Institutional Response Hearing (Royal Commission of Inquiry into Abuse in Care, 13 October 2022, page 44).
770 Transcript of evidence of Howard Wendell Temple and Rachel Stedfast on behalf of Gloriavale Christian Community at the Inquiry's Faith Institutional Response Hearing (Royal Commission of Inquiry into Abuse in Care, 13 October 2022, page 46).
771 Gloriavale Christian Community, A life in common: The experience of the Gloriavale Christian Community, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 1 (May 2021, page 19).

Te Hāhi Karaitiana o Plymouth Brethren
Plymouth Brethren Christian Church

613. The Exclusive Brethren, more recently known as the Plymouth Brethren Christian Church, was established in England in the early 19th century, and came to Aotearoa New Zealand in the 1850s. The Exclusive Brethren has about 50,000 members globally (across Australasia, Europe, the United Kingdom and the Americas), with around 9,006 members in Aotearoa New Zealand.[772] Members refer to themselves as the Brethren.

614. The Plymouth Brethren Christian Church in Aotearoa New Zealand is made up of 41 assemblies (or congregations). Each local assembly functions independently and is responsible for the pastoral care of the members in its district. The Brethren "consider themselves as one large family and matters of discipline decided in one assembly bind every assembly".[773]

615. Members meet at weekly prayer meetings, Bible reading meetings, the Lord's Supper meetings and monthly care meetings.[774]

616. The Plymouth Brethren Christian Church has no governing constituent documents other than the Bible. It does not have a formal organisational structure.[775] The most senior leader is Bruce Hales, who lives in Sydney, Australia, but there are no official positions, nor is there an established hierarchy.[776]

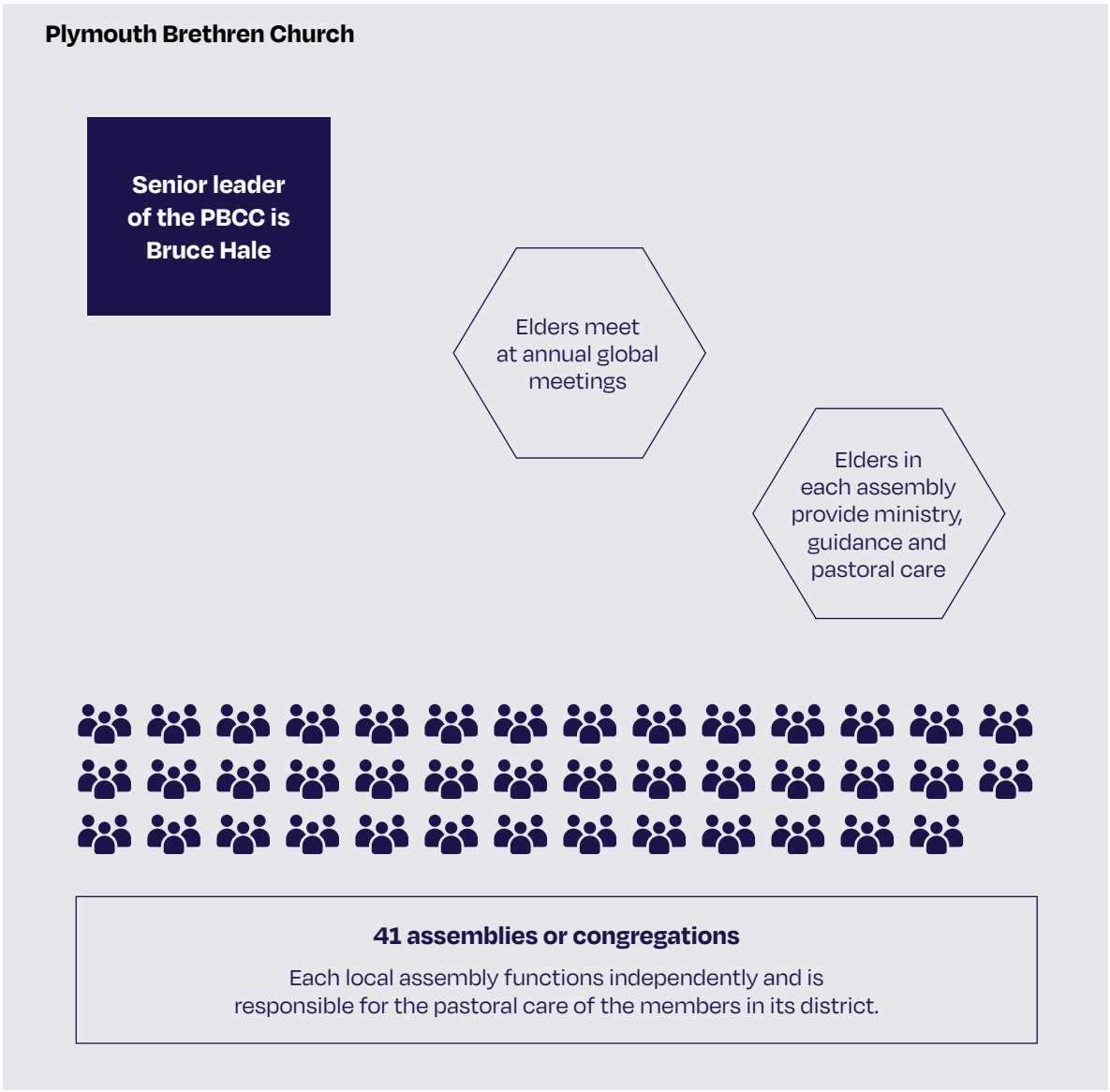
617. The Plymouth Brethren Christian Church told the Inquiry that elders meet at annual global meetings, where teachings about scripture are shared.[777]

