

# **PROOF VERSION ONLY**

## **PANDEMIC DECLARATION ACCOUNTABILITY AND OVERSIGHT COMMITTEE**

### **Review of Pandemic Orders**

Melbourne—Friday, 13 May 2022

#### **MEMBERS**

Ms Suzanna Sheed (Chair)

Mr Jeff Bourman (Deputy Chair)

Mr Josh Bull

Ms Georgie Crozier

Mr Enver Erdogan

Ms Emma Kealy

Ms Harriet Shing

Ms Vicki Ward

Mr Kim Wells

**Necessary corrections to be notified to  
executive officer of committee**

**WITNESSES**

Ms Jacquie Blackwell, Co-founder, and

Ms Moran Dvir, Co-founder, Shadow Pandemic Victoria.

**The CHAIR:** All evidence taken before this committee is protected by parliamentary privilege. Comments repeated outside this hearing, including on social media, may not be protected by this privilege. All evidence given today is being recorded by Hansard.

You will be provided with a proof version of the transcript to check. Verified transcripts, presentations and handouts will be placed on the committee's website as soon as possible.

I will introduce you for the purposes of the recording. We have before us Jacquie Blackwell and Moran Dvir, Shadow Pandemic Victoria. We have also with us today as committee members me, the Chair, Mr Josh Bull, Mr Enver Erdogan, Ms Georgie Crozier, Ms Emma Kealy and Ms Vicki Ward. And Mr Kim Wells has joined us now.

I would invite one of you to make a 5-minute statement before we go to questions, which will be around about 6 minutes each I would say. Please start.

**Ms BLACKWELL:** Thank you for the opportunity to provide evidence of the lived experiences of children affected by the pandemic orders in Victoria since December 2021 at today's pandemic hearing. We welcome the chance to share and record these stories. In August 2021 a group of Melbourne mothers staged a COVID-safe protest against school and playground closures. We did this because children's experts were not being consulted about the impact of pandemic orders on children and we could see children were suffering. The explosion in mental health cases in youth and teenager, including eating disorders, suicidal ideation and self-harm, that was being reported in national papers had been termed a shadow pandemic. This is the name we took. At Shadow Pandemic Vic we became the voice of Victorian children and parents through our Instagram page.

**Ms DVIR:** Within a short time we amassed 20 000 followers. The stories of despair, anguish, desperation and quiet suffering continue to be shared with us from families across Victoria. Eating disorders, suicide, self-harm, school refusal, anxiety, bullying, social issues and disengagement are too common. The testimonies we are about to share are from parents, families, teachers, doctors and allied health professionals. It is very clear to us that Victoria's children need our help and the state needs to urgently implement a comprehensive recovery plan for our kids. On a personal note, as the moderator of the Shadow Pandemic social media accounts, reading these stories every day has been absolutely heartbreaking. Strangers continue to share with us their children's darkest moments just to be heard by someone. Today on their behalf we share with you the lived experiences of Victorian children in the COVID pandemic so that they too can be heard in the Victorian Parliament.

**Ms BLACKWELL:** 'Addicted to electronics. Everyday we have scheduled sports activities to try get them off devices but the tantrums and battle is real. It's like dealing with mini addicts'.

**Ms DVIR:** 'I've worked with teenagers for 23 years in the drug and alcohol space and I've never seen so many issues. Drug use, anxiety, dealing with abusive parents, alcohol use—my heart is breaking for them. This will take so many years to recover from. I'm so angry'.

**Ms BLACKWELL:** 'I'm a mum of 2 primary children. Firstly, my youngest started prep last year. Academically he did well but his attention span wasn't great and he couldn't settle when he got back to school. My eldest was not motivated, he became anxious, angry and struggled to complete the tasks when it would never have been a problem before. He would often have outbursts and fits of rage. A real lack of hope and joy. This year I still see signs of his anxiety. He brings his pencil case home every day in case we go into another lockdown'.

**Ms DVIR:** 'My 14 year old son hasn't left his room for a month. He hasn't been to school or to any of his out of school activities. He can't sleep and when he does it's only for an hour or two at a time. It all started after Covid and has just gotten worse as time has gone by. I have tried contacting the Doctors and they referred me to counselling where this is a huge waiting list or they aren't taking on new patients. Nobody can help us and I

don't know where to turn. His school just said 'hope to see him next term' but did not offer any kind of assistance. I am so stressed at the moment. I can't see him like this anymore. I just want to help him'.

**Ms BLACKWELL:** 'I am a paediatrician but not a psychologist, and a mother of 3 boys. I have a patient with a high IQ and ADHD. Dealing with the separation of her parents and the commencement of high school all during lockdown she became disengaged with learning and made no social connections. Sneaking out one night she experimented with recreational drugs and under the influence of drugs was gang raped at a park. After assessment at ED my patient was sent home. Not engaging well with telehealth she was untreated. This year my patient is still disengaged from school and has been unable to access a private or public provider. This child has engaged in self-harm and has made two attempts on her life, she is yet to turn 15'.

**Ms DVIR:** 'I have 3 children (grade 2, 1, kinder) I have been questioning my parenting abilities lately asking myself what am I doing wrong. After reading all these messages I realised that every other parent is having the same troubles. Emotional regulation, social skills, Lack of enthusiasm to be outside and play. I thought it was me, some way I had gone wrong as a mum. I'm trying my best, killing myself to keep it under control. Now I realise it's the bloody pandemic, covid, lockdowns. We are all at breaking point. How do we help our kids?'.

**Ms BLACKWELL:** 'My daughter has recently developed a head/neck tic out of the blue. We thought she had some neurological disorder as it came on so quickly. Fortunately it's a tic, but very distressing to watch her doing it. She has always been a happy, easy going, confident and vibrant girl. In the last two months we have seen her crying at night and school, very clingy and anxious'.

**Ms DVIR:** 'My son has autism, intellectual disability, generalized anxiety, speech delay. We spent 18 months preparing for transition to a special development school. Due to the ongoing lockdowns and his need for predictable routine transition could not occur. Due to anxiety and acute episodes his paediatrician prescribed him medications including Valium. He has been unable to transition to school due to his regression and has not been able to be weaned of the Valium ... My son is 6 years old'.

**Ms BLACKWELL:** 'Just no motivation anymore. And so much actual learning missed. My daughter, now year 8, went from being high achieving academically, to just average. So much achievement just lost! I feel for those who were just getting by and are now really struggling. Her 13th birthday is coming up, she doesn't want to do anything! Finds it hard to be around friends all day, and just wants to be on her own. She was never, ever like that'.

