Out-of-home care

Building a national research agenda

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This article presents the argument for the development of a national research agenda for out-of-home care and what is needed to make this agenda work. The need for a commitment to research, adequate funding and access to reliable data, plus the rapid transfer of research findings into practice, is outlined. It also reports on the outcomes of a research agenda-building workshop sponsored by the National Child and Family Welfare Research Coalition and held in September 2002. This workshop provided an opportunity to generate a list of research question that researchers, service providers and practitioners saw as significant priorities in a national research agenda.

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Data is not necessarily Information
Information is not necessarily Knowledge
Knowledge is not necessarily Wisdom
And none of the above is Action

WHY DO WE NEED A NATIONAL RESEARCH AGENDA FOR OUT-OF-HOME CARE?

The purpose of developing a national research agenda for out-of-home care is to provide an overarching coherent framework to guide future research and evaluation. Such a framework should identify the priorities for research, facilitate collaboration across Australia, and add value to existing research and action for children and young people in out-of-home care.

The main reason for developing such an agenda is the continuing lack of research and evaluation in out-of-home care and the shortage of funding in Australia in this area. A research agenda could help to identify the gaps in the research, avoid duplication, and ensure more effective use of scarce research funding. In particular, we need to develop an Australian research base that takes account of the local context, demography and service system.

There is increasing recognition of the need for evidence-based practice in relation to interventions that aim to protect children at risk and, where necessary, remove them from their families. There is also increasing recognition of the shortfall in the research and evidence base for practice. As Courtney (2000) points out, the evidence base is not nearly as solid as it needs to be in order to inform the many decisions that 'profoundly affect children's safety, permanence and well-being'. He likens the child welfare system to a 'huge experiment' that has 'little conclusive to say in terms of the comparative benefits of any of its interventions or the quality of decision making engaged in by those operating the child welfare system' (p. 745). He concludes, like others before him (eg, Barth, 1994; Goerge, Wulczyn & Fanshel, 1994), that there is a 'desperate need for rigorous program evaluation across the entire range of child welfare services' (p. 745). Such evaluations are essential to assess the effectiveness of interventions and their appropriateness and accountability to the funding agencies and to the children and families involved (Pecora, Seelig, Zirps & Davies, 1996).

Figure 1

OTHER RESEARCH AGENDA PROCESSES

AUSTRALIA

- FACE to FACE
- South Australian Department of Human Services

ELSEWHERE

- UK Department of Health: *Messages from Research*
- The Child Welfare League of America and the National Council on Research in Child Welfare (National Council on Research in Child Welfare (1994); see also, http://www.cwla.org/programs/research/researchprojects.html
- The Casey Foundation (http:\\www.casey.org)
- Chapin Hall Centre for Children at the University of Chicago (http:/www.chapin.uchicago.edu/ProjectsGuide/index.html)
- The Candadian Human Resources Development
- The State of Illinois Department of Children and Family Services in collaboration with the Children and Family Research Center, University of Illinois at Urbana-Champaign (Testa, Johnson & Wells, 1999)

At another level, descriptive studies can also be useful to examine what services are available and accessible to children in out-of-home care and the resources that are needed to develop and/or maintain such services.

There is also an important role for research related to out-of-home care beyond program evaluation. This has to do with understanding the processes or mechanisms underlying the impact of abuse and neglect and non-optimal environments on children's development and well-being. This understanding is essential to inform practice, design new means of intervention, and improve the outcomes for children and families. As Macdonald (2001) points out, and local research relating to systems abuse confirms (Cashmore, Dolby & Brennan, 1994), interventions can cause harmful as well as good outcomes. There is therefore an ethical responsibility, in addition to financial accountability, for making informed decisions based on:

> ... knowledge about *what* sorts of problems are amenable to *what* sorts of interventions, in *what* circumstances, and with *what* degree of certainty (p. xx).

Indeed, Ainsworth and Hansen (2002) argue that:

> ... only practice that has been subject to rigorous effectiveness research can truly claim to be ethical practice (p. 38).

Ideally, a research agenda should have a collaborative base and involve service providers and decision makers at various levels in its development and implementation. It should also involve families and their children as well as alternative carers. If it is developed with some consensus among researchers, policy makers and practitioners, such an agenda might also encourage collaborative projects that can meet the needs of families and children and channel the (sometimes conflicting) interests and activities of those involved. In particular, collaborative projects across professional, agency and State boundaries could provide the opportunity to conduct research and evaluation studies with larger-scale samples that could take advantage of the 'different treatments' and existing variations in legislation, policy and practice in 'naturally occurring experiments' (Rutter, 2000; Wald, Carlsmith & Leiderman, 1988).

