

Impacts of COVID-19 on children and young people who contact Kids Helpline

September 2020



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yourtown's Kids Helpline service is Australia's only free, confidential 24/7 online and phone counselling service for children and young people aged 5 to 25 years. Further information about Kids Helpline can be found at <https://kidshelpline.com.au/>.

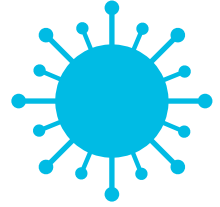
The Australian Human Rights Commission is Australia's National Human Rights Institution. It is an independent statutory organisation with responsibility for leading the promotion and protection of human rights in Australia. Further information about the Commission can be found at www.humanrights.gov.au/about-commission.

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If you are feeling distressed, are worried about someone, or would like someone to talk to, please contact Kids Helpline on 1800 55 1800 or Lifeline on 13 11 14.



With the COVID-19 global pandemic, children and young people in Australia are living through unparalleled times.

At the end of January 2020, on the back of the bushfires, the first confirmed cases of COVID-19 arrived in Australia. Community transmitted cases of COVID-19 were then reported in early March.

Within weeks, governments started to implement widespread restrictions to protect our physical health and to stop the spread of the virus across all states and territories. This included border closures; closure of schools; limits to the number of people gathering indoors or outdoors; the closure of community sport; restrictions on leaving home except for essential reasons; social distancing measures; restrictions on restaurants and cafes; closures of pubs, gyms, cinemas, casinos and places of worship; self-isolation and quarantine of all travellers arriving in Australia.

While restrictions have started to ease in some states and territories by the time of this report, in other states it continues to wreak havoc. In all locations, COVID-19 has made cataclysmic changes to everyday life as we all know it.

In particular, it has seriously disrupted the routines and lives of children and young people, and the challenges of social isolation have at times been overwhelming. Children and young people have often been separated from family members – unable to be in close contact or visit relatives – and have been unable to engage in some of the most basic pleasures in their lives, such as playing with friends.

The negative effects of these disruptions are exacerbated for children and young people already facing multiple challenges in their lives, including mental health issues, family conflict, abuse and neglect, poverty, and family and domestic violence.

The United Nations Committee on the Rights of the Child has warned of the grave physical, emotional and psychological effects of COVID-19 on children and young people, and calls on States to protect their rights.¹ It particularly asks for consideration of the health, social, educational, economic, and recreational impacts of the pandemic on the rights of the child, as set out in the UN *Convention on the Rights of the Child*.² Its recommendations include:

- exploring alternative and creative solutions for children to enjoy their rights to rest, leisure, recreation and cultural and artistic activities (article 31)
- ensuring that online learning does not exacerbate existing inequalities or replace student-teacher interaction (articles 28,29)
- activating immediate measures to ensure that children are fed nutritious food (article 6)
- maintaining the provision of basic services for children including healthcare, water, sanitation and birth registration (articles 6, 24, 7)

- defining core child protection services as essential and ensure that they remain functioning and available, including home visits when necessary, and provide professional mental health services for children living in lockdown (articles 5, 9,19)
- protecting children whose vulnerability is further increased by the exceptional circumstances caused by the pandemic (articles 9, 10, 22, 23, 26, 27, 30, 37, 39)
- releasing children in all forms of detention, whenever possible, and providing children who cannot be released with the means to maintain regular contact with their families (article 37)
- preventing the arrest or detention of children for violating State guidance and directives relating to COVID-19 (articles 37, 40)
- disseminating accurate information about COVID-19 and how to prevent infection in languages and formats that are child-friendly and accessible to all children (article 17)
- providing opportunities for children's views to be heard and taken into account in decision-making processes on the pandemic (article 12).³

With this urgency in mind, Kids Helpline and the Australian Human Rights Commission have come together to examine the main COVID-19 concerns that children and young people raised with Kids Helpline counsellors between January and the end of April 2020.

Many of their concerns reflect the concerns articulated by the United Nations Committee on the Rights of the Child.

Kids Helpline is Australia's only free (even from a mobile), confidential 24/7 online and phone counselling service for young people aged 5 to 25. Qualified counsellors at Kids Helpline are available via WebChat, phone or email anytime and for any reason.

The impacts of COVID-19 and the restrictions on children and young people can be seen in the increased contacts made to Kids Helpline since the pandemic first struck.

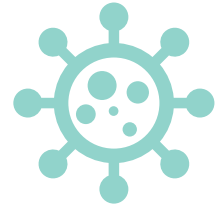
During the months of January to the end of April 2020, Kids Helpline responded to 26,709 counselling contacts compared to 23,920 in the same period in 2019. This is a percentage increase of 12% (2,789 contacts).

In this collaboration, we focus on the *types* of COVID-19 related concerns that are specifically raised by children and young people with Kids Helpline. These fall under some main themes, including mental health concerns, social isolation, education impacts and impacts on family life, among others. These issues are reflected in other reports on COVID-19 impacts, some of which are referred to in this report.

We hope that insight into children and young people's concerns can be used to guide the types of supports that are offered to them, as well as the types of supports that will be necessary in the recovery phase to come.



02 Methodology



Kids Helpline gathers information on a range of issues directly stated by children and young people to the service. Counsellors record non-identifying demographic data and classify contacts according to a defined set of problem types.

The information collected is based on counselling sessions where the focus is on helping children and young people who have contacted Kids Helpline. It is not collected for scientific or research purposes. Therefore, some data fields are not completed.

In some instances, counsellors also collect qualitative information from children and young people to provide case management assistance and to give voice to their concerns. Counsellors collected qualitative information in relation to COVID-19.

For this analysis, the Australian Human Rights Commission coded each mention of COVID-19 in the case notes under broad themes. The broad themes were identified through an analysis of approximately 700 cases which comprised 30% of all calls mentioning COVID-19 during the relevant period.

Concerns related to COVID-19 were mentioned either as a primary concern, co-existing concern and sometimes in relation to the counselling session itself. Only contacts which specifically mentioned COVID-19 were included in the analysis.

Some children and young people raised more than one concern related to COVID-19. These multiple mentions are included in the totals of the concerns raised. Percentages shown in the report may not total 100 due to rounding.

It should be acknowledged that where children and young people contacted Kids Helpline and did not mention COVID-19, it does not mean that they were not affected by COVID-19 but rather that there is no way of determining whether they were or not.

It is recognised that the source for the data is from children and young people actively seeking help, and this group of children and young people may differ from those who do not seek help about their concerns. As a result of this, a possible respondent bias may exist in the data set. However, this does not detract from the value of the data in providing an evidence base for the development of support strategies for those children and young people who are seeking help.

Section 4 includes, under each of the themes, short case studies based on what children and young people told Kids Helpline. All names and identifying details for children and young people have been removed to protect the identities of the children and young people. Pseudonyms have been used for each case. While based on real cases, the details have been amended so that the cases do not necessarily reflect any one person's story.

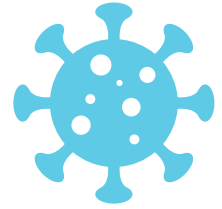


COVID-19 related concerns, by theme



SECTION
03

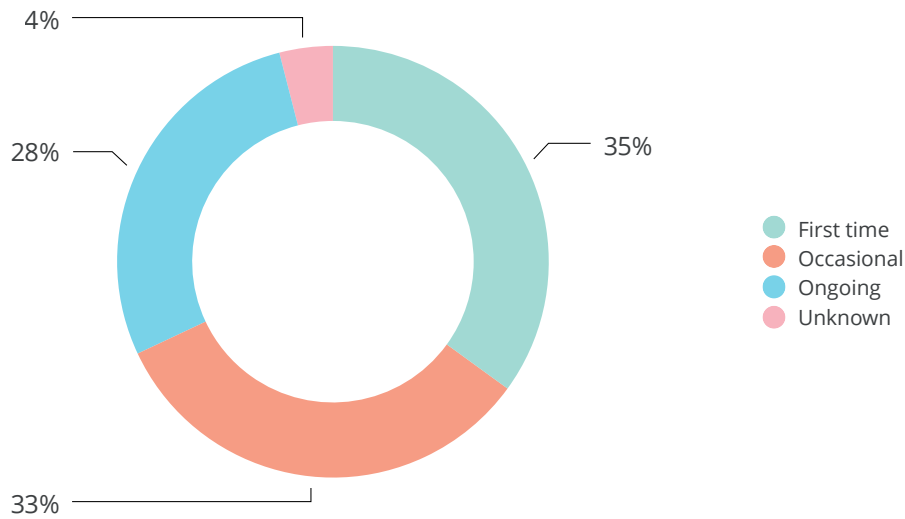
Demographics of children and young people that raised COVID-19



Between January 2020 and April 2020, Kids Helpline responded to 2,567 contacts from children and young people aged 5 to 25 years, where COVID-19 was recorded by counsellors in their contact notes.

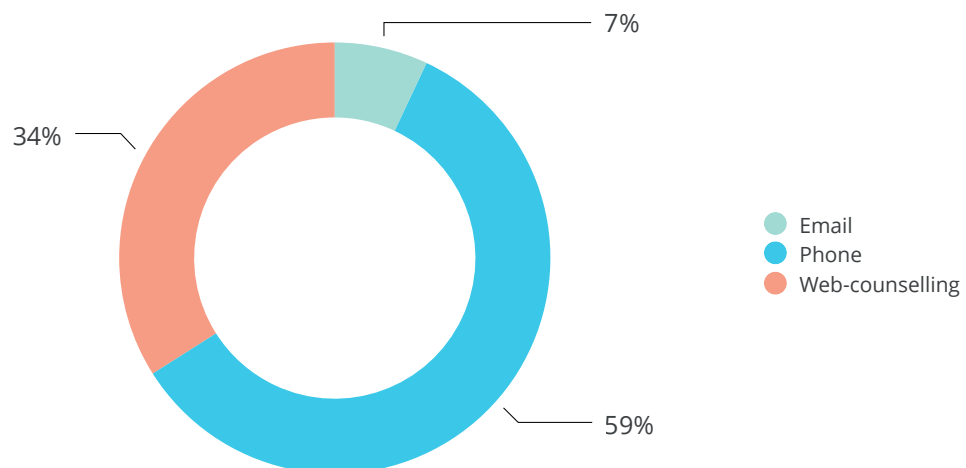
895 were first-time contacts, 837 were occasional support contacts, 723 were ongoing contacts, and 112 were contacts where the child or young person's type of engagement with Kids Helpline was unknown.

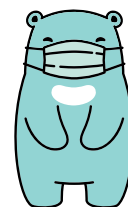
Contact type



Of these, 1,502 were telephone contacts, 184 were email contacts and 881 were web-counselling contacts.

Medium of contact



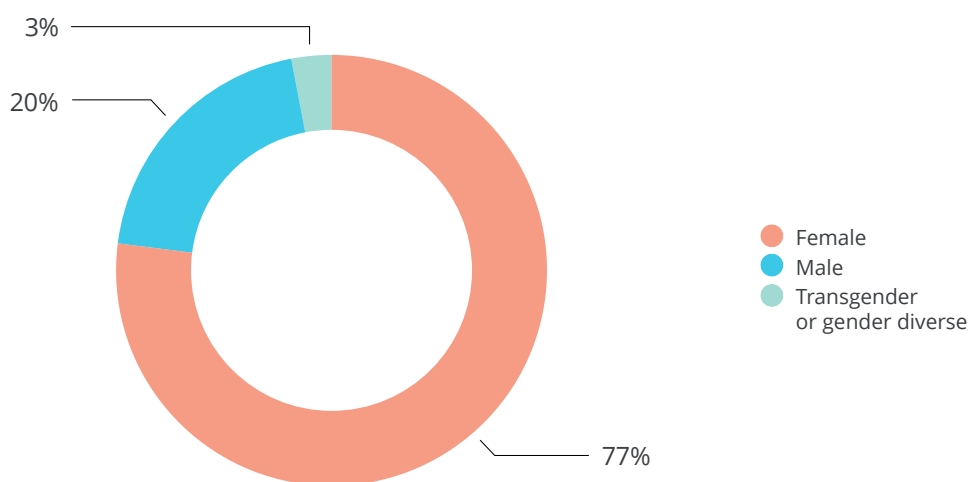


3.1 Sex/Gender and Age

Sex/gender was recorded for 2,449 contacts from children and young people aged 5-25 years. 118 were unknown.

