# 2020 The State of Victoria's Children

Impact of the COVID-19 pandemic on children and young people



## The State of Victoria's Children report series

The State of Victoria's Children annual report series is produced by the Performance and Evaluation Division within the Department of Education on behalf of the Children's Services Coordination Board. The Board comprises the Chief Commissioner of Police and the secretaries of the departments of Premier and Cabinet, Treasury and Finance, Education, Health, Families, Fairness and Housing, and Justice and Community Safety.

**Note:** During and following the time period covered by this report, the Victorian Government issued administrative orders restructuring some of its activities via machinery of government changes. As part of the machinery of government restructure, on 1 February 2021, the Department of Health and Human Services became two new departments, the Department of Health and the Department of Families, Fairness and Housing. On 1 January 2023, the Department of Education and Training was renamed the Department of Education. Also on this date, the Department of Jobs, Precincts and Regions was renamed the Department of Jobs, Skills, Industry and Regions and the Department of Transport was renamed the Department of Transport and Planning.

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### Language statement

We recognise the diversity of Aboriginal people living throughout Victoria. While the terms 'Koorie' or 'Koori' are commonly used to describe Aboriginal people of southeast Australia, we have used the term 'Aboriginal' to include all people of Aboriginal and Torres Strait Islander descent who are living in Victoria, except where other terms are used in quotations, or in the name of organisations and programs.

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# Ministerial foreword

The year 2020 was the year Victoria's children and young people showed just how resilient and adaptable they can be.

The emerging COVID-19 pandemic dominated every aspect of their lives including health and wellbeing, education, relationships and employment. Although we all fervently hope and expect the worst is behind us, the pandemic continued to take centre stage in 2021 and remains a significant influence on the lives of Victorian children and young people in 2022.

The 2020 State of Victoria's Children: Impact of the COVID-19 pandemic on children and young people report provides a snapshot of how the early phase of the COVID-19 pandemic affected the lives of Victorian children and young people in 2020.

The report paints a largely positive picture with most Victorian young people in good physical and mental health and living in safe, supportive environments with healthy, happy families.

At a population level the report reveals an increase in youth unemployment and a reduction in mental health and wellbeing for some. The Victorian Government is working hard to prevent or ease the burden of the pandemic on children, young people and their families.

In response to the significant increase in the unemployment rate for young people aged 15 to 24 years, the Victorian Government expanded free TAFE and created more jobs as part of the Working for Victoria Youth Employment Program. To support student wellbeing, we have accelerated investment in new mental health support for schools through the \$200 million Schools Mental Health Fund and Menu as well as additional funding for *headspace*.

We invested in additional capacity in the child and family services sector to support children and families during the COVID-19 pandemic. We provided funding for almost 6,400 tutors at schools to help students who need it to catch up on their learning. We provided over 71,400 computers and 27,800 internet access devices to help students learn from home in 2020.

We have added \$354 million over 4 years to support victims of family violence and prevent its occurrence, including \$44 million for specialist interventions for children and young people.

We know more needs to be done, and we will work hand in hand with communities and organisations to facilitate and support consistent improvement.

The 2020 State of Victoria's Children report serves as an important resource for the Victorian Government and the community as we work towards our overall objective—a bright future for all Victorian children and young people.

Modalle Hetchins

**The Hon. Natalie Hutchins MP** Minister for Education Minister for Women

**Ms Ingrid Stitt MP** Minister for Early Childhood and Pre-Prep Minister for Environment

**The Hon. Gayle Tierney MLC** Minister for Training and Skills Minister for Higher Education Minister for Agriculture

**The Hon. Mary-Anne Thomas MP** Minister for Health Minister for Health Infrastructure Minister for Medical Research



# Executive summary

The impacts of the COVID-19 pandemic have been far reaching and have affected Victorians across all demographics and age groups. In Victoria's North East and East Gippsland regions the pandemic followed a series of devastating summer bushfires. Previous reports in this series have focused on outcomes for particular cohorts, such as Aboriginal children and young people, or Victorians in the adolescent age group. This State of Victoria's Children report examines the effects of the pandemic on all Victorian children and young people, from birth to 24 years, during 2020.

The report examines the impact of the pandemic in 4 main sections:

- 1. Health and wellbeing
- 2. Family and community safety
- 3. Education and training

#### 4. Employment and the economy.

Throughout each section, examples of relevant government initiatives and programs designed to support children, young people and their families are highlighted. The key findings for each section of the report are summarised below. The executive summary is followed by a demographics and data section that provides information about children and young people in Victoria in 2020.

The report concludes with a summary of key Victorian Government initiatives designed to mitigate the impacts of the pandemic beyond 2020.



## Health and wellbeing

The Victorian health system adapted to the evolving threat of the pandemic while continuing to deliver crucial services.

In 2020, healthcare delivered via telehealth became much more relied upon. This allowed consultations to continue during lockdowns and reduced or removed the risk of infection for service providers and families. The flexibility and cost-effectiveness of telehealth suited many but was not as well-suited to certain types of clinical intervention.

There was no noticeable effect of the early phase of the pandemic on the uptake of childhood immunisations. Human papillomavirus (HPV) vaccinations, usually delivered at secondary schools, were delayed as a result of students learning from home. Immunisation rates recovered following collaboration with local government and GPs to deliver the vaccine, and rates among Aboriginal adolescents grew.

Some children and young people reported health and wellbeing-related benefits from lockdowns and restrictions, such as more sleep and time spent with their family. Parents however, reported that many children and young people were exercising less in 2020 than before the pandemic, and that their consumption of snack foods increased.

Public health measures intended to reduce transmission of COVID-19 also succeeded in reducing transmission of other respiratory viral illnesses, contributing to fewer emergency department presentations and inpatient admissions for children and young people than in 2019. There were, however, increased presentations of children and young people with mental health concerns at acute health services and emergency departments. In 2020, higher levels of psychological distress were also reported by young adults Australia-wide, a phenomenon widely attributed to both the presence of the COVID-19 virus and related restrictions on activities.

To support the mental health of all Victorians during 2020, the Victorian Government announced additional funding to support the capacity of the mental health system.



# Family and community safety

In 2020, the COVID-19 pandemic created a new operational context for police and government services tasked with keeping the Victorian community safe.

Children and young people (aged 10 to 24 years) were overrepresented among offenders recorded for breaching COVID-19-related public health orders in 2020, accounting for about one-third of all offenders.

While there was an overall increase in family violence incidents from 2019 to 2020, incidents affecting Victorians aged from birth to 24 years remained stable during this period.

In response to increased family violence incidents, the Victorian Government provided additional funding to support victim-survivors and address family violence, including funding to deliver a range of specialist interventions for children and young people impacted by family violence and sexual assault, and more funding for crisis accommodation.

Children in care were supported through a boost to staffing, resources and services available to them. Foster, kinship and permanent carers received additional payments to help them support the children in their care.



# Early childhood

Victorian families continued to show high levels of participation and satisfaction with early childhood education and care services in 2020 during early COVID-19 related restrictions.

As was the case with other medical services, many Maternal and Child Health (MCH) Key Ages and Stages consultations were conducted via telehealth in 2020, reducing the risk of COVID-19 transmission and enabling service continuity during Victoria's lockdowns.

Kindergarten enrolments in the year before school remained high and stable in 2020, although attendance was curtailed during periods when onsite access was restricted to children of essential workers. Most parents reported they were 'satisfied' or 'very satisfied' with their child's experience of kindergarten, and 90% of parents reported that their child participated in a *Learning from Home* kindergarten program, either exclusively or in combination with onsite attendance. To support the *Learning from Home* kindergarten program, the Victorian Government launched a dedicated webpage with comprehensive advice and resources, as well as tailored supports for culturally and linguistically diverse (CALD) children and their families, and other groups who may experience barriers to engaging with mainstream communication campaigns.

In addition, the government funded dedicated CALD and Aboriginal outreach workers in late 2020 to support children to re-engage in kindergarten after the extended period of public health restrictions, and to transition to school. These workers also supported families to enrol children for kindergarten in 2021.



# School years

Periods of remote and flexible learning during 2020 significantly affected school operations and students' experiences of education. Students reported both positive and negative features of the changed learning environment in 2020, and the school education system maintained its strong performance on key measures.

Student absence was lower in 2020 than in 2019, and Victorian Certificate of Education (VCE) completion rates remained very high and stable at 98.3%.

Some of the positive features of remote learning reported by students included increased flexibility with time. The negative feature reported most frequently by students was not being able to see peers in person.

To support students during remote and flexible learning, the Victorian Government provided over 71,000 laptops and nearly 28,000 internet access devices to students, as well as additional funding to schools to buy supporting technology.

In recognition of some of the challenges of remote learning in 2020, the Victorian Government launched the *Tutor Learning Initiative* in October 2020 to support students who may have fallen behind in their learning. The initiative will continue into 2022.



# Vocational and higher education

In 2020, the COVID-19 pandemic presented a number of challenges to the Victorian tertiary education and skills sectors, including the need to transition a range of student services, as well as teaching and learning, to online platforms.

It was also a period of uncertainty for students, not knowing how the pandemic might affect their education and career plans. Domestic students were less positive about their overall education experience, with an 11% decline in positive ratings. Many apprentices and trainees were furloughed or had their hours cut.

To support learners and the role of the skills sector in Victoria's economic recovery, 10,000 new **Free TAFE** places were made available as part of the Victorian Government's Skills for Economic Recovery package. The Victorian Government introduced the **Retrenched Apprentices and Trainees Program** to support suspended or cancelled apprentices and trainees and also made significant contribution to people facing major barriers to accessing education, skills, and employment through the RECONNECT program.

International student numbers, reflected in course commencements, fell by 22.7% from 2019 to 2020. An **International Student Emergency Relief Fund** was provided by the Victorian Government to support international students who remained in Victoria and found themselves struggling financially. To support Victorian universities, the Victorian Government announced the **Victorian Higher Education State Investment Fund**.



## **Employment and the economy**

The worldwide economic impact of the COVID-19 pandemic in 2020 was broad, with effects observed across supply chains, business and consumer confidence, and employment. Workers in short-term, casual or part-time employment, and those in industries heavily affected by public health restrictions, were at greater risk of experiencing these adverse economic effects.

Many of these workers were younger people. The unemployment rate for young people aged 15 to 24 years increased from 10.6% in June 2019 to 15.1% in December 2020. This compares to an increase from 3.6% to 5.2% for people aged 25 to 54 years.

The Victorian Government's **Building Works** package responded to this challenge with the inclusion of targeted funding to connect young Victorians with new and local job opportunities in community projects and the tourism sector.

The Working for Victoria Youth Employment Program was also developed to provide work opportunities within the Victorian Public Service, while the Marram Nganyin Aboriginal Youth Mentoring Program offered Aboriginal young people a personalised employment mentoring program.

# Conclusion

The COVID-19 pandemic has had wide-ranging effects on Victoria's children and young people. The 2020 State of Victoria's Children: Impact of the COVID-19 pandemic on children and young people report examines effects on health, safety, education and employment in the first year of the pandemic. Extended public health measures, especially lockdowns, border closures and the move to remote learning, created challenges but also opportunities. Changes to how children and young people accessed health care, education and other services were preferred or even beneficial for some.

The longer-term impacts of the pandemic are not yet known, but they are likely to be complex and will continue to emerge. It is important that governments, other organisations and individuals continue to build on our current understanding and take action accordingly.

Given that childhood and adolescence are critical developmental phases, the impact of the pandemic and the effectiveness of government initiatives will continue to be monitored and reported on by the Victorian Government.

Successive State of Victoria's Children reports will ensure we continue to learn and be proactive in helping Victorian children and young people move beyond the challenges of the pandemic to lead happy, healthy and fulfilling lives.

# Data and demographics

This report draws on data collected by the Victorian Department of Education (DE), Department of Health (DoH), Department of Families, Fairness and Housing (DFFH), Department of Justice and Community Safety (DJCS), Department of Premier and Cabinet (DPC), Department of Jobs, Skills, Industry and Regions (DJSIR), and Victoria Police. Additional data has been sourced from the Australian Bureau of Statistics (ABS), Australian Institute of Health and Welfare (AIHW), and the Australian Government Department of Education, Skills and Employment (DESE).

This report also draws on research by the Burnet Institute, the Murdoch Children's Research Institute (MCRI), Mission Australia and UNICEF Australia, and on other published research by a range of experts, that furthers our understanding of



Lily, 14 years

the complex health, social and economic effects of the COVID-19 pandemic.

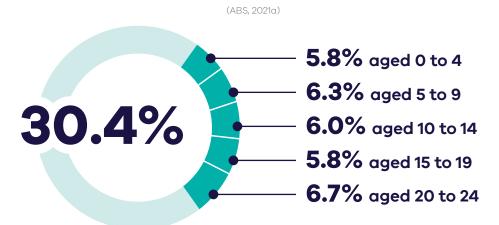
#### Limitations

During 2020, the Victorian Government focused on managing the impacts of the pandemic and providing greater supports for frontline services and staff. This, coupled with the inherent challenges of running surveys and other data collections when there were limitations on movement and other public health protection measures in place, meant that many collections were postponed or modified. This makes comparing 2019 and 2020 data across many policy and program areas difficult.

Disaggregated data was limited for certain cohorts of children and young people. These cohorts included Lesbian, Gay, Bisexual, Transgender, Intersex, Queer (LGBTIQ+) young people, young people with disability, multicultural and multifaith young people, and international students. Where data was available and there was a clear difference in the experience of various cohorts, it has been included.

