



Mapping Australia's support for the
institutionalisation of children overseas

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Section One: Introduction

1.1 Executive Summary

While anecdotal evidence suggests Australia makes a significant contribution to the supply chain of people, money and resources that drive the orphanage industry, there is a clear lack of literature, data and reporting mechanisms currently in place to accurately determine the scope of Australia's support for the institutionalisation of children overseas. There is a growing awareness within the child protection and international development sectors of the detrimental effects of residential care and the linkages between residential care and orphanage tourism, however this message has yet to achieve widespread penetration and acceptance in Australia.

This report seeks to map Australia's contribution to residential care institutions for children overseas across a number of sectors and identify opportunities for strategic engagement with various stakeholders in the Australian context.

Important recommendations that arise from the mapping:

- 1) Investment in further research and data collection studies: More research, data collection and reporting mechanisms are required across all contributing sectors. There needs to be a concerted effort to capture data in relation to volunteers leaving and returning to Australia for volunteering purposes.
- 2) Data indicates the faith-based sector contributes significantly to the support of residential care for children overseas, and is generally less bound by reporting requirements. This sector is particularly complex in the flows of money, resources and people and warrants further research and analysis into how faith-based organisations contribute to the institutionalisation of children overseas.
- 3) There is a need to redirect volunteers to engage in non-residential programs that seek to strengthen families and communities if appropriate.
- 4) Strengthening of the supply-side regulatory frameworks across the NGO, faith-based, education and tourism sectors is required.
- 5) Investment in improving child safeguarding practices to address a lack of understanding of child rights and protection across all sectors is needed.

1.2 Definitions

Residential Care

Group living arrangements for children in which care is provided on a temporary, mid-term or permanent basis, by paid employees¹ or volunteers who would not be regarded as traditional carers within the wider society. This can include orphanages, children's centres, transit homes, shelters, children's villages (compound foster care) and other such non-family based settings.

Alternative Care

Alternative care is the care provided for children by caregivers who are not their biological parents. This care may take the form of informal or formal care. Alternative care may be supervised independent living arrangements for children.²

Family-based care

Family-based care includes all forms of parental child care or alternative care in which a child is raised by a family, rather than within an institution. Family-based care includes parental care, kinship care, foster care and adoption.³

Orphanage Voluntourism

Orphanage voluntourism is a term used to define a spectrum of activities related to the support of orphanages and children's homes by individuals who are primarily, or were initially tourists on vacation. In most cases, orphanage voluntourism involves a tourist who wishes to include an element of social work-oriented volunteering in their travels and who chooses to do this by volunteering their time – sometimes coupled with financial or material support to an orphanage.⁴

1.3 Rationale and Background

With growing interest in volunteer tourism around the world, there is an increasing trend of volunteering within residential care institutions in developing countries. In 2007, over 8 million children worldwide were documented as living in residential care.⁵ There is a common-held misconception that children living in residential care do not have parents, guardians or other suitable adult caregivers, yet studies indicate that in the majority of cases, children in such institutions have one or more living parents.⁶ Traditional kinship structures of many non-western

¹ Tolfree, D., *Roofs and Roots: The care of separated children in the developing world*, (1995) London, Save the Children UK, available at: https://www.savethechildren.org.uk/sites/default/files/docs/A_last_resort_1.pdf

² Fulford, L M & Smith, R., *Alternative Care in Emergencies Toolkit* 2013, London, available at: http://www.unicef.org/protection/files/ace_toolkit_.pdf

³ Lovera, J & Punaks, M. 2015, 'NGN, Reintegration Guidelines for Trafficked and Displaced Children Living In Institutions'.

⁴ Ibid.

⁵ Save the Children. 'A Last Resort: The growing concern about children in residential care' London.

⁶ Williamson, J. & Goldberg, A. (2010). *Families, Not Orphanages*. Better Care Network working paper. Available at: www.crin.org/docs/Families%20Not%20Orphanages.pdf / Browne, K. (2009) *The risk of harm to young children in institutional care*. Save the Children, UK and The Better Care Network. Available at: www.crin.org/docs/The_Risk_of_Harm.pdf.

countries, especially those where orphanage volunteering is most common, actually result in very few children being left without someone to care for them.⁷

In many developing contexts, non-institutional child welfare systems are underdeveloped and therefore fail to provide appropriate support to vulnerable children and their families in their communities. At the same time, significant resources are being directed towards residential care, which in turn results in residential care being used as a development strategy to meet children's basic needs, rather than being reserved as a last resort. Despite being considered outdated in 'developed' countries, residential care continues to receive widespread support from donors, NGOs and volunteers from foreign countries. This continued support of residential care as a means of meeting children's needs is diverting attention and money away from family/community strengthening models, and has effectively led to the incentivisation of family separation.⁸ In families with one or both parents alive, the decision may be made to place children in residential care facilities in order to access educational and other services, thus increasing the demand for such services.

The widespread support of residential care has also led to the exploitation of this model by some for financial gain. This includes the targeted 'recruitment' of children from poor families, on the promise of a better lifestyle and opportunities in order to solicit donor funds for so called 'orphans'. There is evidence of children being displaced into orphanages for exploitation for profit.⁹ There is also evidence that in some situations the living conditions of children in these orphanages have been kept deliberately poor in order to solicit donations from donors, volunteers or tourists. Lax regulations, limited accountability and transparency regarding the quality and legitimacy of residential care institutions are characteristic in many developing contexts and enable such practices to thrive.¹⁰

While there is considerable anecdotal evidence to suggest that Australia contributes to the supply chain of people, money and resources that drive the orphanage industry through foreign donors and orphanage tourism, particularly within the Asia Pacific regions, to date there has been no research conducted to demonstrate the scope of Australia's contribution to residential care for children overseas. Anecdotal evidence suggests that each year thousands of volunteers and tourists from Australia participate in orphanage tourism and volunteering, often with no prior knowledge of how harmful the practice can be. Common pathways to orphanage volunteering or tourism include university placements, which comprise of both volunteer placements and overseas internships for course credit, international volunteering agencies, private and public school overseas trips, missions trips facilitated by churches or faith-based organisations, volunteer placements organized by Australian NGOs, corporate social responsibility programs, and general tourism.

