Acknowledgement of Country

The University of Sydney’s Camperdown Campus sits on the lands of the Gadigal people with campuses, teaching and research facilities on the lands of the Gamaraygal, Dharug, Wangal, Darkinyung, Burramadagal, Dharawal, Gandangara, Gamilaraay, Barkindji, Bundjalung, Wiradjuri, Ngunawal, Gureng, and Gagadju peoples.

We recognise and pay respect to the Elders and communities of these lands, past, present and emerging, who for thousands of years have shared and exchanged knowledges across innumerable generations, for the benefit of all. We respect and value the knowledges, cultures and traditions of Aboriginal and Torres Strait Islander peoples.

There is no place in Australia – water, land or air – that has not been known, nurtured and loved by Aboriginal and Torres Strait Islander peoples.

We acknowledge that many people identify themselves by their Clan, Mob, or Country.
The Sydney Policy Lab

The Sydney Policy Lab is a multidisciplinary research institute at the University of Sydney and a nonpartisan space where people from all walks of life can meet and collectively develop plans for the future.

We exist to forge collaborative relationships between researchers, civil society, industry, politicians, and policymakers that are capable of creating new knowledge and driving change. We seek to shape an Australia which is more equal, where power is in the hands of everyday people and where more people feel a secure sense of belonging in their own society.

The Sydney Policy Lab develops far-reaching, original research projects which unite the grounded wisdom that comes from everyday experience and the perspectives gained from rigorous scholarship. We work in partnership with institutions that seek to put new ideas into practice.

Our unique way of working strengthens the ability of our researchers and partners to collaboratively generate new ideas, transform the ways they work, and effect change.

The Great Australian Renovation

A report convened by the Sydney Policy Lab and the University of Sydney

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The Open Society, Common Purpose taskforce 2022

The Open Society, Common Purpose taskforce 2022, which is sponsored by the Sydney Policy Lab of the University of Sydney with the support of the University’s Culture Strategy, is an independent body drawn from a broad range of sectors to promote a society that is both outward-looking to the world and enhances social connection at home.

The taskforce inquired into lessons learnt from the COVID-19 pandemic and their relevance to:

— children and youth, including how Australia should protect and promote their interests

— social cohesion and national identity, including how we repair social division and inequalities created, or magnified, by the pandemic; and

— public trust, including what we have learnt about science communication, trust in experts, governance and policy during the pandemic.

The taskforce set out to make recommendations after consulting with experts and communities from within the University and beyond, by facilitating lively public discussion about the matters of inquiry. Its work is informed by the belief that dialogue between academic researchers and diverse parts of Australian society will unlock answers to the urgent challenges of our time.
Executive Summary
Executive Summary

The Great Australian Renovation

This is the first broad-ranging, independent report into Australia’s performance as a society during the past two-and-a-half years of the COVID-19 pandemic. How well did Australia perform? Can our combined health, economic, social and political response be considered a success or a failure? What comes next?

The taskforce believes that while Australia suffered in major ways from the COVID-19 pandemic, we avoided the very worst.

The taskforce’s first report, published in 2021, called for Australia to:

move from zero COVID, which traps us in suspended animation, to ‘securely reopened and effectively vaccinated’ which would allow us to ‘live with COVID’ in a way that minimises both direct and indirect harm.

One year on Australia is still working towards this goal, having made substantial progress. We should not, however, pat ourselves on the back. During the crisis, mistakes were made by our decision makers, who were placed under enormous pressures by the pandemic. Their responses to the crisis were at times inconsistent, messy and counterproductive – things not wholly unexpected in a lively federal democracy. This report seeks not to place blame but to identify lessons for the ongoing battle against the disease and the continuing quest to emerge stronger and better from the experiences of the last two-and-a-half years. The pandemic is far from over and should Australia be confronted by another similar societal challenge, we want Australia to be armed with the right lessons.

The biggest learning from COVID-19 is the need for a new round of national reform. The pandemic acted as a stress test, exposing significant deficits of trust, social cohesion and equality in Australia. The human costs of the pandemic were not evenly spread. For example, people with full-time and white-collar jobs, living in affluent and well-resourced suburbs, fared far better than those living in crowded housing, with casual, insecure jobs and lower resourced schools and health facilities. The national reforms of the 1980s and 1990s need updating to include everyone in the Australian story.

In short, it is time for a Great Australian Renovation.

One of the most important reasons to renovate our national model is to create a better future for young Australians. Children and young people sacrificed enormously to keep their parents and grandparents from harm. They are the forgotten heroes of the COVID-19 pandemic. Their lack of a public voice meant their needs were often placed second to those of adults, robbing them of important life experiences and development opportunities, with potentially long-term costs to their welfare. This must not be allowed to happen again.

The sacrifices of our young people must be repaid – by giving them a louder public voice, including them in our nation’s deliberations, and directing greater investment and resources towards their needs. Australia cannot be renovated to create a better future without the active involvement of the young. It is time for generational justice.
Priority 1: Children and young people

While the vast majority of children and young people were not made seriously ill by COVID-19, its effects on their broader wellbeing – including on their education, social development and mental health – did not receive the attention they should have.

The major cause of this neglect of children and young people was their lack of inclusion in public policy decisions that affect them. Australia goes to great lengths to listen to and invest in older Australians – our national superannuation system being the most obvious example – yet it lacks any coherent mechanism to hear from or invest in our youngest community members. We must ensure their interests are better represented in decision-making – not just with regard to pandemic planning, but more broadly. They need to be given a platform with more direct say in our society through the creation of innovative participatory models. We note that among the new federal government’s policies is a proposal to provide young people with a structured model of national and local participation – an Office of Youth and a Minister for Youth. This policy is a good starting point with the potential to make children’s and youth policy more focused, strategic, urgent and robust.

The taskforce therefore believes society should give children and young people a stronger say, put in place political structures and imperatives that will ensure they are heard on issues that affect them now and in the future, and direct additional specific investment in their overall wellbeing.

The experience of Australia’s schools during the pandemic is particularly important to consider. A full examination of the epidemiological evidence is required to determine whether the policy of school closures was effective or necessary to contain the pandemic. When schools close the already marginalised suffer, and this is unacceptable. Because schools play such a vital role in children and young people’s lives and in our society generally, we should operate on the principle that they should be the last institutions to close and the first to re-open.
Priority 2: Trust

The more trust in a society, the more likely it is to protect its people from pandemics. But this trust must be earned. Our goal should be that people comply with health advice not out of compulsion, but because they believe they have good reason to trust the advice being offered. One of the important lessons from the pandemic is the need to create the conditions necessary for communities to have greater confidence in their leaders and the health and other advice they provide. Transparency in public decision making is a crucial part of this. Asking questions should always be encouraged as part of a two-way conversation about public health policy.

During the pandemic, Australians generally followed public health advice, though often for different reasons. Some accepted it willingly because they trusted the people and institutions providing that advice. Others complied with differing degrees of willingness because that advice came with legal sanctions, enforcement and community pressure. And over time, levels of acceptance of public health advice varied in response to specific policies, circumstances and implementation failures. The taskforce believes trust must be earned, and in a liberal democracy the best way to tackle a pandemic is for the state to earn the trust of the people. Across the world, trust in public health advice varied from low (the United States) to high (Denmark). Australian levels of trust could be said to be somewhere in the middle and highly variable between different segments of the population.

We need to keep building high levels of trust in all our communities if we are to fight future health and other societal challenges more effectively. The building up and maintenance of public trust is essential to democracy and cannot be thought of as a second-order issue – it must be a primary practical policy objective.

A healthy democracy is sustained by the ability of diverse voices to question and debate government directions through meaningful, trustful engagement. We should continue to create the conditions where the community can retain trust in their leaders and accept the health and other advice they provide. For this to happen, decision making must be transparent, with strong community engagement complementing evidence assessment and expert advice, and guiding public health communications strategies.

Building trust requires decision makers to treat people equally and equitably. This was not always the case during the pandemic, during which there were clear instances of unequal enforcement that created avoidable hardship for many of the most vulnerable communities. We must therefore work to remove all forms of discrimination from our policy implementation, as ingrained prejudices can often consciously and unconsciously inform decision-making.

Building trust also requires authorities to demonstrate important leadership qualities – becoming more open, less confrontational, more cooperative, and more accountable. The rise of dangerous and illiberal forms of populism – so evident during the pandemic – requires our society to listen more closely to those who feel left out. If the onslaught against liberal democracy continues, then liberal democracy has to show that it is stronger than illiberal alternatives.
Priority 3: Social cohesion

While cohesiveness was strong in many ways during the pandemic, it became clear early on that the burdens and sacrifices were not evenly distributed across all communities.

Broad patterns of unequal treatment emerged, based on occupation, race, ethnicity, and socio-economic class. Geography was a particularly strong source of divided experience, although this was often a proxy for socio-economic and cultural differences. As a result, many marginalised communities faced heavy-handed policing and missed out on appropriate health and economic support. First Nations communities, newly arrived families, international students, those in casual employment and others had their needs overlooked.

