Summary of Engagement Notes:

Views from Incarcerated Survivors' of abuse and neglect in State and Faith-based care 30 July 2023



The cover of these engagement notes is provided by a member of the Home Ground whānau. Home Ground is a creativity and wellbeing initiative for women in the justice system, carving out space to pause, nurture hope, and activate social change. Home Ground uses creative arts practice (such as theatre, photography, weaving, writing, music and more) as a non-threatening, strengths-based approach to self-empowerment, community connectedness and trauma recovery. Home Ground artists (inside and outside of prison) make creative works that respond to the issues women and whānau face in the justice system. Elyce has been part of the Home Ground whānau since 2021. Elyce's artwork represents her journey through the system, and the importance of hope.

www.homegroundnz.com

About the work Elyce says:

"Hold onto home when you're in jail, hold onto femininity — it gets lost in the grey. Crying is cleansing. Wear your crown even if it's a shitty one. Look beyond where you are, to a higher power and a higher self, keep your dreams alive."

"She screams heartbreak and betrayal yet no one even stopped She screams heartache and capture yet she was instantly dropped She screams a mourning mother whose eyes are red from crying She screams her soul of departure to avoid the fear of dying She screams for honesty and love to cherish forever She screams to god and please keep my mind together She screams of lost hope and searches for one to confide, she screams for a shield so she can run and hide She screams for answers and treasures to seek and find She screams for acceptance only to lose her mind She screams of blinded pain that everyone's too busy to hear She screams silently and drowns in a thousand tears She screams with high pitch enough to make you deaf She screams and screams and screams till she has no breath She screams with hurt and suffering to some it may seem silent She screams with rage and resentment till her mind runs violent She screams for an ending to her misery and torment She screams louder and louder till her heart turns to cement. She screams out loud, but quietly holds it in. She screams for acceptance to god for her committed sin. She screams her heart out till she can finally speak. She says she felt it all, as too strong to be weak."1

By Maia*

¹ Poem from: https://www.rnz.co.nz/news/national/321773/poetry-brings-peace-behind-bars

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Introduction

"I am a survivor of systemic practices of government institutional abuse in care. Dating back 40 years, from multiple boys' homes, corrective training, prison after prison. These institutions taught us violence. I became a creation of these institutions.... I have expressed the need for the government to own its practices and remedy the problem."

The Abuse in Care Royal Commission sought to hear the voices of survivors of abuse and neglect in State care and in the care of faith-based institutions that were incarcerated. This involved working with the Department of Corrections to arrange suitable dates and times to enter into prisons and hear about the experiences of participants.

The engagements that were undertaken by the Royal Commission of Inquiry ('the Inquiry') were led by the participants. Often participants chose to speak about the issues important to them in their current situation that were outside the scope of the Inquiry. It was important to create space for participants to share with the Inquiry on what mattered to them.

The engagements were carried out on behalf of the Inquiry by Tim McKinnel, engagement specialists at All is for All, alongside members of the Inquiry's secretariat.

Engagement Structure

The engagements were predominantly conducted as small group discussions, with survivors volunteering to join. These discussions were survivor-led allowing them to set the agenda for discussions and to exercise agency. This approach was used in recognition that within prison settings, autonomy over decision-making is restricted in most parts of day-to-day life. This was to build trust and foster discussion among survivors. Wellbeing support was present at all engagements.

Methodology

The written notes taken at the engagements have been thematically organised. Verbatim quotes are also included. This approach has captured the rich lived experience and key issues and insights from survivors' that shared their narratives.

Limitations

There are limitations in this engagement process. The Department of Corrections selected the survivors who could volunteer and the time the Inquiry spoke to them. The Inquiry was unable to speak with any male maximum-security prisoners, despite requests to do so. The Inquiry was advised that this was due to staff shortages. Moreover, the Inquiry had to take written notes by hand due to no computers or laptops being allowed inside the prison walls, so some comments may have been missed.

The Inquiry only visited five prisons (of 18 in Aotearoa), potentially limiting the scope of experiences, particularly in respect of Te Waipounamu facilities. However, given the high transfer rate between prisons, this risk is somewhat mitigated.

The group session environment meant some people may have been less comfortable sharing personal information and experiences.

Who did the Inquiry talk to?

With the support of the Department of Corrections, the Abuse in Care Royal Commission engaged with survivors at five prisons. Each visit was developed to suit the needs of each facility, allowing the Inquiry's team to speak to the maximum possible number of participants.

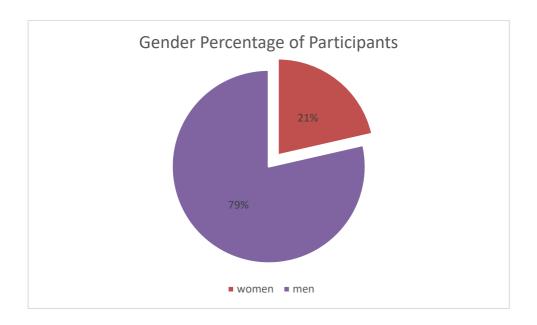
Number of participants

Over the visits the Inquiry heard from **98** incarcerated individuals. The incarcerated individuals represented low, high, and female-maximum security classifications. The Inquiry heard from :

Facility	Number of Survivors
Arohata Prison	5
Waikeria Prison	22
Auckland Regional Women's Corrections Facility	16
Auckland South Corrections Facility	45
Auckland Prison (Paremoremo)	10
Total of participants	98

Participants were male and female

98 people participated in the Inquiry's prison engagements: (21 women and 77 men). The Inquiry did not hear from any person that identified as gender diverse . non-binary or other.



Different ethnicities shared their experiences

The participants weren't asked to identify their ethnicity, but some did as follows:

Ethnicity of participant	Number of Survivors
Māori	16
Māori and Pacific	5
Māori and European	5
European	3
Pacific	4

Of those participants that identified as having Pacific ethnicity – they identified diversely with four different Pacific nations including: Rarotonga, Samoa, Tonga, and Fiji. Of those participants that identified as having both Māori and European ethnicity – the European identify was diverse and included the following ethnicities: Chinese, Italian, Irish or Russian.

Disabled people shared their experiences

Three survivors identified as disabled; one a mobility aid user, one with a processing impairment and one with hearing loss resulting in deafness since childhood.

17% of people that the Inquiry talked to had a known long term disability or impairment:

Impairment / Disability	Number Survivors	of
Head Injury	2	
ADHD	3	
Mild Learning disability / Learning disability	3	
Hearing loss	1	
FASD	1	
Color-blind	1	
Long-term health condition	4	
Long-term injury related to sexual abuse	2	

Survivors from both State and faith-based care shared their experiences

In every engagement most survivors shared that they had been in State care and in its many forms. Fewer people identified as having experienced faith-based care settings.

At Paremoremo for example, six out of 10 survivors said they had survived State care and had experienced abuse within these settings. In the male prisons, more survivors identified with the term 'State care.'

In the women's prisons there was a greater normalisation of interacting with the State and less ability to identify these interactions as under the umbrella of 'State care.' For example, female survivors mentioned a social worker coming to their home, but the survivors were not able to label them as being from the Department of Social Welfare, Child Youth and Family Services or other iterations of State care institutions. Women prisoners struggled to identify or specifically name State care institutions.

In each engagement there were survivors of State or faith-based abuse in care. Care settings spanned: social welfare care settings, faith-based care settings, education settings and law and transitional care settings as defined by the Inquiry's terms of reference. This included (but is not limited to): boys' and girls' homes, unmarried girls' homes, youth justice facilities, mental health institutions, foster care, adoption, Christian girls' homes, borstals, day and boarding schools (covering State and faith-based run schools), and law and transitional care facilities.

Those survivors that mentioned being "placed into care" talked about being present in a number of care facilities including (but not limited to):

- Manurewa boys
- Otara
- Te Puna Wai o Tuhiapo
- Owairaka
- Oakley Boys Home
- Tauranga home
- Hamilton boys home
- Hokio
- Kohitere
- Tokanui
- Waikeria
- Methodist Childrens' home
- Papanui
- Marylands School
- Tongariro detention centre
- Welbourn

- Epuni
- Foster care
- Adoptive parents
- Strathmore home
- Stony Creek health camp
- Felix Donnelly College
- Wesleydale
- St Stephens
- Girls' home
- Boys' home
- Unmarried women's home
- Weymouth Youth Justice facility
- Kingslea
- Eastland
- Marsden school
- Rangipo corrective facility

Key themes from engagements with incarcerated survivors

What happended at home contributed to why people were taken into care

Survivors experienced violence, abuse or neglect at home or in other care settings

Many survivors told the Inquiry that they experienced violence at home and this is how they came to the attention of the State or a faith-based institution. In many instances social workers responded to violence, abuse or neglect at home by uplifting the child or teenager.

Survivors noted that the physical abuse at home was often at the hand of their father. Physical abuse was also experienced from other caregivers that included grandfather's, grandmother's, mother's, stepfather's, stepmother's, uncles, aunts, foster and adoptive parents, and siblings and cousins. And in almost all cases physical abuse was combined with sexual abuse. Survivors told the Inquiry of situations where:

"My birth father forced me to have sex with my cousins, and he would whip me. By 17 I'd got my cousin pregnant..."

"Mum and Dad gave me hidings, but not through hitting, it was by the belt and worst was the jug cord..."

"Dad was a really abusive towards us, physically abusive to me and my sisters..."

"My mother used to drink a lot of alcohol and she was violent.

Was about seven years old when she [mum] broke my leg. What happened was, and I still remember, you know things like that stay in your mind forever. Mum was smacking me while she was giving me a bath and what happened was, I slipped over in the bath and landed on my side and I broke my left leg...she was hitting me while I was crawling back to my room, and yeah. She didn't realise that I'd had a broken leg..."