LESSONS FROM OTHER INITIATIVES

A number of other agencies and jurisdictions, especially in the UK and US, have already developed agendas for research in child welfare and more specifically in out-of-home care (see Figure 1). Notable among the product of these processes are the *Messages from Research* series by the UK Department of Health, and the book *What Works in Child Welfare* (Alexander, Curtis & Kluger, 2000), the product of the work by the Child Welfare League of America and the National Council on Research in Child Welfare on a national research agenda. There have also been other agenda building processes in Australia, most notably the FACE to FACE initiative, and a state-based process in South Australia (Department of Human Services, 1997). FACE to FACE was initiated in 1997 as a forum of consumers, governments, carers and service providers involved in the out-of-home care sector.[1] CREATE, the Australia-wide organisation of children and young people in care played a key role in initiating and organising this process. In August 2001, FACE to FACE conducted a National Research Forum on Out-of-Home Care, bringing together, by invitation, significant key researchers from the sector, with state and territory

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[1] FACE to FACE is made up of CREATE Foundation and jointly supported by the Child and Family Welfare Association of Australia; the Australian National Foster Care Forum; Secretariat of National Aboriginal and Islander Child Care; and Commonwealth, State and Territory community service departments.

representatives. It provided a review of significant research and identified a number of areas for further research, but has not as yet brought these ideas to fruition.[2]

WHAT CAN WE LEARN FROM THESE OTHER INITIATIVES?

In a significant contribution to the current agenda building process, Professor Peter Pecora (Senior Director of Research Services with the Casey Family Programs) has outlined a number of lessons from some of the American initiatives (Pecora, 2000a; 2000b). Pecora's main advice is to:

- be aware of the major barriers to articulating and pursuing a national research agenda, eg, lack of agreement about the key issues to be addressed, and inconsistent terminology and operational definitions;
- be strategic, choose some high leverage research areas:
  - remember the 80/20 rule – much of what can be accomplished is due to a few key aspects or activities (Koch, 1998);
  - select some 'low hanging fruit' with the likelihood that powerful interests will use the data;
  - choose questions that are feasible to address within a practical time frame;
- work out what research groups already exist and whether a small number of interest groups can improve and better coordinate research;
- identify what is already known, what research is in progress, and avoid duplication by learning from overseas research where it is applicable;
- involve young people and caregivers early and often in the design, implementation and interpretation of the research.

WHAT SHOULD BE INCLUDED IN A NATIONAL RESEARCH AGENDA?

The content of a research agenda is determined by a number of processes including who is involved in its development and the way in which the issues are selected. The first step in the current process was a conference workshop [3] conducted by Professor Pecora and the authors and co-editors of this special edition. The 100 or so participants included researchers, managers from both government and non-government agencies, policy development staff and service providers, practitioners and alternative carers.

Table 1

What works? What is effective and constitutes good practice in:	
• Foster carer recruitment, retention, training and support	(50)
• Preventing re-entry to care	(27)
• Re-unification and restoration, and involving parents	(19)
• Kinship care	(21)
• Permanency planning	(13)
• Residential care	
Service delivery issues	
• Indicators/standards/accreditation	(24)
• Funding and costing models and caseloads for foster care, kinship care and residential care	(9)
Outcomes for children and young people	
• Educational outcomes for children in care and impact of placement breakdown on education	(15)
• Participation of children and young people in decision-making	(14)
• Contact with biological parents (including siblings, etc.)	(12)
• Indigenous children (including culturally appropriate child well-being measures)	(12)
• Children with disabilities	(11)
• Long-term outcomes for children and young people after leaving care	

The workshop provided an opportunity to generate a list of policy and practice issues in out-of-home care that the workshop participants considered to be important areas for research. The 61 topics generated (see Appendix A) were grouped by the workshop convenors and prioritised by participants using a 'rationed red spot participation' exercise. Each participant was given 5 red-spot stickers to place next to the questions they saw as important issues for research, providing an immediate visual guide to the level of consensus and the issues which the participants deemed to have higher priority. The 'topics' (grouped by theme) that

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[2] The Commonwealth Minister for Children has also expressed some interest and intent to promote research in relation to foster care, including kinship care, and has recently funded the Council on Ageing and the National Seniors Policy Secretariat to 'investigate the experience of grandparents who have taken on a significant, sometimes full time, caring role for their grandchildren' (Larry Anthony, Press Release, February 2003).