⁷ Richter L & Norman A. 2010, 'AIDS Orphans Tourism: A threat to young children in residential care' *Vulnerable Children and Youth Studies*, 5: 3, p. 217-229.

⁸ Better Volunteering, Better Care Project (BVBC) (2014a), *Collected Viewpoints on International Volunteering in Residential Care Centres: An Overview*.

⁹ Punaks M, & Feit, K. 2014, 'Paradox of Orphanage Volunteering', *NGN Oregon USA*.

¹⁰ Wulczyn, F.; Daro, D.; Fluke, F.; Feldman, S.; Glodek, C.; Lifanda, K. 2010, 'Adapting a Systems Approach to Child Protection: Key Concepts and Considerations' New York.

Australia's contribution to the supply chain of people, money and resources that drive the orphanage industry is complex. This research seeks to make initial investigations into the topic. It will add to the existing literature by contributing to a better understanding of the scope of Australia's involvement across different sectors. Furthermore, key barriers will be identified and recommendations made to work towards shifting the way Australia engages with overseas aid and development, to instead support alternative volunteering opportunities that support broader care reform.

Section Two: Literature Review

In the following section a literature review discusses voluntourism as related to the alternative care of children in developing countries, the impacts of institutionalisation on children, and the scope of Australia's engagement in the institutionalisation of children overseas through supporting the supply chain of people, money and resources that drive the orphanage industry. It provides an overview of existing data and regulations within each relevant sector and seeks to highlight gaps where only limited data and information is available.

2.1 Voluntourism and Orphanage Volunteering

Understandings of volunteerism, voluntourism and tourism can differ greatly. However, most commonly, 'voluntourism' is defined as the process where "tourists who, for various reasons, volunteer in an organised way to undertake holidays that might involve aiding or alleviating the material poverty of some groups in society, the restoration of certain environments or research into aspects of society or environment".¹¹ It is estimated that 1.6 million people participate in voluntourism every year and spend up to USD 2.6 billion¹², making voluntourism one of the fastest growing tourism markets in the world.¹³ There has been a rapid increase in recent years, in the number of individuals participating and the number of facilitators.¹⁴

Orphanage voluntourism is where residential care institutions allow tourists to visit, and sometimes volunteer with children who live there. It is a term used to define a spectrum of activities related to the support of orphanages and children's homes by individuals who are primarily, or were initially, tourists on vacation. In most cases, orphanage voluntourism involves a tourist who wishes to include an element of social work-oriented volunteering in their vacation or travels and who chooses to do this by volunteering their time – sometimes coupled with financial or material support to an orphanage.¹⁵ Despite a global shift away from institutional care, as evidence shows family and

¹¹ Wearing, S. (2001) *Volunteer tourism: Experiences that make a difference*. Wallingford: CABI.

¹² Tourism Research and Marketing (2008) *Volunteer tourism: A global analysis*. A report by tourism research and marketing. Barcelona, Spain: Association for Tourism and Leisure Education.

¹³ Lyons, K., Hanley, J., Wearing, S., & Neil, J. (2012) Gap year volunteer tourism: myths of global citizenship? *Annals of Tourism Research*, Vol. 39, No. 1, pp. 361-378.

¹⁴ Raymond, E. & Hall, C. (2008) "The development of cross-cultural (mis)understanding through volunteer tourism", *Journal of Sustainable Tourism*, Vol. 16, No. 5, pp. 530 - 543.

¹⁵ Lovera, J & Punaks, M. 2015, 'NGN, Reintegration Guidelines for Trafficked and Displaced Children Living In Institutions'.

community-based care is the best option for children, the number of ‘orphanages’ are increasing. Some assert this may be because of links to tourism.¹⁶

There have been very few research studies conducted specifically in relation to orphanage voluntourism by Australians. In fact there is very little data or academic research available on the impact of volunteers on children in residential care settings and on volunteering in residential care centres in general. Of the few studies that have been conducted, a number of authors note the reason for using volunteers is the contribution they make financially and the educational benefits they bring to the children.¹⁷ Studies indicate that orphanage tourism is detrimental to children’s social, physical and psychological well-being¹⁸ and cause further negative impacts, such as the potential for children to develop or worsen attachment disorders, become separated from their families, fuel corruption or divert funds from local development priorities.¹⁹ Furthermore, some authors have argued that orphanage volunteering commodifies children, making them a resource available for exploitation.²⁰

A 2014 study conducted by the Better Volunteering Better Care (BVBC) network found that negative impacts resulting from orphanage volunteering include: (1) vulnerability of children to abuse through lack of appropriate background checks; (2) normalising the practice of using unskilled staff to work with children; (3) disrupted attachment for children; (4) imbalance of power between foreigners and children; (5) inappropriate behaviour from unskilled and unscreened volunteers; and (6) cultural differences between volunteers and children. The biggest problems noted were that volunteers are supporting a model of care that should only be used as a last resort and are creating a demand for “orphans” which separates children from their families.²¹

2.2 Impact of Institutionalisation on Children

There is a growing body of evidence on the potentially detrimental impacts of growing up in residential care on a child’s development and overall well-being.²² These impacts include the risk of developing reactive attachment disorders, developmental delays, behavioural issues, and the risk of abuse. Research suggests that children in residential care are more likely to suffer from poor physical health and reduced intellectual capability, compared with children raised at home or in

¹⁶ World Vision (2013) *Child Safe Tourism: The Tourists Perspective*.