As a result, national cohesion suffered greatly. While the National Cabinet was a welcome semi-constitutional innovation, the state and territory border closures that occurred caused distress and infringed on people’s rights and freedoms.

Australia’s diaspora – one of our national assets – was cut off from their homeland in sometimes cruel and unnecessary ways. In addition, according to the recently published Australian Census, almost half of the Australian population was born overseas or had at least one parent born overseas, and many would have suffered from being cut off from relatives, friends, employment and business opportunities. In a highly connected world, easy international travel and overseas work is not a luxury but a necessity for many.

We need to give priority to increasing Australia’s social cohesion. Strong and collaborative civil society networks with genuine connection with the community can help overcome systemic and complex problems and generate the broad-based power needed to create positive change. We need to foster existing networks and work to better connect them.

The taskforce believes that future pandemic modelling should be broader in scope. In addition to disease incidence, morbidity and mortality predictions, such modelling should also consider the broad social and economic consequences of public health decisions. Did workers providing essential services during the pandemic receive the necessary support to do so safely, with proper regard for their wellbeing? Who was affected by the non-medical problems the pandemic caused? How can we help those affected recover? What programs might accelerate this recovery? These are some of the questions we should be asking and answering.
Priority 1: Children & young people

Priority 2: Trust

Priority 3: Social cohesion
To demonstrate the importance of the wellbeing of children and young people, the taskforce’s recommendations start with them. Implicit in all our recommendations is the achievement of the moral objective of just recognition, representation and welfare for First Nations peoples.

**Recommendation 1:** Investing in our young people

**Recommendation 2:** Giving children and young people a say

**Recommendation 3:** Understanding the needs of young Australians

**Recommendation 4:** Reviewing the decision to close schools

**Recommendation 5:** A Minister for Integrity and Accountability

**Recommendation 6:** Renewing multiculturalism and anti-racism

**Recommendation 7:** Improving scientific literacy and communication

**Recommendation 8:** More cooperative national leadership

**Recommendation 9:** Parliament setting an example

**Recommendation 10:** Building engagement and capability across civil society

**Recommendation 11:** Improving the conduct of our election campaigns

**Recommendation 12:** Measuring more than just GDP
Recommendation 1: Investing in our young people

Australia should create a Youth Fund, similar to the Future Fund, which will have the aim of investing strategically in our children and young people in order to create genuine equal opportunity and improved wellbeing. The Youth Fund should include young people in its governance structure and be informed by input from all young Australians. The fund should not replace but rather supplement existing children and youth programs. It could also support the implementation of the National Children’s Mental Health Strategy.

Recommendation 2: Giving children and young people a say

To prevent the interests of children and young people being placed second to those of adults, Australia should create an independent national youth body as a source of advice to our national leaders. It should include a broadly representative cross section of Australian youth, from all classes, geographical regions, genders and backgrounds, with appropriate resourcing. We note the new government’s election platform included a similar commitment and we urge the government to make it a national priority.

Recommendation 3: Understanding the needs of young Australians

Australian governments at all levels should cooperate to collect and analyse new and existing intersectional data on children and young people to inform more effective child and youth policy development.

Recommendation 4: Reviewing the decision to close schools

Pandemic-related school closures need to be reviewed. This review should examine the full epidemiological evidence relating to school closures to determine when they are effective and necessary. The review should also examine the educational and wider wellbeing effects of school closures on children and young people.
Recommendation 5:
A Minister for Integrity and Accountability

The taskforce recommends the appointment of an Australian Government minister with the responsibility for strengthening the integrity and accountability of our public institutions, and for rebuilding trust between citizens and our governments. Part of their job would be to ensure greater public involvement in the design and governance of government programs. Consistent with the principles of the Uluru Statement from the Heart, we support the establishment of a constitutional voice for First Nations peoples to ensure all issues relating to their interests are informed by their chosen representatives.

Recommendation 6:
Renewing multiculturalism and anti–racism

The taskforce calls for the establishment of a national office for multicultural affairs within the machinery of government to pursue a renewal of multiculturalism as a priority. There also needs to be a coherent and properly resourced national anti–racism strategy with the object of building full equality, respect and cooperation between Australians. Such a strategy, which has been endorsed by the federal government, should feature a visible communications campaign designed to raise public understanding about prejudice, discrimination and how to combat them. Building on proposed development of standards for the collection of data relating to ethnicity, the taskforce also recommends government action to address ethnic and racial disparities within Australian society.

Recommendation 7:
Improving scientific literacy and communication

The taskforce calls for the implementation of programs to strengthen both the communications ability of our public health officials and scientific community, and the ‘scientific literacy’ of the Australian people. These measures taken together will allow people to better understand how diseases work, how scientists generate and use evidence to inform judgements, and provide the knowledge needed to filter out disinformation and identify trusted sources, while also engaging with communities to better understand their priorities and concerns. Programs to raise scientific literacy will need to be targeted, inclusive of marginalised communities, and should not assume a homogenous national audience.
Recommendation 8:
More cooperative national leadership

Creating greater national cohesion starts at the top and requires changes to the way our
national parliament operates. The Parliament needs to become less conflict driven and
facilitate greater cooperation between our elected representatives to solve major societal
challenges. To this end, the Parliament should hold an annual State of the Nation Address,
with the same prominence as the Commonwealth Budget, during which the Prime Minister
should address issues relating to Australia’s progress, cohesion and security. This special
sitting day of parliament should include the participation of leaders from all levels of
government – state, territory and local – and leaders from civil society.

Recommendation 9:
Parliament setting an example

By changing its standing orders, the Australian Parliament can set an example for the nation
on how to reduce unnecessary conflict and promote constructive debate, cooperation and
transparency. We propose that – following the example of the United Kingdom’s House of
Commons – a Prime Minister’s Question Time be held one day per week on parliamentary
sitting weeks, with other question times reserved for the members and senators to ask
genuine questions of government ministers. Questions from citizens and participatory
budgeting should be incorporated into the business of Parliament. Members of Parliament
should also be bound by a code of conduct that seeks to set a standard and an example for
other institutions in national life.

Recommendation 10:
Building engagement and capability across
civil society

During the pandemic civil society exemplified how grassroots networks and local
communities provide essential social support for many Australians. Governments should
learn from successful examples of civil society collaborations and undertake early
collaboration and engagement with non-government organisations and community leaders
to ensure successful development and implementation of policy initiatives. This should be
coupled with measures to support the capability of civil society organisations, including in
the realm of advocacy.
Recommendation 11: Improving the conduct of our election campaigns

To strengthen our democracy, the taskforce proposes changes to the way election campaigns are conducted, including: the establishment of a national debate commission to determine the format, timing and media hosts for major election debates; limits on political advertising; and more occasions for voters to meet candidates.

Recommendation 12: Measuring more than just GDP

To inform the reporting for the State of the Nation Address, the Australian Government should develop and report on a wider set of national indicators beyond those related to the Budget. These must include indicators related to equality, community wellbeing, sustainability and social cohesion.
Introduction
Introduction

Australia needs a national renovation. The reform model that has served our nation so well since the 1980s and 1990s needs updating for these dramatically changed times. We need a new national story that builds trust, strengthens social cohesion and improves the wellbeing of children and young people.

This is the second report of the Open Society Common Purpose taskforce (‘the taskforce’) into Australia’s response to the COVID–19 pandemic.

The taskforce’s first report, A Roadmap to Reopening published in May 2021, considered how Australia might fully reopen to the world as the COVID–19 pandemic receded. This report considers a different question: how Australia might build back better and sustainably now that the major pandemic restrictions have been lifted.

The report examines the story of the pandemic years to demonstrate how the shock of COVID–19 exposed the flaws and weaknesses of our economy, major national institutions and society generally – and also how big important successes point the way to a better future.

A sense of hope, but also of fatigue

The COVID–19 pandemic remains a major global public health problem. Thankfully, Australia managed to avoid the pandemic’s worst effects, but those effects were nonetheless serious and the threat continues. After dealing with the crisis for more than two years, we now must find optimal ways of ‘living with COVID’ while limiting harm to at-risk groups and being better prepared for the future.

The report comes at a pivotal moment. The pandemic restrictions have largely been removed. Australians have also elected a new government and a new–look parliament. And yet, not all is as it was.

The war in the Ukraine and its associated economic downturn, inflation, rising interest rates and other problems have created an atmosphere of anxiety and fatigue. There is hope as well as worry. The negative approach would be to put off our national renovation until conditions improve. The taskforce believes the changes it recommends in this report will make our recovery faster and set us up to manage future challenges more effectively.