**Ms DVIR:** 'My daughter is shattered. She is not the girl she used to be. She is so unhappy, her schooling has suffered immensely and she is worried that she will not pass y12, she had barely any face to face learning leading into year 12 this year. She has missed all the social fun of be a 16, 17 year old. She missed her elite sport and now has not progressed this year. She thinks she is failing. Of course she is not failing the government has failed her. It's awful to watch and she can't see a way out!!!'.

**Ms BLACKWELL:** 'My daughter completed year 12 last year. Our extended friendship group has had three kids from ... her VCE cohorts, those most impacted by the pandemic, take their lives in the last few weeks. This included one on campus in April at the University of Melbourne that was unbelievably distressing for those kids who bore witness. Unfortunately, these are the ones we know about but many more are suffering severe mental health disorders fuelled by the lack of connectedness they have suffered over the last few years. The issue is complex and multi factorial but we need to start a conversation ... we have a duty of care'.

**Ms DVIR:** 'I am a primary school teacher and what we are being faced with at school is shocking! Student behaviour has skyrocketed and not the regular difficulty adjusting to school etc. I'm talking about severe bullying, explicit and sexual remarks and behaviour, swearing and severe anxiety and dysfunction. Non-stop parent meetings and discovering a lot of kids were left unsupervised during lockdowns with access to iPads because parents needed to work etc. The effect on kids is just starting now. This is under 12s! They are traumatised. I am disturbed as a teacher with what we face daily'.

**Ms BLACKWELL:** 'I have a son in grade 2 ... his teacher said after lunch the kids don't cope at all and are exhausted. They have had to change the schedule so that more academic subjects are in the morning only. The long term effects are so so concerning ... mental health, anxiety, social skills, emotional regulation skills ... A

PE teacher told me every day he has to break up physical fights because kids aren't coping with things not going as planned'.

**Ms DVIR:** 'My young daughter had to isolate at home as her brother had covid. Despite her testing negative every day for 7 days, she was forced back into the horrors of online school and missed out on social occasions. The negative effects of her 7 day isolation were far more detrimental to her well-being than the very low risk of her being contagious after daily negative test results'.

**Ms BLACKWELL:** 'As a teacher and in my role in student wellbeing, I felt helpless for my students. In 2020 I was in charge of 250 students but wasn't with them face to face. I had students who were outgoing and sporty who lost hope and didn't leave their rooms. I had 3 suicidal students—2 were on the spectrum. I had to call DHHS and make a report because a student went awol. Students were refusing school. Then when we did go back, they were forced to wear masks. Even this impacted their mood. They should have been happy to be back, instead they didn't engage and they walked around like zombies bc we didn't have crucial facial expressions and clear communication. They were barked at each day to wear a mask, to keep their distance and the VCE students expressed dismay and hopelessness for the future. "What's the point?" they'd say'.

**Ms DVIR:** 'My 16 yo daughter is in a really bad way. She went downhill during the last big lockdown last year. She developed an eating disorder and recently tried to kill herself. She is getting help but isn't improving. The stress is suffocating and now I have had to go on medication because of it as my anxiety was crippling'.

**Ms BLACKWELL:** 'My grade 5 son fakes sick to try and get out of going to school, knowing they'll send him home if he sniffs. Every day is a battle getting him there, this was never an issue. Constant talk and anxiety from both kids about "what if there's another lockdown", and "next lockdown". They don't plan look forward to anything ... they're just waiting for it to be cancelled'.

**The CHAIR:** You have probably got pages, do you?

**Ms BLACKWELL:** We have only got about another page.

**The CHAIR:** Oh, that is fine. I was just going to say if you had more they could be submitted anyway, but if you have only got a bit, that is fine.

**Ms DVIR:** We have got a brief conclusion, so maybe do you want me to skip ahead to that or read a few more?

**The CHAIR:** Look, it just shortens our question time.

**Ms DVIR:** I will go straight to our conclusion.

**The CHAIR:** Okay then, thank you.

**Ms DVIR:** We ask the Victorian government and the opposition to urgently implement a plan that is centred around children and youth and their psychological, social, economic, educational and physical recovery. Our children's lives should not be forever limited by decisions taken by the Victorian government in 2020 and 2021. Our children need to re-engage in sport and the arts, reconnect with the community and enjoy rich and secure lives. Children need to be celebrated. Let us restore our children's childhood. Let us get our kids on the path to recovery.

**The CHAIR:** That is it? Okay. Look, thank you very much for that presentation. I wonder, could I just better understand your structure? You know, most of the organisations we see are established organisations, incorporated bodies, have a board et cetera. So if you could just talk about who you are and your structure and your membership and the like.

**Ms BLACKWELL:** We are a group of mums. We came together over WhatsApp last year. It was incidental. We have only met—well, this is another one of our founders behind us. We have only met today. We are a group of mums who came together because we were concerned, and it grew over WhatsApp. You know, one person was added, another person, and then we became a planning group, and we have no background in what we are doing. We just identified there was a need, and we thought, 'Let's stage a little protest and get people to put their schoolbags outside their front fence'. And we thought, 'Oh, we'll send it to

the media, and we'll see what happens'. And suddenly we got media coverage. And then we had our Instagram page, and within a few weeks there were 20 000 followers. So we have no structure other than that we talk over WhatsApp. We argue over different issues, we try and present everyone's stories and we are literally an advocacy group. I would like to say we are not making it up as we go along, but really we are. Our recovery plan has grown out of: schools are now open, but what are we actually asking for now? We are still identifying that there are holes and our children are suffering, so we want a plan to go forward.

**The CHAIR:** Yes. Okay. Thank you for that. So you do not have a formal membership; it is an advocacy group and people follow you. And are you on Facebook as well or other—

**Ms BLACKWELL:** No, we are on Twitter. We tried Twitter.

**Ms DVIR:** We are on Twitter and Instagram.

**The CHAIR:** Twitter and Instagram and WhatsApp—

**Ms BLACKWELL:** WhatsApp is just the organisation, and we have got that. And our Twitter account was actually copied. So there was a parallel Twitter account set up. We do not know whether that is flattery, but that is not ours, so we keep saying, 'No, follow us'. I think we have had an impact. And people have wanted to get their stories out, and that is symbolic of the desperation and anguish that parents were feeling, because there is nothing worse than watching your child suffer and having nowhere to go. And we became that place to go.