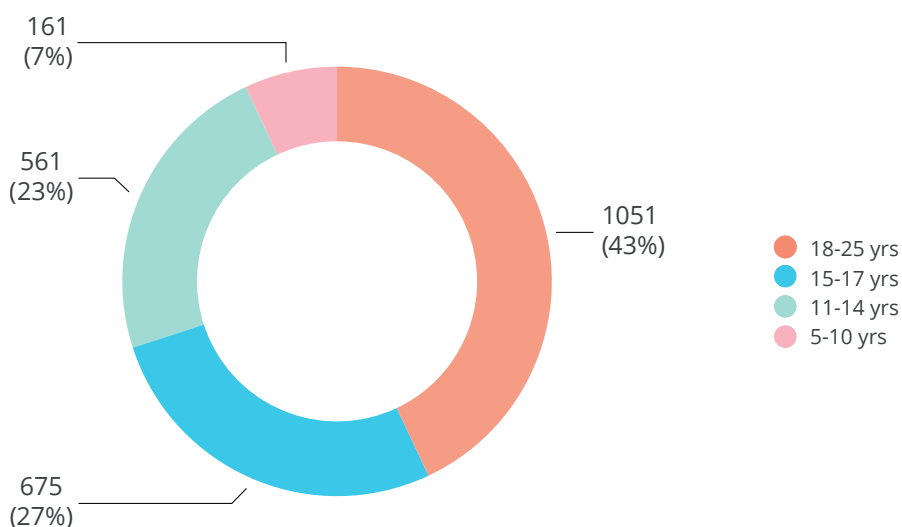
Of the 2,449 contacts, 1,882 were female, 500 were from males, 67 were transgender or gender diverse. 77% of contacts were from females.

Sex/Gender (where known)



Age was recorded for 2,448 contacts. Age for 119 contacts was unknown. 43% of contacts were from those aged 18-25 years. While this cohort made up the largest percentage of contacts to Kids Helpline who raised COVID-19, most contacts where age was recorded (57%) were under 18. The types of concerns raised with Kids Helpline varied according to age.

Age breakdown (where known)



No quantifiable data was recorded in relation to children and young people with disability. This information is only recorded in case notes if it is raised by the child or young person in the context of the issue discussed in the contact. Where disability was raised in the case notes related to COVID-19, this is discussed in section 4.

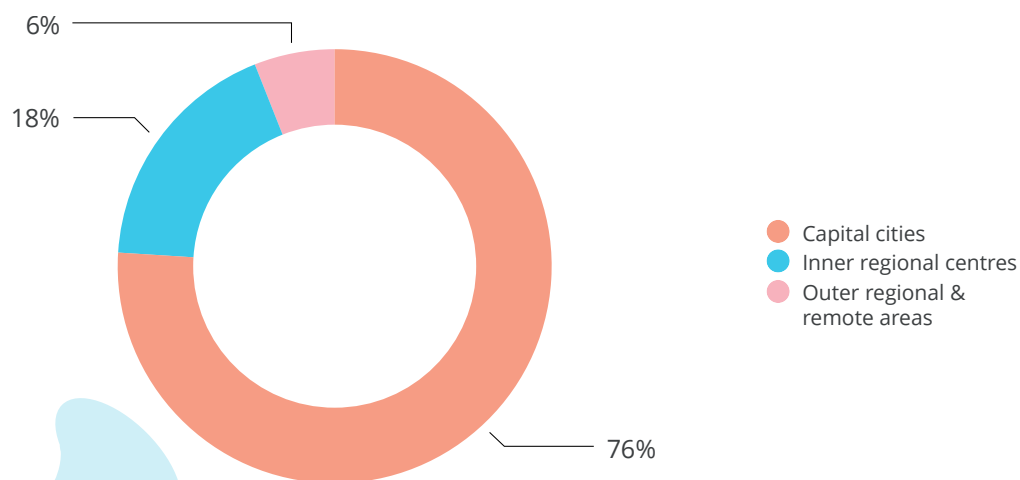
3.2 Location

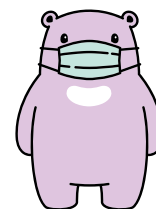
Counsellors collect data on the location of the child or young person making the contact. A regional classification system based on the Australian Statistical Geography Standard (ASGS) driven by postcode location is used to code data.

Between January 2020 and April 2020, Kids Helpline collected location data in 1,333 contacts from children and young people under 18 years. Location was unknown for 1,234 contacts.

Of these contacts, 1,018 were from a capital city, 238 were from inner regional centres, and 77 were from outer regional and remote areas.

Location (where known)

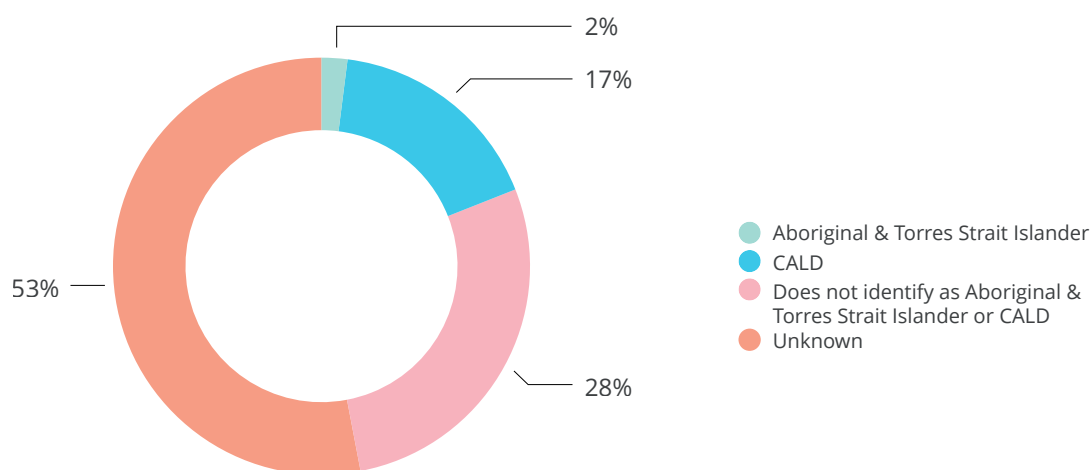




3.3 Cultural background

The cultural backgrounds of the 2,567 contacts included 53 Aboriginal and Torres Strait Islander children and young people, 433 culturally and linguistically diverse children and young people (CALD), and 731 children and young people who did not identify as Aboriginal, Torres Strait Islander or CALD. Cultural background was unknown for more than half the contacts (1,350).

Cultural background



(a) Aboriginal and Torres Strait Islander children and young people

Of the Aboriginal and/or Torres Strait Islander contacts, 75% were female, 21% were male and 4% were transgender or gender diverse. 2% were aged 5-10 years, 16% were aged 11-14 years, 24% were aged 15-17 years and 59% were 18-25 years.

46% were from a capital city, 25% were from inner regional centres, and 20% were from outer regional and remote areas.

60% were telephone contacts, 4% were email contacts and 36% were web-counselling contacts.

(b) Children and young people from culturally and linguistically diverse backgrounds (CALD)

Of the CALD contacts, 76% were female, 22% were male and 1% were transgender or gender diverse.

3% were aged 5-10 years, 17% were aged 11-14 years, 26% were aged 15-17 years and 54% were 18-25 years.

90% were from a capital city, 9% were from inner regional centres, and 1% were from outer regional and remote areas.

62% were telephone contacts, 4% were email contacts and 33% were web-counselling contacts.

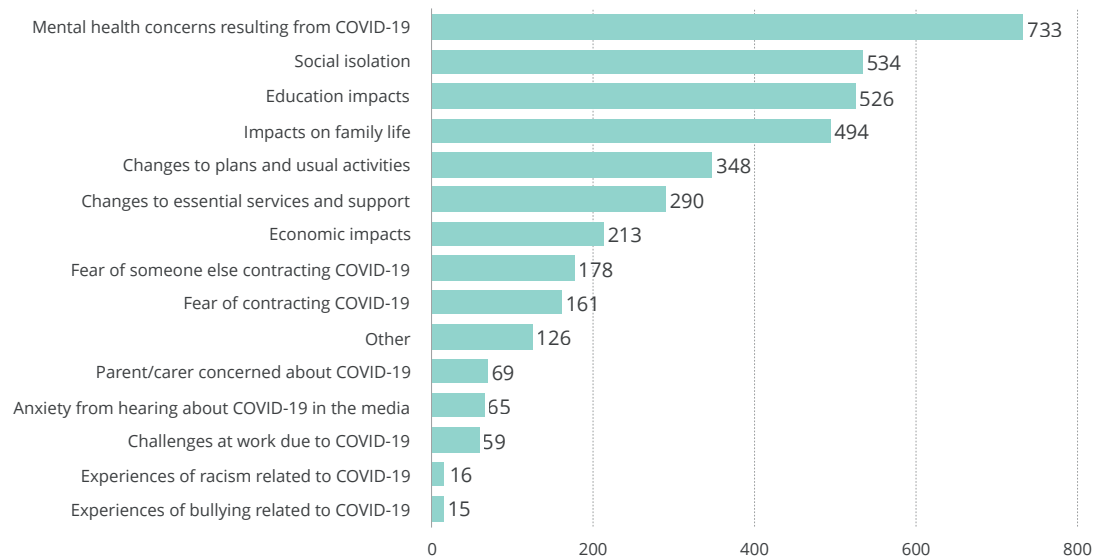
COVID-19 concerns raised by children and young people



4.1 Concerns raised by children and young people by theme

The following graph shows the number of all concerns, by theme, that were raised by children and young people with Kids Helpline between January and April 2020.

Number of concerns raised by children and young people

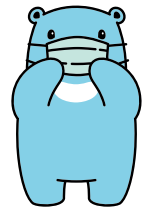


4.2 Top COVID-19 concerns raised by children and young people by demographics

As indicated in the above graph, the top five concerns related to COVID-19 raised by all children and young people were:

1. **Mental health concerns resulting from COVID-19**
2. **Social isolation**
3. **Education impacts**
4. **Impacts on family life**
5. **Changes to plans and usual activities.**

While these were the overall top concerns, differences existed across the top five concerns within age groups, gender, location, and cultural background. The following charts show the top five concerns related to COVID-19 raised by children and young people for whom age, gender, location and cultural background were known.



Mental health concerns resulting from COVID-19 was the top concern for females, males, and transgender or gender diverse aged 5-10 years and all those aged 18-25 years; males and transgender or gender diverse aged 11-14 years; those in cities and inner regional areas; and those aged 18-25 years from CALD backgrounds.

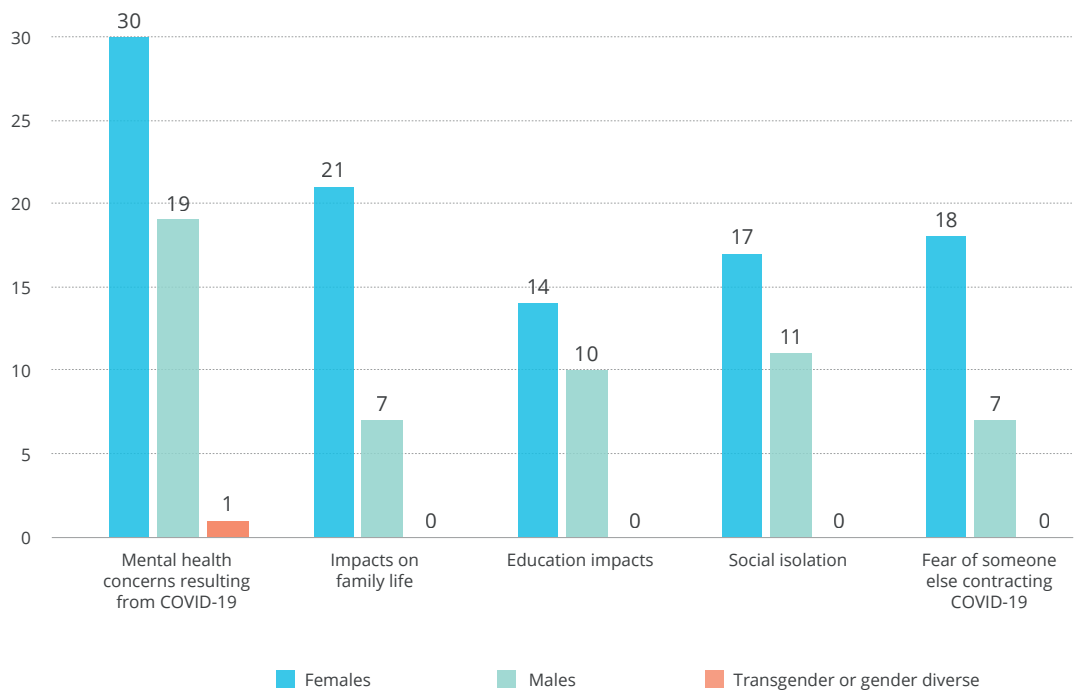
Education impacts was the top concern for females and transgender or gender diverse aged 11-14 years; females, males, and transgender or gender diverse aged 15-17 years; and those in outer regional and remote areas.

The top concern for Aboriginal and Torres Strait Islander children and young people was changes to essential services and supports.

