



COVID-19 and the Community Sector





VCOSS Submission to the PAEC Inquiry
into the Victorian Government's response
to the COVID-19 Pandemic

August 2020

The Victorian Council of Social Service is the peak body of the social and community sector in Victoria.

VCOSS members reflect the diversity of the sector and include large charities, peak organisations, small community services, advocacy groups and individuals interested in social policy.

In addition to supporting the sector, VCOSS represents the interests of Victorians experiencing poverty and disadvantage, and advocates for the development of a sustainable, fair and equitable society.

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A fully accessible version is available online at vcoss.org.au/policy/



VCOSS acknowledges the traditional owners of country and pays respect to past, present and emerging Elders.

This document was prepared on the lands of the Kulin Nation.



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Introduction

The lives of Victorians changed abruptly in March 2020. Within weeks, COVID-19 triggered a crisis response from our health system. It put lives at risk, especially those already vulnerable like older people, people with chronic illness and Aboriginal people. It tested our community's resilience and safety net. And it thrust thousands into poverty.

Vulnerable people are always hit hardest in emergencies or disasters, and so it is with this pandemic. COVID-19 continues to disproportionately impact people facing disadvantage and marginalisation, who may not have access to the tools, resources and supports to know about, understand, prepare for, or comply with public health directives, and remain safe.

With cases on the rise across Victoria, it is again those who are most vulnerable (for example, older people in residential aged care, people in public housing, in insecure or precarious work) who are bearing the brunt of the health and economic impacts of the virus and the public health response.

As they always do, community organisations have stepped up to help their communities. To shift to new models of service delivery, to channel information to communities and to advocate for those people who risk being lost in government responses. But they do so in an environment of uncertain funding, changing rules and emerging workforce shortages.

On so many fronts, we have risen to the challenge and done things that were 'impossible' just months ago. Things like flexible and remote learning, a Housing First approach to rough sleeping, financial assistance including a fair rate of income support, and remote medical appointments. Things that we thought would take 10 years we achieved in 10 days.

VCOSS applauds the speed with which governments have scrambled to respond to the social impacts of this disaster. But at the same time, that speed and that scramble underlines how threadbare some of our social protections had been and continue to be. Our safety net was revealed as being riddled with holes that too many people slipped through, including:

- Migrant and casual workers unable to access Commonwealth income support
- Women in casual jobs with no access to sick leave (until government supports were introduced) and people in precarious employment who felt unable to miss a shift without putting their livelihood at risk

- Increased isolation, risk of ill-health and violence, abuse and neglect for people with disabilities, as the community focused attention on aged care and hospitals.”
People with no internet access at home, who could no longer visit their local library or neighbourhood house for assistance
- Parents without room in the budget for a new iPad, so the kids could learn from home.

So as we eventually move through this moment of crisis, and turn our minds to recovery, we must seize the opportunities that are presented. To build back better, with a stronger safety net and greater resilience to future challenges. To bridge the digital divide. To embed the best of the advances from this time, like telehealth and flexibility in learning environments. To invest in economic recovery measures that also address other challenges we face, like climate change, homelessness and gender inequity.

This submission is based on the feedback of VCOSS members and the people who use their services. As the situation continues to change rapidly, new issues will emerge. We cannot hope to capture every challenge, innovation and opportunity in this submission. So VCOSS will continue to work closely with government and the community sector to ensure responses that are community-informed, equitable and inclusive of the diverse needs of the Victorian community.

An engaged community sector

KEY POINTS

- Strong partnerships have been developed between government and community sector
- Community service organisations have rapidly adapted their service models and types of support to meet community need and increasing demand for services
- Funding uncertainty means community sector organisations are unable to plan for the future or retain skilled staff
- As confirmed cases rise across Victoria, frontline service delivery organisations are struggling with workforce shortages
- Donations, revenue raising and volunteer capacity has dropped significantly across the community sector
- There is further opportunity create jobs and grow the community services industry workforce by expanding the Working for Victoria program

The COVID-19 pandemic has highlighted the crucial role that the community and social service sector plays during emergencies and crises. From the onset of the COVID-19 pandemic, community organisations galvanised to support and meet the needs of both existing and new clients, as well as their local communities.

To ensure the continuity of essential community services, and to meet the anticipated increased demand as a result of COVID-19, the Victorian government provided an additional \$275 million in funding across the community sector, for:

- Carers
- Culturally and linguistically diverse communities
- People with disability
- Family violence and child and family services
- Food relief
- Housing and homelessness
- LGBTIQ+ people
- The mental health system
- Residential care.

COVID-19 has highlighted not only the role that community organisations play in building and maintaining the resilience of vulnerable people during a crisis, but the critical role that peak bodies like VCOSS play in partnering with government for improved emergency and disaster response, relief and recovery measures.

A strong partnership between government and community sector

Several months in to the pandemic, Minister Luke Donnellan said

I want to say thank you. I have never seen the levels of cooperation between the department and community sector organisations... (and) it is going to be an ongoing partnership with this. There has been great goodwill. I think there'll be great learnings out of this as well."

The strong pre-existing partnerships between government and VCOSS, as well as other organisations, have enabled a responsive and focused approach to COVID-19. They have helped ensure community organisations could continue to provide essential services to Victorians to support and maintain their resilience throughout the pandemic.

VCOSS encourages the Victorian government to continue strengthening these relationships and partnerships with the community sector to collectively understand and address the needs of Victorian people and communities on a day to day basis as well as during a crisis.

VCOSS and the government have expanded on existing, and have established new, partnerships and protocols to share advice and information and manage issues relating to COVID-19. This has included working across a range of existing and new groups including:

- **The State Relief and Recovery Team (SRRT):** VCOSS was invited to become a member of the SRRT, one of six key teams operating at state level that supports state level coordination of relief and recovery for emergencies. The SRRT has planned and implemented a range of immediate and shorter-term relief measures for Victorians including food, accommodation, psychosocial and medical support.

- **VCOSS-DHHS Human Services and Health Planning and Implementation Committee (HSHPIC):** This long-standing bi-monthly committee moved quickly to fortnightly meetings, allowing its members DHHS, peak bodies and key funded organisations to identify funding and policy priorities, emerging needs and issues management throughout the pandemic.
- **DHHS COVID-19 Community Services Planning and Coordination Office:** This new office has worked closely with VCOSS, peak bodies and community organisations to prepare sector-specific COVID-19 plans to assist service providers in planning for and addressing the impacts of coronavirus on business continuity, workforce and service delivery.
- **DHHS-VCOSS COVID-19 Information Forums (webinars):** Regular information forums are delivered to the community sector by DHHS and VCOSS to provide up to date information and advice on public health and the COVID-19 response, community sector considerations, and Victoria's relief and recovery measures. They also allow organisations to ask questions relating to OH&S, public health, service delivery and other matters.

These partnerships have led to new and constructive ways of working within government, within the community sector and across both. Importantly, they have been characterised by a unified purpose, a focus on key issues, shared values and shared ownership.

An adaptative community sector

Community organisations are agile. They have the ability to swiftly mobilise resources, expertise, and essential services in response to disasters. They are also capable of fostering social capital, a crucial component to disaster resilience.¹ Due to their close ties and trusted relationships with members of the community, they can absorb and integrate messages to a wider audience.²

During the COVID-19 pandemic, community organisations have quickly adapted to new ways of working and delivering services to vulnerable Victorians. There are countless examples of services adopting new remote service models, connecting with isolated or marginalised community members in innovative ways, or pivoting their delivery to emerging community needs. For example, peer group programs like the SMART Recovery program

¹ N Kapucu et al, *Nonprofit organizations in disaster response and management: A network analysis*, European Journal of Economic and Political Studies, 2011, 4(1), 83–112.

² FH Norris et al. Community resilience as a metaphor, theory, set of capacities and strategy for disaster readiness, *American Journal of Community Psychology*, 2008, 41(1–2), 127–150

offered by alcohol and drug treatment programs have moved to online delivery, with participants developing their own ways to make social connections to complement the online delivery.