**The CHAIR:** Well, please understand that most of us here are parents and grandparents and understand a lot of what you are saying. I suppose, you know, we are here to look at the orders that have been made, and obviously it is the impact of the orders that you have been speaking about. As we move to a phase now where the orders are really being unwound and the restrictions are lifted—and that has been a gradual process, and yet we have more cases than ever and more people dying in the community—are you seeing that as an ongoing impact on the community that you are dealing with?

**Ms BLACKWELL:** Yes.

**Ms DVIR:** Yes. I actually spoke to someone who is an ex-principal, and he said that you need to know that the most stressful time for teachers and schools is now. They are actually far more stressed and under the pump than they were last year, and that is because of the way that children have returned to school and the way that they are presenting. So kids are coming to school, and they are exhausted. The word we kept hearing from teachers was 'stamina'. They have no stamina—physically, mentally. So teachers are trying to teach. They are exhausted from the last two years, and the kids cannot concentrate. They cannot, you know, sit for 40 minutes on the floor—you know, young children. There are social issues that are coming back into the class. They are just exhausted, and they are dealing with all these issues.

**The CHAIR:** And do you hear that their parents are in the same boat—that it is adults and children who are exhausted by the pandemic?

**Ms DVIR:** Yes.

**Ms BLACKWELL:** Yes. I was speaking to a friend of mine who is a paediatrician on the way in here, and she said that, you know, you would say that one in four teenagers will suffer a mental health issue at some stage, because teenage years are hard. And she said now it is every patient. She said, 'I'm not meant to be dealing with mental health issues, but my patients are coming in because of that and I can't refer them on'. So, the paediatricians are exhausted, the child psychologists are exhausted and with parents it is a bit of a desperation. It is looking at the exhaustion or, for children who finished year 12 last year, looking at their apathy. They gave everything in a horrible environment and they have nothing left to give, so we have issues at university. So anyone who is involved in children's lives is struggling.

**The CHAIR:** Yes. The pandemic is continuing obviously—we all know it—and there is a great burden of illness out there and in our hospitals and so forth. I am just wondering if you could go to what you see as the plan. Do you have some ideas to share with us and government on what you think perhaps we should be addressing?

**Ms BLACKWELL:** On pandemic orders or on the needs of children?

**The CHAIR:** Well, as the pandemic orders are becoming less and less and the restrictions are largely lessening very considerably, I think you are talking about recovery. So I am interested to hear what your recovery ideas are.

**Ms BLACKWELL:** We have a nine-point recovery plan.

**Ms DVIR:** Yes, so we have developed this plan. We have gone out to talk to a lot of child psychologists and paediatricians. We are not experts, we are just parents who care very, very deeply for Victorian children and our own children. So in consultation with them we have developed a nine-step plan, and that includes legislation that safeguards the World Health Organization and UNICEF global position on pandemics that schools close last and reopen first. We think there should be fee-free government-funded community clubs and sports activities for all Victorian children, because we know that the dropout rates in sport have increased, so we really need to encourage families and parents, and there are more families experiencing financial difficulties; a positive wellbeing program in schools; and a minister for children's recovery in Victoria, which we feel is really critical because we need to know that children have a seat at the table and that there is a minister in government who is completely and solely focused on the needs of children, because we feel that that has not happened. We would like an independent panel of paediatric medical experts involved to have powers in shaping pandemic policy that affects children. When our children are sick, we take them to doctors that specialise in children. We know that children are not doing very well on the whole at the moment—they are already vulnerable—so we want to make sure that the right experts are being consulted to look at really balancing the risks of COVID versus the harm impacting on children.

**Ms BLACKWELL:** And not just necessarily the risks of COVID; I would say the risk post COVID. We actually think this is ongoing and the needs of children need to be considered. We have a minister for aged care and we might have a Minister for Youth, but not for children's recovery and their actual needs and their wellbeing. So it is a different point there.

**The CHAIR:** What point are you up to now?

**Ms BLACKWELL:** We want a child- and adolescent-focused public holiday, which can be perceived as gimmicky, but we have said that a lot of children have opted out of sporting activities and other activities because they are living on their screens. We want them to know, 'Hey, it's okay'. It is like a 'Life. Get back in it' campaign. We grew up with the 'Life. Be in It' campaign. It had a huge impact on our lives. We want kids to know: 'It's okay. Just go and have a go. It's fun. It doesn't matter if you don't know what you're doing, but just get back out into life and re-engage and socialise'. We want to ensure that in future masks are minimised on children, and we struggled in particular with the fact that four year levels of school were kept in masks when the rest were not. So we want to ensure that that is minimised in future if we ever have to resort to it. We retain a test-to-stay policy at schools. And we want public reporting of high-quality data measuring the emotional and physical wellbeing of Victorian children. We have NAPLAN testing, but we actually think that there should be testing that addresses the wellbeing and the mental state of children.

**The CHAIR:** Thank you for that contribution. I am sure my time is up, so I will move on with the questions to Vicki Ward. Thanks, Vicki.

**Ms WARD:** Thank you both for coming. I imagine that you have got pretty busy lives, like everyone, so I do appreciate you taking the time out of your day to spend it with us. I also do want to give a quick shout-out to the Nappy Collective and thank you for the work that you have done previously with that. I have always had a box in my office every year, and my community has been very supportive of that program. So thank you for the work that you do there. It is terrific.

**Ms BLACKWELL:** Thank you.

**Ms WARD:** I just wanted to expand a little bit more on the ideas that you have got and the suggestions that you are putting forward to government—and thank you for that. So this is stuff that is coming through from your feed within your Instagram posts, and you said that you have been speaking to paediatricians. So around the nine-point plan that you have got, this is what you have brought together. So you are working as a working group on your WhatsApp and that is how you bring this together? Can you just talk us through your process a little more, please?

**Ms DVIR:** Yes. We are not only on WhatsApp. We do meet in real life, and we go out and we are very proactive. We have a lot of child psychologists that message us, and often that will involve actually going to meet them in person, because they feel very strongly about the welfare of children. So we have spent the last few months talking to GPs, child psychologists, teachers, other parents and paediatricians, and I suppose it is something that takes something from all of those fields. Some of them are kind of retrospective in terms of things that have happened that we feel have caused a huge amount of damage, and some of them are symbolic. You will hear in some of the testimonies that children still have anxiety that we are going to go back into lockdown, so I think that it is really important that the government does safeguard and uphold that policy—which is in line with UNICEF and the World Health Organization—that puts children front and centre. In particular, Jacquie and I both have children that were in year 12 last year, and I think that there will be cohorts of children that perhaps feel that they were forgotten. So I think it is really important that there is that accountability and that looking forward. Let us learn from the past and let us safeguard the children.

