

# COMMONWEALTH OF AUSTRALIA

# Official Committee Hansard

# HOUSE OF REPRESENTATIVES

STANDING COMMITTEE ON FAMILY AND HUMAN SERVICES

Reference: Adoption of children from overseas

FRIDAY, 16 SEPTEMBER 2005

**HOBART** 

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#### **HOUSE OF REPRESENTATIVES**

#### STANDING COMMITTEE ON FAMILY AND HUMAN SERVICES

#### Friday, 16 September 2005

Members: Mrs Bronwyn Bishop (Chair), Mrs Irwin (Deputy Chair), Mr Cadman, Ms Kate Ellis, Mrs Elson,

Mr Fawcett, Ms George, Mrs Markus, Mr Quick and Mr Ticehurst

Members in attendance: Mrs Bronwyn Bishop, Mr Cadman and Mr Quick

### Terms of reference for the inquiry:

To inquire into and report on:

How the Australian Government can better assist Australians who are adopting or have adopted children from overseas countries (intercountry placement adoptions) with particular reference to:

- 1. Any inconsistencies between state and territory approval processes for overseas adoptions; and
- 2. Any inconsistencies between the benefits and entitlements provided to families with their own birth children and those provided to families who have adopted children from overseas.

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#### Committee met at 10.28 am

### CAMPBELL, Dr Kathryn Claire, Private capacity

**CHAIR** (**Mrs Bronwyn Bishop**)—Welcome. Do you have any additional information about the capacity in which you appear?

**Dr Campbell**—I am here today as Mrs Stephen Smiley but I am also known as Dr Kathryn Campbell. I am here as a prospective adoptive parent who is undergoing the Tasmanian assessment process, and we are seeking to adopt a child from China.

Witness was then sworn or affirmed—

**CHAIR**—Thank you for your submission, which we all have. Would you like to make an opening statement?

**Dr Campbell**—There is a fair amount of detail in the submission, but I will go through it briefly so we can recap. The reason for the submission is that it addresses one of your reference criteria—that is, the inconsistency between state and territory laws, specifically as it relates to the age of adoptive parents and the age of the child placed with them. My husband and I are looking to adopt a child from overseas, preferably from China. Tasmanian law states that there must be a minimum of 40 years between the age of the first child and the oldest parent. My husband is 46, so that means Tasmanian law would place with us a child of no less than six years old. This assertion is made prior to our assessment as suitable parents. We are being deemed unfit to parent a child of less than six years because of this age restriction.

When I spoke with the adoption services about this, they told me that this regulation was widespread in Australia and that most states were coming away to our way of thinking—that is, that there should be a 40-year age gap between the child and the parent. I did some research and found that, in fact, the exact opposite was true. I am unclear about why I was advised that. I found that, in fact, the laws of New South Wales, Victoria, Queensland, and the Australian Capital Territory provide that age is but one element of the assessment of suitability to adopt, but no prescription of the age gap is made. The laws of Tasmania, the Northern Territory, Western Australia and South Australia prescribe ages which exclude older couples from adopting younger children. However, the prescribed exclusions are not uniform. On the basis of age alone, for example, a 44-year-old couple resident in Western Australia or South Australia is deemed fit to parent an infant while that same couple in the Northern Territory and Tasmania is deemed unfit.

I feel that it is desirable to consider the issue of upper age limits for adoptive parents during your current inquiry. I believe that the prescribed age criteria should be removed to bring Tasmania into uniformity with the majority of Australian jurisdictions or, at the very least, the age limit should be increased to take account of increased life expectancy of both sexes. There is a lack of evidence in the scientific literature, if you like, that supports the idea that adoption outcomes are improved by this age range. In fact, the exact opposite is more likely: the younger the child at the time of placement, the greater the probability that attachment and parenting will succeed. In fact, in this state, they will not take children older than seven for adoption because the likelihood of failure of a successful adoption outcome is so high. So six is the cut-off. Every year older a child is, the more likely the adoption outcome will fail.

The assessment of a prospective applicant to parent an infant based on the age criteria alone appears nonsensical in that regard and becomes even more so when older couples resident in Tasmania are treated more prohibitively than if they were resident in Australian jurisdictions where age is not prescribed. The arbitrary nature of the exclusion becomes even more apparent in the case of intercountry adoptions where the country in which the child resides applies its own age criteria. In the majority of cases, participating countries such as Taiwan, Thailand, the Philippines, Lithuania, India, Hong Kong and China apply less prohibitive age criteria than the Tasmanian laws allow. In instances of intercountry adoption, those jurisdictions without upper age limits simply apply the age criteria prescribed in participating countries.

That is pretty much it. Since I made the submission I have made a similar submission to the Tasmanian government. Although it has taken some time, the minister has agreed that they should remove the upper age limit from the regulations. The regulations are currently being amended, which is the reason I made the submission to the Tasmanian government in the first place.

#### CHAIR—Success!

**Dr Campbell**—Apparently. That is good, but it means that my argument is a little redundant in that it appears that Tasmania will fall in line with other jurisdictions such as New South Wales, Queensland, the Australian Capital Territory and Victoria. That has not happened yet. It is supposed to happen possibly next year. In our case, that will be too long for us to wait for a child. It would not apply to us. But the minister—

**CHAIR**—Why will it not apply to you?

**Dr Campbell**—It would apply to me if I waited until January to proceed, but in the interim period it does not apply to us. However, the secretary of the department has agreed to waive the regulation for us and prospective parents coming along behind us in this interim period given the intent of the department to remove that regulation. That has been very satisfactory.

**Mr QUICK**—Is that the only modification they are making to their adoption?

**Dr Campbell**—The regulations, from what I understand, were under review specifically to look at the review committee requirements. If there is a dispute between a prospective parent on the assessment and the department, there was a review committee process that could be undertaken. That was the reason that the amendments were put through. That is the reason they began reviewing them. There was no other change. My complaint to the department at the time was that they should be proactive in this sort of thing, given that, to be perfectly frank, they are out of step with the rest of Australia. They should be proactive because nobody else can be. It is the department's regulation, and no-one but they can be proactive about it—and, in the end, they are being proactive about it and changing the regulation.

Mr QUICK—So this covers not only intercountry adoption but also adoption within Tasmania?

**Dr Campbell**—Yes. I have asked on many occasions why there is an age limit of 40 years. I had a response from the acting manager of adoption services. He said that local parents—in

1995, at least, when the regulations were drafted—who put their children up for adoption would see parents of my age as being the same age as their mothers and would prefer that younger people adopted their child. However, given that we have perhaps two local adoptions in Tasmania a year, that is an opinion expressed by a handful of people—I do not know who or how many—and that did not seem to be sound enough reason to legislate that rule above all other considerations.

**CHAIR**—Aside from anything else, mothers are having their first babies in their early 40s, so it has all changed since these rules were formulated.

**Dr Campbell**—That is correct. It is my assertion that the department should have been proactive about that. I am very pleased about what has occurred, but I was disappointed that they were not proactive in their initial responses.

**CHAIR**—At least you had a positive outcome, which is very commendable.

Mr QUICK—So what is the new age?

**Dr Campbell**—There is not going to be one.

Mr CADMAN—It will be one of a number of factors.

**Dr Campbell**—That is correct. They will consider that along with our emotional stability, financial stability, material assets, education and quality of life.

**CHAIR**—All the things in the Hague convention.

**Dr Campbell**—Yes.

**Mr QUICK**—So you have applied and you are part of the process now?

**Dr Campbell**—We are part of the process; we are still stuck in the process. I received a letter from the minister telling us that we would be approved—and our social worker has told us that we would be approved. It is still not through finally and it is showing no signs of being progressed.

**CHAIR**—Has your file gone to China yet?

**Dr Campbell**—No, and it was almost three months ago that this assurance was given to us. Although it is not in my submission, I want to ask you about quality control. I do not know if it is a possibility, but one thing we have here is inconsistency in the way that service being provided to clients is administered. There is a general time period of six months for the Tasmanian assessment. Our six months is about to lapse. There is no new date that we can expect to see our file finished. To be honest, even if you could not bring all jurisdictions under one model of legislation, you could administer some quality control on the actual processes—as an auditor, if you like—to see that, at the very least, things are being administered in a consistent matter within jurisdictions and between jurisdictions. That is just a thought for you. In our case,

we have inconsistencies within our own jurisdiction with regard to time frames, the assessment process through social workers et cetera.

**CHAIR**—I guess that, like other jurisdictions, the social worker is on contract.

**Dr Campbell**—In our case, she is on contract.

**CHAIR**—It seems to be similar throughout the country.

**Dr Campbell**—In our case, however, the general way we have been told it would work is that there would be between four and six visits—generally four—with a social worker. In our case, there have been at least six visits and there will probably be seven by the time it is all over. Each of those visits has been to our home, which means that my husband and I have to forgo work—we live 40 kilometres away in the Huon Valley, so we have to get home for the visits. So to participate on each of those occasions, we have had to forgo work rather than go to her offices or whatever.

**CHAIR**—What happens when she comes?

**Dr Campbell**—For the first hour we talk about life—what is going on in her work life and what is going on in our work life—and then, towards the end, we talk about some parts of the assessment sheet. There is a home study with topics that must be addressed in their home study of us. We address those modularly.

**Mr CADMAN**—How many pages are there in this assessment sheet?

**CHAIR**—Ten, I hear. Is it 10?

**Dr Campbell**—We prepared one as well and ours was, I think, 14 pages long by the time it was finished.

**Mr CADMAN**—That was a lot of visits to get through 14 pages.

**Dr Campbell**—I thought so. And, as I said, what they are waiting for now is a written home study that can then be translated for China and sent off. That is what we are waiting for—the completion of that home study—even though I have provided information. I think our last visit would have been at the end of July and it is still not there.

**Mr QUICK**—Do you have a 270 page workbook that you have to plod through?

**Dr Campbell**—No, I do not. That is something that one of the other jurisdictions has.

**CHAIR**—That is Queensland.

**Dr Campbell**—Well, if it speeded up the process, I would do it. The thing is that most parents are extremely committed. The parents—the clients, if you like—are so committed that they are willing to do just about anything. In fact, it is always a perceived threat that if you rock the boat too much, if you do not comply, you will be penalised because of that.

**CHAIR**—Your file will get held up.

**Dr Campbell**—Yes.

**Mr QUICK**—Do you have a file number?

**Dr Campbell**—No, I do not, but the thing is that there are so few parents in this process—there might be 40 in a year—that they would know us all by name.

CHAIR—In Tasmania, do you mean?

**Dr Campbell**—Yes, I do. And we have been told, and I agree, that our rate of progress is faster than in any other jurisdiction. Maybe that is simply matter of resourcing, or applications per capita; I do not know. Maybe Tasmania is over-resourced or under-resourced, I do not know, but we are only dealing with 40 couples.

**CHAIR**—I can tell you that you had 22 completed adoptions in 2003-04, and that is one adoption per 21,914 people. Your cost structure is better, at \$2,280, than in New South Wales, where it is \$9,700. There are two adoptions staff.

**Dr Campbell**—Yes, but we have contract staff.

**CHAIR**—Files prepared were 26 for an outcome of 22, which is again better than New South Wales with 127 files prepared for an outcome of 66 completed adoptions. So, presumably, once the social worker completes the visits—and that takes, what: three months?

**Dr Campbell**—I think we did ours in a month and a half of weekly visits.

**CHAIR**—So five or six weeks?

**Dr Campbell**—Five or six weeks worth within the six-month assessment period. It was all over in a flash, if you like—six weeks worth of weekly visits and then just waiting to have the paperwork completed.

**CHAIR**—Did you have to go to some education classes?

**Dr Campbell**—There is a compulsory workshop for adoptive parents, which we have attended. There is also a new seminar, about attachment disorder and treatment for that, from a psychologist who comes over from Victoria that we are also required to attend. We have not attended that yet but there will be another opportunity before we are actually able to adopt.

**CHAIR**—The other thing, we have elicited, that can happen with China is that sometimes they will bundle up, say, three sets of parents from a single jurisdiction, and they will all go together.

**Dr Campbell**—That is right.

**CHAIR**—That seems to be quite a good thing, actually. They kind of do a bonding.

**Dr Campbell**—Yes. You get to meet some people who are in your own state who are doing the same thing. That happens here as well. There is a group of files about to leave at the end of this month. Most of those people began the process around the same time as us. Their files are actually going to be completed and sent to China at the end of this month.

**CHAIR**—Do you think your file is in that group?

**Dr Campbell**—No, it is not.

**CHAIR**—But you don't know why?

**Dr Campbell**—I know it is not in the group because our home study is not completed.

**Mr QUICK**—So when is the next lot going? Do you have any idea?

**Dr Campbell**—It will go when there are four more people to go. So I do not know how long it will take to get four or five more people to go.

**Mr CADMAN**—Can you have more than four?

**Dr Campbell**—I do not know. I was under the impression that it was four, although I heard today that there is a group of five perhaps going. I think our files go to Victoria first, or they are administered through Victoria—

CHAIR—Yes.

**Dr Campbell**—for China, at least.

CHAIR—Victoria is the lead state for China.

**Dr Campbell**—Yes. So I think it may also be something to do with their demand for filling batches, if you like. I do not know how that is administered.

**CHAIR**—Your understanding is that the file then goes from Tasmania to Victoria and is forwarded from Victoria?

**Dr Campbell**—I think so. It all has to be notarised, the translation has to be done et cetera. I do not know where that gets done. I think it gets done in China. Things are bundled up together and off they go.

**CHAIR**—There has been a change, hasn't there?

**Dr Campbell**—Has there?

**CHAIR**—Didn't we hear that about the translations? Didn't we hear that in Queensland?

**Mr QUICK**—That is the big sticking point.

**Dr Campbell**—That is another concern as well: I really do not know how words that I use in my everyday writing are translated in the end. It must be difficult to write a home study that translates appropriately.

**CHAIR**—So when you wrote your home study, you wrote in your own words?

**Dr Campbell**—I did, yes. But I think that the home study that actually goes to China is from the social worker. She might cut and paste a little bit of stuff from mine, but they are supposed to be the social worker's words, I presume. Our home study was a reference for hers.

**Mr CADMAN**—Do you think that there should be consistency across Australia for overseas adoptions?

**Dr Campbell**—Consistency with regard to the assessment process?

Mr CADMAN—Age is one thing that is obvious from your case.

Dr Campbell—Absolutely, yes.

**Mr CADMAN**—What about process?

**Dr Campbell**—From my experience, if we have something such as a national application, often Tassie may get lost in the shuffle because we are not a large jurisdiction, and New South Wales and Victoria are large jurisdictions. Usually, we have to team up with smaller jurisdictions such as the ACT or the Northern Territory to have some say in these sorts of things. That is not to say that the advocacy of New South Wales and Victoria would be detrimental to Tasmania's needs in these national forums, but it may be. It would be disappointing, if we went to a national process or structure for administering this, that we all slowed down, and Tassie, as a result of the restructure of the administration.

**Mr CADMAN**—I had in mind more that there could be some commonality of principles.

**Dr Campbell**—I agree. If the assessment is being conducted on a one-to-one basis between a social worker and the prospective parents, we should cover the same sorts of things. There should be some sort of benchmarks. What those benchmarks might be and how we devise what those benchmarks are, I do not know. But that is where I come back to my idea of some sort of quality assurance to this process. That again goes back to social workers. They should be social workers with tertiary qualifications. They should not be teachers and they should not be people who have an interest in children. Although they may feel that they have a breadth of experience that comes from there, the foundations of tertiary education are the fundamental things propping up their knowledge. In my opinion, tertiary education should be applied to these social workers, rather than availability—that is, who will do it: a teacher will do it.

**CHAIR**—And there is no strict criterion for that here.

**Dr Campbell**—As I said before, I think there was an amended regulation that indicated a softening in that criterion for the social workers.

**Mr QUICK**—One of the problems that we have received evidence about is that DHHS or DOCS or—

**Dr Campbell**—Cannot get any social workers.

**Mr QUICK**—are principally concerned with dysfunctionality in families. Then the same department and the same social workers are dealing with people who are the elite, I guess, of the family structure and desperately want to have a child. How do you meld that when your focus is on intervention?

**Dr Campbell**—Our social worker is in that category. She is a family relationships specialist, counsellor, or whatever. She made it very clear to us, even on the second visit, by saying: 'I'm just going through the motions now. I deal with dysfunctional people and you are clearly not dysfunctional. Of course you're good parents and of course you will be good parents. I am just going through the motions.'

**CHAIR**—The other side we heard of though was that some people, because they are working with dysfunctional children and families, regard everyone as potentially dysfunctional because they are not used to dealing with what is normal.

**Dr Campbell**—I suppose you could separate them. The only benefit, potentially, of having people who deal with dysfunctional families is that they may recognise them more easily or be less easily duped by words and brief visits than someone who does not deal with that. There are indicators and warning signs, I presume, of a dysfunctional family and they would be well versed and well experienced in them and would have heard all the stories. So I do not think it is necessarily a bad thing that these people are actually assessing people like me. Even though you might feel scrutinised, you have nothing to fear if you are not dysfunctional, do you? As I said, I feel comforted by the fact that these people actually recognise what a dysfunctional family is and can see that we are clearly not.

**Mr QUICK**—But the fact that there are so few of them being spread across so many state government departments—

**Dr Campbell**—There are not enough of them, is what you are saying.

**Mr QUICK**—There are two people in the adoption service.

**Dr Campbell**—They are not social workers, mind you. They are administrative people.

Mr QUICK—But there are two of those. Then they have to contract out social workers, and there is not any national consistency. To my mind, with Centrelink or Immigration, you get a 2000-whatever numbered file and it goes in the system. You can ring up at any stage and say, 'Here's my file number. Where is it in the process?' We have heard evidence that no state gives out a file number. As you alluded to before, people are apprehensive about continually ringing up saying, 'Where is it?'—

**Dr Campbell**—Absolutely, because you are nagging.

Mr QUICK—because they wonder: does it disappear under the carpet or go down to the bottom?

**Dr Campbell**—My husband and I went through this quandary: should we make a fuss or shouldn't we? But the impact on us of receiving a six-year-old child as opposed to a 12-month-old infant was so immense that we could not rest. Having made trouble, if you like, we do not back off from that. So the fact that we are now being mired in the Tasmanian process even after the minister's assertions that we can get through it, is not something I am going to lie down with now. Probably most people would not be like me. It could well be that they have a very good working relationship with the adoption services and are flying through, whereas they are going to dot every 'i' and cross every 't' with Steve and I, and there is nothing we can do about that.

**CHAIR**—But there is no transparency, so we are grateful for you, actually.

**Dr Campbell**—There is no transparency. That is exactly right. That is what I am getting to about the quality assurance process. 'Auditing' is the wrong sort of word but there are benchmark standards that could be applied across states to at least ensure transparency because, after all, we are public servants and public servants are transparent and accountable. Yet, this is a group that is hard to dive into and find that transparency and accountability because you feel threatened to be asking.

**Mr QUICK**—Where is the adoption service based in Hobart?

**Dr Campbell**—It is in the repat hospital, which is just in Davey Street—just up the road from here.

Mr QUICK—So hidden away, basically.

**Dr Campbell**—I can walk up to the front desk at any time if I choose to do so. It is not a big office front. It is in the hospital grounds. But when you only have two people permanently employed there I suppose they do not need a big reception.

Mr QUICK—If they were tripled in number—

**Dr Campbell**—You would hope they would be relocated to better premises, perhaps.

**Mr QUICK**—There are only two and we only have 40 adoptions. What if we have six and they are out there publicising the fact that there are 10,000 children from China being adopted out around the world and there are still another 90,000 every year being abandoned, primarily because they are girls?

**Dr Campbell**—I would have to say that Steve and I are completely selfish in this. We are not doing it for any altruistic reason for children who are orphaned in China. We are doing this because we want a child of our own. We were cautioned—and in fact the adoption services are also cautioned against finding people who want to do this—against applying to adopt simply from altruistic reasons. There is this enormous number of children awaiting adoption and there

are also probably as many parents waiting to adopt. One of the things they said about the restricted age limit is that, given that there are probably more parents waiting to adopt—perhaps not in the case of China—in general than there are children available, then the age restrictions provide a convenient screening tool. They say, 'We will just have to knock those people out because they are too old.' That is not the case anymore, of course. If you say that there are all these children awaiting adoption then there probably are not enough parents to go around.

Mr CADMAN—Did you consider in-country adoption?

**Dr Campbell**—Yes. We were told that that would never be available to us because we were too old.

Mr CADMAN—Why?

**Dr Campbell**—In local country adoption?

Mr CADMAN—Yes, within Australia.

**Dr Campbell**—Because within our state the parents offering the child up for adoption choose the parents. They have a non-identifying profile of all the parents available to parent their child, and they invariably do not choose people as old as Steve and I.

**Mr CADMAN**—A professional couple anxious to have a child?

Dr Campbell—Yes.

**Mr CADMAN**—A public servant made that judgment for the adopting parents?

**Dr Campbell**—We could have put ourselves down on the local adoption register, but we were told that there was absolutely no chance in a million years that someone would choose us.

**Mr CADMAN**—How many adoptions are there in Tasmania?

**Dr Campbell**—Maybe two.

**Mr CADMAN**—Two a year in Tasmania?

**Dr Campbell**—Yes, there are very few local children coming up for adoption.

**CHAIR**—There are very few, and one of the things we are looking at is the reason for that.

**Dr Campbell**—Why are there so few?

**CHAIR**—Yes, and one possible reason could be the policy of fostering children, not permitting them to be adopted.

Dr Campbell—Yes.