¹⁷ Guiney, T., & Mostafanezhad, M. (2014). The political economy of orphanage tourism in Cambodia. *Tourist Studies*; Tomazos, K., & Butler, R. (2010) “The volunteer tourist as ‘hero’”, *Current Issues in Tourism*, Vol. 13, No. 4, pp. 363 – 380; Verstraete, J. (2014). Carnegie Faculty School of Events, Tourism & Hospitality Research Project, *The impact of orphanage tourism on residential care centres in Cambodia: a qualitative research*.

¹⁸ World Vision (2013) *Child Safe Tourism: The Tourists Perspective*.

¹⁹ Guiney, T., & Mostafanezhad, M. (2014). The political economy of orphanage tourism in Cambodia. *Tourist Studies*; Richter, M & Norman, A (2010) AIDS orphan tourism: A threat to young children in residential care, *Vulnerable Children and Youth Studies: An International Interdisciplinary Journal for Research, Policy and Care*, Vol. 5, No. 3, pp. 217-229.

²⁰ Reas, P. J. (2013). ‘Boy, have we got a vacation for you’: Orphanage Tourism in Cambodia and the Commodification and Objectification of the Orphaned Child. *Thammasat Review*, Vol. 16, pp. 121.

²¹ Better Volunteering, Better Care Project (BVBC) (2014a). *Collected Viewpoints on International Volunteering in Residential Care Centres: An Overview*.

²² Save the Children ‘A Last Resort: The growing concern about children in residential care’ London.

foster care.²³ Research has also shown that young children who grow up in institutional care are more likely to experience delays in their cognitive and social development and experience behavioural problems when compared to children of an equivalent age that grow up in a family unit²⁴. This can be a consequence of the impact an attachment disorder has on a child's brain development, limited stimulation, and less opportunities for engagement in normal social settings in the community.²⁵

In addition to impacting a child's development, children in residential care are also at risk of experiencing various types of abuse. Volunteers are often poorly trained due to short-term placements and time constraints and there are limited safeguarding regulations and reporting mechanisms in place to keep children safe. As a result, abuse in residential care remains commonplace. The risk of abuse is further heightened in residential care centres where volunteers, tourists and visitors are permitted to work directly with children and as a result, key child protection agencies and child rights advocacy groups are calling for a halt to the practice of orphanage voluntourism.²⁶

2.3 The Australian Context

In accordance with the United Nations *Convention on the Rights of the Child* (UN CRC), children have the right to grow up in a family environment. This is further supported by the United Nations *Guidelines for the Alternative Care of Children*, which seek to support the preservation or re-establishment of families and identify a spectrum of options for alternative care.²⁷ Institutional care is considered a last resort and avoided for children under the age of three, unless there are very compelling reasons for exception. Australia is party to the UN CRC and as such, is required to recognise and operationalise its provisions in domestic legal and policy frameworks. Within Australia, the domestic child protection system recognises out-of-home care as a last resort for keeping children safe, and supporting children within their family is the preferred option.²⁸ However, when we consider Australia's support for the institutionalisation of children overseas, the available data tells a different picture.

²³ Browne K. 2009, 'The Risk of Harm to Young Children in Institutional Care'; Carter, K. A (2008). *Volunteer Tourism: An exploration of the perceptions and experiences of volunteer tourists and the role of authenticity in those experiences*. Unpublished Masters, Lincoln University; Smyke, A.T., Koga, S.F., Johnson, D.E., Fox, N.A., Marshall, P.J., Nelson, C.A., Zeanah, C.H. and The BEIP Core Group. (2007). The caregiving context in institution-reared and family-reared infants and toddlers in Romania. *Journal of Child Psychology and Psychiatry*, Vol. 48, pp. 210–218.

²⁴ Browne K. 2009, 'The Risk of Harm to Young Children in Institutional Care'.

²⁵ Smyke, A.T., Koga, S.F., Johnson, D.E., Fox, N.A., Marshall, P.J., Nelson, C.A., Zeanah, C.H. and The BEIP Core Group. (2007). The caregiving context in institution-reared and family-reared infants and toddlers in Romania. *Journal of Child Psychology and Psychiatry*, 48, 210–218.

²⁶ Better Volunteering, Better Care Project (BVBC) (2014a). *Collected Viewpoints on International Volunteering in Residential Care Centres: An Overview*.

²⁷ *Guidelines of the Alternative Care of Children, principle 22*, available at: http://www.unicef.org/protection/alternative_care_Guidelines-English.pdf

²⁸ *National Framework for Protecting Australia's Children 2009-2020*, available at: https://www.dss.gov.au/sites/default/files/documents/child_protection_framework.pdf

The literature suggests that ‘orphanages’ as a solution to child poverty and vulnerability of all kinds, are deeply ingrained in the psyche of many individuals from Europe, North America, and Australasia, regardless of the fact that residential care institutions are no longer established in those countries, with most countries using foster care models and small group homes instead.²⁹

There is a clear lack of literature, documentation, data collection and reporting mechanisms currently in place to provide an accurate picture of Australia’s support for the institutionalisation of children overseas. Studies conducted outside Australia indicate supply-side support takes several different forms and spans across a number of different sectors, including education, Non-Governmental-Organisations (NGOs) and faith-based charities and the tourism industry. To date, there have not been any studies in Australia focusing specifically on the supply side factors contributing to orphanage tourism and supporting the institutionalised care of children overseas.

Section 3: Mapping

3.1 Limitations

The nature of internet analysis means that the collection of data in undertaking this mapping study was solely reliant on self-reporting of the sectors regarding their contributions and involvement with institutions for children overseas. As a result, we can assume that the findings here represent the absolute minimum involvement by the sectors represented.