**Ms WARD:** Thank you. Have you or the children that you represent or anybody within this broader community or collective that you are a part of had the opportunity to bring that forward to government? Have you had any discussions with anyone at that level?

**Ms BLACKWELL:** In terms of our recovery plan, we actually have emailed a representative from every party in the state Parliament and asked whether we could put this plan to them, and we have met with Georgie—she came straight back. Aside from that we have not had any take-up of this. We outlined in our email who we are, what we have done and that we have a recovery plan that we would like to discuss and hopefully have adopted.

**Ms WARD:** Okay, so in the period that you have been active has the only time you have reached out to government been with your nine-point plan? Have there been previous discussions or opportunities to meet with government to talk through your concerns and work towards your nine-point plan?

**Ms BLACKWELL:** We had very much an ongoing dialogue with Minister Merlino's office last year. We did try and meet with him on quite a few occasions. We were also both involved in another group called the VCE What's the Plan Dan? group. That purely advocated on behalf of year 12 students because until even the middle of the year there was no understanding about how the VCE exams were going to occur, how the GAT was going to occur and whether there would be an alteration to the study guide. So we have had an ongoing dialogue and we have attempted to meet with ministers.

We have maintained quite a close contact with Merlino's office through his press secretary, and there was a stage where we were, like, on the phone nearly every single day. So we have tried to engage. We met with David Hodgett as well to discuss our plan, and we did have phone conversations with him. So we did try to reach out, but that almost sort of added to our frustration a little bit—that there were so many other issues that were being considered and that our issues representing children and the needs of children and the opening of schools were not really high on the priority list.

**Ms WARD:** Look, my eldest did year 12 in 2020, so I do understand the challenges that year 12 parents have been through over the last two years, and I do understand the uncertainty. You know, it was a bumpy ride, absolutely. I do not think that there is anybody who could question that at all. In terms of schools, can you talk us through a little bit more about what kind of mental health and wellbeing supports you would like to see at schools?

**Ms DVIR:** One of the things that we think would be really useful in school is just to have regular and dedicated time where the kids are, I guess, involved in a positive wellbeing program. That could look different for each school according to their needs, and they should have agency over that, but we do not have until next year for funding to come through. We need programs right now. That could look like once a week, according to the different ages, yoga, volunteering, doing a working bee together, doing non-competitive sport, hiking or excursions—you know, really looking at bringing the cohort together and just helping children feel competent and confident, working on the cohesion of the group. And we are not experts; we are not professing to be experts. But we know as parents doing activities with our kids makes them happy. We know that being in nature affects your mood. We know that giving back is a really effective way to bring people together—so just a program that looks at initiatives right now, because we are already in the third year of the pandemic. It is

already the middle of the year, and while there are some initiatives, we think that it should really be across the board at every school in Victoria.

**Ms BLACKWELL:** And to add to that, we know that there is also discussion of putting mental health experts into schools, but in a way that is a bit of a bandaid now. What we are trying to do is something that is a bit more organic, that is actually strengthening the children, giving them the ability to deal with the issues or the feelings that they have been through and to actually face the future in a positive manner. And also, having children, we know that a lot of them do not necessarily want to go and speak to a child psychologist or a mental health expert. They just want to get on with life, and they want to have all the tools given to them so that they can then re-engage with their teammates and rebuild their social skills and also just their sense of self-worth and purpose.

**Ms DVIR:** I might just add as well, Vicki: I spoke this week to an ex-principal called Adam Voigt from Real Schools, and he has a restorative justice program and a framework and he works very closely with schools. He has been absolutely inundated, because he has reported—and it was actually covered in the *Age* the other day in his op-ed—that the amount of bullying and conflict and huge social issues is absolutely rife across schools. Again, we are not the experts—there are people already doing the work—but it is giving the staff at schools the tools to help them manage the conflicts in a healthy way that then allows the children to learn, because if they have got all these issues—

**Ms WARD:** Yes. So do you think the \$218 million for the School Mental Health Fund is a step in the right direction then?

**Ms BLACKWELL:** It is a step in the right direction, but we want something that is more immediate and that can be accessed by every single child. I mean, sure, that is available to every child, but we want something that actually ensures every child is covered—programs such as this, where every child is doing an activity, having that time allocated to a wellbeing program on a weekly basis and no-one is missing out.

**The CHAIR:** I have got to cut you off there, Vicki. We will move now to Georgie Crozier. Thanks.

**Ms CROZIER:** Thank you very much, Chair. Thank you very much for coming before us. It is very important that we hear what you are doing. We have just met with the Victorian Mental Illness Awareness Council, which is an advocacy organisation for people with lived experience of mental health issues or emotional distress, and you in your opening statement said you are a voice for children—exactly this sort of group for voices for children, who have just been so impacted over the last two years. So thank you very much for doing that.

The Chair just asked about your structure and how you came together, and you said you have got 20 000 followers. It has just organically grown, really, from what you have done, because you have spoken out. Is that reaching all parts of Victoria?

**Ms BLACKWELL:** Yes. We have metropolitan, we have regional—you know, even in metropolitan Melbourne; it is all backgrounds. I mean, even today—Caitlyn lives in Footscray. We live in Hawthorn; we have never met before. It does cover everything, and we do cover teachers, students, parents. We have a lot of anonymous people who come to us as well with stories, and from all different backgrounds. I never thought I would be writing to a group about this, but I do not know what else to do.

**Ms DVIR:** Likewise we have a lot of teachers that follow us and that message us, and they are also private schools, public schools, young children, older children—so, you know, that has been a huge eye-opener.

**Ms BLACKWELL:** And we have children too that do write to us.

**Ms CROZIER:** I am interested in what the teachers are saying, because I think you said it is worse now than it was during the lockdown, because they are dealing with the profound impacts that have occurred to kids, and that is now being exposed because they are back in the classroom and they have got all of these issues. So in terms of those teachers, is there any differentiation of the issues at secondary level as compared to primary level?



**Ms BLACKWELL:** I think a lot of them are behavioural, and that manifests in different ways. So at primary age you are more likely to have a child hit another child, whereas in secondary school we are hearing a lot of online bullying and inability to deal with social pressures. So it is the same issue; it is just how a different age group brings it out. And then even with eating disorders or suicides and self-harm, you would normally think that that is only teenagers; we are hearing stories in primary school—the fact that a 10-year-old is hurting themselves. I hate to say that they are attempting to take their own life, but I do not even know if they understand what they are doing. So there is no real differentiation other than how it is manifested.