618. Elders take a lead in ministering the word of God; they help co-ordinate and lead in Bible reading meetings and seek to provide guidance and pastoral care when required. There is no formal process to select elders and it is not possible to apply to become an elder.[778]

772 Plymouth Brethren Christian Church, Natural Justice response letter (10 January 2024, page 9).
773 Plymouth Brethren Christian Church, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 1 (23 April 2021, page 2).
774 Notes from meeting with representatives of the Plymouth Brethren Christian Church (29 November 2022, pages 4–5).
775 Plymouth Brethren Christian Church, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 1 (23 April 2021, page 2).
776 Plymouth Brethren Christian Church, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 1 (23 April 2021, page 2).
777 Notes from meeting with representatives of the Plymouth Brethren Christian Church (29 November 2022, page 6).
778 Plymouth Brethren Christian Church, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 1 (23 April 2021), Appendix 1: Overview of the Plymouth Brethren Christian Church, paras 7–8.

619. A person comes to be recognised as an elder by their assembly over time due to their wisdom and experience. They are not ordained.[779] Elders are not employed by the Plymouth Brethren Christian Church and do not receive any remuneration. Elders are not required to undergo any specific training and are not subject to any formal supervision or oversight.[780] The Plymouth Brethren Christian Church states however that "elders would be expected to be familiar with the holy scriptures and the ministries of the current and former senior leaders of the Plymouth Brethren Christian Church and are subject to the scrutiny of their fellow elders and their own local assembly".[781]

Overview of structure and functions of the Plymouth Brethren Christian Church



779 Plymouth Brethren Christian Church, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 1 (23 April 2021, page 2).
780 Plymouth Brethren Christian Church, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 1 (23 April 2021, page 2).
781 Plymouth Brethren Christian Church, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 1 (23 April 2021, page 2).

Ngā Kaiwhakapae o Ihowa
Jehovah's Witnesses

620. The Jehovah's Witnesses organisation was founded in Pennsylvania in the United States in the late 19th century. Today the religion has 8.8 million active members in 239 countries.[782]

621. The Jehovah's Witnesses organisation has been active in New Zealand since 1898, and according to the 2018 census, now has over 20,000 members in this country.[783]

622. The faith in Aotearoa New Zealand is divided into congregations. A congregation comprises publishers (also referred to as members). Some publishers serve as ministerial servants and Elders. In Aotearoa New Zealand around 228 individual Jehovah's Witness congregations are or have been registered on the Charities Register.[784] In addition, there are charities that support the activities of the Jehovah's Witnesses at a national level, for example, New Zealand Association of Jehovah's Witnesses, which is also a registered charity.[785]

623. Directions and guidance on the faith's worldwide activities are overseen by the Governing Body based in New York. The Governing Body is a council of Jehovah's Witness Elders, or self-described "mature Christians" who look to Jehovah (God) and to Jesus Christ for direction in all matters and provide "unified theocratic direction to Branch and Country committee members worldwide".[786] The size of the Governing Body has varied, from seven to 18 men, with all based in New York and voted in by existing Governing Body members. There are currently nine members. The faith considers that all baptised congregants, men and women, are "ministers" in the faith.[787]

624. The Governing Body supervises more than 90 branches worldwide. In each country or region, there is a Branch Office. The Branch Office is overseen by a Branch Committee. The Branch Office coordinates the religious activity of Jehovah's Witnesses in its country or geographical area. Although religious direction and guidance comes from its headquarters in New York, the Jehovah's Witnesses in Aotearoa New Zealand are coordinated by the Australasia Branch Office of Jehovah's Witnesses, from its head office in Sydney.

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782 JW.Org > About Us > Frequently Asked Questions > How Many of Jehovah's Witnesses Are There Worldwide (Jehovah's Witnesses, 2023) https://www.jw.org/en/jehovahs-witnesses/faq/how-many-jw/.

783 "Seventy-Five years of 'legally establishing' the Good News in New Zealand," Jehovah's Witnesses (7 March 2022) https://www.jw.org/en/news/region/new-zealand/Seventy-Five-Years-of-Legally-Establishing-the-Good-News-in-New-Zealand/.

784 Charities Services Ngā Ratonga Kaupapa Atawhai (Charities Register), https://register.charities.govt.nz/CharitiesRegister/Search accessed 24 April 2024.

785 Charities Services Ngā Ratonga Kaupapa Atawhai, Charity Summary of the New Zealand Association of Jehovah's Witnesses https://register.charities.govt.nz/Charity/CC29352, noting there is a set of rules included in the charity documents.

786 Australian Child Sexual Abuse Royal Commission into Institutional responses to Child Sexual Abuse, Report of Case study no 29 (Commonwealth of Australia, October 2016), p 15.

787 JW.org, "Do Jehovah's Witnesses Have Women Ministers?" ("Yes, worldwide Jehovah's Witnesses have several million women ministers. They are a great host of preachers of the good news of God's Kingdom. Psalm 68:11 says prophetically of those ministers: "Jehovah himself gives the saying; the women telling the good news are a large army").