[3] The workshop 'Building a national research agenda for out-of-home care' was conducted at the conference in September 2002 conducted by the Association of Children's Welfare Agencies (ACWA), Child and Family Welfare Association of Australia (CAFWAA), and the National Association for the Prevention of Child Abuse and Neglect (NAPCAN).

received around 10 votes or more in this exercise are shown in Table 1.

As Ainsworth and Hansen (2002) point out, a research agenda for practice in child and family service settings:

> ... inevitably focuses on a series of questions about service effectiveness

and itemising the questions (see Appendix A) is:

> ... both illuminating and scary as it shows how far social work has to travel before even the most basic interventions are established as effective with given populations (p. 42).

The main areas of interest concerned the effectiveness of various services and forms of care, and ways to prevent re-entry to care, restore children safely to their families, or otherwise provide secure and stable care for children in out-of-home care. There is also substantial demand for renewed effort in relation to the recruitment and retention of foster carers. This raises several questions about what we do or should already know about these issues, and about the best way to frame the questions.

Ideally, a research agenda should have a collaborative base and involve service providers and decision makers at various levels in its development and implementation. It should also involve families and their children as well as alternative carers.

WHAT DO WE KNOW ALREADY?

To what extent are policy developers and practitioners aware of and masters of the most up-to-date knowledge about these issues? There is, for example, a substantial, although incomplete, body of research-based evidence about the recruitment and retention of foster carers, family reunification services, permanency planning and the prevention of re-entry into out-of-home care (Barber & Gilbertson, 2001; Maluccio, Ainsworth & Thoburn, 2000; Stevenson, 1999; Vecchiato, Maluccio & Canali, 2002). There are also substantial reviews of the related empirically-based child protection research literature (Macdonald, 2001). So two questions arise:

- To what extent is this research, most of which is US and UK-based, applicable to the Australian context? What research is needed to assess this and supplement the research with a local base?
- What needs to be done to make sure that the implications for practice from the research findings are spelt out and made accessible to practitioners?

FRAMING THE QUESTIONS

What is the best way to frame the research questions and categorise them? Both aspects will have some effect on the way the research agenda is formulated and presented. The issues in Table 1 are simply topics that have been grouped according to several themes – what works, outcomes for children and young people, their carers, and their families, and broader systemic service delivery issues. The categorisation of the issues could, however, take a variety of forms (according to theme, particular areas or forms of intervention, or a difference in focus, eg, as descriptive, evaluative, or as hypothesis-testing). Another possibility is to use a conceptual framework around various questions such as:

- Who is affected (children, birth family members, extended family members, carers, others)?
- What factors affect (and prevent) entry into the out-of-home care system?
- How is transition within the care experience managed and what are the outcomes?
- What affects the manner and outcomes in relation to leaving care?

Clearly considerably more work needs to be done, beyond this initial exercise to gauge the level of consensus of an interested 'captive audience' at a conference, to gain a wider representation of views and to spell the questions out in more detail and as actual research questions.

The way the questions are framed is important, however, and not just as an 'organising framework'. It is affected by the theoretical framework used and has implications for the particular types of data required, the sampling frame, and the research design and strategy. For example, the question might be framed in general terms such as 'What factors increase the likelihood of stable foster care placements?' and the evidence might come from a meta-evaluation or from a Cochrane or Campbell type review of a series of research studies (see www.campbellcollaboration.org), or it may come from a single study. Alternatively, the question might be asked in terms of a particular intervention or as a comparison between different forms of intervention – for example, 'Do the outcomes for children improve if they are served by a particular type of service such as respite care or specialist child care support in comparison with other services?' (Owen, 1993; Pietrzak et al., 1990).

Other questions such as 'What are the guiding principles for making decisions about contact between children in permanent placement and members of their birth family?'

and 'How do you best prepare foster carers?' are essentially asking about best practice and are not research questions. Research should, however, be able to provide some guidance and these questions may be reframed as research or evaluation questions – for example, by asking about the effectiveness of a particular training package, or the effectiveness of training package A compared with training package B.

WHAT IS REQUIRED TO MAKE IT WORK?