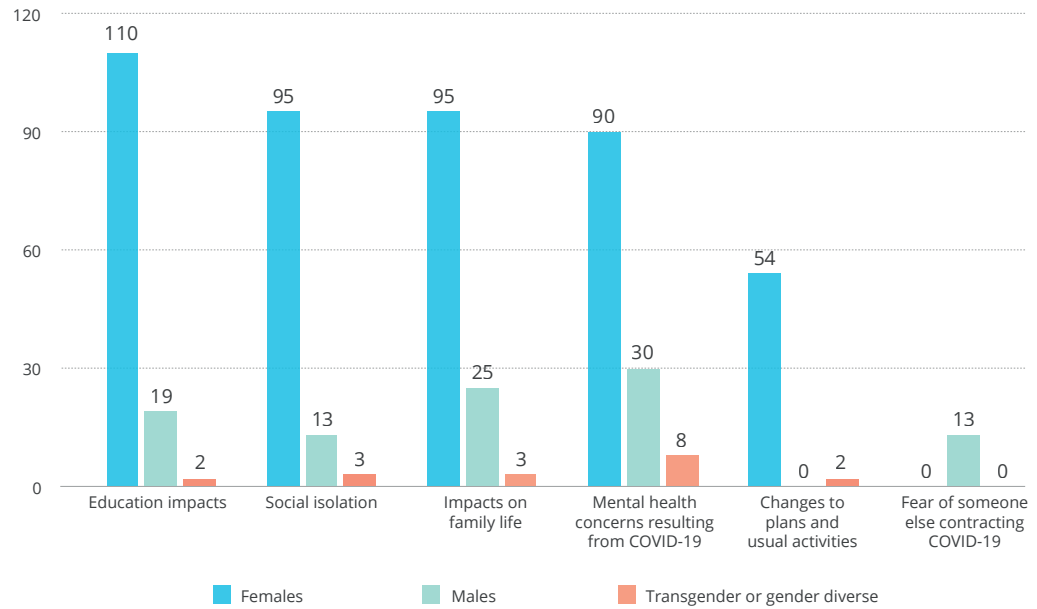
The top COVID-19 concern for CALD children and young people aged 11-14 and 15-17 was impacts on family life.

The top concern for transgender or gender diverse aged 18-25 years was fear of contracting COVID-19.

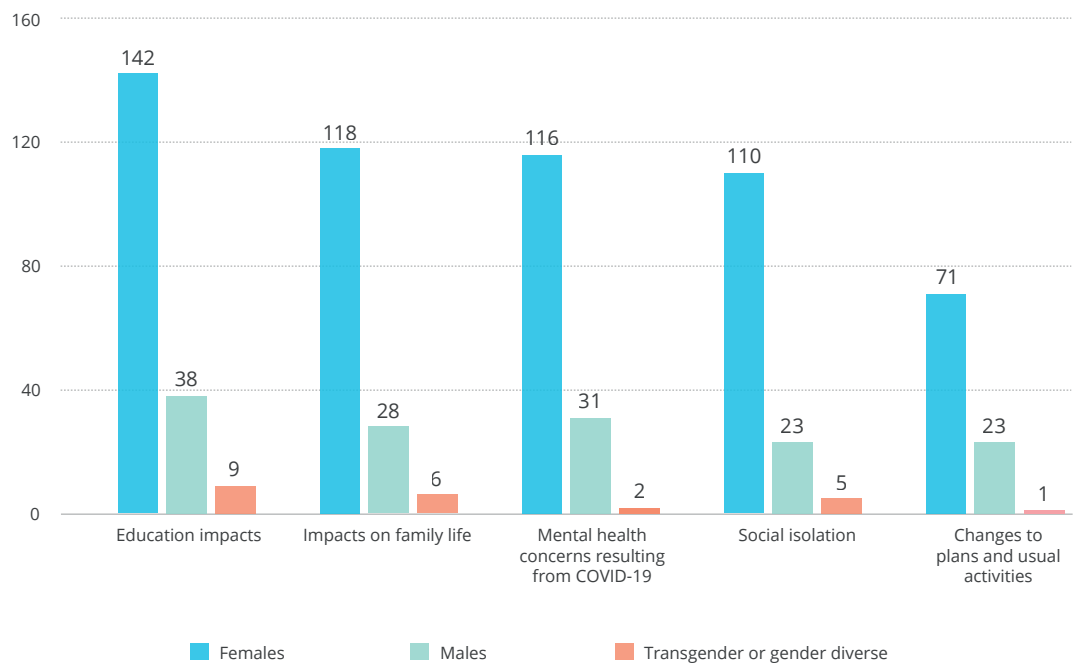
Top 5 concerns of those aged 5-10 years by gender



Top 5 concerns of those aged 11-14 years by gender

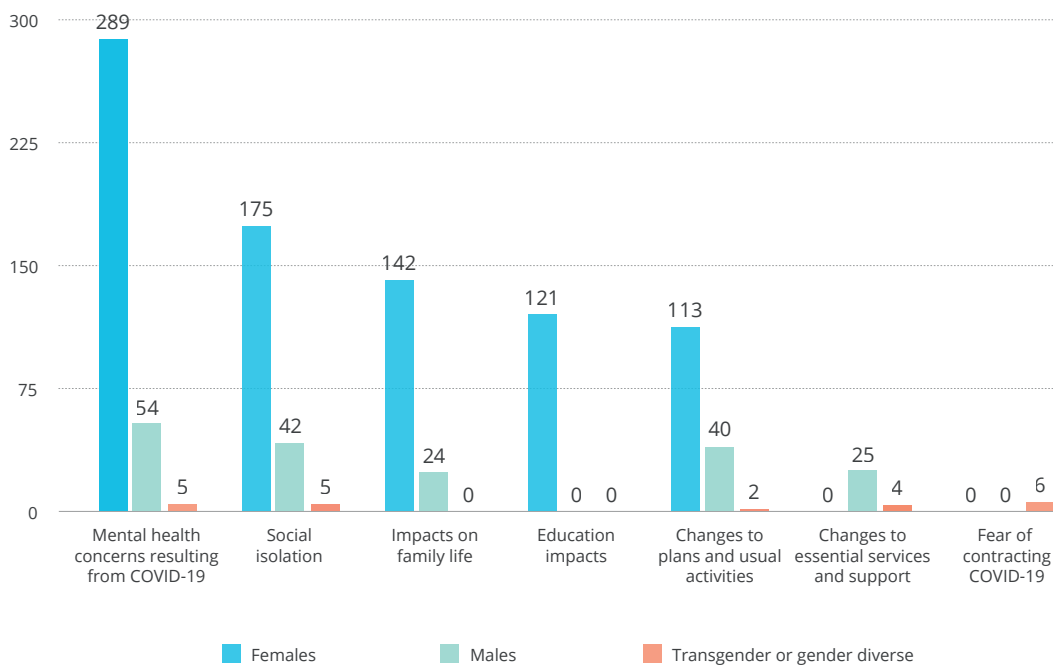


Top 5 concerns of those aged 15-17 years by gender





Top 5 concerns of those aged 18-25 years by gender



The top five concerns raised in **outer regional and remote areas** included:

1. Education impacts
2. Mental health concerns resulting from COVID-19
3. Social isolation
4. Changes to essential services and supports
5. Impacts on family life.

The top five concerns raised in **major cities** included:

1. Mental health concerns resulting from COVID-19
2. Education impacts
3. Social isolation/Impacts on family life
4. Changes to essential services and supports
5. Changes to plans and usual activities.

The top five concerns raised in **inner regional areas** included:

1. Mental health concerns resulting from COVID-19
2. Social isolation
3. Education impacts
4. Impacts on family life
5. Changes to essential services and supports.

The top five concerns raised by **Aboriginal and Torres Strait Islander children and young people** included:

1. Changes to essential services and supports
2. Mental health concerns resulting from COVID-19
3. Fear of contracting COVID-19/ Changes to plans and usual activities
4. Impacts on family life/Social isolation
5. Education impacts.





The top five concerns raised by **CALD female** children and young people included:

1. Mental health concerns resulting from COVID-19
2. Impacts on family life
3. Education impacts
4. Social isolation
5. Changes to plans and usual activities.

The top five concerns raised by **CALD male** children and young people included:

- Impacts on family life
- Changes to plans and usual activities
- Education impacts/ Social isolation
- Mental health concerns resulting from COVID-19
- Changes to essential services and supports/ Experiences of racism related to COVID-19.



4.3 Mental health concerns resulting from COVID-19

- Children and young people spoke about worry, stress, feeling trapped, frustration, anger, sadness, loss and grief.
- Teenagers and young adults tended to discuss COVID-19 in the context of existing mental health concerns such as anxiety, depression, eating disorders, obsessive and compulsive behaviours, intrusive thoughts, self-harm and suicidality.
- In some cases, a fear of getting COVID-19, or the restrictions associated with COVID-19, was a trigger for an existing mental health condition.

Mental health concerns resulting from COVID-19 was the overall top concern raised by children and young people. Twenty-nine percent (733) of children and young people raised this.

The dominance of mental health concerns related to COVID-19 is not surprising, given that mental health is the primary concern raised by all children and young people who contact Kids Helpline (not only those that mention COVID-19). In the four months from January to April 2020, 29% of counselling contacts made to Kids Helpline had mental health recorded as a concern. This is a 3% increase compared to the same period in 2019 (26%).

Other surveys of children's concerns during COVID-19 have also highlighted mental health as a significant issue. For example, nationally representative research conducted by Youth Insight about the impacts of COVID-19 found that 40 percent of young people in May 2020 continued to be concerned about their mental health.⁴

Children and young people spoke about their feelings of worry and stress, being trapped, frustrated, anger, sadness, loss and grief. Many raised the impact of COVID-19 on specific mental health conditions, including anxiety and depression, phobias, eating disorders, obsessive and compulsive behaviours, intrusive thoughts, self-harm and suicidality, to name a few.

Younger children tended to express worry and anxiety about COVID-19, whereas older cohorts tended to link their concerns to existing mental health diagnoses.

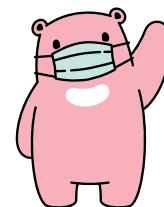
Case studies:

Mental health concerns resulting from COVID-19

'Ethan', aged 8, rang Kids Helpline to say that he was worried about his family having a difficult time with money and food because of the virus. He is worried that there is no pasta on the shelves, that the Easter egg hunt this year might be cancelled, and that school might be closed down forever. He ended the call saying he was feeling much better.

'Jamie', 11, called Kids Helpline with assistance of her mother to talk about the impact of COVID-19 on her anxiety. She has been engaged in counselling before for anxiety. She has been feeling 'scared' and 'trapped', explaining that she was not able to leave the house and that she was scared about not knowing what was going to happen in the future.

'Julia', aged 17, told Kids Helpline that she has experienced anxiety and OCD symptoms for several years. She has a fear of germs and compulsively washes her hands. However, with coronavirus this anxiety has been triggered enormously. She will only eat packet foods, which limits her food options. Sometimes she simply won't eat anything at all. Although she was aware her thoughts were unreasonable, she is finding them impossible to control at the moment, with her usual distractions being so limited.



'Maria', aged 21, rang Kids Helpline because things had been getting a little bit harder lately with the coronavirus situation. She was diagnosed with depression a few years ago and has also attempted suicide a few times. Both her parents are alcoholics and her mum was abusive when she was growing up. She has voices in her head that tell her nobody cares. Usually she will distract herself from these thoughts by spending time with friends or losing herself in work, but with the lockdown she has been unable to do so.

281 (11%) children and young people indicated that COVID-19 and the associated restrictions had affected their pre-existing mental conditions, triggering or increasing the debilitating effects of the conditions. These mental health conditions ranged in severity. However, a large number who mentioned COVID-19 in this context also reported serious mental health conditions during their contact with Kids Helpline. Of the 2567 children and young people who raised COVID-19 overall, as many as 248 (10%) also had suicide-related concerns recorded. For as many as 146 (6%), self-harm/injury had been recorded as a concern.

Further, of those who specifically mentioned that COVID-19 had increased their pre-existing condition,

- 17% raised suicide
- 9% raised self-harm
- 1% raised substance abuse
- 1% raised body image

as one of their concerns when contacting Kids Helpline.

It is likely that COVID-19 and its restrictions increased the impact of pre-existing mental health conditions in many more of the contacts to Kids Helpline than is reflected above. However, only those children and young people that specifically mentioned its impact were included in the count.

In some cases, a fear of getting COVID-19 was a trigger for an existing mental health condition, but in most cases the restrictions, including the reduced access to usual coping strategies, were cited as the reason for increasing symptoms. For example, children and young people with eating disorders raised concerns that changing routines and limited access to their usual forms of exercise meant that they were unable to cope with their disorder.