3.2 Methodology

This mapping was undertaken utilising existing data sets, internet analysis and a literature review. Where available, the research was undertaken utilising existing data sets for each sector. For example, the NGO and faith-based sectors were analysed utilising the ACNC Annual Information Statement data set. All charities must be registered with ACNC and lodge an Annual Information Statement. All churches/religious institutions that are incorporated must also be registered with ACNC in order to access tax concessions. A total of 38341 annual information statements lodged in 2013 with the Australian Charities and Not-for-profit Commission (ACNC) were reviewed. This was the latest data set available. ACNC Reports: Australian Charities Operating Overseas and Australia’s Faith Based Charities – both published in 2015 using the 2013 data set were also referenced.

The education sector was analysed first by utilising the public, private and independent school lists provided by the Department of Education in each state. After obtaining the lists, internet search analysis utilising a snowball methodology was utilised. For the remaining sector of travel agencies, a data set was not available. For this sector, internet analysis utilising a snowballing methodology was employed.

²⁹ Better Volunteering, Better Care Project (BVBC) (2014a). *Collected Viewpoints on International Volunteering in Residential Care Centres: An Overview*.

3.3 Findings

Non-Government-Organisations (NGOs)

Australian charities have been active overseas since before federation, and Australians have strong connections to international communities.³⁰ According to the ACNC's Annual Information Statements (AIS) for 2013, approximately 15% of all reporting Australian charities report working overseas in some capacity, and 13% report that their beneficiaries include communities overseas.³¹ Charities working overseas receive more support from volunteers with over 93% reporting to be supported by volunteers.³² There were 677,382 volunteers working with charities with an overseas focus in 2013, which represents more than a third of the estimated two million volunteers for all reporting charities.³³ It is important to note that many charities working overseas also reported that they provide a range of domestic services within Australia and it is unclear whether these volunteers are working overseas or in domestic settings from the data available.

It was also found that 10% (240) of charities operating overseas and 8% (465) of charities involved overseas noted the provision of childcare as their charitable purpose.³⁴ One such example of a charitable purpose reported included *"building relationships with orphanages and children and networking. Identifying how and where our charity can provide benefit and improve living conditions."*³⁵ Children were noted as the beneficiaries for 74% of charities involved overseas and 63% which operate overseas.³⁶ Of 2,402 charities that reported to operate outside Australia, the countries in which most charities are active are India, the Philippines, New Zealand, Papua New Guinea and Indonesia.

The mapping of the Australian NGO sector found there were 245 registered NGOs directly funding or sending volunteers to residential care institutions and 565 charities involved/operating residential care institutions overseas, which represents 9.7% of all charities involved/operating overseas. As a total percentage of all charities, 1.5% of Australian charities are contributing to residential care institutions overseas. This suggests there is significant support for residential care institutions from the NGO sector and a need for strengthened child safeguarding measures, a more robust accreditation process and increased education on the risks of long-term residential care for children.

³⁰ Gilchrist and Knight, *Australian Charities Involved Overseas: A study supplementing the Australian Charities 2013 Report*, Curtin University Not-for-Profit Initiative (2015 ed.).

³¹ Available at acnc.gov.au/curtincharitiesreport2013 or business.curtin.edu.au/courses/accounting/research/not-for-profit/reports.cfm

³² Gilchrist and Knight, *Australian Charities Involved Overseas: A study supplementing the Australian Charities 2013 Report*, Curtin University Not-for-Profit Initiative (2015 ed.).

³³ Ibid.

³⁴ Ibid.

³⁵ 2013 Annual Information Statements, as stated in Gilchrist and Knight, *Australian Charities Involved Overseas: A study supplementing the Australian Charities 2013 Report*, Curtin University Not-for-Profit Initiative (2015 ed.).

³⁶ Ibid.

ACFID and the ACFID Code of Conduct

The Australian Council for International Development (ACFID) is the peak body for Australia's non-government aid and international development organisations. Ninety-seven per cent (97%) of ACFID members are also registered charities with the Australian Charities and Not-for-profits Commission (ACNC). All ACFID members are required to adhere to the ACFID Code of Conduct (the ACFID Code). The ACFID Code promotes good practice and aims to improve international development outcomes and increase stakeholder trust by enhancing transparency and accountability of the signatories.³⁷ It sets out more than 50 principles and 150 obligations. The ACFID Code promotes good governance practice beyond the minimum requirements of the ACNC governance standards. It includes a provision on child protection which states, "signatory organisations are committed to the safety and best interests of all children accessing their services and programs or involved in campaigns, voluntary support, fundraising, work experience or employment and, in particular, to minimising the risk of abuse".³⁸ However, there is no specific provision prohibiting support for children in residential care. There are presently 31 member organisations that are signatories to the ACFID Code that fund residential care for children overseas.

Overseas Aid Gift Deduction Scheme Guidelines (OAGDS)

Once registered with the Australian Charities and Not-for-profit Commission, charities can apply under the OAGDS Guidelines to be accredited to issue tax-deductible receipts for donations made to support their overseas aid activities. This provides a way for members of the Australian community to donate to these organisations and claim their donation as a tax deduction, which is regarded as an incentive to donate. It is expected that organisations will have a clear organisational objective to support overseas aid. This is usually expressed in the organisation's governing instrument, strategic plan or other approved documents that establish the organisation's priorities. To be eligible for OAGDS, an organisation needs to undertake aid activities that are delivered in developing countries. Only 16% of charities reporting to be involved overseas to ACNC in 2013 were endorsed as Deductible Gift Recipients under the OAGDS.³⁹

Under the current OAGDS Guidelines, particular child protection considerations are required. All organisations must have a Child Protection Policy and procedures in place that promote child protection and child safe practices. Those who have direct contact with children will undergo Australian Federal Police (AFP) criminal history checks. Where there is an increased risk to children, such as direct contact with children or the project and partners are working with children with disabilities or children in institutional care, additional child safe practices are expected to be in

³⁷ Australian Council for International Development (ACFID) website: <https://acfid.asn.au/code-of-conduct>

³⁸ ACFID Code of Conduct, B.3.4 Child Protection, available at: https://acfid.asn.au/sites/site.acfid/files/resource_document/ACFID-Code-of-Conduct-vOCT14_0.pdf

³⁹ 2013 Annual Information Statements, as stated in Gilchrist and Knight, Australian Charities Involved Overseas: A study supplementing the Australian Charities 2013 Report, Curtin University Not-for-Profit Initiative (2015 ed.).

place.⁴⁰ The mapping results illustrated that there were at least 95 projects or organisations that were registered or auspiced by OAGDS accredited charities.

