

# National Plan to End the Abuse and Mistreatment of Older People

2026 – 2036



A joint Australian, state and  
territory government initiative

## About this report

ISBN 978-1-921357-68-8 (Print)

ISBN 978-1-921357-67-1 (Online)

With the exception of where otherwise stated, all material presented in this publication is provided under a [Creative Commons Attribution 4.0 International License](https://creativecommons.org/licenses/by/4.0/).



The details of the relevant license conditions are available on the [Creative Commons website](https://creativecommons.org/licenses/by/4.0/) as is the full legal code for the CC-BY 4.0 license.

The First Nations artwork and graphic elements on pages 1, 6-7 and 28-32 is provided under the following attribution and copyright notice – @ Bek Weddell, ginyaangart **Held 2024**.

# Contents

Foreword	5
Acknowledgment of Country	6
Acknowledgments	8
Help and support	8
Introduction	9
Our vision	9
Outline of National Plan structure	9
Key terminology	12
What is the abuse and mistreatment of older people (elder abuse)?	14
Types of abuse and mistreatment of older people	16
Relationships and settings in which the abuse of older people can occur	19
Links to other initiatives that achieve outcomes for older people	20
Impact of the <i>National Plan to Respond to the Abuse of Older Australians (2019-2023)</i>	22
What we know	22
The abuse and mistreatment of older people is prevalent in Australia	22
Ageism is a driver of abuse	25
Gender and the abuse of older people	25
Risk and protective factors	26
First Nations Peoples	28
Culturally and linguistically diverse communities	33
Broader social context of this plan	35
Implementation and governance	39
Principles	43
Principle 1: Taking a human rights approach	43
Principle 2: Ending ageism	46
Principle 3: Listening to and learning from the experiences of older people and diverse communities	48
Principle 4: A strong focus on prevention and early intervention	50
Principle 5: Supporting individual decision-making, autonomy and dignity	52
Principle 6: A person-centred and trauma-informed response	54
Focus Areas	56
Focus Area 1: Increase whole-of-community awareness, education and engagement	56
Focus Area 2: Improve laws and systems to promote and protect the rights of older people	59
Focus Area 3: Strengthen the capacity and capability of services, including through targeted education and training for professionals	65
Focus Area 4: Address gaps in the evidence base and increase collaboration	69
Appendices	71
Appendix 1: Help and support services	71
Appendix 2: Glossary	75



# Foreword

Every person has the right to make their own decisions, live free from abuse and mistreatment and to be treated with dignity and respect, no matter their age. Despite this, older people in Australia are continuing to experience abuse and mistreatment, often from people they trust and in settings which should be the safest of all, such as in their homes, in care settings and within their immediate communities. This abuse and mistreatment has devastating consequences, and denies older people the ability to live safely and with dignity and autonomy.

The *National Plan to End the Abuse and Mistreatment of Older People 2026 – 2036* builds on the progress made through the first National Plan and reflects a more ambitious commitment by the Australian Government and state and territory governments, to drive change over the coming decade.

Our vision is that all older people are safe, valued, heard and respected; have their rights protected and promoted; and live free from abuse and mistreatment. Realising this vision will take a whole of community response, but together we can create change.

This National Plan is the result of extensive research, planning and consultation. We thank the many people and organisations who have provided feedback and insights to shape this work. We acknowledge and extend our thanks to the people with lived and living experience of abuse, and their advocates, who have shared their experience and expertise with us.

This National Plan has been endorsed by the Standing Council of Attorneys-General, reflecting our shared commitment to achieving real and lasting change.

- The Hon. Michelle Rowland MP – Attorney-General, Australian Government
- The Hon. Michael Daley MP – Attorney General, New South Wales
- The Hon. Sonya Kilkeny MP – Attorney-General, Victoria
- The Hon. Deb Frecklington MP – Attorney-General and Minister for Justice and Minister for Integrity, Queensland
- The Hon. Dr Tony Buti MLA – Attorney General, Western Australia
- The Hon. Kyam Maher MLC – Attorney-General, South Australia
- The Hon. Guy Barnett MP – Attorney-General, Tasmania
- Tara Cheyne MLA – Attorney-General, Australian Capital Territory
- The Hon. Marie-Clare Boothby MLA – Attorney-General, Northern Territory



## Acknowledgment of Country

Australian, state and territory governments acknowledge and recognise all Aboriginal and Torres Strait Islander peoples throughout 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 our respects to Elders throughout the thousands of generations and thank them for their ongoing contribution, guidance and support. The term First Nations people is used in this National Plan to be inclusive of all Aboriginal and Torres Strait Islander peoples.



**Artwork by Bek Weddell, ginyaangart**

The 4 Focus Areas are represented in the blue circles and the mountains represent the 6 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. @ Bek Weddell, ginyaangart *Held* 2024.

## 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 and allies
- First Nations people
- people with disability
- culturally and linguistically diverse people
- lesbian, gay, bisexual, transgender, intersex, queer, and asexual (LGBTIQA+) people<sup>1</sup>
- 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.

---

<sup>1</sup> Many government and community plans and policies, as best-practice for inclusive language, include the commonly used acronym 'LGBTIQA+'. This National 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 LGBTIQA+ people and rejected by others. For some people, especially older LGBTIQA+ people, 'queer' continues to hold negative meanings because of its origins. This National 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, social and economic 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, 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 are safe, valued, heard and respected; have their rights protected and promoted; and live free from abuse and mistreatment

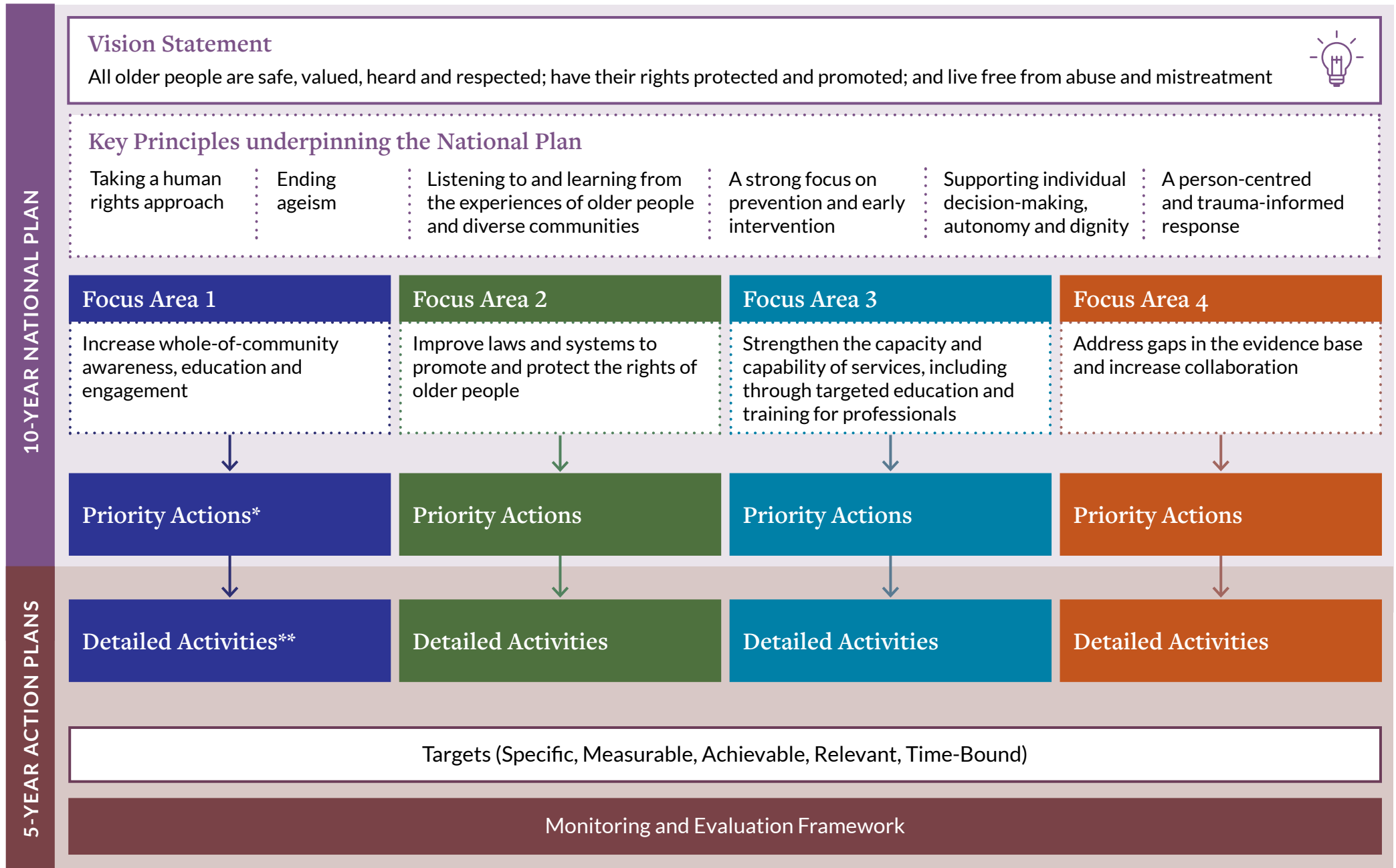
This Vision Statement defines the change that Australian, state and territory governments wish to see over the life of this National Plan and beyond.

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 pages are included to assist readers to navigate this National Plan. They outline the 6 key Principles that underpin the National Plan as a whole, along with the 4 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 5-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 5-year Action Plans

# Focus Areas

These are the high-level priorities which will guide action over the life of this National Plan, and its underpinning Action Plans.



## 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 living in Australia is unacceptable, regardless of citizenship or visa status.

In Australia, an older person is typically defined as being aged 65 and over, or 50 and over for First Nations people which is reflective of a number of factors, including trauma experiences and lower life expectancy. This is the definition that will be used for the purposes of this National Plan. We recognise that the living experience of ageing is different for everyone and is influenced by a wide range of factors. Therefore, consideration of age should be flexible for the purposes of this National Plan as we note some services will provide support to people at other ages.

**Elder abuse:** This National Plan primarily refers to the abuse and mistreatment of older people, rather than 'elder abuse'. The change in wording accounts for First Nations peoples' culture, and other diverse cultures, which defines an 'Elder' to be 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 can also differ between First Nations communities. This National Plan refers to the abuse of older people on the basis of being senior in age. We also understand that the term 'elder abuse' does not resonate or translate well more broadly, including in many culturally and linguistically diverse communities.

We acknowledge that the term 'elder abuse', as defined by the World Health Organization (WHO), remains a commonly used 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.

**Carer:** This National Plan recognises that the term carer is understood differently across different contexts, cultures, communities and jurisdictions. Aligning with the *Carer Recognition Act 2010* (Cth) this National Plan refers to 'carer' as a person who provides personal care, support and assistance to the other person because they have one or more of the following: a disability; a medical condition (including terminal or chronic illness); a mental illness; or is older and frail. A carer may receive government financial assistance to carry out their role as a carer, however, a person is not a carer in this context if they are under a contract of service, undertaking voluntary work, or providing care as part of a course of study.



**Person causing harm:** This National Plan refers to a perpetrator of abuse and mistreatment as a 'person causing harm', noting that different terms are used in different jurisdictions and contexts. 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 those causing harm are often immediate family members, current or former spouses, or individuals in close relationships.

People who cause harm may have lived or living experience of abuse and may face challenges such as substance dependence, gambling addiction, mental health conditions or disabilities, which may contribute to the dynamics of abuse. Most people with these experiences and challenges do not abuse or mistreat an older person, and while their presence does not excuse abuse or reduce the importance of accountability, they show us opportunities for intervention.

The term 'perpetrator' can be unhelpful for recognising abuse and mistreatment, preserving relationships (where this is desired and safe) and 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. As harm caused by abuse and mistreatment can range up to serious injury or death, this terminology is intended to assist people to identify abuse or mistreatment in any circumstance it may occur, without creating assumptions about a person's intention. It is not 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 and may be able to refer them to appropriate services. A non-exhaustive list of professionals is included in the glossary provided at [Appendix 2](#).

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

**Groups at an increased risk of abuse and mistreatment:** This National Plan acknowledges the diverse experiences and characteristics of older people and is committed to ending all abuse and mistreatment directed towards them. We also recognise abuse and mistreatment can be different for people and groups based on their lived and living experience of discrimination, disadvantage, stereotyping and ageism.

This can include (but is not limited to) First Nations people; Stolen Generation survivors; people with lived and living experience of abuse and mistreatment; culturally and linguistically diverse people; LGBTIQ+ people; older women; people with disability; veterans and war widows(ers); people who are socially isolated or live in remote or rural areas; people who are financially or socially disadvantaged and people with low literacy (including low digital literacy or engagement).

These groups of older people may face unique and more complex barriers in seeking and receiving assistance and support. We acknowledge that people may hold multiple identities that intersect to compound their risk of abuse and/or add additional barriers to seeking support or help. Our strategic actions in this National Plan are informed by their diverse knowledge and experiences to end the abuse and mistreatment. This can be achieved by being responsive to their needs, and harnessing their strengths to increase protective factors including connecting with wraparound community supports.

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

The 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.*<sup>2</sup>

Abuse and mistreatment can be deliberate or unintentional. It can be violent, overt or subtle, can be repeated over a period of time, and may manifest as **coercive control**.

It can occur in person or be facilitated through technology. It is often recognised as a unique form of family and domestic violence and can be caused by family members, including chosen family, former intimate partners, or trusted people such as friends and support workers. 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 National 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, disrespect, exploitation or harm. This National Plan captures actions to prevent and address abuse and mistreatment across this broad spectrum of conduct.



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



**Coercive control** is when someone uses patterns of abusive or controlling behaviours against another person over time, with the effect of establishing and maintaining power and dominance over them. This behaviour can be used to manipulate an older person's feelings and actions, create fear, and take away their freedom and independence over time. Someone who uses coercive control might do this through emotional, financial, physical, sexual, cultural or spiritual abuse, and/or neglect.

Coercive control is almost always an underpinning dynamic of family and domestic violence.

