21-23 Burke Crescent, Kingston, A. C.T. Ph. 95 9618

BERYL

The

CANBERRA

MOMENS

REFUGE

4th Annual REPORT 1979.

Early in 1979, the Refuge was renamed "BERYL" in admiration of Beryl Henderson, aged 82, who has fought for women's rights all of her life.

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Impressions Of

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Refuge Worker: New Job in the Spring

Razor blade along curve of face; Broken ribs and wheezy breath Spell death, denied by hazel eyes Smiling through the pain and shock of her shattered body.

Men friends gulp wine, glory in fights observed, make splatting sound of fist on jaw: just like the movies, I speak of battered women - and I am dismissed.

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All the people of my summer: all floating in a blur of tears streaming down the car window. Red lights and green smudge my eyes. Tears falling to parched grey grass.

A long, dry summer, living inside an undelivered drop of water. The leaves of my heart curl brown, fearful of autumn, when rain brings only wet rot.

March, 1979.

- Biff









The Refuge



ON LOOKING INTO "BERYL" REFUGE... 🗙

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I've been told to keep this short, which is rather hard as I have so many impressions of the Refuge, but I'll try. My first impression was "WHAT A LOT OF DROOBS", which was further heightened by a housemeeting a few days later. Here were all these weirdo women walking around. crying, laughing, nugging each other. And they kept TOUCHING me. What was this game? What did they want from me?

After a few days, I started to get to know some of the "weirdos". I even started to like them. It went on from there. I talked to people. I talked about things I never talked about before, things that really hurt, I even went through some of those Famous "Sessions". It was safe to get angry. I'm not saying the women at the Refuge are perfect - far from it, but they're trying - some against great odds - to get their lives together. This includes residents and workers - we're doing it together, that's the important thing.



I've left the Refuge as a resident now, but I've decided to hang around and watch and participate in the growing of "Beryl". I hope you'll join me.



Homeless Women

The Collective has always seen the Refuge as a place for all women. Of the 215 women who stayed at the Refuge between 1 July 1978 and 30 June 1979, half came for reasons involving a marital partner. 43 women gave homelessness as one of their reasons for seeking refuge and 44 women mentioned eviction, escape from a nonfamily situation or fight from their parents as their reasons for coming. AM and G are representative of the younger women who have been staying with us.

* * *

I am 20 years old. I have now been involved with the Refuge for about 5 months. I first heard about the Refuge while I was in hospital - I had ended up in 12B because of an overdose. I also had been asked to leave the place that I was living at.

I had no-where to go as I had hardly any friends in the A.C.T. I didn't have enough money to look privately for a house as I was on the dole.

One of the nurses at the hospital suggested that I should go to the Refuge as they could put me up for a few days.

If I hadn't found out about the Refuge I would have had to stay in hospital until I had got myself other accomodation.

AM

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I'm 21 years of age and unemployed for the last 5 years. I came to the Refuge because I didn't have anywhere to go. My parents didn't want to know me and I hadn't really lived with them since I was 13.

I was living in Wanniassa but there was great friction within the house and in the end I had to leave there.

I knew of the Refuge through friends who had been homeless, I was also broke and I hadn't got my dole money for 3 months, so I decided to ring up and ask to come in. I stayed at the Refuge for 3 months and I am getting a flat today.

If the Refuge wasn't there I would have had to sleep by the lake, which I had done before. A lot of homeless people sleep at the Carillion every night.

* G* * * * *

Most of these women had no children in their care - All were unemployed and had no prospect of employment. Many were coming out of institutional care - The population also includes some older women who did not want to live alone. We believe that the crisis support offered at the Refuge is either inappropriate or inadequate for their needs.

We are becoming increasingly concerned that there is an urgent need for a different kind of shelter for women in Canberra.

There is a need for a supportive home for women who are not in immediate danger or crisis. These women need a supportive household for medium term accommodation whilst they "get themselves together", and gain the confidence needed to face the day to day problems they are going to encounter outside of that home. Many of these women have reached a stage of their lives where they haven't a job, or even an aim. These women don't know what they want to do.

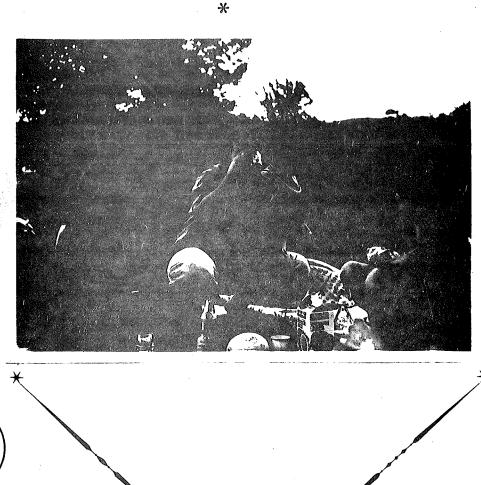
Many of these women have been in institutions like psychiatric hospitals. Some of the women feel that they have been helped by the people in these places. Others feel that they have been hindered by them. But all of

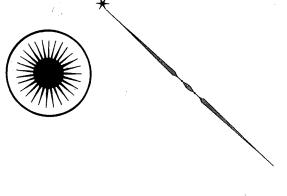
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the women agree that these institutions have not prepared them for living in our society. Their time in the hospital has left them aimless.

They need time, and help from other women to work out where their interests lie and how to best go about setting up their lives again.













Child Rape

-how we're trying to deal with it and stop it!

We have been exploring and deepening our self-awareness in relation to the subject of child sexual abuse, in a group which has been meeting weekly since July.

A personal herstory of our child sexual abuse workshops:

These workshops were initially commenced because Biff became interested in the subject. The catalyst was Biff's involvement with a woman who had left her husband and come interstate to the Refuge because her two daughters had been sexually abused/raped by her teenage stepson. The girls were eleven and six and the eleven year old in particular had obvious behavioual and developmental problems. She was carrying a lot of fear in her body.

