## SUBMISSION TO THE ROYAL COMMISSION INTO FAMILY VIOLENCE

by

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I have illustrated my submission with images because I struggle with words. Inaddition my submission has been aided with editorial suggestion and the support of Disability Justice Advocacy Inc.

Wittgenstein (1889–1951) developed theory of meaning and philosophy of language "Building on language", which is articulated in his famous observation, that "in the beginning was the deed and language was just refinement".

Domestically in childhood, I witnessed frequent fighting and shouting. Therefore, at the outset of this submission, I would like to make it clear, the unshakably held belief my upbringing was one of a typical, "normal" family, for the time (1950 – 1960's). The only crime my parents were possibly guilty of in relation to my upbringing is a lack of education. They also had very little support with parenting skills. In particular, they failed to realise that me, their youngest child experienced a strong sense of isolation and marginalisation.

This was due in most part, to my being naturally left-handed while visually and creatively gifted. Therefore, unduly challenged, by the rigid schooling curriculum of the time. This was especially so with the associated elements of reading and writing. I struggled but did not know why. Verbal expression quickly became my preferred method and in hindsight greatest downfall.

Image 1.



Image 2/



- 1. This image depicts events commonly witnessed during my childhood. My parents referred to this display of behaviour as "discussion"
- 2. This image depicts what went on behind closed doors. Not witnessed during my childhood. My parents always reconciled their "discussion" before sleeping



The above image really says it all, although a child needs this explained in more ways than just one.

At age 6 ½ my family relocated to a very small island community. The environmental diversity and remoteness from having been born into a multi-generational medium sized inland rural community, was an extremely disruptive experienced. Further the loss of familial supports, (grandparents within walking distance) long developed social and community inclusion fragmented my world in a manner that remains indescribable to this day.

My first recalled experience of violent physical assault occurred when my grade one teacher (at my new school) dragged me in front of the class, lifted up my skirt and pants, proceeding then to smack my exposed bottom. For all in the room (prep and grade one composite) to see. Apparently, the teacher observed me chewing on a piece of paper. Therefore, the deemed fitting punishment. My action/crime was in direct disobedience to the classroom rule "no eating in class". Hence, I became an example of what happens to those who breach the rules.

This led to a lifelong pattern (psychic phenomena), psychological/neuro-plastic "schema" which has been alternatively described as "maladaptive behaviours associated (in this instance) with the pleasure and pain of eating"

Of course, my parents were not informed and my shame at "tarnishing the family name" remains a gateway trigger to self-harm.

There may be "knowing" and understanding of behaviours. There is no undoing, no going back, re-writing the past. There is only hope we can be part of change in social attitudes and recognition that standing by and observing another's pain. Is not part of a solution?

# My childhood became a model and paradigm of eat, sleep, repeat.



Image 3. Conflict resolution with my husband.

Image 4. My imagined mother's method of conflict resolution behind closed doors.

Image 5

Image 6



Image 5. My children were exposed to the same behaviours I had been exposed to.

Image 6. My children have been my way forward, at times my only way. They are my heroes; they are my voice, my reason for living. My children are my purpose.

suggested that I speak more of the effect domestic violence played as a role in my childhood. I do not think that it will be possible to achieve that not through lack of a willing, simply due to unable. Speaking the unspeakable and writing the unprintable. Gives power to the despicable.

During my childhood, I experienced many acts of abuse and bullying schoolyard and sibling. Informed by my brother and sister at 8 ½ that I was adopted and that our parents did not want me. Sexually abused by my older brother and his friends when pre-pubescent. My sister's fiancé beat me one evening while my sister stood by as an observer. My "puppy fat" turning into an eating disorder that lives with me to this day.

The taunting and the teasing seemingly endless. In my final year of schooling, my one friend (shared in a vicious rumour that I was a lesbian) the embarrassment and

grief was not at the possibility of being something other than heterosexual. The embarrassment came from the knowledge that sexually. I had no idea what the word even meant and had to look it up in a dictionary. Grief, at the betrayal and treachery investment in a relationship can produce.