Many survivors told the Inquiry that they were exposed to violence (including experiencing it and/or witnessing it) at home or school or in care at a young age. Some were exposed before they were 2 years old, others were exposed as teenagers. Most said they were around 5-6 years old.

"I often wondered how life would have been, would have turned out, if I hadn't grown up in a dysfunctional family with drugs, gangs, violence, crime, poverty, sexual abuse and ill-treatment in state care and in my own family ... Maybe I would have had a better chance at life, [not] wasted time and years in the system. I could have been somewhere else, somewhere better, somewhere different..."

Survivors' parents, caregivers or peers had substance use issues

Many survivors had parents, caregivers or peers (e.g., at school) that experienced substance use issues. This also in many instances contributed to them trying and/or becoming alcohol or drug dependent. This led the survivor to not being fed, becoming homeless, being physically abused or becoming violent and thus being picked up by social workers or the police and placed into a care facility.

"By 12, I was in a foster placement in a farm and substance abuse problem. Had a growing subs	
problem by then and I would drink alcohol, smoke	•
smoke marijuana Its now a lifetime ha	<i>1011</i>
My family all smoked a lot of dope	
iviy family all smoked a lot of dope	
My caregiver would bring and teach me how to s	moke synthetic
cannabis. I ended up addicted	
My home had alcohol and drug issu	es
I was removed at 1 because of drugs, alcohol a	and violence
Alcohol and drugs – blocks out the memories	[of abuse]

Survivors felt their whānau were racially targeted by the State or faithbased institution

A few survivors thought that their whānau had been targeted by social workers and/or police as they were Māori or Pacific and so where uplifted into care.

One Pākehā survivor spoke of Police and other State bodies being aware of the violence in their childhood home but not doing anything. However, the survivor said, Māori and Pacific children down the road would be uplifted from their homes for much less violence.

"When you're Pākehā and Police see problems and leave you in the house, wishing you weren't there, I don't know what's better or worse [being removed or staying] there seems to be less support for Pākehā families in poverty, or a lack of responsiveness and this is rooted in racism. We fell under the radar. All you can think of from eight years old is wanting to leave [the house] and wanting to be heard. Police were there all the time, but they didn't act. But the Māori kids across the road were removed from their home. Their [the State's] slow reaction is a form of neglect."

The Inquiry heard from survivors that the Police had the authority to decide who was removed, and survivors felt this meant decisions were rooted in racism and other identity prejudices.

Māori survivors told the Inquiry that the effects of colonisation and racism of social workers included removing them from their whānau. This meant that their whānau and hapū were denied the right to make decisions for them.

Having only one parent/caregiver encouraged the State and Faith-based institutions to place children in care

Some Māori survivors said that they felt pursued by social workers or a faith-based institution after one of their parent's had died and their living parent/caregiver was trying to look of them and their siblings. This would mean that a social worker would come to their house and take them away and place them in a care institution.

After [my] grandmother died, [I] was [taken] in[to] care until 18.

Mother died, and I was adopted at 3.

Being 'hard-up', poor or in unstable housing

Many survivors described struggling for their basic needs (i.e., food, clothing, housing etc) and this contributed to them being taken or placed into care by a social worker.

"I don't think to be put in care was ever the right thing for me or my siblings, my parents needed support, and I believe I would be a different man today..

As some households did not earn enough money to feed the occupants, some children would steal food in order for themselves and often siblings to eat.

Alternatives could have been considered rather than taking or placing the child in care

The State needs to support and invest in whānau

When those taken into care were asked if there were alternative options, most said yes. Many said that what they really needed was support for their parents to learn how to be parents. Many survivors told the Inquiry about stress driven violence in the home as families navigated cultural divides, financial difficulties and dealt with the ongoing impact of unaddressed trauma, which for Māori included the trauma related to ongoing dispossession. The Inquiry heard, social workers often responded to stress-driven violence in the home by uplifting the children. There was an absence of support that would have helped families. Most said staying in their homes would have been better for them than being removed.

""I don't think to be put in care was ever the right thing for me or my siblings, my parents needed support, and I believe I would be a different man today..

"I believe my parents should have been provided support and full clarity around decision-making..."

Broader whānau should have been asked to step-in

Some survivors pointed out they couldn't remain in their family home and indicated that broader whānau was an option that was almost always available but rarely explored by the State. Multiple survivors said that they had older siblings who could've stepped in, but often had no idea that State care was involved with their family. The Inquiry heard that people felt that Oranga Tamariki never looked at wider whānau, and only considered immediate family, and this led to perverse outcomes. One participant said that it should:

"never be straight to Oranga Tamariki."

Some survivors said that pre and post 1999 they were never given the option to go with their family, or presented with any alternatives to social welfare care, and that State care appeared to be the first and only port of call presented to some survivors. Essentially, most told the Inquiry they were never asked what they thought was best for them or included in decision making.

"The kupu of State care, State, is short for estate. At the end of the day, we are estates, assets for the crown. It's not about love, it's about money. They've prepped our pathway, to milk us, we are looked on as an asset, they don't care about the hurt. We've been placed into an unnatural process, without mihimihi."

Role of State in provision of care should be minimised i

Survivors said they believed that the role of government should be minimised. Survivors wanted to see the role of government in care provision significantly diminished.

"Isn't there any other place apart from putting our kids in these juvenile detentions, [that] aggravate them, it's like backing them up against a wall. Flight or fight..."

The Inquiry heard from many survivors that what they really wanted from their care was aroha and that care by the State would not allow for this to happen. One survivor shared his journey to support his whānau, he said

"my brother and his wife (who are both in prison) have 21 children, there were about 15 in care before we whāngai three of them. The kids were with CYFS, we had to full-on fight for them. Let them [CYFS] know we did care and still now, we are checked on. We have to prove ourselves even after all these years. For four years, they'd come to the house, to talk about us, not the kids. The kids would come home and say a lady came to school today, she told us not to tell you, she was from CYFS. Where's the whānau support? Carers outside of family have more trust."

At this point in the discussion another survivor, with his own experience of whangai said:

"a foster carer is treated differently, I can't enrol the moko I look after in kura, because I only have an interim parenting order, if it was [a] Oranga Tamariki [outside of family carer] they'd sort all of that out."

Survivors said that the alternatives to State care are still not supported, promoted, or truly believed in, but instead they are sometimes tolerated.

Survivors said that they had to spend so much time proving themselves that they could not focus on building a family unit within their whānau. Further, the Inquiry heard that many survivors felt there is currently no safe place for them to complain and seek better outcomes for their children or whānau. Particularly for those in prison with children, they felt incredibly isolated from them and unable to safeguard them. Any complaint mechanism must reach behind the wire meaningfully.

Survivors were abused and neglected in care

The Inc	quiry heard the many different accounts of abuse and neglect in care.
	"Harm to me begun in care"
Enterir	ng into State or faith-based care caused trauma
system attachr throug care, s survivo	ors told the Inquiry that they experienced trauma as they entered into the care . Often they were ripped away from familial relationships or peers. The loss of ments, whether those relationships were healthy or not, was difficult to work h. Sometimes survivors were told why they were being taken or placed into ometimes it was a mystery as to why they were entering into care. Many ors acknowledged that due to their family situations why they needed to be ed, yet many were terrified by the process and they suffered and were atised.
Survivo	ors experienced multiple placements
•	survivors told the Inquiry that they were placed in many care settings, and that s traumatic.
	"I was moved to multiple homes, psyc units and borstals"
	"[I] moved all over Aotearoa, from home to home, school to school"

Physically abused in care

All survivors talked about how they had been subjected to physical abuse while in care. The types of physical abuse ranged from being punched, subjected to beatings from staff, foster parents, teachers and peers.

"Moved from abuse in home, to abuse in care [by staff], back to abuse at home — cyclic"

Physical abuse could be given by a staff member, leader in authority, caregiver or peer.

"I was bullied and beaten at St Stephens..."

"On my arrival at eastland, I was made to have all his hair shaved off. The hard labour at the camp was interspersed with racist comments like calling me a 'coconut cunt' or telling me to move my 'black ass'. All the boys were violent toward me... I was sexually abused [by a staff member]..."

Sexually abused in care

Many survivors talked about being sexually abused while in care. Abusers came in many guises – male, female, young and old, caregivers, leaders (State and religious), and staff of institutions. There was also peer-on-peer abuse in care.

"There was a sexual predator at YJ: he pretty much raped us at the beginning, but then we realized we could get stuff out of it..."

"Went from sexual abuse at home to sexual abuse in care"

"Sexual abuse doesn't have to be someone sodomising somebody. It could be just having sex at the age of 13 with a 18-year-old woman who gets you on the crack or because you want to be a gangster or something. It's taken away their childhoods. They're not given the opportunity to be children..." "... [I was] Sexually abused at a boys home, young offenders camp, at Mt eden prison by medical staff, from young offenders camp was [sent] back in[to] state care then more and more prison after that. Never told my parents to this day [that I was sexually abused]; 40 years later." "[I was] groomed/sexually abused by [my] teacher, left school, [and then] came to attention of CYF, ended up with aunt. [I was] sexually abused there, and then sent back home. [I'm then sent to] Pakuranga health camp. I initially enjoyed [the] health camp, but was sexually abused there..." "I found the strip searches very difficult after the sexual abuse I had experienced..." "When 12 [I was] sent to a camp and abused by older boys at [the

health] camp..."

"Robbed the school after being sexually abused by an older student at boarding school. Was sent back home. Thought, fuck the system. Started drinking and taking drugs, then left home. By 15 had started coming to Police attention and would get warnings..."

"[I was in a youth justice residence in the mid-2000's]. In the youth justice residences ... Staff would bring drugs in for you. Staff would get stoned with us. We would smash people up for weed, staff would swap weed for us to bash someone. They let a lot of sex happen in there too. I was always fighting in there. If you were the kingpin you did alright...