**CHAIR**—That is something that we are starting to see.

**Dr Campbell**—And certainly the social worker who dealt with us said that, as most of her clients were fostered children, she was always trying to repair the dysfunctional family—

**CHAIR**—Reunite them.

**Dr Campbell**—and get them back together.

**CHAIR**—It is very hard on kids.

**Dr Campbell**—Yes.

**Mr CADMAN**—You are a professional with some competence to make a judgment, and you were about to add something to what you just said. Was it that you do not know whether or not that is an appropriate policy for the benefit of children?

**Dr Campbell**—Yes. You would probably do better to interview our social worker, but she was indicating that some of the birth parents of these children who are now fostered will never, ever be suitable parents to look after their children. The children reside with foster parents and have careful visitations and things like that, but the birth parents are always trying to get their children back. It has been deemed through natural studies or epidemiological studies—

**Mr CADMAN**—Should there be a cut-off point to that process, do you think?

**CHAIR**—Please let Dr Campbell finish.

**Dr Campbell**—Epidemiological studies, so I am told, show that the best outcome for any child is to remain with their own parents at all costs. That is why the department invests this energy in trying to put these two groups of people together again.

**CHAIR**—From what we are starting to hear, the problem with that seems to be that it has gone a bit too far. Take the extreme example in New South Wales, where they follow that policy, where a child was continually put back, tortured and finally murdered.

**Dr Campbell**—Yes, we had a problem here as well.

**CHAIR**—Alan was about to ask you about a time limit, which is a good question.

**Mr CADMAN**—Surely, if you are considering the children's needs rather than the parents' needs, there must be a time—

**Dr Campbell**—When they say, 'Enough is enough.'

**Mr CADMAN**—when you must stop forcing children through that process.

**Dr Campbell**—One of the problems that the department faces in assessing what is the best thing to do is that epidemiological research from around the world is retrospective: we have to look back to see what happened to those children who either remained in foster care or went back to their dysfunctional parents or whatever. These retrospective studies mean that years go by, and in the meantime our current policy is faced with things such as excessive drug use. Our community has changed.

**CHAIR**—Totally and utterly.

**Dr Campbell**—Ten years ago these studies may have been relevant, but our community has so moved on from there and we probably have to wait another 10 years to look back at our group and say, 'Oh, yes, we made the wrong decision about that; we should have put them out with adoptive parents.'

**CHAIR**—To give them a chance.

**Dr Campbell**—Yes. That is the trouble we face with the research that supports what the department is doing.

**CHAIR**—It is different.

**Dr Campbell**—Yes.

**CHAIR**—That is a very good point; thank you for that.

**Mr QUICK**—Talking about time limits, do you think a limit of 18 months to process from application to the arrival of the child in Australia is reasonable—if we come up with nationally consistent laws and regulations?

**Dr Campbell**—We cannot control what is happening in the other countries. If it takes them two years to process—

Mr QUICK—No, it does not. I have just come back from Beijing. I went to the central adoption agency in Beijing, and I went from the top to the bottom of the three-storey building. They are doing a fantastic job and cannot understand how we have eight countries within one island. With migration, you pay a huge fee to bring your relatives or spouse out. There is basically a time limit in which it is all done and processed. You have a file number and you understand how the system works. But for adoption, every state makes its own rules.

**Dr Campbell**—That is what I am getting at, I suppose. If we have a six-month cut-off for Tasmanian assessment, what happens when we go to seven months? What happens to me when I have gone to seven months? What is the penalty? What scrambling of resources is there to get me processed? I do not know. If your idea of an introduction of those sorts of time frames would make that change, I would be all for that.

**CHAIR**—At least, Harry, the idea that you had of having a number that you could progressively check against would give it some transparency. You could say, 'My file number is X. Can you tell me where it is up to, please?'

**Dr Campbell**—Where it is up to, yes. Although, as I said, with our groups being so small, if they are only processing 20 and not 40 couples a year, they would know us all by name.

**CHAIR**—They processed 26 in 2003-04. There may be more.

**Dr Campbell**—There may be more this year. That is right.

**CHAIR**—They are files that were prepared, so they may have dealt with more than that.

**Dr Campbell**—Of course, yes.

**CHAIR**—They are files that were prepared.

**Dr Campbell**—Yes, you are right. And perhaps it is available on the adoption services database so that, if I rang up today and asked, 'Where am I?' they would say, 'You have an overdue mark against your name. We had better do something about you.' I do not know.

**CHAIR**—You could perhaps get that outcome, Harry, with that file number system.

**Mr QUICK**—Yes. What about removing the whole process from the states, because of the inconsistency and the slowness in each of the states in updating their legislation? We understand the Queensland government's adoption laws go back to 1964, 40 years ago. If we put the whole adoption process under the Attorney-General's Department—

**CHAIR**—We cannot, Harry. We do not have the jurisdiction.

**Mr QUICK**—There are things that this committee suggested about the tribunal. Things can change.

**Dr Campbell**—We would have to be confident that, federally, we could do better than we are doing jurisdictionally. I do not know the answer. If we can be sure that we are going to do a better job with a national scheme, then let's go national. But I do not know if we can assert that.

**Mr CADMAN**—That is a good question.

**CHAIR**—We certainly have a federal responsibility, which I do not think is being met at this stage. I think that is very true to say in that, since Australia ratified the Hague convention, there has been an MOU between the Commonwealth and the states. Quite frankly, the Commonwealth seems to have said, 'We will wash our hands and you, the states, can go on the way you have been doing it for years and years.'

**Dr Campbell**—So this is basically a timely review.

Mr QUICK—Yes.

**CHAIR**—I think it is. Certainly, we deal with the questions of citizenship and all those sorts of things.

**Dr Campbell**—Yes, absolutely.

**CHAIR**—But the business of a child becoming adopted, the actual order for adoption, is under state jurisdiction.

**Mr QUICK**—Then we have the trouble that you discovered about expats adopting children in China and then—

**Dr Campbell**—They cannot bring them home.

**Mr QUICK**—There is difficulty. While I was in Beijing, the Australian embassy liaised with the ACT government to process expat adoptions through the ACT, not the state or territory in which they are going to reside.

**Dr Campbell**—That is interesting.

Mr QUICK—Yes. It sounds farcical.

**Dr Campbell**—So I would be better off being an expat, you reckon?

**Mr QUICK**—No, no. We have been told that people are moving states, moving jobs and moving to the ACT and Tasmania.

**Dr Campbell**—So that they can be processed more quickly.

**Mr QUICK**—That is right.

**Dr Campbell**—That is the other thing that weighs on my mind: what right do Steve and I have to complain about our process? If I was in New South Wales, I would be—

**CHAIR**—Worse off.

**Mr QUICK**—Queensland is terrible.

**Dr Campbell**—Yes. However, I am in Tasmania and so I do have a right to complain.

**CHAIR**—Thank you very much for coming. I think your testimony this morning has been very useful to us. Thank you for having the courage to speak out against the system.

[11.05 am]

#### STAINSBY, Ms Debra Marie, Private capacity

Witness was then sworn or affirmed—

**CHAIR**—Welcome. Thank you very much for joining us this morning. We have your submission, for which we are grateful. Would you like to make an opening statement?

Ms Stainsby—I want to expand a little on a few of the things that I have added in my submission. We have been in the adoptive process for almost three years, although only 12 months of that period would be counted on any records anywhere because the first two years were in Queensland, where we were caught up in the freeze, as they call it. We have been in Tasmania for the last 12 months and we are very fortunate to be able to say that our file has left the country and is sitting on Ethiopian shores as we speak, so we are very excited about that.

We are a little different to many adoptive families in that we have chosen to adopt rather than have biological children. It is not because we cannot have biological children; it is because we have additional concerns for the planet as a whole and the approximately five million orphaned Ethiopian children. We are saying, Why should we bring extra children into the world when there are so many children who need loving homes?' So we do not follow the general trend in that way.

I want to touch on a few other things in my submission that relate to costs. In relation to the current government spiel that we should be having one child for the father, one child for the mother and one child for Australia, if we were to do that it would cost us roughly \$100,000 with the way things are currently moving. It would be worse if we were in New South Wales, so I guess we are lucky we are in Tassie in that respect. If we compare that to the current IVF funding in Australia, it feels like—there is really no other way of putting it—racism and that our children will be considered second-rate in some way. Further things that concern us are in relation to the baby bonus that currently only applies to children up to two years of age.

**CHAIR**—We just increased it in the last budget. It did not go to two years before.

Ms Stainsby—No; that is right.

**CHAIR**—It went to one year.

Ms Stainsby—It was one year, and we are grateful for that change. For people like us who are adopting siblings from nought to three years of age, it means it will apply to one child and not the other.

**CHAIR**—You are able to get siblings, are you?

**Ms Stainsby**—Yes. We have been approved for siblings nought to three years of age, and in all likelihood—

**CHAIR**—I think you are the first person we have met who has been able to get siblings—we had the people with the Romanian children but that was almost by good luck not good management.

**Mr QUICK**—What are the ages of the siblings?

**Ms Stainsby**—Most likely, one will be a baby and the other will be a three-year-old. So, for the three-year-old, we cannot get paid for them. They are not worthy of the baby bonus. It seems farcical to us that it would apply to one child and not the other.

Mr CADMAN—You could get three-year-old twins, couldn't you?

**Ms Stainsby**—We could, in which case we would not get it for either child. We might get sixmonth-old twins too. In all likelihood, one will be older and one will be younger.

**Mr QUICK**—Which is a silly anomaly.

**CHAIR**—So you are getting two?

Ms Stainsby—Two at once, yes. They are the main things. Of course, coming from Queensland and moving down here, we are seeing many of the differences, which, I know, have come out in the Queensland submissions. But, in relation to weight requirements and age restrictions in Queensland not applying here—although, according to Dr Campbell, it sounds like that is changing now—that is quite nice.

**CHAIR**—Have you found Tasmania easier to deal with than Queensland?

Ms Stainsby—I hesitate to put that on record, but absolutely, yes. Unlike Dr Campbell's experiences, I guess we are very lucky in that I can ring Una Hobday, the head of the department and say, 'Hi, Una. It's Deb. How are you?' She will say, 'Great. How are you going?' I can ask, 'What's happening with our file?' and she will tell us what is happening at any given point. I guess everyone has completely different experiences. We have been very lucky. When we were living in Queensland, I was fortunate enough to meet with the head of the department in Queensland. I was told at that point that, for people like us with no biological children and no adopted children, we were looking at a minimum of five years to go through the process. They prioritise in such a way that people with adoptive children are processed first, then people with biological children and then people with no children. So people like us, who have chosen not to have biological children and to adopt only, were told that, from the time the process opened again in September last year, we were looking at approximately two years before our files would even cross someone's desk.

**Mr QUICK**—What justification did they give for that?

Ms Stainsby—Just that they had such a backlog and that so many people were going through the system that they had to prioritise it somehow, and we were the people who came last. That was very difficult for us to hear, as you can imagine. At that point they had the 40-year age bracket cut-off as well.

**Mr QUICK**—So what sort of time frame is it from the time of application in Hobart to when you bring the child home from Ethiopia—less than 18 months?

Ms Stainsby—It is really hard to know. There have been—and no doubt the next speaker will expand on this a little more—a few complications in the Ethiopian part of the process which have slowed things down. We are also in a slightly difficult situation in that siblings from nought to three years old are not all that common, and there are quite a lot of people who want younger children. We joke about it, saying that everyone else's kids probably have beards by the time our kids come along. That is no-one's fault other than the luck of the draw, really, for children who are available. Certainly children are available in Ethiopia, but it is a case of whether or not they can get to the point where they need to be so that they can be adopted out. We know that the orphans are there; it is just a matter of them getting to the right place.

**Mr QUICK**—So if you were the Minister for Health and Human Services in Tasmania how would you streamline the process?

Ms Stainsby—In Tasmania, I think the process has been very well streamlined. In fact, I was asked exactly that question recently by the head of the department: given your experiences, how would you improve things? I could not really come up with a lot other than—and I have said this to the head of the department, so I am not speaking out of turn—ensuring that there is additional consistency between the social workers. We have friends whose file was in country by January, yet ours was not even completed until February. We actually started the process earlier but we had two different social workers.

**CHAIR**—Could it be the length of time that individual social workers take to work on each case?

Ms Stainsby—Yes. We finished our visits earlier but the report writing time took longer.

**CHAIR**—Did you write a home study too?

Ms Stainsby—Yes.

**CHAIR**—How many pages?

**Ms Stainsby**—We did a big book—sorry, that was our country study. The home study on us was about 10 or 12 pages.

**Mr QUICK**—Would you like to see social workers who are specifically focused on overseas adoptions?

**Ms Stainsby**—I would love that. That would be wonderful. It is hard, though, with Tassie being such a small state.

**Mr QUICK**—Yes, but it is catch-22 if you do not have them and you are relying on contract. As I said to the other witness, they are dealing with this functionality and that is the history of their social work and their training. I am not too sure. Hopefully we can get some evidence from some of the universities about how you train social workers and whether or not this is being

introduced into the courses. From my experience, a lot of the social workers are picking this up as they go and learning more from the adoptive parents who are coming around the second time. You are basically telling them what they want to hear. So you are doing a lot of their work for them. If you get two or three social workers, as we have heard in evidence in previous capital cities, there is no consistency. Some of them are good; some are terrible. You get frustrated.

**Ms Stainsby**—Absolutely.

**Mr QUICK**—So, if the focus were on overseas adoption as a social policy area, do you agree with me that there might be some better outcomes?

Ms Stainsby—Absolutely. I know I have certainly been looking—I am actually doing a PhD at the moment; hopefully that will be finished next year—into attachment issues and seeing if there was any university post-doc work that I may be able to do that would relate to the adoption services as well. But I cannot find anything through the universities that I have seen that would actually cater to specific adoption situations. I am not actually sure where the training exists specifically other than anecdotally, really.

**CHAIR**—We do not seem to have found any figures either about the success rate. I think more than 80 per cent of placements are successful, but we really do have any study about whether that is substantiated and what happens in the cases where there are break-ups or where the adoption has not worked and the child has been placed elsewhere. We have found anecdotal evidence of where it has happened, but we really do not have any research on that.

**Ms Stainsby**—It certainly seems that in the adoption area the information that you will get, if you get anything, is going to come anecdotally rather than through research. It is a very sad thing. I think we have the numbers in Australia so that we could justify a lot more research being done in this area, but it just does not seem to get the funding.

**CHAIR**—We do not actually have many adoptions anymore. There are about 500 a year, and there have been for the last decade.

Ms Stainsby—That is true.

**CHAIR**—Most of them are overseas adoptions. There are about 400, and I think we only get about 90-something of local children. Yet we have thousands—literally thousands—of Australian children who are fostered. That is quite interesting.

**Ms Stainsby**—It is.

**CHAIR**—Your file is in country and you are waiting?

Ms Stainsby—Correct.

**CHAIR**—Do you know which orphanage in Ethiopia it is?

Ms Stainsby—No.

**CHAIR**—We deal with several there, don't we?

Mr QUICK—Some people have raised the possibility of the federal government giving some tax breaks because it is costing you an arm and a leg in airfares, fees and all that sort of thing. As you stated, quite a few of you miss out on the baby bonus. What do you think of the idea that you put in your tax return and, like in other countries, the federal government gives you some tax credits? As you said, Costello says, 'One for you, one for your husband and one for the country.' Should the country say, 'Well, if you're going to do something as difficult and as onerous as overseas adoptions and put yourself under stress'—as in your case for three to four years—'we should give you some tax credits'? What do you think of that?

Ms Stainsby—I am particularly fond of that, for two reasons. Financially, of course, it would make a huge difference to many people who simply cannot adopt because of the financial burden. I know people who have had to mortgage their homes one, two or three times. I think it also sends a message out to the community that adoption is not a second-best option for families. This is our best option. We have chosen this. This is ideal and what we think is the best way for us to create a family. Most people, when they hear about us adopting say, 'Can't you have children?' 'Yes, we can.' 'Why aren't you?' 'We don't want to.' 'Why not?'

**CHAIR**—That is your choice. That is fine.

**Ms Stainsby**—That is right. It is our choice but to most people the message out there is that you only adopt if you cannot do the real thing.

**CHAIR**—That is the way most people are. You are in a small category. You have made this choice. You are in the system now, and it is going well for you.

Ms Stainsby—Absolutely.

**CHAIR**—Did you choose Ethiopia, or was it allocated to you?

**Ms Stainsby**—No, we chose Ethiopia. We were a little bit restricted to certain countries because we are not infertile.

**CHAIR**—Certain countries will not allow you to adopt from them because that is their policy?

Ms Stainsby—Yes.

**CHAIR**—But Ethiopia is not one of those countries?

**Ms Stainsby**—That is exactly right. I would like to see anything that could put the message out into the community that adoption is a valid and respected way of forming or adding to a family.

**CHAIR**—We hear the message from everyone that it is a legitimate way of forming a family.

**Ms Stainsby**—I guess if you are hearing that from everyone you would know that we are all in the same boat; we all feel that we are treated that way by many in society.

**CHAIR**—I think that there are a lot of people who have a lot of goodwill but we are hearing that there is a feeling that there are some in some areas of bureaucracy who do not share that view. We seem to have a helpful situation here, which is better than in other states.

Ms Stainsby—Absolutely.

**Mr QUICK**—Tell us about the support network that will be there for you when your children arrive.

Ms Stainsby—I am very actively involved in the African support group, which at the moment focuses on Ethiopia because it is the only African program that we have. I have been involved in that for the last three years. From the moment we thought about adoption we were involved in the support group. There will be a lot of support through AACASA and the other members in the AACASA. It is an Australia-wide support group. The next speaker will talk about that further. I know that there are other individual country support groups, but the support that you get through a support group like that is—

**CHAIR**—Essential.

**Ms Stainsby**—You cannot express how grateful you are for that support. You survive the process based on the support groups, really. They are invaluable.

**CHAIR**—Are there many children in Tasmania from Ethiopia?

**Ms Stainsby**—There are not a lot. I am not 100 per cent certain of the figures. Within my circle of friends there would be about 10 children that I would see on a fairly regular basis.

**CHAIR**—That would give them a good sense of identity and a sort of cousinship.

Ms Stainsby—There is cousinship and we get together as a support group and also with the Ethiopian community, which is also really special for the kids because they can embrace the culture and experience seeing lots of familiar faces, which is nice.

**Mr CADMAN**—Can I ask you about programs like to CARE Australia and Compassion? They provide the resources for children to be looked after in their own environment—and looked after very well as I understand it—compared with the huge expense that you will go to for just two children? I am testing your altruistic commitment in some way.

**Ms Stainsby**—To the best of my knowledge the facilities are simply not there to cope with the number of children that are in Ethiopia.

**Mr CADMAN**—I am saying that if it is going to cost you \$100,000 for this whole process, that money would go a long way if used in Ethiopia to look after children—to feed them and to give them an education.

**Ms Stainsby**—Yes, it would. I agree.

**Mr CADMAN**—You are helping two children compared with many that the same money could help.

Ms Stainsby—That is true. There is certainly that factor. I am not denying that we want children; we are not doing it for purely altruistic means. But in addition we are planning on living in Ethiopia once the process has been completed here. In other words, once our children have come here and have gone through the court process and everything has been completed, at some stage in the next few years we plan on living in Ethiopia and working with the Ethiopian people to try and make a difference over there in education, health and any other way that we can.

**Mr CADMAN**—Have you thought of moving there and adopting in country, in Ethiopia, then returning to Australia with the children? Would that not be a simpler process?

Ms Stainsby—No.

CHAIR—No. It is more difficult.

**Ms Stainsby**—It is far more difficult. We thought about that for the amount of time that it took us to realise that the minute we tried to bring the children back we would be in trouble. The thought certainly crossed our minds, but then we discovered that the process was prohibitive and was never going to happen.

**Mr CADMAN**—I think the only conditions are that you must live within the country for a period of 12 months and you must not go to that country with the purpose of adopting. They are the conditions I am aware of.

**CHAIR**—And there is a new one that requires a thorough investigation of the child before it gets a visa.

**Mr CADMAN**—Of course, you have to have the internal approval of the Ethiopian authorities. I would not have thought that would be a huge restriction.

**CHAIR**—But they would be going there to adopt.

**Mr CADMAN**—So you are not really going there to help the Ethiopians.

**Ms Stainsby**—Once we have our children we will be going back there to help the Ethiopian community.

**CHAIR**—I think Alan is thinking of the other day, when we met some really delightful children from Uganda. They were a choir and they were in Australia under the banner of compassion. Those children had become orphans from AIDS. I have to tell you that they were the most delightful children. This organisation created families for them. They had some wonderful aspirations to lead their country. It was quite awesome. Is there anything else you would like to add?

Ms Stainsby—No. I think everything has been covered. Thank you.

**CHAIR**—We thank you very much for what you have had to say. We are grateful to you for putting in your submission and coming to talk to us today. We hope that your file progresses well and that your siblings arrive. Thank you very much for being here this morning.

Ms Stainsby—Thank you.

[11.28 am]

SHERRIN, Reverend Edward Charles (Ted), President, Australian African Children's Aid and Support Inc.