The end of the pandemic and the election of a new parliament has coincided also with greater public awareness of the Uluru Statement from the Heart, especially its call for a constitutionally recognised First Nations Voice to Parliament. The Taskforce strongly endorses the Statement as a necessary step in renovating our nation. Without equality for our First Nations peoples true renovation is impossible. We therefore urge all political parties and all Australians to support a constitutional referendum to enshrine a First Nations Voice in the Australian Constitution. Representation, equality and justice for First Nations peoples is implicit in all of the argument and recommendations of this report and is one of the report’s highest priorities.
Lessons learnt from the COVID-19 pandemic

Our first conclusion is that the initial maximum suppression approach, including border closures and lockdowns, bought Australia valuable time to prepare and develop additional protective measures, primarily vaccines. However, when eradication of the SARS CoV-2 virus became unachievable the pursuit of what was in effect a ‘zero COVID’ policy became unsustainable and incompatible with global connectedness.

Doing everything possible to ‘keep the virus out’ before effective vaccines became available limited COVID-related disease and death in Australia. However, the benefits of such an aggressive approach came at significant health, social and economic costs to our nation, including cutting Australian citizens off from our shores and preventing people from visiting relatives and friends overseas and taking advantage of international business opportunities. Now that the border closures and lockdowns are over, we can better appreciate the consequences of these broad-ranging public health measures, which, it must be acknowledged, were made under conditions of huge uncertainty as well as time and political pressure. With the benefit of hindsight, we should now critically evaluate which measures were effective and which were unnecessarily harsh and contributed little to pandemic control. Understanding what worked and what didn’t will inform future policies to increase their protective effect and reduce unintended consequences.

The pandemic exposed the insufficiency of pre-pandemic preparedness plans that failed to anticipate the sheer scale of the challenge. Our residential aged care system was found particularly wanting in preparedness. High rates of infection, over-work and burnout among residential and health care staff resulted in workforce shortages and low morale. This identifies a need to revisit national policies on infection prevention and control, health workforce remuneration and staffing levels.

Expert consultation on the key lessons learnt from Australia’s response to the COVID-19 pandemic in Australia identified three high priority needs:

– to better protect the best interests of children and youth;
– to repair the social disruption caused by aggressive containment responses; and
– to restore public trust in science and leadership.

These are the elements that will be reflected on in this report.

The pandemic also highlighted the need for further research into:

– how the most at-risk groups can be better protected from COVID-19 and other disease outbreaks;
– the social and behavioural drivers of vaccine uptake and other preventive measures;
– the medium and long-term consequences of COVID-19;
– the consequences of pandemic response measures on untreated chronic diseases, mental health and social inequality; and
– the creation of more holistic preparedness, response and recovery frameworks.

It is important that the risk of epidemic outbreaks is recognised as a ‘standing threat’ with ongoing investment in disease surveillance, workforce development and research.
The right moment for a national policy reset

The taskforce sees now as a prudent moment to consider the successes and failures of Australia’s pandemic response, and the strengths and weaknesses it exposed in our economy and society. Like all sudden shocks, the pandemic brought to the surface deficiencies in our economic structures and opened cracks in our tolerant, liberal society. How might these problems best be addressed to make us a stronger, fairer and more prosperous nation? This report suggests a way forward, including a new way of thinking about our national direction, and makes policy recommendations to enable this change of direction underway.

At the base of the taskforce’s discussions is the realisation that things cannot go back to the way they were due to ongoing COVID-19 and other global challenges. There is a feeling that it is time for something different – a new approach to ordering our society driven by values like empathy, equality and cooperation to promote greater prosperity for all.

Anger and division will not allow us to overcome the problems highlighted by the pandemic. The taskforce believes this is the moment for a reset – a chance to get serious again and renovate the existing model that has served Australia so well, but needs updating for these dramatically changed times. We call it the Great Australian Renovation.

Three areas of priority: youth, trust, social cohesion

This renovation of our nation after the pandemic will be wide-ranging, but the taskforce believes that it must lead to the creation of new social infrastructure that pursues the wellbeing of children and young people, builds trust between Australians, and strengthens our nation’s social cohesion.
How we got here
How we got here

The period covered by the taskforce’s first report ended on 31 March 2021. As of that date there had been a total of 29,304 cases of COVID-19 in Australia, 910 deaths and there were 155 active cases, mainly in quarantine. We now examine briefly what has happened since then.

Population-level restrictions, including stay-at-home orders, the closing of state and international borders, strict quarantine and targeted control measures prevented established community transmission in Australia until the first half of 2021.

The first case of the Delta variant was recorded in NSW on 16 June 2021. The virus quickly spread triggering a one-week stay-at-home order for four Sydney local government areas (LGAs). Within ten days, however, there were more than 100 locally acquired cases, setting off a raft of social restrictions across the Greater Sydney area.

By the end of July, a prolonged lockdown loomed. Authorities announced additional restrictions to ‘LGAs of concern’ in western and south-western Sydney, in a bid to limit transmission. Residents of these areas were subject to an evening curfew, one-hour limits on outdoor exercise, and a 5km travel radius.

Tens of thousands of residents in these LGAs are employed to provide essential health, childcare, logistics, food manufacturing, retail and cleaning services. They faced changing public health definitions of who constituted an essential worker. The lack of clarity around the definition of essential work meant some people were prevented by police from leaving LGAs to attend work. Others were subject to a daily testing mandate but were unable to access tests in the community. Businesses similarly struggled to source an adequate supply of rapid antigen tests to enable compliance with public health orders.

Concerns were raised about the harsher restrictions and the lack of support and over-policing of suburbs in culturally and linguistically diverse areas with high refugee populations. On 29 July, NSW Police Commissioner Mick Fuller formally requested additional personnel from the Australian Defence Force to help enforce Sydney’s lockdown measures. Refugees with permanent visas could access JobKeeper, but temporary residents and asylum seekers on temporary protection visas or bridging visas were not eligible for the same support.

The Delta variant spread to other states and territories with Victoria, the ACT and NSW enduring the longest and strictest lockdowns. Anti-lockdown protests occurred across Australia’s major cities. As Sydney entered its fifth week of lockdown, thousands of protestors marched demanding an end to restrictions, ‘freedom’ and ‘the truth’.

Vaccinations

The difficulty of controlling the third wave (June – November 2021) is not only attributed to the high transmissibility of the Delta variant, but also the initial low vaccination coverage. At the end of May 2021 – prior to the Sydney outbreak – Australia had administered 16 doses per 100 inhabitants, with only 1.9 percent of the population fully vaccinated. At this point 70 percent of U.K. adults and 57 percent of U.S. adults had received at least one vaccine dose.

The Australian vaccine rollout encountered many obstacles and delays. The rollout for adults was meant to be completed by October 2021, relying on the AstraZeneca (AZ) vaccine manufactured in Australia.

Australia has a rigorous and well-established system for decision-making on vaccines, guided by the Australian Technical Advisory Group on Immunisation (ATAGI). Vaccine rollout for adults set out clear priorities of who should be vaccinated first, and was meant to be
completed by October 2021. It is particularly useful to reflect on the delays in the initial vaccine rollout as we face increasing case numbers from the latest Omicron sub-variants with stalled and incomplete rollout of booster doses, including to vulnerable populations.

The initial vaccine rollout relied on AZ manufactured under license in Australia. Uptake of AZ was severely affected by vaccine hesitancy, after associations with a rare blood clotting disorder. In April 2021 ATAGI advised that AZ should not be used for people under 50 years of age, unless ‘the benefit of the vaccination clearly outweighed the associated risks’. Whilst at that point Australia had effectively eliminated community transmission, it was clear that without adequate vaccine protection prolonged border closures and harsh public health restrictions were required to keep people safe. In contrast, the UK has administered 50 million AZ doses (as at May 2022) and the vaccine remains licensed for use in younger adults, though people under 40 are offered an alternative vaccine where possible. Other European countries did cease to administer AZ, including Denmark and Norway. After the AZ blood clotting concerns were identified, the Australian Government purchased an additional 10 million doses of the Pfizer vaccine, to be available in late 2021.

With heightened health messaging about the urgency of getting vaccinated, young people were effectively unable to access a vaccine due to the lack of Pfizer. Then Prime Minister Scott Morrison made a surprise announcement urging under-40s to approach their GP and request AZ, which was strongly rejected by Queensland’s Chief Health Officer and was met with anger from Queensland and WA’s premiers. Inconsistent health messaging and the perceived unavailability of a safe vaccine option for younger people caused stress and increased their distrust in authorities.

In response to criticism of the slow vaccine rollout among priority groups and the growing gap in vaccination rates, the federal government announced a surge plan to increase vaccination rates across 30 Aboriginal communities nationwide in September 2021. Data released by the National Aboriginal Community Controlled Health Organisation revealed that Aboriginal people in NSW and the ACT were disproportionately affected by COVID-19. In November 2021, it was reported that 10 percent of all COVID cases in NSW and the ACT were in people of Indigenous background, with infections at twice the rate of non-Indigenous Australians.

Whilst Australia ultimately achieved high levels of double-dose vaccination coverage, there are lessons to be learned. Most developed countries secured options on multiple vaccines in advance of evidence on safety and efficacy. The risk of side effects from the AZ vaccine led to an emotional response and a frenzied political environment, which had implications for trust and dispassionate apolitical solution finding. Although ATAGI did provide a detailed rationale for the decisions made, transparency would be aided by timely release of future ATAGI meeting minutes and publication of the data that decisions are based on, in addition to statements that explain decisions in lay language.