Verbally abused, shamed and being made to feel humiliated

Some survivors talked about how they were subjected to verbal abuse in care by staff, caregivers, leaders in authority and peers. They would feel small and belittled. And for some of these survivors this type of maltreatment would trigger frustration, hurt and a need to defend oneself, often leading to an emotional or angry outburst or defensive behavior.

"On entrance into Epuni, I was stripped naked, painted with white paint, and my naked body was stared at, often I was laughed at. I found out later it was lice cream..."

I would get laughed at in front of the class all the time when it was my turn to talk. I would get really angry about all these bad things at school, I was wondering why the kids would laugh at me, and I felt really small..."

Put into solitary confinement

Some survivors talked about how they were placed into solitary confinement as a way to control and manage their perceived bad behaviour.

"I was put in the secure unit of Epuni, locked up for 1-3 days for 'swearing' and 'smoking outside of the designated time' - the secure unit was like a maximum security prison..."

One survivor told the Inquiry how he was sent to many care institutions. At Kingslea he spent most of his time in the secure unit, but he was unclear why:

"[I] spent time in secure at Kingslea, locked in [those] cells. If [I was] good [then I was let] out for meals...

Medical abuse while in care

Within the group the Inquiry spoke to, many people had experienced youth justice care facilities. The Inquiry heard from someone who'd never spoken about their experiences before, except to their mum. This person was 14 at the time and is now 25. The experiences they told the Inquiry about occurred in 2011. The Survivor said:

"I was in Kingsley. Two times a week for two years I was medicated [for migraines]. They inserted it through my anus. Mum didn't know it was happening and looking back now, I wonder why [they did it this way]. My mum was so upset when she found out, there was no talk of consent, no explanation from them about why. It was so uncomfortable; I'd tough out my migraines, so I didn't have to go through that. I'm now 25 and I've never told anyone about this except my mum. At one point, I asked an officer about it, she recommended another medication, but nothing ever changed. My mum never gave permission."

Many Survivors said that they had been subjected to medical abuse (forced medical examinations and procedures or forced to use medication so that their perceived 'bad' or 'naughty' behaviours (e.g behaviours involved asking questions or hitting someone) were managed or controlled).

Survivors told the Inquiry that medication should not be used to control and manage people and only ever as a last resort. Medication led to warped relationships with drugs, drug normalisation and dependencies. The administration practices of drugs in care facilities, many survivors felt, needed to change. Further these survivors believed that less medicalised practices, and more relational practices, including more connection between children and whānau, is needed so isolation does not enable abusive practices.

"[I was sent to] Owairaka; when I was 10. I was given Valium and Mogadon pills. I was pretty wasted a lot of the time; I was walking around there like a zombie, It gave you a drunk, sleepy kind of feeling..."

Emotional abuse

Survivors told the Inquiry that they were subjected to emotional abuse while in care.

"I was put into Owairaka at age 10, then foster homes by 12. In the foster homes; there was no beatings, or sexual overtures, magic, but the problem now, I realise, there was no love. No affection; not their fault, not their biological child..."

Harm was normalised and was part of life in care; many people the Inquiry spoke to felt that as children and young people in care they were treated like criminals before they had committed any crime.

"Unresolved harm, leads to harm for innocent people."

Racial abuse

Survivors felt racism, prejudice and bias meant that people had materially different interactions with the State, despite similar circumstances of need. The Inquiry heard that in the view of this community, racism, bias and prejudice permeates all aspects of the Crown, so in survivor's view emphasis should be on power transfer - away from the Crown, and toward the community.

Subjected to sexist and misogynist attitudes

The Inquiry also heard about ongoing sexism. One 66-year-old woman, who was taken from her family at 7 years old said:

"When you're taken away at seven, if you're brown, you have to go, if you're white you get to stay and then you're abused, finally as you grow up you have a voice. But I still get slammed. I came [into prison] in 2004, I get told sometimes I have to bring back my voice [be less vocal]. I have had two Paroles, with an all-white decision-making panel. Having a voice goes against you. My assertiveness is taken wrongly by officers, how am I supposed to use my voice when it is used against me or misinterpreted?

Corrections needs to learn how to know women who have a voice, I don't like to be shut down."

Survivors told the Inquiry of ongoing belittling of women and misogynism in the care system (and in prisons) must be confronted.

Sent to the wrong care facility as punishment

Some survivors told the Inquiry they were sent to the wrong care facility by either a social worker or Police as a form of punishment for their 'wrong doing' or 'bad behaviour'. For example sone survivors were held in adult prisons as youths, instead of the care setting they were meant to be in (e.g a social welfare residence).

"I was 15 I ended up in Mt Eden pound and then mainstream prison, when I was meant to be in CYFS. They did it to punish me, but it just makes me worse."

Negative staff attitudes can lead to survivors using violence

One life-sentenced prisoner told the Inquiry his younger brother was in a youth justice facility. He spoke of a recent incident where his younger brother was punished. The attack came after a staff member had spoken ill of the prisoner, because the family was known to authorities.

"he [my younger brother] attacked them [care setting staff member.]"

The Inquiry heard that staff in prison settings, respond quickly to individual incidents and view or punish people based on their reactions, and do not take a trauma-informed approach.

"I am not ashamed of what happened to me, I am just damaged"

Survivors also told the Inquiry staff aren't comprehensively taught to reflect on their role in eliciting certain responses from those in their care. Survivors felt staff were not expected to consider how their behaviour may facilitate harmful responses from those in their care, particularly when people have been subjected to violence and harm previously in care institutions by staff and leaders and/or by parents/caregivers or peers.

Epuni was too busy to help me when I was self harming.everyone was just too busy, and especially with about four people looking after I don't know how many boys and girls.

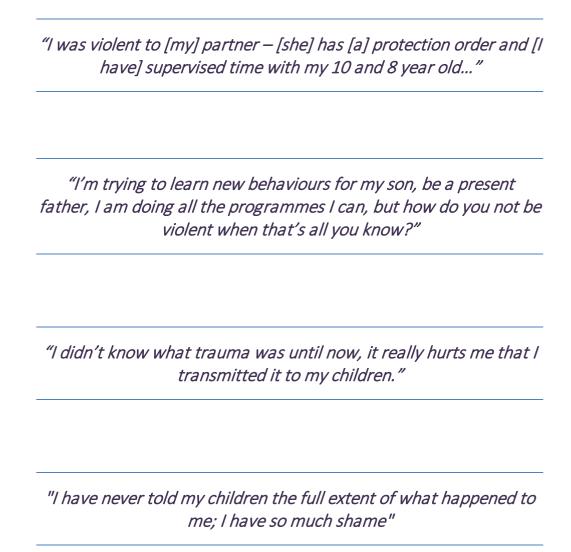
Impacts of abuse and neglect

Survivors discussed many different types of impacts that they have felt, and continue to feel, as a result of being abused and neglected in care. Some impacts have been immediate, others life-ling and profound.

Impacts on intimate and family relationships

Survivors noted that their ability to form good relationships has, and continues to be, impacted. This impacts on their ability to form relationships with people who might become friends, people that are providing services, people in authority, people that might become intimate partners (or have become intimate partners). It also impacts their relationships with parents and siblings, aunts/uncles and cousins, and children and grandchildren.





The impact of the State being the longest relationship held by many survivors

Many survivors told the Inquiry they had lifelong interactions with the Police, social welfare, Child Youth and Family Services (CYFS) or Oranga Tamariki. Most survivors also said that they had ongoing dealings with these State agencies either for their own children or for their grandchildren.

For many survivors, they had been dealing with the State since they were children and now adults and that this was the longest relationship they had in their lives.

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For many survivors, they had been dealing with the State since they were children and now adults and that this was the longest relationship they had in their lives.

Trauma of abuse in care needing to be worked through

Almost all survivors shared with the Inquiry that they do not have a place in prison where they feel comfortable to confront their trauma.

"I am not ashamed of what happened to me, I am just damaged [and need help]..."

Those few who do interact with some form of wellbeing/counselling support, told the Inquiry "it's not a deep discussion about wellbeing with my social worker, they just help to access things," meaning their trauma is most often untreated. The Inquiry heard from survivors that they wouldn't go and ask prison staff for help for the abuse that they had suffered in care.

Most frequently the Inquiry heard that many didn't know what trauma was.

"I didn't know what trauma was until now, it really hurts me that I transmitted it to my children."

Survivors said that trauma is normalised in their lives, and it is intergenerational. The challenge laid down by one participant was how the system could identify the children currently experiencing trauma, before they become adults inflicting that same trauma, and go on to have interactions with State care or end up on a prison pathway. He said:

"Trauma, let me tell you about Trauma. He's an expert by the time he is five years old, he's smashed around like a pinball machine; what is the State going to do to identify that little boy who'd go on to hurt every woman he has a relationship with. Today, I still carry that five-year- old boy. Believing the angrier I get the safer I'll be."

Survivors said that the government needs to better support children not by removing

them from their homes but by helping to break the cycle of intergenerational trauma in families.

However, at the same time survivors also cautioned that focus needs to be on both early interventions with children and families, as well as supports for those who are older and are currently in prison.

"If you only make changes at the beginning [for children in care], then at the end, where we are, [prison] is missed out. When we get out of here, we go back to our children and grandchildren, and we need support too."

Survivors told the Inquiry that this reflects a need to heal and support the community of survivors behind the wire, both as they come out and for those who stay in. Survivors said that trauma must be addressed at all points of the pathway.

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Colonisation effects still occuring and being compounded

The ongoing impact and violence of colonisation, survivors believed, was part of what continues to impact and shape the lives of survivors. Survivors expressed that for many, their families are "still hurting" from the harm colonisation caused.

Loss of Identity "We're numbers in here"

Most survivors the Inquiry spoke with were starved for a connection with their tupuna and whakapapa. No matter their cultural background many felt like they didn't truly know who they were.. One said:

"we have no connection back to family, I've been in and out of here for 45 years."