As Refuge workers we experienced difficulty in coming to terms with what it meant to us and how to cope with a child incest victim in a 'counselling' situation. So we all began to look at the ways in which we were responding to the problem. We realized that until we had looked at our own sexual development we would be in danger of responding by projecting our sexual hangups, and especially our fear, onto the person we were supposed to be 'helping'. We all recognized a desire to avoid the problem: we could relate to adult rape victims, but rape of a child was too painful and horrific and difficult.

Biff lead a discussion at our local Interagency Meeting and it became clear that the professionals from health and welfare areas were experiencing similar difficulties. So Biff offered to run a series of workshops, for women only, to look at incest and our role as 'helpers'. A group of 18 was formed.

The group has consolidated at 12 members. We have been meeting for approximately five months, and have gone through three stages.

The first stage, a series of four meetings, was very much initiated and lead by Biff. The exercises which Biff set up served the function of building up a high level of trust within the group by sharing information about ourselves in dyads and triads. We also did exercises





which got us in touch with our own bodies and how we felt about them and about our sexuality in general. We looked specifically at our childhood sexuality and found/ 'recalled' the ways in which is was repressed or abused by adults.

Biff obtained a film about father/daughter incest/rape which we watched and then processed. The feelings which this brought up in the group were intense and varied. (I got in touch with the sexual nature of the relationship with my father, especially during adolescence, and the way in which this affected my interactions with men well into the early years of my marriage.)

At the end of Biff's series of workshops we decided that we wanted to continue but that more of us would take responsibility for leading and facilitating. A group of four of us then prepared a series of four more workshops. We now began to look more explicitly at cur own sexual experiences. Topics such as 'first fuck', 'masturbation', 'body image' and so on were discussed in pairs and then in the group. Sometimes we added a 'technique' whereby the two people in a pair would 'feedback' their partner's story in the first person with the rest of the group sitting around them in a close circle. Hearing somebody else tell of your experience as if it were her own provoked very strong and powerful feelings. All the sharing of feelings in the group got us in touch with long forgotten memories through telling, hearing reactions and also through the process of identifying with other women's experiences. We also did some role plays of men and women in a sexual. or potentially sexual situation. We found that many of us had similar gut-reactions to these experiences, the most common being sadness and anger and horror (fear?).

By this time the group had become very close and committed to continuing. There were some women 'outside' who expressed a desire to join the group and we decided to allow them to come in and close the group again.

The third stage has been one in which there have been no official leaders; we have all taken responsibility for ourselves and for the group as a whole. We decided that we all wanted the opportunity to share, in the group, our complete sexual herstories from our earliest memories to the most recent,

The process has been that we start each two hour session by going around the circle sharing some recent, good experience, sexual or otherwise. This serves to bring us together, and to focus our attention on ourselves * and each other. Then someone nominates to do her story.

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* This does not take the form of a monologue as people comment and ask questions throughout. Afterwards we all give feedback to the person who 'did it', about how her story affected us.

This process is still going on and we have found that although the individual experiences have been very varied, our responses at an emotional level have been similar. The pain, and the ways in which we women have repressed our sexuality and allowed our bodies to be abused and our needs to be ignored, are things which at some level we all share.

However our coming together has meant that the feelings of rage, resentment and self-pity which we have all felt at some time are being converted to feelings of excitement and courage, in the knowledge that we are not different or at fault. That as women we can change and take responsibility for our sexuality. We need not see ourselves as men see us (maybe we can change the way they see us) and we need not and should not depend on their ability to fulfill us.

The changes have, in fact, been tremendous, and almost weekly someone shares a new discovery she has made about herself.

For some it has been the beginning of a completely new self-awareness and acceptance: one 'middle-aged' woman who had never experienced orgasm and had never touched her own body with a view to giving herself pleasure, now with pride and humour shares her discovery of her sexuality with us. This woman is blossoming and growing at an amazing rate: her acceptance of her body has given her a whole new life. The has become more confident, more outgoing and more assertive. This is only one, though perhaps the most outstanding to date, of the ways in which our group has changed and enriched all of our lives.

It seems too, that in opening our minds to our own sexuality and to the effects of sexual abuse on us and on young children, we have opened the mouths of those around us; in the Refuge, socially, and even within our own families.

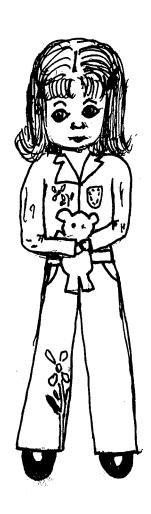
Several of us have been asked by people outside our group to share the pain and trauma of their negative sexual experiences. More and more, women at the Refuge are telling us of incest experiences and looking at the ways in which this has affected their sexuality and their personal growth.

We will soon be at the end of the third stage of our workshops and I am looking forward to entering a fourth stage in which more focus will be put on the sexual abuse of children.

I feel that we need to go through a process of sorting out which childhood (parent or adult administered) sexual experiences we found most harmful to our self-image and to our sexual development.

For me, any treatment which caused me, as a child, to have negative feelings about my body could, in broad terms, be called abusive. Perhaps we will be able to find a pattern of adult treatment which causes negative child responses. Only then, I think, can we begin to really discover together, when and how sexual relations between adults and children do most harm, how best this can be dealt with, and hopefully, come the revolution, prevented!

Robin *** * ***



Thoughts on the experience of our group to date:

When I first suggested the formation of the Child Sexual Abuse Workshops, it was because I wanted to work out why I found this topic so difficult. I have developed considerable listening skills; I have been involved in women's groups and problem-sharing for nearly a decade; I had worked with rape crisis victims; and I had been a teacher for twelve years and knew a lot about relating to children and young people outside the formal education structures.

