

National Plan to End the Abuse and Mistreatment of Older People

2024 – 2034

Public Consultation Draft



A joint Australian, state and
territory government initiative

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Foreword

A foreword will be added in the final version of this Plan and it will be stated that the Plan has been endorsed by the Standing Council of Attorneys-General.



Acknowledgment of Country

We acknowledge and recognise all Aboriginal and Torres Strait Islander peoples across Australia, who belong to the oldest continuous living culture on Earth, and are the Traditional Owners and Cultural Custodians, and Knowledge Holders of the Lands, Waters and Seas. We pay respects to Elders throughout the thousands of generations and thank them for their ongoing contribution, guidance and support.



Artwork by Bek Walters

The four focus areas are represented in the blue circles and the mountains represent the six principles. There are the stars above to represent both aspirations of the strategy but also the cycle of life — ancestors watching over us from the stars. The journey of life is represented by the journey lines and increments just under the stars. The thin lines that join the circles represent the complexities of this issue but that through combined

approaches outlined in the strategy there will be strength and a "safety net". The central piece is putting older people at the centre, surrounded by family and loved ones, then held by communities, professionals and support networks. The eucalyptus leaves represent health and wellbeing — socially, economically mentally, emotionally and physically.

Acknowledgments

We acknowledge the important contributions of those involved in developing this National Plan. This includes:

- People with lived and living experience of abuse and their advocates
- First Nations Peoples
- People with disability
- Culturally and linguistically diverse (CALD) communities
- Lesbian, gay, bisexual, transgender, intersex and asexual (LGBTQIA+) people¹
- Service providers
- Peak bodies
- Academics.

Help and support

For information and support please refer to Appendix 1. If you or someone close to you is in distress or immediate danger, please call 000.

¹ Many government and community plans and policies, as best practice for inclusive language, include the commonly used acronym 'LGBTQIA+'. This plan acknowledges that the meaning of 'queer', a term used by some people to describe a wide range of gender and sexual diversity, has changed over time, from being a slur to being reclaimed by some LGBTQIA+ people and rejected by others. For some people, especially older LGBTQIA+ people, 'queer' continues to hold negative meanings because of its origins. This plan also acknowledges older people with diverse gender identities and sexual orientations, with an aim to empowering them and affording particular consideration of their needs and histories.

Introduction

The abuse and mistreatment of older people (sometimes referred to as ‘elder abuse’) is a complex health, justice and social issue that can have devastating physical, mental, financial, social and emotional wellbeing consequences for older people, their families, and communities.

All Governments in Australia agree that we must do more to prevent and respond to the abuse and mistreatment of older people. This National Plan builds on the important foundations and progress made under the first *National Plan to Respond to the Abuse of Older Australians 2019–2023*.

This National Plan, and its underlying Action Plans, commit to:

- Giving a voice to the diverse needs and aspirations of older people, and advocating for their rights
- Providing national leadership and direction to governments, service providers and community organisations to elevate the issue of the abuse and mistreatment of older people and ageism, and working to end it
- Delivering improved governance, strong systems of accountability and robust evaluation mechanisms for the implementation of its commitments
- Addressing gaps and outstanding priorities from the first National Plan to Respond to the Abuse of Older Australians 2019–2023.

Our vision



All older people feel safe, valued and heard; have their rights protected and promoted; and live free from abuse and mistreatment

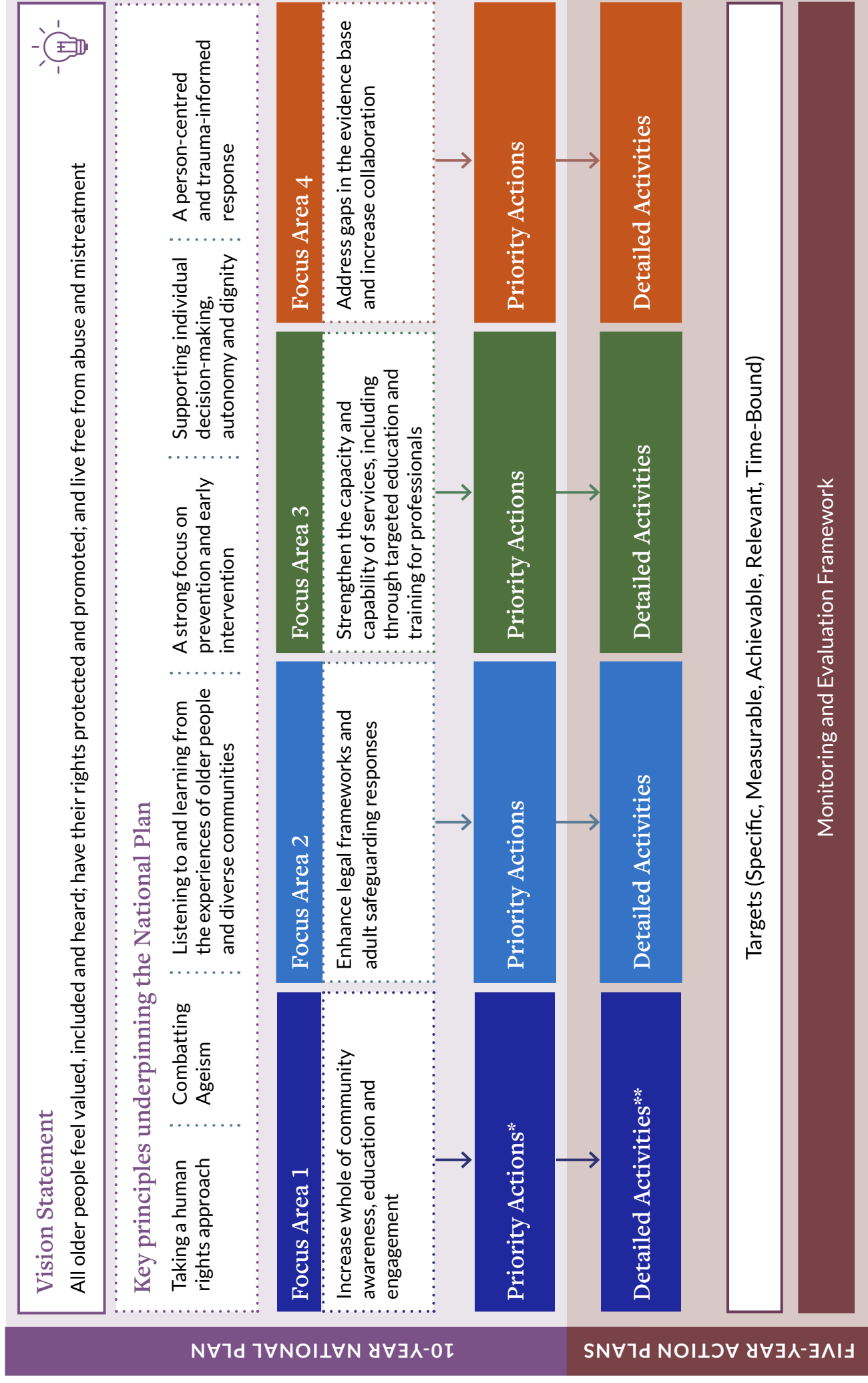
This Vision Statement defines the change that Commonwealth, State and Territory Governments wish to see over the life of this National Plan and beyond.

This aspirational vision is intended to inspire government, sector, business and broader community efforts to work towards lasting reform, and to provide a pathway for how success should look, feel and be measured.

Outline of National Plan structure

The graphic on the following page is included to assist readers to navigate this National Plan. It outlines the six key principles that underpin the plan as a whole, along with the four Focus Areas which will guide work over the life of the Plan. The Priority Actions in each Focus Area will inform the more detailed activities contained in the two, five-year Action Plans.

Outline of National Plan structure



*These are the high-level priorities which will guide action over the life of the plan

**These are the detailed activities under each Focus Area which will be captured in two, five-year Action Plans

What is the abuse and mistreatment of older people (elder abuse)?

The World Health Organization (WHO) defines elder abuse as: *a single or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person*².

Abuse and mistreatment can be deliberate or unintentional and may be underpinned by **coercive control**. It can involve physical or non-physical behaviours, and may be overt or subtle. It can occur in person or be facilitated through technology. It can be caused by people within or outside of family or intimate partner relationships. This National Plan recognises that the individual experience of abuse or mistreatment is diverse and may have been a feature of a person's life long before they reach older age.

While there is no universal, agreed definition of abuse and mistreatment of older people, the WHO definition is widely used and understood, and for this reason will be the primary definition used in this National Plan. We acknowledge that different definitions may be used in different contexts or locations.

We recognise that the WHO definition and the commonly recognised types of abuse outlined below do not include explicit reference to mistreatment. Mistreatment in this National Plan is not a separate concept to abuse but is intended to capture conduct that is more subtle, or not as readily identifiable in the community, as abuse. This approach is intended to ensure that the language used in this plan resonates with a broad audience and is not in any way intended to diminish the impact or severity of abuse, or the importance of accountability to provide safe care and supports.

This National Plan acknowledges that there are a range of other words that may be more appropriate to describe abuse and mistreatment in particular contexts, including violence, neglect, exploitation or harm. This National Plan captures actions to prevent and address abuse and mistreatment across this broad spectrum of conduct.



Coercive control is when someone uses patterns of abusive behaviour against another person in a way that creates fear and denies liberty and autonomy. Coercive control can involve a range of different abusive behaviours – both physical and non-physical or a combination of both – in order to exert power and dominance.

Coercive control, can be a defining feature of the abuse of older people, especially when a power advantage is exercised by a person in relation to the older person's care needs, to the detriment of the dependent older person. It can be hard to identify at times because the abuse and mistreatment can be subtle and targeted. People who use coercive control might convince others that what they are doing is a normal part of family relationships or caregiving.



² World Health Organization (WHO), *Toronto Declaration on the Global Prevention of Elder Abuse*, WHO, 2002

Types of abuse and mistreatment of older people

There are five commonly recognised forms of abuse and mistreatment of older people, which are outlined below. These descriptions span a broad range of conduct, encompassing criminal acts or omissions in the most severe forms, while also extending to conduct that is distressing and in clear violation of the rights of older people.

1 Physical

Acts, including physical violence, that inflict physical pain, injury or force (or the fear of any of those things), or the unlawful physical restraint of an older person. It can include, but is not limited to: hitting, pushing, kicking, locking an older person in a room or intentionally putting them in a position that they are physically unable to get out of, or the misuse of prescription medication or other drugs (sometimes referred to as chemical abuse).

2 Sexual

Any sexual behaviour inflicted on a person without their consent. It includes inappropriate sexual conduct as well as non-contact acts of a sexual nature. It can include, but is not limited to: non-consensual sexual contact, language or behaviour, enforced nudity, cleaning or treating an older person's genital area roughly or inappropriately, unwanted exposure to pornographic material or any behaviour that makes an older person feel uncomfortable about their body, gender identity or sexuality. It can also include experiences of sexual harassment or acts of sexual violence, such as sexual assault.

3 Psychological or emotional

Acts that cause emotional pain, injury, anguish and/or distress, or are demeaning to an individual. It can include, but is not limited to: insulting, threatening or coercing a person, acts of humiliation or disrespect, reputational damage, stalking, withholding affection to cause harm (such as unreasonably or unlawfully refusing access to family members, including '**grandparent alienation**'), and controlling behaviours like isolating a person from their normal social contacts, activities or supports (often referred to as **social abuse**).

Spotlight on emerging term

Grandparent alienation is an emerging term for a form of abuse or mistreatment that occurs when grandparents are unreasonably denied meaningful opportunities to have a relationship and spend time with their grandchildren. It can vary from not being included in a family event through to no contact with the grandchild at all over a protracted period of time and may manifest in different ways. For example, it can involve withholding or threatening to withhold contact with grandchildren unless the grandparents agree to provide financial or other support (such as care) in exchange.³

3 [Compass, Grandparent Alienation Tip Sheet, Compass, 2024.](#)

4 Financial

The improper use, or deliberate exploitation, of an older person's money, property or other resources. It can include, but is not limited to: theft, using finances fraudulently or without permission, using a legal document such as an enduring power of attorney for purposes outside that for which it was established, withholding care for financial gain, selling or transferring property against a person's wishes, pressuring an older person into a disadvantageous financial arrangement, or other coercive behaviours linked to 'inheritance impatience'.

5 Neglect

Neglect is the failure of a person to meet the needs of an older person where they have a responsibility to do so. It includes physical or emotional neglect, passive neglect or wilful deprivation and can be a single significant act or systemic issue. It can include, but is not limited to: denying access to medical attention or care, not providing adequate nutritious food or drink, unmet hygiene needs (like refusing to provide assistance with bathing), unmet physical needs (like withholding dentures or a walking frame), refusing to allow others to provide appropriate care and support, or abandonment of an older person with insufficient care or support.

Spotlight on emerging term

Inheritance impatience occurs when someone feels entitled to the assets or resources of an ageing person. This could cause the person to try to take the older person's assets, or to pressure or coerce them to transfer or share them. Examples include stealing money from a parent or grandparent's bank account, or pressuring someone to transfer an asset earlier than planned or expected.⁴



4 [Compass, 10 common forms of elder financial abuse](#), Compass, 2023.



i

During the life of this National Plan, governments, in partnership with the community, will consider **cultural or spiritual abuse** as an emerging and distinct form of abuse that could be added to the current list of five known abuse subtypes (physical, psychological or emotional, financial, sexual abuse and neglect). Consideration will be given to cultural or spiritual abuse including (but not limited to) abuse against First Nations Peoples, people of faith and people from culturally and linguistically diverse backgrounds (CALD).

While this issue requires further consultation and exploration, some examples that have been used to describe cultural and spiritual abuse include:⁵

- situations where a lack of access to services or poor service interventions require a person to move away from Country and their family or kinship structure to receive appropriate care or support

- where a person is unreasonably denied access to cultural or community gatherings, their sexuality or gender and activities that are culturally safe, responsive and supportive
- where a person is prevented from attending a place of worship or a religious or spiritual gathering or event
- abuse (particularly financial abuse) that can occur in the context of cultural obligations and responsibilities, such as grandparents sharing and maintaining family bonds
- ridiculing or making fun of someone's religious or spiritual beliefs to undermine their identity and sense of self or self-confidence
- using religion or religious texts/teachings to minimise, deny or justify acts of abuse and violence⁶
- using religious teachings to convince individuals to stay in abusive relationships, including refusing or threatening a religious divorce.

⁵ M Truong and N Ghafournia, *Child Family Community Australia information exchange (CFCA) paper: Understanding spiritual and religious abuse in the context of intimate partner violence*, Australian Institute of Family Studies (AIFS), Australian Government, 2024. Examples used in this section have also drawn on First Nations-led consultations that informed the development of this National Plan.




⁶ M Truong and N Ghafournia, *Child Family Community Australia information exchange (CFCA) paper: Understanding spiritual and religious abuse in the context of intimate partner violence*, Australian Institute of Family Studies (AIFS), Australian Government, 2024.

Relationships and settings in which the abuse of older people can occur

Older people can experience abuse and mistreatment within family and close personal relationships, and in service and institutional contexts where there is an expectation of trust or more formal duty of care.

As outlined below, these relationships can also represent important sources of help and support, although research to date indicates that only around one third of people (36%) who experience abuse or mistreatment seek help or advice from a third party.⁷

Table 1 Abuse and mistreatment of older people within different relationships of trust

 Family relationships	 Personal relationships outside of the family	 Service and institutional relationships
<ul style="list-style-type: none"> Research to date shows that family members (mostly adult children) are the biggest group of people who cause harm to older people. Family members are also a common source (41%) of help and support for people who experience abuse and mistreatment. 	<ul style="list-style-type: none"> Research to date shows that friends, neighbours and acquaintances (such as co-workers) reflect about one quarter of all people who cause harm. Friends are also a common source (41%) of help and support for people who experience abuse and mistreatment. 	<ul style="list-style-type: none"> Abuse and mistreatment can occur within service systems, institutions and within a range of professional relationships. This may include within paid care or support relationships, including disability, mental health and other support workers, within home or residential aged care settings, and within broader systems or institutions (such as government services or the justice sector). Research shows support services are also a common place for people who experience abuse or mistreatment to seek help, particularly professional carers (24%), police (17%) and lawyers (15%).

