DEGRADED IDENTITIES:
An analysis of the long-term psychological, physical and criminogenic effects of institutional trauma in a detention centre for adolescent males.

Presented by
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No child shall be deprived of his or her liberty unlawfully or arbitrarily. The arrest, detention or imprisonment of a child shall be in conformity with the law and shall be used only as a measure of last resort and for the shortest appropriate period of time.

Convention on the Rights of the Child, article 37(b) 2 September 1990
Abstract

This thesis investigates the effects of the environment in The Institution for Boys Tamworth during the 1960s and 1970s, at that time generally considered to be one of Australia’s most brutal juvenile detention centres. This maximum-security institution was for adolescent males, aged between fifteen and eighteen years, who according to authorities required strict discipline. The former residents are the “most forgotten” of the group identified as the “Forgotten Australians”, comprising over 500,000 young people, who experienced “care” in institutions or out-of-home settings in Australia during the twentieth century. The particular focus is the effects of the institutional experiences and disintegrative shaming on the identities and self-control of its adolescent residents, as well as its impact on their adult lives, especially in terms of their propensity for criminal behaviour.

By adopting a qualitative narrative inquiry approach through interviews, questionnaires, biographies, an online survey and analysis of historical records, an examination of the patterns and meanings of the former residents’ institutional experiences and their consequences is presented. The narratives gave the former residents a voice, and in telling their stories, may have helped them understand the effects of their time in the Tamworth Institution. NVivo9 software was used to code the recurring themes and patterns including references to the daily rules, regime, routine and punishments. These data were supplemented by findings from government inquiries.

Their regular disintegrative shaming punishments and their isolation in solitary confinement created a permanent stigma that lowered their self-esteem, degraded their identities, inhibited the mature development of the adolescents, and may have led to their criminal behaviour as adults. These shaming punishments included wearing boxes on their heads until the box disintegrated, and begging for more than three pieces of toilet paper, then describing their toilet practices before having these descriptions checked after completing their motions. The boys dug holes for graves, and then filled them in while fearing the next hole could be their own grave. The absence of parental attachment and diminished self-control contributed
towards their risk taking activities, such as drug and alcohol use, gambling, stealing and general aggression.

According to their narratives, their punitive experiences as adolescents in the Tamworth Institution certainly increased the adult residents’ propensity for hate, anger and violence with far-reaching consequences. Nevertheless, there were complex and nuanced interactions found between the environment of the Tamworth Institution and each former resident’s self-control, self-esteem and personal identity. Although all the adolescent residents had been in “care” in other institutions, the Tamworth Institution served as a significant force in their lives, and was often blamed by them for their lack of success or inability to function in society. By capturing the stories of these former residents, this thesis contributes both empirically and theoretically to the understanding of linkages between adolescent institutionalisation, disintegrative shaming, destabilised self-control and degraded self-identity. Ultimately the results demonstrate the potential criminogenic effects of adopting punitive approaches to juvenile delinquency.
Declaration

This thesis is submitted to Bond University in fulfillment of the requirements of the degree of Doctor of Philosophy. This thesis represents my own original work towards this research degree and contains no material which has been previously submitted for a degree or diploma at this University or any other institution, except where due acknowledgement is made.

By…………………………………………

Dianne McInnes

Signed this date…………………………..
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CHAPTER 1

Introduction

Most Tamworth boys cannot change (INT5).

1.1 Preamble

The goal of the present research is to examine the experiences of those who were adolescent residents of the Institution for Boys at Tamworth in New South Wales during the latter half of the last century (hereafter called Tamworth Institution or TIBT for ease of expression). TIBT was a place of punishment for adolescent males from other out-of-home care institutions (SCARC 2001, 2004, 2005). Most of these young males were repeat juvenile offenders or had absconded from other institutions and had been sent to TIBT for “detention, discipline, education and training” (Government of NSW Gazette No.109, 1947, p. 2239) and was described as:

being for those lads who have not responded to the conditions of an open institution and who require a short period of strict disciplinary training (NSW Child Welfare Department Annual Report 1952).

Detention and discipline were evident in the General Order Book (NSW Department of Youth and Community Services 1974), but education and training seemed to be non-existent. The General Order Book was “a volume outlining the duties of various officers, security measures and procedures taken when organising activities for the residents” at TIBT and its later manifestation Endeavour House (NSW State Archives 2011).

Although three residents gave evidence at the Senate Community Affairs Inquiry (2001, 2004, 2005), there has been no investigation or inquiry or research that specifically concentrated on this institution. It has been observed that many residents in later life committed violent crimes (AustLII Databases), so it is relevant to ascertain how their time in TIBT may be implicated in this violence. Various Australian inquiries have investigated institutionalisation of youths in Australia (SCARC 2001, 2004, 2005, Forde 1999, RPR Consulting 2011), but there were only a few references to TIBT in the SCARC (2004) inquiry into Forgotten Australians. This report also highlighted the lack of research into the care and consequences of juvenile institutions:
the paucity of historical research into institutional care and the lack of substantial research into the broader question of the social and economic consequences of that form of care in the Australian context (SCARC 2004, p. 332).

This study utilises the narrative analysis of the personal recollections of a sample of sixty-two former residents, two relatives and five other males connected to TIBT in order to address the following research question: How does the experience of being an adolescent male in a punitive regime in a juvenile detention institution influence the former resident’s perceptions of self, subsequent offending activity and overall life course outcomes? This research project includes a critical review of the extant literature found in the NSW State and Tamworth libraries, historical documents provided by the NSW Department of Family and Community Services, residents’ biographies, government enquiries including the Senate Committees (SCARC 2001), private organisations, such as Care Leavers Australia Network (CLAN) and an onsite visit. In addition this study gathered data via online surveys voluntarily completed by twenty-four residents and three interviews with prison authorities. The main data source of this research was an analysis of the narratives from forty-four former residents as they reflected on their time in TIBT. The subjectivity is tempered by acknowledging that reflexive research involves authorial involvement in any social enquiry (Denzin & Lincoln 1994). Personal reading drove the thematic analysis. However, this should not undermine the interpretation but merely recognise the iterative nature of qualitative research (Denzin 1999). The stories of the residents are liberally presented here as direct quotes in a faithful reflection of their experiences of institutional life at TIBT, but there is of necessity an abstraction of key concepts to create a framework around the legacy of the institution and the elements that may be generalised to other similar facilities.

It is through the recording and analysis of the residents’ stories that it is possible to understand the effects of TIBT on the adult behaviour of those who were supposed to be in what were described as “care” institutions, where the administration was assumed to be responsible for young people’s safety and healthy development. The former residents of TIBT fall within the group identified as the “Forgotten Australians”, comprising over 500,000 young people who experienced “care” in institutions or out-of-home settings in Australia during the twentieth century (SCARC
These Forgotten Australians were in out-of-home care for a variety of reasons mainly relating to poverty and family breakdown. Residential institutions administered by government and non-government organisations were the standard form of out-of-home care during the twentieth century.

Factors such as low self-esteem, poor attachment, minimal self-control and a confused or deeply troubled sense of self have long been associated with involvement in criminal behaviour (Inzlicht, McKay & Aronson 2006, McFarlane 2008, Quinn 2004, Berg & Kelly 1979). Many of the young males who were sent to TIBT during the 1960s and 1970s were involved in criminal offending after leaving the institution, leading to question whether their residency at TIBT influenced their adult lives and impacted on their personal identities. Clearly there are many competing influences in the formation of identity that can impact on life chances, but the quest here is to examine the significance and meaning of TIBT experience as former residents describe it.

The background to this thesis is detailed here in this Introduction. First the rationale for the study will be outlined (by brief reference to recent governmental inquiries into institutional care), then the theoretical underpinnings are presented (such as the work of Goffman on “total institutions” 1961, 1963). This is followed by a short overview of the Tamworth Institution (history, layout and its punitive philosophy), and subsequently there is a summary of the qualitative case study methodology adopted in the current research. The chapter concludes with an outline of the how the remaining chapters develop the objectives of the thesis, and provide an overview of the manner in which the data and findings are presented.

1.2 Research Rationale

Little is known about the transition of young people from institutions to communities and there are few studies that have purposefully sought out the perceptions of people who resided in juvenile detention centres (Mears & Travis 2004). This is especially the case for those living in state-run care institutions during the twentieth century in Australia. While there have been several government inquiries into the “Forgotten Australians” and “Stolen Generation” these formal hearings garnered only seven testimonials relating to TIBT during the course of the Senate hearings into children in
Such attention though has generated some recent media interest in the “dark past” and “ongoing consequences” of TIBT, with a few television programmes and several newspaper articles centring on former residents (Thompson 2011, Eastley 2011, Brown 2012). However, no systematic study has been conducted on Tamworth Institution as a case study.

TIBT is a historic example of the inhumane and brutal treatment of juveniles placed in state custody in Australia in the 1900s. The Senate Community Affairs Reference Committee (SCARC 2004, 2005) inquiry into institutional and out-of-home care for children reported that former residents, including those who had been at TIBT, described the majority of staff as “authoritarian, cold, and uncaring at best, or brutal, sadistic predators at worst” (SCARC 2004, 5.19, p. 132). Indeed, the officers in charge of juvenile corrective institutions were not given any particular training to equip them to care for youths in the last century (Child Welfare Act 1939). As part of the Senate inquiry into Forgotten Australians (August 2004), a former resident, known as Sub 329, provided statements that compared TIBT to the conditions experienced by prisoners of war in the Changi prison camp in WWII (SCARC Paragraph 2.158). Statutory child protection authorities experience high staff turnover, for example in many Australian institutions the average length of service is less than three years (Queensland Crime and Misconduct Commission 2004). One of the reasons for the lack of retention of qualified, competent staff in juvenile institutions is the lack of career pathways, which enable choice and advancement (McArthur & Thomson 2012). Untrained staff in TIBT, who were mainly ex-soldiers, demonstrated violent control by abusing, criticising and brutalising residents (Quinn 2004).

During the twentieth century, there was systemic failure by state governments to provide children in need with adequate care and protection in Australia. Evidence presented at the Senate Community Affairs References Committee (SCARC 2004) inquiry indicates that children who had been in out-of-home and institutionalised care in Australia in this period suffered from lasting feelings of separation and abandonment as adults. The mechanisms of control — of dominating through violence, suppression and disintegrative shaming — often resulted in residents believing that they deserved to be abused (SCARC 2001, 2004). For example, the
130,000 British children sent to Australia for care were promised “oranges and sunshine” and instead they endured hard labour while living in institutions until their release at 18 with no working skills (Humphreys 2011). Some of these children were sent to TIBT for running away from other institutions or just not conforming (Quinn 2004, SCARC 2004, 2005).

Young people were taken from their parents by the state and church for many alleged reasons (SCARC 2004). Some parents could not look after their children or one parent was sick or dead (SCARC 2004, 2005, Forde 1999, HREOC 1997, NSW Ombudsman 1996). At that time fathers were considered unsuitable to raise children on their own and unmarried women were under strong social pressure to relinquish their children for adoption or institutional care (CLAN 2008, 2011). In other instances the children had parents who had returned traumatised from war service. Although there were some parents who did not want their children, others worked to pay maintenance to the institutions for the care of their offspring because they believed the institutions could do a better job than they were able to do at the time. However, most parents were unaware of the type of government care being supplied (Alliance for Forgotten Australians 2014).

Although the absolute numbers of females taken into care was fewer than for males, they too have reported abuse and inadequate care in the girls’ homes (SCARC 2004). The Hay Institution for Girls, for example, opened in February 1961 when the former Hay Gaol was re-established as a maximum-security institution for girls under the NSW Child Welfare Department (Parramatta Female Factory Precinct 2015). The Hay Institution served as a place of punishment for around ten girls at any one time, who would not comply with the strict regime of the Parramatta Girls’ Home. It was a site of inhumane and extreme discipline for girls between the ages of 14 and 18 where practices and routines were modelled on TIBT. The treatment included not being permitted to speak without signalling for permission, being forced to keep their eyes on the floor at all times and the female adolescents reported that they were raped (Penglase 2005). Most of the teenage girls sent to Hay had not committed a criminal offence, but were the forgotten children in the Australia’s welfare system (Killens & Lewis 2010). Most of the girls sent to this institution had been state wards from a young age, and had come from poor socio-economic backgrounds including
indigenous children (Carrington 1993). The Hay Institution was eventually closed in June 1974, but it is clear that parallels can be drawn across all such juvenile institutions between the treatment given to girls who resided there and the young males sent to TIBT, who are the focus of the present research.

There is evidence that there was systematic dissembling or obfuscation. Parents and children were lied to about their family members, with some children as young as four being told their parents and siblings were deceased (Humphreys 2011). Often, parents who attempted to get in touch with their children in institutional care were told their children had been moved or had misbehaved so they could not be visited, or they were informed that their children were dead. One former resident recalled that when he started work at age fourteen “I was given a bundle of letters from my mother. These had been written over the eight years I had been [at the Home]. In the meantime I had thought that my mother did not love me and did not want me back” (SCARC 2001, 82, p. 74). Another gave evidence that “our entire family was ripped apart and we can never get back together. … I never knew my family. How can you get back together when you don’t know each other?” (SCARC 2004, 264, p. 105).

In light of the above, even at a cursory glance, TIBT appears to have bequeathed a criminogenic legacy. A number of former residents have blamed the institution for their criminal behaviour when they wrote about their experiences or have been the subjects of media reports or biographical works. In all of this material the spectre of TIBT is never far from the explanations given for subsequent violent crimes or poor life outcomes from burglary to assault and murder (Thompson 2011, Eastley 2011, Matthews 2007, Freeman 1988, Smith & Noble 2002). In the 1970s, there were at least thirty-five murders committed by former TIBT residents including Neddy Smith, who was convicted of drug trafficking, theft, rape, armed robbery and murder, James Finch, who was responsible for the Whisky-Au-Go-Go nightclub fire bomb that killed 15 people, Archibald McCafferty known as “Mad Dog”, and George Freeman, who joined forces with Lennie McPherson and Stan Smith to takeover the Sydney underworld by killing those people who posed a threat to their successful empire (Matthews 2007, Thompson 2011). While a direct causal link is not being
1.3 Theoretical Underpinnings

There are three main theoretical strands that underpin this thesis, namely Goffman’s (1961) conceptualisation of the “total institution” and “spoiled identity”; that of labelling and shaming drawing on the work of Braithwaite (1989) based on the earlier treatises of those such as Tannenbaum (1938) and Becker (1963, 1973); and the control theory by Hirschi (1969) that later led to notions about self-control by Gottfredson and Hirschi (1990) and its impact on offending. Clearly there is considerable overlap between these three theoretical approaches even though they were developed from significantly different perspectives and at differing times and locations. They also bear some significant differences so that one strength of this thesis is in blending these disparate theoretical strands. Thus the intersection of a totalising institution with practices of labelling, disintegrative shaming and diminished self-control will be harnessed to examine the impacts on the identity of the individual. These theories are only briefly canvassed here, but dealt with in more detail in Chapter 3.

1.3.1 Theorising Institutionalisation

In any examination of a formal institutional setting such as TIBT, the work of Erving Goffman (1961) on “total institutions” cannot be ignored. Although originally applied to psychiatric facilities, his definition of a “total institution” is one that describes an isolated, enclosed social system with the primary purpose of controlling all or most aspects of the lives of its residents. According to Goffman (1961), the nature of “total institutions” means that residents have limited freedom of choice and reduced sense of autonomy. They are subject instead to regimes of rule-bound schedules, constant surveillance and monitoring that compel them to suppress their own self-control and decision-making skills. In his study of such institutions, Goffman (1961) argued that they used ritualised tasks, tedious routine and over-regulation to ensure that both guards and residents know their respective social roles and responsibilities, thus “institutionalising” them through enforced coercive conformity.
In reflecting on the psychological effects of such governance, Goffman (1961, 1963) referred to the term “mortification of self”, whereby residents are subjected to degrading or humiliating treatment and shaming in order to remove any trace of their individual identity. He referred to this as the manifestation of “spoiled identity” when he found that residents in total institutions often became stigmatised by their institutional experiences, leading to negative psychological and physical effects (Goffman 1961, 1963). Social stigma has a direct influence on identity, which when “spoiled” can lead to attitudes and behaviours that ultimately contribute to the individual being classified or labelled as deviant (Goffman 1961, 1963). This, in turn, increases the likelihood of official intervention by law enforcement officers or welfare authorities. Goffman (and others since), have demonstrated how systematic and ritualised degradation and shaming give rise to feelings of hopelessness, distress, depression, and ultimately lowered self-esteem (Goffman 1963, Candito 1996, Inzlicht, McKay & Aronson 2006).

1.3.2 Theories of Labelling, Stigma and Shame
The process of labelling — the classification of an individual, for example into a group or type — has a direct bearing on self-identity and behaviour and stemmed from the early work by Tannenbaum (1938) and Becker (1963). A person’s conception of their self and their behaviour are directly related to the labels, opinions, descriptions and observations imposed on the individual in societal and institutional interactions (Karp 2000). A negative label can result in stigma that alters the self-concept and social identity (Lemert 1951, Becker 1963, Goffman 1974, Macionis & Gerber 2010). Stigmatising labels applied to individuals influence their behaviour, often becoming a self-fulfilling prophecy — where an individual has little choice but to conform to the negative characterisation (Vito et al. 2006). This in turn relates to the concept of “spoiled identity” (Goffman 1961, 1963, 1974) with both psychological and sociological components, so an individual is classified as undesirable.

Shame — an emotion, state or condition that can occur after experiencing embarrassment, humiliation, disgrace or inadequacy — goes beyond the sense that the individual did bad things to the formation of identity, which invests the person with a negative self-image (Karp 2000). The theory of shaming (Braithwaite 1989) posits
that stigmatisation and labelling, which are forms of shaming, are counterproductive and increase anti-social behaviour. Shaming has the potential to deliver negative consequences to its receivers (Tittle & Botchkovar 2005, Karp 2000, Becker 1963). For example, disintegrative shaming stigmatises offenders and tends to result in ostracism from the local community; while reintegrative shaming focuses on the action rather than the person and makes this action the object of the shaming (Braithwaite 1989) and not the person committing the act. Stigmatisation occurs when the person is made to feel unworthy (Braithwaite 1989, Bradshaw 2005, Murphy & Harris 2007, Brooks 2008, Bain 2011). Coping with any form of stigma requires self-control and self-regulation, yet when stigma is experienced, the participants show impaired self-control (Inzlicht, McKay & Aronson 2006).

Disintegrative shame is a false, pathological form of shame often claimed to be induced by abuse (Bradshaw 2005, McAlinden 2013). This type of shame makes the individual feel bad about self and not about their wrongful action (Braithwaite 1989, Bradshaw 2005). Disintegrative shaming labels and stigmatises the actors while expelling them from the community (McAlinden 2013). Stigmatisation occurs when the community attempts to socially isolate the offender with punishments such as incarceration (Braithwaite 1989). When individuals are forced to execute demeaning behaviours, for example performing menial and degrading tasks, they can be shamed so remorselessly and unforgivingly, producing complex trauma, whereby individuals dissociate from their emotions until it is possible to cope so they become outcasts and act outside mainstream standards, (Braithwaite 1989, Potter-Efron & Potter-Efron 1989). Disintegrative shame, which is acknowledged as one of the most damaging self-conscious emotions because the self, not the behaviour, is the object of judgement, so the shamed individual feels exposed, worthless and powerless (Gilbert 2003, Kaufman 1989, 1992, Lewis 1971, Nathanson 1994, Tangney & Dearing 2002, Tracy, Robins & Tangney 2007, Tangney, Stuewig & Hafez 2011, Braithwaite 1989, Bradshaw 2005).

1.3.3 Theory of Self-Control
According to Travis Hirschi (1969), most existing criminological theories begin with a flawed fundamental premise that all people, beginning at birth, possess the self-indulgent drive to act in selfish and aggressive ways that lead to criminal behaviour,
although he made modifications to this theory over the following years. The social control theory purported by Hirschi (1969) asserts that ties to family, school and other aspects of society including positive role models serve to diminish one’s propensity for deviant behaviour. This social control theory posits that crime occurs when such bonds are weakened or are not well established (Hirschi 1969). The self-control theory, also known as the general theory of crime emerged through the evolution of social control theory. Although focused on internalised control rather than social control, the general theory of crime shares commonalities with the former theory through its emphasis on parenting instilling self-control for use during adult life (Hirschi 1969).

Other research has placed parents in the forefront of criminological theories usually focusing on parenting styles that shape children’s behavioural patterns. Generally, children whose parents were vigilant had more self-control (Lynskey et.al. 2000). The more attached children are to their parents, the lower the likelihood of involvement in delinquent behaviour (Brannigan et al. 2002). Therefore, the absence of parental attachment and the lack of opportunities to practise self-control may result in weak self-control. In later refinements of control theory Gottfredson and Hirschi (1990) found that a diminished individual self-control was a factor in criminal behaviour, especially when the individual does not have intimate attachments, aspirations and moral beliefs developed through positive parental nurturing. They argued that people with weak self-control tend to be impulsive, insensitive risk-takers and these characteristics can impel them to engage in criminal acts (Gottfredson & Hirschi 1990). Given that most offences are easy to commit and criminal opportunities are regularly available, people who do not practise self-control often become involved in criminal behaviour. Self-control, not opportunities is claimed to be the primary deterrent of people’s involvement in crime according to this theoretical perspective (Cullen, Agnew & Wilcox 2013). Although there exists some criticism of this general theory, most empirical testing has consistently revealed a link between destabilised self-control and crime (Pratt & Cullen 2000).

As noted at the start of this section, there is some overlap among the three theoretical inputs to the present research. Goffman (1961) says that institutionalisation can cause a “spoiled identity”, thus exhibit deviant behaviours. Braithwaite (1989)
shows that disintegrative shaming labels can increase anti-social behaviour. Hirschi (1969) and Gottfredson & Hirschi (1990) demonstrate that individuals with weak self-control can display criminal behaviour, especially when these individuals have few or no parental attachments. These theories will form the parameters of the current study by linking the effects of institutionalisation and the degrading shaming that took place in TIBT to the adult identities forged by the former residents. The theories will assist in unpacking the ways in which the adolescent males were controlled in TIBT, and as a result were likely to develop adult identities where self-control was impaired.

1.4 Overview of the Tamworth Institution

In 1947, TIBT was proclaimed “an institution for the detention, discipline, education and training of children and young people” (Government of NSW Gazette No.109 1947). The term of residence for the fifteen to eighteen year old males was never longer than six months. However, after returning to other boys’ homes, some males were sent back to TIBT for further punishment a second and a third time. Following a government investigation into the suicides of several boys the name of The Institution for Boys, Tamworth was changed to Endeavour House in 1976 by the Department of Youth and Community Services, to symbolise at least that the institution had been improved and reformed. Any improvements, however, were slight with the only significant difference being that boys were allowed limited communications with each other (NSW Department of Youth and Community Services 1974-1979/80). Because of this change it was deemed that the period from 1960 to 1975 would be the years under investigation in the present study.

The adolescent males sent to the Tamworth Institution were deemed to have caused “trouble” in other juvenile institutions or they had committed minor criminal acts after absconding (SCARC 2004). Being sent to the Tamworth Institution was their punishment. Although it was characterised as a care home, TIBT residents have more accurately described it as a prison (Thompson 2011). As revealed in the Senate inquiry (SCARC 2004), residents were often cold and hungry, were forced to do harsh physical labour combined with the prospect of daily corporal beatings. They performed demeaning, difficult, shaming tasks and were not provided with education and preparation for independent living in the community. In effect, the Tamworth
Institution was a punitive system within a system under the watch of the New South Wales (NSW) Child Welfare Department (Quinn 2004).

The philosophy of TIBT was organised according to the Auburn System, also known as the New York System — a nineteenth century penal method characterised by enforced silence and rigid separation (Randal 2014). In this system, residents worked during the day in groups and were kept in solitary confinement at night. A regimented routine regulated every aspect of the residents’ lives. All tasks were performed at “the double, with boys quick-marching and not permitted to look to right or left” (Quinn 2004, p. 244). Residents were not allowed to raise their eyes or come within two metres of another person. They were denied communication except for one hour in the afternoon, which they could only take advantage of if they had not broken any rules throughout the day (Quinn 2004). Some boys lost “points” for breaking rules during the day, and this meant that only a few boys ever accumulated sufficient points to allow them to speak to others (Quinn 2004). Guards regulated every aspect of the adolescent residents’ lives (General Order Book 1974), while, at the same time, shaming and humiliating them (Quinn 2004). The General Order Book provided rules for every minute of the boys’ daily activities including how many footsteps when making the bed or washing up (NSW State Archives 2011). An example of the shaming process was when the residents had to ask guards for permission to speak before asking permission to scratch themselves and then thank the guard, all without raising their eyes to look at the guard (Quinn 2004, Thompson 2011).

The treatment in TIBT included being bureaucratically processed, regulated and controlled in ways that physically isolated the youths from normal activities in the wider community (Quinn 2004). Under constant threat of being placed in solitary confinement, residents were forced to comply with a system of procedures and routines that restricted their movements, denied them opportunities to have companionship, limited their recreational time, forbade visits from family and friends and reduced their lives to monotonous schedules exercised through rigid rules and regulations, bells and vocal salutes (General Order Book 1974).

Rather than providing adequate care, which is at a minimum nutritious food, hygienic surroundings, medical treatment, sufficient rest and recreation, the young
people in TIBT slept in cold wet cells, were physically punished, were always hungry, and did not have treatment for their health and dental problems (SCARC 2004). To further implement their diminished self-control, lack of appropriate parental care, supervision and the absence of suitable role models characterised the lives of the residents, who found themselves in an institution where such guidance was lacking and/or replaced by regimented governance and physical brutality (Quinn 2004, SCARC 2004).

The intense system of regulation in TIBT was reflected in its building design, with residents constantly in the shadow of the central tower where the guards observed their behaviour or gave the appearance that there was constant surveillance (Tamworth gaol plan 1871, Kerr 1990). The imposing dominant tower, where guards could see out but residents could not see in, ensured an awareness of being watched in a similar way to a panopticon that, according to French philosopher Michel Foucault (1995), was a function of disciplinary mechanism and an apparatus of power. Foucault offered an explanation for “anonymous power” held by the operator of the principal tower, when he suggested that by including the built-in “architecture” of surveillance, the disciplinary mechanism of observation delivered improved efficiency. Furthermore, it guaranteed the function of power, even when there was no one actually asserting it. It was in this respect that the panopticon functions automatically. Foucault explained that this design, made possible through the ingenuity of the geometric architecture gave an authoritative figure the “ability to penetrate men’s behaviour” without difficulty (Foucault 1995).

Despite its obvious punitive orientation, the Tamworth Institution was supposed to be part of a “care” system aimed at promoting a better, healthier, safer and more dependable existence than their parents could provide. The word “care” is used throughout this thesis in the context of being responsible for young people’s safety and healthy development. As will be illustrated by the interview extracts in Chapter 6, the reports and narratives from residents about their experiences in out-of-home institutions were more negative than positive, with little evidence of the care that was supposed to be provided by the government or church organisations.
The Tamworth Institution was supervised in accordance with policies of the New South Wales Government under the *Child Welfare Act* 1939 (NSW). Public servants, parliamentary representatives and doctors visited TIBT, so they would have been aware of the punitive activities in the institution (Quinn 2004, SCARC 2004). However, any residents who complained to them were punished, usually by loss of food, beatings or being placed in solitary confinement for up to three months in contravention of the *Child Welfare Act* 1939 (SCARC 2004). It has been claimed that these official visitors knew that residents of TIBT were detained in isolation beyond the legal maximum time allowed in government adult prisons, which was contrary to the law (Quinn 2004, Thompson 2011). The official reports referred to the regulatory practices of solitary confinement in TIBT, where residents were placed in a cell by themselves, as “segregation”, which was not prescribed by the Act, rather than “isolated detention” that was subject to strict statutory restrictions (Quinn 2004). Thus, it seemed there was deliberate misuse of the terminology to avoid breaching the law.

The paradox is that institutions like TIBT were trying to achieve “reform” of their charges and yet may have elicited the opposite effect. The observations of Minnesota District Court Judge Dennis Challeen (1986) when he wrote that a criminal justice system, which locks up non-violent offenders, was defective and doomed to failure clearly reflect this paradox. He also insisted that incarceration was too costly to the public and tended to “make criminals worse”, rather than reforming them. The judge, albeit commenting on US detention practices, claimed that what was needed was a process that promoted individual responsibility among offenders rather than useless dependency. He presented a series of binary statements of which only a small selection is presented below (Challeen 1986):

- We want them to have self worth, so we destroy their self worth. …
- We want them to be part of our community, so we isolate them from our community. …
- We want them to be non-violent, so we put them where there is violence all around them. …
- We want them to take control of their own lives, own their own problems and quit being parasites—so we make them totally dependent on us (Challeen 1986, pp. 37-39).
The contradictions posed by Judge Challeen inform the analysis undertaken in this thesis, for it explores the tensions between individual control and total dependency and the brutal treatment that was meant to render reform in these young males or the degradation of their self-worth that was intended to foster respect in them.

1.5 Qualitative Case Study Approach

This research comprises a case study of the Tamworth Institution and centres on young males ensconced there between the years 1960 and 1975. While those young people sent to correctional institutions, especially in the mid-twentieth century, were called inmates or detainees, in this thesis, the term “resident” has been adopted. It also should be noted that all the residents of TIBT had, at some time prior to or after, been in other institutions, including adult gaols. Additionally, many residents did not come from stable family backgrounds prior to being taken into “care”. This thesis draws on a qualitative research design and methods, specifically, a narrative approach. Narrative inquiry is a qualitative research strategy that uses texts such as stories, autobiographies, journals, interviews and letters as the units of analysis to research and understand the manner in which people create meaning in their lives (Ribbens & Edwards 1998, Hopkins 1994, Marshack 1972, Crossley 2000, Hsu 2008). It is a way of studying experiences given that “people shape their daily lives by stories of who they and others are, and how they interpret their past in terms of these stories” and where the “story is a portal through which a person enters the world and by which their experience of the world is interpreted and made personally meaningful” (Connelly & Clandinin 2006, p. 375).

To fully understand the effects of the institution on the former residents, the history and underlying penal philosophy of the Tamworth Institution was first explored through archival research of government documents in libraries. Although it was difficult to find historical documents, which referred directly to TIBT, visits to the NSW State Archives, the Tamworth Library and the National Library in Canberra, as well as the Records Management Unit at Parramatta yielded some information about regime, costs and maintenance. By using this documentation as well as recording the narratives of the forty-four former residents and analysing the twenty-four survey answers, this research provides a balance between the official picture and the lived realities of the residents according to their recollections. Media interviews,
autobiographies, biographies and various government inquiries provided statements and stories relating to the person’s time in TIBT as well as what they perceived to be the effects of this institutionalisation.

The qualitative research design permits the analysis of the narratives of the former residents, it allows for their storytelling, but also enables the extraction of meta-themes. While deriving data directly from the life accounts of a sample — forty-five narratives comprising of eight residents’ interviews, two brothers who had two siblings in TIBT, one prison officer’s interview, eighteen autobiographies and biographies, three court reports, two psychologists’ reports including PDFs, pictures, audio, videos and websites — there is inevitably subjectivity in selecting themes. This information along with the results of the structured and categorised questionnaires of two surveys, which were completed by nineteen TIBT residents and five non-residents, were sorted and coded using NVivo9 to enable the construction of a historical memory of those residents, who have been subjected to the regulatory cultures of total institutions. Their stories are the subjective experiences of institutional life, which may have contributed to the onset or reinforcement of subsequent offending behaviour. The assumption is that through narratives and memories, every story has an aim or purpose, but these are from the storyteller’s perception (Bruner 2002, Presser 2009). Narratives can be examined as “a form of self-presentation, that is, a particular personal social identity is being claimed” (Mishler 1986, p. 243). The residents’ life stories are unique and are tailored to the tellers’ perceptions of events and explain how they experience and make sense of the world around them. Listening to life stories is a powerful means of elucidating how people explain and interpret the experiences and traumas of family life and institutional abuse (Josselson & Lieblich 1995, Bruner 2002).

The resulting data was coded using an NVivo9 software programme, and analysed from a phenomenological perspective (see Chapter 5) to understand the perceptions of the narrator (van Manen 2006). The focus was on the meanings that individuals attach to their experiences and the implications of these on the subject’s life course (Collingridge & Gantt 2008). In concentrating on the meanings connected to human experience, it is possible to study the structure of the experiences of the
adolescents in TIBT including perception, thought, memory, imagination, emotion, desire and social activity.

1.6 Structure of the Dissertation

This chapter has introduced the main research question by providing a rationale for the study, defining the key theoretical inputs, presenting important concepts, and outlining the case study and qualitative methodological approach. Chapter 2 continues in this vein by describing in detail the history, architecture, regime and regulations of the Tamworth Institution and contextualises it by discussing the findings from recent Australian official inquiries into juvenile institutions plus CLAN survey material. This is further built upon by canvassing the broader landscape regarding institutional care for young people, especially that relating to Australia and to the timeframe of the late twentieth century.

Two chapters elaborate on the theoretical underpinnings for the study. The work of Goffman (1961) on total institutions and the ways in which they impact on personal identity is central to this study. Chapter 3 contains an exposition of the central thesis of Goffman and defines the terms connected with identity, self-esteem and self-control (Hirschi 1969, 2004). It also draws on the criminological theoretical heritage regarding labelling, stigma and shame (Braithwaite 1989). Chapter 4 is about conceptual features of the study and provides an overview of the empirical literature relating to adolescence and the formation of an individual’s identity.

Chapter 5 describes qualitative methodology, the research design, outlines the process of the recruitment of participants, and details the interview protocol where each voluntary participant was interviewed using the narrative inquiry process (Bogdan and Bilken 1982, Stake 1988, Crossley 2000, Presser 2009, Branigan & Hil (Eds) 2010) and the interpretation of the data. The chapter also raises ethical considerations that informed the study and describes the analytic tools adopted in the research. In addition, there is an explanation of the data management including confidentiality, along with a more detailed account of the ways in which NVivo 9 software was used to code the information, where the focus is on the physical, psychological and criminal effects of the residents’ experiences in TIBT. The final three chapters, 6, 7 and 8 present the results of the qualitative analysis where the
empirical findings are reviewed and further research suggested before conclusions to the research and their implications are explored.

1.7 Significance of the Dissertation

This case study of the Tamworth Institution attempts to explain holistically the “dynamics of a certain historical period of a particular social unit” (Stoecker 1991) — in this instance it is adolescent males sent to a boys’ home in Australia in the middle of the last century. These young men were described as “persistent absconders, those who failed to conform in open institutions” (Quinn 2004, p. 244) and thus were sent to TIBT for punishment and as punishment for their misbehaviour in other homes. Despite recent attention to the “Stolen Generation” and the “Forgotten Australians” there has been no investigation into how the specific remembered experiences or perceptions of former TIBT residents shaped the general course of their adult lives. This research addresses that gap in our knowledge.

This research is significant because it contributes at the theoretical and empirical levels to the understanding of linkages between adolescent institutionalisation, shaming, destabilised self-control and adult self-identity. It draws on the theories of “total institutionalisation” (Goffman 1961) and the control theory (Hirschi 1969), as well as disintegrative shaming and labelling (Braithwaite 1989, Karp 2000, Bradshaw 2005) with regard to the concept of “spoiled identities” (Goffman 1961, 1963) of adolescent males in a punitive institution. By extension, it examines whether the mistreatment and lack of skill-development of former male residents contributed in some way to their adult choices, possibly directing them towards later offending. This thesis presents, for the first time, the personal lived experiences of some of those youths, and shows how these experiences in an abusive environment impacted on their adult lives.

The core of this case study is the participants’ own stories (Swanborn 2010), for these narratives identify the development of social and personal identity based on their personal historical experiences (Hopkins 1994). The narratives provide information concerning the residents’ perceptions of the effects of their experiences in the institution on their personal identity, self-control, self-esteem, life choices and decisions and their possible links to offending behaviour. This exploratory case study
creates new historical knowledge via the repository of stories gathered from former residents at the Tamworth Institution. It contributes to the discipline of criminology (and social sciences more broadly) by demonstrating the potential effects of punitive approaches to juvenile delinquency. It also provides a platform for the former residents of TIBT to tell their stories after being “forgotten” for so many years.
CHAPTER 2
The Institution for Boys, Tamworth

*The Tamworth boys’ home was a concentration camp. They treated us boys like animals with daily bashings and starvation* (BIO10).

2.1 Introduction

The Tamworth Institution, formally titled the Institution for Boys, Tamworth (TIBT) or locally known as the “Boys’ Home”, was situated on a gentle slope behind a park opposite the Tamworth public hospital, 400 kilometres northwest of Sydney, New South Wales (NSW). Although it was proclaimed as an institution for the “reception, detention, maintenance, discipline, education and training of children and young persons” in 1947 (*Government of NSW Gazette* No. 109, 1947, p. 2239), the first boys did not arrive until 1948. An administrative note describes TIBT as “a maximum security detention centre for young male offenders” who were “aged between 15 and 18 years” (NSW State Records 1948-76). The archives characterises residents as “lads who have not responded to the conditions of an open institution and who require a short period of strict disciplinary training” (NSW State Records 1948-76).

Prior to it being a juvenile detention centre the institution had operated as Tamworth Gaol from 1881 until 1943 when surrounded by army tents, it was a prison for AIF deserters during World War II (*Sydney Morning Herald*, May 30, 1945). During its tenure as an adult gaol, several men convicted of murder, including Dan King, John Cummins, Joseph Anderson and George Taffts, were hanged from its gallows. The long-disused hanging apparatus was visible from many of the boys’ cells (Quinn 2004). From 1948 until its closure in 1990, it remained a juvenile detention centre although its name was changed to Endeavour House in 1976 due to changes in legislation under Rex Jackson, the then Minister for Youth and Community Affairs. The department in charge of juvenile welfare in NSW claimed that changes had been made in the programme (*NSW Child Welfare Department Annual Report* 1978). The Tamworth Institution reopened as the Tamworth Correctional Centre (a facility for adult males) in 1991.
This chapter presents historical background about the buildings and operations of the Tamworth Institution including the time period it was used as an adult gaol. This section also provides a brief architectural sketch of the facilities (then and now). There are also details about the daily regimented routine of the institution when adolescents were under its care. The final sections in this chapter provide a broader context about the landscape of “out-of-home care” in Australia in the last century and conclude with an overview of information gleaned from the various inquiries and surveys about juvenile institutions.

2.2 Background and Architecture

The history of Australian juvenile institutions is important to this research because out-of-home care for juveniles is a practice that has a long purview but is still used today. Between 1833 and 1838, nearly 1,000 boys were transported from England to NSW as young convicts (Seymour 1988). Carters Barracks in Sydney was the first juvenile penal institution where male convicts under sixteen were taught a trade for three years before being assigned to work in the colony (Quinn 2004). Specific juvenile correctional institutions were first established in the second half of the nineteenth century to house the many young convicts received by the colonies of NSW and Tasmania (Seymour 1988). It was thought that having separate institutions for juveniles would prevent the adult criminals influencing the youths, thereby reducing their offending behaviour (Seymour 1988, Ritter 1999). From the nineteenth century until the end of the twentieth century, Australian juvenile detention centres operated as closed systems without external scrutiny or recognition of young people’s rights (Ritter 1999). Discipline was the responsibility of untrained staff, who had little accountability (Quinn 2004). There were only minor differences in the conditions in juvenile institutions in all the Australian states and territories (Atkinson 1993).

Closely linked to the history of juvenile institutions is the development of the Australian child welfare systems, which began in the early 1800s when the NSW Government and a committee of private citizens established a home for orphans and destitute children, many of whom had parents who were convicts (Seymour 1988). During the second half of the nineteenth century, church, state and charitable organisations developed reform and industrial institutions to cater for destitute and neglected or those children who had offended (Seymour 1988). These organisations
made minor attempts to classify and separate “neglected” and “criminal” youths, with the state having primary responsibility for offenders (Atkinson 1993, Seymour 1988). However, there is no evidence to demonstrate that there were any differences in the treatment between the two groups, and many records illustrate that usually both neglected and delinquent youths were placed in the same institutions (Atkinson 1993, Ritter 1999).

In the 1870s, the NSW Comptroller General of Prisons, Harold Maclean, ordered the construction of a new generation of country gaols for both males and females, including Tamworth, which was completed by contractor William Cains, and proclaimed a prison facility on 31 March 1881 (Kerr 1990). The standard plan (see Figure 2.1) followed the prototype of the gaol in the town of Young and was adopted by the colonial architect for the three other institutions at Hay, Tamworth and Wentworth (Kerr 1990).

![Figure 2.1: Plan of Tamworth Gaol, 1871](Department of Public Works, Tamworth, see Kerr 1990)
These gaols provided cooking facilities and opportunities for work were a considerable improvement on the institutions of the early 1860s, which comprised a number of twelve x two metre flanking cells spread over two storeys attached to a gaoler’s residence (Kerr 1990). The new cells were larger in configuration and were supposed to permit separate or multiple occupancies, as circumstances demanded. Although it was designated that from three to eight males could share a cell, it was rare that two male prisoners would be confined together. Promulgated under Act 4 of Victoria No 29, Maclean’s Regulation 45 for New South Wales specified that two males should never be housed in the same cell due to the long-standing objection toward homosexual practices. However, this rule did not apply to females, so two women were allowed to share (Kerr 1990).

![Figure 2.2: The panoptical layout of the gaol](Department of Public Works, Tamworth, see Kerr 1990)

The buildings were designed in a panoptical style (see Figure 2.2). As noted by Foucault (1995), with this building design residents and staff were not able to ascertain whether or not they were being watched, so they always had to behave as if they were under surveillance. This design increased security by facilitating more effective scrutiny (Foucault 1995). The residents were readily distinguishable and visible to an official invisibly positioned in the central tower. Conversely, occupants were invisible to each other in their cells (Foucault 1995). At Tamworth, the residents always saw the central tower, and in turn the guards constantly observed their behaviour. A five and half metre perimeter wall with watchtowers diagonally opposite each other on the northern and southern corners surrounded the buildings. The towers...
commanded a view of the area between the buildings and the enclosing wall, as well as the surrounding countryside (Photos 2.1 and 2.2).

In 1894, the new controller, Miller, ordered the construction of a dark, windowless cell for the short-term punishment of prisoners who had committed breaches of discipline. This cell had ventilation arranged to exclude light and sound. When the adolescent youths were in TIBT, this cell was used for their solitary confinement. The punishment cell has changed little since 1900 except that a window has been added and it is now connected to sanitation and drainage (Interview with Gaol Superintendent 2012). The architecture of the Tamworth gaol still reflects its origins in the Victorian era — austere and foreboding symbolising law and order, while serving as a warning to the public (Pratt, 2002).