Concerns about body image and eating disorders during COVID-19 are reflected in data released by ReachOut and the Butterfly Foundation, which shows a sharp spike in the numbers of young people seeking help with body image and eating disorders compared to the same time last year.⁵

According to June 2020 data, 75% more people visited ReachOut's content about body image compared to the same time last year (16 March to 30 June 2020 & 2019). There has also been an increase of 48% in the number of people seeking help for an eating disorder via the Butterfly Foundation's Helpline during the COVID-19 pandemic, compared with the same time last year.

Case studies:

Triggers or increases in pre-existing mental health condition

'Lottie', aged 17, told Kids Helpline her eating disorder had worsened over the past few months because she has been unable to engage in things that would make it okay for her to eat; that is, exercise and netball. She is being medically monitored every fortnight by her GP and speaks to her therapist on the phone because of social distancing. But she doesn't think the phone sessions help her. She said she has been unable to find a new therapist, because they are either not taking on new clients, or have a long wait time.

'Robert', aged 16, rang Kids Helpline to say that he is having difficulty coping with the current restrictions due to COVID-19. After a year of being clean from self-harm (cutting), he has started up again. He said he was struggling being at home with his family. He would usually access the school counsellor and would be involved in sport and clubs, as a coping mechanism. But now he is at home, he is feeling more and more hopeless.

'Frankie', aged 15, rang Kids Helpline to say that her suicidal thoughts are more prevalent since the COVID-19 situation. She can't see her friends and is finding remote schooling very challenging. She normally sees the school counsellor but currently has no contact due to COVID-19.

'Christina', aged 20, told Kids Helpline that her depression and anxiety have been bad lately because of the COVID-19 situation. She is at university, but it is hard to study online. She is finding that her compulsive behaviours, which include tearing at her skin, have got worse. She is also having frequent panic attacks and thoughts of suicide, whereas before COVID-19 she had not had any for several months. Having to self-isolate has also meant she can't keep up her usual routines. She reflected on why she didn't follow through with her plan to kill herself last year but said there was nothing to stop her going through with it today.

4.4 Social isolation

- Children and young people were missing seeing their friends at school, and at university and work.
- Some children and young people worried that they were unable to connect with friends who provide them with their main mental health support.
- Some children and young people said that online socialising, while important, was insufficient.
- Teenagers and young adults spoke about the impacts of being separated from their romantic partners.

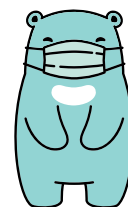
Social isolation as a result of the restrictions was one of the top concerns raised by children and young people of all ages, highlighting the importance of friendships and relationships outside of the family for many children and young people.

Twenty-one percent (534) of children and young people raised COVID-19 in the context of social isolation.

Although all ages and genders raised COVID-19 in the context of social isolation, slightly more females than males and transgender or gender diverse children and young people raised this concern. It was the second or third top concern for all age groups.

Children and young people, especially teenagers, frequently expressed the view that their friends provide them with their main mental health support in times of crisis and were worried about being unable to connect with these friends because of social distancing measures.

Some spoke of loneliness, feelings of abandonment, introspection, and insecurities about their friendships especially those with pre-existing mental health conditions.



Others spoke about socialising as one of their main activities outside of work or school. Without being able to go out and socialise, several older children and young adults said they were bored and lacking motivation.

Some children and young people said that online socialising, while important, was insufficient, and that keeping in contact with friends through online formats was difficult. Some talked about how online socialising led to misinterpreting relationships with friends, for example anxieties that friends were deliberately not contacting or ostracising them.

School is a primary place for children to socialise. Many children said that they missed seeing their friends at school. This was not only confined to younger children. University students also lamented the loss of social connection usually provided through attending classes and campuses in person. Young adults also missed seeing their work colleagues.

Teenagers raised the adverse impacts of social distancing measures on their romantic relationships, in some cases causing them significant anxiety and distress. Some said they were desperate to see their partners, but were unable to because of COVID-19 restrictions, or were forbidden by their parents, which then caused family conflict.

Young adults also spoke about being separated from their partners, which added to their loneliness, and placed additional stress on their relationships.

Social isolation was mentioned as especially hard for some young adults who live alone, and those who were unable to return to live with families. For example, young international students living alone without family in Australia, and who are unable to work, study or socialise due to the restrictions.

Case studies:

Social isolation

'Molly', aged 10, rang Kids Helpline because she is missing her schoolfriends. She feels sad that she can't see them and says that talking to them online just isn't the same. Her mother helped her make the call and was asking the Helpline for ideas on how to make her daughter happier during the lockdown.

'Melissa', aged 16, told Kids Helpline she is missing her friends hugely. She enjoys being around people and relies on them for support. But with lockdown she is feeling disconnected and lonely, and she wonders why her friends don't contact her online as much as she contacts them.

'Lucas', aged 17, contacted Kids Helpline because he is worried about his girlfriend, who has been making comments about not wanting to be here anymore, saying that everyone hates her. But due to the lockdown measures he can't see her in person.

His parents have forbidden him to meet with her because they are fearful of COVID-19 and keeping the rules, but he feels that not seeing her is making it worse. He doesn't know what to do and is not sleeping at night.

'Gabriela', aged 18, rang Kids Helpline to talk about some recent stressors in her life that have made her feel depressed, including self-isolation due to a coronavirus scare at her university. When she was in high school, she was diagnosed with depression, and experienced suicidal ideation and self-harm. Now, in lockdown, she is feeling grief and loss over separation from her friends, especially not being able to get hugs from them. She is aware that the urge to self-harm is increasing.

'Ellie', aged 21, rang Kids Helpline to talk about her relationship with a young woman that she met recently when travelling overseas. They got on very well, and then ended up developing feelings for each other. But then the coronavirus situation escalated suddenly, and she had to come back to Australia. Now it's been over a month and Ellie is missing the girl very much and finding it difficult to cope with COVID-19 restrictions. She worries that the travel restrictions may be in place for years, and that she has missed an opportunity to have a relationship with someone she loves.

Concerns related to the education impacts of COVID-19 were the third most frequently raised concerns of children and young people. Twenty percent (526) of children and young people raised COVID-19 in the context of education impacts.

Although the education impacts of COVID-19 were raised as a significant concern by all age groups, high school-aged children were more likely to raise this as an issue than children aged 5-10 and young adults aged 18-25. It was the top concern raised by females aged 11-14, and females, males and transgender or gender diverse children and young people aged 15-17 years.

Females were also slightly more likely to raise this concern overall than either males or transgender or gender diverse children and young people.

Many children said that they were attending school online, studying from home using electronic devices. Most children who raised COVID-19 in this context said they were struggling with this form of delivery. The reasons for this included boredom, too many distractions at home, difficulty concentrating and feeling overwhelmed with the work.

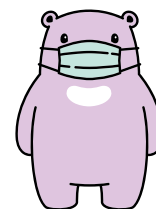
High school students in particular spoke about feeling overwhelmed with the amount of work that had been assigned when they were studying online. Year 12 students had significant anxiety about falling behind in their studies. This had led to stress – and conflict with parents as well.

Some children with disability raised difficulties about learning online, particularly those with autism spectrum disorders.

These concerns are also reflected in a survey on the impacts of the pandemic on children and young people with disability and their families, conducted by Children and Young People with Disability Australia (CYDA) in May 2020.⁶ Uncertainty about education was a prominent theme raised by children with disability and their family members in this survey, including the impact of school closures and challenges with learning from home, and concerns that progress gained by children and young people with disability would be lost during this period.⁷

4.5 Education impacts

- Children and young people were struggling with online delivery of their education, including some children and young people with disability.
- High school students were feeling overwhelmed with the amount of work that had been assigned. Year 12 students had significant anxiety about falling behind in their studies.
- Some children and young people preferred learning online to face-to-face learning and were worried about returning to school in April.
- Some children raised limited access to technology needed for home learning.
- Some children were missing the mental health and learning support provided by teachers and school counsellors.



However, some children and young people told Kids Helpline that they preferred learning online to face-to-face learning. This was because it suited them better, with fewer distractions, more opportunity to relax, and, in some cases, because they usually found social interactions at school stressful.

This latter reason translated into worries about returning to school, which was being discussed across the nation as an option during April. Some children were also worried about returning to face-to-face learning because they had health conditions and were fearful of being exposed to the virus.

Another issue raised by a few children and young people who contacted Kids Helpline was limited access to the technology needed for home learning, and other activities such as socialising and counselling. For example, several children living in remote areas said their internet connection was poor. Children who moved between households frequently mentioned the difficulties of setting up internet access each time they moved. Others said they had to share devices and data with their siblings and parents. Some mentioned that their laptops or phones had been taken away by their parents as punishment, in the context of arguments among family members during lockdown.

Another concern raised was the impacts of home learning on children's ability to access mental health support. Some children talked about how they missed the support of teachers, both for completing their schoolwork and for their mental health. Many school-aged children with existing mental health concerns mentioned that they missed seeing the school counsellor, who was their regular form of support.

Education impacts were also significant for young adults, who were struggling with online university, especially first year students. Some other young people mentioned that work placements associated with their study, such as apprenticeships, had been cancelled, and this had disrupted their plans for the year and their enjoyment of the course.

Case studies:

Education impacts

'Rani', aged 16, rang Kids Helpline to talk about how stressed she was with schoolwork and family issues. She is struggling with online learning and finds it easier to learn in the classroom with the teacher there. The teachers seem to be setting more work for them online than usual. Her parents are not very understanding about this and keep making comments that something is overdue. She is also easily distracted at home.

'Tayla', aged 15, is struggling and feeling stressed, empty and emotional all the time. She told Kids Helpline that being away from school and all her supports due to COVID-19 restrictions was challenging for her, and that she was feeling overwhelmed. She said her teachers were a big support, but she felt like she would be annoying them if she reached out to them now that she was learning from home. She was trying to figure out what she could do from home to look after her wellbeing, as she doesn't have access to what usually helps her cope with stress.

'Joe', aged 17, is in Year 11 and is on the autism spectrum. He rang Kids Helpline to talk about how he is feeling stressed with online schooling and has been struggling to cope with the workload. Usually he loves school, but now he has low motivation, low energy and no willpower. He also can't do all the other activities he normally would do to feel good, like volunteering at the local community centre.

'Erin', aged 19, rang Kids Helpline to talk about how self-isolation is affecting her. Because of coronavirus, her university went online, and she had to return to live at home with her family. As a first-year student, she was looking forward to socialising and being active at the university, but now finds that she is isolated, disappointed and bored. She is also struggling with being motivated on her course.

'Jasmin', aged 17, had been diagnosed with anxiety from childhood trauma. She rang Kids Helpline to talk about her mental health, saying that while things have gone well for a few years, they are now going downhill. Due to the coronavirus she is at home and isolated from school. Usually school was helping her mental health because it was a distraction, and gave her connections with people, a routine and a safe place away from home. Now she finds she is sleeping longer, not showering until 3pm and not eating or drinking much.

'Samira', aged 12, spoke to Kids Helpline about her feelings now she is going back to school tomorrow after COVID-19 restrictions have ended. She has been having trouble with forming friendships for several years and has been bullied before. She is worried she will annoy people at school and isn't sure which of her friends will be there when she gets back.

'Jason', aged 14, contacted Kids Helpline feeling bad, as his dad wanted him to go back to school today. He prefers doing online learning at home because there are fewer distractions and he can do things at his own pace and listen to music and movies when he wants a break. He is also worried about going back to school as he has a weak immune system and his school is a COVID-19 hotspot.

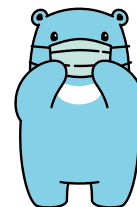
4.6 Impacts on family life

- Children and young people spoke about increased tensions within families due to living so closely together, financial stress and the lack of outside supports and activities.
- Some children and young people at risk of violence and abuse felt trapped and unable to run away at this time.
- Some children and young people in out-of-home care raised difficulties in relationships with their foster family in lockdown, feeling trapped, and reduced access to support and services.
- Young adults, who had been living away from their families while studying or working, raised difficulties of returning to live with family due to COVID-19, its economic impacts and the restrictions.
- Some children and young people expressed sadness and worry at being separated from family members who were in other locations, including interstate, overseas or in hospital due to COVID-19 and its restrictions.



The impacts of COVID-19 on family life was among the top three concerns for almost all age groups and both genders. Nineteen percent (494) of children and young people raised COVID-19 in the context of impacts on family life.

These concerns were raised more frequently by children and young people aged 11-14 and 15-17. Overall, females were more likely to raise this concern than males or transgender or gender diverse children and young people. It was the second top concern raised by females aged 5-10 and females aged 15-17. It was the top concern for CALD children and young people aged 11-14 and 15-17.



Many children and young people told Kids Helpline that COVID-19 and the restrictions put in place to prevent the transmission of COVID-19 had caused additional stress on family life.