The political dimensions of the pandemic motivated a mad scramble for safe and effective vaccines, with poorer countries missing out. Despite token investment in instruments like the World Health Organisation (WHO) COVAX mechanism to ensure equitable global vaccine access, Australia and other liberal democracies hoarded vaccines while developing world vaccine coverage still lags. This requires urgent re-appraisal at a time when liberal democracy is under threat and urgent global challenges require collective action.

**Reopening**

The National Cabinet released a four-phase plan to transition Australia’s COVID–19 response from maximum suppression to containment. Under this plan, agreed to in October 2021, restrictions would progressively ease at 70 percent and 80 percent vaccination coverage. Australia’s outbound travel ban was lifted on 1 November 2021, permitting citizens and permanent residents to travel to and from Australia.
By December 2021, Australia saw a new surge of infections from the Omicron variant. Ahead of Christmas, some interstate travel resumed. By the new year, most states and territories had opened their borders except for WA, where they were awaiting higher vaccination coverage.\textsuperscript{16}

Surging case numbers, strict close contact definitions, and the need for a test to travel interstate for Christmas placed unprecedented demand on PCR testing facilities. Desperate not to let Omicron dampen festivities, Australians turned to rapid antigen tests (RATs), which soon created a critical shortage with price-gouging occurring. The Pharmacy Guild reported pressure from state and territory governments ordering RATs for their key workers, as well as from large companies wanting to keep their workforces functioning. The Pharmacy Guild claimed these orders diverted supply from online retailers and pharmacies.\textsuperscript{17}

On 21 February 2022, Australia reopened its borders to vaccinated tourists and other visa holders for the first time in two years. To date (8 July 2022), there have been 8,413,831 recorded cases of COVID-19 and 10,225 deaths across Australia.\textsuperscript{18}
The Great Australian Renovation
The Great Australian Renovation

The passing of the worst of the COVID-19 pandemic, along with the election of a fresh-looking new Australian Parliament, provides a moment for Australia to reset its direction.

With the pandemic lockdowns over, a new policy conversation suddenly seems possible, driven by a shifted national sentiment that seems more open to reasoned debate, civility, and expert input from relevant scientists, unions, civil society and people with lived experience. Although it is only early days, Australia’s new government appears to sense this mood-shift as well.

This moment must be seized. Australia is faced with major problems that can no longer be adequately addressed by the approach that has directed national policy since the reform era of the 1980s and ‘90s. That reform era was – at least in theory – characterised by trade liberalisation, financial deregulation, workplace deregulation, smaller government and lower taxation. It had many positive results. Australia is more prosperous, more internationally connected, more cosmopolitan, more highly educated, more liberal in its social outlook, and more inclusive towards First Nations peoples and LGBTIQ+ citizens.

But the pandemic exposed problems that have been simmering beneath the surface for some time and must now be addressed, including falling economic productivity, stagnant wages, rising social inequality, deepening political and ideological divisions, and creaking health, education and social services. Most notably in our view, the pandemic exposed the need to improve Australia’s levels of trust and social cohesion and build a better future for children and young people.

To increase living standards, Australian productivity must increase, where currently it is falling. According to the ABS, Australia’s economy is growing at around three percent per year, showing good recovery after the pandemic. However, the share of income going to profits over wages has been growing since the 1970s, due to increases in commodity prices during the mining boom and the current post-pandemic period.19,20

Furthermore, Australia’s income and wealth inequality was widening prior to the pandemic. Even though Australia is thought of as ‘the land of the fair go’, the ABS’s Survey of Income and Housing for 2019–20 showed otherwise. For example, in the two decades to 2020, high-wealth households experienced a growth in average net worth of $2.7 million to $3.3 million, while low-wealth households experienced a decrease in net worth from $38,800 to $35,100.21

Such inequalities correlate with a wide range of health and social issues, including reduced life expectancy, higher infant mortality, reduced education attainment, and lower social mobility.

Lastly, Australia is facing a sustainability crisis. In 2021, the Sustainable Development Report ranked Australia last out of the 193 members of the United Nations for action taken to reduce global greenhouse gas emissions.22 Australia has the highest greenhouse gas emissions from coal power in the world on a per capita basis, with annual per person emissions five times greater than the global average.23
Simply put, the model of the last 25 years is no longer equipped to serve Australia now or in the 25 years to come. Since that reform era we have lost much of our capacity to tell a coherent national story. Our narrative energy has been lost in culture wars and other pointless conflicts. Part of our purpose should therefore be to assist the Australian people to develop a hope-filled national story again – one that can inspire us to accept the risks of necessary change to create a better future.

What might that positive story about a new way forward for Australia be?

The taskforce believes that the way forward for our country requires what we call ‘the Great Australian Renovation’. By this we mean a shift from a national policy direction based on market-based economic principles to the exclusion of almost all else, to one which gives proper weight alongside economics to social cohesion, trust and the wellbeing of the next generation.

To flesh out a path forward, the taskforce examined three crucial aspects of our nation that were put under pressure by the pandemic and where the need for improvements were highlighted:

— **Young people** – how to protect the rights and interests of children and young people, whose sufferings during the pandemic were sometimes overlooked, and build a better future for them in an increasingly unsettled world characterised by economic uncertainty, rising international tensions, and climate change.

— **Trust** – the need to maintain high levels of trust within Australian society in a democratic culture characterized by robust debate.

— **Social cohesion** – how to overcome social divisions that widened during the pandemic and avoid further divisions in the future.
Priority 1: Protecting the rights and interests of children and young people
Priority 1: Protecting the rights and interests of children and young people*

*Note: for the purposes of the discussion, children are classified as being aged 0–12 years, and young people 13–25 years of age.

The longer the pandemic continued, the more it became obvious that the wellbeing of our younger people was a secondary concern – the primary one being protecting older Australians who are more vulnerable to severe disease. The taskforce believes the best interests of both can and should be considered together. The major cause of this neglect of children and young people is that they lack a strong public voice. The taskforce believes their voices should be elevated, backed by funds to invest in their future.

What happened to children and young people’s wellbeing during the pandemic?

One of the fortunate aspects of the COVID-19 pandemic is that children and young people rarely developed severe disease. In those under 20 years old there have been almost one million cases reported, with less than 20 deaths.24

This picture, though, becomes far less positive when social, emotional and other physical health measures are considered. A quarter of 16–24-year-old Australians polled thought about suicide in the past two years, 82 percent reported experiencing mental health issues, and 15 percent attempted self-harm.25 This is a significantly higher mental health impact than for older Australians and has worsened the already deteriorating pre-pandemic mental health of children and young people. Another study showed that excessive recreational screen time, insufficient fruit intake and alcohol and tobacco use increased among adolescents, with adverse impacts on their longer-term health.

There were other important but less easily quantified ways in which young people suffered during the pandemic:

— Primary, secondary and tertiary students alike were denied the benefits of face-to-face teaching and fell behind as teachers were unable to recognise and address critical learning challenges. Children from disadvantaged backgrounds were most heavily affected. All students missed out on the chance to learn important socialisation skills. Older students were denied important ‘coming of age’ experiences. While online learning suited some children and young people, it is also worth pondering how many dropped out of tertiary education because of the disappointing experience of online learning.

— Young people’s support services had either stopped or, like their schooling, were moved largely online. Anecdotal reports suggest that child psychologists are still overwhelmed with overly long waiting times.
— Their sports clubs closed. It is worth pondering how many young people dropped out of junior cricket, football, basketball, netball, athletics, swimming and other organised sports, to the long-term detriment of their physical development, fitness levels, self-confidence, and social skills.

— The unequal effect of these measures on children from disadvantaged backgrounds was largely ignored. Messages from pediatric health care professionals about the effects of the lockdowns on poorer young people too often went unheard.

— Modelling by Social Ventures Australia suggests that COVID-19 will compound the risk of child abuse and neglect and increase the number of children and families entering the child protection system.26

Other evidence suggests that while Australians continue to increase their average income and household wealth, this is not translating into improvements in the welfare of children. The Australian Early Development Census, which measures how children develop by the time they start school, showed small but noticeable increases in the number of children regarded as ‘vulnerable’ on one or more of five key developmental indicators. This complements a UNICEF report from 2020, which ranked Australia 32nd out of 38 rich countries for overall child wellbeing, and 35th out of 38 for children’s mental wellbeing. Australia’s secondary school students are also slipping down the rankings of the Program for International Student Assessment (PISA), including falling below the average for mathematics.27

What happened in schools

What happened in schools demands particular attention. At the beginning of the pandemic there were blanket school closures across the nation. After May 2020 though, Australia maintained some of the best in-person school attendance in the world, aided by the early generation of evidence that schools did not amplify the spread of COVID-19.28 29

With subsequent outbreaks and lengthy school closures, however, it is clear that many students suffered as a result of not being able to attend school face-to-face. The effect of school closures on disadvantaged children is of particular concern for the taskforce. Remote and flexible learning strategies were deployed with some success, demonstrating a welcome capacity for innovation in our schools; but reporting back from schools suggests that they reduced education quality and greatly increased learning inequities, as marginalised children, including those from refugee and low-income households, were less likely to have the IT hardware, internet connections, space to study, parental support and additional school-based help that more affluent children enjoyed.30

This is an important lesson from the pandemic.
The taskforce believes that pandemic-related school closures need to be reviewed, bringing to bear all relevant epidemiological evidence as well as evidence of the educational and wider wellbeing effects of school closures on children and young people. When schools close, the least privileged suffer, and this is unacceptable.