# Children and young people in Victoria in 2020

**Children and young people aged 0 to 24 years comprised 30.4%** (2,022,800) **of the Victorian population** (6,657,917)





21.8% of 0 to 24-year-olds lived in Regional Victoria, compared to 23.1% of the Victorian population (ABS, 2019)

**52.2%** 

52.2% of the Victorian Aboriginal population are under 25 years old (ABS, 2019)

There were approximately 32,000 young Victorian mothers (24 years or younger) with children aged 4 or younger in 2020 (AIHW 2021a)









**28.3%** of 17 to 24-year-old Victorians not in school were **employed full-time in the workforce** in 2020 (ABS, 2020)

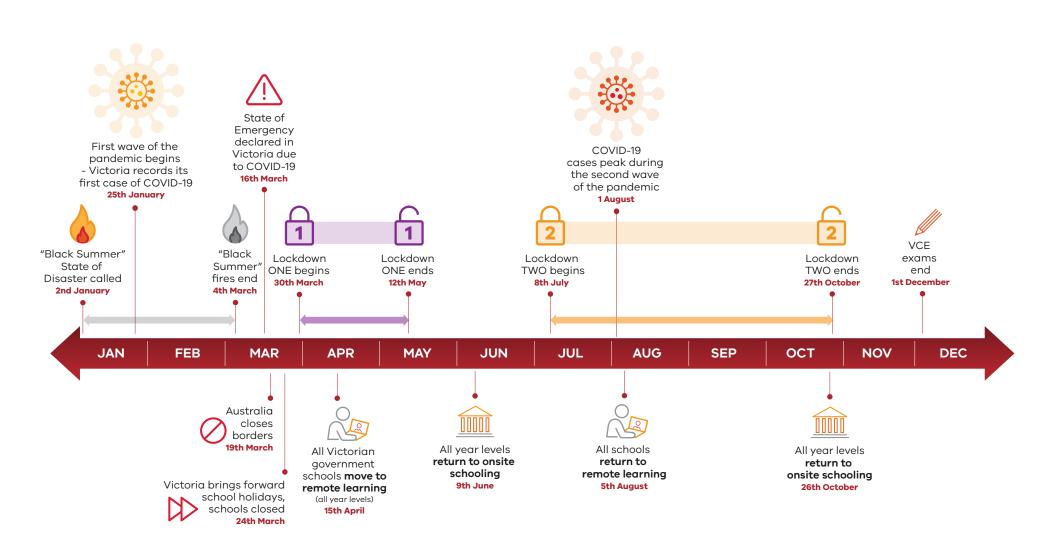






# 43.6%

of Victorian children and young people aged 0 to 24 years **had one or both parents born overseas** 

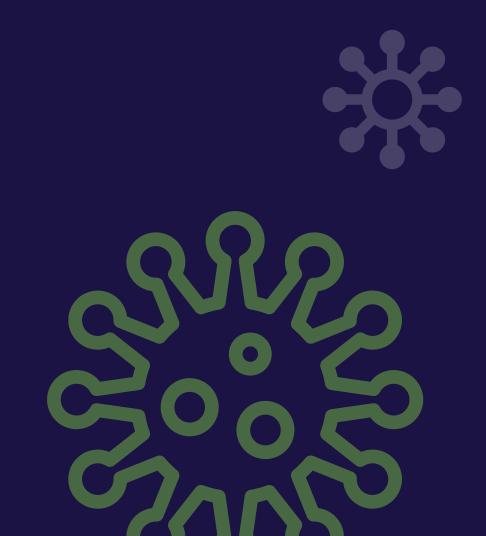


Source: DET internal analysis, 2020

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# Health and wellbeing



# Health and wellbeing



Nikolas, 11 years

Public health protection measures affected the lives of Victorian children and young people considerably in 2020, particularly the move to remote learning and measures restricting movement, such as lockdowns and curfews.

Research has shown that adverse life events, and the uncertainty and change that accompanies them, can significantly impact children and young people's wellbeing (Shepard, Kulig, & Botey, 2017). Indeed, some children and young people suffered as a result of restrictions, as discussed in the following sections. There were also positive outcomes for others.

Prior to COVID-19, children's mobility, independent travel and outdoor play in Australian cities was limited and declining (Love, Villanueva, & Whitzman, 2019). In 2020, COVID-19 lockdowns and restrictions reduced traffic and encouraged some people to use more active transport, such as walking and cycling. In some cases, children spent more time playing outdoors in their local neighbourhood, and engaged with their local communities in new ways, such as by decorating footpaths with chalk drawings.

These changes demonstrate the potential for our cities to be healthier and happier places where children spend more time outdoors, and people are generally more active and involved with their communities. Permanent reductions in car dependence would also reduce air pollution, which is critical for lung health and potentially protective against respiratory illnesses such as COVID-19 (Gonzalez, Barranco-Ruiz, & Palma, 2021).

# 1.1 Physical health and medical care

#### **Key Findings**

- Rates of COVID-19 diagnosis were low for the general population during 2020, and lower again for children and young people.
- In 2020, most prep-aged children were reported to be in excellent or very good health (85.5%) by their parents.
- The pandemic negatively affected the health-related behaviours of some children and young people, with Victorian parents reporting reductions in physical activity and increased snack food consumption for some age groups.
- The uptake of routine vaccinations among children and adolescents remained strong.
- There were fewer emergency department presentations and inpatient admissions for children and young people compared with 2019, with the exception of mental health-related conditions.
- In 2020, a large proportion of patient care was delivered via telehealth which was found to work well for some families and services.

Very few children and young people experienced serious adverse physical health effects as a direct consequence of contracting COVID-19 in 2020. In Victoria, between February and September 2020, there were a total of 399 presentations to hospital related to COVID-19 among children aged 0 to 17 years (Ibrahim, et al., 2021). There was one death in an adolescent who also had another serious infection in addition to COVID-19 (MCRI, 2021a).

Physical health effects for children and young people related mainly to public health measures. Restrictions on movement during lockdowns, as well as remote learning, significantly disrupted the routines of children and young people, including exercise and dietary behaviours.

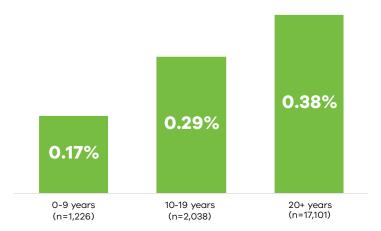
## COVID-19 diagnosis and hospitalisation

Rates of COVID-19 diagnosis were low among the general population throughout 2020, and lower again for children and young people. Data collated by the Victorian Government shows:

- 1,226 children aged 0 to 9 years were diagnosed with COVID-19
- 2,039 children and young people aged 10 to 19 years were diagnosed with COVID-19
- 142 children and young people aged 0 to 19 years were hospitalised due to a COVID-19 diagnosis (acute care type and with a COVID diagnosis) (DoH, 2021a).

Figure 1 shows that children aged 0 to 9 years were least likely to be diagnosed with COVID-19 in 2020 (0.17% of all children 0 to 9 years), followed by children and young people aged 10 to 19 years (0.29% of all 10 to 19-year-olds).

#### FIGURE 1: PROPORTION OF POPULATION BY AGE GROUP WITH A COVID-19 DIAGNOSIS IN 2020



n=number of people with a COVID-19 diagnosis in 2020 Source: Victorian Government, 2021; ABS, 2019

While the scope of this report is 2020, allowing for a detailed retrospective examination of the data, it's worth noting that COVID-19 case numbers and rates of diagnoses among children and young people increased substantially in 2021.

#### SUPPORTING ABORIGINAL YOUNG PEOPLE THROUGH THE COVID-19 PANDEMIC

Aboriginal young people and the organisations that work with them reported an increase in mental illness, including suicidal ideation, as a direct result of young people's disconnection from their family, Aboriginal community, support networks and peers during COVID-19 lockdowns.

Aboriginal Youth Engagement Grants provided funding of \$250,000 over 2020–21 to 6 Aboriginal-led organisations to support Aboriginal young people through the COVID-19 pandemic. These organisations designed and delivered programs to strengthen the social and emotional wellbeing of Aboriginal young people, foster their talents and leadership, strengthen their identity, culture and faith, and connect them with education, training and employment opportunities.

#### FUNDING FOR ABORIGINAL COMMUNITY-LED RESPONSES TO COVID-19

In 2020–21, the Victorian Government allocated \$10 million for the Coronavirus Aboriginal Community Response and Recovery Fund to support Aboriginal organisations and communities to deliver place-based responses to the impacts of COVID-19.

Funding was allocated to 81 community-led initiatives across the state in the following categories:

- emergency relief—to provide flexible, practical support for individuals and families in crisis
- outreach and brokerage—to support young people at risk
- cultural strengthening—to ensure connection to culture, community and Country
- improving social and emotional wellbeing to promote and protect mental wellbeing.

Initiatives included providing mental health telehealth consultations to children and young people, delivering reading and literacy bags to support remote learning, supporting children to re-engage with community sport, and delivering youth mentorship programs.

#### COVIDSAFE PROMOTION WITH CULTURALLY AND LINGUISTICALLY DIVERSE YOUTH

The **Culturally and Linguistically Diverse (CALD) Youth Content Campaign** was launched in December 2020, with the Victorian Government offering a total of \$245,000 for young people and the organisations that work with them to create content to encourage COVIDSafe behaviours in new and creative ways.

An independent panel of young people was formed in partnership with the Centre for Multicultural Youth to assess applications, with 24 projects funded out of 105 applications.

Content ranged from colouring-in books to rap videos and short films. The campaign provided paid experiences for young creators and demonstrated new ways of engaging with young people in health messaging.

At the same time, **CALD Youth Influencers** were also engaged to create original Instagram videos to encourage and normalise COVIDSafe behaviours. This campaign built digital engagement through new networks of third-party content creators, government agencies and hard-to-reach communities.

Qualitative and quantitative evaluation by RMIT University found that the campaign met its objectives, particularly in its support for the wellbeing of vulnerable and marginalised CALD community groups, and by enabling CALD voices to contribute to COVID-19 health information. Instagram followers surveyed by RMIT researchers felt the campaign was an excellent reminder to practice and sustain COVIDSafe behaviours.

Drawing on insights from the CALD Youth Influencers and CALD Youth Content campaigns, and with input from the Victorian Youth Congress, short videos were developed to encourage young people to get their COVID-19 vaccine.





### **General physical health**

In 2020, most parents of children in their first year of school reported that their child was in 'excellent' or 'very good' health (85.5%) (DET, 2020a). For parents of children living in areas of most disadvantage, the result was slightly lower (84.4%) but higher than in 2018 and 2019.

# **TABLE 1:** PROPORTION OF PREP STUDENT PARENTS REPORTING A CHILD IN VERY GOOD OREXCELLENT HEALTH, 2018 TO 2020

	Excellent / Very Good				Change
Population group	2018	2019	2020		2018 to 2020
	%	%	%	Number	%
All children*	83.2	83.6	85.5	46,053	+2.3
Male	88.5	89.0	89.9	23,270	+1.4
Female	90.4	91.3	91.7	22,631	+1.3
Aboriginal and/or Torres Strait Islander	82.5	87.4	86.9	925	+4.4
Language background other than English (LOTE)	83.4	85.2	87.2	10,535	+3.8
One-parent family	86.9	87.9	88.8	5,367	+1.9
Living in areas of most disadvantage (IRSED 1)	81.7	82.9	84.4	9,597	+2.7
Living in areas of least disadvantage (IRSED 5)	82.7	82.7	85.6	8,520	+2.9
Rural/Regional areas	84.9	85.4	85.3	12,988	+0.4
Metropolitan areas	82.4	83.0	85.6	33,030	+3.2

\* Categories will not sum to 'all children' due to missing or invalid data. The 'All children' population group includes parent response type 'not-stated,' which reduces the overall proportion of children with reported very good or excellent health.

Source: DET, 2020a

#### Health-related behaviours

There is evidence of changes to the health-related behaviours of Victorian children and young people as a result of the COVID-19 pandemic. In 2020, Victorian parents' reports of their children's physical activity indicated that many were exercising less than before the pandemic, particularly those aged 5 to 11 years (52% exercising less than before), and those aged 12 to 17 (47% exercising less) (VicHealth, 2020a). Most of those aged 1 to 4 were reported to be exercising a similar amount as they were before the pandemic (54%).

Most parents reported that their children were consuming the same number of serves of snack foods during the pandemic as previously (VicHealth, 2020a). However, in each age group there was a proportion of children for whom consumption had increased, including 15% of those aged 1 to 4 years, 32% of those aged 5 to 11, and 18% of those aged 12 to 17.

At the time of the second wave of the pandemic in September, 28% of 12 to 17 year olds consumed sugar sweetened beverages daily. For 1 to 4 year olds, it was 13% and for 5 to 11 year olds, 18% (VicHealth, 2020b). This is compared to 5.1% of children aged 2 to 17 years in Victoria reportedly consuming sugar sweetened beverages daily in 2017-18 (ABS, 2018).

There was a 12% reduction in Victorian children aged 0 to 14 years participating in organised sport at least once a week, and a 4% reduction in children participating in organised sport 3 or more times per week compared to 2019 (Australian Sports Commission, 2021).

Young adults aged 18 to 24 reported increased fast food consumption, increased ordering of takeaway online and increased sugary drink consumption compared to other Victorian adults aged up to 65 (VicHealth, 2021c).

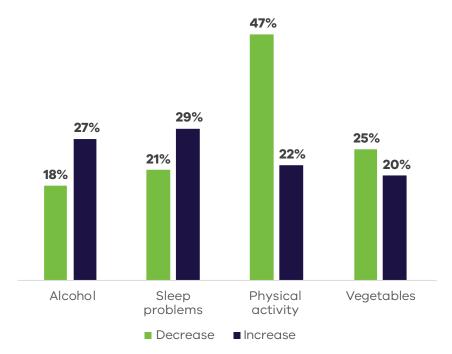
Public health restrictions limited or meant the cancellation of organised sport for many children and young people in 2020, often leading to more time spent watching screens and using electronic devices, for both education and leisure (Burnet Institute and VicHealth, 2020).

Before 2020, many children and young people in Victoria and Australia were not getting the recommended amount of physical activity or meeting the recommended dietary guidelines (DET, 2019; Department of Health, 2019; NHMRC, 2013). The long-term effects of reduced physical activity for children and young people during 2020 are still unknown. However, it is likely that for some children and young people, the COVID-19 pandemic and related restrictions exacerbated these issues.

*Coping with COVID-19*, a national study conducted by the Burnet Institute and funded by VicHealth, assessed the impact of the pandemic on the health and wellbeing of those aged 15 to 29 by capturing changes in health behaviours during 2020 (Burnet Institute and VicHealth, 2020).

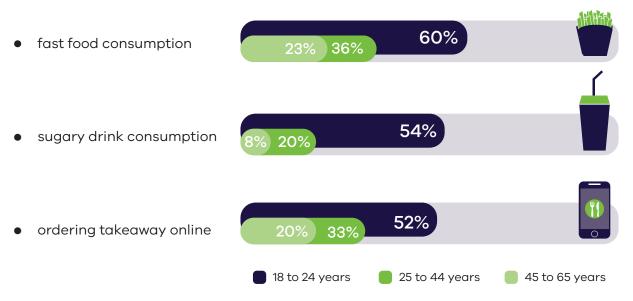
Respondents reported decreased physical activity and vegetable consumption earlier in the pandemic, and increased alcohol and soft drink intake. A follow-up survey showed that some in the group had improved on these measures, while others were experiencing even more problems, including sleep problems (Figure 2).

# FIGURE 2: PROPORTION OF 15 TO 29-YEAR-OLDS WHO INCREASED OR DECREASED THE FREQUENCY OF HEALTH BEHAVIOURS SINCE THE START OF THE PANDEMIC, AUSTRALIA, 2020



Source: Burnet Institute and VicHealth, 2020

A *Livelighter* survey (Livelighter, 2021) in 2020 found that, compared to the rest of Victorian adults up to 65 years, those aged 18 to 24 years were more likely to report increased:



Given that health and wellbeing habits worsened in 2020, the impacts on weight, including obesity, and other key health indicators for children and young people need to be monitored closely. This will be accomplished under the Victorian Government's Healthy Kids, Healthy Futures plan, designed to lay the foundations for good health and wellbeing for all Victorian children and young people, and to support recovery from the challenges of the COVID-19 pandemic.

## Immunisation

There was no substantial effect on uptake of the diphtheria-tetanus-pertussis-containing vaccine (due at 2 months of age), pneumococcal vaccine (due at 4 months) and measlesmumps-rubella vaccine (due at 12 months), including by Aboriginal children (Hull, et al., 2021).