Coercive control can be a defining feature of abuse of an older person. It can happen in intimate partner relationships, even after they've ended. It can also happen in family or other close relationships, such as chosen family. Adult children can use coercive control against parents and a person can use

coercive control against an older family member they are caring for.

Coercive control can include exploiting the older person's need for care or other types of dependence, or the manipulation of a sense of parental responsibility or obligation, to benefit the person causing harm and to the detriment of the older person. It can be hard to identify, 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. Technology-facilitated psychological abuse, sexual abuse and financial abuse can also be common features of coercive control.

Australian governments have agreed on the National Principles to Address Coercive Control in Family and Domestic Violence, and published a factsheet on how this can affect older people.<sup>3</sup>



Jill, 85, is a widow who lives in her own home in a regional town. Jill had a home care arrangement until her son, Ben, recently cancelled it and said he would take care of her instead. Ben has been opening Jill's mail and answering her phone calls. He also took Jill's bank cards, saying he would use them for the household shopping, but she doesn't know how her money is being spent. She feels scared to complain, because Ben often threatens 'to put her in a nursing home'. If Jill doesn't do what Ben wants, he gets angry and doesn't let Jill see his children, whom she adores.

Recently, without Jill's consent, Ben booked an appointment with a lawyer and suggested

Jill appoint him to have power over her financial affairs under an Enduring Power of Attorney. Ben said it was important because of all the money Jill had saved up. When Jill asked how Ben knew about her savings, Ben told her that she 'must be losing it' and that she had told him this information herself. This made Jill feel confused, upset, and worried that she cannot trust her own memory.

Ben told Jill that she was too old to be driving and took her car keys away, even though Jill's doctor had said it was safe for her to keep her licence. Without her car, Jill can't visit friends or family or go anywhere by herself.

<sup>3</sup> Standing Council of Attorneys-General, *National Principles to Address Coercive Control in Family and Domestic Violence*, Attorney-General's Department, 2024; Standing Council of Attorneys-General, *Understanding how coercive control can affect older people*, Attorney-General's Department, 2024.

# Types of abuse and mistreatment of older people

There are 6 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. The forms of abuse are not mutually exclusive, and sometimes abuse may fall into more than one category.

## 1 Physical abuse

Acts that cause physical pain, injury or death, use force or unlawful physical restraint on an older person, or cause fear of such abuse. It can include physical violence such as hitting, pushing, kicking, restraint such as locking an older person in a room or intentionally putting older people in a position they cannot escape, or the misuse of prescription medication or other drugs, sometimes referred to as chemical abuse.

## 2 Sexual abuse

Acts of a sexual nature inflicted on an older person without their consent. It includes inappropriate sexual conduct as well as non-contact actions. 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 technology-facilitated sexual abuse, such as non-consensual taking and sharing of intimate images, sexual extortion, online sexual harassment and online dating abuse. 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, distress, or are demeaning to older people. It can include, but is not limited to: insulting, threatening or coercing an older person, acts to humiliate, disrespect, or risk reputational damage, stalking, withholding affection or relationships to cause harm (such as unreasonably denying an older person access to family members, including grandchildren), and controlling behaviours like isolating a person from their normal social contacts, activities or supports (often referred to as **social abuse**). Isolating or denying access to family and other relationships refers to unreasonable and deliberate acts, and could include exclusion from a family event, or isolating older people from their grandchildren.

## 4 Financial abuse

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, fraudulently using finances without permission, denying access to their money, not contributing to household expenses where previously agreed, using a legal document such as an Enduring Power of Attorney for purposes outside that for which it was established, withholding care and supports for financial gain, selling or transferring property against a person's wishes, pressuring an older person into a disadvantageous financial arrangement, forging their signature or other coercive behaviours.

## 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 or repeated 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 assist with bathing), unmet physical needs (like withholding dentures or a walking frame), refusing to allow others to provide appropriate and safe care and support, or abandonment of an older person with insufficient care or support. Neglect can also occur when carers do not have the skills, understanding, support or resources to appropriately care for an older person.

## 6 Cultural or spiritual abuse

Acts which use the cultural or spiritual beliefs (or lack thereof) of older people to control, intimidate or isolate. Cultural or spiritual abuse can be the erosion or denial of cultural identity, values, beliefs and practices. This can occur when an older person is restricted from practising or being connected with their cultural, spiritual or religious activities, such as not allowing them to attend their place of worship. For culturally and linguistically diverse communities, it can occur when an older person is prevented from using their preferred language, conflicting

cultural values are imposed on them or they are expected to maintain certain cultural obligations and responsibilities (such as grandparents sharing resources with family, maintaining family bonds or caring for children). Abuse can also occur by ridiculing or making fun of the older person's religious or spiritual beliefs (or absence of such beliefs) to undermine their sense of identity or self-confidence, or using religion or religious texts/teachings to minimise, deny or justify acts of violence, abuse or mistreatment.<sup>4</sup>

For First Nations people, cultural or spiritual abuse can include preventing older people from visiting or returning to Country, having contact with kin, or sharing and maintaining family bonds or not acknowledging cultural or spiritual practices. It can occur when identity is questioned due to a lack of cultural connection, particular amongst Stolen Generation survivors. Cultural or spiritual abuse for First Nations people is explored further below.



4 M Truong, 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.

## Spotlight on emerging experiences

**Inheritance impatience** occurs when someone feels entitled to the assets or resources of an older person. This could cause the person to try to take the older person's belongings, pressure or coerce them to transfer or share assets or expedite residential care arrangements in order to sell their home. Examples include; stealing money from a parent or grandparent's bank account, or pressuring someone to transfer an asset earlier than planned or expected or to change their will.<sup>5</sup>

**Technology-facilitated abuse** occurs online or through other digital technology. Examples include; forbidding access to or limiting the use of technology and internet connected devices, interfering with technology that someone requires to maintain their physical and/or mental wellbeing (such as medical devices and assistive technologies), accessing their online accounts without their consent; changing the passwords or passcodes to their devices and online accounts so that they cannot use them without permission or assistance. It may also include scams facilitated online.

**Scams** are not new, but technology and increased reliance on the digitised world for economic and social activity has resulted in a higher prevalence of online scams affecting society, including impacting older people. Reports made to the National Anti-Scam Centre Scamwatch service indicate that people aged 65 and over account for approximately 30% of total scam losses.<sup>6</sup> Scams occur when a person deliberately attempts to falsely gain a person's trust in order to deceive them into making a payment or giving personal information.<sup>7</sup> Examples include; relationship or romance scams, where the scammer may use sophisticated and convincing techniques to create an apparent trusted relationship, followed by pressure to steal money or information from them. Other intersecting factors, such as cognitive impairment, social isolation and digital illiteracy can increase older people's vulnerability to scams.

<sup>5</sup> Compass, *10 common forms of elder financial abuse*, Compass, 2023.

<sup>6</sup> Approximately 35% of the losses incurred by this cohort are reported to have come from a scam initiated or conducted via email.




<sup>7</sup> Australian Banking Association, *Safe & Savvy – a guide to help older people avoid abuse, scams and fraud*, Commonwealth Bank of Australia, November 2019; *The Scams Prevention Framework Act 2025* includes a definition of scams for the purposes of protecting consumers against this harm.

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

Older people can experience abuse and mistreatment within family, carer, intimate and close personal relationships, and in service and institutional contexts where there is an expectation of trust or a more formal duty of care. This National Plan recognises ‘family’ includes chosen family and other kinship relationships, and ‘intimate relationships’ refers to an intimate partner, partners, or ex-partner, regardless of their gender.

As outlined below, these relationships can also represent important sources of help and support, although research to date indicates that only around 1/3 of people (36%) who experience abuse or mistreatment seek help or advice from a third party.<sup>8</sup>

**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"> <li>• Research to date shows that family members (mostly adult children) are the biggest group of people who cause harm to older people.</li> <li>• This can include unreasonably and intentionally denying opportunities to have a relationship and spend time with family, such as grandchildren, or other social connections.</li> <li>• Family members are often carers. They are a common source (41%) of help and support for people who experience abuse and mistreatment.</li> </ul>	<ul style="list-style-type: none"> <li>• Research to date shows that friends, neighbours and acquaintances (such as co-workers) reflect about one quarter of all people who cause harm.</li> <li>• Friends are also a common source (41%) of help and support for people who experience abuse and mistreatment. They can also be carers.</li> </ul>	<ul style="list-style-type: none"> <li>• Abuse and mistreatment can occur within service systems, institutions and within a range of professional relationships.</li> <li>• This may include within support relationships, including with disability, mental health and other support workers, within home or residential aged care settings, retirement villages and residential parks, the health system and within broader systems or institutions (such as government services or the justice sector).</li> <li>• Research shows support services are also a common place for people who experience abuse or mistreatment to seek help, particularly support workers (24%), police (17%) and lawyers (15%).</li> </ul>

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

<sup>8</sup> L Qu, R Kaspiew, R Carson, D Roopani, J De Maio, J Harvey, B Horsfall, [National Elder Abuse Prevalence Study: Final Report](#), AIFS, Australian Government, 2021, p 83.

# Links to other initiatives that achieve outcomes for older people

This National Plan takes a broad approach to ending 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. Elder abuse, including coercive control and sexual violence, is recognised as a form of family and domestic violence under this National Plan.

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

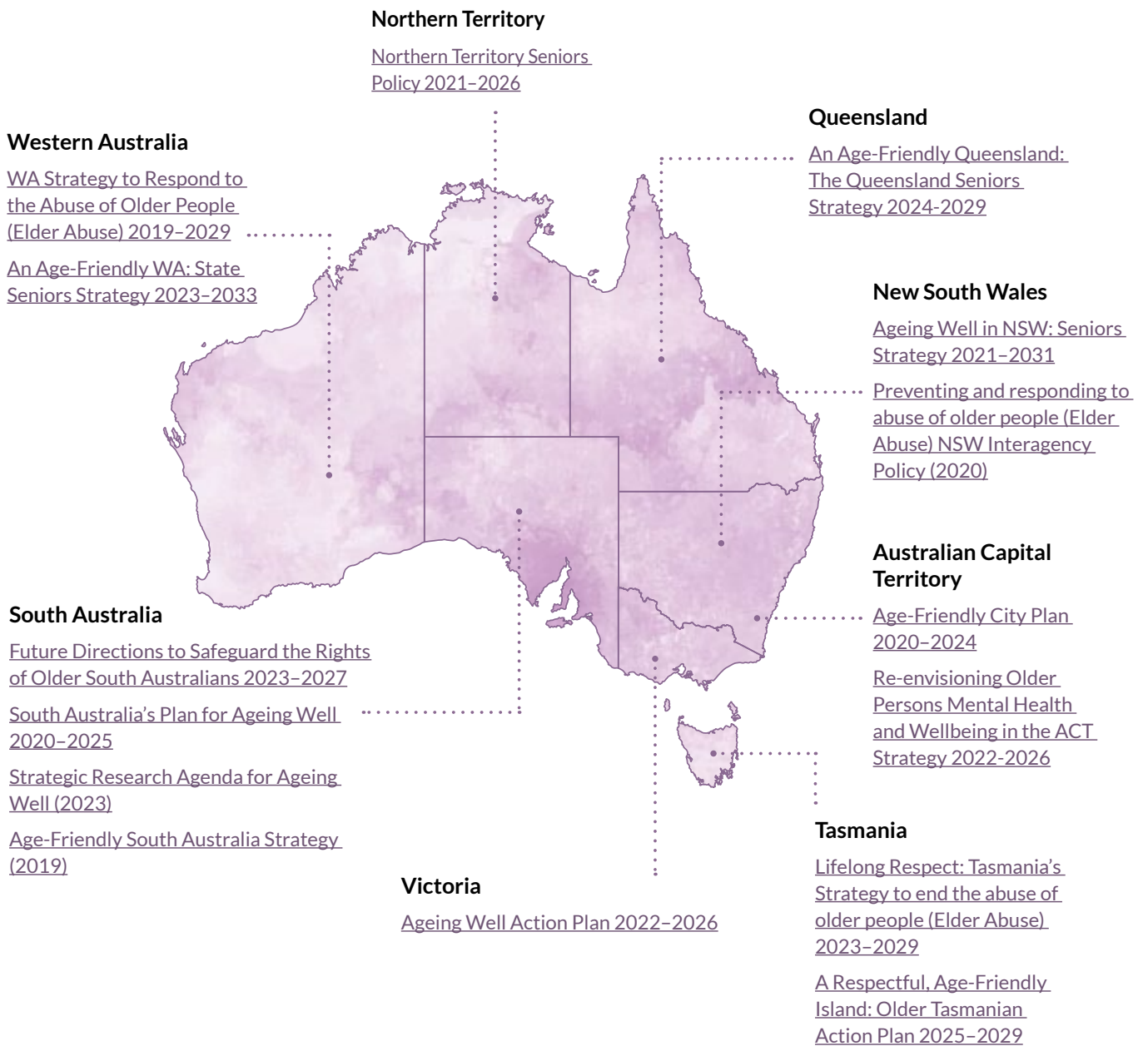


This National Plan should be viewed in conjunction with other Australian, state and territory government strategies and reform efforts that either directly or indirectly address the abuse and mistreatment of older people.

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

- National Agreement on Closing the Gap (2020)
- National Aboriginal and Torres Strait Islander Health Plan 2021-2031
- National Plan to End Violence against Women and Children 2022-2032
- The National Principles to Address Coercive Control in Family and Domestic Violence (2023)
- 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 (timeframe to be finalised)
- National Access to Justice Partnership 2025-2030
- National Preventive Health Strategy 2021-2030
- National Women's Health Strategy 2020-2030
- National Men's Health Strategy 2020-2030
- National Action Plan for the Health and Wellbeing of LGBTIQ+ People 2025-2035
- Australian Government response to the final report of the Royal Commission into Aged Care Quality and Safety (2021)
- National Carer Strategy 2024-2034
- National Dementia Action Plan 2024-2034
- National Care and Support Economy Strategy 2024-2034
- Defence and Veteran Family Wellbeing Strategy 2025-2030
- National Suicide Prevention Strategy 2025-2035.