We are highly sympathetic to the view that because schools play such a vital role in children and young people’s lives and in our society generally, they should be the last institutions to close and the first to re-open.

A national mitigation and recovery plan is needed to ensure that in future outbreaks equal education access is maintained and the physical and mental health of school students is addressed. Schools should be classified as providing an essential service, with school staff vaccinated as a priority group and mandated remote learning only considered as a last resort. The taskforce therefore supports the work done in this area by the Australian Research Alliance for Children and Youth (ARACY), the United Nations Children’s Fund (UNICEF), and the Royal Australian College of Physicians.

The results of these consequences will not be fully understood for some years as the telling effect of them plays out.

As young Australians missed out in so many ways, causing many to fall behind, our nation needs to act to re-accelerate their social development. This will require major expansion of appropriate services as well as attracting more people to the professions that support young people in fields like education, childcare and mental health.

The plight of the young during the pandemic also reminds us of the need to ensure children’s and young people’s interests are better represented in decision making – not just with regard to future pandemic planning, but more broadly. They need to be given a more prominent platform in our society.

Given the foregoing, the taskforce considered the following issues:

— What might be done to monitor and correct for the long-term health, educational and social effects the pandemic had on children and young people.

— How might future public health policy better consider the mental health and development of children and young people.

— The role of schools and higher education institutions beyond academic learning in contributing to the wider wellbeing of students.

— The need for a platform for young people in our national conversations.

Due to Australia’s federal system of government, responsibility for child health and wellbeing programs and policies fall across multiple agencies within different tiers of government. While the Federal Government has a key role in providing national leadership, it is also crucial that there is strong collaboration with the states and territories.
What lessons did we learn?

The pandemic experience taught our society many harsh lessons about our neglect of children’s and young people’s needs and rights.

There is insufficient awareness about children’s mental health

There is generally strong public awareness about the mental health of older teenagers and young adults. The media attention given to the issues of youth depression and suicide, and the almost daily involvement in teenager’s lives of their schools, with their nurturing role and support structures, keeps youth mental health in the public eye. This is not the case for younger children, who are less able to articulate what is happening to them, demonstrate their independence, build self-confidence and demand their human rights. Many experts fear that children right around the world may have suffered serious and unrecognised mental health insults as a result of the pandemic lockdown measures.31,32

We need more data about what is happening to children and young people

Much more information is needed to give children’s mental health the priority it deserves. Australia should collect more quality data relating to each of the childhood developmental stages and monitor for effects of the pandemic. The data would naturally need to be intersectional and differentiated by geography to account for inequities in access to services. Much work has been done by the Australian Institute of Health and Welfare and other bodies that could be brought together to identify where gaps exist and create a richer picture of what is happening to children, young people, and their communities. Careful consideration would be needed for how this data should be collected, stored, shared and analysed.

Children and young people lack an adequate say in our public debates

Consultations conducted by the taskforce made clear the view that our democracy would be improved if more young people were included in our national debates. The taskforce therefore believes society should give children and young people a stronger say and put in place mechanisms that will ensure their voices are heard.

Young people must be valued, trusted, listened to and treated as equal citizens with equal rights. The parents, carers, educators and child welfare advocates for younger children must also be listened to more closely.

Opinion will be strongly divided on the issue of extending the franchise to younger people, but we should all be able to agree that some form of formal say should be given to those younger than eighteen years of age, who constitute a sizeable proportion of our population.
There is no fund specifically for children in our national finances

One interesting observation during the taskforce’s deliberations was that while Australia invests many billions of dollars in the welfare of older people via the superannuation system, tax concessions and the pension, there is no similar investment in young people. While it is true that much is invested in young people indirectly via health, education and sport and recreation services, a fund dedicated to improving the welfare, educational equality, quality of life and cultural richness of young people would be a positive investment in our nation’s future. The inclusive governance arrangements for such a fund would provide an opportunity to give a voice to the young in its deliberations.
Priority 2: Rebuilding trust
Priority 2: Rebuilding trust

Societies with the greatest levels of trust in government were most successful in protecting their people from the pandemic. But this trust has to be earned. One of the big lessons of the pandemic is therefore the need to create the conditions where the community has greater confidence that it can trust its leaders and the health and other advice they provide. Our goal should be compliance with health advice not out of compulsion but because people believe they have good reason to trust the advice being offered. Transparency in public decision making is a crucial part of this. Asking questions should always be encouraged as part of a two-way conversation about public health policy.

Why trust?

One of the national qualities that served Australia so well during the pandemic was the generally high level of trust we placed in public health advice. Although some sections of the community were highly sceptical of that advice, including some who refused to follow directions in the face of penalties, the vast majority of Australians accepted the advice of health policy experts and acted accordingly. This improved our nation’s capacity to cope with the COVID-19 crisis.

For example, a report released in 2020 by Democracy 2025, found that 77 percent of Australians surveyed exhibited high levels of trust in scientists and experts. In other words, the Australian public has a high regard for evidence informed decision-making. Modelling conducted by the University of Sydney also revealed compliance rates with social distancing guidelines, along with COVID testing, contract tracing and isolation, held steady at around 90 percent during the worst early outbreaks.

High levels of trust were important indicators of success across the world. Global COVID-19 success stories include countries where trust in experts and institutions were high. Denmark is one such example, involving high buy-in with public health measures leading to lower death rates and higher vaccination levels compared to neighbouring countries. Such success is credited by political scientist Michael Bang Petersen to clear messaging from politicians and the media, trusting citizens with hard truths, acknowledging uncertainty and upholding trust.

The comparison between Australia and the USA, with similar demographic profiles, shows a ten-fold difference in COVID-19 death rates. In the New York Times, Damien Cave credits this to ‘a lifesaving trait that Australians displayed from the top of government to the hospital floor, and that Americans have shown they lack: trust, in science and institutions, but especially in one another... interpersonal trust – a belief that others would do what was right not just for the individual but for the community – saved lives. Trust mattered more than smoking prevalence, health spending or form of government, a study of 177 countries in The Lancet recently found. ’
The taskforce members believe that this high level of trust was well warranted – not because we believe paternalistically that citizens should unquestioningly accept the advice of governments and experts, but because our citizens exercised their democratic judgement and concluded that those giving advice and making decisions were trustworthy.

The taskforce further believes that a healthy democracy is one where government directions and expert advice are transparent and open to questioning and debate. Decision making should be more transparent in the future. In the United Kingdom, for example, the joint committee on vaccines published the minutes and evidence of its decisions – something that isn’t done in Australia.

A healthy democracy is always comfortable with argument and uncomfortable with accepting the word of authority without question. We need to create the conditions where the national community has greater confidence that it can trust its leaders and the health and other advice they provide.

One of the prime lessons of the pandemic is the need to maintain high levels of trust in our community. It is therefore important to consider where trust was maintained, and where it broke down.

What were the sources of trust during the pandemic?

The early public response in Australia saw strong compliance with public health orders, which contributed to our successful management of the pandemic. While in the very early stages of the pandemic there was considerable confusion, concerted efforts and regular communication from governments followed, often in the form of daily media conferences involving political leaders and senior leaders in the health bureaucracy. What contributed to this early success in building trust, and why did it deteriorate through the course of the pandemic?

In general, the taskforce finds that trust and cooperation were built when communications were timely, clear, informed by evidence, as consultative as possible, transparent in process, admitted the uncertainty involved, and seen to be fair.

Effective communications also built trust across many different communities – with avenues systematically created to speak to and listen to ethnically and geographically diverse communities and stakeholders. Good messaging informed and educated people in a way that considered their health literacy, made information easy to access, and engaged trusted spokespeople. Such platforms for community consultation and communication should therefore be established and maintained as a routine service. That is not to say all was perfect, communications could have been improved – as detailed in the following section.
What were the sources of distrust during the pandemic?

During the pandemic, Australians generally followed public health advice, though often for different reasons. Some accepted it willingly because they trusted the people and institutions providing that advice. Others complied with differing degrees of willingness because that advice came with legal sanctions, enforcement and community pressure. And over time, levels of acceptance of public health advice varied in response to specific policies, circumstances and implementation failures. Some of the possible sources of declining levels of trust include:

— some people may have perceived health advice and restrictions on behaviour to be driven by fear, overly cautious, and without adequate scientific justification;

— others may have lost faith in official advice due to policy failures that made that advice impractical to follow – for example, official confusion and disagreement over the safety of certain vaccines, shortages of personal protective equipment (PPE), poor performance of quarantine facilities and scandals surrounding procurement of services, and inadequate definitions of who was an ‘essential worker’;

— other people may have perceived the restrictions as unreasonable incursions on their personal freedom and overreach by government, leading to regular and at times unruly street protests;

— there were also several noticeable cases of fear being amplified by public commentary from doctors and academics, to whom the media turned to explain the pandemic; and

— most worryingly there was a growth of extremism, both pro- and anti-lockdown, fueled by conspiracy theories and accelerated by social media.