HODGMAN, Mr William Michael, QC, Member for Denison, Tasmanian Parliament

Reverend Sherrin was then sworn or affirmed—

**CHAIR**—Thank you very much for joining us this morning, Reverend Sherrin. We are grateful for your submission. Would you like to say some opening words?

**Rev. Sherrin**—Yes, I would. Thank you for allowing me to come and for the invitation. I beg your indulgence for a moment. I would like to introduce you to two people, if I could. They are dying to be introduced.

**CHAIR**—Certainly.

**Rev. Sherrin**—Here are two of my five children. My other three are biological children. This is Amee.

**CHAIR**—How very nice to meet you.

**Rev. Sherrin**—And this is Samson.

**CHAIR**—It is a pleasure to meet you both.

**Rev. Sherrin**—Amee's name is Amekalech in Ethiopian. It means 'bridge between two friends'. Samson means 'strong', because he is strong.

**CHAIR**—I think Amee is pretty strong too. We would not want to be discriminating on the basis of sex, would we? Welcome today. It is lovely to have you with us.

**Rev. Sherrin**—I do not know if it is appropriate but I have brought in the latest issue of the magazine of our organisation.

**CHAIR**—Is it the wish of the committee that the documents be accepted as evidence? There being no objection, it is so ordered.

**Rev. Sherrin**—I appear today as a parent of international adoptees from Ethiopia, as an applicant as we currently have another file in Ethiopian that has been there for 12 months and as the national president of our organisation. As of last week, we have 408 financial members around Australia and a wider community of, at a guess, over 600. That is because when many of our members complete their adoptions they do not continue to pay their fees but they still continue with social arrangements, barbecues and things like about. We have members in every state and territory and I am now able to state that we now even have members in the Northern

Territory. For a long time we did not. We have state representatives in each state as well. We have an executive board consisting of seven members. You met our assistant secretary, Betty, today. Three of us live in Tasmania and the others live in New South Wales, Northern Territory and Queensland, so we are quite a diverse group of people.

As somebody who has been involved with international adoptions since 1994, I am basically here to speak on behalf of our members across Australia. I do have experience with what I would call the older system here in Tasmania and the pleasantly much better and newer system in Tasmania as well. I am quite familiar with Ethiopian adoptions. I must admit, though, that I know very little about any other programs other than Ethiopian.

I would like to raise one matter—that is, consideration of a term that is used so often in international adoptions. It is used by central authorities, it is used by the Hague and NGOs, and I have heard it once here already this morning. It is the term 'in the best interests of the child'. This seems to be a term that is mentioned with all good intentions but sometimes it seems to be misused and even abused. I find it hard to see how the best interests of the child are always a priority. For example, you have heard that in 2003-04 there were 369 adoptions internationally into Australia. Yet, in the same year, 40,000 adoptions occurred around the world—20,000 went to the US and approximately the same to Europe. In the best interests of the child we managed to take in 369. Yet estimates are that there are anything up to 100 million orphans around the world. It is very hard to reconcile that term with the processes that are in Australia and with what we are making ourselves available to.

Another example is New South Wales. Fees in New South Wales are going up significantly. They consistently quote the term 'in the best interests of the child'. AACASA put a submission to the New South Wales government when they initially started to put their fees up. In the reply they referred to 'in the best interests of the child' but in the same reply to us it was very clear that it was on a monetary basis that the fees went up for cost recuperation.

**CHAIR**—Some states do total cost recovery and others do not. We are very grateful to the Tasmanian government, which has given us a breakdown of its fee structure, which we will be able to test against other states.

**Rev. Sherrin**—Another example is Queensland, which of course you are all very well aware of. I also noticed that most of the submission from the minister in Queensland to this parliamentary inquiry was about the best interests of the child and wanting to ensure that. I am fairly confident that the minister in Queensland is very supportive of international adoptions personally but he is also presiding over a system in Queensland that, if I speak on behalf of our members, is the worst in Australia.

**CHAIR**—I think we have come to that conclusion.

**Rev. Sherrin**—It is very hard to understand how that is in the best interests of the children.

**Mr QUICK**—We were disappointed that no-one from the department had the nerve, I guess, to front up, despite putting in a 102-page submission. They did not want to be held accountable.

**Rev. Sherrin**—In my role as the national president I have a relationship with most of the managers in every state except Victoria, and I find the director in Queensland very supportive. But to a certain extent it is a case of inheriting a dinosaur that is very hard to work with. To compare Tasmania with Queensland: I was reminded about 18 months ago when I announced that we were about to go to adopt our third child that when we adopted Amee, in March 1996, there was a family that had applied at the same time and went through the same process as us back at the end of 1995. When we announced the allocation of our second child, Samson, that family contacted me by email, very happy for us but upset because here we were doing our second adoption and they were still waiting to be assessed.

**CHAIR**—Which state was that?

**Rev. Sherrin**—Queensland. They were still waiting to be assessed for their first. Occasionally I remind our Tasmanian members to please be sympathetic. You will see that there are a number of announcements in there. I brought that for you to have a look at. There are stories in there of people. I try to remind people in the states like the ACT and Tasmania that we have the best states for adopting internationally.

**CHAIR**—Doing those family stories for a South Australian child would be in breach of the law.

**Rev. Sherrin**—Only for those who have not finalised their adoptions.

**CHAIR**—No, South Australia is different. In Queensland you may not do it until the orders are finalised but in South Australia you cannot do it ever.

**Rev. Sherrin**—When that was first raised we looked up the legislation very deeply. I even got an informal legal opinion on it. I know that is what the South Australian government is saying, but the independent advice I got was that it was dependent on what you term 'in process'. You could argue that if the child's adoption in Australia has been finalised it is no longer in process.

**CHAIR**—They say you may never tell the stories.

**Rev. Sherrin**—They are still saying 'never', are they?

**CHAIR**—Yes, they are.

**Rev. Sherrin**—I have had both the Queensland manager and the Western Australia manager on the phone to me initially concerned about it because it is a public document. They both stopped short at actually asking us to stop printing it in our magazine for our members.

**CHAIR**—In Queensland they have stopped printing quite a number because they have been heavied.

**Rev. Sherrin**—There are two organisations that have stopped printing. Our state representative raised with me concerns about ours going in there. As a result I spoke to the manager in Queensland about it. The following week, even though there was apparently no discussion amongst them, I had a phone call from the Western Australian government as well.

Both of them would not request us not to do it anymore. However, I did indicate that if they wanted to push that barrow then we would stop it being a public document. At the moment we provide these free to all the state managers.

**CHAIR**—It does not matter. Once something is published it is published.

**Rev. Sherrin**—Whether it is public or private doesn't matter?

**CHAIR**—It does not matter.

**Rev. Sherrin**—Their issue is with it being published.

**CHAIR**—I happen to think it is ridiculous.

Mr QUICK—Yes.

**CHAIR**—This is a happy announcement—these people have welcomed these children to their family. It goes quite to the argument that we were discussing earlier that formation of families by way of adoption is a perfectly legitimate way to form a family. If you have the birth of a child you announce it to the world. What is the difference?

**Rev. Sherrin**—We have been advised that it is AACASA that would be breaking the law, if one of those departments pushed it, not the actual parents. It would be our organisation. As an executive we discussed that. What we told the two departments that raised it with us was that, until they officially requested us to stop doing it—mind you, after the *Hansard* comes out, maybe they will—we are going to continue to celebrate our parents' allocations.

**CHAIR**—On what basis do they say that you should not be doing it?

**Rev. Sherrin**—The intention of the law in every state with regard to the publication of details was to protect the children's and the parents' privacy. It was never to stop a draconian—

**CHAIR**—What is the difference between a child that is born naturally to a mother and a child that is adopted? What is the difference?

**Rev. Sherrin**—Certainly, that is our argument as well. They should be treated the same. There does need to be some protection, however, for privacy and to make sure that the media does not, without the parents' consent, start interviewing children at schools or pointing out—

**CHAIR**—But that applies to any child.

**Rev. Sherrin**—Yes. it should apply. I understand that was the intention in every state with the legislation originally. It was to protect the children and the parents.

**Mr QUICK**—Is the problem the fact that the legislation when it comes to adoption was primarily originally designed for in-country adoption? Now that we have overseas adoption, it has all been packaged under the same state rules and they all have different rules. It is like the rail gauge mentality that we had last century.

**Rev. Sherrin**—Yes. But then, even somebody who adopts locally should be able to celebrate the adoption of the child—

**CHAIR**—Absolutely. All of that has changed.

**Rev. Sherrin**—because in this day and age things have changed. They do not hide adoptions, even local adoptions, anymore. It is not wise to do so.

**CHAIR**—Yet the legislation does not reflect that.

**Rev. Sherrin**—That is right.

**Mr QUICK**—Has anything been put in writing to your organisation asserting that you should not be doing it?

**Rev. Sherrin**—No.

**Mr QUICK**—So, departmentally, they are not so much heavying you as putting the message out?

**Rev. Sherrin**—I have been questioned about it by two state departments. Questioning was as far as it went because I made it very clear that, if it was pushed, we would cease making it as public as it is and it would only go to our financial members. That would mean that every government department that we send it to free of charge and every state manager that we send it to free of charge would no longer get the magazine. I do not know whether that had an influence, but so far—it was about five months ago that we were asked—we have not been asked any further questions.

**CHAIR**—It seems to be a pretty crazy rule.

Rev. Sherrin—Yes.

Mr CADMAN—I would like to probe your comments, if I may, about the comparison between Australia and the United States. If your figures are right, we could adopt from overseas roughly three times the number of children to be equivalent to the same proportion of the population as the USA. But they are still, to my knowledge, not a signatory to the Hague convention.

**CHAIR**—They are a signatory but they have not ratified.

**Mr CADMAN**—Yes, they have not ratified it. Therefore, adoption, from the Australian point of view, from the US is extremely difficult. The fact that they have failed to ratify makes their system more open and less supervised, I think.

**Rev. Sherrin**—Far less supervised.

**Mr CADMAN**—So do you think that is a fair comparison?

**Rev. Sherrin**—To the Australian situation?

**Mr CADMAN**—Yes. Would you like to see us adopt the American approach is my question.

**Rev. Sherrin**—No. I can advise on behalf of our members that we have discussed this as a group—

**Mr CADMAN**—But the implication of your comparison was that, I would have to say. Can you tell me what happens in Canada? I do not know.

**Rev. Sherrin**—Canada has a bilateral agreement with Ethiopia, I believe, like Australia does.

**Mr CADMAN**—Do you know what their level of adoption is?

**Rev. Sherrin**—No, I am sorry—I do not know.

**Mr CADMAN**—I will check that out because we need to make some of those international comparisons.

**Rev. Sherrin**—It is very expensive in Canada, but I think it is very quick as well. I was interviewed by a *New Idea* reporter recently after Angelina Jolie adopted a child in a week—seven days.

**CHAIR**—Yes, there seem to be different rules over there for different folk.

**Rev. Sherrin**—Yes, but even America allowed them to do it. It did not surprise me particularly in Ethiopia. Ethiopia is a Third World country with between two million and five million orphans, depending on who you get your figures from. So it does not particularly surprise me that in Ethiopia you can do it that quickly.

**CHAIR**—We have heard evidence from one parent who adopted a child from Ethiopia. When they went to the orphanage to pick up their child, he said it was just heart-wrenching because, as he walked through the other children, they would say, 'Please pick me.' That is heart-wrenching.

**Rev. Sherrin**—In 2002, when we went, we visited an orphanage for half a day. Amee and my wife helped feed some babies while Samson played out in the courtyard with some other children. There was a room about this size full of cots—babies just crying, some of them asleep. I went over to a particular one in a corner, and I started stroking her back and she stopped crying. One of the nuns there was able to speak English, and she said, 'She stopped just because of the touch. They are never touched; we do not have enough staff to touch them.' That sort of thing really gets to you.

**Mr CADMAN**—Could I suggest that probably some of the resources that we devote to the adoption process, if directed to supplying more staff, might get a better result?

**Rev. Sherrin**—If we had more staff?

**Mr CADMAN**—Over there in the orphanage to give those children the attention they deserve. It seems to me that precious few are being saved but many are being neglected.

**Rev. Sherrin**—By far. International adoptions to Australia are really not impacting at all on the bigger picture.

**Mr CADMAN**—But is that the solution? That is my question: is international adoption the solution to this problem?

**Rev. Sherrin**—I do not think it is the solution to the orphanage problem in the world; I think it is a help.

**CHAIR**—But, on the other hand, aren't we lucky to have Amee and Samson come here and be part of us?

**Rev. Sherrin**—Yes. We visited the house where Amee was born, which was four metres by three metres. When we visited there in 2002, nine people lived in that four-metre by three-metre room. That is extremely common in Ethiopia. International adoption is a help to that, but it is barely scratching the surface. However, while there are families that are willing to adopt children and that want to enlarge their families in this manner, and there is the alternative of IVF, it is a good solution. It is helping a child in need, and it is helping build families here.

**Mr QUICK**—Can you tell us the difference in the process between Samson and Amee? Do they put you through the same hoops for the second one? Is there an understanding that you have been successful, have done the right thing and have a happy family with Amee, so we will make some discount and quicken the process through the state, or is it the same rigmarole?

**Rev. Sherrin**—Between Amee and Samson, it was pretty much an update to our file. Our social worker for Samson was happy to just update the file. With the new application we began in March last year, we initially had a problem with a social worker—a contract worker at the department—who had only just started. We had some conflict with her almost immediately and asked that she be replaced. She was not going to update. I understand Mrs Hobday is here later in the day, so I do not know whether they are meant to update, but she made it clear to us that she was going to proceed as if we had never adopted children.

**CHAIR**—We took evidence about that in another state.

**Rev. Sherrin**—The difficulty was with one new worker. We met with her twice, I think, and then we asked for her to be replaced. We just did not jell and we were not going to jell at all. When she was replaced, the manager here required the new worker to finish the report in the same amount of time—and, by the time we got a new worker, I think she was given about a sixweek period to finish our assessment—and she just updated it.

I said in the introduction that we have experienced quite some differences here in Tasmania. When we began in 1994, Tasmania was a fearful state to adopt children from. You have heard many times that people were scared to come along to a parliamentary inquiry like this and put their names to things like that. Tasmania was like that. I do not think Tasmania is like that anymore and I think it is because we have a manager who actually cares and is supportive of

intercountry adoption. You have a submission from Lisa and Andy Minogue from Victoria, who are members of ours in Victoria. It is a very passionate plea about the difficulties they had in Victoria. Theirs was not an isolated case in Victoria. I often have phone calls from families in Victoria speaking of a lack of compassion, of the feeling that if you kick up a fuss about anything your file is going to go to bottom of the list, if it does not disappear, or that problems will be discovered.

Tasmania used to be like this. When we adopted Amee we asked for siblings, but we were knocked back. At the time it was suggested, 'Why don't you try one and see what parenting is like first?' We already had three biological children. When we adopted Samson—did we ask for siblings for Samson? No, we did not that time. I had to check. Things have changed here drastically. I very much doubt that there would be repercussions for speaking out in this state. There are still things to be improved, but across Australia Tasmania and the ACT are known as the two best states to adopt internationally from. Mr Cadman asked earlier about a national idea. I would respond by saying, as did the doctor earlier, that we would be fearful, speaking as a Tasmanian member, of a national approach.

**Mr CADMAN**—You could go backwards, couldn't you?

**Rev. Sherrin**—We would—Tasmania, the Northern Territory and the ACT. The Northern Territory is yet to see how they are going to be, but our members in ACT and Tasmania are going to be very protective of their departments, because they are working very well.

**CHAIR**—We met with the ACT people only last week and we were quite impressed with their evidence. We are going to hear from the Tasmanian government this afternoon, for which we are very grateful. I would also now like to thank Michael Hodgman, the shadow Attorney-General, for his interest in hearing the evidence today and for joining us. I think he has to whiz away, but thank you for coming.

Mr Hodgman—I do, Madam Chair. Thank you and thank you, Mr Cadman, Mr Quick and the committee for coming here. I will look forward to reading the details of the submission. The plain fact here is that we do have matters of concern in relation to overseas adoptions in this state. I agree with everything I have heard from the Reverend Ted. I particularly thank you as a committee for coming to Tasmania, because occasionally we have missed out. We really appreciate it. Harry, of course, is a very old friend, but I thank you, Madam Chair, and Alan for being here along with your staff. We appreciate it very much. I am only sorry that I have another commitment to go to, but I wanted to show my support and I am very grateful. And both of you came over well on radio this morning—you and Mr Quick. I happen to agree with both of you.

**CHAIR**—Thank you, Michael.

Mr CADMAN—Thank you, Michael.

**Mr QUICK**—Thank you, Michael. So with ACT and Tasmania showing the way, what do we do as a national parliament to drag the other states kicking and screaming up to them?

**Mr CADMAN**—Adopt the Tasmanian rules.

Mr QUICK—Quite often you mention that the person in charge in Tasmania is driving the departmental ethos and that that is changing. That is fine if you have someone there, but what is needed is a whole departmental change. You did hear me say that we need to look at the training of social workers and the whole idea of adoption—it is not a dirty word. 'Overseas adoption' should not be a dirtier word.

**Rev. Sherrin**—But it seems that adoption is considered in our society as not even ideal for the children. When we adopted Amee my own sister challenged us about why we would take her away from her culture. Australian society generally does not seem to understand that her culture was one of poverty and starvation. The life span of women in Ethiopia is 39 and for men it is 37. This is the culture that they have.

CHAIR—I understand that entirely. What seems to have happened is that we have swung the pendulum. There was a time in our own culture in the fifties and sixties when children were taken away from mothers in the most horrendous circumstances and when there were condemned mothers. We have heard about heartbreaking matters along those lines. But the pendulum seems to have swung completely the other way—which comes as a surprise to me—and there is now an antiadoption culture within the bureaucracy. I am not saying it is like that here in Tasmania; you seem to have someone who is sympathetic.

**Rev. Sherrin**—Not in the past, though. There have been three managers and we have finally got one who is extremely supportive of us all.

**CHAIR**—Yes, but this antiadoption culture seems to have been very evident that never should there be adoption. We have actually had some people giving evidence say that—that you should always be looking for the biological reunion or leaving people in their culture. But where is the dictum that says an individual child should be sentenced to poverty and unhappiness when it is within some people's ability to reach out and give love? I think we have to wind it back a bit.

**Rev. Sherrin**—I get feedback from our state representatives and many of our members. This suggests that, of all the states, Victoria has been quite antiadoption. Whether that is entirely true I do not know; I am just giving an indication of the perception I get from our members. It seems so consistent. I do not know how many of them would be brave enough to say that, when the experience is that they would be in trouble if they do. However, many of our Queensland members would say the same thing. I am not sure that it is entirely true that they are antiadoption, but their system is. The system in Queensland is antiadoption; it does nothing to help people adopt.

**Mr CADMAN**—The chair and I had a similar experience in a remote Aboriginal community, which was much as you have described Amee's home. There were probably more people in the same area—

**CHAIR**—There were. There were 21 people to a house.

**Mr CADMAN**—It was a remote Aboriginal community.

CHAIR—It was horrendous.

**Mr CADMAN**—It would have been impossible for you to adopt, given the restrictions that you have already spoken about. But would that be a consideration, or are you looking for Third World solutions?

**Rev. Sherrin**—I am sorry, I do not understand.

**Mr CADMAN**—We have got communities in Australia—it is a hypothetical question, I admit—that really deserve attention and adoption would be a good solution, but it is not available. I am asking you whether that would have been an option for you to consider, rather than going to a Third World country.

**Rev. Sherrin**—You cannot adopt interstate.

**Mr CADMAN**—No, that is what I am saying. It is a hypothetical question. Would you have considered that? I ask because your motive seems to be a compassionate one. I am trying to measure whether it is external to Australia or whether it applies universally to anybody.

**Rev. Sherrin**—It is a compassionate one. I have had aspirations of adopting since I was 14, and my wife soon after. We both always wanted to adopt children. Biological children have come along in the meantime, though, so we had to slow the process down. We would have considered that if it was possible. However, we did not consider local adoption because when we first started adopting we were told there was a 10-year waiting list. We were always actively told, 'Don't bother.' But back in '95 they also said that with international adoptions. That is the beauty of the manager that we have here now. She has turned it around. You go to the weekend seminars that they do here and you are not discouraged from adopting, whereas back in '95 you did a whole seminar that was trying to convince you not to adopt. In some of the other states that is still going on. But it does not happen here.

**Mr CADMAN**—Can you tell me about the post-placement services? How have they changed from Amee to Samson here in Tasmania? What is the story you are getting from the other states about what happens once the child arrives and how the department links in with you? Are you forgotten or given a hard time?

**Rev. Sherrin**—You are still actively engaged with them for the first 12 months, until you finalise the adoption in the Australian court. After that, because we are adopting from Ethiopia, there is an expectation and an Ethiopian requirement in law that you provide a report to Ethiopia every 12 months until the child turns 18. The Tasmanian department has taken it upon themselves to continually write to people and encourage them to do that. Our organisation encourages that as well, because if too many people do not do it that will make Australia look bad.

As far as post-placement services are concerned, if you are having difficulty with your children then there is a reliance on organisations such as ours, along with other parents who have been there and done that—they have been through it—to help. However, there has been a change recently. One of the speakers this morning mentioned the attachment disorder seminar, which I went to recently—I think it was last weekend. I do not agree with everything the speaker—a lady from Victoria—said, but it was brilliant. It opened our eyes to things to do with our two adopted children, particularly Samson, which we had not thought of before to do with

attachment. I will be vague about the details because I am aware that he is at the back of the room.