Figures cited are from the National Elder Abuse Prevalence Study: Final Report (July 2021)

⁷ L Qu, R Kaspiew, R Carson, D Roopani, J De Maio, J Harvey, B Horsfall, National Elder Abuse Prevalence Study: Final Report, Australian Institute of Family Studies (AIFS), Australian Government, 2021, p 83.

Links to other initiatives that achieve outcomes for older people

This National Plan takes a broad approach to combatting the abuse and mistreatment of older people wherever it occurs in society. In taking this approach, we recognise that there are many intersecting strategies, reforms and targeted programs being undertaken at all levels of government that will achieve complementary outcomes.

In particular, the *National Plan to End Violence against Women and Children 2022–2032* recognises that violence affects women at every life stage. It has an important role to play alongside this National Plan in working to achieve outcomes for older women experiencing family or domestic violence.

Similarly, we recognise the significant aged care reform work underway in response to the Royal Commission into Aged Care Quality and Safety (Aged Care Royal Commission) and key bodies of work under consideration in forming government responses to the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (Disability Royal Commission).

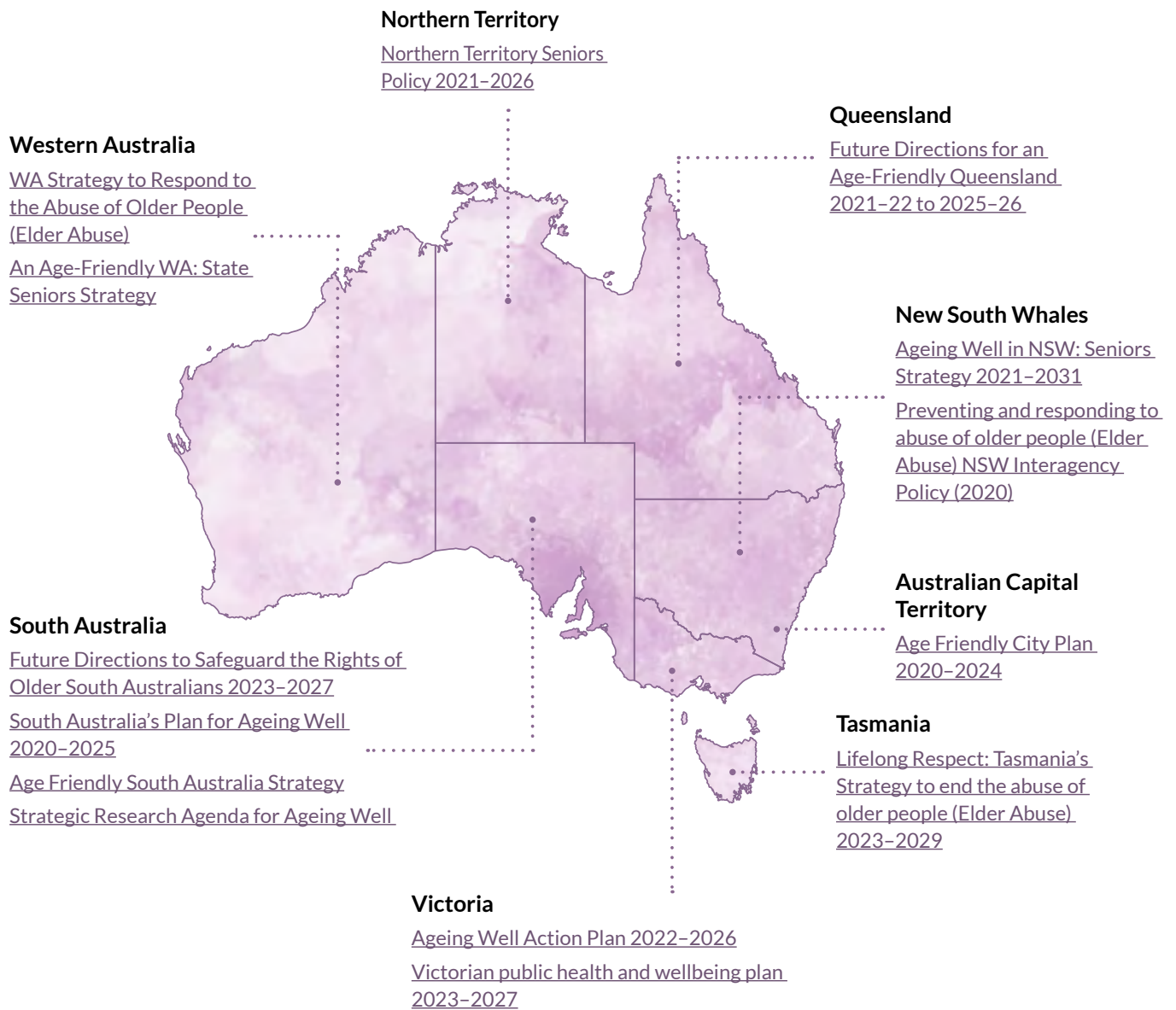
This National Plan plays a key role in linking together these intersecting efforts across governments, in order to strengthen coordination and to identify opportunities for deeper collaboration.

i This National Plan should be viewed in conjunction with other Commonwealth, State and Territory Government strategies and reform efforts that either directly or indirectly address the abuse and mistreatment of older people.

A non-exhaustive list of national plans and strategies that work to achieve outcomes relevant to this National Plan include:

- National Agreement on Closing the Gap (2020)
- National Plan to End Violence Against Women and Children (2022–2032)
- Working for Women: A Strategy for Gender Equality (2024–2034)
- Australia's Disability Strategy (2021–2031)
- NDIS Quality and Safeguarding Framework (2016)
- National Housing and Homelessness Plan (2024–2034)
- National Legal Assistance Partnership (2020–2025)
- National Preventive Health Strategy (2021–2030)
- National Women's Health Strategy (2020–2030)
- National Men's Health Strategy (2020–2030)
- Australian Government response to the final report of the Royal Commission into Aged Care Quality and Safety
- National Carer Strategy (under development)
- National Dementia Action Plan (under development)
- National Care and Support Economy Strategy (under development).

A non-exhaustive list of state and territory plans and strategies that work to achieve outcomes directly relevant to this National Plan include:



Key terminology

This section is designed to explain the intended meaning and approaches to key terms used throughout this National Plan. A full glossary is provided at Appendix 2.

Older person: This National Plan intentionally refers to 'older people' rather than 'older Australians', as a more inclusive term that recognises that the abuse and mistreatment of all older people in Australia is unacceptable, regardless of citizenship or visa status.

In Australia, an older person is typically defined as being aged 65 years or older, or 50 and older for First Nations Peoples. This is the definition that will be used for the purposes of this National Plan. We recognise that the experience of ageing is different for everyone and that the ageing experience will be influenced by a wide range of factors.

Elder abuse: This National Plan primarily refers to the abuse and mistreatment of older people, rather than 'elder abuse'. This is because in First Nations Peoples' culture, and other cultures, the term 'Elder' refers to someone who is highly respected, has gained recognition within their community as a custodian of cultural knowledge and lore, and someone who uses their cultural authority to determine the sharing and disclosure of that knowledge. The definition and characteristics of an Elder differ between First Nations communities. This National Plan responds to the abuse of older people as defined purely by age. We also understand that the term elder abuse does not resonate or translate well more broadly, including in many CALD communities.

We acknowledge that the term 'elder abuse' remains a commonly used short hand term for referring to the abuse and mistreatment of an older person, and is used in the title of many specialist services and organisations. This National Plan encourages the community, organisations and governments to collectively reduce use of the term 'elder abuse' where appropriate, to minimise the risk of any misunderstanding around the focus of this work.

Person causing harm: This National Plan refers to a perpetrator of abuse and mistreatment as a 'person causing harm'. This approach recognises that abuse and mistreatment can be deliberate, calculated or opportunistic but it can also be unintentional. Abuse and mistreatment can also arise from systems where bias may give rise to harm or injury.

It also recognises the complex nature of the abuse and mistreatment of older people, where people causing harm are often immediate family or other close relationships, and that people who cause harm can also have lived or living experience of abuse. The term 'perpetrator' can be unhelpful for recognising abuse and mistreatment, preserving relationships (where this is desired and safe) and can contribute to feelings of shame or stigma that can be a barrier to seeking support.

Focusing on the impact of abuse and mistreatment helps to capture the common aspect of these actions – that is, harm to the older person. This is expected to assist people to identify abuse or mistreatment in any circumstance it may occur, without creating assumptions around a person's intention. This approach is in no way intended to minimise the seriousness of the harm caused or the responsibility of the person causing harm

Professionals in relevant

occupations: This term is used to describe people who work in occupations that regularly interact with older people and who are therefore well placed to identify and respond to ageism, abuse and mistreatment.

A non-exhaustive list of these professionals includes: primary health workers, retail, police and other first responders, disability and aged care providers, community centres, lawyers and Justices of the Peace, hairdressers, multicultural and First Nations community-controlled organisations, people who work in banking or financial roles, people who work in community visitor scheme roles and people who work in family and domestic violence services.

First Nations Peoples: Refers to the first people of these lands, waters, skies and seas and respectfully includes both Aboriginal and Torres Strait Islander peoples. This National Plan identifies First Nations Peoples as a priority group and recognises the importance of First Nations-led approaches in preventing and responding to the abuse and mistreatment of older First Nations people. [refer to 'First Nations Peoples' section for more information].

Priority Groups: This National Plan acknowledges the diverse experiences and characteristics of older individuals and is committed to ending abuse and mistreatment of all older people. We also recognise that particular people or groups can experience abuse and mistreatment differently, and at different rates, based on their experiences of discrimination, disadvantage and stereotyping that intersects with ageism. These people or groups may face unique and more complex barriers in seeking and receiving help and supports. Our efforts under this National Plan are informed by, and responsive to, these diverse communities. This National Plan seeks to harness their strengths and enhance the protections that being part of a connected community can provide.

This National Plan acknowledges the unique needs and experiences of the following groups of older people, which it collectively refers to as '**Priority Groups**' including (but not limited to):

- First Nations Peoples (as referenced above)
- People with lived and living experience of abuse and mistreatment
- Culturally and linguistically diverse (CALD) people, including migrants and refugees
- LGBTQIA+ people
- Women
- People with disability, recognising the social model of disability and the diversity of experiences within the disability community
- People who experience mental ill health
- People with chronic health conditions
- Veterans and war widows(ers)
- People who live in remote or rural areas
- People who are financially or socially disadvantaged, including people who are homeless or at risk of homelessness
- People who are socially isolated
- People with low literacy (including low digital literacy or engagement).



What we know

The abuse and mistreatment of older people is prevalent in Australia

The National Elder Abuse Prevalence Study,⁸ released in 2021, found that one in six (14.8%) people aged 65 years or older experienced abuse in a 12-month period. It is important to note that the study did not capture people living with **cognitive impairment** or in residential aged care homes.

Cognitive impairment is established as having a strong association with older people being susceptible to abuse.⁹ This National Plan commits to more research in this area to better understand prevalence and risk factors, and to identify effective intervention strategies (see Focus Area 4).



Older people with disability or long-term medical conditions



were twice as likely as others without such health problems to report experiencing any form of abuse (20.6% compared with 9.8%).¹⁰

Psychological abuse had the highest prevalence (11.7%), followed by:



- neglect (2.9%),
- financial abuse (2.1%),
- physical abuse (1.8%) and
- sexual abuse (1.0%).

Some older people (3.5%) experienced more than one type of abuse.

Almost two thirds of older people **did not report seeking help from a third party** in response to the abuse (61.5%).



However, **eight in 10**

did take some action to stop the abuse, most commonly speaking directly with the perpetrator (53%). Another common action was breaking contact with or avoiding the perpetrator (42%).

8 Between February and May 2020 the Australian Institute of Family Studies (AIFS) conducted Australia's first National Elder Abuse Prevalence Study. The study surveyed a nationally representative sample of 7,000 older Australians living in the community, to identify prevalence of one or more forms of abuse in the previous 12 months

9 R Kaspiew, R Carson, H Rhoades, *Elder abuse: Understanding issues, frameworks and responses* Re-issue Nov 2018, Australian Institute for Family Studies (AIFS), Australian Government, 2018, p 8.

10 L Qu, R Kaspiew, R Carson, D Roopani, J De Maio, J Harvey, B Horsfall, *National Elder Abuse Prevalence Study: Final Report*, Australian Institute of Family Studies (AIFS), Australian Government, 2021, p 62.

Older women living in the community **were more likely** overall than older men to experience abuse (15.9% compared with 13.6%).



People who cause harm are often close to the older person. The study found that



the predominant relationship dynamic was intergenerational and familial, with children (18%), intimate partners (10%), partners of children (7%) and grandchildren (4%) together accounting for a significant proportion of all people who cause harm. This dynamic was particularly evident for financial abuse, with sons representing 24% and daughters 12% of people who cause harm.

Men are more likely to commit abuse



than women (55% compared with 45%), with widening disparity between men and women as those undertaking financial (65% compared with 35%), physical (77% compared with 24%) and sexual (79% compared with 21%) abuse.

The prevalence of abuse and mistreatment among older people living in **outer regional, rural and remote areas** **was higher** at 18.3%, compared to 13.1% in major city areas.



The Aged Care Serious Incident Response Scheme¹¹ received an average of

12,365

reportable incidents **each quarter** in the 2022–23 financial year, for residential aged care.

A survey of aged care facility residents was conducted for the Aged Care Royal Commission.¹² It estimated the **prevalence of abuse** in residential aged care to be **39.2%**, when counting all participants who reported **experiencing emotional abuse, physical abuse and/or neglect**.



The Aged Care Royal Commission found that the number of alleged incidents of unlawful sexual contact in 2018–19 was estimated to be as high as

2,520.¹³

- 11 The [Serious Incident Response Scheme \(SIRS\)](#) aims to reduce abuse and neglect for people receiving aged care. It commenced in residential aged care on 1 April 2021 and was extended to home and community aged care on 1 December 2022. There are eight types of reportable incidents that the provider must report to the Aged Care Quality and Safety Commission. The number of reportable incident notifications does not necessarily correlate to the number of instances of harm to an older person in aged care. Notifications might include multiple notifications of the same matter, allegations of incidents and situations where incidents occurred but injury was avoided. Providers must also report incidents where another care recipient who is the subject of allegation has a cognitive impairment.
- 12 The Aged Care Quality and Safety Commission publishes [Serious Incident Response Scheme \(SIRS\)](#) data in its [quarterly sector performance reports](#) and as part of its [SIRS insights reports](#). The survey included 391 residents or, where necessary, the resident's representative as a proxy, who were drawn randomly from a sample of 67 Australian residential aged care facilities. The results were published in the Royal Commission into Aged Care Quality and Safety research paper [Experimental Estimates of the Prevalence of Elder Abuse in Australian Aged Care Facilities](#) 17 December 2020), p 7.
- 13 Royal Commission into Aged Care Quality and Safety, [Final Report: Summary](#), Australian Government, 2021, p 140.

