WITNESSES

Mr Indi Clarke, Executive Officer, Koorie Youth Council,

Ms Nerita Waight, Chief Executive Officer, Victorian Aboriginal Legal Service,

Adjunct Professor Muriel Bamblett, Chief Executive Officer, Victorian Aboriginal Child Care Agency,

Ms Jill Gallagher, Chief Executive Officer, Victorian Aboriginal Community Controlled Health Organisation, and

Mr James Atkinson, Chief Executive Officer, Victorian Aboriginal Community Elders Services, Aboriginal Executive Council.

The CHAIR: We welcome you to the second series of public hearings for the Public Accounts and Estimates Committee Inquiry into the Victorian Government’s Response to the COVID-19 Pandemic. The committee will be reviewing and reporting to the Parliament on the responses taken by the Victorian government, including as part of the national cabinet, to manage the COVID-19 pandemic and any other matter related to the COVID-19 pandemic. Members are attending these hearings remotely from home and from their electorate offices. We ask that people note that members are not required to wear a face covering if they are working by themselves in an office under the stay-at-home directions, 6 August, part 2, section (7)(i).

We advise you that all evidence taken by this committee is protected by parliamentary privilege. Therefore you are protected against any action for what you say here today, but if you repeat the same things outside this forum, including on social media, those comments may not be protected by this privilege. You will be provided with a proof version of the transcript for you to check. Verified transcripts, presentations and handouts will be placed on the committee’s website as soon as possible.

We invite you to make a brief opening statement of no more than 5 minutes. We ask that for the record you state your name, position and the organisation you represent. This will be followed by questions from our committee members. Thank you very much for joining us today, and we invite you to make a 5-minute presentation.

Ms GALLAGHER: Thank you very much and good morning, committee members. I would like to acknowledge that we are on Aboriginal land, lands right across Victoria, and pay my respects to elders past and present and any emerging elders that may be with us. I would also like to just mention that Dr Esme Bamblett, Chairperson of the Aboriginal Executive Council, is an apology for today’s hearing due to sorry business.

My name is Jill Gallagher. I am a Gunditjmara woman from western Victoria. I am also the CEO of the Victorian Aboriginal Community Controlled Health Organisation, in short VACCHO. Before I go into the presentation, I would also like to acknowledge other AEC colleagues that are here with us today: Muriel Bamblett, Indi Clarke, Nerita Waight and James Atkinson. They are all the AEC colleagues that can attend today.

The AEC and its members appreciate the opportunity to engage with the Public Accounts and Estimates Committee and this inquiry into the state government’s response to the COVID-19 pandemic, so thank you. A number of AEC members, including the Victorian Aboriginal Child Care Agency, Aboriginal Housing Victoria, Victorian Aboriginal Legal Service, Djirra family violence prevention, Aboriginal Community Elders Services and of course VACCHO, have provided the inquiry with detailed submissions.

I would like to, firstly, update the committee on the number of cases in our communities. As of 25 August, there have been only 68 confirmed cases of COVID-19; 58 have recovered and 10 have remained active. We know our people carry into the pandemic a burden of poor health, intergenerational trauma, poverty and housing stress—the legacy of exclusion and the denial of our rights as First Peoples of this state, including disconnection and exclusion from our lands and our waters. We also carry with us strength, resilience, a capacity to innovate and adapt, family obligations, kinship systems and of course very real cultural obligations that we carry with us today. These strengths, our culture, who we are as First Peoples, are coming to the fore during this pandemic environment that we are currently in. Our level of COVID-19 transmission is testament to
Aboriginal community control and what can happen when we work holistically and meaningfully together with self-determination.