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



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

The first National Plan helped unite Australian governments to respond to abuse of older people, encouraged information sharing between governments, and built improved understanding of abuse and effective responses.<sup>9</sup> It provided a solid foundation for this successor National Plan.

Key achievements under the first National Plan include funding a national research agenda on elder abuse, including Australia’s first National Elder Abuse Prevalence Study; establishing the national elder abuse peak body, Elder Abuse Action Australia; launch of the elder abuse knowledge hub, Compass.info; and delivering a national elder abuse awareness campaign in 2024.


The independent evaluation of the first National Plan indicates that further work is needed, including a focus on the needs of First Nations people and other groups at an increased risk of abuse and mistreatment, and on prevention efforts to end ageism and abuse and mistreatment of older people.<sup>10</sup> These findings have guided the development of this second National Plan.

---

## What we know

### The abuse and mistreatment of older people is prevalent in Australia

The National Elder Abuse Prevalence Study, released in 2021, found that 1 in 6 (14.8%) people aged 65 and over in the community 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, however the majority of people who experience abuse or mistreatment live in the community.<sup>11</sup>



**Cognitive impairment** is established as having a strong association with older people being susceptible to abuse.<sup>12</sup> 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](#)).

---

9 J McEwen, R Carson, R Kaspiew, J De Maio, B Horsfall, [Evaluation of the National Plan to Respond to the Abuse of Older Australians](#), AIFS, Australian Government, 2024.

10 McEwen, Carson, Kaspiew, De Maio, Horsfall, [Evaluation of the National Plan to Respond to the Abuse of Older Australians](#).

11 Between February and May 2020, 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. The experiences of Aboriginal and Torres Strait Islander and LGBTIQ+ older people, and people with cognitive impairment or living in aged care are not captured in this study. [In 2020, about 4.1 million Australians were aged 65 and over](#). The National Elder Abuse Prevalence Study estimated a 15% prevalence rate of elder abuse amongst those living in the community (over 615 000 people). The Royal Commission into Aged Care Quality and Safety estimated 243,000 people were in residential aged care in 2018-19. See pg. 23 of this National Plan for abuse and mistreatment estimates in residential aged care settings.

12 R Kaspiew, R Carson, H Rhoades, [Elder abuse: Understanding issues, frameworks and responses](#), AIFS, Australian Government, 2018, p 8.

## 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 2/3

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



However, **8 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%).

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



## Older people with a 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%).<sup>13</sup>



## People who cause harm are often close to the older person

The study found that the predominant relationship dynamic was intergenerational and familial, with adult children (18%), intimate partners (10%), partners of adult 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 21% and daughters 11% of people who cause harm.



Findings indicate that there are gendered patterns to the abuse of older people.<sup>14</sup>



## Overall, men are more likely to abuse an older person

than women, at 55% compared to 45%. Men were reported as the person causing harm for 65% of financial abuse, 77% of physical abuse and 79% of sexual abuse.

In 2023, **36% (57 victims)** of family domestic violence related homicide victims were aged 55 years or over.<sup>15</sup>



This is the highest number of homicides recorded in this cohort within the 2014-2023 comparison period, exceeding the 44 victims recorded in 2016. This is also a sharp increase from the average 30 homicide victims recorded in this cohort between 2018-2022.<sup>16</sup>

<sup>13</sup> Qu, Kaspiew, Carson, Roopani, De Maio, Harvey, Horsfall, National Elder Abuse Prevalence Study: Final Report, p 62.

<sup>14</sup> Qu, Kaspiew, Carson, Roopani, De Maio, Harvey, Horsfall, National Elder Abuse Prevalence Study: Final Report, p 62.

<sup>15</sup> Australian Bureau of Statistics (ABS), 'Recorded crime - victims', ABS, 2023.

<sup>16</sup> ABS, 'Record Crime - victims', ABS 2023 - Findings from Table 31 Victims of family and domestic violence related homicide and related offences (a), Selected characteristics by sex, Australia, 2014-2023, Australia.

Over 2023-24,

**16% of homicide victims**

**were aged 65 years and over,** and older women made up a larger proportion of all homicide victims than older men (21% compared to 13%).<sup>17</sup>



In this same period, **parricide** (the killing of a parent) represented 7% of all homicide incidents, the most frequent type of domestic homicide after intimate partner homicide, with men the majority of primary parricide offenders (15 male compared to 3 female offenders).<sup>18</sup> Research on the prevalence and nature of homicide of older people is limited and may require further investigation.

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.<sup>19</sup>



The Aged Care Serious Incident Response Scheme received an average of



reportable incidents each quarter in the 2023-24 financial year, for residential aged care.<sup>20</sup>

At the time of the Royal Commission into Aged Care Quality and Safety, the estimated prevalence of abuse in residential aged care was 39.2%, when counting all participants reporting all forms of abuse and/or neglect.<sup>21</sup>



The number of alleged incidents of unlawful sexual contact in 2018-19 was **2,520**.<sup>22</sup>

17 Australian Institute of Criminology (AIC), *'Homicide in Australia 2023-24'*, AIC, 2025, p 19-20.

18 AIC, *Homicide in Australia 2023-24*, p 12, 37.

19 Qu, Kaspiew, Carson, Roopani, De Maio, Harvey, Horsfall, National Elder Abuse Prevalence Study: Final Report, p 60.

20 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.

21 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.

22 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 rights and negatively affects older 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 disrespected and 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.<sup>23</sup>

Ageism can also contribute to an environment where a person causing harm to an older person fails to recognise that their behaviour is considered abuse and mistreatment. Other members of society can also 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 Framework being developed under this National Plan (refer to [Focus Area 4](#)).

## Gender and the abuse of older people

The intersection of gender and ageing can impact experiences of abuse, as the impact of gender inequality compounds over a lifetime. The National Elder Abuse Prevalence Study showed that the number of people reporting some experiences of abuse of older people varied based on gender, as did the gender of the person causing harm, with men reported as the person causing harm at a rate of 55%, compared to 45% of women.

Although the National Elder Abuse Prevalence Study could not report on experiences of gender diverse and trans people, research on these experiences will be released over the life of this plan. LGBTIQ+ experiences are discussed further in 'Risk and protective factors' below.



23 Qu, Kaspiew, Carson, Roopani, De Maio, Harvey, Horsfall, National Elder Abuse Prevalence Study: Final Report, p 172; E.Chang, S.Kannoth, S.Levy, S.Wang, J.Lee, B.Levy, *Global reach of ageism on older persons' health: A systematic review*, January 2020, doi.org/10.1371/journal.pone.0220857; PLoS ONE 15(1); 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.

15.9% of older women experience elder abuse, and they are more likely to experience psychological abuse and neglect.<sup>24</sup> Older women are also more likely to experience abuse by an intimate partner, especially physical abuse and neglect.<sup>25</sup> Further to this, 100% of reports of older people experiencing sexual abuse by their spouse were made by women.<sup>26</sup> Elder abuse occurs in a relationship of trust, meaning it is generally caused by someone known to the older person. In the general population, women are more likely than men to experience abuse by people they know, especially intimate partners, and this appears to continue in older age.<sup>27</sup>

13.6% of older men experience one or more forms of elder abuse.<sup>28</sup> Older men are slightly more likely to experience physical abuse than older women.<sup>29</sup> Barriers to identifying or reporting can include stereotypes about who experiences elder abuse or mistreatment. In reality, individual experiences and relationships vary, and can change over the course of life, especially as we get older. This may be in part due to changes in power dynamics related to gender as people age, which can occur in relationships of trust alongside other risk factors for experiencing abuse or mistreatment.<sup>30</sup>

Contextual factors can compound the risk and impact of abuse. A lifetime of financial inequality and unpaid care work can have a profound effect on how older women experience abuse. Older women are:

- more likely to live in poverty than older men and are one of the fastest growing cohorts of people experiencing or at risk of homelessness<sup>31</sup>
- retiring with 23% less superannuation than men due to inequitable labour markets, wage gaps and household dynamics.<sup>32</sup>

*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 will be an important mechanism to elevate and prioritise actions to 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.

## 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 different abuse subtypes. As outlined above, abuse can occur 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.<sup>33</sup>

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.

24 Qu, Kaspiew, Carson, Roopani, De Maio, Harvey, Horsfall, National Elder Abuse Prevalence Study: Final Report, p, 55.  
 25 E Stevens, R Kaspiew, R Carson, A summary of the evidence pertaining to violence perpetrated against older people by another family member or carer: a research summary prepared for Respect Victoria (unpublished research summary commissioned by Respect Victoria), 2023.  
 26 Stevens, Kaspiew, Carson, A summary of the evidence pertaining to violence perpetrated against older people by another family member or carer: a research summary prepared for Respect Victoria.  
 27 ABS, *Personal Safety, Australia*, Australian Government, 2021–22.  
 28 Qu, Kaspiew, Carson, Roopani, De Maio, Harvey, Horsfall, National Elder Abuse Prevalence Study: Final Report, p, 55.  
 29 Qu, Kaspiew, Carson, Roopani, De Maio, Harvey, Horsfall, National Elder Abuse Prevalence Study: Final Report, p, 55.  
 30 See Qu, Kaspiew, Carson, Roopani, De Maio, Harvey, Horsfall, National Elder Abuse Prevalence Study: Final Report, p 19 for further discussion and research.  
 31 E Dawson, *A Home of One's Own: Philanthropic & social sector solutions for women's housing*, 2022, p 16.  
 32 At age 60–64 men have \$180,928 in superannuation while women have \$139,056 - Australian Tax Office (ATO) *Taxation Statistics 2019–20: Individual Statistics*, ATO, Australian Government, 2022.  
 33 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.

This includes better understanding of ageism as a driver of abuse and mistreatment, the impact of intersecting forms of discrimination, for example homophobia, sexism, racism, ableism and the social barriers that can create and perpetuate risk factors. These risk factors include poor physical health, social and emotional wellbeing (including mental health) issues, gender (women are more likely than men to experience abuse or mistreatment), disability, dementia or cognitive impairment, family conflict, loneliness and low social support.<sup>34</sup> Refer to [Focus Area 4](#) to understand how our research program will seek to address some of the known knowledge gaps in this area.

An older person's gender identity, sexual orientation, or intersex variations can influence their experience of discrimination and violence, their familial relationships and support networks, their help-seeking behaviours and trust in and availability of services safe for them. During consultation we heard that prejudice and discrimination within residential aged care settings can force older LGBTIQ+ people to hide their identities and 'return to the closet' in an attempt to avoid even greater harm. We also heard that older LGBTIQ+ people can be subjected to control by family, friends or carers who do not understand, or actively oppose their gender, sexuality or bodies. This can include preventing visits from the older person's partner or preventing someone from expressing their gender identity. These forms of abuse deny LGBTIQ+ older people their rights, harming their wellbeing and preventing them from living safely and with autonomy.



Homophobia, transphobia, or marginalisation on the basis of variations in sex characteristics across the life course, at individual, community, and systemic levels can compound and impact the older LGBTIQ+ persons experience of abuse. There is an evidence gap regarding the prevalence, nature and dynamics of the abuse of older LGBTIQ+ people in Australia. Findings from commissioned research on the abuse of older LGBTIQ+ people will inform future policy developments within the life of this National Plan.

There are also 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 ending ageism, fostering inclusive, socially connected and age-affirming systems and communities, supporting carers, increasing capacity for older people to self-advocate, increasing community understanding around upholding the rights of older people and planning ahead for later life.<sup>35</sup> These systems should include accessible and culturally safe domestic and family violence prevention and response measures, ensuring older individuals are supported in their safety and wellbeing.

We also understand that a range of factors may play a role in someone's decision to harm an older person. Most people with these factors in their lives will not abuse or mistreat an older person, and while their presence does not excuse abuse or reduce the importance of accountability, 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.<sup>36</sup>

34 Qu, Kaspiew, Carson, Roopani, De Maio, Harvey, Horsfall, National Elder Abuse Prevalence Study: Final Report; B Dow, B Brijnath, National Ageing Research Institute, *Elder abuse: context, concepts and challenges*, Australian Institute of Health and Welfare (AIHW), 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.

35 In December 2020, the UN General Assembly declared the UN Decade of Healthy Ageing (2021-2030). Developing age-friendly environments is a Priority Action and key strategy of the Decade's associated Action Plan.

36 Qu, Kaspiew, Carson, Roopani, De Maio, Harvey, Horsfall, National Elder Abuse Prevalence Study: Final Report; Dow, Brijnath, *Elder abuse: context, concepts and challenges*; Joosten, Gartoulla, Feldman, Brijnath, Dow, *Seven years of elder abuse data in Victoria*.

# First Nations Peoples

This National Plan uses the term First Nations people to respectfully include both Aboriginal and Torres Strait Islander peoples. Through our engagement and consultation sessions with older First Nations people and members of First Nations communities, we heard that:

- there are cultural variations in understanding abuse of older First Nations people
- 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 often face unique and more complex barriers in seeking and receiving culturally responsive supports.

We recognise that the term ‘Elder’ is a respected title earned by community leaders in First Nations communities and is not necessarily an older person. As such, the term ‘elder abuse’ may not always resonate with First Nations people.

We also understand that while First Nations people and communities vary significantly in cultural identities, practices, language and learnings, there are factors that contribute to shared experiences, 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.<sup>37</sup>

While the scope of this National Plan largely focuses on negative subject matter, Australian Governments affirm that First Nations Elders and older First Nations people are recognised as the leaders, Knowledge Holders and hearts of their communities. As custodians of cultural traditions and values, older First Nations people strengthen the future of each generation to sustain communities. Leveraging the intrinsic strengths of Elders and their critical role in communities will inform culturally specific responses to the challenges highlighted in this National Plan.

## Cultural obligations and abuse

Cultural or spiritual abuse facing older First Nations people is a growing concern (refer to section on ‘[Types of abuse and mistreatment of older people](#)’).

Cultural or spiritual abuse can occur when service systems, for example health or aged care services, do not support cultural practices or kinship connections. This may include requiring an older First Nations person to move away from Country to receive specific health or aged care services or denying older people access to culture, family and community.