Ageism is a driver of abuse

Ageism, like any other form of prejudice and discrimination, profoundly impacts people's physical, mental and cognitive health and wellbeing, and social inclusion. It can drive the abuse and mistreatment of older people by creating an environment where older people are not valued by the community as equal members and services are not designed in a way that is accessible for older people, which can cause older people to experience isolation or a loss of agency. In some cases, this can lead to older people being more susceptible to abuse and exploitation.¹⁴

Ageism can also contribute to an environment where a person causing harm to an older person fails to recognise that their behaviour constitutes abuse and mistreatment, other members of society fail to notice these negative behaviours or act to stop them and older people experiencing abuse and mistreatment blame themselves or feel too ashamed to seek assistance.

This National Plan acknowledges that there are many other drivers of abuse and mistreatment of older people, including gender inequality and other forms of discrimination. Better understanding these drivers, and how they interact with ageism in the context of the abuse and mistreatment of older people, will be a key focus of the Prevention Strategy being developed under this National Plan (refer to [Focus Area 4](#)).

The abuse of older people is a gendered issue

This National Plan recognises that all forms of abuse and mistreatment have a significant impact on the wellbeing and safety of women, no matter their age. The National Elder Abuse Prevalence Study found that older women are more likely than older men to experience abuse and mistreatment, and men are more likely than women to cause harm to an older person.

An older person's gender identity and sexual orientation will influence their experience of violence, their familial relationships, their help-seeking behaviours and the services available to them.

In particular, the compounding impact of a lifetime of structural inequality on older women, including financial inequality and the impact of unpaid care work during their lifetime, continue into later years and can have a profound impact on how older women experience abuse. Older women are:

- more likely to live in poverty in older age than men and are one of the fastest growing cohorts of people experiencing or at risk of homelessness¹⁵
- retiring with 23% less superannuation than men due to inequitable labour markets and household dynamics.¹⁶



14 L Qu, R Kaspiew, R Carson, D Roopani, J De Maio, J Harvey, B Horsfall, National Elder Abuse Prevalence Study: Final Report, Australian Institute of Family Studies (AIFS), Australian Government, 2021, p 172; E Chang, S Kanno, S Levy, S Wang, J Lee, B Levy, *Global reach of ageism on older persons' health: A systematic review* | PLOS ONE; The Benevolent Society, *The Drivers of Ageism: Foundational research to inform a national advocacy campaign tackling ageism and its impacts in Australia*, The Benevolent Society, 2017.

15 E Dawson, *A Home of One's Own: Philanthropic & social sector solutions for women's housing*, 2022, p 16.

16 At age 60–64 men have \$181,000 in superannuation while women have \$140,000, Australian Tax Office (ATO) *Taxation Statistics 2019–20: Individual Statistics*, ATO, Australian Government, 2022.

The *Working for Women: A Strategy for Gender Equality*, published by the Australian Government in March 2024, is guiding whole-of-community action over the next ten years to make Australia a more gender-equal society and address the structural barriers that place older women at higher risk of experiencing abuse. It will complement the actions of this National Plan and others, including the *National Plan to End Violence against Women and Children 2022–2032*, and be an important mechanism to elevate and prioritise actions that will achieve gender equality.

This National Plan acknowledges that further research is needed to improve our understanding of the interrelationships between gender and the abuse and mistreatment of older people. The importance of engaging with older First Nations women is highlighted in sources including the Wiyi Yani U Thangani Report, as an important avenue for the re-learning of law and knowledge in communities across Australia.¹⁷

Risk and protective factors

We know the dynamics causing abuse and mistreatment are complex and that a range of factors contribute to the prevalence of the different abuse subtypes. As outlined above, abuse occurs in both individual and family relationships, and at an institutional or system level. For example, where legal, health, social security, immigration or other systems can be abused or exploited to control or harm an older person.¹⁸

While progress was made under the first National Plan to improve our understanding of risk factors, we know more research is needed to understand the complex dynamics

contributing to abuse and mistreatment. This includes better understanding ageism as a driver of abuse and mistreatment, the impact of intersecting forms of discrimination and the social barriers that can create and perpetuate risk factors (Refer to [Focus Area 4](#) to understand how our research program will seek to address some of the known knowledge gaps in this area).

While there are important considerations we need to better understand and explore, we know that some older people are more at risk of abuse and mistreatment because of their exposure to certain risk factors. These risk factors may include poor physical health, social and emotional wellbeing (including mental health) issues, gender (women are more likely than men to experience abuse or mistreatment), living with a disability (including dementia or cognitive impairment), family conflict and low social support.¹⁹

Conversely, there are factors that can reduce the likelihood an older individual will experience harm – these are known as protective factors. Protective factors show us important areas where we can target our efforts and increase our focus on preventing abuse, including by combatting ageism, fostering inclusive, connected and age-friendly communities, increasing community understanding around upholding the rights of older people and planning ahead for later life.

We also understand that a range of factors may play a role in someone's decision to harm an older person. While most people with these factors in their lives will not abuse or mistreat an older person, and while their presence is not an excuse to commit harm, they show us opportunities for intervention. Factors associated with people who cause harm may include alcohol or other drug misuse, financial difficulties, caregiver stress and poor physical or mental health.²⁰

¹⁷ [Australian Human Rights Commission \(AHRC\), Wiyi Yani U Thangani Report](#), AHRC, Australian Government, 2020.

¹⁸ [Australia's National Research Organisation for Women's Safety \(ANROWS\), Accurately identifying the "person most in need of protection" in domestic and family violence law](#), ANROWS, 2020; National Domestic and Family Violence Bench Book, Systems abuse, Australian Institute of Judicial Administration (AIJA).

¹⁹ [L Qu, R Kaspiw, R Carson, D Roopani, J De Maio, J Harvey, B Horsfall, National Elder Abuse Prevalence Study: Final Report](#), Australian Institute of Family Studies (AIFS), Australian Government, 2021; [B Dow, B Brijnath, National Ageing Research Institute, Elder abuse: context, concepts and challenges](#), Australian Institute of Health and Welfare, Australian Government, 2019; [M Joosten, P Gartoulla, P Feldman, B Brijnath, B Dow, Seven years of elder abuse data in Victoria](#), National Ageing Research Institute, 2020

²⁰ [L Qu, R Kaspiw, R Carson, D Roopani, J De Maio, J Harvey, B Horsfall, National Elder Abuse Prevalence Study: Final Report](#), Australian Institute of Family Studies (AIFS), Australian Government, 2021; [B Dow, B Brijnath, National Ageing Research Institute, Elder abuse: context, concepts and challenges](#), Australian Institute of Health and Welfare, Australian Government, 2019; [M Joosten, P Gartoulla, P Feldman, B Brijnath, B Dow, Seven years of elder abuse data in Victoria](#), National Ageing Research Institute, 2020

First Nations Peoples

Through our early consultations on the development of this National Plan and a range of other projects, we have heard from older First Nations people that:

- the experience of abuse and mistreatment among older First Nations people can be different, and experienced at different rates, to that of the broader Australian community
- older First Nations people can face unique and often more complex barriers in seeking and receiving supports.

We understand there are several factors that contribute to these experiences, many of which can be linked to discrimination, racism and entrenched social disadvantage shaped by the historical and ongoing impacts of colonisation. Some of these factors are outlined under the headings in this section.²¹

While the scope of this National Plan focuses on negative subject matter, Australian governments wish to affirm that First Nations Elders and older First Nations people are recognised as knowledge holders and the hearts of communities. As custodians of traditions and values, older First Nations people strengthen and ensure the solid future of communities by sustaining rich culture, learning of language and understanding of law, from generation to generation.

We recognise that maintaining cultural identity and the practice of cultural values, including through connection to Country and family, can be a source of strength and pride. These practices can also be conducive to the process of healing from past traumas.²² Leveraging the intrinsic strengths of Elders and their critical role in communities will inform culturally appropriate responses to the challenges highlighted in this National Plan.

Cultural obligations and abuse

There is an emerging theme of cultural or spiritual abuse as a form of abuse facing older First Nations people (refer to section on '[Types of abuse and mistreatment of older people](#)').

In a First Nations context, cultural abuse can occur where service system interventions require a person to move away from Country to receive, for example, healthcare, or where a person is denied access to culture and connection to their family and community. It can also be linked to cultural obligations around sharing and maintaining family bonds, which can increase the risk of financial abuse or **humbugging**.



Humbugging is a term used to describe when someone demands money that belongs to someone else with no intention of repaying it. It is used to describe demands that are repeated, often with a threat or actual physical, emotional or psychological abuse if the person refuses. Sometimes the term is used to describe outright theft, for example when somebody uses another person's bank card or Centrepay arrangements without their permission.²³

While financial abuse occurs among the general population, it can be amplified in First Nations communities due to this sharing culture.²⁴

These pressures can be felt particularly acutely when an older person receives a sum of money from sources such as Stolen Generation reparations, stolen wages reparations, payments to Traditional Owners under Native Title arrangements, or earnings from undertaking cultural practices.

21 The contents of this section have been informed by a range of inputs, including a First Nations-led consultation process that occurred between September and October 2024 to inform the development of this National Plan. An expert consultant, herself a First Nations woman, has also provided input and review, and we thank her for her significant contributions.

22 A Yashadhana, T Fields, E Liu, N Serova, M O'Leary, G Kenning, V Kuchelmeister, J Lockhart, E de Leeuw, *Therapeutic aspects of Connection to Country and cultural landscapes among Aboriginal peoples from the Stolen Generations living in urban NSW*, Australia, Public Health Research and Practice, 2023.

23 Kimberley Community Legal Services (KCLS), Kimberley Jiyigas (Birds), *No More Humbug final report*, KCLS, Birds, 2020.

24 K Roe, E O'Hara, *Research into the mistreatment of older Aboriginal Australians*, Government of Western Australia, 2022.

Social and economic disadvantage

Many older First Nations Peoples experience a poor economic and social living situation shaped by historical and ongoing trauma associated with the Stolen Generations, dispossession of land and culture and discrimination.²⁵

Financial abuse can be driven by poverty, disconnection from culture, social and emotional wellbeing (including mental health) issues, and barriers to accessing health services, employment and educational opportunities.²⁶

Kinship care is embedded in First Nations Peoples' cultures but informal care arrangements with older First Nations people providing support for young people can lead to financial strain, social isolation, abuse and overcrowded housing.

Housing shortages and associated accommodation sharing in many First Nations communities can lead to unsafe communal living, overcrowded housing and homelessness.²⁷

Health and disability

First Nations Peoples experience higher rates of dementia, homelessness and disability.²⁸

The National Aboriginal and Torres Strait Islander Health Study found that First Nations Peoples are more likely to report experiencing being a victim of physical or threatened physical harm if they were someone with a disability or long-term health condition (20% compared with 12% for someone with no disability).²⁹

Remoteness and isolation

Approximately 15.4% of First Nations people live in remote (58,700 people or 6.0%) and very remote (92,100 people or 9.4%) Australia.³⁰

Resourcing and staffing challenges, which can be particularly acute in remote communities, and the high cost of services can make it difficult for communities to provide essential services and adequate supports.

25 B Dow, B Brijnath, National Ageing Research Institute, *Elder abuse: context, concepts and challenges*, Australian Institute of Health and Welfare, Australian Government, 2019, pp 143–159.

26 Kimberley Community Legal Services (KCLS), Kimberley Jiyigas (Birds), *No More Humbug final report*, KCLS, Birds, 2020.

27 K Roe, E O'Hara, *Research into the mistreatment of older Aboriginal Australians*, Government of Western Australia, 2022.

28 First Peoples Disability Network (FPDN Home – Network for Australia's Aboriginal and Torres Strait Islanders with disabilities); K Roe, E O'Hara, *Research into the mistreatment of older Aboriginal Australians*, Government of Western Australia, 2022.

29 Aboriginal and Torres Strait Islander Health Performance Framework, *Determinants of health – 2.10, Community Safety*, Australian Institute of Health and Welfare, National Indigenous Australians Agency, Australian Government, 2023.

30 Australian Bureau of Statistics (ABS), *Estimates of Aboriginal and Torres Strait Islander Australians*, 30 June 2021, ABS, Australian Government, 2021.

Barriers to seeking and receiving help

While many older people face barriers to seeking and receiving help and support, older First Nations people can face particular challenges. These include:³¹

- lack of access to services due to remoteness, transport challenges and digital illiteracy
- lack of trust and confidence in services, especially those offered by non-First Nations providers
- eligibility age to access the Age Pension or superannuation not aligning with the reduced life expectancy for First Nations people, which is a barrier to living a longer and better quality of life
- the role of shame – for example, family business can be considered private, meaning that older First Nations people may not seek help beyond their family for fear of bringing shame or other negative repercussions, or intervene in another family's business even if they are aware that an older person is being mistreated or abused.

Proposed solutions and guiding principles

Our efforts to end the abuse and mistreatment of all older people requires us to be informed by, and responsive to, these experiences. A range of solutions already heard from First Nations Peoples in the development of this plan, and through other research, will be tested through further consultation and reflected in the final version of this National Plan.

Consistent with our commitments under the National Agreement on Closing the Gap,³² in implementing this National Plan we recognise that:

- self-determination is an overarching principle of the National Agreement Closing the Gap Agreement
- older First Nations people need to have much greater input into how programs and services are designed and delivered to themselves, their families and communities. This includes a need to invest in stronger partnerships with First Nations Peoples, with adequate time and funding
- Aboriginal Community Controlled Organisations provide the best available culturally safe and responsive services for older First Nations people to deliver on outcomes
- funded mainstream institutions targeting the abuse and mistreatment of older people must ensure responses are culturally safe and responsive to meet the needs of First Nations Peoples
- there is a need to resource First Nations communities to design and deliver local solutions, enabled through access to the same data and information as governments
- there is a need for improved data collection about older First Nations people that identifies intersectional factors, including place-based and demographic groups (for example First Nations women, First Nations people with a disability and LGBTQIA+ First Nations people)
- In line with these principles, we will work in collaboration and partnership with older First Nations people and communities to further develop and inform priority actions relevant to this National Plan.

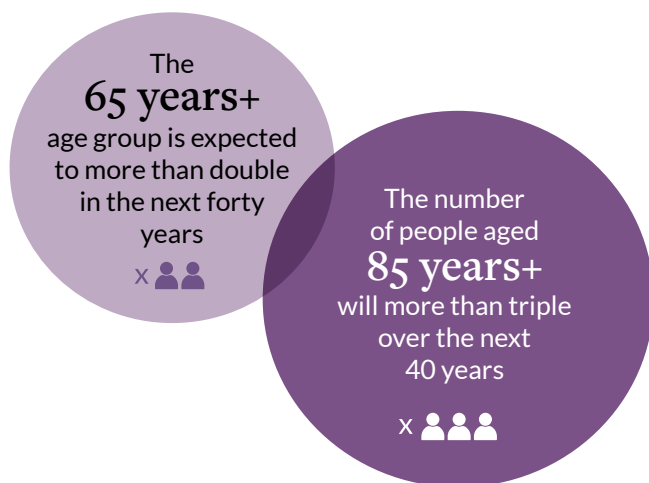
³¹ *K Roe, E O'Hara, Research into the mistreatment of older Aboriginal Australians*, Government of Western Australia, 2022; *Kimberley Community Legal Services (KCLS), Kimberley Jiyigas (Birds), No More Humbug final report*, KCLS, Birds, 2020.

³² All Australian governments, *National Agreement on Closing the Gap*, Australian governments, 2020.



Broader social context of this plan

Ageing population demographics



At 30 June 2020, there were an estimated **4.2 million** older people in Australia, meaning older people comprised 16% of the total population.³³

By 2066, it is projected that older people in Australia will make up between 21% and 23% of the total population.³⁴

The increasingly older age profile of the Australian population makes it particularly important to prevent and respond to the abuse of older people effectively, and to create a more inclusive and age-friendly society.