**Mr CADMAN**—Can you give us a quick sketch, because I would be interested in that. What did they say at the seminar?

**Rev. Sherrin**—It was an education forum about understanding, for example, that when a baby of six months is lying in a crib and it soils itself, gets cold and wriggles, normally a parent will be there to pick that child up and attend to it. If the parent is watching TV or if they are busy or something like that, the child will whimper at first or cry and then it might get intervention. In Australia, by the time a baby cries it normally gets intervention. From the intervention comes the bonding experience, and the child relies on the parent for help to solve its problem of being cold, hungry or dirty.

You take that same situation of a baby into an orphanage where there is not enough staff to care for the children, and the same thing happens. Initially when a baby is cold, wet, hungry or uncomfortable and gets to the whimpering stage and there is no response—there is no intervention—and then gets to the crying stage and there is still no intervention, it can get to a point where a baby will clench their fists and get really angry. Apparently that is quite horrific for a baby. The baby's mind can shut down at that point and it can go to sleep. If the baby is not dealt with, eventually it will go to sleep. The baby learns from that that its dependence is on itself. If I go to sleep when I get that uncomfortable and that angry then I can help myself.

I only learnt about this two weeks ago, so I am rough on it; it was an eye-opener. That sort of situation is the start of that child learning to fend for itself. That situation is the same for that child through their years as a toddler and perhaps to when they are four or five years old, except in relation to rules when they do something wrong. In Australia, there will be intervention. If the child wants something, mum or dad will say, 'No, you can't have it.' The child will protest; the child will get disciplined in some way; and the child will learn that rules are acceptable. It is a normal process of having rules until they are older.

You take a child of that age in Ethiopia and even a child here in Australia—I was a policeman for 15 years; I have seen this many times—where for a toddler the intervention stage has not happened because the child, for example, in Ethiopia has no parents and they are in an orphanage and there are not enough staff to care for them, or the child back home in Australia has parents who are maybe under the influence of something or they are busy or whatever and the child gets away with what they want. They make their own decisions about what they want. When you have a baby who has learnt to fend for itself and then as a toddler they have learnt that rules do not apply to them, you have a recipe for a serious attachment disorder with that child. Some of the help that we are getting now in this state for adopted children is understanding that. It is extremely relevant to adopting children, even babies who are nine months old. Most parents feel that, the younger you get the children, the easier it is to bond with them.

**CHAIR**—Absolutely, because the child's growth in intellect and brain growth occur in that first two years. That is when it is all happening.

**Rev. Sherrin**—That is right. The same applies to older children. A certain boy in this room took more than two years to bond with us. Eighteen months after he arrived here, he was asking

to go back home, because he had these dreams about what it would be like. It takes time and there are attachment disorder issues. As I said, I would not agree with everything, but the fact that the department has now made it compulsory to go to this seminar is a brilliant step forward. Up until then, all we had were parents who had been there before, and we would rely on parents in support groups to help us. I am fairly certain that is still the case, though, in every other state. I could be wrong, but I think this state's post-placement service and wanting to move in that direction is a first in Australia. As I said, I could be wrong; I am not really sure about that. It is so new to me.

**CHAIR**—Thank you. It has been a very enlightening presentation.

**Mr QUICK**—Thank you for coming along and providing us with some more evidence and some more avenues of thought.

Rev. Sherrin—I would add one thing. There is a way in which I am hoping this inquiry might be able to make a difference in Ethiopia immediately with Australian processes that would allow babies to be united with their homes here within a period of just six weeks. The Australian government has a policy that Ethiopian children must have two HIV tests. It is the only country that I am aware of where DIMIA requires two HIV tests. There is a laboratory in Ethiopia that now has national accreditation for testing babies with a test which is now recognised throughout the US, and I understand that HAS—Health Assessment Services—accepts it. This test would mean that babies would not need to stay around for another 90 days to have a second test. It tests for HIV, for antibodies and for antigens, which the current two-system test cannot do. There seems to be something amiss when DIMIA will not accept them but HAS—which I understand is the authority for DIMIA in relation to health tests—will, particularly seeing it is the only country that Australia is adopting children from, as I understand it.

**CHAIR**—It is the only African country we adopt from.

**Rev. Sherrin**—That is right. But HIV is HIV, no matter where you are. The problem is not part of the Ethiopian process; it is part of the DIMIA process whereby, for some reason, it will not accept this test at one point. The other test could really speed up the process wonderfully for many of our parents who are adopting babies.

**CHAIR**—We will note that down, too, and find out what the reason is. Thank you for being with us and for introducing us to two delightful young Australians, Amee and Samson.

**Mr QUICK**—I have one other question with respect to problems at school and also Medicare cards. We have heard evidence that, when you take your children along to put them on the Medicare card, the process is very impersonal.

**Rev. Sherrin**—I get that advice occasionally from members across Australia, and I do not quite understand it. We have never had a problem with it. Two of our members have contacted me in Tasmania, and they have had a problem with Medicare. It seems as though it is a matter of who you get on the phone at the time. Our state department here provides a letter to get you straight on to Medicare when you arrive back with your child. We have never even had to use that letter with Medicare here in Tasmania, yet I know that a number of our members have not only used that letter but then still struggled to get their children put on straightaway. One family

here in Tasmania could not get their child on the same Medicare number; they had to have a separate card. We have two cards because there are seven of us in the family. But this child had a separate card to the family. I do not really understand why there is a problem with Medicare.

**Mr QUICK**—What about enrolling children at school?

**Rev. Sherrin**—I am not aware of any problems with it.

**CHAIR**—What about passports?

**Rev. Sherrin**—Applying for a passport once the children have been adopted here?

CHAIR—Yes.

**Rev. Sherrin**—We have only done that with Amee and we have had no—

**CHAIR**—No problems?

**Rev. Sherrin**—Because she was an Australian citizen. Once she was adopted through the court here, she was an Australia citizen. So it was simply applying like everyone else.

**CHAIR**—We have had some evidence saying that the department has required the original entry visa.

**Rev. Sherrin**—I have read that in one of the submissions somewhere as well, but I had never heard of it before.

**CHAIR**—It sounds like it is who you get at the counter, doesn't it?

**Mr QUICK**—It sounds a bit like that.

**CHAIR**—We have said thank you a few times; we really are most grateful for you coming to join us this morning.

Rev. Sherrin—Thank you.

[12.14 pm]

**CHAIR**—This is our community statement time, and some folk have indicated that they do want to give a community statement. But, with the permission of the young lady herself and of her dad, we thought it might be very nice to hear from Amee about how she feels about things, and she has graciously accepted our invitation to talk with us. I thought I might begin by asking: Amee, how do you feel about the fact that your dad desperately wanted you to come and be part of his family and that you are now a beautiful Australian lady?

Amee—I am thankful to be here because when I went back a couple of years ago to Ethiopia I saw all the poverty over there. It opened my eyes. I am grateful to have an education, and that I am healthy and I can grow up, because over there the life expectancy for women is—only about 38, did you say? I know that here I can live a healthy and prosperous life, so I am grateful for that.

**CHAIR**—That is wonderful. Did you come to Australia as a baby?

**Amee**—I came to Australia when I was five years old.

**CHAIR**—So do you remember that?

**Amee**—I remember bits and pieces. I remember when I first came here. I do not remember anything else after the age of five.

**Rev. Sherrin**—She had a lot of memories, until we took her back.

Amee—Yes.

**Rev. Sherrin**—After we took her back, her memories consisted of going back and not before.

**CHAIR**—Do you remember starting school here?

Amee—Yes.

**CHAIR**—Was that exciting?

**Amee**—It was. I remember—I think I had been here for six weeks—that I really wanted to start school because I did not want to stay at home. So I started prep, and that was pretty exciting.

**CHAIR**—Did you speak English when you came?

**Amee**—I was pretty fluent after six months; I wouldn't shut up!

**Rev. Sherrin**—But not when she arrived.

**CHAIR**—Not when she arrived?

**Rev. Sherrin**—She spoke fluently in English after three months, but she couldn't speak any Amharic after three months. We knew this because she got on the phone to a little girl that she was in the orphanage with, who had come to New South Wales, and they could not communicate. So it just took three months.

**CHAIR**—And when you went to school, people were nice to you and you enjoyed it?

**Amee**—Yes. They accepted me. I loved it. I made lots of friends. It was great.

**CHAIR**—What would you like to be when you finish school? What do you want to do?

**Amee**—I have had lots of phases. I have wanted to be a rock star, a chef, a fashion designer, a model, a teacher—I am not really sure what I want to do. I have got another three years of high school left to do. I am not sure what I want to be.

**CHAIR**—And are you doing well at school?

**Amee**—Yes. I really enjoy work studies in school, and I do food studies and art.

**CHAIR**—That is good. It looks like you have lots of ideas about what you can do and what you can achieve. It is lovely to have you here.

**Amee**—Thank you.

**Mr CADMAN**—I just wonder what it is like getting brothers and sisters from over there—for instance, for you and your family to have Samson coming in?

Amee—It was great.

**Rev. Sherrin**—Samson is not her biological brother.

Mr CADMAN—No, I understand that.

**Amee**—It was great, because he has been given a chance to grow up and have a better life than he could have had in Ethiopia.

Mr CADMAN—I think he would be just as hard to manage as a normal brother, don't you?

**Amee**—Yes; he's a ratbag! We are just a family. It is no different; I get along with my other brothers and sisters.

**Mr CADMAN**—Do you see things about their settling in that bring back memories of your first arrival?

Amee—Yes. I can't think—

**Mr CADMAN**—Like learning English?

**Amee**—I learnt English a bit quicker than he did, but with culture it is a lot different from how it is over there.

**Mr CADMAN**—How old was he when he arrived?

**Amee**—He was five—the same age as I was—wasn't he?

**Rev. Sherrin**—There is a question over how old he actually is. We think he is perhaps two years older than he is meant to be; where he is eight on paper, he is probably 10. So, when we picked him up at the age of five, he was probably seven. We say that because when we took him back to the house where we were staying, the maid took one look at him and thought it was funny that we said he was five. She said, 'He is not five—no, no, no. Seven,' she said. We were still excited to get him.

**Mr QUICK**—Tell us about the culture, Amee. You are living in Australia now and getting the Australian-American version of how life should be. How are you learning about your Ethiopian heritage?

**Amee**—Every now and then we have a meeting where all the Ethiopian adopted children come together. Recently we have been having some with the other Ethiopian communities that live here. We had a recent one here in Hobart where they showed us the national food, we did some cultural dancing, they spoke in their language and we learned a few things. The culture is a lot different to here, so I learnt a lot.

**Rev. Sherrin**—Amee was only the second child in Tasmania to be adopted from Ethiopia, but to this day I think she is pretty much the oldest that goes to our social gatherings. That is probably because of our involvement. One of the things that we often find is that the older children do not want to go along. They want to be Aussies and not stick out. Amee, tell them about the phrase you call yourself.

**Amee**—I call myself an 'Aussieopian', which is a mix of Australian and Ethiopian.

**Rev. Sherrin**—It has caught on around Australia.

**Amee**—Yes, it is pretty cool.

Mr QUICK—Once you have got your education, do you plan to go back to Ethiopia—

Amee—I do.

**Mr QUICK**—on a regular basis?

**Amee**—I would like to go and visit, because when we went back I found some family over there and I would like to go back and visit them.

**CHAIR**—You found some extended family?

**Amee**—Yes, some uncles and a grandfather. I found where I was born, where I grew up and the school that I went to. I would like to go back and visit there and see a bit more of my heritage.

**CHAIR**—That is when you are a fashion designer or a model or whatever you decide you are going to be?

Amee—Yes.

**CHAIR**—That is gorgeous. 'Aussieopian' is a good expression. It is very clever. Thank you for sharing that with us.

**Amee**—My pleasure.

**Mr QUICK**—Thank you for appearing in front of us today. Some people find it a bit difficult to talk to parliamentarians. I think you are a wonderful ambassador for overseas adoptions. We have seen lots of children appear before the committee and I just wish the greater society could understand how wonderful overseas adoptions really are.

**Amee**—That is great.

Mr QUICK—Thank you. It was a pleasure to meet you today.

**CHAIR**—We will have some other community statements later.

[12.22 pm]

# CROOME, Mr Rodney, The Australian Coalition for Equality

## **DELANEY, Ms Martine, The Australian Coalition for Equality**

**CHAIR**—Welcome. I invite you to make an opening statement.

**Mr Croome**—Our organisation is a newly established one that advocates for equality for lesbian, gay, bisexual, transgender and intersex people in Australia and we want to talk a bit about some of the issues that fall within the scope of your inquiry that affect same-sex couples in particular. We made a formal submission to the inquiry earlier on.

I will start off talking about one of the terms of reference in particular and then talk about the general scope of the inquiry. One of the terms of reference of the inquiry is:

Any inconsistencies between state and territory approval processes for overseas adoptions.

One point that we want to make to the committee today is that there are deep inconsistencies between the states and territories when it comes to recognising adoptions by same-sex couples. Same-sex couples can adopt children relinquished by other people and children that they already care for in Western Australia and the ACT, and in Tasmania they can adopt children that they already care for. Conceivably, of course, this can also involve children who are adopted from overseas. Same-sex couples could come to Australia with a child that they adopted in their home country and have that adoption recognised in the states that I just mentioned but not in the other states or territories. In the future, there could be Australian citizens who adopt children from overseas and have that adoption recognised in Western Australia, Tasmania and the ACT but not in the other states or territories. We feel that that is an inconsistency between the states and territories which needs to be taken into consideration.

The obvious answer to that, from our point of view, is for the federal government to encourage states and territories that currently do not allow same-sex couples to adopt to change that so that there are equal laws across the country. Then children adopted by same-sex couples from Western Australia, Tasmania or the ACT would have equal rights and equal protections when their family moves across the border into New South Wales, Victoria, South Australia or Queensland. The second issue we want to mention today is a general one—

**CHAIR**—Are the children you are talking about citizens?

**Mr Croome**—I cited two cases there—a case where people who have already adopted a child move to Australia and become permanent residents or citizens, or, conceivably in the future, a same-sex couple who are Australian residents already and who adopt a child overseas. They would be citizens, and I assume that a child adopted from overseas would also become a citizen. So we are talking about people who are permanent residents or citizens.

**CHAIR**—So once they are citizens, that is it—they are citizens and they have the same rights as everybody else.

**Mr Croome**—Except insofar as children adopted by same-sex couples do not have that adoption recognised in states, apart from the jurisdictions I have already mentioned. If, for instance, I am in a same-sex relationship and I adopt a child that I already care for or who is related to me—a known child adoption in Tasmania—and my partner and I and that child move to Victoria, that adoption would not be recognised.

**CHAIR**—But that child would be a citizen.

**Mr Croome**—That is right. It would be a citizen but it would not have two legal parents; it would have only one.

**CHAIR**—Once you become adopted in one jurisdiction you do not go around and get adopted in every jurisdiction. It does not make any difference. Once the adoption is effective in one jurisdiction, you then have the right to be a citizen.

**Mr Croome**—That is right.

**CHAIR**—That is what gives you your rights.

**Mr Croome**—Yes, you would become a citizen, but you would not have your two parents recognised legally as your parents. You would have only one legal parent; that is the problem.

**Mr QUICK**—You mentioned that people of the same sex have adopted a child and gone to another state—for example, they have enrolled the child at the school and the education department has said that basically that child has only one parent.

**Mr Croome**—That is exactly right.

**Mr QUICK**—Can you cite examples of that?

Mr Croome—The change in laws in Tasmania, Western Australia and the ACT has occurred in the last two years, so I am not aware of any particular examples where that has occurred. But I know that in Western Australia and in the ACT there have been quite a few known child adoptions—that is, adoption by a same-sex couple of a child that one of the partners has already cared for from a previous relationship or a child who is a relative of one of the partners. I do not know of any people who have moved interstate, but if that is conceivable—and, as you said, Mr Quick, as soon as they move interstate, that child loses the benefits of having two legal parents—they will have just one legal parent. The school is not legally entitled to recognise both parents; they can recognise only one. And in any other circumstance where the child would benefit from having two legal parents, they would miss out and have only one.

**Mr QUICK**—Can you cite any examples of where that relationship has broken down and there have been custody arguments about who is the legal parent?

**Mr Croome**—Yes, there are quite a few examples of that in those jurisdictions which do not recognise or do not allow same-sex couples to adopt children, particularly children that they already care for. Most of those examples come from New South Wales. I think there is a case before the Family Court in New South Wales at the moment where there is a contest over custody of a child between a legal parent and that legal parent's former same-sex partner—they are no longer in a relationship. The former partner is saying, 'Yes, I did care for that child, but under New South Wales laws I was not allowed to adopt that child,' and so the court is left in a difficult situation where it needs to assess what input that other parent had into the child's upbringing.

**CHAIR**—All custody cases are difficult.

**Mr Croome**—Indeed, Mrs Bishop. But they would be much easier if, as with heterosexual couples, there was the possibility for children to have the benefits of two legal parents rather than one.

The second issue we wanted to raise was in relation generally to the inquiry which, of course, is about removing unnecessary obstacles to people who are adopting children from overseas. We are concerned about the federal government's intention to legislate against the possibility of same-sex couples adopting from overseas. That was an intention made clear in last year's legislation, which also entrenched the definition of marriage as between a man and a woman. The Marriage Amendment Act 2004 included provisions for banning overseas adoption by same-sex couples. The Attorney-General has made it clear that, because the legislation failed in the Senate last year, he wishes to reintroduce it this year, and of course it is expected to go through.

We are concerned about that because, according to UNESCO, every year 17 million children in the developing world die unnecessarily from disease, malnutrition and abandonment. Conceivably some time in the future, when developing countries allow same-sex couples to adopt their children, at least some of those children could find safe, caring and loving homes in Australia with same-sex couples. As you would be aware, at the moment none of the countries with which we have adoption protocols allow same-sex couples to adopt. As far as I know, they do not allow anyone but married couples to adopt.

**CHAIR**—No, that is not true. Single people can adopt and de facto couples can adopt in different jurisdictions. Some countries permit that, but not one country will allow same-sex couples to adopt. So it does not arise here.

**Mr Croome**—I stand corrected. It is a useful point, Mrs Bishop, for two reasons. Firstly, I think it shows that there is a movement in the developing world towards allowing a greater scope of adoption from overseas. We understand that there are a number of countries in the developing world that are considering the possibility of allowing same-sex couple adoption, including Brazil.

**CHAIR**—It depends on the country from where the child to be adopted comes.

Mr Croome—Yes.

**CHAIR**—Some countries we have agreements with will only allow adoption where they are married, and they have to be married for, say, three or five years. Different jurisdictions have different requirements and different countries have different requirements. The two interact, but not one will allow same-sex couples to adopt.

Mr Croome—It is the case, though, that an increasing number of countries in the developing world, particularly in eastern Europe and South America, are recognising same-sex relationships in their domestic law, including adoption by same-sex couples domestically. I could cite a number of countries that are moving in that direction. Inevitably, as they do move in that direction they will also consider the possibility of allowing same-sex couples from overseas to adopt children from their jurisdiction. It seems unnecessarily callous and unfair for this country to block that possibility when some of those children could benefit from a loving and caring home made by a same-sex couple.

The other point to make carries on from your point, Mrs Bishop, about single people adopting from overseas. Let us say an Australian who is in a same-sex relationship in Australia adopts from overseas as a single person.

**CHAIR**—It would be subject to the assessment—and we have heard lots about assessments—so I cannot look at a hypothetical.

**Mr Croome**—I was going to raise the point about known child adoption again. It seems unfair within Australian jurisdictions for the child who is thus adopted not to have the advantage of two legal parents rather than one.

As I said, our position is that it seems pre-emptory and callous for this country to be blocking the possibility of giving children from the developing world a new life in Australia with a same-sex couple. One of the reasons that some people feel it is inappropriate for same-sex couples to adopt children, be they their own children, children relinquished by others or children from overseas, is because same-sex couple parenting is somehow dysfunctional or second rate.

As an attachment to the written submission that we have already made, we would like to offer the committee a study entitled *Meet the parents: a review of the research on lesbian and gay families* conducted by Associate Professor Jenni Millbank of the University of New South Wales. It catalogues research, done globally and in Australia, that shows that children raised by same-sex couples have the same levels of intellectual, social and emotional adjustment as children raised by heterosexual couples. There is no difference in the outcomes, and if there is no difference in the outcomes then, in our view, there is no reason to bar same-sex couples from adopting children from overseas.

**CHAIR**—We can accept that as an exhibit. Is that the wish of the committee? There being no objection, it is so ordered.

**Mr Croome**—I ask might Martina if she has anything to add, and ask if you have any questions you would like to ask us.

CHAIR—I think we have been asking them.

**Mr Croome**—Do you have any more questions?

**CHAIR**—Do you have any other questions you would like to ask, Harry?

Mr QUICK—No.

**CHAIR**—Alan?

Mr CADMAN—No. Looking at all the countries that we deal with when it comes to overseas adoption, they all have a line drawn in the sand saying that that is not the case. If the committee recommended it and the government said, 'All Australian citizens have the same opportunity,' but no country overseas will allow adoptions, the same frustrations as you are experiencing now would be the case.