625. Each Branch Office has a Service Department and a Legal Department.[788] The Service Department provides guidance to congregation Elders on implementing the child safeguarding policies of the faith, amongst other matters, and the Legal Department provides legal advice to the Branch Office and to congregation Elders.[789]

626. Approximately 20 congregations of Jehovah's Witnesses are grouped together into a "circuit". The spiritual needs of those groups of congregations are addressed by an experienced Elder known as a "circuit overseer "(also called a "travelling overseer"). Circuit overseers appoint congregation Elders. These appointments are based on a recommendation from the congregation's body of Elders, who look to passages in scripture to determine the "good qualities" of a man (as with the Governing Body, all Elders are male).[790] Circuit overseers also decide, based on the recommendation of the body of Elders, whether an Elder should be "deleted" because he no longer meets the spiritual qualifications.[791]

627. Congregational responsibilities sit with Elders and ministerial servants. Only men are eligible for these roles. In 2023 there were around 1,576 Elders within Aotearoa New Zealand.[792]

788 Witness statement of Paul Gillies, The United Kingdom Independent Inquiry into Child Sexual Abuse (2 December 2019, para 9).
789 Witness statement of Paul Gillies, The United Kingdom Independent Inquiry into Child Sexual Abuse (2 December 2019, para 9).
790 Supplementary witness statement of Shayne Mechen, Royal Commission of Inquiry into Abuse in Care (21 June 2023, para 4). These scriptures known as 'inspired qualifications" can be found at: 1 Timothy 3:1-13; Titus 1:5-9; James 3:17&18 and 1 Peter 5:2 & 3.
791 Memorandum to Counsel Assisting the Royal Commission of Inquiry into Historical Abuse in State Care and in the Care of Faith-based Institutions ("Inquiry") on behalf of Jehovah's Witnesses of New Zealand (1 November 2019, para 3.5).
792 Jehovah's Witnesses interview transcript with the Royal Commission of Inquiry into Abuse in Care (8 March 2023, pages 20-21).

Ngā whakaritenga tuāpapa-whakapono i te wā o te Pakirehua
Faith-based care settings during the Inquiry period

628. The Inquiry's Terms of Reference cover a broad variety of settings. As discussed in Part 1, they include both direct care, where the State or a faith-based institution is directly providing care for an individual, or indirect care, where the State or a faith-based institution had people or entities providing care on their behalf.

Kāinga taurima tamariki me ngā whare taurima tamariki pani
Faith-based children's homes and orphanages

629. At the beginning of the Inquiry period, faith-based institutions were among the largest providers of residential care for children in Aotearoa New Zealand. Many of the faiths ran children's homes including the Catholic, Anglican and Methodist churches, the Presbyterian Support Organisations and The Salvation Army. By 1960, 53 out of the 68 registered children's homes were run by faith-based institutions.[793]

630. There were also receiving homes (or reception centres) which were short-term residences for babies and very young children, such as The Nest, run by The Salvation Army, or Catholic-run orphanages such as the Star of the Sea, or the Home of Compassion.[794]

793 Evans, J, "Government support of the church in the modern era," Journal of Law and Religion, 13(2), (1998, pages 517–530, page 519).
794 Brief of evidence of Sonja Cooper and Amanda Hill on behalf of Cooper Legal at the Inquiry's Contextual Hearing (Royal Commission of Inquiry into Abuse in Care, 5 September 2019, para 38).

631. Across the Inquiry period, the Anglican, Presbyterian and Catholic Churches and The Salvation Army were affiliated with children's homes. Research conducted by the Inquiry showed:

- at least 15 homes affiliated with the Anglican church, in Ōtepoti Dunedin, Ōtautahi Christchurch, Timaru, Whakatū Nelson, Te Papaioea Palmerston North, Te Matau-a-Māui Hawke's Bay and Tāmaki Makaurau Auckland[795]
- at least 18 homes affiliated with the Presbyterian Church, in Waihōpai Invercargill, Ōtepoti Dunedin, Lawrence (in Otago), Ōtautahi Christchurch, Timaru, Whanganui, Te Matau-a-Māui Hawke's Bay and Tāmaki Makaurau Auckland[796]
- at least 10 homes affiliated with The Salvation Army, in Ōtepoti Dunedin, Temuka, Te Whanganui-a-Tara Wellington, Wairarapa, Taranaki, Te Matau-a-Māui Hawke's Bay, Kirikiriroa Hamilton and Tāmaki Makaurau Auckland[797]
- at least 33 homes affiliated with the Catholic Church, including homes in Ōtepoti Dunedin, Ōtautahi Christchurch, Whakatū Nelson, Te Waiharakeke Blenheim, Te Whanganui-ā-Tara Wellington, Taitoko Levin and Tāmaki Makaurau Auckland[798]
- at least six homes affiliated with the Methodist Church, in Ōtautahi Christchurch, Whakaoriori Masterton and Tāmaki Makaurau Auckland.[799]

795 Department of Social Welfare, Directory of residential facilities for disturbed children in New Zealand (1975, pages 22, 24, 26–27, 29, 31, 34); Oranga Tamariki, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 14, Schedule 2 (22 January 2021, pages 2, 12, 21).