On 6 July 1947, the NSW Premier James McGirr approved minor renovations and repairs to the prison prior to its reconfiguration as a juvenile centre (NSW State Records 1948-1976). It seems that only inconsequential attempts were made to change the place from a prison to an environment more suited to caring for adolescents such as calling the cells “cabins” (General Order 10, Wotten 1989) although no structural changes were made to the rooms per se. Despite the name change, the main building still had the appearance of a prison with locked rooms and bars at the small windows, which for all intents and purposes were still “cells”. In terms of perimeter containment, the original walls of five and half metres surrounding the building remain enclosed by a high wire fence (Quinn 2004). The buildings were described recently as being of:

> exceptionally handsome and sturdy brick and it is obvious that both Cains, the original builder, and the prisoner tradesmen of the 1897-98
extensions did a sound job … the nineteenth century masonry is in good condition and presents no serious conservation problems (Kerr 1990, p. 12).

Figure 2.3: Elevation of Tamworth Gaol Buildings, 1871 (Department of Public Works, Tamworth, see Kerr 1990)
The sturdiness and outright longevity of the construction mean that not much has changed from the 1871 sketch (see Figures 2.3 & 2.4; Photos 2.3 & 2.4). Certainly the external structures remain fairly much intact. The front door is remarkably similar to the original as are the barred windows on the front office, which used to be the chief warden’s house. There have been very few structural changes to this facility since the time when it operated as TIBT according to the Superintendent of Tamworth Correctional Centre (GSUPT 2012).

On 25 March 1943, the Tamworth Gaol was taken over by the Australian Army and became the Detention Barracks North Tamworth for AIF deserters. The responsibility of running military prisons was removed from the Royal Australian Corps of Military Police in 1943, and a new service was established, called the Australian Military Prisons and Detention Barracks Service (Dunn 2015). The military ceased operations there in 1946 and on 3 September 1947, the state’s governor, Lieutenant-General John Northcott, proclaimed that the land and buildings be called “The Institution for Boys, Tamworth” (Government of NSW Gazette No.109 1947, p. 2239).

<table>
<thead>
<tr>
<th>Tamworth Gaol</th>
<th>Military Prison</th>
<th>Tamworth Institution for Boys</th>
<th>Endeavour House</th>
<th>Closed as juvenile facility</th>
<th>Tamworth Correctional Centre</th>
</tr>
</thead>
</table>

Figure 2.5: Schematic timeline of the uses of the detention facilities at Tamworth
The TIBT differed from other juvenile institutions, because under the *Child Welfare Act* of 1939 similar centres in the state were “designated as either ‘schools’ or ‘shelters’” (Quinn 2004). For example, there was the Training Home at Mittagong and the Mount Penang Training School for Boys at Gosford, along with Metropolitan Boys’ Shelter, Parramatta, St Hilliers, Yasmarr and Yawarra, among others. By contrast TIBT was in effect declared a “closed institution” which was place of “punishment and deterrence” (Quinn 2004, p. 243). The type of training meted out to those in “closed” institutions was meant to include “the development of self-discipline through attention to vocational and recreational activities” (NSW Child Welfare Department *Annual Report* 1962-63, p. 35).

The Child Welfare Department from the 1920s presided over a range of institutions, including TIBT, to provide specialised care for certain categories of children, including Indigenous and migrant children. The department was also an enthusiastic participant in promoting adoption as an alternative to foster care and institutions (Child Welfare Department 2014). The *Child Welfare Act* 1939 was the predominant legislation in force during the period of operation of the TIBT, and its relevant agency was the Child Welfare Department, which was originally created in 1923. This situation remained in place until the *Youth and Community Service Act* 1973, which came into operation on 1 February 1974, and the responsible department was that of Youth and Community Services. Since that time there has been no repeal of the legislation, but the governing body has changed its name slightly at least seven times, and since April 2011 it has been called the Department of Family and Community Services.

In general, TIBT was a place of secondary punishment and strict disciplinary training for adolescents aged fifteen to eighteen years who had absconded from other institutions like those listed above, been convicted of minor offences while in those homes or while running away (Kerr 1990). Male youths were transferred to and between institutions by the Child Welfare Department officers’ administrative actions and decisions, not by court order. If any males under eighteen years did go before the courts, the court left the choice of institution to the Child Welfare Department. However, every movement of the residents within TIBT was orchestrated by the *General Orders Book*. 
Instructions to staff as to the management of inmates described a system characterised by punishment of the slightest infringement of rules and permanent observation (Quinn 2004, pp. 244-245).

It is apparent from the historical records that when an “inmate [did] not respond satisfactorily” they were sent to the “closed” institutions at Hay (for females) and TIBT (for males), and “when a satisfactory adjustment appears to have been made in these settings, the delinquent is normally returned to an open institution for the remainder of the training period” (NSW Child Welfare Department Annual Report 1969-70, p. 35). Indeed, there is an argument that the young people “transferred there between 1947 and 1981 were unlawfully detained” given the legal contradictions between the Child Welfare Act and the proclamation that established the Tamworth Institution (Quinn 2004, p. 244).

Detailed records are not available to show how many youths passed through the Tamworth Institution, but its first residents arrived from the Mount Penang Training School for Boys in April 1948. Some documentary extracts show that the total enrolment at the beginning of 1968 was eleven boys and in 1970 there were fifteen males (NSW Child Welfare Department Annual Report 1970-71, p. 75). According to the published summaries in the Annual Reports, enrolment figures at TIBT were consistently around forty each year, with no more than twenty-four residents in the institution at any one time. However, the TIBT registers show that only a small number of residents (approximately sixteen) were housed at TIBT at the same time, and none stayed for more than six months, but it should be emphasised that some boys were sent to TIBT more than once. In fact when the building plan is perused, it shows there are not enough cells to house more than twelve boys if the rule of not having two boys in the one cell is followed (Department of Public Works, Tamworth, see Kerr 1990). More importantly, an analysis of the admissions and discharge registers, derived from a Freedom of Information request to the NSW Department of Family and Corrective Services (Thompson 2011) confirms the lower occupancy level.
2.3 Regime at the Tamworth Institution

In New South Wales when young people were taken from their homes to live in institutions, staff adopted forms of regulations and controls that appeared to be more concerned with maintaining order than with the welfare of the residents. This is despite notions about “care” being firmly embedded in the Child Welfare Act of 1939 which in turn contradicted the objectives of the Tamworth Institution being “to promote Habits, Obedience, Reverence, Discipline [sic] & all that tends toward the moulding of a good citizen” (General Order Book 1974, p. 1). This General Order Book, which was reprinted in 1974 outlining the duties of the officers and activities of the residents is stored in the NSW State Archives and was still used for Endeavour House. Submissiveness was valued over autonomy and independence, and so the harsh regime was supposed to rehabilitate the residents by teaching them personal discipline. Samples of punishments in the General Order Book included food deprivation, isolation and pushing heavy sandstone blocks across the floor. The TIBT section in the Annual Reports referred to the boys making toys and brooms, as well as to them receiving guidance assessments and counselling before discharge (NSW Child Welfare Department 1947-1980). There is no reference in the General Order Book of the residents receiving guidance or preparation for discharge.

The first page of the General Order Book (1974) reveals that the officers were to address residents by their last names at all times, but it also emphasised that they should not be called derogatory names or be labelled because of their past actions. The staff were directed to disrupt any “idle talk” among the youth because it “breaks the rigidity of the routine or work or they will employ it as a means to distract your attention so that another inmate can do some subversive action” (General Order Book 1974, p. 22). Further the staff were to insist on “immediate responses” to instruction and to “ensure they stand correctly to attention when speaking or being addressed by you” and in addition to “ensure that they double to do that job and do not casually stroll away” (General Order Book 1974, p. 22). The youths under their care were to answer only with a “Yes Sir or No Sir” because idle conversations were not permitted (General Order Book 1974, p. 22).

Many staff members were ex-soldiers and some were war veterans, so they were used to discipline and following instructions. It seems that the male
superintendents were selected because they were tough disciplinarians, and it is certainly clear that none of the staff had any formal training (*NSW Child Welfare Act 1939*). They were instructed to “never give the impression you are entirely satisfied with results & in that way you will have all boys still trying to do that little bit extra” (*General Order Book* 1974, p. 1). Their key duties revolved around the:

- exercise of control & supervision, therefore, to these ends some efficiency will have in some cases to be let go. At time you may have to keep a party of lads waiting for one boy to finish his job before moving out of the area (*General Order Book* 1974, p. 1).

There were more detailed instructions about the supervision of the youths.

- Do not allow inmates out of your sight at all at any time.
- Do not allow inmates to run or march behind you.
- Do not allow inmates to come within 6 ft of you without permission.
- Do not allow the Tool house boy into the store without supervision (*General Order Book* 1974, p. 1).

Some commands were aimed at staff behaviour such as not being able to “sit down or lounge whilst supervising parties except for meals, recreation & sewing” or being told that “when giving instructions or giving general company orders for P.T., Drill, Routines etc. please do not have a cigarette in your mouth” (*General Order Book* 1974, p. 1). There was in place a system of receipting the youths under their care so that the staff needed to notify an officer whenever a boy was sent on a message and they had to obtain a “verbal receipt” when transferring a young person from one area to another (*General Order Book* 1974, p. 1).

Thus, the day-to-day operation at the Tamworth Institution was governed by internal guidelines in procedures manuals, including the *General Order Book*, detailing every daily routine. Steps were counted and movements calculated so that the boys were always under observation. For example, on page 292 of the *General Order Book* (1974), there are minute details about the early morning procedures carried out by the night staff (see Figure 2.6). These rules determined the way the boys slept, dressed, ate, marched, bathed and went to the toilet. As alluded to above there seemed to be greater concern with order than with the care, well-being and safety of the adolescent residents.
<table>
<thead>
<tr>
<th>Tamworth Boys Home, General Order 10</th>
<th>General Order No. 10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early Morning Routine</td>
<td>as amended Dec. 74</td>
</tr>
</tbody>
</table>

6am

The night officer, accompanied by one of the relieving officers, will go on a tour of each occupied cabin and the relieving officer is to satisfy himself that he sights the correct number of boys. Upon entering the block, the “wake up” alarm bell will be sounded for ten seconds, at which time the boys will rise and make their beds in the required manner.

6.20am

The 2 morning officers will re-enter the cabin block and open all doors, greeting each lad with “Good Morning” and addressing him by name. The remainder will answer but remain facing the bed. When cabin doors are open, the following orders will be given.

Cans and Gear ... UP (Boys will pick up cans, books, letters and handkerchief).

Cabin Doorways MOVE (Boys will move to the door of the cabin and face out).

One pace forwards March

About turn Cans Down

Lights Off (Boys will switch cabin lights off.)

Downstairs party About turn

Three paces forward MARCH (To march in front of own locker).

The upstairs officer will then send the lads in his section down one at a time and they will automatically take up position in front of their locker. When all is steady the company officer will continue.

Books In. (Library books to centre of top shelf)

Cans Down (Cans to the floor next to daywear), sheets and pillow slips (if necessary).

Daywear up

One step back March

Gear down (Boys will change into blue gym shorts and sandshoes (except Sundays).

Left knee down

Fold clothing (Allow sufficient time to fold pyjamas).

Stand

One pace forward MARCH

Adjust gear (Boys with false teeth replace same).

Steady

One pace back March

Right or Left

Quick march (When outside, boys are to be halted in 2 ranks then given the instructions...)

The night can emptying and cleaning will then take place after all lads have participated in P.T. Abolition parade will commence on the completion of P.T. Breakfast will be at 7 am.” and Adjustments to this routine will have to be made on days when washing has to be brought out from the cabin block.

(R. SMITH)
On behalf of,

L Franklin
Acting Manager


Figure 2.6: Page 292 of the General Order Book reprinted in 1974.
Each part of the daily routine was dictated, step-by-step, and repeated demonstrating that it was not possible for residents to think for themselves. For example, every phase of the task of washing-up was planned so that the boys always faced the officer-in-charge as they washed and wiped the dishes. The instructions below (see Figure 2.7) from the *General Order Book* (1974, p. 11) illustrate how the boys were regimented with their paces counted when they got out of bed in the morning after sleeping in isolation in the brick-walled cells, which were freezing cold in the winter and oppressively hot in the summer:

<table>
<thead>
<tr>
<th>Time</th>
<th>Instructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.15 a.m.</td>
<td>Party .....STAND. Boys to stand at attention facing bed</td>
</tr>
<tr>
<td></td>
<td>Cans and books.....UP</td>
</tr>
<tr>
<td></td>
<td>To cabin doorways.....MOVE</td>
</tr>
<tr>
<td></td>
<td>One pace forward.....MARCH</td>
</tr>
<tr>
<td></td>
<td>Party.....ABOUT TURN</td>
</tr>
<tr>
<td></td>
<td>Cabin doors.....CLOSE</td>
</tr>
<tr>
<td></td>
<td>Party.....ABOUT TURN</td>
</tr>
<tr>
<td></td>
<td>Three paces forward.....MARCH</td>
</tr>
<tr>
<td></td>
<td>Cans and books.....DOWN</td>
</tr>
<tr>
<td></td>
<td>All gear.....UP</td>
</tr>
<tr>
<td></td>
<td>Two paces to the rear.....MARCH</td>
</tr>
<tr>
<td></td>
<td>Gear.....DOWN</td>
</tr>
<tr>
<td></td>
<td>Pyjama Jackets.....OFF</td>
</tr>
<tr>
<td></td>
<td>Singlets and shirts.....ON</td>
</tr>
<tr>
<td></td>
<td>Pyjama pants.....OFF</td>
</tr>
<tr>
<td></td>
<td>Trousers.....ON</td>
</tr>
<tr>
<td></td>
<td>Belts.....ON</td>
</tr>
</tbody>
</table>

Figure 2.7: Page 11 of the *General Order Book* reprinted in 1974.

Excessive regimentation in TIBT involved the use of military discipline following naval traditions and punishment for the smallest infringements. This included using severe corporal punishment and solitary confinement as the standard responses to minor infringements. Solitary confinement and food withdrawal were also connected to the residents’ failure to achieve the minimum score on a points system, which allowed them certain privileges including talking and a full meal. Boys in solitary confinement received a piece of bread and a cup of half water and half milk per day. Often, there was the illegal and extended use of isolated detention. However, this was called segregation to circumnavigate the legal time frame for solitary confinement (SCARC 2004). Although some residents reported to the SCARC inquiry (2004) that there was a speaking time of fifteen minutes to one hour per day if they obeyed all the rules, it was rare for any resident to achieve this goal (Quinn 2004).
Staff at TIBT regularly detained residents in solitary confinement for weeks at a time (Quinn 2004). While in the detention unit, the boys were forced to scrape the iron grill with a metal object during the day so that officers knew he was not resting, and the remnants from these scrapings are still visible today. In 1984, the NSW Ombudsman found that in a “serious abuse of authority” and in contravention of the *Child Welfare Act*, two sixteen-year-old boys had been kept in solitary confinement at what by then had been renamed Endeavour House for three months (Wootten 1989), which is much longer than is allowed in adult prisons. However, no officers were disciplined and solitary confinement punishments continued until the closure of the institution.

There was a prevailing view that the Department’s “dirty linen” and mistakes should not be aired in public (Quinn 2004). Departmental executives unofficially condoned illegal punishments. In cases where staff mistreatment of residents was exposed or publicised, the staff were dealt with under the disciplinary provisions of the Public Service (Quinn 2004). There was also resistance to official visitors, including government officers, the Red Cross and lawyers, to TIBT, because that exposed the administration to external scrutiny. The Welfare Department feared that outside inspection could uncover the deceptive descriptions it gave to the non-existent training programmes at TIBT. The government portrayed these institutions as places where individual attention could be given to difficult residents (Quinn 2004).

There was little in the way of vocational training or employment at the Tamworth Institution, despite the fact that when the facility had operated previously as an adult prison it did provide practical training and work for its residents, including working at the gaol as carpenters, painters, barbers, tailors, shoemakers and school assistants (Kerr 1990). Yet, during the time it served as an adolescent facility, the boys were occupied by moving rocks, plaiting rope and making brooms. They spent most of their time being watched, and when some boys did rebel by climbing on the roof of the cellblock, water hoses were used to bring them down (Quinn 2004, SCARC 2004). Such instances of rebellion were rare given the tough regime at TIBT In fact no resident escaped from there until the late 1970s by which time it had been renamed Endeavour House. However, some boys ran away from other homes as soon
as they were released from TIBT and, once caught, were returned to the Tamworth Institution for another six months (Matthews 2007).

Most residents were eventually returned to their original juvenile “schools” or “shelters” vowing, with perhaps a false sense of bravado, never to go back to Tamworth. While the punishments there were clearly harsh, they seemed to have had little effect as a deterrent and little impact on recidivism, because many of its former residents were convicted of violent criminal acts as adults. Although, as stated earlier, court records demonstrate that males who were in the Tamworth institution during the 1960s and 1970s committed violent criminal acts of assault, rape and murder (NSW CaseLaw 2011, Australasian Legal Information Institute (AusLII) 2014), by contrast, there exist official reports that allude to positive outcomes for some of the former adolescents detained at TIBT. For example, it was recorded that the then-Superintendent of Mount Penang had received correspondence “from several boys who were once inmates of Tamworth and they speak of warm appreciation of their treatment and the lessons they have learned”. The report describes how:

all of these boys are doing excellently in the community and several who were enthusiastic gardeners have established themselves in business and have been so successful that they have had to employ staff (NSW Child Welfare Department Annual Report 1955-56, p. 16).

2.4 Inquiries into Juvenile Institutionalisation

There have been a number of separate but interrelated inquiries into the “care” of young people including the Indigenous “Stolen Children” (Read 1981), a longitudinal study of wards leaving care in NSW (Cashmore & Paxman 1996), “Bringing them Home”, which is a report into the separation of Indigenous children from their families (HREOC 1997), the Commission of Inquiry into the abuse of children in Queensland Institutions (Forde 1999), the treatment of child migrants who became the “Lost Innocents” (SCARC 2001), and two more by the Senate Community Affairs Reference Committee investigating the conditions of children who grew up in state institutions — “Forgotten Australians” (SCARC2004) and “Protecting Vulnerable Children” (SCARC 2005). Government inquiries dating from the 1934 McCulloch Report in New South Wales have shown that over half a million Australians experienced out-of-home parenting care in orphanages, children’s homes, training schools or institutions (SCARC 2004). The breakdown, in terms of numbers of these
three main groups include: up to 25,000 Indigenous Australians, between 13,000 and 14,000 child migrants and over 500,000 Forgotten Australians. SCARC (2004) recommended the further inquiry because the majority of institutionalised children were not included in the first two groups — Indigenous Australians and child migrants. The other group comprised “approximately 500,000 children” taken from relatives in Australia (SCARC 2004, p. 385). Only 700 adults — a fraction of those who were institutionalised — submitted evidence to the Forgotten Australian inquiry (SCARC 2004). Despite all these government inquiries, only three former residents of TIBT have thus far been given a platform to speak of their experiences (SCARC 2004). This is why the qualitative case study approach is warranted to endeavour to seek data via interviews and surveys from others who were detained in the Tamworth Institution, as well as analysing existing documentary materials.

The plight of Indigenous children, who were forcibly removed from their families, was addressed by the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from Their Families, and reported in the Bringing Them Home Report (HREOC 1997). Although it should be noted that there have been several earlier attempts at examining this issue directly or tangentially in, for example, the Royal Commission into Aboriginal Deaths in Custody (Wootten 1989). The Stolen Generations were subject to discriminatory laws, policies and practices in the removal of children. Many Indigenous children, desperately trying to find their families, ran away from juvenile institutions, and some were punished by being sent to TIBT (Wootten 1989), but at that time the ethnicity of residents was not recorded, so accurate figures of Indigenous residents are not available. One person told the inquiry that this removal was “supposed to look after me and protect me, but no one ever did” (HREOC 1997, p. 146). While Prime Minister Kevin Rudd and several members of parliament apologised on behalf of the Australian nation pm 13 February 2008, the fifty-four recommendations of the Bringing Them Home Report (HREOC 1997) have not been fully realised (Watson 2010). Nevertheless, the inquiry was able to heighten attention to the issue and to assist in the understanding of the history of the forcible separation of Aboriginal and Torres Strait Islander children from their families and the long-term consequences of this across generations (HREOC 1997).
The publication of *Lost Innocents: Righting the Record* by the Australian Senate (SCARC 2001) provided the outcomes of two inquiries: one British and one Australian. There was coverage of the English children, who were sent to Australia between 1938 and 1970 without their parents, with the expectation that they would be “cared for” by government and non-government organisations. The boys and girls were generally between the ages of three and fourteen; the majority being between seven and ten. Many of these children were told their parents and siblings were dead, while back in England their relatives were given similar information about the children. In 1987, British social worker Margaret Humphreys carried out an investigation that led to the widespread exposure of this scheme. She held the British Government accountable for child migration schemes and reunited some children, who were by then adults living mostly in Australia, with their parents in Britain, which is dramatised in the documentary and book *Oranges and Sunshine* (Humphreys 2011).

The experiences of many of the Forgotten Australians echo those of the other two groups. They suffered physical, psychological, emotional and/or sexual abuse during their childhood and adolescent years (SCARC 2004, 2005, Harrison 2011). Most institutionalised children did not receive adequate medical and dental attention, as well as little or no education (SCARC 2004), and free cigarettes were distributed in most juvenile institutions, but not in TIBT. In some institutions, new drugs were tested on the young people without their consent (Harrison 2011). As adults, most found it difficult to cope in the community after leaving the institutions and many of them are deeply embedded in our health and welfare systems as a consequence (SCARC 2004, Harrison 2011). The past experiences of the residents made it difficult for them to believe in themselves and make positive decisions (Harrison 2011). Overall the Report from SCARC (2004) was scathing of the care institutions, stating that there was “unsafe, improper and unlawful care of children, a failure of duty of care and serious and repeated breaches of statutory obligations” (SCARC 2004, p. xvi).

Although not unique to those in the Forgotten Australian group, one of the most damning experiences reported at these inquiries were how the young children were told lies about the alleged death of their parents and siblings or, in other cases,
were never told when their parent(s) has passed away. Many reported how they were informed that their parents had been killed in car accidents and “were dead or injured” (SCARC 2004, p. 106). They often did not find out the truth until they were much older and as a result were unable to establish contact with their families (SCARC 2004, p. 106). In other cases correspondence from their families was deliberately withheld and they “did not receive any of these letters” nor were they “told of their existence”. Furthermore, their discovery years later led to “a state of trauma, anxiety, anger and suffering from major stresses related to the knowledge that I have been lied to for the past 35 years” (SCARC 2004, Sub 142, p. 106).

According to the 2009 Report by the Create Foundation, which was established in 1993 to represent the voices of all Australian young people in out-of-home-care, almost half the young people who have been in correctional institutions commit a crime during their first year after leaving care. This report revealed that boys who have been in out-of-home care were:

- more likely to be undereducated, unemployed (29%), to earn less,
- become a parent at a younger age (28%), be involved in the juvenile justice system (46% of boys), become homeless (35%), be dependent on social assistance, have mental health issues, attempt suicide, and be at a higher risk of substance abuse (McDowall 2009).

On Wednesday 13 February 2008, Prime Minister Kevin Rudd MP formally apologised to Australia’s Indigenous people for their past mistreatment (Rudd 2008). On 16 November 2009, Prime Minister Kevin Rudd MP on behalf of the government of Australia moved a motion of apology in the parliament of Australia to the Forgotten Australians and the former child migrants (Rudd 2009). At this time, Rudd also apologised for the length of time it had taken for the Australian government to say “sorry” that included Senate reports and a Commonwealth recommendation (Rudd 2009). On the same day, Senator Evans, the Leader of the Government in the Senate moved a motion supporting this apology, which was debated and agreed to (Evans 2009). As part of the apology, the Commonwealth Government announced a range of initiatives and recommendations to provide support to these two groups of people, collectively known as care leavers (Rudd 2009).

Many care leavers in the Alliance for Forgotten Australians (AFA), which is a self-help and lobby group whose “mission is to promote and encourage greater
recognition for Forgotten Australians” (AFA 2014), have publicly said that an apology from a government, which was not involved in instigating their trauma, was insufficient (Harrison 2011). Some of these men and women demanded financial compensation for their ongoing physical and psychological problems, and the Federal Government is launching Caring for Forgotten Australians, Former Child Migrants and Stolen Generations: an information package for aged care services (AFA 2014). Others accepted the apologies as a government gesture, but would also appreciate some form of financial compensation and the AFA has commenced civil litigation (AFA 2014). Although the Federal Government has committed $26.5 million over four years to deliver a new national Find and Connect Service, personal compensation has not been promised (Child Welfare Department 2014).

The South Australian Government’s Children in State-Care Commission of Inquiry (Commission of Inquiry South Australia 2008) acknowledged the experiences of the Forgotten Australians in that jurisdiction. After the Inquiry into the Abuse of Children in Queensland Institutions (Forde 1999) found substantial evidence of abuse and neglect of young people in its institutions, the report recommended the establishment of a service to support the needs of former children in care, known as the Aftercare Resource Centre (ARC) (Forde 1999). This programme is run under the auspices of Relationships Australia (ARC 2012).

During the 1960s and 1970s when incidents in juvenile institutions were investigated, residents were afraid to complain, and the administrations were generally exonerated. For example, a particularly brutal incident occurred on 14 May 1961 at the Farm Home for Boys Westbrook Queensland, when approximately 36 inmates escaped. The Stipendiary Magistrate Commissioner, found no evidence to support the boys’ complaints including any directives that were issued for public strappings or taking of castor oil (Schwarten 1961).

Many distressing stories were told to the committees involved in all of these inquiries about the psychological and physical mistreatment experienced in government and church institutions. Many care leavers, who have suffered physical, psychological and sexual abuse, struggle with the long-term effects of this mistreatment. At an early age, the institutionalised residents developed strategies to
block emotional and physical pain while coping with their negative and abusive environment. These patterns of behaviour often continued into adult life and are expressed through alcoholism, gambling, self-harm and the inability to form and sustain positive relationships (ARC 2012). During the inquiries, residents shared stories of neglect, humiliation and deprivation of food, education and healthcare. Their narratives now constitute part of the official literature relating to the events, policies, treatment and effects, both physical and psychological, of institutionalisation in Australia in the twentieth century. All these inquiries confirmed that many care leavers tried to block the painful memories of their past by resorting to subsistence abuse, including drinking alcohol excessively and using illicit drugs. Others have earned their living by prostitution or law-breaking offences, which has resulted in a large percentage of the prison population being care leavers. Anecdotal evidence has shown an abnormally large percentage of emotional problems, phobias, recurring nightmares depression, contemplation of suicide or actual suicides among care leavers (HREOC 1997, Forde 1999, SCARC 2001, SCARC 2004, SCARC 2005).

2.4.1 Testaments about Tamworth Institution

The Tamworth Institution has been described as having stricter discipline than any other state-run institution, including the Mount Penang Training School at Gosford, which previously had been considered the strictest juvenile detention centre (Quinn 2004). Others have suggested that when boys were returned to other institutions after being in TIBT, they were like “automatons” and cowered “in front of any staff member and responded automatically to every command” (Wootten 1989, p. 29). Therefore, they were displayed as examples of obedience, demonstrating the supposed effectiveness of TIBT to the other residents in the institution (Quinn 2004).

Residents from the Tamworth Institution testifying at the SCARC inquiry supported the fact that authorities in the institutions forbad “candid reporting” of the actual conditions and/or mistreatment to visiting officials. Complaints resulted in harsh punishment. Any glancing sideways or looking up was met with a “bounce”, which a resident said was the standard punishment that occurred in TIBT. This was the loss of a meal or the loss of all meals over a period of 24 to 48 hours (SCARC 2004, p. 97). Another resident testified that the untrained staff were unsuited to their work duties and they controlled the adolescent residents with threats of shameful and
violent punishments. One resident compared it “to the conditions experienced by prisoners of war in the Changi prison camp in WWII” (SCARC 2004, p. 83). A resident described the institution as “the most unbelievably cruel, sick and sad place” (SCARC 2004, p. 55).

When there were internal problems at the TIBT, authorities including officers from the Department of Child Welfare did not examine whether the institutional regime could have administrative difficulties (Quinn 2004). Residents’ stories indicated that authorities punished anyone who complained about the conditions and treatment at TIBT. There were visits from the officers of the Child Welfare Department including the Minister, and when one of the residents found the courage to complain, the Minister told the guard to “to escort this compulsive liar to solitary confinement and not to release him until he learned to tell the truth” (SCARC 2004, p. 179). While dragging the boy away, the guard beat him and the Minister just watched. Although it resulted in another beating the abused boy warned the other boys waiting to be interviewed by the Minister not to complain (SCARC 2004, p. 179). The doctor regularly visited TIBT, but the adolescents could not complain about their treatment because the doctor would support the guards, and tell them that the boy was “gaining too much weight” so had to miss meals (SCARC 2004, p. 247).

2.4.2 Out-of-home Care
The development of the Australian child welfare system began in the early 1800s when the NSW Government and a committee of private citizens established a home for orphans and destitute children, most of whom had convict parents (Seymour 1988). The welfare system then became responsible for the care, health, well-being and education of these children-in-need either in state or church institutions. Elizabeth Macquarie, the wife of an early colonial governor, instigated the building of the first “out-of-home care” institution at Parramatta in 1813. Other states built juvenile institutions and children’s orphanages, and in the second half of the nineteenth century there was a large increase in the number of reform and industrial institutions or schools to cater for both offending and destitute children (Seymour 1988).

During the last two centuries in Australia, the government practice of removing children from their parents or relatives so they became wards of the state
was referred to as “out-of-home care”. The purpose of this care was to provide children who were at risk of harm with a place that ensured their safety and allowed for healthy development (Bean & Melville 1989). In New South Wales, children were taken into care for many reasons, including being orphaned, if their parents divorced, if they only had a single parent, or if they experienced domestic violence or other forms of family hardship (Harrison 2011). Children were also made wards of the state after being charged with being uncontrollable, neglected or in moral danger. Some children were removed from their parents because the state considered them unfit, poor or traumatised from the war (Harrison 2011). Indigenous children suffered severe psychological trauma after being removed from, or being denied contact with their families. Some Indigenous children were forced to work, without pay, for Europeans, mainly on farms. Frequently, they ran away from their employers, but overall, these children remained ensnared in a situation that resembled slavery. (Robinson 2008).

Thus, when a child became a ward it was not because they had committed an offence, but due to their family’s circumstances. Children, who were destitute or had family problems, were placed in the same institutions and homes, as those who were runaways or delinquent (Harrison 2011). Reform and industrial institutions were intended to contain and serve juvenile populations — delinquents, neglected children, the destitute, children-in-need and youths with family problems. However, no attempts were made to classify or separate delinquents, who had committed some misdemeanor from neglected youths, who had not been unlawful. In fact Seymour illustrated with this quote, that even in the 1800s they were grappling with the difficulties in defining who was, and who was not, a juvenile delinquent:

Many children convicted of stealing and sent to reformatories are found to be moral and well-behaved, while very often it has been proved that children committed to the Industrial School as neglected or destitute are vicious, immoral, and altogether unfit to mix with decent children (1988, p. 48 cited in the South Australian State Children’s Council).

In New South Wales, the Director of the Child Welfare Department in 1952, Mr R.H. Hicks, was quoted by journalist John Boland as saying that rehabilitating the family was the first objective of his department and that of the 1,700 children that came to the Department’s attention the previous year, only thirteen per cent had been
removed from their families (Boland 1952). Later it was reported that these children were taken to special government homes where they were medically examined before being sent to homes with other state wards (Patrick 1952). Many former foster children were also sent for punishment at TIBT as adolescents (SCARC 2004).

By 1960, although additional institutions had been opened, the NSW system contained more children than there were places. For example, in that year the Mount Penang Detention Centre at Gosford that was supposed to accommodate 200 boys had a population of 445. By the mid-1970s, an estimated 141 Australian institutions housed upwards of 200,000 children (SCARC 2004). Of these, 37 were state government institutions comprising remand, detention and correctional centres, as well as reform schools (SCARC 2004’). Although the Welfare Department Annual Reports used the words “schools” and “training centres” almost no vocational training or teaching of life skills occurred in the juvenile institutions (Quinn 2004). There was, however, a strong shift from residential care to family-based placements such as foster and relative care in the 1970s and 1980s as a result of the increasing cost, the recognition of children’s needs for relationships and the exposure of abuse in many institutions and children’s homes (Library Council of NSW 2012).

There is a lack of detailed information about the chronological development of child welfare policies and practices in Australia especially in relation to juvenile institutions (Tregeagle 2000, SCARC 2005). However, the recent inquiries into institutional care have been able to demonstrate that most out-of-home care environments were not conducive to the healthy socialisation of children and provided no training to equip them for life outside the institution (HREOC 1997, SCARC 2001, SCARC 2004, SCARC 2005). The harmful effects experienced by children in these institutions are evidenced in publications written or edited by care leavers and inquiry reports (Penglase 2005, Szablicki 2007, Branigan & Hil (Eds) 2010).

If regimentation, isolation from the community, lack of independence, dignity and privacy, poor quality of care, and control by others were seen as the essence of an institution, then there is little wonder that social reformers and health and welfare advocates of the 1960s and 1970s argued for deinstitutionalization (AIHW 2001, p. 99)
When the Australian Human Rights Commission and the Australian Law Reform Commission jointly undertook an inquiry into children and the legal process in 1997, their report warned: “the care system is producing long term criminal offenders”. When they inquired into children’s involvement in the care and protection system, the committee found that people, who have been in youth care institutions, were over-represented in prisons. A range of factors contributed to this over-representation, including abuse, neglect and placement instability (McFarlane 2008, Mendes & Baidawi 2012). Most of these inquiries reached the conclusion that being placed in out-of-home care institutions were traumatic and lifelong because of the restrictive access given to most basic emotional needs of residents, thus resulting in a negative sense of identity and low self-esteem (Forde 1999, SCARC 2004, Read 1981). Several adults who had been institutionalised as adolescents documented how the institution contributed to their stigmatised identities (Penglase 2005, Szablicki 2007, Hill 2007, Branigan & Hill 2010).

2.4.3 Care Leavers of Australia Network (CLAN) Surveys

CLAN is a support and advocacy network for people who grew up in Australian orphanages, children’s homes, other institutions and foster care. CLAN members understand that being raised without a family has lifelong effects, which require lifelong support services (CLAN 2014). CLAN conducted surveys involving 959 care leavers about their out-of-home care experiences in such institutions between the 1930s and 1960s. These constituted one of the first attempts to systematically gather qualitative and quantitative data about the Forgotten Australians and to examine the impact on their adult lives (CLAN 2008, CLAN 2011).

The first CLAN survey took place in 2006 and 2007 and the results were published in the CLAN Report (2008), with a response rate of 382 of a possible 501 CLAN members at that time. In terms of demographics, 77 per cent were under eight years of age when first taken into “care” and 75 per cent left when they were thirteen to eighteen years old. About one-third (123) had been removed from their family homes by the police. A thought-provoking statistic is that just over 43 per cent of the respondents were the children of parents (mostly fathers) who had served in the armed forces. These men received little support and no counselling on their return from
combat, so found it difficult to return to civilian life, thus there was a breakdown of family life, and inevitably the children entered into “care”.

The respondents reported severe levels of abuse on a regular basis (see Figure 2.8) with the most frequently experienced punishments, such as being hit, denial of treats (not sure what type of treats), food deprivation, being “boxed” and placed into solitary confinement. There were other forms of punishments, such as locked in a cupboard, being force-fed, and one of the most distasteful being “forced to eat vomit”, which was experienced by fourteen per cent of those who participated in the survey (CLAN 2008). More than half the participants (54%) said that they left care without achieving the NSW Intermediate Certificate, which until 1966 was awarded after an examination at the end of the third year in high school.

<table>
<thead>
<tr>
<th>Reported Punishments</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hit/smacked/whacked</td>
<td>83</td>
</tr>
<tr>
<td>Denied treats</td>
<td>63</td>
</tr>
<tr>
<td>Deprived of food</td>
<td>56</td>
</tr>
<tr>
<td>Boxed</td>
<td>53</td>
</tr>
<tr>
<td>Solitary confinement</td>
<td>47</td>
</tr>
<tr>
<td>Poked</td>
<td>45</td>
</tr>
<tr>
<td>Deprived of visitors</td>
<td>41</td>
</tr>
<tr>
<td>Locked in a cupboard</td>
<td>38</td>
</tr>
<tr>
<td>Forced to eat vomit</td>
<td>14</td>
</tr>
</tbody>
</table>

Figure 2.8: Regular punishments reported by the respondents, adapted from the results of the first CLAN survey (CLAN 2008).

Over one-fifth of the respondents have lived on the streets at some time in their lives. Just over thirty-five per cent have been in trouble with the law, and nineteen per cent went to gaol (CLAN 2008). Many had suffered mental health issues with more than sixty per cent experiencing depression and low self-esteem (see Figure 2.9). They did not have the finances to seek counselling or medical assistance. There was also a high proportion, who reported suicidal thoughts or attempts. Almost two-thirds said that they experienced suicidal thoughts compared to fewer than fifteen per cent for the general population; and over one-third had attempted suicide in the last twelve months, which is more than ninety-one times that of the Australian population (CLAN 2008). A significant proportion (41%) knew of other care-leavers who had either attempted suicide or indeed tragically been successful in committing suicide (CLAN 2008). Some of the most striking results revolve around the emotional feelings reported by respondents. Mostly they felt “not as good as others” (65%) and
“forgotten” (57%). There was a range of other negative emotions that impacted on almost half of the participants (40% to 49%) experiencing feelings of being abandoned and ashamed or expressing loneliness, grief, loss and anger (CLAN 2008).

<table>
<thead>
<tr>
<th>Reported Mental Health issues</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression</td>
<td>65</td>
</tr>
<tr>
<td>Low self-esteem</td>
<td>61</td>
</tr>
<tr>
<td>Sleep disorder</td>
<td>59</td>
</tr>
<tr>
<td>Nightmares about care experiences</td>
<td>45</td>
</tr>
<tr>
<td>Panic attacks</td>
<td>43</td>
</tr>
<tr>
<td>Fear of being locked in</td>
<td>43</td>
</tr>
<tr>
<td>Severe social anxiety</td>
<td>34</td>
</tr>
<tr>
<td>PTSD</td>
<td>32</td>
</tr>
<tr>
<td>Severe social anxiety</td>
<td>34</td>
</tr>
<tr>
<td>PTSD</td>
<td>32</td>
</tr>
<tr>
<td>Agoraphobia</td>
<td>14</td>
</tr>
</tbody>
</table>

Figure 2.9: Mental health issues suffered by respondents, adapted from the results of the first CLAN survey (CLAN 2008).

In the second survey there were 577 respondents from all over Australia. Although some of the main questions from the first survey were replicated, there were also items that assessed care leavers’ coping mechanisms, as well as providing them the opportunity to narrate their childhood stories. Many respondents found the exercise of telling their narratives “beneficial or therapeutic” (CLAN 2011, p. 5). Issues including poverty, alcohol abuse, parents’ marriage breakdowns and parents’ desertion were the most common reasons for going into care. Only 13 per cent of the sample were orphans with one or both parents dead, and 332 respondents were separated from their siblings. In this second survey the respondents did note that the government apologies and the Senate inquiries had formed part of their healing process because “they valued the thought of being acknowledged and understood by the general public” (CLAN 2011 p. 31).

The survey questionnaire provided 17 options about their experiences after “care” (see Figure 2.10) with 15% reporting that they “can’t trust people in authority”. Others (12%) experienced “problems maintaining close relationships”. They report having psychological issues (12%), flashbacks (9%) and physical pain (7%). Some (6%) listed problems with anger (6%), alcohol or their parenting skills. Interestingly, only 4% of respondents admitted to spending time in gaol. However, 59% of the males had been in trouble with the law (apart from parking infringements). The second CLAN questionnaire offered the opportunity for respondents to comment on eleven after-care services including counselling, legal matters and support groups.
Many respondents felt the services were not useful because the care leavers had to explain over and over again to different people about their situations. “Over 50% of the respondents said feelings of shame or fear were dominant” (CLAN 2011 p. 36) and respondents mentioned factors such as stress, low self-esteem and lack of social skills.

<table>
<thead>
<tr>
<th>Experiences after “care”</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can’t trust people in authority</td>
<td>15</td>
</tr>
<tr>
<td>Problems maintaining close relationships</td>
<td>12</td>
</tr>
<tr>
<td>Psychological</td>
<td>12</td>
</tr>
<tr>
<td>Flashbacks</td>
<td>9</td>
</tr>
<tr>
<td>Physical pain</td>
<td>7</td>
</tr>
<tr>
<td>Problems controlling anger</td>
<td>6</td>
</tr>
<tr>
<td>Alcohol problem or had an alcohol problem</td>
<td>6</td>
</tr>
<tr>
<td>Serious problems as parent</td>
<td>6</td>
</tr>
<tr>
<td>Got pregnant as a teenager</td>
<td>5</td>
</tr>
<tr>
<td>Drug problem or had a drug problem</td>
<td>4</td>
</tr>
<tr>
<td>Child or grandchild with drug problem</td>
<td>4</td>
</tr>
<tr>
<td>Spent time in gaol</td>
<td>4</td>
</tr>
<tr>
<td>Child or grandchild with alcohol problem</td>
<td>4</td>
</tr>
<tr>
<td>Choose not to have children</td>
<td>2</td>
</tr>
<tr>
<td>Got a girl pregnant</td>
<td>2</td>
</tr>
<tr>
<td>Worked in the sex industry</td>
<td>2</td>
</tr>
<tr>
<td>Child or grandchild in gaol</td>
<td>1</td>
</tr>
</tbody>
</table>

Figure 2.10: Reported suicidal behaviours by the respondents, adapted from the results of the second CLAN survey (CLAN 2011).

From the CLAN surveys (2008, 2011), the evidence at the SCARC (2001, 2004) and other independent inquiries, it is clear that many care leavers have sad memories of their loveless, cruel and deprived childhood. The lack of family love, feelings of abandonment and the callous abuse in their formative years as well as the failure of the child welfare system to provide a safe and nurturing alternative combined to produce disadvantaged adults who are socially excluded from mainstream society (CLAN 2011).

2.5 Summary
As has been shown in this chapter research into the NSW Juvenile Correction System 1905-1988 by Quinn (2004), supported by evidence presented at the SCARC (2004) inquiry, indicates that young people who had been in out-of-home care experienced permanent feelings of loss and rejection when they were adults. Many of these children lost contact with their parents and siblings. Lonely and neglected in institutions, the youths were often cold and hungry. When adolescents misbehaved or
absconded from other juvenile institutions they were punished by being sent to the Tamworth Institution, where they were forced to perform demeaning, shaming tasks in an environment devoid of care and education.