Mr Croome—Indeed. It can seem like a hypothetical, academic issue when none of the countries that we currently have protocols with allow same-sex couple adoption. But, as I said, we need to look into the future and recognise that many countries in the developing world are changing their policies in this area. I have already identified those regions of the world where that is particularly the case. It is less so in Africa, but that will inevitably change as well. Eastern Europe, South America and East Asia are areas where same-sex couples are being recognised in domestic law and will inevitably—

**CHAIR**—The countries we take most of our children from are China, South Korea, Thailand and the Philippines. All of those say 'no'.

**Mr Croome**—They currently do. And, as we know, in the Philippines, South Korea and Thailand there are currently moves to recognise same-sex couples in domestic law, including the role of same-sex couples in parenting. That will inevitably flow into their international protocol.

**CHAIR**—It is certainly not there at the moment.

Mr Croome—On top of that is the message that a federal government ban on the possibility of same-sex couples adopting from overseas sends domestically about the quality of care, love and commitment that same-sex couples can show their children. That ban sends a very strong message that families headed by same-sex couples are dysfunctional, are second rate and are not worthy. The people who suffer most from that message are not the parents in those families but the children. If this government really is sincere about putting the interests of children first and caring about the best interests of children, it will not send out messages which stigmatise and disadvantage certain Australian children simply because of the gender of their parents.

**CHAIR**—It is just not happening at the moment. There are not any because it is not permitted in other countries.

**Mr Croome**—I am talking about same-sex couples who already raise children in Australia domestically.

**CHAIR**—They are not the subject of our inquiry.

**Mr Croome**—No, I know, but they will suffer from the stigma that will be sent out by the ban that your government intends in the area that is being dealt with by this inquiry.

**CHAIR**—Okay. Thank you for coming along in giving us your point of view. We will have a look at that exhibit you sent us today. Thank you for being with us.

Mr Croome—We appreciate your time. We hope the inquiry goes well.

**CHAIR**—Thank you.

Proceedings suspended from 12.40 pm to 1.11 pm

**CHAIR**—We are now reconvening the community statement period. Angela, please come and join us and have a seat at the table. Thank you for coming.

Angela—My partner and I have been trying through IVF to have a child for 2½ years. It has not been successful. We were also referred to donor insemination. We were told that the cut-off age for that is 40. As I am near that now, that leaves us little chance of having a child through me carrying a child, which leaves us with adoption. I have been reading up on everything that I can get my hands on at the moment about adoption. From what I hear, it takes up to three years and can use up to \$40,000. As my partner and I have spent thousands of dollars on IVF as it is, we think these are ludicrous amounts. And why does it take so long? What is all the red tape? I know that there are things with different countries, but what is going on? These millionaire movie stars can go into any country they want, buy through the red tape and they have a baby straightaway. Why is it that these people can do this and through our processes it takes up to three years?

**CHAIR**—I think the idea that someone can go into somebody's country and buy a child is appalling. We would not like that here.

**Angela**—I do too. But what I do not understand is that there are millions of children starving in these Third World countries who would die to have a family that would love them and raise them in this country. We are a fairly well-off country. Why is it taking so long to get through red tape when all these children could have decent homes? This is what I do not understand. Why does it take so long?

**CHAIR**—That is a very good question. That is why we are having the inquiry.

Mr QUICK—You will be pleased to know that you live in the state where the process is quicker than anywhere else, apart from the ACT, and you have a supportive department that will work to ensure that you get your child a hell of a lot quicker than any other state, apart from the ACT. My advice to you, for what it is worth, is to put your application in here with the state department as quickly as possible, get on the merry-go-round and—

**Angela**—That is what I am saying. Why is it a merry-go-round? Why is there so much mucking around to get a child?

Mr QUICK—There is an assessment process to see that you and your partner are suitable adults. We are looking at ways of streamlining that because, depending on which state you have come from, there are different rules and regulations, which we find rather amazing. So there is that assessment process. Once you have passed that, and you have the right accommodation and the ability to look after the children, the process here in Tasmania is pretty straightforward.

**Mr CADMAN**—It is the cheapest in Australia too.

**Angela**—I have not actually read anything on Tasmania's adoption laws. I intend to look into it because I will make the appointment in October to go and see them.

**Mr QUICK**—It is \$2,280 compared to close on \$10,000 in New South Wales.

**CHAIR**—But that is just one component.

**Angela**—I have also spoken to a woman who is good friends with somebody who adopted an overseas child. I can understand the checks they do. They do not want a paedophile getting the child, of course. They have to pay for the child and the family's health care, and they have to pay for this, that and the other. Their costs just go on and on. That is what I have been reading. You can pay up to \$40,000 by the end of the adoption process.

**CHAIR**—It is more likely to be between \$20,000 and \$30,000.

**Angela**—Don't you find that a phenomenal amount of money?

**CHAIR**—That biggest amount of money is the airfares.

Mr QUICK—That is the biggest thing. You take the airfares out and the processing fee—

**Angela**—But, like I said, most of the people who adopt are people who cannot have children, like my partner and I. We have spent phenomenal amounts of money on IVF already. So why are the fees so high?

**Mr QUICK**—We are thinking about having tax credits, which operate in other countries, so that if you are adoptive parents you get tax credits so that the government is contributing.

**CHAIR**—Some people have put that submission. We have not assessed that.

**Mr QUICK**—That is why we are holding a national inquiry, going around finding out how the system works, where the faults are and what we can do.

**Angela**—I think it is great. I thought this morning that I would like to come along, listen in and whatever, but I do not have a lot of time.

**CHAIR**—It might be a good idea if you talk to some of the people who have been here.

**Mr QUICK**—We are about to hear from some people who are part of the process and the problems. The secretariat can give you the web page so that you can read some of the other submissions and the evidence that we have taken around Australia.

**Angela**—Excellent. That would be great.

**Mr CADMAN**—There should be somebody from the department here shortly, if you can wait for an hour or so.

**Angela**—Unfortunately I cannot. I really have to get back to work.

**Mr CADMAN**—Why don't you leave your details with our staff?

Mr QUICK—And your phone number and email if you have one. We can connect you into the system.

Angela—That would be wonderful. Thank you very much for your time.

**Mr CADMAN**—You are pretty game coming to this place and fronting up and saying, 'I want to know about this.' That is good.

**CHAIR**—I think that is pretty good. Thank you for coming.

Angela—Thank you for listening.

**CHAIR**—We will reconvene the formal part of the public hearing—although the community statement was obviously part of it.

[1.17 pm]

### FORD, Mr Alfred John, Member, Accepting Children Everywhere

POWELL, Mr Geoffrey Vernon, Voluntary Secretary/Treasurer, Accepting Children Everywhere

# WHITE, Mrs Maria June, Member, Accepting Children Everywhere

**CHAIR**—Welcome. Do you have any additional information on the capacity in which you appear?

**Mr Powell**—I have adopted five children from overseas.

**Mrs White**—We have two children adopted from different countries overseas. We are in the process of adopting our third child and have one biological child.

Witnesses were then sworn or affirmed—

**CHAIR**—We have received your original submission and we have now received a supplementary submission. Is it the wish of the committee to accept the supplementary submission as evidence to the committee? There being no objection it, it is so ordered. Would you like to make an opening statement?

**Mr Ford**—Thank you very much. Your hardworking committee staff have made us aware that we have five minutes.

CHAIR—No.

**Mr Ford**—We have five minutes as an opening statement; we will not take that long. Essentially the paper that you have before you is the essence of our thoughts on the matter.

CHAIR—Perhaps you could speak to it.

**Mr Ford**—We would just say to you that it falls broadly into two areas—one side is relief funding wherever possible for prospective adoptive parents and the other side is the possibility of funding for our state government department that handles adoption. We feel that they are a little hamstrung. They do a great job and we are very much behind them, but we would like to see if we can in some way influence more funding to head in their direction. That is it in essence.

Mr Powell—I think we have no doubt in our own minds that intercountry adoption is a positive thing for the Australian community. The submission refers to the very positive way that it brings people into Australia. Certainly, for people who have been selected and are not able to be looked after in their own country under the United Nations terms of the rights of the child, to be available for adoption they have to go through that process, which I am sure you are familiar with.

We certainly see through our groups that, when we have functions with our adopted children, we are often told, 'My word, those kids are well-behaved.' We often surprise people at the quality of the kids, how they react and how they behave. We see that it is one way of bringing them straight into Australian culture and having them adapt to our community. There could not be a better way of making that happen. We certainly honour any cultural heritage that they have, but most of these kids, when they reach the teenage years—my daughter was in here a little while ago; she has now left—want to be Australian. They want to cling to the privilege of being Australian. Often if you say, 'Do you want to go back to your own country', they say, 'No, I don't.' Maybe there is a curiosity or an interest and they might like to do that, but they do consider themselves to be Australian.

My last point is that I have three children who have left school and they have had a couple of instances where, when they are applying for anything, they have to put down that they are born overseas. There are automatically these extra hurdles they have to come across, even though they have a Tasmanian birth certificate. They are questioned and questioned. It would appear that the systems of Centrelink and the Electoral Office and probably other government departments do not have an alternative for those born overseas yet adopted in Australia with an Australian birth certificate. They have to justify their existence. We have brought them up saying: 'You're adopted—that means you're part of our family. We're not ignoring the previous part of your life, but you're Australian and you have a birth certificate to prove it.' I think that is just a small matter that could help those children. I was interested in the comments on IVF. A lot of couples seem to spend a lot of money on IVF and IVF does not have the success rate that intercountry adoption has.

**CHAIR**—I do not think we need to get into discriminating against people who make choices. That is their choice and they are entitled to make it.

**Mr Powell**—Yes, but it is something that people are not aware of, I think.

**Mrs White**—That is probably more the point Geoff was making.

**Mr Powell**—Yes, that was the point I was trying to make.

**Mrs White**—I have been in that process myself and was not aware that you could go through the adoption process with, in some cases, a lot less trauma than going through the IVF process.

**CHAIR**—At the end of the day, only an individual can make that decision.

**Mrs White**—That is right.

Mr Powell—I think one of the revelations that has kept me involved for as long as I have has been that couples often struggle, thinking, 'Can I love somebody else's child; can I love a child of another culture,' and then they make this discovery—even though we have told them, they do not believe it—that they love this child as if they gave birth themselves. That is a beautiful thing. I have seen tough men who have questioned it suddenly become jelly because of their love for this child. That is not taking away from the heritage of that child. That is giving you an example of the situation that children come into. We are certainly not ignoring their past. I think that is a

wonderful aspect. I think if people understood that, they may make the choice in a more informed manner.

Mr QUICK—How do we change the cultural perception that there are not many kids who are being adopted from overseas and there are other avenues? As we wander around Australia, we hear of all of these wonderful support groups. They all get together on particular days—Chinese New Year, Philippines Day or whatever. I do not think—correct me if I am wrong—that we have an overseas adoption children's day, where we all get together and—

**CHAIR**—Yes, we do—I went to it in Queensland.

**Mr QUICK**—Well, Queensland have one, but I have not heard of any in Tasmania—are there?

**Mr Ford**—We have had one. We had one last year and we are intending to have another.

**Mr QUICK**—To me, if that is out there and the media are interested, you can disseminate information, because the office is hidden away somewhere up in the repat hospital, and there is only a staff of two and they are doing a wonderful job, but—

Mr Powell—The dilemma we face is that there is not an unlimited number of children available to be adopted. That is something that has to be handled with care. We are suggesting some things that might help that and make it possible for more children to be available for Tasmania. But it does have to be handled with respect, like the discrimination thing—you do not want to do that. It has to be handled in a way that says: 'Look, this is an option. Yes, there is some hard work in front of you and it is certainly worth it.' But I do not think we can afford to give hopeful couples the feeling that it is going to happen without them putting in a lot of hard work.

**Mr QUICK**—But if there is an understanding that there is a process, it is like all other government processes: there is an introduction and there is an ending. At the end you get a child. The fees are reasonable, considering the process you go through.

Mrs White—We all go into it knowing there is no guarantee. Not only do you have to be accepted by your state as being able to adopt, but the country where your file goes to has to approve you.

**CHAIR**—That is right.

Mrs White—So you are not going into this with a guarantee; you are going into this extremely hopeful. But there is no guarantee at the end, and that is always stated to couples at the start.

**Mr QUICK**—But, having been to Beijing a couple of weeks ago and seen the Chinese Centre for Adoption Affairs, my understanding from my discussions with everybody there is that if your application comes it is just a matter of you going through the process there, because they know the rigour that each of the states and territories puts couples through.

Mr Ford—Yes, the system that the Chinese have in place there is extremely efficient. I have heard, whilst being here, a comment made about the length of time. From the point of view of our state government department, that does not, as a general rule, float out and become an extensive operation. What we find is that where people do face delays is generally when the paperwork goes offshore. China, of course, enjoys an enviable reputation with their processes and systems to get those through, as you no doubt found on your trip there. But some other countries are not quite as deliberate in their workplace practices.

**Mr QUICK**—One of the things I discovered in Beijing is that the Australian embassy liaise very well with CCAA. I would like to think that, as part of our overseas aid/Department of Foreign Affairs and Trade embassy or high commission, there is someone there designated to perhaps open a few doors, smooth a few wheels or whatever.

Mr Ford—My experience has been with the Philippines. My son and daughter are from there. Our daughter only came and joined us in February of this year. The embassy people and DIMIA and DFAT people that we are in contact with both here and overseas are exceptionally good. They are very efficient; there is never any problem with them. They are most helpful. In fact, they have been working very hard on behalf of a couple that we are aware of now who are actually in country in the Philippines because of a potential problem in the area where they were going to pick up their child. The embassy was working quite extensively on their behalf to ensure that everything was done to make it a smooth passage for them, and it has been so, we understand from other people. So, yes, we have no problems at all with DIMIA and DFAT staff.

**CHAIR**—We have had an opening statement from Mr Ford and Mr Powell; what about Mrs White?

**Mrs White**—I am here just basically to show that it is normal, everyday people who would like to be parents. The lady who spoke before obviously was not well informed. I am speaking as a mother who went through IVF, then has had children and has had extensive dealings with the department.

We have heard of problems in other states with delays and costs. We know our department is working. The majority of families have a great rapport with our department, and we would like to see our department financially empowered to do more. Previously, there have been discussions about new programs being looked at, and then funding was not made available for new programs, new countries, to come through. Some of the countries we have dealt with in the past are now longer available.

CHAIR—Like Romania.

Mrs White—Yes, Romania. Our son was born in Sri Lanka.

**CHAIR**—And Sri Lanka, yes.

**Mrs White**—So countries are changing their attitudes. We could build a good relationship with other countries and start up new programs if we were able to get a contact and go through a facilitator. But, to do that, we need funding.

Mr QUICK—Do you find a dilemma with the adoption agency in the huge Department of Health and Human Services, where most of the budget goes to the Royal Hobart Hospital or to the Launceston General Hospital? And then you have adoptive legislation that is still principally concerned with in-country adoption. When we suddenly have this blossoming 'industry' of overseas adoption—and we understand the Tasmanian legislation is under review—do you think there ought to be a separate unit which is adequately funded, perhaps even something as revolutionary as having its own permanent social workers who are tuned in not to dysfunctionality but to the whole issue of overseas adoptions?

**Mr Ford**—When we address ourselves to this subject, we would be hard put to think of a more human subject. It has been my experience in life—and I would be very surprised if others here in the room had not found it—that when we have to interact with others we do far better after we have met. The situation at the moment is that we would like to see our manager of adoption services in a position funding wise, for example, to travel overseas to meet the people with whom she has to interact.

**CHAIR**—The trouble is that Tasmania does not have anyone that they are the lead state on.

**Mr Ford**—That is right.

**CHAIR**—I presume you go through Victoria for most of yours.

Mr Ford—Yes, and Queensland.

**CHAIR**—What is the nature of that relationship between the Tasmanian bureaucracy and the Victorian bureaucracy, from your point of view?

**Mr Powell**—It may be a question to ask the department.

**CHAIR**—I will be.

**Mr Powell**—Certainly South Korea have Australian quotas, and they usually choose to allocate a quota of three to Tasmania—forgive me if I am a bit out of date. In one year, they had a surplus from New South Wales, and New South Wales allocated that share of the Korean quota to Tasmania. We are very much reliant on cooperation.

CHAIR—It seems to be a strange situation. Basically what happened was that after we ratified the Hague convention and adopted the Hague tests we left in place all the existing bilaterals, except China, where we signed a new one. Of course that is the Commonwealth's responsibility, but then in the MOU—and that is all it is: a memorandum of understanding between the Commonwealth and the states—the Commonwealth said, 'We'll wash our hands of it and the states can just get on with their negotiations.' Other countries might think we have eight separate governments representing Australia, which is a bit of a strange situation.

Mr Powell—There is a history there, of course, and it is very hard for overseas countries to imagine that we have eight different jurisdictions. But as John was alluding to, many of the traditional programs have developed because of relationships. In some cases these were relationships with individuals who had been overseas and who had worked overseas and who

had come back to Australia and introduced a program which was approved through the state, foreign affairs and immigration. Traditionally, there is even in some countries a mistrust of other governments. They know their own governments do not always behave well, and we cannot automatically assume they are going to trust the Australian government. So for them to have a face to deal with that they can see is very important. We forget that their allocation to Australian parents is often given more thought to than even the approvals, because they want to know that these kids are going into a good home.

**CHAIR**—South Korea is an interesting example: it will only let its children go to America or Australia.

**Mr Powell**—Yes, and they like Australia. America pours a lot of money into it. Their home is funded by America, you see, so they have to keep looking at America, but they love Australia as a potential home for their children.

Mr Ford—I can speak to that a little more. We have one thing here that you may not be aware of. We have a committee—the minister's advisory committee on intercountry adoptions—which members of interested groups can sit on. I am the ACE representative. I was told at a meeting not all that long ago that the South Korean government had changed its attitude to intercountry adoption and were reducing quotas; however, Australia's has remained unchanged. So we are held in some esteem in Korea. That is just to back up that point.

Mrs White—That has a lot to do with the time and effort in making those contacts, growing those bonds and having not so much in some instances a face but, rather, a contact person and a contact area for that country's welfare area, or whatever, to be in contact with. What we are trying to say is that we would like to grow our intercountry adoption but we would still like to know that we are still highly regarded.

CHAIR—The programs that are currently under negotiation are Bolivia, Brazil, Costa Rica and South Africa. Some of them have changed, as you have already alluded. For instance, Guatemala has been closed until it establishes a central authority and passes its adoption bill because it has ratified the Hague agreement. The only two Hague countries that we have agreements with or that we source children from are India and the Philippines. The others are all non-Hague countries. Really, the cost for underdeveloped countries to ratify and comply is quite enormous, which is why they are not doing it, I suspect. But we still apply the Hague criteria to our bilaterals

**Mr Ford**—I am not sure if the committee is aware of this, but an attempt has been made by our manager of adoption services to start the ball rolling in Tasmania in becoming a lead state with South Africa.

**CHAIR**—That is their responsibility. They have got lead state status, but it is still in negotiation.

**Mr Ford**—Yes. Perhaps a question from the committee to the manager might clear that up. My understanding is that that has now ceased due to lack of funding, but perhaps that is a question for a later time.

Mr QUICK—How do you see the role of the various support groups? Should there be Commonwealth or state funding? You have established the links with the embassies here in Australia. You go back to the countries and take the children back there. You are doing it all for love of your children and to thank the process, and you are all doing it on a shoestring. You are putting newsletters out. Should you be the advocates to ensure that the program is expanded or extended?

Mr Powell—We have to be careful when we talk about support groups because I think you need to put them into two categories. In Tasmania the support groups are simply support groups for parents, working where possible with the department. In the past we have provided education services to the department, such as running education seminars. But certainly some of the larger mainland states have support groups which are really at the status of non-government organisations and they do actively participate in contact with overseas programs. But in Tasmania we do not have any groups that do that apart from the AACASA link, I suppose, and maybe the China group, which is linked with the Australia-wide group.

Mr Ford—I think it would be fair to say that my opinion would be that I am very for the contact regarding adoption to be on a government-to-government basis rather than having some non-government organisation in between that. As my friend and colleague said, that does not occur here. It may in other states. As for assistance to the groups—I do not wish to speak on your behalf—but our main desire would be the consideration by the federal government of perhaps reimbursing in some way, via taxation or indeed direct grant, aid families with their costs in travelling overseas and generally with adoption.

**Mrs White**—And to streamline the actual physical forms. I do not know whether you have actually seen the immigration form, where you have to put 'not applicable' throughout the whole form because the sponsorship form does not relate to what we are doing.

**CHAIR**—You would like a special form?

Mr Ford—Yes.

**Mrs White**—A special form with regard to this would streamline it in a lot of ways.

**Mr CADMAN**—It is a normal sponsorship form that would be used for other purposes? What is the form number; do you remember?

**Mr Ford**—It is 40CH: sponsoring the immigration of a child.

Mrs White—It is definitely worth a look at with regard to streamlining the process. Once you have been allocated a child and the child has had its medical, you are responsible for the sponsorship form and the visa being granted. There is quite a bit of paperwork. A specialised form would cut that down.