796 Department of Social Welfare, Directory of residential facilities for disturbed children in New Zealand (1975, pages 21, 23–24, 28, 30, 37–39); Presbyterian Support Southland, Submission settings out a narrative and analysis of the information requested in Schedule A (2024, page 2); Oranga Tamariki, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 14, Schedule 2 (22 January 2021, pages 12–13).

797 Department of Social Welfare, Directory of residential facilities for disturbed children in New Zealand (1975, pages 24, 27– 28, 32, 37); Oranga Tamariki, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 14, Schedule 2 (22 January 2021, pages 7, 14); Hawke's Bay children's holding trust, Our history (accessed 22 March 2024), https://hbcht.org.nz/our-history/; Cussen, I, Help where help was needed: Single mothers and the Salvation Army Bethany home in 1960s-70s Auckland (Auckland History Initiative, 5 August 2021) https://ahi.auckland.ac.nz/2021/08/05/help-where-help-was-needed-single-mothers-and-the-salvation-army-bethany-home-in-1960s-70s-auckland/.

798 Department of Social Welfare, Directory of residential facilities for disturbed children in New Zealand (1975, pages 22–23, 31–32, 34–35, 38); Ponter, Elizabeth, Interface: A review of Catholic social services New Zealand (National Directorate, Catholic Social Services 1986, pages 7–8); Oranga Tamariki, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 14, Schedule 2 (22 January 2021, pages 5–6, 12, 14–16, 20–23).

799 Department of Social Welfare, Directory of residential facilities for disturbed children in New Zealand (1975, pages 21, 25, 35)

Kāinga atawhai tamariki
Foster homes

632. As well as operating children's homes, the faiths also facilitated children entering private foster homes during the Inquiry period, co-ordinated within their religious communities. It is difficult to understand from the records how many there were or their locations.

633. Reasons for going into foster care included coming from single-parent families, health concerns, economic crises or their parents being unable to care for them.[800]

634. In some circumstances, foster care was a form of respite for the family or was used by children's homes during the school holidays. In other cases, it was to provide a permanent living arrangement for a child.

635. Some survivors who experienced abuse in Catholic orphanages told the Inquiry that they were sent away to foster placements with Catholic families during the school holidays, when the orphanages would close for several weeks.[801]

636. Other foster care arrangements were more informal. For example, a Catholic priest suggested to a struggling mother that a childless couple who lived on church property could look after her son for a while.[802]

Kāinga taurima māmā takakau
Unmarried mothers' homes

637. The Inquiry acknowledges that during the Inquiry period some facilities referred to as "unmarried mothers' homes" in the report offered a range of services and were not exclusively providing care for unmarried mothers. For example, Bethany Homes (operated by The Salvation Army) also functioned as maternity hospitals.

Kāinga taurima māmā takakau Katorika
Catholic unmarried mothers' homes

638. Several Catholic entities operated homes for unmarried mothers including Mount Magdala reformatory home and St Vincent's Home of Compassion in Herne Bay, Tāmaki Makaurau Auckland, which was run by the Compassion sisters.

639. St Vincent's Home of Compassion included a home for unmarried pregnant women, a private maternity hospital and a children's home for babies and toddlers. It operated from 1939 to 1986.

800 Witness statement of Charlene Montgomery (May 2022, page 2).
801 Letter from Cooper Legal to the National Office for Professional Standards on behalf of Alexandra Murray (23 May 2018, pages 6–7); Witness statements of Ms NJ (10 February 2022, page 6); Anne Hill (28 September 2020, page 5) and Linda Taylor and Janice Taylor (5 March 2021, paras 123, 128–129). Private session of Mr SI (5 August 2021, page 7).
802 Written account of KC (24 April 2021, page 8).

Kāinga taurima māmā takakau Mihingare
Anglican unmarried mothers' homes

640. The Anglican Trust for Women and Children operated St Mary's Home in Ōtāhuhu, Tāmaki Makaurau Auckland. The home took in unmarried pregnant women and their babies and also ran a children's home. In 1950 there were 29 births in the unmarried mothers' wing of the home. This number peaked at 53 in 1957.

Kāinga taurima māmā takakau o Te Ope Whakaora
The Salvation Army unmarried mothers' homes

641. The Salvation Army ran seven unmarried mothers' homes, called Bethany Homes, from 1887 to 1982. Women and girls spent their pregnancies in these homes and then after birth, their babies were adopted out.

Kāinga taurima māmā takakau Perehipitīriana
Presbyterian unmarried mothers' homes

642. The Presbyterian Church operated one home called Holly House in Ōtautahi Christchurch from 1991 to 2018. The home housed teenage mothers and their babies.

Te whakapono me te whāngai
Faith and adoption

643. Faith-based adoptions were facilitated by the Catholic, Anglican, Presbyterian churches and The Salvation Army.[803]

644. From the 1940s to 1955, although social worker approval was required, most legal adoptions were arranged privately, often through the various homes housing unmarried mothers.[804] The Adoption Act 1955 introduced more comprehensive State involvement in adoptions.