We heard during the engagement and consultation sessions that cultural abuse can occur when younger people attempt to exclude traditional or community Elders and older First Nations people from accessing community gatherings and events, or act to remove Elders from leadership roles before their time, such as taking over Welcome to Country ceremonies and Knowledge Holder responsibilities.

Cultural abuse can also be linked to cultural obligations and responsibilities around sharing and maintaining family bonds, which can increase the risk of financial abuse or **humberging**.

<sup>37</sup> The contents of this section have been informed by a range of inputs, including a First Nations-led consultation process that occurred 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.



**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.<sup>38</sup> Humbugging can also extend beyond financial demands to excessive and unreasonable demands for food, support, housing or caring for children which can lead to stress and conflict within the community.

While financial abuse occurs among the general population, it can be amplified in First Nations communities due to sharing culture.<sup>39</sup> These pressures can be felt more acutely when an older First Nations 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 and ceremonies.

## Social and economic disadvantage

Many older First Nations people experience poor economic and social living situations shaped by historical and ongoing trauma experiences associated with the Stolen Generations, dispossession of land and culture,

racism and discrimination.<sup>40</sup> First Nations people who participated in the engagement and consultation sessions raised concerns that the social and emotional abuse of older First Nations people had 'fallen off the radar'.

Financial abuse can be driven by poverty, disconnection from culture, mental health and social and emotional wellbeing issues, and barriers to accessing health care services, employment and educational opportunities.<sup>41</sup> The engagement and consultation with First Nations people identified that limited access to banking services (such as face-to-face appointments), mailing of statements, delays in receiving bank cards and digital exclusion from online services, had resulted in private information (such as passwords and PIN numbers) being shared more readily. These factors were identified as major risks for financial abuse to occur.

**Kinship** care is embedded in First Nations peoples' cultural ways. However, informal care arrangements, which are often in place with older First Nations people and involve providing support for young people, can lead to financial strain, social isolation, and crowded housing. These pressures seem to fall more heavily on older First Nations women, who are seen as the natural helpers and carers in the community.

Housing shortages and associated accommodation sharing in many First Nations communities can lead to unsafe communal living, overcrowded housing and homelessness.<sup>42</sup>

38 Kimberley Community Legal Services (KCLS), Kimberley Jiyigas (Birds), *No More Humbug final report*, KCLS, Birds, 2020. Different Aboriginal communities may refer to this type of financial abuse by using other terms.

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

40 Dow, Brijnath, *Elder abuse: context, concepts and challenges*, p 143–159.

41 KCLS, Birds, *No More Humbug final report*.

42 Roe, O'Hara, *Research into the mistreatment of older Aboriginal Australians*.



Aunty Nell is 55 and lives on Country in a remote part of Queensland. She is active in her community.

Nell receives money from Centrelink every week on a Thursday. She's not sure how much money she receives each week, and is not able to find out because she finds using the app confusing and doesn't like going into government offices. Aunty Nell rents the house she lives in with her daughter and three young grandchildren. She asks her daughter to go into town on Thursdays and withdraw enough money for rent and food. Her daughter often returns with only enough money for the rent and maybe a little extra for food. Every Friday night her daughter goes to socialise and the children are left with Aunty Nell for the weekend.

Fresh food and other items are very expensive in this remote town, which means Aunty Nell can only buy a few essential food items to feed the family. She will always make sure the children eat first and will not go hungry. Nell thinks her daughter is taking her money but she doesn't ask questions, as she's grateful for her help. She is sad and frustrated about her daughter's actions, and even though she is becoming tired from caring for the grandchildren all of the time, Nell worries about who would support her daughter and grandchildren if they weren't all together. Nell also doesn't want to leave country or live alone, as there is not a lot of good help in the remote town, including aged care services.

Nell seeks support from a trusted friend who goes with her to the bank in person, to find out more about the money coming in and out of her account each week.

## Health and disability

First Nations people experience higher rates of dementia, homelessness and disability.<sup>43</sup>

The National Aboriginal and Torres Strait Islander Health Survey found that First Nations people are more likely to report 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).<sup>44</sup>

For First Nations people, health is a holistic concept that includes physical, social, emotional, cultural and spiritual wellbeing, for both the individual and community.<sup>45</sup>

Engagement and consultation with First Nations people emphasised that systemic and social factors, such as the availability, capability, and cultural safety of health services, dependence on family or community and cultural differences towards end of life planning place older First Nations people with health conditions or disability at higher risk of abuse or mistreatment. We also heard that in some cases, **medication abuse** may occur when family take prescribed medications to punish and control the older person or for their own personal use.

43 [First Peoples Disability Network](#); Roe, O'Hara, Research into the mistreatment of older Aboriginal Australians.

44 ABS, 'National Aboriginal and Torres Strait Islander Health Survey 2018-19', ABS, Australian Government, 2019.

45 AIHW, [Health and wellbeing of First Nations people](#), 2 July 2024, AIHW, Australian Government, 2024.

## Remoteness and isolation

Approximately 15.4% of the First Nations population live in remote (58,700 people or 6.0%) and very remote (92,100 people or 9.4%) Australia.<sup>46</sup>

Resourcing and staffing challenges, which can be particularly acute in remote and regional communities, and the high cost of living and services can make it difficult for communities to provide or access essential services and supports. The cost of living challenges faced by these communities renders older First Nations people, particularly people with a disability and women, more vulnerable to abuse and mistreatment due to the increased reliance on the older person's financial and personal resources and assets, such as their Centrelink payments and housing.

## Barriers to seeking and receiving help

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

- lack of access to culturally responsive and safe services due to remoteness, digital illiteracy, mobility and transport challenges
- service delivery positions occupied by fly in fly out workers contribute to a lack of trust and confidence in mainstream organisations and may lead to misunderstanding kinship practices to be abuse
- privacy and confidentiality concerns when services are delivered by their own family and community members
- the impact of living with domestic, family violence and lateral violence
- eligibility age for accessing the Age Pension or superannuation not aligning with the reduced life expectancy for First Nations people
- family business being considered private business, meaning that older First Nations people may not seek help beyond their

family for fear of bringing shame or repercussions, or to intervene in another family's business if they are aware that an older person is being abused or mistreated

- ongoing impacts of colonisation, colonial control, trauma and grief creating fear that reporting abuse will invoke the involvement of trustee and guardianship agencies and the police.<sup>47</sup>

## Proposed solutions and guiding principles

Our efforts to end the abuse and mistreatment of all older people require us to be informed by, and responsive to, these challenges.

Throughout the engagement and consultation sessions for this National Plan we heard from a range of First Nations people, Aboriginal and Torres Strait Islander Community Controlled Organisations, peak bodies, advocates and allies.

The following solutions and principles were identified:

- culturally safe, sensitive, trauma aware and healing informed aged care and support services, should be delivered, where possible, by Aboriginal and Torres Strait Islander Community Controlled Organisations
- developing pathways for reporting and responding to abuse and mistreatment that do not involve police or legal intervention in the first instance and that support self-determination of First Nations people, such as restorative justice responses
- building on existing evidence from First Nations-led research and Aboriginal and Torres Strait Islander Community Controlled Organisations' initiatives
- culturally sensitive education and awareness programs supporting First Nations communities to identify, prevent, respond to and recover from, the abuse and mistreatment of older First Nations people, including targeted education for people at risk of engaging in harmful behaviours.

<sup>46</sup> ABS, *Estimates of Aboriginal and Torres Strait Islander Australians*, 30 June 2021, ABS, Australian Government, 2021.

<sup>47</sup> Roe, O'Hara, *Research into the mistreatment of older Aboriginal Australians*; KCLC, Birds, No More Humbug final report.

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

- self-determination is an overarching principle of the National Agreement on Closing the Gap
- improving the health and wellbeing of older First Nations people is a priority
- older First Nations people need to have much greater input into how programs and services are designed and delivered with them, their families and communities, including stronger partnerships with First Nations people, with adequate funding and realistic timeframes
- Aboriginal and Torres Strait Islander Community Controlled Organisations provide the best available culturally safe and responsive services for older First Nations people to deliver on lasting 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 related to older First Nations peoples that includes place-based and demographic groups (for example First Nations women, First Nations people with a disability and LGBTIQ+ First Nations people).<sup>48</sup>

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.

i

In 2024 the Australian Government appointed an Interim First Nations Aged Care Commission, with the role of listening to older First Nations people about how aged care is working for them, and promoting and reporting on whether older First Nations people can find and use culturally safe aged care services and have a choice about who they ask to help them. The Interim First Nations Aged Care Commissioner (and the formal appointment to be made in time), will also help both the Government and aged care providers to make changes that will improve aged care for older First Nations people, and this role is a key stakeholder that the Australian Government will engage with to develop and inform Priority Actions.



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

# Culturally and linguistically diverse communities

Through our engagement and consultation sessions, we heard from older people from diverse cultural, ethnic and linguistic backgrounds. While their culture and language are a source of strength and community, older culturally and linguistically diverse people can also face specific challenges that may place them at greater risk of abuse and mistreatment. These can include:

- language barriers to services and lack of supports, including interpreters or digital exclusion, which can lead to an increased reliance on third parties (such as adult children)
- cultural variations in perceptions or understandings of abuse and mistreatment, and in how people access and act on trusted information
- lack of accessible and culturally appropriate services
- cultural barriers, such as a lack of understanding from service providers or government of differing cultural norms and family structures, as well as specific family and community dynamics and risks
- isolation after moving from their country of origin, and potentially greater reliance on family
- visa or settlement status insecurity, which could be exploited
- past experiences leading to distrust of government authority or systems
- racism, xenophobia, homophobia, transphobia and cultural or spiritual abuse, which can intersect with other forms of inequality and discrimination such as ageism, sexism, or ableism.

These risks can combine and compound. An older person with low English proficiency may not have access to culturally appropriate information they need in their own language, relying on friends or family to informally translate or interpret, and leaving them unable to verify information independently, seek help or report abuse. This can place them at greater risk of being isolated, exploited, having systems such as the migration system or an insecure visa status used against them, or simply not getting what they need. Culturally and linguistically diverse older people may have intergenerational living arrangements with dynamics and expectations that are not widely understood within services and systems. This can create another barrier to support, as well as fear of shame, judgement or abandonment within family or community. Older refugees who have recently arrived in Australia can face multiple and unique forms of disadvantage, such as trauma, socio-economic disadvantage, lower levels of financial, health, legal and language literacy, which can place them at greater risk.

In Australia, there is an increasing proportion of older people born overseas (37% of people aged 65 and over) and who come from non-English speaking backgrounds (20% of people aged 65 and over).<sup>49</sup> Of all older people who spoke another language other than English, their English language proficiency decreased with age.<sup>50</sup>

Therefore, this National Plan must respond to the diverse needs of people that have a culturally and linguistically diverse background, who are refugees, migrants or speak a language other than English as their first language.

49 AIHW, *Culturally and linguistically diverse older people web report*, AIHW, Australian Government, 2023.

50 AIHW, *Culturally and linguistically diverse older people web report*.



Armita, a 67-year-old woman, sold off her assets to migrate to Australia on a parent visa and live with her adult son, Ali, to help care for her two grandchildren.

After several weeks in Australia, Armita asks Ali to visit a cultural community centre and introduce her to other members of the community. With no driver's license, limited English proficiency and little knowledge of her local area Armita is dependent on Ali for transportation, communication and social engagement.

Ali refuses Armita's initial and ongoing requests and strongly discourages her from leaving the house alone. After six months pass, Armita has not met anyone who speaks her language or connected with any cultural community groups. She is regularly

left alone with the children for extended periods, is expected to cook all meals and keep the house in pristine condition. If these tasks are not completed, Ali calls her a burden and threatens to kick her out. Recently, despite communication barriers, Ali has also demanded Armita to speak English at all times in the household.

Armita feels physically and emotionally exhausted, socially isolated in her new country and unable to connect with anyone who shares her culture outside of her son and his family. Separated from her friends, extended family, language and community in her home country, Armita does not know who to turn to and is frightened that reporting her experience will bring shame to her family, or that they will abandon her.

## Proposed solutions and guiding principles

Consistent with our commitments under this National Plan to be informed by, and responsive to, the diverse needs of all older people, we recognise that people from culturally and linguistically diverse backgrounds need:

- access to information and services that are culturally appropriate and responsive to their needs
- access to translation and interpretation for people accessing information and services
- increased, tailored and culturally appropriate education and awareness about abuse and mistreatment across all age groups through trusted channels, including how to identify or report it, the support available and how to access them delivered through appropriate mediums (written, audio and video) and in various languages
- community structures and trusted community leaders involved in the design and delivery of local solutions to appropriately respond to elder abuse
- access to cultural safety training and resources for mainstream primary prevention, early intervention and crisis services to build competency and access.



# Broader social context of this plan

## Ageing population demographics



In 2022, there were an estimated **4.4 million** older people in Australia, meaning older people comprised 17.1% of the total population.<sup>52</sup>

By 2066, it is projected that older people in Australia will make up between 21% and 23% of the total population.<sup>53</sup>

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 increase working hours or to have a better work-life balance).

---

## Aged Care

As at 22 October 2024, a total of 1,312,691 older people were accessing Australian Government funded aged care services including approximately 835,000 accessing Commonwealth Home Support Program, across 2023-24.<sup>54</sup> In addition to 477,900 people accessing aged care services as of 30 June 2024.

With an ageing population, it is estimated that demand for residential aged care places or for in-home aged care will increase to over 2.3 million by 2042.

Recipients of the Commonwealth Home Support Program have increased over the past 5 years. From 30 June 2019 to 30 June 2022, the number of recipients with an aged care

package doubled. However, this increase is also attributed to clients transitioning to the Commonwealth Home Support Program from the previous Home and Community Care Program administered by states and territories.

Significant aged care reform work has been undertaken by the Australian Government in response to the Royal Commission into Aged Care Quality and Safety (Aged Care Royal Commission). This work has included transitioning to a rights-based approach, increasing the capabilities of the Aged Care Quality and Safety Commission, and designing a new legislative framework for aged care.