**CHAIR**—Does it take a long time to get the visa?

**Mrs White**—It can do, country to country, depending on the medical of the child as well. Quite often, in the majority of cases, the adoptive parents will be paying for that medical, and the

visa could be delayed if there is a reason for the immigration department to say that the child cannot come through. In other instances, it has been done reasonably quickly, depending on the country. When the country's standard of—

**CHAIR**—It really relies on the health checks?

**Mrs White**—A lot of it concerns health checks and other things with regard to that particular country.

**Mr CADMAN**—Do you reckon a lot of this work could be done by a non-government agency, provided they are properly accredited? I would not want any slack stuff happening and neither would you. Could much of this work be done by an NGO and then the department just give final approval that all the paperwork and all the processes were in place? Would that streamline things at all?

Mrs White—Are you talking about a centralised area or one for each state?

**CHAIR**—We are talking about Immigration here.

**Mr CADMAN**—There may be a couple of agencies working in Tassie, for instance.

**Mr Powell**—Tasmania could only afford one NGO. I think it is a real possibility. I notice that South Australia had the only non-government organisation, and that has changed.

**CHAIR**—They got rid of it.

**Mr Powell**—I do not understand why.

**CHAIR**—They sacked it.

**Mr Powell**—With respect to government funding supporting an NGO, with dedicated people, as long as they were accountable, because even with intercountry adoption, if people are not accountable, funny things happen.

**Mr CADMAN**—It is very important that they are accountable.

**Mr Powell**—I think it is a real possibility and, in my experience—I actually audit a lot of NGOs providing government services—NGOs operate very efficiently if they are accountable and deliver service more productively.

Mrs White—You can break it right down. You have to have all your paperwork, the police take your birth certificate, your marriage certificate—everything has to be notarised; it is all the little things that delay the matter all the time—and get everything collated and ready to go to that country, then you are in the waiting process. Then, once again, you have the tail end of all of it, including the sponsorship form, medical forms, visas, passports et cetera. These are all associated delays and costs and our main concern as parents is, if a child is unwell or not in the best circumstances, to get the child home and get it well. Anything that we can do, anything that can come out of this to speed up the process, streamline the process—

CHAIR—You are talking about the process between the allocation of the child—

Mrs White—It is all the way through. We are lucky in Tasmania: the original process of being approved or not approved is now down to six to nine months. You undertake your first medicals and your police check et cetera to see whether you are acceptable, and then you go through a process with a social worker to be approved. I do not have the time lines—Una will be able to give you more on that—but it is down to about six to nine months. Then you collate all your paperwork to be sent away to that particular country. That country will then need to approve you and you go into a waiting pool to be accepted or matched to a child.

**Mr CADMAN**—Then it is out of Australian hands?

**Mrs White**—It comes back into our hands in a way when we have to get our immigration forms ready at the tail end.

**Mr Powell**—To just qualify 'out of our hands', a little bit of liaison and initiative during that period of time from someone in Australia can facilitate and smooth that waiting period.

Mr CADMAN—Can a parent do that?

Mrs White—No.

Mr Powell—No.

Mr CADMAN—Could an NGO do that?

**Mr Powell**—Yes, and government departments do it from time to time.

**CHAIR**—Do they do it here?

**Mr Ford**—We believe so, yes.

**Mr QUICK**—Geoff, you mentioned at the outset that you have adopted a few children.

Mr Powell—Yes.

Mr QUICK—Do you have to keep jumping through the same hoops, or do you get some brownie points and they say, 'Look, you have adopted three. You are applying for your fourth. We are not going to put you through the rigmarole'? Can't someone in the department say, 'Geoff and his partner have three adopted children. They've been going along swimmingly. They have been here X number of years. They are applying for a fourth'? The process should be smooth. It is a bit like applying for your first driver's licence—you have to go through a whole series of tests; and then it is a matter of just rocking up to the counter.

**CHAIR**—I do not know that that is a good analogy.

**Mr QUICK**—I know it might not be a good analogy—

**CHAIR**—There are some people who should not get one a second time.

Mr Powell—I am ancient history—people on either side of me have gone through second and third adoptions more recently than I. I have found that the policy within the department has changed over the years. I believe we were given certain leave in some respects. Again, at the time, some of the things were not so rigid, like attending education seminars. On one occasion, because of mistakes the then department made—and I am talking about 12 or 13 years ago—they did allow us to jump a few hurdles. This is a problem in that parents are complaining from time to time that they do have to go through the same things over and over again. I think it is very important that, if you have an established family, the department needs to come and look and see how those children are part of the family, and all that sort of thing.

**Mr QUICK**—I can understand that.

Mr Powell—There are things that do need to be done again.

**Mr CADMAN**—There are essential things.

**Mr QUICK**—But isn't it interesting that the department looks at you through a microscope and yet that same department is looking at society and other parents and turning a blind eye until the family falls into dysfunction?

Mr Powell—Yes.

**Mr QUICK**—For me as a father, a family person, a politician and an ex-teacher I find that somewhat ludicrous that you have to jump through so many hurdles time and again. In some other states it is bordering on a farce.

**Mrs White**—Can I jump in here?

Mr QUICK—Yes, sure.

Mrs White—We are in the process of our third adoption—we have been approved for our third adoption.

**CHAIR**—From the same country?

**CHAIR**—No, three different countries.

**Mr CADMAN**—Interesting family.

Mrs White—Beautiful family. The first one was from Sri Lanka, the second from Ethiopia and the third from the Philippines. There has been major changes within the department. We had the same social worker for the first and second adoption, who is now retired. So obviously our second assessment was much more streamlined. It was like having a family friend doing our assessment. The third assessment was with a new social worker. It was a very much a by-the-book assessment, which I must admit got my back up personally. But I can see why it was done in that way. We attended a two-day workshop and a detachment disorder workshop with the third

adoption. So at least it was something new. The more education families get, the better able they are to head off possible problems later on and to be more informed and more sure that this is the way they want to go. As someone who has gone through different stages and different processing, I am finding the way this one has been handled has worked very well.

**Mr QUICK**—Should the department have a bank of social workers tuned in to overseas adoption and all the related things—

Mrs White—Most definitely.

**Mr QUICK**—rather than putting them out to contract and depending on your luck? We have heard evidence right around Australia and here this morning that occasionally you get the wrong one.

Mrs White—That is correct. But once again it all falls down to funding. If a contractor were to come in and do an assessment more quickly, your file is there more quickly. If we had more social workers here working for us that understand the different programs and the way the assessments need to be done, it would make it quicker.

**CHAIR**—There is no reason why the department could not identify a pool of people who have expertise in this field and use those social workers exclusively.

**Mr CADMAN**—They would do it more quickly and expeditiously.

**CHAIR**—That would be better than hiring more people into the department.

Mrs White—It would be done much more quickly if they were able to fund having those social workers on call to do that. As you said earlier, the pool of money comes to the Department of Health and Human Services; it does not come to intercountry adoption.

**Mr QUICK**—Which countries are having hassles with the problem of translation, apart from China? Are there any?

**Mrs White**—What do you mean by 'the problem of translation'?

**Mr QUICK**—Translating documents.

**Mr Ford**—The cost of translation to Chinese has skyrocketed, from memory.

**Mr CADMAN**—Yes. What about Filipino and English?

**Mr Ford**—The Philippines is not so much of a problem in that way at all. English is basically the used language.

**Mr CADMAN**—What about Ethiopian and English?

**Mr Ford**—I am not really up with that.

**Mrs White**—I think it is incorporated in the fees that you pay to have your power of attorney done for you in Ethiopia.

**Mr QUICK**—So China is a big sticking point with translation, obviously, because if you are trying to find a public servant in Australia who speaks Mandarin, good luck to you.

**Mr Ford**—I know that there is a problem with China. I am not personally aware of problems in other countries.

**Mr CADMAN**—Could you give us some indication of whether you think that overseas adopting parents have considered in-country Australian adoptions prior to going overseas, or do most of them head straight for overseas?

**Mr Ford**—Here in Tasmania, you must be cleared for local adoption before you can go on to become cleared for intercountry adoption. In the last two years, I think one baby has become available for local adoption. It is virtually nonexistent.

**Mr CADMAN**—So people do not even consider it?

Mrs White—Quite often younger couples will go on both the local register and that of their country of choice, knowing full well that they may never be offered a child from the local register.

**CHAIR**—Have any of you ever considered fostering a child?

**Mrs White**—We did, and we were advised against it by our local GP, who know us personally and did not think that emotionally I would be able to give the child back once we had let the bond develop. He knew us well enough to know that I would not cope with that well.

**CHAIR**—One of the things that we have become aware of is the fact that there is such a small number of Australian children relinquished for adoption. There seems to be an anti-adoption policy generally, not just about overseas children. We have literally thousands of children who are fostered, yet we do not seem to really have any published assessment of what happens to those kids and whether many of them would be much better off—if we are interested in the welfare of the children—being adopted into a permanent family.

Mrs White—There is a thing now called open adoption for local adoptions, so you have to take into consideration whether your family is able to cope with the intrusiveness which may or may not occur—you do not know. I have not as yet got a teenage daughter to have concerns with, but I am sure I will. If there was an open adoption then there would also be another hurdle that you would need to take when you had a rebellious teenager as well, on the possible pain side. You would need to be very strong in your views of how you were going to handle that before you got into that situation.

**Mr CADMAN**—I have never heard that position put before but it is a very interesting one. Teenagers can negotiate in a very wilful sense, can't they?

Mrs White—Yes.

Mr CADMAN—They will say: 'You don't let me go out, and I'll go home to my other mother. She'll look after me.'

**Mrs White**—Or 'I'll ring up my other mother and we'll see'—that sort of thing, yes. You have to—

**CHAIR**—But that is not much different from a situation where a family has split up and the child is saying: 'You mightn't let me. I'll go and stay with Dad. He will.'

**Mrs White**—No. It is something that you go into knowing that that is going to be a possibility with an open adoption. It may not be a possibility, but you are bringing not only your child but your child's family into your family.

**Mr QUICK**—John, you are on the advisory committee.

Mr Ford—That is correct.

**Mr QUICK**—Why is the state government looking at changing the adoption legislation, when only one child has come up for adoption in the last two years? Is it because of intercountry adoption hassles?

**Mr Ford**—I am aware that legislation is being looked at. I was not aware of any change being made to local adoption regulations.

#### **Mr QUICK**—According to the Premier:

While the Tasmanian Government does not have any major concerns with the processes and entitlements associated with overseas adoption, there are some cross-jurisdictional inconsistencies that are worth further examination.

... ...

I note that the Tasmanian Adoption Regulations are currently being reviewed. This includes consideration of the current age limits prescribed by the Regulations to ensure they continue to have relevance and reflect the general profile of families in our society, including the age at which women are having children, and advances in health status and increasing longevity of older Australians.

If we are only putting out one child in the last two years for adoption, why do you think the department is looking at going through the whole process of getting public servants to draft new legislation and then put it through both houses of parliament? Is it to do with the pressure being put on parents who are involved in the overseas adoption to say, 'The 40-year age limit is bloody ridiculous. We're doing better than most states, apart from the ACT. Let's refine it'?

Mr Ford—Because the committee I sit on purely deals with intercountry adoption, I could not really comment on anything that might impinge on local adoptions; however, I think there were some changes to areas of responsibility that were being looked at in the legislation. That is one area that I was aware of. It has not been drawn to my attention. I am not aware of a review of the age range but I suggest that it is a good idea that it is.

**CHAIR**—We became aware of that this morning. It is happening.

**Mr QUICK**—We heard evidence this morning from a lady who bucked the system and stamped her feet rather heavily.

**Mr CADMAN**—I think the Premier's submission also refers to that somewhere.

**Mr QUICK**—Yes. This lady is in the process of application and, because the legislation will not be drafted and promulgated—

**Mrs White**—Is this for intercountry adoption or local adoption?

**Mr QUICK**—Intercountry adoption.

**Mr CADMAN**—No, it applies across the board, I think we were told.

Mrs White—Has anyone discussed with you special needs files and special needs children?

**CHAIR**—No, not today.

**Mrs White**—There are age limits in place with each particular country that you choose to go to. They put down their rules.

**Mr QUICK**—We understand that.

Mrs White—Each state puts down its rules. If a child has special needs those rules can then be looked at, and they have in the past, on a one-on-one basis, been waived to allow a child to come through.

**Mr CADMAN**—I think that is appropriate and I would not like to see that changed.

**Mrs White**—We do not want to see that changed.

Mr QUICK—We are talking about inconsistencies. We heard that the Queensland Mother of the Year was ineligible to adopt a child from overseas because her body mass index was unsuitable, which we thought was rather farcical.

**Mr Ford**—That would be the requirement of a specific foreign country.

**CHAIR**—No, it was not; this is Queensland.

**Mr Ford**—Was it? I know of one specific country that has that, but I was not aware of any state in Australia.

**Mrs White**—We also know of people who have moved from Queensland to relocate because of their system.

**Mr QUICK**—We had one here this morning who had moved from Queensland, came to Tasmania and thought the place was God's gift to the world.

**Mr Ford**—The situation with the upper age limit, I understand, in the legislation is that the manager of adoption services has the right to waive that requirement.

**CHAIR**—Yes, that is right.

**Mr Ford**—That has, I believe, been used in the past and no doubt will be used in the future. I think that the thrust of the legislation was to obviously not have a situation come about where parents were going to pass away before they could look after the child through to adulthood or at least—

**CHAIR**—I think it had more to do with matching the age at which people were naturally having children.

Mr Ford—Yes.

**CHAIR**—But of course that has all changed now. We have got plenty of fathers who are fathering children at 60. We have got women having their first children in their 40s. It has all changed.

**Mr Ford**—It has been a contention that the age differential links to the oldest parent. You could have a 60-year-old married to a 35-year-old. It can happen. The 35-year-old, who is likely to be here to adulthood for an adopted child, is disadvantaged because the husband is older. I think that is an area that needs to be looked at.

**CHAIR**—In many jurisdictions, that upper age limit is going altogether and they will just rely on the requirement of the country from which the child is coming. Do you find that one of the attractions of overseas adoption is that it has a finality about it that the adoption of an Australian-born child does not?

Mrs White—Open adoptions have only come in recently, in the last few years. That was not our main criteria when we first adopted. Our first thought was that we wanted a baby, and we would be still waiting for a baby if we were waiting for a local adoption. The more you get involved with the support groups and your network of family and friends, the more you grow in your knowledge of the different countries. Quite often we have found that, through our local support groups, families have gone back and found a network of grandparents, aunties and cousins for their child. So they have brought in the culture, they have brought in a family and in some instances they are supporting that family through education and accommodation. I know of a family that has bought accommodation for the grandfather of their child.

**CHAIR**—But at the end of the day there is no contestability. This child is yours and nobody else is going to have a say in how you bring it up.

Mrs White—I think you would feel like that regardless. I cannot speak about it; I have not had a local adoption. It is your child. It is always going to be your child. The fact that there is a

network of family out there is, in some instances, a good thing. In some instances there is not the information to build that bond.

**CHAIR**—In any event, you are a long way away.

**Mr Powell**—My wife and I considered fostering and local adoption. The beauty of intercountry adoption is that, in most cases, while the records are there, as far as the child is concerned it really has only one set of parents to deal with. You have a much more natural situation. As a couple, you can bring them up in the way you believe is appropriate. You can deal with problems in the way you believe is appropriate. So, yes, if that is what you mean by finality, I think it is a very positive thing about intercountry adoption.

**Mr QUICK**—Can you cite examples where, as adoptive parents, parental leave is denied or made more difficult than if you have your own children?

Mr Ford—Yes. My wife and I are state public servants. In the area in which we worked the ruling had come through on the availability of adoption leave, but an age limit had been placed on the child, and it was the age of five. The child we were adopting was already almost six. We went through and made a case that we should be allowed to receive that leave, and it was duly given. We did receive that, but it seemed strange to us at the time that a particular state government department or anybody would put a cap on it that was not relative to the cap on the child coming through. In other words, it is possible to bring a child into the state from another country up to the age of seven years, from memory. Why was someone drawing an arbitrary line in the sand at five? Where did that come from? Did they not do their research and find out that children older than that age could come into the state? As I said, at the time it was granted but it was a special case and needed to be looked at in that way. We wondered why that was so. Why would it need to be a special case?

**Mr QUICK**—Have things changed in Tasmania?

Mr Ford—I believe that that age limit of five is still in and, if one is going to adopt a child and ask for adoption leave, one has to go and present a special case. It did not take very long for us; it went through very quickly. It had managerial support from top to bottom, but it seemed odd at the time that one would have to do that when it was possible to bring a child into the state who was older than that.

**CHAIR**—It seems that the age of the child is irrelevant. If you are bringing it in you need that bit of leave to get it all together.

**Mr Ford**—Indeed. It is somewhat discriminatory.

**Mr QUICK**—So once again the Premier states that he is worried about inconsistency, yet within his state Public Service there are still inconsistencies.

Mr Ford—Indeed.

Mrs White—It is the same with the immunisation bonus that you receive if you have your child immunised by the age of 18 months. Both my children were ill and were on catch-up

programs, so they came in older and were on half dosages for their immunisations. That caused issues with Centrelink, the immunisation board and our doctor. Every time we had a immunisation done it caused another set of letters and phone calls to do the rounds. Your child cannot go to child care because it has not been immunised and you obviously do not qualify for any bonus for having them immunised. You do not qualify as you would if you had your birth child at that stage. I think it has come in now that you get the baby bonus.

**CHAIR**—After two years.

Mrs White—Yes, but in the wording it says 'adopted child'. For some countries we work with, when you come back you have your child for 12 months before you go to court to legally adopt it. So, if you are getting an older child, or even an infant, it is possibly going to be over two before the adoption is finalised.

**CHAIR**—That is a point.

**Mr Ford**—In this case, we feel that the intercountry adoption should benefit the child regardless of the age. People should be able to receive a baby bonus.

**Mr CADMAN**—A lot of others would think the same thing but they would not necessarily be adopting parents.

Mrs White—We have made a choice to have a family. The way things have come about now, the baby bonus is being given to those that give birth to a child and you are saying to adopting parents, 'Up till two you'll get the baby bonus, if that child is adopted.' That means that your adoption would need to be finalised before the child is two.

**CHAIR**—Is that true? Have you got evidence of that?

**Mrs White**—Of what?

**CHAIR**—That the adoption has to be finalised.

Mrs White—I am going by what is in the brochure. It states that a child is not legally adopted—

**CHAIR**—That is a brochure. 'Adopted child' might have a different interpretation.

**Mrs White**—That is all we have to go on.

**CHAIR**—We had better check that.

**Mr CADMAN**—Yes, we will follow that through.

**CHAIR**—I think that would be pretty harsh.

**Mrs White**—And why two? Adopted children come through up until the ages of seven and eight. They just come into the family at that time.

**Mr Powell**—This brochure talks about under five too.

**CHAIR**—It is paid for children up to the age of two.

**Mrs White**—What is being paid out is a drop in the ocean, but it is just one more thing, basically.

**CHAIR**—It was one year. We got it up to two years. We worked quite hard to do that.

Mr Powell—Good work.

**CHAIR**—We thought that was quite a win, really.

**Mr CADMAN**—Maybe the point at which you become eligible really needs to be looked at.

**Mrs White**—Do you become eligible when you get off that plane and you are back in country or do you become eligible when the adoption becomes legal?

**ACTING CHAIR (Mr Cadman)**—When does the actual approval for adoption start?

**Mrs White**—It is a long process.

**ACTING CHAIR**—No, when do you know—

**Mr Ford**—That the child is actually yours and comes under your official control?

ACTING CHAIR—Yes.

**Mr Ford**—That can be up to one year after you have arrived back or, depending on which country you have adopted the child from and if they are a member of Hague et cetera, the child is yours the moment you arrive in country.

**ACTING CHAIR**—So before you leave you do not even know?

Mrs White—Each country is under its own ruling. When you go to collect your child and you have done your paperwork in that particular country, as far as that country is concerned you are the parents of the child. When you come back to your home state, you then have your home visits and assessments for another year or 16 months, depending on when you get a court date. Then the child is legally adopted and, in the case of Tasmania, you get the Tasmanian birth certificate. Then the child is legally yours. In that 12-month interim, if you want to travel interstate or overseas or your child needs an operation, that needs to be signed off by Community Services. The other country says it is your child out of state.

**ACTING CHAIR**—Let me get my head around that. That means that the other country has washed their hands of the child in terms of citizenship and has said, 'That child is no longer ours but belongs to you,' but the formality has not been completed here.

**Mrs White**—The department is the guardian of the child until you go to court.

**ACTING CHAIR**—That could almost be regarded as a pregnancy—the waiting period before the child actually becomes yours. So it no longer belongs to anybody overseas.

**Mr QUICK**—It belongs to the department.

**Mr Ford**—Yes. The responsibility for the child lies with the minister for the department.

**ACTING CHAIR**—The Department of Health and Human Services?

**Mr Ford**—Yes. We act in loco parentis, as it were, on guardianship.

Mrs White—In our instance, with our daughter being in hospital, our social worker and the head of department had to fax through a sign-off for if an operation was required, not that it was, saying that it was okay.

**ACTING CHAIR**—What happens then in that period?

**Mr QUICK**—Who picks up the bill, you or the department? I am serious.

**ACTING CHAIR**—What happens in that period if something goes wrong?

**Mr Powell**—That is a good question. If the parents die, for instance, that child's entitlement to property et cetera is all in doubt. Where that child goes is determined by the department, not by the wishes of the parents.

Mrs White—You are asked to have your wills up-to-date so that the child is covered legally.