Feelings of disconnection were much more pronounced for Māori, but present across the board. For those in prison facilities without a Māori cultural unit, this yearning was all the more profound. Moreover, many survivors expressed that their time in State care, had been the start of where they had lost their own identity and agency.

A survivor who was in and out of boys' homes, then later prison said:

"we are systematically dismantled, taught to be someone else".

Being in care contributed to survivors using violence

"I'm totally responsible for my actions, but my propensity to violence is a default because of the historical trauma."

Survivors shared with the Inquiry that their tendency towards violence was learnt and enabled during their time in care.

One 61-year-old survivor at Waikeria said:

"I was 16 and in here [Waikeria] from the boys' homes. I learnt a new level of violence here [at Waikeria]."

Survivors said that the environment of State care made the men (in prison) violent.

Built mistrust for care system and authority

"Mana of the crown keeps getting diminished, because of their own system. We want to trust the crown, but why should we?"

During our engagement, a now 30-year-old man who had experienced transitional care showed the Inquiry the scars he had all over his legs and thighs. He said, "I was 16, when the Police cornered me and set the dogs on me." The dogs ripped open his legs and thighs. He said, "on that day I thought fuck this system." Another person the Inquiry spoke with, part of the prison and state care cohort, said to the Inquiry "we were cuffed, on the ground and the dogs were still set on us." Further, another survivor in prison said that he "broke his wrist after being pushed to the ground once cuffed." Survivors indicated that there was a focus on the aggression or negative responses from inmates, without placing sufficient emphasis on the fact that these responses to authority are driven by lived experiences.

Survivors talked about the impact of this on generations. One survivor said that he was taught to be wary of the police:

"We were wary of Police, we wouldn't go to them [if we needed help.]" Another person shared that this distrust was built into their families, "my dad said, fuck the pigs. That's what I grew up with. We had no trust, we built hatred for authority because that's all we've known and experienced.".

Survivors said that people in authority had systematically and continually failed to intervene for this group as children, which had built a mistrust that followed them through to adult life. The Inquiry heard that this impacted all their relationships with authority, and that race was a factor in this, but it impacted across the board.

As one wahine Māori survivor shared:

"my dad was in the [Mongrel] Mob, my parents were barely home, my siblings were hungry, and I hardly ever had shoes on at school. Instead of being helped I was targeted by a teacher, yelled at for not having shoes. If only she'd known that that morning, I dropped my brother off at kindy because my parents hadn't been home for a week. You could see I wasn't like the other kids; I hardly wore shoes, it was a Pākehā school and the teachers, nobody was listening. I didn't know what a mother was, if I did see her [my mum], it was with her blood splattered down the hallway, beaten, drunk. Police only ever intervened once. At one time I was put in a Pākehā Christian home in [name of town] and raped there at 10. All I know is how to sell drugs, prison, steal... in here there's no drugs, but it's hard to ask for help and to trust the other [people in authority] who hurt us."

The survivor shared with the Inquiry that they bring these lived experiences into every interaction with authority. The survivor said:

"Teachers yelled at me, I felt like saying, what are you yelling at me for I came from a house full of yelling."

The Inquiry was told that they're trying to trust authority more, but the journey is long and requires lifetimes of unlearning. Survivors wanted a system that was responsiveness to their needs and recognises the harm authority has inflicted.

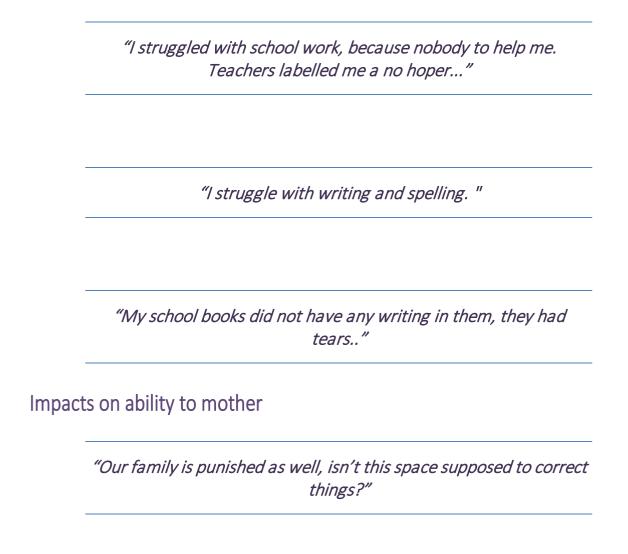
Loss of educational and employment opportunities

Survivors told the Inquiry how their schooling was often interrupted while in care due to not being able to focus and learn due to the abuse and neglect they had suffered.

"I've had no schooling since [I was in that] boys home..."

Some survivors told us that they didn't attend much schooling due to the multiple care placements they had or because they lacked basic school needs (ie school uniform and shoes, stationary etc).

"I never did much schooling. It was my [perceived] antisocial behaviour. I didn't complete a whole primary, I was always being moved." "I moved to lots of schools. Bounced around as moved [foster care] homes..." "I started attending Intermediate school, at first for only two or three hours a day. Even then, I did not go regularly. I didn't have the right school uniform, and I was often sent home [foster care home] from school because of that. I didn't have enough personal clothing either. It took about a month for my social worker to get me a uniform and another two weeks for my social worker to get money for clothing for me..." Some survivors had un-diagnosed learning difficulties that impacted on their educational opportunities. "I struggled [with] learning..." "Had ADHD through school, never diagnosed till [I was] 20..."



Most women the Inquiry spoke with were mothers of children in the care of their family or the State. People told the Inquiry they'd "lost the ability to mother in here [prison]." All the women felt very disconnected from their children as they were given very little opportunity to speak with their families. The Inquiry heard, phone calls only happen at 8am for one side, and in the afternoon for the other side. This means no matter what, phone calls clash with school drop off or pick up. Moreover, the Inquiry heard that the high security side has three phones for 60 women, so most of the time people can't speak to their families within the hour they're unlocked. This means that for those with children in family or State care, they have very little ability to engage with their children. One woman said she gets:

"five-minute phone calls every two weeks that are orchestrated by their [my children's] carer."

Pathway to crime

Many survivors said that crime, and eventually prison, was part of the path that State care set them on.

One participant spoke of foster care exposing him and his siblings to alcohol and said that later becoming an alcoholic drove him to crime. Further, one participant said, "care by the State is upbringing criminals." He went on to explain that once he was taken from his family and into state care at nine years old, and there he was taught to steal cars by 12- and 14-year-olds.

"What crime did I commit at nine years old, being taken away from my family."

Many survivors talked about how being in State care and being abused put them on a trajectory to prison as they did not know how to deal with having been abused and no-one believing them. As a result, some of their behaviors escalated into criminal activity, while some survivors talked about how they were taught how to become a criminal in State care.

"So it just seemed -- because I knew so many other people that went to the detention centre, I just said, "Part and parcel of our life". That was all part. First, we'll do a detention centre. Then we'll do borstal. Then we'll got to jail. It's like it was already mapped out for us. There was no change of circumstances if you know what I mean. It's "This is what you're life's going to be".

"At 14/15 [while in care] was taught to steal cars..."

"Care by the State is upbringing criminals."

"All my [sexual and physical] harm happened in care. I'm now serving time for sexual offending. Started lashing out in response to abuse. I'd set houses on fire with people inside it..."

"...At the end of the day, we are estates, assets for the crown. It's not about love, it's about money. They've prepped our pathway, to milk us, we are looked on as an asset, they don't care about the hurt..."

Surviviors said that little effort has been made to change the pathway from State care to prison - particularly for Māori and Pacific survivors. For example, one rangatahi the Inquiry spoke with who had had interactions with State care previously worked with a wellbeing counsellor for two years, ended up interacting with the justice system and is now in adult prison, instead of in Youth Justice. It is unclear whether the survivor's history in care was ever told to the court. The survivor told the Inquiry that the relationship a person has to State care, and by extension the harm the State has inflicted upon them, should factor consistently into decision-making about sentencing and bail, as well as approaches to rehabilitation and reintegration.

Drugs, alcohol, and violence were also part of people's experience of care settings. This was identified as a catalyst for the care to prison pipeline.

Pathway to gangs

Some survivors talked about how being in multiple care institutions contributed to the formation and proliferation of gangs. Survivors talked about a combination of factors including loss of family connections, being abused and neglected in care, loss of identity, loss of educational and employment opportunities led some of them to join a gang within the care system or join one when they had been released from a care institution and before they entered prison. The Inquiry heard how gangs provided a sense of belonging and attachment, a form of identity and for Māori and Pacific peoples enabled forms of collectivity to emerge (where the wisdom of the group is relied on).

"I became a prospect because I was vulnerable at Epuni and only 13 years old. Then I became patched. I 'returned my jacket' at 30. I never wanted to be a gang member, but I knew I was less vulnerable in the gang. At Epuni fights between rival gangs were enabled by the staff and teachers..."

"It provided a sense of belonging. the gang world..."

"Why did you join the gangs in the first place? [They were my] family. I had more heart to heart talks with my mates than I've done with anyone...

Pathway to sex work

Some survivors told the Inquiry they had turned to sex work while in care or after leaving care.

"I was raped [while in care], the turned to prostitution..."

One survivor talked about how she had been abused in Kingslea, became pregnant after she left that care institution and he child was taken off her by a social worker. However while the survivor was able to have her baby returned a year later, she ended up in sex work so as to support her drugs habit which had become her way to deal with being abused.

Inter-generational impacts

Survivors told the Inquiry that the intergenerational impacts of being in care made everyday life hard. Every aspect of life and interaction was shaped by what had happened in care. The Inquiry heard that repairing the foundation that State and/or faith-based care took away from families is critical. Moreover, the Inquiry heard about the multi-generational impact of a lack of wellbeing in prison. One young father said:

"I can see the effect of the absence of counselling, and it snowballs on my three-year-old who I can tell is struggling with abandonment issues."