**Ms CROZIER:** Well, you touch on that. I mean, we do know that young girls did sadly and tragically take their own lives as a result of anxiety and issues that they were dealing with through the last two years—very sad cases. You spoke about the anxiety, depression and suicide with what the GPs and paediatricians are speaking to you about. I have certainly heard that from GPs too. They are pleading with me, ‘You’ve got to do something because of the number of kids we are seeing’. So in terms of that recovery and the plan that you talk about, the community sport issue, I am interested in that. I am also interested in your views on the lockdowns. I know that the national cabinet wanted schools to stay open; it was the Victorian government that took a different view. In terms of the lockdowns and in terms of the re-engagement through the community sport program, what do you think and what are you hearing from teachers and other groups?

**Ms BLACKWELL:** I mean, our children missed a year of school. There is no other way of cutting it. Yes, there was online school, but not every child engaged in online school. So they have absolutely missed a year. I spoke with the principal earlier this year of a big boys school, and he said to me, ‘We don’t know what we’re getting’. He said, ‘There are boys we haven’t seen for 12 months, and they’re all going to be coming back to school’. And he said, ‘We have to firstly work out how to teach them then figure out who they are’. And I think that that is a huge issue.

The lockdowns went on too long. Our children are the most locked-down kids in the world, and they did not need to be. Other schools opened up internationally much earlier than us, and they did a test to stay. Our kids were made to stay at home. Not only that, they had their playgrounds taped up and were told that, ‘No, you children can’t go and play’. That is horrific. As parents, we do not want to talk about our own kids because we are hearing such harrowing stories, but even our own children who might have got through okay are not okay. I have a son who is a sports nut. He could not do his sport, so he over-trained in his bedroom. He suffered stress fractures in his back because he was doing it incorrectly. That put him off for a season—what that does to a 15-year-old boy. I had a child who at 11 was diagnosed with an eating disorder and is still battling it two years later. She is 13, but she is fine compared to some of these kids. And we can only point to the lockdown, because of the mental state of children who are suddenly told, ‘You cannot interact, you cannot grow socially, you cannot be with your friends, you cannot ask your teachers questions, you are just to sit there with a screen’—or worse for some kids, a worksheet. Once every couple of weeks they were given a worksheet.

That is not what childhood is about. They have missed the fun. They have missed the sport, the community sport. You know, they are coming back, but the injuries that physios and sports doctors are seeing are because these kids have grown, they have lost peripheral awareness, they have lost sense of self. In football we are seeing a lot less girls coming back even though there is a push for girls in sports. So certain demographics have been affected—and certain suburbs. We love what—I think it is—the Western Bulldogs are doing. They are paying the fees for kids to come and play football. That is what we actually think the government should be doing statewide to get kids back, because we know that physical health aids mental health.

**The CHAIR:** We have to move on.

**Ms CROZIER:** Thank you very much indeed.

**The CHAIR:** Mr Bull.

**Mr J BULL:** Thanks very much, Chair, and thank you both for being here to present to the committee today. I want to also acknowledge how challenging and tough these past 2½ years have been. As a parent at the other end of the scale, my little one is nearly three, and she has been a baby of the pandemic. She could sanitise her hands and knew where the masks were kept in the house before she could do a lot of other things. So I just want to acknowledge that it has been a very tough and challenging time.

You both spoke about the 9-point plan, or the plan to go forward, I think you said. I just wanted to get your views on the government's significant investments after the Royal Commission into Victoria's Mental Health System—around \$5.1 billion across two budgets, \$842 million in child and youth mental health, and my colleague the Member for Eltham referenced the \$218 million for the Schools Mental Health Fund. But I also just wanted to get your understanding, or your views, of some of these investments, including the \$310 million to reform infant and child and youth mental health services and just to get a sense of how you view those significant investments given that Victoria was the first state in the nation to have a royal commission into mental health—and obviously then the pandemic arrived on our shores in early January 2020. It is a lengthy run-up to my question, but I just wanted to get a sense from you both about those investments and how you view those in the context of the detail within that 9-point plan.

**Ms DVIR:** Look, we are not really here to deeply go into the current funding. I think overall, yes, it is hugely important, and we think it is a great step that the Victorian government has made. We know that children and adolescents already were suffering from ill mental health before the pandemic. Victorian children, we can assume, have suffered far more because we were the most locked-down state in all of Australia. We know that they were already starting from a vulnerable point. We actually bumped into Mr Merlino the other night at an event. We were talking about the mental health fund that has been rolled out. Now, just as an example, the mental health fund has started in regional and rural schools. The children that were the most locked-down were in Melbourne. I am sure that there are reasons for that, but I would imagine that children in Melbourne have been far more affected and really need that support. The support for metropolitan schools launches next year, so that means we are already having a whole year without that service. And childhood is fleeting—we need to address them now.

I will hand over Jacquie in a minute, but we also know that there is a huge shortage of mental health practitioners. We get messages from parents all the time saying, 'I'm in despair; I cannot get help for my child. I can't get in to see a psychologist or a paediatrician or a counsellor'. I guess that is what we are seeing and hearing on the ground. Jacquie, do you want to add anything?

**Ms BLACKWELL:** I would like to say we welcome any spending by the government into mental health, but given that we had the royal commission into mental health and then we plunged our children into a lockdown, we actually made the situation a lot worse. So that has to be acknowledged—we had a problem, the children were already suffering and then we locked them down. And we continued to make them feel that they were not being heard or that they were punished. I think we exacerbated a situation, and now we are almost trying to play catch-up. Hearing these stories—these stories did not have to be as bad as this. We are here today to comment on the impact of the pandemic orders, and our belief is the pandemic orders went too far. There was no consideration for the needs of children. So whilst we welcome the funding, our issue is that the situation is worse than it should be. We actually need to do more to address it. We have children that are scarred. We just want that to be acknowledged and we want consideration now to be given to how we help all these children—not even the ones with severe mental health issues, but how do we help every single child who was impacted. Some of it does not have to be huge funds, it has got to be just a change of mindset.

**Mr J BULL:** You used some really important words there. I think you said, 'It didn't have to be as bad as it needed to be'. The committee heard some earlier evidence about projections, forecasts and what may have been in terms of case numbers of infections and possible deaths to result from the actions that were not taken. So what I am really interested to find out is: what is Shadow Pandemic's position or view, what is your view, around the mental impacts of our young people within the community losing a grandparent, a mother, a father, someone within their local community because of COVID or long COVID, which we are still learning a lot about?