Children and young people spoke about increased tensions within the family due to living so closely together, financial stress, and the lack of outside supports and activities. Children and young people mentioned increased arguments with parents and siblings, and extended family members. They also mentioned new points of argument – parents trying to stop children and young people from going out, young people not being allowed to visit romantic partners, arguments about schooling and extra financial stress.

A few young adults, who had been living away from their families while studying or working, raised the difficulties of returning to live with family due to COVID-19, its economic impacts and the restrictions.

Some children and young people spoke about experiencing violence and abuse at home. 122 (5%) of children and young people contacted Kids Helpline with this as a concern (including those who did not mention COVID-19 in this context). Some spoke about being exposed to family violence between parents/carers, while others indicated they had been victims of abuse and violence by a parent, and in some cases siblings.

Some children and young people in these situations said that the restrictions had heightened family tensions leading to violence. Others felt trapped and unable to run away. Some were unable to, or uncertain whether they could, access their usual support mechanisms when facing family conflict.

Some young people expressed worries about being confined at home with family that do not understand their sexuality, and who they argue with. They were anxious about family relationships in this context.

Some children and young people indicated that they were living in out-of-home care, kinship, or other care arrangements. Living arrangements were recorded for only 790 out of 2,567 children and young people who raised COVID-19 as a concern. Of these, 3% indicated they were living at a residential facility for children or young people; with foster parents; in a shelter or hostel, or in supported accommodation. Concerns raised in these contexts include difficulties in relationships with their foster family in lockdown, feeling trapped, and reduced access to support and services.

Some young people spoke about wanting to run away from home, and some had been planning to live elsewhere but found that they were unable to do this because of the lockdown. A few young people discussed drifting between living with family that they do not get on with, and homelessness, a situation made harder because of the lockdown and worsening financial situation. Some had been homeless in the past, and others were already couch-surfing or staying at friend's houses.

Other children and young people spoke about their sadness and worry at being separated from family members due to COVID-19 and its restrictions. For example, some children whose parents were separated indicated that they were unable to see one parent because of the restrictions. Others spoke about parents, grandparents or other relatives trapped overseas or in another state who they were unable to see because of COVID-19 and the border restrictions in place.

A few children and young people were worried about relatives in hospital who they were unable to visit due to fears of contracting COVID-19 or because of hospital restrictions. Some mentioned their sadness and grief at not being able to attend funerals of family members because of the restrictions.

Case studies:

Impacts on family life

'Ruby', aged 7, rang Kids Helpline with the help of her mother. She was crying through the call but managed to say that her parents had split up and she wanted her father to stay at their house. Due to COVID-19, she is unable to see her father as regularly, and she misses him. He lives with her stepmother and an older step-sister, who Ruby says is mean to her.

'Jack', aged 14, contacted Kids Helpline to talk about how living with his family has got worse since coronavirus. He had a terrible fight with his Mum this morning, and his dad also got involved. His dad hit him on the legs and called him a 'f***** useless piece of shit'. Jack says that if he tells child protection people, they just tell him to go back home and work it out. Earlier this year he lived with a foster family for a few months, which was okay but not great. Now with coronavirus he has to rely on his parents more than he would like.

'Eddie', aged 14, told Kids Helpline that things at home have been a lot worse since coronavirus. His dad lost his job and is now at home a lot more. Both his parents have been drinking every night and spend their money on smokes and alcohol instead of proper food. His mum makes dinner a few times a week, and he has cereal sometimes for breakfast, but he said there isn't enough nutritious food in the house. He likes his mum, but she is spending more of her time with his dad getting drunk. He said home feels like a prison because he is stuck at home and can no longer play sport or visit friends.

'Indi', aged 13, contacted Kids Helpline about her father, who she says can be controlling and mean. Things have just got worse since lockdown as they are at home together all the time. Recently he took away her laptop which she needs for online schooling. Her mother is planning to leave him, but they depend on him financially and her mother recently lost her job due to COVID-19.

'Matt', aged 14, told Kids Helpline that it is especially hard being in their family at the moment, due to lockdown. They are unsure of their gender and want to be able to figure out who they are. School is usually where they feel safest and where they can relax. Matt reported that they don't feel loved by their parents and their parents are very controlling. They are not sure what to do, and whether to tell their parents about their gender identity now or later once lockdown is lifted.

'Daria', aged 20, told Kids Helpline that she lost her job due to COVID-19, and had to move home because she could not support herself. But now her parents are kicking her out of the home within a month because they are unsupportive of her sexual orientation, and this leads to constant arguments.

'Luke', aged 17, rang Kids Helpline to talk about the difficulties he has with his parents, saying they are emotionally abusive towards him and that he feels unsafe at times. Now he is struggling with how they are treating him while he is home doing online schooling. His mother is drinking more and verbally abusing him, and his father is increasingly acting unpredictably and aggressively. Luke wants to leave home but is only in Year 11 and needs to stay at school because he wants to go on to university. He used to be able to spend as much time as he could out of home before the coronavirus, going to rugby training four days a week and going out with friends. But now he can't.



4.7 Changes to plans and usual activities

- Children and young people were missing their usual activities such as sporting teams, dance classes, going to the gym, clubs, volunteering, church, parties and shopping. They spoke about being bored, having no routine, and missing their friends because they were unable to participate in these activities.
- Some children and young people were concerned that they were unable to engage in activities that were their usual way of coping with mental health issues.
- Children and young people expressed disappointment that certain events had been cancelled, including typical 'rites of passage' such as 18th birthday parties and graduation events. They also were sad that they could not attend events such as weddings and funerals of friends and acquaintances.
- Young people spoke about the mental health impacts of disrupted study and travel plans, particularly those in Years 11 and 12, and young adults.

Fourteen percent (348) of children and young people raised COVID-19 in the context of changes to plans and usual activities. These concerns were likely exacerbated by school closures and remote learning.

These concerns were raised slightly more frequently by children and young people aged 15-17 and 18-25. It was one of the top five concerns for children and young people aged 15-17, and young people aged 18-24, especially males. It was also one of the top five concerns for males aged 11-14.

These concerns were also raised more frequently by Aboriginal and Torres Strait Islander children and young people than children and young people that did not identify as Aboriginal and Torres Strait Islander. It was the third highest top concern for Aboriginal and Torres Strait Islander children.

Children and young people from CALD backgrounds also raised these concerns more than those that did not identify as having CALD backgrounds. It was the second highest top concern for males with CALD backgrounds.

Children and young people are generally involved in extracurricular activities. These provide them with socialisation, learning, and entertainment. The restrictions limited the types of activities outside of the home that children and young people usually engaged with.

Children and young people spoke about missing sporting teams, dance classes, going to the gym, clubs, volunteering, church, parties and shopping. They talked about being bored, having no routine, and missing their friends because they were unable to participate in these activities. Children and young people frequently expressed the view to Kids Helpline that everything enjoyable had been removed from their lives.

Some children and young people said that having an activity was their usual way of coping with mental health issues. For example, sporting activities were mentioned as a way of coping with anxiety. Not being able to engage in that activity was causing distress and an escalation of their existing conditions.

The importance of sport to the mental and physical health of children is emphasised in a report on the sport-related impacts of the COVID-19 pandemic on children by the Centre for Sport and Human Rights. This report found that restricting participation in sports may have a detrimental effect on the mental health of children, and, especially for vulnerable children, deprive them of a safe haven.⁸

Children and young people also spoke to Kids Helpline about activities that were not regular, but which in normal circumstances they would be able to attend, such as funerals of friends, weddings and birthday parties, especially the typical rites of passage for young people, such as 18th birthday parties. Year 12 students expressed their disappointment at not being able to bond with their fellow classmates in activities planned for their final year of school, including special school excursions, social and graduation events. As one young person said: 'everything we look forward to has been cancelled'.

The impact of having plans for study or travel disrupted was raised as a significant mental health concern for the older cohorts, particularly those in Years 11 and 12 and young adults. For those graduating from high school, plans to study, start a job, travel or study overseas were now on hold. School trips overseas were cancelled. These disruptions have left them with a feeling of loss and disappointment.

Some mentioned the effect of ongoing uncertainty on their mental state. They were struggling with the inability to make plans for the future, even with the prospect on the horizon of some restrictions being removed.

A few said they were sad and grieving because someone close to them (but not immediate family) had died and mentioned that they were unable to attend the funeral in person because of COVID-19.

Case studies:

Changes to plans and usual activities

'Lily', aged 12, rang Kids Helpline to say that she wished everything would go back to normal. She was finding it sad that she couldn't go to netball or dance classes, or go over to her friend's house. Some of her friends are not at school, and they are all being told to wash their hands all the time.

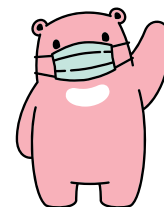
'Will', aged 15, said he has always struggled with anxiety and a fear of disappointing his parents. He rang Kids Helpline to talk about his low self-worth, and how he was bullied in primary school. He had planned to travel to the UK to play football next year, which is something he is really good at. But all these plans had been postponed, and next year he will be too old to take up the opportunity.

'Dylan', aged 18, contacted Kids Helpline to talk about his deep disappointment at the cancellation of Year 12 events, especially extra-curricular events like farewell breakfasts and dinners, performances and excursions that have been cancelled indefinitely. The cancellation of the school musical has really upset him because he loves drama and music and would have been guaranteed a key role. He said he felt like his Year 12 has been 'ruined'.

'Amelia', aged 17, rang Kids Helpline to talk about her sadness and disappointment with her life at the moment. She is finding studying online in Year 12 very tedious. She had been looking forward to some special events in the year, one of which was her 18th birthday. She had planned to have a big party with her friends to celebrate, but that has been cancelled and she feels like there is nothing to look forward to. Worse, she planned to take a gap year next year and travel to Europe. But now that seems unlikely to happen. Although her parents are supportive, she feels like her mother belittles her situation by comparing it to other people who are worse off.

'Thomas', aged 18, rang Kids Helpline to say that all his family's plans had been disrupted because of the virus, including his sister's university studies and his parents travel plans. He also discussed how he has had to put off his plans to move out as he is afraid of contracting COVID-19.

'Ester', aged 20, rang Kids Helpline because she is worried that she is relapsing into her old eating disorder. She said that she plays sports – basketball and goes to the gym – in order to cope with her disorder and stay healthy, but now these activities have stopped due to coronavirus.



4.8 Changes to essential services and support

- Children and young people said that they had been unable to access various services and supports because delivery had been cancelled, suspended, or changed in some way. Some were worried about the possibility that services would be reduced or changed.
- Children and young people spoke about reduced or changed access to mental health services, including access to regular psychologists and counsellors. Some had been offered tele-counselling, but this did not suit everyone.
- Children and young people raised concerns about reduced or changed access to other types of essential medical services: general practitioners, dentists, specialists, paediatricians, and hospitals.
- Some children and young people raised concerns about reduced or changed access to disability support services, including access to school learning support, disability support care and respite care, and access to essential medical and supermarket items.

Eleven percent (290) of children and young people raised COVID-19 in the context of changes to essential services and support.

Concerns about changes to essential services and support was raised more frequently by older age groups. It was one of five top concerns for young people aged 18-24, especially males and transgender or gender diverse young people. It was not in the overall top five concerns for children aged under 18 years.

It was, however, the top COVID-19 related concern raised by Aboriginal and Torres Strait Islander children and young people. A quarter (25%) of Aboriginal and Torres Strait Islander children and young people raised these concerns, compared to only 12% of children and young people who do not identify as Aboriginal and Torres Strait Islander.

It was one of the top five concerns for males of CALD background.

Children and young people commonly raised these concerns when they contacted Kids Helpline about their mental health, for example in discussion with the counsellor about how they can access treatment or help.

Some said that they were unable to access their usual mental health services and supports. In some cases, this was because their psychologist or counsellor had suspended services, rescheduled appointments or changed their way of delivering services, which made it harder for them to access. State border closures were also cited as a reason for being unable to access a regular psychologist.

In addition to psychologists and counsellors, children and young people mentioned the following types of services had been suspended or changed: group therapy sessions; school counselling; university counselling; hospital mental health care; social workers; mental health support groups; and counselling programs for children of separated parents.

For children and young people with depression, anxiety and other disorders, changes in accessing their usual mental health supports was very distressing and even triggered or increased the effects of their mental health condition.

Some had been offered tele-counselling, but they were uncertain whether this would suit them (although some said they had accessed tele-counselling successfully). A few children and young people said that they were contacting Kids Helpline because they could not access their usual face-to-face counsellor/psychologist.

Rather than experiencing an actual reduction in service, some children and young people expressed heightened concern about the *possibility* that services would be reduced or changed, indicating a need for better information from services. A few enquired whether Kids Helpline itself would be able to continue under the pandemic. Some complained about the long wait to access Kids Helpline.