In March and April 2020, when students were learning from home, human papillomavirus (HPV) vaccinations in adolescents, usually delivered through the Secondary School Immunisation Program, were lower compared to the same period in 2019. However, the uptake of these vaccinations was substantially higher in all subsequent months, including during August to October when students were also learning from home. This is due to the Department of Health engaging local councils to help deliver the program. GPs were also enlisted to help deliver catch-up vaccinations. Mainstream and social media messaging and additional resources for providers and parents were also developed to ensure continued strong take-up of childhood vaccinations, regardless of the continued presence of COVID-19.

Reductions in HPV dose 1 vaccinations in adolescents in the first half of 2020 had a flow-on effect to dose 2 vaccinations later in the year, given the minimum 6-month interval between doses. As a result, the total number of HPV vaccinations was 0.2% lower for dose 1 (but 38.6% higher for Aboriginal adolescents) and 17.6% lower for dose 2 (10.3% higher for Aboriginal adolescents) in 2020 than 2019 (Hull, et al., 2021).

The continued strong uptake of childhood and adolescent vaccinations in Victoria is likely due to:

- consistent messaging by health authorities that immunisation is an essential health service
- efforts by vaccination providers to deliver COVID-19 safe services
- continued engagement of parents and carers
- lower COVID-19 rates than many other countries (Hull, et al., 2021).

In Victoria, young people aged 16 and over became eligible to access COVID-19 vaccines in August 2021, and those aged 12 to 15 in September 2021. A COVID-19 vaccine for children (5 to 11) was not approved in Australia until the end of 2021, with inoculations starting in January 2022.

## Emergency department presentations and hospital admissions

In 2020, there was an overall decrease in paediatric emergency department and in-patient admissions compared to 2019. This was partly due to the public health measures intended to reduce transmission of COVID-19, which also succeeded in reducing transmission of other respiratory viral illnesses. Paediatric presentations related to mental health issues increased in 2020 compared to 2019, although these remained a small proportion of all presentations. Research also found that from June to October an increasing proportion of Australians reported not seeking healthcare when needed, even at times when many of the states and territories were recording no new cases of COVID-19 (Broadway, Payne, & Salamanca, 2020).

## Impact of increased use of telehealth for children and families

A strong uptake in telehealth by healthcare providers in 2020 enabled continued paediatric care across paediatric outpatient specialist clinics, community health services, primary care, ACCOs and Child and Adolescent Mental Health services.

The Department of Health (2021b) assessed the benefits of telehealth for children with developmental delay and autism spectrum disorders (ASD). It found:

- telehealth was used across all appointment types, and for screening and triage, assessment, diagnosis and ongoing therapy
- attendance at appointments increased significantly
- telehealth was cost-effective and easier for families to access, especially if they already had well-established relationships with service providers
- there were benefits in screening and triage to manage acuity
- some clinical interventions were not appropriate for telehealth when hands-on therapy was required.

# 1.2 Mental health

#### **Key Findings**

- Parents and/or caregivers of Victorian children aged 0 to 5 years who experienced a second lockdown had significantly more concerns about their children's mental health compared to those in other jurisdictions that did not experience a second wave of the pandemic and associated public health measures.
- Most school-aged children had a mix of positive and negative experiences stemming from public health measures and remote learning.
- Rates of psychological distress among young Victorians increased significantly between 2017 and 2020, attributable at least in part to the pandemic. Reports of mental health concerns were higher for young women than for young men.
- There were more paediatric emergency department presentations for mental health concerns in 2020 than in 2019, with significant peaks in demand during extended lockdowns and remote learning periods.

Factors contributing to good mental health in children and young people are welldocumented. Protective factors can include a supportive family environment, physical exercise and creative outlets, social connectedness, and routine (Wille, Bettge, Ravens-Sieberer, & BELLA study group, 2008).

COVID-19, and related public health measures, undermined these protective factors for some. The ability of some children and young people to cope worsened, and levels of anxiety and psychological distress increased, contributing to increased demand for mental health services.

# More than 75% of mental health problems occur before the age of 25

Source: Beyond Blue (Kessler, et al., 2005)

#### **KEEPING VICTORIANS CONNECTED AND SUPPORTED**

In April 2020, \$59.4 million in funding was announced by the Victorian Government for a Mental Health and Wellbeing Coronavirus Response Package, to increase surge capacity for key services and assist people living with a mental illness—including those experiencing mental health problems for the first time due to the pandemic—as well as their carers and families.

The funding package incorporated an expansion of services available to assist children, young people, and their families, including online and phone counselling services through Kids Helpline, fast tracking of Orygen Youth Health's new eOrygen platform for online therapy and peer support for young people, and digital resources to help parents manage anxiety and promote emotional wellbeing. Social connection supports for young people were also funded, including a YMCA youth engagement strategy with podcasts and YouTube material created by mental health and education experts for children and young people.

The package also commenced the roll out of 170 extra youth and adult acute mental health beds—addressing a key recommendation of the Royal Commission into Victoria's Mental Health System.

In August 2020, an additional \$59.7 million in funding was announced to further strengthen the capacity of clinical and community mental health services to cope with additional presentations and reduce pressure on hospital emergency departments.

### Infants

The *COVID-19 Unmasked: Young Children* report (DeYoung, et al., 2021; Vasileva, Alisic, & Young, 2021), by a consortium of Australian universities, indicates how lockdowns and restrictions on attendance at early childhood education and care services significantly diminished the mental wellbeing of some infants and the parents and/or caregivers of infants.

Children aged 1 to 5 in metropolitan Melbourne, who experienced Victoria's second lockdown with 'Stage 4' restrictions during the study, were 2 to 5 times more likely to score in the 'high to very high range' for anger, symptoms of anxiety, depression or sleep disturbance as compared to children who did not experience this second lockdown.

Parents and/or caregivers of children aged 1 to 5 who experienced this second lockdown were also more likely than other parents to score their children as being in the 'very low to low' range in domains related to resilience and wellbeing, including positive family relationships and emotional regulation.

The report also shows an increase in mental health symptoms between the two points of data collection (May to July, and August to November 2020) for children who experienced the second lockdown in Victoria, which is consistent with data from the Department of Health's Child and Adolescent Mental Health Services (CAMHS). The wellbeing of infants (aged 0 to 5) is dependent on that of their parents and/or caregivers (Onwumere, et al., 2021). The consortium's report notes that parents and/ or caregivers who experienced the Victorian second lockdown reported a significant increase in moderate to severe symptoms of depression, anxiety and stress between August and November 2020. By contrast, those who had not experienced this second lockdown reported no change in mental health (Vasileva, Alisic, & Young, 2021).

# Primary and secondary school-aged children

The physical and mental health of school-aged children was a major focus of public health responses during 2020, with governments trying to balance controlling case numbers with the developmental needs of this cohort.

The *Attitudes to School Survey* conducted by the Department of Education from August to November 2020, found that most students had mixed experiences of remote learning: 78% of students who responded said their lives had been positively affected by COVID-19 to some degree, while 89% said their lives had been negatively affected to some degree (Figure 3).

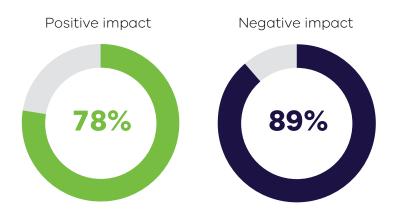


FIGURE 3: PROPORTIONS OF STUDENTS REPORTING POSITIVE AND NEGATIVE COVID-19 IMPACTS, VICTORIA, 2020

Source: DET, 2020d

In the student *Learning From Home Survey* conducted between May and June 2020, some students reported enjoying increased opportunities to work at their own pace and rest when they needed to while learning from home. They also reported a lack of distractions, and more time with their immediate family as positives. Others struggled with not seeing their peers and found it hard to maintain focus at home (Learning First, 2020).

UNICEF research found the loss of routine and social interactions reduced the wellbeing of children and young people aged 13 to 17 (UNICEF Australia, 2020).

#### SUPPORTING STUDENT MENTAL HEALTH AND ENGAGEMENT IN EDUCATION

The Victorian Government provided \$28.5 million of new funding in 2020 to boost services supporting students' mental health issues and preventing disengagement from education.

This funding:

- increased by one third the capacity of the Navigator Program, the Department of Education's (DE's) program to support disengaged young people to return to education and learning, allowing direct support for more secondary students at the highest risk of disengaging from school
- expanded DE's LOOKOUT program to increase support for the educational needs of students in out-of-home care through building the capacity of schools, carers, child protection practitioners and out-of-home care services
- expanded the Mental Health Practitioners Program to specialist schools with secondary-aged enrolments
- expanded the Mental Health in Primary Schools pilot to 26 schools in 2021.

DE assigned new Area-based Health and Wellbeing Key Contacts to each government school. These contacts provide assertive outreach, focusing on students with mental health concerns and at high risk of disengagement.

DE also partnered with Smiling Mind to produce resources to support VCE and Victorian Certificate of Applied Learning (VCAL) students to remain positive and engaged in their education during the pandemic.

DE provided teachers and schools with advice and resources to support student mental health and wellbeing through the Mental Health Toolkit webpage. This included advice on positive mental health promotion, curriculum support, how to identify and access support, as well as parent and student-specific pages.

For students from culturally and linguistically diverse backgrounds, DE:

- expanded interpreting and translation services available to government schools and parents through the DE Coronavirus Hotline
- translated parent resources into easy English and 20 other languages
- created a new English as an additional language (EAL) resource package
- provided additional funding to English Language Schools and Centres for extra telephone services to support engagement with newly arrived migrants.

#### STAYING CONNECTED DURING PANDEMIC RESTRICTIONS

The Victorian Government invested \$1.3 million in the **Let's Stay Connected Grants** Program to support people to stay connected despite pandemic restrictions. This program supported 3 grants with a focus on young people.

- **Big hART, 'Connecting Lines' Community Connection and Resilience Project**. This project aimed to increase community connection and resilience among vulnerable youth and senior community members in Frankston North. The 'bridging and bonding' initiative included online arts workshops and events to build and support meaningful online social exchange, digital skills and confidence.
- Nursery & Garden Industry Victoria's **Connecting Junior Gardeners** program. This program aimed to inspire children to discover the health and wellbeing benefits of gardening, including physical exercise, connecting with nature and being mindful. It included an educational gardening program and the creation of videos, digital fact sheets and activities to support primary-school-aged children to enjoy gardening at home.
- National Heart Foundation of Australia's **Keeping Young Hearts Connected** program. This program developed a series of podcasts and virtual meetups for young people living with heart disease. It included evidence-based content aimed at improving emotional wellbeing, with online meetups providing a safe environment for participants to share and connect.

### Young adults

In addition to the ordinary stresses of finishing high school, starting a job or moving away from home, evidence suggests the pandemic had a disproportionate impact on adolescents and young people (aged up to 24 years). This includes a greater impact on the industries and employment types dominated by younger people (ABS, 2021b).

Research by *headspace*, the national youth mental health foundation, indicated that the pandemic reduced young people's ability to carry out daily activities and cope with stress. This was the case especially for those aged 22 to 25 years, an age group often in the process of transitioning from tertiary education to the workforce (*headspace*, 2020). As in previous years, psychological distress was higher among females aged 15 to 21 years than males.

#### SUPPORTING YOUNG PEOPLE'S TRANSITIONS TO ADULT LIFE

The Victorian Government invested \$4.1 million in **Engage!** and \$2.4 million in **FReeZA** to support young people to participate in a wide range of activities and projects.

The programs supported young people to meet their individual goals and aspirations, including by leading projects, learning new skills to support transition to adult life, connecting with peers and trusted adults, and showcasing their skills and talents in their communities. The **FReeZA** program also supports young people to develop skills and career pathways into creative arts industries.

The Australian National University's (ANU) **COVID-19 Impact Monitoring Survey Program** also indicated that the mental health of young adults in particular was affected by the pandemic. It found that Australia-wide, the proportion of young people aged 18 to 24 years experiencing severe psychological distress increased from 14% in February 2017 to 22% in April 2020 (AIHW, 2021b).

A different ANU study reported a lower rate for the Australian population as a whole—8% reported severe distress in 2017 compared to 11% in April 2020, early in the pandemic (Biddle, Edwards, Gray, & Sollis, 2020a). A follow-up data collection in August found that Victoria was the most affected jurisdiction, with poorer results for psychological distress, loneliness and life satisfaction, as compared to the rest of Australia (Biddle, Edwards, Gray, & Sollis, 2020b).

To further understand the impacts of the pandemic on young people, and to seek their ideas about recovery, Metropolitan Partnerships held a 2-day online forum to engage with diverse young people from across metropolitan Melbourne. Key findings included that:

- young people want investment in preventative mental health services, the ability to make choices about their own mental health experiences, and more informal avenues of support
- there is a lack of supply of quality mental health services for young people in Victoria
- young people from CALD communities want culturally appropriate services, resources and community-led solutions
- young people are finding it difficult to get work, contributing to their mental health challenges (YLab, 2020).

#### STRENGTHENING MENTAL HEALTH SERVICES

*headspace* provides early intervention mental health services to those aged 12 to 25 years, as well as help with physical health (including sexual health), alcohol and other drug services, and work and study support.

During 2020, the Victorian Government provided *headspace* with additional funding to train school staff in mental health, reduce the waiting list for services, and support outreach to young people at risk of disengaging due to the limited face-to-face services available under the pandemic restrictions.

## Emergency department presentations for mental health

While some young people had positive experiences of remote learning and restrictions such as lockdowns, evidence indicates serious mental health effects for others.

There was a sharp increase in 2020 in children and young people presenting to acute health services and emergency departments with mental health concerns, including self-harm, attempted suicide and eating disorders (DoH, 2021d).

For 0 to 17-year-olds, weekly mental health emergency department presentations were consistently higher in the second half of 2020 (Figure 4a). Using a 4-week moving average, there were 27 more mental health-related presentations per week among this age group during 2020 than during 2019. There was a smaller increase for 18 to 24-year-olds, with 10 more presentations per week on average (Figure 4b).

# FIGURE 4a: MENTAL HEALTH EMERGENCY DEPARTMENT PRESENTATIONS, 0 TO 17 YEARS, VICTORIA, 2018 TO 2020



Measure presents the moving average number of mental health-related ED presentations per week where the patient was aged under 18 years. Reported by departure date. Excludes Type of Visit Code '19' (COVID-19 Assessment Clinic), and Triage Category '6' (Dead on Arrival).

#### Source: DoH, 2021c







Specific data are not available for Aboriginal young people aged 0 to 17 years. However, as in previous years, the rates of emergency department presentations for mental health and intentional self-harm in Victoria in 2020 were higher for Aboriginal people than for non-Aboriginal people (DoH, 2021d). These outcomes relate to the particular stressors experienced by the Aboriginal community, such as intergenerational trauma, experiences of marginalisation, and higher than average rates of socioeconomic disadvantage, which are also known to affect other aspects of health.

#### ESTABLISHING LOCAL YOUNG PERSONS' PSYCHOSOCIAL WELLBEING NETWORKS

To support the psychological wellbeing of young people, the Victorian Government provided \$2.6 million over 2020–21 for:

- 13 Child and Adolescent/Youth Mental Health Services (CAMHS/CYMHS) in 5 metropolitan and 8 rural catchments across Victoria
- health services to establish locally appropriate and effective governance and collaboration networks involving Department of Education regions, the Catholic and independent school sectors, local governments, Aboriginal Community Controlled Organisations (ACCOs) and community sport organisations.