Old Courthouse Community Centre in Casterton made daily calls to isolated members of the community before the pandemic, but now one volunteer is matched with one resident to foster meaningful connections.

VCOSS is partnering with the Future Social Service Institute to better understand the adaptations services have undertaken, and the demand they are facing. Early findings from this research indicate increases in high-value collaboration, rapid shifts to digital service delivery and more flexibility in the service offerings available to people. Services are trying new methods to build relationships with clients, and to protect their privacy within these new arrangements.

Government funding partners have supported this agility, by providing organisations with flexibility in their contractual arrangements.

Uncertain funding

The community sector, like many other industries, is facing new challenges and disruptions because of COVID-19. Demand is high, and services are transitioning to new service models, including telehealth and remote delivery. They are experiencing reductions in fundraising and donation income. For some, the end of JobKeeper and the uncertainty around the ongoing federal funding of the Equal Remuneration Order loom as financial cliffs. Many contracts have been extended for only three months, awaiting the delayed state budget in late 2020.

Organisations are already struggling to make ends meet. Many organisations now lack adequate funding to sustainably deliver services and plan for the future. Government funding for social service organisations has stayed at two per cent per annum over the past six years. Yet Fair Work Australia last year raised the minimum wage by three per cent, and other costs, like the increase to the superannuation guarantee, continue to rise.

With low indexation rates in recent years, and increasing costs, government funding has slipped behind the true cost of delivering services. Underfunding community organisations leads to job losses and reduced support for vulnerable community members.

Funding certainty is urgently required for the remainder of the 2020-21 financial year.

A fair indexation formula incorporating wage rises, the superannuation guarantee, portable long service leave and the different costs of delivering services in rural and remote areas is desperately needed to guarantee community service organisations are sustainable and effective into the future.

Increased demand

Demand was high for community sector support before COVID-19. In 2019, four in five community sector staff reported that complexity of need among the people increased in the last year, and over two thirds reported that levels of poverty and disadvantage among the people they work with increased. Three in five community sector workers reported that the numbers of clients their service was unable to support increased during 2019.³

As a result of the pandemic, demand for services is rapidly increasing. VCOSS members report that new clients, who have never needed community sector services are before are seeking assistance. One member estimates a quarter to a third of clients in June were not vulnerable before COVID-19. New clients are approaching homelessness services, when old informal arrangements (for example couch surfing) were no longer possible under stay-at-home restrictions.

One emergency relief provider reports they get about 20 applications each month for food vouchers. They got 500 applications in April 2020.

As well as new clients seeking support, some existing clients are seeking additional or more frequent support. For example, one VCOSS member reports that young clients experiencing increased isolation and less social connection are requesting daily check-ins with support workers. Other services are proactively reaching out more regularly, for example to vulnerable children and families, to increase visibility with fewer contact points at school, kinder, maternal child health and even Child Protection.

Increased rates of income support, through the Coronavirus income support supplement, are likely masking the true demand in the community. So too are initiatives like the eviction

³ Australian Council of Social Service, *Community Sector Survey 2019*, January 2020.

moratorium for renters. Services are bracing for a further increase in demand, and more people thrust back into poverty, if these supports are rolled back later in 2020.

At the same time, donations and revenue raising opportunities, which many community service organisations rely on, have dried up. The majority of volunteering activities have also ceased. The Australian National University found that almost two-thirds of Australian volunteers stopped volunteering during the pandemic.⁴

Access to protective equipment

Expectations, requirements and guidelines around testing, personal protective equipment (PPE) and cleaning have changed rapidly throughout the pandemic period, as we learn more about the virus and the places of transmission in Victoria. While this is understandable, it has at times left the community sector underprepared and confused. For example, advice about the types of masks some community service providers should be using was recently updated. Information about the changed advice was uploaded to the DHHS Funded Agency Channel, but not otherwise disseminated. So for organisations who did not check the channel, they were not aware of the change. They also had to purchase new types of masks, bearing the cost of the changed advice.

Adequate training also needs to be made available to community service organisations, about the best-practice use and management of masks. Some staff, who have not previously worn PPE during the delivery of frontline services, are unfamiliar with mask-wearing, and could inadvertently put themselves or their clients at risk of infection, without adequate training about appropriate usage.

Disability services, among others, struggled to access PPE in the early weeks of the pandemic, putting people with disability, their families and carers at risk of illness. Lack of PPE caused people with disability to cancel services essential to their health and wellbeing. Equal access to PPE for disability services and workers took too long to put in place. Changing NDIS advice also presented a barrier for people with disability; purchasing masks was initially not considered part of NDIS participant's plans, so people were unable to use plan funds to purchase masks.

⁴ N Biddle and M Gray, *The experiences of volunteers during the early stages of the COVID-19 pandemic*, Australian Centre for Social Research and Methods ANU, May 2020.

The introduction of a dedicated email portal for PPE requests was welcomed by VCOSS and its members, providing a clear avenue to securing vital safety equipment.

Masks or face coverings were made compulsory for residents of metropolitan Melbourne and Mitchell Shire in July. But not everyone in the community has easy access to a mask. For people on low-incomes or experiencing homelessness, buying a handmade mask over the internet, or a box of disposable masks is unrealistic. For people who are deaf or hearing impaired, wearing a mask is a barrier to communication, leading to isolation and anxiety. For some people with mental illness or autism, wearing a mask could be stressful, frightening or triggering. For people who don't speak English, they may not even be aware when mask regulations change.

To help these communities stay safe and avoid breaching the law, community organisations have begun collecting masks for service users. The government also established a process for organisations to request reusable masks for distribution to client groups. Official communications from the Minister and the Premier have recognised the challenges faced by the deaf and hard of hearing community, and that not everyone is able to wear a mask. However, some community service organisations report they have not yet received their supply of reusable masks, and are having to turn away community members directed to their services in search of masks.

Emerging workforce shortages

As confirmed cases continue to rise across Victoria, VCOSS members warn of a potential workforce crisis. Many community service organisations continue to provide face-to-face services for children in residential care, people with disability, older people living at home, people escaping family violence and others.

With more and more staff having to self-isolate, wait for test results, or expressing reluctance to come to work when they might put themselves, their families or service users at risk, organisations are struggling to fill rosters. With schools, kinders and childcare centres also closing to many, some workers have had to reduce their availability due to increased caring responsibilities.

Reducing case numbers through public health measures is the best long-term solution, but in the meantime consideration must be given to options for back-filling and identifying an appropriate surge workforce to support community service organisations.

Challenges also exist for community sector workers providing crisis support from home. Some staff have found working during the pandemic challenging because they are making calls in their own homes, sometimes within earshot of their own children undertaking remote learning, and the delineation between work and home has blurred.

I never wanted to bring family violence into my home.⁵

They have also missed the opportunity to debrief with colleagues about clients and families. Employers and workers have had to quickly identify and implement strategies to mitigate emergent forms of risk for workers and clients – for example, ensuring safety where a perpetrator may be viewing or listening to the interaction.

Community sector as a priority growth industry

As the Victorian Government navigates the COVID-19 pandemic and steers the community through social and economic recovery, community services can be an engine room for job

⁵ Unpublished, quote from staff member at VCOSS member organisation, participating in VCOSS and FSSI research consultation.

creation. Pre-pandemic, the health and social assistance industry (which includes the community services sector) was projected to be the fastest growing industry in the state.

A major challenge has been building a pipeline of new workers sufficient to keep pace with industry growth. Particular sub-sectors (for example, disability services, aged care, and family violence) have faced significant workforce shortages. The shortages have been especially acute in regional Victoria.

These issues have been magnified in the second wave of the pandemic. Services have not had access to the back-up workforce they need to cover workers who are sick or unavailable, let alone access to the surge workforce they need to expand existing services or ramp up new services in response to new and emerging demand.