The analysis of the long-term traumatic influences to residents at TIBT started with an investigation into the history and regime at TIBT, as well an examination of previous research into juvenile institutions and out-of-home care. Various Senate inquiries have found that the care leavers’ emotions, which were damaged due to the indignity, alienation, cruelty, regimentation and lack of nurturing they experienced while institutionalised, have affected the behaviour and thoughts of the Forgotten Australians (SCARC 2004). SCARC (2001, 2004). It was reported that institutional treatment had an enduring impact on the life of care leavers, particularly leading to feelings of low self-esteem and self-worth (SCARC 2001, 2004). The later inquiry concluded that most adult care leavers’ actions were considerably negative and destructive.

The legacy of their childhood experiences for far too many have been low self-esteem, lack of confidence, depression, fear and distrust, anger, shame, guilt (SCARC 2004, p. xvi).

Both senate and state inquiries found that the institutionalisation of juveniles resulted in a loss of identity, which was coupled with the lack of self-esteem that resulted from feeling unwanted as well as continually being told they were bad, worthless and needed to be punished (SCARC 2001, 2004). The care leavers’ actions were often considerably negative and destructive.

Submissions refer frequently to a range of legacies including low self-esteem, lack of confidence, depression, fear and distrust, anger, shame, guilt, obsessiveness, social anxieties, phobias, recurring nightmares, tension, migraines and speech difficulties ... Many have difficulties forming and maintaining trust in relationships, or have remained loners and never married. Some care leavers with emotional problems have contemplated or taken the ultimate step of suicide. Others have survived (SCARC 2004, p. 245).

Historically, juvenile institutional management has focused on containment and not on self-improvement and education (Goffman 1963, Edgerton 1967). Often, this lack of education means that residents lack basic literacy and numeracy skills, causing long-term self-esteem issues and difficulties finding employment. Other
consequences of institutionalisation include struggling with poverty and problems accessing appropriate and affordable housing. Residents can lack basic life skills like knowing the process to rent a house or the inability to help their children with their homework. Additionally, obtaining employment is extremely difficult for individuals with no work skills and little education (Smith 2005, Reasoner 2010, Emler 2001). There are clearly strong criminal influences within all types of out-of-home care environments, as well as in the daily experiences of all individuals, especially for vulnerable adolescents (Marsh 2009).

The environment of TIBT was a tough regime designed for young males who had not responded to attempts to rehabilitate them in open institutions (Kerr 1990). However, using brutal physical violence and disintegrative shaming for punishment is recognised as a major factor of mental health problems and may well contribute to aggressive behaviour (Gilbert 1992, 2003, Gilligan 2003, Tangney & Dearing 2002). The directions in the General Order Book (1974) illustrated that to manage the behaviour of the adolescents, the guards at TIBT controlled every action of the residents, giving them little time to practise self-control or make their own decisions, in an institutionalised environment. This case study of TIBT seeks to reinforce, extend or provide a more refined explanation of what the government inquiries have uncovered in other “care” institutions.
CHAPTER 3

Theories of Identity, Self-control and Shaming

On arrival, I was bashed until I gave the correct answer, my head was shaved and my personal clothes taken. From then on I spoke to no one without permission and followed the regime without thinking (INT6).

3.1 Introduction

This chapter presents a detailed discussion of the three key theories that inform this thesis. They are Goffman (1961) on “total institutions” and “spoiled identities”; Hirschi (1969, 2004) on aspects of his original “control” and “social bonds” theory along with its iteration as a general theory of crime, and Braithwaite (1989) on “labelling and shaming” and “degradation ceremonies”. These were briefly alluded to in Chapter 1, but the aim here is first to describe these theories in considerable detail teasing out the elements relevant to this case study of the Tamworth Institution. The other key objective is to present the research studies and empirical evidence that relate to the theories (i.e. the “testing” of them). This leads into a critical discussion of these theories, which is especially important given the longevity of them to ensure that they are critiqued with a twenty-first century sensibility. Later in this chapter the theories will be critiqued and the similarities and differences examined or the overlap vs. distance between them discussed.

There are numerous theories from the social sciences, which have provided a foundation for the understanding of human behaviour. These highly organised academic statements of assumptions and logically interrelated assertions provide explanations and predictions about the effects of various events in lives of individuals (Winfree & Abadinsky 2003, Tibbetts & Hemmens 2010). Some theories offer micro explanations that are at the individual level (Hirschi 1969, 2004, Gottfredson & Hirschi 1990). Other theories are aimed at macro explanations (Braithwaite 1989). Goffman (1961) is probably somewhere in between.

With this in mind, three particular theories, which were formed during the time of TIBT (1960s to the 1980s), were chosen to provide explanatory guidance for this research. Institutionalisation produces what Goffman calls a “spoiled identity”, an
identity that causes a person to experience stigma (Goffman 1961, 1963). Disintegrative shaming and labelling could also contribute to this psychological characteristic of a degraded identity (Braithwaite 1989). Studies link punitive treatment and disintegrative shaming to psychological symptoms, so that often individuals believe they are damaged and worthless and have ongoing negative influences on their psychological health (DeLisi et al. 2011, Horwitz et al. 2001, Steiner, Garcia & Matthews 1977). The self-control theory was built upon existing concepts of social control, which asserts that ties to family and society reduce a person’s propensity for deviant behaviour (Hirschi 1969). Therefore, he theorises that diminished self-control is a key factor underlying criminality (Hirschi 1969). Any form of self-control is difficult to practise in a regimented institution where it is imperative that the residents follow routines, do not think for themselves, lack spontaneity, cannot make choices and often lose their personal identities or they develop “spoiled identities” as they become one with the crowd (Goffman 1961, 1963).

All three theories are integrated. In his book *Crime, Shame and Reintegration*, Braithwaite (1989) explains how labelling, shaming, control, opportunity and learning theories fit into his work. He is really theorising more at the aggregate level (societies with positive shaming have lower crime rates), but it can be co-opted for use at the micro level to when discussing “degradation ceremonies” (Braithwaite 1989). This supports Tannenbaum (1938), who found that the negative tag or label often contributed to further involvement in criminal activities. Hirschi’s work on self-control clearly owes much to that of Bowlby (1969) and Ainsworth (1973) about attachment as a way of theorising the tendency of people to make strong caring bonds to family, and explaining the many forms of emotional distress and personality disturbance, including anxiety, anger, depression and emotional detachment following unwilling separation and loss. Hirschi (1969) attempted to map some causal factors of crime so it is an explanatory theory. Goffman (1961) is a theory about outcomes — what is the result of institutionalisation.

### 3.2 Goffman’s Spoiled Identity

Goffman (1961) researched monasteries, prisons and boarding schools to formulate his theory of the characteristics and behavioural manifestations of total institutions.
and spoiled identity. He found that residents in a total institution must either accept an extremely diminished sense of self or be punished for disobeying the rules of the institution. His analysis showed that “spoiled identity” is where a resident’s sense of self is subjected to profound alteration as a result of various traumatic experiences. When individuals sleep, play and work with a group of people under rules without an overall rational plan, they are in a social arrangement in a community (Goffman 1963). In his groundbreaking study of total institutions, he also investigated the effects on groups of people who were bureaucratically processed while being physically isolated from normal activities. He argued that institutions used ritualised tasks to ensure that both the guards and the residents knew their respective roles and responsibilities, thus “institutionalising” them (Goffman 1961). The total institutions removed the residents’ freedom of choice and any sense of autonomy, subjecting them instead to regimes of rule-bound schedules, constant surveillance and monitoring, so they had no opportunities to practise self-control (Goffman 1961).

Orphanages and children’s homes were “total institutions … characterised by disciplinary regimes that governed almost every aspect (the totality) of a resident’s life” (Goffman 1961, p. 4). Some people, who were raised in state institutions could not successfully live outside institutions because they were used to the routine, hence their cycle of repeat offending (Goffman 1961). He indicated that the positive development of an individual’s personal identity and self-esteem was negatively affected when institutional care and its surrounding environment replaced parenting responsibilities (Goffman 1963).

Goffman (1961) argued that residing in a total institution, which he defined as an insulated enclosed social system when most aspects of residents’ lives were controlled, impacted on a person’s entire being, but specifically affected how they came to view themselves in relation to others. He also contended that the regimented pattern of institutionalised life and its commitment to rule-bound order and organisation disregarded the resident’s dignity, and therefore influenced the subject’s sense of self and personal identity (Goffman 1961). One landmark and often quoted explanation of the issues involved in institutionalisation is his exploration of “spoiled identity” occasioned through experience in “total institutions”, whereby a resident’s sense of self was subject to profound alteration as a result of various detrimental
experiences including shaming, stigmatisation and labelling (Goffman 1963). Although one of his books is titled *Stigma: Notes on the Management of Spoiled Identity*, Goffman did not define “spoiled identity”, but rather described an individual’s stigma as being a normal identity that has been spoilt by the reaction to others (thus the term “spoiled identity”) (Goffman 1963).

In 1961, Goffman offered the concept of “mortification of self” which occurred when residents of institutions were subject to degrading and humiliating treatments that removed traces of their individual identity. This could entail not having personal clothing and wearing uniforms, the shaving of heads and name changes. When the residents become just “one” in a group of adolescents, they no longer see themselves as individuals, and almost lose their identity in the crowd (Goffman 1961). These treatments marked a separation between the residents’ former selves and their institutional selves. He also found when there was no contact with parents or nurturing during this time, more negativity developed (Goffman 1961). If “mortification of self” occurred during adolescence, there can be no development of independence because the young people have no choices, and often they feel worthless (Goffman 1961, 1963).

Invariably the regime and routine in total institution weakens the self-control of residents (Goffman 1961). Studies have shown that the young people resent an inflexible management regime; they tend not to cooperate, continue to rebel and commit unlawful acts, thus breeding antagonism between staff and residents (Goffman 1961, 1963). Finding it difficult to maintain order, the guards resort to tighter controls, including physical and shaming punishments. The guards’ total control thus diminishes the residents’ self-control until it becomes a vicious cycle where the residents react to the overbearing routine, engage in acts of deviance as a form of rebellion and then they endure more shaming via brutal punishments (Becroft 2009, Hitlin & Kramer 2014, Forde Inquiry 1999). They cannot develop self-control when they dutifully, without protest, obey the guards’ orders (Goffman 1961, 1963).

The work of Goffman on total “institutions” and “spoiled identity” has become the standard frame of reference on institutions for many students (Goffman 1961, 1963)n. In one study that applied the total institution theory, the survey data
presented evidence of block treatment of individuals in both long stay hospital wards and smaller nursing homes for the elderly, but the observational study showed that only the ward setting conformed closely to Goffman’s concept of the total institution (Clark & Bowling 1990). The stigma concept is applied to many circumstances ranging from exotic dancing (Wesely 2003) to being in debt (Davis 1998). Research shows that the term “stigma” is applied when elements of labelling, stereotyping, separation, status loss and discrimination co-occur in a power situation that allows them to unfold (Link & Phelan 2006). Goffman’s theory (1963) is widely regarded as having inspired a profusion of research focused on the nature, sources and consequences of stigma. Although his theory is not without problems, the real achievement of his work is that it challenged sociology at the time, and provided a unique perspective on the idea of identity and society (Smith 2006, Smith, Thornberry & Ireland 2005).

3.3 Hirschi on Self-control

Travis Hirschi, an American sociologist, helped to develop the modern version of the self-control theory of crime. He put forth his innovative rendering of control theory built upon existing concepts of social control, which is situated amongst other sociological theories that focus on the role of social and familial bonds as constraints on offending (Hirschi 1969). His early research on self-control is relevant here because he found that young people commit unlawful acts when the parent/child attachment has been broken (Hirschi 1969). In his original study Hirschi (1969) concluded that those who engaged in delinquency were more like to have poor relations with parents and authority figures such as teachers (Vold, Bernard & Snipes 2002). In addition, Hirschi (1969) argued that attachment to delinquent peers was associated with higher offending levels by youths (Vold, Bernard & Snipes 2002). The core proposition of the self-control theory is easily understood — the lack of social bonds or of self-control increases criminal involvement (Hirschi 1969).

Hirschi (1969) described the social bond as attachment, without which there is no internalisation of norms and values; commitment, which refers to investment in conventional norms, rules and conformity; involvement that is behavioural and measures the level of conventional activity, and the belief that delinquency is more likely when a youth attaches less significance to conventional moral beliefs (Winfree
& Abadinsky 2003). According to Hirschi (1969) the causal elements of self-control theory are inadequate child-rearing practices because self-control is established by age eight. He concluded that inadequate parental management results in diminished self-control, which influences an individual’s choices when confronted with an opportunity for immediate gain through diminutive outlay. He emphasised the importance of having parental and school control in order to keep people honest (Hirschi 1969). In 1990, Gottfredson and Hirschi contend that individuals with destabilised self-control are unable to see the consequences of their decisions. Although they believe that diminished self-control is a general cause of crime, they do not argue that it is the sole cause of crime (Gottfredson & Hirschi 1990).

In 1990, after carrying out studies in juvenile institutions, Gottfredson and Hirschi modified Hirschi’s self-control theory, which stated that all people from birth possess the self-indulgent, pleasure-seeking drive to act in selfish and aggressive ways that lead to criminal behaviour (Hirschi 1969). They argued that self-control was the tendency to refrain from antisocial behaviour because the individual recognised the consequences of that behaviour (Gottfredson & Hirschi 1990). Additionally, they found that low self-control had social consequences connected to people’s ability to sustain relationships and feel empathy. They developed the general theory of crime also known as the theory of low self-control, which emerged through the evolution of social control theory (Gottfredson & Hirschi 1990). It is a “single concept” that is “internal to the individual” and is derived through the process of “socialisation” (Vold, Bernard & Snipes 2002, p. 190). It is most often linked or indeed operationalised by reference to related concepts such as “impulsivity, risk-seeking, physical activities, self-centredness, temper and simple tasks” (Vold, Bernard & Snipes 2002, p.191).

In 2004, when writing about his self-control theory, which refers to the ways social systems regulate people’s thoughts, feelings, appearance and behaviour, Hirschi concluded that social-control and self-control were the same, but made a change to his earlier general theory that low self-control contributed to criminal actions. His change was that people are controlled and do not act on their deviant urges when diverse factors including the fear of punishment control their impulses to break social rules. Social bonds influence the decision-making process and influence an individual’s
inhibitions on whether to commit criminal behaviour (Hirschi 2004). While that social control was connected to an individual’s ties to conventional society, for example parents, teachers and institutions such as schools, churches and the law, he had come to the view that each potential criminal act had benefits and consequences, called “costs” (Hirschi 2004). Although most people in society see similar benefits in crime because their criminal acts allow them to get what they want, some fear the costs (Hirschi 2004). Hirschi used the term “costs” without further explanation, but it was suggested that these costs could be any “subjectively negative outcome (e.g. disapproval of parents)” or their fear of being sent to gaol (Intravia, Jones & Piquero 2011, p. 2). When this was tested, there seemed to be a logical association between measuring an individual’s self-control using inhibitors and rational decision-making (Piquero & Boouffard 2007, Intravia, Jones & Piquero 2011).

It was found that when testing measures of social bonding — conventional moral belief, attachment, commitment and involvement — with 359 adolescent offenders, low self-esteem was negatively associated with social bonding while being positively related to delinquent peer association and offending (Longshore, Chang & Messina 2005). Weak social bonds can lessen the development of acceptable self-control and empathy to other people (Longshore, Chang & Messina 2005). There are also important environmental influences on an individual’s ability to exercise self-control (Wikstrom & Treiber 2007). Over the past decade, there has been a marked increase in neurobiological research on the behavioural changes that occur during adolescence. Often, this work is reduced to adolescents having diminished self-control and no prefrontal cortex, basically being “all gasoline, no brakes, and no steering wheel” (Bell & McBride, 2010, p. 565). Low self-control persons exhibit a wide variety of corrupt behaviours because these activities normally provide immediate pleasure for minimal effort.

Crime is seen as a means of obtaining immediate gratification and the ability to delay such short-term desires is linked to self-control. Therefore, those with a propensity for criminal involvement are thought to lack sufficient self-control (Lilly, Cullen & Ball 1995). A relationship was found between low self-control and violent behaviour (Baron 2003). While self-control does appear to be a contributing factor in violent offending, the general theory of crime, there are other social and cultural
factors that could also account for the violent behaviour (Piquero et al. 2005). For example, adolescence is a time when young people develop the self-reliance and self-control to use particular cognitive strategies needed for decision-making and problem solving or turn to peers for support (Zimmer-Gembeck & Skinner 2008). However, low self-control or the general theory of crime suggests that the “Propensity toward crime and low self-control appear to be one and the same” (Akers & Sellers 2004, p. 125).

When data from the National Longitudinal Survey of Youths (NLSY) was used, it illustrated that self-control improved during positive life-course transitions (Forrest & Hay 2011). This contradicts the theoretical position that self-control was formed early in life and remains stable over time (Gottfredson & Hirschi 1990). There is also disagreement in the literature about whether life-course transitions, such as marriage or employment, can improve self-control and thus lead to desistance (de Ridder et al. 2011, Hirschi 1969, 2004). However, some studies have observed associations between key life events such as marriage, employment and military service and positive changes in criminal behaviour (Laub & Sampson 2001, Forrest & Hay 2011, Brook et al. 2011). It was claimed that these transitions promote desistance by enabling offenders to develop and exercise increased self-control (Forrest & Hay 2011).

This theory is one of the most widely tested theories in criminology with over one hundred published texts (Akers & Sellers 2008). While some reviews are rather ambivalent concerning the control theory’s empirical status, others are more supportive in concluding that it is one of the most well supported criminogenic perspectives in the field (Kempf 1993). Even some of Hirschi’s competitors concede that his control theory is important to the understanding of criminal behaviour (Andrews & Bonta 1998).

3.4 Braithwaite on Shaming
Shame, which is an uncomfortable feeling of humiliation or distress, is a painful and intense emotion that arises in response to personal transgressions (Braithwaite 1989, Baumeister, Stillwell & Heatherton 1994, Smith et al. 2002, Tangney & Dearing 2002, Tangney, Stuewig, & Mashek 2007, Wolf et al. 2010). Shame as punishment is
an old idea. References to the behaviour-shaping role of shame as an internal emotional response to embarrassing actions, ideas, words or thought, which when made public threaten to diminish a person’s self-esteem or standing in the community are found in nearly all religious and cultural traditions (Winfree & Abadinsky 2003).

The Australian criminologist John Braithwaite provided the theoretical grounding for the role of shame in maintaining social control when he wrote that shaming involves “all social processes of expressing disapproval which have the intention or the effect of invoking remorse in the person being shamed and/or condemnation by others who become aware of the shaming” (Braithwaite 1989, p. 100). He also says that disintegrative or stigmatising shaming blames offenders and denies them re-entry into the community (Braithwaite 1989). The biological and social origins of shame has been described as “the social emotion, arising as it does out of the monitoring of one’s own actions by viewing ones self from the standpoint of others” (Scheff 1990 p. 80).

In his book *Crime, Shame and Reintegration* (1989) Braithwaite puts forth a theoretical model for dealing with crime at the individual and community levels. He begins with the notion, taken from control theory, that individuals are naturally drawn to commit criminal acts for personal gain and self-gratification, then argues that the breakdown of community ties in modern urban communities has meant that perpetrators of crime are not made to feel ashamed of their actions, and thus continue victimising others without remorse. Braithwaite suggests that if perpetrators were made to feel guilty about their actions, they would be deterred from committing further crimes. However, shaming must be done in such a way as to be reintegrative, bringing the offender back into the community, rather than disintegrative, which would push the individual even farther out of the community. People, who are more integrated into the community and involved in relationships with others, are less likely to commit crime because they appreciate the shame and embarrassment that would result from violating the norms and values of a community (Braithwaite 1989).

Shame has been shown to have a negative effect on self-esteem and personal identity (Baumeister, Stillwell & Heatherton 1994, Tangney, Stuewig & Mashek 2007). It has been argued that shame impairs self-esteem and dissolves personal
identity, causing individuals to believe there is something wrong with them (Erikson 1968). Disintegrative shaming or stigmatisation can be a source of addiction and compulsive behaviours, substance abuse and dependence, eating disorders, bullying and violence (Bradshaw 2005, Brown 2010, Braithwaite 1989). One study comprising of interviews with thousands of people about connection and belonging over a 10-year period found that a direct correlation between feeling disconnected from people and shame, which was defined as “the intensely painful feeling or experience of believing that we are flawed and therefore unworthy of love and belonging” (Brown 2010, p. 69).

When a person commits a wrongful action, they usually experience some shame, guilt and embarrassment (Tangney, Stuewig & Hafez 2011). These feelings are members of the group of self-conscious emotions that are evoked by self-reflection and self-evaluation. However, there is a substantive difference between shame and guilt. Guilt concerns an individual’s behaviour — what they do — whereas shame has to do with their identity — who a person is (Tangney, Stuewig & Hafez 2011). Guilt includes remorse, self-blame and the private feelings associated with a troubled conscience (Smith et al. 2002). Guilt is not destructive to self-image and identity because the individual can do something about it. They can acknowledge their wrongdoing, such as changing their behaviour and experiencing forgiveness, so they no longer have to feel guilty. Shame is strongly linked with feelings of inferiority and negative self-evaluation (Smith et al. 2002). Shame, the feeling about an individual’s identity, can be inflicted deliberately. Unlike people high in guilt, people high in shame are more likely to be troubled by personal distress, low self-esteem, low self-compassion and depression (Cohen et al. 2011).

Shame, as an excuse for destructive actions, has been linked with other factors and illnesses including chronic depression, emotional distress and alcoholism (Brooks 2008). Nevertheless, the courts have ruled that shame was neither an excuse nor mitigating factors when accused people claim shame caused them to commit honour killings (Brooks 2008). However, shame has been recognised as an important factor that contributes to mental health problems and aggressive behaviour (Gilbert 2003, Gilligan 2003, Tangney & Dearing 2002). Shamed people believe that the outside
world has turned against them, so they are self-critical, hostile and feel persecuted (Gilbert & Proctor 2006).

Stigmatising or disintegrative shame occurs when the act and the actor are denounced as unworthy of the community, and where there are no efforts to reintegrate the offender, and the community rejects the individual. Disintegrative shaming emphasises the evil of the actor, while reintegrative shaming acknowledges the act as an evil thing, done by a person who is not inherently evil (Winfree & Abadinsky 2003). Disintegrative shaming is exemplified in the traditional criminal justice system by the court and sentencing process. Here, the offender is stigmatised by the conviction and literally, as well as symbolically, sent away from the community usually to prison (Braithwaite 1989). The use of prison is inherently disintegrative counterproductive, especially given the fact that most offenders return to the community (Braithwaite 1989). Therefore, he supports the use of community alternatives to imprisonment or the use of proactive community reintegration following a term of incarceration. Stigmatisation or disintegrative shaming are counterproductive (Braithwaite 1989). Disintegrative shame can lead to the belief that a person is inherently bad, defective, different, unworthy or unlovable (Kaufman 1992). It is also argued that due to relative cognitive and emotional immaturity as well as lack of life experiences and decision-making processes, young adolescents are at risk of being shamed, labelled, stigmatised and marginalised in any environment (Case 2006).

Crime rates are rising because society failed to shame criminals’ actions (Braithwaite 1989). He argued that the breakdown of community ties in urban societies meant that offenders were not being made to feel ashamed of their actions, thus they continue to victimise others without remorse. He also believes that if criminals were made to feel ashamed of their criminal activities, they would be more likely to be deterred from committing more crimes, so proposed using reintegrative shaming, which separates the doer from their actions (Braithwaite 1989). With reintegrative shaming, criminals feel ashamed of what they have done but not who there are (Braithwaite 1989). Disintegrative shaming is stigmatising and can cause the doer to feel inherently defective, resulting in psychological problems (Lu 2008, Title & Botchkovar 2005, Bradshaw 2005, Gilligan 2003, Karp 2000). Disintegrative
shame triggers the basic defensive cover-up at the deepest level, so when their emotions are shamed, youths numb out, so they do not feel their emotions (Bradshaw 2005).

Disintegrative shaming has been described as false and pathological shame and is not just the belief that an individual acted badly. It is a deeply held core conviction that the individual is bad (Bradshaw 2005). An individual who experiences disintegrative shaming can have personality characteristics such as evading responsibility, blaming the victim, mismanaging anger and hostile aggression (Bradshaw 2005). This link suggests there is a connection between disintegrative shaming and offending behaviour (Tangney et al. 2011, Stuewig & Tangney 2007, Murphy & Harris 2007, Tibbetts 2003). When individuals experience disintegrative shaming, it lowers their self-esteem and they become less confident in their abilities to perform positively. Often, people who have experienced disintegrative shaming believe that they are flawed and defective human beings, thus resulting in their identities being degraded (Bradshaw 2005).

There is a link between disintegrative shame and the inclination to externalise anger and physical aggression of the person who is shamed. Although this aggressive person tends to be irritable and impulsive this shamed person can cause physical or emotional harm to others (Tangney et al. 2011, Gilbert 2003, Gilligan 2003, Tangney & Dearing 2002). Disintegrative shaming is also linked to a broad range of psychological symptoms, including low self-esteem, depression, anxiety, eating disorders, post-traumatic stress, suicidal tendencies and substance dependence (Crossley & Rockett 2005, Dearing, Stuewig & Tangney 2005, Feiring, Taska & Lewis 2002, Andrews et al. 2000, Ferguson et al. 1999). In her book *Shame: The Power of Caring*, Gershen Kaufman (1992) writes that the effects of disintegrative shame include self-doubt, depression, compulsive disorders and a deep sense of inferiority. Therefore, shame appears to serve no protective function because it is related to poor outcomes including low self-control and psychological problems (Kaufman 1992, Tangney et al. 2011).

Disintegrative shaming was also shown to influence the shamed individual’s interpersonal relationships and affect how they think and behave (Bradshaw 2005).
Prolonged feelings of shame could turn into humiliation, depression and rage (Lu 2008). When disintegrative shaming occurs with juveniles, they can become isolated and driven towards delinquent-prone peer groups (Bradshaw 2005, Braithwaite 1989). Experiences of shame and guilt can provoke defensive reactionary and violent responses that may precipitate negative transformations, whether real or perceived (Lu 2008).

Guilt and shame are often used synonymously, yet studies indicate that they are two distinct emotions (Tangney & Dearing 2002). Guilt describes the emotion when individuals feel bad or sorry for something they have done. Shame describes the emotion when a person feels bad about his or her self. This shame often results in individuals having a deep-seated feeling that something is fundamentally wrong with them (Lewis 1971). He also argues that shame is representative of a family of emotions including humiliation, embarrassment and low self-esteem, and suggests that shame negatively affects an individual’s sense of identity at the deepest level (Lewis 1971). This could lead to a tendency for the adolescents to expect negative outcomes in their adult life, and to place responsibility for their happiness on external factors so their lives become self-fulfilling prophecies (Merton 1949).

An interview study of 720 participants in the ACT tested the implications of reintegrative shaming theory that shaming has an effect on the shame-related emotions that drink driving offenders feel. The analysis showed that shame-related emotions were predicted by perceptions of social disapproval, but that the relationship was more complex than expected (Harris 2006). A further study of reintegrative shaming of survey data collected from a group of 652 tax offenders found that the feelings of reintegration /stigmatisation experienced during an enforcement event were related to reoffending behaviour (Murphy & Harris 2007). Although those taxpayers, who felt that their enforcement experience had been reintegrative in nature, were less likely to evade their taxes again, shame-related emotions were found to partially mediate the effect of reintegration on subsequent offending behaviour.
3.5 Summary

Theoretical thinking is needed for an explanation and understanding of social life, and theories are linked to society’s main problems. Goffman (1961, 1963) with regard to institutionalisation and spoiled identity, self-control as put forward by Hirschi (1969, 2004) and disintegrative shaming according to Braithwaite (1989), are the three theories that could be linked to the perceptions of the adults, who had been residents in TIBT. Many schools of thought hypothesise that people have free will to choose between criminal and lawful behaviour. However, a focus of criminology is the links between antisocial personality and criminal behaviour, not only the causes of crime, but the social impact as well. Self-control theory suggests that criminal behaviour results when social controls are weakened. Shaming theory holds that persons acquire labels that are deviant or criminal. Spoiled or degraded identities occur when people lack self-esteem from being continually regimented and punished in institutions (Goffman 1961). The out-of-home care juvenile establishments supported the concept of an institution according to Goffman (1961) as a system of rules, regulations and practices that govern the actions and behaviours of residents rather than as a place for children to grow into well-balanced adults.

These theories are used to describe the process of criminal and delinquent socialisation. People interpret and define their social reality and the meanings they attach to it while interacting with one another. “If they define situations as real, they are real in their consequences” (Thomas & Thomas 1928, pp. 571-572). Although Hirschi (1969) based his diminished self-control theory on the primary importance of the family, he found that antisocial behaviour will emerge automatically if social controls are lacking. This was reinforced by the findings of Goffredson and Hirschi (1990) that most crimes are spontaneous acts requiring little skills and earn short-term satisfaction. Braithwaite (1989) started with the assumption that negative labels had the power to stigmatise and by doing so evoke the behaviour the label signifies. Braithwaite (1989) extended the labelling theory when he presented the theory that disintegrative shaming was counterproductive.

Self-control helps control emotions and impulses so that people can behave in socially adequate ways. However, self-control must be learned and practised (Hirschi 1969). If young people are continually told what to do in a regimented fashion as they
were in TIBT, they do not get the opportunity to practise self-control. Therefore, this is one theory that needed to be investigated with regard to this research. Most of the punishment at TIBT involved disintegrative shaming and negative labelling, which evoked the behaviour that the label signified (Braithwaite 1989). Diminished self-control and disintegrative shaming occur in total institutions (Goffman 1961) and often lead to spoiled or degraded identities (Goffman 1963). Prevalence estimates for conduct disorder can range in adolescent males from one to ten per cent (Hinshaw & Lee 2003), and for youths incarcerated in detention facilities similar to TIBT can reach as high as between twenty-three and eighty-seven per cent (Zoccolillo et al. 1992). Thus the emotions and feelings of pride, shame, embarrassment and guilt can negatively affect the adolescent (Parekh 2009). Consequently, this research is based on these three theories to ascertain how the experience of being an adolescent male in TIBT influenced perceptions of self, subsequent offending activity and overall life course outcomes.
CHAPTER 4
Empirical Background on Identity-Formation and Institutionalisation

The detail and total attention that painting requires has become a means of therapy for me as I shed the crippling weight of shame that has plagued me for so many years (INT13).

4.1 Introduction
Adolescence is a transitional stage of physical and psychological human development; a time of disorientation and discovery around issues of independence, self-concept and self-esteem (Steinberg 2008, Carlson 2010). Adolescent experiences of social roles and responsibilities can be profoundly shaped by the quality of their pathways into adulthood (Lerner & Rosenberg (Eds) 2001). Rapid cognitive development occurs during adolescence where teenagers learn to think and reason in a wider perspective (Smith et al. 2012, Jones et al. 2012, Cashmore 2011, Christie & Viner 2005, Spear 2000) and this has been borne out by recent investigations into brain morphology (Lenroot & Giedd 2006, Hazen, Schlozman & Beresin 2008). There are four primary growth aspects during adolescence: physical, social/emotional, cognitive and moral (Christie & Viner 2005).

The formation of an individual’s identity occurs through identification with significant others, such as parents, carers, extended family, friends and group connections (Cooper et al. 2002). It is also influenced by broader formative social environments, such as the community (Erikson 1967, 1980, Maslow 1970, Bessant & Watts 2002). A great deal of research has investigated how youths, especially adolescents form their personal identities within and across various social settings, such as families, schools and sport (Abrams & Hyun 2008, Waterman 2004, Phelan & Davison 1998, Phelan, Davison & Yu 1993). Some studies reveal that adolescent participation in family, work and routines has a positive influence on the development of an adolescent’s feelings of self-worth, care and concern for others (Lerner & Rosenberg (Eds) 2001). In addition, it has been found that during adolescence those with positive parental relationships are less likely to engage in various risk behaviours, such as drinking alcohol to excess, fighting and criminal acts.
The physical changes of puberty serve as a catalyst for adolescents to question their identity, values and future goals (Erikson 1968). During this developmental phase moral thinking is guided by interpersonal relationships and social roles (Kohlberg 1976, Hazen, Schlozman & Beresin 2008). For these reasons the opportunity for exploration in the areas of dating, friendship, recreation, sex roles, occupations, politics, life philosophy and religion are critical (Marcia 1966). Young people endeavour to develop a clear sense of self by exploring their own values, ethics, spirituality, sexuality and gender (Christie &Viner 2005). It is claimed that by late adolescence individuals move beyond peer pressure and know the type of person they want to be, based on their values (Hill 2008).

Research has demonstrated that the environment in which adolescent development takes place can have lifelong effects (Steinberg 2008, Carlson 2010, Cooper et al. 2002). One study drawing on the “adolescent epistemological trauma theory” showed that traumatic life events during the formative period of adolescence were predictive of lifelong conflict behaviour (Ziemer 2012). In a meta-review of 565 studies published between 1966 and 2005 that examined adolescent developmental patterns of identity status changes, it was shown that when the youths became adults they lacked a sense of personal identity (Kroger, Martinussen & Marcia 2010). This meant that individuals were unable to recognise their skills and abilities, understand themselves or assess their relationship with the world (Kroger, Martinussen & Marcia 2010). Other studies have noted the connections between adolescent peer influences and delinquent behaviour, which can be further magnified when youths have little or no interaction with their parents (Hinshaw & Lee 2003, Lipsey & Derzon 1998, McCord, Widom & Crowell (Eds) 2001, Steinberg 1987).

4.2 Identity
Identity is the unique personality that distinguishes one individual from others (Parekh 2009). Identity is considered the self-structure that drives abilities and beliefs while developing values, so individuals with a healthy self-identity are acutely aware of their skills, abilities, fears and goals (Marcia 1966). Personal identity is the concept about self that evolves through the course of an individual’s life. This may include
aspects of life that the person has no control over, such as the childhood environment
or the colour of their skin, as well as choices they make in life, such as how they use
their time, their beliefs and values. People demonstrate portions of their personal
identities outwardly through what they wear and how they interact with other people.
Most people keep some elements of their personal identity to themselves, even when
these parts are very important (Martin & Barresi (Eds) 2003). Personal identity
involves the network of values and convictions that structure an individual’s life. This
unique identity includes the values, personality, characteristics, skills, personal goals
and the way an individual thinks he or she appears to others. This identity is
influenced by experiences and belief systems, such as planned and unplanned events,
family, school, religion and marriage (Weinreich & Saunderson (Eds) 2003). Personal
identity comprises the essential beliefs and commitments about how individuals
orientate and define their place in the world (Parekh 2009).

A psychological identity gives the capacity for self-reflection and awareness
while relating to self-image and self-identity. These terms define both self-esteem,
which is the overall emotional evaluation of own worth, and individuality that is
having specific needs and goals (Maslow 1970). Some people make their
psychological identity dependent on their job, wealth, being loved by another person
or any external object instead of taking responsibility for its formation (Howard
2000). It is essential for well being that a person knows him or herself and is aware of
his or her self-identity (Erikson 1968). This awareness should encompass past selves,
future selves and possible selves, which represent the ideas of what an individual
could become, would like to become or is afraid of becoming. These selves
correspond to hopes, fears, standards, goals and threats. Although possible selves
could function as incentives for future behaviour, they also provide an evaluative and
interpretive context for the current view of self (Erikson 1968).

Most individuals have a sense of themselves, but they present different masks,
faces or personas to others in different situations. These personas are the social
identities that individuals use to identify particular parts of themselves (Parekh 2009).
These social identities are not fixed, but rather are “plural” because the individual
balances and prioritises different identities within the context of the flux of roles and
situations (Parekh 2009, p. 267). In adolescence there is an awareness of the multitude
of different perspectives and contradictory interpretations of identity emerging (Schweitzer 2004). These conceptions and expressions include a personal identity, the core of self that identifies expectations and meanings to guide behaviour (Burke 1991); a psychological identity including self-esteem providing a capacity for self-reflection and self-awareness (Howard 2000); and a social identity, where the individual belongs to a social category or group (Hogg & Abrams 1988). They do not exist separately although differences exist between personal, psychological and social identities, they are linked to categorise, classify or name an individual identity (Stets & Burke 2000).

It is imperative to recognise the similarities that overlap between the various elements that are said to comprise personal, and psychological, social identity: self-image, self-perspective, self-belief, self-esteem, self-respect, self-confidence and self-worth (Parekh 2009). Each of these concepts relates to the way individuals perceive themselves, but they are often used interchangeably in the literature or conversely they can be claimed to be quite disparate entities. For example, self-control has a strong relationship with personal identity, but self-control is an ability that has to be learned and practised (Hirschi 1969, 2004). The development of self-control and self-esteem are considered the most important aspects of personal identity with regard to this investigation.

4.2.1 Self-esteem, Aggression and Institutionalisation
The concept of self-esteem involves an evaluation or appraisal of worth (Maslow 1970). Maslow stated that in order to develop a positive personal identity, individuals must have a need or desire to evaluate themselves positively, which is demonstrated as self-esteem. This development is dependent on prior experiences, achievements, skills, abilities and perceptions of intelligence (Maslow 1970). Having self-esteem allows a person to be independent, believe they are worthy while obtaining prestige and social recognition. He also stated that this satisfaction of self or high self-esteem led to feelings of self-confidence, self-worth and self-respect. Therefore, not having self-esteem produced feelings of inferiority and helplessness, causing individuals to believe they do not deserve to be happy or successful (Maslow 1970).
Self-esteem refers to the collection of an individual’s sense of self-concept, self-worth and self-respect, which is the regard one has for oneself (Rosenberg 1979). This evaluation includes how they think and feel about themselves or their emotional evaluation of personal worth that encompasses positive and negative beliefs and emotions, such as pride, victory, shame and despair (Smith & Mackie 2007, Hewitt 2009). A positive “self-esteem has profound consequences for every aspect of our existence” (Brandon 1994, p. 26). Behavioural aspects of a positive self-esteem include assertiveness and resilience while being decisive and respectful of others (Reasoner 2010).

Individuals with self-esteem value themselves; have confidence in their own worth and abilities while being assertive (Smith & Mackie 2007). The level of self-esteem affects their trust in others, their relationships and work. Positive self-esteem gives people the strength and flexibility to take charge of their lives; learn from their mistakes, and actively take steps to achieve their goals (Smith & Mackie 2007). Low self-esteem is a debilitating condition that stops individuals from realising their full potential. People with low self-esteem feel unworthy and perceive themselves as incapable and incompetent (Rodewalt & Tragakis 2003). They are unhappy or unsatisfied with themselves most of the time. Low self-esteem can result from various factors including genetic factors, physical appearance or weight, mental health issues, socioeconomic status, peer pressure or bullying (Rodewalt & Tragakis 2003).

Individuals with defensive or low self-esteem have doubts about their worth and acceptability, so they focus on trying to prove themselves or impress others by acting with arrogance and contempt (Reasoner 2010, Donnellan et al. 2005). The close relationship between an individual with low self-esteem who cannot identify personal identity and an association with violence, alcoholism and drug abuse has been documented (Reasoner 2010, Davis 1991, Waltz & Bleuer 1992). These findings supported earlier works (Horney 1950, Adler 1956), where observations illustrated that aggression and antisocial behaviours were motivated by feelings of inferiority, which began as a result of childhood rejection and humiliation. Individuals protect themselves against feelings of inadequacy and humiliation by externalising blame for their failures, which lead to aggression, hostility and anger towards other people (Tracy & Robins 2003). Studies have found that having low self-esteem is usually

While the literature on the development of identity in correctional institutions is scant, some qualitative research in California has shown that most youths entered the institution with a strong professed criminal identity, boasted about their criminal aptitude and relied on their criminal skills as “an anchor of personal achievement” (Abrams & Hyun 2008, p. 37). The participants in this research were drawn from three different juvenile facilities, but there were nevertheless similar power relationships and hierarchical social structures in evidence. Some youths enjoyed being part of the power structure in the corrective institution while others resented their low criminal status (Abrams & Hyun 2008).

Empirical investigations into the causes of deviant behaviour have found a direct connection between low self-esteem, shame, lack of personal identity and crimes of violence. For example, one study measured the self-attitudes of members of charismatic and traditional religious groups aged thirteen to twenty-five years. The attitudes were the members’ tendencies to respond positively or negatively towards ideas, objects, people or situations and how that influenced their choice of action. It was found that low self-esteem was a major source of hostility and aggression (Kaplan 1975). Indeed, most studies in this area found criminal acts to be associated with low self-esteem (Oser 2006, Mann et al. 2004, Donnellan et al. 2005, Baumeister, Boden & Smart 1996, Trzesniewski et al. 2006).

When a prison psychiatrist, examined some prisoners convicted of murder including the Son of Sam and Starkweather serial killers, it was observed that violent behaviour could increase the self-esteem of aggressive individuals because they enjoyed the feeling of others being afraid of them (Gilligan 1996). Another study suggested a relationship between self-esteem and crime because committing crimes made the offender feel better about him or herself thus raising their self-esteem (Baumeister, Boden & Smart 1996). Also, when the demographic characteristics,
criminal history, personality traits and participation in a prison programme of 134 prisoners in two medium-security prisons were examined, the results supported the existence of a relationship between low self-esteem and crime commission (Oser 2006).

There are similar links between low self-esteem and juvenile delinquency (Donnellan et al. 2005). For example, “adolescents with low self-esteem had poorer mental and physical health, worse economic prospects and higher levels of criminal behaviour during adulthood, compared with adolescents with high self-esteem” (Trzesniewski et al. 2006, p. 381). Importantly, these findings suggest “low self-esteem during adolescence predicts negative real-world consequences during adulthood” (Trzesniewski et al. 2006, p. 381). Another study of 734 adolescents living in metropolitan USA showed that juvenile delinquents with low self-esteem and a lack of personal identity felt constantly anxious (Johnson 1979). Further research established the relationship between low self-esteem and delinquency, and when self-esteem improved delinquent behavior declined (Kelley & Kiyak 1978).

The research on the link between low self-esteem and subsequent aggressive or delinquent behaviours is not clear-cut. First the direction of this relationship is not fully understood in terms of independent versus dependent variables, in other words, which comes first the lowered personal esteem or the offending behaviours, and so the causal link has not been established definitively. More importantly though is the fact that there are some studies which suggest that engagement in crime (for some groups) can indeed elevate self-esteem or make the offender feel superior or arrogant. However, arrogance is not the same as high self-esteem (Donnellan et al. 2005).