So I apparently had all the ingredients for being a good 'helper' for a child rape victim. But if felt paralysed and impotent; and not very effective as a caring woman 'helper'.

And, as Robin recounts, when I shared this situation with the Refuge collective members, and further afield in the professional 'helping community', I found everyone saying 'me too'.

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When we formed the group, eighteen women came to the first session. Amongst us there were women with lots of rape crisis experience, radical feminists from the women's movement, professional counsellors from the ACT Child and Family Guidance unit, the mother of an incest victim, and women who came because they were interested.

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Amorgst us we had a wide range of group skills; we spanned from age twenty to fifty-three; we had widely divergent lifestyles and (apparently) widely divergent sexual experience; some had been in many self exp; oring groups, some never; and we were all fairly nervous about what we were embarking upon.

What we have found:



The enormous leaps in personal awareness and changed lives that Robin highlighys are significant in that none of us were 'cases for treatment'. We were ordinary women, functioning well by this society's standards. We ourselves have been/are being amazed at how much we have repressed of our own experiences and memories. I think this is particularly useful information when we consider the widely-held belief that most incest victims do not suffer trauma because they (appear to) lead normal lives.

A case in point from our group could be the 'first fuck' memorization and sharing. Out of the twelve members, for four this experience was rape in some form: two of them violent rapes involving more than one man. Another four women found the memorization of their 'first fuck' extremely unpleasant: it produced intense feelings of sadness, distaste or anger at being used. For the remaining four women, the memory of the experience was basically pleasant.



The amount of pain experienced in this session rockes us all: many had conceived of it as probably a fun thing to do, with expectations of gaucherie at the worst. The reality of the degree of pain that had never before been presumably pales considerably by comparison with that of an incest victim.

Another syndrome we have uncovered is that nearly everyone has found in this process (unknown to us as individuals before) that our relationship with our father (or a big brother) was highly significant in terms of our sexuality. None of us fantasized about our fathers sexually; none of us was raped by our fathers. And yet we have nearly all discovered a degree of what I shall call 'incest tension' emanating from our fathers, especially around the age of puberty. For some that meant withdrawal of affection by the father; for others an overt appreciation of them as sexual beings (women) which was very rarely open - there were a couple of pleasant memories of this, but many more of acute discomfort and confusion.

The point I am belabouring here is that the Freudian oedipus-electra theory has built up a huge pattern of expectations of behaviour, specifically that daughters desire their fathers. I believe that it is only by women talking, exploring, recalling their own experience, that we are going to establish the truth, which is the contrary: that men often desire their daughters in this patriarchal society ('a man's home is his castle': the other people in it are therefore his serfs, his property, his playthings), and that women hate and loathe being sexually used or humiliated by anyone. And the father is a special 'anyone'.

The third important proposition which our group has found is that childhood is throbbingly alive in all of us. We have found that in a highly supportive, validating grup, we can 'return' to incidents we had 'forgotten' and feel very powerful sensations: both the sensations of the past and the meaning they have for us now.

This seems very important because it is only by doing this ourselves that we are getting in touch with the intensity of childrend feelings. This society, especially the professional 'helpers', spends untold brainpower and money constructing theories about child development, stages, thinking processes. While doing this, most adults seem closed to children living now, and closed to their own rich storehouse of knowledge about children which everyone of them contains within them. And this knowledge can give us essential information about the very different processes of growing up female or male.

1. Our original proposition that people who wanted to be in a position to cope with child sexual abuse (75% of reported cases of which are within the family), should thoroughly work through their own feelings and attitudes (i.e. their own experience) first, has been confirmed to a resounding degree.

Many of the child sexual abuse units (of various kinds) in the U.S. have been through a similar process.

2. Our group has demonstrated the enormous potential for growth in all of us; new self-knowledge, deepened understanding of other women, an awareness of a wide range of experiences, more knowledge from which to analyse the impasse of many sexual relations in this society.

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3. The 'feedback technique' I have already emphasized. In many cases it seemed to unlock a deeper level of (repressed) feeling: when I heard back my own story of my 'first fick' it was infinitely more upsetting than my over telling of it, where I wa in control. Hearing it uncovered the extent to which I had 'coped' by not letting myself feel. (I am not suggesting this here as a technique to use with children; only in the context already outlined: for ourselves.)

4. A women-only group has undoubtedly produced move sharing of common experiences. We have been able to share and explore the depth of fear and anger about men, in particular, in a healthy growth-oriented way, where a mixed group would have got stuck on confronting.

I believe that single-sex groups are the way forward, precisely because of the depth of recall and feeling that can be reached when charing is about common experiences.

About 10-15% of 'reported' child sexual abuse concerns boy victims. Male-to-male rape is concerned to humiliate the victim by using him like a woman, and reducing him to the status of a female. (See the well-known Priladelphia study on male rape in jails.) The power components of being male or female are integral to all negative sexual experiences under patriarchy; therefore men who want to work in this field should, I believe, first work in male-only groups, creating their own process of self-knowledge as we have.

** At the moment we have no end-point. Right now most of our energy is going into what we are doing, part of which is working out where to go next. We hope eventually to offer our process in written and experiential form to others; but maybe by the time we get there, we will be doing something else, like running our own child sexual above unit.

But as I said at the beginning, this process is action: it changes the group members and all they do. We encourage you to do the same, in your place/time/space, with yourself and the people around you.