We can say in summary that compliance with public health advice came from many sources, including fear and anxiety, policing as well as trust. Australians tend to trust experts, at least more than in the United States, but even this area of trust declined over time. As public discourse becomes increasingly politicised and ideological, care is needed for Australia to avoid going down the path of polarisation and conspiratorial thinking of the United States.

As we begin contemplating a post-pandemic future, questions remain about the state of our institutions and trust.

What big lessons did we learn about the importance of trust?

The extreme importance of trust

The taskforce believes trust must be earned, and in a liberal democracy the best way to tackle a pandemic is for the state to earn the trust of the people. We need to accept the proposition that in a democratic society like ours, without trust there will be no successful resolution of major public health challenges.

The building up and maintenance of public trust cannot be thought of as a second-order issue – rather, it must be a primary practical policy objective. For decisionmakers – politicians and health officials – trust is a concern that must always be front of mind. Trust enables thoughtful and effective action. It requires transparent and evidence-based decision making that is seen to be fair and effective. As the Danish political scientist Michael Bang Petersen put it: ‘Upholding trust is key: it is the best predictor of vaccine acceptance and an antidote to misinformation.’
Gaining trust requires our leaders to display different qualities

Regaining trust requires a genuine desire on the part of our political class to interact and work with civil society. Conflict only accelerates the decline in trust. Post-COVID, our politicians and citizens alike have the chance to take a different approach that requires us to show different qualities: an emphasis on kindness, empathy and compassion; greater transparency; a willingness to admit mistakes; and efforts to increase people’s ability to understand complex issues – not just health issues but across all policy areas. Gaining trust is therefore not just about clear and truthful messaging, it is about encouraging a strong and transparent dialogue between government and civil society. Debate should be encouraged. During the pandemic, the dialogue with civil society was not as good as it could have been – the taskforce notes in particular the inadequate attempts to include diverse community leaders and educators in the design of public health directives and advice.

The need to improvise and follow the right principles

In times of uncertainty, like the pandemic, there isn’t always adequate data to guide every decision. We need to learn to live with that reality and have a commitment to generate evidence as quickly as possible to guide our actions. In many instances, health policy experts and governments were acting on risk aversion principles in the absence of real data. We must accept that at times this is the best we can manage.

The need for more effective communication from policy professionals

A major lesson for relevant public actors, including expert health advisers, is the need to develop public trust through regular communication in an effective manner. Evidence-based decision making has been extremely important.

The taskforce accepts that Australia’s public health advisers operated at all times in good faith, motivated by the public interest, and informed by science. Their work to date has been a tribute to their professionalism and Australians owe them a great debt. As in every aspect of the pandemic, however, lessons were learned that may improve results in future crises.

One of the major problems encountered in the pandemic was the way scientists and the work they did were portrayed in the media, which can work to lower trust in them. Scientists, like everyone else, can err by emphasising the wrong points, addressing the wrong questions, or otherwise failing to explain their meaning in clear ways. The AstraZeneca vaccine can be said to have suffered from poor and highly inconsistent communication.

Two important lessons are: (1) the need to help scientists improve the ways they communicate with the public, and (2) the need to improve the capacity of the general public to understand scientific messages.

We need to empower science by using the lessons of effective communication and empower people to understand science better. Increasing scientific literacy might include supporting people to become more familiar with critical thinking, probability, risk and how scientific consensus is arrived at. Armed with such knowledge, people may be less likely to fall back on fallacious populist forms of argumentation that encourage extreme doubt in every case, and to arm themselves against dangerous disinformation. The potential for these measures to improve Australia’s pandemic response is considerable.

The public had a generally pro-vaccine attitude before and during the pandemic, as evidenced by rapid vaccine uptake once Pfizer became available. However, there is room to improve communication and understanding of how vaccines work, the relative risks associated with vaccines, and the need to revise our strategy as new evidence emerges. The low rate of booster shots in Australia (third and fourth doses are at 55 percent, placing us 36th in the world), even among vulnerable groups, demonstrates the need for improved and ongoing communication.
Treating people equally as a foundation of trust

As will be discussed in section three on social cohesion, there were notable instances of unequal treatment and sacrifice during the pandemic. Such inequality raises two important issues.

The first is the need to remove all forms of discrimination from our policy implementation. Ingrained prejudices can often consciously and unconsciously inform policing and public health decisions. This is an obvious point that should be emphasised in all anti-discrimination and anti-racism campaigns. One way of working to achieve this would be to develop different and more inclusive ways of collaborating with diverse civil society groups.

The second is the need for deeper and more genuine forms of engagement and involvement in decision making. Engagement programs can and often do degenerate into cynical box-ticking exercises. This won’t suffice during something as serious as a pandemic. There must be greater contact and deeper discussions with affected communities, including genuine efforts to draw them and their leaders into both policy formulation and implementation – which might be seen as an active and ongoing form of co-design.

We need to maintain trust in our democracy. If we are smart, we will take what happened during the pandemic as a warning against the erosion of trust in our democratic system and a reminder of the constant need to maintain it. The pandemic saw an eruption of large, unruly and even violent protests against public health orders from disenchanted groups of citizens. While those protests were only by a minority and never at any stage got completely out of control, elements were reminiscent of overseas movements that are doing so much damage to liberal democracy.

The immediate causes of the protest movements were disquiet and even anger at public health measures themselves, particularly those that affected employment and income – though for some, there were more direct ideological motivations. However, some wider explanations also seem likely. In particular, the disaffection of working-class Australians over the disruptions to their industries and standard of living over the past few decades – a phenomenon cited as being behind the rise of Donald Trump, Brexit, and the resurgence of the far right in France. History shows that unless addressed, such radical disaffection has the potential to grow, especially in the era of social media. This may be an important warning for governments and society generally to do more to listen to the concerns of those who view themselves as being negatively impacted by economic change.

If this analysis is correct, and the pandemic lockdown protests have catalysed the growth of dangerous and irrational forms of political behaviour then serious thought has to be given to counteracting them. If the onslaught against liberal democracy continues, then liberal democracy has to show that it is stronger and open to necessary reforms. Trust should be valued, maintained and now renovated. Trust should never be taken for granted.
Priority 3: Building social cohesion
Priority 3: Building social cohesion

While cohesiveness was strong in many ways during the pandemic, it soon became clear that the burdens and sacrifices were not evenly distributed. Rebuilding this starts at the top – with a more cooperative style of national leadership.

How cohesive were we in reality?

When COVID-19 arrived in 2020 the popular refrain was ‘we’re all in this together’. This ‘cohesiveness narrative’ was useful, helping our society make many necessary sacrifices for the common good. But while cohesiveness was apparent and strong in many ways, it was clear from early on in the pandemic that the burdens and sacrifices were not evenly distributed, and this became even clearer as the crisis deepened.

Claims of unequal burden, sacrifice and treatment soon emerged, based on occupation type, race, ethnicity, and socio-economic class. Some marginalised communities faced more heavy-handed policing and received less health and economic support than other more affluent communities. People in casual and insecure work, including temporary migrants, arguably bore the brunt of the impacts of the pandemic working in the care and services sectors yet often were not eligible for government pandemic assistance.

National cohesion was badly affected. While the National Cabinet was a welcome semi-constitutional innovation, the state and territory border closures that occurred caused great distress and resulted in significant infringements on people’s rights and freedoms.

Australia’s diaspora – one of our national assets – was cut off from its homeland in sometimes cruel and unnecessary ways, and this is something that needs to be avoided if and when pandemics recur. According to the recently published Australian Census, almost half of the Australian population was born overseas or had at least one parent born overseas, and many would have suffered from being cut off from relatives, friends and work and business opportunities. Australians need to understand that in this era of easy international travel and overseas work, they are part of a global community of people defined by shared citizenship, not one defined by geographical borders.

Several instances of breakdown in social cohesion were drawn to the taskforce’s attention and are worthy of discussion for the lessons they provide:

— During the height of the pandemic, there was a widespread feeling that people living in local government areas of Western Sydney were targeted for stricter policing measures than those living in other wealthier and less ethnically diverse parts of the city.