At the earlier stages of the pandemic VACCHO and all AEC organisations were on the front foot communicating and coordinating with each other and partnering with state government and responding, which was vital very early on. We were mobilising across the ACCO sector here in Victoria to get the public health messages that were coming out of governments to our families to ensure that they were able to protect themselves. We have been thankful for the state government’s efforts to date, but there are certainly learnings that will strengthen our relationship into the future. Particularly we need to ensure that the public health response and the broader community response are joined up, which I know Muriel Bamblett will speak to later on. This is a natural way of working for our organisations and has been successful, but this way of working does not fit the siloed government structures. We also face growing concerns about the effects of this pandemic, particularly on the social and emotional wellbeing of our people and our communities as a whole. If the government does not invest further in our communities now and in the recovery phases, the outcomes could be catastrophic. We were very impressed very early on with all governments in the early days of the pandemic, where all governments came together and worked together. It was not a political issue. And we need to keep that momentum up, because we are not through this yet.

Before taking questions from the committee, I will hand over to my colleague Dr Muriel Bamblett, CEO of the Victorian Aboriginal Child Care Agency, VACCA, who will make some further introductory remarks. So thank you very much for listening to me.

The CHAIR: Thank you.

Adjunct Prof. BAMBLETT: Thank you, Jill. My name is Muriel Bamblett, and I am CEO of the Victorian Aboriginal Child Care Agency. I am also a Yorta Yorta, Dja Dja Wurrung woman.

I really today want to thank you, the members of the committee, for taking the time to specifically consider the response to the pandemic from the perspective of our Aboriginal community and particularly from Aboriginal community-controlled organisations. As Jill has spoken about, we are on the front line. We have been providing essential services from whoa. We have been there with our children, our families, our communities, and importantly we have done really great work. You are going to hear from James about the work we have done in protecting our elders, and I think that has been critical to the numbers.

I think it is easy to forget that the pandemic took hold during the worst fire season Victoria has ever seen and a time when we were dealing with it and its immediate aftermath, particularly us in the Aboriginal community. Our Aboriginal organisations in fire-affected areas were still dealing with the impacts of the bushfires, and we had already learned that there has been no agreed disaster management plan, particularly in relation to Aboriginal people. We know it is in remote areas of Australia for Aboriginal people, but not for Victorian Aboriginal people. No plan has been activated with or for the Aboriginal community in Victoria in the event of any natural disaster such as fire, flood and pandemic. Under this government and the way that we have been working over the last few months under COVID, we have seen much more involvement and participation of Aboriginal people front line in preventing and making sure that we are addressing the issues.

An early concern for us as the pandemic took hold was that we were again being caught short due to the absence of an agreed disaster management plan. We were running around wondering who do we talk to, where do we find out information about COVID. We had VACCHO fortunately absolutely leading it. They took control, they put out information straightaway. We were on it. And VACCHO and NACCHO, we acknowledge all of the work that they did. But in the absence of a disaster management plan, it took time—some weeks—to establish a joint COVID Aboriginal community task force. This created a forum for planning and deploying across government and ACCO sector-wide responses—sector-wide responses to family violence, to justice, to health, to education, to homeschooling, all of those issues, homelessness came up. At the moment we are addressing drug and alcohol. These are the things that the task force are dealing with.

While the combined leadership of VACCHO and the Department of Health and Human Services drove a coordinated and immediately public health response, in other essential service areas such as child protection, out-of-home, housing, family violence, elders and law and justice there was no forum or arrangement to assess risks and respond, particularly given the vulnerability of our elders across all those areas. There was no agreed
disaster management plan that covered off all stages of the disaster from prevention, mitigation, response and recovery, and for all service sectors.

We believe we need to develop an agreed disaster management plan to be activated with and for Aboriginal Victorians, and we need to refer committee members to recommendation one in the Aboriginal Executive Council’s committee submission. In relation to recovery, the AEC is concerned that attention needs to turn to developing a long-term recovery plan for Aboriginal communities and our ACCO sector coming out of this, because we believe there will be much trauma, there will be many issues. We will have to address family violence, we will have to address drug and alcohol, and mental health, all of those issues, as we come out. And we need to heal our communities, and we are very good at that. We have been dealing with it for many years. Such a plan needs to take account more of and respond to the unmet service demand pressures facing our community even before the pandemic struck.