Multiple survivors had parents in State or faith-based care and spoke about the impact of this on them and now on their own children. One said:

"I'm 30, one of four children. We're a very broken family. My mom was in Catholic School [care], and I really believe our brokenness all comes back to my mum's time in Catholic School, how she was treated there. I'm now on my third lag, we're strong wāhine toa, but broken. The school really impacted my mum, she can really relate to my exclusion now, being in here [prison] and her being away in that school. Now, for us, getting our own home, a job, a car it's all hard. It shouldn't be but it is, [our] kids are the ones impacted now."

When asked about their desire to have children, some survivors described themselves as "lucky" to have none. With one survivor saying that not having children means avoiding the "war against children" that State and faith-based care represents.

The community worried about their families' wellbeing and sought solutions that would protect their whānau units' wellbeing, not just their own.

Many survivors the Inquiry spoke with are the second generation of their family to be incarcerated, or their child is also incarcerated, and they also had parents that had experienced State care, along with themselves. Survivors did not consider that court systems or prison authorities took that type of information into account in their decision-making.

Complaints, monitoring and oversight processes were absent or didn't (and still don't) work effectively

Complaints, monitoring and oversight processes – what were they?

Some survivors were not clear about what complaints processes or monitoring and oversight processes were in place regarding abuse and neglect in care. If they did raise issues with staff or leaders survivors were not generally believed or ignored.

"What's the point have a government system where you're getting let down?.... I thought people are there to help you get through your life instead of treating you like you're nothing..."

A few survivors thought complaints processes or monitoring and oversight processes hadn't been in existence during 1950-1999 and were a new phenomenon.

Poorly managed complaints processes

Some survivors said that current complaints processes are very poorly managed.

"we can't challenge Police, because they fuck with you back - so you avoid as much as you can - learn to keep your head down even when you are angry at the shit they do to you."

Survivors also felt that their complaints were signed off as 'sorted' when it hadn't been; in fact, most of the time nothing had happened at all. One said,

"[my] made complaints, [are] all marked as complete despite nothing done."

Survivors continue to attempt complaints:

"the staff are there for each other, not us. This includes the Inspector." The feeling among survivors was that complaints were not handled by an independent third party and so were destined to fail or make matters worse. Moreover, many felt they didn't have sufficient visibility over the complaint once it was in process.

"over two years ago I filed a complaint, because [over Covid] I was locked for 11 days. For 11 days I was using soiled bedding [because of no bladder control due to an impairment], I said I needed someone to do washing [while I was locked] but it wasn't ever done. Nothing happened [to the complaint], but the system says complaint closed."

Survivors said that given their experience in care, implementing a proper independent complaint mechanism would go some way towards healing. Some felt this mechanism should be connected across Police, prisons and youth justice facilities. Other survivors said they wanted complaints to be visible to and aligned to Te Tiriti o Waitangi.

A desire for a better future & ideas for change

Desire to prevent ongoing abuse and ensure never happens again

Most survivors talked about a desire to change the system, to prevent ongoing abuse and neglect and ensure that abuse in care never happens again.

"I can't change what happened to me but as long as it doesn't happen to anyone else, that's my concern..."

"I have been in and out of prison since I was a teenager. I want to share my experience because I want to warn the youth about what can happen if you end up in the prison system for most of your life. I want to help the youth understand the importance of making good decisions when you are outside of prison and to gain good supports when you are on the outside, so you can keep out of prison..."

At Paremoremo, a father of a five-year-old expressed that he wished to break the cycle of violence with his son but didn't know how. He was doing the courses available to him in prison but was still left with this question. He said:

"I'm trying to learn new behaviours for my son, be a present father, I am doing all the programmes I can, but how do you not be violent when that's all you know?"

Survivors said they wanted to break the cycle of generational violence, but many said they didn't have a practical circuit breaker available to them that they could identify. Those who could, identified tikanga Māori as their circuit breaker. Some expressed that courses in prison were giving them useful skills in respect of managing their violent tendencies, but many still grappled with how to remedy their propensity to violence when released and exposed to stressors that do not exist in care or prison.

The resounding theme was that while anti-violence courses provided some value, Survivors told the Inquiry that the courses did not alleviate the concern that they would return to those behaviours when survivors are outside prison and faced with life-pressures.

Survivors felt that anti-violence programmes being more readily available, rooted in tikanga Māori and available consistently inside and then outside prison could help to improve outcomes. The Inquiry frequently heard from survivors that tikanga Māori was the heart of helping them change their behaviours; "without tikanga Māori you rip the heart out" said the men at Waikeria.

Breaking inter-generational cycles of violence, abuse and offending important

Most survivors talked about the need to break the cycle of violence, abuse and offending. Survivors outlined a desire to find a better way to deal with their issues so that their children, partners and grandchildren would not be saddled with what had happended to them.

"My experiences growing up have very much shaped the way I parent, and the type of father that I am. For example, when she was little, she broke my girlfriends cell phone. She was only two years old and it was a genuine accident. She came to me immediately and told me what happened. She told me that she broke the phone. I could see that my girlfriend was about to yell at her but I grabbed her and told her it was ok. I picked up the broken phone, threw it on the ground and broke it some more. I told her that it was ok, that it was only a dumb phone. I hugged my daughter and comforted her. My girlfriend asked me why I did not punish her for breaking the phone. I explained that I did not want my daughter to think that every time she told the truth she might get punished."

"I wanted to raise my daughter in such a way that she was fearless. I wanted her to feel like she could do anything in the world. I would feel so much pride watching her climb to the highest slide and trying all sorts of different and new things. That has been one of the many impacts of the things I have suffered. I tried so hard to make sure my daughter was not exposed to the same things that I was. But she has been..."

"My true nature is not violent, my behaviour was a product of the extreme abuse I'd suffered throughout my life..."

Desire to be a good role model

Some survivors talked about wanting to become a good role model for their children, and some acknowledged that they didn't know where to start.

"...my criminal activity and my drug addiction has taken precedent over me being there as a father for my children, you know what I mean, and these are things that I have to live with and, you know, every night in my cell my heart breaks because I miss my children, you know what I mean. So, you know, I'm not perfect yet, but, like, I'm hoping I get myself to a place where, you know, I can be out there with my children, out living a life, you know what I mean. But if nothing else, you know, I can still -- I've still got a lot of knowledge and, you know, I learned how to motivate my boys and my daughter..."

Reconnecting with my family and community is important

Many survivors talked about how they had lost their connection with loved ones and their identity.

Survivors felt there was power in knowing who they are, and they wanted to know themselves, be grounded in their history and feel connected back to their lineage and, their families. Survivors talked about the need to re-establish connection with their family whether it be parents and siblings, or partner and children, or grandchildren.

"... I want my whanau to understand the way I am, I also just want to be normal and be accepted. I don't want to hold the stigma of having gone through care and spent so much time in prison. "

"...Don't give up on kids, no matter how complex they are, Stick with them. I want to, I pine to see my family and have a relationship with them, to love..."

Reconnection with culture and identity

Throughout this engagement process, the solutions survivors talked about most often were rooted in te ao Māori and tikanga Māori, including from non-Māori survivors. The survivors wanted to reconnect with culture; be it Pacific cultures, Māori, Deaf culture or their ethnic culture as part of what was helping them, what they needed, or what they yearned for.

Survivors said that reconnecting people to their culture and lineage as well as their individual or collective identity was important. From Māori particularly, the Inquiry heard that "whakapapa is the basis for [our] change."

The Inquiry heard that the State's perception of someone's identity influences their response. For example, one incarcerated survivor who is also a gang whānau member said:

"we're targeted because our partners are gang members, our children are gang members. Being in the gang, you can live a good life, but because of what we look like we're always targeted. My husband and kids are tattooed head to toe, [they are] always targeted."

The Inquiry heard that more programmes-centred around tikanga Māori, and whakapapa would help, but ultimately, these things will always be constrained by operating in a colonial system.

The male survivors at Auckland South specifically called for cultural support to be strengthened outside prison. The survivors said they need ongoing cultural support and tikanga Māori in order to sustain their lives on the outside. They believe that ongoing cultural support is essential for their reconnection into the family unit..

Those survivors in the Pacific unit at Auckland South told the Inquiry similar perspectives about the impact of their culture. One person, who had been in foster care, elected to stay in prison longer to remain in the cultural unit. He said:

"I delayed the programmes I need for parole until 2024 so I could stay doing these [Pacific] programmes in our unit, with the culture."

Like the Māori unit, the content in the Pacific unit is driven by the men inside the unit. "The reconnection is what I need," a survivor said. Other men in the Pacific unit supported this, with one saying:

"culture helps me more than any programme, but the screws can shut down our culture programmes at any time."

Survivors said that within the current system, cultural reconnection is vital to these men.

Investing in programmes that improve a survivor's life outcomes

Survivors said that access to fit for purpose support programmes is important for their healing, as part of interrupting the care to prison pipeline.

The Inquiry heard that frequently groups of survivors in prison are without access to any rehabilitative or educational programmes in prison, except those that are prisoner led, which must first be sanctioned by staff. One survivor said:

"Corrections [programmes] attend to the accident, rather than prevent it".

The access to support programmes varied from facility to facility, however most survivors the Inquiry spoke to felt that while the courses provided some useful skills, the availability and suitability of courses was woefully inadequate and often programmes just 'ticked boxes' for the Department of Corrections and the New Zealand Parole Board. When the Inquiry asked the survivors in Paremoremo about programmes, they all laughed and said:

"what programmes? We had job training at the boys' home, we don't have that here."