This funding also allowed these networks to support the use of local data to inform risk assessment and responses to mental health risks, and improve pathways to care across the continuum from early intervention to specialist services.

# 1.3 Child development

#### **Key Findings**

- There was a small increase in the proportion of parents of children in Prep reporting that their child was at risk of developmental, behavioural and/or wellbeing problems in 2020, compared to previous years.
- The trend for parents to report speech and language difficulties in their Prep child was stable.

Research on the effects of disasters suggests there can be developmental implications, particularly for young children whose 'brain architecture' is still highly plastic and rapidly developing (Yoshikawa, et al., 2020). The effects of the COVID-19 pandemic, including the closures of schools and early childhood education and care services, can impact child development negatively (Russell, et al., 2020).

While some research suggests that most parents across Australia, including those in Victoria, felt their children were meeting developmental milestones during 2020 (DeYoung, et al., 2021), further research is needed to understand the impacts on development during 2020 and beyond.

## Maternal and Child Health (MCH)

As was the case with other medical services, many MCH Key Ages and Stages consultations were conducted via telehealth in 2020. These measures reduced the risk of COVID-19 infection for MCH nurses and families, and enabled service delivery to continue during Victoria's lockdowns. Fifteen minute face-to-face consultations continued to be offered where clinically necessary, and as a priority for infants aged 0 to 8 weeks, Aboriginal children, and those with complex needs.

## Children at risk of developmental and/or behavioural problems

The School Entrant Health Questionnaire (SEHQ) is an annual survey that records parents' concerns and observations about their child's health and wellbeing during their child's first year at school. Due to the Victorian 2019-2020 bushfires and COVID-19-related events, there was significant disruption to the distribution of the SEHQ throughout 2020, reducing family participation compared to previous years. A priority service was employed where required, according to assessment of school disadvantage and need, where schools were encouraged to refer vulnerable students and families.

In 2020, about 24% of parents of children in Prep who completed the SEHQ identified their child as being at high risk of developmental and/or behavioural problems. This compares to 22% in 2019 and 2018.

Some cohorts were more likely to have these risks identified than the statewide average, including Aboriginal children, children from one-parent families, boys, and children living in the areas of most disadvantage. However, across all these population groups the majority of children were not considered to be at high risk (Table 2).

# **TABLE 2:** CHILDREN AT HIGH RISK OF DEVELOPMENTAL AND/OR BEHAVIOURAL PROBLEMS,2018 TO 2020

	High risk				Change
Population group	2018	2019	2020		2018 to 2020
	%	%	%	Number	%
All children*	21.9	22.2	23.8	12,864	+1.9
Male	27.3	27.9	29.7	7,701	+2.4
Female	19.6	19.7	20.7	5,122	+1.1
Aboriginal and/or Torres Strait Islander	32.8	32.4	33.4	357	+0.6
Language background other than English (LOTE)	23.3	24.2	25.6	3,096	+2.3
One-parent family	28.8	30.0	31.1	1,885	+2.3
Living in areas of most disadvantage (IRSED 1)	23.9	24.4	25.9	2,948	+2.0
Living in areas of least disadvantage (IRSED 5)	19.9	20.0	21.6	2,155	+1.7
Rural/Regional areas	22.0	21.9	22.9	3,491	+0.9
Metropolitan areas	21.8	22.3	24.2	9,637	+2.4

\*Categories will not sum to 'all children' due to missing or invalid data. Source: DET, 2020a





# Children at risk of significant clinical problems related to behaviour and emotional wellbeing

The proportion of children in their first year of school, identified by their parents or carers as having a high risk of significant clinical problems related to behaviour and emotional wellbeing, has been increasing since 2018. In 2020, 7.4% of children were reported by their parents or carers as having a high risk of significant clinical problems related to behaviour and emotional wellbeing, compared to 6.7% in 2019 and 5.6% in 2018.

Parents or carers of Aboriginal children and children from one-parent families were most likely to report their children as being at high risk, while parents of children from language backgrounds other than English (LOTE) and areas of least disadvantage were the least likely.

Children living in areas of most disadvantage were twice as likely to be reported as being at high risk of behaviour and emotional wellbeing problems compared to children living in areas of least disadvantage (Table 3).

# **TABLE 3:** CHILDREN AT HIGH RISK OF SIGNIFICANT CLINICAL PROBLEMS RELATED TO BEHAVIOUR AND EMOTIONAL WELLBEING, 2018 TO 2020

	High risk				Change
Population group	2018	2019	2020		2018 to 2020
	%	%	%	Number	%
All children*	5.6	6.7	7.4	3,982	+1.8
Male	7.6	8.7	9.7	2,507	+2.1
Female	4.4	5.6	5.9	1,461	+1.5
Aboriginal and/or Torres Strait Islander	19.0	18.5	19.7	211	+0.7
Language background other than English (LOTE)	4.1	5.1	4.6	562	+0.5
One-parent family	12.3	14.4	15.5	941	+3.2
Living in areas of most disadvantage (IRSED 1)	7.4	8.7	9.3	1,057	+1.9
Living in areas of least disadvantage (IRSED 5)	3.3	4.3	4.7	470	+1.4
Rural/Regional areas	8.1	9.4	9.8	1,500	+1.7
Metropolitan areas	4.7	5.8	6.4	2,478	+1.7

\*Categories will not sum to 'all children' due to missing or invalid data. Source: DET, 2020a

## Difficulties with speech and language

In 2020, 16% of parents who responded to the SEHQ reported that their children had speech and language difficulties. This continued an apparent long-term trend showing a gradual increase in speech and language difficulties, which is affecting most population groups.

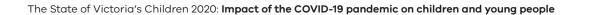
Parents and carers of boys, Aboriginal children, and children living in disadvantaged areas, as well as sole parents, were most likely to report speech and language difficulties (Table 4).

**TABLE 4:** PROPORTION OF PARENTS REPORTING A CHILD TO HAVE DIFFICULTIES WITH SPEECH ANDLANGUAGE, 2018 TO 2020

		Change			
Population group	2018	2019	2020		2018 to 2020
	%	%	%	Number	%
All children*	14.7	15.0	16.0	8,645	+1.3
Male	20.0	20.3	21.5	5,586	+1.5
Female	11.4	11.9	12.3	3,039	+0.9
Aboriginal and/or Torres Strait Islander	28.5	28.7	28.4	303	-0.1
Language background other than English (LOTE)	10.9	11.2	11.5	1,396	+0.6
One-parent family	20.9	21.4	22.7	1,379	+1.8
Living in areas of most disadvantage (IRSED 1)	17.2	17.4	18.7	2,134	+1.5
Living in areas of least disadvantage (IRSED 5)	12.2	12.1	13.0	1,295	+0.8
Rural/Regional areas	18.4	18.3	19.4	2,950	+1.0
Metropolitan areas	13.3	13.9	14.7	5,690	+1.4

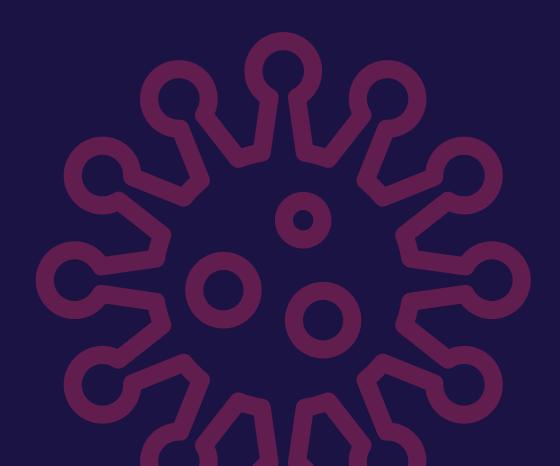
\*Categories will not sum to 'all children' due to missing or invalid data. Source: DET, 2020a







# Family and community safety



# Family and community safety



## **Key Findings**

- For children and young people (aged 0 to 24 years), the incidence of family violence did not increase significantly from 2019. However, the incidence of family violence for all Victorians increased by 9.4% from 2019 to 2020

   the largest annual increase in the past 5 years.
- Over the past 4 years, young females have been almost 3 times more likely to have been affected by family violence incidents than young males.
- Crime rates for crimes committed by young people (aged 10 to 24 years) have been generally stable between 2018 and 2020.
- Young people (aged 10 to 24 years) comprised over a third of all offenders recorded for breaching COVID-19-related public health order restrictions in 2020. Young males were overrepresented among these offenders.
- There was increased concern related to cybersafety during Victoria's periods of working and learning from home.

## 2.1 Supporting families and communities through the pandemic

From April to July 2020, the Commission for Children and Young People (CCYP) (2020) consulted with children and young people about the impact of COVID-19. The Commission's report found that children and young people's feelings about safety often related to their health and the need to keep themselves and their families safe from infection by the virus.

Some children and young people also spoke about conflict, tension or violence within the family during lockdown, and the fact their usual safety strategies were not available. For some young people living outside the family home, especially those in transitional or unstable housing, the lockdown made life more unsafe.

People working to support children and young people through the lockdown period raised children's safety from harm as a significant concern. This was largely due to there being fewer 'eyes on kids' because home visits and face-to-face contact were broadly suspended.

For many service providers, the risks of harm at home faced by vulnerable families and children, and the absence of in-person support, often felt more urgent than the risks related to contracting COVID-19 (CCYP, 2020).

#### SUPPORTING VICTORIA'S MOST AT-RISK CHILDREN AND THEIR CARERS

In April 2020, the Victorian Government announced a \$77.5 million package to support some of Victoria's most at-risk children by bolstering the staff, resources and services available to them.

This package provided more than \$11 million to deliver more supports to carers and children in their care. This included:

- extra financial support for foster, kinship and permanent carers, including a \$600 supplementary payment to foster and kinship carers
- funding to provide additional respite and in-home supports for foster and kinship carers and funding for additional kinship staff to support kinship finding
- funding to bolster phone support for foster, kinship and permanent carers.

The package also included \$15 million to support additional staffing capacity and workplace safety measures in residential care homes to proactively respond to the needs of children and young people in residential care, including capacity to pool resources in a local area (for example, use of mobile response team across homes). It also assisted residential care service providers with cleaning costs to ensure that appropriate safety and hygiene standards were maintained during the pandemic, to protect the children and young people, and the staff who continued to care for them.

Through this package the Victorian Government also allocated \$4.3 million to expand the **Home Stretch** program to support young people turning 18 before the end of 2020 (and due to leave care) to keep their current living arrangements or transition to independent living.

The \$77.5 million package also included \$46.2 million to increase the capacity of the child and family services sector to support children and families during the COVID-19 pandemic.

In a new model of care, specialist family services teams, with staff from service providers and child protection practitioners, delivered intensive and integrated support so families could immediately access the services they needed, when they needed them most.

The teams also helped families to access things like immunisation, childcare, kindergarten and school. They also supported families with practical coping strategies and used video conferencing technology to stay connected with them while 'stay at home' restrictions were in place.

#### Family preservation and reunification

\$39.6 million went towards establishing the **Family Preservation and Reunification Response** —a contemporary, evidence-informed, integrated service model for children at risk of entry to care. The model uses practice elements known to be effective in family preservation and reunification.

## **CREATE Foundation**

In 2020, the Victorian Government funded the **CREATE** Foundation to:

- consult with children and young people in Victoria with a care experience to better understand their experiences during the COVID-19 pandemic (view the final report)
- develop 2 animated videos with a focus on youth-friendly information to support young people's health and wellbeing during the COVID-19 pandemic (view the videos).

## PLACE-BASED INITIATIVES TO SUPPORT COMMUNITIES

- The Victorian Government contributed \$7.74 million to **Community Support Groups** (CSGs) to provide community-led and place-based initiatives that engage with young people directly. CSGs connect young people and their families to activities and supports that improve their health and wellbeing, and provide opportunities for recreation, education, training and employment. Three CSGs work with the South Sudanese community in Dandenong, Casey/Cardinia, Melton/Brimbank and Wyndham. A further 2 CSGs work with Somali young people and their families in West Heidelberg and in Werribee, Flemington, and Kensington. A sixth CSG supports the Afghan community in Dandenong and across south-east Melbourne.
- \$1.32 million was allocated to **Latrobe Youth Space**, a youth-led initiative delivering programs and activities to support youth employment and re-engagement with education, and to connect young people with local communities across the Latrobe Valley. Young people are actively involved in all aspects of the Latrobe Youth Space, including planning and delivery of activities.

## YOUTH INITIATIVES

• The **Marram Nganyin Aboriginal Youth Mentoring** program received \$720,000 in Victorian Government funding to support Aboriginal young people across the state to achieve their goals through personalised mentoring programs, which promote wellbeing, connection to culture, education and employment.

## 2.2 Family Violence

Public health restrictions meant people spent more time at home. This increased the potential for financial stress and social isolation, which can in turn increase the likelihood of physical and sexual violence (Morgan & Boxall, 2020).

### Family violence is defined in the Family Violence Protection Act 2008 as:

- behaviour by a person towards a family member that:
  - is physically or sexually abusive
  - is emotionally or psychologically abusive
  - is threatening or coercive
  - in any other way, controls or dominates the family member and causes that family member to feel fear for the safety or wellbeing of that family member or that of another person
- behaviour that causes a child to hear, witness or otherwise be exposed to the effects of any behaviour referred to above.

The potential for family and intimate partner violence was identified early in the pandemic, and the Victorian Government took steps to anticipate and ameliorate the impact.

Among the measures, the Department of Education (DE) kept schools and early childhood services open to vulnerable children (and to children of authorised workers) where possible during periods of remote learning, when other children were at home.

The 2020–21 Victorian Budget provided a further \$238 million for family violence prevention and response measures. This included \$37.5 million to continue the Respectful Relationships initiative for a further 4 years.

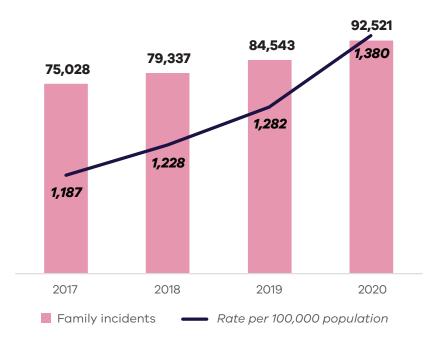
#### ENGAGING WITH THOSE AFFECTED BY FAMILY VIOLENCE

In response to the COVID-19 pandemic, Victoria Police commenced **Operation Ribbon** in April 2020, active until December 2020. It focused specifically on active engagement with victim-survivors and known perpetrators of family violence. Specialist detectives from Family Violence Investigation Units across Victoria reached out to those perceived to be at greater risk of family violence due to the effects of the pandemic.

## Family violence incidents

The family violence incident rate per 100,000 people has been increasing steadily in the past few years in Victoria. However, the increase was greater between 2019 and 2020 (9.4%) compared to 6.5% and 5.7% in the previous 2 years (Figure 5).

FIGURE 5: FAMILY VIOLENCE: INCIDENTS AND RATE PER 100,000 POPULATION, VICTORIA, 2017 TO 2020



Source: CSA, 2021a

In 2020, Victoria Police also recorded an increase in depression or other mental health issues present during family violence incidents.