The AEC has provided a detailed analysis of these service demand pressures, and we seek your support for recommendation 2 in the AEC submission. I am very proud of the work that we as ACCOs have done in working with education, family violence, child protection, hospice and homelessness. We are pleased to take any questions and speak to you on any issues that we have got. I believe they are really great Kulin people that have come to you today, and from the legal service we have got Indi. We have got a breadth of people to address some of the really critical issues. Thank you very much.

The CHAIR: Thank you very much. On that note I will hand to Ms Pauline Richards, MP.

Ms RICHARDS: Thank you. I am not sure if you can see over my shoulder, but I am looking out over the land of the Wurundjeri and Boon Wurrung people and reflect that it has been beautifully cared for for thousands of years. I just wanted to thank the people I feel I am in the auspicious company of. Also there is the wisdom, as Dr Bamblett just finished off there, of some terrific people. I would also like to ask you to pass on to your members how grateful we are for the work that has been going on in the last few months in these extraordinary times. If you could pass that on, I would be grateful.

I have to give you the opportunity to perhaps unpack some of what you both identified in your presentations. As we know, Aboriginal communities are disproportionately impacted by the social, economic, cultural and health implications of the COVID-19 pandemic. I think you have both touched on that, and you have all presented major submissions to that effect. Could you provide perhaps some more observations on the way that COVID-19 has impacted community and how government has supported ACCOs to respond to this challenge?

Adjunct Prof. BAMBLETT: I might give James or Indi a chance to comment. It would be great to hear from them—and Nerita. James?

Mr ATKINSON: I was going to allow Nerita to probably go, but look, I am more than happy to. I think in terms of the impact, it was obviously, as has been said, a first-time sort of thing for everybody. But I guess for us realising the gravity of the impact for our elders, which is the area certainly that I cover, it was about making sure that we acted quickly. In saying that, it was to get on the front foot, especially with our elders and their chronic health conditions.

I have got to say that I still believe we are, as a state and certainly as service provision, still fragile in terms of this pandemic. So it is about just staying on top of it, and I guess that is probably the thing that we are more than focused on here—staying on top of it. I have got to say, at the start I was not sure whether it was state or commonwealth, but I think the good thing about that was, as both Aunty Muriel and certainly Jill have pointed out, the ability of both governments to come together to find solutions was good.

In terms of PPE, we have virtually been well supported both from the Victorian government and certainly from obviously local councils as well. I think that has been really great and has certainly laid some good foundations for that. But still for me we are still in a fragile time. I think the areas that certainly both Jill and Aunty Muriel touched on were about how do you go post-COVID and how do we manage to continue from here out of COVID. I certainly will not take up too much more time and hand over to Indi or Nerita.

Ms WAIGHT: My name is Nerita Waight. I am the CEO of the Victorian Aboriginal Legal Service, commonly referred to as VALS. In terms of COVID-19, it certainly had a steep impact on community, but prior to that we had been seeing steep increases of over-representation. So it had grown by 18.82 per cent in the
2018–19 financial year, and that was largely driven by steep increases in Aboriginal women’s interaction with the justice system.

Those requests for assistance are complex, they are hard to work through and they require a constant level of engagement and partnering with both legal and community justice programs. That has certainly continued with COVID-19 but was complicated by the fact that support services were not around and that there were difficulties in accessing the services—they were worried about loved ones, they were worried about children, they were worried about elders. That certainly had a very big mental impact on them, which then affected their ability to assist us in representing them.

What I will say also is just that COVID-19 really brought home the need to have legal services that do not just step in at the urgent level but that also act in a preventative manner. Our strength was in our community programs who were able to do welfare checks on those in prison. Because due to the number of lockdowns as well as the quarantine system our prisoners were really struggling with that system and were coming out feeling really down and depressed and having declined in their mental health. What we also have seen is difficulties accessing bail because of the lack of housing. This has always been a problem but again one that has been further complicated by COVID-19.