A key feature of the Victorian Government's initial economic response to the pandemic has been Working for Victoria, a \$500 million job creation program. Government has recognised that the community sector can provide significant opportunities for displaced workers. As such, community services is one of the Fund's priority industries. So far, more than 3,000 jobs have been created in the wider social support sector, including a first tranche of 1,100 jobs in 59 community sector organisations.⁶ In addition, VCOSS understands there are further community sector proposals in the Working for Victoria funding pipeline.

In coming months, VCOSS will be working with the Victorian Government to identify opportunities to transition as many of these workers as possible to other funded, unfilled roles in the sector at the end of their six-month Working for Victoria job placement. However, to realise this opportunity, it is critical that government addresses the issue of insecure funding and broader sector sustainability outlined earlier in this submission.

It is also becoming clear that there is a need for Victorian Government investment in job creation beyond six months. The majority of the jobs that have so far been funded in the community services industry are entry-level jobs. The program could be expanded to different roles and skill levels, There is an opportunity to grow the Working for Victoria program, to simultaneously support more Victorians into meaningful jobs with genuine career pathways, and address the growing demand for community sector workers by building a skilled and sustainable future workforce.

⁶ Premier of Victoria, *Media release: Jobs Boost for Local Communities and Young People*, 21 July 2020.

Planning for recovery

KEY POINTS

- Becoming a wellbeing economy would allow us to measure real progress and outcomes in people's lives
- Investing in social housing stimulates the economy and proves safe, secure housing for Victorians
- Investment in energy efficiency and renewable energy for low-income households would create jobs and reduce energy bills

Right now, Victoria is facing unprecedented challenges and adversity. These months will leave scars on our community that will take many years to heal. Conversations about recovery feel a long way in the future, but eventually we will turn our attention to how we build back as a better society, with a stronger safety net and greater resilience to future challenges.

The economy is likely to need ongoing government intervention and stimulus. Investment in stimulus is more valuable if it also addresses other challenges we face, like climate change and health inequity.

A wellbeing economy

VCOSS advocates for a future based on wellbeing and inclusive growth for all Victorians, across people, places and generations. Our recovery from COVID-19 must be about more than getting spending down, and GDP up. It must be about tangible outcomes for people. Real outcomes, that impact people's lives, do not always appear in a balance sheet.

Victoria needs a new way to conceptualise, pursue and measure progress. We need to articulate our overarching social goals, and match these bold aspirations with concrete targets, timeframes and accountabilities.

The smartest way to embed this approach would be for Victoria to become a wellbeing economy and deliver a wellbeing budget. Countries like New Zealand, Scotland and Iceland are rising to this challenge by becoming wellbeing economies. Under this model, all branches of government are responsible for improving community wellbeing through budget priorities, policy-making and reporting.

A wellbeing budgeting approach would allow us to draw a line under the pandemic and set ambitious goals for our recovery.

A big social housing build

COVID-19 has shown us that if we let people live in unhealthy conditions it can help spread disease – affecting everybody’s health. According to pre-pandemic modelling, about 25,000 people are homeless in Victoria on any given night. There are more than 100,000 people currently on Victoria’s housing wait list.⁷

In 2019, the Victorian Government started construction on 1,000 new social housing homes committed under the Homes for Victorians strategy. A further 168 new social housing homes and 23,000 renovations have already been committed to as part of Victoria’s pandemic recovery plan. VCOSS has welcomed a good start on much-needed investment. However, much more is needed.

The Victorian Housing Peaks Alliance which comprises eight community sector peak bodies, including VCOSS as convener, calls for 6,000 new public and community homes in Victoria each year for the next 10 years. This includes 300 homes for Aboriginal housing.⁸ This would raise the proportion of social housing stock in Victoria to the national average.

With the global economy in turmoil, interest rates are currently below the rate of inflation. Governments have an opportunity to borrow at historically low rates. And the boost to the economy would be pretty immediate. As well as building the public and community housing we desperately need, the money would eventually flow into the wider economy. It will be spent in shops and businesses right across the state. And the outcomes for Victorians experiencing homelessness would be permanent.

⁷ Housing Peaks Alliance, *Making Social Housing Work: a framework for Victoria’s public and community housing 2020 – 2030*, 2020.

⁸ Ibid.

A greener recovery

The pandemic hit our state just as we were reeling from the Black Summer's unprecedented bushfires. As a result of climate change, Victoria is experiencing more dangerous fires, heatwaves, storms and drought, putting families, workers, businesses and all Victorians at risk.

We have an opportunity for governments at all levels to scale up climate change efforts while also boosting economic activity in response to the pandemic. For example, more investment in energy efficiency and solar now would quickly create thousands of jobs (in training, auditing, installation, manufacturing and local retail), increase household disposable incomes to spend in the economy and lead to improved health and wellbeing. The investment would also deliver on other government priorities including reduced energy bills, cuts in carbon emissions and reduced load on the electricity grid. Poorly insulated homes filled with power-hungry major appliances are driving up people's electricity bills.

The Victorian Government can help low-income households be more energy efficient and slash bills by investing in home energy-efficiency measures and subsidies for upgrades. Existing schemes like the Energy Savvy Upgrades program for home owners can be extended to allow people to fund insulation, heating, cooling, window coverings or draught sealing

Access to income and essentials

KEY POINTS

- Better coordination and support is needed in the emergency relief sector
- Increased rates of income support have reduced demand for services, but are not permanent arrangements
- Women and young people are among those people experiencing the highest rates of unemployment
- Asylum seekers and people on bridging visas are in desperate situations, without access to Commonwealth supports

Anticipated spike when income support ends

The doubling of the JobSeeker Payment and related allowances has lifted many people out of poverty. We have heard countless stories of people who can now afford things like long-overdue dental treatment, fresh fruit and vegetables, or to replace a broken fridge. People have told us how they can afford medication, and for the first time in a long time, do not feel a heavy sense of dread when they think about their bills. The effect of the Coronavirus Supplement on people's lives cannot be overstated.

*Mandy's story*⁹

⁹ As told to VCOSS as part of a COVID-19 and Wellbeing project, to be published 2020.

Mandy says the Coronavirus Supplement, which has put an extra \$275 a week in her pocket, has been a lifeline. The supplement has meant Mandy's family has been able to eat three meals a day, when previously they may have only been able to have one. They have been able to eat more fruit and vegetables – instead of relying on cheap meals like pasta bake to fill them up – buy warmer clothes and blankets and purchase eyewear and medication.

Mandy has also been able to buy cleaning products and basic toiletries for her family, who rent in Bacchus Marsh, west of Melbourne. "We went four weeks without soap in the house and we had to wash our clothes with shampoo because it was cheaper," she says.

When the supplement is reduced, Mandy says it will be a struggle to afford medication she needs to help manage her anxiety, depression and panic attacks. "Once it cuts, I'm going to have to make some tough choices again on what can be paid, what should be paid and whether we can afford three meals a day."

Equally, the JobKeeper wage subsidy and the business support payments have greatly helped millions of employees retain their jobs. Without these, we would now see a much higher unemployment rate as many employers would have had to lay off staff.

However, gaps remain in the current system of support. More than one million people in Australia are excluded from the JobKeeper Payment and income support because of their visa status. Temporary migrants, asylum seekers and international students are excluded from accessing these supports. Childcare workers are facing uncertainty, with centres closing to many children under stage 4 restrictions, but childcare now excluded from the JobKeeper scheme.

People are left with no choice but to turn to charities and community service organisations for assistance. If the JobSeeker payment reverts to anything near the old Newstart rate of \$40 a day, many people will be immediately thrust into poverty. The demand on emergency relief, financial counselling, mental health and homelessness services will be immediate. Similarly, organisations are preparing for increased demand following the lifting of

moratoriums on utilities, mortgages and evictions. These measures will need to be extended as the impacts of the COVID-19 crisis continue to be felt across the community.

Immediate bill relief

For many Victorians, spending more time at home is meaning a significant increase in energy usage and bills, especially as the current lockdown coincides with winter, the season where households generally use the most energy.