The UNCRC and UN Alternative Care Guidelines clearly state that the use of residential care for children should only be used in very limited cases and should always be a last resort and short-term solution. While the 2014 OAGDS guidelines maintained a minimalist perspective on the Australian Government's Department of Foreign Affairs and Trade's (DFAT) expectations for both new applicants and existing approved agencies by prohibiting organisations from funding the general operational costs of orphanages, following a review in which support of orphanages was raised as a concern, the most recent OAGDS guidelines do not refer to orphanages or residential care at all.⁴¹ Failing to include any guidance on child rights, the harmful effects of long-term institutional care, or a clear position on support for residential care, these new guidelines fail to consider whether the support of orphanages is problematic and address associated risks of child rights regressions. Stricter criteria should apply to OAGDS approved organisations that seek to partner with orphanages and residential care institutions. This criterion should include at a minimum ensuring that the orphanage is a last resort and temporary measure or part of a structured deinstitutionalisation process.

Organisations approved by, or applying for OAGDS would benefit from a comprehensive set of guidelines which address the gap in both ACFID's Code of Conduct and OAGDS guidelines. More specifically, there is a need for clearer guidance on the distinction between welfare and development and greater attention should be paid to demonstrating how the incorporation of core development principles, such as participation, empowerment, capacity building and resilience, at each stage of the project cycle heavily influences final determinations. This is necessary to dispel the myth that welfare and development classifications are made on the basis of activities alone. Case studies could also be included to demonstrate this in practice.

There is a need for greater alignment with international human rights frameworks and legislation. The OADGS guidelines should ensure that any activities that receive tax deductible funding align with international human rights frameworks and international law. This is pertinent when it comes to child rights and child protection. The OAGDS guidelines should guard against endorsing or accrediting organisations or activities that violate children's rights or inadvertently cause rights regressions. This is particularly the case in relation to the overuse of long-term residential care.

Public Benevolent Institution (PBI)

A public benevolent institution (PBI) is one of the categories or 'subtypes' of charity that can register with the Australian Charities and Not-for-profits Commission (ACNC). Public benevolent institutions can apply for charity tax concessions and may be eligible to be endorsed as deductible gift recipients (DGRs) by the Australian Tax Office (ATO).⁴² A public benevolent institution is a type of charitable

⁴⁰ Australian Government Department of Foreign Affairs and Trade (DFAT), Overseas Aid Gift Deduction Scheme Guidelines, Feb 2016.

⁴¹ Ibid.

⁴² Australian Charities and Not-for-profit Commission, Fact Sheet: Public benevolent institutions and the ACNC, available at: http://www.acnc.gov.au/ACNC/FTS/Fact_PBI.aspx

institution whose main purpose is to relieve poverty or distress. Public benevolent institutions are recognised by the ACNC and ATO as a subtype of charity.

A charity may be a public benevolent institution if it meets the legal meaning of charity, is an institution, has benevolent relief as its main purpose and where that relief is provided to people in need.⁴³ A charity's purpose is considered to be of public benefit if achieving this purpose would be of benefit to the public generally or a sufficient section of the public, and "young people" is considered to meet this requirement. There are many ways a charity's purpose can benefit the public, for example, it can provide goods, services, education, counselling or spiritual guidance, or improve the environment. There are currently no guidelines in place regarding residential care or orphanages overseas to regulate the support that Australian PBI registered charities can provide to orphanages overseas.

The mapping results showed that there were at least 22 organisations holding PBI status through the ACNC that are contributing to residential care overseas. However it was noted that registrations for PBI status by organisations operating within this area are increasing due to a recent change in law.

Auspiced Organisations

The mapping sought to quantify the number of projects directly funding or sending volunteers to residential care institutions through an auspice agreement. Auspice agreements are often used to help certain community organisations access funding for their activities. An auspice agreement is a legally binding contract and sets out the legal obligations of both the auspicer and auspicee toward each other and in relation to any specific funding or other agreements. The most common reason for an organisation to seek to be auspiced is a need to quickly and easily meet grant funding requirements. Grant funding often requires that a recipient is incorporated, is a Tax Concession Charity or has DGR endorsement and this can be time consuming and expensive. Completing a project under the auspices of the auspicing organisation provides quick access to tax concessions and DGR status.⁴⁴

The mapping found 35 auspiced projects funded by 10 major auspicers supporting residential care centres. These auspicers all hold DGR status under the OAGDS. Auspicing organisations would benefit from guidelines to regulate the kind of support provided to institutions for children overseas.

⁴³ ACNC Act, Charities Act 2013 (Cth) (Charities Act) and Charities (Consequential Amendments and Transitional Provisions) Act 2013 (Cth) (the Charities Consequential and Transitional Act).