#### FUNDING FOR CRISIS ACCOMMODATION AND SUPPORT SERVICES

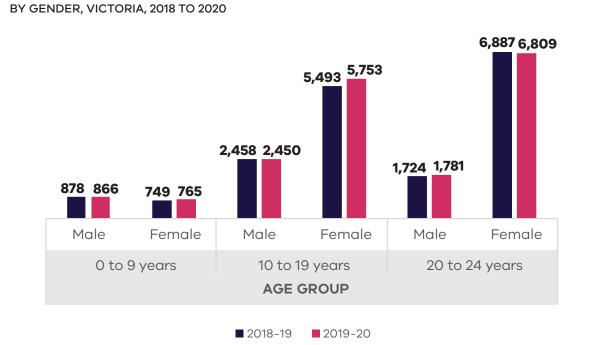
In April 2020, the Victorian Government invested \$40.2 million over 2 years for crisis accommodation and support for people experiencing family violence and sexual assault during the pandemic, including children and young people. Of this, \$20.2 million was provided to help services respond to increased demand and enable continuity of service. Capacitybuilding funding for family violence and sexual assault services was used flexibly to help maintain engagement with users, including through online services. Other activities included the development and use of online resources and take-home children's therapy bags to assist with engagement with children.

## Family violence experience by age and gender

While the reported incidence of family violence increased overall from 2019, it did not increase among children and young people (0 to 24 years).

Young women were considerably more likely to be identified as affected family members at family violence incidents compared to young men, particularly women aged 20 to 24 years, who were nearly 4 times as likely to be affected by family violence than young men of this age (Figure 6).

FIGURE 6: CHILDREN AND YOUNG PEOPLE (0 TO 24 YEARS) AFFECTED BY FAMILY VIOLENCE,



#### Source: CSA, 2021a

Family violence is not a traditional aspect of Aboriginal culture but has emerged as a serious problem for the community following colonisation, including many incidents of family violence perpetrated against Aboriginal people (predominantly women) by non-Aboriginal partners or family members. In June 2020, Aboriginal affected family members were 5 times more likely to be recorded in family incidents compared to non-Aboriginal affected family members (DPC, 2021a).

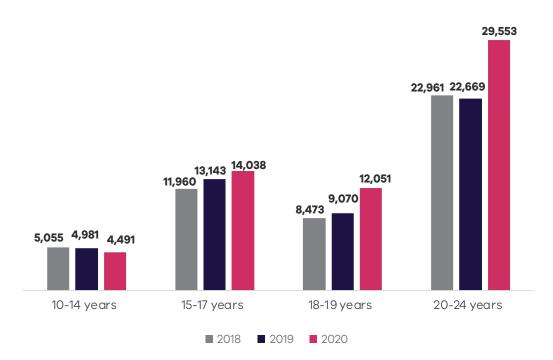
#### **KEEPING FAMILY VIOLENCE IN SIGHT DURING THE PANDEMIC**

In August 2020, the Victorian Government announced more than \$20 million to keep family violence in sight during the COVID-19 pandemic. This funding enabled perpetrators, or people who believed they were at risk of using violence, to move into short or long-term accommodation. It also provided for intervention and behaviour change programs, including to support responses to the growing demand for Sexually Abusive Behaviour Treatment Services (SABTS). This investment expanded responses for young people using family violence to 14 Department of Families, Fairness and Housing areas where there were no Adolescent Family Violence Programs (AFVP), including funding for Aboriginal service responses in 4 areas.

## 2.3 Crime

In Victoria, youth offenders are defined as those aged 10 to 17 years. Within this age range the number of alleged offender incidents for 10 to 14-year-olds decreased slightly in 2020, while increasing for those aged 15 to 17 years (Figure 7). Increases were also seen for young adults aged 18 to 19 years, and 20 to 24 years. Overall, children and young people (aged 10 to 24 years) accounted for just under one-third of all alleged offender incidents, similar to previous years. Consistent with existing trends, males outnumbered females across every age group and offence type.

FIGURE 7: ALLEGED OFFENDER INCIDENTS, 10 TO 24 YEARS, VICTORIA, YEARS ENDING DECEMBER, 2018 TO 2020

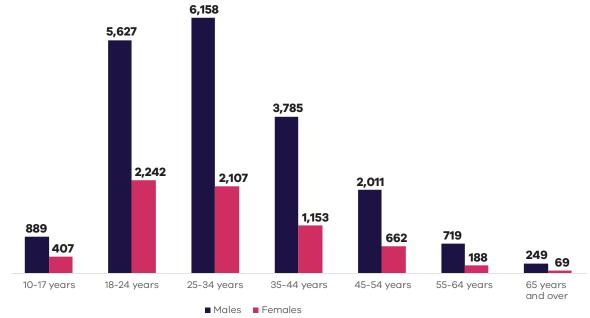


Source: CSA, 2021b

## Compliance with public health measures

Available evidence indicates that the majority of young people have been and are likely to continue to be compliant with public health measures. However, between April and December 2020, young Victorians aged 10 to 24 years comprised just over one-third of all offenders recorded for breaching COVID-19-related public health orders (Figure 8). Young male offenders outnumbered females by more than 2 to one. Most received a Penalty Infringement Notice (fine).

#### FIGURE 8: UNIQUE OFFENDERS RECORDED FOR BREACHING COVID-19-RELATED PUBLIC HEALTH ORDERS BY SEX AND AGE, VICTORIA, APRIL TO DECEMBER 2020



Source: CSA, 2021c

### SUPPORT FOR CHILDREN AND YOUNG PEOPLE IN CONTACT WITH THE JUSTICE SYSTEM

Throughout the pandemic in 2020, Youth Justice worked closely with its partners to support young people in contact with, or at risk of contact with, the justice system. Partner organisations included Community Service Organisations (CSOs) and Aboriginal Community Controlled Organisations (ACCOs), the Department of Education, Koorie Youth Council, Victoria Police and Child Protection. In May and June 2020, 28 CSOs and ACCOs each received additional brokerage funding of \$11,000 to support them to deliver services to at-risk children and young people.

## MEETING THE NEEDS OF ABORIGINAL CHILDREN AND YOUNG PEOPLE IN CONTACT WITH THE JUSTICE SYSTEM

As part of a suite of COVID-19 supports for Aboriginal children and young people in youth justice, the Department of Justice and Community Safety partnered with ACCOs and Aboriginal owned businesses to deliver the **Stay Deadly in Challenging Times** care package.

This included the provision of more than \$150,000 in funding to ensure that Aboriginal young people's connection to culture was maintained, that their social and emotional wellbeing was supported during the COVID-19 pandemic, and that they had the knowledge and the practical means to adopt safe behaviours.

As part of this work, the Koorie Youth Council assisted with development of a series of communication materials providing accessible and culturally relevant COVID-19 information for Aboriginal young people and distributed Personal Protective Equipment (PPE) items such as hand sanitisers and culturally themed face masks.

The package also included online yarning circles and mentoring sessions for Aboriginal children and young people conducted by ACCOs.

## 2.4 Cybersafety

Increased social isolation and dependence on the internet due to COVID-19 restrictions have heightened the risk of negative online behaviours (AIHW, 2021b), including cyberbullying.

In 2019, the National Youth Mental Health Foundation report (headspace, 2021) indicated that more than half (53%) of young people had experienced cyberbullying. In 2020, remote learning increased many young people's 'screen time' and use of social media—replacing many 'in-real-life' activities. In September, a *Relationships Australia* (2020) survey found that 71% of parents across Australia agreed that school-aged children were more vulnerable to cyberbullying because of public health measures such as lockdowns and remote learning.

#### **RESPONDING TO CYBERSAFETY ISSUES**

In response to concerns about an increase in incidents of cyberbullying during periods of lockdown and remote learning in Victoria, police closely monitored cyberbullying reporting channels and continued to provide cybersafety presentations remotely to schools. This included delivery of the Australian Federal Police's **ThinkUKnow** cybersafety program, as well as working with specific school staff to highlight the risks associated with remote learning. Police also worked with schools to establish responses to a predicted increase in physical confrontations once students returned to onsite learning.

#### PROMOTING CYBERSAFETY IN SCHOOLS

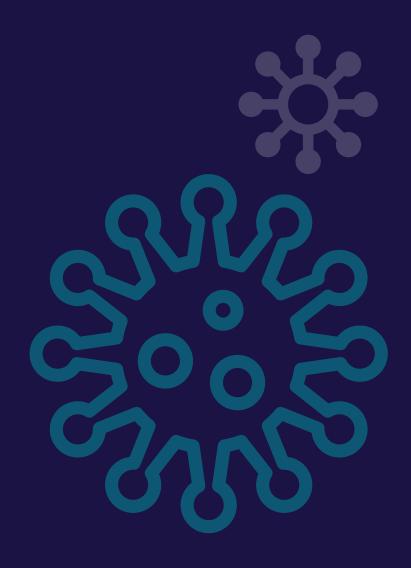
To support schools as they planned for a potential shift to online learning, the Office of the eSafety Commissioner developed a range of tips and resources to help school leaders create safe online environments. This included guidance for setting clear expectations about respectful online behaviour at a time when students may be interacting more online for learning and socialising, and engaging students, families and staff about effective and safe use of social media and online collaboration platforms.

The Office also released an online safety kit for parents and carers, which includes evidencebased suggestions and trustworthy links to support them to stay informed and keep their children safe online.

Office of the eSafety Commissioner resources were promoted via the Department of Education's **Bully Stoppers Online Toolkit.** 

The Department of Education also funds all Victorian schools to have access to the Alannah and Madeline Foundation's (AMF) **eSmart Schools** suite of resources. AMF provide a range of resources and supports to schools to help keep their communities safe online. 

## Education and training







Harry, 4 years

## 3.1 Early childhood education (0 to 5 years old)

#### **Key Findings**

- Kindergarten enrolments of 4-year-old children remained high in 2020, at 79,850 children (89%<sup>1</sup>).
- Participation in Learning from Home (LFH) kindergarten programs in 2020 was high, with 90% of surveyed parents reporting that their child participated in a LFH program, either exclusively or in combination with onsite attendance.
- Barriers to participating in a LFH program included the child's level of interest (62%), work commitments (50%) and family commitments (44%), as well as lack of access to resources such as printers (26%), computers (15%), the internet (8%) and books (8%).

<sup>1.</sup> The accuracy of Kindergarten participation estimates for 2020 are likely to have been affected by pandemic-related impacts on population estimates.

## Kindergarten participation and learning from home programs

The number of children enrolled in a funded 4-year-old kindergarten program was 79,850 in 2020, up from 79,505 in 2019 and 78,406 in 2018 (DTF, 2021a).

The number of Aboriginal children enrolled in a 4-year-old kindergarten program in 2020 increased by 5.3% from 2019, to 1,653 children enrolled (DET 2021a).

Based on parent responses to the *School Entrant Health Questionnaire (SEHQ)*, children with a language background other than English (LBOTE) and children from one-parent families continued to have high participation rates (DET, 2020a).

Despite the impact of the pandemic, participation by vulnerable children remained strong:

- 2,673 vulnerable 3-year-old children were enrolled in Early Start Kindergarten (ESK) and Access to Early Learning (AEL) programs in 2020, compared to 2,571 children in 2019 (DET, 2021a)
- 42% of 3-year-old children known to Child Protection were enrolled in ESK or AEL in 2020, compared to 38% in 2019 and less than 20% in 2016 (DET, 2021b).

#### SUPPORTING KINDERGARTEN SERVICES TO DELIVER HOME LEARNING

The Department of Education (DE) collaborated with allied health practitioners, maternal and child health services, preschool field officers and parenting services, to support and promote kindergarten provision of Learning from Home programs. A subsequent survey found that about 60% of kindergarten services had accessed one or more of the supports made available.

DE also worked closely with the Department of Health (DoH) to promote the 'Triple P' online program, a free evidence-based parenting program to help Victorian families learn new ways to respond positively to parenting challenges and support their children during and after the pandemic.

Parent satisfaction with kindergarten education in 2020 for both 3 and 4-year-olds was high. Most parents who responded to the *Learning from Home: family perspectives survey* were satisfied or very satisfied with their child's experience of remote learning in 2020 (82%) and believed that their Early Childhood Education and Care (ECEC) service had performed well under challenging circumstances (MCRI, 2021b).

Onsite attendance rates at kindergartens varied during 2020. Most children who did not attend onsite participated at least once in a LFH program. Most parents surveyed (90%) reported that their child participated in a LFH kindergarten program at some point during COVID-19 restrictions, either exclusively or in combination with onsite attendance (MCRI, 2021b).

Parents emphasised the value of small-group sessions online, 'check-ins' with individual children, the provision of feedback, and variety in educational activities, including activities that did not use screens.



For the 10% of respondents whose child/children did not participate in LFH programs, the most commonly cited barriers included the child's level of interest (62%), parent work commitments (50%) and family commitments (44%). Lack of resources such as printers (26%), computers (15%), internet access (8%) and books (8%) were less commonly cited barriers.

A separate *Learning From Home Survey* of funded kindergarten services by the Department of Education in late May 2020 also found that for most services, most children participated in either an onsite or home learning program during this period of the pandemic (DET, 2020c).

Only 4% of 877 responding services reported very high rates of non-participation during this period. In addition to the barriers cited above, services cited availability of educators to support home learning, and prioritisation of home learning for school-aged children by families, as other factors.

## SUPPORT TO COMMUNICATE WITH CULTURALLY AND LINGUISTICALLY DIVERSE (CALD) CHILDREN AND THEIR FAMILIES

Key messages to encourage and support engagement with kindergarten, as well as information about play-based learning, were translated into 12 languages (Vietnamese, Arabic, Burmese, Chin Hakha, Chinese (simplified and traditional), Dari, Farsi, Karen, Khmer, Tamil and Turkish). These resources were shared with Foundation House, the Brotherhood of St Laurence and the Victorian Multicultural Commission for dissemination through community channels.

The Department of Education also:

- promoted the free interpreting service (funded by the department) for funded kindergarten services through the Victorian Interpreting and Translating Services (VITS) Language Loop
- promoted 2 tip sheets developed by Foundation House for kindergarten services, about building partnerships with families from refugee backgrounds, and about working effectively with interpreters
- engaged Foundation House and children's services as direct contact points for early childhood services requiring additional advice around engaging (and maintaining connections) with a range of CALD families.

#### MEETING THE NEEDS OF CHILDREN LIVING IN CARE

Children living in care were supported by **LOOKOUT** Education Support Centres. These operate as multidisciplinary teams, working with education providers, local government, child protection practitioners, caseworkers and carers to identify and respond to the educational needs of children and young people living in statutory care.

Funding from the 2018–19 budget was allocated to expand the **LOOKOUT** program into the early childhood sector. This started with a 2-year pilot at the beginning of 2019 that recruited 13 **LOOKOUT** early childhood learning advisors. These advisors supported young children living in care throughout 2020, focusing on enrolment, participation and ongoing attendance in early learning programs, as well as enrolment and transition to school.