Emotionally neglected by a mother, consumed in her own grief. At the loss of freedom and youth, only to be bound by children, responsibility and accountability. Rules seen and unseen.

Among these described experiences, the most harmful the most destructive the most devastating of all behaviours has been <u>the denial that they occurred</u> and the justification that a child minor. A person under the age of 16, would have the capacity to consent and therefore must be complicit in their own demise. To therefore carry the burden of others actions and behaviours. As somehow, having invited fulfilment of a pseudo-masochistic desire.

The greater pain has been the full knowledge that my displayed behaviours and actions were then transferred to my children, as deserving, abandonment and abuse.

I will not ever be able to rewrite the history but equally I will not live in shame having done the very best I can. Nor will I stand by and condone the voices of gossips who have no better things to do with their time than speak ill about someone else's disadvantage.

Until only very recently my mother maintained the long held view that children could "deserve" to be smacked. I think in part this view has been retained . As, I was the only child rebellious enough to warrant a beating by my father. I'd had a difference of opinion with my mother and had not demonstrated adequate deference for hierarchy. Worse I had the audacity to verbalise "you can lead a horse to water but you can't make it drink". My father demonstrated his authority leaving me markedly bruised from the battering. Point made, he did not extracted an apology.

It seems a complete contradiction we have a proud heritage of Anzacs who laid down their life to allow us the freedom of speech and a life of democracy yet when push comes to shove the fist is always mightier than the voice.

I am yet to see whether pen is mightier than the sword? Personally I live in hope and that is why I'm taking part in this submission. Subjecting myself to a task that conjures up images of swallowing razor blades on a par with enjoyment.

Image 7

Image 8



Image 7. By this time - History repeats itself with the spouse. Not of my father's choosing or like. Already a man skilled with life experience of destructive nature. Lived experience in breakdown of marital relationship and byproduct effect on children.

Image 8. Egocentricity, strategy and game playing were not part of my repertoire when entering into my life commitment with a partner.

Although, secrecy was taught at an early age "what went on in the home stayed in the home".

Gambling "risk-taking" in our family was heavily focused on business and private enterprise endeavour.

Image. 9

Image 10



Image 9. Our dysfunction was equitable

Image 10. A workplace injury led to the beginning and end where the only collateral damage left to pick up the pieces have been our children.

Following many incidents of conflict, in which my parents would variously be involved. Resolution, would often follow as such, my father would retire to his shed and covertly drink from his stash of alcohol. Mother would devour chocolate, (not so secret). These clearly modelled behaviours would go on to have a profound impact on me.

Conflict resolution between my parents had no parameters and a "win at all cost" mentality prevailed in the home. This was expressed as conditional love, which was standardised and measured against individual achievements and rewards. There were benchmarks set by the natural ability and demonstrations of the eldest child, for me. With little or no consideration, or regard, to my personal preferences or biological variation in being left handed.

My upbringing and domestic violence were already a perfect scenario and precursor for current major public health concerns. Especially, in relation to our obesity epidemic, the leading preventable causation of known multi-morbidities such as diabetes, coronary artery disease, chronic obstructive airways disease.

Although workplace bullying would be the hands down winner as precursor for my chosen industry of nursing and community welfare. Here Persistent Pain highlights musculoskeletal disorders, mental health issues and /or maladaptive disorders such as anxiety and depression, substance addiction and abuse. E.g. drugs, alcohol, gambling, sex.

Image 11



Image 11 The social chains that bind, sometimes seen as the not so golden handcuffs of an affluent western society.

These preventable conditions cascade from observed walls of silence, systemic abuse and a sense of futility wrapped up in a process of defensive practice, quality management/assurance and risk assessment. Commercially recognised as "continuous improvement".

Image 15

Image 16





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Image 15. Recognising the problem and escaping the cycle are not necessarily readily achievable

Image 16. With the opportunity to go in different directions choice becomes more relevant.

Image 17



Image 17 We are not ever too old to go back to school. In my childhood I heard the quoted words "When you reflect back on schooldays they will be the happiest days of your life" My early schooldays were spent as the child on the bench this image depicts.