**Ms BLACKWELL:** I think, you know, losing a loved one is always hard on a person, but I think some of those studies and projections that you are referring to—I mean, there were lots of them. Some of them were very extreme—that we were going to have a ridiculous number of deaths—but those have been disproven, because some of the inputs to that data actually gave rise to a far worse scenario. And the experts that we have been engaging with, a lot of paediatric ones, are pointing to other studies and have been very good at saying, 'Actually, let's not make this outcome look worse than it is'. And I also think that saying, 'How will a child feel if they lose a loved one?' is actually almost a little bit cruel, because of course that is not pleasant. But why should we say, 'Well, I'm sorry, children. You can't go to school. You have to stay in your bedrooms for effectively almost coming up to two years, because if you don't, you will kill a grandparent'. That is effectively

what that question is almost alluding to. It could have been done far more sensitively. There could have been test to stay. If we look at how most of COVID was spread, it was through adults. It was not through children. And where the cases were highest—I mean, now it is slightly different; it is more in some of the schools—was in the 20-, 30-, 40-year-old age bracket.

**Ms DVIR:** Sorry, I will just add one point, which is—

**Mr J BULL:** I just need to get a final question out, but go. Sure.

**Ms DVIR:** Okay. We very firmly believe that it is not the job of children to keep adults safe. The burden should not ever be on children, and the burden has gone far and above keeping adults safe. So I just want to really make the point about that, and that is a view that is echoed by paediatricians—that it is not their job. And it has also caused a great amount of anxiety in children that they are going to kill their grandmother or their grandparents. So we feel that that is not really a view that we align with, and we think that it is really unfair and unjust that children have had to carry, you know, the greatest burden in this pandemic. And now I will hand over for you.

**The CHAIR:** We have got to move on. You have had your time, Josh. Moving on to Ms Kealy.

**Ms KEALY:** Thank you very much, Suzanna. Thank you very much, Jacquie and Moran, for the compelling evidence you are providing today. Chair, if I just may, I found it very upsetting to hear all of the firsthand experiences read out by Jacquie and Moran at the start of the hearing and the further evidence. I think it might be worthwhile reminding the people who are tuning in and listening to this that there are helplines that they can call—that they should reach out for support if they are finding the evidence that is provided today particularly traumatic or upsetting. Beyond Blue is 13 22 46 36, Lifeline is 13 11 14 and Kids Helpline is 1800 551 800.

Jacquie and Moran, again, thank you very, very much for your evidence today. I am interested in going back to some of the firsthand examples and the comments that have been made to you by members of your group, particularly around the individuals where the parents saw that their kids needed support, they needed to see somebody but they were not able to get any help. I was particularly compelled by an example you read earlier of a young girl who was not even 15 who was gang raped after some pretty horrific experiences throughout lockdowns and the only support she has been able to access is to see an ED, and then she has not been able to get any private or public provider to see her since. Is what you are hearing that even in those extreme circumstances of a young girl being gang raped, they are not able to, still, access support that they need to make sure they can get their lives on track sooner rather than later?

**Ms BLACKWELL:** The child in question was given telehealth but apparently could not engage in that. She must have been 13 or 14 at the time. For a child to have been through that trauma to then have to do what we are doing in talking to you—I mean, it is not a natural environment—and to disclose how she has been feeling, so she opted out of that. My understanding, based on the story that came in from this paediatrician—there was a much longer version of it—is that she has not been able to engage back at school. And they cannot get into a public or private clinic, because you cannot. So many of these providers' books are closed. We had one person who said they were given a list of names and 90 per cent had their books closed and by 10 per cent they were told, 'We can possibly see you in six months if there's a cancellation'. The psychologists would love to see the child, but they just do not have the capacity. And then you also have a child who has been through some trauma, lost confidence and almost gone through an altered personality, obviously from this, who then has to be willing to go to that. So it makes it a lot harder.

**Ms DVIR:** I might just add we have also spoken to emergency room doctors at the Alfred hospital—this is all anonymous—and at the Royal Children's Hospital. The doctor that I spoke to at the Alfred hospital said 80 per cent of what he sees in the emergency room is because of mental health-related issues and self-harm. And the doctor that I spoke with in the emergency room at the Royal Children's Hospital said that the majority, again, of cases that are coming into the ED are parents bringing normally an adolescent that is in mental health distress, and they have nowhere else to take their child. They have no other help, and there is nothing that they can do for them.

**Ms BLACKWELL:** There is one further story. There was a GP I spoke to the other day. She was saying she has a patient with a severe eating disorder and the parents have been told to just monitor her pulse and her

heart rate at home and to take her to hospital if it hits a certain level, because there are no beds available. So you have a child who weighs less than 40 kilos, and they are basically having to hover over her waiting to see if she is low enough that she might then go into a coma so they can take her in and maybe she will get seen, because there are no beds. That is not a way a parent needs to live.

**Ms KEALY:** I agree wholeheartedly, and just hearing it is very, very upsetting to hear. Thank you for sharing that. I am not sure if you have listened to the other hearings that we have had, but when evidence was provided at the last public hearing we heard from the Australian Association of Psychologists that they had put forward a proposal to the minister that they could provide funding for provisional psychologists—so people who are theoretically trained but have not done their supervision—to get paid to do that supervision, and that would unlock thousands of psychologists across the state. They had written to the minister six times and had not yet received a response. Does it surprise you that the government have had opportunities like that put to them, perhaps similar to opportunities that you have put to them around your plan and your concerns around youth mental health with the minister not responding to you—does it surprise you that the government have failed to listen about the severe impacts of harm to mental health and also some of the solutions that have been put to them?

**Ms BLACKWELL:** No, it actually does not surprise me, because I think it is like a lot of things. In the past we used to say that there was a huge issue in aged care, but no-one really wanted to talk about it because it was too big a problem. This one is also a massive problem, and there is no quick fix. To actually then listen to it is going to be expensive, it is going to very time consuming and there is going to have to be an admission that things have been done incorrectly.

**Ms DVIR:** And I think, Emma, a great example of that is the masks on those four year levels in all of term 1. There was such an outcry from paediatricians, child psychologists and infectious disease doctors—there was a huge outcry, and we were part of that—that masks needed to come off children. It is illogical, it is unethical, it does not make sense and they need to go. The government ignored all of that, so that is why we think a minister for children's recovery is absolutely critical. We want children at the forefront of every single decision made by this government in regard to the pandemic.