⁴⁴ Justice Connect, (2014) *Auspicing – a Guide to auspicing for auspicing organisations and those delivering auspiced projects*, Not-for-profit Law Guide, 2014, available at: http://www.nfplaw.org.au/sites/default/files/media/Auspicing_Guide.pdf

Faith-Based Sector

Evidence indicates there are strong links between faith-based organisations and residential care institutions overseas.⁴⁵ This is a result of good intentions coupled with a lack of awareness of child protection, child rights and the negative impact of residential care.⁴⁶ Faith-based charities within Australia range from those serving small local community congregations to some of Australia's largest providers of essential services in primary, secondary and tertiary education, health services, aged-care and disability services.⁴⁷ Faith-based charities attract a proportionately larger number of volunteers than other charities. They are also more likely to be operating outside Australia, either in direct service delivery or through making donations.⁴⁸ More than half of all reporting charities in 2013 involved overseas and 46% of those that operate overseas are faith-based charities.⁴⁹

A supplementary study to the Australian Charities 2013 Report also suggests that fewer faith-based charities have reporting obligations to Commonwealth or state/territory governments and spend less time meeting government reporting requirements than the overall population of Australian charities.⁵⁰ Only 8% indicated that they reported to the Commonwealth and 10% to a state or territory government. In 2013, 31% of responding charities reported to the Department of Education, Employment and Workplace Relations (DEEWR), 27% to the Department of Health and Ageing (DoHA) and 25% to the Department of Social Services.

Under the *Australian Charities and Not-for-profits Commission Act 2012 (Cth)*,⁵¹ organisations that meet the criteria necessary to be identified as a Basic Religious Charity are exempt from particular reporting obligations, including the requirement to answer financial questions, submit annual financial reports or to comply with ACNC governance standards. In the 2013 ACNC Report, 26% of all charities in the ACNC dataset self-identified as meeting this criteria, pointing to a lack of reporting and accountability requirements regulating such organisations.

In 2013, 4% of registered charities that reported advancement of religion as one of their charitable purposes also supported the provision of childcare. The Annual Information Statements (AIS) do not require the denominations of faith-based charities to be identified, but an analysis undertaken by Curtin University of the names of the charities provides an indication of the diversity of

⁴⁵ Better Volunteering, Better Care Project (BVBC) (2014a). *Collected Viewpoints on International Volunteering in Residential Care Centres: An Overview*.

⁴⁶ ACCI, Kinected Program – Processes and Trends, available at: <http://www.bettercarenetwork.org/sites/default/files/attachments/ACC%20International%20E2%80%93%20Kinected%20Program-%20Processes%20and%20Trends.pdf>

⁴⁷ Knight and Gilchrist, Australia's Faith-based Charities: A study supplementing the Australian Charities 2013 Report, Curtin University Not-for-Profit Initiative (2015 ed.).

⁴⁸ Knight P. A. and D. J. Gilchrist (2015), Australia's Faith-Based Charities. A summary of data from the Australian Charities 2013 Report. Available at:

<https://business.curtin.edu.au/courses/accounting/research/not-for-profit/reports.cfm>

⁴⁹ Ibid.

⁵⁰ Knight P. A. and D. J. Gilchrist (2015), Australia's Faith-Based Charities. A summary of data from the Australian Charities 2013 Report. Available at:

<https://business.curtin.edu.au/courses/accounting/research/not-for-profit/reports.cfm>

⁵¹ *Australian Charities and Not-for-profits Commission Act 2012 (Cth)*, available at:

<https://www.legislation.gov.au/Details/F2013C00451>

denominations. The majority of charities in the ACNC data set are most likely affiliated with a Christian denomination, but a range of other faiths are also represented including Buddhism, Islam, Hinduism and Judaism.⁵²

In 2013, more than 90% of faith-based charities reported to have volunteers and have a significantly higher ratio of volunteers to employees than other charities.⁵³ The total number of volunteers for the 10,777 charities reporting that they have a religious purpose and providing data on volunteers was 467,000, which represents nearly a quarter of the estimated two million volunteers for all reporting charities.⁵⁴ Faith-based charities nominated children and young-people⁵⁵ as some of the main beneficiaries of their work. A higher percentage of faith-based organisations nominated communities overseas as beneficiaries.⁵⁶ Of all charities that submitted a 2013 AIS, 17% indicated they were involved internationally and 14% reported to have beneficiaries outside Australia. This could include sending donations or being more actively involved. The countries in which charities reported they were involved included India, the Philippines, Indonesia, Papua New Guinea, Thailand and Cambodia.

Faith-based motivations are often unique when compared with those of other stakeholder groups involved in supporting the institutionalisation of children. In Christian scriptures, the care of orphans is referenced and can often take on a particular prominence in how community members choose to live out their faith, for example “look after orphans and widows in their distress”^{57 58} Private facilities are commonly established by faith organisations in response to a calling to protect orphans, with a care-centre method perceived to be the best option. A study conducted by the Better Volunteering, Better Care (BVBC) network, noted that members of the Christian faith community in the study pointed to the highly developed rhetoric of “orphan care” in the church as often supporting the assumption that institutions are the best solution for children.⁵⁹ The ACNC is currently providing more guidance for completion of the Annual Information Statements and is updating the web interface to encourage more accurate representation of activities undertaken by the faith-based sector.⁶⁰

The mapping results found that 2.5% of reporting faith-based organisations are contributing to residential children’s institutions. Findings indicate there are currently 12,253 organisations that

⁵² Knight P. A. and D. J. Gilchrist (2015), Australia’s Faith-Based Charities. A summary of data from the Australian Charities 2013 Report. Available at: <https://business.curtin.edu.au/courses/accounting/research/not-for-profit/reports.cfm>

⁵³ Ibid.

⁵⁴ Ibid.

⁵⁵ Just over half of all reporting charities with a religious purpose nominated children as the beneficiaries of their services.

⁵⁶ Knight P. A. and D. J. Gilchrist (2015), Australia’s Faith-Based Charities. A summary of data from the Australian Charities 2013 Report. Available at: <https://business.curtin.edu.au/courses/accounting/research/not-for-profit/reports.cfm>

⁵⁷ The Bible, James 1:27

⁵⁸ Better Volunteering, Better Care Project (BVBC) (2014a). *Collected Viewpoints on International Volunteering in Residential Care Centres: An Overview*.