#### EARLY INTERVENTION FOR VULNERABLE YOUNG CHILDREN

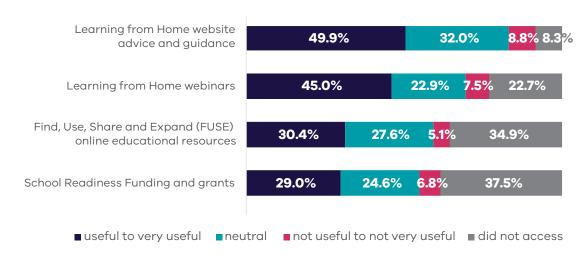
The Victorian Government invested \$6.2 million over 2020–21 for early intervention support for families and children experiencing increased or more complex vulnerability due to the public health response to the pandemic. The funding:

- provided family-focused support for vulnerable children transitioning to school
- expanded outreach services through the Access to Early Learning program, with a focus on public housing communities
- provided additional supports for engaging refugee and culturally and linguistically diverse families in kindergarten.

## Targeted support and resources for kindergarten services

The Department of Education provided a range of targeted supports to help early childhood services to prepare and deliver LFH programs. These included guidance and resources, professional learning opportunities and School Readiness Funding and grants.

The *Learning From Home Survey* indicated that overall, these supports were wellreceived by services, with only a small proportion not finding them useful (Figure 9).



## FIGURE 9: USEFULNESS OF LEARNING FROM HOME SUPPORTS PROVIDED TO EARLY CHILDHOOD SERVICES BY THE DEPARTMENT OF EDUCATION, VICTORIA, 2020

Source: DET, 2020c



#### FUNDING KINDERGARTENS TO MEET PANDEMIC RELATED NEEDS

In 2020, \$71.7 million was allocated to enable kindergarten services to respond to the impacts of COVID-19. Free sessional kindergarten in Terms 2, 3 and 4 helped ease the financial burden for families, helped to keep teachers and educators employed, and allowed community-based services to remain viable. The 2020–21 State Budget invested a further \$169.6 million to give all families access to Free Kinder in 2021 as a time-limited measure.

Funding for kindergarten services also included 'cleaning and hygiene grants' to help with the cost of maintaining high standards of cleaning and hygiene, consistent with the Australian Health Protection Principal Committee guidance.

#### **RESOURCES FOR EDUCATORS**

The Department of Education launched a dedicated Learning from Home webpage as a comprehensive hub for advice and links to resources for services and educators to support continuity of learning for children.

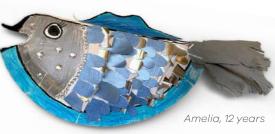
In addition, the early childhood page on the department's online Find, Use, Share and Expand (FUSE) educational resources portal was adapted to give teachers and educators access to high-quality digital resources that could support learning from home for young children. Resources targeting literacy development were engaged with most.

#### ENHANCED COMMUNICATION AND SUPPORT FOR THE EARLY CHILDHOOD SECTOR

The Department of Education set up a dedicated COVID-19 phone line to provide accurate information, support and resources for early childhood service staff and parents. The Deputy Secretary for Early Childhood Education also sent regular emails communicating the latest health and operational information directly to services.

## 3.2 Primary and secondary education (5 to 18 years old)

The COVID-19 pandemic challenged all parts of the school education system in Victoria. Victorian children and young people had to adjust to remote and flexible learning, as well as to the changing conditions of the pandemic.



Remote and flexible learning had positive and

negative outcomes for learners, parents and educators. While much normal data collection was impeded by the pandemic, the Department of Education still collected and analysed data to gauge the impact of the pandemic on the Victorian education system.<sup>2</sup>

### **Key Findings**

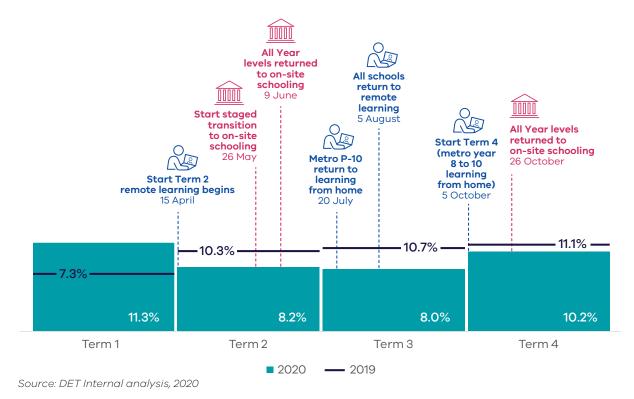
- Absences decreased for most students in Terms 2 and 3, 2020 during remote and flexible learning.
- A lack of devices and internet connectivity made it difficult for some students from low socioeconomic areas to transition to remote learning in Term 2, 2020. This was resolved for most students with provision of additional computers and devices by Term 3, 2020.
- The positive outcomes of pandemic restrictions most frequently reported by students were having greater flexibility, getting more sleep and spending more time with family.
- The negative outcome reported most frequently by students was not being able to see peers in person.
- VCE completion rates were similar to those of previous years, while VCAL completion rates were slightly lower.

## Absences

Across Victorian government schools, absence rates were highest in Term 1 and higher than in 2019. Absence rates decreased to lower than 2019 rates when schools transitioned to remote learning in Term 2, and again in Term 3 (Figure 10). Over the school year, the average number of days absent per student was lower in 2020 than 2019. However, this improvement was not consistent across all demographic groups (DET, 2020f).

2. COVID-19 restrictions significantly hindered annual data collection during 2020. For instance, NAPLAN assessment was not conducted. The Attitudes to School Survey (AtoSS) was completed by 40% of eligible students in 2020 compared to 88% the previous year.

FIGURE 10: ABSENCE RATES, VICTORIAN GOVERNMENT SCHOOLS, FEBRUARY TO DECEMBER 2020 (COMPARED TO 2019)



Despite the overall lower rates of absence in 2020, disadvantaged students were more likely to be chronically absent (missing 30 or more days), with one in 4 chronically absent in 2020, slightly up from 2019 (DET, 2020f). Disadvantage is determined by the student's family education and occupation and can include at-risk or vulnerable groups, such as students in out-of-home care and some students from English as an additional language (EAL) backgrounds, including refugee backgrounds.

Historically, school absence rates have been higher for Aboriginal children, and the trend continued in 2020. Most Aboriginal students have good attendance, but data shows that those that have attendance issues often have chronic rates of absence. Victorian Aboriginal students are a small cohort and therefore chronic absence rates for a small number of students has a large effect on the overall Aboriginal student absence rate.

For the minority of Aboriginal students with attendance issues, disengagement from education may be exacerbated by aspects of the educational setting itself, such as whether or not the learning environment and curriculum are perceived to be inclusive, encouraging, and safe.

In Term 3, 2020, the rate of school absence for Aboriginal students in Year 7 to Year 12 was 25.6% compared to 10.9% for non-Aboriginal secondary students. For Prep to Year 6, the absence rate for Aboriginal children was 14.5% and for non-Aboriginal children it was 5.4% (DET, 2020f).

## Access to devices and the internet

The transition to remote and flexible learning in Term 2, 2020 was challenged by the fact that not all students had access to devices or reliable home internet connections, particularly in low socioeconomic areas, including rural and regional areas (DET, 2020c). In response to this challenge, the Department of Education (DE) provided:

- 62,000 computers to students in Term 2, and more than 9,400 computers in Term 3
- 23,000 internet access devices in Term 2, and more than 4,800 internet access devices in Term 3.

DE also provided additional funding for schools to buy technology to enable internet access. In addition, DE provided support and advice to schools to help parents access low-cost or free internet access packages for families in hardship living in areas with NBN coverage.

## Experiences of remote learning

Student experiences of remote learning in 2020 were mixed, with most students reporting both positive and negative experiences.

Students enjoyed the flexibility of learning from home more than any other aspect of the new approach. Between May and June 2020, DE's *Learning From Home Survey* showed more than a quarter (26%) of students identified increased flexibility with time as the best thing about learning from home. A similar proportion (24%) identified being more comfortable as a positive aspect of learning from home.

Other benefits included getting more sleep, having more time for non-school activities and spending more time with family (Learning First, 2020).

**TABLE 5:** STUDENT EXPERIENCES: WHAT IS THE BEST THING ABOUT LEARNING FROM HOME?VICTORIA, 2020

	Overall	Primary	Secondary
Freedom / flexibility to work at own pace / to own schedule	26%	19%	32%
Comfort (temperature, clothes, sleeping in)	24%	16%	30%
More time for non-school activities / shorter days	14%	18%	10%
Time with family / pets	12%	20%	5%
Less stress / pressure, being able to take breaks	9%	8%	9%
Lack of distractions / noise, or not seeing people I don't like	7%	6%	9%
Food (eating certain kinds of food or whenever I want)	8%	9%	7%
Online communication / learning	6%	9%	4%
Being at home / having own space	5%	4%	5%
There is nothing good about remote learning / don't know	5%	4%	6%
No commute	5%	2%	7%

Source: Learning First, 2020

Students also reported negative aspects of learning from home, including lack of contact with peers, difficulties learning due to increased distractions or challenges in maintaining focus, and reduced access to teachers to explain concepts.

## **TABLE 6:** STUDENT EXPERIENCES: WHAT WAS THE HARDEST THING ABOUT LEARNING FROM HOME? VICTORIA, 2020

	Overall	Primary	Secondary
Miss seeing peers in person	15%	18%	12%
Distractions / maintaining focus	13%	11%	15%
Not having teacher in person (i.e. to teach / help / explain things)	11%	12%	10%
Staying motivated	8%	2%	13%
Lack of support / explanation in general, or difficulty understanding tasks	8%	8%	8%
Workload too high	7%	3%	10%
Issues with technology—including internet, software & hardware	7%	7%	8%
Hard to communicate with teacher— hard to ask for help or contact them	6%	5%	8%
Hard to manage own time / work / schedule	6%	5%	7%

Source: Learning First, 2020

#### ADDRESSING DISRUPTIONS TO STUDENT LEARNING

To further support students, and in recognition of the challenges of remote learning, the Victorian Government committed \$250 million to the **Tutor Learning Initiative** in October 2020. From 2021, this package enabled the Victorian school system to engage more than 6,000 teachers as tutors to support students whose engagement and learning was disrupted through remote and flexible learning in 2020.

This investment also provided 60 additional Multicultural Education Aides (MEAs) and 16 Koorie Engagement Support Officers (KESOs) to support schools to work with families to re-engage students with learning and improve student outcomes.

#### SUPPORTING KOORIE LEARNERS IN THE TRANSITION TO REMOTE LEARNING

In 2020, the Department of Education (DE) provided funding for the Victorian Aboriginal Education Association Incorporated (VAEAI) to support Koorie learners in transitions between on-site and remote learning with the **Koorie Outreach Support Program** (KOSP).

The KOSP was open to all ages, and assisted 203 learners across early childhood education, school, and adult education. As part of the program, Koorie Outreach Facilitators developed support plans for learners and their families, and made referrals to further resources, including VAEAI Education Consultants, DE Koorie Engagement Support Officers, school-based tutoring programs, and relevant community organisations. Funding was also provided to continue the program in 2021.

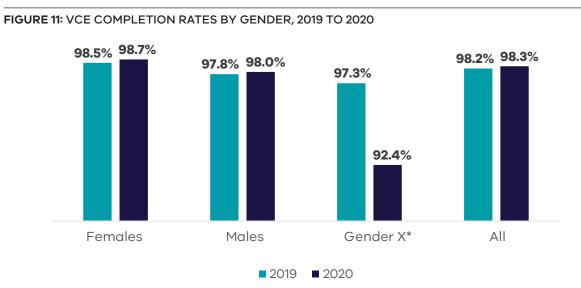




## **Completion rates**

## Victorian Certificate of Education (VCE)

In 2020, 51,162 Victorian students were eligible to complete the VCE. A total of 50,302 students completed—a 98.3% completion rate, similar to that for 2019 (Figure 11).



\*The large change in the proportion of completers among Gender X students is a result of the small size of this group. Source: VCAA, 2021a

#### CONSIDERATION OF EDUCATIONAL DISADVANTAGE FOR VCE STUDENTS

In 2020, the Victorian Curriculum and Assessment Authority (VCAA) applied the Consideration of Educational Disadvantage (CED) process to all students when calculating VCE scores. This recognised disruptions to learning caused by the pandemic, and the different ways schools and individual students could be affected.

The CED process required schools to enter expected scores and expected grades for all students enrolled in one or more VCE or scored VCE VET Unit 3-4 subjects. Students also completed a statement to indicate how the pandemic had personally affected them and their studies. This statement was taken into consideration by VCE teachers when providing the expected scores and expected grades to the VCAA. The CED restored some students' results to reflect what schools expected of them before the pandemic while ensuring final results were valid and fair for all.

#### **Special Provisions**

Special provisions are always available for students with special educational needs associated with disability, illness, impairment or personal circumstances. In 2020, Special Provision was extended to any students who were unable to sit their exams due to the COVID-19 pandemic.

The underlying principle of the policy is to ensure that the most appropriate, fair and reasonable options are available for students to demonstrate their capabilities if their learning and assessment programs are affected by one or more of these factors.



## Victorian Certificate of Applied Learning (VCAL)

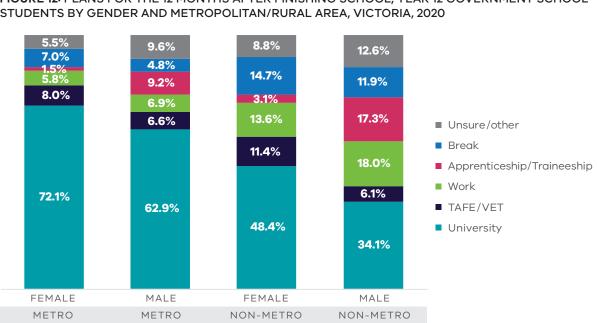
In 2020, a total of 20,047 Victorian students were eligible to complete the VCAL. Of these, 14,552 completed the VCAL. Completion rates for the VCAL declined slightly in 2020 (72.6%) from 2019 (75.2%), but still fell within the range of results from the past 5 years (VCAA, 2021b). Special consideration was applied to students who had made reasonable progress towards their VCAL certificate and completed or attempted to complete all learning. Of the students who completed the VCAL in 2020, 61.3% were male and 38.4% were female. This is a reflection of the enrolment pattern, with 3 in 5 VCAL students enrolled being male.

Students who were unable to complete the Vocational Education and Training (VET) component of their VCAL due to the disruptions caused by the pandemic were able to enrol at TAFE or a Dual Sector Provider and have their 2021 VET fees waived in order to complete their VET certificate (or an equivalent course where it was not provided). VET students who were unable to complete the required hours were also eligible for credit towards their VCAL or VCE.

## **Future intentions**

Location and gender influenced trends in Year 12 students' plans for the year after finishing school (DET, 2020d). Figure 12 shows that metropolitan students undertaking Year 12 in 2020 were more likely to report intentions to go to university in 2021 than their non-metropolitan peers. Non-metropolitan students were more likely to report intentions to do paid work, look for a job, take a break, attend TAFE or study for a VET qualification than metropolitan students.

Higher proportions of male students reported intentions to do an apprenticeship or traineeship compared to females, who reported stronger intentions to go to university, TAFE or study for a VET qualification.