People of all ages bring value to our community. An ageing population can drive positive change across society, for example through social connections (including intergenerational relationships where time, wisdom, experience and skills can be shared), through work and business (including volunteer work), and by providing care (which in many cases can support others to work more or to have a better work–life balance).

Aged Care

Around 407,000 people were accessing aged care services as of 30 June 2022 and an additional 818,000 were assisted under the Commonwealth Home Support Programme in 2021–22. With an ageing population it is estimated that the combined number of people expected to express demand for residential care places or for in-home aged care will increase to over 2.3 million by 2042.³⁵

Recipients of the Commonwealth Home Support Programme have increased over the past 5 years. As at 30 June 2022, there were 215,743 recipients with a package, up from 176,105 at 30 June 2021. This number has more than doubled since 30 June 2019.³⁶ However, this increase is also attributed to clients transitioning to the Commonwealth Home Support Programme from the previous Home and Community Care program administered by states and territories.

i

The Commonwealth Home Support Programme provides older people with

entry-level support services to live independently and safely at home. Eligibility is based upon a person's support needs and age, with the goal to maintain the person's independence.

The Home Care Packages Program supports older people with complex care needs to live independently in their own homes. There are four levels of Home Care Packages, ranging from basic to high care needs. Approved providers work with care recipients to plan, organise and deliver Home Care Packages.

Note: The Home Care Packages Program and the Commonwealth Home Support Programme will merge into the 'Support at Home Program' from 1 July 2025 and no earlier than 1 July 2027 respectively. This will be captured as part of the new Aged Care Act.

³³ (ABS 2020b).

³⁴ (ABS 2018).

³⁵ Department of Health and Aged Care (DHAC), *Financial Report on the Australian Aged Care Sector 2021–22*, DHAC, Australian Government, 2023.

³⁶ Department of Health and Aged Care (DHAC), *Financial Report on the Australian Aged Care Sector 2021–22*, DHAC, Australian Government, 2023, 1.1 Recipients, p 24.

Significant wealth transfers are expected

Older people are projected to hold a growing share of total private wealth in Australia.

Over the next two decades, it is estimated that people aged **60 and over** will spend or transfer

\$3.5 trillion,

in wealth to younger generations,³⁷ or an average of about \$175 billion per year.

Pressures that may arise from this wealth transfer include demand for early inheritance or financial support. It may create an environment in which people are more likely to feel greater entitlement and cause harm through financial abuse, misuse of enduring power of attorney agreements, or patterns of abusive behaviour amounting to coercive control..



Statistics on gender, ethnicity, language, place, disability, dementia and assistance



In 2016,

1 in 17

(5.9%) people **who reported a diverse sex and/or gender identity** were aged 65 and over.³⁸



As heard in evidence at the Aged Care Royal Commission, it is acknowledged that many older LGBTQIA+ people have lived through a time of intense discrimination and stigmatisation, and that a lack of data collection in this area can contribute to a cycle of invisibility.³⁹

1.2 million

older Australians were born overseas, representing over one-third (37%) of all people aged 65 and over.⁴⁰



One in five (20%) older Australians were born in non-English speaking countries, and 18% speak a language other than English at home.⁴¹

66%

of older people live in major cities,

nearly **one in four** in inner regional areas (23%) and

11% in outer regional, remote and very remote areas.⁴²



³⁷ *No More Practice Education – Wealth Transfer Report*, McCrindle, 2017.

³⁸ Australian Institute of Health and Welfare (AIHW), *Older Australians web report: Older Australians who identify as lesbian, gay, bisexual, transgender or intersex*, AIHW, Australian Government, 2023.

³⁹ Royal Commission into Aged Care Quality and Safety, *Final Report: Care, Dignity and Respect – Volume 4B*, Royal Commission into Aged Care Quality and Safety, Australian Government, 2021, p 475.

⁴⁰ Australian Institute of Health and Welfare (AIHW), *Culturally and linguistically diverse older people*, AIHW, Australian Government, 2023.

⁴¹ Australian Institute of Health and Welfare (AIHW), *Culturally and linguistically diverse older people*, AIHW, Australian Government, 2023.

⁴² Australian Institute of Health and Welfare (AIHW), *Older Australians living in rural and remote communities*, AIHW, Australian Government, 2023.

The prevalence of disability and severe or profound disability increase with age. As at 2018, approximately



36.3% of Australians aged between 65–69

live with some form of disability, ranging from a mild limitation to a profound or severe limitation.⁴³ Among those older Australians aged 65 or older who live with a disability:

8.1% have a profound or severe limitation

28.3% have a mild or moderate limitation

Approximately

78% of Australians

aged 85 and over live with some form of disability, ranging from a mild limitation to a profound or severe limitation. Among those Australians aged 85 or older who live with a disability:

50.0% have a profound or severe limitation

28% have a mild or moderate limitation⁴⁴

Of those aged 65 years and over with a severe/profound disability,

35.6% have issues with ‘sensory and speech’;

81.6% have an ‘intellectual’ disability;

44% have a physical disability; and

80.2% have a psychosocial disability.⁴⁵

In 2022, it was estimated that there were

401,300
Australians



of all ages living with dementia.

This is equivalent to 15 people with dementia per 1,000 Australians, which increases to 84 people with dementia per 1,000 Australians aged 65 and over.⁴⁶

With an ageing and growing population, it is predicted that the number of Australians with dementia will more than double by 2058 to 849,300 people (533,800 women and 315,500 men).⁴⁷

Two in three people with dementia are thought to be living at home in the community, as opposed to living in care accommodation on a permanent or respite basis.⁴⁸

In 2021–22 47% of people with dementia in residential aged care had severe cognitive impairment.⁴⁹

1.3 million

older Australians living at home need some assistance with everyday activities. Of these almost two thirds (65.9%) have their needs fully met.⁵⁰



An estimated **647,300** (17%) people aged 65 and over provided informal care and assistance within their household.⁵¹

⁴³ **Disability** is defined in data in the [Australian Institute of Health and Welfare \(AIHW\) People with disability in Australia 2024 web report](#), AIHW, Australian Government, 2024, as any limitation, restriction or impairment which restricts everyday activities and has lasted, or is likely to last, for at least six months. **Profound or severe limitation** is defined as always or sometimes needing assistance or supervision with self-care, mobility and/or communication. **Moderate limitation** is defined as needing no help but having difficulty. **Mild limitation** is defined as needing no help and having no difficulty but using aids or having limitations.

⁴⁴ [Australian Institute of Health and Welfare \(AIHW\) People with disability in Australia 2024 web report](#), AIHW, Australian Government, 2024

⁴⁵ [Australian Institute of Health and Welfare \(AIHW\), People with disability in Australia: Prevalence of disability](#), AIHW, Australian Government, 2024.

⁴⁶ [Australian Institute of Health and Welfare \(AIHW\), Dementia in Australia web report: Summary](#), AIHW, Australian Government, 2024.

⁴⁷ [Australian Institute of Health and Welfare \(AIHW\), Dementia in Australia web report: Summary](#), AIHW, Australian Government, 2024.

⁴⁸ [Australian Institute of Health and Welfare \(AIHW\), Dementia in Australia web report: Summary](#), AIHW, Australian Government, 2024.

⁴⁹ [Australian Institute of Health and Welfare \(AIHW\), Dementia in Australia web report: Summary](#), AIHW, Australian Government, 2024.

⁵⁰ [Australian Bureau of Statistics \(ABS\), Disability, Ageing and Carers, Australia: Summary of Findings 2018](#), ABS, Australian Government, 2019.

⁵¹ [Australian Institute of Health and Welfare \(AIHW\), Older Australians web report: Older Australians living in rural and remote communities](#), AIHW, Australian Government, 2023.

Impact of the National Plan to Respond to the Abuse of Older Australians (2019–2023)

The first National Plan implemented a range of initiatives and has provided a solid foundation for this successor National Plan.

The independent evaluation of the first National Plan indicates that we have improved our understanding of abuse and effective

responses but that further work is needed, including a focus on the needs of First Nations Peoples and other Priority Groups, and on prevention efforts to end abuse and mistreatment. [Link to evaluation once published].

Implementation and governance

Implementation

This National Plan will be implemented through two, five-year Action Plans. The Action Plans will detail specific Commonwealth, state and territory government activities and commitments to implement objectives across each of the focus areas. The two Action Plans will span these periods:

- First Action Plan: 2024–25 (TBC) to 2028–29.
- Second Action Plan: 2029–30 to 2033–34.

Governance

The Standing Council of Attorneys-General (SCAG) is the relevant ministerial council that oversees this National Plan. SCAG comprises Attorneys-General from the Australian Government, all states and territories and the New Zealand Minister for Justice.

SCAG will oversee the implementation of this National Plan through the Implementation Executive Group (IEG). The IEG is an oversight group of senior officials from the Commonwealth Government and state and territory governments, working across a range of agencies that have responsibility for addressing the abuse and mistreatment of older people. The IEG will drive, monitor and be accountable for the implementation of activities under the second National Plan and subsequent Action Plans.

Accountability

As the body responsible for this National Plan, SCAG will be accountable for reporting publicly on the progress of initiatives under the plan. Reporting will be linked to the Action Plans, with a mid and final report for each to be published (four in total across the 10-year plan). This will ensure transparency and accountability for implementation of this plan and provide valuable insights into the effectiveness of the initiatives being undertaken.

Monitoring and evaluation

This National Plan contains an ambitious and long-term vision that demonstrates the change we want to see.

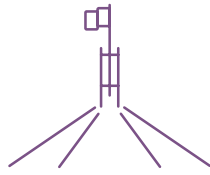
Limited data sets made it difficult to quantify the impact of the first National Plan on reducing the prevalence or severity of abuse and mistreatment of older people. While the Prevalence Study and other initiatives have since provided us with an improved evidence base, we know there is more we need to do to be able to meaningfully measure change and the impact of our initiatives.

To effectively monitor our progress towards achieving the vision of this National Plan, we will undertake a staged approach to develop and implement a fit-for-purpose Monitoring and Evaluation (M&E) framework. The framework will identify Specific, Measurable, Achievable, Relevant and Time-bound (SMART) targets and goals for this National Plan.

Everyone's business

Ending the abuse and mistreatment of older people is everybody's business.

Role of the Australian Government



The Australian Government has a national leadership role in combatting ageism and ending the abuse and mistreatment of older people. This includes promoting a whole-of-government approach that engages policy areas including health and aged care, law and justice, social services, housing and homelessness, and disability and carers. It also involves driving a collaborative and coordinated approach to implementing this National Plan, recognising that many initiatives will be implemented by state and territory governments and appropriately adapted to local settings.

The Australian Government has responsibilities connected with the following key issues that relate to preventing and addressing the abuse and mistreatment of older people:

- upholding the rights of older people and combatting ageism, and encouraging community engagement in preventing and responding to the abuse and mistreatment of older people
- Commonwealth anti-discrimination policy and legislation
- funding and regulating aged care services, including quality assurance measures
- regulation of sectors including a range of registered health professionals, banking and financial service providers
- national disability policy and programs, including the National Disability Insurance Scheme (NDIS)
- contributing to funding legal assistance
- hospital and other health funding, including primary care and general practitioners
- sharing responsibilities for housing and homelessness policy initiatives, alongside state, territory and local governments
- social security frameworks, such as for the Age Pension and certain crisis payments
- national taxation and superannuation policy

- partnering with Aboriginal and Torres Strait Islander community-controlled primary healthcare organisations
- international obligations and engagement.

Role of state and territory governments



Each jurisdiction has its own laws, institutions and frameworks within which they develop individual responses to ageism and the abuse and mistreatment of older people. Relevant areas of law, policy and service provision that state and territory governments have full or partial responsibility for include:

- criminal law, including offences against the person (assault and serious assault), sexual offences, property offences such as fraud and theft, and criminal negligence or neglect
- civil law including protection order regimes and laws relevant to enduring powers of attorney
- guardianship and administration systems, including public trustee and public guardians
- domestic and family violence protection frameworks, including frontline service provision
- anti-discrimination laws and frameworks
- civil and administrative tribunals, state and local courts
- policing and adult safeguarding responses, including providing clear pathways for reporting and responding to abuse and mistreatment
- ambulance services and hospitals
- specialist support services, such as older people's legal or advocacy services, community health services and crisis accommodation
- awareness raising, education and community engagement, including to promote age friendly communities and to dismantle ageism
- regulation of key sectors, such as the legal profession
- implementing the National Code of Conduct for Health Care Workers.

Role of local governments



Local governments play a key role in promoting safety and cohesion and are responsible for community roles that can positively impact older people. This includes the promotion of more age-inclusive communities, including by upholding the rights of older people and addressing social isolation. Local governments provide important services and touch points for preventing and addressing the abuse and mistreatment of older people, including:

- local planning and zoning
- libraries and recreational facilities
- funding for community-led cultural events
- spaces for community activities and events
- local public information resources
- skill development opportunities for local workers, volunteers and community members.

In remote and regional areas, local governments often play a key role providing services and information for the community.

Role of the private sector



The private sector plays an important role providing goods and services to older people that are not delivered by governments. Private businesses often engage with older people and have an important role in identifying and preventing the abuse and mistreatment of older people. Private businesses that often provide services and products to older people include:

- the banking and financial services sector
- the legal sector
- media and news outlets
- retail and personal care services, such as hairdressers
- pharmacists and other medical professionals
- for profit aged care and disability service providers
- social workers and other support professionals.

Role of non-for-profit sector, community services and community leaders



Not-for-profit organisations and community services provide important assistance and support and foster community for older persons in areas such as:

- housing and homelessness services
- community health services
- family and domestic violence services
- aged care and disability services
- settlement and multicultural services
- culturally safe support for First Nations and culturally and linguistically diverse (CALD) groups
- LGBTQIA+ inclusive services.

These organisations are in a strong position to identify abuse and mistreatment risks and indicators, and to raise awareness of available supports. They also play an important role in combatting ageism and upholding older peoples' rights.

Role of the Australian community



The community plays an important part in creating safe and inclusive environments for people at all ages. The community can do this by:

- understanding the abuse and mistreatment of older people, and strategies that can help to prevent and end it
- knowing how to appropriately respond if an older person is experiencing, or at risk of, abuse and mistreatment
- upholding the rights of older people
- dismantling ageist attitudes and behaviours.



Principles

The principles identify overarching themes that underpin the entire National Plan and actions to be taken under it by governments, stakeholders and the broader community. The principles provide a unifying vision for this National Plan and ensure that all of the priority actions and detailed activities are aligned with a common set of values and goals.

Principle 1

Taking a human rights approach

This National Plan commits to embedding a human rights approach to preventing and responding to the abuse and mistreatment of older people. Older people, like all people, have dignity and inherent value, and the same rights as all people in Australia.

Our human rights approach emphasises inclusivity and accessibility. It also provides a strength-based framework for service responses and interventions that are person centred and integrated. Safeguarding approaches and law reform must be anchored in the human rights of older people.

The human rights principles that underpin this National Plan draw on several United Nations (UN) conventions and principles. This includes, in particular, the UN Principles for Older Persons⁵² and the UN Declaration on the Rights of Indigenous Peoples.⁵³ While UN principles are not legally binding, they carry political and moral weight. Additionally, Australia has obligations under relevant UN instruments that it has ratified, such as the International Covenant on Civil and Political Rights and the International Covenant on Economic, Social and Cultural Rights.

Australia will continue to advance the rights of older persons in international forums, including through UN resolutions and statements. As a recent step, Australia co-sponsored the Resolution on the Human Rights of Older Persons at the 54th Session of the UN Human Rights Council in 2023. Australia also participates in the UN's Open-Ended Working Group on Ageing and its work to review existing human rights frameworks relevant to older persons.