645. Catholic agencies remained significantly involved in the decades that followed, facilitating adoptions that were then processed through the State.[805] Catholic social services agencies also worked with the Māori Mission in finding homes for Māori and Pacific babies.[806] Catholic entities arranged and facilitated hundreds of adoptions in Aotearoa New Zealand with Wellington Catholic Social Services recording 130 adoptions March 1961 and March 1962 alone.[807]

803 Witness statement of Dr Anne Else (9 October 2019, page 3).
804 Witness statement of Dr Anne Else (9 October 2019, page 4).
805 Witness statement of Lesley Hooper on behalf of the bishops and congregational leaders of the Catholic Church in Aotearoa New Zealand (16 June 2022, page 6).
806 Archdiocese of Wellington, Social Welfare Work in the Archdiocese (n.d., page 2).
807 Between March 1961 and March 1962 alone, Wellington Catholic Social Services recorded 130 adoptions. See Catholic Social Services Summary of Statistics, March 1961–March 1962 (page 1).

646. Adoption through The Salvation Army was primarily facilitated through its unmarried mothers' Bethany Homes. Some children were also adopted out from The Salvation Army's children's homes. Missing records mean it is not possible to accurately estimate the number of adoptions facilitated through The Salvation Army, however it is likely to be in the high tens of thousands.[808]

647. Although private adoption agencies were not legally permitted following the Adoption Act 1955, The Salvation Army's records show it considered itself to be running an adoption agency or programme. In a submission on the Adult Adoption Information Bill in 1981, The Salvation Army stated it was "justly proud" of the adoption programme, which is "a very important part of our overall service".[809]

648. The Anglican Church similarly facilitated adoptions through its unmarried mothers' homes.

649. The Inquiry has received limited information about adoption facilitated through Presbyterian Support organisations and children's homes. However, evidence provided by these organisations indicates they had a role in adoption.[810]

650. In addition, Presbyterian Support Upper South Island provided the Inquiry with its 1997 Holly House Guidelines on Adoption. This set out how it could support "young women contemplating adoption two months before the expected birth delivery date and for a limited time after the birth of the baby".[811] The Presbyterian Church also provided evidence that adoption was considered one of the options for care of "deprived children".[812]

808 Sumner, B, External consultation prepared for the Royal Commission of Inquiry into Abuse in Care (15 August 2022, pages 17–18).
809 Adult Adoption Information Bill submission by Major Eunice Eichler (16 February 1981), in Sumner, B, External consultation prepared for the Royal Commission of Inquiry into Abuse in Care (15 August 2022, pages 19–20).
810 Presbyterian Support Central told the Inquiry about an unsuccessful adoption arrangement where a child was returned to Berhampore Children's Home after being abused by the man who had adopted him; Berhampore Childrens Home – Abuse (2005, pages 7–11).
811 Presbyterian Support Upper South Island, Holly House Guidelines re Adoption (December 1997, page 1).
812 Presbyterian Church of New Zealand, Care of deprived children (n.d., page 2).

Kura tūāpapa-whakapono me ngā whare mātauranga
Faith-based schools and education facilities

651. For much of the Inquiry period, faith-based institutions have been providers of education in Aotearoa New Zealand. Catholic, Anglican, Methodist and Presbyterian churches, and the Gloriavale Christian Community, have all run or have affiliation with schools in Aotearoa New Zealand. These schools offer a range of education including primary and secondary education and boarding facilities.

652. During the early part of the Inquiry period, faith-based schools were generally private schools. The Private Schools Conditional Integration Act 1975 provided the option for private schools to integrate into the State education system. Many faith-based private schools became State-integrated with a special character. This means that the schools could become a State school, subject to the same set of standards and funding arrangements as other State schools but retaining a special character that informed how the school operated.

653. In practice, faith-based institutions tend to own the land and buildings where the State integrated school is located. Owners of the school land and / or buildings are called 'proprietors.' The proprietor is responsible for ensuring the facilities meet Ministry of Education standards and for maintaining the school's special character.[813] Under the Act, certain teaching appointments, including the principal, deputy principal and director of religious studies, can be made in line with the school's special character.[814] However, the school itself is administered by the State (via what was known as a Board of Trustees from 1989 and which was changed to the School Board in 2020 through the Education and Training Act 2020), including the teaching curriculum, teaching staff appointments and other legislative and regulatory requirements.

654. The Private Schools Conditional Integration Act 1975 significantly reduced the number of private faith-based schools in Aotearoa New Zealand. For example, by 1983, 249 Catholic and nine non-Catholic private schools had integrated into the State education system.[815]

655. There were also faith-based residential special schools. Two examples are Glenburn Centre in Tāmaki Makaurau Auckland, run by Presbyterian Social Services (with funding from the Department of Child, Youth and Family)[816] and Marylands School in Ōtautahi Christchurch, run by the Catholic Order of St John of God.

656. Marylands School was the subject of a separate report by the Inquiry. The findings were published in the Inquiry's interim report Stolen Lives, Marked Souls.

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813 Brief of evidence of Helen Hurst for the Ministry of Education at the Inquiry's Marylands School (St John of God) Hearing (7 October 2021, paras 3.19–3.20); Ministry of Education website, Types of schools and year levels, (last reviewed 28 April 2022), https://www.education.govt.nz/school/new-zealands-network-of-schools/about/types-of-schools-and-year-levels/.

814 Ministry of Education, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 468 (7 July 2022), page 6.

815 Brief of evidence of Helen Hurst for the Ministry of Education at the Inquiry's Marylands School (St John of God) Hearing (7 October 2021, para 3.19).