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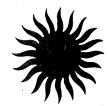






I'm looking for something Which I can't find Gentleness, loving and caring Special to the heart and mind

I want to enjoy what's happening to me I want to like myself and set my hatred free



I feel I'm being dragged down engulfed in my sea of hate I want to be free before I drown I have to fight and wait







Workers' Workouts

GROUP CONTRACT



We contract:

- X To be honest and open.
- * To work on loving and trusting the group and ourselves.
- * Confidentiality.
- *- To give these sessions our fullest attention and commitment and want that from each other.
- * To work on our individual difficulties in expressing feelings.
- * To value ourselves.
- * To ask for what we want.

Last year the group of paid workers attended the Centre for Personal Relations every three to four weeks to work out any snarls in our relationships.

This year we decided to try to do this ourselves. In March we met and talked about what we wanted to achieve. We each drew up an individual contract with the group, and from these came a group contract. We explored over the next few months different times, places and frequencies of meeting - we looked at ourselves, our group and only on one occasion had a set agenda. We developed over this time a degree of closeness and trust and commitment which carried us from week to week.

Margo

For me, it became a 'home' group, a regular meeting of the same women where we shared our lives and ourselves. I experienced the highest level of trust I have ever known in this group. It was personal growth, rapping, consciousness-raising and sisterhood.



It was wonderful. Which is why we are continuing, although no longer as a 'workers' group because four of our ten have ceased being paid workers. So we are now 'Our Group', 10 women who are part of the Refuge Collective, meeting together because we want to.

1980 may be as good. It will certainly be different: it is all the time. I'm looking forward to it....

Biff











*After School

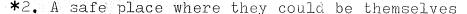
Programme

On first becoming involved with the after school programme (ASP) I was aware of the following reasons for its existence:

- *1. To give women more time and space free from their children, at a time when they already had trouble concentrating their energy on themselves.
- *2. That the time after school was extremely stressful at the Refuge, for both women and children because of the crowded space, noise level during the preparation of dinner.
- *3. Often children, suffering from this stress, needed space and time apart "to be".

The aims of the programme seemed to be:

- *1. A time and place for children "to be" but with someone there to
 - focus on
 - be a recipient of their communication
 - understand them
 - give them time and energy
 - give them 'mothering'; that is to care



- without fear
- without judgement

After working in the programme I became conscious of certain needs

- *1. To be aware of my own feelings, attitudes and values, and to take care that my expectations and reactions when working with children, are not an imposition of those values upon them.
- *2. That in "being myself" with children, I must still consider the rights of those children, but at the same time be aware of the inequalities, in that to expect an equal relationship is unfair, as adults have the advantage.



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A 20 or 30 year old reaction to 5-6 year old action/ statement has its dangers and this turns obvious especially in moments of conflict and when giving a negative reaction.

- 3. To realise the importance of workers being in touch with their own feelings, to safeguard the children who can be very unfairly harmfully affected by the outlet of frustrations or feelings not connected with them.
- 4. To be aware of making judgements in talking to children, e.g. the need for a "stiff upper lip" seems sadly out of place and contradictory to the Refuge.
- 5. To understand the development and maturation of children social, personal and emotional.
- 6. To work from the children's needs rather than carrying in our own fantasies of what children like and how we as individuals fancy ourselves relating to children making a lot of assumptions that don't fit leads to frustration.

Other needs I saw at this time for the ASP were:

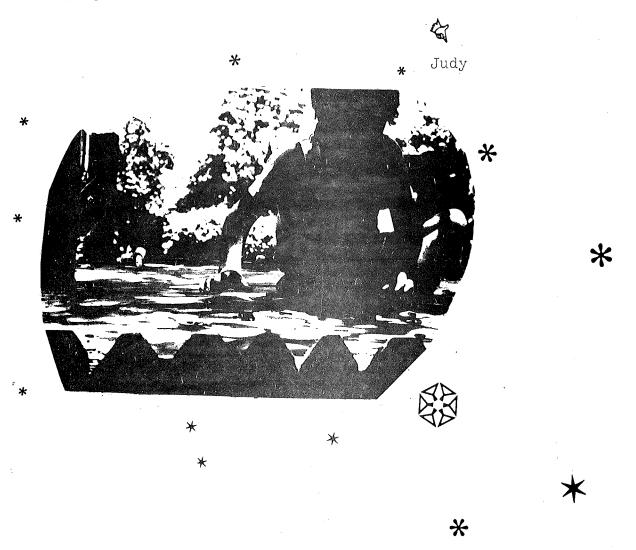
- *1. Stability in an insecure time and space. The kids have many adjustments to make living in a new house with new people. So the children's house needs to be stable.
- * 2. Love and understanding and also a need for interactions and guidance.
 - 3. To have a break from their mothers and the other women who are upset and under stress. The children need to escape from the adult's tension in the Refuge.
 - 4. An unthreatening programme. These children are disadvantaged in that they are insecure, unsettled, confused, easily threatened. Many are in need of individual care and attention. They need, activities that are free, safe, released and happy. After being at school all day, they have no need for anything too challenging, too different. We can handle these things when we're at our best, but at other times, changes and new challenges create more personal stress.
 - 5. A positive self image a real effort is needed to prevent further feelings of inferiority. These children (like all people) need constant praise and experiences which give them positive feelings.

We need to let each child know that we are interested and aware of them an unique individuals. We need to share our feelings with them safely, have no favourites/ victims, make sure we are being ourselves and therefore

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being an authentic person-model. We need to see conflicts as being understandable, to look at the area of conflict and responsibility for it. Where possible we should set up definite guidelines of what is acceptable in the programme (outer limits) to avoid some conflict.