When I look back on them they are the most miserable, unhappy horrible time second only to the decade of my life spent between 40 and 50

What changed? I did! I left my marriage, I took our children and despite my best endeavour to leave them commercially the more secure (my ex-husband to my understanding retains a life insurance policy that pays out a not inconsiderable amount of money should I end my life and my own hands). Following his expressed view he would not be therefore his children and he should be able to obtain something in the way of recouping loss from our 10 new relationship.

I started again I didn't ever take my focus of what was to be in the best interest of my children and after a decade of being subjected to the complete erosion of my selfesteem through terms of reference such as "shit the brains" and "fucking waste of space"

I made the toughest decision I suspect a mother makes. That is to let an "other mother" step in and provide the respite. Enabling children at least once a month to have a childhood instead of provide "carer services" For a chronically unwell mother,

When an 11-year-old is expected to step up into the role of parent, guardian, big brother, protector and much of the time a four-year-old is self raising. Regardless of

political spin. As a mother a survivor of domestic abuse and simply a human being. Nothing I repeat **NOTHING** will sanction the neglect and wilful systemic abuse the decade following my decision to walk away from my home, with nothing more than my children two suitcases and this stigma of mental illness, drug addiction and so many other pejorative and discriminatory terms this submission would be neverending as a story.

Therefore instead I refer this submission to the following references and extracts that have made a world of difference for me and I believe the lives of my children.

I have read **The Truth Is Longer Than a Lie -** Children's Experiences of Abuse and Professional Interventions by Mudaly and Goddard (2006). This body of work really says it all from my perspective and demonstrates the complex nature of the world we live in. Even more so is the complex relationships that we develop as we try to navigate our worldly ways and make sense and meaning of our purpose, at being human. The footsteps we create, pathways we choose to wander and processes we develop, we do so in the hope, that when we are no longer here we will have left the planet better for our being on it and be remembered fondly by others for our endeavours.

In reality, this book focuses on as the title states children's experiences of abuse and professional interventions the "other mother", I refer to earlier, is one of the authors to this title. Neerosh Mudaly and her husband Bala became the surrogate family and parents for my children to ensure they could experience age-appropriate encounters if only once a month.

This relationship as facilitated through the Anglicare foster care system was fraught with difficulty and often tenuous negotiation particularly in light of a service model where someone in my case "the mother" Was required to be demonstrate deviant behaviours in some form. It has not been until recent times I was unable to find a basis for this fundamental thinking where blame/discrimination could come from a place of sanction. Talcott Parsons was an American sociologist who served on the faculty of Harvard University from 1927 to 1973. Parsons wrote extensively on "the role of the sick person" The structured his theories work around the nuclear family of father provider mother nurture and productivity are dual process therefore if either person in the unit became unwell and did not regain their full productivity the behaviours would be deemed as deviant.

This framework of study embraced with fervour by the biomedical model. Provided a means where by, should placebo effect fail to invoke a recovery for any illness without a clear-cut diagnosis. Parsons work ensures a mind body duality. Where the failure to recover led, by this deviance of behaviour. Therefore, labels of malingerer, mad, bad and possibly sad individual are invoked. With little to risk for the clinician. Unfortunately as with all theories, time changes while the term "roll the sick person" is no longer used new language such as "nocebo" effect. Stigma is the outcome and the demonstrated social effect is clear and evident in the loss of power, position, productivity, income et cetera.

Hardly surprising women then, especially for single parent women to become persons most affected by this form of discrimination and labelling.

Who let us down the health system it has to be said doctors, caseworkers and the persons were taught to turn to from childhood when we need help to be safe the police.

The following is an excerpt of my years of journey through to 2010.



I first incurred a serious back injury at work in 1985. It was not able to be evidencebased for five years (at the time of surgery).

I was medically managed, with opiates, sedatives, antidepressants, antiinflammatory and antipsychotics, as progressively my brain liquefied and my body exploded to a massive 110kg with a left foot drop that would cause me to fall over without the slightest inkling that it was going to happen.