816 Education Review Office, Evaluation of the residential behaviour schools (2008, page 11).

Pehea te urunga o ngā tāngata ki ngā kura tūāpapa-whakapono
How people entered faith-based schools

657. Children and young people were often sent to faith-based schools because of their families' religion or because their parents believed these schools provided a higher standard of education than State schools. In some cases, the schools were considered an attempt to recreate the English class system.[817]

658. Children and young people also attended some faith-based schools because they offered boarding facilities. As with faith-based children's homes and orphanages, faith-based boarding schools were sometimes used as overflow or a last resort by the State when no other suitable placements for State wards were available.[818]

Kura Katorika
Catholic schools

659. Catholic entities ran 371 schools during the Inquiry period covering primary and secondary education. Some offered boarding facilities or were special schools for disabled and Deaf children. Marylands (1955–1983) was a private special school for disabled boys in Ōtautahi Christchurch, and St Dominics School for the Deaf (1944–1989) for Deaf children in the Te Whanganui-ā-Tara Wellington and Manawatu regions.

660. There were also four Catholic institutions that were focused on behaviour reform. These were Mount Magdala (in Ōtautahi Christchurch), Marycrest (in Te Horo), Rosemount (in Tāmaki Makaurau Auckland) and Garindale (in Whakatū Nelson).

Kura Weteriana
Methodist school

661. The Methodist Church has one school in Aotearoa New Zealand, Wesley College in Tāmaki Makaurau Auckland. The College was first set up as the Wesleyan Native Institute in 1844. In 1911, the Methodist Charitable and Educational Trusts Act 1911 was passed, establishing the Wesley Training College Trust Board to take over the functions of the Native Education Trust and the Wesley College Executive Committee. The trust board also administered the affairs of the trust under the general control and supervision of the Methodist Conference. The Wesley College Trust Board is affiliated with the Methodist Church as representatives from the Methodist Conference are appointed to sit on the Wesley College Trust Board, which reports to the Methodist Conference.[819]

817 Cook, M, Private education: Elite private schools (Te Ara – The Encyclopedia of New Zealand, 2012, page 3), https://teara.govt.nz/en/private-education/page-3.
818 Tennant, M, The fabric of welfare: Voluntary organisations, government and welfare in New Zealand, 1840–2005 (Bridget Williams Books, 2007, page 107).
819 Witness statement of Reverend Tara Tautari on behalf of the Methodist Church of New Zealand (1 July 2022, page 7).

Kura Mihingare
Anglican schools

662. There are currently 37 schools throughout Aotearoa New Zealand affiliated to the Anglican Church. These schools provide primary and secondary education, some of them with boarding facilities. The Anglican Schools' Office provides support and resources to schools.

Kura Perehipitīriana
Presbyterian schools

663. The Presbyterian Church has 20 affiliated schools. All Presbyterian schools are distinct and independent entities. The schools are governed by a board of trustees. Each school operates differently. For example, some individual board of trustees may also be members of Presbyterian Church Aotearoa, but they act independently in their school governance function. Some schools are on property owned by the Presbyterian Church Aotearoa, but this does not also mean the church has a governance role in that school.[820]

Kura noho Māori
Māori boarding schools

664. As discussed in Chapter 2, in the 19th century, missionaries from the various faiths played a role in establishing schools in Aotearoa New Zealand. Starting in 1844 with the opening of the Anglican St Stephen's School in Tāmaki Makaurau Auckland, different faiths began establishing Māori boarding schools throughout the country.

665. These schools were established specifically for Māori, with the aim of providing them with the best education and to create future Māori leaders, as well as evangelise Māori. However, the leadership of these schools was predominantly non-Māori.

666. From the mid-1840s to the 1980s, these schools were the main (if not only) Māori-specific secondary school option. It was not until about the 1980s that other Māori-specific schools such as kura kaupapa were established.

667. By 1910 there were ten Māori boarding schools throughout Aotearoa New Zealand.[821]

668. By 1969 five of the schools had closed, and Hato Pāora (a school for boys) in Feilding was opened by the Society of Mary in 1948.[822] By the end of the Inquiry period there were eight Māori boarding schools still in operation.[823]

820 Presbyterian Church, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce 286 (30 November 2021, pages 2–3).

821 The 10 Māori denominational boarding schools in 1910 were as follows. For boys: Te Aute College (Hawke's Bay), St Stephen's Boys' School (Auckland), Waerenga-a-hika College (near Gisborne), Hikurangi College (Wairarapa). For girls: Hukarere Protestant Girls' School (Napier) St Joseph's Roman Catholic Girls' School (Napier), Queen Victoria School for Māori Girls (Auckland), Turakina Māori Girls' School (Marton) and Te Waipounamu College (near Christchurch), Department of Education, "Education: Native Schools," AJHR, E-3 (1911, page 10).

822 Calman, R, Māori education – mātauranga: Māori church boarding schools (Te Ara – The Encyclopedia of New Zealand, 2012, page 4), https://teara.govt.nz/en/maori-education-matauranga/page-4.

823 They were Te Aute College (Hawke's Bay), St Stephen's School (Auckland), Queen Victoria Māori Girls' Boarding School (Auckland), St Joseph's Māori Girls' College (Napier), Hato Pāora College (Feilding), Hato Pētera College (Auckland), Hukarere Girls' College (Napier) and Turakina Māori Girls' College (Marton). Remaining open today are St Joseph's, Hukarere, Te Aute and Hato Pāora.