Many researchers found that low self-esteem and self-worth were contributing factors to the prisoners’ antisocial behaviour both in and out of institutions, but it was difficult to isolate a primary cause (Picken 2012, Emler 2001, Mecca, Smelser & Vasconcellos (Eds) 1989). However, a study that mapped a process of negotiated identity among young men in prison found that prisoners adopted strategies to deal with their incarceration. The prisoners revealed various identity transitions, suggesting that the institution was a potential site of antisocial “identity transformation” (Abrams & Hyun 2008, p. 30). Usually the prisoners felt depressed
and lonely but they continually adapted so they could cope with their institutionalisation (Abrams & Hyun 2008). Often, prisoners believed that being part of a group or gang established their position, and thus increased their self-esteem (Ciceri 2006).

One research project in the New Jersey State Prison showed that loneliness, boredom, being deprived of emotional relationships while being restricted to a world that had been shrunk to five and a half hectares and having to remain in their cells until they were given permission to leave lowered the self-esteem of inmates (Sykes & Messinger 1960). Other data collected from eighty-one Australian male prisoners implied that being in gaol had significantly compromised the inmates’ psychological well-being and had lowered their self-esteem (Gullone, Jones & Cummins 2000). Findings also demonstrated that emotionally stable prisoners who have participated in counselling or education during institutionalisation manifested higher self-esteem (Oser 2006). Counselling individuals assessed with low self-esteem in corrective institutions also improved their post-prison positive adjustment (Bennett, Sorenson & Forshay 1971, Gendreau, Grant & Leipciger 1979). Low self-esteem can cause individuals to feel socially threatened, therefore, leading them to conform to their peers and exhibit less self-control (Baumeister, Bushman & Campbell 2000).

4.2.2 Practising self-control

While self-control is commonly considered the same as willpower, self-regulation, self-discipline or conscientiousness, it is more accurately defined as a person’s ability to control impulses, alter emotions and thoughts, as well as managing undesired behavioural tendencies and refraining from acting on them (Muraven, Pogarsky & Shmueli 2006, Muraven & Baumeister 2000). Self-control involves the regulation of behaviours, conscious and deliberate choices and the tempering of competing urges, behaviours and desires (Barkley 1997, Baumeister, Heatherton & Tice 1994, Shallice & Burgess 1993). Monitoring impressions, controlling emotions and feelings, eating and drinking in moderation and delaying gratification are all actions that require self-control (Mischel 1996, Muraven, Baumeister & Tice 1999, Vohs & Faber 2007). Self-control is a necessary and essential element of individual identity in order to function in society. This learned behaviour is usually practised so it can be developed (De Lisi & Vaughn 2007).
People with high self-control have the skills of conscientiousness, self-discipline and perseverance, as well as being able to consider the consequences of actions when making decisions (Hayes 1989). They have positive beliefs about their capabilities and the possible consequences of their behaviour and are able to set goals and form action plans to achieve positive outcomes. When individuals have self-control, they engage in planning and evaluation, tend not to respond impulsively, and therefore they make appropriate decisions for the circumstances thus refraining from doing things they may regret (Tangney, Baumeister & Boone 2004). Individuals with elevated self-control follow rules and can restrain their desires to delay satisfaction, particularly if these desires can have a detrimental effect on themselves or others (Hayes, Gifford & Ruckstuhl 1996, Hayes 1989). These individuals have the capacity to alter their own responses according to their values, morals and social expectations to support the pursuit of their goals (Baumeister, Vohs & Tice 2007). Most people regulate their purposive behaviour by forethought and are self-reflective, exercising control over their thoughts, feelings and actions (Bandura 1991). Generally this means that self-control is associated with high self-esteem, better interpersonal skills and better emotional responses (Bandura 1991, Baumeister, Vohs & Tice 2007).

People with low self-control are unable to delay gratification. They are focused on the present. They want it now! As a result, low self-control people act impulsively without much thought. This makes them risk takers performing behaviours that are potentially damaging to themselves and others. These individuals are focused on themselves rather than others, making them insensitive to other people. It is claimed that people with low self-control lack empathy (Gottfredson & Hirschi 1990). The results of an investigation into community violence demonstrated exposure to violence was linked to multiple levels of behavioural and social maladjustment, and these negative life events in early adolescence impaired self-control. These results came after 285 inner-city children were asked to complete an inventory so the researchers could assess exposure to violence through witnessing or direct victimisation (Schwartz & Proctor 2000).

Other cross-sectional studies of adolescents found that there were moderate-to-strong connections between levels of self-control and antisocial behaviour.
(Vazsonyi et al. 2001, Tittle & Botchkovar 2005). From a sample of 400 homeless youths, it was found that there was support for the theory that “low self-control predicts a range of criminal behaviours as well as drug use” (Baron 2003, p. 403). When Gottfredson and Hirschi’s (1990) findings were revisited by examining 723 institutionalised delinquent youths to ascertain if low self-control was connected to career criminality, it was concluded that compared to non-career offenders, career criminals had significantly lower levels of self-control (De Lisi & Vaughn 2007).

Other researchers supported the findings that people with low self-control behave irresponsibly, cannot plan activities and have problems forming relationships (De Lisi & Vaughn 2007, Pratt & Cullen 2000). People with low self-control also have difficulty finding employment or remaining employed for long periods (De Ridder et al. 2011). Uncontrollable stressors impaired self-control (Evans 1979, Glass, Singer & Friedman 1969). Inadequate self-control was linked to behavioural and impulse-control problems. Many people with low self-control also have social problems including drug use, criminological behaviour, eating disorders, depression, self-harming, impulsive shopping or anger management problems (Pratt & Cullen 2000, Tangney, Baumeister & Boone 2004, Baumeister, Heatherton & Tice 1994, De Ridder et al. 2011, Hirschi 1969, 2004).

Studies on the relationship between self-control and antisocial behaviour have indicated that low self-control increased the possibility of future antisocial behaviour (Feldman & Weinberger 1994, Vazsonyi et al. 2001, Longshore, Chang & Messina 2005). The level of self-control in preadolescent boys predicted their delinquent behaviours four years later (Feldman & Weinberger 1994). Similarly, low self-control in adolescents contributed to delinquent behaviour, such as vandalism, theft and assault (Vazsonyi et al. 2001).

A structured modelling analysis of the relationship between self-control and aggressive, delinquent behaviour of adolescent youths revealed that high levels of self-control consistently decreased aggressive and delinquent behaviour (De Kemp et al. 2009). Most previous studies have implied that self-control is needed for negative or positive impulse control, which is the management of short-term desires (Exum 2002, Honkatukia, Nyqvist & Poso 2006, Wright et al. 2008). When individuals have
low impulse control or low self-control, they are prone to wanting instant gratification and may commit impulse crimes including murder, assault, rape, vandalism, robbery and hit and run (De Lisi & Vaughn 2007). The offenders commit crimes when they act in the heat of the moment without thinking about the consequences. Their crimes are not premeditated or planned (Exum 2002, Honkatukia, Nyqvist & Poso 2006, Wright et al. 2008). Non-violent people with low impulse control or low self-control can lose friends through careless outbursts or have financial problems after excessive impulse buying or are overweight because they cannot stop eating fatty foods (Exum 2002).

4.3 Institutionalisation
The academic literature on juvenile institutional care is complex (Provence & Lipton 1963, Alshuler & Poertner 2002). Routine, coordination and the use of dominating and coercive sanctions in custodial institutions cause the residents to be passive inhabitants, who are unable to think for themselves. The view in the 1960s was that “boys should keep to themselves, should conform, should not make too many friends within the institution, and should not have close relationships with many people” (Zald & Street 1964, p. 254). Research showed that if the adolescent juveniles became adults with problems, they did not seek professional help. Therefore, it was difficult for the researchers to ascertain the focus of their specific difficulties (Provence & Lipton 1963, Spitz 1965).

Research in the USA in the 1960s compared custodial juvenile institutions to psychiatric and medical treatment institutions (Zald & Street 1964). The regimented lifestyle in custodial institutions along with the use of dominating and coercive actions caused residents to become passive inhabitants who were unable to think for themselves. The institutions that were examined had rules for every situation allowing for no individuality or individual choice, thus not allowing the residents to make any personal decisions and choices or to practise self-control (Zald & Street 1964). Often juvenile institutionalisation weakened community bonds, contributed to school failure and unemployment, and ultimately increased the likelihood for adult crime (Laub & Sampson 2003).
An analysis of institutions and foster homes found there was no evidence to indicate that group care accomplished or supported any of the goals of the child welfare services (Barth 2002). This examination considered four components of service outcomes: safety and well-being of children in care; permanence/re-entry from care; long-term success of children in out of home care; and the costs of out of home care. It found that “children in group care almost certainly have fewer interpersonal experiences that support their well-being” (Barth 2002, p. 5). Another report suggested that institutions were not safe, did not promote development, were unstable and did not achieve long-term outcomes (Alshuler & Poertner 2002). In addition to this, they were not more efficient because the cost was far more in excess of other forms of care (Barth 2002, Atkinson 1993).

One study drawing on interviews with 370 young people who had or were living in 100 different institutions, revealed that they felt uncomfortable, not loved, not trusted and not cared about (Bush 1980). A more recent study found that youths in juvenile justice detention settings were often aggressive, which when left untreated, led to antagonistic and sometimes criminal behaviour (Ford et al. 2012). Another study of sixty-three adolescents residing in group homes or institutions established that when youths leave institutions they take more risks and have less chance of achievement than youths who have been under parental care (Alschuler & Poertner 2002). Paradoxically, this same study found that the youths who had been institutionalised appeared to be resilient and demonstrated problem-solving skills in the community after release (Alschuler & Poertner 2002).

4.3.1 Mistreatment
Several studies in Australia and USA have established a link between the timing of mistreatment in relation to the possibility of offending. These studies consistently found that young people who experience persistent mistreatment from childhood into adolescence or that commences in adolescence were much more likely to be involved in crime than those who were only maltreated as children (Jonson-Reid & Barth 2000, Smith, Thornberry & Ireland 2005, Stewart, Dennison & Waterson 2008, Thornberry, Ireland & Smith 2001). Consistent adolescent mistreatment increased the risk of having alcohol and other drug problems as an adult and being unable to form and maintain relationships (Thornberry, Ireland & Smith 2001). A US survey found that
fourteen per cent of male prisoners reported they had been physically or sexually abused before the age of eighteen (Harlow 1999). This abuse was considerably lower in the general population, who reported rates of between five to eight per cent (Gorey & Leslie 1997).

Studies have provided causal evidence that when people are degraded, debased or discredited they showed impaired intentional and physical self-control (Inzlicht, McKay & Aronson 2006, Blascovich et al. 2001, Major & O’Brien 2005). Coping with this degradation or stigma requires self-control, which is almost impossible to practise when in institutions. Incarcerated youths, who experienced institutionalised mistreatment, have higher levels of anxiety and depression because they were stigmatised or degraded (Gover & MacKenzie 2003). The results of their study of 500 juveniles confined to forty-eight correctional facilities in twenty states of America provided empirical evidence that childhood mistreatment should be assessed when treating issues related to psychological adjustment (Gover & MacKenzie 2003). An earlier study found there were up to possibly sixty per cent more behavioural, emotional and personality disorders among institutionalised juveniles than in the general population (Hunzeker 1993). It was also suggested that in order to reduce adult criminality, the link between mistreatment of youths and mental health issues needed to be understood (Hunzeker 1993).

Many institutionalised youths came from violent family backgrounds where they have experienced abuse, neglect and trauma (Dembo et al. 1987). They also found evidence of a connection between the mistreatment of youths and their adult criminal activities (Dembo et al. 1987). If adolescents thought people believed them to be troublemakers, they could assume a delinquent anti-social attitude and associate with similar peers, therefore actively shaping their own future delinquent behaviour (Heimer & Matsueda 1994). Early research in institutions found residents were rendered more passive by the use of dominating and coercive actions, losing their capacity to make decisions and choices and not being given the opportunity to use self-control (Zald & Street 1964). Authoritarian power undermined the basis of control that adults expected to exert over their interpersonal environment until the institutionalised individual no longer had a normal identity, instead conceiving of themselves as one of a group who must perform as instructed (Quinn 2004).
4.3.2 Institutional impacts on juveniles

Examinations of the impact on young people confined to correctional facilities have revealed a high percentage with anxiety and depression (Gover & MacKenzie 2003, Singer et al. 1995). Institutionalised residents have displayed problems of anxiety, agoraphobia, obsessive-compulsive behaviour and panic disorder, which are exacerbated by memories and nightmares causing sleep disruption and psychological and physical reactions (Lu 2008). Using the Beck Depression Inventory, it was found that individuals in corrective institutions have a high rate of depression (Boothby & Durham 1999). This outcome was supported when researchers found that thirteen percent of incarcerated youths were at risk of developing clinical depression (Messier & Ward 1998). Another study in the US identified groups of institutionalised adolescents with elevated levels of interpersonal sensitivity and paranoid ideation, as well as others with primary psychopathic tendencies (Vaughn et al. 2009).

An investigation inside juvenile correctional facilities into whether youths learned any lessons during their incarceration found that their first lesson was “how to survive the daily frustrations and challenges inherent in the structure of the institution” (Inderbitzin 2006, p. 13). The refrain from the individuals who took part in her study was that “the system cannot force anyone to change, that individuals have to want to change, they have to want to get out of this life” (Inderbitzin 2006, p. 19). Overwhelming such a process of “change” eluded most of those in detention for most youths who were sent to a juvenile corrective institution were more disadvantaged when they were released and their confinement did not thwart their recidivism (Inderbitzin 2006). This concurs with a 1976 study done where the juvenile centre was described as being like any other total institution — demeaning and cruel because of the victimisation of residents by residents, residents by guards and guards by residents (Bartollas, Miller & Dinitz 1976).

In one study, 510 male adolescents were tested to ascertain if institutional confinement increased their levels of psychological illnesses and found that the adolescents within juvenile institutions had more emotional problems than their unconfined peers in the community (White et al. 2010). It is difficult to tease out whether some had the mental illnesses as pre-existing conditions, whether the processes of arrest and court had an exacerbating effect, or whether it was because
they did not receive any treatment throughout their juvenile justice processing confinement (Holman & Zeidenberg 2006).

It is possible that young people in institutions were anxious because of fear of victimisation or they were suffering the effects of isolation, which in turn led to helplessness and depression (Holman & Zeidenberg 2006). Early research in the US compared twenty-four institutionalised young people aged between fifteen and seventeen with twenty-four non-institutionalised youths who were matched for age, sex, religion, school performance, ordinal position of birth and parental socioeconomic status, it was confirmed that institutionalised children were less well adjusted with lower self-esteem (Youngleson 1973).

When the nature and prevalence of mental health problems, including suicidal tendencies of thirteen to seventeen-year-olds on remand in Australia were compared with that of the same age in the general community, both Indigenous and non-Indigenous adolescents on remand thought more often of suicide than those of the same age not on remand (Sawyer et al. 2010). After being institutionalised, a high majority of adolescents had inferior psychological and physical health, a higher prevalence of suicidal behaviour, family troubles and poorer school attendance. When their problems were not addressed, these adolescents did not become active and productive adult members of society (Sawyer et al. 2010). Investigating the reaction to life stressors of adults who had been institutionalised as adolescents, it was noted that they often developed depression and other psychological health problems (White et al. 2010). Their experiences of confinement, as well as social exclusion after their release, often had ongoing negative influences on their adult psychological health (DeLisi et al. 2011, Siennick 2007, Horwitz et al. 2001, Steiner, Garcia & Matthews 1997).

4.3.3 Institutionalisation and Recidivism
Juvenile detention has not been shown to have a significant effect on preventing recidivism, with two studies suggesting only a ten per cent reduction (MacKenzie 1997, Baird, Storrs & Connelly 1984). A study that compared the reoffending rates of youths, who had been in different institutions, one classified as lenient and the other as punitive found that “a passive and lenient juvenile justice system could produce the
same level of youth reoffending as an active and punitive one” (Smith 2005, p. 181). Sentencing habitual juvenile offenders to punitive institutions in the US from the 1960s to the 1980s was found to be an “ineffective” method for reducing the recidivism of youths (Feld 1998).

Several studies compared two alternatives for juveniles in need of care: family foster supervised care and group institutionalised care (Chamberlain & Reid 1998, Barrick et al. 1997, Colton 1992, Zoccolillo et al. 1992). Their results favoured fostering as being more supportive because most foster parents were trained to use behavioural management techniques and they usually supervised the whereabouts of the youths in their care and liaised with their schools. Boys in foster care ran away less frequently and had fewer criminal referrals than boys in institutionalised care. Although some boys in institutions attended group therapy, most of them received no education, psychiatric and medical help, despite the fact that these places were officially called “institutional schools” implying that there should have been some educational options (Chamberlain & Reid 1998, Colton 1992, Zoccolillo et al. 1992).

Other studies have compared ex-institutionalised adolescents with those who were placed in foster care. They too support the findings that ex-institutionalised youths had more behavioural difficulties as well as more social and emotional problems (Hodges & Tizard 1989, Cohen 1986). A more recent empirical project reviewed institutions and foster homes investigating the safety, well-being and long-term success of children in care, re-entry after care and the costs of out-of-home care (Barth 2002). It found no evidence that institutionalised care accomplished any of the caring goals that the child welfare service proclaimed, including child safety, standards of well-being and lowering recidivism (Barth 2002).

Much research has indicated that juvenile detention centres increase criminal behaviour among the residents because inexperienced youths learn from their peers who know more about crime (Camp & Gaes 2004). When the recidivism rates of a group of juvenile males in a work-orientated programme and another group in a communication-orientated programme were studied, it was found that low self-esteem was related to recidivism following institutionalisation (Maskin 1976). Institutionalisation during adolescence clearly increases the likelihood of adult...
offending behaviour (Gatti, Tremblay & Vitaro 2009, Huizinga et al. 2001, McCord, Widom & Crowell (Eds) 2001). Similar studies of the effects of being institutionalised, for example one that included a sample of 17,000 juveniles in the state of Florida, found that the more time an individual spends in confinement, the greater chance of recidivism. This was despite controls for age, gender, race and religion (Winokur et al. 2008). However, other researchers found that the institutionalisation of youths and juvenile justice intervention lowered the risk of future involvement in street gangs and delinquent peers (Bernburg, Krohn & Rivera 2006).

One comparative study examined the reoffending rates for two groups of high-risk adolescents into their early adulthood (Huizinga et al. 2003). One group was in Bremen, Germany and the other group in Denver, Colorado. Bremen was considered lenient and adolescents who committed crimes were dismissed with a warning or directed to perform community service. Denver, on the other hand, used severe punishment and the youthful offenders were usually arrested and institutionalised. Despite these widely divergent approaches to young offenders, it seems there was little difference between the recidivism rates thus demonstrating that reoffending have multi-factorial causes (Huizinga et al. 2003). Drawing on data collected from 779 male delinquents in Montreal, Canada, it was determined that although court intervention “greatly increases the likelihood of involvement with the penal system in adulthood” it was detention that exerted the “most negative impact” (Gatti, Tremblay & Vitaro 2009, p. 997). Further, the “more restrictive and more intense the justice system intervention was, the greater was its negative impact” (Gatti, Tremblay & Vitaro 2009, p. 955).

There are few studies that have explored Australian juvenile institutions, but it has been suggested that the institutionalisation and incarceration of young people is a significant predictor of future criminal activity (Cottle, Lee & Heilbrun 2003). In 2015, jurisdictions, such as Queensland, allowed for juveniles seventeen years and over to be transferred to adult prisons. Other states, such as NSW, Victoria and Western Australia, allow for children as young as sixteen to be placed in an adult prison (Walker 1992).
Of importance are studies that examined the role of juvenile confinement on subsequent homicide offending. The study of 445 male adult habitual criminals: indicated that juvenile confinement … predicted murder arrests despite controls for juvenile homicide offending, juvenile violent delinquency, juvenile felony adjudications, juvenile non-compliance violations, juvenile arrest charges, onset, age, three racial/ethnic classifications, career arrests, career violent index arrests, and career property index arrests” (DeLisi et al. 2011, p. 207).

Therefore, commitment to an institution as an adolescent was a potential risk factor for homicide offending and becoming a career criminal, and that this pathway was not just for a few isolated individuals but for a significant percentage of their sample (DeLisi et al. 2011). A study of inmate homicide in the Texas Department of Criminal Justice between 2000 and 2008, found that forty-four per cent of the homicide offenders had been in juvenile detention homes and that twenty-seven per cent had been institutionalised during adolescence (Cunningham et al. 2010). There is now a substantial body of evidence to show a link between juvenile confinement in any institution as a background factor in the lives of serious adult male career criminals (DeLisi et al. 2011, Baglivio 2009, Winokur et al. 2008, Bowles & Florackis 2007).

It has been conceded that the “measures of recidivism can be inaccurate and/or misleading” because they vary in the way they are operationalised (Richards 2011, p. 6). It is also recognised that the juvenile justice system is only one factor that influences a juvenile’s life (Richards 2011). Similarly, researchers argue that “recidivism cannot be directly attributed to any one component of the criminal justice process” (Treisidder, Payne & Homel 2009, p. 8). There are risk factors that predict overall recidivism, and these can include “poor parenting skills, criminal behaviour in the family, a history of physical and emotional abuse and involvement with criminal peers” (Mulder et al. 2010, p. 118). Another factor to emerge, especially predictive of more serious offending, was the “lack of positive coping strategies” (Mulder et al. 2010, p. 118).
4.4 Summary

This chapter first examined the attributes connected with personal identity and adolescence. Because rapid cognitive development occurs during adolescence, youths have to learn to think and reason in a wider perspective, which is difficult in an institutionalised environment. Adolescence is a time when young people question their personal identity, take risks and learn about themselves while developing their ability to practise self-control (Smith et al. 2012, Jones et al. 2012, Cashmore 2011, Christie & Viner 2005, Spear 2000). When adolescents are subjected to degrading and humiliating treatments, the formation of their individual identities can be disrupted and in some cases, irreparably harmed (Smith et al. 2012). A significant body of research has demonstrated that the experiences in an adolescent’s environment have lifelong effects (Abrams & Hyun 2008). Juveniles could also be influenced by the acute criminal tendencies of their peers within the institution (DeLisi et al. 2011, Varano, Huebner & Brynum 2011, Mazerolle, Piquero & Brame 2010).

Although there are similarities between the concepts of an individual’s personal identity, self-image, self-perspective, self-belief, self-esteem, self-respect and self-worth, each of these characteristics contribute to an individual’s unique personality and the way people see themselves and evaluate their own worth (Rosenberg 1979, Hewitt 2009). Self-control, willpower, self-regulation and self-discipline, which are learned abilities, have to be practised, and this is difficult when adolescent youths are institutionalised where they have no choice but to follow the regimented routine. People with self-control regulate their behaviour and make conscious and deliberate choices and decisions, thinking about the consequences of their actions (Hirschi 2004). They follow rules have self-discipline and perseverance (Rosenberg 1979). Usually, people with high self-control have positive self-esteem (Muraven, Pogarsky & Shmueli 2006, Muraven & Baumeister 2000).

A great deal of research has examined the impacts of juvenile institutions. Juveniles are generally institutionalised because the state or church believes they are in need of care or they have committed a crime. A review of the literature illustrates that institutionalism is not a solution to the problem of vulnerable children or to delinquent young people (Barth 2002, Provence & Lipton 1963, Spitz 1965). Indeed, most research illustrates that juvenile detention has few redeeming qualities (Potas, Vining...
& Wilson 1990) and does not thwart recidivism and can even increase reoffending (Trulson et al. 2005, Howard League for Penal Reform 1993). Others found that incarcerating young people increases the risk of physical and sexual abuse of young people, as well as being a significant predictor of future criminal activity (Hinton et al. 2007, Cottle, Lee & Heilbrun 2001, Redding 2000, DeLisi et al. 2011).

CHAPTER 5
Design, Method and Data Management

We all feared Tamworth. None of us wanted to go there ever, but we did and it changed us (INT2).

5.1 Introduction
In essence the overall research design is an ethnographic case study that delves into the historical records, engages in a site visit, undertakes a thematic analysis of extant personal written accounts (biographies and autobiographies) and of the transcripts of new interviews with those who once resided in the Tamworth Institution. In addition, an online survey formed part of the research framework, but it largely comprised open-ended questions and thus it also adopted a more qualitative approach. The data comprise words, images and video that were analysed by use of NVivo software to uncover themes (Collingridge & Gantt 2008).

There is already a repository of information about the Forgotten Australians, the group to which those formerly incarcerated at TIBT belong (SCARC 2004, Harrison 2011). However, these were part of a broader national picture of “out-of-home care” in the last century and it was vital that a narrower examination of this group of residents was undertaken to reveal their distinct experiences and the discernible differences to be captured (Ribbens & Edwards 1998). Only four former residents of the Tamworth Institution gave evidence at the Senate and other hearings, thereby providing further rationale for this research project. The narratives of the former residents of TIBT, who were interviewed or provided their stories for perusal, provided a view of their perceptions of the effects of their experiences, thus allowing investigation of the research question: How does the experience of being an adolescent male in a punitive regime in a juvenile detention institution influence the former resident’s perceptions of self, subsequent offending activity and overall life course outcomes?

This chapter describes the methods that were used for conducting the online surveys, the recruitment process for those participants previously institutionalised in TIBT as adolescents, the interviewing procedure, the act of listening to and reading
the narratives, categorising and coding the information. It also canvases the ethical aspects of the study and the analysis of the narratives. This chapter ends with a brief critical overview of the strengths and limitations of the ethnographic case study approach as well as of the specific methodologies employed.

5.2 Qualitative case study approach
This research is informed by scientific principles to advance knowledge (Creswell 2003, OECD 2002). It draws on the theories espoused earlier (Chapter 3) and builds upon the extant empirical literature (Chapter 4) to provide an understanding of the Tamworth Institution in the context of its social, historical and cultural perspectives and the legacies that this wrought for those who were once “cared for” there as adolescents.

Qualitative methods were deemed most suitable to the overarching research question of this thesis because they are concerned with meaning (Crouch & McKenzie 2006, Collingridge & Gantt 2008) and how it is connected to personal experiences (Pollio, Henley & Thompson 1997). Qualitative research was selected as an appropriate vehicle to investigate the research question of this case study in a coherent, justifiable and rigorous manner while paying careful attention to detail (Kvale 1994). It involved:

an inquiry process of understanding a social or human problem, based on building a complex, holistic picture, formed with words, reporting detailed views of informants and conducted in a natural setting (Creswell 1998, p. 15).

This case study encompassed a phenomenological analysis — experiences of the lived world — of narratives. The premises were identified after using NVivo9 software to manage the data by coding the recurring themes and patterns (van Manen 2006). Previous studies of narratives have examined the tradition of portraiture (Lawrence-Lightfoot & Davis 1997), ethno-drama (Saldana 2003) and life story (Barone 2007). The qualitative data from open-ended questions and the narrative life histories permit the examination of stable and changeable social processes (Sampson & Laub 1992).
The case study approach involved “a research strategy that focuses on the dynamics present within a single setting” (Eisenhardt 1989, p. 534). It relies on multiple sources of evidence, can include quantitative evidence and benefit from the prior development of theoretical propositions (Eisenhardt 1989). The case study approach provides descriptive knowledge, which must be considered and understood in context (Bogdan & Biklen 1982). Case studies can provide understanding of the interaction between narrative and material factors (Presser 2009). The historical records, narrative material, interview and survey data relied upon in the present study aim to extract meanings and interpretations of a social reality (Gall, Berg & Gall 1996).

5.3 Historical documents

It was necessary to read and analyse the few documents, reports, news articles and any published material on TIBT, as well as other juvenile corrective institutions and out-of-home-care institutions in order to provide a foundation for this case study. This history was derived from all of the materials that were available including legislation, policies and daily order books. These were found on government websites as well as at the National Library in Canberra, Tamworth Library and the NSW State Library. After researching the relevant historical documents (as detailed in Chapter 2), and looking for consistency in the narratives, it was possible to ascertain their credibility with regard to the institutionalised practices. Therefore, these references to the daily rules, regime, routine and punishments, as well as information from government inquiries were also included in the computerised NVivo9 management coding. The historical material that was made available, for example legislation and policies, was described in Chapter 2. This was not coded for investigation because although it supplied a historical foundation, it did not contribute to the narratives.

Archival resources as well as materials from the government departments responsible for the management of the Tamworth Institution were consulted. Like most historical records, there were patent inadequacies and apparent inaccuracies. The NSW Archives Catalogue listed several historical documents connected to TIBT including *Annual Reports for the Department of Child Welfare* and the *Index to residents from 1948 to 1976* recording admission and discharge details, as being available for viewing. However, in May 2012, when these documents were requested...
in writing stating the reason for their viewing, the response from the Western Sydney
Records Centre at Kingswood was that these materials had recently been recalled to
the Department of Community Services (DCS). No particular reason was supplied.
The librarian kept repeating, “It has been returned to the Department” or “The
Department has requested that it be returned immediately”. A similar scenario played
out regarding other historical documents held by NSW State Records and said to be
publicly available. These included the registers of admission, discharge and transfer
details, the names of runaway youths and documents that outlined the punishments
meted out to residents. These materials were not on the shelves at the Records Centre
in March 2012, and despite submitting a request form and making several follow-up
phone calls, neither the materials nor an explanation was forthcoming.

iccorrectly advises that Series Number 19559, content date range of the admissions
and discharges between 2 February 1948 and 21 May 1980 are available at the
Western Sydney Records Centre.

The registers consist of double page entries arranged by either week or
month, with one page recording admissions to the facility and the
facing page recording discharges. In the first register (1948-1950),
each double page is nominally monthly, although after the first few
months, entries were made chronologically by entry date, with more
than one month per page. Each line records the details of an individual
boy, so their admission and discharge details are on the same line.
Later registers (June 1950 onwards) dispensed with this practice,
recording ‘Movements Inward’ (admissions) on a weekly basis on the
left page, and ‘Movements Outward’ (discharges) for the same week
on the right page, meaning that the same names might not appear on
both lists (Admission and discharge registers, weekly movements
[Endeavour House, Tamworth] State Records Authority of New South
Wales Home for Boys, Tamworth (1948-1976) Endeavour House
(1976-1990) (Tamworth Research Data)

The website information continues to explain that inward admissions always included
date of admission, name, age or date of birth, religion, previous institution and
discharge date, and that later registers added columns for offences and court details. It
has not been possible to find out if this list exists (NSW.gov.au).

However, when Geoff Thompson from the Australian Broadcasting
Commission (ABC) produced a television programme on the Tamworth Institution
(December 14, 2011), they obtained a list of names of the residents following a freedom of information request to the NSW Department of Family and Corrective Services, the surnames of the residents were erased because of privacy concerns. A point that needs to be clarified is that this list was in no particular order, definitely not in date order. If first or last names had been added alphabetically, the dates did not correlate with one being 1971 followed by one in 1964 (Appendix 1 sample). Nevertheless, a process of crosschecking first names against dates of birth with three of the interviewees has confirmed that many of Australia’s most notorious criminals had stayed in TIBT when they were around seventeen years old. Most of these infamous killers were in the Tamworth Institution between 1961 and 1972.

Copies of the *NSW Child Welfare Annual Reports to the NSW Parliament* from 1945-46 to 1980-81 were obtained from the Records Management Unit at Parramatta. The reports contained enrolment numbers per annum plus expenses for all juvenile detention institutions run by the NSW Government, including finance, maintenance, salaries and electricity costs. However, there were few direct references to the Tamworth Institution, especially about the youths in care, education, counselling or other programmes. While the overall historical record regarding the TIBT is sparse, it soon became evident that there was more information about the institution than about individual residents. Samples of routines and regimes were found in the *Duties Book* (1974) in the Tamworth Library. Nevertheless, there was very little material about the Tamworth Institution in the history section where it was expected there would be references.

### 5.4 Data collection

Altogether, the sample for this case study is made up of forty-five items, which are detailed in the Table 5.1 on the next page, plus the twenty-four online survey responses, totaling sixty-nine elements.
Table 5.1 *Pseudonym initials*

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It is necessary to be sensitive to the manner in which fragments of ideas are expressed when exploring the ways meanings were created in the interviews and the narratives, particularly when discussing matters of a personal nature (Harrison 1996, Hyden 1994). The researcher has a counselling diploma, so had the training and experience to recognise if there was any need to deal with emotional episodes. Also arrangements were made with CLAN and Lifeline if the participants required counselling. All participants were given pseudonyms made up of source initials and numbers. The source initials used were interviewees (INT), media (MED), autobiographies (AUTO), biographies (BIO) as well as court and confidential reports (CON). The numbers were assigned at random by the researcher. In this thesis, the source initials and a number refer to all participants.

In qualitative research the sample size is considered large enough once all the relevant issues have been identified and the stories start becoming repetitive (Suresh & Chandrashekara 2012). Qualitative samples ought to be sufficiently large so that important perceptions are uncovered but avoiding repetition (Presser 2009, Strauss & Corbin 1998). It is instructive that one study that reviewed over 560 qualitative research studies revealed a mean sample size of thirty-one (Mason 2010), but one recommendation is that they comprise at least six participants (Morse 1994) and another suggests between five and twenty-five informants (Creswell 1998). What is
more important though is “the scope of the study, the nature of the topic, the quality of the data, the study design and the use of shadowed data” (Morse 1994, p. 224) to these factors. The results of 560 studies showed that the mean sample size was thirty-one, however, more data does not necessarily lead to more information (Mason 2010). Qualitative samples must be large enough to ensure that most or all of the perceptions are uncovered and the collection of new data does not shed any further light on the issue under investigation (Glaser & Strauss 1967). It was estimated that twenty to twenty-five participants would be required for the present study and, inclusive of the autobiographical and biographical materials, there were forty-five narratives and the surveys of twenty-four respondents analysed. Sixty-one of these males had been residents in TIBT. So, the sample for this case study was greater than the sample size guidelines of fifteen to twenty participants (Creswell 2003), or twenty to thirty participants (Morse & Chung 2003). The narratives focused on ways that the males interpreted and made sense of their experiences while providing the information for the understanding of their feelings, values and perceptions that underlie and influence their behaviour (Atkinson, Coffey & Delamont. 2001). The men told similar stories about their treatment and the regime in TIBT. However, emotion determines how the residents perceive their time in TIBT and organise their memory (Brosch et al. 2013). Nevertheless, the narratives of the interview participants and survey respondents were adamant that their experiences in TIBT were responsible for some of their phobias and violent behaviours, as well as many of their ailments. Although repetition in the narratives supported the storytellers’ perceptions, there may have been a need for the participants and respondents to find “something to blame” for their life choices. Therefore, it their observations that infer a “causal” link have to be viewed with some caution.

Two brothers of two residents, a prison officer and a psychologist, who had had contact with TIBT residents when they were in prison as adults volunteered to be interviewed. On the proviso that the material be treated confidentially, the psychologist supplied one autobiography and two reports connected to former residents, who were convicted of violent crimes as adults and went to prison, but were now deceased. Two former TIBT residents, who are currently serving time for convicted violent offences, each sent in a written autobiography from prison. Relevant information was coded from court reports and government inquiries. One of the
residents provided his psychiatrist’s report. In his letters from prison, another ex-
resident wrote that he was reluctant to help with this research because it was a period
of his life that he had tried to forget and he believed that none of the ex-residents
would be believed. However, he now “felt a small ray of hope” and shared his
autobiographical submission to the judge of his case, in which he wrote about his
violent experiences in TIBT. Altogether fourteen biographies and four
autobiographies were provided or located in libraries.

5.4.1 Online Surveys
The Internet and other electronic technologies are effective and efficient survey
vehicles due to their convenience, speed and low cost (Sue & Ritter 2012, Kennedy &
Vargus 2001). But, although websites can solve problems with distribution and result
collection, the surveys need to be promoted and marketed to attract the relevant
participants. The major concern that continues to plague researchers is not being sure
who is actually completing the surveys (Kay & Johnson 1999, Sue & Ritter 2012).
This is pertinent to the current study as it cannot be ascertained whether any of the
interviewees also completed an online survey, given the requirements for
confidentiality (for the interviews) and anonymity (for the online surveys).

In April 2011, a website — www.institutionforboystamworth.com — was
designed with two sets of questions to survey former residents and people connected
to the Tamworth Institution. One set of seventy questions, mainly multiple-choice,
was prepared solely for the former residents and a second set of forty-seven questions
was aimed at relatives, tradespeople, suppliers and guards formerly connected with
the Tamworth Institution. Nineteen residents completed the survey. Three relatives
and two residents from other juvenile institutions, who had known some adolescent
residents from TIBT, answered the non-resident survey. This website and online
survey were publicised in care leavers publications, libraries, websites for Forgotten
Australians and on ABC television and radio. The website remained on the Internet
for a one year period until April 2012. Frequencies and cross-tabulations are
presented in Chapters 6 and 7 although the small number of responses meant that data
were used in a supplementary way to underpin the case study design. The open-ended
questions and the overall nature of the responses have been used to supplement the
interview and biographical materials.
5.4.2 Interviews

Following publicity about this research on websites and in the media, eight former residents of the Tamworth Institution and two males whose two brothers had been residents, volunteered to be interviewed. Given the passage of time and the difficulties recruiting former residents, the sampling frame in this study presented some challenges including travelling distance because most were not comfortable with being interviewed on SKYPE, but they were not insurmountable (Maxwell 2005, Creswell 2003, Collingridge & Gantt 2008, Morse & Chung 2003). Eight adult males were interviewed in a safe venue at a mutually convenient date and time in towns in New South Wales and Queensland. The participants were given the Explanatory Statement where confidentiality was discussed, as was agreement for the digital recording of interviews. The face-to-face interviews took from two to four hours. An interview was conducted via Skype and another interview by telephone for about two hours’ duration each.

Clearly, it was important to create a level of “openness and trust between participant and researcher” (Marshall & Rossman 2006, p. 118) given the personal nature of this research. Thus the qualitative interviews followed a narrative process (Kvale 1996), using conversations with structure and purpose defined and controlled by the researcher. The interviewer’s role was to encourage the narrator to keep telling his story, and to probe deeper and more precisely when necessary (Allan & Skinner (Eds) 1991), not in a rushed nor bias manner, but rather for clarity (McCabe & Bliss 2003, Hey 1997, Coates 1996).

After a few preliminary questions to establish rapport including:

Tell me about your time in The Institution for Boys, Tamworth?
Why were you sent to this institution?
How long were you there?
Which home or institution affected you more? Why?
What was a normal day at the institution?
What was the nature of the punishment there?
Did this punishment deter future misbehaviour?

From that point, the interviewer did not adhere to prepared questions and categories, but listened for new and unexpected question opportunities in order to obtain descriptions of specific situations. Nevertheless, there were two main procedures (Yin 2003). Firstly, there is a need to follow a line of inquiry — in this
case addressing the historical treatment in TIBT. Secondly, any questions to be asked must be asked in an unbiased manner that serves the needs of the line of inquiry — in this case encouraging former residents to remember their time in TIBT via open-ended questions to capture their views and opinions and to encourage the continuation of their stories (Kvale 1996). Every life experience has an effect and the interviews demonstrated that the former residents have a clear perception of the effect of their stay in the institution (Yin 2003). Although it was possible that the residents personalised and distorted what happened when telling their stories, it was their perspective of the events, therefore their reality.

5.4.3 Media and published material

When Geoff Thompson of the ABC learned about the treatment in the Tamworth Institution from an adult, who had been an adolescent resident, he produced a television documentary that was broadcast on 14 December 2011. While making the programme, he found that eight men who had been incarcerated in TIBT as teenagers had been convicted of thirty-five violent deaths. Another media report, published in the local Tamworth paper, The Northern Daily Leader, on 15 December 2011, linked another six ex-residents of the Tamworth Institution to rape and murder. There were four other media articles in various newspapers, which contained relevant information from interviews with men, who had been residents in TIBT. Altogether twelve different media reports provided TIBT material.

Convicted murderer, Archibald Beattie “Archie” “Mad Dog” McCafferty and career criminal Walter “Robert” Mayberry devoted sections of their autobiographies to their time in the Tamworth Institution. Fourteen biographies and two other autobiographies of convicted violent criminals also had sections where their time in TIBT was described in detail. Also included in the biographies were two stories about indigenous residents, one written following an interview by a police officer and another a personal story of addiction published online, had a section covering their time in TIBT and its effect on their lives. Three court reports of men who had received life sentences also provided TIBT information.
5.5 Ethical Considerations

In January 2011 an application (RO1268) was made to the Bond University Research Ethics Committee (BUHREC) detailing the purpose of the study including duration, length of participation and the risks and benefits of the research. After the Ethics Committee interviewed the researcher and supervisor, BUHREC confirmed their approval to proceed with the research project on 19 April 2011 (Appendix 2A).

Because many of the participants in this study could have psychological and physical problems extra care was required and so the parameters of the research — the explanation (Appendix 2B), which was published on the website promised that no names would be published and only the researcher and the supervisors would have access to any material supplied by the residents. After reading the explanation, each interviewee was asked to sign the informed consent form (Appendix 2C), which detailed that they could withdraw their consent at any time. During this case study, all the interviewees were made aware that their names and narratives would be treated confidentiality. All participants were given pseudonym initials as illustrated previously in Table 5.1.

As described previously, the narratives were told directly to the researcher in interviews. During this process, the researcher demonstrated a caring non-judgemental attitude while listening to the stories told by the former residents, always being careful not to give advice. This technique required the researcher to have skills that allowed her to assist the narrative-telling process without guiding or attempting to sort out the problems of the narrators, who were encouraged to feel safe in a relationship of trust where confidentiality was paramount (Yin 2003). The narratives of the former residents demonstrated that without exception they perceive they were mistreated while in the institution. Researchers have found it necessary to be sensitive to the ways people’s perceptions are expressed in their narratives when they explore their personal experiences (Harrison 1996, Hyden 1994).
5.6 Narrative Research

Narrative research is based on the principle that human beings are essentially storytellers who experience the world and interact with others through storied lives. Therefore, researchers who undertake narrative research do not look for scientific facts (Plummer 2001, Ezzy 1998, Franzosi 1998) or use the language of certainty, instead presenting findings in language that is tentative, circular and multiple with baroque descriptions (Plummer 2001, Hyden 1994, Borland 1991, Denzin 1989). While the narrators describe their lives as they perceive them (Marshall & Rossman 2006), the researcher’s role is to encourage the narrator to keep telling his story, and to probe deeper and more precisely when necessary (Allan & Skinner (Eds) 1991). Narratives could contain uncertainty, be circular, overlap and have disorganised expressions, especially concerning repetition and the effects of personal experiences (Coates 1996). Therefore, it was necessary to carefully analyse the residents’ narratives, perhaps asking a few similar questions to all interviewees to assess credibility. Although the elements of the narrative can be examined independently, it is extremely useful to focus on their interconnections by focusing on the personal and social matters occurring in specific places or sequences (Connelly & Clandinin 2006).

