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# CHILD MIGRANTS TRUST

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The Right Hon. John Major M.P.  
The Prime Minister,  
10, Downing St.,  
Whitehall,  
London.

Our ref: EMH/YEB

June 2nd. 1992

Dear Mr. Major,

I am writing to you as a result of the Department of Health's recent rejection of the third application by the Child Migrants Trust for funding. Our second application - for funding for last year - was also rejected after we received an initial grant of £20,000 for the year 1990-91.

The Child Migrants Trust works on behalf of the many thousands of individuals who were sent overseas as young, unaccompanied children to live in Children's Homes in Canada, Zimbabwe, New Zealand and Australia. It is estimated that nearly 10,000 such children were sent from institutions in Britain to Australia during the post war period. Most of the leading voluntary child care agencies, like Barnardo's, and several local authorities were involved in child migration schemes.

Clearly, a policy of sending a child of five or six years of age from Britain to live in often remote, residential institutions in Australia, without any contact with relatives, exposes such children to many potential risks. Previous critics of such schemes have always recognised these risks and sought reassurances that proper regulations and checks would be implemented to safeguard this vulnerable group of children. Sadly, although government Ministers in the post war era supported these schemes with financial assistance, no adequate or effective measures were taken to regulate the operation of these schemes. Consequently, almost every imaginable form of abuse has been suffered by this group of children. Many were physically and or sexually abused, many were told that their parents were dead and that they were orphans, despite the fact that, in many cases, their parents are still alive today. Few were given copies of their birth certificates or details of their family and medical background. Given these adverse circumstances, many Child Migrants feel totally ill equipped for either married or family life as adults. Some committed suicide either as children or adults.

The needs of this group, who are now middle-aged and older, are simple to define but more difficult to meet. They need basic, factual, honest information about their personal and family history and medical background. For many, this includes providing them with a copy of their birth certificate for the first time in fifty years. The majority will need counselling either in relation to their past experiences and/or in respect of their expectations about being reunited with their relatives in Britain. Their relatives need to be found in Britain and counselled, especially in those cases where parents were led to believe that their children were adopted in Britain.