⁵⁹ Ibid.

⁶⁰ Knight and Gilchrist, Australia’s Faith-based Charities: A study supplementing the Australian Charities 2013 Report, Curtin University Not-for-Profit Initiative (2015 ed.).

recorded the subtype “religious” in the data set.⁶¹ From these, there were 305 Christian faith-based churches/organisations directly funding or sending mission trips to residential care institutions, and 5 Islamic faith-based organisations directly funding residential children’s institutions or funding orphan sponsorship programs. There were 2 other faith-based organisations directly funding residential care institutions. In total, 25% of faith-based organisations that were involved in supporting residential care also sent mission trips or volunteers.

The mapping clearly demonstrates the challenges in obtaining an accurate representation of the faith-based sector’s involvement based on the data sets available. Whilst 305 Christian churches/organisations were identified as involved in funding residential care institutions or sending volunteers, this is likely to represent only a very small proportion of Christian churches involved for several key reasons. Firstly, the Basic Religious Charity reporting exemption means many individual churches or parishes structured as unincorporated associations are excluded from the data set. Such churches’ involvement in residential care overseas is therefore unable to be captured using the methodology employed in this research. Secondly the ACNC Annual Information Statement (AIS) reporting mechanism does not require a level of detail that is likely to capture an Australian church’s involvement in residential care institutions overseas, particularly where that is a minor component or where funds are channelled through another charity. This is further exacerbated by self reporting which places significant onus on the ‘responsible persons’ to interpret the reporting requirements and provide accurate information. As a result, it is impossible to ascertain how many of the faith-based charities listing ‘overseas communities’ as a beneficiary group are involved in funding or sending volunteers to overseas residential care institutions based on the ACNC data set alone. Whilst 12,253 faith based organisations were assessed as part of this mapping, only 305 organisations were identified as being involved. Due to the above, this is likely to be a gross underestimate of the involvement of actors within the faith-based sector.

Education Sector

While anecdotal evidence suggests that within the Australian education system there is a rise in the phenomena of orphanage projects being embraced by schools, there have been no studies conducted specifically to determine the scope of this in Australia. Better Volunteering, Better Care’s (BVBC) 2014 study found representatives in schools and universities often have very little knowledge of development contexts and have had little training on the potential challenges of facilitating volunteering experiences.⁶² In this study, educationalists suggested that there are varying levels of university involvement in student volunteering, but that secondary schools were often active in facilitating service-learning trips.⁶³

There are currently no federal, state or territory guidelines in place in Australia to regulate the education sectors engagement with institutionalised care of children overseas. The mapping

⁶¹ Ibid.

⁶² Better Volunteering, Better Care Project (BVBC) (2014a). *Collected Viewpoints on International Volunteering in Residential Care Centres: An Overview*.

⁶³ Ibid.

evidence suggests many schools facilitate overseas volunteering and service trips through travel agencies rather than organising their own trips.

The mapping results found that 57.5% of Australian universities advertised orphanage placements through international volunteering opportunities. This represents 57.5% of universities involved in supporting orphanage

Further, in relation to high schools the following was found:

- Queensland – 9.89% of public high schools and 9.28% of private high schools fundraised or took school trips to orphanages
- Victoria – 15.61% of public high schools and 13.08% of private high schools fundraised or took school trips to orphanages
- New South Wales – 8.41% of public high schools and 9.98% of private high schools fundraised or took school trips to orphanages
- Western Australia – 4.35% of public high schools and 14.65% of private high schools fundraised or took school trips to orphanage
- Australian Capital Territory – 15.79% of public high schools and 11.11% of private high schools fundraised or took school trips to orphanages
- Tasmania – 6.35% of public high schools and 13.89% of private high schools fundraised or took school trips to orphanages
- South Australia – 11.11% of public high schools fundraised or took school trips to orphanages
- Northern Territory – 11.11% of private high schools fundraised or took school trips to orphanages.

State-based Departments of Education could provide clearer guidance to schools and universities in assisting them to investigate and support the many reputable aid organisations that focus on family preservation and community-based care. If schools want to take students overseas volunteering it may be appropriate to develop relationships with schools that would benefit from a sister school relationship. Australian schools have a responsibility to their students and to children in orphanages to inform themselves and ensure that their student activities are doing good and not harm.

Tourism Industry

Tourism is a widespread, global industry.⁶⁴ Displaying dramatic growth over the past six to seven decades, the United Nations World Tourism Organisation (UNWTO) anticipates worldwide international tourist arrivals will increase on average by 3.3% a year from 2010 to 2030.⁶⁵ The UNWTO (2013) predicts the strongest tourism growth will be witnessed in Asia and the Pacific over the next 20 years (where an average 4.9% increase per year in tourist arrivals is expected). As such,

⁶⁴ World Vision International, Child Safe Traveller Report, 2013, available at: http://childsafetourism.org/downloads/Child_Safe_Traveller_ENGLISH.pdf

⁶⁵ UNWTO *Tourism Highlights* (2013) Madrid, Spain: World Tourism Organization, available at: www.unwto.org/facts/menu.html

it seems likely that tourism will continue to grow in Cambodia, Lao PDR, Thailand and Vietnam. While this growth is undoubtedly of economic benefit, it is also well documented that with the benefits of tourism comes the potential for substantial cultural, environmental and social problems.⁶⁶

The link between volunteering and the tourism industry has been well documented, and according to BVBC, is now integrated into the tourist experience.⁶⁷ However, there have been no studies conducted specifically within Australia to capture the profiles of volunteers and quantify the number of travel and tourism agencies participating in this practice. Case studies from Cambodia and Nepal, as well as anecdotal evidence from Tanzania and Kenya, demonstrate how orphanage voluntourism programs are now packaged alongside other tourist attractions within the country by both local and international actors alike.⁶⁸ Travel industry experts noted in this study that it was becoming increasingly common for various kinds of volunteer placements to be included in adventure travel itineraries and it was noted that working with the travel industry as a whole is critical in seeking to address issues relating to volunteering in residential care institutions.