Narratives are the foundation for substantial descriptions of human societies, especially history, literature and anthropology, as well as being useful for contemporary criminology research because storytelling applies to individuals, aggregates, direct perpetrators and bystanders (Presser 2009). Narratives concerning experiences and actions culminating in crime provide data on the criminogenic antecedents. Although it is possible that the interviewees could distort what actually happened when telling their stories, their story is their perspective of the event and therefore describes their reality. Their stories connect the thematic points between personal and collective experience, desire and effort (Presser 2009).

Narrative constitutes reality as well as identity and subjectivity. A life story describing a traumatic event, such as residing in a juvenile detention centre, can be “factual, as in the telling of an event that has happened in …personal life” (Lauritzen & Jaeger 1997, p. 35) or it can be the teller’s perception of the happening, thus his or her reality. Because the historical, social and interactional context of this narration is important, the residents’ narratives are the verbal technique for reiterating past
There are two widely held views of the role of narratives — firstly, that narrative is significant in making sense of the identity of one’s self and others (Brockmeler & Carbaugh (Eds) 2001) and secondly, that the relationship between narrative and experience illustrates the idea that individuals perceive the world in narrative form (Carr 1986, MacIntyre 1981). Although life is not structured, but consists of events when individuals narrate their stories, they provide the meaning, order and structure of their experiences with the aim of linking the stories and larger social roles, for example adolescence (Georgakopoulou 2006).

The findings from listening to narratives will bring a close link between identity construction in the interactional history (Georgakopoulou 2006).

Researchers, who have conducted narrative analysis, agree that analysis of these narratives begins with three key questions: what is the essential story; who and what are its central characters; and how are characters, events and understandings connected (Riessman 2008, Chase 2005, Connelly & Clandinin 2006). Therefore, by using these questions to examine the residents’ narratives, it is possible to document the human experiences that constituted their lives. This current research focused on form, content and telling — what was said and how it was told. The context of rational control that shaped the narratives was included as data, beginning from the “what” and then shifting to an examination of the “how” of talk, in a similar way to other analysed narratives, not as stories about what really happened, but as examples of the individuals’ perceptions (Presser 2009).

5.6.1 Residents’ narratives
While telling their narratives, the residents of TIBT organised and articulated their experiences in temporally meaningful ways. Equally important, the residents’ narratives not only highlighted the experiences of a group of adolescents in a punitive regime within a care system, but also demonstrated how their perceptions of this treatment impacted on them when they sought to make choices and decisions throughout their adult lives. The stories of the treatment of the former residents could, as was suggested, “invite reflection on the very nature of culture and, possibly, even on the nature of humanity itself” (White 1980, p. 5). However, it was possible that the boys’ family situations prior to their living in institutions and their time in other juvenile institutions also contributed to their trauma. Therefore, intense examination
of the narratives was necessary to find the reason that of all the institutions and places in which they resided during their childhood, adolescence and adulthood, the storytellers blamed their experiences in TIBT for their negative life choices.

Stories allowed the interviewees to reflect upon their lives and explain themselves to others while enabling others to study “how humans make meaning of experience by endlessly telling and retelling stories about themselves” (Connelly & Clandinin 1990, p. 14). Through talking about their disruptive life events, the narrators provided windows into their lives, so their personal narratives could be analysed line by line (Fraser 2004, Brunt 2001, Ezzy 1998, Riessman 1993, 2008). During the storytelling activity, the narrators prioritised their experiences by the ones that affected them the most, and often gave them nightmares. However, during analysis, the researcher organised the incidents into meaningful episodes that called upon cultural modes of reasoning and representation (Berger 1997). Although their narratives were fundamentally concerned with themselves, their stories shaped their self-awareness and charted their actions, so they became vehicles for self-understanding. The concepts and interpretations of their innumerable, undisciplined past actions help people make sense of their lives (Strauss 1977). Therefore, sharing their narratives helped the residents acknowledge the effects of their experiences in TIBT.

It has been suggested that the expression of the narrator’s point of view and perspective of events could be a structural component and a diffuse mechanism for conveying a story point with a beginning, middle and an end, which is largely a monologue that occurs as response to an interviewer’s questions (De Fina & Georgakopoulou 2008). However, the storyteller is the main producer of meaning focusing on the construction or destruction of their identities (De Fina & Georgakopoulou 2008, Labov & Waletsky 1967). Labovian narrative analysis, inspired by Labov and Waletzky (1967), and identity-focused approaches by Georgakopoulou (2006) are conventional paradigms that use narratives to research and understand the way people create meaning in their lives. However, it is argued that narratives can be affected by the community’s culture at the time, so the surrounding culture must be considered when analysing stories (De Fina & Georgakopoulou 2008).
Studying narratives is useful for criminology because a concept narrative “circumvents the realism to which other theories of criminal behavior are bound” (Presser 2009, p. 177). Other studies support the premise that individuals construct narratives about themselves by finding meaning in available resources, including social roles and personal attributes, often laying blame on others (Burke 1991, Tajfel & Turner 1986, Stryker & Craft 1982). This research was particularly focused on the way the residents drew upon the socio-cultural narratives about institutionalisation, for example how the negative experiences of degraded or stigmatised people could cause a degraded or spoiled identity (May 2008, Andrews 2002, Goffman 1963). The way narrators tell stories of their experiences in specific contexts, and the stories they tell about their own actions, are often inconsistent (Freeman 2003).

5.7 Data analysis
After the interviews, which commenced with open-ended questions designed to encourage volunteers to willingly share their experiences in narratives, the interview data were transcribed and coded. The process involved locating relevant words and statements in the transcripts; identifying the meanings in each statement connected to the research question; integrating the meaning units into common themes; and integrating and explaining the themes across the interviews and narratives to describe the phenomenon being researched. After transcribing the stories, it was necessary to read the text several times to identify the coherent categories that were the crux of this qualitative case study. The six dimensions of the residents’ narratives — characters, setting, events, audience, causal relations and themes — were considered while analysing how the stories reflected and shaped social contexts connected to the narrators.

The three-step formula used to work through and record the information from the sources was describe, compare and relate (Bazeley 2009). The describing stage involved categorising and sorting the data to attach meaning and significance to the analysis. By doing this, a list of key points and important findings were discovered. The next stage compared the information by investigating the differences in the characteristics and boundaries of the themes using who, why, what, when and how questions. It was important to evaluate these results while synthesising their meaning (Bazeley 2009).
5.7.1 NVivo9 software

To list the findings and code the data without synthesising them and tapping their meaning, the computer programme NVivo9 was used as a management tool. Drawing conclusions involved impartially considering the meanings of the results and assessing their implications. While it is vital for research that evaluations be reported objectively, interpreting these findings and reaching conclusions is a challenging process. The data from the forty-five narratives, which included ten personal interviews, eighteen autobiographies and biographies as well as twelve media reports were comprised of documents, PDFs, pictures, audio, videos, spreadsheets and databases. The results of the structured and categorised questionnaires of two surveys, which were completed by nineteen residents and five non-residents, were also included in the NVivo9 coding.

Produced by QSR International, NVivo9 is a qualitative data analysis (QDA) computer software package. It is designed for qualitative researchers working with text based and/or multimedia information. This software programme manages, stores and links documents with themes and ideas. The programme categorises behaviours, interactions, incidents and types of responses by coding and indexing themes to assess the prevalent aspects. Using NVivo9 to work with the unstructured information about TIBT, for example written, audio and film, provided visible management and a timesaving categorisation, subtle trends and thematic features. The connections were displayed using a range of visualisation tools such as charts, maps and models. However, it was always possible to view the data behind the visual diagrams. Coding nodes classified data and themes including ideas, concepts, behaviours, interactions, incidents, terminology and phrases into coherent categories and subcategories, which summarised the information. Each code had a descriptive label indicating each category that was created. By identifying similar and different characteristics, patterns, relationships and ranges of views expressed, it was possible to attach significance to themes and patterns in order to come to conclusions, encourage discussion and suggest further research.

The searching tools in qualitative computer software programmes allow researchers to integrate the data at a particular level, thus improving the rigour of the management process. Supporters of computer software argue that it is a quick reliable
way to manage data, thus facilitating an accurate and transparent analysis process (Morison & Moir 1998, Richards & Richards 1994). Additionally, using computer software for coding and management of data could add to the validity of the results by ensuring that all instances of a particular usage are found (Welsh 2002). Nevertheless, concern has been expressed regarding the use of computer-assisted qualitative data software guiding researchers in a particular direction (Seidel 1991). Therefore, some data still needed to be analysed using manual scrutiny techniques to ensure that all the research information was thoroughly integrated in order to understand how the different themes interweaved (Seidel 1991). Others argued that using software could encourage quantitative analysis of qualitative data and create homogeneity in methods (Barry 1998, Hinchcliffe et al. 1997). But, it is definitely agreed that the software offers time saving management of the data.

While it is possible to edit the textual data in NVivo9, it was preferable to carry out any initial changes that needed to be done early in the research, for example replacing real names of people, organisations and locations with pseudonyms before importing data files into NVivo9 and before any coding was carried out. Word processing software that enabled the use of the “find and replace” action for possible editing of names throughout transcripts was more efficient for this task. Theme coding in the NVivo9 software programme and the narrative table (shown later in this chapter) allowed for a more professional and accurate management of the data. NVivo9 also coded the information collected by the surveys, turning the data into actionable information. This software produced pie charts, circle graphs and bar charts, which were useful in illustrating the results.

Although NVivo9 helped to organise the non-numerical and unstructured data, it did not analyse or help to analyse information. It was used to classify, sort and arrange information, to allow for examining relationships in the data, and link, shape, search and model. As the research progressed, the volume of data increased to include items such as interview notes on body language, theories and criminal records. Managing the wealth of information required organisation and comprehensible indexing, so NVivo9 saved time by sorting and coding. This made it possible to formulate observations and build a body of evidence to support this research.
5.7.2 Coding

Computer coding aids in the management of data enhancing the validity of the results by uncovering examples of particular usage (Welsh 2002). Therefore, using NVivo9 to code the topics for this case study provided output that could be managed for investigation and interpretation, as well as being illustrated with charts. After coding this information into themes, the major elements were linked to illustrate concepts for greater clarity of interpretation. Then, the data were challenged, extended and linked in order to reveal fuller patterns. After NVivo9 was enlisted to store, manage and link documents, audio and video by coding and indexing behaviours, thoughts, memories, responses and perceptions into nodes or themes, the information was further classified, sorted and arranged to examine connections in the data. NVivo9 provided shapes and connectors to allow for the visual exploration and presentation of the information, making it possible to view observations. After the sources were coded, the frequency of responses and the detailed content of the responses allowed the assessment of patterns and illuminated the nature of the associations. The final visual mind map of nodes (see Figure 5.1) illustrates the classification structure of coding.
The coding process involved importing all the material into an existing “internals” folder and labelling them with a node title and description. During the time that the material was being coded, it was necessary to change the node titles in the mind map several times when different themes emerged and others became irrelevant. In the beginning all the descriptive nodes had a hierarchy — parent, child then grandchild. However, later it was necessary to merge some nodes when there were no significant references to that theme in the research data.

The computer software tool was used to create five graphs illustrating the priority of references in the child nodes of Experiences and Effects. These graphs were Institutionalisation Experiences, Disintegrative Shaming Experiences, Psychological Effects, Physical Effects and Criminogenic Effects (Appendices 3A,
3B, 3C, 3D, 3E samples). The graphs demonstrate the consistent references to these themes when looking at the effects of the experiences and are presented and discussed further in subsequent chapters. An illustration of these branches is the screen capture of the NVivo9 nodes for this research (see Figure 5.2).

![Screen capture of NVivo9 nodes]

Figure 5.2 Screen capture of NVivo9 nodes

When necessary, complete paragraphs were coded to ensure adherence to the original meaning so that the material in the node could be analysed. However, often, the data were coded into several nodes simultaneously because the source information referred to multiple themes. Although NVivo9 was used for efficiency reasons, it also ensured validity by establishing documentary evidence illustrating the relevant material while making it easier to refer back to the original sources.

Each story was examined using a narrative table, which is a meaningful way of organising thinking (Rumelhart 1980). The individuals’ stories were systematically arranged in the table that illustrated their experiences, thus allowing for a more penetrating analysis of their lives before TIBT. To facilitate further understanding of the narrators’ experiences, it was necessary to be aware of their environment prior to
their going to the Tamworth Institution. Therefore, Table 5.2 organises the residents’ narratives of their pre-TIBT experiences into the categories of “Self” and “Siblings” because being separated from their siblings while in juvenile institutions was often highlighted as a major concern of the residents during the interviews. After analysing each story, a summary of the pre-TIBT experiences was formatted in the narrative table (see Table 5.2) before being coded in NVivo9.

<table>
<thead>
<tr>
<th>Narrative Table — Summary of Pre-TIBT Experiences</th>
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<td><strong>Self</strong></td>
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<td><strong>Were you in other institutions?</strong></td>
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<td><strong>What were your family relationships like before you went to TIBT?</strong></td>
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<td><strong>Why were you sent to TIBT?</strong></td>
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Table 5.2 Experiences prior to being in TIBT
When studying the subsequent offending of the residents of TIBT, their experiences in other institutions and their family lifestyles were considered, as per the summary in Table 5.2 above. Prior to going to TIBT all of the participants and respondents had lived in at least two other institutions and all their siblings were either institutionalised or in foster care. Although their family lives differed, at least two-thirds of the narratives and surveys demonstrated family problems, not necessarily violence, prior to being taken from their homes into government or religious institutions. However, their stories illustrated that the males believed they were less violent before they were institutionalised in TIBT, with most claiming that their criminal behaviours had been limited to non-violent property offences.

After TIBT, many adolescent residents were returned to other juvenile institutions and in later life were confined in adult gaols including Long Bay and Grafton, often for violent crimes. While they spoke of their time in these prisons with disgust, they did not express the level of terror and distress around their retelling of these experiences as they did for the Tamworth Institution. It should also be reiterated here that TIBT was a particularly unusual detention centre in that it was immune to those improvements being made to penal institutions in New South Wales and in other jurisdictions. Around the middle of the twentieth century significant changes to penal philosophy (emphasising the legal rights of prisoners) and to prison practices (such as the recruitment of more suitable prison officers) were being made (O’Brien 1998, Gaols and Prisons Department 1960). These changes did not occur in TIBT, where committees and government authorities did not oversee the treatment of the adolescents, so the guards were allowed to physically punish and shame the residents, and there were longer hours of solitary confinement, referred to as “segregation” to circumvent the regulations.

The twenty-four respondents, who completed the online survey had been connected to residents in TIBT when they were fifteen to eighteen years old for approximately six months during the years 1953 to 1970, noting that five of these were responding about relatives who were former residents. A small number of respondents were in the Tamworth Institution twice, or even three times. They first came into contact with the Child Welfare Department around fourteen years of age with ranges from between two to sixteen years of age. Of the ten males who answered
the question regarding their contact with the criminal justice system before being sent to TIBT, one teenager was charged with being uncontrollable because he ran away from his foster parents; five adolescent males were charged with stealing; two with car theft; one with carnal knowledge; and one with assault and robbery.

All the respondents were in NSW government institutions prior to being sent to TIBT, many of which were classified as “Training Schools”. Some residents had also been in religious institutions as young children, then were placed in government institutions when they were teenagers, so there was considerable cross-over between types of “homes”. The respondents were usually not aware of the reasons for their placement in a government, religious or (less frequently) private institution. When they were aware of the specific reasons it tended to be because their parents had separated. However, for the majority there was police involvement when the respondents were placed in institutions (generally a juvenile arrest, but some were taken from their homes for reasons of “neglect”). Most of the respondents were either living with their parents or relatives before they came into contact with the Child Welfare or Children’s Services Department. More than half claimed they were “accustomed to violence”.

5.8 Strengths and limitations of this methodology
One of the most obvious advantages of narrative qualitative research is that it can provide a holistic picture with specific information about a multitude of phenomena because “the study of narrative is the study of the ways humans experience the world” (Connelly & Clandinin 1990, p. 2). Although the life stories of the participants revealed information that was not easily discerned on the surface, inherent subjectivity was the main strength of the narrative interview as it was irreducibly perspective (Bruner 2002). The story became the object of study, focusing on how the participants made sense of their lives (Presser 2009). Although narratives have the power of persuasion, they are used to make sense and meaning (Riessman 1993).

One possible source of conflict in the data was that because the survey questions were answered anonymously, it is difficult to know if the same person completed more than one survey or the interviewees also answered the survey questions. With regard to narratives, a mutual relationship exists between life and
narrative, implying that the narrative imitates life as well as life imitating the narrative (Bruner 1987). This is demonstrated by the common saying: There are three sides to every story, the teller’s side, that of the people involved and the truth (Bruner 1987). The residents’ selection of the parts of their lives to share was the main process through which they moulded their stories, because no single story could capture all the facts (Bertaux 1981). Nevertheless, the residents’ life stories are psychosocial constructions that aimed to illustrate their personal truths (McAdams 2008).

All qualitative research has the capacity to suffer from being overly subjective. This is possible from both the participants and the researcher. However, the use of NVivo9 helped to overcome this subjectivity by sorting the data into themes. Narrative inquiry is interpretive because it is difficult for the researcher to ask unbiased questions and not direct the explanations in the participants’ narratives (Riessman 1993, Creswell 2003). There can be a problem with the actual authorship of the narratives obtained in a study because the vocabulary of the researcher and interviewer unavoidably affects the actual words of the narration, which could assign an order and meaning to the story that could be different from the narrators’ versions (Denzin 1999). Therefore, the narrators were encouraged to tell their stories without direct questions from the interviewer so that they were not lead into any statements.

The residents’ narratives always drew selectively upon lived experiences as they could contain only what the teller believes was important or significant. Autobiography has been called “the activity of explaining oneself by telling one’s story” (Stone 1982 p. 10). Accounts of the past are recognised as subjective (Presser 2009). The narratives of the residents of the Tamworth Institution could be offering excuses for their adult behaviour or looking for something or someone to blame (May 2008). Clearly this research project is limited by the sample size and the potential for bias because of this. For example, it is not known how former residents, who did not participate in this research might perceive their time at the Tamworth Institution. The reality is that there was probably selectivity in the events that the narrators recalled. However, what is important about narrative analysis is not the truth about the experience, but the way the individual reacted to the experience that provided its effect and their perception of the experience (Burgess 1966).
5.9 Summary

This chapter described the qualitative research methodology that was utilised in this study, as well as the management of data gleaned from the narratives and other research data. The sixty-nine contributions including the ten interviews, fourteen biographies and twenty-four survey respondents in this case study provided the data to study the effects of the former residents’ experiences in TIBT. The data were gathered by surveys and interviews, biographies, autobiographies, media and court reports. An analysis of the results of specific surveys for residents of TIBT and non-residents connected to the institution, as well as historical documents that were available in libraries, autobiographies, biographies, site visits, government reports and court cases determined the background information for this research. While these materials were an important aspect of the research, it is the narratives that provided the core, substance and essence of this research data. Working with this type of data can be a rich and enlightening experience that involves critical, analytical thinking and creative innovative perspectives (Patton 1990). Reliable, valid qualitative narrative research holds promise for improving knowledge and quality of care (Collingridge & Gantt 2008).

Although no single story can provide a full understanding of the effects of the interviewees’ experiences in the Tamworth Institution, each narrative provides pieces of a montage (Marshall & Rossman 2006). Therefore, the repeated patterns of the residents’ behaviour and the recurring storylines provide an understanding of the total concept and shed light on the cultural consciousness (Richmond 2002). The narrators related their personal experiences at their own pace using their own words to demonstrate their perceptions of their experiences in TIBT. However, it was also necessary to consider their lives prior to their time in TIBT, their lives with their families and their time in other institutions. Using NVivo9 to manage the data was the most efficient way to code the information into themes that illustrate how the residents perceive their experiences in the Tamworth Institution, which included disintegrative shaming, degradation, stigmatisation, solitary confinement, lack of communication, mind-numbing routine and over-regulation.
CHAPTER 6

Experiences in The Institution for Boys, Tamworth

*I've been in the notorious Grafton Jail...but believe me that was nothing compared with the treatment I got at Tamworth* (BIO10).

6.1 Introduction

This chapter presents the themes to emerge from this case study that focus on what each of the methodologies revealed about the experiences of the residents in the Tamworth Institution. The voice of the first person interviewed for this research (INT1), who was a runaway from other juvenile centres and training schools, wavered and his eyes filled with tears as he recalled when he was sent to TIBT as a 16-year-old adolescent.

They called us brothel-bred bastards. When I objected by saying “I’m not a brothel-bred bastard”, the guard beat me until I said, “I’m a brothel-bred bastard, Sir” (INT1).

In the following sections, the unfair and unjust practices at TIBT are described from the perspective of the residents, drawn from the sixty-nine elements of qualitative data that includes the face-to-face interviews, the online survey and the documentary evidence. The participants reflected on the ways in which the rules and routines of the institution served as the authoritative guide for their behaviours and their daily-lived experiences including their food, ablutions, health care, training, the way they had to sleep and communication. The qualitative data illustrate how the rules were enforced at the Tamworth Institution and the severe punishment regime. Most of the residents blame TIBT for the negative lifestyle choices they have made. However, the pre-TIBT life of the residents also needs to be considered, and one resident did say,

Tamworth made me less violent because I was afraid that I might finish up back in there again. That frightened the bloody hell out of me (INT6).

In a confidential interview, a forensic psychiatrist, who had met several residents of TIBT, reported that the residents (now deceased) had experienced psychological injuries as a result of the severe physical and mental maltreatment including assault, food deprivation, humiliation and inadequate care during their
adolescent years (Lucas W.E. June, 2012). An interviewee supplied a written report from his psychiatrist, who wrote that the man had exhibited symptoms of antisocial personality disorder, social withdrawal, lack of confidence, anxiety, depression and problems with anger management (Phillips J. June 4, 2008).

There has already been reference to the General Orders Book (see Chapter 2) that governed the regulations at the Tamworth Home. The operation of these rules was strictly enforced, and each new arrival was made well aware of them with a beating, often with the Governor’s belt (INT1, INT10). According to one former resident:

When I arrived I was introduced to the Governor who told me rules were needed for the good running of the institution and the sooner I understood that the better, then he belted me until I almost passed out (AUTO4).

6.2 Regime
A clear theme to emerge from the narratives is that the daily routine was lived at a gruelling pace. It was relentless and there appeared to be very little in the way of “quiet time” for the youths detained there. For example, in the morning after getting out of the bed, the boys had to move to the door of the cabin and face out, take one pace forwards, then march (General Orders Book p. 16). The conditions in the regime were so firmly set that they fully determined the decision-making process where there was no individual choice. In the narratives of the residents it was clear that every action had to be done at double pace — from the time they woke up in the morning they moved quickly. Every activity had to be executed hurriedly; there was no time for reflection and they were under constant pressure to perform. If the boys slowed down the guards would hit them with their sticks (INT1, INT5, INT6). These types of drills were performed constantly.

Our marching was [to] the standards of the British guards at Buckingham Palace. We took perfect steps like tin solders always in perfect time (INT6).

At other times, the youths had to stand perfectly still until the guards gave them permission to move.

We stood in ranks in the summer with 50 flies in our nostrils, in our eyes, our ears. The guards were just waiting for us to move.
Occasionally they gave us permission to brush flies away, but they quickly came back until we almost went mad (INT5).

There was also an extensive regime of physical exercise, where one resident reported how “before breakfast we had to do 100 push-ups, 100 sit-ups, 100 chin-ups and run around a small area” (AUTO3). Overall this led to a lack of quiet time and bred in the youths an inability to think through issues or to make their own decisions to the point where another resident said: “we could not think for ourselves. We were regimented like soldiers” (INT2) or as recounted above, they were driven to the point of madness because they were not able to perform simple personal tasks such as swatting of flies.

6.2.1 Sleeping rules
The qualitative data revealed that almost every daily action including how to sleep was governed by rules at TIBT. Residents slept alone in brick-walled cells, which were freezing in winter and oppressively hot in summer. They had steel buckets for toilets and the only light came through an iron-barred hole. The boys were locked in this isolated sleeping cell from 7.00 pm to 6.00 am every day. Their descriptions of the sleeping arrangements were quite consistent.

Each boy had a very small room, which contained no furniture but simply a mattress on the floor. Each boy was issued with two sheets, two blankets but no pillow (INT9).

There was also a stringent set of rules surrounding the sleeping arrangements, which were described in a similar way by most residents.

There were rules as to how we had to sleep. We had to sleep in the “corpse position” where the boy laid flat on his back, arms crossed over his chest with his hands placed on each shoulder. The boy’s head and hands had to be visible at all times (INT5).

The young charges were also subject to frequent inspections by the wardens while they were sleeping:

Our cells were inspected regularly through the night. The guards would start their inspections in cell one and kick the hell out of the door and then do the same to the next cell and so on. They would wake everyone up (INT2).
With regards to infractions of the sleeping position rules, several former residents said that if their hands were under the blankets a guard would push a fire-hose through the peephole and soak the boy and his bedding (INT1, INT6, AUTO4). Other recollections included:

If you were asleep and your head was not facing the door, the guards would make you stand up, strip your bed and stand at attention at the end of the bed until the next inspection (INT3).

Another remembered a similar experience.

The guard would come into my cell, wake me, order me to strip my bed and remake it over and over again through the night (INT4).

If a boy moved out of the regulation sleeping position, the punishments were swift and brutal. These actions could occur regularly throughout the night sometimes at ten-minute intervals between 9.00 pm and 5.00 am, so the boys would have very little sleep before they arose at six o’clock in the morning. They reported that nightly punishment seemed to be just for the guard’s amusement. Many times they were too fearful and petrified to sleep (INT1, INT3, AUTO1, AUTO3, AUTO10).

6.2.2 Eating rules

With respect to food, the boys were made to eat their meals sitting at the table while not talking to each other (INT1, INT9). They were forced to keep their hands in the air when they were not eating (INT1, MED9B). While the dining conditions were uniformly reported as strict, there were some inconsistencies in terms of the manner in which the quantity and quality of the food was described in the narratives. Some told of large amounts of stodgy food that had to be eaten during meal-times and, if it was not completely eaten, that same food would be returned to the same person at the next meal (INT5, INT6).

Other accounts said there was never enough food or spoke of weevils in their meals (INT1, INT2). One former resident said, “There was never enough food and I was always hungry” (INT9), and another alleged, “there were occasions when I didn’t get anything to eat for forty-eight hours” (AUTO3A).

Every moment of our day was taken up thinking of food. The screws in Tamworth used this method to keep control over all the inmates (INT5).
A resident said, “I didn’t ever get a full meal the whole time I was at Tamworth, so I lost a lot of weight” (INT3). A recollection of one former resident was that at age seventeen he “weighed around seven stone [39kg]” (INT1). Many former residents recalled that they lost significant amounts of weight while they were incarcerated in the Tamworth Institution (INT1, INT5, INT6). Several of the narrators stated that when the boys returned from TIBT, they resembled concentration camp victims with sunken faces and eyes, ribs showing and sad wretched faces (INT1, INT5, MED10C). One reported that he had lost at least two stone [12 kilograms] during his three to six-month stay there (AUTO3). One participant, who had not personally experienced TIBT, observed the results of the incarceration at TIBT in the 1960s and 1970s when the young males returned to Mount Penang, where he was institutionalised.

When kids were returned from Tamworth they were skeletons of their former selves and resembled survivors of Belsen and Auschwitz. They all reacted in robotic trancelike states and over-emphasised their actions to mild commands. It took considerable periods of time for those kids to adjust to normal institutional life of Mount Penang (MED 10A).

The denial of food or severe rationing of food was often used as part of the punishment regime (INT1, INT3, INT5, AUTO3). For example, the penalty for looking sideways or at anyone else was often “a ‘bounce” [which was the] loss of all meals over a period of 24 to 48 hours (INT1, INT6, INT7, SCARC 2005). In all of the accounts there were references to the loss of meal rations as a punishment above and beyond the specific penalty of “the bounce”. Food or rather the withholding of it was part of the punishment regime. Several interviewees described the three punishments connected to the rationing of food. The “bounce” was a half meal; no returns meant you could not go back for seconds; and a boob meal was one slice of bread and a glass of half water and milk (INT1, INT2, INT3, INT6, AUTO3).

A former resident claimed, “I would often lose my meals for taking too long getting changed or other minor problems” (AUTO3). Compellingly, even after a period in excess of fifty years, the interviewees could describe their daily allowances in highly specific detail, so that one said:

Breakfast was six spoons of porridge — I counted them — one slice of bread or toast and half a cup of tea or coffee. Lunch was six to eight spoons of food, a slice of bread and tea or coffee. Tea was similar to lunch (INT6).
The meagre amount of food was a particular hardship given that they were “growing boys” at the peak of their adolescent development (INT1, INT6). Others characterised it as harsh, given the demanding physical actions they were made to undertake daily on such limited sustenance.

The boys’ lack of access to water throughout the day was also a recollection that permeated the narratives. They were given a cup of tea at the three main meal sessions, but were denied water and many acknowledged that they often suffered from thirst (INT1, INT2, INT3, INT5). When they were in solitary confinement they were fed only piece of bread and a cup of half-milk and half-water three times a day (INT1, INT2, INT5, INT6).

As part of the eating regime, there were shame and degradation practices, where one observed that he had “watched a boy get down on his knees and beg for food and be ordered to kiss the officer’s shoes” (INT2). There was at least one particularly horrific display of punitive power while the residents were eating, where an interviewee recalled:

> I remember witnessing an inmate looking around the dining room. An officer told him to stand up on the table and spin his head around and round and round until he vomited all over the table and everyone’s food. I complained to the officer that I didn’t want to eat my food now that it had vomit on it and I was told that if I did not eat it I would be bashed. The guard forced my head into the food and vomit until I ate it. I felt sick for days (INT1).

6.2.3 Toilet routine

The youths always had to ask permission first before going to the toilet, as well as saying what they were going to do in there. When residents had the courage to ask for permission to go to the toilet outside the regimented time, they had to tell the guard if it was for a “shit” or a “piss” (INT1, INT2, INT3, INT5, INT6). They were only allowed three squares of toilet paper per day and if they requested any more, they were usually refused and often flogged for being wasteful (INT3, INT5). They were not allowed to flush the toilet until another boy had checked that the correct ablution had been done and that the person asking to go had not just wanted to sit down (INT1, INT3).
I guess one way we helped each other at Tamworth by saying that a boy had done in the toilet what he said, when he didn’t, so that he didn’t get into trouble (INT2).

One recalled, “I remember the guards arguing whether you piss before shit” (INT5). Most of the former residents also spoke about the toilet routine that was enforced by the guards, where one observed:

They had toilet parades — stand-ups and sit-downs. There were no doors on the toilets. No privacy. The screws watched you the whole time (INT5).

Nobody mentioned if they had daily showers. However, one biography tells the story of a resident using the end of a paintbrush to stab himself to death in the shower (BIO14). Another interviewee said he was so numbed by his experiences in TIBT that one morning when another resident 16-year-old “Bobby”, undid the razor blade they all used to shave, and slit his own throat, he was unmoved. “Bobby survived but was taken away to a mental institution or somewhere else” (INT1).

Many youths were affected when they saw other boys being punished or other adolescents harming themselves. Some residents blamed themselves when they were unable to help boys who tried to hang or choke themselves (INT2, INT4). They felt they should have had the courage to help. A resident spoke about his experience after seeing another boy beaten.

I nearly slipped over as I ran in, the floor was covered in blood, the walls had blood over them from the boy’s beating. He was just lying there motionless. His lips were cut and swollen and I would say his jaw was either broken or dislocated. I don’t think he had any more blood to bleed out of him. It was the most horrid 24 hours I had spent or seen. At my tender age of 15, it has marked in my mind until this day (AUTO4).

6.2.4 Communication

Every source referred to the “no talking” rules. A former resident explained,

A guard painted a sign over the door and asked me what it read. I replied, “No talking”. I was bashed by the guards. The guard asked me the same question again, and I replied, “No talking, sir”. My answer unleashed another violent attack by all the guards in the room. It was then that I realised I was not supposed to talk, so when he asked me the third time, I did not answer, but the response involved another attack that left me unconscious for being insolent (AUTO1).
Similarly, another former resident recalled that he was abused after endeavouring to thwart the “no talking” rule. He remembered when:

I was caught giving hand signals to another boy. I had committed the cardinal sin of breaching the no talking rule, which was brutally enforced at Tamworth. My shirt was stripped from my back and my pants lowered by two of the warders while another flogged me with a razor strap (INT6).

Alternately, if the boys spoke, signalled or even looked at another resident, they would lose half their food allowance—a bounce—for the day. Some interviewees said they lost their points for misbehaviour during the day and often did not have any “points” that they could use for the privilege of speaking to each other in the fifteen minutes that was permitted in the afternoons. The problem was that none of them was aware how they earned points, what their current points score was, or how many they had to have to earn privileges. They just knew they lost them when the guard shouted, “That’s another point gone” (INT4). Others said there was no point system when they were there, but they could not talk to anyone all day and every day (INT1, INT3, INT5, INT6). For example, one said, “for over six months, I rarely spoke to another human being” (AUTO1). So it is clear that the rules were both obscure and subject to change. The “no talking rule” was so strictly enforced and such a burden on them at the time that one recollected how:

I was so desperate that at the meal table, I was going to grab the guy next to me, get my knife or fork whatever I grab first, and lash into him, his face, his eyes, anything and try and kill him or maim him as much as I can. Knowing that if this would happen, I would be charged with either attempted murder or declared insane and sent to an institution for the insane, but at least I would be able to talk to people, read a newspaper or listen to the radio (INT1).

Another firm rule that impacted on communication was that the boys were not permitted to look at each other or indeed to look anywhere but straight ahead. No eye contact was allowed with anyone. Their eyes had to stay on the heels of the person walking in front of them. One resident said, “the boys had to look ahead at all time at a point on the ground about three feet [one metre] in front of them” (INT1). Several other residents agreed with this statement (INT4, INT6, SCARC 2005). It was the case that “any glancing sideways or looking up was met with punishment” (INT4). Thus, they had to stand two metres from an officer or other boy (SCARC 2005). If
they came anywhere within the “no-go zone”, they were beaten by the guards (INT1, INT3, INT5, INT6).

In addition to the ban on communicating with others, the residents were forced to ask permission before engaging in any and all daily functions, not just to use the lavatory as observed above. Several participants gave examples of the permission rule. As young boys they had to hold their hands aloft to seek the dispensation of the guards before they could even do something simple such as scratch themselves (INT1, INT3, INT4, INT6). One described the permission process:

I had to put my hand in the air and wait until the guard said, “Yes”. Next I asked, “may I scratch myself, please sir?” Then, there was a wait time or a pause until the guard deigned to respond, hopefully positively. After I was finished, I had to say, “Report back to you, sir” and again wait for a response from the guard, and then report, “I have scratched myself, sir” (AUTO2).

This occurred regularly on a daily basis where, if a boy wanted something, he had to put his hand up, but keep his eyes on the ground until the guard spoke first.

You had to snap to attention and yell out, “Report to you, sir!” for everything you wanted (MED10A).

If asked a question by a guard, the boys had to speak in a monotone and there was a prescribed method for replying.

Excuse me, sir, I wish to report, sir”, then state the facts and finish with “thank you, sir” (BIO14).

Yet, despite this rule about speaking calmly, another observed that there really was quite a lot of shouting back and forth because of the barking of orders and responses.

I was told that everyone around the Tamworth Institution thought our shouting of “Yes sir, no sir” was “Ahhhhhhhhhh…” — a scream of pain (INT2).

One former resident aptly described the level of discipline.

It was mandated manipulating control, not self-control. We were not taught how to listen, but only how to respond (INT4).

The respondents to the online survey reflected what was gathered from the interviews regarding the routine and regimentation at the Tamworth Institution. In particular, they raised the “no talking” rule, noting that speaking was not permitted
other than to answer a direct question from an officer, to request permission to cough, sneeze, scratch and beg for extra toilet paper. They also concurred that there was no eye contact or verbal interactions with guards and other residents permitted during the regimented daily routine, while they marched at double-quick time on command from one area to another.

Although most residents found the rules about “no talking” and “no eye contact” to be very difficult and stifling, one interviewee conceded that he felt safer in TIBT than he had in other juvenile institutions.

I was bullied and brutalised in other institutions, I felt protected and safer in Tamworth because there was no contact allowed between the boys. Therefore, it was not as threatening to me as other institutions. I was protected by the regime. In Tamworth I was an outsider of the outsiders. I was unique among the minorities (INT8).

In a similar vein another interviewee put a broader context on TIBT in the landscape of boys’ institutions at that time. It was his view:

We learned less criminal behaviour in Tamworth because we could not mix in groups. Other institutions were places to improve criminal habits (INT7).

6.3 Care in TIBT

When a witness at the SCARC inquiry into the Forgotten Australians (2004) summed up the results of his state-sponsored childhood, his words reflected the views of most young people in “care” including the residents of the Tamworth Institution.

Institutional abuse does not stop when we are out of the system. Once in contact with the juvenile justice system we have a 90 per cent chance of becoming adult criminals. We have a one in three chance of leaving care at sixteen as girls pregnant or already with child. We have a one in two chance of being homeless within that first year. Only one in a hundred of us will get to university, but one in three of us will have attempted suicide. We are also highly likely to wind up addicted to drugs, engaged in prostitution, unemployed, mentally ill or incapable of sustaining loving relationships (SCARC 2004, 6.55 pp. 166-167).

Health care at the TIBT was far from adequate, with the men reporting they received little or no medical attention as adolescents. Although there were visits by doctors these were perfunctory and former residents recalled how their wounds were often left untreated (INT1, INT5, INT6). The general view was that the dental care
they received was minimal for the dentists did not fill teeth; they only “pulled teeth” (INT2, INT4). There were recurring problems of chest complaints among the residents, possibly caused by sitting on the cold cement or through long hours spent in cold cells (INT1, INT3, INT5, INT6). It was almost impossible for the youths to complain about their treatment, for one said that if they raised such issues, the doctor would call the guard and state that the boy was gaining too much weight and would therefore have to miss meals (SCARC 2004).

Several residents also said that the hospital staff across the road from TIBT knew about their brutal treatment because they had seen the results when after particularly ferocious beatings, it was often necessary to send the unconscious victim to the hospital (INT1, INT3, INT5, INT6). However, none of the nurses and doctors helped the boys or reported their injuries to any authorities (INT1).

6.3.1 Work, Education and Training

There was no formal education or work training at TIBT, and all the participants to this study attest to that omission. When one resident asked for pens and some paper to use for studying, he was given this reply: “What do you want to study for? You’re going to be in prison for the rest of your life” (INT1). Similarly, there was little for the boys to do at TIBT by way of work or learning of work skills. The residents plaited ropes, which were used for making mats, and at other times they moved rocks from one place to another, and others were engaged in making brooms (INT1, INT3, INT6, INT7). Most residents reported being forced to push large sandstone blocks across the floor for no reason except to keep them occupied.

You were put on holly stones, big stones, bloody rubbing ’em backwards and forwards on a timber board floor (MED2).

Neither the rope making nor the rock pushing provided the training and work skills that would equip youths for a job in the community. Literacy and numeracy problems limited their choices in life and they had no training to earn a living (INT7). In addition, part of their work routine was to scrub the facilities so that one reported:

My knees were shredded from scrubbing ablution blocks with a toothbrush (BIO13).

The historical record information about TIBT referred to the boys making toys and brooms, as well as to them receiving guidance assessments and counselling
before discharge (Annual Reports, NSW Child Welfare Department 1947-1980). However, the interviewees said they made ropes until their hands bled and they never received guidance or preparation for discharge (INT1, INT3, INT5, INT6).

  Showing someone to plait the ropes properly, so they didn’t get a bashing, was one of the very few ways we helped another person in Tamworth (INT4).

6.4 Physical punishments

Although punishment is aversive stimulus that follows an undesirable behaviour and is intended to decrease or eliminate the occurrence of that behaviour, any behavioural changes that result from punishment are often temporary (Skinner 1974). Usually, the punished behaviour reappears after the punitive consequences are withdrawn (Skinner 1974). Perhaps the greatest drawback is the fact that punishment does not actually offer any information about more appropriate or desired behaviours. While subjects might be learning to not perform certain actions, they are not learning anything about what they should be doing (Skinner 1974).

  In reference to the constant physical exercise that was demanded of the youths, one former resident recalled, “if an inmate was unable to do the exercise, he would get a kicking and a half breakfast” (AUTO3A). In addition, it was impossible for the boys to help each other or share their problems when they were not allowed near each other. They would be violently punished if they broke this rule or indeed any other rule.

  Physical assaults were common occurrences in many institutions, and none more so than in TIBT. Almost every interviewee and several biographies mentioned that when the adolescent arrived there, he was savagely beaten as soon as he walked in the door (INT1, INT3, INT5, INT6, AUTO2, BIO6).

  I was flogged with a razor strap. I still carry the scars of that flogging on my back today, but the scars on my memory are indelible (INT1).

One resident, who was to later become the alleged Sydney crime boss ArchMcCafferty, described his introduction to TIBT in his biography as being “king-hit” by an official (BIO6).
They could break kids in there. They would torture our mind with the pressure. It was mindless discipline, unproductive and cruel. All Tamworth did was ingrain the bitterness (BIO6).

Another resident observed how he learned the rules of the institution very quickly.

Lucas [the guard] stood behind us and checked if our feet were 18 inches [45 cm] apart. He would kick our legs if we were closer and we would fall down. When we picked ourselves up again, we had to apologise. At the end of three weeks in Tamworth, they got into our minds. Everyone kept their legs apart and found the strength to complete 100 sit-ups (INT5).

As noted above, the rules appeared to be obscure and/or enforced in a haphazard manner, and there were many occasions when the adolescent boys were not even sure which of the many rules they had violated in order to be the recipient of some objectionable abuse.

On one occasion I was forced to stand with my nose touching the wall for some minor infringement of the rules. My arms were outstretched in a crucifix shape. After an hour or so my arms got tired and began slipping down. The guards bashed me every time my arms slipped. They eventually knocked me out and dumped me in a cell (AUTO3A).

Or in other cases the punishment was for an unrelated or accidental behaviour, such as when one former resident recounted:

One day I was using the urinal and my prick [penis] got caught in between the top button, and they took my sweets [dessert] off me for doing pictures of the Harbour Bridge [showing buttock crack]. Can you believe that crap? Well, it’s the truth (AUTO2).

As was gleaned from the qualitative data above regarding punishments, most former residents mentioned that physical assaults or food deprivation comprised the frequent penalties (INT1, INT2, INT5, INT6). The guards, who were much stronger and older than the residents, regularly bashed, kneed and kicked the boys. Indeed, one observed that the “guards were cowards who picked on little guys” (INT4).

The guards had complete control of us while inflicting acts of violence to make their life a lot easier while making ours a misery (AUTO6).