The human rights that underpin this National Plan include:

Dignity and independence

Older people have the right to live with dignity, independence and individual autonomy. They should have the opportunity to take risks and make their own decisions.

Older people have the right to work and generate income, and should not be excluded from work opportunities on the basis of age.

Older people should have the opportunity to choose where they live and should be able to live in an environment that is safe and adaptable to their needs.

Older people should have the opportunity to participate in the design and implementation of policies that directly affect them.

These human rights and principles are about empowering older people to lead fulfilling and meaningful lives with the freedom to pursue their goals and interests, and to make their own choices about their lives.

They are integrated into this National Plan through its strong emphasis on supporting individual decision making and a focus on person-centred and trauma-informed approaches that are tailored to the needs of individuals.

⁵² [United Nations Human Rights Office of the High Commissioner \(OHCHR\), *United Nations Principles for Older Persons*](#), OHCHR, United Nations, 1991.

⁵³ [United Nations, *United Nations Declaration on the Rights of Indigenous Peoples*](#), United Nations, 2007.

Liberty and security

Older people have the right to be safe, free from cruel, inhumane or degrading treatment, exploitation, abuse and neglect, and to live with liberty and security.

Older people have the right to liberty of movement and freedom to choose a place of residence, which may only be restricted in limited circumstances.

These human rights are about ensuring older people live freely and are safe from abuse and neglect, which is reflected in the purpose and vision of this National Plan.

These human rights and principles ensure that older people have access to basic needs and appropriate care in all environments. They are particularly relevant to elements of this National Plan that relate to upholding the rights of people in aged care settings and improving the capacity and capability of services.

Living and care

Older people have the right to an adequate standard of living, including adequate food, clothing and housing

Older people should be able to have a dignified death and should be able to make their own decisions about their health care and end of life, including in advance, and for this to be respected. To support decision making, older people should properly and appropriately informed about their end of life options and given adequate time and resources to make decisions.

Older people have the right to live in safe, accessible and adaptable environments, access social and legal services to enhance their autonomy and enjoy human rights and fundamental freedoms in any shelter, care or treatment facility.

Older people have a right to the highest attainable standard of physical and mental health. The ability to make properly informed decisions about their health care and to provide or withhold informed consent to medical treatments, including by advance instructions, support the implementation of this right. Older people should be provided with supports to be able to exercise the right to health, including to understand the information provided and to communicate their decision.

Equality and non-discrimination

All older people are entitled to equal protection of the law, including protection against discrimination on any grounds.

This right is about ensuring older people are treated with equality and fairness regardless of age, and live free from discrimination. It is reflected strongly through this National Plan's focus on combatting ageism, engaging with First Nations Peoples and other Priority Groups, and integrating an intersectional approach throughout all its work.

i The Commonwealth, as well as each state and territory, has anti-discrimination legislation that protects older Australians. For example, the *Age Discrimination Act 2004* (Cth) makes it unlawful to discriminate against someone on the ground of age in respect of employment, education, access to premises, provision of goods, services and facilities, provision of accommodation, disposal of land, administration of Commonwealth laws and programs and requests for information on which age discrimination might be based. The Act also protects Australians from discrimination on the basis of age-specific characteristics or characteristics that are generally imputed to a person of a particular age.

Privacy and relationships

Older people have the right to respect for the family and freedom from arbitrary or unlawful interference with the family, privacy, correspondence and communications

Older people should be free to have a personal and sexual life, to identify a family unit of choice and to have their close relationships respected by others

These human rights and principles relate to an older person having control over their family and relationships. This National Plan reflects these human rights through its emphasis on supporting individual decision making and ensuring responses are person-centred and trauma-informed.

Participation

Older people should have the same opportunities as all Australians to participate in political life, public life, recreation and cultural life, regardless of their age.

Older people should have the opportunity to remain integrated in society, share their knowledge and skills, and participate actively in the design and implementation of policies and services that directly affect them

Older First Nations Peoples and older culturally and linguistically diverse (CALD) people have the right, along with other members of their community, to maintain and use their language and connection to land, and belong to an Indigenous or CALD community, in accordance with the traditions and customs of that community.

Older people with physical or other support needs should be provided with support to participate in civil society and culture, including to vote, to seek and receive information, to attend public premises and to engage in social activities

These principles ensure that older people are able to actively participate in society and relate strongly to this National Plan's focus on combatting ageism, increasing whole of community awareness and engagement, and being responsive and informed by the needs of First Nations Peoples and other Priority Groups in everything we do.

Self-fulfilment

Older people have the right to exercise freedom of thought, conscience and religion, and to seek, receive and share information and ideas.

This human right is about an older person's ability to exercise their own freedoms, seek and share information. It is reflected through this National Plan's strong focus on combatting ageism, lived experience and engaging with First Nations Peoples and other Priority Groups.

Principle 2

Combatting ageism

Older people are not and should not be considered as vulnerable to abuse and mistreatment simply because of age.

Ageism occurs when people or systems use age to categorise and divide people in ways that lead to harm, disadvantage and injustice. Ageism undermines the human rights of older people and is an obstacle to achieving a fair and equal society which respects and recognises the inherent rights of all people.

Ageism removes an older person's voice, personhood and presence.

The Global Report on Ageism, released by the WHO in 2021, found that ageism is widespread in many parts of the world and extends to various institutions and sectors of society. Attitudes towards older people vary across countries and cultures.

Research conducted by the Australian Human Rights Commission (AHRC) in 2021 found that ageism is the most accepted form of prejudice in Australia, with 63% having experienced ageism in the last five years.

The negative impacts of ageism not only limit the potential opportunities for older people to participate fully in the community, society and civic life but also significantly affect their overall health and wellbeing.

Ageism can also occur at an individual, community and system level. Systemic ageism occurs where the laws, rules, social norms, policies and practices of institutions unfairly restrict opportunities and systematically disadvantage people on the basis of their age.

Institutional ageism – like institutional racism or sexism – is not always the result of overt bias on the part of individuals. Sometimes people fail to recognise the existence of institutional or systemic ageism because certain rules and practices are long standing and seen as normal, leading to an unconscious bias.

Ageism can also be closely linked with ableism. It can inadvertently lead to the overprotection of older people, which may impact on their autonomy and dignity. It includes failing to make sure people of all ages and abilities can participate in society equally.

Ableism occurs when individuals, organisations and governments exclude and segregate people with disability, rendering them 'unseen and unfamiliar'.⁵⁴ This generates and perpetuates attitudes, beliefs and behaviours towards disability by reinforcing the belief that people with disability are 'different', 'other' or 'special'.⁵⁵

Promoting the dignity and value of older people at the individual, community and society level is a crucial component of preventing and addressing the abuse and mistreatment of older people. The use of appropriate language is critical to guiding conversations around age and ageing, in ways that reduce ageist attitudes and behaviours.

Research has shown that even a short, one-off educational initiative can be a powerful tool in creating positive changes in how we think, feel and act towards older people.⁵⁶

Increasing whole of community awareness, education and engagement, including efforts targeting people of different ages and institutions, will play an important role in combatting ageism, promoting respect, creating age-friendly and inclusive, caring communities and empowering older people.

Preventing and responding to the abuse of older people is everyone's business. We will work collaboratively with the community, including the media, to challenge harmful stereotypes and the use of inappropriate language about older people and increase public awareness and understanding of ageism.

⁵⁴ [Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, Final Report](#), Australian Government, 2023.

⁵⁵ [Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, Final Report](#), Australian Government, 2023.

⁵⁶ [Australian Human Rights Commission \(AHRC\), Changing perspectives: testing an ageism intervention \(2023\)](#), AHRC, Australian Government, 2023.

Principle 3

Listening to and learning from the experiences of older people and diverse communities

Lived and living experience

The diverse lived and living experience of older people must guide everything we do under this National Plan.

Older people who have experienced abuse and mistreatment have spoken very movingly about the devastating impact it has had on their lives, including destroying relationships with loved ones, financial loss and undermining their mental health and social and emotional wellbeing.

Older people with lived and living experience of abuse and mistreatment have crucial insights from their first-hand experiences and efforts to navigate services, systems and structures that are meant to provide support but may have failed. They know from experience the weaknesses and strengths of interventions in practice.

The diverse aspirations and priorities of older people, including preferences in relation to reporting pathways, service models and legislative frameworks, have informed the development of this National Plan and will inform its implementation.

In late 2023, the national peak body Elder Abuse Action Australia was commissioned by the Australian Government to undertake wide ranging consultations to inform the development of this National Plan. This process comprised in-person focus groups in every capital city and two regional locations, virtual focus groups and one-on-one interviews. Importantly, consultations included a dedicated First Nations-led process and reached older people with lived experience of abuse, people with cognitive decline and their carers, people who identify as LGBTQIA+ and culturally and linguistically diverse people.

Listening to and learning from people with lived and living experience will assist to ensure that this plan, its messages and strategies are respectful, engaging, relevant and effective.

Diverse communities, including First Nations Peoples and other Priority Groups

We recognise that a one-size-fits-all approach is not appropriate or effective for listening to and learning from older people experiencing, or at risk of, abuse and mistreatment. This National Plan and actions under it will be appropriately guided by, and tailored to reflect, the full diversity of Australia.

National efforts to end abuse and mistreatment must consider the range of settings where older people live, work, learn and connect with others, including aged care settings and other environments.

The priorities and values held in different communities may increase protective factors against the abuse and mistreatment of older people. For example, the maintenance of multi generational households and participation in social and faith-based groups can reduce isolation and strengthen supportive networks for older people. We acknowledge in several of the initiatives in this National Plan, that we need to understand more about the experience of abuse and mistreatment in different parts of our society.

Overlapping forms of discrimination and marginalisation

Different aspects of a person's identity can expose an older person to overlapping forms of discrimination and marginalisation. This is sometimes referred to as 'intersectionality'.

Intersecting forms of discrimination can occur on the basis of individual, community or structural factors, including age, race, ethnicity, culture, language, religion, language spoken, housing status, access to health care, literacy (including digital literacy), geographic location, social networks, sexuality, gender identity, ability and socioeconomic status. For example, an older person who speaks a language other than English as their primary language, and who has low digital engagement, may face additional challenges when trying to find a service nearby to assist with a legal problem or when trying to access health or social services, when compared to someone who speaks English as their first language and regularly uses the internet to search for information. These issues are exacerbated for older culturally and linguistically diverse persons where they do not have access to interpreter services and who may experience intersecting factors such as disability.

We are committed to taking an intersectional approach to our work under this National Plan, which recognises, is informed by and responsive to diverse support needs.

First Nations Peoples and other Priority Groups also play a critical role creating social cohesion and are uniquely positioned to raise awareness of abuse and mistreatment and identify behaviours amongst people within their communities.

This National Plan will encourage community partnerships with local organisations and stakeholders, engage community leaders and encourage community groups and champions to take an active role in preventing and ending ageism and the abuse and mistreatment of older people. We recognise that this is already occurring in some areas and seek to build on this success.

Engaging and collaborating with First Nations Peoples and other Priority Groups will help to ensure that the full spectrum of a community's strengths, skills and perspectives can contribute to the success of our initiatives. It will also foster a better understanding of the particular dynamics of abuse and mistreatment within different communities and support the creation of tailored, relevant (including culturally relevant) information materials and accessible and safe pathways to reporting and support.

Co-design

Co-design is different from consultation. It is the process of involving relevant communities or stakeholders in the design of products or services. Planning, designing, producing and delivering services with people that have experience of the problem or service means the final output is more likely to meet the community's needs, resulting in the best outcome.⁵⁷

Where possible, initiatives under this National Plan will be co-designed with the community, including First Nations Peoples and other Priority Groups (including people with lived and living experience). This may involve the development of place-based responses that are appropriately tailored to local needs, preferences and circumstances.

⁵⁷ Department of Climate Change, Energy, the Environment and Water (DCCEEW), *Co-designing a partnering signal*, DCCEEW, Australian Government, 2018; New South Wales (NSW) Government, *Co-design toolkit*, NSW Government.

Principle 4

A strong focus on prevention and early intervention

The first National Plan focused on responding to abuse. Building on that, this National Plan takes active steps towards ending abuse and mistreatment. This requires a focus on early intervention and prevention. We want to intervene as early as possible to prevent abuse and mistreatment from ever occurring or from further escalating.

Achieving this will require a multi-faceted and whole-of-government response. Seeing change, such as a reduction in ageism, will take time. But a 10-year plan is an opportunity to chart a course that enables meaningful progress towards this goal.

Effective prevention and early intervention measures are particularly important in the broader social context of this National Plan, including Australia's ageing population profile.

As outlined above, there are factors that will increase the risk for someone to experience abuse or mistreatment, or that someone harms an older person. This National Plan focuses on prevention and early intervention efforts that help to address these risk factors, strengthen

protective factors and reduce opportunities for harm.

This work needs to occur at an individual, community and system level.

We acknowledge that legacy systems, policies and practices in our communities can be ageist, or discriminatory in other ways, and can contribute to abuse and mistreatment. We need systems that work for older people and support them to achieve their aspirations, wants and needs.

To guide our work, an evidence-based prevention framework will be developed under this National Plan. Prevention frameworks emphasise the need to disrupt the social and cultural conditions that enable or actively drive abuse and mistreatment.

Well-established prevention frameworks in the areas of family and domestic violence, and emerging frameworks in the context of the abuse and mistreatment of older people, position us well to learn from, adapt and build on this work at a national level.

The prevention framework established under this National Plan will focus on:

- addressing ageism and additional forms of discrimination that can intersect with ageism to increase the risk of abuse, applying an intersectional lens
- addressing individual, family, community and system-level risk factors associated with people who cause harm to an older person
- addressing individual, family, intergenerational, community and system-level risk factors that can increase an older person's likelihood of experiencing abuse
- strengthening protective factors
- increasing system and infrastructure resilience and preparedness to respond to the unique needs of older people (for example, by centring the rights of older people in emergency or disaster planning)
- a focus on the role and needs of carers from families, communities and kinship groups
- proactive approaches to screening for abuse and mistreatment, and improving community understanding of their role in adult safeguarding
- improving safeguarding and protections through enhanced worker screening approaches, to ensure people who work with vulnerable older people do not pose an unacceptable risk of harm.

Early intervention initiatives form a key part of our prevention response. The goal of early intervention is to prevent further abuse and mistreatment, and to improve the overall wellbeing of and outcomes for the older person. It can help to identify underlying problems that may be contributing to abuse or mistreatment, such as family conflicts, economic stress, overcrowded housing, social and emotional wellbeing (including mental health) issues and address these at an early stage to stop escalation.

For early intervention to work, it is critical we improve our ability to identify and screen for abuse and mistreatment. This is important because we know this kind of abuse and mistreatment is often a hidden problem.⁵⁸

People who are socially isolated, have a severe disability or who are highly dependent can be more likely to experience abuse and mistreatment but many may be in situations where they are less likely to be able to report it. Health Justice Partnerships, community visitor programs and other innovative services models are often uniquely placed to identify individuals at risk and able to offer supports.

Over the life of this National Plan, we will work to improve community understanding of the role we can all play in adult safeguarding. An important part of this will be achieved through increasing education for professionals in relevant occupations, to better understand how to prevent, recognise and respond to ageism, abuse and mistreatment.



⁵⁸ In 2021, the National Elder Abuse Prevalence Study found that just one in three older people seek help or advice from a third party.

Principle 5

Supporting individual decision making, autonomy and dignity

Supporting the decision making and agency of older people involves, among other things, upholding a person's right to make their own decisions and to express their preferences and identity, including sexuality and gender identity, culture and heritage, faith and spirituality, race, ethnicity, social preferences and other beliefs. This includes the dignity of making decisions that may be of concern to, or considered wrong, by others.