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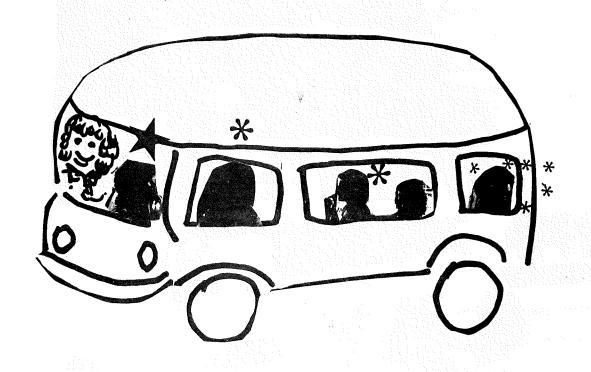
The Bus

We have had the bus for 12 months now and it is the best thirg that has ever happened to the Refuge. The children ar at school on time every morning and can be picked up on time each afternoon.

The ous has been really good on holidays and weekends as we have been able to go to the snow, to Batemans Bay and out on picnics. It is norrible to be in the Refige on weekends and holidays as the kids get bored. But now that we have the bus we have more peace in the Refuge than ever before.

We've also used the bus several times to take women and children to hospital. Because the Refuge is a crisis centre, we need a vehicle to be constantly available for emergencies.











Early this year we gained a "follow-up" co-ordinator whom we pay with a grant from the Parents Support Services Scheme... The majority of women I work with, when they leave the Refuge, tend to be those women who have moved into government accommodation or returned to their previous home when the partner has moved out. It is important to understand that women frequently bond with other workers or Collective members while living in the Refuge, who may maintain close contact with her when she leaves the Refuge. In this situation I may not become involved in following up the women.

I only follow up a small number of the approximately thirty per cent of women that decide to return to their previous situation. Many appear to feel guilty for returning, often they may have only been in the Refuge for a day or two (so I may not have met them) and often they choose not to leave a forwarding address. Some of their partners feel threatened if the woman attempts to maintain contact with a Refuge worker. At times I communicate with a woman in this situation by phone. Many women who return to live with their partner say they have increased bargaining power in the relationship because they have demonstrated that they are able to walk away.

Women who have left hospital after receiving psychiatric care often stay at the Refuge while they find permanent accommodation. These women often require support while they attempt to find employment and establish friendships when they have moved from the Refuge.

A number of women who are constantly in transit (homeless) stay at the Refuge for a short time before moving to other accommodation. These women frequently have no desire to maintain contact with me. Women who stay under a week at the Refuge are frequently difficult to follow up. This occurs because I may not meet them, and even if they are told about the work I do by other workers, they may be unable to conceptualise how I could be useful to them.

My working week is divided up over Tuesday, Wednesday and Friday. On a Tuesday and Friday I generally spend several hours at the Refuge, working with and getting to know the women before or after I have been visiting ex-residents. This is necessary if I am to work effectively with the women when they leave the Refuge. Wednesday morning is taken up with a staff meeting (paid workers and other interested collective members). This information exchange is essential







I have organised small, informal get-togethers for women who have been residents of the Refuge, and have been housed in suburbs near each other. These meetings have often led to friendships being established and informal support networks developing.

For most of the eight to ten women I am regularly visiting at any one time the immediate main problem I relieve is one of isolation. Frequently, women are housed a considerable distance from their previous support network of neighbours and friends. A woman may find it extremely difficult to maintain contact when she needs to take several small children on several long bus trips to reach her friends. Not being able to afford the high installation and rental costs of a telephone exacerbates this situation.

This isolation frequently produces tension in the parent/child relationship, as the woman is placed under the stress of being the twenty four hour care giver, with infrequent adult contact.

The woman's financial situation usually means she can do little other than live from day to day. As the recipient of welfare or single parent benefit she finds it extremely difficult to meet the costs involved in moving into a She is required to pay at least two weeks rent, pay for the transfer of the telephone to her name, if one is present (rarely) and buy food and furnishings. She can often obtain bedding, and a chair or two from a voluntary welfare agency. These agencies are presently not accepting donations of refrigerators which do not work so most women are without. This means she needs to shop daily usually at the expensive local shop as there is little incentive to take children on several buses to a larger shopping complex or market daily). The convenience goods she requires (because they are less perishable then fresh foods) are generally more expensive than if she could shop weekly for fresh fruit and vegetables. The above situation results in many women finding they gain little from working with me on drawing up a budget there is such a small amount of money left to make any decision over once the essentials have been paid for. I believe that women would be greatly assisted if they received a 'bonus' payment to help them meet the costs of moving into a house.

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The woman's husband/de facto may exacerbate the situation by harrassing her and the children in their new home. I frequently share with and support women through this situation.

Many women appreciate a continuation of the emotional support and friendship they received while living in the Refuge. They find comfort in support, while they grieve about the loss of their relationship with their partner (no matter how horrendous the situation was), adjust to being single again and work their way through the practical difficulties that face a woman along, often with children, and with little money, attempting to start "afresh".

An average working week left me with eight to ten hours for visiting women. Once time is subtracted for travelling, and no-one being at home, I usually visit four to six women a week. A number of other women will telephone me at home to share their experiences. The number of times I visit a woman depends on her needs and the time I have available (i.e. the number of other women I have to visit). Over the past eight months I have attended a number of meetings:

A weekly staff meeting
A weekly to two weekly workers meeting
A monthly collective meeting
A one day collective workshop to examine the role of volunteers in the Refuge.
A weekly meeting, over five weeks, to examine the needs of children in the Refuge.
Two staff review meetings
Narrabundah Childrens Services committee meeting
A weekly meeting, for eight weeks, roster training course, run by collective members to examine ways of working effectively in the Refuge.
'Impact Children have on Parents' conference, organised by the Canberra College of Advanced Education, 12th - 14th October.





Ann

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Somebody Please Love Me or The 4 o'clock in the morning

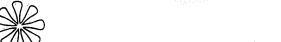
Women's Refuge Blues

I know I'm untidy, silly and careless, Terrible cook, lousy lay and all But I loved you my dear, and all I could hear Is 'Why haven't you swept the hall?'