At the time the Inquiry visited, the male survivors said they had two programmes running for a maximum of 10 weeks. Survivors at other facilities said there was one programme running for all in high security. The Inquiry was told by some female survivors they had to choose between a course and a job – they could not access both. Survivors said:

"if you're on course, you can't have a job in the prison, they [Department of Corrections] say "what do you prefer" of course we pick jobs, more time out [of our cell.]".

The male survivors at Paremoremo told the Inquiry the classes have waitlists; one man said he had been on programme waitlists for three years.

"We just do our time, nothing to gain"

A critical problem expressed by many survivors was how prison sentences impact access to programmes. At the time of our visit, survivors said those sentenced to short periods of incarceration or those on remand had no access to programmes. For example, one said;

"I'm on a four-to-five-month lag. Nothing is offered because it is short, so we go back to the same thing."

Similarly, one life sentenced prisoner, with experience in State care, said that he hasn't been able to participate in programmes because of such long wait times; he is sentenced to more than 20 years in prison. He said:

"It's like me having a cough, it turns into rheumatic fever, you give me no medicine, it turns into cancer, and you give me medicine then."

Of specific concern to the male survivors at Paremoremo was the absence of a Māori focus unit. A survivor said: "we need more kapa-haka, more tikanga Māori, we need cultural support on the outside and in prison." Another said, "I got my level two [certificate] in Te Reo Māori, which means I can teach. It took me 30 years, they kept roadblocking it."

The survivors in Paremoremo expressed a desire for parenting courses, with some saying there is "no support for fathers" and others concerned about how they'll parent when they're on the outside.

"Courses have taught me some tools to manage my feelings, but I am worried about how I'll manage when he [my son] is older without becoming violent."

Survivors believed readily available parenting courses and support to teach people how to be healthy parents will go some way in healing survivors of abuse and neglect in care in prison.

Many of the male survivors the Inquiry spoke to wanted to improve themselves individually as fathers, men and citizens. They didn't speak as much as the women prisoners about the impact of their incarceration on their families, children, or loved ones.

Ultimately, the Inquiry largely heard that the delivery of programmes or supports is failing; one person told the Inquiry:

"I came in a bank robber, I left [prison] the first time only knowing how to rob a bank in 10 new ways."

In our experience many survivors felt like the true solution was to bring down the wire in its current form. However, in the words of one, "admitting it's not working, requires admitting a lifetime of failure". The common belief is the Crown would not do this. What many survivors the Inquiry spoke to sought was, as one man told the Inquiry for the "government to own their practices."

One survivor suggested, at very least, be a multi-agency funding commitment to programmes behind the wire in recognition of the enduring harm inflicted by government bodies on care survivors who are now in prison. Another specific suggestion made was to build stages of programmes together so that they could be a "one stop shop in the same place." The Inquiry was also told to make tikanga Māori programmes consistent so

"local people [have the] ability to remain in their regions, and give them local knowledge, give people the ability to stay with family. This means safer environments for staff and those behind the wire".

A survivor summarised it as:

"uphold the duty of care under article two of Te Tiriti; protection of Taonga Tuku Iho."

Desire to learn and broaden one's horizons

Survivors expressed a real desire for learning and education as a way of healing. Most survivors the Inquiry spoke with shared that their educational pursuits were not supported by prison management or staff. For many survivors this compounds an already significant disadvantage they did not receive an education during their time in care.

A 30-year-old participant shared with the Inquiry that she has obtained NCEA level 1 in prison. She said her NCEA achievement was

"all self-done." "They're [Department of Corrections] against education,"

"I had to fight for my art supplies for the [NCEA] course with the screws [Corrections Officer] even though PCO [Principal Corrections Officer] signed off."

The Inquiry heard from survivors that they have learnt vocational skills in prison from peers. One participant said:

"most of my learning happened in prison."

Peer Leadership

"What this whare is achieving and leaving behind is because of the tenacity of the men, not Corrections."

The majority of survivors at Auckland South had life-long interactions with State care. Some were removed from their families as babies and now were interacting with the State on behalf of their mokopuna. They said they have access to both a Māori and a Pacific cultural unit. Survivors said that their culture is their solution.

"tikanga Māori is the solution. The knowledge about tikanga Māori is passed onto the tane, by the tane"

Across facilities the Inquiry heard that prisoners were the best teachers of tikanga Māori, to one another. At Auckland South a survivor said:

"the culture in the Māori unit makes a difference, but we've passed it on to each other here; we don't have the support of management."

The men in the Pacific unit felt the same. Many said they felt they had even less support than those in the Māori unit. One person in Auckland South said:

"The culture in here is directed by us, it is not actively supported by management, it is only allowed to occur."

Some of the survivors in the Pacific unit told the Inquiry that they're running their own language programmes. A participant shared that:

"foster care disconnected me from my culture."

He said re-learning his language, supported by his peers, has been revolutionary.

The Inquiry consistently heard that any positive improvement possible for this community was largely self-driven. One person said that largely:

"[the] staff don't want to heal these men."

Moreover, the Inquiry heard from multiple people that they felt Hōkai Rangi, the Department of Corrections' document that expresses commitment to delivering great outcomes with and for Māori in care and their whānau is "window dressing" and many said that they couldn't point to anything that has changed.

Survivors said that provisions for Māori or Pacific cultural learning and values within the prison system will never be a complete solution for survivors because these cultural values will always remain restrained by the colonial and Eurocentric system. Ultimately, there was a desire for the criminal justice system to re-indigenised, and this requires a re-build of the system, and redirection of resources, for the next generation of people to unlearn and relearn.

"In Te Ao Māori, it starts with our tamariki, and that's where the whole care system needs to start. I've had to teach my babies about tikanga Māori, but not everyone is in the same position to do that."

"Get the Matai's to help people talk about abuse and guide them without judgement, rather than tell them to internalise it and pray about it."

The feeling among survivors was that before transitioning to an alternative system, communities had to be enabled and upskilled. To highlight this point, one survivor said the Inquiry:

"our people aren't ready for our own system because we remain still affected by the colonial structure."

Ultimately, the Inquiry largely heard that the delivery of programmes or supports is failing; one person told the Inquiry:

"I came in a bank robber, I left [prison] the first time only knowing how to rob a bank in 10 new ways."

Many survivors felt like the true solution was to "bring down the wire" in its current form. However, in the words of one, "admitting it's not working, requires admitting a lifetime of failure". The common belief amongst survivors is the Crown would not do this. What many survivors the Inquiry spoke to sought was, for the "government to own their practices."

One survivor suggested, at very least, there be a multi-agency and multi-year funding commitment to programmes behind the wire in recognition of the enduring harm inflicted by government bodies on care survivors who are now in prison. Another specific suggestion made was to build stages of programmes together so that they could be a "one stop shop in the same place." The Inquiry was also told to make tikanga Māori programmes consistent so

"local people [have the] ability to remain in their regions, and give them local knowledge, give people the ability to stay with family. This means safer environments for staff and those behind the wire".

A survivor summarised it as:

"uphold the duty of care under article two of Te Tiriti; protection of Taonga Tuku Iho."

Obtaining Support

"They're beaten down and expected to rise on their own."

Survivors require multidisciplinary support and the Inquiry heard that instead of being guided through available resources (which are insufficient), prisoners are left to navigate support options by themselves.

"We're never shown where to find support, we are expected to find it ourselves"

Further, there is an absence of advance planning for support, the Inquiry heard that often available supports are only allocated close to the end of sentence. A participant felt:

"we are given no tools for a plan during our time here, we are set up to fail when we leave."

Further, survivors said that they are left to navigate available supports alone and as a result often do not obtain what they need. Some survivors made it clear that they would have been straight back into offending if they did not have third-party support from providers like Salvation Army who helped them to obtain services.

Survivors whose trauma is intergenerational, and experiences of institutionalisation are often ingrained, the expectation of self-agency to navigate and find support is difficult survivors told the Inquiry. However, by the same token, reliance on a third-party to access support is not a solution. Survivors felt they needed greater advance planning and navigation support so incarcerated whānau can better understand what's available to them, well before they're out the gate. Moreover, survivors believed that there is a need to transition the whole prism through which supports are delivered. As the Inquiry heard:

"[it's about] reframing what is needed for us, [instead of assuming] ask us what we need."

Survivors across the men's and women's prisons told the Inquiry that they weren't ever asked what they need. The feeling was that they're passive benefactors, rather than active shapers, of the supports made available to them - and for supports to truly work this must change. Survivors told the Inquiry that as they were in prison, the State is once more telling them what to do, just as was the case when they were in care. For many, survivors said that the State has never listened to them or given them agency. Survivors said that as a result of this approach they have had limited opportunity to develop both an individual and collective capacity to take true command over their lives, and that this blunted their ability to become who they were meant to be.

To change this, the Inquiry heard from survivors that investment is needed in guiding and supporting the community to design solutions. As one person said, "we're not allowed to find the solution, we're told what it is. Let us find it." Further, the Inquiry heard: "we need to have a kōrero about what is actually helpful, a kōrero about the name [Department of Corrections] is a good place to start. Nothing is being corrected or correct here."

As one participant said, "it doesn't matter the plans they give you; I don't know how to adjust. Merely being given a plan, that you are not an active participant in shaping your life is not helpful." The Inquiry was advised that such an approach would not help anyone to adjust and reintegrate back into family and community life. Survivors said that the development of plans must be led by the incarcerated person, with the staff providing supporting infrastructure.

Moreover, there needs to be less red tape once supports are made available. One participant who had previously experienced State care settings in our scope, said:

"When I got out of prison, I tried for nine weeks to work with MSD [Ministry of Social Development] to get the benefit, I turned up every day. I gave it a decent effort, but I would have starved; I went back to dealing [drugs]."