— In Melbourne a similar controversy arose when a small number of public housing towers were strictly locked down by the authorities, preventing even the reduced freedom of movement that other Melburnians enjoyed. The Victorian Ombudsman’s report into the detention and treatment of inner-Melbourne public housing residents during the hard lockdown found the detention was contrary to law and residents’ human rights. Although one of the Ombudsman’s recommendations is for the state government to make a formal apology to residents, at the time of the report’s release the state government said it would make ‘no apology for saving people’s lives’.
— International students and temporary visa holders were not extended financial support, although some categories of employees were supported.\textsuperscript{36}

— Asian Australians reported an increase in racism.\textsuperscript{37}

— Job losses disproportionately affected women, who are more likely to be in insecure employment. And a greater proportion of unpaid care work was performed by women even when men were working from home during the pandemic.\textsuperscript{38}

— The mental health of some was affected more than others, including young people, women, people with disabilities or existing mental health conditions, culturally and linguistically diverse people, Aboriginal and Torres Strait Islander peoples, people on low incomes, people experiencing job loss, and people living in poor quality housing.

— One measure of those left behind was the number of stories of food banks and other welfare agencies being inundated by those whose immigration or employment status did not qualify them for JobKeeper or JobSeeker payments.

Civil society groups and organisations rallied to support the population through this time of need, with many notable examples of people banding together to provide meals and other forms of help to those unable to leave their homes or afford life’s other necessities.\textsuperscript{39} These include:

— Addison Road Community Organisation (ARCO), a well-established community centre with a mission to tackle hunger and inequality, rescued up to 20 tonnes of food per month, working with 70+ community groups to provide good food to 5000 people a week from Redfern to Penrith and to as far as the Central West and South Coast.

— First Nations communities in places like Bourke and West Arnhem Land utilised connections through community-led hubs and schools to protect Elders, distribute public health information, and ensure food security for vulnerable residents.

— Melbourne bakery owners David and Bev Winter drew from personal funds to set up a Meals On Wheels-type service, mobilising volunteers to prepare freshly cooked meals in their own kitchens, which were delivered by volunteer drivers to the most vulnerable in the community, including elderly residents, international students, and people with disabilities.

Government decisions also contributed to some remarkable victories for social cohesion. For example, the desire to prevent people experiencing homelessness from becoming spreaders of the virus led us to temporarily and very effectively solve the homelessness crisis in our cities. Similarly, the temporary increase in welfare payments alongside JobKeeper eliminated a great deal of poverty for a time.
What positive lessons did we learn?

Positive change to create greater social cohesion is possible

The positive examples outlined above demonstrated three things. First, that many of our biggest social problems are not unsolvable but are the result of policy choices our society makes. Second, that governments and civil society working together can achieve far more than we previously understood. And third, that achieving greater cohesion in our unequal society is possible – and in fact far easier than we imagined. This points to an important lesson from the pandemic: We need to further strengthen civil society.

Strong and collaborative networks with connection to the community can overcome systemic and complex problems and generate the broad-based power to create change. We need to support and connect these networks.

We should measure more than just GDP

One way to help drive cohesion is to measure indicators beyond GDP, including factors like mental health outcomes, environmental sustainability, social inclusion and more. This form of measurement is beginning to happen in Australia. For example, the City of Sydney has adopted a suite of community indicators to gauge community wellbeing and sustainability. Notably the Australian Treasurer has already committed to including wellbeing indicators in the October 2022 budget. Such indicators could help to better track and drive progress on social cohesion and wellbeing, and could provide the basis for an annual State of the Nation address where the Prime Minister outlines a vision for the future of the country. This should be communicated through a special sitting day of parliament which includes the participation of leaders from all levels of government – state, territory and local – and leaders from civil society.

Localism was reborn

People bonded, often strongly, with communities supporting each other. Some have suggested the forging of stronger local communities played a role in the rise of the locally focused independent candidates who were elected in record numbers to the Australian Parliament at the 2022 federal election. In this way, the pandemic may have worked as a catalyst to break down the two-party system, sending our democracy in new and unexpected directions. Only time will tell whether these changes can endure and permanently change the Australian political landscape.

Strengthen civil society’s capacity

Another way to drive cohesion is to make early engagement with civil society organisations and grassroots networks the default for governments at all levels, to ensure successful and inclusive implementation of policy initiatives. This should be coupled with strengthening the capability of civil society organisations, including in the realm of advocacy.

We need to take stock

The pandemic has caused us to ‘take stock’ and stop taking things for granted. Tragedies have a way of generating this type of mutual support. There were major positives for social cohesion – the JobKeeper, JobSeeker and other payments, which prevented mass unemployment and poverty, being the biggest example, although their later withdrawal was criticised for causing additional hardship. Our hospitals and public health system worked incredibly hard to limit the spread of COVID-19, manage the vaccine roll-out and...
save people’s lives – the efforts and personal sacrifice of our health workforce deserves the nation’s lasting gratitude and appropriate investment. Free COVID-19 testing centres were set up. Schools and universities improvised and innovated in ways not often recognised – moving to total online delivery within days of closures being declared, involving enormous effort from teaching and administrative staff. Some remote Indigenous communities were, initially at least, spared infection, due to strong local leadership and cooperation. It would be a mistake to forget these national success stories.

What negative lessons did we learn?

Although much worked well, Australia’s COVID-19 response was far from perfect and the crisis revealed many cracks in our social cohesion.

Marginalised groups weren’t always treated equally

During the pandemic, policy deficiencies relating to marginalised groups were exposed, including failures in relation to the vaccination of people with disabilities and disability support staff. There was also lack of meaningful consultation with the disability sector. Some Aboriginal communities had low confidence that authorities would genuinely consult and make good decisions. The isolation of many communities made closing off in the early stages of COVID-19 a feasible approach, but successful vaccine rollout, which became essential once the virus was locally established in Australia, was not prioritised in these remote communities.

Government assistance sometimes led to perverse results

Aspects of government expenditure relating to the pandemic confounded community expectations. Under the JobKeeper scheme, the federal government paid $89 billion to companies that predicted a 30 percent downturn in revenue. However, as there was no mechanism built in for the subsidy to be repaid if such a downturn did not eventuate, dozens of Australia’s largest companies received JobKeeper payments even while making record profits, standing down and laying off workers, paying out executive bonuses and distributing dividends. Despite assurances that early access to vaccines was to be prioritised for vulnerable community members, there were instances when those in more privileged positions appeared to enjoy priority, including students at an independent Sydney school and various companies.

‘Socio-educational’ divides became more prominent

Since the beginning of the pandemic, increasing numbers of people have raised the question of whether a major political realignment is underway based on levels of educational attainment rather than economic class. This global phenomenon has been recognised by international theorists for several years now, but is gaining accelerating prominence in Australia’s public debates too. Two prominent features of this have been: (1) the composition of large-scale public protests, whose participants were heavily skewed towards those with less formal education; and (2) the results of the 2022 federal election, where parties of the left increased their proportion of more highly educated voters, and parties of the right increased their proportion of less educated voters.
All communities need to be respected – by banishing racism

The pandemic showed the extent to which government now relies heavily on community leaders to echo government policy and get it across to their community members. During the COVID-19 pandemic, communication with culturally diverse communities was initially haphazard with major negative effects on health and social outcomes. The COVID-19 response was ultimately more effective in reaching such communities because it was supported by trusted community leaders. For example, as noted in the 2021 taskforce report, the National Aboriginal Community Controlled Health Organisation acted decisively to close remote communities, distribute PPE, and share health information. For this to work on an ongoing basis, there needs to be mutual respect and a great deal of reconciling communities and fostering trust between leadership and the public. There is therefore a significant call for a coherent and properly resourced national anti-racism strategy, and the establishment of an office for multicultural affairs to pursue a renewal of multiculturalism as a priority. The 2021 census demonstrates the importance of this, with almost a quarter of Australians born overseas and almost half having a parent born overseas. Such a step would help establish strong and enduring relationships between marginalised communities and political leaders.

Global solidarity and constructive regional leadership are important

COVID-19 put global inequities into stark relief. Many high-income countries (including Australia) did not always demonstrate strong global solidarity – although the Australian Department of Foreign Affairs and Trade (DFAT) did provide millions of vaccine doses and technical assistance with vaccine roll-out to the region. At a time when society faces major existential threats and the global power balance is tenuous, it is more important than ever for liberal democracies to embrace global solidarity. It is also the only way to effectively manage an evolving global health threat and to prevent and prepare for similar future challenges.

Access to affordable treatments and vaccines for all should be a guiding principle for pandemic preparedness and response globally as well as locally. Australia is already providing much needed leadership in the Indo-Pacific Region by sharing technical expertise, assisting workforce development and strengthening local health systems, but there is scope to also play a leading role in reshaping the global health architecture and finding an appropriate international instrument to strengthen future pandemic prevention, preparedness and response. There is another reason for increasing Australia’s solidarity with our region and the world. The 2021 census underscores that Australians are more interconnected at a cultural and family level with the rest of the world that ever before and these connections are shifting to include a greater span of countries in Asia and the Pacific.

Again, these lessons reach beyond the pandemic, reminding us of the importance of working cooperatively and behaving generously towards our Pacific neighbours.