I tried to be like your mother
To be meek and mild and sweet
But I can't do it my dear, its all such a farce,
She's really a pain in the arse.

I tried to be what <u>you wanted</u>
Supermum, superwife, superlay
I loved you my dear, so why couldn't you see
That all <u>I wanted</u> was you to love <u>me</u>.

I don't want to be your super housewife I want to be me, to stand straight and tall I don't love you anymore, you're really a bore, Will somebody love me, warts and all?



May 1979. - Joanna





Once you were my friend Over and over again You fogged all bad memories And took away the pain

You seemed to help in my despair blotting out my mind

Taking all that was wrong in my life then all the happiness I could find

Now I'm saying Goodbye to you I don't need you anymore Through the love and faith of others
I've opened that new door





*



Alcoholism*

When asked the definition of the word Alcoholic most people will say one of 3 things:

a) "Alcoholics are park bench derelicts"

b) "Alcoholism is inherited"

c) "All Alcoholics drink in the morning"

All these statements are mythical, an alcoholic does not have to drink everyday or constantly to have a drinking problem.

An alcoholic can be someone who drinks "socially" but has a problem because occassionally drinking cause problems for them e.g. depresses them or makes them aggressive — or it could be somebody who drinks every day, all day.

Why do people drink? There are several reasons:

Most people start drinking because it is the "socially acceptable thing to do". Teenagers drink to "keep in good" with their peers - unfortunately quite a few have drinking problems before they reach their 20's as they don't want to feel 'the odd one out' or 'a square'. But the personal need to drink is deeper than the social acceptability, or even the social pressure to drink.

We all respond in different ways to different situations and we all have our own ways of handling fear, loneliness, insecurity or tension etc. One way is by drinking, as bad feelings and inhibitions 'seem to dissapear' because the booze has put a 'temporary fog' over the old brain.

Drinking was the way I taught myself to handle my problems. When I drank, life didn't seem half as bad and I found that it was one time when I felt 'okay' about being myself.

I started drinking on my 18th birthday - before this I'd always sworn that \underline{I} would never drink. I loved the feeling that it gave me - I felt great, and everything seemed great in this 'crazy world'.

So, whenever I had a problem or if I felt angry over something I didn't try to sort the problem out, but I had a drink which made everything okay. But I wasn't fooling anybody - only myself.

I didn't feel I had a drinking problem, I felt it was quite normal to drink the way I did. Although I didn't drink every day, I drank as soon as I was hassled, then soon I found myself making up excuses to drink. It was like I wanted people to say 'its okay to have a drink', I needed approval so as I wouldn't hate myself.

Like most people with a drinking problem I only heard what I wanted to hear. The things like "Don't you think you drink too much?", "slow down" etc, I ignored. I didn't want to know about it.

It wasn't until I was having 'memory blackouts' that I realized that 'maybe' I did have a problem, but I still didn't want to admit it. To give up drinking meant for me that the old feelings of fear and insecurity would come back. It wasn't so much the physical pain of giving up drinking that frightened me, it was the 'mental torture'.

It was when I started waking up in the mornings not being able to remember what had happened the night before that I became worried. The embarressment of having friends tell me what I had done the night before still makes me cringe a little when I think about it.

I finally made the decision in July 1979 to give up drinking after I'd been through a particularly rough time.

From about May I'd been drinking heavily almost every day and during this time I moved into a house with a woman and 2 men. The booze was literally 'laid on tap'. I spent most of my days drinking, and my nights were a complete 'black out'. Everything seemed okay until I started to wake up in bed with one of the men and the woman either side of me. At first I believed them when they told me "nothing had happened" - I didn't want to believe anything else.

This went on for about three weeks before I finally confronted them about it. They told me "Well you were so drunk that we didn't think you'd mind us having a little fun".

The thing that was the most painful, was knowing that I'd gotten myself drunk enough to let these two people use and abuse my body and me not being able to remember it.

My way of handling this was to take an over-dose ending up in hospital for a week. It was during my stay in hospital that I started going to 'Alcoholics Anonymous'. At A.A. I found people from all walks of life that had the same problem as I did - DRINK!

When they told their drinking stories I always related in some way or another to them. Soon I started to believe that I didn't have to drink to solve my problems and that people did accept me as I was. I didn't have to wear a mask all the time as there were people who cared how I was. But most of all I cared how I was.

That was in July 1979 and I'm not saying its been easy since then, far from it. I've busted a few times and each time the climb back up has been harder - but worth it.

I now feel okay about myself. I care how and what people think of me and I care about other people. At the moment I'm not at A.A. I'm lucky to have the help and support I need outside A.A. But I know if things get too rough that A.A. will always accept me back without asking questions.

Maybe I will start drinking again but at the moment I'm not worrying about it. I'm just taking things one day at a time and hoping that my life will keep on improving.

I haven't done it on my own and if it wasn't for the love, care, support and most of all the faith my friends gave me, I don't know where I'd be today. It's to them I say thankyou.



Every Child a Wanted Child

My parents were, at the time, delighted to have me. This is not to say that they haven't had their doubts, over the years. But certainly, in the beginning, they really wanted me. During my 37 years I have been through the usual troubles and traumas of life, and I have always found, when the chips were down, that I was able to face and overcome set-backs and crises. I believe that this basic ability, stability (call it what you will), is entirely due to the foundation of warmth, love and security, given to me by my parents, on which to build my life.

It is a human tragedy that many children are born, unwanted and unloved. Some face neglect, others will become 'battered babies'. The Royal Commission on Human Relationships came to the conclusion that there was sufficient evidence to support the belief that being unwanted was a significant factor in many cases of child abuse. (1)

Child abuse is, today, reaching epidemic proportions in western industrialised countries. American figures show that up to 4 million children are injured each year. (2) In Australia, by using figures from a South Australian study, we can estimate that, at least, 14 thousand children each year are injured, some seriously. (1) Child abuse is believed to be the main cause of death of young children under the age of one. (3) Abuse can take many forms; besides being physically beaten and/or neglected, children are sometimes emotionally abused and/or neglected, some are sexaully abused and/or raped. Much research, into the causes and consequences of the maltreatment of children, has been carried out in recent years.