Children and young people also raised concerns about reduced access to other types of essential medical services: general practitioners, dentists, specialists, paediatricians, and hospitals. Some said they had been unable to see their general practitioner or stay in hospitals because they heard that more urgent cases were being prioritised. Some children and young people with medical conditions expressed a fear of visiting doctors or hospitals because they were scared of contracting the virus or were fearful that they would be denied service.

Some children and young people reported that it was their parents who were reluctant to take them to a mental health or physical health service at this time, postponing making an appointment until after the crisis had passed.

Reduced or changed access to disability support services (NDIS) was also raised as a concern by some children and young people, including access to school learning support, disability support care and respite care. This reduced access affected family life, adding to family tensions, including when disability support was not available for a sibling with disability. This concern is also reflected in responses to the Children and Young People with Disability Australia (CYDA) survey on the impacts of COVID-19 on children with disability and their families. One in three respondents to that survey experienced cancellation of support workers (either by self or service) and NDIS services.⁹ At the end of April 2020, NDIS announced that until September 2020, existing NDIS plan funding can be used to purchase low-cost Assistive Technology, including smart devices, to enable continued access to disability supports through telehealth and tele-practice. This will assist some children and young people and their families to remain connected to their services and disability supports.

In addition, a few children and young people expressed concern to Kids Helpline that they would be unable to get their essential medicine or essential supermarket items, because of the lockdown and panic buying. The inability to access necessary supplies was also raised in the CYDA survey as a significant issue for families with children with disability.¹⁰ From 6 April 2020, all NDIS participants were assigned a unique home delivery access code to get priority access to supermarket home delivery services.

Other types of essential services with an impact on children and young people's lives which children and young people said had been suspended or changed, included church, youth groups, court services and vet services for their pets.

Case studies:

Changes to essential services and support

'Annie', aged 12, contacted Kids Helpline through web counselling, to speak about her fears. She has been hearing voices. Her mum said that she will take her to the GP, but when they called the GP they said that due to coronavirus people should only come in if it is urgent, or if a hospital has asked them to.

'Hayley', aged 15, rang Kids Helpline to say that she has been having increasing thoughts of suicide in the last couple of days due to changes in their residential care because of coronavirus. She hasn't been able to see her dad as a result of the virus, and several workers that she was close to are not at work due to isolation. This has been making her more anxious, and she has started to self-harm in response.

'Michael', aged 16, rang Kids Helpline saying he has been unable to sleep due to his anxiety and thoughts about what was going on in the world at the moment. He is also worried about having to go under quarantine as he lives with his dad and stepmother and they argue with him constantly.



Usually he is involved in a lot of activities outside of home such as face-to-face counselling, group therapy with headspace and basketball. But both basketball and face-to-face counselling have been cancelled because of the virus, and he is worried he has no safe space.

'Marcus', aged 17, told Kids Helpline that his upcoming appointment with his face-to-face psychologist has been moved to telehealth due to the current COVID-19 crisis. He said he felt nervous about this because he knows that he 'zones out' when he is overwhelmed and relies on eye-contact to bring him out of it.

'Sam', aged 18, told Kids Helpline that she noticed her hair has started to fall out, and this is having an impact on her depression and poor body-image. She knows she should see a doctor but is too scared to leave the house because of the virus. She did not know what to do.

'Juliet', aged 21, rang Kids Helpline to say that she is the main carer for herself and her parents and younger siblings, who either have mental health issues or diagnosed disabilities. Although they are linked to the NDIS, she can't get any respite care until after COVID-19 restrictions are eased. She is exhausted, and worried about her own mental health having suffered from anxiety and depression for years.

'Elsie', aged 24, told Kids Helpline that she has been finding it increasingly difficult to distinguish reality from nightmares, and was feeling very alone. She said that her support network has crumbled since coronavirus, as her doctor's clinic disbanded, and all her appointments were cancelled. Now they are all booked out with the panic around the coronavirus. This has caused her to spiral and feel she can't get back in to see her regular doctor until it could be 'too late'. She was hoping to see him before an upcoming court case.

4.9 Economic and work challenges

Many children and young people spoke about the impacts of COVID-19 on family income and employment. As social distancing and restrictions on businesses were imposed from the end of March onwards, many people lost employment or had their hours reduced. For others, their way of working was changed, with some working from home, and others experiencing increased hours or stress associated with frontline work. These issues were primarily raised by young people of working age.

(a) Economic impacts

- Younger children spoke about a parent losing their job due to COVID-19 and the restrictions, and worried about the economic impact on their family.
- Older children and young adults raised concerns about losing their own jobs, or having their hours or shifts reduced. They also worried that they would not be able to find another job in the future.
- Young people spoke about the psychological impacts of losing a job or being unable to find a job, including feelings of worthlessness, anxiety and sadness.
- Some young people had been forced to move back home due to financial concerns or were worried that they would have to do so. Some expressed fears that they may not be able to pay their bills and may become homeless.

The economic impacts of COVID-19 were raised by 8% (213) of children and young people.

Young adults aged 18-25 were much more likely to raise economic impacts of COVID-19 than those under 18 years. This is not surprising as this age group are more likely to have been in paid employment and to have lost jobs or had their hours reduced.

Evidence from the Household, Income and Labour Dynamics in Australia (HILDA) Survey shows that the approximately 3.5 million people employed in the industries most impacted by the economic shutdown in response to COVID-19 tend to be low-wage workers and are disproportionately female and/or young.¹¹ Young people aged 15 to 24 represent over half of all workers exposed to the directly adversely affected industries.

This impact is also reflected in the Australian Institute of Family Studies survey of life during the pandemic, which found that 21% of under-30s said they'd been stood down, made redundant, or lost their job or their business during COVID-19, compared to 10% of all participants.¹² People aged 18 to 29 were three times (21% vs 7%) more likely than others to have asked for financial support from friends or family during COVID-19.

Younger children who raised economic challenges with Kids Helpline typically spoke about a parent losing their job due to COVID-19 and the restrictions. Some children said they were worried about the family finances and that there would be no food. Some reported worries that they may have to move out of the family home or may not be able to attend a private school as planned, which made them feel sad and disappointed.

A loss or reduction of employment of a parent was also mentioned as an additional stressor to an already stressed family life, with increased arguments and tensions at home, and more alcohol consumption by adults in the house.

While older children and young adults spoke about parental job loss, they also typically mentioned concerns about losing their own jobs, or having their hours or shifts reduced. They also worried that they would not be able to find another job in the future. Some young people said that they were contributing to the family income because their parents and siblings have lost jobs.

They spoke about losing employment or having their hours reduced in a variety of workplaces, including radiology and dental, retail, events and festivals, hospitality, and factories, to name a few.

Losing employment not only has financial consequences for young people but also psychological ones. Those young people who raised economic impacts spoke about feeling worthless and hopeless as their plans for employment dry up. The inability to find a job and hearing about the dire economic forecast on the media, made those who are about to leave school feel anxious and sad.

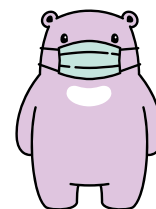
Young people spoke about how they missed the satisfaction and meaning they got from their jobs. They also missed their work colleagues.

Some spoke about the implications of losing employment for their future, for example ending their plans to save money to leave home, for study or for travel. This anxiety about the future was also raised as an issue for international students who had lost employment.

Several young people spoke about the uncertainty of having their apprenticeship placed on hold due to COVID-19.

A number of young people said they had been forced to move back home due to financial concerns, or were worried that they would have to do so, which was stressful if they did not get on with their family or if they had fears about themselves or a vulnerable person in the family contracting the virus. Some expressed fears that they may not be able to pay their bills and may become homeless, or had already experienced homelessness, such as 'couch surfing'.





Case studies:

Economic impacts

'Jacob', aged 13, told Kids Helpline that he is worried about the family finances because his mum has lost both her jobs in a shop and a hotel because of coronavirus. He said they do not have much money, and he thinks that his mum recently went to a charity outlet to get some food.

'Elissa', aged 16, rang Kids Helpline to say that she has been very sad and depressed lately. She is finding it difficult to study. She said her stepdad recently lost his job, and her parents are fighting over money. Her mother is sick and does not speak English well, so her stepdad is the main breadwinner. Her parents are also yelling at her and her sister all the time. She is worried about whether she will be able to afford university or find a job in the future.

'Hunter', aged 18, told Kids Helpline that COVID-19 has had a dramatic impact on his life. He previously had three jobs in retail, hospitality and dancing, which he loved, but they have all been cancelled. He applied for Centrelink but was rejected. So now he is couch surfing and is out of money for food. He can't go home because his sister has a disability and can't be exposed to germs. He is starting to get very worried and distressed.

'Alice', aged 19, rang Kids Helpline to say that she was depressed and worried about her future. She had two jobs in hospitality until recently but has lost both of them due to coronavirus. This has meant she has to go back to live in a small country town with her parents, which she is not looking forward to, as she will be away from her friends and her dad is abusive.

'Amy', aged 20, contacted Kids Helpline to say that everyone in her family has lost their jobs because of coronavirus. She is the only one who now has a job, and so her mum has been depending on her for all the living expenditures and paying bills. Her brother is getting some payments from Centrelink, but is not contributing anything to the bills, which is making her feel resentful and upset. She is worried that they will not be able to afford the rent.

'Toby', aged 24, rang Kids Helpline saying he is terrified of living on no money. His workplace reduced his hours, and then last night they cancelled his shift at the last minute due to coronavirus. His girlfriend also just told him that her workplace is shutting down as well. They are behind in their bills. It couldn't come at a worse time as it was only three months ago that his girlfriend tried to kill herself and spent a few weeks in hospital. He is scared about living without money.

(b) Work challenges

Young people spoke about work being more stressful because of increased workload, the nature of the work or abuse from customers. This included young people working in childcare, teaching, health, eldercare and supermarkets.

Two percent (59) of children and young people raised COVID-19 in the context of challenges they were experiencing at work.

These concerns were mostly raised by young people aged 18-25, who are more likely to be in employment.

The types of work challenges experienced by young people as a result of COVID-19 included changes to the nature of work, for example being moved to different tasks or workplaces, and abuse from customers, especially when working in frontline service industries.

Young people talked about work being more stressful in the time of COVID-19, in particular young people working as nurses, hospital workers, teachers, disability carers, customer service (such as supermarkets and hairdressers), Centrelink, eldercare and childcare. For some, the stress involved an increase in workload, which was adding to other stressors in their lives. Young people working in information technology, disability support, nursing and supermarkets or retail were being asked to do extra shifts. Frontline workers, in particular young people working in supermarkets, mentioned that they were abused by customers.

A number of young people mentioned that the nature of the work meant that they were scared of catching the virus themselves, for example in childcare, teaching, supermarkets and working with the elderly, and were considering leaving the job as a result.

Some young people spoke about the difficulties of working from home if there were already tensions between family members, or if all the family members were home. A few young people felt less motivated to do their work at home. On the other hand, several young people mentioned that working from home had been a positive experience.

Case studies:

Work challenges

'Claudia', aged 17, rang Kids Helpline to say that she is stressed about coronavirus and the situation of the world. It is making her anxious. She is also finding it stressful working at her casual job at the supermarket because she has been getting a lot of abuse from customers for the store not being stocked with supplies such as pasta, canned food, toilet paper etc. She has also been asked to do extra shifts and doesn't know if she wants to do that since she is studying online as well. She said her mother has a compromised immune system so she has been asked to stay in one part of the house, and she is feeling isolated and sad.

'Najib', aged 20, contacted Kids Helpline to talk about his fears of contracting coronavirus through his workplace. He works as a trolley retriever at a local supermarket and is concerned that he may catch the virus from the handles. He has asthma and is worried that this makes him more susceptible to catching it.

'Finn', aged 22, rang Kids Helpline to say that he feels like he is wasting his life in his job in the advertising industry. He said that he does not find the work fulfilling but at least he got to make some friends at his workplace. But now he is working from home due to COVID-19, so the only thing that made the work worthwhile has been taken away.

'Tia', aged 24, spoke to Kids Helpline regarding her concerns about going back to teach at the school. Although she is looking forward to seeing people and she loves her work, she is extremely anxious and panicking about the lack of social distancing measures for students and teachers. She is scared of ending up in hospital.



4.10 Fear of contracting COVID-19

Some children and young people raised fears that they, or someone that they know, may contract COVID-19. Interestingly, slightly more children raised these fears on behalf of someone else rather than themselves, perhaps reflecting the widespread view in the media that older people are more likely to succumb to the effects of the virus than young people.

The proportion of contacts that raised these concerns gradually decreased between January and the end of April, suggesting that as more children and young people received information and as restrictions were put in place, their anxiety about themselves or others contracting COVID-19 also decreased.

(a) Fear of someone else contracting COVID-19

- Some children and young people are fearful that someone that they know may contract COVID-19.
- This fear was raised more frequently by younger children.

Seven percent (178) of children and young people raised fears that someone else may contract COVID-19.