Too many households already face impossible choices between turning on the heater or restocking the fridge. Figures cited by the Energy and Water Ombudsman Victoria of a 20-30 per cent increase in residential energy usage compared to the same time last year certainly suggest a potential for future bill shocks and longer-term debt.¹⁰ Initial calculations from one Victorian-based community sector organisation with expertise in energy-related issues faced by low-income households suggests the annual increased cost for heating alone could be more than \$2000.

27 per cent of consumers are concerned about their ability to pay energy bills at this time.¹¹

To reduce bill shock, the Minister announced a \$3.7 million package of initiatives aimed at further supporting Victorians' awareness and engagement with these existing protections. Along with funding for additional financial counsellors to provide intensive assistance on energy bills and household financial difficulties, the package provided for a brokerage program to provide one-on-one support on navigating the energy retail market for 3000 households at-risk of financial hardship. It is also funding additional online training on energy for approximately 1,100 frontline community workers, to enable them to provide energy bill advice and guidance on what existing support is available.

¹⁰ Email to community sector consumer representatives, based on information provided by electricity distributors; *Energy & Water Ombudsman Victoria - Important information COVID-19 for agencies*, 19 June 2020.

¹¹ Consumer Policy Research Centre, *Covid-19 and Consumers: from crisis to recovery*, June 2020, https://cprc.org.au/wp-content/uploads/Consumers-and-COVID-19_summary_25June2020_compressed.pdf accessed 5 August 2020.

Retailers are reportedly providing hardship plans, payment support and other assistance to households needing help. However, for most, bills are being deferred, not waived entirely.¹²

Given the reality of increased usage, additional bill relief is urgently needed for those most at-risk of energy-related bill shocks and financial pressure. Potential options include one-off payments, temporarily increasing the current rate of State energy concessions and raising the value of the Utility Relief Grants Scheme (URGS). Additional financial counselling capacity is also required.

VCOSS notes that DHHS has been making considerable efforts to address the pre-pandemic application backlog in the URGS regime, which had arisen from challenges in the implementation of recent online processing. It is crucial this “last resort” relief mechanism is working properly

Demand for emergency relief services

One-in-25 adults in Victoria run out of food in a 12 month period and cannot afford to buy more, and one-in-eight adults worry about running out of money to buy food.¹³ Many Victorians have no choice but to access Emergency Relief on a regular basis, with food being the largest reason people seek assistance

The Emergency Relief sector is diverse and includes large food relief charities and large community organisations. It also includes a vast range of medium and smaller organisations including housing, family services, church and community groups, Aboriginal Community Controlled Organisations, Neighbourhood Houses, culturally and linguistically diverse groups and organisations, local governments, and a range of other community and social service organisations.

The 2020 *Food and Material Aid Survey*, undertaken to better understand the impact of COVID-19 on the Emergency Relief sector, particularly on the provision of food, showed that:

- 49 per cent of requests for emergency food relief between January and April 2020 were made by existing vulnerable clients.

¹² Essential Services Commission, 'Energy customer support during the coronavirus pandemic', <https://www.esc.vic.gov.au/electricity-and-gas/market-performance-and-reporting/energy-customer-support-during-coronavirus-pandemic>, accessed on 5 August 2020.

¹³ Victorian Agency for Health Information, *Challenges to healthy eating – food insecurity in Victoria: findings from the 2014 Victorian Population Health Survey*, State of Victoria, Melbourne, 2017

- 60 per cent of pre-existing clients were presenting with new needs
- 25 per cent of requests were by newly vulnerable Victorians who were recently unemployed and/or have no social networks
- An increase in the number of children and young people accessing services
- An increase in demand by people facing or at risk of homelessness.

In response to COVID-19 and the response measures, the Victorian government announced the following to ensure that Victorians have access to urgent Emergency Relief, including food, vouchers, material aid and other support:

- Funding to support the sourcing and delivery of emergency food relief packs for people in mandatory self-isolation, delivered by Australian Red Cross in partnership with Foodbank
- \$4.9 million to Foodbank, SecondBite and FareShare for workforce capacity to scale food distribution.
- \$45 million hardship fund for international students, including one-off payments of \$1,100 for those who lost their job.
- \$1500 one-off payment for people required to self-isolate who have no additional income support and additional support for people waiting test results.

However, there is no state-level planning or coordination of Emergency Relief, and the sector faces a further lack of broader food security planning, shared data, mapping and insight into demand. The sector's peak body, Community and Information Services Victoria (CISVic), is underfunded and lacks the capacity to support the coordination of Emergency Relief.

More people without work

Victoria is the jobs engine room of Australia, creating hundreds of thousands of jobs in recent years. But during the COVID-19 pandemic, job creation has stalled. More than 540,000 Victorians are now claiming the JobSeeker payment. A similar number are reliant on JobKeeper payments.

Women, who make up the majority of employees in many of the industries most impacted by lockdowns, have been hit hard by the Covid-19 pandemic with higher unemployment rates, less access to JobKeeper, greater responsibility for caring and unpaid work and significantly poorer mental health outcomes. Labour force statistics show 55 per cent of people unemployed as a consequence of Covid-19 are women. For those still in paid work, more women than men have reduced their hours and/or work as casuals with less than 12 months continuous employment making them ineligible for JobKeeper payments.

Young people are also being disproportionately impacted. The youth unemployment rate in Australia was already double that of the general population, pre-COVID. Young people are more likely to be employed in consumer-facing roles that have been hard hit by COVID-19 closures, like retail, hospitality, events, fitness and entertainment industries, and have considerably higher rates of part-time employment and casual work than the general population.¹⁴ As a result, many young people are facing unemployment or underemployment, or have lost hope and given up on the job search because of an absence of opportunities.

As we move into the recovery period, young people making the transition from education to work will find it more difficult to find employment at entry-level positions due to increased competition for jobs and declining availability of jobs.¹⁵

Long-term funding for the Jobs Victoria Employment Network (JVEN) could help more disadvantaged job-seekers into work, by providing holistic, non-punitive, 'positive help'. Jobs Victoria supports are tailored and scaled to people's needs and interests, and aligned with industries where workers are needed.

Support for migrants and asylum seekers

Throughout the pandemic, emergency relief services and other community organisations have raised concerns about the welfare and wellbeing of asylum seekers and other visa holders, including international students.

There are currently around 10,000 asylum seekers living in the community in Victoria, with eligibility for support severely restricted. The Asylum Seeker Resource Centre has seen an 80 per cent jump in people needing food relief since March and has been unable to meet demand from new clients.

In addition, Victoria hosts more than 200,000 international students each year, many of whom have supported themselves with part-time or casual jobs while studying. Presentations of both asylum seekers and international students are continuing to increase at Emergency Relief organisations.

¹⁴ M Atkins et al, *COVID-19 and youth unemployment: CSI response*, Center for Social Impact, May 2020.

¹⁵ Ibid.

The introduction of the extreme hardship program for asylum seekers and people on bridging visas, delivered by Red Cross is very welcome, and has already been overwhelmed with requests for assistance.

Gaps in communication to culturally diverse communities

Communities know themselves best. They are best placed to identify their own needs, how policies will impact them, and where community members get their information.

Partnering with community organisations is one way to reach cohorts and communities that may not engage through mainstream channels, including multicultural communities. Community organisations have developed positions of trust and legitimacy in their communities, by building positive long-term relationships with people over years, or even generations. Employing peer workers and people with lived experience of disadvantage means community organisations often create a safer environment for vulnerable people to engage, because they feel their experiences are validated and understood.

By not fully bringing CALD organisations on board as active partners in the planning and implementation of Victoria's COVID-19 response, their dedicated expertise, and the learnings they have gained on a daily basis through their work in community, has been under-utilised. This engagement gap has had clearly negative repercussions with regard to communications.