Another thing that has complicated our lives—many factors have really—has been court matters being pushed off and delayed. We expect that when life does return to normal at some point then we are going to have unprecedented demand on VALS when courts resume operating at full capacity. In terms of numbers in prison, we have seen some reducing in numbers, and that has been a lot through bail applications, through working with corrections to ensure that there are options for people to get out at the earliest point. But it is our view that decarceration should form a part of any reasonable public health strategy, which we talked about in our submission—which you have not got yet but that you will get by the end of today; my apologies there.

Just to go back to the legal need though, although we welcome the additional funding of $837 000 announced in June, that does nothing to stem the tide, because it was increasing prior, and without the state investing in VALS so we can deliver a sustainable place-based service that will address the needs of our community, Aboriginal representation will continue to be a stain on society for generations to come.

Mr CLARKE: Thanks, Nerita. I might just quickly jump in. Indi Clarke, Executive Officer of the Koorie Youth Council, commonly known as KYC. Before I go any further, I will acknowledge the country which I am meeting on here today, and that is the Wurundjeri country and nation. I pay my respects to their elders both past and present. I also acknowledge the committee today for your time in allowing us here, and I also acknowledge my other colleagues and members of the Aboriginal Executive Council.

Thank you for your question. As we are all aware, these are very unprecedented times and have challenged us all in many ways, in particular I think for the Aboriginal community and for a lot of our young people. As we know, the onset of COVID-19 has directly affected not just our work but all of our community’s work. I just want to echo the sentiments of James and Nerita but also echo Aunty Muriel’s sentiments and really acknowledge the leadership shown by Jill Gallagher and VACCHO in mobilising the Aboriginal community health organisations and their work to make sure that the cases of COVID are so low in our communities. I also want to acknowledge the sacrifices of our communities and of our young people in ensuring that these numbers are low.

For me and for all the work that KYC do, this has impacted our work daily, and this has truly impacted the lives of young people, as found in our letter. The priority areas that we have seen this really affect are education, employment, mental health and obviously as well the socio-economic participation of young people. Through our work we have been meeting with young people on a weekly basis—the young people who guide and drive all of the work that KYC do. Actively we have been engaging with them to hear, ‘Well, what are the thoughts of young people on the ground? How do we get through this?’ As we know, it is such a challenging time, and I really highlight the work of VAHS and VACCHO in enabling and creating Yarning SafeNStrong, which is a telehealth hotline around mental health services. Services like that have been absolutely crucial in these really challenging times. But for us it is around the response that has to come from this and knowing that young people are going to be disproportionately affected through employment and through education and training.
So we are asking that there is a dedicated youth employment strategy in response to COVID-19 with strong targets around Aboriginal and Torres Strait Islander young people and that we are providing sufficient training and employment pathways, because as we know, for young people—they are working on the front line and in a lot of the services that have been directly affected by this, so that training and those pathways are really going to support them back into employment, and if not in the current industry that they were in, at least they will be able to obtain training to find alternative pathways as well.

Ms RICHARDS: Thank you. I think I am probably out of time there. Chair, is that—

The CHAIR: You have about 40 seconds if you have a quick—

Ms RICHARDS: I was going to ask about your experiences on the task force—the Aboriginal community task force. So perhaps somebody could speak to that for the very short amount of time I have left.

Adjunct Prof. BAMBLETT: I can speak very quickly to that. I think that through the task force we have been able to address issues such as family violence, child protection, homelessness—and particularly homelessness looking at where our people are in motels. There have been lots of issues raised with the community about homelessness and people sleeping rough in communities. We have also been able to focus on suicide and mental health. We have tragically lost quite a few of our people during COVID, so it has been something we have been really focusing on. We are also focusing at the moment on drugs and alcohol, because at the last task force meeting it was raised that 11- to 13-year-olds are taking illegal substances and alcohol. So there are some really big challenges, but I think education is where the task force has perhaps had the most impact. We have found under COVID that with education much of its focus was internally on COVID and not on how children were actually faring in the homes and what we know about homeschooling. For the Aboriginal community, we found that many of our Aboriginal parents did not have a computer, had no internet and were not literate in reading and writing but also in technology. So a take-home message after this will be that our effort has to be focusing on digital technology for Aboriginal people, given the high level of disadvantage and poverty.