51 Australian Government, Department of Treasury, *Intergenerational report 2023 at a glance*, Department of Treasury, accessed 20 June 2025.

52 ABS, *Disability, ageing and carers, Australia: Summary of findings*, ABS, 2022.

53 ABS, *Population projections, Australia*, ABS, 2018.

54 Data from Service to Provider Association Table, extracted from Health data portal (RBTIS) on 22 October 2024, as presented in Sector performance report Q1 July – September 2024.

i

**The Commonwealth Home Support Program** 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 individuals to plan, organise and deliver Home Care Packages.

**Note:** The Home Care Packages Program and the Commonwealth Home Support Program will merge into the 'Support at Home Program' from 1 November 2025 and no earlier than 1 July 2027 respectively. This will be captured as part of the new *Aged Care Act 2024*.

## Housing and cost of living pressures

Having access to safe, secure, affordable and appropriately accessible housing is essential for the health and wellbeing of older people and mitigates their risk of mistreatment and abuse.

In recent years, the rate of people living in homes that are owned outright has decreased amongst older people and the general population. At the same time, the proportion of people 55 years and older in private rental has increased. There has been a greater increase in the proportion of older women in private rental than older men, however, there is a higher proportion of older men in private rental overall.<sup>55</sup> The cost of housing, changing household demographics and population increases have influenced this trend.<sup>56</sup> This trend places older people at greater risk of mistreatment as they find themselves relying on costly and less secure rented accommodation, relying on social or share housing, living in accommodation not designed to be permanent (such as caravan parks), and being homeless.

Similarly, housing affordability and cost of living pressures have, in part, led to a higher proportion of young people (aged 15 to 34 years) living at home with their parents.<sup>57</sup> This scenario can increase the risk of abuse and mistreatment, but can also be challenging if the abusive adult child is refusing to leave.

## Social security

The Age Pension provides a safety net for people who are unable to support themselves fully in retirement. As at March 2025, over 2.6 million older people in Australia were receiving the Age Pension. Around two-thirds of these recipients were receiving the maximum rate of payment, meaning that they did not have the levels of assets or income to be affected by the social security means test.

Between 2022-23 and 2062-63 the number of people of Age Pension age (67 years+) is expected to double, whereas Age Pension expenditure as a proportion of Gross Domestic Product is expected to decrease, largely due to maturation of superannuation.<sup>58</sup>

## 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, or an average of about \$175 billion per year.<sup>59</sup> 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.

55 ABS, *Census of Population and Housing*, 2011 and 2021 cited in W Stone, M Reynolds, P Veeroja, E. R Power, F Perugia, A James, 'Ageing in a housing crisis: Older people's housing insecurity & homelessness in Australia' Swinburne University of Technology, 2023, p 13, 125.

56 AIHW, *Home ownership and housing tenure*, accessed 20 June 2025.

57 M Budinski, L Qu, J Baxter, *Young People living with parents Facts and Figures*, AIFS, 2023.

58 Department of Treasury, *Intergenerational report 2023 at a glance*.

59 McCrindle, *No More Practice Education - Wealth Transfer Report*, 2017.

## Statistics on older people and gender, sexual orientation, ethnicity, language, place, disability, dementia and assistance

In 2024, **53%** of older people aged 65 and over were women (2.5 million older women compared to 2.2 million older men).<sup>60</sup>



In 2022, **7.8%** of people who reported a diverse sexual orientation, gender identity or variations of sex characteristics were aged 65 and over.<sup>61</sup> Of these older people, approximately 1% reported being trans and gender diverse.<sup>62</sup> About 0.3% of Australians aged 16 and over report they know they were born with variations of sex characteristics, but due to sample size it is not possible to know the number or proportion who are over 65.<sup>63</sup>



As heard in evidence at the Aged Care Royal Commission, it is acknowledged that many older LGBTIQ+ people have lived through a time of intense discrimination and stigmatisation, and that a lack of data collection in this area contributes to a cycle of invisibility.<sup>64</sup> This is also a driver of under reporting, and the ABS notes the figures above likely underestimate the true number of people who are LGBTIQ+ in Australia.<sup>65</sup>

**1.2 million**

older Australians were born overseas, representing over 1/3 (37%) of all people aged 65 and over.<sup>66</sup>



**One in 5** (20%) older Australians were born in non-English speaking countries, and 18% speak a language other than English at home.<sup>67</sup>



**66%** of older people live in major cities

nearly **one in 4** in inner regional areas (23%) and

**11%** in outer regional, remote and very remote areas.<sup>68</sup>

60 ABS, *Quarterly population estimates (ERP) by state/territory, sex and age*, ABS, accessed 25 June 2025.

61 ABS, *Estimates and characteristics of LGBTI+ populations in Australia*, ABS, Australian Government, 2024.

62 ABS, *Estimates and characteristics of LGBTI+ populations in Australia*.

63 ABS, *Estimates and characteristics of LGBTI+ populations in Australia*.

64 Royal Commission into Aged Care Quality and Safety, *Royal Commission into Aged Care Quality and Safety, Final Report: Care, Dignity and Respect - Volume 4B*, p 475.

65 ABS, *Estimates and characteristics of LGBTI+ populations in Australia*.

66 AIHW, *Culturally and linguistically diverse older people*.

67 AIHW, *Culturally and linguistically diverse older people*.

68 AIHW, *Older Australians living in rural and remote communities*, AIHW, Australian Government, 2023.

The prevalence of disability, including severe or profound disability, increases with age.



As at 2022, **52.3%** of people aged 65 and over had some form of disability ranging from a mild to profound or severe limitation and almost half (48.4%) of Aboriginal and Torres Strait Islander people aged 55 or older had a disability.<sup>69</sup>

Among older Australians with disability aged 65 or older:

- **41.1%** have a profound or severe limitation
- **16%** have a moderate limitation
- **33.1%** have a mild limitation.

As at 2018, approximately **78%** of Australians aged 85 and over have some form of disability, and of this cohort 50% had a profound or severe limitation.<sup>70</sup>

In 2018, of those aged 65 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
- 80.2% have a psychosocial disability.<sup>71</sup>

In 2023, it was estimated that there were

## 411,110 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.<sup>72</sup>



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).<sup>73</sup>

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.<sup>74</sup>

In 2021–22, 47% of people with dementia in residential aged care had severe cognitive impairment.<sup>75</sup>

## 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.<sup>76</sup>



An estimated **647,300** (17%) people aged 65 and over provided informal care and assistance within their household.<sup>77</sup>

69 ABS, *Disability, Ageing and Carers, Australia: Summary of Findings*, ABS, 2024.

70 AIHW, *People with disability in Australia 2024 web report: Figure prevalence 1*, AIHW, Australian Government, 2024.

71 AIHW, *People with disability in Australia 2024 web report: Figure prevalence 5*.

72 AIHW, *Dementia in Australia web report*, AIHW, Australian Government, 2024.

73 AIHW, *Dementia in Australia web report*.

74 AIHW, *Dementia in Australia web report*.

75 AIHW, *Dementia in Australia web report*.

76 ABS, *Disability, Ageing and Carers, Australia: Summary of Findings*.

77 AIHW, *Older Australians living in rural and remote communities*.

# Implementation and governance

## Implementation

This National Plan will be implemented through two 5-year Action Plans. The Action Plans will detail specific Australian, state and territory government activities and commitments to implement objectives across each of the Focus Areas. The 2 Action Plans will span these periods:

- First Action Plan: 2026–27 to 2030–31.
- Second Action Plan: 2031–32 to 2035–36.

## 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.

While SCAG will retain leadership and oversight, comprehensively addressing the abuse and mistreatment of older people – with its diverse causes, impacts and occurrence in different settings – will require a cross-portfolio approach.

Attorneys-General and senior officials will pursue discussions about the issues and Priority Actions in this National Plan through a variety of relevant bodies, including through Ministers and senior officials responsible for:

- the *National Plan to End Violence against Women and Children 2022 – 2032*
- health, disability and aged care policy and frameworks
- community services policy and frameworks.

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 Australian, 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 this National Plan. Reporting will be linked to the Action Plans, with a mid and final report for each to be published (four reports in total across the 10-year National Plan). This will ensure transparency and accountability for implementation of this National 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.

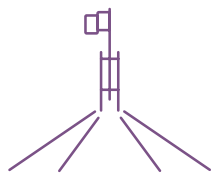
Limited data sets made it difficult to quantify the impact of the first National Plan on reducing the prevalence or severity of abuse and mistreatment of older people. While the Prevalence Study and other initiatives have since provided us with an improved evidence base, we know there is more we need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

### Role of the Australian Government



The Australian Government has a national leadership role in ending ageism and ending the abuse and mistreatment of older people, and has driven development of this National Plan in close consultation with states and territories. This role includes promoting a whole-of-government approach that engages policy areas including in 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 ending ageism, and encouraging community engagement in preventing and responding to the abuse and mistreatment of older people
- Commonwealth anti-discrimination policy and legislation, and the independent Australian Human Rights Commission
- 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)
- delivering national family and domestic violence services, coordinating policy and improving family law responses
- leadership in supporting carers (for example the National Carer Strategy)
- contributing to funding legal assistance, alongside state and territory governments

- hospital and other health funding, including primary care and general practitioners
- playing a role addressing Australia's housing and homelessness challenges, along with state, territory and local governments
- social security frameworks, such as for the Age Pension, Carer Payment, Disability Support Pension and certain crisis payments including for family or domestic violence
- national taxation and superannuation policy
- national approach to online safety including digital literacy and scam prevention
- legal arrangements relating to the *Family Law Act 1975* (Cth)
- partnering with Aboriginal and Torres Strait Islander Community-Controlled Health Organisations
- international obligations and engagement as well as observing international days of recognition, such as World Elder Abuse Awareness Day and the International Day of Older Persons.

### Role of state and territory governments



Each jurisdiction has its own laws, institutions and frameworks within which they develop individual responses to ageism, the abuse and mistreatment of older people, and recognition of and support for carers. Relevant areas of law, policy and service provision that state and territory governments have full or partial responsibility for may 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 and prevention frameworks, including frontline service provision
- human rights and anti-discrimination laws and frameworks
- civil and administrative tribunals, state and local courts
- policing and adult safeguarding responses, including providing clear pathways for reporting, identifying and responding to abuse and mistreatment
- healthcare services and information, including hospital and community-based care, mental health supports and patient transport services
- government housing and homelessness services
- 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, reduce isolation and to dismantle ageism
- regulation of key sectors, such as the legal profession
- regulation of retirement villages and residential parks
- education and training (as a shared responsibility with the Australian Government)
- 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 and socially connected communities, including by upholding the rights of older people and addressing social isolation.

Many local councils have also developed local strategies and plans to support older people, including for carers. Local governments are uniquely positioned to provide important services and touch points for preventing and addressing the abuse and mistreatment of older people, including:

- local planning and zoning to ensure communities are age-friendly
- libraries, community centres, and recreational facilities
- in-home care, such as Meals on Wheels, and other aged care services<sup>78</sup>
- funding for community-led cultural events
- assistance with cost of living, including discounted public transport and other concessions
- spaces for community activities and events
- social connection programs and age-friendly groups, including the promotion of positive intergenerational connection
- local public information resources, including digital literacy education
- skill development opportunities for local workers, volunteers and community members.

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



<sup>78</sup> There are 95 aged care services registered with the Commonwealth Government that are delivered by Local Government Areas, including seven under the National Aboriginal and Torres Strait Islander Aged Care Program in the Northern Territory.

## 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
- community housing providers
- the legal sector
- media and news outlets
- retail and personal care services, such as hairdressers and barbers
- pharmacists and other medical professionals, such as general practitioners and nurses
- for profit aged care and disability service providers
- retirement villages and residential parks
- social workers and other support professionals.

## Role of not-for-profit sector, community services and community leaders

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



- housing and homelessness services
- community health services
- family and domestic violence services
- aged care and disability services
- carer organisations
- family relationship services
- settlement and multicultural services

- Aboriginal and Torres Strait Islander Community Controlled Organisations, and others providing culturally safe and responsive support for First Nations people
- LGBTIQ+ inclusive and peer-led community-controlled services
- clubs, volunteer organisations, church communities and other places of worship.

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 ending 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 and recognising the abuse and mistreatment of older people, and knowing strategies that can help to prevent and end it
- knowing how to appropriately respond if an older person discloses abuse or mistreatment
- upholding the rights of older people and encouraging older people in self-advocacy (i.e. their capacity to advocate for their rights)
- dismantling ageist attitudes and behaviours.



# Principles

The Principles identify overarching themes that underpin the 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 Persons<sup>79</sup> and the UN Declaration on the Rights of Indigenous Peoples.<sup>80</sup> 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, the International Covenant on Economic, Social and Cultural Rights, the Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, the Convention on the Rights of Persons with Disabilities, and the Convention on the Elimination of All Forms of Discrimination against Women.

Australia will continue to support the rights of older persons in international forums, including the United Nations. In March 2025, the 58th session of the Human Rights Council established a new Open Ended Intergovernmental Working

Group to work on a draft international legally binding instrument on the human rights of older persons. The Government will consider the outcome of the work of the Open-Ended Intergovernmental Working Group in a measured and coordinated way.

The human rights that underpin this National Plan includes:


#### Dignity and independence

Older people, like all people, have the inherent right to life and should be able to live with dignity, independence and 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's autonomy to lead fulfilling and meaningful lives aligned with their goals and interests. 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.

79 United Nations Human Rights Office of the High Commissioner (OHCHR), *United Nations Principles for Older Persons*, OHCHR, United Nations, 1991.

80 United Nations General Assembly, *United Nations Declaration on the Rights of Indigenous Peoples*, United Nations, 2007.

## Living, care and health

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

Older people should be able to live in safe, accessible and adaptable environments, access to social and legal services to enhance their autonomy and be able to 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. This includes being able to make informed decisions about their health care and to provide or withhold informed consent to medical treatments, including in advance. Older people should be provided with supports to be able to exercise the right to make their own health decisions, including support to understand the information provided and to communicate their decision.

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



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.

## Equality and non-discrimination

All older people are entitled to equal protection of the law. This includes protection against discrimination on the basis of a number of protected attributes, including age, in certain areas of public life.