Multicultural communities have reported difficulties in accessing updated, official information in accessible formats and different languages, in a timely manner.¹⁶ Given the varied languages and levels of fluency in English, information should be made available in different formats - especially cartoons, simple videos, audio materials, and hand-outs - as well as engagement with community connectors and channels which are commonly accessed by diverse communities. During the 'hard lockdown' of several public housing estates, residents themselves voluntarily translated information into community languages, to make sure people had accurate information in a language they could understand.

Targeted communication by peers or trusted community organisations would increase understanding of public health directions and restrictions.

Reliance on communicating via the internet and social media is not enough. One-in-five households in regional Victoria, and one-in-ten households in metropolitan Melbourne have no internet access at home.¹⁷ Many people lack the digital literacy needed to seek out

¹⁶ Ibid.

¹⁷ Thomas, J, Barraket, J, Wilson, CK, Rennie, E, Ewing, S, MacDonald, T, *Measuring Australia's Digital Divide: The Australian Digital Inclusion Index 2019*, RMIT University and Swinburne University of Technology, 2019.

information online. Many of the community spaces where people seek internet access, like public libraries, have been closed for most of the pandemic period.

A responsive health system

KEY POINTS

- A statewide mental health promotion campaign would help promote community wellbeing over the longer term
- Confirmed cases are on the rise in Aboriginal communities, prompting need for increased ACCHO capacity
- The rapid roll-out of telehealth services has improved access and reduced health inequities across the state, and should be retained as an option post-COVID

People with underlying health conditions and chronic illness are most at risk of severe illness from COVID-19. Older people, people with disability and Aboriginal Victorians are particularly vulnerable.

Aboriginal-led wellbeing support

VCOSS welcomed the launch of the Yarning SafeNStrong phone crisis line for Aboriginal and Torres Strait Islander Victorians needing wellbeing support or feeling isolated and vulnerable.

The National Agreement on Closing the Gap includes a new commitment to support the Aboriginal community-controlled health sector and promote shared decision-making in the priority policy areas of social and emotional wellbeing and early childhood care and development. To achieve their potential, these commitments will need to be matched by financial investment.

Right now, a recent spike in cases in the Aboriginal community means local Aboriginal community-controlled health organisations may need additional capacity to maintain frontline support and community engagement.

Mental health investment for the long-term

We do not yet know the full impacts of COVID-19 on the mental health of Victoria's community. Experts are warning of likely increases in youth suicide, and high demand for mental health services.¹⁸

Community organisations are already reporting that more people are seeking help to manage mental distress because of the health crisis, the lock-down and financial distress.

There has been a 22 per cent increase in Victorians picking up the phone to Lifeline,¹⁹ and a nearly 50 per cent increase to Beyond Blue.

Impacts will be highest among young people, people in rural areas and those hit hard by job losses and reliant on industries that will not recovery quickly.²⁰ YACVic asked young people about the impact of the pandemic on their lives.²¹ Young people identified a likely increase in mental ill-health because of social isolation and reduced access to employment, education and services.²² And this impact is likely to be felt for a long time. Suicide rates could remain high for as long as five years if the economic downturn is protracted.²³

The significant \$60 million investment in mental health services has helped meet the demand of Victorians reaching out for assistance. But as this second wave of crisis continues, people's mental health will deteriorate. Further investment will be required. The Royal Commission into Victoria's Mental Health System must consider the impacts of the pandemic on the Victorian community, and the additional demands that the system will face in coming years.

¹⁸ Australian Medical Association, *Joint Statement: COVID-19 impact likely to lead to increased rates of suicide and mental illness*, 7 May 2020 <https://ama.com.au/media/joint-statement-covid-19-impact-likely-lead-increased-rates-suicide-and-mental-illness>

¹⁹ Lifeline Australia, *Media Release: Lifeline is there for Victorians 24/7 as calls from Victoria spike 22% in new lockdown*, 9 July 2020

²⁰ Australian Medical Association, *Joint Statement: COVID-19 impact likely to lead to increased rates of suicide and mental illness*, 7 May 2020 <https://ama.com.au/media/joint-statement-covid-19-impact-likely-lead-increased-rates-suicide-and-mental-illness>

²¹ Youth Affairs Council of Victoria, *COVID-19 and young people: Survey analysis*, April 2020.

²² Ibid.

²³ Australian Medical Association, *Joint Statement: COVID-19 impact likely to lead to increased rates of suicide and mental illness*, 7 May 2020 <https://ama.com.au/media/joint-statement-covid-19-impact-likely-lead-increased-rates-suicide-and-mental-illness>

Consideration should also be given to a longer-term, public health campaign. For example, All Right? was launched in 2013 to support the psychosocial recovery of Christchurch residents following the devastating earthquakes of 2010 and 2011. Since its launch in 2013, All Right? has become a powerful champion for wellbeing in Christchurch, helping normalise conversations around wellbeing and mental health. The campaign's latest evaluation found that 77 per cent of respondents said All Right? messages make them more aware of looking after their wellbeing, and 47 per cent have done things as a result of what they have seen or heard.²⁴

Telehealth a solution for some

The rapid launch of telehealth has facilitated vital access to services for many across the state. Participants in a Consumer Health Forum survey reported overwhelmingly positive support for the continuation of telehealth post-COVID.²⁵

Telehealth has potential for engagement, delivery and facilitation of treatment, especially for young people who are most likely to be comfortable engaging with these kinds of new technologies. It can provide an option for rural and regional people who face barriers to equal access to specialists.

However, telehealth is not a replacement for face-to-face services. Some risks of telehealth services include reliability, the need for digital literacy skills, difficulty in finding services that are evidence-based, and challenges to establishing a therapeutic relationship remotely.²⁶

Alcohol and drug harm may be on the rise

There is little data available yet about the impacts of COVID-19 on alcohol and drug use. However, we know experiences like terrorism, natural disasters and economic crises tend to result in increased alcohol use and abuse.²⁷ Personal stressors like financial hardship and relationship strain also drive increased alcohol consumption.

²⁴ All Right? Canterbury, <https://www.allright.org.nz/about>

²⁵ Consumer Health Forum of Australia, *Media Release: Patients feeling better with telehealth*, 26 May 2020 <https://chf.org.au/media-releases/patients-feeling-better-telehealth>

²⁶ Orygen the National Centre of Excellence in Youth Mental Health, *Research Bulletin: E-mental health: The future of youth mental health*.

²⁷ Alcohol and Drug Foundation, *How mass trauma affects alcohol use*, 30 March 2020, <https://adf.org.au/insights/mass-trauma-alcohol-use/>

Similarly evidence is so far limited on the impacts of COVID-19 on illicit drug use. Reduced supply and restrictions on accessing common places of purchase (like night-time economy venues or street-based sales) may lead people to turn to alternative substances, experiences of rapid withdrawal and heightened risk of overdose when supply rebounds.²⁸

Pre-COVID, there were long waiting lists and barriers to accessing alcohol and drug treatment services. More people seeking treatment and reduced capacity to meet social distancing requirements has only made it more difficult for services to meet demand.

Telehealth, and additional investment in mental health and alcohol and drug treatment services have helped the system avoid crisis. Turning Point describes its Ready to Change Telehealth service as “not... to replace direct support services, but works as a low cost alternative for those in need who currently do not engage in evidence-based treatment due to stigma, service demand, accessibility, motivation to access, and ineligibility.”²⁹

Preventive health treatments are still crucial

There are some reports that people are delaying seeking treatment for other health problems. The number of people presenting to health care professionals for stroke care has dropped significantly. Breast cancer and other types of screening rates are down. VCOSS members reports appointments for preventive health services are sometimes being cancelled. It will not be a good outcome for Victorians if we drive down COVID transmission, but people miss out on vital treatment for other health conditions.

²⁸ P Dietze and A Peacock, “Illicit drug use and harms in Australia in the context of COVID-19 and associated restrictions: anticipated consequences and initial responses’ 2020.

²⁹ Quoted in Alcohol and Drug Foundation, *Submission to Senate Select Committee on COVID-19*, May 2020, pg 3.