These concerns were raised more frequently by younger children. It was one of the top five concerns for all children aged 5-10, and for males aged 11-14.

Children and young people expressed worries and concerns for a variety of people, including grandparents, uncles, aunts, parents, and friends. They also expressed concern about family and friends who had health issues that might make them vulnerable to COVID-19, including those in hospital for other conditions.

There were also some concerns for relatives (primarily parents) that work in areas of possible high exposure, such as nurses, childcare workers, doctors, and supermarket workers.

Case studies:

Fear of someone else contracting COVID-19

'Nic', aged 13, has ADHD and ASD. He contacted Kids Helpline because he has been feeling anxious about a lot of things lately. He is especially worried about his friend with a weak immune system and whether he would get COVID-19.

'Lyndsey', aged 14, called Kids Helpline because her grandmother is 88 years old with a lung infection, and she is worried that her grandmother might get COVID-19 and die. Her grandmother lives in another city, but she lived with Lyndsey and her family for a few years, and they became close. She is so worried that she finds she can't stop thinking at night and cries a lot.

'Sophia', aged 16, told Kids Helpline that she is feeling really anxious because of the COVID situation. She is really worried for her mother, who is a doctor, and who is always busy since the virus. She is also shaken up by the amount of racism that she has seen around her and worries that her mother may experience that in her job as well.

(b) Fear of contracting COVID-19

- Some children and young people are fearful that they will contract COVID-19 themselves.
- This fear was raised more frequently by the youngest and the oldest age cohorts, and by Aboriginal and Torres Strait Islander children and young people.

Six percent (161) of children and young people raised fears of contracting COVID-19 themselves.

This was most likely to be raised as a concern by children aged 5-10 and young people aged 18-25 than children aged 11-14 and 15-17.

Aboriginal and Torres Strait Islander children and young people raised concerns about contracting COVID-19 more than children and young people who did not identify as Aboriginal and Torres Strait Islander. It was the third most frequent concern raised by Aboriginal and Torres Strait Islander children and young people.

Most children and young people who mentioned this fear did not provide detail about these fears, simply saying they were worried about getting COVID-19. A few children and young people indicated they were concerned that they might die.

Some children and young people indicated that they had been, or are being, tested for COVID-19.

A number of children and young people indicated they were fearful of going to places that might put them at risk of getting the virus, for example returning to school, or visiting hospitals.

Case studies:

Fear of contracting COVID-19

'Noah', aged 10, told Kids Helpline that he is afraid that he and his family would get sick from the virus. He has trouble sleeping at times due to scary thoughts. Recently he watched a scary movie with his older brothers about someone falling sick and dying, and it has made him extra scared.

'Sarita', aged 12, rang Kids Helpline to say she was overwhelmed by fears she might get COVID-19. She has an ongoing health problem related to her heart. Her mum is a hairdresser but is not working because of the virus. Her mum has gone out to buy face masks for Sarita when she leaves the house, so she doesn't get the virus.

'Jake', aged 17, rang Kids Helpline because he was worried he may have COVID-19, and would have to go to hospital. He had been in bed for two days and was having trouble breathing. His foster carers said they were going to call an ambulance for him, but he is anxious about how he will be treated in hospital. He has struggled with mental health issues for several years.

4.11 Parent, carer and other support people's concerns

(a) Parent/carer concerns about COVID-19

Some parents and carers are worried about COVID-19 and place restrictions on children and young people to address their concerns.

In 69 contacts to Kids Helpline, children and young people raised COVID-19 in the context of their parent or carer concerns about COVID-19 and its impacts, rather than, or in addition to, their own concerns.

This issue was raised by children and young people across all age groups, with slightly higher proportions of children in the younger age groups. It was raised more often by children and young people who are transgender or gender diverse, compared to females and males.



Typically, children and young people raised this issue in conjunction with other concerns, without elaborating on their parent/carer's concerns. It included reports of parents/carers being concerned about their children catching the virus, especially if they have a health condition, and also worries about themselves or other members of the family getting the virus. As a result, some parents and carers had put restrictions on children and young people, such as not allowing them to visit their girlfriend/boyfriend, making them live in a separate part of the house, not allowing them to go out with friends, and postponing visits to hospitals and other services. Children expressed sadness and disappointment at these restrictions.

Case study:

Parent/carer concerns about COVID-19

'Perry', aged 16, reported to Kids Helpline that he is feeling stressed and anxious about COVID-19. His parents are taking it very seriously as his grandfather recently had pneumonia. He said he was so desperate to see his girlfriend that he went for a walk and dropped over to her place to say hi. But his mother has just found out and he is in big trouble and may even be kicked out of the house.

(b) Presence of parents, carers, and other support people during Kids Helpline contact

Parents and carers and other support people can play an important role in helping children and young people access support and advice through Kids Helpline.

In 104 contacts to Kids Helpline, parents, carers and other support people were noted as having either facilitated the child's or young person's contact with Kids Helpline or were present during the contact.

This was more common for the youngest age group, and when the COVID-19 related concern was about the mental health of the child or young person.

For contacts where children and young people raised mental health concerns resulting from COVID-19, a parent, carer or other support person was present in 39% of those aged 5-10; 35% of those aged 11-14; 29% of those aged 15-17; and 25% of those aged 18-25.

This highlights the important role that parents, and carers and other support people can play in helping a child or young person seek help from Kids Helpline.

4.12 Anxiety and confusion from hearing about COVID-19 in media

Some children and young people said they heard about COVID-19 in the media and were anxious or confused about what they heard.

Three percent (65) of children and young people raised COVID-19 in the context of hearing about it in the media, expressing some anxiety or confusion as a result.

Children and young people aged 5-10 and 18-25 were slightly more likely to raise this concern than children aged 11-14 and 15-17.

Children and young people who raised this concern did not usually specify the type of media, for example whether they heard about COVID-19 through social media platforms or more traditional news sources. However, those who raised it often indicated that hearing about COVID-19 increased their anxiety. Others said that hearing about COVID-19 and the restrictions in the media was confusing.

An online survey on *How Young People Access, Perceive and are Affected by News Media*, involving 1069 children aged 8-16, conducted between February 28 and March 16 2020, showed that children have both strong positive and negative emotions in response to news media.¹³ The number of young people who often/ sometimes feel negative feelings as a response to news media has increased when compared with a similar survey in 2017, with feeling angry and sad both up 4% and feeling afraid up 5%. The numbers of both boys and girls who feel happy or hopeful as a response to news media also decreased slightly (1% and 3% respectively) when compared with 2017.

Despite the negative emotions which news engendered in some young people, since the 2017 survey, getting news has become more important to young Australians (up 5% from 44% in 2017).¹⁴

The survey also showed that most young Australians consume news media that was intended for an adult audience.¹⁵ More than half (53%) of young Australians agree that young people should have their own news, while 32% say they do not know.¹⁶

Case studies:

Hearing about COVID-19 in the media

'Kirsty', aged 9, called Kids Helpline saying she was scared of dying of COVID-19. She has been listening to the news and a lot of people are dying from it. Her foster mother works long hours in the hospital, which means she isn't spending as much time with her as usual.

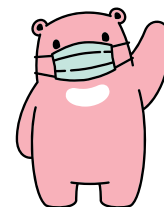
'Cameron', aged 25, with a disability and significant health issues, called Kids Helpline to say he is worried and overwhelmed by all the information about the virus on tv, radio, and social media. He tries to limit his exposure on all media forms, but also wants to stay informed, especially as his job may be affected. He is worried that in his job he could catch COVID-19, which would make all his other health issues worse.

4.13 Experiences of racism and bullying related to COVID-19

A small number of children and young people raised concerns with Kids Helpline about bullying and abuse related to COVID-19, including experiences of racism.

(a) Experiences of racism related to COVID-19

- A small number of children and young people spoke about experiences of racism related to COVID-19.
- These experiences included name-calling, ostracism and threats at school. Others heard about reports of racism on the media or had witnessed racism expressed by others online.



Sixteen children and young people raised concerns of racism related to COVID-19 during their contact with Kids Helpline. While only a few children and young people raised these concerns, their experiences reflect the serious impacts this can have on children and young people.

Most of these concerns were raised in contacts made to the Kids Helpline in February-March, decreasing in April, perhaps a reflection of increased social distancing and school closures.

Concerns about experiences of racism related to COVID-19 were raised almost entirely by children and young people from CALD backgrounds.

The age group with the largest number of concerns related to racism was the 15-17 age group. Both males and females raised these concerns. However, it was raised more frequently by males.

This concern reflects reports of racism directed at people of Chinese and Asian background since the beginning of the pandemic. In February 2020, the Commission recorded more complaints under the *Racial Discrimination Act 1975 (Cth) (RDA)* than at any other time over the past 12 months. One third of all the complaints under the RDA made to the Commission since the start of February have been related to COVID-19.¹⁷ However, it is important to remember the Commission's data only captures the complaints it receives that allege a breach of the RDA, and the volume of these is fairly small in statistical terms. This highlights the need for better reporting of racial abuse.

Some children and young people who raised this concern spoke about their personal experiences as a young person of Asian background, especially Chinese and Vietnamese background, which included name-calling, ostracism and threats at school. Some young people expressed uncertainty about whether they had experienced racism from other children and young people and were questioning their experiences.

Some children and young people raised concerns about hearing reports of racism against people of Asian background on the news. Others were concerned that their parents or others they knew of Asian background might become targets of racism during COVID-19.

Other issues included witnessing racism perpetrated by others online and expressing anger towards people of Chinese background.

Case studies:

Experiences of racism related to COVID-19

'Henry', aged 14, rang Kids Helpline to say that he has been hearing a lot in the news about racism against Chinese people because of the virus. His dad is from a Chinese background, and he looks a lot like him. He has noticed that at his school people have been taking more notice of his Chinese heritage, making jokes. His friends also seem to be ignoring him and not returning his texts. He is not sure whether he is overreacting, but it is making him feel sad and anxious.

'Sara', aged 17, contacted Kids Helpline to say she was worried about going to school that day due to fears of getting COVID-19. She also said that she and some of her friends had experienced harassment because they were from China and were told they were responsible for it. She wasn't sure how to respond to these situations and wondered if she found it harder because she had anxiety. The racism was impacting on her self-worth.

'Toan', aged 15, told Kids Helpline that there is a culture of bullying and racism at his school. He is of Vietnamese background. Though he has not personally experienced a lot of bullying, he said that today some kids in an older grade had said to him 'here comes coronavirus' and when he said it wasn't funny, they acted aggressively and threatened him, which made him scared.

(b) Experiences of bullying related to COVID-19

- A small number of children and young people spoke about experiences of bullying related to COVID-19.
- These experiences included COVID-19 being used as a reason to bully another child, and children and young people being victimised for breaking COVID-19 restrictions.

Fifteen children and young people raised experiences of bullying related to COVID-19, during their contact with Kids Helpline.

While the numbers were small, children and young people of every age group recorded concerns about bullying due to COVID-19. These concerns were raised more frequently by children aged 5-10 and 11-14 than the other two age groups. Both males and females raised these concerns.

The types of experiences of bullying related to COVID-19 include:

- children saying that another child has coronavirus
- children and young people being victimised for breaking COVID-19 restrictions
- bullying that usually occurs face-to-face now occurring online because schools were closed
- the virus being used as a reason to bully or threaten someone.

Several children also reported that they felt safer from bullying due to lockdown, as they did not have to attend school where bullying often occurred. Most experiences concerned face-to-face bullying rather than cyber-bullying.

The e-Safety Commissioner has warned of an increased risk of cyber-bullying and other forms of online abuse as more children and teenagers are online for study and recreation. Complaints of cyberbullying to the Office of the e-Safety Commissioner spiked at the beginning of the COVID-19 isolation period, and then subsided to levels normally associated with school holidays. With schools returning face-to-face in May, cyberbullying complaints began rising in line with expectations (as cyberbullying is often an extension of what is occurring in the school environment). For the month of June 2020, cyberbullying complaints were up more than 150% when compared to the monthly average for 2019.¹⁸

Bullying more broadly, rather than bullying related to COVID-19, is raised as a concern by children and young people that contact Kids Helpline. Of the 2,567 children and young people that raised COVID-related concerns, 38 had bullying recorded as a concern.

Case studies:

Experiences of bullying related to COVID-19

'Cody', aged 11, rang Kids Helpline about a range of concerns, including his parents arguing, troubles at school and being bullied. The bullying at school has been going on for a long time. He had to self-isolate from school last week because he had symptoms similar to coronavirus. Now he is worried that people are keeping their distance from him and teasing him even more. He tries to walk away but that doesn't seem to stop it.

'Angela', aged 21, told Kids Helpline that people were picking on her and her boyfriend because of coronavirus, saying that they shouldn't be holding hands. It was making her feel sad and depressed.