Almost all studies show that the problem is cyclical (4); that children who are mistreated will see this as the norm, and will have little or no sense of morality in adult life. (5) This is what frightens me most. It is surely a warning to be heeded, now, before we allow further degeneration of basic human standards. Too many people stand back, self righteously, and pass judgement on individual parents, instead of seeing children as a collective responsibility, in which we should all be involved.



There is a basic belief, in society, that all adults are natural parents. This notion is reinforced by the media.(1) People need to be relieved from being subtly pressured into producing children whom they do not want and cannot look after. (6) Childrearing is an extremely demanding task, it can also be a very rewarding one. But in view of the difficulties involved, it seems to me that, the most important, the most necessary prerequisite to having a child, is that you want one. A parent who has had a child without having chosen to do so, is more likely to feel and behave like a 'victim' when problems arise, resenting and even blaming the child.

Unfortunately there is not yet any 100% foolproof method of contraception. Many women, for medical reasons, cannot use the pill or inter uterian devices. The effectiveness of the I.U.D., sterilisation, diaphragm fitting and the contraceptive prescription, depends on the skill of individual doctors. Effectiveness also varies with the quality of instruction by doctors, (1), and many women become pregnant, in spite of using some form of contraception. Young unmarried women account for about 50% of abortions in Australia. The reasons they give for not using contraception include ignorance, misinformation, casual relationships, fear of seeing a doctor and a doctor's refusal to give them contraceptives. (1) Language difficulties make it hard for migrant woman to obtain contraception and some women living in poverty cannot afford it. So, unwanted pregnancies are, still, an inevitable fact of life in Australian society. The choice, for these women, is between adoption, abortion and keeping the unwanted child.

Evidence of the adoption system collected by the Royal Commission on Human Relationships shows, that there needs to be more research on the psychological effects of adoption, on the mother. (1) It is one thing to abort a tiny, shapeless foetus, and quite another to give up a child, which has grown within you over a period of nine months. Many young women, who have their babies adopted, suffer from grief and depression. Among those women who continue to term, and give their babies up for adoption, a higher percentage appear to suffer psychological disturbances than those granted abortion. (1) Some decide to get pregnant again, soon after, even though the circumstances which made them have the first baby adopted, still apply.

Safe, legal abortion, in Australia, are still very difficult to obtain for many women. They must have the money and the time to travel thousands of miles to places where they are available. There is evidence to show that between a third and a half of the women who



are refused legal abortions try to find other (sometimes dangerous) means of ending their pregnancies. A woman can and should be able to choose for herself whether or not she wants to have an abortion. But many young women, having been seen by those around them to be * pregnant, feel pressured to keep the child and are ashamed to admit (to others) that they do not want it.

I believe that women must be freed from social, parental and religious pressures to produce children we do not want. The decision to have an abortion is rarely taken lightly. The decision to have a child should be taken even less lightly. An abortion is over in a few minutes, most children live for years and need to be loves and cherished for a long, long time.

Do the people who talk about 'the right to life' ever stop to think of the consequences of life, to the unwanted child? Do they see the birth of an unwanted child as a punishment for promiscuity? Who are they punishing? Children do not ask to be born and if they are, then they have the right to a certain quality of life. Above all, every child has the right to be wanted.

For the sake of today's children and tomorrow's world, all women who do not want to bear children must have free, easy access to safe abortions.

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FINANCE

STATEMENT OF RECEIPTS AND EXPENDITURE FOR THE PERIOD FROM 1 JULY, 1978 to 30 JUNE, 1979

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Balance at Bank 1 July, 1978			8,264
ADD			•
RECEIPTS			
Capital Territory Health Commission Office of Child Care T.A.B.	52,600.00 4,809.00 3,000.00		
less Rec. for Qbyn. Refuge 200.00 Rent Subscriptions Fees (Children's Holiday Programme)	997.55 15.00 10.00 15.00	· · · · · · · · · · · · · · · · · · ·	*
Bank Interest	431.65	61,878.20	
		01,070,20	
Total:			70,142
LESS	,		
EXPENDITURE			
Salaries Food & other Domestic Travel & Transport Fuel, Light & Power Telephone, Postage and Stationery 2,253.19 less Collections 446.45 Repairs & Maintenance Manchester, Hardware, Minor Appliances Rents, Rates Insurance Capital Expenditure Children's Expenses Heating, Insulation, Curtains Literature, Printing, Film etc. Special Assistance Fund	45,835.65 2,844.14 2,231.23 1,692.52 1,806.74 969.93 1,681.37 1,357.20 910.95 2,445.81 1,213.15 2,815.53 675.64 244.00	*	
Special Assistance Telephone Connection Subscriptions & Conferences Furniture Advertising Miscellaneous	547.50 200.00 178.00 94.75 162.13	67,906.24	*
Balance at Bank, 30 June, 1979		2,236.15	
,,,,,,		1,230,13	
		*	70,14
Less Accrued Expenses at 30 June, 1979	2,118.75		
Balance		\$11.7.40	
•		•	

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Statistics

1 JULY 1978 - 30th JUNE 1979

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Total numbers resident

Women 21

Children 290 (153 under 5 years, 137 over 5 years)

Total bed occupancy: 6,614

Average number of residents per night:

1st	quarter:	19.3	8.0	women	and	11.3	children
	quarter:	13.5	5•4	women	and	8.1	children
-	quarter:	19.3	8.2	women	and	11.1	children
4th	quarter:	20.5	7.7	women	and	12.8	children
			7.3	women	and	10.8	children

Total average: 18.1

The highest monthly occupancy this year was in July 1978 with an average of 12.4 women and 16 children per night. The greatest number on any one night was also in July when there were 20 women and 25 children.