The CHAIR: Thank you very much. I will pass to the Deputy Chair, Mr Richard Riordan, MP.

Mr RIORDAN: Thank you very much, Chair, and thank you to all our guests. It is a very interesting cross-section of representation, so thank you for pulling that together. We have heard this morning in the presentations that by and large you feel that the supply of PPE and protective support has been quite good from all levels of government, so that is pleasing to hear. For example, in other states—WA, I think, and the Territory as well—some Aboriginal communities have sort of been closed off to really ensure protection given obvious well-known extra health frailties. Are there any other bigger measures perhaps the state government could have looked at in the Victorian context as well as providing the basics? Are there other measures that could have been undertaken to really make sure everyone was safe or kept safe? That is a general question, whomever is best to answer that one—Jill, perhaps?

Ms GALLAGHER: I am happy to have a go at that one. Basically you mentioned PPE and remote communities and urban Aboriginal communities. To my knowledge there were no confirmed cases in remote Aboriginal communities in relation to COVID because it is so easy to shut them down. There is only sort of one road in and one road out. In an urban setting it was quite difficult. You cannot shut down our communities, because we are sprinkled throughout urban and rural Victoria. So the complexities there came about in the very early days when PPE was a problem for everyone. We had to make sure through our advocacy through the AEC that when that problem became unblocked our front-line service delivery agencies had equal access to PPE, just the same as anyone else, and we achieved that. If there is anything else we could have done, whether it be us or state governments or any governments—I think that there are a lot of things that in hindsight we could have done better, but it is about staying connected.

For example, one of the biggest issues over the years since I have been involved in health is telehealth has been rolled out for a long time to many communities—Aboriginal and non-Aboriginal—but over the years it was not deemed that telehealth was a priority for urban Aboriginal people. It was only mainly for remote Aboriginal communities. But under COVID, this pandemic, telehealth becomes very important, a humungous priority for all service delivery. So I would have very early on tried to tackle access to more telehealth expertise,
equipment—and the government has now provided funding for telehealth. It has not been rolled out yet, but that is slowly getting out to communities. So telehealth I think we should have done very early on.

Mr RIORDAN: Right. So that has been a good initiative that you are experiencing. I guess, Jill, speaking to what you have said about how you have been able to keep your more remote communities quite safe, which is fantastic, and I am sure that is a real achievement in the whole process, you pointed out that under community-led responses—obviously, you know, your own communities being able to look after yourselves—the Indigenous community appears to have fared actually pretty well compared to perhaps other community groups throughout Victoria. So what specific community-led responses would you point to that the Aboriginal community has done really well in in terms of keeping people safe? Because I think you said earlier there were 68 cases all up and there are only 10 at the moment, which I think sounds like, all things considered, a pretty good figure. I am being conscious of asking about deaths but you did not mention any deaths, so can we assume that your community has been spared that?

Ms GALLAGHER: There have been no confirmed deaths from COVID, but one of the biggest things that is coming out loud and clear is mental health. We have had a humungous increase—I am not prepared to say what those numbers are—in suicides. Last week alone we had four suicides in the Victorian Aboriginal community.

Mr RIORDAN: There are actually some figures that came out today that said suicides in Victoria are down. That does not feel right to you perhaps?

Ms GALLAGHER: Not for the Victorian Aboriginal community, no.

Mr RIORDAN: Right. Okay. That is interesting. Once again, to whoever is best to answer this question—that might be Nerita perhaps—Australia has seen a general uptick in terms of family violence during the COVID lockdowns. Have you or your organisations detected more people needing support? If so, do you have the capacity within your existing structures to deal with current needs, and if not, where is that extra support required?