A safe and secure home

KEY POINTS

- The pandemic has highlighted the very clear link between housing and health.
- Existing fragilities across the whole housing system have been exposed including problems of supply, affordability, overcrowding and security of tenure.
- Eviction prevention measures and renter relief need to continue through to April 2021
- Future hard lockdowns, if absolutely necessary, must be planned and delivered in close partnership with communities and community organisations

Evictions prevented

The Federal, State and Territory governments were quick to recognise the risk that reduced or lost incomes would place on the housing security of renters. In Victoria, renters make up nearly 30 per cent of the population.³⁰

The National Cabinet announced a ban on evictions on 30 March to keep renters safe and stable in their homes during the pandemic, and to prevent a disruption to the housing market that would inevitably follow a wave of renters either vacating or being evicted.

The Victorian Government announced their support of the principle and legislated the ban and a number of other measures in the *Omnibus (Emergency Measures) Act 2020* on 24 April. Alongside these legislative amendments, the Victorian Government also provided welcome financial relief directly to renters, including increasing funding to the existing Private Rental Assistance Program and establishing a new rent relief grant program administered by DHHS.

³⁰ Australian Bureau of Statistics, *2016 Census QuickStats – Victoria*, October 2017.

These measures, coupled with increases to Commonwealth income support and the JobKeeper wage subsidy have provided a lifeline to many people who would have otherwise been at risk of housing stress, rent arrears and homelessness.

However, the legal protections and programs are for a limited period of six months. The temporary financial supports available to renters are also due to end before or by September.

Renters face a potential cliff of legal protections and financial support. VCOSS anticipates a wave of housing crisis if this occurs. The Government should support people to stay in their homes for a longer period by extending protections and programs under the Emergency Measures act and the financial supports available to renters.

There was a significant lag between the residential tenancies policy in principle and the commencement of the *Omnibus (Emergency Measures) Act*. This resulted in confusion and uncertainty for both renters and rent providers. Further, a key measure under the Act is the right to negotiate rent reductions via a private negotiation process between landlords and tenants. While private negotiations allow for parties to make agreements that are suitable to their unique circumstances, they rely on parties with equal bargaining power and understanding of their rights and responsibilities acting in good faith to reach agreement.

This is not the reality in many circumstances – the private rental market is rife with power imbalances and entrenched expectations which pose barriers to renters asserting their rights, particularly when engaging with property managers. In the majority of circumstances, renters will have less knowledge of their rights than their property manager and landlords and be less confident to assert them. This is worse for renters who have language or communication needs, or those who cannot access information, advice and support.

To highlight this, there are approximately 700,000 current renters in Victoria, and some modelling indicates that around 30,000 would be eligible for a rent reduction, yet only 16,000 rent reductions have been registered with CAV.³¹ Of those agreements, VCOSS members report that many renters have felt forced to make agreements which are not in their interests, including rent reductions for limited periods, rent deferrals or terms which exclude their rights under the RTA. Similarly, DHHS rent relief grants can only be accessed by

³¹ Quoted in Domain, *Just 2 per cent of Victorian rental households have registered a rent reduction*, <https://www.domain.com.au/news/just-2-per-cent-of-victorian-rental-households-have-registered-a-rent-reduction-figures-show-962214/>

people who have registered a rent reduction agreement. As a result of this, and other barriers to access, fewer people than expected have used this support.

The *Omnibus (Emergency Measures) Act* has also delayed the commencement of a suite of reforms to make renting fairer under the *Residential Tenancies Amendment Act 2018* (RTAA 2018). Given the likelihood of ongoing financial hardship for Victorian renters for the foreseeable future, the unpredictable trajectory of virus transmission and the likelihood that both Commonwealth and state-based financial supports will end, the Government must act urgently to address the gap in protections so that renters do not face a second wave of housing insecurity and hardship in September.

Certainty for rough sleepers

People experiencing homelessness prior to the pandemic were recognised as a cohort at significant risk of virus transmission. Many people experiencing homelessness, especially people sleeping rough, have underlying health conditions which make them susceptible to the worst effects of COVID-19.

Additional funding was provided to the Housing Establishment Fund (HEF) program delivered by homelessness services across Victoria to provide assertive outreach and temporary hotel accommodation for people experiencing homelessness to stay safe and comply with social distancing directions. To date, 4000 people have been temporarily accommodated under this program.

VCOSS strongly welcomes the July announcement that these arrangements will be continued until April 2021, and private rental properties secured by the government to provide long term housing solutions.

Initially, some people were provided with accommodation without any further social support. Many of the people this program has engaged have complex needs including mental illness, trauma and addiction. Ending homelessness for this cohort is a challenge that requires more than just the provision of emergency accommodation. The inclusion of mental health, alcohol and drug and other support services in the package is very welcome.

A plan to avoid future hard lockdowns

The lockdown of public housing lockdowns have caused significant trauma and distress to communities. With overcrowding common, people living in close quarters, shared facilities and language barriers, the risks in public housing estates are clear. If such hard lockdowns are again deemed necessary for public health reasons, there is much we can learn from what happened in Flemington and North Melbourne. Scenario planning must be happening now, considering the risks to other high density environments, including other public housing estates, rooming houses and student accommodation.

The heavy police presence was unnecessary and distressing for communities with histories of trauma and used to being overpoliced and subject to racism. The large police presence unnecessarily escalated tension, when a public health response led by nurses and community health officials could have deescalated them.

Communities know themselves better than anybody. They should be trusted, to the maximum extent possible, to regulate their own affairs during a 'hard lockdown'. In Flemington and North Melbourne it was local community organisations and groups who stepped up to provide appropriate food, deliver packages, identify individual needs (like medication and dietary needs) and translate resources and information.

The government can and should engage local communities and organisations in planning, communications and service delivery from the start, to avoid problems arising.

Inclusive responses for people with disability

KEY POINTS

- People with disability, families and carers continue to feel their rights and needs are being forgotten
- Accessible information must be provided in a timely way
- Appropriate alternative accommodation is needed for people with disability, chronic health conditions and people experiencing family violence to move out of areas of high community transmission

People with disability with chronic health conditions or compromised immune systems face very high risks to their health if they contract COVID-19. Avoiding close contact is simply not possible for many people with disability who require daily, face-to-face personal care and support.

In the initial stages of the pandemic, the rights and needs of people with disability were relegated.³² Government measures to support people with disability during the COVID-19 have been delivered much later than measures for other communities, despite people with disability facing similar or higher risks to their health and wellbeing.

On Wednesday 6 May 2020, the Victorian Government announced \$17 million in support for people with disability, families and carers.³³ While this investment was very welcome, the measures were overwhelmingly targeted towards addressing existing issues and barriers that prevent people with disability from accessing equitable, timely support.

³² Disabled People's Organisations Joint Statement, *Open Letter to the National Cabinet: Immediate Actions Required for Australians with Disability in Response to Coronavirus (COVID19)*, April 2020.

³³ Hon Luke Donellan, *Media release: Supporting Victorians With Disability During Coronavirus*, 6 May 2020.

Communication gaps remain

People with disability need accessible information to ensure they are fully informed about the health measures and directions. This includes developing clear and easy to understand plain English, Easy English and translated materials, Auslan video messages and visual resources, and having this information available at the same time as broad community updates.

During the public housing “hard lockdowns” people with disability reported gaps in communication and accessible information. For example, some information was disseminated via loudspeaker announcements, which is inappropriate for people who are Deaf or hard of hearing. It is critical that government explain what is happening, why, any rules and next steps to impacted residents first before news is shared in the media. This might mean allowing extra time for people to understand information and confirm how they can access support.

COVID-19 underscores the importance of co-design. Government and emergency management entities can be most effective when they work in partnership with communities – in this instance, people with disability to develop inclusive communications strategies and resources.

A plan for disability services

With media and community focus firmly fixed on the tragedy unfolding in the private aged care system, less attention has been paid to the high risk for people with disability, especially if they live in residential services or in high-density public housing estates.