Research published in the *Journal of Sustainable Tourism* conducted an online content analysis based on the International Voluntourism Guidelines for Commercial Operators to understand the use of responsibility as a market signalling tool.⁶⁹ Five influential web pages of eight organisations scored across 19 responsibility criteria and compared against the organisation's legal status, product type and price. The study found that preference is given to communicating what is easy, and not what is important. The status of the organisation is no guarantee of responsible practice, and price and responsibility communications display an inverse relationship. Concluding remarks pointed to the volunteer tourism industry requiring industry-wide codes of practice and regulations.⁷⁰

The mapping of the tourism sector was limited to internet searching using specific search terms, which limits the accuracy of the data. Both travel agencies and international volunteering agencies were included in the research. There was no available data on how many travel agencies in total are operating in Australia. A total of 22 travel agencies/organisations that were both registered and operating in Australia were found to be sending volunteers to residential care centres. A further 61 travel agencies/organisations were identified as recruiting Australian volunteers to work overseas, but these organisations are based and registered outside Australia.

⁶⁶ Mowforth, M. and Munt, I. (2009) *Tourism and sustainability: development, globalization and new tourism in the Third World* (3rd edn). London: Routledge; Telfer, D. & Sharpley, R. (2008) *Tourism and Development in the Developing World*. Milton Park & New York: Routledge.

⁶⁷ Better Volunteering, Better Care Project (BVBC) (2014a). *Collected Viewpoints on International Volunteering in Residential Care Centres: An Overview*.

⁶⁸ Ibid.

⁶⁹ *International Voluntourism Guidelines 2012*, available at: <http://www.icrtourism.org/wp-content/uploads/2012/09/TIES-Voluntourism-Guidelines.pdf>

⁷⁰ Smith, V. L and Font, X, Volunteer tourism, greenwashing and understanding responsible marketing using market signalling theory, *Journal of Sustainable Tourism*, Vol.22, Issue. 6 2014.

3.4 Conclusions

There is a clear lack of literature, data and reporting mechanisms currently in place to accurately capture quantitative data to determine the scope of Australia's support for the residential care centres for children overseas, but findings from this mapping indicate the contribution is likely to be significant. Whilst there is a growing awareness within the child protection and international development sectors of the detrimental effects of residential care and the linkages between residential care and orphanage tourism, this message has yet to achieve widespread penetration and acceptance in Australia. Results from the mapping point to a significant contribution to residential care institutions overseas across a number of sectors within Australia including the NGO, faith-based, education and tourism sectors.

Furthermore, orphanages and orphanage tourism continues to be promoted by Australian media outlets and numerous high profile Australians, which weakens the impact of warnings espoused by the international child protection community and creates confusion. As such it is necessary to develop a strategic multi-sectoral approach to raising awareness and advocating for changing practices regarding Australians' involvement in residential care and orphanage tourism.

Section 4: Recommendations

- 1) **Investment in further research and data collection studies:** More research, data collection and reporting mechanisms are required across all contributing sectors. Anecdotal evidence suggests that there are numerous volunteers who have returned and reflected on the practice and their experience, yet these insights are not captured and utilised for learning. There needs to be a concerted effort to capture data in relation to volunteers leaving and returning to Australia for volunteering purposes.
- 2) **Need for a more in depth focus on the faith-based sector:** Data indicates the faith-based sector contributes significantly to the support of residential care for children overseas, and is generally less bound by reporting requirements. A focused research project, including surveys and key informant interviews, and further analysis is required as the sector is particularly complex in the flows of money, resources and people and how they contribute to the institutionalisation of children overseas.
- 3) **Redirect volunteers to engage in non-residential programs:** The fundamental motivation of volunteers who seek to work with vulnerable children to 'do good' is admirable, but there needs to be clear ethical boundaries around volunteers' interaction with vulnerable children. Volunteering with children in residential care should be discouraged due to the numerous risks it poses for children in care. There are numerous alternative ways in which volunteers can support the work of NGOs and CBOs and contribute to programs that seek to strengthen families and communities.

- 4) **Strengthen supply-side regulatory frameworks:** A better ongoing assessment framework is greatly needed to ensure that agencies adhere to OAGDS guidelines after the initial application and approval process. Additionally, reporting mechanisms, spot checks and other assessment processes should be considered to ensure approved agencies are adhering to the OADGS guidelines and industry standards. A better monitoring and assessment framework will ensure that agencies are kept accountable and tax deductible funds are not being spent on ineligible or harmful activities such as the overuse of long term residential care for children as mentioned above. For agencies that are ACFID members, their annual CSA could potentially be used as proof of compliance as ACFID’s code of conduct is a comprehensive reflection of industry standards and solid development principles.
- 5) **Investment in improving child safeguarding practices:** to address a lack of understanding of child rights and protection across all sectors. In particular the NGO and faith-based sectors need to determine the possible negative impacts that programs or presence in a given community can have on children and their families. Doing so means staying abreast of current research, reflecting on lessons learned and developing robust needs and risk assessment processes in order to prevent adverse and unintentional effects of inappropriately designed interventions. The NGO sector has a responsibility to ensure programs meet the actual needs of children in the most appropriate way, which improves their overall well-being without causing harm. In the case residential care, this is critical as it is a high-risk program that works with some of the world’s most vulnerable children and due to the associated risks, this model needs to be used sparingly and cautiously.

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