#### FIGURE 12: PLANS FOR THE 12 MONTHS AFTER FINISHING SCHOOL, YEAR 12 GOVERNMENT SCHOOL STUDENTS BY GENDER AND METROPOLITAN/RURAL AREA, VICTORIA, 2020

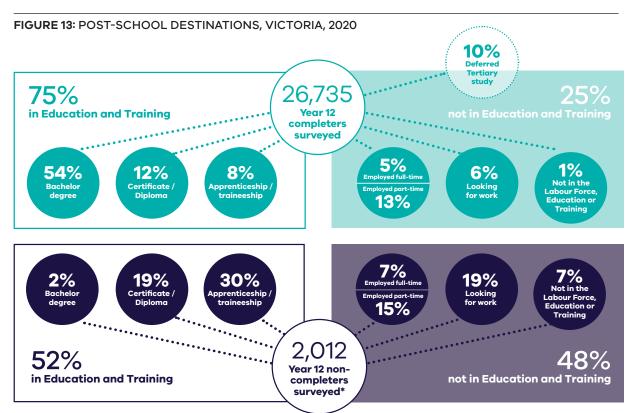
Source: DET, 2020d

## Post-school destinations

The Department of Education's *On Track* survey measures outcomes for Victorian students who finish Year 12 and for those who leave school before completion. Post-school destinations in 2020 for the 2019 cohort are generally consistent with previous years. However, the proportion of students finding employment declined (for more information see section 4: *Employment and the economy*).

On Track found that in 2020 (Figure 13):

- 75% of young people who completed Year 12 in 2019 continued their education or training
- most young people (54%) who completed Year 12 enrolled in a Bachelor degree at university
- about half of young people who did not complete Year 12 (52%) went on to undertake further education or training
- 30% of young people who did not complete Year 12 took up an apprenticeship or traineeship.



\*Formerly referred to as early leavers.

Note: Figures may not add up to 100% due to rounding. Source: DET, 2020e



## 3.3 Vocational and higher education

Pandemic-related public health measures, domestic and international border closures, and severe restrictions on immigration had far-reaching implications for Victoria's vocational and higher education sectors in 2020.

## **Key Findings**

- Public health measures led to furloughing, or reduced hours, for some apprentices and trainees.
- The total number of students in Vocational Education and Training (VET) courses fell, but student satisfaction levels were similar to previous years.
- Learn Local Pre-accredited training providers introduced a new hybrid delivery model in response to the pandemic. Despite the shift in delivery mode, enrolments still declined by around a third.
- Public health measures, including quarantine and border closures, saw significant reductions in international student numbers and diminished the experiences of those still studying in Australia.
- International student numbers declined by 22.7% compared to 2019. Many who stayed reported distress and financial hardship.
- The proportion of domestic students who reported that they were satisfied with their university experience fell significantly in 2020.

## Vocational education and training (VET)

Technical and Further Education (TAFE) institutions played an essential role in responding to the COVID-19 pandemic and in Victoria's economic recovery. Victorian TAFEs remained open throughout 2020 and made efforts to transform operations to support remote and online delivery. This enabled the network to keep training students during the initial phase of the pandemic through blended delivery combining online, remote and face-to-face learning.

However, the VET sector faced significant pressure during 2020. Many apprentices and trainees were furloughed or had their hours reduced due to labour market disruptions (Hall, 2021).





#### FURLOUGHED APPRENTICES AND TRAINEES IN 2020

COVID-19 responses led to a significant increase in the number of apprentices and trainees suspended where their employers could not maintain normal business operations. In response the Victorian Government introduced the **Retrenched Apprentices and Trainees Program** to support suspended or cancelled apprentices and trainees while they looked for new opportunities to continue their apprenticeship or traineeship and to assist them to find alternative employment.

The Victorian Registration and Qualifications Authority (VRQA) also relaxed regulations to ensure apprentices and trainees could quickly move to suspended status to be eligible for Commonwealth funding, such as **Job Keeper** and **Supporting Apprentices and Trainees**, which provided financial support to employers of apprentices and trainees; keeping many apprentices and trainees in contact with their employer.

The number of VET students at TAFEs in Victoria also declined. There were 6,190 fewer students undertaking training in 2020, with numbers declining 7% to 82,690. Among students who attended in 2020, satisfaction levels with teaching, assessment and training quality remained similar to those in previous years (NCVER, 2021).

#### OVERCOMING BARRIERS TO EDUCATION, TRAINING AND EMPLOYMENT

The Victorian Government makes a significant contribution to people facing major barriers to accessing education, skills, and employment through the **RECONNECT** program. **RECONNECT** is funded to support over 1,700 participants each year, with young people making up around 70%. The program provides wrap-around supports and interventions aimed at addressing non-vocational barriers that impact a person's ability to reach their participation potential. The range of supports cover:

- counselling and mentoring
- housing and accommodation services referral
- mental health support referral
- foundation skills
- employability skills
- careers information, planning and advice.

## SUPPORT FOR TAFES, COMMUNITY-BASED TRAINING PROVIDERS, AND FREE TRAINING

As part of the **Skills for Economic Recovery** package, 10,000 new Free TAFE places were made available to help get Victorians impacted by coronavirus into training—particularly women and young people—for jobs in industries that drive economic recovery. A campaign was launched to raise awareness of the new places and to promote 4 new courses.

The package also increased the availability of targeted short courses to support upskilling for existing employees and help retrenched workers and job seekers join professions where there were jobs available. This included the Course in Introduction to the NDIS (skill set), as well as funding for an additional 11,000 places in accredited short courses and skill sets in construction across TAFE and industry-owned Registered Training Organisations. The Government also provided \$1.25 million to improve literacy, numeracy, and digital skills to help more Victorians progress to further study or employment.

In April 2020, emergency funding of \$260.8 million was announced to support the state's TAFE and training system during the COVID-19 crisis. The package included:

- \$192 million guarantee to lock in funding at expected pre-COVID-19 levels for TAFEs and relevant community-based training providers through Business Continuity Grants.
- \$68.8 million in crisis support for TAFEs to ensure Victoria's public training system could respond and recover from the pandemic.

In October 2020, TAFEs and relevant training providers were notified of a six-month extension of the support to guarantee funding at expected pre-COVID-19 levels from October 2020 to March 2021. The total funding level guaranteed between April 2020 and March 2021 was \$675.6 million.





## Adult, Community and Further Education (ACFE) Pre-Accredited Training

Around 250 Learn Local providers switched to remote and online delivery to ensure learners undertaking pre-accredited education across the state could continue to develop digital, reading, writing and maths skills for study, work, and life.

While Learn Local Pre-accredited training providers introduced hybrid delivery models as quickly as possible, restrictions related to the COVID-19 pandemic reduced the volume of training available and enrolments fell, consistent with the drop in training provision across other VET settings.

#### SUPPORT FOR ADULT COMMUNITY AND FURTHER EDUCATION

In July 2020 funding of \$1.25 million was announced for the Learn Local sector. This investment included Digital Adjustment Grants to improve digital access in regional and rural Victoria, support for lead practitioners in literacy and numeracy to support Koorie learners and a state-wide campaign to promote pre-accredited training as a pathway to employment and further training for the most vulnerable people in our communities.

In light of COVID-19 challenges, the Adult Community and Further Education (ACFE) Board provided funding certainty for around 250 contracted Learn Local providers to assist them to continue delivering pre-accredited training or related services where possible, even where training targets were not met, to help them maintain staffing levels, support capacity building and increase resource development to support their longevity in their local communities.

The ACFE Board also supported Learn Locals to deliver training online or remotely, by providing guidance materials and hosting webinars on innovative delivery strategies.

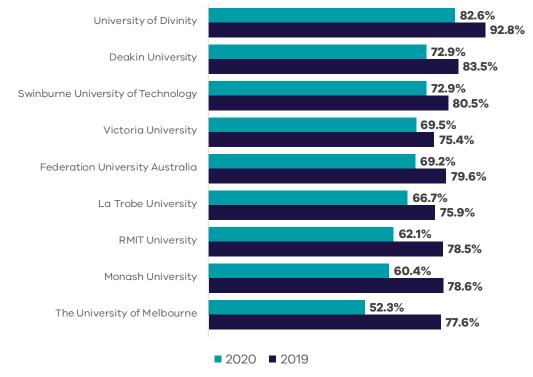
## **Higher Education**

There were over 103,000 commencing domestic students in higher education courses in Victoria in 2020, an increase of 8.8% compared to 2019 (DESE, 2022). Most Victorian higher education institutions were in a good position to provide online and remote learning when COVID-19 public health measures forced students off campus.

Students' satisfaction with their skills development was relatively stable in 2020, while feelings of engagement fell significantly (QILT, 2020) (low 'learner engagement' is known to be a contributing factor to students dropping out of courses).

All Victorian universities suffered a sharp decline in overall student satisfaction on the 'Quality of the Entire Educational Experience' measure (Figure 14) during the first year of the pandemic. This averages students' assessments of their skills development and engagement, and the quality of teaching, student support and learning resources at their university. International students generally reported less satisfaction with their education experience at Victorian universities in 2020 than domestic students (QILT, 2020).

## FIGURE 14: QUALITY OF ENTIRE EDUCATIONAL EXPERIENCE, VICTORIAN UNIVERSITIES, 2019 TO 2020 (POSITIVE ENDORSEMENT)



Source: QILT, 2020

## International students

At the beginning of the 2020 academic year, international students made up 33.9% of all higher education enrolments in Victorian universities, down from 43.9% in 2019. International student numbers continued to decline throughout 2020 (DESE, 2021).

While fees for most domestic students are subsidised under the Commonwealth supported places scheme, or an equivalent program, international students usually pay full fees. This means they make a disproportionate contribution to a tertiary institution's finances.

The Victorian Auditor-General estimated that by the end of 2020, Victorian universities' net surplus declined by 67% from 2019, from \$957 million to \$317 million (VAGO, 2021). This decline in revenue had significant ramifications, including the cancellation of some courses.

#### SUPPORTING THE VICTORIAN UNIVERSITY SECTOR

A \$350 million **Victorian Higher Education State Investment Fund** was developed in response to the significant impact of the pandemic on Victorian universities. It supported universities with capital works, applied research and research partnerships focused on boosting Victoria's productivity and economy. The Department of Education worked with all Victorian universities to allocate funding. Labour market disruptions in industries that commonly employ young people, such as hospitality, also made it harder for many students to find work and cope financially. This strain affected both domestic students and those on an international student visa, who were limited to working no more than 40 hours a fortnight.

Unlike domestic students, international students were not eligible for income supports such as the Australian Government's JobKeeper or JobSeeker programs, leaving many in financial hardship and distress.

#### FINANCIAL RELIEF FOR INTERNATIONAL STUDENTS

The Victorian Government, in partnership with the state's tertiary education providers, established the **International Students Emergency Relief Fund** to help support Victoria's international student community.

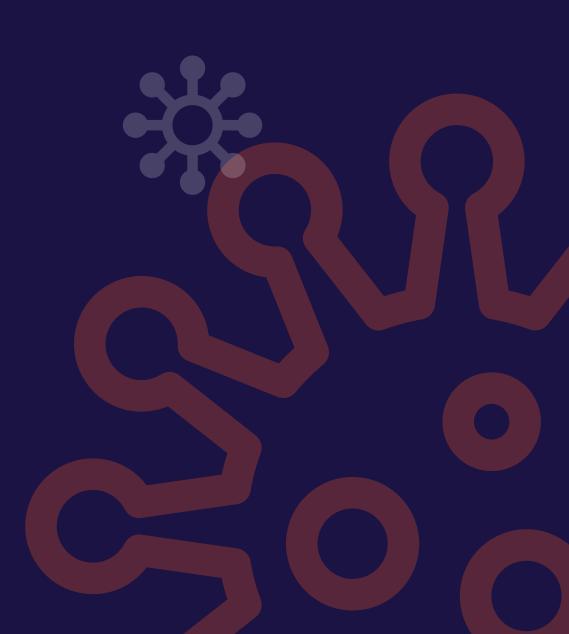
The fund helped temporary and provisional visa holders and undocumented migrants who were unable to access Commonwealth income support and who had no or very little income, savings, or community support. It provided a one-off payment of up to \$1,100 to more than 33,000 international students in Victoria facing financial hardship through lost income due to the pandemic.







# Employment and the economy



The State of Victoria's Children 2020: Impact of the COVID-19 pandemic on children and young people

## Employment and the economy

### **Key Findings**

- Young people of working age (15 to 24 years)—who are more likely than other groups to be in casual or part-time jobs-suffered disproportionately from the economic impacts of the pandemic in 2020.
- Youth unemployment increased throughout 2020, reaching 15.1% in December.
- Labour force participation dropped most for young Victorians, reaching a low of 62.3% in November 2020.
- There were higher unemployment rates (15.6%) in metropolitan Melbourne than in regional Victoria (11.6%).



Samya, 17 years

In 2020, Victoria introduced widespread business-related and travel restrictions as well as social distancing requirements to limit the spread of COVID-19. These measures included the shutdown of non-essential industries, which had large labour market effects.

Young people were particularly affected by these labour market effects, since they are more likely to work in those occupations and industries most affected by the public health protection measures. Retail, accommodation, hospitality and food services industries accounted for a large proportion of the young casual workers that lost employment (Dimov, et al., 2021).



Employment opportunities for young people working in these industries in Victoria's North East and East Gippsland regions had already been impacted by the 2019–2020 summer bushfires (DTF, 2021b).

Commonwealth JobKeeper payments were available for permanent, part-time or long-term casual employees. As young people are often in short-term casual positions, many were not eligible for this support.

#### PLACE BASED APPROACHES TO FACILITATE YOUNG PEOPLE'S EMPLOYMENT

Local Learning and Employment Networks (LLENs) broker initiatives and develop sustainable relationships and partnerships with and between local schools, education providers, industries and communities. In 2020, LLENs continued to provide valuable support and assistance to young people affected by the pandemic through activities including:

- placement opportunities
- school-based apprenticeships and traineeships
- guest speakers and presenters from industry
- workplace visits and industry tours
- mock interviews and work-readiness preparation.

#### CONNECTING YOUNG PEOPLE WITH INDUSTRY

The Metropolitan Partnerships are a coordinated way for communities to advise the Victorian Government on what matters in their region. In 2020–21, a total of \$350,000 was provided for the following Metropolitan Partnerships programs:

- **Tourism Enterprise Scholarship Program.** Yarra Ranges Tourism partnered with the Eastern Metropolitan Partnership and provided 8 scholarships for young tourism and hospitality students to gain work experience and mentoring.
- Vocational Mentoring Exchange (VME) program. This program worked with LLENs and community agencies to support disadvantaged young people moving into the workforce, or changing careers; connecting them with networks in industries with job opportunities. It also saw the establishment of a Youth Mentoring Network for the Northern Region to increase understanding of the mentoring, local skills and employment needs and constraints in the region.
- **Engaging young people in creative industries.** This project supported young people from Melbourne's north working or aspiring to work in creative industries to co-design a pathway to employment. It included working to understand the impact of the pandemic on creative spaces and industries, and to identify opportunities to help creative industries recover.