For survivors who had been on long sentences, they expressed that things like obtaining an ID and a proof of address are incredibly difficult and these are the things you need to access support. To assist the community to stay outside the wire, it is critical to remove the complexities and red tape surrounding these supports. Survivors said that the process and red tape for support should scale up or down depending on the capacity of the community. The Inquiry heard that Work and Income NZ preparations took three months for example to be set-up, which was too long and bureaucratic, and not sustainable as it left survivors with nothing until Work and Income support became available. As a result, this meant for some survivors the only way to survive was to seek support through criminal activities to support their family and themselves – to eat, drink and live in a house. Survivors told the Inquiry that this 3-month WINZ process does not support reduction in recidivism. Multiple survivors told the Inquiry that the process was so complex they thought 'why bother'.

Moreover, multiple survivors shared with the Inquiry that obtaining support was so hard they were happier going back to prison. Survivors explained prison was their 'grounding.' One survivor said:

"When I was arrested, the next two weeks (in cells) were the happiest I'd been in a while [since release] - the pressure of life was gone. I didn't have to jump through hoops to access medication I needed; I didn't need to worry about rent. Coming back to jail was the happiest I'd been in a long time."

In some facilities, many said they couldn't even access the library in the prison themselves because of their security setting.

Apologies

Survivors said that they want real apologies from the leaders of the institutions that perpetrated the abuse and neglect. The apologies needed to be from current and past leaders and not issued through media statements. They had to be in person.

Survivors said that apologies must acknowledge that the State and faith-based leaders were wrong and take responsibility, convey genuine remorse and sorrw for the hurt, trauma, abuise and neglect that was caused, explain what happended and why, offer concrete steps they will take to rectify the situation and prevent similar issues in the future, avoid blaming others and be receptive to survivors responses and be ready to address those concerns.

Apology for colonisation

"We need an apology for that historic harm."

Māori survivors said that tailored apologies for the historic harm of colonisation could be a step toward healing and repairing their families. The Inquiry heard that such an apology would only be healing if was accompanied by genuine behavioural and system changes.

Re-creating Maatua Whangai programmes and spaces in communities for healing

A leader in Auckland South's Māori focused unit, who had experience of State care, said "Maatua Whāngai worked." He said:

"the intentions of Maatua Whāngai were clear: place Māori with whānau-iwi, take them out of institutions"

Maatua Whāngai was a policy for less than a decade (1983-1992³) and the incarcerated prisoners the Inquiry spoke to agreed that this policy should be protected and part of the solutions put forward; and its fundamental principles work not just for Māori communities but for all who are faced with the possibility of state care.

Another suggestion survivors made was to create more "healing spaces" like Rāngatahi Centres, some of the cohort said they "grew up in these." One person said: "Helplines, what's that going to do? We need healing spaces" there is a need for physical spaces in the community, led by marae and other community entities where talanoa and connection can happen to support children and families.

Funding for foster carers to change

The Inquiry also heard there is a need to change the funding given to foster carers. Survivors felt that people fostered or cared for their children "for money" and this wasn't aroha centred. Attaching funding to certain behaviours, like facilitating connections with whānau, is one suggestion by the community to address this perception.

Financial Literacy needed by survivors

"Our only practical learning was from drug dealers."

Many survivors said practical financial education and financial literacy assistance would have aided them to get off the path they were placed on as young people in care. Some survivors told other survivors that drug dealers were their financial educators. Another said:

"We sell drugs because nobody likes being poor."

Changes to how Oranga Tamariki operates is required

Many survivors were eager to tell the Inquiry about their ideas for the improvement of the current care and protection system.

Survivors told the Inquiry that greater communication is needed from Oranga Tamariki. The common theme among what the Inquiry heard was the feeling that Oranga Tamariki doesn't exist to support whānau.

"Oranga Tamariki, MSD or the State isn't going to tell you how to navigate the system, you have to know. They aren't going to help you keep your family together."

In support of this, one survivor spoke of his recent dealings with Oranga Tamariki saying "the option we were given with support for our children was only 'give them up'."

Currently, power and funding rests largely with Oranga Tamariki, and survivors often felt this should not be the case. Most of the time survivors largely felt that Oranga Tamariki should be disestablished, and any care system re-built away from the Crown. The Inquiry heard from a youth worker, that is currently incarcerated, that Oranga Tamariki limits communication with whānau, which he always found troubling; "when you're in a situation like that, all a boy wants to do is hear his whānau voice" he told the Inquiry. He felt there was a need to give providers more autonomy to support and serve their community in a tailored way, he told the Inquiry there is a need to strip Oranga Tamariki of its considerable power.

Further, the Inquiry heard from survivors that they believe Oranga Tamariki [OT] has too much ability to step into and make judgments upon the parenting and discipline choices of families - often, without understanding the cultural or generational context. For example, one woman said:

"it's more difficult for parents to discipline their kids now. They can't give them a hiding, or they're punished by OT. OT believes they're helping, but they're not. It's what they think we need. When we get punished for disciplining our kid because they're selling dope, and by the time we're back home they're selling meth, that's not OT protecting children."

Survivors told the Inquiry that violence is seen as both the problem and the solution. It suggests that support for whānau is so woefully lacking that there is a tendency to still believe that violence is the solution even when it did not work for them.

Poverty needs to be addressed

Survivors said that structural changes addressing poverty are necessary. They said without resources, poverty significantly impacts individuals' and whānau wellbeing, hinders societal development, perpetrates cycles of disadvantage, impacts aspects of health, education, and economic growth across communities. Addressing poverty would be crucial in creating a more equitable and prosperous society for all (not just some).

Wellbeing and healing trauma programmes required

"They don't take us to mental health support, maybe in the next lag [laughs]"

Survivors told the Inquiry across the board that access to counselling is woefully inadequate if not non-existent. At one facility, the Inquiry heard some people see their case manager once a month, because of their own tenacity to ensure this happens, but otherwise it doesn't. At this facility, there are two case managers for the whole prison, survivors said. Some said that wellbeing support was not offered to you until you 'played up'. Many shared that they feel psychologists are here for the "Department of Corrections, not us and that psychologists' concerns are with diagnosis, not with addressing the issues that led to their lived experiences".

Many survivors spoke about not being able to name trauma or emotions:

"When you can't name an emotion that you've always repeated, of course you're a timebomb. You do the programmes, but without culture it feels like a trap, that's where the future is connecting cultural and clinical."

The male survivors said that culture has enabled them to access wellbeing, often for the first time, in a way they understand. The externally run programme at Waikeria, which brings together tikanga Māori and cognitive therapy has been particularly successful. The survivors told the Inquiry the programme taught them "to articulate back to the parole board, so they believed me." Survivors told the Inquiry consistently that the successful wellbeing initiatives they had been involved in had all been rooted in tikanga Māori. None were medicalised or standardised. In the words of one participant, "I truly believe tikanga Māori has the real potential to turn the tide."

Moreover, survivors at Auckland South and Waikeria shared that they feel unsure about how they're supposed to speak to the counsellors and wellbeing staff in prison. When they speak in a way that feels natural to them, with slang for example, this isn't understood by staff who often use it to further 'diagnose' them. One male survivor summed it up by saying

"the system is not worded for us"

"we have our own culture, but they don't understand our language;
we have to learn theirs to get support".

Survivors said the delivery of support should be by those who understand them, or effort should be made for them to speak the language of survivors behind the wire. The Inquiry heard from male survivors that they often don't feel comfortable speaking with Department of Corrections wellbeing staff or psychologists because they are frequently young women with little relevant life experience. The group feels like they wouldn't open up to someone who they feel doesn't have similar lived experiences or experiences of trauma.

There is a need for wellbeing staff to better reflect the group. The Inquiry heard from survivors that they wanted to share their skills and teach others in their unit. As one said,

"hurt people can heal people"

In the Pacific unit at Auckland South, the male survivors said that they look out for each other's mental health commenting that there is a general lack of resources and a need for culturally competent wellbeing providers. The Pacific Cultural Supporter at Auckland South (who is one person) has a great relationship with the unit, survivors told the Inquiry. They said more wellbeing support of this kind, not from authority figures, but from peers, is critical.

Further, the Inquiry heard that people don't hit the emergency buttons in their cells if they feel in distress, because often this goes unanswered.

"When we play up, they're right there"

"One lady had a heart condition and needed her medication. Her emergency button went unanswered".

The Inquiry heard that there is a need for more robust wellbeing evaluation, check-ins and wellbeing support access, right now it's mostly non-existent.

One account that was shared with the Inquiry was by a mobility aid user, who said

"when [my] psychology [sessions] stopped because staff left, I admitted myself to ISU [Intervention and Support Unit] because I was worried for my wellbeing, I was in for one night, they [staff] came in and said 'I have to take your [mobility aid] off you, because you might do something with it'. My [mobility aid] is my legs, so I refused. They said, I mustn't be unwell then, I was sent back to the unit without support from ISU."

Survivors said that red tape and procedural rules trump access to wellbeing, and these roadblocks must be confronted and changed.

The cohort of survivors shared with the Inquiry that in each of their units were people with mental distress. One said: "She's always locked, screaming, they do nothing." Accordingly, this points to ongoing poor wellbeing, and continuing trauma for this cohort of survivors of State care.

Survivors with physical support needs said the wellbeing is not any better. A mobility aid user in the cohort was using a prison issued mobility aid up until two years ago. She said that chair had no breaks, flat tires, and was basically just a seat. This would prove harmful to the person's posture. The person said:

"I am meant to have botox for bladder control every 9 months. I have had it twice in five years in here, because of this, I can't control my bladder. I consistently soil myself and have to sit in the urine. Urine, they tell me there's nothing they can do [because I have used up my showers], they say that I'm "not special. There is no recognition or understanding of my disability."

This was echoed by a deaf² person the Inquiry spoke to, who had been in State care. He said that during his sentencing, time in cells and now in prison people thought he was "unemotional" but he couldn't hear what they were saying.