On other occasions however, weapons were employed. Some reported how the guards used twenty centimetre long batons, which were steel bars encased in a thick rubber sleeve. The batons were designed to hurt a person without leaving visual
evidence of a beating (INT1, INT6, AUTO4, BIO3). For others the choice of implement was closer to hand. In one powerful narrative a resident recalled:

He unbuckled the big thick studded leather belt from around his waist, while I was looking on in horror. Then, raising it behind him and swinging with his full force he landed me twice across the buttocks. The force of this act knocked me to the floor. He then grabbed me by the hair and pulled me to my feet and as he did so he swung the belt and struck me again with such terrible force this time around the upper legs. All the time he was telling me how he hated all of us little bastards so much. My legs and bottom were so sore and shaking that the only way I could walk was with a painful stoop and hanging onto my knees. It took many hours before I could straighten up and many weeks for the bruises to heal (AUTO4).

Other staff similarly opted to use anything in close proximity, so that for one young male, his recollection of a terrifying punishment was when “a guard put a pillow over my head in an attempt to suffocate me” (AUTO1). This was not a one-off incident for he reported that it happened on “four occasions” (AUTO1).

From wherever your cell location you could hear inmates being assaulted and screaming (MED1).

Generally it was the case that the boys were not able to fight back when under attack by the staff. If they did it was more likely that they would be subject to additional punishment (INT4, INT6)). So an underlying theme of the narrative accounts was that, no matter how tough they felt they were inside, the boys soon learned to acquiesce and not to fight back (INT1, INT3, INT5, INT6).

It was different in the other homes and even in gaol. I had friends or I was part of a group. In Tamworth, I had no one except myself and nothing to prove to anyone, so I just gave in after the first week of bashings and did exactly what the guards wanted me to do (INT6).

6.4.1 Box on head

A particularly harsh and shaming form of punishment was called “boxing”. Multiple references were made about anyone who habitually broke the talking rule being made to wear a cardboard cereal box that had two holes cut for eyes (INT1, INT4, INT5, INT6, AUTO2, AUTO14). “The boy had to keep wearing the box until it fell to pieces” (INT1). One former resident, who was punished for breaking the “no eye contact” rule wrote:
I got caught looking at something or other, so the keepers there put a box over my head with just two pinholes in it. I had to wear the box until it fell to bits (AUTO2).

Another disclosed to the Senate Enquiry:

The punishment for boys, who habitually broke the rule of keeping eyes looking down to the ground, was made to wear a cardboard cereal box that had two holes cut for eyes until it fell to pieces (SCARC 2004).

Other sources referred to an enhancement of this form of sanction where the adolescents were made to wear horse blinkers:

Later, a set of leather blinkers was made, similar to those that a horse would use, and the boy had to wear these for a set number of days (SCARC 2004).

A resident agreed with him:

I had to wear those heavy blinkers like they put on horses because I looked at a guard (INT6).

6.4.2 Solitary confinement

For repeated infractions and failing to behave according to the rules the ultimate penalty was to be placed in solitary confinement or “segregation” as it was known. They had to call it “segregation” because the boys were left in solitary longer than was allowed by the rules governing solitary confinement in prisons and institutions. The small single cell used for this isolated detention had formerly been the “death cell” when TIBT was an adult prison — the cell where inmates resided before being hanged. The adolescent occupants could see the hanging gallows from this cell. The interviewees generally confirmed that placement in solitary confinement happened to them (and to others) on more than one occasion (INT1, INT2, INT3A, INT5, INT6, BIO1). One said that in contrast to adult prison where a visiting magistrate was required to sign off on an order for solitary confinement, in the Tamworth Institution, by calling it segregation, “the superintendent and the guards could put anyone in solitary confinement for as long as they wanted” (INT5).

In the solitary cell, the boy slept on a thin horsehair mattress and there was a toilet bucket in the corner (INT1, INT5). The occupants received minimal food comprising a piece of bread and a cup of watery milk (INT2). There was no window
As if being placed in isolation was not harsh enough, the guards would further exacerbate this penalty and make “solitary confinement sheer hell” (AUTO4). They would regularly turn “the lights on in the middle of the night” or bang on the “steel cell door with their baton” to ensure that the young person in confinement was not able to sleep (BIO2). Another recalled,

The wardens would on occasion fill up a big bucket of water and throw it over us in solitary. Winter or summer we stayed in our wet clothes (INT1).

In addition it was not unknown for there to be further beatings while locked up in up in the solitary cell. “Maybe we would get a couple of belts with the baton too” (AUTO4).

The narrative accounts referred to the “dolly”, which was a steel block the boys had to run up and down the iron bars on the cell door throughout the entire daylight hours (INT1, INT3A, INT5, INT6, INT7).

The door to solitary confinement was separated by an iron grill. When you went in, you were given a dolly, an iron bar four inches [10cm] long and one inch [2.5cm] wide, and you had to scrape the bar along the bars in the grill. If you stopped, you were beaten (INT1).

If the officer could not hear the block continuously hitting the bars the warden would come and beat the person inside. Some residents in solitary confinement were ordered to stamp their feet loudly for the entire day or they were bashed (BIO4). Even when they were segregated, the boys were not able to experience any quiet time as there was no respite from the constant surveillance, the relentless activity and the need to follow orders.

As with the interviewees, the online participants also suffered abusive punishments in government institutions other than the Tamworth Institution. They similarly found it easier to cope in these other institutions, which may have stemmed from being able to have peer or sibling support, along with having family visits. The majority had experienced solitary confinement at the other locations, which could be taken as a signifier of why they were eventually sent to the Tamworth Institution (as an additional punishment). Usually, this confinement was no longer than one or two days, and they were left to contemplate their wrongdoing, not left their for days with
no sleep. Their responses to subsequent questions about solitary clarified that it was highly likely that their time at TIBT exacerbated or compounded any “emotional problems” that had prior to being sent there.

6.4.3 Sexual abuse

Somewhat surprising is that it does appear that sexual abuse by staff was relatively infrequent at TIBT. In some of the published documents (biographies and autobiographies), and even in some of the psychological reports there were references to threats of and actual abuse of the youthful charges at TIBT. Yet, such recollections did not feature in the interview material. The interviewees were asked about being forced into sexual activity, but they tended to eschew its occurrence on the basis that the high level of regimented activity, control and surveillance that was part of the regime did not permit it (INT1, INT4, AUTO1). However, some sexual abuse did occur where the guards used their position of authority to compel the youths to perform oral sex (INT1, INT6). One resident recalled,

A guard came to my cell and said. “You want to do the right thing by me. I’ll make sure you’re fed. Suck my cock.” I said, “Piss off.” I got the living daylights kicked out of me for that. I think that guard was having sex with the inmate in the next cell. There was also another guard who was definitely having sex with inmates (AUTO3A).

Another reported that he “was twice beaten by a Tamworth prison guard when I refused his request for sexual favours” (MED4). Conversely, there were claims and indications that sexual abuse among the residents was part of the culture because the boys traded their bodies for food; and while not common, it did occur on occasion (MED9B). Confirmation of this exchange only came from one source because others said sexual activities were difficult because of the “distance rule” and inability to mix together (INT1, INT3, INT6).

6.5 Psychological punishments

Psychological punishments, usually non-physical, but considered cruel and degrading, relied on affecting the victim’s emotions, such as fear, shame and guilt (Stuewig & McCloskey 2005). Because of the control and discipline, the adolescent residents in TIBT infrequently misbehaved (INT3). “However, we were constantly punished even if we behaved as directed” (INT3). While the guards used control and strict discipline,
it was difficult for the adolescents to develop self-control and decision-making skills.
In their narratives, the former residents reported many instances where they were embarrassed and shamed in acts of degradation foisted upon them by the guards (INT1, INT5, INT6). As mentioned in one of the autobiographies:

The senseless punishment goes on and on… I know one guy that got caught eating a carrot in the kitchen one day and they made him wear a carrot around his neck for a week on a piece of string Man, that damn carrot sure did change its shape by the end of the week. I can laugh about it now, but at the time it sure weren’t funny (AUTO2).

More than one interviewee recounted disturbing incidents where they were made to dig graves seemingly as a form of physical exercise, but its main role was to form a fundamental part of the underlying process of degrading and fearful punishment (INT1, INT7).

The guards made me dig a grave until all the dirt piled up at the other end, then fill it in again. We felt fear and humiliation because each of us thought we might go in the grave (INT6).

When the guard took me out to dig a grave, it started raining and it was really slippery as I was trying to get out of the hole. After trying for hours, I got out about nine o’clock in the dark of night, and the guard told me the next one would be my real grave (INT3).

6.5.1 No family visits
Many residents were separated from siblings when they were placed in different institutions before being sent to TIBT for punishment. Some residents were told their parents were dead, only to find out years later this was not the truth (SCARC 2004).

When I was sent back to Tamworth my mother made a complaint about my treatment to the Child Welfare Department. All mail from my mother and my older sister ceased. After a month or so I was called to the Superintendent’s office and informed that both my mother and father had been killed in a car accident, and my older sister was in a serious condition and not expected to live. I was distraught and I can recall dragging myself through the rest of my time at Tamworth, overcome with grief. When my sentence was up, I returned to Gosford Boys Home to complete my original sentence, and I found out that both my parents were still alive, and there was nothing wrong with my sister (BIO14).

Some participants blamed their own uncontrollable conduct for their parents’ lack of attention (INT2). Even when the boys were not in institutions, they said that their relatives did not want to have anything to do with them because it cost money to
look after them (INT6, BIO10). However, a few residents praised their parents for standing by them even after they continually betrayed their trust (AUTO2). One man said that his father paid maintenance to the Catholic institution, which took him and his brothers away from the house after his mother got sick (INT1). Another said his mother told him that she brought clothes and food, but the boy did not get them (INT3). At the Catholic institution they were forced to work on a farm, but the vegetables were sold at the market and the boys did not get enough to eat (INT1, INT9). One resident lived with his uncle for while, and the uncle tried to teach him work skills. This interviewee regretted not learning more skills from him (INT6).

Although visitors were allowed at other juvenile institutions, there was some contradiction regarding visiting rights while the teenagers were in the Tamworth Institution. The majority of sources, including the respondents who answered the website survey questions, claimed that visitors were not permitted. However, some participants believed that most people did not get visitors because they did not have anyone to come to see them or it was too expensive for them to travel (INT4, INT6, INT7). The boys were only allowed to keep letters and photographs for a few days before they were destroyed (INT1).

Due to the Auburn System, a nineteenth century penal method, in which people worked during the day and were kept in solitary confinement at night, with enforced silence at all times (Barnes 1921), and segregation in TIBT, it was impossible to have friends, be in gangs or peer groups in this institution. Later, innovations of the Auburn System were marching in single file with eyes looking towards the ground and special seating arrangements at meals in strict silence (Barnes 1921). This system was based on a belief that criminal habits were learned from and reinforced by other criminals and not speaking was meant to help keep the residents compliant (Barnes 1921). The adolescents became introverted and withdrawn, losing the ability to connect with others while lowering their self-esteem. However, although the adolescents were usually admired when they returned to other juvenile institutions because they were TIBT survivors, it was still difficult for them to develop empathetic relationships (INT1, INT6, INT7, MED10C).
6.5.2 Labelling and Shaming

Verbal abuse and criticising of the boys were frequent occurrences in TIBT. Labelling and disintegrative shaming were continually part of the verbal abuse, and the residents said it was difficult for them not to become depressed or angry when they absorbed the prolonged, ego-crushing series of insults (INT1, INT5, INT6). Such incidents of abuse and the cumulative effect of the total degradation caused them to feel that they were inherently defective and that there was something drastically wrong with them (INT4, INT8). As one resident reported, “the way the guards spoke to us was the way you’d speak to a mongrel dog” (MED5).

The guards beat the adolescent residents in TIBT forcing them to call themselves “brothel-bred bastards” (INT1), which encouraged them to internalise these negative labels.

The guards would torment me mentally by calling me names and telling me that I was a low life, and that I would never get out of gaol. It was not uncommon to see inmates standing with their heads in the corner of a room and their hands behind their back. If they moved they would be beaten and bashed (AUTO3A).

A common label when guards were referring to the young males was “youse bastards”.

From the train station I’m sitting in the back of the car with an escort on either side of me. About halfway back to Tamworth the Superintendent looked at me over the back of the front seat and said, “So this is the bastard ehhh! He oughta be in Vietnam with all those black c-----s running over him with bayonets”. One guard who was an ex-army sergeant used to say, “I wish I could hang a few of youse bastards” (INT5).

The residents on the receiving end of disintegrative shaming tended to assume these labels because they continually heard the message that they were not liked and worthless. While the residents did not dwell on verbal abuse as a major damaging experience — because they had been tormented this way in many institutions — many of them believed the abusive negative descriptions of themselves (INT1, INT3).

I was told my whole institutionalised life that I was a criminal and worthless, so what else could I do, but be a criminal? (AUTO3A).
I just couldn’t take any more of the bashings and name calling that I got in Tamworth Boys’ Home. They’d call me “abo, boong, coon”, so I did something that made ’em send me to an adult gaol (BIO13).

The participants in this case study often referred to the consequences of these shaming experiences.

As a 16-year-old I thought I was invincible, but in Tamworth I became so desperate, so lonely and so afraid. It took me a long time to realise that I was not as bad a person as the guards made me feel I was (MED9B).

Asking permission to blow their noses, scratch and go to the toilet, as well as saying what they were going to do in the toilet were degrading experiences that purposely humiliated the boys. When forced to wear a carrot necklace or a box on their head or dig their own graves, they felt small, weak or incompetent (INT1, INT2, INT4, INT8).

The boys had already developed heightened levels of fear long before they were sent to TIBT because they saw the effect on youths, who returned from the Tamworth Institution. However, they said that when they went to TIBT, their experiences were even worse than they had heard about or feared (INT1, INT3, INT5).

You had to experience the place, to go through the situation as I did to know the fear (INT6).

One former resident of TIBT said he had entered the out-of-home care system when he was nine years old and had become so institutionalised by the time of his release at 18 that he could not make his own decisions or choices. He said,

I was too busy surviving, running away or getting into trouble to believe in myself (AUTO4).

As adults, the males were not prepared for living on their own. During their childhood they had been told what to do, how to do it and when to do it (INT1, INT3, INT6, AUTO3A). Their institutional lives contributed to the shame and stigma and lack of connections in society (INT8, MED10C). A prison warden, who had not worked in TIBT, but who knew residents from the institution said,

All their dignity was gone. It was bashed out of them. They had nothing left. They were just walking bodies with no mind that got money where they could (MEDP).
6.5.3 Self-harm

When George David Freeman was convicted for breaking and entering, car stealing and a smash-and-grab raid, it resulted in a sentence of two years in Mount Penang Training School, Gosford. After being transported for continual misbehaviour to TIBT, he swallowed soap to make himself sick in the hope of a transfer. When the prison doctor diagnosed his condition as acute appendicitis, he was forced to have an unnecessary operation. To tell the truth would have meant a severe beating from the guards (BIO6). Another boy upended his bed, secured it against the wall and wrapped a sheet around his neck to hang himself (AUTO4). Another boy sharpened his paintbrush so he could spear himself through the head (BIO13). One participant wrote an article where he recalled,

Watching a 15-year-old try to hang himself in despair after being told he was going to Tamworth and not being able to stop him or help him. Luckily his suicide bid failed. He was still sent to Tamworth (MED10A).

In one harrowing account, an interviewee remembered an event one morning:

The Superintendent screamed for two of us to go upstairs because an inmate was on the floor having attempted to swallow the springs of his bed (INT1).

His words convey what happened subsequently, and the impact that this brutality had on him for the rest of his life.

He looked half dead. As soon as we got level with the Superintendent, he punched me and said, “Don’t be gentle with him. He’s a dingo who can’t do his time.” We took him to the infirmary and he was there at least twenty-four hours until he was taken over to the hospital. He was brought back to us three days later on a trolley still unable to walk. We had to push him around in a wheelbarrow. I will never forgive the people in that hospital because they knew what was happening and they never helped us (INT1).

Two residents admitted to their own self-harming while in TIBT.

At one stage I was desperate and I feigned paralysis for three weeks. I was hoping to be sent to hospital so I could escape. Instead the guards made me crawl everywhere and occasionally directed another inmate to push me around in a wheelbarrow (INT1).

I was depressed. In Tamworth I purposely burned myself on the legs so I would get into sickbay—so I could get away from everyone. I was in
there for three days. I told them the iron fell off the table and ended on my leg, but I did it (INT6).

Information about another incident was written in a biography.

After a boy had eaten a light bulb in his cell, the screaming boy was left all that night and most of the next day before calling the doctor. We had to stand to attention while the doctor examined the boy and ordered double rations for him. We were so hungry that many of us thought about going back and eating our light bulb so we would get double rations as well. Come the next mealtime we waited with jealousy to watch the double rations delivered to the sick boy. But we were horrified to see two huge slab of bread filled with cotton wool. The boy had to eat cotton wool sandwiches for the next three days (BIO14).

6.6 Experiences of survey respondents

For eighty per cent of the survey respondents, the police and official charges were involved when they were placed in their first institution. Several interviewees described themselves as enjoying the thrill of committing petty crimes or were truants when they were young. One resident had done time in every boys’ institution in NSW. Some boys were sent to TIBT because they broke the rules in other juvenile institutions. Many young people hated their out-of-home care institutions, so ran away. While on the run, they stole to survive. Some, after committing petty crimes appeared in court. However, it was not the court authorities that made the decision to send them to TIBT. The officers of the Child Welfare Department decided where each boy went.

Half the respondents of the surveys lived in violent family environments prior to being institutionalised. Many participants had abusive family members or were forced to help parents commit crimes or tried to defend their mothers from violent relatives or the man living in the house at the time. Some, when young, witnessed atrocities connected with their families, for example one participant saw his mother burn herself to death. A few males were abandoned as babies or young children. Some mothers and grandparents abused the young children, especially if they favoured other siblings or the child’s father had deserted the family. Some young people were taken away from violent families or charged with being neglected. Several participants blamed church organisations for taking them from single or sick parents.
Several answers demonstrated that the respondents believed TIBT ruined their adolescence because they were not allowed to think, laugh, be happy or talk. Their teenage years were destroyed. They were young, still developing as individuals, so the experiences formed their attitudes, which were mostly antisocial. Each day in the brutal, boring routine in the place dehumanised me.

### 6.7 Abusive guards and officials

This case study supports the finding of the Senate Inquiry (SCARC 2004) that the adults who were charged with the care of the adolescent males in TIBT exhibited brutal behaviour and undue care. When these youths reported incidents of violence, abuse and sexual assault to doctors or Department of Welfare visiting officers, they were not believed (INT4, BIO14). Abusive guards and officials were unaccountable and no action was taken to stop the mistreatment or punish the perpetrators. Although all of the boys had been in various institutions during their childhood and adolescence, it was the rules, regime and routine in TIBT that the majority of them described as the most memorable, constricting and terrifying. They reported being unable to think for themselves because the guards took away their self-control and decision-making opportunities. They spoke of the ways that the guards shamed them into submission.

Food was a common topic during the interviews. All participants agreed that the loss of food or “bounce” was a regular punishment. Like normal growing adolescent boys, the residents were always hungry and said they constantly thought of food. A resident in several juvenile institutions, but not TIBT, who saw many former residents after their return from the Tamworth Institution described the youths as resembling Belsen and Auschwitz survivors who reacted in robotic trancelike states (Matthews 2007). He also wrote:

> Tamworth was the male mini-Alcatraz of the New South Wales juvenile justice system, designed to break the spirit of those boys who ran away or escaped from other institutions. It had a secret and sinister history protected by a government bureaucracy (Matthews 2007).

This was supported by the frequent references in the narratives to the residents’ huge weight losses in the three to six months they were in TIBT.
The boys were not allowed to talk to each other or make choices, laugh, enjoy themselves, so the interviewees supported the survey respondents’ beliefs that the institutionalisation devastated their teenage years (INT1, INT3, INT4, INT5, INT6). Common survey responses and sentences in the narratives demonstrated the residents’ belief that TIBT taught them to block all emotion, resulting in them not being able to show their feelings as adults. It also moulded their attitudes towards authority figures, inspiring hatred and mistrust. The males became unsympathetic to others and easily angered (INT3, INT4, INT5). Most participants believed they were more violent after being in the Tamworth Institution (INT1, INT3, INT5, INT6, AUTO2). It made them indifferent to other people’s problems, creating a self-preservation screen that blocked out all emotion (INT4).

The authorities in the Tamworth Institution enacted a deliberate process of disciplined routine. The residents became so used to following this daily regime that their actions became robotic habits. The males mentioned this regimentation frequently in the narratives (INT1, INT6, AUTO1, BIO7, BIO6). Notorious criminals including Arthur Stanley (Neddy) Smith and Archibald Beattie ‘Archie’ (Mad Dog) McCafferty, who had been in many juvenile and adult corrective institutions, described the regime in TIBT as the most punitive of all the institutions in which they had been incarcerated. A few former residents discussed their nightmares after seeing violence to another boy or hearing screams and cries of fear (INT1, INT3, INT6). Some were ashamed they did not help, but they only thought of their own survival (INT1, INT4). Although health care was inadequate, only a few men referred to their personal negative experiences with doctors, hospitals or dentists.

When not making brooms, daily work in TIBT was useless, tedious and monotonous, and included tasks such as moving rocks from one place to another, then taking them back again to the first place and continuously scraping the floor with a rock (INT1, INT2, INT3, INT5, INT6). It did not give the residents the training and skills for any type of job in the community. They told of their sore hands and the inane stupidity of moving rocks (INT1, INT5, INT6). Many of them considered any activities in TIBT as punishments. Some males spoke quietly and ashamedly about their lack of reading and writing skills (INT3, INT5, INT7).
Feelings and emotions regulate individuals’ thinking, behaviour and actions while affecting their physical bodies. Suppression of emotion is not useful, but making the adolescents suppress their emotions was a way of controlling them. By submerging their negative emotions, such as fear, anxiety, negativity and frustration the adolescents caused chemical reactions in their bodies, which were different from the chemicals released when individuals feel positive emotions, such as happy, content, loved and accepted. The narratives and the survey respondents demonstrated that the adolescents in TIBT felt lonely, angry, ashamed, depressed and sad with low self-esteem as illustrated by Graph 6.1. This graph also clarifies that they perceived they were forgotten and abandoned.

Graph 6.1 Former residents’ feelings in TIBT
Source: NVivo9

The case study participants believed that the Tamworth Institution was designed to break them, and that their experiences there negatively affected them (INT1, INT2, INT5, INT6, AUTO1 AUTO2). For example, their shaming and labelling experiences made them less caring of others. Their time in TIBT intensified
any detachment and lack of empathy. They were angry at authority. They felt distant, disconnected and detached, so showed no feelings of love and affection (INT1, INT3, INT5, INT6, INT7).

6.7.1 Families and Other Institutions

The Tamworth Institution should not be solely blamed for the lack of training because by adolescence, the boys could have acquired literacy skills during their time in other institutions or with their families. Most residents reported that the police were involved when they were placed in their first institution. Some other narrators talked about the Church or State taking them from their one-parent families at an early age. Therefore, all the TIBT residents have lived in other institutions. Many residents acknowledge that they had committed petty crimes before they went into TIBT, and it seemed normal to do it again when they were released (INT1, INT2, INT3, INT5, INT6).

I was a devil of a kid before I went in. I enjoyed the high of committing crimes. It gave me a thrill (INT2).

Another resident conceded that:

Many of the kids were mongrels before they went to Tamworth. As runaways, we stole to eat or as truants we missed school (INT3).

Participants said their criminal skills improved when associating with their peers in most juvenile institutions, but this could not happen in TIBT because they could not mix or communicate with their peers.

At Mittagong Boys Home I learned to be a thief and how to steal cars. I also learned easy techniques on how to enter and steal, but at Tamworth I learned to be violent because that is all I saw (AUTO2).

Besides being in other institutions, some residents’ violent family environments before being sent to TIBT could also have contributed to their low self-control and degraded identities. Therefore, some caution in interpreting the data is necessary for several former residents stated that their home life was fairly violent (INT4, INT6, BIO10).

I was in Tamworth just over three months and got about six bashings, but this was not as bad as at home (INT4).
In one treatise a former resident acknowledged that his “grandmother hated” him and that “she used to flog me all the time, as did my half-brother” (BIO10). For this young man the abuse at home at the hands of his family members was so severe that and at age eleven he stabbed his half-brother through the hand with a carving knife (BIO10). As a result he went before the Children’s Court, where he was described as “uncontrollable” and initially was sent to Mittagong Boys Home. There followed a cycle of release and re-institutionalisation, for whenever he was released from juvenile institutions and returned to his grandmother’s house, it was not long before he was sent back to a juvenile institution after he responded violently to his grandmother’s cruel treatment. By the age of sixteen, he was in TIBT (BIO10).

6.8 Summary

Using the sixty-nine elements of the qualitative data including the interviews, online survey questions and documentary evidence, the punitive practices at TIBT were described from the perspective of the residents, a few relations and medical officers. The regime at TIBT forced the adolescent residents to move at a rapid pace after getting out of bed in the morning, while eating, making mats and washing dishes. The youths marched everywhere with eyes down, making sure they are at least two metres apart. The rules and punishments including “no talking”, telling the wardens what they were doing in the toilet and using only three pieces of toilet paper a day, and solitary confinement, definitely affected the narrators. The psychological punishments, such as disintegrative shaming, labelling and humiliation made the young males angry while violence festered through them. Several narrators and survey respondents reported feelings of fear, frustration and isolation as key emotions, along with being depressed, not believing in themselves and hating authority figures while in TIBT.

Their previous institutionalisation suggests that TIBT residents had been protesting against authority long before adolescence. But, their time in TIBT occurred when they were experiencing the emotional and physical changes of puberty. For healthy mature development, adolescents need to have their own experiences and learn from these occurrences. This was not possible during their regulated daily existence in TIBT, so the regime contributed towards producing biologically
immature individuals with low self-esteem. Also, the regimented routine in TIBT did not provide the opportunity for the adolescents to practise self-control. One former resident said he believed nobody wants to fix the prisons or juvenile centres.

The system is like we are at the bottom of a cliff and we are trying to fix the bodies that fall over and crash to the bottom instead of fixing the fence at the top so that the bodies don’t fall over. This is a cliché, but it describes child welfare system, the justice system, and the prison system (INT4).

While their family situations and time in other institutions prior to arriving at TIBT could have contributed to their trauma, for almost 100 per cent of the participants it is their institutionalisation in TIBT that they believe made them angry, violent and unable to function safely in the community. Before they were in TIBT, many boys were petty criminals who committed non-violent crimes. After TIBT their actions were violent, and they lost empathy towards people, not caring, who they hurt when they committed crimes to survive. Many narrators explained that they had not been taught the skills to work so did what they knew best, which was to commit crimes.

Many survey responses and narrative information illustrated that TIBT taught the residents to block all emotion. Experiences in TIBT moulded their attitudes towards authority figures; inspiring hatred and mistrust while demonstrating that violence achieved the wardens’ goals. Watching other residents self-harm themselves without being able to help them forced the adolescent to push away any sympathetic thoughts and feelings. They became angry with everyone and wanted to hurt others, so their victims could feel the terror that the youths felt. Although at that time, punishment in TIBT was considered a method to reduce juvenile recidivism, there is no excuse for the brutal regime. It would seem that the boys in the Tamworth Institution were the “most forgotten” of the Forgotten Australians with no authorities checking on their living conditions, and by 2015, there still has been no investigation into the effects of the adolescent boys’ experiences in this punitive institution.
CHAPTER 7
Legacy of The Institution for Boys Tamworth

Nobody knows whether Tamworth led me to a life of crime, but it certainly never helped me (MED1).

7.1 Introduction
This case study began with the question — How does the experience of being an adolescent male in a punitive regime in a juvenile detention institution influence the former resident’s perceptions of self, subsequent offending activity and overall life course outcomes? The Institution for Boys Tamworth (TIBT) was chosen as the case study because there has been no specific research connected to this facility. The adult former residents of TIBT, who are part of the Forgotten Australians, deserve to tell their stories. During the latter half of the twentieth century, being sent to the Tamworth Institution was a threat to all boys in out-of-home care institutions in NSW, so even before going to TIBT, the males were afraid of what they would experience in that institution. Many boys saw the condition of the youths when they returned from TIBT, heard their stories and were afraid. When the males arrived at TIBT, they were beaten immediately after they walked in the gate to demonstrate the type of punishment that would be inflicted regularly, so they experienced fear from the time of their arrival.

Most of the former residents believed that the guards enjoyed causing pain and used any excuse to bash them. “Often, the guards did not even need an excuse” (INT1). During their time at TIBT, the guards’ actions enforced this fear psychologically through inflicting disintegrative shaming, humiliating, and embarrassing physical punishments. However, the fear strategy did not accomplish its agenda, which was to make the residents afraid of reoffending. The narratives illustrated that some residents wanted other people to feel the same fear they had felt, so as adults they committed violent crimes of rape and murder while enjoying the thrill of seeing the fear on their victims’ faces.

The disintegrative shaming regime that existed at TIBT forced the residents to follow daily routines without experiencing self-control, thus inhibiting their ability to
practise self-control and develop good decision-making skills. While the regimented routine in TIBT stopped the adolescents from contemplating risky behaviour, it also prevented them from undergoing the difficult situations and making the associated decisions, which teenagers usually experience during their adolescent years to help them prepare for adulthood. Risk-taking increases during adolescence as a result of changes around the time of puberty in the brain’s socio-emotional stemming, and these structural and functional changes are seen within the prefrontal cortex and its connections to other brain regions (Steinberg 2008a).

The differing timetables of these changes make mid-adolescence a time of heightened vulnerability to risky and reckless behavior (Steinberg 2008a, p. 78).

Some experiences are associated with the developmental milestones of life, including adolescence. The particular growth spurts that occur at different stages of life could have happy or detrimental consequences. Many adolescents encounter new, potentially threatening or challenging social incidents on a daily basis. Institutionalisation and disintegrative shaming in TIBT were traumatic experiences for the adolescent residents. There are individual differences in how adolescents respond to traumatic experiences, so each person will be affected differently. The effects of the regimented routine of TIBT, which prohibited its residents from making any decisions and choices and provided no peer support, would most likely have resulted in lack of development in cognitive strategies. The process of maturing or resolving the changes in their identities that accompanies adolescence involves dealing with difficulty and disappointment while also examining their self-identities. For the young men in the Tamworth Institution, it also involved grappling with the loss that accompanied the individuation process.

I was not prepared for living on my own. During all my childhood in institutions, including Tamworth, I was subjected to discipline and being told what to do. I did not know how to make my own decisions (AUTO3A).

In their narratives, the participants reflected on the ways in which the rules and routines of the Tamworth Institution served as the authoritative guide for their behaviours. One said his time at TIBT taught him to be angry against the world:

I learned the meaning of paranoia, survival and the way of the jungle in Tamworth. From 10 to 18 I was in Boys’ Homes, but in Tamworth I
was taught nothing but how to be rebellious against not only society, but the world (AUTO2).

Another echoed this sentiment by stating:

The negative Tamworth was supposed to frighten us so much that we would do the right thing and not choose a life of crime, but it did not work for any of us (INT4).

The residents were given no water at all (INT7). One of the participants said that a mate of his who had been in TIBT, even now, was unable to go anywhere without a bottle of water because the only liquid they drank in the institution was one cup of tea at breakfast, lunch and tea (INT6). There developed a pattern of having nightmares about toileting among the former residents, for as one said:

I still have nightmares about toilet and often get the shakes while sitting when I think of the toilet routine at Tamworth (INT5).

The repercussions from the ablution regime were not isolated, for another revealed that he would “still sweat when I go to the toilet” (INT1). More than one former resident can still recall the palpable nightmares they had (and some still experience), not only because of their confinement, but, because of the proximity to the gallows (INT1, INT3, INT5, INT6). The management and officers in TIBT had no training to qualify them to care for adolescent male youths. Many of them were ex-soldiers (MEDP, Quinn 2004). They followed the routines in the General Orders Book that directed them to control and punish, rather than train and educate the boys.

The findings are presented in this chapter to ascertain the psychological, physical and criminal effects of the residents’ institutional and disintegrative shaming experiences. These effects and experiences are illustrated with graphs constructed using NVivo9 software. The information collected during this study was from forty-five sources of narratives and twenty-four completed surveys. Nevertheless, analysing the themes in the sources supplied the data, which related to the theory that residents in total institutions can become stigmatised by their institutional experiences, resulting in a degraded or spoiled identity (Goffman 1961). Their disintegrative shaming helped to lower their self-esteem (Braithwaite 1989) and the regimented routine stopped them practicing self-control (Hirschi 1969, 2004).
7.2 Effects on survey respondents

Respondents, who completed the online survey, reported feelings of anger and being lonely as key emotional outcomes, along with being depressed, possessing low-esteem and feelings of sadness. They nominated these feelings of anger, lack of trust and inability to respect others (mostly those in authority) as key emotional states that were a direct legacy of being confined at TIBT. About half admitted to having suicidal thoughts and overwhelmingly they had experienced relationship problems in forming both friendships and intimate partnerships.

The former residents who took part in the online survey echoed the range of problems raised by the interviewees such as alcohol and drug misuse; depression, anxiety and panic attacks; along with eating and sleeping disorders or being afraid to be in enclosed spaces. With respect to the consequences for them personally, they similarly said they still had nightmares about TIBT, and in general, their answers demonstrated that these men believed the whole place was designed to break them psychologically and that everything that happened at the Tamworth Institution had an ongoing negative impact on their lives.

Selections of their open-ended responses are displayed in Table 7.1. In terms of the reasons for these types of consequences, the respondents related the outcomes directly to the treatment they had received in TIBT. One said it was the “strictness, abuse, non-caring, non-sharing, no consideration for my humanity” attitude that prevailed in the Tamworth Institution that wrought the deleterious effects on his life. Another reflected that it was more like a miscarriage of justice because he was “treated wrongly [and] sent there for wrong reasons”.

<table>
<thead>
<tr>
<th>Loss of Trust</th>
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<tbody>
<tr>
<td>I lost trust in myself.</td>
</tr>
<tr>
<td>It moulded certain of my attitudes that I still carry with me today e.g. my attitude towards authority figures and my rebellious nature.</td>
</tr>
<tr>
<td>I cannot give or accept the concept of love for love’s sake.</td>
</tr>
<tr>
<td>I became cynical of anything to do with organised authority, politics or religion.</td>
</tr>
<tr>
<td>I was unable to trust people, which led to a domino effect on the rest of my life.</td>
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<table>
<thead>
<tr>
<th>Destroyed My Adolescence</th>
</tr>
</thead>
<tbody>
<tr>
<td>When it robbed me of an important part of my life it generated a subconscious need for the security of an institutionally regulated lifestyle that made crime for me a self-inflicted wound.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ongoing Enduring Effect</th>
</tr>
</thead>
<tbody>
<tr>
<td>It was a trauma that shaped most of what I did.</td>
</tr>
<tr>
<td>It affected my adult life for 16 years after leaving it, then I got help and I changed so I could be a good father.</td>
</tr>
</tbody>
</table>
I was a zombie for years, nothing hurt me and I was brutal without a second thought. I never really fitted into society after that stage of my life.

**Exacerbated Anger / Made Me Uncaring**
It made me unsympathetic to others, and I was easily angered. I was angry with everyone and everything. Later on I redirected my anger towards others and I enjoyed seeing their fear. The aggression and brutality that I experienced made me less caring of others. It made me indifferent to other people’s problems and created a self-preservation screen that blocked out all emotion.

Table 7.1: *Open-ended survey responses about the impact of the Tamworth Institution grouped under key themes.*

The respondent’s survey answers supported the interviewees’ perceptions that their experiences in TIBT continued to affect them when they left the institution.

7.3 **Analysing themes with NVivo9**
After coding the NVivo9 data was examined to analyse linking themes in order to identify the effects of the experiences in the case study, frequencies were reported, but there were no attempts to explain the occurrences, which did not support the theme, unless it was directly mentioned in the narrative. However, these differences may have been coded in other themes. The NVivo9 coding illustrated that punitive control and physical discipline were connected to the rules, regime and routine in TIBT, thus presenting these regulations as major experiences referred to by the narrators.

The narrators and the survey respondents believed that their institutional experiences in the Tamworth Institution contributed negatively to the outcomes of their lives. They became cynical of authority, politics and religion. Graph 7.1 shows the percentage of institutional experiences, illustrating the patterns in the data.
The disintegrative shaming experiences in TIBT involved physical and psychological punishments involving humiliation and fear. One example of this was the degrading toilet rules where the boys were forced to go at designated times, only use three pieces of paper each day and tell others what they were doing. Many adults, remembering the toilet routine, sweat with nervousness when they go to the toilet. Even after all these years they still minimise their use of toilet paper. Almost every narrative revealed the residents’ shameful and humiliating feelings connected to having another youth check the toilet to ascertain if they had told the truth when they asked the guard if they could go for a bladder or bowel movement and to wearing a box on their head until it disintegrated. The residents felt invalidated, disrespected and diminished by the guards’ shaming actions. Although the guards’ verbal abuse convinced many residents they were inferior, the interviewees’ narratives demonstrated that the shaming actions they were forced to perform also made them angry and they blamed all people in authority for these feelings. They laid no blame on themselves or their actions.
The “no talking” rule was one that differentiated TIBT from other care institutions, prisons or living environments. Almost every resident discussed his frustration at not being able to talk to another person. Because the residents were not able to communicate with each other in any way, many participants agreed that one reason they could not communicate openly and honestly as adults was because they believed they had nothing worthwhile to say, which definitely supported low self-esteem and lack of belief in themselves. Another aggravation was the rule that they had to focus their eyes on the ground or the feet of the boy in front of them. As adults, many of them still had problems looking into the faces of people when they were communicating. The adult residents admitted that they often sabotaged their communication efforts by using abusive language. It was possible that this verbal isolation contributed to the narrators’ perceptions that their TIBT experiences affected them more than any other institution. However, one minor positive was the lack of communication with each other in TIBT negated any honing of criminal skills or learning negative habits from each other.

Graph 7.2 illustrates the narrators’ memories of their shaming experiences, either physical brutal or psychological punishments. Every resident spoke of harsh punishments being daily occurrences in all the juvenile institutions. However, they were most severe and occurred more often in TIBT. Many former residents still carry the physical scars including large welts on their backs, a severed finger and facial disfigurement. Despite this, all residents said they were tough and able to tolerate the physical pain. The disintegrative shaming was a lot more difficult to endure.
When the adolescent TIBT residents were shamed, for example, having to stand all day and wave their arms to brush away their farts, they were not treated as worthwhile people. In TIBT, shaming punishments were as common as physical punishment. However, they were much more damaging to the males’ identities. The disintegrative shaming made the boys feel bad about themselves, not their actions. Many former residents reported that they felt intense shame and that they were unlovable and bad. It is possible that these feelings could have started if their parents rejected them or if one of their parents abandoned them as occurred with many of the residents. The feelings of shame persisted to adulthood, with some of the former residents saying they were ashamed that they could not take control of their lives to be productive members of society.

According to the narratives, the guards induced shame in the adolescents by attacking and destroying their personal dignity, with activities that seemed to be done...
for no other reason except the guards’ pleasure. For example, boys were made to lick the boots of the guards; they always had to ask permission to scratch and were made to swing their heads around until they vomited just for the guards’ pleasure. These regular daily humiliating shaming experiences not only degraded them, but also caused them long-term psychological damage. Their disintegrative shaming experiences led them to believe they were flawed with spoiled identities, so they saw no reason to act any differently to this opinion.

I was continually told that I was a criminal and worthless and the only avenue for me seemed to be a life of crime (INT1).

The humiliating actions attached to their disintegrative shaming left emotional and psychological scars that have proven almost impossible to heal. Former residents spoke of digging graves and filling them in while being told that the next time it would be their grave, and these memories still haunted their nightmares. Almost every narrative told of not knowing how long they would be in solitary confinement, their fear of being bashed if they stopped running the “dolly” along the iron bars of the cell door while they looked at the hanging gallows in the death cell close by. For many narrators, these hanging gallows float through their dreams.

Another issue that many residents reported was problems with getting enough sleep while in TIBT. Their sleep routine was often disrupted when guards woke them for their amusement. As well as increasing the adolescents’ fears, their inadequate disruptive sleep routine increased the risk of health problems. During puberty the male adolescents were experiencing hormonal changes, which caused sleep phase delay. Adequate sleep, about nine hours per night, is essential for healthy development during adolescence. Chronic sleep deprivation for adolescents can cause concentration difficulties, depression, poor decision-making, risk-taking behaviour and slower physical reflexes.

Graph 7.3 illustrates that the residents believed their antisocial behaviour and anger were physical effects of their institutional and shaming experiences in the TIBT environment. Many participants in this case study blamed their anger issues for the breakdown of their relationships and their inability to remain in honest jobs. They admitted to lying, intimidating and manipulative actions and referenced drug and
alcohol abuse as examples of their antisocial behaviour. Many of the former residents are active members of Alcoholic Anonymous (AA), and some attribute their current reasonably good health to their regular AA meetings.

The physical effects of their institutional experiences in TIBT were evident in the narrators’ high use of Medicare health services. Their inability to hold down a job means that most of the men cannot afford dental and optical services. Others have not had the limb or joint operations that doctors have recommended for them because they do not have the medical fees. As well as worrying about not being able to afford a nursing home when one is needed, they also fear being institutionalised again.

When people are empathic, they identify with and understand other individuals’ feelings in order to live peacefully in society. The psychological effects from institutional and shaming experiences smothered the residents’ empathy, so that they were incapable of caring and concern and had no desire to help and care for others. They had no empathy for people in their community. Their narratives demonstrated that these damaged males did not believe in themselves; therefore, trusting or caring for others was impossible. Graph 7.4 illustrates that the adult

Graph 7.3 Physical effects
Source: NVivo9
residents believed they were psychologically affected by their time in the Tamworth Institution.

Graph 7.4 Psychological effects
Source: NVivo9

As reported in the narratives, after spending time in TIBT they lost respect for themselves and others, and they were unable to trust anyone. Coupled with this was their inability to feel or show love and affection. Consequently, there was no hope of most of them having successful long-term relationships and happy families. Almost 100 per cent of the narrators and the survey respondents had no lasting interpersonal relationships or had several partners or had transient relationships. For a few men,
securing a stable marriage while creating a trusting, strong, loving family was the defining characteristic in their adult lives, which finally compelled them to live honest productive lives.

Many residents exhibited the effects of post-traumatic stress disorder (PTSD), such as being quick to anger and experiencing depression and insomnia. The adults often woke in a state of distress after a nightmare, sweating with racing hearts, and were unable to return to sleep. They said their nightmares made them feel afraid and anxious. Some men said their nightmares were so realistic, it was almost like they were back alone in the dark cells waiting for the guards to come and torture them. The interviewees were loath to admit they had mental problems or thought of suicide, although many of them agreed they were often depressed and found it difficult to get out of bed most mornings.