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 ending ageism, engaging with First Nations people, and integrating an intersectional approach throughout all of its work.




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 their family, privacy, home, 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 have the same rights as all Australians to participate in social, economic and cultural life, regardless of their age.


Older people are essential, valued members of the Australian community. Policies and services are most effective when older people actively shape them, drawing on their knowledge, skills, and wisdom. Older people should have the opportunity to remain integrated in society, share their knowledge and skills, and participate actively in the design, implementation and evaluation of policies and services that directly affect them.

Older First Nations people have the right to belong to their community, in accordance with their traditions and customs. Older First Nations people also have the right to use their language and to maintain and strengthen their spiritual connection to lands, territories and resources.

Older culturally and linguistically diverse people, along with other members of their community, should be empowered to maintain the language, tradition and customs of their communities.

Older people with physical or other support needs should have appropriate provisions 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 ending ageism, increasing whole of community awareness and engagement, and being responsive and informed by the needs of First Nations people and other groups with an increased risk of abuse and mistreatment in everything we do.

## Liberty and security

Older people have the right to liberty and security of person, and they shall not be subjected to cruel, inhumane or degrading treatment or punishment, including abuse, neglect or coercive control.


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



These human rights and principles 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.

## 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 ending ageism, lived experience and engaging with First Nations people and other groups with an increased risk of abuse and mistreatment.

## Principle 2

### Ending ageism

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

This National Plan uses the WHO'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.*<sup>81</sup> Ageism can occur 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, negatively impacts their health and wellbeing and is an obstacle to achieving a fair and equal society that respects and recognises the inherent human rights of all people.

While ageism seeks to diminish the voice, personhood, and presence of older people, their contributions, agency, and resilience continue to shape all aspects of society.

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.<sup>82</sup> Attitudes towards older people vary across countries and cultures.

i

Research conducted by the Australian Human Rights Commission in 2021 found that ageism is the most accepted form of prejudice in Australia, with 63% having experienced ageism in the last five years.<sup>83</sup>

The negative impacts of ageism not only limit the potential opportunities for older people to participate fully in the community and society but also significantly affects their overall health and wellbeing. Research indicates older women can be subject to stereotypes that blend ageism and misogyny, driving the inequalities discussed under '[What we know](#)', above.<sup>84</sup>

Ageism can 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. Internalised ageism can occur where people apply age-based biases to themselves.

People from culturally and linguistically diverse backgrounds may have different internalised views of ageing which will impact how the older person experiences ageism.

Institutional ageism, like institutional racism or sexism, with which ageism can intersect, 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. This can limit workforce participation, especially for women, or people accessing health services.

Ageism can be closely linked with **ableism**. It can inadvertently lead to the overprotection of older people, which may impact 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'.<sup>85</sup> This generates and perpetuates attitudes, beliefs and behaviours towards disability by reinforcing the belief that people with disability are 'different', 'other' or 'special'.<sup>86</sup>

The WHO have outlined in their Global Report on Ageism three strategies to reduce ageism have been shown to work: policy and law, educational activities and intergenerational contact interventions.

81 WHO, [Ageing: Ageism](#), WHO, 2025.

82 WHO, [Global Report on Ageism](#), WHO, 2021.

83 Australian Human Rights Commission (AHRC), [What's age got to do with it?](#) AHRC, 2021.

84 Barrett C, Gillbard A, Smith R, Chelberg K, Lee Y, Nicholl D, Rowe G, Billimoria D, [The \[un\]Silencing of Older Women. A Gender Lens for Elder Abuse: Elements, Principles and Guidelines](#), Celebrate Ageing, p 7.

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

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

Promoting the dignity and value of older people at the individual, community and society level is a key component of preventing and addressing abuse and mistreatment. 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.<sup>87</sup>

Increasing whole of community awareness, education and engagement, including efforts targeting people of different ages and

institutions, will play an important role in ending ageism, promoting respect, creating age-friendly and inclusive, caring communities and empowering older people. This includes education for people of all ages, including young children and adults.

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.



Steve, a 75-year-old retired veteran and widower, sees his grandchildren a few times a month. When the conversation turns to the cost of living, one of his grandsons, Declan, complains of rent increases and being unable to afford to buy a home in Melbourne, hinting that Steve doesn't need his savings and should help out.

Steve has heard this repeatedly from his grandchildren. Although he likes his space, he feels a responsibility to help, and offers for Declan to move in so he can save his deposit faster and remain in the city. Declan moves in and after a month, he invites some mates around. Steve stays in his room, uncomfortable, and hears them calling him Declan's 'golden ticket'. The next day, the house is a mess. Steve tries to speak with

Declan, who promises it won't happen again, but things deteriorate from there. Declan gets more aggressive and disrespectful, even shoving Steve and causing him to hit his head. Steve doesn't know what to do, and doesn't want to tell his friends, feeling like he should be able to handle his grandson. Although he doesn't want Declan charged, he eventually calls the police.

The police recommend Steve contact an elder abuse specialist service, saying they have heard its program has led to positive outcomes for older people in similar circumstances. Steve doesn't want to lose his relationship with his grandson, but he does want to be treated with respect. He contacts the service to learn more about their family mediation services.

87 AHRC, *Changing perspectives: testing an ageism intervention*, 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 spoke and felt strongly about the devastating impact it has had on their lives, including destroying relationships with loved ones, financial loss and undermining their mental and physical health, and social and emotional wellbeing.

Older people with lived and living experience of abuse and mistreatment shaped this National Plan through insights about how efforts to navigate services, systems and structures that are meant to provide support but may have failed. They know the strengths, limitations and implications of interventions in practice, and their priorities in relation to reporting pathways, service models and legislative frameworks will continue to inform its implementation.



In 2024, Elder Abuse Action Australia created an expert advisory panel – the *Seniors Panel for Advocacy, Rights and Knowledge (SPARK)*, which is made up of older people representing every state in Australia with a diverse range of professional and personal experiences. This Panel works to ensure that the policies and advocacy work of Elder Abuse Action Australia, the national peak body, is informed by the real-life experience of older people.

Continuing to work with, listen to and learn from people with lived and living experience will ensure that this National Plan, its messages and strategies are respectful, engaging, relevant and effective.

## Overlapping forms of discrimination and marginalisation

Different aspects of an older person's identity, characteristics or experience can expose them to overlapping forms of discrimination and marginalisation. The concept of '**intersectionality**' is commonly used to describe, understand and address these complex experiences.<sup>88</sup>

Intersecting forms of discrimination can occur on the basis of individual, community or structural factors, including age, race, ethnicity, migration status, disability, culture, language, religion, housing status, access to health care, literacy (including digital literacy), geographic location, social networks, sexuality, gender identity, variations in sex characteristics, and socioeconomic status. For example, an older person whose primary language is not English, and who has low digital literacy, may face additional challenges when trying to find a legal, health or social service to assist them. These issues are exacerbated for older culturally and linguistically diverse people where they do not have access to interpreter services and who experience intersecting forms of discrimination, such as ableism.

We are committed to taking an intersectional approach to the actions outlined in this National Plan, which recognises, is informed by, and responsive to diverse support needs.

88 K Crenshaw, 'Mapping the margins: intersectionality, identity politics, and violence against women of color', *Stanford Law Review*, 1991, 43(6), doi:10.2307/1229039.

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 this National Plan seeks to build on such success.

Engaging and collaborating with people that are at an increased risk of abuse and mistreatment, including First Nations people, will help to ensure that the full spectrum of a community's strengths, skills and perspectives can contribute to the success of our strategic actions. It will also foster a better understanding of the particular dynamics of abuse and mistreatment within different communities and support the creation of specific and relevant information, materials and access to safe pathways for reporting and seeking 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.<sup>89</sup>

Where possible, initiatives under this National Plan will be co-designed with the community and people at an increased risk of abuse and mistreatment, including First Nations people and those with lived and living experience. This may involve the development of place-based responses that are appropriately tailored to local needs, preferences and circumstances and will be in line with Closing the Gap Agreement Priority Reform One – Formal Partnerships and Shared Decision Making.



The Aboriginal and Torres Strait Islander Lived Experience Centre elevates the voices of First Nations people and shares their stories to co-design, inform, and deliver culturally safe mental health and suicide prevention initiatives. This initiative is the first of its kind in Australia and internationally, and is designed to elevate the voices of Aboriginal and Torres Strait Islander peoples' lived experiences to contribute to the development of culturally safe, trauma-informed services, care, and programs.

89 New South Wales (NSW) Government, [Co-design toolkit](#), NSW Government.

## Principle 4

### A strong focus on prevention and early intervention

Ending the abuse and mistreatment of older people will require a renewed focus on **prevention and early intervention**. We want to identify opportunities for systemic change to disrupt the underlying drivers of abuse and mistreatment in order to prevent it happening in the first place, and where it does occur, to intervene as early as possible to prevent it from escalating.

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

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 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 and services to work with older people to better support them to achieve their needs and aspirations.

### Prevention

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.

To guide our work, an evidence-based National Prevention Framework will be developed under this National Plan.

The Prevention Framework will be a published resource that supports organisations, communities and families to uphold older people's rights and prevent abuse and mistreatment. It will promote practical prevention initiatives and have them embedded in everyday settings to call out ageism, and other intersecting forms of discrimination which we know can lead to mistreatment and abuse.

The Prevention Framework will focus on:

- addressing ageism and intersecting forms of discrimination
- increasing community awareness of the signs and types of abuse and mistreatment of older people, how to raise concerns, and seek advice and support
- addressing individual, family, cultural, intergenerational, community and system-level risk factors associated with people who cause harm to an older person, and that can increase an older person's likelihood of experiencing abuse
- strengthening protective factors
- supporting the role and needs of carers (from families, communities and kinship groups) and other decision-makers
- promoting 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 older people at risk do not increase the risk of harm.

## Early Intervention

Early intervention initiatives are a key part of our prevention response. These require a distinct approach, with the goal being to address and change harmful behaviours to prevent further abuse and mistreatment, and to improve the wellbeing of and outcomes for the older person.

Early interventions can identify underlying problems that may be contributing to abuse or mistreatment, such as unresolved trauma, loneliness, social isolation, family conflicts, financial stress, overcrowded housing, mental health and social and emotional wellbeing issues, and seek to 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 evidence shows that this kind of abuse and mistreatment is often a hidden problem.<sup>90</sup> People who are socially isolated and lonely, have unstable housing options, 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, health professionals, volunteer or community organisations, community visitor programs and other innovative service models are often uniquely placed to identify individuals at risk of experiencing or causing harm and able to offer supports. Police also often play a crucial role in responding to reports of elder abuse which presents an opportunity for early intervention.

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 abuse and mistreatment of all older people. This also extends to people who have regular contact with older people such as hairdressers, postal employees, people who provide support for transport and shopping, retirement village workers, community housing officers, retail workers, taxi drivers, members of sporting associations or groups, and even friends and family.



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

This Principle affirms many human rights and that, regardless of age:

- all people are entitled to have their dignity and autonomy respected
- it is presumed that an older person has decision-making ability, unless evidence is proved to the contrary
- dignity of risk must be observed through acknowledging the right to take informed and uninformed risks, and to make decisions that others (no matter their experience or background) may regard as wrong, irresponsible or inappropriate
- safeguarding measures should be the least interventionist and the least limiting to the older person's human rights.

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.<sup>91</sup> Enabling people to make meaningful choices and accept risks is central to a person's sense of self and quality of life.

In practice, promoting this Principle means respecting that a person may wish to express their individuality in a range of unique ways. This includes selecting services to assist them, choosing activities they enjoy, drawing on their strengths and abilities as they see fit, and defining for themselves what a quality and meaningful life is. It also recognises that older people will take risks, might make mistakes or uninformed decisions that others disapprove of, and may not seek or accept support or advocacy.

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 can be complex when an older person wishes to remain in a close relationship with a person causing them harm, or does not want to identify a person causing harm.<sup>92</sup> This highlights the importance of equipping everyone in society to recognise signs of abuse and mistreatment, and to have clear avenues to raise those concerns.

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.<sup>93</sup> It is also recognised that loss of decision-making ability or capacity may be a transient, rather than permanent, condition for an older person.

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

92 Qu, Kaspiew, Carson, Roopani, De Maio, Harvey, Horsfall, National Elder Abuse Prevalence Study: Final Report, 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.

93 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.



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 person to safeguard their rights and mitigate against abuse and mistreatment.

Increasing education about 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 older people at an increased risk of abuse and mistreatment, those caring for older people and professionals in relevant occupations in this area, should embed these key principles into their roles and take a strength-based approach to prevent, recognise and respond to abuse and mistreatment.

### Supported decision-making

recognises that all people, regardless of age, have the right to make their own decisions and be supported to do so. It is centred on ensuring that the persons will and preferences direct decisions that affect their life and does not mean making a decision for or on behalf of another person. This process recognises that people may require different types of support. This could be ensuring the person has all the information in a format they understand or helping them to consider their options. It may also require providing reasonable adjustments (such as translators or making assistive technology available) to assist them to make their own decisions.



## Principle 6

### A person-centred and trauma-informed response

This National Plan promotes a person-centred, and trauma aware and informed approach to end the abuse and mistreatment of older people.

This Principle recognises that support pathways and systems that are designed to support trauma healing and recovery for older people can sometimes be complex and difficult to navigate, particularly during times of heightened stress. This National Plan will work to better integrate service responses to make it easier for older people, especially those with increased risk of abuse and mistreatment, to get the right help and supports when needed, to reduce the need to repeat their story to multiple services or face their recovery journey alone.

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 each older person, their families, kinship groups, carers and support people, as a means of fostering trust and establishing mutual respect. It also involves ensuring policies and services are culturally safe and responsive to older people from First Nations and culturally and linguistically diverse backgrounds.

i

Cultural safety is about overcoming the power imbalances of places, people and policies that occur between the majority non-Aboriginal and Torres Strait Islander position and the minority Aboriginal and Torres Strait Islander person. It seeks to ensure 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.<sup>94</sup>

There are older people with pre-existing trauma caused by an incident, or pattern of 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, LGBTIQ+ communities and victim-survivors of child abuse, and or family, domestic or sexual violence) already have higher baseline rates of trauma and, as such, may encounter additional barriers to engaging with government or other services and require specialised supports in the local community.