Social distancing measures and location-based restrictions may prevent people from accessing safe, continuous assistance from paid services and from family, friends, carers and support networks. It is unclear what supports are available if a member of a person’s household becomes unwell and needs to self-isolate.

With stress levels high, and people increasingly confined to their homes, there are fears that family and co-resident violence is likely to be increasing. But due to the restrictions, people will be forced to remain in unsafe environments and less able to seek help and connect with support services.

Immediate accessible and appropriate alternative accommodation is needed for people with disability, chronic health conditions and people experiencing family violence to move out of areas of high community transmission, including high-density public housing estates and residential services. When support from existing services and carers cannot be accessed, there is a role for government to play (with other partners, such as the NDIA) to ensure continuity of essential supports.

NDIS support gaps exposed

The pandemic has exposed and exacerbated some of the existing issues experienced by people with disability, disability service providers and the disability workforce, who feel “dangerously overlooked” in response to the COVID-19 pandemic.³⁴ While we are now four years into the transition to the NDIS, interface issues between State and Federal responsibilities remain and must urgently be addressed. Of the 4.4 million Australians living with disability, just 10 per cent will be supported by the NDIS; so it’s crucial that Victorian Government services are inclusive, accessible and responsive to the rights and needs of people with disability.

Victoria’s disability advocacy organisations – already under significant strain prior to the pandemic – are facing enormous pressures to meet demand and find new, accessible ways of working.

A recent survey by Disability Advocacy Network Australia (DANA) shows over half of advocacy organisations experienced an increase in demand due to COVID-19, and one in four organisations have less capacity to take on new clients.³⁵ The Office of the Public Advocate, which has been calling for support to boost its technology capabilities for years,³⁶ is one of many services that had to suspend in-person services and transition to a remote model of support.³⁷ The Victorian Government’s additional funding for disability advocacy and safeguards during this challenging time is both welcome and sorely needed to protect and promote the rights of people with disability during the pandemic and beyond.

³⁴ N Cortis and G van Toorn, *The disability workforce and COVID-19: initial experiences of the outbreak*, Social Policy Research Centre, UNSW Sydney, May 2020.

³⁵ Disability Advocacy Network Australia (DANA), *DANA eNews - Advocacy Resources, Webinars, Jobs*, 14 May 2020.

³⁶ Office of the Public Advocate, *Annual Reports 2018-2019, 2017-2018, 2016-2018*

³⁷ Office of the Public Advocate, *COVID-19: A message to People with Disability from Victoria’s Public Advocate*, Colleen Pearce – 25 March 2020, www.publicadvocate.vic.gov.au/media-centre/399-a-message-to-people-with-disability-from-victoria-s-public-advocate-colleen-pearce.

Lessons from Remote and Flexible learning

KEY POINTS

- Having reliable internet access and a digital device for schoolwork at school and at home is essential to students' participation and learning
- During the first period of Remote and Flexible Learning, there was a lack of specific guidance and information for students with disability
- Students want to retain flexibility and variety in the way their learning environment is structured

As students across Victorian move back to remote and flexible learning, VCOSS's focus has been – as it always is – on vulnerable students and families. Students for whom school is a refuge from violence, abuse or neglect. Students who rely on schools for meals, for mental health care and other wellbeing supports, for additional learning support, and for educational resources that aren't readily available at home.

In this second wave of the pandemic, the uncertainty and anxiety students are facing is increasing. For those with pre-existing mental health conditions or vulnerabilities, the mental health affects may be magnified and more acute.

We have also been concerned for students who, pre-COVID, had risk factors for early school leaving or were on a pathway back to education after a period of school disengagement, and the impact that COVID adaptations have had on their engagement.

We acknowledge the extraordinary scale and speed of adaptation that the Department of Education and Training (DET) was required to make in order to establish and operationalise Remote and Flexible Learning. VCOSS welcomed announcements which addressed some of VCOSS' key considerations for school closure.³⁸ For example, rapid adaptations of

³⁸ VCOSS, 'Eight things to consider as we shut schools', COVID-19 Issues Alert, 22 March 2020.

school-based wellbeing supports and sustainment of school re-engagement programs such as Navigator.

Bridging the digital divide

VCOSS welcomed the Victorian Government's acknowledgement of the digital divide between students and its commitment to provide devices (laptops and tablets) and internet access to every student who needed this support during the period of Remote and Flexible Learning. DET worked hard to ensure students were able to participate in remote learning.

The Victorian Government provided families with more than 61,000 laptops and tablets and 23,000 SIM cards and dongles.³⁹ Devices were given first to priority cohorts including senior secondary students, students in bush-fire affected areas and families who couldn't afford an internet connection. This was a major logistical exercise for DET. For many students who received devices, having those devices was a key determinant of whether remote learning was successful and effective. However, some of the challenges included:

- Some students waited several weeks for their devices, meaning they missed out on weeks of online learning.
- Because demand exceeded supply, some students outside the priority cohorts missed out. For example, VCOSS members report some culturally and linguistically diverse families with multiple children only had one device to share between siblings.

We cannot break the link between disadvantage and educational outcomes unless we address the technological divide. Having reliable internet access and a digital device for schoolwork at school and at home is essential to students' participation and learning. Every Victorian student should have a laptop or tablet and internet access. The rapid deployment of devices to support Remote and Flexible Learning has been a game-changer for some of the State's most disadvantaged learners. Going forward, the Victorian Government should sustain the provision of devices to students who do not otherwise have access to these at home.

³⁹ Premier of Victoria, 'Face Coverings And Masks for Metro', Media release, 20 July 2020.

Support for students with disability

Students with disabilities face additional health, learning and development needs that often require targeted teaching support and access to specialist therapists and integration aides. The period of Remote and Flexible Learning heightened barriers for students who do not receive the tailored support they need to fully participate in learning – for example, we heard from the Association for Children with Disabilities that families were told by teachers that they were not required to provide differentiated learning plans.⁴⁰

Additionally, existing in-school education supports were not adapted to support students and families to engage with home-based learning. In addition to the educational impacts, this has affected the mental health and employment participation of many families. COVID-19 has highlighted the need for DET's emergency planning and response to have an increased focus on the adaptation of education support at times of crisis. More broadly, there is a need for the Victorian Government to boost funding and support to students with a disability.

Flexibility into the future

For some students, changes to the usual school routine, not having to travel, and being away from a school environment they can find stressful represented freedom and helped them to thrive. Some VCOSS members reported that online learning increased students' sense of agency and improved their engagement.

Almost 50 per cent of young people engaged in Anglicare Victoria's Navigator program in the Western Melbourne Area engaged positively, or to some extent, in remote learning, with 24 per cent of students demonstrating an improvement in their attendance/participation during remote learning.

⁴⁰ Association for Children with a Disability, *Submission to the Inquiry into the Victorian Government's Response to the COVID-19 Pandemic*, June 2020.

There have also been students whose experience of Remote and Flexible Learning has been negative. This is because they experienced systemic barriers associated with having a disability, experienced delays in receiving devices that enable internet access, were trying to study in a home environment not conducive to this purpose (e.g. living in overcrowded housing), lost peer connection and/or reported a reduction in their wellbeing.

In some instances, this was exacerbated by the stress of lockdown, including the closure of (or limited access to) community spaces, and inability to connect in the same way with formal and informal supports (for example, programs run by community service organisations, peer and extended family networks).

While Remote and Flexible Learning has not worked for every student, a strong message we have heard from students is that they do want to retain flexibility and variety in the way their learning environment is structured. In particular, there is an appetite to do more in terms of integrating face-to-face and online learning beyond the COVID environment. The Department of Education and Training could explore this in the context of Education State goals to increase student agency and increase engagement, retention and completion.