**Ms BLACKWELL:** And we want paediatric experts to be part of all the decision-making.

**Ms KEALY:** Which is very understandable. Can I just ask—

**The CHAIR:** Emma, your time has unfortunately passed. Just moving on now to Mr Erdogan.

**Mr ERDOGAN:** Thank you, Chair. Thank you, Jacque and Moran. Thank you for appearing here today and for your advocacy on issues that have come to you as parents concerned for the welfare of our children. The last two years have been a challenging time. Just reviewing some of, I guess, the information that was provided and reflecting on the discussion, I did have a question just broadly, because I understand your broad policy was that schools should be opened first and the last to close. That was a general theme I got out of the evidence so far. Does your organisation support vaccines for children? And did you have a view about the need to wait for double dosage before opening up? I just was interested to see what the organisation's view was on that.

**Ms BLACKWELL:** We supported vaccination of children because we support paediatric experts. So we kept pointing out that, whilst we support the right to an individual decision, the paediatricians were saying that you should vaccinate your children and, given that we have always called for paediatric experts to be part of the planning, we supported what they were saying.

**Ms DVIR:** And we also respect that some people may be vaccine hesitant, and we think that we need to model to our children that we live in a tolerant society. We have reached nearly 93 per cent vaccination coverage. We are against mandated vaccines, so we are very concerned about the teachers that we have lost. There were thousands of teachers just stood down recently because they had not had their booster. That is going to impact children. It is only going to make things worse. So while we do support vaccines, we also understand that people may have different opinions about how they wish to protect themselves.

**Mr ERDOGAN:** I understand, yes. And I guess, as members of Parliament, we have people approach us, and people have had different viewpoints. Some people obviously agreed that schools had to be closed down.

Some were saying that they should not have been closed down. What is your view? Do you believe that we should never have closed the schools down and they should have stayed open throughout the pandemic? Is that the view of the group?

**Ms DVIR:** We think that they should not have been locked down for as long as they were. We think that the government should have looked at different innovative solutions around how we could teach our children. We just wanted them to prioritise the children, and instead the schools were just closed endlessly. There was never an end point in sight. So again, having that minister for children's recovery, having the independent panel of paediatric experts—let us weigh up the harm that we are causing children by continuing to close schools versus mitigating COVID-19. And obviously we did not know as much last year, but we just really feel that children need to come at the forefront of every decision, especially after two years.

**Ms BLACKWELL:** And part of where we came to once we realised how bad it was for children—we wanted a plan. We came together because we wanted a plan to reopen schools. We wanted some assurances for children. We started doing research into what was going on overseas, and through that research we were like, 'Actually, we are not handling it the right way'. And part of it is that is where we say you have got to go to the experts. You have got to look at evidence overseas. You have to listen to what the paediatricians were saying. And the lockdowns—whilst initially, yes, we supported them in their entirety and we understood, we started to question.

**Mr ERDOGAN:** Thank you, Jacquie, for reflecting. Because I think the health restrictions were not just unique to Victoria. As we know, across the world the pandemic as it swept through communities led to thousands, if not millions now, passing away through this virus, and the impacts on health systems and of health restrictions such as lockdowns were quite common around the globe. And I guess there is always that competing interest that you are kind talking about. But did you get any feedback from parents raising their concerns about family or friends getting seriously ill, or did you ever get that feedback from teachers in the workforce? Because in different evidence we have heard from other sectors, such as aged care and others, there also was an aspect that came through that some of the restrictions, say on visitation rights at these institutions, were because there was also a workforce fear about contracting the virus, and they were hesitant as well in opening up more broadly. In their circumstance it is more so for visitors. Obviously in this setting it is about the schools, the kids returning before we have the double-dose vaccination. So is that something that your committee has heard from the community?

**Ms BLACKWELL:** Yes. We also reached out to the Australian Education Union and to the independent schools association to get their feedback and their input. They did not always welcome our call, but we wanted to understand from them, and we did have—as we said, we have got 20 000 followers, and I will tell you we do not actually agree on anything, most of us. We have those that did not want the schools open, those that were concerned about staff and loved ones, those who wanted to homeschool their children or protect their children and keep them at home. We have anti-vax people, we have pro-vax people. We have anti-mask, we have pro-mask. I think that is the strength of our group, that we as the cofounders tried to pull all those opinions together and bring it back to what is in the best interests of the children, how we can help the children, and that is where we again pointed back to the experts. We would continually go back to our followers and say we are not advocating for those issues and we respect everyone's rights and we know that there is a risk involved, but there is also a risk to the children by keeping them in the situation that they are in.

**Mr ERDOGAN:** As a parent of a young child as well, I think we could all agree, and all committee members could agree, that the welfare of children is paramount, so again I just want to thank you for sharing your organisational perspectives. If I have got time, Chair, I have got one last question, or is that my time?

**The CHAIR:** No, your time is up. Sorry. We might come back if we get a moment. I am sorry about that, but we are under pressure.

**Mr ERDOGAN:** Thank you again for appearing today. As always, it will inform the deliberations of the committee moving forward.

**The CHAIR:** I will go now to Kim Wells.

**Mr WELLS:** Thanks, Chair, and thanks for presenting today. In the past we have had a lot of people presenting who have just gone out of their way to avoid answering questions, so it is so refreshing for the both

of you to be here. I just want to go back to one of the questions that was asked before about the school mental health funding. My understanding is that in rural and regional schools it will be in term 3 this year, but in metro schools it is not going to be for a couple of years. Surely that part of the funding has to be fixed.

**Ms BLACKWELL:** We would like that, because the thing is the children are suffering now—you have heard from teachers what the kids are experiencing. I mean, aside from the fact that some of them are academically behind, their social behaviour, their anxiety, their level of concentration and focus—if we leave that for another couple of years, they are still just going to be battling through. We need to provide programs now, not in two to three years time, and particularly in metropolitan Melbourne because that is where the children suffered the greatest.

**Mr WELLS:** And the point that was made earlier that with metropolitan kids being the most locked-down schoolkids in the world, I would have thought the mental health programs would have been available now to be able to deal with that instead of in two years time. It just seems so stupid.

**Ms DVIR:** I would have thought that too.

**Ms BLACKWELL:** In two years time is too late.

**Ms DVIR:** And, you know, I spoke to a child psychologist the other day because children do not exist on their own; it is also the effect on their parents. Everyone is exhausted. The teachers—we have an exhausted workforce—we have parents trying to do their best and manage children with mental health issues, and as a parent when you are dealing with that, that is really tough work. The psychologist that I spoke with said she is medicating children far more heavily and more frequently just because the parents cannot cope, and it is sometimes an issue of keeping them safe because it can cause difficulty for the parents in managing difficult behaviours, so the longer we leave it the worse it is going to be.