Te Kura Hapori Karaitiana o Gloriavale
Gloriavale Christian Community school

669. Gloriavale has an on-site school, the Gloriavale Christian School, which is governed by the Gloriavale Trust Board and the community management board. It has a roll of approximately 190 children aged from 5 to 16 years old, and 18 teaching staff. Teachers are self-employed and do not receive a salary as their work is unpaid and their "needs are met through membership of the community".[824]

670. Gloriavale Christian School is a registered private school. It receives some subsidy funding from the State and is reviewed by the Education Review Office on its compliance with the registration criteria.[825]

Te Kura Karaitiana o Plymouth Brethren
Plymouth Brethren Christian Church school

671. Plymouth Brethren Christian Church told the Inquiry that children of Plymouth Brethren members customarily attend OneSchool Global schools, and that these schools are not operated or controlled by the Exclusive Brethren.

672. However, these private schools (although staffed and run by independent professionals who are not church members) are attended only by children of Plymouth Brethren. Church members are often involved in supporting the schools through volunteer work and by board membership.[826]

824 Complaints Assessment Committee v Faithful Pilgrim [2022] NZTDT 2021/35, para 3.
825 Brief of evidence of Secretary for Education and Chief Executive Iona Holsted for the Ministry of Education at the Inquiry's State Institutional Response Hearing (8 August 2022, page 41).
826 Notes from meeting with representatives of the Plymouth Brethren Christian Church (29 November 2022); Plymouth Brethren Christian Church, Response to Royal Commission of Inquiry into Abuse in Care Notice to Produce No 1 (23 April 2021, page 3).

Ngā kura hāhi me ētahi atu whare mātauranga whakapono
Seminaries and other religious education institutions

673. The Catholic, Anglican, Presbyterian and Methodist churches ran institutions for men and women preparing for religious life. These are also known as seminaries or theological colleges.

- the Catholic Dioceses' main seminary was Holy Cross College in Ōtepoti Dunedin before it was relocated to Tāmaki Makaurau Auckland, and religious congregations also had seminaries and houses of formation throughout the country. The Marist Seminary at Mount St Mary's (originally in Napier) combined with the Holy Cross College to form the Good Shepherd College in Tāmaki Makaurau Auckland in the 1990s. In 2020, the Good Shepherd College and the Catholic Institute merged to form Te Kupenga Catholic Theological College, which offers theological courses to seminarians and other people
- the Anglican Church had St John's Theological College in Tāmaki Makaurau Auckland (still in operation today), and College House (later Christchurch College) in Ōtautahi Christchurch
- the Presbyterian Church has the Knox Centre for Ministry and Leadership in Ōtepoti Dunedin
- the Methodist Church has one seminary in Tāmaki Makaurau Auckland, Trinity Methodist Theological College, which has been co-located with the Anglican St John's Theological College since the 1970s.

Te taurimatanga o te hunga Turi me te hunga whaikaha i ngā whakaritenga tūāpapa-whakapono Care of Deaf people and disabled people in faith-based care settings

674. While few faith-based institutions catered for Deaf adults and disabled adults, some private and church-based organisations did open residential homes for Deaf people and disabled people. Private institutions such as Hōhepa Homes, in Te Matau-a-Māui Hawke's Bay, opened its first residential services in 1956.[827]

675. The Catholic Home of Compassion in Island Bay, founded by Daughters of Our Lady of Compassion, a religious congregation which began in Aotearoa, operated from 1907 to 1988. It provided care for children and families in need, such as children who may have been living in insecure homes or parents needing respite.

676. As noted, Catholic Church entities operated two special schools for Deaf children and disabled children. In addition, Presbyterian Support Upper South Island financially supported Little Acre Huntsbury Home in Ōtautahi Christchurch caring mostly for disabled children.[828]

827 National Advisory Committee on Health and Disability, To have an 'ordinary life' – Kia whai oranga 'noa': Background papers to inform the National Advisory Committee on Health and Disability (2004, page 30).
828 Letter from Presbyterian Support Upper South Island to Renée Habluetzel (15 January 2007, page 2).

He waiata aroha mō ngā purapura ora

Kāore te aroha i ahau mō koutou e te iwi i mahue kau noa
i te tika
I whakarerea e te ture i raurangi rā
Tāmia rawatia ana te whakamanioro
He huna whakamamae nō te tūkino
He auhi nō te puku i pēhia kia ngū
Ko te kaikinikini i te tau o taku ate tē rite ai ki te kōharihari o tōu
Arā pea koe rā kei te kopa i Mirumiru-te-pō
Pō tiwhatiwha pōuri kenekene
Tē ai he huringa ake i ō mahara
Nei tāku, 'kei tōia atu te tatau ka tomokia ai'
Tēnā kē ia kia huri ake tāua ki te kimi oranga
E mate pūmahara? Kāhorehore! Kāhorehore!
E ara e hoa mā, māngai nuitia te kupu pono i te puku o Kareāroto
Kia iri ki runga rawa ki te rangi tīhore he rangi waruhia ka awatea
E puta ai te ihu i te ao pakarea ki te ao pakakina
Hei ara mōu kei taku pōkai kōtuku ki te oranga
E hua ai te pito mata i roto rā kei aku purapura ora
Tiritiria ki toi whenua, onokia ka morimoria ai
Ka pihi ki One-haumako, ki One-whakatupu
Kei reira e hika mā te manako kia ea i te utu
Kia whakaahuritia tō mana tangata tō mana tuku iho nā ō rau kahika
Koia ka whanake koia ka manahua koia ka ngawhā
He houkura mārie mōwai rokiroki āio nā koutou ko Rongo
Koia ka puta ki te whaiao ki te ao mārama
Whitiwhiti ora e!