If it had not been for a physiotherapist eventually saying she could help no further I have little doubt that I would not be writing these words. I had an MRI scan (new at the time) and had a discogram followed by a multi-level decompression spinal fusion.

The first night post-op remains the most painful night of my life - inclusive of childbirth. The surgeon told me I had the worst back he had operated on in ten years and that the loss of feeling in my leg I was experiencing post-op may return in the coming years.

The doctor that was managing my pain was, and continues to be, a pain specialist and one of the major players in the medico-legal field.

All costs were born by my husband and me but most of all our children, as the cost and strain led to the breakdown of our marriage. My husband left and we fell into poverty. The \$2500 in compensation from my employer (and a non-disclosure agreement) barely helped.

In returning to work at a later stage, I was again injured when a patient fell on me. A little wiser, I claimed compensation only to be strung along for six years by claims officers assuring me I did not require a solicitor. Once more I carried the cost, as there was no information provided or offered except for a verbal "cheer up" on the

other end of the phone and a letter to tell me every couple of months that the voice had changed.

I tried to commit suicide on more than one occasion and would have been successful if not for my children and the love and compassion of a couple of people who came into our lives 13 years ago. We met through the foster care program, they as respite carers and me as a shattered person.

They just happened to be a doctor of social work and a doctor of psychology and what they provided was unconditional love, support and above all faith that I was not "a bad mother" or person.

The one major change that occurred following the second recovery was I found that the insurer was obliged to cover a gym-swim program and again this information came via a physiotherapist. I also found I was entitled to home assistance - and then an occupational therapy assessment suggested I could "manage a sandwich bar".

The injured don't need platitudes or inappropriate job prospects. They need purpose and meaning in their life. They need assistance (support) to keep their families together and their children fed.

Maslow's theory of hierarchy needs to be adhered to. They don't need more drugs.

As my children grew older, I underwent an amazing spiritual event (not religious) and learned the power of positive thinking (they like to call it neurolinguistic programming these days). It gave me the confidence to manage my own care (not fund it) and dismiss the healthcare professionals that were riding the gravy train of insurance.

After returning to work as a nurse, I commenced my own advocacy company, created a program, worked as a director of nursing and my views were being sought for articles in the pharmacy industry, news (the Daily Telegraph) and on SBS radio.

This all came crashing down in 2006 when my car was rear-ended twice in close succession and I sustained a significant whiplash and a closed head injury.

Some months later in 2007 I was admitted to hospital with a severe exacerbation of my condition. After a 10-day admission, my GP received a letter from the treating physician with three words on it: "Pain, analgesia, physio".

I was discharged with a request for a follow-up in one month and a bag of drugs very

similar to those cited in the death of Heath Ledger. In 1997, panadene forte was the second most prescribed drug in Australia but we now seem to have switched to oxycontin (hillbilly heroin).

When are we going to learn? It is a contradiction to assess function while administering fog.

I have not written this tome as an exercise in doctor-bashing, nor to attack the various insurance organisations that I have had to deal with.

If the health economists and politicians are unable or unwilling to provide a more equitable system and medicine is to continue to be practiced in a defensive manner then perhaps "hillbilly heroin" is the answer for all of us, as there is no going back to Woodstock.

Finally, in the words of Mahatma Gandhi:

Keep your thoughts positive, because your thoughts become your words. Keep your words positive, because your words become your behaviours. Keep your behaviours positive, because your behaviours become your habits. Keep your habits positive, because your habits become your values. Keep your values positive, because your values become your destiny.

In 2003 I created a company called Wanda Cook and Associates and initiated a pilot program culminating in 2013. As a cornerstone project and study in change and support for engaging with self-directive pain management. This was a new paradigm shift from the self-management/self-funded messages/strategies currently driven by health economists and compensable insurers

The completion of my Master of Public health degree realised a highly commended award and is demonstration that impairment in reading and writing is no barrier to learning and innovative research. Additionally learning and development is possible within Australia with culturally and linguistically diverse communities need not exclude and indeed should be embraced.