An effective research agenda requires more than a coherent research framework. It also needs to be based on a solid foundation of reliable and accessible data, and a commitment of funds and willingness by those involved to make it work. It also needs to incorporate a strategy to translate the findings into practice.

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Accessible data

Perhaps the most important of the requirements is access to data and to research participants. Reliable data in relation to out-of-home care in Australia is notoriously difficult to obtain for a number of reasons. The quality of the data is generally somewhat questionable because it is often incomplete, inadequate and inconsistent. There are also different 'definitions', terminology, and varying administrative and file organisation, not just across States but also across regions and offices within States. While the standardised counting rules and the work of the Australian Institute for Health and Welfare (AIHW) have enhanced child protection statistics across Australia (AIHW, 2002), this is primarily descriptive data and has limited use for research purposes. As aggregated data (unlike the Statewide Automated Child Welfare Information Systems in the US), it cannot be used to track children across services and systems (Waldfogel, 2000).

Data is also often 'locked up' because of legal and ethical concerns about the privacy and confidentiality of the information and concerns about the impact of research on children and young people. The new privacy legislation is also making it very difficult to gain access to files and to research participants because of the need to obtain the consent of all those involved. This is often prohibitive in terms of practicality and cost. In addition, poorly organised files can make it very difficult and expensive to extract the required information. There also appear to be 'political' concerns about embarrassment to departments and to the government by what the data may reveal.

One alternative to government data might be the development of an independent national non-government out-of-home care database. This makes sense in so far as many out-of-home care services are provided by the non-government sector. The development of such a database would of course take time. Agencies would need to build computer systems that are compatible with each other and to agree on a common format for the collection of data. There would also need to be a centre for data storage and protocols for data access. Over time such a database would become an alternative source of data that researchers might then use to mount national studies of out-of-home care services.

Commitment to adequate funding for research

Child welfare has generally been the 'poor cousin' in academic research, both in terms of funding and output, and in-house research and evaluation in the relevant government and non-government agencies has generally been poorly supported. As Gelles (2000) pointed out, a chronic shortage of resources relative to demand in the child welfare and out-of-home care area means that there is an imperative to ' do something' rather than 'study' it, but this does not adequately explain the lack of research in this area. While it would be relatively simple to prescribe appropriately funded and designed evaluations to find out what works, Gelles (2000) and others have argued that there is a lack of will to do so for several reasons.

Firstly, the child welfare system tends to operate in terms of 'intervention by anecdote', through the lens of individual cases rather than seeking patterns across cases (p. 22). Secondly, decision makers and administrators tend to resist evaluation or fund them poorly because they are unwilling to 'take a chance' that a program that they are committed to and have invested in will lose its funding. This is not helped by a poorly developed theoretical base which allows interventions to be driven by ideology and anecdote rather than by evidence (Ainsworth & Hansen, 2002; Wulczyn, 2001). Thirdly, practical or ethical concerns about withholding services or interventions that are expected to be beneficial often prevent or undermine randomised assignment or other means of rigorous evaluation and research. As Gelles (2000) argued, however, four decades of 'intervention by anecdote' and resistance to research and evaluation have resulted in a system that is expensive and complex and fails to provide the required protection for vulnerable children (p. 24).

Other explanations involve differences in timeframes and in background between researchers and practitioners, and the difficulty of managing extraneous influences and conducting research with vulnerable populations. In the first case, research often takes some time to provide answers that practitioners and policy makers are seeking and may also use measures and analyses of effects that do not reflect the nature of the decisions they need to make (Scott, Mason & Chapman, 1999). Secondly, practitioners and policy makers may not see the relevance of research to their work, partly because researchers have not engaged their interest or seen the value of tailoring their findings for use in practice, and partly because practitioners have not been equipped with an adequate understanding or critical analysis of research during their professional education and training (Ainsworth & Hansen, 2002).

Clearly a great deal of work and consultation will be needed to progress a national research agenda in out-of-home care and, given the experience in the UK and the US, it is likely that it will require a 10-year timeline before the results of this effort will become evident.