In pandemics we need to conduct more modelling and explain the results more clearly

During the pandemic epidemiological modelling informed a great deal of public policy and played a big part in helping us understand and restrict the spread of COVID-19. Such modelling is by its nature imperfect, subject as it is to the quality of model, the availability of relevant data and the correctness of the underlying assumptions. While models assisted rapid public health intervention and scenario testing, they failed to consider some of the most important issues. The taskforce believes that future pandemic modelling should move beyond disease incidence, morbidity and mortality predictions, to more fully consider the social and economic consequences of the health crisis. Ideally, modelling should examine a broader range of issues affected by a pandemic, including employment, educational progress, social equity, mental health and child development. The models used for public health decision making should also clearly communicate their purpose, assumptions and limitations to a lay audience, and be open to critical peer review at the time of decision.
making. As a principle, making modelling code available to the public is important for transparency, encourages productive collaboration, and facilitates model refinement.
Conclusion
Conclusion

After two-and-a-half years, the global COVID-19 pandemic is still far from over. The first phase, involving widespread international and interstate border closures, seems to have passed and Australia has largely reopened to the world with effective – though not perfect – vaccination levels. We have begun to ‘live with COVID’.

Australia has performed comparatively well in the pandemic to date. Mistakes were made, but many other countries made many more. The crisis acted as a stress test, exposing weaknesses in many areas of Australian society – most notably in the areas of trust, social cohesion, and the wellbeing of children and young people. This experience has provided Australia with many lessons that will help us deal more effectively with future crises and build a better future for all our people.

The weaknesses exposed by this stress test require a major response. The taskforce believes Australia should seize the moment and create a new national story that builds on the successes of the reform era of the 1980s and 1990s.

This new national reform effort – which we call the Great Australian Renovation – begins with positive prospects. A new parliament and a new government have been elected, altering the tone of our national discussions, shifting the focus of policy away from unnecessarily narrow economic questions, creating more room for the creation of a more equal, inclusive, safer and environmentally sustainable society. This holds out the hope of creating a stronger, more productive and more prosperous economy that will work for everyone.

This report hopes to spark a national conversation that will begin the development of this new national story and new national direction. All must be empowered to participate in that conversation, from all cultures, including our oldest Indigenous culture, and from all ages, especially the young. The conversation’s tone must be inclusive, cooperative and less confrontational than in recent years, enabled by a new style of leadership from a repurposed parliament and a greater say for civil society.

We offer the twelve following recommendations as important starting points for that journey.
Recommendations for the Great Australian Renovation

To demonstrate the importance of the wellbeing of children and young people, the taskforce’s recommendations start with them. Implicit in all our recommendations is the achievement of the moral objective of just recognition, representation and welfare for First Nations peoples.

Recommendation 1: Investing in our young people

Australia should create a Youth Fund, similar to the Future Fund, which will have the aim of investing strategically in our children and young people in order to create genuine equal opportunity and improved wellbeing. The Youth Fund should include young people in its governance structure and be informed by input from all young Australians. The fund should not replace but rather supplement existing children and youth programs. It could also support the implementation of the National Children’s Mental Health Strategy.

Recommendation 2: Giving children and young people a say

To prevent the interests of children and young people being placed second to those of adults, Australia should create an independent national youth body as a source of advice to our national leaders. It should include a broadly representative cross section of Australian youth, from all classes, geographical regions, genders and backgrounds, with appropriate resourcing. We note the new government’s election platform included a similar commitment and we urge the government to make it a national priority.

Recommendation 3: Understanding the needs of young Australians

Australian governments at all levels should cooperate to collect and analyse new and existing intersectional data on children and young people to inform more effective child and youth policy development.

Recommendation 4: Reviewing the decision to close schools

Pandemic-related school closures need to be reviewed. This review should examine the full epidemiological evidence relating to school closures to determine when they are effective and necessary. The review should also examine the educational and wider wellbeing effects of school closures on children and young people.
Recommendation 5: A Minister for Integrity and Accountability

The taskforce recommends the appointment of an Australian Government minister with the responsibility for strengthening the integrity and accountability of our public institutions, and for rebuilding trust between citizens and our governments. Part of their job would be to ensure greater public involvement in the design and governance of government programs. Consistent with the principles of the Uluru Statement from the Heart, we support the establishment of a constitutional voice for First Nations peoples to ensure all issues relating to their interests are informed by their chosen representatives.

Recommendation 6: Renewing multiculturalism and anti-racism

The taskforce calls for the establishment of a national office for multicultural affairs within the machinery of government to pursue a renewal of multiculturalism as a priority. There also needs to be a coherent and properly resourced national anti-racism strategy with the object of building full equality, respect and cooperation between Australians. Such a strategy, which has been endorsed by the federal government, should feature a visible communications campaign designed to raise public understanding about prejudice, discrimination and how to combat them. Building on proposed development of standards for the collection of data relating to ethnicity, the taskforce also recommends government action to address ethnic and racial disparities within Australian society.

Recommendation 7: Improving scientific literacy and communication

The taskforce calls for the implementation of programs to strengthen both the communications ability of our public health officials and scientific community, and the ‘scientific literacy’ of the Australian people. These measures taken together will allow people to better understand how diseases work, how scientists generate and use evidence to inform judgements, and provide the knowledge needed to filter out disinformation and identify trusted sources, while also engaging with communities to better understand their priorities and concerns. Programs to raise scientific literacy will need to be targeted, inclusive of marginalised communities, and should not assume a homogenous national audience.

Recommendation 8: More cooperative national leadership

Creating greater national cohesion starts at the top and requires changes to the way our national parliament operates. The Parliament needs to become less conflict driven and facilitate greater cooperation between our elected representatives to solve major societal challenges. To this end, the Parliament should hold an annual State of the Nation Address, with the same prominence as the Commonwealth Budget, during which the Prime Minister should address issues relating to Australia’s progress, cohesion and security. This special sitting day of parliament should include the participation of leaders from all levels of government – state, territory and local – and leaders from civil society.
Recommendation 9: Parliament setting an example

By changing its standing orders, the Australian Parliament can set an example for the nation on how to reduce unnecessary conflict and promote constructive debate, cooperation and transparency. We propose that – following the example of the United Kingdom’s House of Commons – a Prime Minister’s Question Time be held one day per week on parliamentary sitting weeks, with other question times reserved for the members and senators to ask genuine questions of government ministers. Questions from citizens and participatory budgeting should be incorporated into the business of Parliament. Members of Parliament should also be bound by a code of conduct that seeks to set a standard and an example for other institutions in national life.

Recommendation 10: Building engagement and capability across civil society

During the pandemic civil society exemplified how grassroots networks and local communities provide essential social support for many Australians. Governments should learn from successful examples of civil society collaborations and undertake early collaboration and engagement with non-government organisations and community leaders to ensure successful development and implementation of policy initiatives. This should be coupled with measures to support the capability of civil society organisations, including in the realm of advocacy.

Recommendation 11: Improving the conduct of our election campaigns

To strengthen our democracy, the taskforce proposes changes to the way election campaigns are conducted, including: the establishment of a national debate commission to determine the format, timing and media hosts for major election debates; limits on political advertising; and more occasions for voters to meet candidates.

Recommendation 12: Measuring more than just GDP

To inform the reporting for the state of the nation address, the Australian Government should develop and report on a wider set of national indicators beyond those related to the Budget. These must include indicators related to equality, community wellbeing, sustainability and social cohesion.
Appendix 1: The Open Society Common Purpose taskforce 2022

Membership
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— Prof Tim Soutphommasane (Acting Director, Sydney Policy Lab, The University of Sydney, co-chair)
— Prof Ben Marais (Co-Director, Sydney Infectious Diseases Institute (Sydney ID), The University of Sydney)
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— Jo Schofield (President, United Workers Union)
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Terms of Reference

The taskforce is an independent, non-partisan group convened by the Sydney Policy Lab. Representing a cross-section of Australian society, including business, the professions, civil society and academia, the taskforce will examine, and stimulate public discussion about, how Australian society can rebuild from the COVID-19 pandemic.

The taskforce will inquire into the following matters:

— pandemic and disaster preparedness (including what needs to be done to strengthen our healthcare system and our systems of resilience);

— children and youth (including how Australia can protect and promote children’s and youth’s interests);

— social cohesion and national identity (including how we repair social division and inequalities created, or magnified, by the pandemic); and

— public trust (including what we have learned about science communication, trust in experts, governance and policy during the pandemic).

The taskforce will make recommendations arising out of its inquiry, as it considers appropriate, and issue a public report by Friday 29 July 2022.

The taskforce will consult with experts from within the University and beyond, and facilitate public discussion about the matters of inquiry. Its work will be informed by the belief that dialogue between academic researchers and diverse parts of Australian society will unlock answers to the urgent challenges of our time.
Appendix 2: Acknowledgements

The taskforce received generous and insightful contributions to its work from independent experts and community leaders through many conversations, three expert consultation sessions, two workshops and a roundtable between 6 May and 11 June 2022. Their expertise has been invaluable in the production of this report. None of them are, of course, in any way responsible for the arguments that the taskforce makes or any errors of fact or interpretation in this report. The generosity of all participants in sharing their own wisdom and perspectives was very much appreciated.

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References


47. See reference 1.
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