Reasons given for seeking refuge (women only)

Escape from intolerable domestic situation		110
Desertion or rejection by partner	•	16
Fleeing harrassment from separated partner		24
Fleeing parent's home		6
Eviction	-10	19
Homeless/nowhere else to go	*	43
Escape from non-family situation		19
Wanting a rest and time to think		42

These also included:

Violence to self		- 78
Violence to children		21
Mental cruelty	*	67
Partners alcohol problem	· (.	46
Financial problems		40
Other family problem	•	19

Referred to the Refuge by: (women only)

Friend/relative/neighbour Unknown Previously resident Welfare/Social worker Police Hospital/Health Centre Lifeline Media Telephone directory 19% 18% 18% 10% 10% 17% 10% 10% 10% 10% 10% 10% 10% 10% 10% 10			
Unknown 18% Previously resident 17% Welfare/Social worker 10% Police 6% Hospital/Health Centre 5% Lifeline 4% Media 4%	Friend/relative/neighbour		19%
Previously resident 17% Welfare/Social worker 10% Police 6% Hospital/Health Centre 5% Lifeline 4% Media 4%			- · · · · · · · · · · · · · · · · · · ·
Welfare/Social worker Police Hospital/Health Centre Lifeline Media 10% 4%		•	/ -
Welfare/Social worker Police Hospital/Health Centre Lifeline Media 10% 6% 6% 6% 6%	Previously resident	•	• 17%
Police 6% Hospital/Health Centre 5% Lifeline 4% Media 4%	Welfare/Social worker		
Hospital/Health Centre 5% Lifeline 4% Media 4%			10%
Hospital/Health Centre 5% Lifeline 4% Media 4%	Police		6%
Lifeline 4% Media 4%	Hospital/Health Centre		
Media 4%			270
Media 4%	Lifeline	•	4%
4/0	Media		
Telephone directory 4%			4/0
	Telephone directory		4%
		· · · · · · · · · · · · · · · · · · ·	17-

Smith Family/St. Vincent de Paul/Salvation Army
Other Refuge
Legal Aid/Solicitor
Housing Branch
Women's Centre
Other

includes: CES Office

Department of Social Security

Marriage Guidance

Taxi driver

British High Commission

Women's Shopfront Information Service

Number of children accompanying women to the Refuge

No	children	34%	
1	child	23%	
2	children	23%	*
.3	children	15%	••
	children	4%	
6	children	0.5%	
7	children	0.5%	

66% of women came to the Refuge with children. Of the 73 women who came with no children at least 30% had their children elsewhere. The Refuge housed larger families this year, with 20% of women accompanied by 3 or more children. Women with no accompanying children had a much higher proportion of multiple entries, homelessness being their main reason for coming.

Length of stay at the Refuge

1 nig	ht only	27%
More	than one night,	
	than one week	32%
1 to 2	2 weeks	14%
2 to]	3 weeks	7%
3 to 1	4 weeks	6%
4 to (6 weeks	7%
over (6 weeks	7%

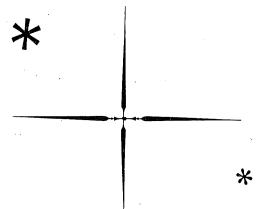
Destination on leaving Refuge

Returned home	27%
Returned home (partner moved out)	9%
Government/emergency housing	16%
Private accommodation	6%
Staying with friends/relatives	15%
Hostel	1%
Caroline Chisolm Refuge	0.5%
Live in job	0.5%
Hospital	2%
Went interstate	3%
Unknown	20%



*

	Occupation of women on entry to the Refuge Professional and managerial White collar Skilled Semi-skilled Unskilled Home duties Social Security benefits	0.5% 8.5% 3% 8% 30%
	(single mothers, widows pensioners, invalid pensioners, unemployment benefits) Student Information not collected 50 Occupation of men/women living with	32%
*	Professional and managerial White collar Skilled Semi-skilled Unskilled Not working Not applicable/information not collected 88	6% 11% 15% 29% 19% 20%



*

*

Thank You

ABC ACT Council of Social Services ACT Schools Authority - Pre Schools Office Ken Batterham Business & Professional Womens! Clubs of Canberra Maria Byron * CCAE University Co-op CHAPS Childrens! Services Sub-Committee * Country Women's Association CTC 7 Laurie Daniels Steve Doney Meredith Edwards Pam Enright Jennifer Fisher Ken Fry & Staff Monica Glenn and Joyce Bayson Fex Goode Victoria Green

Victoria Green
John Hamer
John Haslem
Health Commission
Val Hill
Griffith Primary
John Knight
Ms Langridge

★ Legal Aid Merve McDonald Mancare Mary Mead

Staff at Manuka Occasional Care Jeannie Miller and Minerva Bookshop Richard Murphy

Masonic Lodge Staff of Warrabundah Health Centre Warrabundah R.S.L. New Zealand High Commission

Rivett Playgroup Rotarian clubs - Camberra Belconnen, Camberra Hast Susan Ryan and staff

The Salvation Army Jonathan von Plonies

Toy Warehouse, Fyshwick Tip Top Bakeries

Uniting Church, especially Canberra Central Parish, Afternoon Fellowship







St. Vincert de Paul
Women's Centre, O'Connor
Woden Lutheran Sunday School
Stephen Wenger
Welfare Branch
Gai Pincus and the Womens' Affairs staff
J.B. Youngs, Kingston
Zonta

To everyone in the <u>Ccllective</u> and a special thank you to those who contributed to this Report.