We have developed an online methodology of peer led self-determination and management of persistent pain. The aims contributed to goal two of the National Pain Strategy (NPS) which is

"That of a knowledgeable, supported and empowered consumer, by highlighting peer led self-determination and management through delivery of the latest competencybased educative modalities"

Kikqua therapy alternatively KT (knowledge transfer) is the outcome of a decade and more research and development and can be viewed online at the following sites <u>www.Kikquatherapy.com.au</u> <u>www.kikquaonline.com</u> Please feel free to download the

e-book <u>http://www.kikquatherapy.com.au/e-book.html</u> as visuals and narratives complete the past decade of my journey of survival and ongoing recovery.

### Looking to the future

Currently my company is involved in ongoing discussions to introduce pilot programs focused on engagement to empower through reflective practice and self-directive resilience with participants from cohorts of Primary School students aged 7-11 from culturally and linguistically diverse communities and in collaborative endeavour with the Jigsaw program focused on preventing domestic violence.

In addition, to consultation with several other program providers who deliver ongoing peer led facilitative education for cultural change. Focused on a reduction in covert bullying, inadvertently developed as part of the hangover. From the time when. "Spare the rod and spoil the child" philosophy was heralded. In line with other hierarchical religious dogma and social controls deemed capital punishment and child abuse as acceptable domains. Neuro-plastic frameworks of "monkey see monkey do" **are still alive and well.** 

# Fortunately, more enlightened people, mindfully aware means this method need not continue. Moreover, as such it must stop.

The most recent four Corners program "At Their Mercy" highlights bullying at the highest echelons of the biomedical model. The ripple effect is where Wanda Cook and Associates Pty. Ltd. pick up the challenge. Nurses have long, been held up, as virtues of paragon when in reality, "we are no angels", we are nurses and persons know to "eat their young". Unrealistic expectations on the forerunner imposter syndrome.

http://www.abc.net.au/4corners/stories/2015/05/25/4239823.htm



Image 14



Image 13"A mother's role not necessary as someone to lean on. A mother's role is to make leaning not necessary"

Image 14 From a place of the deepest pain comes the greatest awareness and opportunity for healing (Love)

Image 13

Following a personal crisis in 2013, the final straw breaking the proverbial camel's back, namely mine, my focus shifted further towards the central theme, love and forgiveness reflective practice knowledge is the key question understand and apply (KIKQUA) of "kNOw Pain know self" building on previously developed steps. Having found my voice in 2003 and recognising my vision, learning to argue my case proved to be a completely new ball game for me.

Image 15



Image 15 The people in this image are not known to me although I feel they depict the lifelong journey I have travelled in relation to my own parents.

What starting out as a young couple my parents shared the experience of building a life, raising a family and acquiring wealth? Materially and worldly proud Australians, mindful of their heritage and dedicated to their communities. Their partnership and relationship, hierarchical in structure, equitable in process and always fiercely individual.

Fortunately, hope springs eternal and spirit leaves us, only, with the last mortal breath exhaled. It is possible to restore faith even in severely damaged, brutally battered and marginalised souls, even those left to a unit of ONE such as I and now that of my mother.

I have learned throughout my time here on this planet. The three essential elements of knowledge, skills and motivation can empower people like me having a similar childhood. I believe that passion, undeniably driven by the **unconditional** love of a child. (Who "did not ask to be born") is the essence for achievement. I never felt loved as a child, I felt isolated, I felt I didn't fit in, awkward and odd. I was not wanted nor was I particularly cared for, but provision was made for my survival and I will

always maintain my parents did the best they could with what they had to work with, as has been the same case for me with my children.

The overwhelming difference between my life experience and that of my mother has been my genuine desire for motherhood. An option not afforded my mother in her time and hence her motivation for education before the responsibility of nurturing another life.

**Note:** Since my father's passing seven years ago, my mother has courageously shared many clarifications. From a genuine place of love and in recognition of the past harms (experienced by me in exposure) and her involvement in unwittingly empowering and in perpetration through ignorance. More importantly, she now shares to the best of her ability painful recognition. As a display of genuine endeavour and involvement, for mutual reconciliation and healing.

My ongoing prayers of one day share similar endeavours with my own sons and empowerment for grandson alike.