**ACTING CHAIR**—Say you have a car accident. A whole lot of things can go wrong in that period. The longer it is, the more chance there is of something going wrong.

Mr Powell—Yes.

**Mrs White**—That is always in the back of your mind that whole year while you are waiting to go to court.

**Mr Powell**—Every parent waits for that time when we get through court.

**Mr QUICK**—So that is a legal requirement in every state—12 months?

**Mr Powell**—That is under state law, the 12 months.

**Mrs White**—That is something you would need to speak to—

**ACTING CHAIR**—Yes, we will. That is a very interesting point.

**Mrs White**—What we do to try to counter that—

Mr QUICK—Why the 12 months? What justification does the department give you?

**Mr Powell**—Under local adoption I understand it was to allow a claim by relinquishing mothers or any other claim for that child. Actually, is only six months for local adoption.

**ACTING CHAIR**—But it is not exactly one year—provided a process is gone through, it need not be one year.

**Mrs White**—Once again, you would need to confirm the time line. I can only go on personal experience. It is approximately a year later.

**Mr QUICK**—But is this a problem because of the legislation? In Queensland it is 1964 legislation that is being updated. Here it is whatever it is—

Mr Powell—1988.

**Mr QUICK**—I do not know what it is. But it was obviously all written in the fifties when hundreds of kids were up for adoption. Now we suddenly have overseas adoption, which is basically 10 or 12 or perhaps 15 years old.

**Mr Powell**—This is an issue that Hague has dealt with, though. Under Hague, if you are dealing with signatory countries, once the adoption is recognised in the relinquishing country, it is legally recognised in Australia. That is under Hague, but it is under the old programs.

Mrs White—In our instance, our son was born through a Hague adoption, so he was legally our son when we went to court in Sri Lanka. But he has no Australian birth certificate and we cannot get an Australian birth certificate. He has a birth certificate written in Sinhalese that we have had translated. That is now in a fireproof safe because we would not be able to get another copy of it. So he will never have a Tasmanian birth certificate.

**Mr QUICK**—We have heard from state education departments about the Chinese children. Girls are abandoned; it was 100,000 last year. The state education system wants a birth certificate, but you do not have one—or you get a piece of paper and you have to get it translated.

**Mr Ford**—After that 12-month period, a Tasmanian state birth certificate is issued for those—

Mrs White—For those adopted back in Australia.

**Mr Ford**—For those particular kinds of adoptions, yes.

**ACTING CHAIR**—Coming back to your claims about when eligibility for benefits should commence, it seems to me that, legally, they should commence when the adopting parents are notified that the overseas country has approved the adoption.

**Mr Powell**—If you are talking about Centrelink benefits, I seem to recall that, when we adopted, the department gave us a letter to Centrelink saying, 'These children are the responsibility of Mr and Mrs Powell.' We were able to take that to Centrelink—

**Mrs White**—And organise Medicare cards so they are straight on Medicare.

Mr Powell—Yes.

Mr QUICK—That is after 12 months?

Mrs White—No.

**Mr Powell**—No, that happens from the time the child comes into your possession. Even with private health funds at that time, we could actually register those children when they were allocated to us.

**ACTING CHAIR**—So the baby bonus should start then as well?

**Mrs White**—We are saying that that is when it is needed. That is when the child comes into your family and that is when it is required.

**Mr QUICK**—Doesn't it seem ludicrous that you can get Centrelink benefits but when it comes, in that 12-month period, to medical treatment—

Mrs White—You have to have sign-off for an operation.

**Mr QUICK**—You have to have departmental authorisation?

Mrs White—Or, if you want to take children to Disneyland, you have to get permission.

**Mr Powell**—To take them out of the country.

Mr QUICK—Doesn't it seem ludicrous that—

**Mrs White**—Or to take them out of the state.

Mr QUICK—you have one arm saying one thing and another arm saying something different?

**Mr Powell**—Basically, it probably means that many parents have broken the law.

**Mr QUICK**—The law is an ass, as we are discovering as we go around Australia.

**Mrs White**—If you wanted to go and visit Nan in Melbourne, Sydney or Brisbane, you have to get permission in that 12-month period.

**Mr Powell**—To leave the state.

**Mr QUICK**—To move interstate?

Mr Powell—No, to leave the state you have to get permission.

**Mrs White**—Or advise them that you are going somewhere.

**Mr QUICK**—So there are two people in Tasmania doing all of this work—being guardians of children in that 12-month period—

**Mr Powell**—They are busy people.

**Mr QUICK**—authorising them to travel and authorising any medical treatment?

**Mrs White**—Not any medical treatment, only certain things. You can go to your local GP and that is fine, but if it is hospitalisation and an operation, you need them to sign off.

**Mr QUICK**—What do you mean by hospitalisation? Do you mean overnight?

**Mr Ford**—Something requiring the utilisation of an anaesthetic.

**Mr QUICK**—A broken arm?

**Mr Ford**—Yes, something along those lines.

Mr QUICK—What happens on the weekend if your child breaks their arm down at Blackmans Bay—

Mr Ford—You break the law.

Mrs White—You break the law.

**Mr QUICK**—And the department does not have a 1300 number for after hours?

**Mrs White**—You go and do what you have to do, and advise them later.

Mr Ford—My wife's and my experience with our social worker, who is the person that you are in first contact with under those circumstances, has been exceptional. I have spoken to other people who have been able to contact their social worker out of hours and for whom those problems have been addressed very, very quickly. We have no problems or complaints with that side. Yes, I do take what you are saying but then, on the other hand, because that regulation is in force, we have found that there is a high degree of cooperation, and speedy answers to any problems that might occur.

**ACTING CHAIR**—I am sorry; I have missed something here. This is in the period before final approval?

Mr QUICK—Yes, in that 12 month period—

Mrs White—In that 12 month period before you go to court.

**ACTING CHAIR**—It is my understanding that, during that period, the child is still overseas.

Mr QUICK—No, it is here.

**ACTING CHAIR**—So you get the approval from the other country and you bring the child back here, but the child is not really yours for a period of 12 months?

**Mr Ford**—That is correct.

Mr QUICK—That is right. If your child breaks their arm on the weekend and the department is not operating, you take the child to the Royal Hobart Hospital and say, 'We are the parents; the child has broken its arm'—

**ACTING CHAIR**—You have got foster parent status almost, at that point, haven't you, until approval is given?

**Mrs White**—It is a worrying year. The questions are always in the back of your mind: what if you were to have a car accident or your partner was to die or something like that?

**ACTING CHAIR**—It seems to me that, if all the prior checks are done effectively and you arrive with the child, the quicker the final formalities are concluded, the better. Isn't that right? It is probably the department's aim, but it just depends on whether everything will be brought together. That is an interesting point. So it is usually about one year?

**Mr Ford**—Yes, that is right.

**Mr QUICK**—Is that being considered in the changes to the legislation?

**Mr Ford**—Not that I am aware of, no. But I am sure that Mrs Hobday will be able to illuminate you as to the rationale behind it. The period of 12 months starts from the date of your return to the country with the child. It is then that you may apply to the courts for the paperwork, which is an order for adoption. Sometimes the time that takes can blow out a little bit, depending on magistrates' availability et cetera, but that qualification period is set. You cannot apply before the 12 months is up.

**Mrs White**—Then you have to go through the medicals again for that court appearance.

**Mr Powell**—I seek leave to put an addendum to our submission, covering Maria's point, on no birth certificate for a Hague convention child.

**ACTING CHAIR**—Have you got that with you or will you submit it later? You can do whatever suits you.

**Mr Powell**—Probably we will have to submit it later. It should have been added here. It is something we did overlook.

**ACTING CHAIR**—Certainly you may add it to your submission. That is no problem. Please just forward it and we will accept it as part of your submission. Thank you very much indeed for giving evidence today.

[14:18 pm]

CRAWFORD, Ms Lynette Joan (Maggie), Acting State Manager, Child and Family Services, Tasmanian Department of Health and Human Services

**HOBDAY**, Mrs Una Margaret, Manager of Adoption Services, Children and Families Division, Tasmanian Department of Health and Human Services

Witnesses were then sworn or affirmed—

**ACTING CHAIR**—Welcome and thank you for appearing. Would you like to make an introductory statement or add to your submission or the Premier's submission?

Mrs Hobday—I have just come from the information session for adoptive families in the north, which happens four times a year. Twelve couples came to hear about the processes for adoption. Just prior to that, I had a phone call from an adoptee who was born in 1959 and adopted here in 1961. She wanted me to share a statement about what she thought about adoption. It says: 'Adoption has shaped who I am today, providing me with a lifetime of opportunities to love, to be loved, to learn, to grow and to achieve.' I think that certainly says a lot about why I am committed to the adoption service in this state and in general.

Our state believes implicitly that adoption is a service for children in which the welfare and the interests of the child concerned are the paramount consideration at all times. Intercountry adoption is a positive approach and an appropriate means of providing a permanent family for a child who cannot be cared for appropriately within his or her own country of origin—but it is just one of the options. We believe implicitly that children, in the first place, ought to have the opportunity of being brought up within their family, even if it is poor. If that is not possible, children need to be brought up with kin in their country of origin and, if that is not possible, brought up with family in that country. The last best choice for children is to be adopted intercountry.

Certainly, that is what I have learned a great deal about since taking over this role. Talking to adoptive children from overseas, I have found that the Hague convention has made a difference for them in that they are assured that they are adoptable. They do not have a mother; they have not been pulled out of a country like Romania or Vietnam where children were taken and it was later found that they had parents. They have some assurances. They also see themselves very much as Ethiopian-Australian, Korean-Australian or Chinese-Australian.

Our service spends a lot of time in the assessment phase of our process to educate parents to make them what I call 'awesome' parents. If I had known before I had children what I teach parents now, my children would have had a better existence. We have four separate workshops. They come to an information session first, before any forms are filled in. If they then decide that adoption is for them, or that an intercountry adoption is for them, they go through the processes of medical checks. Once that is approved, they go to a weekend workshop. In that weekend workshop we look at issues of loss, grief, culture, race and all those kinds of issues. They now come to a workshop on attachment, because the more we talk to families and deal with adoptive

people, we know that every child that comes into this state will have an attachment problem of some kind—be it mild or severe. So we now have attachment workshops for parents, run by a lady who has luckily been trained in America with the gurus of attachment. She now lives in Melbourne and comes here.

The extra part developed in this state is support for parents in that adoption phase. I now run a workshop in a weekend for grandparents and important others. We talk to grandparents and extended family. As you know, a lot of people do not have grandparents in this state, so we talk to their next-door neighbour or their sisters and brothers. We tell them about the process of adoption, why we have the Hague convention and the assessment. All of the issues can help so that they become a support network for the families. After adoption, we still remain the support network.

We had a phone call yesterday from a parent who adopted well before I became manager of the adoption service. They said: 'We hear now that you've got some information about attachment. My child has an attachment problem. Could you please help me?' That was exciting for me because it was the first time that parents outside who have adopted children have come back and asked for some help. We were able to give them help straightaway, so that was really exciting. We feel that our service is now to help people adopt children but also to support families when they come into Tasmania—for the life of that family, until those children are older—so that we can support them in all of the processes of adoption.

I would like to finish by telling a story of a delightful little boy who came to the north-west of the state from Ethiopia when he was seven months old. His mum told me a day before I started in this position that, when he arrived in Tasmania at 4½ months old, for the next two months he kept the last mouthful from his bottle in his mouth, because already imprinted on his soul was hunger. Already that was happening, and it took  $2\frac{1}{2}$  months for that to stop. We need to train the parents, who are awesome parents when their files leave this state, to cope with that kind of thing, and that is what our service does.

**CHAIR**—Thank you for that. I am sorry I was absent when you were sworn in, but thank you very much for being with us. Ms Crawford, would you like to add something?

**Ms Crawford**—No, I am happy to move forward and answer questions.

**CHAIR**—I have to say from the outset that we have heard some rather good things about you today.

**Mr QUICK**—Yes, right around Australia.

**Ms Crawford**—Thank you.

**CHAIR**—We have heard that the fact of your being here has actually made a difference. We all like to think we make a difference; the evidence is you are.

Mr QUICK—Hear, hear.

Ms Crawford—Thank you.

**CHAIR**—I think this attachment program that you are running is something that maybe you could sell to the rest of the country.

**Mrs Hobday**—I would love to. It is amazing how hard it is to get others to understand that this issue is more important than any of us even imagine.

CHAIR—I know I heard in evidence from one parent who had adopted a child in an intercountry adoption that her child had been in a cot for 20 months. The child had only learned to become erect by pulling itself up on a cot because there was no firm foundation to stand up on. They had to literally retrain the child to use different muscles. It can just be something as simple as that to deal with. But one of the things I would really like to know is how you in Tasmania, which only has lead status on the negotiation with South Africa and does not have responsibility for any of them—interact with, say, Victoria, which seems to have most of them, or the biggest share, anyway?

**Mrs Hobday**—I do not think the issue of the lead state makes terribly much difference, and I have to qualify that: we do not have lead status in South Africa. It was a decision that was made at a meeting of other states. It was requested that we do that, but it is a very costly experience to develop a program, and that is—

**CHAIR**—In abeyance.

**Mrs Hobday**—in abeyance. There is no legislation yet in South Africa that allows us to develop a program with them. It has not been legislatively grounded yet, so that issue of who will develop the program will come up at the next Hague convention meeting, because it is a big expense to the department.

**Mr QUICK**—What sort of money are we talking about?

Mrs Hobday—In the first place, it is probably \$10,000, but over the development of the program it could mean more. If it were Bolivia, for example, New South Wales say they have now probably spent about \$35,000 to \$40,000 on translations. South Africa would not need that, but it can be quite an expense to translate documents. The travel to the country in the first instance is not the expensive bit; it is the translations and the negotiations that take place. So out of our budget it is a lot of money.

**Mr QUICK**—Can I be rude enough to ask, in the great hundreds of millions of dollars of the health budget, what your budget is for a 12-month period?

Mrs Hobday—About \$300,000—it is tiny.

Mr QUICK—So, for perhaps another 10 per cent of your budget, you could be doing even greater things than the wonderful ethos you are fostering and the work your staff are doing, to the extent that people are telling us on the mainland that they are giving up their jobs and their family extensions and moving to Tasmania and the ACT. It seems to me that we are depriving you of that small amount of money in the huge health budget—the interventionist, family-supportive, happy family stuff. You have probably heard me say this a dozen times today—I know Bruce has—but Health and Human Services and the social workers seem to focus more on

dysfunctionality. In terms of the wonderful people from whom we have had evidence and hundreds of submissions, who are forced to jump through hoops, you could do even greater work if the state government gave you another \$30,000 or \$40,000.

Mrs Hobday—I would like to respond to that. The first thing is that, yes, the Health and Human Services budget is massive but there are competing priorities, and every government and department needs to make a call on where to target their resources and the services they provide.

**Mr QUICK**—That is a good public servant answer. As I said, and as the chairperson has said, Tasmania is being held up, along with the ACT, as one of the two places where it is being done magnificently—

**CHAIR**—Much better than anywhere else.

Mr QUICK—and in consultation with the families. Yet I know that in Tasmania—because we still have our silo mentalities—juvenile justice can spend \$7 million handling 50 recidivists at Ashley. You would like \$30,000 or \$40,000 to perhaps do some wonderful things—and I know you probably cannot comment. I would like to put on the public record that I think you should be given some extra funding. With the small amount of staff that you have, I do not know how the hell you do it.

**CHAIR**—Can we talk about the use of social workers and the contract system. We have had quite a lot of discussion about the varying quality of staff and that some will be more efficient than others in writing up a file and getting it ready. Some will have a skill, I suppose, or a background of being more knowledgeable about dealing with this area. Do you have a problem getting social workers, and do you have a standard that they must meet? If so, what is it?

Mrs Hobday—Yes, we do. In our department we have three FTE employees across the state who do adoption. We have one in the south, one in the north and one in the north-west. The rest of the assessors are contract assessors, but they are all very much chosen and trained. We have quarterly training for all adoption workers, whether they are contract workers or staff. Next week we are going to spend a whole day on the new evidence and information that I have. I have a new DVD and some training about attachment, and that is going to be the issue of the next training session. Each staff member—contract and paid workers—is given the same manuals, so they all work from the same basis. A new contract worker is mentored by an older contract worker, so the first report they write is assessed in terms of its quality. We have outcomes for each level of report, and we do a lot of internal evaluation. The last staff meeting, for example, looked at reports in general, and we talked about the skills that some people have and about helping people gain the extra skills they need. So there is a lot of work and, because we are small, we can do that.

**CHAIR**—What qualification would the contract social workers have? Would they be graduates?

**Mrs Hobday**—All of them are graduate social workers, graduate psychologists or graduate teachers with a social work or psychology second major.

**CHAIR**—A second degree or diploma degree.

**Mrs Hobday**—They have all been working for some time. They have all had backgrounds in report writing and assessments of various kinds.

**CHAIR**—So if you had a complaint about one you would have a pool that you could go back into and find a different fit?

**Mrs Hobday**—Yes. We have had a couple of complaints for various reasons since I have been here. We were able to swap contract workers around for that reason.

**CHAIR**—Would it be normal that, once an application is accepted and the applicant has done the lectures—

Mrs Hobday—And the initial paperwork.

**CHAIR**—Yes. Once the applicant is going ahead and the social worker comes into play, do you have a time limit that you expect them to meet to have the home study done?

Mrs Hobday—Yes: six months, at the most. That usually takes in four to six visits. Those visits last perhaps two hours, or sometimes one to three hours, depending. At the next stage they would be given what I would call homework to do. It might be a self-assessment; it might be a country project about the country they are going to; it might be a review of some issues. We have a statement of competencies, which are talked about in those assessments. It depends on what comes up in an assessment. It might be an issue that has not been thought through by the family. For example, the mother of one of the adoptive parents might have passed away some years before and they might not have worked through that loss. That might come up while the social worker is talking about the loss and grief of a child coming in, so there would be a lot of discussion with that couple around that loss and how they can work through it. One family whose file has just gone—I got their permission last night to talk about them—said that at the beginning of their assessment they felt it was intrusive. At the end of their assessment, they were so glad they had done it because, to quote him, even if he never gets a child the assessment still made his relationship so much better. He had not realised that his wife had this sense of loss about her mum caught up inside that had to come out.

## **CHAIR**—Really?

Mrs Hobday—Yes. It was quite heavy for them as a family, and it has made such a difference to them as a couple. You can see that in their relationship. Those kinds of things happen during the assessment. So from the day they arrive at the information session—or the day that their file is approved and they get their social worker—to the day the report needs to be approved is six months, at the most. When it gets to five months I am asking questions. But normally I have talked to them four times over that time anyway.

**CHAIR**—So you are keeping tabs. What about the idea that when someone applies they should get a number for their file so that they can track it through and ask, 'Where is my file up to?'

Mrs Hobday—They can track it by ringing up and saying I am Mrs So and So. And they do.

**CHAIR**—Is that because it is a relatively small form?

**Mrs Hobday**—Because we are so small.

**Mr QUICK**—But can you understand the frustration in other states where there are no file numbers?

**Mrs Hobday**—Absolutely.

**Mr QUICK**—If a person gets upset with the system they might be calling a 13 number and be dealing with a different person every time.

Mrs Hobday—Yes. The other thing we do is to list my mobile number at the top of the file we give to people on the first information day. You were given that file this morning. Everybody gets my mobile number and it is with me 24 hours a day. I say that I will not answer it at night, but when you are going through a process like this it is during the weekend when you are out gardening with your wife that you think, 'What about this question?' It is at that odd time that you need the answer. You do not want to wait till Monday. In the two years I have been manager I have had two phone calls. Because people know the number is there they feel okay.

**CHAIR**—Can I ask you about your attitude to the adoption of children? In listening to you, you sound as if you think that adoption is a legitimate way of forming a family or adding to it?

Mrs Hobday—Yes.

**CHAIR**—Do you think that the attitude that you have is important to the success of the program you run?

**Mrs Hobday**—Absolutely.

**CHAIR**—If you left tomorrow and somebody came into your job who did not believe in adoption at all, the whole thing could collapse, couldn't it?

Mrs Hobday—I do not think they would be appointed in this state. Our state is adamant that the person in my job would have to believe that. We have quite high ethical standards, I think. People like Maggie would not have appointed me if I did not believe in that.

**CHAIR**—Maybe you should be going off to Geneva on that delegation.

Mrs Hobday—I would love to be.

**CHAIR**—Can I go back to this Victorian management of the states. With regard to the allocation of children from China, who makes the decision on the number of children that Tasmania is going to get?

Mrs Hobday—China is great. We now send our files directly to China. We send our files directly to all the countries. Since I came in we have been sending all our files direct; we do not send them via any other state.

**CHAIR**—And you changed that?

Mrs Hobday—It has been changed since I came in—I am a public servant.

CHAIR—Good answer.

Mrs Hobday—Yes, we send them directly. The numbers of children adopted from China has increased massively since I came in. It is a very exciting program and a very well-run, organised, known and understood program. We send files in groups of three or more. It took a while, because China needed to get to know us. We sent them via Victoria first and then they wrote to us and said, 'Since you are sending a lot of files, we will be happy to accept files from you with three or more.' So now we do that. Korea has a quota and the lead state for Korea is New South Wales. The quota has been developed on the population in each of the states. We have a quota of four.