Ms WAIGHT: That is a fantastic question, so thank you for considering that. So in terms of family violence we have been doing welfare checks on our clients, both incarcerated and not incarcerated, day in day out since COVID-19 started—so that is a couple of months back now. During those phone calls family violence has been mentioned in every phone call as a concern. People are concerned about what is going on in terms of intimate partner relationships and are disclosing concerns around that, but also when you have got multiple generations living in a home in a confined environment, that is also creating wider family violence repercussions. A lot of the reasons why you are not seeing them be reported are (a) the COVID-19 environment but also fear of institutional responses, which is something our community has struggled with for generations. I think when you look at the fantastic work that VACCHO do, and other ACCOs, that tries to mitigate that in some respect, but it is going to take a lot more work and a lot more time until that is fully realised. So that is why you are not seeing the numbers.

In terms of offending, we are not seeing them come through as strongly as they were, but we know through disclosure that is a prevalent issue. We have tried to do support by brokerage—that is, providing them with food to make sure they have got it in the cupboard to feed the kids and feed themselves and take off some of that economic pressure; assisting them with bills; assisting them with tenancy situations, which also due to COVID-19 are really difficult because people do not have the ability to work in the same capacity, particularly in casual industries where a lot of our people pick up work. We are also seeing them cycle in and out of incarceration, which then puts further pressure on family, thus creating situations where violence is prevalent.

Mr RIORDAN: Okay. And just before I—

Adjunct Prof. BAMBLETT: Can I just say we are the largest provider of family violence services to Aboriginal people. We respond to the Orange Doors across all of Melbourne metro, Gippsland and Ovens Murray. We have seen now an increase in the numbers coming through the Orange Door, referrals from the police. L17 is coming in, so the numbers are coming up, but actually we are getting re-engaged, so families that did not have family violence or that had addressed their family violence are now under pressure with family violence, so we are seeing those numbers. I think the investment in the Orange Door, in clinical practitioners and therapeutic means that we are able to put things in place.
But on one of the questions you spoke about before, I think there has been an underestimation of what the role of essential services is. Whilst we agree that health is critical, essential services around child protection did not get allocations of PPE in the first instance, so we were expected to go and visit families that could potentially have COVID and we did not have PPE. We were told that it was not going to be needed, but when we turned up for interviews with families there was child protection fully geared out in PPE and we were expected to be there without it. So to me it was pretty obvious right from the word go that they had not thought about how they would fund this essential service and the role of essential services. I think if you pick up anything, it has got to be that you have got to think about that child protection still happens, family violence still happens and we all have to still deliver services.

Mr RIORDAN: All the normal functions of life continue in a pandemic.

Adjunct Prof. BAMBLETT: Yes.

Mr RIORDAN: Just on that—

The CHAIR: I am sorry to cut you off there, Deputy Chair, but your time has expired. I will pass the call to Mr Sam Hibbins, MP.

Mr HIBBINS: Thank you, Chair. And thank you all for appearing before the inquiry this morning. My first question is probably primarily for VALS, but I am happy to hear other views as well. It goes towards lessons learned for our criminal justice system during the pandemic. We have seen a significant drop in the number of people in prison, and from my numbers it has actually fallen at a higher rate for Aboriginal prisoners than for the general prison population. Now, we have heard evidence that part of that is because of the general drop in crime, but I am interested to hear whether you think there are actually other reasons for that and whether there are some general lessons to be learned in criminal justice from the pandemic.