The impacts of abuse and mistreatment, whether acknowledged or not, may surface at any time and affect people's mental health and social and emotional wellbeing, trust of services and supports, and relationships with family and community. It can also have a ripple effect on other family and loved ones and the community.

Trauma aware and healing informed approaches to 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 related trauma in all aspects of service delivery. Trauma-informed approaches are founded on the five principles of: safety, trustworthiness, choice, collaboration, and empowerment.<sup>95</sup> The goal of trauma aware and healing informed services is to avoid re-traumatising individuals and communities by providing safe, accessible and responsive supports, and provide choice and control for healing and wellbeing.

Healing and recovery after trauma are non-linear and look different for each individual. A person who has lived experienced of abuse

and mistreatment may need individualised supports, at different stages, as healing and recovery is often an ongoing process. The impacts of abuse and mistreatment can continue after initial identification and intervention, and even after safety is achieved. For some people with lived experience of abuse and mistreatment, accountability is a key mechanism for healing and recovering. Accountability involves focusing the attention and expectations on the actions of people who cause harm. It can include the person causing harm understanding what they have done, working towards behaviour change, repair and facing appropriate legal, justice or alternative processes.<sup>96</sup>

Older people are resilient and should have the same opportunities to seek recovery, healing and wellbeing, like anyone else who has experienced abuse. Older people should be empowered to determine their own healing and recovery journey, which may include maintaining contact with the person causing harm. Upholding the older person's autonomy and dignity of risk are crucial to the healing and recovery journey.



95 AHRC, *Guidelines for Working With a Trauma-informed Approach*, AHRC, 2021.

96 Australian Government, *National Plan to End Violence against Women and Children 2022-2032*, Department of Social Services, 2022, p 75.

## Focus Areas

The Focus Areas of this National Plan 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, noting state and territory governments will implement initiatives in alignment with their own policies and priorities.


### 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 to produce the social, cultural and behavioural change that is required to end ageism and abuse and mistreatment.

As outlined in Principle 2 (Ending 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. While awareness raising alone will not end the abuse and mistreatment of older people, it is an important component that this National Plan will continue to build on, so that key education initiatives can translate awareness into meaningful and lasting behaviour and attitude 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 people, 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 was 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 at encouraging 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 embeds 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 and how to advocate for themselves; how to get help and support if needed; strategies to safeguard against abuse and mistreatment; to promote healthy, respectful relationships; address barriers to seeking help; and reclaim their wellbeing, autonomy and dignity if they experience abuse
- **family, friends and carers** – to improve understanding of older people’s rights, and abuse and mistreatment, amongst diverse families, friends and carers; support carers to understand their role and the supports available to prevent and respond to abuse; and the reporting and help seeking options available
- **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 and other intersecting factors
- **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 and Torres Strait Islander Community Controlled Organisations, Local Aboriginal Land Councils, multicultural organisations and groups) 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 prevent and 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. Local Governments also have a critical role to play as they often provide services and support directly to older people.

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 all older people, 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.



Office for Ageing Well in the South Australian Department of Human Services 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 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 online 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 people, those with culturally and linguistically diverse backgrounds and people that are at an increased risk of abuse and mistreatment. 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 1,000 Australian resources and details for over 600 service providers. More than 1.9 million people have accessed Compass, with more than 600,000 site visits in the last 12 months alone. Compass social media activity also currently reaches over 400,000 Australians each month.

## Priority Actions



### *Focus Area 1: Increase whole-of-community awareness, education and engagement*

- 1.1. Review existing resources on ageism, the rights of older people, and the abuse and mistreatment of older people, with a view to developing evidence-based, targeted and complementary guidance, training and communication campaigns and resources on these issues. These should also include promoting help seeking and pathways to support

---

- 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, respond and support recovery

---

- 1.3. Involve people that are at an increased risk of abuse and mistreatment, including First Nations people and those from culturally and linguistically diverse backgrounds, in the design and delivery of specific communications addressing ageism and abuse and mistreatment

---

- 1.4. Develop and invest in existing whole-of-society initiatives to end ageism, foster age-friendly communities and support belonging and 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 individuals, including older people and their family, friends and carers, and at the community and system levels

---

- 1.6. Develop specific initiatives to improve the understanding of ageism and the drivers of abuse and mistreatment, especially for younger people, those from diverse cultural backgrounds and LGBTIQ+ people

---

- 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

# Improve laws and systems to promote and protect the rights of older people

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 protect and promote the rights of older people and safeguard against financial 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 can access.

The National Dementia Action Plan 2024-2034 is Australia's national dementia policy framework with 8 high-level actions to improve the lives and care of people living with dementia, their carers and families over the next 10 years.

## 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.



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.

A number of state and national 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.

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. The consultation feedback highlights a range of considerations which need to be balanced in developing further work, such as:

- enabling and encouraging financial EPOAs to be put in place throughout Australia – including in rural, regional and remote locations – and at earlier stages of life

- affording people dignity of risk in how they wish future decisions about their affairs to be made and recorded
- having appropriate safeguards in legislation, such as requirements for witnessing the creation or revocation of EPOAs, accountability for attorney actions and eligibility requirements for who may be appointed as an attorney.

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

The underlying Action Plans will provide further detail on collective next steps in this work once agreed through the SCAG. The Action Plans will also communicate steps which individual jurisdictions are taking to review or amend their financial EPOA laws.

Other related areas of focus over the life of this National Plan may include:

- clarifying official guidance about the interstate recognition and application of EPOAs, including guidance about when an EPOA may not be recognised interstate, recognising that older people may move interstate and appointed attorneys may be physically separated from a principal
- considering whether broader areas of law are fit for purpose and promote older people's autonomy, dignity and rights.

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 important life planning documents which operate to strengthen the rights, independence and autonomy of older people.

## Embedding greater safeguards and measures for older people 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 and crisis responses
- family, domestic, and sexual violence prevention and response
- EPOA reform
- supported decision-making frameworks
- the role of public guardians, trustees and other public agencies.<sup>97</sup>

Governments have issued their responses to the Royal Commission's report and specific commitments and activities that respond to the relevant Disability Royal Commission recommendations will be highlighted through the 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 specific agencies that undertake adult safeguarding functions, in some cases with investigatory powers.

Police are also able to provide support and take action in response to reports of elder abuse, this may include conducting investigations and welfare checks, applying for a protection order or charging people causing harm with relevant criminal offences. Each Australian state and territory has its own policing arrangements and legislative frameworks so responsibilities may vary in how police respond to reports of possible abuse and mistreatment of older people.

Further collaboration around new approaches, education and training should be explored across the sector, including the need for relevant funding, to be able to identify the many types of elder abuse as well as the options for referring the older person to appropriate services.



New approaches are emerging in intervention, with jurisdictions such as New South Wales and Queensland introducing specific coercive control criminal offences, which may apply to protect an older person from patterns of abuse in an intimate partner or domestic relationship setting.

Victoria Police have partnered with Crime Stoppers Victoria to enable non-urgent reports of elder abuse to be made online to Crime Stoppers Victoria. This pathway provides an avenue for people who hold concerns about the treatment of an older person, who are not able to, or do not wish to make a report to police.

This National Plan recognises that more work needs to be done to improve cooperation between police and other safeguarding supports to better assist people experiencing abuse or mistreatment.

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, police 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 there are concerns 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.

<sup>97</sup> 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



A focus of this National Plan is to clarify the avenues for reporting abuse and mistreatment within each jurisdiction. This will assist both those experiencing, or at risk of, abuse or mistreatment, and others within the community that wish to raise a concern and have it investigated. 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* (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.

## Exploring enhancements to the role of institutions in preventing financial abuse

Banking and other financial institutions are well placed to identify potential financial abuse. For example, potential coercion or misuse of an EPOA, scams or misuse of pension or other payments managed by a nominated representative on behalf of an older person. Financial institutions must ensure their products are accessible, including for those that may have low digital literacy, as this can significantly reduce the risk of financial abuse.

Increased collaboration between and among government agencies and financial institutions to better understand and safeguard against abuse and mistreatment is a priority 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. Government will also consider the recommendations of the Parliamentary Joint Committee on Corporations and Financial Services inquiry into the financial service's regulatory framework in relation to financial abuse and will explore options to ensure that financial institutions are able to take appropriate steps to prevent and address financial abuse, while also protecting customers' privacy.

Government has also pledged to address the harm caused by scams and implemented a number of measures since 2022, including the Scams Prevention Framework which created new obligations for businesses in key sectors where scammers operate. This will initially include designated banks, certain digital platforms and telecommunication providers and require them to take reasonable steps to prevent, detect and disrupt scams.<sup>98</sup>

98 Department of Treasury, *Scams Prevention Framework – Protecting Australians from scams*, Treasury, 2025.

## Enhancing aged care protections

During consultation on this National Plan, we heard and acknowledged 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 people 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 2024* (Cth) (*Aged Care Act*). The *Aged Care Act* will start on 1 November 2025 and 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 *Aged Care Act* sets 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 Objects 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 enhanced 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 Law Reform Commission (ALRC) report, *Safe, Informed, Supported: Reforming Justice Responses to Sexual Violence* considered the particular impacts of laws and legal frameworks on cohorts disproportionately reflected in sexual violence statistics, including people in residential care settings and older people, especially those experiencing cognitive decline.<sup>99</sup>

This report acknowledged that older people are at increased risk of experiencing sexual violence – especially older women, older people with disability and older women with a disability. It recognised that older people can face unique barriers to having their experiences recognised and addressed. People living in aged care facilities struggle to report sexual violence due to lack of access to a trusted person, disclosures being minimised or not believed, staff/carers not knowing how to respond and limited access to specialist services and information. The ALRC states although the inquiry did not address these

---

99 Australian Law Reform Commission (ALRC), *Justice Responses to Sexual Violence*, ALRC, Australian Government, 2024.

barriers in detail, common themes examined by other inquiries emphasise the need for safe spaces to disclose, clear guidelines for staff, and access to support.

The report stated that the Australian Government must identify gaps and meet the needs of different communities in the justice system and more broadly, to achieve just outcomes. Specifically, the report recommends

government resourcing of consent education tailored to focus cohorts including older people and people working in institutional settings, such as aged care.<sup>100</sup>

Government responses to the recommendations will be reflected, where appropriate, in our Action Plans and associated reporting.

## Priority Actions



### *Focus Area 2: Improve laws and systems to promote and protect the rights of older people*

- 2.1. Continue efforts to achieve greater national consistency in Enduring Power of Attorney laws
- 2.2. Increase efforts and deliver initiatives which will raise awareness about the importance of planning ahead for decision-making in later years, and rights and obligations in relation to various life planning documents
- 2.3. Review and update official guidance on the interstate recognition and application of EPOAs, and those circumstances where EPOAs may not be recognised interstate
- 2.4. Adopt recommendations of the Disability Royal Commission relevant to ending the abuse and mistreatment of older people, in accordance with Government responses in each jurisdiction
- 2.5. Strengthen safeguarding frameworks and clarify pathways for abuse and mistreatment to be reported and addressed. This includes further education and training on reporting obligations for relevant sectors
- 2.6. Explore enhancements to the role of institutions, including police and financial institutions, in preventing, responding to and supporting recovery from financial abuse
- 2.7. Continue to implement the Australian Government's response to the Aged Care Royal Commission, by building on the *Aged Care Act 2024* (Cth) to enhance the safety, health, wellbeing and quality of life for older people receiving funded aged care services
- 2.8. Australian Government will consider the recommendations of the Parliamentary Joint Committee on Corporations and Financial Services inquiry into the financial services regulatory framework in relation to financial abuse
- 2.9. Continue to support the rights of older people in international forums, including the Open Ended Intergovernmental Working Group established by the Human Rights Council

100 ALRC, *Justice Responses to Sexual Violence*.

### Focus Area 3

## 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 empowers and promotes the independence of older people. 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 and organisations, 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 services, 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 all older people, especially those at greatest risk, 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 Services**). This was extended for 4 years until 30 June 2026.

From 1 July 2026, ongoing Australian Government funding for Specialist Elder Abuse Units and Health Justice Partnerships will be delivered through the new National Access to Justice Partnership 2025-30 with a further Australian Government grants process being established to fund ongoing Case Management and Mediation Services.<sup>101</sup>

**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.

101 Australian Governments, [National Access to Justice Partnership 2025-30](#), 2025.

Despite the positive outcomes from the Australian Government service trials, 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 for people experiencing harm, and for those causing harm. It also highlights the importance of further education and awareness and more targeted services responses specifically designed to address the needs and behaviours 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 safety 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 people and other groups that are at an increased risk of abuse and mistreatment. 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, consistent with the Closing the Gap Agreement and Priority Reform 2.

In line with the key Principles of this National Plan, services must take a person-centred, community-based and trauma-informed 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 coordinated 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 will 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, and
- 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. As an example, the Australian Government has committed under the first Action Plan to develop Family, Domestic and Sexual Violence training for law enforcement, which will include the abuse of older people to increase general awareness and to enhance law enforcements responses.

The needs and requirements of professionals in relevant occupations (for example health workers and lawyers) are different to professionals who work in specialist elder abuse services, given older people are often only one cohort of people with unique needs that they assist. For example, in some cases professionals need to assess the capacity of an older person to make a certain decision.

Increased engagement with relevant (rather than specialist) professions, such as health professionals and counsellors, offers an important opportunity for screening and identifying risk of, or actual, 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 2024–25 financial years there was a 577% 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 people and those that are at an increased risk of abuse and mistreatment, as well as enhancing data collection and reporting.