While there was some evidence to suggest that the residents’ psychological problems could have begun before being incarcerated in TIBT, there was no doubt that their institutional and shaming experiences in that institution increased whatever level of psychological distress they had previously. The symptoms and consequences of their psychological problems have remained with them throughout their lives. Self-criticism and self-doubt were visibly confirmed in their narratives. However, throughout their stories was also a persistent belief that they needed to blame something or someone for their ineffective choices and decisions.

Most people are under the impression that we learn from our mistakes when we’re sent into boys’ homes… let me tell you, I and just about every one else that done the boys’ homes only learnt to be better and willing crooks. All the early days of punishment place only taught me to be a criminal not to be an upstanding citizen in society (AUTO2).

The participants of this case study agreed that while they were in most juvenile institutions they did improve their criminal skills, but not when they were in TIBT. The adolescents’ inability to meaningfully communicate with each other while in TIBT made it impossible for them to learn anything from their peers. However, this does not necessarily lead to the conclusion that there were no criminogenic effects from their experiences in TIBT. An increase in violent feelings, low self-esteem, lack
of empathy for others, learning that violence accomplishes goals and contempt for authorities could be precursors to crime.

Every institution has rules, regime, routine, control and discipline. However, these were very stringently and violently enforced in TIBT. The guards followed strict general orders of a controlled disciplined regimented routine. Their response to any spontaneous behaviour by the residents was usually physical punishment. These factors contributed to the residents’ destabilised self-control and their difficulty or non-existent ability to make decisions and choices. The rules, regime and routine experienced, as adolescents, could not fail to influence and shape the adult behaviour of the males. All the adult narrators admitted to being convicted of crimes and most of them had served time in several prisons. These actions demonstrated their diminished self-control and disrespect for authority and the law.

Although the effects of the regimented lifestyle in TIBT differed with each adolescent, it was difficult for any individual to learn how to choose and make decisions when they could not practise these skills. The narratives demonstrated that the acts of violence inflicted on the adolescents in TIBT increased their lack of trust in people. All participants in this research said they were very angry with everybody, particularly authority, when they left TIBT. They have all been in more than one juvenile institution, but the Tamworth Institution was the one they blamed for their lack of empathy and anger. Although anger and lack of empathy could have been the force behind many of their crimes, lack of education and training in life and work skills while needing to survive could well have been the deciding factor that propelled them into their criminal actions.

Most of the adolescents had committed petty crimes before going to TIBT, and committed crimes as adults. This is supported by the fact that during the 1970s nearly every convicted murderer in NSW had spent time in TIBT as a youth (Thompson 2011). However, the adults believed that if they had not gone to TIBT, their adult crimes would have been less violent. They also believed there could have been a possibility that after adolescence they would have matured into honest citizens. Nevertheless, this does not mean that there was a cause and effect relationship between being in TIBT and being a criminal, but it demonstrated the failure of the
The daily routine in TIBT was so regimented that every action became an automatic habit for the residents. This meant they could not develop their self-control. The regime included security measures to control residents, the rules for moving around the institution, quantity of food, making beds and toilet practices. When the adolescent residents were forced to follow the routines in juvenile institutions and then later in the adult corrective institutions, thinking for themselves, making choices or believing they had a right to an opinion became almost impossible. They did not know how to live in a community where daily decisions were a necessity. Their self-esteem and confidence seeped away, and they did not know how to practise self-control. In the Tamworth Institution, violence was a daily part of their lives. Thus, the

Graph 7.5 *Criminal effects*
Source: NVivo9

brutal regime to achieve rehabilitative outcomes. Graph 7.5 illustrates the criminal effects discussed by the participants of this research who committed violent crimes after being in TIBT. As can be seen, only a few residents admitted to dealing in illegal drugs.
punitive TIBT was a criminogenic environment, which, as shown in the participants’ narratives, the adult males have found difficult to forget.

7.4 Negative effects of residents’ experiences
The residents’ perceptions of their experiences during their adolescent years in TIBT varied from individual to individual, but were mostly negative. However, all of the narratives clearly demonstrated that the Tamworth Institution did not provide a physical and psychological environment in which the adolescent males could safely mature, develop and learn to trust themselves. Information about their perceptions of the effects of their experiences recurred in their narratives. An analysis demonstrated that the men consistently perceived that their time in TIBT had initiated most of the destructive choices and decisions they had made throughout their lives.

The male adolescents, who were institutionalised in TIBT during their puberty, did not have positive male role models. With abusive controlling adult male officers and no-one to ask for advice or assistance, the adolescents had difficulty negotiating physical changes associated with puberty and also the emotional changes of developing a sense of who they were, which included their emerging male identity and capacity for empathy. Instead, the guards’ examples showed the boys that the assertion of power through violence achieved goals.

Rather than the TIBT residents receiving positive encouragement, the officers and guards continuously told them they were useless, rubbish and bastards. In a similar way to rote learning by repetition, the adolescents were taught that they were worthless and always to blame for all the negative events in their lives including the “so-called” abandonment by their parents. Although during their time in the Tamworth Institution, they were frequently involved with survival issues, such as not having enough food or clothes for warmth, which may have made them more prepared to deal with the extremities of life, their stories demonstrated that these events increased their lack of trust for authority figures, who were supposed to care for them. These negative feelings against authority continued when they had left the institution and were living in the community.
The narratives in this case study clarified some anomalies connected to the residents’ perceptions of the punitive institutional regime’s effects on their identities, self-control and life-course choices, including their depression and inability to believe they had the capabilities to be successful or happy. Their nightmares involved mentally reliving their shaming trauma and emotional reactions. Flashbacks occurred regularly during their daily adult activities. In some cases these memories caused the former residents to violently react to a person, who was not listening to them, or break out in a sweat when going to the toilet while remembering the TIBT procedure, for example remaining “six feet [two metres] away from other people which can be very difficult in a bus or train” (INT5). Although some of their violent or negative attitudes could have started in their family environments or other juvenile institutions before the residents were incarcerated in the Tamworth Institution, this research suggested that the narrators believe their experiences in TIBT were responsible for their emotional and relationship problems, and in some capacity their criminal activities.

When they were released from TIBT and returned to other state institutions, most residents said they resented criticism, were pessimistic, distrustful and hostile, which are symptoms of low self-esteem. However, the fact that they had been in the Tamworth Institution raised their status in some of their incarcerated living communities, thus increasing their self-esteem. Nonetheless, this did not improve the negative feelings about their identities and self-worth caused by their institutionalised and disintegrative shaming experiences in TIBT. A few interviewees believed that their institutionalisation generated a subconscious need for the security of a regulated lifestyle, therefore precipitating them to commit criminal acts in order to be returned to a the routine of an institution.

While in TIBT, the adolescents developed temporary blocking mechanisms of repression, suppression and dissociation to manage their emotional pain and provide a sense of control. These defences may have worked well when the men were young, but as they aged, these helpful and lifesaving defences moved beyond necessary functions of protection into barricades. Consequently, in their adult lives, these negative patterns of behaviour were expressed through activities such as violence, alcoholism, gambling, lack of empathy and the inability to form lasting friendships or loving relationships. While a few males managed to earn an honest living when they
were adults, court records showed that almost 100 per cent of the former TIBT residents adopted criminal habits to survive, were arrested, tried, convicted and returned to institutions, this time adult gaols. According to the ABC documentary, another PhD thesis and the participants in this research, many men in NSW prisons resided one or more times in the Tamworth Institution (Quinn 2004, Thompson 2011). One resident said:

If Tamworth did not break us, why did so many of us kill? It is disproportional (INT5).

Their abusive and shaming experiences in TIBT had ongoing psychological effects on the residents. These effects were associated with increased aggression, antisocial behaviour, low intellectual achievement, poor quality relationships and mental health problems, including depression and panic attacks. The men reported feeling numb, disconnected and unable to trust other people. Their narratives confirmed that they were struggling with conflicting emotions and frightening memories about their time in the Tamworth Institution. It was not the objective facts that determined whether the experiences had negative effects, but the subjective, emotional experience of the event as illustrated in the narratives.

7.4.1 Lack of education

In the New South Wales Government Gazette of September 26, 1947 there is a proclamation of the creation of TIBT:

An institution for the reception, detention, maintenance, discipline, education and training of children and young persons committed to such institution and that such institution be named “The Institution for Boys, Tamworth” (Government of NSW Gazette No. 109. 1947. p. 2239).

Despite this proclamation, that young people could be educated and trained, there was no education or vocational training at this institution. It was an institution of punishment. It was the residents’ perceptions that their negative experiences in this institution had psychological, physical and criminogenic effects on them that remained with them throughout their adult lives.

Australian Senate and state government inquiries found that most of the juvenile institutions for out-of-home care in Australia have been punitive
environments. One of the worst of these was TIBT. The daily order books show that there was no rehabilitation or vocational training at this institution; rather, the adolescents experienced routine, regime, discipline and solitary confinement, recorded as segregation. The daily bashings, which the narrators talked about, violated the United Nations Convention on the Rights of the Child. The authorities’ disciplinary conduct physically affected the young males. The traumatic nightmares and physical scars of the former residents acknowledge the evidence that the violent experiences were harmful to the youths.

Lack of education and training has left many former residents embarrassed and ashamed of their deficiency in literacy and numeracy skills, as well as about having no vocational or life skills. One said, “I was taught nothing but how to be rebellious” (AUTO2). He went on to talk about his lack of academic learning but that what he did learn was “the meaning of paranoia, survival and the way of the jungle” (AUTO2). Another reminisced that he “only reached fifth year in an institution school, and no further training in TIBT. I can read, but find it hard to write” (AUTO3A). Many residents said they did not have any life or work skills, so did not know “how to rent a house or apply for benefits” (INT8). Others committed criminal acts after being released from juvenile institutions.

Most of the crimes I committed were minor and non-violent, such as safe-cracking and breaking and entering, to survive. But in total I served 19 years, 5 months and 6 days in institutions and prisons (INT1).

Poor education, resulting in low levels of numeracy and literacy, as well as lack of vocational skills affected the residents’ abilities to find work or meant they could only work in low-paying jobs, so they found less honest ways to increase their finances. Often, when in jobs the former residents rebelled when directed at work because the structured work environment reminded them of the institutional systems in which they had been raised. Only three narrators from our sample of forty-five (seven per cent), with the support of someone or an organisation, successfully achieved an education and found honest work.
7.4.2 Inadequate medical care

Former residents blamed the lack of medical attention and the cold wet conditions in TIBT for their chronic bronchitis and chest issues. They spoke of being depressed, disliking themselves, losing interest in sex and having difficulty sleeping. According to their submissions to the Senate Inquiry, many former institutionalised juveniles suffered from physical illnesses, especially chest complaints and habits such as smoking and excessive drinking of alcohol (SCARC 2004).

According to the narratives, there were suicide attempts in Tamworth, for example some young males attempted to hang themselves with their sheets and one boy cut his throat in the shower. The Senate inquiry reported successful suicide attempts by adult care leavers, especially around the Christmas holiday period (SCARC 2004). There were also media and court reports of men, who had been in TIBT, committing suicide in prisons or after their release.

7.4.3 Inability to communicate

The legacy of the “no talking” and “no eye contact” rules made it impossible for the adult residents to openly and honestly communicate. They found it difficult to adjust to the outside world where regular interaction with people was necessary (INT3, INT4, INT6, AUTO3A). Many adult residents have trouble communicating or having meaningful relationships. This is not just verbal exchange. It also includes their body posture, tone of voice, eye contact, gestures and facial expressions. They have struggled with being able to show their emotions or feelings. A resident admitted that he “cannot look people in the eyes, so many think I am lying” (INT1).

Other narrators talked about being unable to communicate inside institutions or outside of institutions (INT5, INT7, INT8). As a result many residents felt that the did not have anything worthwhile to say (INT1, INT3, INT6, INT8) or that nobody would be interested in what they had to say (INT2, INT3). They also said that they often subconsciously sabotaged their communication efforts by using sarcastic, dismissive language, thereby alienating their listeners (INT2, INT4).

Many residents reported that they found it difficult to form loving relationships with others and to express their feelings of love and affection. They felt
emotionally numb and were frightened to get close to people. “I could not mix with people, so I went to live alone in the bush” (INT8). Although the majority of participants in this study had several relationships or marriages, some had never been in a committed relationship. Others described all their relationships as being rocky, unconnected or unstable (INT1, INT3, INT8). Many said they could not show their affection and found it difficult to intimately touch their partners (INT1, INT5). A resident said he had never had a loving feeling or felt love (INT2).

I struggle to show love and affection. I have not had sexual relations with me wife for 10 years. I also find it difficult to relate to my grandson (AUTO3A).

Another resident said he was in a toxic relationship with a woman who shares his house, but sees some improvement in his life (INT6).

At one stage I was so emotional, I would have shot my wife and three kids, but today, I can talk to my ex-wife and three kids (INT6).

7.4.4 Depression and Illness

Some traumatic experiences in TIBT caused ongoing physical effects including insomnia, agitation, anxiety attacks, aggression and depression to the former residents (INT1, INT3, INT 5, INT6). Even though they were in TIBT about fifty years ago, their experiences were all still fresh in the minds of the interviewees. “I remember these things like they happened yesterday” (INT1).

I remember and it still comes back to me in my nightmares a time when one of the boys farted. After the guard demanded to know who the culprit was and he confessed, he was forced to scrub the air above his head with a deck scrubber for the next four hours. When his arms tired or he rested, he was bashed unmercifully until he was unconscious and carried to his cell (AUTO1).

Many adolescent residents suffered from chronic respiratory problems that were not helped by the cold wet conditions. Medical attention was inadequate and if the boys did complain about being ill, they were punished. Many adult former residents suffered from emphysema and several had Parkinson’s disease. The emphysema could have developed because the boys were given cigarettes in the juvenile institutions, but not in TIBT. However, sitting on the cold cement and being left in wet clothes would certainly have increased the propensity of contracting chest and lung illnesses.
The illnesses experienced by former residents were not just physical, but also psychological. Three adult residents had completed the Beck Depression Inventory II questionnaire with their doctors. Although their results placed them in the moderate range of depression, they had moderate to high scores in the domains of pessimism, past failures, self-dislike, self-criticalness and loss of interest in sex.

Often, I can’t be bothered getting out of bed; can’t be bothered doing things; not just work, anything (INT7).

This fundamental sense of fear and helplessness can continue into adulthood. As stated in one interview:

In my personal opinion, psychological and emotional treatment is worse than physical punishment. I can take the physical easy, but the mental turns into no thoughts, no nothing (INT2).

Some former TIBT residents, who were arrested as adults, used mental problems including hallucinations as their criminal defence. According to two residents’ psychological reports, this included hearing voices, feeling as if wires were controlling them, paranoia of being killed by relatives (CR1, CR2), and in another case when a man killed seven people, that his son would be reincarnated (AUTO2).

At Tamworth, you suppressed your thoughts because if you thought about it, you could do something stupid. After Tamworth, there was nothing. I didn’t believe in myself or anyone else. There is no doubt that whatever we went through made our bodies and minds snap inside (INT3).

Most psychiatric reports did not support the testimony that major psychiatric disorders contributed to criminal actions. However, these reports did say that it was likely the person involved had a personality disorder with at least some anti-social features (CON1, CON2, Phillips June 4, 2008). Many residents complained of having regular anxiety and panic attacks (INT1, INT3, INT5, INT6).

I do not display any sort of emotion when I am upset or happy. This is because if I showed any weakness when I was in one of the institutions, the guards would use it to try and break my spirit. I always keep my emotions completely bottled up inside me (AUTO3A).

Many residents, who have also spent time in other gaols, including Grafton, Goulburn and H Division Victoria, said that it was only TIBT that left them cold or frightened them or still gave them nightmares (INT1, INT3, INT5).
You can’t afford to be an emotional person or feel sorry for yourself because you’re there, because there’s nothing you can do about it. Over a period of time you suppress your natural emotions until you’ve got no emotions and you can’t relate to people outside the environment you are in, and you didn’t want to because it can be your downfall if you do (MED8).

Many participants reported having insomnia; they have trouble falling asleep, staying asleep, or both. One claimed, “my sleep is poor and dominated by nightmares of escaping from an institution, [with] buildings collapsing around me” (AUTO3A). They were poor sleepers at TIBT and “I still am today and suffer from insomnia” (AUTO1). They also tended to make a direct causal link between their disrupted sleep patterns in adulthood and the sleeping arrangements at TIBT along with the penalties meted out by the guards as described earlier (INT1, INT3, INT5, INT6). Therefore, they have endured lifelong poor quality sleep.

Most nights I was woken by the guards pounding on the steel bars of our cells [so] sleep does not come easy to me these days (INT3).

Their insomnia results in the men having difficulty focusing on tasks, paying attention, learning and remembering, and their lack of sleep is associated with feelings of anxiety, depression or irritability. This is further exacerbated because they lay awake remembering their experiences in TIBT.

Some had sought psychological help because of the nightmares about their TIBT experiences (INT1, INT2, INT6, AUTO1). It was their view and reportedly that of their mental health professionals that it was the result of stress.

Tamworth destroyed our minds. I won’t believe anyone who tells me that someone who went through Tamworth went on to live a normal life. I find that almost impossible. We all had mental scars (INT5).

The nightmares finally stopped for some residents, but for others they are ongoing, and others noted that they ceased for a while, but recurred later in life.

After all my years inside various lockups, even now I get nightmares, based on my experiences in Tamworth (MED9A).

I suffer from nightmares. I sometimes wake up from the nightmares, shaking and sweating, and I’m always tired and weary in the morning (AUTO3A).

Some residents alleged that TIBT staff experienced nightmares:
I’ve talked to screws from up there and they reckon they had nightmares working there even, because they had a job to do, I suppose. But they didn’t like what they’d done, but they had to do it, I suppose (MED2).

When a forensic psychologist was interviewed for this research, he said that 90 per cent of the former Tamworth residents he had spoken to had lost respect for themselves, others and society in general (Lucas W.E. June, 2011). Some residents allowed their confidential reports (CON1, CON2) to be read. The psychiatrist in CON1 and the psychologist in CON2 had both written that the adult residents were self-critical and characteristically doubted their own abilities. As a result they had low or no self-esteem. One interviewee said, “I did not believe I could make a worthwhile decision. Everything I did turned out wrong” (INT1). Another believed, “My life seemed to be one bad choice after another “(INT7). Another confidential report provided by a resident contained this sentence.

The prisoner has shown not a shred of remorse for his victim or the family at any time since his arrest (CR3).

There can be different forms of self-esteem or admiration, as is demonstrated by one resident saying that when he returned to Mt Penang, he was on top of the “pecking order” because he had been in the Tamworth Institution, but it did not interest him because he was a loner (INT8). On the other hand, another resident was “pissed off” because he was called the “Tamworth kid” when he got back to Mt Penang. He did not like the label and felt it had followed him around all his life (INT6). When asked why he chose to commit crimes, an interviewee said,

My criminal activities were not because of ‘low self-esteem’. I got involved because of the people I was with. I had no other skills but I had good skills for crimes. I felt good when I committed crimes. I stopped because I was charged, convicted and went to gaol for 12 years (INT3).

7.5 Criminogenic impacts
Because people learn from experiences, examples and training, it was difficult for the adolescent residents to practise self-control when their decisions, choices and movements were controlled every moment of the day and their adult role models were consistently abusive. While these adolescents were exposed to violence in a punitive abusive environment they learned that violence was an acceptable way of solving
problems. Although criminal records showed that there were many violent crimes committed by adult residents of the Institution for Boys, Tamworth, all these residents had also been in other NSW juvenile detention centres. However, one ex-resident in his letter from prison wrote:

The system installed a philosophy that might was right in all children that passed through that institution. Tamworth taught us to hate (AUTO1).

The treatment meted out at TIBT probably intensified the capacity for violence of the young men who went there (Quinn 2004). Even though it is difficult to blame specific acts of violence on any one experience it is nevertheless possible to claim:

If we’ve got a group of people who are high risk already and then we expose them to punitive treatment and not provide the sort of intervention, the sort of psychological intervention that we know can have a positive impact on their life course, then we do create an environment in which individuals might worsen as a consequence of their incarceration (INT4).

Several residents during their interviews or in their biographies said they were violent, had a temper and drank when they left TIBT. Court documents confirmed that many residents of TIBT when they were adults killed people (Thompson 2011). An interviewee after admitting to having a lengthy criminal record said:

I dream that one day I’ll run into those Tamworth bastards in charge and kill them. Five of us, Tamworth kids, were in gaol at the same time for committing murder. I was charged and found guilty of killing my wife, her mother [daughter was present at interview]. I want to change but the Tamworth nightmares are still there (INT5).

7.5.1 Antisocial behaviour

In terms of the long-lasting impact of TIBT, antisocial behaviour is the causal thread that runs through the narratives.

Tamworth made me bitter and twisted against the whole society. I was personally bitter before, but after Tamworth I was very, very angry (INT4).

Examples of their adult antisocial behaviour include lying, intimidating people and manipulative actions as well as activities such as drug and alcohol abuse.
When I came out, I hated everyone. I was filthy on the world. I still cannot stand anyone telling me to do anything. Tamworth broke me in the mind (INT7).

Many incidents of antisocial behaviour by former residents of TIBT have been documented in court records including anger, aggression, cruelty, violence, theft, arson and vandalism.

I firmly believe that Tamworth was the catalyst resulting in my antisocial attitudes and behaviour in later life (AUTO1).

Residents reported that they were boiling with anger and hate when they were in the Tamworth Institution. When they were released many of them expressed this anger and hate with criminal actions.

After being abused by authority, many of us were determined to get even with authority and society (INT8).

The qualitative data gathered revealed the residents often used force against others as a means of resolving conflict.

Tamworth created an elite angry group of survivors when they returned to other institutions. They had lost respect for society, people and the system. They gave “shit” and were not going to accept “shit” from anyone (INT5).

This, in turn, caused problems in jobs, family relationships, marriage and friendships.

I was violent, had a temper and drank. I did things to people first in case they were going to do things to me (INT7).

One of the residents provided his psychologist’s report in which his professor wrote this statement:

The resident’s descent into antisocial behaviour as an adolescent and adult was facilitated by his consignment to the atrociously bad system characterising New South Wales Department of Child Safety Institutions during the 1950s and 1960s (Nurcombe, November 20, 2006).

Many former Tamworth residents admitted to being easily angered, having difficulty controlling the expression of their anger and were perceived by others as having hostile, frustrating temperaments. When one resident came out of TIBT, he said,
I didn’t feel anything for anybody. I was not only ready to commit crimes, I was angry. Certainly the degree of anger that had built up in me and the loss of respect for all including the law predisposed me to commit crimes (INT3).

The pattern in the sources’ narratives suggested that aggressive behaviour was common. Their time in TIBT made them angry and more violent. They brought us to the point of madness then inflicted us on society. We brought anger and violence out with us and used it (INT5).

When the adult residents lost control of their temper, they were likely to respond with extreme displays of violence, including damage to property and threats to assault others. The following sentences were included in a psychiatrist’s report written in an autobiography of one of the residents.

With regard to anger management, the pattern of responses suggests that aggressive behaviours play a prominent role in the clinical picture and that such behaviours may represent a potential treatment complication. His responses suggest that he is an individual who is easily angered, has difficulty controlling the expression of his anger, and is perceived by others as having a hostile, angry temperament. When he loses control of his anger, he is likely to respond with more extreme displays of anger, including damage to property and threats to assault others (AUTO3A).

Illegal drug-taking and selling were common criminal activities for adult former residents. For example, from 1960 to 1998 a TIBT resident was charged on sixty separate occasions in relation to the possession and supply of prohibited drugs — heroin and cocaine (BIO12). By 1978, another resident was the biggest heroin dealer in Australia and part of a multi-million-dollar drug syndicate operating between Bangkok and Sydney (BIO10). Another resident was covered in scars of the deep track marks showing his thirty-year dependence on heroin (BIO13). Excessive drinking of alcohol and smoking of cannabis, which one interviewee said helped “blot out them memories” (INT7), became major problems for many of the men who had been in TIBT. Several TIBT residents have had problems with alcohol and many are members of Alcoholics Anonymous (AA). They thanked AA for their sobriety and for still being alive.

The narratives garnered in this research underscore the fact that the austere and harsh brutal treatment wrought a legacy of anger, violence, drug use and criminal
offending. Therefore, the highly controlled environment at TIBT was a criminogenic environment. Some adult residents took drug overdoses after they left Tamworth or prison. However, only one interviewee admitted to having thoughts about committing suicide and said, “I’ve been no good to anybody, so why did I keep living?” (INT3).

7.5.2 Violent crimes

At least nine men, who were charged with murder in the 1970s and 1980s, shared the common denominator of being residents of the Tamworth Institution when they were teenagers, as gleaned from the media documentary evidence examined in the current case study research (Eastley 2011, Thompson 2011). Others have been named by associates or mentioned in court cases (INT1, INT5, INT6, CR1, CR2, CR3). Two residents said that between them they could recall the names of about thirty boys who had been in TIBT, and of those thirty, twenty had been incarcerated for murder (INT1, INT5). However, although no cause and effect relationship can be assumed, the connection is interesting because no other links have been made between violent crimes and a particular juvenile institution.

In later years I spoke with many men in the prison yard who had shared the same Tamworth experiences that I had. Most of them were serving life or lengthy terms of incarceration that would see them locked behind prison walls for the majority of their adult lives. Those conversations led me to an undeniable conclusion that Tamworth had played a significant role in molding their criminal attitudes during adolescence as it had mine (AUTO4).

A participant, who had been in Mount Penang, reported:

A lot of my friends went through Tamworth as kids. I met them later in life. Most are doing life for murder (MED10A).

Another resident had been in the Tamworth Institution for five months.

Tamworth kids had the attitude — kill or be killed. Everyone come out of there the same. That’s why there’s so many bloody murders. It gave us the killer instinct. Anyone who crossed us, we’d just cut their throats. I don’t believe that many of them were killers before they went to Tamworth. It changed our attitude altogether when we’d been in there (MED2).

Another interviewee, when he was caught and sentenced for stealing after running away from a juvenile institution, said,
I had to thieve to survive. I couldn’t do anything about that, but a man has got to live; a man has got to feed himself. Actually when I was caught I put my age up. I was only 16. I told them I was 18, so they sent me out to Parramatta gaol. I was a little bit scared there, a little blonde headed boy, 16 years of age, with all these hardened criminals. But I survived. I did not want to go back to Tamworth (INT5).

As a youth, Scott Simpson had been in the Tamworth Institution three times. After he was sentenced to life for murder, he killed his cellmate. He was found not guilty because of paranoid schizophrenia and committed suicide in gaol (Coroners Court 988/04 2004).

A regular resident in juvenile institutions, Arch (Mad Dog) McCafferty, a Glasgow-born former resident of TIBT, who in 1973 received three life sentences for leading a gang of six on a rampage through the western suburbs of Sydney leaving three people dead, wrote in his autobiography.

My life of crime was all I really knew about. That’s what the boys’ homes taught you when you were going through there, how to be a thief and be as treacherous as possible. Boys’ homes are a breeding ground for future criminals in our society and no one gives a damn about it. When you’re sent to institutions the key word is containment and not rehabilitation (AUTO 2).

Billy Munday, a former resident convicted of armed robbery, rape and kidnapping, agreed with McCafferty when he wrote in his autobiography.

When I take time to reflect now on my days in Tamworth and what they did to me, I can almost lay blame there for what I’ve done (MED3).

The Moffitt Royal Enquiry found that one former TIBT resident — Leonard ‘Lennie’ Arthur (Mr Big) McPherson had been before the courts seventy-three times (BIO7). He was a stand-over man whose his family rejected him. After he was not invited to his crippled mother’s seventieth birthday, he went round to her flat, tore the head off a white rabbit, and threw both head and body on the floor behind his horrified one-legged mother (BIO7).

A Sydney organised crime figure and illegal casino operator, George David Freeman, was linked to the Sydney drug trade and served several prison terms for theft. Despite accusations of murder, assault, race-fixing, bribery, illegal gambling and involvement in the drug trade, Freeman’s only criminal convictions after 1967
were for SP bookmaking in 1983 and 1986 (BIO6). After being in TIBT, he wrote a damning report of the institution in his book:

I don’t know anyone who came out of Tamworth in those days who didn’t go on with a life of crime. When it came to psychological pressure on young minds, I think the Tamworth boys’ home was probably the toughest, most damaging institution I ever saw the inside of. They could break kids in there. They would torture your mind with the pressure. It was mindless discipline, unproductive and cruel (BIO6).

It was a former TIBT resident, Arthur (Neddie) Smith, who as an adult became the most successful hit man in Australian history. He was linked to twenty-five shootings, fifteen murders and was also known as one of the biggest figures in the drug trade (BIO10). Neddie served many years of his life in prison — 1963-65, 1968-75, 1978-80 — for rape, armed robbery and murder. He was charged with eight murders, but he has only been convicted of one murder and is now in gaol for life. Neddie has suffered from Parkinson’s disease since 1981 when he was 35 (BIO10). He was described in court as being like many successful businessmen who used charm, manipulation and fearless determination to get ahead in life (NSWCCA202 June 14, 2000). Another report said his fatal flaws, anger issues, impatience and impulsivity were caused by his upbringing (BIO10). In a media interview, his ex-wife spoke of his confidence, assertiveness and control although she knew he was a great liar (Channel 7, Beyond the Darklands, August 17, 2009).

An interviewee described Neddie Smith when he was a boy as being gentle, kind and helpful before going to TIBT.

When I seen him come back from Tamworth, it was like having a kitten at Mittagong and having a bull terrier after Tamworth. It was unbelievable. He had changed completely (INT1).

However, other residents said that because Neddie was a “big tall boy”, the TIBT guards left him alone, and that officers at other juvenile institutions used him to punish boys for misbehaving. These residents believed that he enjoyed inflicting the violence. These conflicting reports about the same man demonstrate the individual effects of environmental experiences.
Another former resident, John Regan (Nano the Magician), who was a convicted multiple murderer, extortionist, pimp, child killer and violent thug, has been called the most violent and terrifying person in Australian criminal history (BIO8). He was known as “The Magician” because he had a talent for making those associated with him disappear without a trace (BIO8). In 1974, when the three-year-old son of his girlfriend was left in his care, the boy went missing. Regan was suspected to have killed the boy, but like all the other disappearances, there was no proof (BIO8). Diagnosed as a genuine psychopath, he enjoyed torturing animals when he was a child (BIO8).

When a convicted armed robber, Kevin Crump, who was serving a 28-year sentence, escaped with another resident from a hospital for the criminally insane, they committed eight armed robberies, kidnapped two 17-year-old schoolgirls and held them hostage while repeatedly sexually assaulting them over a 35-hour period before being recaptured (BIO2). His file was marked “never to be released” (BIO2). While in prison, he wrote:

I came out of Tamworth a hardened but scared boy on the verge of manhood. I left full of hatred…Sometimes, I would cruise parks looking for lovers sitting in their cars. We’d sneak up behind them and put a gun to their heads and take them to some hide-out. Then we’d bash the guy and rape the girl. I used to tell them after we finished that we were going to kill them, just to see the looks on their faces. There had been so many times I had been that scared of death, I just wanted to see their reactions (MED3).

Australia’s second most wanted criminal, another former Tamworth resident, serial escapologist, armed robber and murderer, Ray Denning, killed a prison officer during an attempted escape from Parramatta in 1976 (BIO3).

In 1973, James Richard Finch, a former TIBT resident, was found guilty of the Whisky Au Go Go Club firebombing in Fortitude Valley, Brisbane, where fifteen people were killed on 8 March 1973. Until the 1996 Port Arthur massacre, this corner of Brisbane was the site of Australia’s worst mass murders (BIO4).

Dennis Bruce Allen, dubbed “Mr Death”, a former Tamworth resident, built a substantial drug-trafficking empire while working as a property developer, enforcer,
police informer, robber and murderer (BIO1). Mr Death was believed to have been involved in up to thirteen underworld murders, including the dismembering of Hells Angels biker, Anton Kenny, with a chainsaw in 1985 (BIO1).

Police believe another resident, Christopher Dale Flannery (Mr Rent-a-Kill), who as a schoolboy swimming champion had a tattoo “Lunchtime” with an arrow pointing from his stomach to his genitals, was responsible for up to twelve murders before he went missing, believed murdered in May 1985. Charged with murder on a number of occasions, Flannery avoided convictions because prosecution witnesses disappeared (BIO5).

Jailed for fraud, a former resident of TIBT 1974, Peter Schneidas became the prisoner most hated by wardens. By 1979, this robber, prison escapee and member of the Grim Reapers gang was convicted of killing a prison guard with a hammer. He spent most of the next twenty years in solitary confinement before being paroled in 1998. He died shortly afterwards following a heroin overdose (BIO9).

7.6 Positive lifestyle changes
Three interviewees said that when they were in their thirties they chose to become “productive members of society” or “part of the community” or “have a life”, with two of them continuing their academic education. The first had been in TIBT twice:

As an adult I was into smash and grab robberies — reverse the car in, take the stuff and drive off. Didn’t matter how much money I had. I would commit the crime for the high. If someone had offered me money to kill, I probably would have (INT2).

However, after separating from his wife he chose to work and bring up his sons with love and attention, which he did successfully (INT2).

My sons needed me and I did not want them to experience a life like mine, so I made sure they didn’t by working hard and being a good example (INT2).

The second believed that going through Tamworth turned him to crime because it put his head into a spot where he contemplated committing crimes (INT4).

It is legitimate to say that had I not gone to Tamworth, there is a better than even chance there would have been LESS criminal activity in my
lifе. Tamworth is responsible for my committing more crimes. Tamworth reinforced that “might was right” (INT4).

He was saved by a group of people involved with prison review, who treated him like a human being with opinions. He now has a law degree and plans to operate a Greek tavern on a Mediterranean island (INT4). He believed that his first wife and children suffered because he could not show affection until he was in his thirties. Now, he is in a long-term happy committed relationship with another woman and all his children are working in careers that help people in society. However, he believed he was lucky to be helped in his improvement, and it was not something he could have done alone (INT4).

I began to believe I could be something when a group of people trusted me and believed that I had something worthwhile to contribute (INT4).

The third resident had no skills to live in the community.

I had no faith in society. I had no training to find accommodation or work so I lived in the bush by myself. I grew and made my own drugs, alcohol and food. I grew marijuana that I used as currency. Now, I believe that drugs, alcohol, religion, work, crime are a crutch. Which poison kills you first? (INT8).

Currently studying for his PhD, he said changing was a long journey (INT8). “I had a certain amount of self-arrogance so I survived, but not without a lot of heartache” (INT8). One day, he came to town carrying his only possessions in a small bag. Frightened and lonely at forty-five years of age, he had fallen into a black hole of despair. He was diagnosed with PTSD, which was attributed to the trauma of his youth, in particular his experiences at TIBT (INT8). Although he went back to the bush after he had been diagnosed, he made a conscious decision to change his life, which he has done successfully (INT8).

I had no lifestyle skills and no training to find accommodation or work. I had no faith in society…While living alone in the bush, I explored myself. I became self-aware and saw personal skills. I developed some spirituality while working through emotional pain. This bush life proved to me that I could live and learn, until finally, I became empathetic enough to live in society (INT8).

He did things in steps. He describes these steps as follows:

1) I stopped using drugs and alcohol as sedatives so could face fears and pain. I needed to appreciate what I had and not expect help.
2) I went to AA. Without AA principles, I would not be alive today. I learned not to be angry and took responsibility for myself, living each day.
3) I found my character. I became something or someone.
4) I applied for jobs, 80 in nine months, but I had no skills to offer, so got no interviews (INT8).

When he realised that he had to do something about his lack of skills, he again followed another logical sequence of steps:

1) I had to get some skills. I worked out what I wanted by deciding what I did not want.
2) I did a computer course.
3) I enjoyed studying, so went to TAFE to get the School Certificate.
4) I did well earning a pathway into Uni where I am now doing postgraduate studies (INT8).

7.7 **Summary**

Throughout this case study, the goal was to determine the effects of the residents’ experiences in the Tamworth Institution on their identities while obtaining an understanding of their behaviour and emotions, thus endeavoring to answer the research question: How does the experience of being an adolescent male in a punitive regime in a juvenile detention institution influence the former resident’s perceptions of self, subsequent offending activity and overall life course outcomes?

Normally, adolescence is a period of identity formation and role diffusion for young people while they develop a healthy self-concept. Likewise, a stable self-image is important if adolescents are to mature into productive adults. Not having encouraging positive adult examples during adolescence made it difficult, if not impossible, for the TIBT residents to develop a positive sense of self. This resulted in many residents experiencing depression, substance abuse and committing crime, as well as having an inability to form or sustain relationships. The TIBT males were incarcerated during their adolescence, which was a vulnerable period of their physical and emotional development. Social relationships are particularly important during this adolescent period of growth. Development of certain cognitive abilities could shift social ties and patterns of emotional regulation. Although there are individual differences in attainment, most adolescents begin to deal with cognitive tasks in a more abstract way than when they were younger, and to attain solutions to problems by comparing possible explanations and experiences. Adolescent males aged between
fifteen to eighteen years develop their identities, practise self-control and mature during these significant years.

The youths were this highly susceptible age when they were residents of TIBT. In order to develop a healthy self-image and learn how to act in a mature fashion, boys of this age need positive role models to (Kahne & Sporte 2008).

Boys with positive role models grow to have flexible, adaptive identities and confidence in their abilities…These role models provide a way for the boy engaged in vicarious learning through observation to elect to model the behaviors and emotional response patterns of mature men, so that his life will also be one of respect, dignity, and awareness of the full range of emotional experiences available to him (Horne & Kiselica 1999, p. 15).

Positive role models live their values, show respect and concern for others, are usually active in their communities, giving their time and talents to benefit people and are also linked to self-efficacy, which is the ability to believe in oneself (Kahne & Sporte 2008, Gibson 2004, Horne & Kiselica 1999). Instead of being positive role models, the officers in TIBT demonstrated to the boys that violence was an effective way to accomplish goals.

When analysing the qualitative data, it was necessary to listen to the participants’ narratives, because their perceptions described their realities. Investigating the psychological, physical and criminogenic effects of the adolescent residents’ institutional and shaming experiences, while endeavoring to explain their spoiled or degraded identities, their antisocial behaviour and criminal conduct, was the major purpose of this case study. An analysis of the residents’ narratives revealed their perceptions that their institutional and shaming experiences in TIBT had psychological, physical and criminogenic effects, which they believed affected their choices and the outcome of their lives.

According to the residents’ perceptions, being institutionalised in the Tamworth Institution negatively shaped their adult actions and responses to the possibilities of their lives. Although their experiences in other juvenile institutions would have affected them as well, these effects were not as compelling and long-lasting because the institutional routine was not as regimented or shaming, nor did
they forbid talking and peer relationships. It was the daily unjust brutal physical punishment for the smallest infraction, for example taking too long to pick up their latrine bucket or raising their eyes from the ground, or sometimes for no wrongdoing at all, such as asking for some extra toilet paper, which made the residents believe that their time in TIBT set them on a criminal path. Consequently, the adolescents’ punitive institutionalisation left many young residents with a lack of self-belief, feeling worthless, thus a degraded identity. They reported that they believed they were doomed to suffer and have violence in their lives, no matter what they did.

Young males in most juvenile institutions had the opportunity to rebel by absconding or fighting with their peers. Escaping and fighting were impossible at TIBT. The residents’ narratives illustrated that they believed they were “broken” during their time in this institution, and their identities spoiled. They strongly felt that the effects of their experiences contributed significantly towards their inability to make healthy choices. Three main criteria for the transition to adulthood are accepting responsibility, making independent decisions, and becoming financially independent (Feld 1998, p. 295). It is also imperative to keep in mind that the “transition to adulthood is characterised not by a single event, but by an extended process of preparation for the challenges and responsibilities of adult life” (Arnott 1998, p. 311). During institutionalisation at TIBT, the young adolescents were not given the opportunity to make decisions, and this impacted on their transition from adolescence to maturity. An incoherent sense of self and values as occurred in TIBT resulted in the lack of a sense of identity or degraded identity.

Although the effects of growing up in a government or religious institution differed between individuals, some major impacts were evident in most of the adult residents. Many suffered from post-traumatic stress after the institutional regime and lack of nurturing having been torn away from their parents as young children. Often, in TIBT, they were lied to about the state of their families and alienated from other residents. Being treated at a number and not an individual along with the disintegrative shaming degraded their identities. Many residents of TIBT reported having trust and security issues, as well as an inability to maintain stable, loving relationships, while being able to find and hold down an honest job was almost an impossibility. Some described having multiple failed relationships and abusive
marriages. Others could not trust anyone so remained loners, never marrying and living an isolated existence. Negative coping strategies, anger management issues, anxiety attacks, destabilised self-control, low self-esteem, lack of self-worth and inability to deal with or show emotions are associated with the self-defeating, destructive thoughts that were experienced by many TIBT residents. Their institutionalisation had ongoing negative effects on their adult lives including oppositional recidivism because most of the adults committed violent crimes with over 35 murders in the 1970s being attributed to ex-residents of the Tamworth Institution.
CHAPTER 8
Degraded Identities

You had to leave your identity at the door. The minute you walked in, your head was shaved, you were dressed in a uniform, and that was it (INT1).

8.1 Introduction
This case study analysed the long-term psychological, physical and criminogenic effects of the traumatic experiences in a punitive boys’ detention institution by examining the residents’ narratives, autobiographies, biographies and media articles, as well as court reports, government inquiries, psychological reports and survey responses of the adolescent residents in The Institution for Boys, Tamworth (TIBT). Listening to, recording and reading the participants’ stories (Swanborn 2010) connected to their time in TIBT was the core focus of this case study. The narratives provided information concerning the effects of punitive institutionalised treatment on the personal identity, self-control and self-esteem of former residents, and how this may have influenced their subsequent, possibly criminal, behaviour. This final chapter discusses the contribution of this research to enhancing understanding of the linkages between adolescent institutionalisation, degraded identities and negative life choices. Although it cannot definitively be shown that adolescent institutionalisation, even though brutal, causes or increases criminal behaviour, court records and residents’ narratives illustrated that many adult residents adopted criminal habits in later life. Therefore, being institutionalised in TIBT did not stop them reoffending, and often seems to have increased their propensity for criminal activities, in other words their time in TIBT could be seen as “oppositional recidivism”.