While safeguards for older people are addressed throughout this National Plan, the underlying principle is that these measures 'should not prevent people from making decisions, taking risks and making mistakes. This is also known as dignity of risk – that is, a person has the right to take reasonable risks.'⁵⁹

In practice, promoting this principle means respecting that a person may wish to express their individuality in a range of unique ways, select services to assist them, select activities which they enjoy, draw on their strengths and abilities as they see fit, and define for themselves what is a quality and meaningful life. It also recognises that older people will take risks and make mistakes, and may choose not to seek or accept support.

Enabling older people to maintain their family and social relationships, and to belong to and participate in activities that they value, is another important expression of this principle.

Upholding this principle when a person wishes to remain in close relationship with a person causing harm,⁶⁰ or does not identify a person as causing harm, is a complex matter and highlights the importance of equipping everyone in society to recognise signs of abuse and mistreatment, and to have clear avenues to raise those concerns.

Enabling decision-making autonomy may require providing support and making reasonable adjustments (including, but not limited to, making assistive technology available), for an older person.

This National Plan recognises that those with a cognitive impairment and dementia can still participate in decision making and should be supported to do so in accordance with human rights principles. A loss of decision-making ability should not be assumed on the basis of cognitive impairment or a diagnosis of dementia.⁶¹ It is also recognised that loss of decision making ability may be a transient, rather than permanent, condition for an older person.

⁵⁹ [Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, Final Report, Australian Government, 2023.](#)

⁶⁰ The Prevalence Study – [L Qu, R Kaspiew, R Carson, D Roopani, J De Maio, J Harvey, B Horsfall, National Elder Abuse Prevalence Study: Final Report, Australian Institute of Family Studies \(AIFS\), Australian Government, 2021](#) – identified that the predominant relationship dynamic in elder abuse is intergenerational and familial, with children (18%), partners of children (7%) and grandchildren (4%) together accounting for a significant proportion of all perpetrators.

⁶¹ This National Plan acknowledges that people with younger onset dementia will also be vulnerable to abuse and mistreatment, however this issue does not fall within the scope of this National Plan.

This principle affirms that, regardless of age:

- all people are entitled to be treated with respect for their dignity and autonomy
- it is presumed that an older person has decision-making ability, unless evidence is proved to the contrary
- dignity in risk must be observed through acknowledging the right to take informed risks and to make decisions that others (no matter their experience or background) may regard as wrong, irresponsible or inappropriate
- older people should be involved in, and their wishes must directly inform, decisions made or actions taken to support and safeguard them to the extent possible
- safeguarding measures should consist of those which are the least interventionist and the least intrusive to the older person.

The best approach to safeguarding older people from abuse and mistreatment relies on working with the individual involved, to identify what best suits them and their circumstances. It may require coordination of a multi-agency and multi-disciplinary response, drawing on the expertise of relevant people and bodies to effectively support and empower the older individual to safeguard their rights and mitigate against abuse and mistreatment.

Increasing education around decision-making ability, supported decision making and relevant human rights principles is also critical to preventing the abuse and mistreatment of older people. Education for First Nations Peoples and other Priority Groups, those caring for older people and professionals in relevant occupations in this area, should embed these key principles and take a strength-based approach that supports cultural shift in this area.



Principle 6

A person-centred and trauma-informed response

This National Plan will promote a person-centred, trauma aware and healing informed approach throughout its work.

This principle recognises that support pathways and systems that are designed to help individuals can sometimes be complex and difficult to navigate, particularly during a time of heightened stress. This National Plan will work to better integrate service responses to make it easier to get the right help and supports when needed, and reduce the need for people to repeat their story to multiple services.

A person-centred approach ensures that each older person is treated respectfully as an individual human being. It also involves seeking out and understanding what is important to the older person, their families, kinship groups, carers and support people, fostering trust and establishing mutual respect. It also means ensuring policies and services are culturally safe and account for linguistically diverse backgrounds.

i

Cultural safety is about overcoming the power imbalances of places, people and policies that occur between the majority non-Indigenous position and the minority Aboriginal and Torres Strait Islander person so that there is no assault, challenge or denial of the Aboriginal and Torres Strait Islander person's identity, of who they are and what they need. Cultural safety is met through actions from the majority position which recognise, respect and nurture the unique cultural identity of Aboriginal and Torres Strait Islander people. Only the Aboriginal and Torres Strait Islander person who is the recipient of a service or interaction can determine whether it is culturally safe.⁶²



62 All Australian governments, [National Agreement on Closing the Gap](#), Australian governments, 2020

A culturally safe and family-centred approach is particularly critical in developing responses to the abuse and mistreatment of older First Nations people. It recognises and understands the historical and ongoing impacts of colonisation, the importance of family and community relationships and the connection between cultural and spiritual identity for First Nations Peoples, and the ways in which these factors can be impacted by dislocation from Country, family and community, racism and discrimination, and collective, intergenerational and personal traumas.

By taking a culturally safe approach, we can ensure that services and interventions are sensitive to the unique needs and experiences of First Nations Peoples, and that they are designed to promote individual and community healing and wellbeing. This approach is also important to support people from culturally and linguistically diverse communities, including those from migrant and refugee backgrounds.

The presence of trauma can have a profound impact on physical health, social and emotional wellbeing (including mental health), and spiritual and community wellbeing at all points in the lifespan and must be considered as part of delivering a person-centred approach. The abuse and mistreatment of older people can both create and resurface trauma.

There are older people with pre-existing trauma caused by an event or events earlier in life and they may experience post-traumatic stress disorder. It is important to acknowledge that some older populations (for example, First Nations communities – especially Stolen Generation survivors and their families – Forgotten Australians, refugee communities, disability communities and LGBTQIA+ communities) already have higher baseline rates of trauma and, as such, may encounter additional barriers to engaging with government or other services and require specialised and tailored supports in the local community.

The impacts of trauma, whether acknowledged or not, may surface at any time and affect people's trust of authority, access to services and supports, relationships with other people and health and wellbeing.

Trauma aware and healing informed practices recognise the prevalence of trauma and its impacts on the emotional, psychological and social wellbeing of people and communities. These practices integrate an understanding of past and current experiences of violence and trauma in all aspects of service delivery. The goal of trauma aware and healing informed services is to avoid re-traumatising individuals and communities by providing safe and responsive supports, and choice and control to promote healing and wellbeing.

Focus Areas

The Focus Areas of this National Plan are designed to support a comprehensive and coordinated approach to preventing and addressing the abuse and mistreatment of older people over the next 10 years.

The Focus Areas will guide action under this National Plan and its underpinning Action Plans.


Focus Area 1

Increase whole-of-community awareness, education and engagement

A whole-of-community, intergenerational approach is required to end the abuse and mistreatment of older people. This includes improving awareness and understanding of older people's rights and how to identify, prevent and respond to abuse and mistreatment, addressing barriers to help-seeking and initiatives to address ageism. This needs to occur at individual, community and systems levels.

As outlined in Principle 2 (Combatting Ageism), we recognise that our systems do not always work for older people. Institutional ageism can contribute to abuse and mistreatment and addressing this must form a key part of our response.

Awareness raising initiatives were found to be some of the most impactful activities in achieving the objectives of the first National Plan. This National Plan will continue to build awareness and incorporates initiatives to translate awareness into meaningful and lasting behaviour change. This includes primary prevention approaches to address ageism across society and efforts to foster more age-friendly communities and stronger social connections for older Australians, including intergenerational connections.



Raising awareness of the abuse of older people as a whole-of-community responsibility is a key action of *Lifelong Respect: Tasmania's Strategy to end the abuse of older people (Elder Abuse) 2023–2029*, as well as the National Plan.

A critical element of raising awareness has been the development of the 'It's ok to ask the question' awareness campaign. The campaign was launched in June 2020 and was based on the message 'it's ok to ask the question'. This message aims to encourage contact with the Tasmanian Elder Abuse Helpline to talk about situations of concern, gain advice and seek referrals where appropriate.

In 2022, an independent evaluation of the campaign and its impact found high recall of the campaign. The messages of the campaign were confirmed to be clearly communicated.

This National Plan will embed a more cohesive, targeted approach to communicating about abuse and mistreatment of older people. Initiatives will specifically consider audience needs, including but not limited to the needs of:

- **Older people** – to improve understanding of their rights; how to get help and support if needed; strategies to safeguard against abuse and mistreatment; to promote healthy, respectful relationships; and address barriers to seeking help
- **The community** – to improve understanding of what abuse and mistreatment of older people is and how to recognise, respond to and prevent it; initiatives targeted at people who cause harm; initiatives to address ageism
- **Professionals in relevant occupations** – targeted education initiatives for professionals who have regular contact with older people to better identify, prevent and respond to ageism and the abuse and mistreatment of older people
- **Members of community organisations** – targeted education for well-placed, local community organisations (such as churches and places of worship, seniors' clubs, Country Women's Associations, Men's Sheds, Aboriginal Community Controlled Organisations, Local Aboriginal Land Councils) to improve understanding of what abuse and mistreatment of older people is and how to recognise, prevent and respond to it
- **Government** – engagement across relevant areas to improve understanding of, and strategies to respond to, ageism and the abuse and mistreatment of older people, for example updating organisational strategies and improving training for agency staff who regularly engage with older people, or who are involved in relevant areas of policy, program management or decision making.

A range of communication channels must be used to ensure information is accessible and reaches people in different settings, particularly those who are not digitally engaged or who have little or no English proficiency. For example, information could be provided via community events or organisations, hard copy brochures in health clinics, materials supporting the roll out of the Support at Home Program and in residential aged care homes, creative activity centres and exercise groups, or community radio and newspapers.

Information will also be targeted to ensure it is accessible and relevant to First Nations Peoples and other Priority Groups, including translating materials or using interpreting services where appropriate. Strategies and materials should be co-designed with, or incorporate the perspectives of, these groups. In line with Principle 6 of this National Plan, a trauma-informed approach that incorporates the experience of older people with lived and living experience of abuse and mistreatment is critical.



The Office for Ageing Well in the South Australian Department for Health and Wellbeing partnered with the Aged Rights Advocacy Service (ARAS) to develop the Stay Healthy, Stay in Control; Stay Connected and Stay Safe program for Aboriginal and non-Aboriginal communities. This is being rolled out by ARAS to community and services through the Safeguards for Ageing Well program, funded by the Office for Ageing Well. The program aims to raise community awareness of how to live and age well, tackle ageism and safeguard the rights of older people, and provides key messages to living a fulfilling positive life, free from harm.



This National Plan focuses on improving the collaboration and coordination of communications relating to abuse and mistreatment across all levels of government, the sector and the community. This will allow us to collectively build on and learn from each other's work, and reduce fragmentation and duplication of effort.

Compass.info (Compass) will continue to play an important role as the national knowledge hub on the abuse of older people. More will be done under this National Plan to promote awareness of the Compass resource and to improve its accessibility, particularly for First Nations Peoples and other Priority Groups. Opportunities to increase access to content for people who are not digitally engaged will also be explored, along with innovative approaches to broaden the functionality of and engagement with the platform.

Compass aims to create a national focus on the abuse of older people. It raises awareness of this growing social issue and simplifies the process of connecting people to relevant services and information.

Compass has been created by Elder Abuse Action Australia (EAAA) with funding from the Australian Government Attorney-General's Department.

Since its launch in 2019, Compass has seen consistent growth in content development and site visits. It houses over 800 Australian resources and details for over 300 service providers. More than 1 million people have accessed Compass, with more than 500,000 site visits in 2023 alone. Compass social media activity also currently reaches over 400,000 Australians each month.



Priority Actions

- 1.1. Review existing communication resources on ageism and the rights of older people, and the abuse and mistreatment of older people, with a view to developing evidence-based national guidance and communication resources
- 1.2. Invest in local community engagement activities to improve understanding and identification of the abuse and mistreatment of older people, and promote strategies to prevent and respond to it
- 1.3. Ensure First Nations Peoples and other Priority Groups are involved in the design and delivery of specific communications addressing ageism and the abuse and mistreatment of older people
- 1.4. Develop whole-of-society initiatives to combat ageism, foster age-friendly communities and support meaningful social connections, including intergenerational connections
- 1.5. Identify, develop and promote abuse prevention initiatives, which should be aimed at upholding older people's rights and reducing the risk of abuse and mistreatment, and be targeted at the individual, community and system levels
- 1.6. Develop targeted, complementary communication campaigns and materials addressing ageism and the abuse and mistreatment of older people and promoting help seeking and pathways to support
- 1.7. Continue to make improvements to the national knowledge hub (Compass.info) to enhance diverse user engagement and access to information and support

Focus Area 2

Enhance legal frameworks and adult safeguarding responses

Over the life of this National Plan, governments will focus on improving the legal frameworks for older people's decision making and rights, both within and across jurisdictions, and seek to enhance adult safeguarding responses.

We need a community approach to safeguarding the rights of older people. Professionals in relevant occupations need to better identify and respond to signs of abuse and mistreatment, and the broader community needs to understand the important role we can all play in adult safeguarding, both for ourselves and others.

Healthy ageing strategies can promote the rights of older people and reduce the risk of abuse and mistreatment, such as through encouraging people to stay physically and mentally active and socially connected. Improving financial literacy can also be an important strategy to empower and safeguard older people against abuse.

Public trustee and guardianship agencies also have an important role in supporting older people who require decision-making assistance. Awareness and education efforts under this National Plan should include a focus on increasing community understanding of the roles of these agencies, and the importance of planning ahead for later life as a strategy to prevent, and reduce the risk of, abuse and mistreatment.



The Australian Government continues to support the Financial Information Service, which provides free, independent and confidential education and information to help people to make informed decisions about their current and future financial needs.

The Australian Government is also investing in the National Dementia Support Program, which aims to improve awareness and understanding of dementia, and to empower people living with dementia, and their carers' and families, to make informed decisions about the support services they access.

Achieving greater national consistency in enduring power of attorney (EPOA) laws

Over the life of the first National Plan, jurisdictions invested in considering and in some cases amending their legal frameworks for EPOAs.

For example, in Queensland, new EPOA forms came into effect in November 2020. The forms reflected a number of legislative changes enacted through the *Guardianship and Administration and Other Legislation Amendment Act 2019* (Qld) and are designed to be simpler and more user friendly, following extensive consultation.



On 30 November 2020 important changes to the law underpinning Queensland's guardianship system came into effect, including:

- strengthening the general principles and health care principles under the *Guardianship and Administration Act 2000* and *Powers of Attorney Act 1998* to be more consistent with human rights and focusing more on adults with impaired capacity participating in decision making
- strengthening the presumption of capacity by clarifying that every time the Queensland Civil and Administrative Tribunal (QCAT) or the Supreme Court make a decision about an adult's capacity they must presume that the adult does have capacity for the matter until the contrary is proven
- clarifying that to make an advance health directive or EPOA, an adult must understand the nature and effect of the document and be capable of making it freely and voluntarily
- clarifying that QCAT can order both a current or a former attorney, administrator or guardian to pay compensation for a loss to the adult or the adult's estate caused by their failure to comply with their duties.

The reforms included the making of new EPOA forms, new advance health directive forms and other related forms and explanatory guides which are simpler and more user friendly. New capacity assessment guidelines were also made to assist people who undertake assessments of an adult's capacity to make a decision under Queensland's guardianship laws

The decision by SCAG on 22 September 2023 to consult on potential approaches for achieving greater consistency in laws for financial EPOAs was an important step in this work.

Achieving greater consistency in EPOA laws continues to be a priority.

A number of inquiries have highlighted the benefits of achieving greater consistency in EPOA laws in Australia and the challenges and inefficiencies presented by current differences in state and territory legislation. The expected key benefits of achieving greater national consistency include:

- a reduction in financial abuse
- greater consistency in the practices of institutions relying on EPOAs
- enabling national education, resources and greater alignment of services
- greater consistency in the oversight of EPOAs and the implementation of safeguards to prevent their misuse.