– Paraone Gloyne

A Love Song for the Living Seeds

The love within me for you, the people, remains unchanged

Left alone, abandoned by justice and order

Subjected to the silent suffering of mistreatment

A heaviness in the core, silenced into stillness

The gnawing of my heart cannot compare to the anguish of yours

Perhaps you are hidden in the depths of the night, Mirumiru-te-pō

A night dark and dense

Where there may be no turning in your memories

But here's my thought: 'Do not push open the door to enter'

Instead, let us turn to seek life and well-being

Is memory dead? No, certainly not!

Arise, friends, let the truth resound loudly from the heart of Kareāroto

To ascend to the clear skies, a sky washed clean at dawn

Emerging from the troubled world to a world of promise

A path for you, my flock of herons, to life

So, the precious core may blossom within you, my living seeds

Scattered across the land, cherished and growing in abundance

Rising in One-haumako, in One-whakatupu

There, my friends, lies the hope to fulfil the cost

To restore your human dignity, your inherited mana from your ancestors

Thus, it will thrive, flourish, and burst forth

A peaceful feather, a treasured calm, a serene peace from Rongo

Emerging into the world of light, into the world of understanding

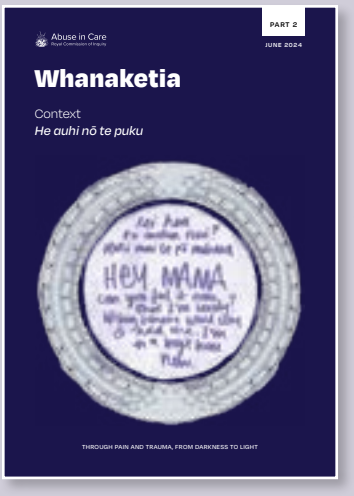
A crossing of life indeed!

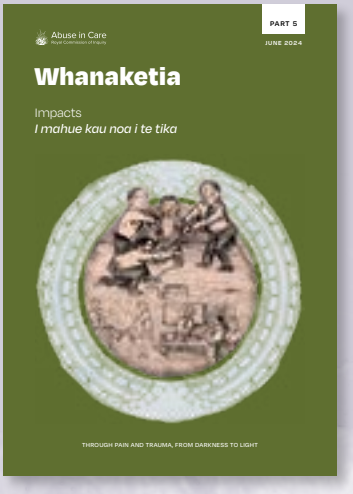
– Paraone Gloyne

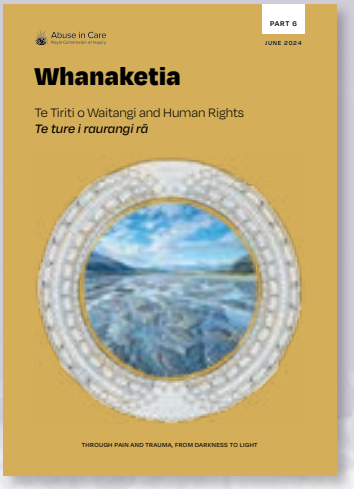
Whanaketia

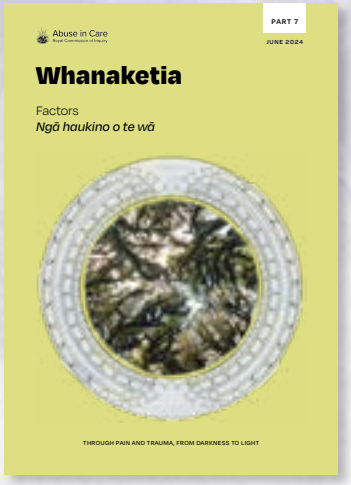
The report is made up of a number of volumes: Preliminaries; nine Parts; a Survivor Experience study and five case studies. Whanaketia should be read in full, along with the other interim reports from the Inquiry to understand the overall picture of abuse in State and faith-based care from 1950 to 1999.

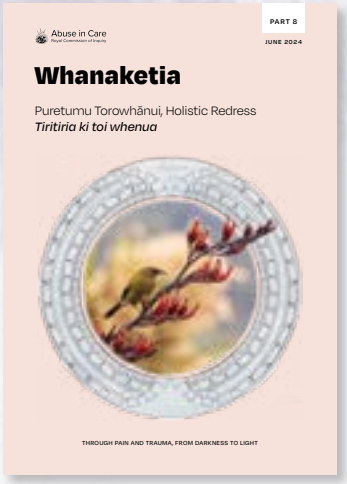
THROUGH PAIN AND TRAUMA, FROM DARKNESS TO LIGHT

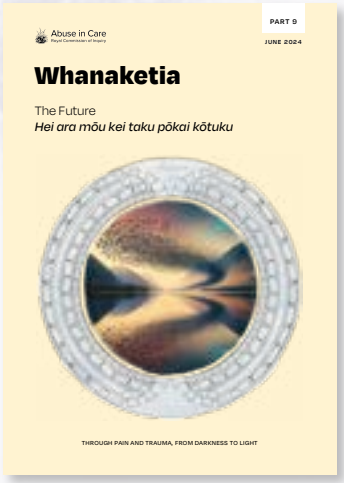












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