What is needed is a commitment to appropriately funded and planned rigorous research and evaluation that can address the questions that the various stakeholders are interested in. Such research needs to use consistent and reliable outcome measures, derived from a theoretical base that helps to identify what needs to be measured, and to understand the relationships between the elements of an intervention (what is inside the intervention 'black box') and the outcomes (Courtney, 2000; Gain & Young, 1998). It also needs to include some longitudinal studies (like the National Survey of Child and Adolescent Well-Being in the US) that track children and young people over time to investigate their developmental trajectories and the longer-term outcomes of various interventions in ways that are not possible using cross-sectional studies (Waldfogel, 2000; Wulczyn, 1996). In Australia, a cost-effective means of doing such a study with a larger parallel cohort would be to run a study focussing on vulnerable children and young people (for example, those reported to the state authorities) concurrently with the longitudinal study of children which will be under way later this year (Sanson, Nicholson, Ungerer, Zubrick, et al., 2002).

Translating the findings into practice

The ultimate aim of developing a research agenda for out-of-home care and trying to improve the quality and range of research is to influence policy and practice and to improve the outcomes for children and their families. This means that the findings need to be translated into practice and the implications for policy and practice spelt out in language and in a format that is accessible to practitioners and decision makers. The assumptions, methodology, and findings need to be transparent and available in open publication, and debated and discussed in research and training forums and in work time, not 'locked up' in complex reports with limited or restricted distribution.[4]

Surveys of social workers and team managers in local authorities, social services departments and non-government organisations in the UK found that practitioners are often alienated by research methodology and language, and find research to be confusing and contradictory (Barratt, 2003; Tozer & Ray, 2001). As Ainsworth and Hansen (2002) point out, university schools of social work often do not provide an adequate research base and fail to equip students with a proper understanding of research or their own responsibility to develop and utilise knowledge derived from research in their professional practice. Further, the practitioners surveyed by Tozer and Ray (2001) and Barratt (2003) pointed to the gap between the rhetoric about evidence-based practice and the reality in the field. The 'reality' they reported indicates considerable uncertainty about research, organisational cultures and infrastructure that do not accommodate research[5], and a lack of time, web-based technology and library facilities to facilitate the dissemination and consideration of research.

The development of evidence-based practice is clearly not easy and the experience in health settings indicates that it will take considerable time, collaborative effort and investment by both researchers and those in management and in practice to make it happen (Barratt, 2003). The UK is well ahead of Australia and has made considerable investment in research programs and dissemination since the introduction of the *Children Act 1989*, following up on the series of *Messages from Research* in child protection and out-of-home care (Weyts, Morpeth & Bullock, 2000), and developing the Research in Practice partnership between researchers and local authorities and managers in a wide

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[4] A fine example of a guide to research for practitioners is the guide developed by Newman (undated) for Barnardos.

[5] In a small survey of team managers and leaders, Cheers (2002) also reported that some managers and team leaders held some concerns about possible restrictions on their professional autonomy and suspicion about a hidden agenda to use evidence-based practice to justify a reduction in resources.

network across England [6] (www.rip.org.uk). Another model used in the US that might help to bridge the gap between researchers and practitioners is the use of research fellowships and scholarships sponsored by the Society for Research in Child Development within relevant policy areas in government departments. These fellowships are instrumental in helping researchers to understand the policy context and the exigencies of government, an understanding that they can convey in their teaching and build on in their research.

WHERE DO WE GO FROM HERE?

There are a number of potentially exciting developments that may assist or affect the promotion of a research agenda for children and young people in out-of-home care. These include the increasing interest in evidence-based practice, the interest of the Commonwealth Government in research concerning foster care, the developing relationship between the National Child and Family Welfare Research Coalition and the Child and Family Welfare Association of Australia (CAFWAA), and more broadly, the work towards a research agenda by the recently established Australian Research Alliance for Children and Youth (www.aracy.org.au). There are likely to be a number of opportunities to discuss research directions at the forthcoming 9th Australasian Conference on Child Abuse and Neglect in November 2003, the Association of Children's Welfare Agencies (ACWA) conference in early 2004, and the 15th International ISPCAN Congress on Child Abuse and Neglect in September 2004. Clearly a great deal of work and consultation will be needed to progress a national research agenda in out-of-home care and, given the experience in the UK and the US, it is likely that it will require a 10-year timeline before the results of this effort will become evident. ☐

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[6] The Research in Practice network is a collaborative partnership between the Dartington Hall Trust, the Association of Directors of Social Services and the University of Sheffield; it involves over 70 participating English local authorities, voluntary child care organisations, Local Strategic Partnerships and Primary Care Trusts across England.