4.14 Other COVID-19 issues

- A number of children and young people raised positive impacts of the restrictions on their lives, usually in conjunction with other issues that were impacting negatively on them.
- Some children stated that COVID-19 was having no impact on their lives. Others were asking for information about COVID-19 and various restrictions and rules.

Five percent (126) of children and young people raised COVID-19 related issues that fell outside of the major themes highlighted in this analysis.

There was no significant difference by age group or gender for concerns under this theme.

A number of children and young people raised positive impacts of the restrictions on their lives, usually in conjunction with other issues that were impacting negatively on them. For example, some children and young people were contacting Kids Helpline in relation to mental health concerns, but also mentioned how COVID-19 related restrictions or measures were helping them to cope with their issues at this time.

Some of the ways in which the restrictions or changes brought about by COVID-19 were mentioned in a positive way were:

- enjoying studying at home because of fewer distractions or because they found socialising stressful
- spending more quality time with family
- having more time to watch movies, enjoy music and appreciate small things
- 'taking a break from life'
- being able to access homeless services put in place for the lockdown
- looking forward to getting job relief benefits from the government

- hoping that there will be less traffic on the roads to make it easier to pass drivers test
- more time to connect with friends
- enjoying working from home
- being able to avoid school bullying because they are studying at home
- social isolation reducing exposure to an abusive family friend
- university measures that reduce pressure to pass or fail subjects
- fewer expectations that they can find a job
- increased mental health support because the government is subsidising counselling sessions during COVID-19
- providing an excuse to leave an abusive relationship and move back to parents.

A few children and young people stated that COVID-19 was not having any impacts on their life.

Some children and young people raised COVID-19 only in the context of asking for more information from Kids Helpline, rather than raising a concern. For example, some were enquiring how COVID-19 was affecting the counsellor or the counselling service, but not initiating any information about COVID-19 affecting them personally. Some asked for medical information about the virus, or information about travel and other restrictions.

Other ways that COVID-19 was raised by children and young people include:

- expressing a desire that COVID-19 would kill them
- stating that they do not have COVID-19 or are not worried by COVID-19
- speculating about the effects of the pandemic on the world
- discussing a friend's breach of self-isolation laws
- impact of suspended court services on a member of their family.

Case studies:

Positive experiences of COVID-19 restrictions

'Hana', aged 12, told Kids Helpline that she just wanted a chat. She said that she has been washing her hands and singing happy birthday to keep her safe against COVID-19. She is enjoying keeping in contact with her best friend, and lots of other friends, via phone messaging. Her mum and dad have been spending more time with her during lockdown, and she has been helping out cooking.

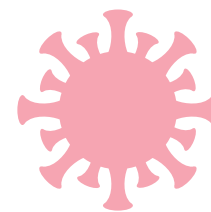
'Lisa', aged 16, has a history of anxiety and depression, and has attempted suicide in the past. She regularly contacts the counsellors at Kids Helpline. This time she lets the counsellor know she's been going pretty well and that she's liking being in lockdown and doing online learning. She has noticed an improvement in her mental health as a result.

'Reynold', aged 17, told Kids Helpline that he is thriving during the pandemic because his stress levels have gone down due to not having to go to school and interact with people face-to-face, not having to wake up early, and not having group work and team events. He suffers from social anxiety and describes himself as an introvert.

'Roxanne', aged 20, rang Kids Helpline to check in with her regular counsellor. She says she is feeling thankful for Centrelink benefits and a scholarship allowance to purchase a new laptop. Also, one of her lecturers told her that they will not be passing or failing any students for the course this term, which takes a lot of pressure off. She said she feels a bit guilty, but the introvert in her is actually enjoying the shutdown.

'Julie', aged 22, rang Kids Helpline to reflect on how the world was changing, and how this is affecting her philosophy on life. Because of COVID-19 she has realised that she doesn't need to achieve great things to have meaning. She has been relaxing more at home, where she lives with a flatmate, and has been walking around the neighbourhood appreciating the small things.





Children and young people in Australia, and their families, are facing unprecedented health, social and economic challenges. Although restrictions have eased in some places, it seems likely that these challenges will continue indefinitely into the future. Equipping children, young people, and their families to cope in these changed times is critical. Ways that this could be achieved include:

5.1 Invest in child and youth-focused mental health services and support

Prior to COVID-19, mental health services were already overloaded, including at Kids Helpline. The demand for mental health and wellbeing support for children and young people has only increased with the advent of the pandemic.

As Kids Helpline data shows, some children, young people, and their families entered COVID-19 with pre-existing challenges, vulnerabilities, and inequalities in their lives. These have been intensified by the impacts of COVID-19, including reduced access to face-to-face services, changes to normal routines, social isolation, and job losses.

Some mental health services have started using virtual and digital delivery in ways not previously relied on. It will be important to evaluate the effectiveness of these new methods in supporting children and young people, including whether these reduce waiting lists and provide quicker access to mental health services.

However, while these new ways may work well for some children and young people, others will require face-to-face mental health support. Kids Helpline has long recognised this, and part of its service provision has always included discussing possible referrals with children and young people and liaising with those referral agencies on behalf of children and young people.

With reduced face-to-face services available during times of lockdown and social distancing, it is essential that innovative ways for children and young people to safely access face-to-face mental health services are implemented. Mental health services will need to be proactive in connecting with children and young people in need of help.

Further, other health services which serve as gateways to mental health treatment, such as GPs and hospital services, should prioritise children with concerning mental health issues. A child with a mental health need should not be turned away, or postponed indefinitely from diagnosis and treatment, due to the pandemic. Mainstream health services should be assisted in times of emergencies to maintain this essential service.

While extra funding has been apportioned to some mental health services because of COVID-19, more will be required to ensure services are accessible and available for all children and young people that need it, and that are responsive to their particular needs.

5.2 Promote clear, accurate and child-friendly information and resources

Governments should widely publicise COVID-19 information in child-friendly ways to ensure that accurate information reaches all children and young people.

Children and young people need to be able to access reliable information which focuses on what they need to do to keep safe, and how to cope with their fears. They need to know where to go for help through clear signposting to information and services.

As many children and young people receive their information from their parents or carers, it is also important that there are practical resources targeted at parents and carers, so they can have appropriate and informed conversations with their children.

In terms of contacts to Kids Helpline, we know that fewer males, Aboriginal and Torres Strait Islander and CALD children and young people are reaching out for support. We need to reach out to these children and young people to let them know that support is available. Specific child friendly information which is relevant to their circumstances must be made accessible.

As shown in the data, children and young people are seeking information about COVID-19. However, the potential for confusion and misinformation is high, leading to anxiety and uncertainty. Incidents of racism and bullying can also be fuelled by misinformation and inaccurate news stories. It is important that leaders emphasise consistent messages in news and other media that promote inclusivity and call out racism and targeting of particular groups in these times. Schools should also reinforce this message within their communities.

5.3 Support schools and other educational institutions to deliver quality online learning and maintain help and connection for vulnerable students

Schools, and other educational institutions, such as universities, play a vital role in the lives of children and young people. As well as educating students, they provide routine, safety, and social connectedness.

For many children in their final years of schooling, and for those young people entering tertiary studies, the advent of online learning has added stress and anxiety. Many are concerned that they will be disadvantaged in their learning as a result, with impacts on their future education and employment prospects. Governments need to put in place measures to ensure no student will be disadvantaged by moves to online learning at this time, and to reassure students that they can continue their plans for the future.

The closure of schools and other educational institutions has greatly affected many children and young people, especially those with existing vulnerabilities such as experiences of abuse and neglect, homelessness, mental health concerns and children with disability. With online learning, many children have had minimal contact with teachers and school counsellors, which means that their critical needs are not always identified.

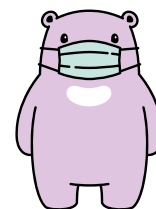
Governments must support schools to reach out to vulnerable students during school closures and promote connection with their teachers and the school community. Schools may require extra resources and assistance to do so.

Students who are already disengaged from schooling, and some children with disability, may find online learning especially difficult. This disengagement can have serious and long-lasting effects on a student's wellbeing as well as their learning. Schools require resources to be able to support these students in innovative and intensive ways.

Others may require financial or material assistance to be able to study online. Electronic devices and internet access should be provided to children in low income families that need it, so that existing inequalities are not perpetuated in online learning.

With the return to school, schools and their students should identify the lessons learned from the experience of online schooling in order to prepare more fully for the possibility in the future. They should also identify whether any students require extra support to remain on track with their learning.

As we face the continuing spread of COVID-19, schools and other educational institutions will need to remain flexible in case further shutdowns occur, and also prioritise student wellbeing. Educators will require support and resources to do this, particularly in terms of remote teaching and using digital technologies.



5.4 Extend economic support to all families and young people that need it, and make skills development and youth employment a key focus of recovery

Some children and young people, and their families, are facing significant economic hardships because of COVID-19. This places families under extreme pressure which increases the risk of family and domestic violence.

In March 2020, government supports such as JobSeeker and JobKeeper were put in place. In July 2020, these were extended, however at reduced rates and with changes to eligibility from September 2020 and further reductions in 2021.

While these are welcome, the federal government needs to make sure that all families with children and young people that have lost employment can access them, including families and young people on temporary visas such as asylum seeker families and international students.

The successful introduction of JobSeeker has also made it clear that the levels of unemployment benefits prior to lockdown were inadequate. Any reduced rates from September onwards should not return to the low levels of payment pre-COVID-19.

This analysis also suggests that a major challenge will be improving the labour market prospects of young people who are overrepresented in occupations that have been directly affected by the early economic fallout of COVID-19, including hospitality, retail, the arts, sports and recreation, and child care, especially those employed casually.

The unemployment rate for those aged 15-25 years increased 0.4 pts to 16.4% between May 2020 and June 2020.¹⁹

In addition to the economic supports provided to job seekers, governments will need to address the long-term effects of the restrictions on future employment of young people. In a recovery phase, the government should invest in the skills development and education of young people, and a tertiary education sector that can meet these needs.

There should also be public acknowledgment of the many young workers that work in frontline services, including supermarkets, healthcare and hospitality, who have put themselves at risk of contracting the virus, and verbal abuse and overwork.

5.5 Prioritise services for vulnerable children and young people

For some children and young people and their families, COVID-19 has created some very specific challenges which need to be acknowledged and addressed.

Child-related services for vulnerable children should be considered essential services, and their continuity should be prioritised during any shutdown, and in any recovery phase.

These children and young people include:

- **children at risk of family and domestic violence, child abuse and neglect.** Family and domestic violence services and child protection and welfare services need to be resourced and supported to address the potential for increased demand from children and young people and their families during periods of shutdown. Services may need to implement innovative and proactive ways of contacting and supporting these children and young people and be resourced to do so.
- **children with disability.** For many children with disability and their families, disability support services including respite services are essential. Disability services provided under NDIS need to be continued, and any changes to delivery implemented with the least impact on children and their families as possible.

- **children and young people at risk of homelessness.** As highlighted by some children and young people who contacted Kids Helpline, COVID-19 restrictions have led to financial stress and increased tensions between some children and young people and other family members. Children and young people who find themselves homeless as a result need to be supported and helped. Family and youth specific homelessness services need to be adequately resourced and made known to children and young people.

5.6 Involve children and young people in responses to COVID-19 and recovery plans

Children and young people are being disproportionately affected by the psychological and economic fall out of the pandemic.

Young people have articulated fears and worries for their future. The UNICEF survey of over 1,000 young people aged 13-17 in April 2020 indicated that many young people were worried about their future due to COVID-19, including worries about the national economy. One quarter felt that young people had been underrepresented in discussions about the future.²⁰

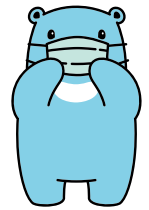
Children and young people need to be part of both the response to COVID-19 and the recovery efforts. This means that governments should pay attention to the experiences of children and young people during the pandemic, and involve them in decisions about their future, whether that be about delivery of their education, or economic support. This promotes resilience and builds hope for our children and young people, in a time of ongoing uncertainty.

5.7 Conclusion

Prioritising the best interests and needs of children and young people in these challenging and extraordinary times is crucial. The health, social, educational, economic, and recreational impacts will be far-reaching for them, well beyond the immediacy of the pandemic now.

This analysis of the concerns of children and young people who are actively seeking help about COVID-19 from Kids Helpline gives an indication about the types of assistance they will require as they move forward. This includes:

- **investing in child and youth-focused mental health services and support**
- **promoting clear, accurate and child-friendly information and resources**
- **supporting schools and other educational institutions to deliver quality online learning and maintain help and connection for vulnerable students**
- **extending economic support to all families and young people that need it, and making skills development and youth employment a key focus of recovery**
- **prioritising services for vulnerable children and young people**
- **involving children and young people in responses to COVID-19 and recovery plans.**



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