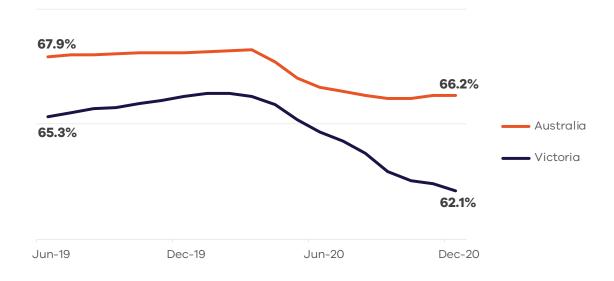
## 4.1 Labour force participation

## Labour force participation rate

This is a measure of the economy's active workforce: the labour force divided by the total working-age population. It is an indicator of the health of an employment market and economy.

There was a decline in the labour force participation rate for young people (aged 15 to 24 years) in Victoria in 2020 (Figure 15). The participation rate fell across Australia, but declines were most pronounced in Victoria, attributed to the extent of the state's lockdowns and other public health measures.

FIGURE 15: LABOUR FORCE PARTICIPATION RATE, PERCENTAGE OF VICTORIANS AGED 15 TO 24 YEARS, JUNE 2019 TO DECEMBER 2020

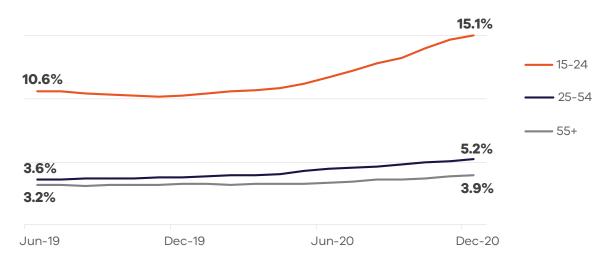


Note: Data not seasonally adjusted. Smoothed using a 12-month rolling average. Source: ABS, 2021b

## Unemployment rate

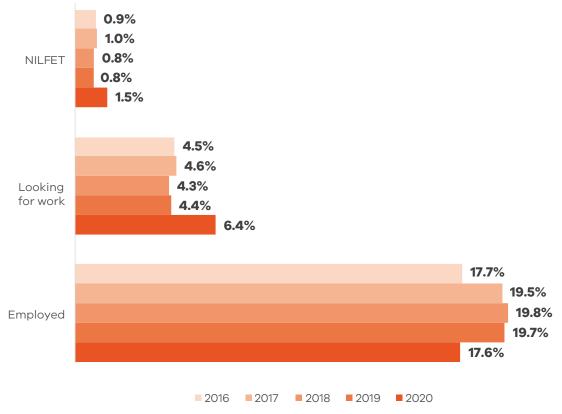
The unemployment rate for young people aged 15 to 24 years in Victoria increased from 10.6% in June 2019 to 15.1% by December 2020 (Figure 16). Increases in unemployment were much smaller in other age groups. This is supported by Department of Education *On Track* results which show an increase in the number of Year 12 completers who were neither employed nor in education or training (Figure 17).

#### FIGURE 16: VICTORIAN UNEMPLOYMENT RATES, BY AGE GROUP, JUNE 2019 TO DECEMBER 2020



Note: Data not seasonally adjusted. Smoothed using a 12-month rolling average. Source: ABS, 2021b





Source: DET, 2020e, NILFET: not employed and not seeking work

While official unemployment figures for Aboriginal Victorians were not available, government engagement with Aboriginal communities indicated that employment of Aboriginal youth was disproportionately impacted by the pandemic in 2020. This has been attributed to concentrated employment in industries such as hospitality and events, cultural-based businesses, and trades, which have borne the brunt of labour market effects (DPC, 2021b).

#### SUPPORTING YOUNG VICTORIANS TO ENTER THE WORKFORCE

Part of Working for Victoria's pandemic response, the **Youth Employment Program** was funded with \$29 million to support 400 new full-time equivalent (FTE) jobs over 12 months, or up to 800 FTE jobs over 6 months, for young Victorians aged 17 to 29 years. A range of jobs were available across the Victorian public sector, with relevant introductory training included. The jobs have been created in both metropolitan and regional locations.

The **Major Projects Skills Guarantee** is a policy creating opportunities for Victorian apprentices, trainees, and cadets to work on some of Victoria's biggest building and infrastructure projects. It required all construction projects valued at or over \$20 million to use young Victorian apprentices, trainees or cadets for at least 10% of the total estimated labour hours. This enabled young Victorians to benefit directly from the major infrastructure projects underway in Victoria, and has contributed to the development of the next generation of skilled workers.

## 4.2 Financial security, debt and housing

Low labour force participation has wide-ranging effects, including undermining young people's perceptions about their long-term financial security.

Key employers of young people such as the hospitality industry have closed venues or reduced staff numbers or hours, while in the retail industry, traditional 'bricks and mortar' shops struggle to remain profitable against online retailers.

According to a UNICEF report, in mid-April 2020, 1 in 5 young people (aged 13 to 17 years) in Australia (19%) were worried about their income levels (UNICEF Australia, 2020). Qualitative responses suggest that the pandemic contributed significantly to this concern. Almost one-third of respondents were concerned about the effect of the pandemic on the national economy (29%).

A Consumer Policy Research Centre study (2020) has linked reduced labour force participation during the pandemic to increases in debt and housing stress, particularly for young people who do not have wealth 'buffers'.

The centre's *Consumers and COVID-19: from crisis to recovery* study noted a significant increase in young people who reported taking out a personal loan, from 1 in 50 in May 2020, to 1 in 10 in October 2020.

There was also an increase in young people reporting that they borrowed from family and friends to manage household expenses, from 1 in 8 in May 2020, to 1 in 5 in October 2020 as well as a significant increase in young people who missed basic household payments (such as for energy and rent) in the same period.

The study also noted that an increased proportion of young people sought payment assistance from credit and loan providers (up from 2% in May 2020 to 14% in October 2020).

Meanwhile, there was an increase in young renters seeking rental payment assistance, from 9% in May to 15% in October. The Australian National University's **COVID-19 Impact Monitoring Survey Program** showed an increase from April to May in young people reporting that they were unable to pay their mortgage or rent on time (from about 7% to 15%) (Biddle, Edwards, Gray, & Sollis, 2020c).

#### WORK EXPERIENCE WHILE TRAINING

The **Youth Employment Scheme** (YES) gives young people aged 15 to 24 years an opportunity to work in the Victorian Public Service for 12 months while completing accredited training. The Victorian Government developed the scheme to support and increase young people's participation in the workforce, particularly during difficult times such as the COVID-19 pandemic, and to assist communities to meet future skill and employment needs.

In September 2020, the first tranche of 289 jobs were created across 7 government departments and agencies. These jobs included roles such as Alpine and Environmental officers for the Buller Stirling Alpine Resort Board, farm workers at the Agriculture Victoria facility in Gippsland and contract management work with the Department of Transport and Planning to support the government's Building Works stimulus package.

#### YOUTH PERSPECTIVES ON COVID-19 AND EMPLOYMENT

Convened by the Minister for Youth in May and June 2020, online roundtables explored the impacts of the COVID-19 pandemic on young people. The roundtables included a diverse group of young people, cross-sector leaders and senior government representatives.

They discussed the impacts of the pandemic on youth employment and priorities to support young people's economic security. Attendees made suggestions including increased preemployment support and tailored youth employment services, particularly for cohorts facing significant barriers to employment, and ongoing advocacy for Commonwealth supports.

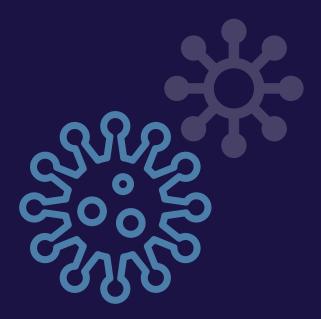






# Conclusion

Victorian Government initiatives beyond 2020







Milla, 12 years

It is clear that the pandemic has had wide-ranging effects on Victoria's children and young people. Extended public health measures, especially lockdowns, border closures and the move to remote learning, created challenges and also opportunities. Changes to access to health care and education were preferred or even beneficial for some children and young people.

The uptake of telehealth services in 2020 enabled continued provision of paediatric care for children with developmental vulnerability across a range of paediatric services, including specialist clinics, community health services, Aboriginal Community Controlled Health Organisations and Child and Adolescent Mental Health services. Telehealth, which reduced or eliminated infection risk, was found to have benefits including increased access for most families and increased attendance at appointments, and was preferred by some families with children with developmental needs (DoH, 2021b).



Many children and young people adapted well to Learning from Home kindergarten programs and remote school learning. Most surveyed parents were highly satisfied with the level of care and learning they received from early learning and childcare centres (MCRI, 2021b) and participation in Learning from Home programs was high (DET, 2020c).

For school-aged students, absences declined in 2020 (DET, 2020f), (DET, 2020d), and Year 12 completion rates remained high and stable (VCAA, 2021a). Students cited benefits of remote learning such as getting more sleep and spending more time with family (Learning First, 2020).

However, there is also evidence that some children and young people suffered in 2020 as a result of the pandemic, and at a greater rate than other age groups.

Research suggests a decline in healthy lifestyle behaviours and increases in sedentary behaviours and mental health issues. Poorer mental health was evident across several age groups, with children aged 1 to 5 years in metropolitan Melbourne demonstrating a higher likelihood of behaviours related to anger, anxiety, depression or sleep disturbance, compared to children in other states who did not experience a second wave of the pandemic and associated lockdowns (DeYoung, et al., 2021; Vasileva, Alisic, & Young, 2021).

For children aged up to 17 years, one of the indicators of rising mental health issues was an increase in mental-health-related emergency department presentations in 2020 (DHHS, 2020). For young adults (18 to 24 years), research revealed high rates of psychological distress in 2020 (Biddle, Edwards, Gray, & Sollis, 2020a; Greenland & Hall, 2021; AIHW, 2021b; *headspace*, 2020).

There was a sharp increase in the youth unemployment rate, and some apprentices and trainees were furloughed or had their hours cut. The impact of the pandemic on employment was greatest for Victoria's young people (15 to 24 years), who hold most of the state's short-term casual positions, and as such were less likely to be eligible for Commonwealth support such as JobKeeper.

The longer-term impacts of the pandemic are not yet known, but they are likely to be complex and will continue to emerge (AIHW, 2021b). It is important that governments, other organisations and individuals acknowledge this, while focusing and building on current understanding, and take action accordingly.

Given that childhood and adolescence are critical developmental phases, the impact of the pandemic and the effectiveness of government initiatives will continue to be monitored and reported on.

Successive reports will build on the work of this State of Victoria's Children Report, ensuring that we continue to learn and be proactive in helping Victorian children and young people move beyond the challenges of the COVID-19 pandemic and lead happy, healthy and fulfilling lives.

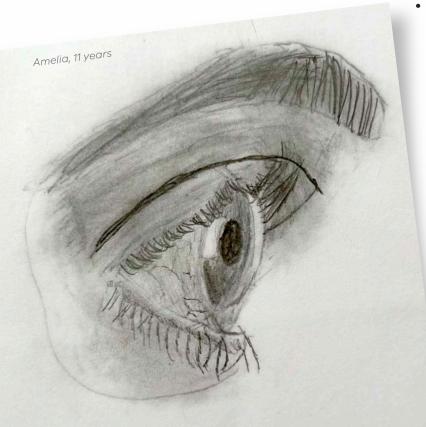
#### Victorian Government initiatives beyond 2020

In response to the pandemic, the Victorian Government introduced a broad range of initiatives to address emerging problems and support children and young people, outlined throughout this report.

As the health, educational, economic and social impacts of the pandemic continued into 2021, these initiatives were supplemented with further measures. This report does not include data or government responses from 2021. However, as the pandemic evolved beyond 2020, Victorian Government responses have grown and evolved, with the outcomes to be assessed in future reports.

Key Victorian Government initiatives to mitigate the impacts of the pandemic beyond 2020 include:

- an additional \$230 million to extend the Tutor Learning Initiative for the 2022 school year, which will continue to provide school students with targeted learning support
- a \$200 million Schools Mental Health Fund and Menu as well as additional funding for *headspace*
- \$354 million over four years committed in the 2021-22 Victorian State Budget to support victim survivors and address family violence, including \$44 million to deliver a range of specialist interventions for children and young people impacted by family violence and sexual assault
- \$47 million to extend the Reconnect Program for a further 4 years, and expand it to support more young people looking to re-enter the workforce or connect them with further education opportunities (including supporting those who may have lost their jobs due to the pandemic)



- \$21 million over 2 years for the
  Get Active Kids Voucher Program,
  helping eligible families get their
  kids involved in organised sport
  and recreation by reimbursing
  the cost of membership and
  registration fees, uniforms and
  equipment
  - the \$24.2 million Active Schools initiative, building on existing programs and funding to boost support and resources for schools to get kids moving.



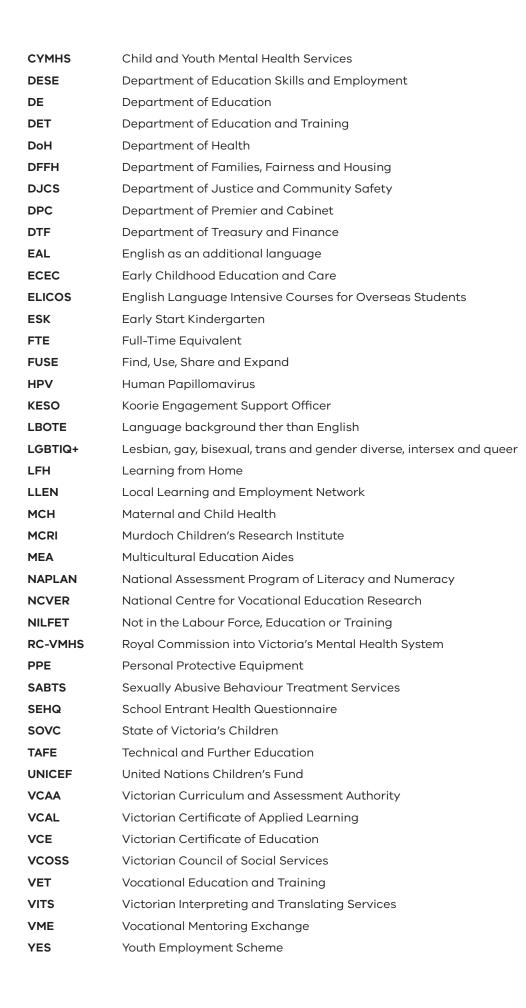
Amelie, 17 years

## Abbreviations

ABS	Australian Bureau of Statistics
ACCO	Aboriginal Community Controlled Organisation
AEL	Access to Early Learning
AFVP	Adolescent Family Violence Programs
AIHW	Australian Institute of Health and Welfare
AHPPC	Australian Health Protection Principal Committee
AMF	Alannah and Madeline Foundation
ANU	Australian National University
AtoSS	Attitudes to School Survey
CALD	Culturally and Linguistically Diverse
CAMHS	Childhood and Adolescent Mental Health Services
ССҮР	Commission for Children and Young People
CSA	Crime Statistics Agency
CSG	Community Support Group
CSO	Community Service Organisation











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