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APPENDIX A

The questions were grouped as follows:

1. **Effectiveness and best practice – what works?**
    a. In preventing re-entry to care
    b. In foster care recruitment, training and support
    c. In kinship care: what works to help make kinship care successful in terms of assessment, training, ongoing casework and placement support?
    d. In family re-unification, restoration and involving parents?
    e. In permanency planning
    f. What is the best way to manage the attachment and bonding of children in care (including decision making, handling separation and loss)?
    g. In indigenous communities
    h. In after-care: what can we do to improve situation for care leavers?
    i. In residential care: what is the effectiveness of different models of residential treatment?
    j. How do you tailor foster care services for youth from unstable backgrounds?
    k. In respite care?
2. **Outcomes for children and young people**
    a. What are the educational outcomes for children in care (eg, Year 12 completion rate, etc)? What is impact of foster care placement breakdown on educational outcomes?
    b. What opportunities did children and young people have to participate in decision-making, eg, in terms of placement choice, in ADR and the courts, and what effect did that have?
    c. To what extent do children have contact with their birth families and what is the effect of contact on them? What are the guiding principles for contact for children in permanent placements?
    d. What are the comparative rates of abuse, and the outcomes, for children with a disability?
    e. What do children and young people say was most helpful / significant for them in terms of services?
    f. What factors increase the likelihood of a stable placement?
    g. What makes the placement a good fit for the child?
    h. What are the benefits of securing an order for permanent care?
    i. What factors affect the outcomes for indigenous children and youth?
    j. Is kinship foster care an optimum placement option? Does kinship care differentially improve personal identity and other outcomes?
    k. How many children stay in touch with other foster carers? Should children keep in touch with carers after placement breakdown?
    l. What is the effect of 'life story work' on outcomes?
    m. What is the prevalence of attention deficit hyperactivity disorder among children in care and what is the impact on the placement? And on the outcome for the child?
    n. What is the effect of allegations of abuse on children and young people? What are the best ways to handle allegations so that youth are not punished by being removed from foster parents for long periods of time?

3. **Characteristics and needs of foster carers and their families**
    a. Who are our foster parents and how is that caring population changing?
    b. What are the factors affecting recruitment and retention for foster carers?
    c. What motivates foster carers? What do we do about that?
    d. What assists foster parents to cope with difficult behaviours (eg, is it assessment, training, support)?
    e. What is the impact on the children of carers and what is their role in the placement?
    f. What is the best way to handle allegations of maltreatment and what is their effect on carers and their families?
    g. What do foster parent associations do and offer?
4. **Impact on birth families**
    a. Impact of placement on birthparents? How can we best work with them?
5. **Service delivery issues**
    a. Bench-marking, standards and indicators
        i. What is good enough foster care? What are the elements and indicators of good quality and how do we measure that on a day-to-day basis?
        ii. What are culturally appropriate child well-being measures?
        iii. What are the barriers that hinder quality practice?
        iv. How many children and young people in care have case plans?
    b. Funding
        i. How do we establish a good national funding policy?
        ii. What does it cost for quality training of foster carers?
        iii. What is the cost utility of non-relative foster care compared with other forms of foster care?
        iv. What resourcing levels are needed for kinship care versus other forms of foster care?
    c. Worker issues
        i. What are optimum caseload levels for different kinds of situations?
        ii. What effect do worker qualifications have on foster care outcomes?

FROM THE INSIDE

CHILDREN'S LIVES IN IMMIGRATION DETENTION CENTRES

nsw commission for
children & young people

"For just one hour in the morning we come out of the room to see the sky and one hour in the afternoon. And then the doors closed, locked in." (Unaccompanied teenage boy)

A new publication that provides an extraordinary account of children's experiences of coming to Australia as refugees, their treatment within immigration detention centres and their views on how detention can be improved has recently been produced by the Commission.

The *Ask The Children* publication focuses on children who have been recognised under Australian and international law as refugees and who spent an average 140 days in immigration detention during 2000 and 2001. The children were originally interviewed as part of a submission to the Human Rights and Equal Opportunity Commission's national inquiry into children living in immigration detention and participated in the project in the hope that things would change for the better. The publication is one of very few that allows us to hear about refugee children's experiences in their own words.

Ask the Children – Kids speak out about immigration detention is being sent to people and organisations to raise awareness about the children's unique and frequently traumatic experiences. It is hoped that children's views will be considered in future policies about asylum seeker children and Australia will conform with our obligations under the Convention on the Rights of the Child.

To order copies of the publication telephone 02 9286 7276

or visit the Commission's website at

www.kids.nsw.gov.au/ourwork/immigrationdetention.html