Ms WAIGHT: There are certainly lessons to be learned. Just in terms of criminal justice interaction, although you might have seen prisoner numbers go down, in terms of Aboriginal people being charged or arrested and/or interviewed, those still rose. In the pandemic period itself it is close to 18 per cent; it was 18.87 per cent overall for the prior financial year. Again this information is in our submission, which will shortly be provided. In terms of why those numbers then were not translating into remandees in prison, a lot of what you saw was just from a focus on bail applications and courts taking into account the COVID-19 situation when making those judgements but also a concerted effort by the civil society sector to work together collaboratively as much as possible to ensure that we had a place for people to reside in; that we had supports in place, whether they be like this—over Zoom—or whether it be over the phone, and that they were provided; and also to make sure that there was a constant level of support that could be picked up at any point by that person.

In terms of what we are seeing in prisons, we are still seeing Aboriginal people being remanded. When we look at numbers overall a lot of our remandees are in for what we call short stays, so 21 days or less, and their sentences often do not equate to the time they have spent in prison in itself. When we are doing the welfare checks on our detainees what they are telling us is that the limited family contact is especially challenging, particularly to those with underlying mental health conditions and disabilities. They are reporting that they are self-harming both in police stations and in prison, and they have also reported feeling very, very depressed about not being able to participate in cultural activities.

This crisis for us has come at a time when the Black Lives Matter movement has gained momentum across the world and in Australia, and in the context of evidence demonstrating that COVID-19 outbreaks have amplified the effect of COVID-19 in the rest of the community to prevent more Aboriginal deaths in custody. Admissions to custody must continue to be curbed. People must be released. Everyone has a role to play in this, from police to prosecution, judges to parole boards and the legislature. It is important that we carry those lessons forward post COVID-19 into the recovery phase and then into normal society.

It is also important that now we look at ways that we can improve, by considering de-incarceration strategies, particularly for those short stays, and really working to address the things that are barriers for our people accessing bail, which is the fact that the bail test itself is virtually impossible to meet. But also, the lack of housing is just endemic. It is one of the big things and the major factor that really goes against our community
members when it comes to bail applications, because often enough they are either couch surfing at a home, they are going from family to family or they are living rough on the streets.

At any time, post-pandemic, pre-pandemic or during, living on the streets is not something that we want for our people. We want them to have a safe place to be, because that does then mean that they will be on track, not interacting with the justice system overall. I just might pass to Indi who might want to speak in terms of Aboriginal youth and their experiences in the justice system.

Mr CLARKE: Thanks, and thank you for the question. I think from our perspective and what we are hearing as well, one of the positives from COVID-19 is that it has fast-tracked technology and the use of technology in the justice system, and for youth justice in particular, allowing young people to have access to connect and engage with their families. That has been a big positive, and I think it has also increased the wellbeing of young people in those spaces. That is one of the things that we have heard from this.

I think going forward that is one thing that we should learn from this: technology can be used in these spaces, and in particular in court settings. But I will just echo the sentiments of Narita around everything that is happening. But that is pretty much one of the positives we have heard, and I think we can all learn from the positive of technology as we move forward.

Mr HIBBINS: Great.

Adjunct Prof. BAMBLETT: Can I just add one comment, just very quickly. I think the reality is that we are returning to the Aboriginal base of living and being in communities, and so all of a sudden we now have whole families at home with eyes on the vulnerable and our families are together. That is what has always been what has kept children out of trouble, being able to support families. Uncles, aunts and everybody have eyes on family, and we are all at this stage rebalancing ourselves. That is my belief.

The CHAIR: Thank you, and the member’s time has expired.

We thank you all very much for being here and taking the time to speak with us today. If today’s discussions have raised any issues for anyone who may be listening to our hearings, the Lifeline number is 13 11 14, the Kids Helpline number is 1800 551 800 and the Beyond Blue number is 1300 096 269. Jill, I am not sure if you would like to also add a specific number for your communities?

Ms GALLAGHER: No, I have not got that with me at the moment, sorry.

The CHAIR: No? No worries. Thank you all very much for joining with us today and providing your evidence to our committee. The committee will follow up on any questions which were taken on notice in writing, and responses will be required within five working days of the committee’s request. We will take a very short break before consideration of our next witness. Thank you for joining with us today.

Witnesses withdrew.