It is important that further education and awareness-raising efforts should occur in conjunction with EPOA law reform. Education and awareness raising will promote the use of EPOAs as advanced care planning instruments which operate to strengthen the independence and dignity of older people.

Embedding greater safeguards and measures for older persons with disability

The Disability Royal Commission made significant recommendations about enhancing protections, including for older people with disability. A number of the recommendations have direct relevance to this National Plan, including in relation to:

- strengthening adult safeguarding responses
- EPOA reform
- supported decision-making frameworks
- the role of public guardians, trustees and other public agencies.⁶³

Government responses to these recommendations will be outlined in each jurisdiction in due course. Specific commitments and activities that respond to the Disability Royal Commission will be highlighted through this National Plan's Action Plans.

Greater coordination of safeguarding supports and clearer avenues for reporting

Jurisdictions adopt different approaches to adult safeguarding. New South Wales, South Australia and the Australian Capital Territory have agencies that undertake adult safeguarding functions, in some cases with investigatory powers.

Older people and concerned family and friends need clear avenues to raise a concern about abuse or mistreatment, whether that is to a dedicated safeguarding agency or a similar entity.

The entities receiving those reports should be able to coordinate support and assistance to respond according to the situation. For example, if the issue is concern about neglect in providing medical care to an older person, part of the response may be to coordinate

assistance connecting to pharmacy and in-home nursing services.

A focus of this National Plan will be a commitment to clarifying the avenues for concerns about abuse and mistreatment to be raised within jurisdictions. This will assist both those experiencing, or at risk of, abuse or mistreatment, and others within the community that wish to raise a concern. This approach is particularly important for matters where police are not best placed to respond to the concern.



In May 2020, the role of the ACT Discrimination, Health Services, Disability and Community Services Commissioner was expanded to include a new complaints function for abuse, neglect or exploitation of vulnerable people, including adults 60+ years of age and adults with a disability.

Section 41B (1) of the *Human Rights Commission Act 2005* (HRC Act) provides that a person may complain to the Commission about the treatment of a vulnerable person if the person believes on reasonable grounds that the vulnerable person is subject to or at risk of abuse, neglect or exploitation.

The Commission's jurisdiction is designed to provide better protections for vulnerable people in the ACT community. It fills a gap identified in initial consultations about improving protections for vulnerable people and responds to recommendations in the Australian Law Reform Commission report on elder abuse.

⁶³ A number of the recommendations in [Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability \(Disability Royal Commission\)](#), Australian Government, 2023, have direct impacts on EPOA reform, such as:

- Recommendation 6.4: amending terminology and definitions in guardianship legislation, including in relation to EPOAs
- Recommendation 6.6: which contains 10 proposed supported decision-making principles
- Recommendation 6.7: which contains proposed provisions concerning decision-making ability
- Recommendation 6.8: regarding statutory and personal appointment of 'supporters'
- Recommendation 6.10: states and territories should review and reform their guardianship and administration legislation

Exploring enhancements to the role of institutions in preventing financial abuse

Banking and other financial institutions may be well placed to identify potential financial abuse. For example, potential coercion or misuse of an EPOA, or misuse of pension or other payments managed by a nominated representative on behalf of an older person.

Increased collaboration between and among government agencies and financial institutions to better understand and safeguard against abuse and mistreatment will be prioritised under this National Plan. This will include specific research examining financial abuse indicators and risks to assist institutions, and through initiatives to enhance sector, community and government engagement with this issue.

Enhancing aged care protections

During consultation on the development of this National Plan, we heard and acknowledge concerns raised by the community in relation to aged care services. This included concerns raised about the potential for abuse and mistreatment to occur in situations where people experience a loss of autonomy and where there is a power imbalance with staff delivering services.

Recognising these concerns, this National Plan acknowledges and is aligned with significant reforms already underway in response to the Aged Care Royal Commission, to ensure that the abuse and mistreatment of older is addressed regardless of the setting in which it may occur.

Recommendation 1 of the Aged Care Royal Commission was to develop a new Aged Care Act. The new Act will build towards the Aged Care Royal Commission's vision of a new, person centred aged care system that delivers better outcomes for older people and continues to improve over time. The new Act will set the foundations of this new system and will focus on the safety, health and wellbeing of older people, and put their needs and preferences first.

The new Aged Care Act's purpose will include upholding the rights of individuals under the Statement of Rights and ensuring individuals accessing funded aged care services are free from mistreatment, neglect and harm from poor-quality or unsafe care.

While the new Aged Care Act will provide a significant legal change, once implemented it will be essential to monitor its effectiveness and ensure it is achieving systemic change.

The Serious Incident Response Scheme will continue to provide an important mechanism for identifying, responding to and preventing incidents or mistreatment and abuse of older people receiving aged care services, including the inappropriate use of restrictive practices. Additional measures in the new Aged Care Act, such as a new complaints management framework and whistleblower protections will further enhance accountability and transparency in aged care services.

Work is underway nationally to reform worker screening for care workers in areas including in aged, veterans' and disability care, to strengthen safeguards for older adults and align arrangements across these sectors. These important reforms on worker screening will support consumer safety and wellbeing by requiring providers to check a person's criminal and work history to ensure they are suitable to work in an aged care setting.

The National Aged Care Advocacy Program also continues to provide free, independent and confidential advocacy support and information to older people seeking or already using Australian Government-funded aged care services across the country, along with their families and carers. The program can help older people who may be experiencing abuse and mistreatment to understand and exercise their aged care rights, seek aged care services that suit their needs and provide information and access to appropriate resources.

Justice responses to sexual violence

The Australian Government has asked the Australian Law Reform Commission (ALRC) to inquire into justice responses to sexual violence in Australia and to report by 22 January 2025.⁶⁴

The Terms of Reference for this inquiry ask the ALRC to consider the particular impact(s) of laws and legal frameworks on population cohorts that are disproportionately reflected

in sexual violence statistics, including people in residential care settings and older people, especially those experiencing cognitive decline.⁶⁵

The recommendations of this inquiry may be directly relevant to achieving the vision of this National Plan. Government responses to the recommendations, once known, will be reflected where appropriate as part of our Action Plans or associated reporting.

Priority Actions



- 2.1. Continue efforts to achieve greater national consistency in enduring power of attorney laws
- 2.2. Continue to raise awareness about the importance of planning ahead for decision making in later years and rights and obligations in relation to enduring instruments
- 2.3. Consider recommendations of the Disability Royal Commission relevant to ending the abuse and mistreatment of older people, through government responses in each jurisdiction
- 2.4. Strengthen safeguarding frameworks and clarify pathways for abuse and mistreatment to be reported and addressed
- 2.5. Explore enhancements to the role of institutions in preventing and responding to financial abuse
- 2.6. Continue to implement the Australian Government's response to the Aged Care Royal Commission, including through delivery of the new Aged Care Act, to protect and enhance the safety, health, wellbeing and quality of life for older people receiving funded aged care services

⁶⁴ [Australian Law Reform Commission \(ALRC\), *Justice Responses to Sexual Violence*](#), ALRC, Australian Government, 2024

⁶⁵ [Australian Law Reform Commission \(ALRC\), *Justice Responses to Sexual Violence, Terms of Reference*](#), ALRC, Australian Government, 2024.

Strengthen the capacity and capability of services, including through targeted education and training for professionals

Having the right support services in place and being able to access these services in a timely manner, helps keep older people safe. It can also promote an older person's independence to continue making decisions on issues that affect them. Services also provide an important avenue for those caring for or supporting older people to be assisted and resourced in their roles.

This National Plan recognises a range of services, including those that are highly targeted or specialised in responding to the abuse and mistreatment of older people (such as those described below), broader family and domestic violence services, and more mainstream services (such as allied health services, lawyers and financial planners). These services all have an important role to play in preventing and responding to the abuse and mistreatment of older people.

Specialist services for older people experiencing abuse or mistreatment

Governments across Australia fund a range of specialist services that support older people experiencing, or at risk of, abuse and mistreatment. These services include advocacy, legal and social support, guardianship and financial management, case management and mediation, helplines and adult safeguarding services. A range of services are also operated privately and through community organisations.

While significant progress was made under the first National Plan, geographic and other gaps remain in terms of the array of services available nationally. Progress towards ensuring services are trauma-informed, culturally safe and appropriate for First Nations Peoples and other Priority Groups has been limited.

In 2019 the Australian Government established a trial of 12 specialist services addressing the abuse of older people across three service types (Specialist Elder Abuse Units, Health Justice Partnerships and

Case Management and Mediation). A 2021 evaluation of the service trials found that these services were meeting the needs of older people experiencing, or at risk of, abuse. Significant growth in client numbers across the evaluation period clearly pointed to the need for specialist service responses. Each service type was found to provide benefits to clients and, taken together, they represented a holistic system response.



Specialist elder abuse units where lawyers, social workers and other specialist support staff work side by side with clients to develop a case plan and respond to the individual's needs.

Health Justice Partnerships where older people in the health care system identified by health care workers or social workers as being at risk, or potentially subjected to abuse, can access specialised legal support services. These units work in partnership with the health system and related referral agencies, such as community and aged care services.

Case management and mediation services that work with the older person and their family to find solutions to the underlying problems driving abuse.

Despite the positive outcome of the trials so far, service providers report that older people are often already at crisis point when they present (or are referred) to a service. Late contact with services adds to the complexity and severity of these cases, and misses the opportunity to achieve better outcomes made possible with early intervention.

This underscores the importance of increasing our focus on prevention and early intervention, including by increasing community awareness about how to identify and respond to early warning signs of abuse and mistreatment. It also highlights the importance of better

targeting services responses including to address the needs of people who cause harm to older people.

In relation to specialist service responses, this National Plan will prioritise initiatives focused on increasing the capability and capacity of services, increasing equity of access and removing barriers to seeking help and support. This includes supporting the use of best-practice service design, strengthening cultural competency and diversity of staff, and working to expand the footprint and mix of services available across Australia. It may also include reforms targeting current service limitations, for example where a lawyer is unable to take legal instruction from a person with cognitive impairment who may be experiencing abuse or mistreatment.

This National Plan recognises the need to take an intersectional approach to removing barriers to seeking help and support, particularly for First Nations Peoples and other Priority Groups. Efforts to strengthen or expand services should be co-designed where possible with the communities they are seeking to service. Services targeting First Nations people should be First Nations-led.

In line with the key principles of this National Plan, services must take a person centred and community-based approach that appropriately balances the wellbeing, autonomy and safety of older people. Achieving this involves service providers working with older clients to manage the risks they face. Risk mitigation occurs effectively when older people are supported through a co-ordinated approach across services, enabled by appropriate information sharing arrangements.

This National Plan's focus on increasing collaboration between the sectors, government and community is intended to drive shared learnings and build capacity. Best-practice, evidence based models should be harnessed to increase national consistency, while allowing for local adaptation.

While technology may play an increasingly important role in the future of service delivery, due regard must be given to those who are digitally excluded, as well as broader needs

and preferences for face to-face services. It is important that services and outreach initiatives:

- consider multiple channels and provide trusted sources of information for older people
- ensure that interventions consider people's communication needs
- are inclusive regardless of literacy levels, including digital literacy.

Targeted education for professionals in relevant occupations

This National Plan will expand and improve efforts to upskill professionals in relevant occupations (as defined under [Key Terminology](#)) to be able to better identify the abuse and mistreatment of older people, and respond appropriately. These efforts are complemented by related actions under the *National Plan to End Violence against Women and Children 2022–2032*, which seek to build sector capacity to identify women at increased risk of, or experiencing, gender-based violence.

The needs and requirements of professionals in relevant occupations (which includes services allied with specialist elder abuse services) are different to professionals that work in specialist services, given older people are often only one cohort of people with unique needs that they assist.

Increased engagement with relevant (rather than specialist) professions offers an important opportunity for screening and identifying abuse and mistreatment, in line with the strong focus on prevention and early intervention in this National Plan. This engagement also offers an opportunity to increase community understanding of adult safeguarding and the important role different parts of the community can play in keeping older people safe.

Greater education for professionals in relevant occupations will also help to address gaps in our service system and address barriers to seeking help, by ensuring that people who may be experiencing, or at risk of, abuse are identified and receive the right information at the earliest possible opportunity.

1800ELDERHelp

In March 2019 the Australian Government established the national 1800ELDERHelp phone line. This is a free call phone number that automatically redirects callers seeking information or advice to an existing helpline, or adult safeguarding unit, in the state or territory from where the call originated.

Since 1800ELDERHelp was established the number of calls to the national helpline has increased year on year. Between the 2019–20 and 2022–23 financial years there was a 448% increase in calls to 1800ELDERHelp. Callers are also able to continue to contact the relevant phone service in their jurisdiction directly.

While 1800ELDERHelp and the related services in each jurisdiction continue to play a critical role, more needs to be done to increase awareness about services, improve service response in some areas and address barriers to seeking help.

This will be achieved in part through this National Plan's focus on community awareness raising. However, efforts will also be directed towards enhancing the national consistency, capability and capacity of the services themselves. This includes embedding person-centred and community-based support and healing for First Nations Peoples and other Priority Groups, and enhancing data collection and reporting.

Priority Actions



- 3.1. Identify best-practice quality and safety standards for specialist elder abuse services, with a view to increasing nationally consistent standards
- 3.2. Better target service responses and referral pathways designed to address the needs of people who cause harm to older people, informed by research (refer to Focus Area 4)
- 3.3. Act to strengthen the 1800ELDERHelp phone lines, including by improving the capacity of staff to respond to calls and enhancing data collection and reporting
- 3.4. Increase equity of access to specialist services by considering service types, geographical distribution and the needs of First Nations Peoples and other priority groups, including removing barriers to seeking help and support
- 3.5. Strengthen the cultural competency and diversity of specialist service staff and embed a trauma-informed and culturally safe approach into a broad range of professional education re-sources relevant to preventing and responding to the abuse and mistreatment of older people
- 3.6. Improve the coordination, scope and consistency of education for professionals in relevant occupations to ensure they are equipped to identify and respond to ageism, abuse and mis-treatment, including in service systems
- 3.7. Engage with educational institutions to increase the availability of courses and pathways for individuals who wish to work or develop expertise in preventing the abuse and mistreatment of older people, aligned with sector needs

Focus Area 4

Address gaps in the evidence base and increase collaboration

The first National Plan played an important role in increasing national understanding of the abuse and mistreatment of older people. The delivery of Australia's first National Elder Abuse Prevalence Study in 2021 provided a foundational understanding of abuse rates and risk factors, as well as characteristics associated with people who cause harm to an older person.

The Prevalence Study, and other national, state and territory research projects, provided a strong evidence base to build upon. However, we know research gaps remain and that improved data collection is required to drive evidence-based policy, evaluation and accountability. In particular, we recognise the importance of longitudinal data collection to monitor the impact of our work over time. This data will improve our understanding of a range of causal factors and drive meaningful responses.

This National Plan will also work to improve and share access to data and information, to support First Nations Peoples to make informed decisions relevant to achieving the vision of this plan, in line with Priority Reform Four of the National Agreement on Closing the Gap.

Developing an evidence-based prevention framework for the abuse and mistreatment of older people will be a key mechanism through which this National Plan will sharpen the effectiveness of prevention and early intervention strategies nationally. This framework will provide national guidance on developing new prevention focused activities and how to strengthen existing approaches.

