COVID-19 **Response Inquiry**

Roundtable Summary – Schools, Children and Young People

Date: Tuesday 9 July 2024

Hosts: Dr Angela Jackson and Professor Catherine Bennett, Commonwealth Government COVID-19 Response Inquiry Panel

Participants: This roundtable brought together a range of participants from peak bodies, advocacy groups and academia related to the education and health of children and young people.

Purpose of this roundtable

• This roundtable provided stakeholders and experts with the opportunity to share their thoughts on the impact of the COVID-19 pandemic on children and young people and discuss what could be improved for a future crisis.

What we heard at the roundtable

- Children were negatively impacted from school closures and the restrictions on socialisation during the COVID-19 pandemic. Ongoing higher rates of poor mental health and school avoidance are of significant concern. We need to address the ongoing impacts of COVID-19 and response measures on children. This should include mental health and wellbeing supports and improving uptake of routine vaccinations.
- The impact of the COVID-19 pandemic on children and young people varied across cohorts and often exacerbated existing inequities. For example, some students with disability experienced increased isolation and educational disadvantage when necessary adjustments were not made to their online learning. Some students with disability benefited from the transition to online learning and felt more comfortable in their home setting. Border closures had negative impacts for some children and young people, particularly students in rural and remote areas who attend boarding schools in different jurisdictions.
- Increases in income support payments during the COVID-19 pandemic resulted in many children being lifted out of poverty during the pandemic, and alongside greater access to early childhood education and care likely provided a protective intervention that mitigated some of the negative impacts of the pandemic on these children.
- The needs of children should be prioritised and considered more explicitly when planning and responding to public health emergencies. Mechanisms such as youth councils should be established to allow governments to hear directly from children and young people about the decisions that impact them. Health and education experts should also be

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- included in relevant decision-making bodies to represent the interests of children and young people. This could include a dedicated role such as a Chief Paediatrician.
- Gathering evidence on disease impacts on children, the role of children in transmission, and the appropriateness and impacts of non-pharmaceutical interventions should be a priority at the outset of a pandemic. There is a need for additional evidence on the health risks and impact of non-pharmaceutical interventions, such as masks, for children and young people. Testing protocols for children also need to be evaluated so that the detected infections rates associated with enhanced active screening are understood, as well as the longer-term impacts on a child's willingness to comply with testing in the future. Undertaking trials in advance of the next public health emergency and establishing protocols for future research will ensure evidence can be rapidly gathered and assessed as risks emerge.
- The pandemic demonstrated inadequacies in the collection and sharing of data regarding children and young people. A lack of uniformity on key metrics across jurisdictions and insufficient collection of data related to mental health and wellbeing are particular issues. Stakeholders discussed the benefits of NAPLAN as a nationally consistent record that provides useful insights, while noting there remain some challenges. Responses to future public health emergencies would be enhanced by improved data collection, linkage, sharing and access for researchers. This could include a universal identifier to support the collection and linkage of longitudinal data. These systems cannot be set up during a crisis, and investment is needed now to improve preparedness.
- During the pandemic, teachers pivoted to online learning, in most cases without sufficient training, preparation or resources. Online teaching improved during the pandemic but needs to improve substantially for a future event. It would be beneficial to invest in online teaching environments, such as developing a suite of quality assured online lessons, aligned to the curriculum and available to teachers in crises. Any future pivot to remote learning needs to include a focus on social development.
- To prepare for a future pandemic, governments should agree frameworks that guide
 decision making across jurisdictions on issues such as school closures. Consistency in high
 level principles is needed to guide cohesive decisions, however this must be balanced
 with flexibility to respond to local contexts and the diversity of the sector. Decisions on
 significant measures such as school closures should be based on a range of evidence,
 including an understanding of transmission and disease risk, other data inputs and
 international observations.
- Government needs to provide clear and consistent advice to families and schools and provide reassurance even as evidence is evolving. A lack of clarity of information and contradictory messaging across jurisdictions contributed to confusion and fear. Schools became a key source of information for families, which put significant pressure on teachers. Information must also be provided in formats that are accessible to children and young people. Governments should provide clear communications around vaccine rollouts, including where children can access them.