## Priority Actions

*Focus Area 3: Strengthen the capacity and capability of services, including through targeted education and training for professionals*

- 3.1. Identify best-practice quality and safety standards for specialist elder abuse services, with a view to increasing nationally consistent standards
- 3.2. Act to strengthen the 1800ELDERHelp phone lines, including by improving the capacity of staff to respond to calls and enhancing data collection and reporting
- 3.3. Increase equity of access to specialist services by considering service types, geographical distribution and the needs of those that are at an increased risk of abuse and mistreatment (including First Nations people)
- 3.4. 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 resources relevant to preventing, responding and supporting recovery from the abuse and mistreatment of older people
- 3.5. Strengthen the role of Aboriginal and Torres Strait Islander Community Controlled Organisations, to deliver culturally safe and responsive care and supports for older First Nations people to prevent and respond to abuse and mistreatment
- 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 mistreatment, including in service systems
- 3.7. Greater education and awareness raising for police on recognising and investigating instances of abuse and mistreatment and where to make appropriate referrals
- 3.8. Engage with educational institutions to increase the availability of courses and pathways for individuals who wish to work or develop expertise on ageism, and preventing the abuse and mistreatment of older people, aligned with sector needs
- 3.9. Identify, develop and promote early intervention strategies aimed at stopping abuse and mistreatment from escalating
- 3.10. Increased education, service responses and referral pathways designed specifically for people who cause harm to older people, informed by research (refer to [Focus Area 4](#))

## 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 the drivers and influence meaningful responses.

This National Plan recognises the importance of data sovereignty to First Nations people's self-determination and acknowledge it underpins community decision-making and action, enabling First Nations people to own their stories, and plan for the future needs of communities.<sup>102</sup> This National Plan will work to improve the accessibility, disaggregation and transparency of data and information, to support First Nations people to make more informed decisions relevant to achieving the vision of this National 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 strengthening 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 older people, people from culturally and linguistically diverse backgrounds and other marginalised cohorts
- improved understanding of the different types of abuse and the drivers, to better inform responses and address barriers to seeking help
- improving understanding of the prevalence, nature and risk factors for the homicide of older people in the context of trusted relationships
- improved understanding of the gendered nature of abuse and mistreatment, the impact of gender inequality and experiences of older women
- better understanding how ageism, including systemic ageism and unconscious bias, drives abuse and mistreatment of older people, and effective interventions
- understanding abuse and mistreatment over a person's life course including risks for later abuse as an older person, and 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.

102 National Indigenous Australians Agency (NIAA), *Framework for Governance of Indigenous Data*, NIAA, Australian Government, 2024.



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 governments, the sector, 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, disability services and Aboriginal and Torres Strait Islander Community Controlled Organisations. 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 different contexts.

Increased collaboration will ensure we are more efficient and effective in delivering outcomes, as well as support us to move towards a more nationally consistent and/or coordinated response to end 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



### *Focus Area 4: Address gaps in the evidence base and increase collaboration*

- 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 establishing baselines, identifying data gaps, better utilising existing data, improving best-practice data collection and reporting, and measuring outcomes

---

- 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 the National Elder Abuse Prevalence Study

---

- 4.4. Strengthen all levels of government, sector (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 all levels of government, sector (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

Support phonelines (please call 000 in an emergency)

Service name	Contact details
<b>Lifeline</b> 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 <a href="http://www.lifeline.org.au">www.lifeline.org.au</a>
<b>1800RESPECT</b> National domestic, family and sexual violence counselling, information and support service.	1800RESPECT (1800 737 732) <a href="http://www.1800respect.org.au">www.1800respect.org.au</a>
<b>13 YARN</b> 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) <a href="http://www.13YARN.org.au">www.13YARN.org.au</a>
<b>MensLine Australia</b> 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 <a href="http://www.mensline.org.au">www.mensline.org.au</a>
<b>Open Arms – Veterans &amp; Family Counselling</b> Free and confidential counselling for current and former serving ADF members and their families.	1800 011 046 <a href="http://www.openarms.gov.au">www.openarms.gov.au</a>
<b>Qlife</b> Anonymous and free LGBTIQ+ peer support and referral for people in Australia.	1800 184 527 <a href="http://www qlife.org.au">www.qlife.org.au</a>

## National elder abuse services (which can link you to local services in your state or territory)

Service name	Contact details
<p><b>1800ELDERHelp</b></p> <p>National support line for the abuse and mistreatment of older people.</p>	1800ELDERHelp (1800 353 374)
<p><b>Compass.info</b></p> <p>The national online knowledge hub of resources and information about services relevant to the abuse and mistreatment of older people.</p>	<a href="http://www.compass.info">www.compass.info</a>

## Aged care related services

Service name	Contact details
<p><b>My Aged Care</b></p> <p>Provides information and support to understand, access and navigate the aged care system.</p>	1800 200 422 <a href="http://www.myagedcare.gov.au">www.myagedcare.gov.au</a>
<p><b>Older Persons Advocacy Network (OPAN)</b></p> <p>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.</p>	1800 700 600 <a href="http://www.opan.org.au">www.opan.org.au</a>
<p><b>Department of Veterans' Affairs (DVA)</b></p> <p>Provides information to DVA clients on available services and support.</p>	1800 VETERAN (1800 838 372) <a href="http://www.dva.gov.au">www.dva.gov.au</a>
<p><b>National Aged Care Advocacy Program (NACAP)</b></p> <p>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.</p>	1800 700 600 <a href="http://www.opan.org.au">www.opan.org.au</a>

## Family, domestic and sexual violence services

Service name	Contact details
<p><b>MensLine Australia</b></p> <p>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.</p>	<p>1300 789 978</p> <p><a href="http://www.mensline.org.au">www.mensline.org.au</a></p>
<p><b>No to Violence</b></p> <p>No to Violence specialises in effective evidence-informed engagement with men and its primary concern is the safety and wellbeing of women and children.</p>	<p>1300 766 491</p> <p><a href="http://www.ntv.org.au">www.ntv.org.au</a></p>

## Other support services

Service name	Contact details
<p><b>National Disability Abuse and Neglect Hotline</b></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: <a href="mailto:hotline@workfocus.com">hotline@workfocus.com</a></p>
<p><b>Translating and Interpreting Service</b></p> <p>If you are a non-English speaker, you can use the Translating and Interpreting Service.</p>	<p><a href="#">Translating and Interpreting Service</a></p> <p>131 450</p>
<p><b>National Relay Service</b></p> <p>For callers who are 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><b>Aboriginal Interpreter Service (AIS)</b></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: <a href="mailto:ais@nt.gov.au">ais@nt.gov.au</a></p>

Service name	Contact details
<p><b>Australian Human Rights Commission</b></p> <p>The Commission investigates and resolves complaints of discrimination and breaches of human rights. The service is free, impartial and informal.</p>	<p>1300 656 419</p> <p><a href="http://www.humanrights.gov.au">www.humanrights.gov.au</a></p>
<p><b>Carer Gateway</b></p> <p>Carer Gateway is an Australian Government program providing free services and support for carers. Services provided by Carer Gateway include: in person and online support groups; tailored support packages; in person and phone counselling; online skills courses and access to emergency respite.</p>	<p>1800 422 737</p> <p><a href="http://www.carergateway.gov.au">www.carergateway.gov.au</a></p>
<p><b>Men's Referral Service (delivered by No to Violence)</b></p> <p>This service specialises in effective evidence-informed engagement with men and its primary concern is the safety and wellbeing of women and children.</p>	<p>1300 766 491</p> <p><a href="http://www.ntv.org.au/mrs">www.ntv.org.au/mrs</a></p>
<p><b>National Debt Helpline</b></p> <p>The National Debt Helpline is a not-for-profit service that helps people tackle their debt problems. They offer free professional financial counsellors who can provide independent and confidential services.</p>	<p>1800 007 007</p> <p><a href="http://www.ndh.org.au">www.ndh.org.au</a></p>
<p><b>ScamWatch</b></p> <p>Scamwatch is run by the National Anti-Scam Centre where the public can report scams. This information is used to help warn others and to take action to stop scams. They also provide up-to-date information to help the public spot and avoid scams.</p>	<p><a href="http://www.scamwatch.gov.au">www.scamwatch.gov.au</a></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 National 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 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.

---

### Attorney or enduring attorney

The person appointed to make decisions on another person’s behalf. An attorney appointed under a general power of attorney can only act while the subject person has capacity and they are usually appointed for a specified time (such as when the subject person is overseas and wants the attorney to manage their financial affairs).

An attorney appointed under an Enduring Power of Attorney can be nominated to make legal, financial or health/personal decisions which can extend to decisions into the future, usually once a person is unable to make their own decisions. There will be differences depending on individual arrangements and each state or territory laws.

---

### Autonomy

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

---

### Capacity

This term is 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 focuses on the persons decision-making abilities relevant to a specific decision, at a specific time. Advanced age or a diagnosis of dementia does not necessarily mean a person has diminished capacity. People can often have fluctuating capacity, or the ability to make some but not all decisions that affect them.

A trusted person can be nominated to support the decision-making of someone with impaired capacity. A person can also nominate, or have appointed, a substitute decision maker if they are not able to make decisions themselves.

---

### Compass.info

The national online knowledge hub of resources and information about services relevant to the abuse and mistreatment of older people.

---

<p><b>Culturally and linguistically diverse</b></p>	<p>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.</p>
<p><b>Decision-making</b></p>	<p>This term refers to the process of making a choice that affects a person, including where they live, how they live, their money and their health. People can make their own decisions or a supported or substitute decision maker can be appointed for people who are not able to make their own decisions or who require support to do so. Substitute decision-making includes appointment of guardians, administrators and financial managers to make certain decisions on another person's behalf.</p>
<p><b>Elder</b></p>	<p>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.</p>
<p><b>Enduring guardian</b></p>	<p>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.</p>
<p><b>Enduring Power of Attorney</b></p>	<p>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 have different rules and documentation around powers of attorney. Also known as an Advance Personal Plan (APP) in the Northern Territory.</p>
<p><b>Evidence based</b></p>	<p>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.</p>
<p><b>Family agreement or arrangement</b></p>	<p>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.</p>
<p><b>Family and domestic violence</b></p>	<p>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>.</p>

---

## Family member

Defined broadly for the purposes of this National Plan and includes family-like relationships or chosen families. For the purposes of this National Plan, a family member in relation to an older person may include:

- 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, child of siblings, parent, siblings of parents
- 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.

---

## 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.

---

## Homophobia

Refers to negative beliefs, prejudices, stereotypes and fears that exist towards same-sex attracted people. It can range from the use of offensive language to bullying, abuse and physical violence; and can include systemic abuse or discrimination, such as being denied housing or being dismissed from a job on the basis of these negative beliefs.

---

## Human rights

Human rights are rights inherent to all human beings, regardless of background, where they live, what they look like or what they value or believe. These rights are recognised and protected in Australia through a range of laws at the federal and state and territory level, the Australian Constitution and the common law.

---

## Intersectionality

This National Plan uses intersectionality to mean that a person may belong to more than one disadvantaged or minority group. The way that social categories overlap and are connected can create complex systems of discrimination, disadvantage, power and privilege for individuals or groups.

---

## Isolation

People can experience isolation when they are without their desired level of social contact. 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).

---

<p><b>Kinship</b></p>	<p>The <b>kinship</b> 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 <a href="#">Watarrka Foundation</a>).</p>
<p><b>LGBTIQ+</b></p>	<p>This acronym refers to lesbian, gay, bisexual, transgender, intersex, queer, and asexual people and/ or communities. It includes people with diverse sexualities, genders and sex characteristics.</p>
<p><b>Loneliness</b></p>	<p>Is a subjective and negative feeling due to a lack of social companionship. A person may feel a lack of connection to other people, along with a desire for more social relationships. Loneliness is linked to poor physical and mental health and can cause a general dissatisfaction with life.</p>
<p><b>National Elder Abuse Prevalence Study</b></p>	<p>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 how common the abuse of older people is in Australia.</p>
<p><b>People with lived and living experience of abuse or mistreatment</b></p>	<p>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.</p>
<p><b>Primary prevention</b></p>	<p>This term refers to the activities and efforts made to address the root, or 'primary', underlying causes of social or public health problems. Examples of primary prevention activities to address the abuse and mistreatment of older people include discouraging ageist behaviour and encouraging inclusive, age-friendly communities.</p>
<p><b>Professionals in relevant occupations</b></p>	<p>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.</p> <p>A non-exhaustive list of these professionals includes: primary, tertiary and specialist health workers (including hospital workers and General Practitioners), pharmacists, police and other first responders such as paramedics, disability and aged care providers, lawyers and Justices of the Peace, social workers, banking or financial professionals, religious and cultural leaders and community visitors. It also includes people who work in non-government and community organisations, LGBTIQ+ peer-led community-controlled organisations, housing and homelessness services, operators and staff of retirement villages and residential parks, multicultural organisations, Aboriginal and Torres Strait Islander Community-Controlled Organisations (ACCOs) and family and domestic violence services, including specialists working in Men's Behaviour Change Program's and other perpetrator interventions.</p>

<b>Public or state trustee</b>	Public or state trustee bodies exist in all states and territories of Australia (although their titles, roles and functions may vary jurisdictionally). They are often government agencies, with their own governing legislation and are responsible for providing a range of services such as: will drafting, powers of attorney, executor services, trustee services and financial administration. The state trustee can be appointed as an independent financial administrator when a person is not able to make their own decisions and does not have a suitable friend or family member to take on this role.
<b>Residential aged care</b>	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.
<b>Restrictive practices</b>	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 and 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.
<b>Safeguarding</b>	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. New South Wales, South Australia and the Australian Capital Territory, for example, have agencies that undertake adult safeguarding functions with investigatory powers.
<b>Social abuse</b>	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. This abuse can be facilitated by technology and is considered a type of psychological or emotional abuse.
<b>Systemic or structural ageism</b>	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.
<b>Transphobia</b>	Refers to negative beliefs, prejudices and stereotypes that exist about transgender people. It can range from the use of offensive language to bullying, abuse and physical violence; and can include systemic abuse or discrimination, such as being denied housing or being dismissed from a job on the basis of these negative beliefs.

---

**Trauma**

The psychological, emotional, cultural and/or physiological impact an experience has had on an individual as a result of the heightened stress and distress 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. Trauma-informed approaches are founded on the five principles of; safety, trustworthiness, choice, collaboration, and empowerment.

---