**Mr WELLS:** That is what all reasonable people would think, especially parents—that help is needed now with these pandemic orders, and that is what this committee is all about. So the message I am sensing is that that funding has got to be available now, not in two years time, especially for the metro schools.

**Ms BLACKWELL:** It has got to be available now and it has got to cover all schools so all students have the same access.

**Ms DVIR:** What we would really like to see is a child lens on all the decisions that the government takes. For example, we just had NAPLAN. That was rolled out to all the different year levels. It would have been a perfect opportunity, as well as measuring the literacy and numeracy skills of students, to measure their wellbeing. Let us get data; let us actually find a picture. We have qualitative evidence; let us actually get some high-quality data to paint a picture of how children are going. So again, it is just having children's wellbeing at the front and centre of every single decision that the government makes.

**Ms BLACKWELL:** And whilst we know that NAPLAN is a federal program, it would actually be a great thing to do a snapshot around the country to see how the Victorian children are going and to divide it into, as NAPLAN is, various areas within the metropolitan, and different socio-economic as well, because you have your school bands, so it would be interesting to see where those kids are. We believe that in particular vulnerable children have borne the biggest brunt of this.

**Mr WELLS:** Yes, well said. Just along the same line, in your discussions with paediatrics and other experts, is it your sense there has been an increase in the abuse towards children because of this lockdown?

**Ms BLACKWELL:** Do you mean it is behind—

**Mr WELLS:** Behind closed doors, yes.

**Ms BLACKWELL:** We did have someone contact us—a teacher—at one stage. She said, 'Children go to school because it is a safe haven, but also because teachers observe things and other kids observe things. You can see a child who is suddenly quiet. You can see a child who might soil themselves or a child with bruises'. These children were behind closed doors and no-one knows. There is one organisation that has raised this. We did speak with them last year, and for the life of me I cannot remember who it was, but they said that they were very much worried that this has become like a hidden issue. It is like a hidden pandemic of abuse because

no-one was watching out for the children and the children had no-one to speak to. It is a bit like the abuse of women might have increased in the pandemic because they were also under various other stresses that families were under. With children we know that there will have been cries that have gone unheard.

**Mr WELLS:** Yes, which is devastating, but it is just a very good point, because if it was happening behind closed doors, at least if the schools had been open, they would have been able to go to school, there would have been observations. There was a chance for the kids to be able to talk to other kids or teachers.

**Ms BLACKWELL:** Mandatory reporting only works when you see the child to report the incident.

**Mr WELLS:** Yes, exactly. My time is nearly up. I could never understand the shutting of playgrounds. I have to say that, coming from the country, I took playgrounds for granted. You would go there on a Saturday afternoon or a Saturday morning or Sunday afternoon and they used to be packed. When they were shut down the devastation meant that the kids were inside on those iPads watching that game *Minecraft* or craft mind or something that drives parents nuts. Now the problem is trying to get them off that iPad because they are so addicted. It is becoming a real issue, and I understand that parents are going spare because of that issue. Once upon a time they were out playing on the playground. They were shut down, they are inside playing the iPad games. It is like an addiction.

**Ms DVIR:** It is an addiction.

**Ms BLACKWELL:** My school newsletter the other day highlighted that they had been advised that children are now spending up to 5½ hours on technology outside of school hours, and that means they are inside on an iPad; they are not outside. The reason for that is because that is how they socialise. All our children, young ones, they know how to do a Zoom, they know how to do Houseparty, because that is how they interact with their friends. That in itself leads to huge other issues that kids that age should not be exposed to and that is the issue with social media, but that is another whole problem here. But they had nowhere else to go. How do you see your friend? But aside from that, I think the shutting of playgrounds was just a way of punishing parents in a way, because it is like, 'We'll hurt the kids so that you do what you're told'. I think that is kind of twisted logic because children have a right to be children, and childhood is about playing on the swing, going down the slide. The government took that aspect of childhood, the fun, away from children.

**Mr WELLS:** Yes. I have to say that I just did not understand the logic. My last question—

**The CHAIR:** Kim, your time is up, but I think there is time just for everyone to have one more quick question. So if you would like to go first, that is fine.

**Mr WELLS:** Sure. It is a point that you have both made. With the homeschooling and the schools being shut down a lot of parents that I spoke to felt that they were failing because they were not able to get their kids, their students, to focus online. The parents felt that they were failing, especially mums, saying, 'I just cannot get my son or daughter to focus on the homeschooling', and that must be a big issue that is coming through.

**Ms DVIR:** Yes. I mean, you know, children never signed up for remote learning. Homeschooling is actually when you make a choice. You choose to educate your children at home and you can take them out of the home. But children never signed up for remote learning. I have four children, and I had one child who was a disaster on remote learning. It caused a huge amount of stress, and it has affected her until now. There were days when my biggest achievement was just getting her outside for 15 minutes in the fresh air. I think remote learning was an absolute disaster.

We have not talked too much about parents, but a lot of parents are also working. They are business owners. I know there is one business owner with two children whose hair was falling out and who had to take medication for anxiety because she has two neurodiverse children that she was trying to homeschool and run a business. It is a completely untenable and unrealistic expectation.

**Ms BLACKWELL:** And on top of remote learning I think that we also have to look at the fact that we did not just have one lockdown. We had a lockdown, back to school, then we had a lockdown, back to school. And if you watched children, they might have engaged in the initial lockdown in remote learning, but then each time it got harder and harder. My year 12 girl actually made a video last year—it was great; we love TikTok—and it was the emotions of going through year 12 with lockdown. So it would be like, 'I'm back at school', and then

you would be like, ‘Oh, at 11.59 we’re going back into lockdown’, and just the faces of the girls in her class. I do not blame the kids for giving up, because they would get excited and then they were back, ‘Yes, we are back on online’, but you watch them slowly—‘Well, what is the point? Are we going back to school?’.

**The CHAIR:** We actually will not have time for everyone to ask another question because we have been hearing your answers more fully. I want to thank you for joining us today and providing the evidence that you have. You will receive a transcript of the hearings and what you have said today, including a list of any questions you have taken on notice, although I am not sure that you have. We will now take a short break. Thank you again.

**Witnesses withdrew.**

DRAFT