Other priority areas of research include:

- a targeted focus on gaps identified in the Prevalence Study, including the experience and needs of First Nations Peoples and other Priority Groups
- improved understanding of the different types of abuse, to better inform responses and address barriers to seeking help
- better understanding how ageism, including systemic ageism and unconscious bias, drives abuse and mistreatment of older people, and effective interventions
- understanding the abuse and mistreatment of older people over the life course, including a focus on recovery and healing
- understanding the economic cost of the abuse and mistreatment of older people
- improving understanding of the profiles, behaviours and motivations of those who cause harm to or mistreat older people, specifically within an Australian context.

The Australian Government will also continue significant investment through the Medical Research Future Fund's Dementia, Ageing and Aged Care Mission to improve outcomes for older people and people living with dementia. This research is focused on taking an inclusive approach to improving the quality of life of all people as they age, including improving the consistency and quality of care for older people across all care settings in Australia.



This National Plan recognises that research must be conducted inclusively so learnings from those who face intersectional barriers (inclusive of those with severe or profound disability) are being adequately captured and considered.

We are committed to increasing collaboration across government, relevant sectors, academia and the community to ensure shared learning of best practice. A broad approach will be taken to encourage involvement from sectors that have important intersections with this work, such as those who work in broader family and domestic violence and disability services. We will also look closely at international research to ensure we are learning from the experiences of other

countries and drawing on what has worked well in difference contexts.

Increased collaboration will not only ensure we are more efficient and effective in delivering outcomes but will also support us to move towards a more nationally consistent and/or coordinated response to the abuse and mistreatment of older people.

A key mechanism to achieve collaboration across the life of this National Plan is to establish dedicated communities of practice that meet at regular intervals. Increased collaboration can help to improve transparency and direct engagement with this work and must include the voices of people with lived experience of abuse and mistreatment.

Priority Actions



- 4.1. Develop a national evidence-based prevention framework to guide efforts to end ageism and the abuse and mistreatment of older people
- 4.2. Develop a Monitoring and Evaluation Framework for this National Plan, including a staged approach to identifying data gaps and improving data collection and reporting
- 4.3. Prioritise and undertake research that addresses gaps in the Australian evidence base on the abuse and mistreatment of older people and ageism, including gaps identified in this National Elder Abuse Prevalence Study
- 4.4. Strengthen government, relevant sectors (including academia) and community collaboration through investment in dedicated communities of practice, inclusive of the diverse experience of people with lived or living experience of abuse and mistreatment
- 4.5. Strengthen government, relevant sectors (including academia) and community engagement through investment in key forums such as the Australian Elder Abuse Conference Series

Appendices

Appendix 1: Help and support services

Crisis support (please call 000 in an emergency)

Service name	Contact details
Lifeline A national charity providing all Australians experiencing emotional distress with access to 24-hour crisis support and suicide prevention services. Available 24/7.	13 11 14 http://www.lifeline.org.au
1800RESPECT National domestic, family and sexual violence counselling, information and support service.	1800RESPECT www.1800respect.org.au
13 YARN Support line for mob who are feeling overwhelmed or having difficulty coping. 24/7 crisis support for Aboriginal and Torres Strait Islanders.	13 YARN (13 92 76) www.13YARN.org.au
Open Arms – Veterans & Family Counselling Free and confidential counselling for current and former serving ADF members and their families.	1800 011 046 www.openarms.gov.au

National support services for older people experiencing abuse (which can link you to local services in your state or territory)

Service name	Contact details
1800ELDERHelp National support line for the abuse and mistreatment of older people.	1800ELDERHelp (1800 353 374)
Compass.info The national online knowledge hub of resources and information about services relevant to the abuse and mistreatment of older people.	www.compass.info

Aged care related services

Service name	Contact details
My Aged Care Provides information and support to understand, access and navigate the aged care system.	1800 200 422 www.myagedcare.gov.au
Older Persons Advocacy Network (OPAN) OPAN is a national network of nine, non-profit organisations that provides free, confidential and independent information and support to older people seeking or receiving government-funded aged care as well as their families and other representatives.	1800 700 600 www.opan.org.au
Department of Veterans' Affairs (DVA) Provides information to DVA clients on available services and support.	1800 VETERAN (1800 838 372) www.dva.gov.au
National Aged Care Advocacy Program (NACAP) NACAP provides free and confidential advocacy support to older people, their family and carers (via OPAN). It also helps aged care service providers to understand their responsibilities and the aged care rights of the people they care for.	1800 011 046 www.openarms.gov.au

Family, domestic and sexual violence services

Service name	Contact details
MensLine Australia 24/7 national professional telephone counselling support for men with concerns about mental health, anger management, family violence (using and experiencing), addiction, relationship, stress and wellbeing.	1300 789 978 www.mensline.org.au
No to Violence No to Violence specialises in effective evidence-informed engagement with men and its primary concern is the safety and wellbeing of women and children.	1300 766 491 www.ntv.org.au/

Other support services

Service name	Contact details
<p>National Disability Abuse and Neglect Hotline</p> <p>A free, independent and confidential service for reporting abuse and neglect of people with disability. Anyone can contact the hotline, including family members, friends, service providers or a person with disability.</p>	<p>1800 880 052 (toll free)</p> <p>NRS Dial 1800 555 677 then ask for 1800 880 052</p> <p>TIS number 13 14 50</p> <p>Email: hotline@workfocus.com</p>
<p>Translating and Interpreting Service</p> <p>If you are a non-English speaker, you can use the Translating and Interpreting Service.</p>	<p><u>Translating and Interpreting Service</u></p> <p>131 450</p>
<p>National Relay Service</p> <p>For callers who are d/Deaf, hard of hearing or have a speech impairment.</p>	<p>TTY/Voice Calls: call 133 677</p> <p>Speak and Listen: call 1300 555 727</p>
<p>Aboriginal Interpreter Service (AIS)</p> <p>Helps to address language barriers faced by Indigenous People in the Northern Territory. Interpreters are trained to work in a wide range of settings and environments including legal and justice systems, health care, education, social services and community engagement.</p>	<p>1800 334 944 (24 hours)</p> <p>Email: ais@nt.gov.au</p>

Appendix 2: Glossary

Abuse and mistreatment

This National Plan uses the term ‘abuse and mistreatment’ to capture the wide range of conduct that can be considered elder abuse. This approach is intended to ensure that the language used in this plan resonates with a broad audience and is not in any way intended to diminish the impact or severity of abuse, or the importance of accountability to provide safe care and supports.

This National Plan acknowledges that there are a range of many words that may be more appropriate to describe abuse or mistreatment in particular contexts, including violence, neglect, exploitation or harm.

Aged care

Aged care refers to the delivery of Australian Government-funded aged care services to individuals under the Commonwealth aged care system.

Ageism

This National Plan uses the World Health Organization’s definition of ageism: ‘ageism refers to the stereotypes (how we think), prejudice (how we feel) and discrimination (how we act) towards others or oneself based on age.’

Attorney or enduring attorney

The person appointed under a power of attorney to make decisions on another person’s behalf. An attorney can be appointed for a specified time (such as when the principal person is overseas and wants another person to manage their financial affairs) or for all decisions into the future (enduring).

Autonomy

The ability to make an informed, uncoerced decision for oneself and/or the ability pursue a course of action in one’s life free from the interference from others.

Culturally and linguistically diverse (CALD)

This is an acronym used to refer to culturally and linguistically diverse communities. It describes communities with diverse languages, ethnic backgrounds, nationalities, traditions, societal structures and religions. In Australia, the term is often used to describe communities whose members are migrants or speak a language other than English as their first language, which can sometimes become a barrier when health and legal information is not accessible. It is also noted that many English speakers who identify with a variety of ethnic and cultural backgrounds can face cultural barriers to accessible information and services.

Capacity

This term is often used when talking about a person’s ability to make decisions for themselves and to understand the consequences of those decisions. Capacity is functional and, as a starting point, should be presumed for an older person (‘presumption of capacity’). Advanced age or a diagnosis of dementia does not necessarily mean a person has diminished capacity.

A trusted person can be appointed to support the decision making of someone with diminished capacity. A person can also nominate, or have appointed, a substitute decision maker in the event that they no longer have capacity.

Carer or caregiver	Someone who gives care and support to a relative or friend who needs help with their day-to-day living is known as their carer or caregiver. In Australia, carers can access support through the Carer Gateway .
Co-dependent relationship	When two people are dependent on one another for their day-to-day living. If one person in the relationship is experiencing hardship or stress, it may affect their ability to provide care to the other person, who can then become at risk of abuse or neglect.
Compass.info	The national online knowledge hub of resources and information about services relevant to the abuse and mistreatment of older people.
Home or community aged care	Home or community aged care refers to aged care services delivered in a home or community setting. These services are delivered by a service provider and are subsidised under the Commonwealth Government aged care system.
Intersectionality	<p>This National Plan uses intersectionality to describe the interconnected nature of social categorisations, such as those listed above, that create overlapping and interdependent systems of discrimination and disadvantage or power and privilege for an individual or group. These forms of disadvantage are often manipulated by a person causing harm to maintain power and control.</p> <p>This approach recognises both the systemic issues that need to be addressed and the individual approaches required to reduce systemic barriers across the whole service system to ensure that no older person falls through the gaps.</p>
Decision making	<p>Everyone has the right to make their own decisions and choices, including choices about where to live, how to live, their money and their health. Even when a person may not be able or willing to make financial or legal decisions, they can often still be able to make decisions about their daily life.</p> <p>Supported or substitute decision makers can be appointed for people who are no longer able to make their own decisions or who require assistance to do so.</p>
Elder	While this term can be used to refer to any older person, the term 'Elder' has significance for the Aboriginal and Torres Strait Islander communities, where an Elder is someone who is recognised as a custodian of knowledge and lore and has permission to disclose knowledge and beliefs.
Enduring guardian	The term given in most states to a person appointed to make personal and medical treatment decisions on another's behalf. Terminology may vary between states and territories.
Enduring power of attorney	A legal document that authorises an attorney to make legal and financial decisions on another person's behalf if they lose capacity. Each state and territory has different rules and documentation around powers of attorney. Also known as an Advance Personal Plan (APP) in the Northern Territory.

Evidence-based	Describes models, approaches or practices found to be effective through evaluation or peer reviewed research. Evidence is usually published and may be found in full or summarised in academic research documents, organisational reports, program evaluations, policy papers and submissions. There is a strong evidence base for strategies to prevent gender-based violence.
Family agreement or arrangement	This arrangement is one between an older person and someone else (often a family member) regarding care and living arrangements. It involves the older person exchanging their property or assets in return for housing and/or care as they age. It's sometimes called an Assets for Care arrangement.
Family member	<p>Defined broadly for the purposes of this National Plan and includes family like relationships. We acknowledge that there is currently no national definition of family and domestic violence but governments are working towards consistent terminology as part of the <i>National Plan to End Violence against Women and Children 2022–2032</i>. For the purposes of this plan (National Plan to End the Abuse and Mistreatment of Older People 2024–2034) a family member in relation to an older person may include:</p> <ul style="list-style-type: none"> • a person's spouse or domestic partner or who has had an intimate personal relationship (whether sexual or not) with the relevant person • a child or stepchild of that person or their partner • a person who is, or has been, a relative of the older person, including sibling, in-law, grandchild, nephew • kinship relationships within First Nations cultures and systems • any other person the older person regards as being a family member and who is regarded as such by others, including someone with the responsibility for their care, whether paid or unpaid.
Human rights	Human rights are rights inherent to all human beings, regardless of race, sex, nationality, ethnicity, language, religion or any other status.
Isolation	People who are isolated and are living without their desired level of social contact may feel lonely and anxious. Together, loneliness and isolation can have a negative effect on their health and wellbeing and may put them at higher risk of abuse and being taken advantage of. People can be isolated because of their geographical location (such as living alone or in a small town with limited transport options), communication or mobility difficulties, or their social circumstance (having few friends or family).
Human rights	Human rights are rights inherent to all human beings, regardless of race, sex, nationality, ethnicity, language, religion or any other status.

Isolation	People who are isolated and are living without their desired level of social contact may feel lonely and anxious. Together, loneliness and isolation can have a negative effect on their health and wellbeing and may put them at higher risk of abuse and being taken advantage of. People can be isolated because of their geographical location (such as living alone or in a small town with limited transport options), communication or mobility difficulties, or their social circumstance (having few friends or family).
Kinship	The kinship system is a central feature of First Nations Peoples' socialisation and family relationships. The concept of kinship describes a person's responsibilities towards other people, the land and natural resources. Kinship is a system that determines how people relate to one another and their surroundings, with the aim of creating a cohesive and harmonious community. It determines not only responsibilities towards others but also how one relates to others through marriage, ceremony, funeral roles and behaviour patterns (wording adapted from the Watarrka Foundation).
LGBTQIA+	This inclusive acronym is used to describe people and communities who identify as lesbian, gay, bisexual, transgender, intersex, asexual and/or other sexuality and gender diverse identities.
National Elder Abuse Prevalence Study	This study involved a telephone survey of 7,000 people aged 65 and over and 3,400 people aged 18 to 64. By asking people about their experience and knowledge of abuse, the researchers were able to estimate the likely prevalence of the abuse of older people in Australia.
People with lived and living experience of abuse or mistreatment	This National Plan refers to older people who have experienced, or continue to experience, the impact of abuse and mistreatment as 'people with lived and living experience'. This emphasises that everyone experiences abuse and mistreatment differently and moves away from language that may victimise an older person.
Primary prevention	This term refers to the activities and efforts made to address the root, or 'primary', causes of social or public health problems. Primary prevention activities to address the abuse and mistreatment of older people include discouraging ageist behaviour and encouraging inclusive, age-friendly communities.
Public or state trustee	Public Trustees exist in all states and territories of Australia although their titles may vary. They are mainly government agencies or government backed and each has its own governing legislation. These agencies have similar roles and functions and vary only slightly. Broadly they are responsible for providing a range of services for the people of their respective state/territory including: will drafting; acting as executor, administrator, trustee, attorney; or financial manager/administrator. For example, a public trustee may be appointed to act as an executor of a person's will upon the request of the person or may be appointed by a court or tribunal to manage/administer a person's property and affairs where they are not able to manage for themselves.

Residential aged care	Residential aged care refers to a group living facility where staff provide aged care services including nursing services. These services are delivered by a service provider and are subsidised under the Commonwealth Government aged care system. Residential aged care may also be known as an aged care home, residential aged care facility or a nursing home.
Restrictive practices	A restrictive practice is any practice or intervention that has the effect of restricting a person's rights or freedom of movement. The five types of restrictive practices are chemical restraint, physical restraint, environmental restraint, mechanical restraint or seclusion. There are legislative requirements governing the use of restrictive practices in aged care. This includes a requirement that a restrictive practice is only used as a last resort to prevent harm.
Safeguarding	This term is used in this National Plan to describe actions taken by a person, organisation or community to promote and protect the health, wellbeing and human rights of a person to live free from abuse and mistreatment. Jurisdictions have different laws, regulatory frameworks and approaches to adult safeguarding. NSW, South Australia and the ACT, for example, have agencies that undertake adult safeguarding functions with investigatory powers.
Social abuse	Forcing someone to become isolated by restricting their access to others including family, friends or services. This can be used to prevent others from finding out about the abuse.
Systemic or structural ageism	Systemic ageism occurs where the laws, rules, social norms, policies and practices of institutions unfairly restrict opportunities and systematically disadvantage people on the basis of their age. It can also include the age based actions of individuals who are part of these institutions, such as the staff of a hospital or aged care facility.
Trauma	The psychological, emotional, cultural and/or physiological impact an experience has had on an individual as a result of the heightened stress that accompanies threatening or violent experiences and life-challenging events. Trauma can arise from a single or repeated adverse experience.
Trauma-informed	To be trauma-informed is to recognise the widespread impact of trauma and actively avoid re-traumatisation.