Support for women and children

KEY POINTS

- Continuing public family violence awareness campaigns will help make sure people can get the help they need
- Increased payments to carers, and support for young care-leavers are welcome and should be extended

Help for victim-survivors

Domestic research and global evidence suggest that family violence can become more frequent and severe during periods of natural disasters and emergencies.⁴¹ In Australia, there have been mixed reports of both increases and decreases in calls for services and reports to police during the coronavirus pandemic.⁴² For example, there has been a decrease of about 5 per cent in calls from women to 1800Respect, but over the same period there has been an increase of approximately 20 per cent on the 1800Respect chat line.⁴³ As a result of the coronavirus, there have also been reports of new tactics of coercive control in intimate relationships.⁴⁴

Families have also been under immense pressure during the coronavirus pandemic facing financial challenges with possible loss of job or reduction in take-home pay, limited contact with wider family, community and culture due to physical distancing, reduction in take-home pay, limited contact with wider family, community and culture due to physical distancing, and supervising school-aged children, alongside the potential for heightened family violence risk.

⁴¹Debra Parkinson and Claire Zara, The hidden disaster: domestic violence in the aftermath of natural disaster, Australian Journal of Emergency Management, Volume 28, No. 2, April 2013, <https://knowledge.aidr.org.au/resources/ajem-apr-2013-the-hidden-disaster-domestic-violence-in-the-aftermath-of-natural-disaster/>

⁴² ANROWS, Women's Safety and COVID-19: Focus on the evidence, 30 April 2020, <https://www.anrows.org.au/opinion/womens-safety-and-covid-19-focus-on-the-evidence/>

⁴³ Ibid.

⁴⁴ Ibid.

Family violence services have continued support women and children through the pandemic. This has been supported by the \$40.2 million package announced by the Victorian Government in April 2020, which included funding for crisis accommodation and specialist services for people suffering or at risk of family violence, and was well received by the sector. VCOSS members report that there has been an impact on outreach services, especially because phones and digital access aren't options for everyone and perpetrators can also monitor internet use and phone calls. On the other hand, some clients have enjoyed greater use of online and telephone contact and found services easier to access instead of having to attend in person. Staff have also had to work more creatively, with one VCOSS member reporting that she coordinated with her colleague to contact mum on the phone, while dad was engaged on the phone with her colleague.

VCOSS welcomed the announcement by the Victorian Government to inject an additional \$77.5 million over the next two years to support some of Victoria's most at-risk children by bolstering the staff, resources and services available to them.⁴⁵ During the pandemic, services have continued to provide direct care and support to vulnerable children, young people and their families.

Both the Victorian and Federal governments have introduced public awareness campaigns, Respect Each Other: 'Call It Out'⁴⁶ and the Help is Here campaign⁴⁷ during the pandemic. It is important that these campaigns continue in the short to medium term to raise awareness of family violence and ensure people can access the supports they need.

As part of the \$40.2 million family violence package, \$5.1 million was allocated to flexible support packages to deliver a personalised and holistic response to victim-survivors experiencing family violence by assisting them to access support, move out of crisis, stabilise and improve their safety, well-being and independence into recovery.⁴⁸ They are an essential, flexible part of the family violence response system and should become an ongoing part of the service delivery landscape.

⁴⁵ Premier of Victoria, *More Support To Keep Families And Children Safe*, 23 April 2020, Media Release, <https://www.premier.vic.gov.au/more-support-to-keep-families-and-children-safe/>

⁴⁶ Premier of Victoria, *Calling Out Family Violence During Coronavirus*, 11 May 2020, Media Release, <https://www.premier.vic.gov.au/calling-out-family-violence-during-coronavirus/>

⁴⁷ Department of Social Services, Women's Safety, Help is Here campaign, <https://www.dss.gov.au/women/help-is-here-campaign>

⁴⁸ Department of Health and Human Services, Program requirements for the delivery of Family Violence Flexible Support Packages, <https://providers.dhhs.vic.gov.au/program-requirements-delivery-family-violence-flexible-support-packages>

Reduced visibility of vulnerable children

The current, unprecedented situation creates new risks for vulnerable children and young people who are living in environments of increased family stress and adversity, including family violence. By reducing the visibility of vulnerable children, and restricting the services that are available to them, there is an increased risk of harm. With remote learning underway, teachers are less able to pick up signs of injury or abuse on students which could then be reported to authorities.

Commissioner for Children and Young People has reported some vulnerable students, known to DHHS child protection workers, because their parents had histories of neglect or substance use, were not permitted to attend school.⁴⁹

The \$77.5 million package, including outreach capacity family services and nearly \$4 million to expand the Home Stretch program to support all young people currently in care who are due to turn 18 before December this year was welcomed by the sector. VCOSS would like to see Home Stretch permanently extended so that all young care-leavers have the options of receiving support until they turn 21.

While the additional one-off \$600 payment for every child in foster and kinship carers in the \$77.5 million families and children package was welcomed by the sector, around one-third of foster and kinship carers experience ongoing financial hardship.⁵⁰ The current carer allowance falls short of covering the true costs of providing care by about \$70 per week and should be increased to ensure that all vulnerable children receive the support they need.⁵¹

⁴⁹ Commission for Children and Young People, quoted in <https://www.abc.net.au/news/2020-07-12/child-safety-watchdog-concerns-about-home-learning/12445596>

⁵⁰ VCOSS, *State Budget Submission Delivering Fairness 2019-2020*, https://vcoss.org.au/wp-content/uploads/2019/03/DF_Online.pdf

⁵¹ Ibid.

A fair justice response

KEY POINTS

- Some Victorians are at greater risk of breaching public health orders due to their living circumstances, and therefore coming to police attention
- Fines impact disproportionately on low-income and vulnerable Victorians with the least capacity to pay
- Fines are generally not being withdrawn, even where they are against common-sense measures, and opportunities are being missed for education to prevent future breaches

A key aspect of the Victorian Government's response to COVID-19 virus transmission have been public health orders, issued by the Chief Health Officer and enforced by Victoria Police. We recognise these necessary measures to ensure compliance and reduce transmission of the virus.

There are some vulnerable groups who may be more exposed to and experience more harms associated with police enforcement of public health orders. This includes:

- People who have experienced long-term homelessness and have been temporarily housed in hotel accommodation but still use public space”;
- People with complex AOD needs/mental illness, for whom isolation is dangerous or unsafe;
- People with disability or chronic illness who may be unable to comply with face covering requirements or might, for example, need to stop and rest while out for legitimate reasons;
- People who may not be aware of/understand the directions, including people with English as a second language or people with cognitive impairments;
- Communities who are already subject to over-policing, including young people, people who live in marginal, overcrowded or insecure accommodation, and people who use drugs.

The cost of fines is \$1652. For many people, this is the equivalent to a month's rent. Issuing fines to people with no means to pay risks pushing them further into poverty. The rate does

not take into account people's age, financial capacity or, in the case of children and young people, understanding of appropriate behaviour. We have heard anecdotal reports of young people, known to Child Protection, being given multiple \$1652 fines, despite no other preventive action being taken and them clearly having no ability to pay. It is inconsistent with Victoria's current approach to issuing fines to children.

Anecdotal reports from members suggests police sometimes undertake "stop and account" and "move on" measures, instead of fines, for low-income people. But even these measures can be distressing or harmful for some people, especially if they have histories of institutionalisation or discrimination.

Victoria Police should also be provided with a supply of reusable masks, to avoid having to fine low-income or other vulnerable Victorians who are willing to wear a mask, but may not have one or be confused about the requirements.

Where fines are issued, there should be a balanced, consistent and transparent review process. Where fines do not pass the "common-sense" test, Victoria Police has committed to withdrawing them following review. However, VCOSS members report that this is not occurring – the majority of fine recipients who seek internal review have their review refused and fines confirmed. Internal reviews should also be conducted in accordance with the *DJCS Internal Review Guidelines*.

VCOSS members have also reported that Victoria Police do not provide adequate information when issuing fines. This misses an important opportunity for public health education. A lack of adequate information about the alleged conduct makes it difficult for the recipient to understand why they have been issued a fine, to avoid future breaches, or to challenge fines if people feel they are inappropriate.