Every event has an effect on those people who experience it. This effect can be either minor or major, but it always exists. Adolescents who have experienced mistreatment often exhibit adult antisocial behaviour (Smith, Thornberry & Ireland 2005). The punitive physical and shaming punishments experienced by the adolescents in TIBT did not eliminate rule-breaking behaviour once they left the institution. Psychological and behavioural problems caused by their mistreatment could result in the residents having impaired competencies (Hodges & Wong 1996). Frequent interpersonal conflict as well as physical abuse could develop heightened

The research question asks: How does the experience of being an adolescent male in a punitive regime in a juvenile detention institution influence the former resident’s perceptions of self, subsequent offending activity and overall life course outcomes? Consequently, it was necessary to analyse the psychological, physical and criminogenic effects of the residents’ institutional experiences in TIBT. The residents were Forgotten Australians and, as adults, many have been convicted of violent crimes. Government inquiries, including the Federal Government’s SCARC into Forgotten Australians (2004/05), the Queensland Government’s Forde Inquiry (1999), the South Australian Parliamentary Inquiry into children in state care (2008) and the Western Australian Ombudsman’s investigation into the treatment of young people in residential care (2006) found that there was abuse and neglect of young people in most juvenile institutions during the twentieth century. These inquiries concluded that many young people suffered serious physical, emotional and sexual abuse. They also declared that the authorities failed to provide the basic needs of food, clothing and education.

The Forgotten Australians are a major part of Australian history. In December 2010, a new national history curriculum was endorsed that included a Year 10 unit on the Forgotten Australians (Australian Curriculum Grade 10 History 2014, National Museum Australia Units of Work 2014). A spokesman from the Australian Curriculum Assessment and Reporting Authority said this was an opportunity in the history curriculum for Forgotten Australians to be covered under the rights and freedoms section (Rout 2011). This research has made a contribution to the understanding of the Forgotten Australians; especially how the residents perceived their punitive regime in TIBT impacted on their adult life course outcomes. This thesis has shown that the cohort of youths, who were incarcerated in TIBT, are perhaps the “most forgotten” of those Forgotten Australians.
According to the inquiry into the Forgotten Australians, the majority of children in care were not orphans (SCARC 2004). Many had either one or both parents still living, or other living relatives. These children spent varying amounts of time in institutions and foster care (National Museum Australia 2014). Young people left institutions with few life skills or training to equip them to work for a wage and function in the community. Although some adult care leavers managed to obtain a job or changed their essentially delinquent lives with the help of loved ones or organisations, court records, the inquiries and this research confirm that many care leavers adopted criminal habits to survive (SCARC 2001, 2004). Departmental staff blamed an absence of standards prior to 1970 and a lack of institutional guidelines for their treatment of residents (SCARC 2004). However, TIBT seems to be the “most forgotten” of the “forgotten”, given that only three adults, who had been residents in the Tamworth Institution, gave evidence at any of the inquiries. No one seems to really want to know about these residents of the former boys’ home. Many of whom committed violent offences as adults, and found it difficult to function in communities.

In this thesis, the word “care” is associated with government state institutions responsibly providing the necessities for young people to become productive adults. This includes the right for all youths to have a safe, stable living environment with access to dental and medical services as well as education and job training opportunities. Most residents’ narratives about their institutional experiences, especially in TIBT, were pessimistic and depressing, with little hint of “care” associated with the government’s treatment of them. Equally important, the narratives highlighted not only the physical and emotional cruelties that a group of former residents experienced in what, in effect, was a punitive regime within a “care” system, but also how their perceptions of this treatment impacted on them as they sought to make their choices and decisions throughout their adult lives.

8.2 Methodology
As was discussed in the methodology Chapter 5, the residents’ narratives and the results of an online survey were presented as a basis for providing the data for this case study. Studying cases in natural settings and finding that individuals form meaning when they construct their reality is a qualitative inquiry process based on the
interviewees’ narratives (Gall, Borg & Gall 1996, Creswell 1998). With regard to narrative research, the interviewer’s role was as an active listener and learner, not an expert judging the former residents of TIBT. The forty-five narratives included references to the experiences that most affected the residents. Their stories demonstrated their perceptions that their care and experiences as adolescents in TIBT negatively affected them psychologically and physically, and these effects continued to plague them throughout their adult lives. The narratives including interviews, autobiographies, biographies and media reports illustrated how the residents perceived their institutionalised experiences in TIBT affected them. When the narrators described their experiences, they often repeated the details of an event that particularly affected them almost word-for-word.

All the interviewees for this research were volunteers, who told their stories in a safe setting at their own pace. Telling their stories of their experiences in the Tamworth Institution increased their awareness of the effects of the occurrences. While a repetition of themes, symbols and incidences in several narrators’ stories provided a composite picture of the events and experiences in TIBT, telling their stories to a sympathetic listener may have provided the foundation for healing, thus helping the narrators progress forward with their lives, knowing that their stories have been acknowledged and validated. The narratives allowed the tellers to include reasons for their acts and perhaps find causes (Sarbin 1986). When the forty-five narrative sources and twenty-four survey respondents’ answers were analysed to identify themes, patterns and relationships, it became evident that the former residents perceived that their punitive regime in TIBT was responsible for their negative choices, which the residents believed deleteriously affected their adult life course outcomes. However, during this research, there were a few positive stories from former residents, who with help, are living fulfilling honest adult lives (INT2, INT4, INT8).

8.3 Theories
Based on the three theories, which were discussed in Chapter 3, observations made over time to explained, interpreted and predicted the residents’ adult behaviour. After investigation, this case study significantly supported the theory that the effects of institutional experiences produce a “spoiled identity” (Goffman 1961, 1963) while not
allowing them the time to practise self-control (Hirschi 1969). Daily disintegrative shaming increased the adolescent individuals’ belief that they were inherently defective (Braithwaite 1989, Gilbert 1992, 2003, Gilligan 2003, Tangney & Dearing 2002), thus sustaining the fact that the identities of the TIBT residents were degraded.

The effects of juvenile institutional abuse in the nineteenth and twentieth centuries in Australia were numerous and disconcerting for the safety of the community (SCARC 2004, Quinn 2004, Richards 2011, Holman & Ziedenberg 2006). Although the experience of residing in the Tamworth Institution affected each resident differently, common themes were identified that supported their “degraded identities”, demonstrating that the punitive institutionalised regime negatively affected their life outcomes. The first of these themes was the practice of the authorities to call the youths by their surnames or even more impersonal, a number, thus beginning the degrading of their personal identity. These institutionalised individuals continued to oppress their identities by becoming one of a group that had to perform as instructed. The impact on the lives of the individuals were extensive and long lasting including low self-esteem, anger management issues, anxiety disorders, depression, inability to trust and empathise, nightmares, dysfunctional relationships and intimacy difficulties until they have degraded identities. They did not have the opportunities to develop the capability to form stable, intimate relationships or the cognitive and psychological resources to face the challenges of adult life.

When they were young, lack of family contacts was common for the young people in out-of-home care; especially when siblings were deliberately separated in institutions, and contact with parents and relatives was restricted. All the residents were separated from their families and were not allowed visitors, and some were lied to about the death of their parents. According to most of the narrators, no visitors were allowed to come and see them at TIBT. Consequently, the adolescent boys were disconnected from the outside world. Even though they were only in the Tamworth Institution for six months, it was during a formative part of their development. The adolescent males in the Tamworth Institution were not allowed to socialise with or speak to each other. Therefore, as well as having no contact with their families and the community, they were unable to develop friendships or have peer support. The adolescents at TIBT did not develop intimate attachments, aspirations and moral
beliefs, which are supplied by positive parental nurturing or constructive role models, to help them live lawful lives. This separation between them, their families and the rest of the world increased their propensity for deviant behaviour (Hirschi 1969) while their institutionalisation degraded or “spoiled” their identities (Goffman 1961, 1963) and the disintegrative shaming degraded their personalities (Braithwaite 1989). This institutionalised alienation reflects a low degree of community integration and a high degree of distance or isolation between individuals. Although the male adolescents were only in TIBT for about six months, it was during a formative part of their development that they were marginalised from their families and society, so there were long-term negative effects, often still evident in old age.

The relationship role modelling of the TIBT adolescents was based on witnessing vicious behaviour, which the residents perceived produced their abusive patterns in their adult behaviour. Peer influence plays a fundamental role in orienting juveniles’ behaviour and “deviant behaviour is no exception” (Gatti, Tremblay & Vitaro 2009, p. 991). But, due to the fact that the residents were forbidden to intermingle with each other at any time, it was difficult to learn anything from their peers including criminal skills, which was common in most juvenile institutions. However, TIBT may still have been a criminogenic environment where anger and frustration festered within the adolescents breeding resentment, bitterness and hostility while they endured the brutal punishments and disintegrative shaming in an institution that degraded their identities.

Many narrators believed that the success of their relationships involved controlling their partners, and that being violent, which some regretted, was part of any relationship. When their marital or de facto relationships failed, the men focused on other issues, often, criminal activities as a means of avoiding intimacy difficulties. Due to their problems maintaining functional relationships, many residents reported that when they became parents and lost contact with their children, they accepted this situation because of their own fragmented family background.

Adolescence is a period of identity formation and separation from adult caretakers. This time can be a confusing time even when it is unfolding in a safe environment, so would be even more bewildering for the institutionalised youths. It is
a time when adolescents question their parents and authority, and are influenced both positively and negatively by their peers. The self-belief of males during adolescence greatly affects the forming and development of their adult identities because it was only with a strong sense of identity, self-belief and high self-esteem that people correctly integrate into a stable society. The TIBT adolescent residents’ self-image, self-esteem and individuality, which were part of their identities and awareness of them, disappeared. When comparing the ego identity, which was how the institutionalised resident felt about himself, with the more external pragmatic personal identity seen by others, the time before and after the forming of the “spoiled identity” has to be considered (Goffman 1961, 1963). He suggested that stigmatised or spoiled individuals had corrupted their perspectives and they were not necessarily as flawed as they thought they were (Goffman 1963). Adolescents with spoiled or degraded identities have a lack of motivation, social anxiety and depressed mood and anger (Goffman 1963). The adolescent residents of TIBT presented a hostile antisocial attitude, which increased in intensity and scope after receiving negative comments, physical punishment and disintegrative shaming until all the males believed they did not deserve to be loved or were not good enough for society. This provided the foundation for low social expectations and interpersonal effort, thus because of these degraded identities they did not mature into responsible adults.

People construct a set of expectations for acting in society (Goffman 1963). Even so-called “normal” adolescents can be difficult and unnerving, make mistakes and take time to learn from their experiences, when adults denigrate them for having opinions. When the adolescents were in TIBT, the guards adopted regulations and controls to maintain order and containment, not “care” of the residents. Not surprisingly, most adolescent residents of this total institution resented this brutal regime. Some refused to cooperate, increasing the antagonism between the guards and themselves. To sustain order, the guards increased the brutal and shaming punishments. The guards had total control, removing the residents’ ability to think for themselves or make choices, thus they could not practise self-control. The data for this case study illustrated that because of the violent controlling atmosphere at TIBT and the uncaring approach by the wardens and guards, the common result for the male adolescents was a severe ongoing loss of self-esteem and trust. The young people had to either accept an extremely diminished sense of self or be punished for disobeying
the rules of the institution. Their brutal punishments, labelling and shaming contributed to their stigma of degraded identity.

There is evidence that stigmatised people exhibit impaired intentional and physical self-control as well as psychological problems, which can have criminal consequences (Hirschi 1969, 2004, Inzlicht, McKay & Aronson 2006, Link et al. 2001, Haghighat 2001). An institutionalised routine does not allow for practising self-control or decision-making because the staff members in most juvenile corrective centre use physical punishments to reinforce disciplinary standards and regulate self-control (Cox 2011). Because of the regulated institutionalised lifestyle, the adolescent males in TIBT did not learn to practise self-control, make personal choices or to be responsible for their own actions. They described their discipline of adaptation within TIBT as humiliating. The effects of the adolescents’ institutionalised experiences included trauma, such as anxiety and depression (Gover & MacKenzie 2003, Singer et al. 1995, White et al. 2010, Holman & Zeideberg 2006, Steiner, Garcia & Matthews 1997). When the adolescents in TIBT were adults, they were unable to activate self-control in their degraded identities, which contributed to their oppositional recidivism, thus being a major factor towards future criminal behaviour.

Disintegrative shame, which is felt when the offender believes he or she is flawed to the core, can lead to addictive behaviour because of the excruciating pain it causes (Braithwaite 1989). It is a much more debilitating emotion than the shame that is felt about performing an undesirable action. Disintegrative shaming is designed to humiliate an individual (Karp 2000). Disintegrative shame attacks the core identity producing complex trauma (Bradshaw 2005). Disintegrative shaming is a major contributor to psychological problems and aggressive behaviour (Braithwaite 1989, Gilbert 1997, 2003, Bradshaw 2005, Gilligan 2003, Tangney & Dearing 2002, Crossley & Rockett 2005, Dearing, Stuewig & Tangney 2005, Feiring, Taska & Lewis 2002, Andrews et al. 2000, Ferguson et al. 1999). The painful, disruptive emotion of disintegrative shame negatively affected the TIBT residents’ self-image because the self, not the individual’s behaviour, was the object of judgement. Often the imagery of how an individual’s defective self could appear to others was enough to cause shame.
Symptoms of anxiety and depression as well as low self-esteem have been found in adolescents during their incarceration in juvenile corrective institutions (Gover & MacKenzie 2003, Singer et al. 1995). Youths in institutional confinement were anxious because they were afraid of victimisation or the isolation made them feel helpless and depressed (Holman & Zeideberg 2006, Steiner, Garcia & Matthews 1997). Adolescents in juvenile institutions have more psychological illnesses than they unconfined peers (White et al. 2010). However, there is a possibility that arrest and confinement could trigger untreated psychological problems, so it may not have been their time in institutions that caused all their anxiety and depression (White et al. 2010).

When the TIBT residents were affected by disintegrative shaming they each had the core conviction that they were bad, lowering their self-esteem and confidence. Adolescents affected by disintegrative shaming can more easily become part of criminal peer groups (Bradshaw 2005, Braithwaite 1989). This disintegrative shaming, a daily occurrence in TIBT, plus the lack of education, vocational training and an inability to earn a wage significantly negated the self-belief of the TIBT residents, spoiling their personal identities. This case study identified how the residents perceived the effects of their institutional and shaming experiences in TIBT contributed to their degraded identities and, therefore, negatively affected their adult life course outcomes. Many of the adults, who had been residents in TIBT, were convicted of criminal offences (often of quite a violent nature), so that while the aim of TIBT was to thwart offending in juveniles it appears to have an opposite outcome. The TIBT boys were offending or re-offending as adults, in spite of or because of, the treatment they received in the Tamworth Institution.

8.4 The Institution for Boys, Tamworth
The historical information connected to the routine in TIBT, outlined in Chapter 2, supported the negative themes in the residents’ narratives, the long duration in solitary confinement as well as the Auburn System including the “no talking rule” and marching at double quick time. When the administration of the NSW Juvenile Correction System was investigated, it was found that all other juvenile centres were designated as either “training schools” or “shelters” in compliance with the Child Welfare Act 1939 requirement (Quinn 2004). However, TIBT was an institution,
which was meant to confirm the notion that its purpose was for punishment and
deterrence of adolescents aged from fifteen to eighteen, who had absconded from or
misbehaved in other institutions or who were convicted of petty offences while they
were runaways (Quinn 2004). The adolescent residents did not receive any education
or vocational training in the Tamworth Institution. To occupy their time they moved
rocks, plaited ropes and scraped the iron grill with a metal object while in solitary
confinement. Their lack of education, particularly with regard to the skills that would
equip them to earn a living, severely limited their life course choices and outcomes.

The panoptical shape of the Tamworth Institution’s buildings ensuring that the
residents were consciously and permanently under surveillance supported the “system
within a system” model described by Michel Foucault, a French philosopher, historian
of ideas, social theorist and philologist. Organised according to the Auburn System,
the adolescent residents always marched in single file at double time, worked in
silence during the day with eyes cast down at least two metres apart, and slept in dark
solitary cells from 7 pm to 6 am. The Tamworth Institution was described by one
source as the “Frankenstein monster” of a bygone era (MED10B). TIBT is still
cloaked in secrecy by the NSW Child Welfare Department. However, its regime
seems to have served no other purpose except to brutalise and emotionally scar male
adolescents. Instead of stamping out juvenile delinquency, their adolescent
experiences in TIBT had the opposite effect by contributing to their repetition of
undesirable behaviour or recidivism as adults.

By the end of the nineteenth century, most Australian states had established
Children’s Courts and developed legislation to protect children from severe physical
abuse (Tomison 2001). The State Courts were supposed to be benign institutions that
acted in the best interests of the juveniles. However, by the late 1960s, the courts were
criticised for their failure in the rehabilitation of youths and their failure to protect
young people’s rights (Strang 2001). It seemed that benign juvenile justice systems
produced the same level of reoffending as punitive institutions (Smith 2005). But,
other studies documented the harmful effects that disciplinary institutional care had
on the development of adolescent residents (Provence & Lipton 1963, Spitz 1965,
Schwartz & Proctor 2000). The use of dominating and coercive activities in corrective
institutions similar to TIBT, as well as the disciplinary rules and routine, forced the
residents to be unable to think for themselves, severely impeding their self-control (Zald & Street 1964, Berg & Kelly 1979, Quinn 2004, Halsey 2006, Inzlicht, McKay & Aronson 2006, McFarlane 2008). Low self-control has been linked to criminal activities (Hirschi 2004).

The staff in the Tamworth Institution were authoritarian, cold, uncaring, brutal and sadistic (SCARC 2004). Besides being brutally bashed, the adolescent residents were forced to perform demeaning, shaming tasks. This case study established that the regime for controlling residents included how many steps around the bed when making it, the direction to walk while wiping the dishes so they were always facing the officer-in-charge, not being able to talk at any time, and only being allowed three pieces of toilet paper a day. As well as punching and kicking, punishments included starvation, wearing a cardboard box or blinkers on their heads and solitary confinement, known as segregation, for several days. These regulations were concerned with control and disintegrative shaming, not improvement and reintegration.

Institutionalised adolescents have elevated levels of interpersonal sensitivity and paranoid ideation (Vaughn et al. 2009). Others with primary psychopathic tendencies exhibit low levels of anxiety and depression. Usually youths reoffend when released from juvenile corrective institutions (Greenwood 2005), as was demonstrated by actions of the TIBT residents. If adolescents thought people believed they would cause trouble, they assumed antisocial attitudes, thus, fulfilling the criminal prophecy (Heimer & Matsueda 1994). TIBT residents witnessed abusive behaviour on a daily basis. They were taught that they were worthless. Their time in the Tamworth Institution frequently involved survival issues, so they trusted no one.

A person’s satisfaction of self or high self-esteem leads to feelings of self-confidence (Maslow 1970). The TIBT residents were not given the opportunity to safely trust themselves and others, so they could not develop self-confidence. The routine and regimentation in TIBT restricted the residents’ development of self-control, which is an individual’s conscious and deliberate action to make choices. Self-controlled individuals can regulate their impulses, alter their emotions and thoughts and refrain from acting on undesired behavioural tendencies (Muraven,
Pogarsky & Dikla 2006, Muraven & Baumeister 2000). The regime at the Tamworth Institution isolated the youths, so did not foster cooperation or an egalitarian ethos.

During the course of this case study the remarks of District Court Judge Dennis Challeen (1986, pp. 37-39), which were written in Chapter 1 about the system doing the exact opposite to what it was trying to achieve with juveniles, were considered including oppositional recidivism. For example, destroying their self worth, degrading them, subjecting them to cruelty and putting them where the tough guy is respected and violence is all around them; society wants them to be non-violent, but expects them to take control of their own lives and own their problems, however, uses institutionalisation to make them dependent, and does not give them the opportunities to practise self-control. Support for the judge’s observations became obvious when the narratives revealed that TIBT destroyed their self-worth by degrading them and making them feel insignificant and useless, while subjecting them to violence, brutality and cruelty. Thus, it was undeniably a brutal regime.

8.4.1 Punitive regime
The residents were shamed and violently beaten on almost a daily basis while detained in TIBT (INT1, INT3, INT5, INT6, AUTO2, BIO6, MED7). When the young residents were brutally punished, they grew to despise and disrespect the authorities, but learned that violence achieved what the guards wanted — order, control and containment. The adolescents’ actions were restricted and regimented giving them no opportunities to practise self-control. Their degraded and spoiled identities seeped into every aspect of their daily lives. As the narratives of the residents were told, it was established that the punitive Tamworth Institution was a criminogenic environment, contributing to the formation of predatory criminal morals, thinking and behaviour, as resentment and anger festered inside them. This punitive environment is hardly one that is likely to reduce their rate of recidivism.

Regular physical violence during adolescence is associated with suicide attempts, alcohol and drug dependence, as well as depression and anxiety (Gershoff 2002). A punishing environment is associated with a wide range of negative health outcomes (Lopez, Bonenberger & Schneider 2001). What became apparent from the former residents’ narratives was that besides brutal physical punishment, the
adolescent residents experienced disintegrative shaming, labelling, stigmatisation, solitary confinement, social isolation, restriction of freedom, tedious routine and over-regulation, which are the characteristics of institutionalisation thus leading to a degraded or “spoiled” identity (Goffman 1961). The disintegrative shaming and brutalising actions of the guards and the neglect of the officers of the Child Welfare Department demonstrate a desire to contain and suppress, not reintegrate. These research findings demonstrated that the brutal institutionalised routine and disintegrative shaming degraded the residents’ identities and negatively affected their life skills. The various phases of personal identity and self-control were examined in Chapter 4, where it was also shown that several studies supported the finding that having low self-control contributes to detrimental life choices including criminal behaviour (Inzlicht, McKay & Aronson 2006, McFarlane 2008, Quinn 2004, Berg & Kelly 1979).

8.5 **Empirical Findings — Degraded Identities**

Self-identity or personal identity is composed of relatively permanent self-assessments, such as values, skills and aptitudes, as well as awareness of one’s physical attributes, which contributes to self-belief and self-esteem. Adolescence is a complex developmental process with dramatic biologic changes in the brain. If adolescents do not form a logical sense of self with coherent values, they will lack a reliable sense of personal identity and low self-esteem as adults (Erikson 1980). Low self-esteem during adolescence predicts negative consequences during adulthood (Trzesniewski et al. 2006). The TIBT adolescent residents’ personal identities were the ways they looked at themselves and their relationships to the world. Daily, they lived in fear of brutal punishments. These fearful feelings continued through their adult years, so they were anxious, antisocial and depressed throughout their lives, often generating negative life outcomes.

According to the adult residents’ perceptions, the punitive regime of TIBT appears to have degraded their identities, leaving them with relationship problems, anger issues, violent tendencies, nightmares and in some cases drug dependency. Most former residents in TIBT reported that as adults they often lost their temper and got into arguments or fights with other people even loved ones. They also demonstrated antisocial and aggressive behaviours, frequently using violence in
relationships, as well as bullying tactics and forceful methods to resolve conflicts. Some of the adults admitted being violent towards partners or children. Following the disintegrative shaming, regimented control and brutal punishments in TIBT, most residents reported they felt worthless and useless, so they had degraded identities.

The adolescent residents in TIBT had been in other juvenile centres, but these institutions did not follow the Auburn System of not allowing residents to talk, forcing them to keep their eyes lowered and always marching at double time. Residents sometimes absconded from these other institutions, but it was impossible to run away from TIBT. The boys were adolescents during their time in TIBT; therefore, this was a time when their experiences greatly affected their core identities and many brain functions were developing and changing. Adolescent youths without a father figure or positive role model have negative outcomes in many facets of their lives. Their narratives demonstrated that the residents perceived that their experiences in the Tamworth Institution negatively affected their perceptions of self, subsequent offending activities and their life course outcomes, much more than any other juvenile or adult institutions.

The adolescents in TIBT lived in a regimented environment, so they did not practise self-control. Therefore, as adults they lacked the ability to control their emotions and desires in the face of external demands. They did not know how to activate their self-control, so could not refrain from acting on undesired behavioural tendencies. Examples of this negative, often criminal behaviour, were evident in their adult narratives, showing that they lacked the skills and aptitude to self-regulate or use self-control. They responded to immediate impulses, whereas a person with self-control can plan and evaluate alternative actions so they can refrain from doing things they will regret thus developing wisdom and willpower.

Adolescents, who are searching for their identity while learning to control and express emotions in a mature way, could go through extreme emotional turmoil. The narratives demonstrate that the adolescents’ institutional experiences in TIBT did not increase their self-belief in their abilities to be positive members of their communities. Therefore, the punitive events may well have increased the residents’ lack of self-
belief, lowered their self-esteem and lessened their self-control, thus degrading their identities.

Humiliation and rejection have the power to shame all people, especially adolescents, who could be more susceptible during this transitional stage of human development. These shamed people become critical, hostile and feel persecuted. Their disintegrative shaming experiences in TIBT caused the adult residents to believe they were flawed or spoiled with degraded identities. Although the residents’ psychological problems could have begun before they were incarcerated in TIBT, both in other institutional environments or family situations, their brutal institutionalisation and shaming experiences in the Tamworth Institution would have undoubtedly caused them long-term psychological harm and increased their lack of empathy, and most probably were responsible for their oppositional recidivism.

People, who ignored, dismissed or repressed their negative emotions, can become ill (Rishipal 2013, Johnson 2008, Bradshaw 2005). The adolescent residents did not receive adequate health care in TIBT or other juvenile corrective centres. All of the interviewees have physical illnesses and scars, which came from their punitive treatment in juvenile institutions. Most former residents have chronic respiratory diseases and back problems and cannot afford the necessary health care now. Many residents have difficulties with self-care at home, but have no money to reside in nursing homes. Some residents live in unhealthy conditions, choosing not to go into nursing homes because they fear being institutionalised again. However, what the present research does not show are the specific elements of the TIBT regime that were most destructive and which, if any of these, survive in current juvenile custodial regimes.

8.6 Current juvenile incarceration
In 1977 the Australian Institute of Criminology (AIC) began its collection of data on juveniles in detention. The institute invited state welfare departments to submit quarterly returns on the numbers of juveniles held in detention. Although the AIC found that the number of juvenile detainees per 100,000 head of population dropped from 64.9 in 1981 to 37 in 2008, it affirmed:
an over-representation of Indigenous juveniles in detention and an increase in the proportion of juvenile detainees remanded, rather than sentenced (Australian Institute of Criminology 2013).

The majority of studies that have examined Australian juvenile institutional care have described it as a criminogenic environment that is costly, unrehabilitative and increases recidivism (Seymour 1988, Atkinson 1993, Quinn 2004, SCARC 2004, Richards 2011). This case study of a juvenile institution many decades ago has not disputed these findings and the negative consequences on those institutionalised adolescents continue to exist during their adult lives. It is disappointing to note that there were still major problems in Australian juvenile institutions in 2011 when representatives of the Royal Australasian College of Physicians investigated the health and wellbeing of incarcerated adolescents. They advocated that governments make changes to improve health and social outcomes for adolescents in institutions.

However, there have been some changes in the juvenile justice landscape since the 1970s and the brutal conditions of the Tamworth Institution. There are now more options in the adjudication phase, in particular restorative justice, sometimes referred to as family conferences, across most jurisdictions in Australia. All parties involved in an offence come together to talk and resolve collectively how to deal with the outcome of the offence and its implications for the future (Marshall 1996). Despite the still-prevailing punitive attitudes to youthful offenders, and a greater variety of juvenile punishments including warnings, fines and community service, it has been demonstrated that reoffending by young people who attended court, received community service or were institutionalised, was reduced by twenty per cent across a range of offences for those who attended restorative conferences (Luke & Lind 2002). There is a great deal of support for restorative justice (RJ) initiatives in the community and among victims, who have participated. RJ appears to be less expensive and a more efficient way of finalising criminal cases involving young people. The bulk of studies before 2007 found lower rates of reoffending among youths dealt with via RJ than among offenders dealt with in court of other programmes, but further investigation in 2012 found that, in contrast to most of the earlier research, there is no clear evidence to support the hypothesis that RJ is more effective against recidivism than those who do not attend RJ sessions (Weatherburn 2013).
Australian juvenile males have been detained in juvenile correction facilities at consistently higher rates than female juveniles (Richards & Lyneham 2010). These researchers also acknowledge that the rates of both males and females in juvenile detention have decreased substantially since 1981. Although the numbers detained are lower, this report suggests that there could be a number of reasons, such as offenders committing less detectable offences (Richards & Lyneham 2010). In NSW, there has been a thirty-one per cent decline in the number of male juveniles detained since 1981. However, the number of juveniles in detention has risen since 2004. At the 30 June 2008, there were 841 juveniles confined in Australian institutions (Richards 2011).

In 2008, there were seven juvenile justice centres in NSW, nineteen in all the other states (Richards AIC 2011). These juveniles generally committed crimes including graffiti, vandalism, shoplifting, fare evasion, motor vehicle theft, unlawful entry and road traffic offences (AIC 2013). The AIC published the objective of juvenile custodial facilities on their website:

> to provide a humane, safe and secure environment, which assists young people to address their offending behavior and to make positive choices about their lives, both in custody and upon their return to the community (Juvenile detention centre standards 2009).

Nevertheless, in 2014, young people in NSW over the age of sixteen years, who are considered serious offenders or who misbehave in other centres, were sent to Frank Baxter Kariong Juvenile Justice Centre, where it seems there was a similar punitive routine to TIBT. Since 1999, there have been allegations of Kariong staff beating and assaulting youths, many incidents of self-harm and suicide attempts and excessive time in solitary confinement. After a government review only interviewed the workers at the centre, not the young male residents, the committee members were dismayed when Parliament prevented the publishing of their report. In spite of this, the committee still published that, “the evidence given was overwhelmingly consistent and deeply disturbing” (GPSC Report 2004 p. 18).
8.7 Further research

More studies are needed in order to discern adolescents in corrective institutions negotiate their identities while moving into adulthood. Such studies would involve analysing the effects of their degraded identities, including self-esteem, self-confidence and self-control, by testing the residents level in these traits before entering the juvenile institution, while in detention and after leaving the institution.

Further research should also assess the particular structure of adolescent rehabilitation programmes and the people who implement them. Specifically, research could focus on implementing and then evaluating the skilled training of personnel, who work with young people in corrective institutions. The current case study strongly supports a model where young people have adult role guardians, who support them and who can provide positive examples of socially constructive behaviour. Without being too prescriptive the current case study suggests that the vocational programmes need to be practical, providing job skills and the life skills of communication, goal setting, conflict resolution, responsibility, financial management and self-motivation.

Future research could investigate if, when the males leave the institution, their training improved their skills and opportunities for employment in the community, where they need to earn a wage that can support their families and themselves. This is imperative because some vocational educational courses train candidates for jobs that they may not be able to secure when they return to the community with a juvenile or criminal record. For example, it may be very difficult for a qualified accountant to obtain employment after being in prison.

One possible, though tangential inquiry arises from a landmark study by researchers from the University of Pittsburgh. They concluded that lack of sleep during adolescent years increases the risk of developing Type 2 Diabetes (Matthews et al. 2012). The teenage residents in TIBT rarely slept a full night without being disturbed by guards or wardens. It would be interesting to investigate the medical problems of former residents and how they may have related to sleep deprivation while in juvenile custody.
Children and families are still being traumatised by current state and territory government practices of removing of children based on the recommendation of one caseworker. A report, *Estimate of NSW Children Involved in the Child Welfare System*, released by the Department of Human Services (Zhou 2010), shows that in June 2009, “27 per cent of NSW children under the age of 18 years were known to Community Services” (Zhou 2010, p. 8). A further one per cent of children under eighteen (approx. 16,523) in NSW were living in out-of-home care. Approximately two per cent of NSW children aged under eighteen years have lived in out-of-home care at some time in their lives. Over a third of children (37.3%) discharged from care during the 2012-13 year in NSW had been in care for four or more years; 21.8% had been in care for eight or more years (Library Council of New South Wales 2015). The recommendations of the Forgotten Australian inquiries could be implemented, and the results assessed to ascertain if the children in need are experiencing better lives.

In many Australian states, it has become fashionable to advocate boot camps as replacement facilities for juvenile corrective institutions. In NSW, they are military-style boot camps, but instead of the soldiers, there are teenage recruits facing their own personal battles. Teenagers come from communities with serious rates of crime, alcoholism and domestic violence. Some research has been conducted into boot camps (Dept of Justice & Attorney General Qld Gov 2013, McKenzie et. al. 2001), but there has been no longitudinal study. However, it should be noted that Queensland abandoned the camps in 2015 because they were expensive and had not lowered the recidivism figures (D’Ath 2015).

Research needs to be conducted into the environments of juvenile offenders’ facilities. Over a ten-year period, the lifestyles of a sample of adolescents in selected boot camps, a sample of adolescents in juvenile corrective institutions and a sample of adolescents who have been given a warning or community service, could be carefully followed using a longitudinal paradigm. By following them through their adult lifestyles, it may be possible to identify the consequences of these various sentencing outcomes including the rates of recidivism, as well as any physical or psychological effects. However, longitudinal studies are by their nature expensive and time consuming, but much can be gained from their careful implementation.
8.8 Conclusion
This case study investigated the Institution for Boys, Tamworth, generally considered to be one of Australia’s most brutal juvenile corrective centres, where the adolescent residents are the “most forgotten” of the Forgotten Australians. Their treatment in this institution, which operated from 1948 to 1976, is a historic example of the inhumanity and brutality of juveniles placed in institutional care. An analysis of the themes, patterns and meanings in the residents’ narratives of their institutional experiences identified their degraded identities and their propensity for further antisocial and criminal behaviour. The adolescent residents’ institutionalisation and disintegrative shaming had long-term negative effects throughout their adult lives.

After being alienated from their families, the institutionalisation of the adolescents commenced when they were denied personal clothing and had to wear uniforms; their heads were shaved; they were referred to by number rather than name; they were not being allowed to raise their eyes to anyone’s face and not talk to other residents. These regulatory forms of governance marked a separation between the residents’ former selves and their institutional selves. Besides being violently punished, of particular concern were the disintegrative shaming processes, which regularly occurred including describing their bowel actions to the guard, digging their own graves, licking the boots of guards and spending days in solitary confinement in a cell that excluded light and sound.

Quotes in Chapter 6 and the display quotes at the beginning of each chapter support the proposition that the institutional experiences and disintegrative shaming incidents, which occurred during the particularly emotional time of adolescence, contributed significantly towards the degraded identities of the adult residents and their inability to practise self-control. Consequently, these degraded identities contributed to the residents being unable to make positive life choices during their adult lives. The data also demonstrated that the institutional experiences had psychological and physical effects on their life course outcomes.

However, their experiences in TIBT alone may not have been responsible for the adult residents’ life course outcomes. It must be considered these males were also residents in other institutions during their youth and many of them experienced family
violence before being institutionalised in the Tamworth Institution. Many males were taken from their families at a young age, and forced to work in juvenile institutions, operated by government and religious organisations. Most of these detention centres did not provide care or education and had strict, sometimes brutal regimes. Therefore, some negative attitudes and behaviours of the residents of TIBT could have been established before being in TIBT. But, when all the sources including narratives and survey answers were analysed to identify themes, patterns and relationships, it became evident that the residents perceived that the punitive regime in TIBT negatively affected their adult life course outcomes. This is borne out in their claims about the restrictive nature of their social interactions during their entire incarceration in the Tamworth Institution, where they were forbidden to form relationships and lacked support of their peers in enduring the punitive practices. Nevertheless, contrary to the prevailing philosophy of the time, a regime of disciplinary punishments did not stop recidivism. The males continued to reoffend after leaving TIBT, absconded from other juvenile institutions and were found guilty of crimes as adults.

This case study suggests that the punitive institutional environment, which the residents of TIBT experienced, did not reduce criminal behaviour, but instead as the residents perceived, it increased their propensity for contempt, anger, violence and further antisocial acts including serious crime. Some evidence supporting this proposition is that adults, who had been incarcerated in the Tamworth Institution, murdered at least 35 people and many others were convicted of violent crimes and sentenced to long prison terms. However, this was not necessarily the case with all the former residents, as there were complex and nuanced interactions found between the TIBT environment and the consequent effects on any one individual’s self-control, self-esteem and personal identity.

From their stories, nearly all the former residents believed that out of all the institutions and places in which they resided during their childhood, adolescence and adulthood, the Tamworth Institution was the only one that gave them nightmares and filled them with anger, despondency and abhorrence. It can never be known definitively if these feelings together with their degraded identities and destabilised self-control only originated from their lives in TIBT or were the only reasons that led to their repeat offending, some of which were extremely violent. Of significance
though, is the fact that the residents themselves said in their narratives that they
believed their experiences in TIBT was a significant factor in their subsequent
recidivism. While the aim of the Tamworth Institution was to thwart offending in
juveniles it appears to have an opposite outcome with the adult ex-residents offending
and re-offending, and being determined to be as violent as their guards and wardens in
TIBT. As one former resident expressed it:

    When we got out of Tamworth, nobody was going to be able to treat us
    that way again (INT4).

    This research gave former residents of the Tamworth Institution a voice and,
in telling their stories, helped provide an understanding of the effects of punitive
treatment in an Australian juvenile corrective institution. The stories of these men,
who can be considered the “most forgotten” of the Forgotten Australians, are
significant because of what they state about the effects of this type of juvenile prison,
if only because the mistakes of the past should never be repeated.
References


Degraded Identities 211 Dianne McInnes


Degraded Identities

Degraded Identities
Dianne McInnes
238


Ritter, Leonora. (1999, December 9-10). *Inventing Juvenile Delinquency and Determining its Cure (Or, How many discourses can you disguise as one construct?).* Paper presented at the History of Crime, Policing and Punishment Conference convened by the Australian Institute of Criminology (AIC) in conjunction with Charles Sturt University. Canberra


Appendix 1  Residents’ Names

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Appendix 2A  Ethics Approval

19 April 2011

Prof Paul Wilson, Dianne McInnes
Faculty of Humanities and Social Sciences
Bond University

Dear Paul and Dianne

Project No: R01268
Project Title: The adult criminological consequences of teenage male institutionalisation: A case study of the Institution of Boys, Tamworth 1948-1976

I am pleased to confirm that your Project, having been reviewed under the Full Review Procedure, has been granted approval to proceed.

It is important to remember that BUHREC's role is to monitor research projects until completion. The Committee requires, as a condition of approval, that all investigations be carried out in accordance with the National Health and Medical Research Council's (NHMRC) National Statement on Ethical Conduct in Research Involving Humans and Supplementary Notes. Specifically, approval is dependent upon your compliance, as the researcher, with the requirements set out in the National Statement.

Additionally, approval is given subject to the protocol of the study being under taken as declared in your application, with amendments, where appropriate.

As you may be aware the Ethics Committee is required to annually report on the progress of research it has approved. We would greatly appreciate notification of the completed data collection process and the study completion date.

Should you have any queries or experience any problems, please liaise directly with Caroline Carstens early in your research project: Telephone: (07) 559 54194, Facsimile: (07) 559 51120, Email: buhrec@bond.edu.au.

We wish you well with your research project.

Yours sincerely

Dr Mark Bahr
Chair

www.bond.edu.au
Appendix 2B  Participant’s Explanation

Date: 1 March 2012


BUHREC Protocol Number: RO1268
Dianne McInnes is doing research under the supervision of Dr Paul Wilson OAM, Professor and Chair of Criminology, Humanities and Social Sciences, Bond University Gold Coast Queensland and Dr Richard Hil, Adjunct Professor, University of Sydney New South Wales, towards a PhD at Bond University.

The aim of this project is to record and analyse the storied accounts (narratives) of a sample of former male residents of the Institution for Boys Tamworth from 1960 to 1976 in order to elucidate how their experiences of in this institution shaped their identity in relation to issues of self-worth, confidence, relationship building, while contributing to community engagement and lawful behaviour. I hope that this case study will also fill a void in Australian history connected to the “Forgotten Australians”.

I am seeking men — residents, guards and suppliers — who were at the Institution for Boys Tamworth or connected in any way at any time between 1960 and 1976, who are willing to complete a questionnaire in about 40 minutes and/or be interviewed for about 60 minutes — no more than 2 hours of your time. Interviews will be conducted at a McDonalds Café of your choice.

The anonymity of your participation and the confidentiality of your information are assured by the Bond University procedure. A unique serial number that is known only to the researchers will be given to all participants. Only de-identified or group data will be reported and only the combined results of all participants, using no names, will be published. Only my supervisors and I will have access to this data, which will be stored for five years as prescribed by the university regulations.

If you know any other people connected to the Institution for Boys Tamworth, you may like to direct them to the website: www.institutionforboystamworth.com

If you agree to participate, you may withdraw your consent at any time, and none of your information will be used. You do not need to answer all the questions. You can stop, save and restart at a later date. If you agree to be interviewed, should you become upset, we will terminate the questioning, and you will be offered counselling.

If you have any queries or would like to be informed of the aggregate research findings, please contact:
Dianne McInnes: ________________________________

Dr Paul Wilson OAM: ________________________________

Telephone: 07 559 52522  Email: dianne.mcinnes@student.bond.edu.au

School of Humanities and Social Sciences, Bond University, 4229

Should you have any concerns with regard to the conduct or nature of this research, please feel free to contact: Senior Research Ethics Officer
Bond University Human Research Ethics Committee
c/o BUHREC, Bond University QLD 4229
Tel: 07 5595 4194  Fax: 07 5595 1120  Email: buhrec@bond.edu.au
Appendix 2C  Participant’s Informed Consent Form


I agree to take part in the above Bond University research project.
I have read the Explanatory Statement.
I am willing to: (please tick relevant statements)
   1) be interviewed by the researcher.
   2) allow the interview to be audiotaped.
   3) make myself available for a further interview should it be required.
   4) have total anonymity with no names or other form of identification.

I understand that I will have anonymity and my information will be confidential with no names or other form of identification used when the thesis analysis is published. I also understand that my participation is voluntary. At any time, I can choose not to participate in part or all of the project, and I can withdraw freely at any stage of the project.

(Please print)

Name:__________________________________________________________

Postal address:__________________________________________________

Email:________________________________________________________

Phone number:__________________________________________________

Signature:_____________________________________________________

Date:__________________________________________________________
Appendix 3A
NVivo 9 Nodes\Experiences\Institutionalisaton

- SUMMARY
- TEXT
- PICTURE
- AUDIO

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# Appendix 3C  NVivo9 Nodes\Effects\Psychological

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## Appendix 3D NVivo9 Nodes\Effects\Physical

- SUMMARY
- TEXT
- PICTURE
- AUDIO

### Overview

**NODE TYPE**  Node  
**COLOR**  
**AGGREGATED?** Yes  
**DESCRIPTION** Anything that can be seen or illness

### Content

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Degraded Identities 256 Dianne McInnes
## Appendix 3E  NVivo9 Nodes\Effects\Criminogenic

- **SUMMARY**
- **TEXT**
- **PICTURE**
- **AUDIO**

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**DESCRIPTION**

Although many residents had been convicted of criminal offences, does the research show that Tamworth increased or decreased the possibilities of further criminogenic acts?

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Dianne McInnes
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