The Inquiry heard from survivors that counselling rooms in some facilities are not accessible, for some, neither is the AVL space, and ramps have only been installed recently. This significantly limits disabled people behind the wire. The Inquiry was told there is a need for consistent accessibility standards and a specific accessible unit was asked for.

Additionally, the Inquiry was told of consistent efforts to break the spirit of the survivors, already broken by State care. One said,

"recently, all our cells were tossed, [our approved] property taken, it was traumatic, like a Police raid. Screws kicking gifts made by children, laughing at [our] family photos. Art that counted toward my [NCEA] grade was thrown out."

Survivors told the Inquiry there is a systemic disempowering and diminishing of the community's wellbeing that is commonplace. This impacts on the day-to-day life of the group. The Inquiry heard from one person who been in State care: "as soon as I see more than one officer, I drop to my knees." Survivors talked about the power imbalance being the same behaviour they experienced in State care.

² Intentionally lower-case d as the person was functionally deaf and did not indicate involvement with Deaf culture.

Re-integrating back into family and community life

"For parole the concern is not about who you are, it's about what you might do."

People often felt that the only difference between prison and parole is you lock your own door. "They're still waiting for you to fail in the same way", the Inquiry was told. Everyone the Inquiry spoke to wanted to succeed on the outside and didn't want to get into trouble, but felt it was so easy for them to because the 'support' parole offered was really more control over the person and punishment for any slip-ups. Meaningful support was not offered, the Inquiry heard. One of those struggling with addiction shared "if you lapse on drugs, you're given no support, just recalled." Another in the group said, "I am on my third recall, I do drugs because I have no one to talk to about how I am feeling, give me someone to talk to." There is a vital need, the Inquiry heard, to reform parole rules and recall, particularly for those with experience of State care whose behaviours that may lead to recall, may be a trauma response. The Inquiry heard that parole is about control, like prison.

One example the Inquiry was told from a survivor was:

"when I was on the bracelet, I asked for leave to help my kids [leave takes time to be processed], they needed me [one was in hospital] I wanted to do the right thing, but am I supposed to stay here while my family falls apart? I eventually chopped it [bracelet] off. Either way, I wasn't winning."

This person ended up turning back to drugs after cutting off their electronic monitor. Parole conditions being responsive to whānau needs could help the survivor group succeed outside the wire. Every survivor the Inquiry spoke to said they wanted to comply with the rules, but sometimes they were not able to because of regular life pressures they weren't supported or equipped to deal with. In our view, this is worth consideration to improve parole.

Survivors said there was a lot of red tape surrounding bail and parole conditions. Survivors told the Inquiry about their addresses being denied because of being 'unsuitable' houses for reasons ranging from shared driveways to 'previous crime' happening there. The Inquiry heard that it's frequently an unattainable standard for housing to meet such criteria, given the many societal and intergenerational indicators that work against this group.

A 34-year-old survivor the Inquiry spoke to has seven children. Her partner is a patched gang member, and she took out a protection order against him. She became a methamphetamine addict largely as a trauma response because of the impact of violence. She's now in jail for theft that she committed to support her habit. She told the Inquiry Police opposed her bail because the address was not suitable, due to previous offending at the address. This has meant she's had to find another address and her next hearing is not until the end of June 2024. With all of these factors, she says she is still dazed and confused and doesn't understand how to obtain support at all. Instead of red tape preventing her bail, what this survivor really wanted is support to deal with the ecosystem of factors she's confronted with. She likely won't get such support remaining in prison.

Assisting mums to mother

Survivors said the women behind the wire must be enabled to be connected to their children. Survivors said this is even more important, the Inquiry heard, for mothers whose children are in State care. From what people shared, survivors said that the current rules aren't set up to facilitate this connection. For example, the Inquiry heard once at a certain age, children must apply to come to visit again, as they're adults, and the number of adults who can visit is limited. Therefore, often mothers can't see all their children at once. Further, survivors heard that CO's can often pull rank and stop visits from happening. Such rules and behaviours do not facilitate a connection to whānau. Survivors said that risks of continuing this approach to women with children in prison are obvious, it risks repeating family disconnection and at times the State care cycle generation after generation.

The Inquiry also heard that transfers particularly impact female prisoners. One woman said,

"my family spent all their money relocating, the week of [their move], I was transferred here, I have had no visits from my family."

Survivors told the Inquiry transfers often just happen, without warning or any consultation. The cohort gave no indication that prison staff had any recognition for the role of mothers, and the unique impact of prison transfers. Survivors said they wanted the Department of Corrections to support facilitating a relationship between children with their mothers so that the cycle of abuse in State Care can be stopped.

Survivors want actions that enhance the Department of Corrections' responsiveness to mothers and the ability for mothers behind the wire to mother. The Inquiry heard from survivors that ideally the wire should come down, because mothering behind the wire is never really possible. Survivors said that the Mothers with Babies Unit in facilities the Inquiry visited were not operational. When the Inquiry visited, nobody in Arohata was using the unit, and at Auckland Regional Women's only one person was using it, despite it being equipped for four people. The Inquiry heard there were around eight pregnancies at the time of our visit. Later the Inquiry were told by the women that "a woman on the unit had a baby about eight weeks ago, it's been taken now; they wouldn't provide counselling." Survivors said one of the ways to stop people going into care is by fostering the connection between families, particularly mothers and babies.

Need for Systemic Change – won't happen overnight & will take time

The feeling among survivors was that before transitioning to an alternative system, communities had to be enabled and upskilled and this would take time. To highlight this point, one survivor said the Inquiry:

"our people aren't ready for our own system because we remain still affected by the colonial structure."
"I'm not giving my hope to the Crown."

Most survivors told the Inquiry that from their perspective any change that has occurred in care settings was superficial and performative rather than structural. For example, survivors said that the name change to Oranga Tamariki is meaningless. Survivors saw few changes in their current setting. Illustrating this, one survivor said,

"they don't have the pound now; they call it management."

Many survivors expressed that the treatment of prisoners and the prism through which they are viewed by people with authority has not changed since they were children in care.

Poverty needs to be addressed

Survivors said that structural changes addressing poverty are also necessary.

Steps to Freedom Grant

Survivors said that the \$350.00 quantum for Work and Income- administered Steps to Freedom grant was insufficient and has not been raised in accordance with the rising cost of living. Survivors told the Inquiry that lifting this quantum and developing a scale for its continued lift to keep pace with changing living costs is needed.

Financial Literacy needed by survivors

"Our only practical learning was from drug dealers."

Many survivors said practical financial education and financial literacy assistance would have aided them to get off the path they were placed on as young people in care. Some survivors told other survivors that drug dealers were their financial educators. Another said:

"We sell drugs because nobody likes being poor."

Alternatives to a government / State Care system needed

"We don't need Government. They need us, they create problems for us."

Survivors were very clear that the role of Government in the provision of care needed to be minimised and where possible eliminated. The perception was that when the Crown was involved in providing care this created problems, rather than resolving or minimising them.

Survivors saw the need for change, and the need for designing a system that invested in whānau and community with survivors being involved in its development (including survivors of abuse and neglect in care that had experienced incarceration).

Survivors also appreciated being asked by the Inquiry as to what they thought was a best way forward. One survivor said:

"I've done 32 years; this is the first time we've ever been asked about what we think can be done in State care or to improve prisons."

Transitional care – police custody

One survivor expressed the need for Police commands to change to reflect what they're wanting. He recalled multiple experiences of being asked to "stop and put your hands up" and after doing so being tackled to the ground. The Inquiry heard that this compounds already existing mistrust and trauma in his family. He said that his dad, who was 50, had recently had a similar experience of being pushed to the ground after he put his hands up. This reflects ongoing intergenerational trauma that is often shared among communities.

This power imbalance is further enabled by survivors not understanding their rights in transitional care. Many weren't aware of transitional care or its parameters. Survivors believed that greater knowledge building regarding this is a common sense first step. Moreover, survivors said cells were relatively accessible, but they didn't have their mobility aid. They didn't rely on their mobility aid all the time, but the fact it was not made available to them while in police care was harmful.

Redress

Survivors indicated to the Inquiry that it was incredibly difficult for them to navigate the claims process. With one participant saying he'd been waiting five years to have his claim heard and another waiting seven years. Moreover, survivors in prison told the Inquiry that money was attractive, but in the end did not really help them. One participant said:

"MSD gave me \$30,000 at the time I was excited, because I'm in prison and don't have any money, so I want that in my account, but it's not there anymore [spent it all] - I was given the money, but no aftercare."

The feeling among survivors was that money is quick but should be accompanied by a meaningful apology and suitable aftercare, rooted in tikanga Māori.

One participant told the Inquiry that restoration of cultural values must be part of redress.

"Compensate by way of restoration of Māori cultural values, which have been systematically stripped from me. I have expressed the need for the government to own its practices and remedy the problem [in this way.]"

In our view, this strengthens the point that redress, for this cohort, is not achieved through money, money is the starting point, the Inquiry heard.

Moreover, survivors in prison felt that they needed a tailored apology.

"Come in here and see us," they said.

A standard apology doesn't address the continued State-inflicted harm they're experiencing, and the fact that the origin point for this harm is state care. Survivors also shared with the Inquiry that they felt redress needed to be reframed as something that happens over someone's lifetime and is fundamentally about the restoration of mana; the current process does not live up to this.

In some facilities, survivors were not aware of the existence of the MSD process or the Inquiry's 2021 report called "He Purapura Ora, he Māra tipu – From Redress to puretumu torowhānui" .

"I've done 32 years; this is the first time we've ever been asked about what we think can be done in State care or to improve prisons."

Is it the dark of me laid across generations?
Is it the name of me passed through complex histories?
Is it the loss of me wrought by those with manifest destiny?

Is it the shame of me created by their acts of tyranny?

To sit in these confines, a cell

Amongst cells,

Within the abject lie that being a prisoner is the nature of me.