**CHAIR**—Who works that out—New South Wales or South Korea?

**Mrs Hobday**—South Korea gives New South Wales, the lead state, the number. They say, 'You can have 53 this year.' Then the states get the number depending on the population in their state. That seemed to be the best way of working it out—on a per capita basis.

**CHAIR**—I have a problem with the stats we get.

Mrs Hobday—But there is movement around that. We have sent four files this year. For example, we get one file to send to Thailand a year, because we are so small. But last year I had three families who really wanted to go to Thailand, so I rang the other states and said, 'Have you used your quotas?' Western Australia had not, so we could send three. Yes, we are given a quota, but we can also negotiate with all the other states, because we work very closely together, to make sure that those quotas are filled in the country.

**CHAIR**—That is effectively what 'lead state' means—they get to allocate the quotas?

**Mrs Hobday**—Yes, but they allocate the quotas equally based on population. That is decided within a group of all the states.

**CHAIR**—How do we reconcile these stats? New South Wales in 2003-04 had 66 adoptions. That is one adoption per 101,991 people. They have seven adoption staff. They prepared 127 files, but only 66 got adopted. These figures I am talking about are completed adoptions, not placements. Where are the other files? What has happened?

**Mrs Hobday**—Yes, I can talk about those stats. I thought you were going to ask me to talk about the one in 115,000 and one in 21,000.

**Mr CADMAN**—We guessed your opinion about that sort of thing.

Mrs Hobday—I will do that in a minute. The first question is fairly easy because what you need to know in between those two sets of figures is how many files have gone overseas, because that is where the hold-up is. The Philippines is a good example. I have nine files in the

Philippines at the moment. Six of those have been there for over  $2\frac{1}{2}$  years, because the Philippines process has slowed down a great deal. We might have sent all those files—so the sent files number looks really good—but when you get the numbers of children adopted, it is really quite small.

**REPS** 

**CHAIR**—What do you do about the files that have been there for 2½ years? What can you do? This is where I see a problem. The nation-state of the Philippines is dealing with the state of Tasmania—one jurisdiction within the country of Australia. It must be very confusing when they are dealing with eight jurisdictions.

Ms Hobday—That is why the lead state status was given, of course. They mostly deal with Victoria because that is the lead state. The head of adoption services in Victoria has just been to a conference in the Philippines and one of the things she did while she was there was to talk to them about the slowness of the process for adoption, to try to get some kind of sense of why, with all the children that are available for adoption, the process is so slow. I am not sure that she came upon the reason. She came upon reasons like, 'We have a three-stage process in our country whereby the files come to one group first who assesses them for age of children. So younger children are put in this pile and older children are put in this pile. Then they go to another set and then a social worker comes to the table and might have information on six or seven families in the centre of the table that would match up with that child, and then she sells a family so that a decision is made.' Again, they are in the same boat as all of us, I suppose, in that they have few social workers. They have lots of families and processes that have to be gone through. Dr Laraya emailed me just yesterday to say, 'I hope this family is happy to wait for the time it will take for them to be allocated a child.' Of course, I wrote back and said yes. It is very difficult once a file leaves here, but I think the lead status is a really good thing to have because then they are only talking to one of us all.

**CHAIR**—Yes, but who in the world has heard of Victoria?

**Mr QUICK**—That is right.

**Ms Hobday**—Yes, but they are acting on behalf of the Australian central authorities. So it is not Victoria talking to the Philippines, it is Victoria on behalf of Australia's central authorities talking to the Philippines.

**CHAIR**—It is still not Australia. It is not embassy stuff, is it?

**Ms Hobday**—No, it is not.

**Mr QUICK**—Is the embassy involved in any way to talk to the Foreign Affairs people?

Ms Hobday—The embassy is a little involved in that we have a lot of connection with the embassies. The Chinese embassy people are just incredible. The Australians in China are just fabulous, and in Ethiopia they have been very good to us. Again, as with all staff in government bodies, they have a lot of calls on their time and adoption is a very small part of where they spend their time. In China there is one person given to adoptions, which is wonderful and Lucy Kennedy is fabulous.

**CHAIR**—That is terrific, isn't it, because that really is government to government stuff?

**Ms Hobday**—Yes, it is lovely.

**CHAIR**—That is probably indicative of the status Australia has given to our relationship with China. That is probably why it is working like that.

Ms Hobday—Yes. I think the comfortableness of government-to-government bodies is the difficulty, and I think we have to understand that. We try to get through to parents that it is not just us working with an agency, it is government to government, and it is what is right at the time and what the politics are that are happening in that country that are going to impact on decisions made about funding for the government agency in that country to more quickly organise children for adoption. All of that stuff is really outside our jurisdiction, but I am sure that, if we had an ability to chat face-to-face more often like we are doing, we may do better in some instances.

Mr QUICK—You are probably not aware of this but it would be nice for you to know that when I was in Beijing talking to the Australian embassy I found out that, because of our trade relationship with China, there are people who are now being seconded and are getting three- or four-year contracts and are adopting Chinese children. The ACT are now the sponsoring body for expats adopting children.

Mrs Hobday—That is brilliant. I would love to have gone in your suitcase!

**Mr QUICK**—The next question was: have you got any discretionary money that you could use to go to China? I know a lot of the American agencies have people based in Beijing that are Mandarin speaking, and they liaise with CCAA.

Mrs Hobday—I think we have got to really understand the difference, though, between America and us. I am really proud of the strict way that we as a country assess parents, and of the training we do. The fact that we have signed the Hague convention—the little weak country that we are, in comparison—is really 12 out of 10. America has not signed the Hague convention.

**CHAIR**—No, they have signed; they have not ratified. We did not ratify until 1998.

**Mrs Hobday**—No, but we have at least ratified.

**CHAIR**—We signed back in 1994 or whenever it was.

Mrs Hobday—That is right, 1994. But America has not yet. I think in some states in America the processes are excellent. In some states they are questionable. I would hate our country to move towards that system. So, yes, I know they have got people in China who are negotiating, but they are negotiating for fees. I think one of the good things about us is that we do not buy, if you like, children.

**Mr QUICK**—No, but it is interesting that we send trade people over. It would be nice to send departmental people involved in overseas adoption with some of our trade committees that go overseas so that you have the full gamut and so that you can meet some of these people.

**CHAIR**—How many would-be adoptive parents do you have in Tasmania, who are hoping, who have applied?

**Mrs Hobday**—At this moment I have 58 files of parents that are being assessed.

CHAIR—How many have applied and been rejected?

Mrs Hobday—One since 1997.

**CHAIR**—What about this story today in the *Advocate*?

Mrs Hobday—I do not think I can comment on that.

**CHAIR**—So 58 files of parents. They should be dealt with. That would be a big jump from 22 to 58.

Mrs Hobday—Yes, it has been going up each year here. There has been a rise in intercountry adoption, from 32 in 2002-03 to 53 when I did this at the beginning of August. I think it has gone up because we have been talking a lot about it. In the paper in the last two years we have had articles about adoption; we have had good news stories about adoption. We have been talking it up. I am a Rotarian, so I have been around just about every Rotary club. People are getting a positive feel. Tasmania is a great place to bring people from overseas, too. We have a wonderful Sudanese and Ethiopian community. We have a lovely Chinese community. I think the communities and Tasmanians in general are interested. We do not advertise our information days, but we get people ringing us up and saying, 'When is your next one?'

**CHAIR**—We have been amazed at the number of submissions that we have received. I thought when we undertook this inquiry that it would be fairly straightforward and simple—that we would wrap it up and be done. What we found is something altogether totally different. I am sorry you were not here to hear young Amee today.

**Mrs Hobday**—I wished I was here too.

**CHAIR**—She was an absolute delight. Even though we heard it in evidence, it was something else altogether to hear a young lady say that she just loves being here, that she is grateful to be here and that if she were in Ethiopia her life expectancy would be 39.

**Mr CADMAN**—You were going to say something earlier about one for every 175 million people.

Mrs Hobday—It is really hard when those statistics are put forward, because people ring me up and say, 'Why is it that you can do one for 21,000 when New South Wales does one for 115,000?' Tasmania has some great advantages, one of which is that we are small. We have three staff for our population and New South Wales has only seven staff for an enormous population. In New South Wales you need to do it in a different way. It is a bit like having people in regional offices in New South Wales—I do not know how they do it because I do not work there. In Tasmania—in smaller areas—it is easier to do training and those kinds of things. New South Wales would have to repeat its training four or five times to get through that number of people,

whereas our staff only have to do it on a weekend once and not four times. So small is beautiful in lots of ways.

**Mr CADMAN**—Your positive outlook is obvious to us. I have not been present to interview state departmental officers before, but is it your impression that other offices—your colleagues in other states—all have a similarly positive outlook?

Mrs Hobday—I think so.

**Mr QUICK**—It is interesting that you say that, because we got a submission of well over 100 pages from Queensland and they refused to come. Most of the witnesses who spoke to us did so in camera because they were scared witless that, if they spoke to us on the public record, their files, because they are not numbered, would disappear.

Mrs Hobday—I cannot comment on that.

**Mr CADMAN**—I understand that; you have made the comment you needed to make. So, in the six-month period, you get approval from the foreign country, you go and pick up the child and then there is a hiatus—a pregnant pause—where you are waiting for the child to be yours. What is the legal status of the child during that period?

Mrs Hobday—Children from Hague convention countries are yours as soon as they are adopted, and children from China are yours as soon as you have picked them up. The status of children from non Hague convention countries is that the state is their guardian for the 12 months, and during that time there are three-monthly assessments. I think that was developed to make sure there is proper care for the child. It is a legislative requirement under the act.

**Mr CADMAN**—Should that be changed? The Premier tells us the act is being reassessed.

Mrs Hobday—The regulations are being changed, not the act.

**Mr CADMAN**—Are these requirements covered by the act or by regulations?

Mrs Hobday—The act.

**Mr CADMAN**—You may not want to comment on this, but it would appear from your description and from what people have said to us that that may no longer be a requirement.

Mrs Hobday—I think all acts need to be reviewed at times, and it is probably time to review the act. I am sure it was really important to have that at the time. The act was written at a time when there were very few intercountry adoptions and lots of local adoptions, and I think that is probably what it was aimed at.

**Mr CADMAN**—Even for Hague convention countries, it appears that there is a period where final approval has to be given by your department or by somebody in Tasmania before it is finalised. Is that right?

Mrs Hobday—There is a court hearing.

**CHAIR**—It goes to the magistrate.

**Mr CADMAN**—Is it just the court delay that is the problem, or is it more than that?

Ms Crawford—It is about the care and protection of children. Una is saying 'non Hague', so—

**Mr CADMAN**—We are talking about Hague now.

**Mrs Hobday**—It does not apply to Hague countries. For Hague countries, as soon as the parents get the child it is theirs. Thai children, for example, are adopted in Thailand now that they have changed and are a Hague ratified country.

**Mr CADMAN**—But for non Hague countries, court approval is needed on arrival?

Mrs Hobday—Yes.

Mr CADMAN—It is just that—

Mrs Hobday—Twelve-month period.

**Mr CADMAN**—So getting into the court is the only limiting factor?

Mrs Hobday—No. Under the act, it is a 12-month period.

**Mr CADMAN**—There is a 12-month period and the four reports.

**Ms Crawford**—Yes. That is about the care and protection of children, given that that country has not signed up to the Hague convention.

**CHAIR**—That strays a bit when you think about China. We entered into a new agreement with China after we ratified. China was not going to ratify Hague, but we follow the Hague principles on both sides.

**Mrs Hobday**—But they followed the Hague principles fanatically.

**CHAIR**—That is right.

Mr QUICK—With the rapid increase in the number of overseas adoptions, do you think—

**CHAIR**—But there has not been one, Harry; it has been static for 10 years.

**Mr QUICK**—To me, there seems to be greater interest and I would like to think that more and more people will be doing it. Is it time to have an overseas adoption act separate from the old adoption act? If you only had one adoption in two years, is it time for the states to introduce overseas adoption acts?

**Ms Crawford**—I am trying to think why.

**CHAIR**—As a legislator, I would not like to see that.

Mr QUICK—Why not?

CHAIR—Because you would want all adopted children to be on the same footing.

**Mr QUICK**—Why? How many children have been adopted in the state of Tasmania in the last 10 years?

**Mrs Hobday**—It was one or two a year in the last three or four years. Ten years ago it was probably five or six. I do not know.

**Mr QUICK**—So it was probably 30 children in the last 10 years, and we have an act for that. How many children have been adopted in the last 10 years from overseas?

Mrs Hobday—I do not have the figures here, but it would be a couple of hundred here.

**Mr QUICK**—So why can't we have a separate act for them—or change the act, rather than just changing the regs?

**CHAIR**—I can think of heaps of reasons why not.

**Mr CADMAN**—Change the domestic adoption processes?

CHAIR—In that same genre, what has become apparent is that we have very few Australian children who are adopted but we have thousands who are fostered—thousands who are denied stability, really. I wonder when we could have a reappraisal of what has become seemingly an anti-adoption policy and a policy that says that the biological ties will be dominant bar nothing. The worst outcome of that policy is the cases in New South Wales where children are returned and tortured; one was murdered because of that policy. There does not seem to be any willingness to revise that policy and truly look at the interests of the child.

We heard earlier that in some parts of the United States that the connection between the fostering parents and the biological parents can exist over a period of time but if they do not have their act together and it is not a safe place for the child to go back to then it is cut off and that is it. The child can have all the knowledge about who they are and what their medical background is, but they do not have to cope with having that instability. I do not think we have done any appraisal since we have had that fostering policy about what has happened to those children in terms of outcomes for their lives.

Mrs Hobday—There are a number of responses to that. The first is that it should be a primary goal that we try and return children to their families where it is the case that they will be safe and protected. So we need time to be able to work with families to try and get to that end. What we should also be doing as soon as child comes into care is trying to plan for some permanency. That permanency may well be with the family of origin, or it might be that we say that we need

to take another route. Certainly, there is nothing stopping children who have been placed with foster carers for some time moving towards adoption. Our act allows us in this state—

**REPS** 

**CHAIR**—But it is not happening—

Ms Crawford—No.

**CHAIR**—The figures are minuscule.

Ms Crawford—You are absolutely right. That is true, and it is certainly something that we have discussed within the department—how we can strengthen this idea around permanency and stability for children and try and work through it, first of all, by looking at whether or not it is an option for children to be going back to the family of origin and, if not, then actively trying to go down another path which does give them that stability. Having said that, we also know from the research that it is as important for adoptive children from other countries as it is for local adoptive children that they understand where they come from. Often, if they have been in care for a long period of time the first thing they do when they turn of age is go back and try and seek out their mother or their father.

**CHAIR**—I understand all that. Everybody is entitled to know where they come from and who they are. It does not mean that you have to stay in touch or be intimate.

Ms Crawford—That is true.

**CHAIR**—It was interesting before you came. I asked one of the ladies who was here who has adopted from overseas if she ever considered fostering. She gave us testimony which is very valuable to us that her GP knew her well enough to say, 'Emotionally, I don't think you could give that child up once you have given that love.' I know, having heard an interview on the ABC only in the last week, that in Victoria they cannot find enough foster parents, because it is asking too much. The policy seems to be way out of kick. We were talking to the ACT government people only last week, and I think you ought to talk with them. They were starting to develop some quite interesting ideas about giving children stability.

To that I will add the plight of a grandmother who came to see me the other day from another jurisdiction again. She had a daughter who at 25 became a drug addict and had two children—one with a known father and one with an undisclosed father. The grandparents of the first child had taken over looking after that child, but the mother still wants to intervene and the child does not want to see the mother. He has got broken teeth and there is methadone—all the things that go with a degenerate person. The other child has been placed in foster care, and she would like to intervene in that life too. This was a distraught situation. He was a child being offered stability, yet the policy that says, 'You're going to be allowed to have access,' is going to totally disrupt that. Why is that fair on that child?

**Ms Crawford**—You are talking about what we call kinship care, and that is a program that we are developing—

**CHAIR**—It is not kinship. The first child is in kinship.

**Ms Crawford**—You said it was the grandmother.

**CHAIR**—The grandmother who spoke to me is not in a caring relationship.

Ms Crawford—Okay.

**CHAIR**—The second child is fostered with a perfectly stable couple.

Ms Crawford—We are looking at kinship care, which does go—

**CHAIR**—This is not kinship care.

Ms Crawford—I hear that. That is one of the things we are doing but combined with that is the issue around permanency and looking at other options around permanency for children. There is also the issue of how you support that permanent arrangement so that the children do know their origins. If a child in this state is saying they do not want to see their parents we, after speaking with them and they are still resisting, will get psychologists to work with the children—

**CHAIR**—Terrific.

Ms Crawford—so that we say they do not need to.

**CHAIR**—How many ordinary kids have to go through being told, 'I'm going to have you see a psychiatrist because you do not want to see this hideous person'?

**Ms Crawford**—It is trying to work through the issues.

**CHAIR**—In other words, they are not in a normal situation; there is intervention coming from everywhere.

**Ms Crawford**—That is right.

**Mr CADMAN**—Isn't this more about looking after the needs of the parent than about the wellbeing of the child?

**CHAIR**—Or maintaining this link.

Ms Crawford—If they say they do not want to see their parents then we stop access straightaway.

Mr CADMAN—That should be it.

**CHAIR**—But then you stick a psychologist in to see why they do not like them.

**Mr CADMAN**—You are more relaxed than the Family Law Act, which is bad enough. You think more of the parents' right to the child than the child's right for a good existence than the Family Law Act does.

**Ms** Crawford—No. At the moment we have a couple of cases where parents are raising complaints and going to a lot of different levels to try and get access to the children. So, when children say that they do not want to see their parents, we need to know and take action as in not forcing children to go and see their parents—

**CHAIR**—But you send in a psychologist to find out why they do not want to. Why should you?

Ms Crawford—If those children have been in state care then they are already—

**CHAIR**—But they are not.

**Ms Crawford**—I am talking about child protection. We do not have—

**CHAIR**—There we have a problem.

**Mr QUICK**—How often do you get to talk with your counterparts in other states and territories about something as silly as whether you can or cannot put photos of wonderful happy stories around?

Mr CADMAN—She will not comment!

**Ms Hobday**—We meet three times a year as a group. That is legislation in Queensland; it is not the same legislation here.

**CHAIR**—I could not go to that last meeting but one of the members of the committee did go, but I think I am going to make a big point of going next time.

**Ms Hobday**—That would be great. Good. That is in Canberra on 11 and 12 November, I think.

**CHAIR**—Margaret, could you find that out because I really want to be at that meeting. The other thing that came out of this morning's evidence, which I found enormously interesting, was the statement that, if you adopt from overseas, that child has one set of parents. That is quite important in forming a family.

**Mr CADMAN**—More than one thing struck me about your submission compared with those from the other states, but I was particularly struck by your charges, your fees. You are prepared to document where each part is allocated. Is there full cost recovery in what you do?

**Ms Hobday**—No, there is not.

**Mr CADMAN**—So it is a subsidised process?

**Ms Hobday**—Absolutely, by lots.

**Mr CADMAN**—By a lot?

Ms Hobday—Yes.

**CHAIR**—If it were not subsidised, would it be up around New South Wales charges? I thought that might be a benchmark.

**Mr CADMAN**—Do you think the cost has any big bearing on the number of parents seeking adoption?

**Ms Hobday**—I think it certainly would in Tasmania. I cannot make comment about other states.

**CHAIR**—They might be able to save up for the air fare but saving up to pay the government fee is a bit different, isn't it?

**Ms Hobday**—I had one family who went to China write down every single cent they spent from day one to when they came back, and it worked out to be \$28,532.17—a lot of money.

Mr CADMAN—Say that again.

**Ms Hobday**—It was \$28,532.17.

**CHAIR**—The figure we would usually talk about in terms of the cost would be \$20,000 to \$30,000.

**Mr CADMAN**—That would be increased by another \$8,000 or \$10,000 in another state?

**Ms Hobday**—No, that included all the costs. That is including the department of immigration's and our costs.

**CHAIR**—But that is in your state.

Ms Hobday—That is right.

**CHAIR**—If it were New South Wales, you could add another \$8,000 to that.

Ms Hobday—Yes.

**Mr QUICK**—Could I be presumptuous and thank the two people from the department.

**Mr CADMAN**—We would all like to join you in that.

Ms Hobday—Thank you.

**Mr QUICK**—I am a proud Tasmanian because, as I said, everywhere we go in Australia, this state is held up as one of the shining lights. If you can convey to your staff how wonderful we—

Ms Hobday—Thank you. I will.

**CHAIR**—If she had some more staff to convey it to she would be very happy!

**Mr QUICK**—We will work on that. I will anyway.

Mr CADMAN—But, Harry, it is creating a positive migration flow to Tasmania!

**Mr QUICK**—It is. Wonderful people.

**CHAIR**—Thank you very much for your evidence. It really has been very helpful. It provides a bit of a benchmark that we can measure other testimony against. And I repeat: I have learnt how vitally important the attitude of a person who is running a program is. As we have gone around the country that has been reinforced every time, and I think it is perfectly fair that we say to you that you are held in high regard. I thank everyone for their attendance today.

Ms Hobday—Thank you very much.

Resolved (on motion by Mr Quick):

That this committee authorises publication, including publication on the parliamentary database, of the transcript of the evidence given before it at public hearing this day.

Committee adjourned at 3.15 pm