

Submission to the Second Action Plan (National Plan to End Violence against Women and Children 2022-2032)

Gendered violence is lifelong issue. It affects women across their lifespan

Older women continue to die from intimate partner and family violence. Over the decade to 2023, nearly 200 were over the age of 55 and had been killed in alleged domestic and family violence settings, by an intimate partner or spouse or adult child.ⁱ

Family and domestic violence against women does not stop once women reach 50, nor can it be neatly constrained under the paradigm of ‘elder abuse’ – these are theoretical and funding constructs, and do not reflect the lived reality of women experiencing violence, the types of violence perpetrated against them, and the lived experience of diverse older women surviving with the long term, compounding impacts of violence.

While elder abuses/family and domestic violence terminology may have meaning at policy and funding level, it does not accurately reflect the experience of women living with violence across the life course, and ‘often renders the real-life experience of victim-survivors invisible.’ⁱⁱ

A life course approach to addressing violence means understanding how women experience violence at different stages of their lives, how these may intersect, that the impacts often compound, and that prevention and responses services must be sophisticated enough to respond to this complexity.

However, the reality for older women experiencing violence is that they are at the mercy of a fragmented and siloed service response, that is not ageing **and** gender-informed and that often perpetuates the ageism of mainstream Australia.

Between July and August 2025, COTA Australia surveyed our members to understand how they experience ageing and understood equality. A key concern was safety – and nearly 870 older women across Australia demanded safe housing, access to money, legal protection, trusted face-to-face assistance and services that understand both gendered violence and the practical realities of ageing.

This submission draws on both the documented issues across several government plans, and on survey findings from 868 older Australian women who articulated what they wanted to see done.

About the survey

In 2025, COTA Australia sent a survey to its members to understand what gender equality meant for older people. We received over 1200 responses across all genders covering nearly 50 questions, ranging from economic security, to health, safety and equality. The questions relating to safety were not compulsory, but they elicited the most responses, largely from women. Question 48 asked 'For older people experiencing or at risk of violence, what do you think would help?' and this data informs this submission.

Existing policy landscape

Several existing strategies and frameworks note the complexities of gendered violence across the life course. While not aiming to further 'admit the problem' these can be summarised below as a means of acknowledging what has been recognised and what still needs to be done.

The First Action Plan noted that 'Older women can be vulnerable to various forms of violence and abuse, including sexual violence, economic abuse and over and under medicating,' and that mainstream workforces need to develop the skills to recognise when these forms of abuse are occurring.'ⁱⁱⁱ

It recognised the need for capacity-building to ensure that systems that support victim-survivors 'provide trauma-informed, connected and coordinated responses that support long-term recovery, health and wellbeing.'^{iv}

In addition, COTA Australia argues that these responses must also be informed by an understanding of ageing and ageism; too often we hear in our engagement activities that older women feel invisible in mainstream domestic violence services, that their experiences are made to fit into a system that is geared towards younger and middle-aged women, and when they do access support, it often re-creates ageist assumptions about gender and age. Conversely, women seeking support through elder-abuse specific services may find that the gendered impacts of abuse are not dealt with adequately or understood.

The importance of intersectional and tailored responses to the violence older women live with cannot be overestimated. Often, generalist or 'mainstream' services do not adequately or appropriately meet the needs of diverse communities, including communities that are ageing.

In our survey, many of the respondents who had experienced violence also said they did not seek help because they did not know where to go or did not believe they could be helped by existing services. This included a 79-year-old woman who was frightened by her violent 55-year-old son; a 67-year-old woman who reported being sexually assaulted but did not seek help because she thought when would not be believed because of her age; and another who described continuing to live with PTSD at 70 after lifelong abuse. Older women will continue

to fall through the gaps until this gendered ageism is addressed in the second National action plan.

National Plan to End the Abuse and Mistreatment of Older People 2026-2036^v

Elder abuse is gendered. AIHW data suggests that 70% of elder abuse victims are women.^{vi} As noted in the National Plan to End the Abuse and Mistreatment of Older People 2026-2036,

- Older women are also more likely to experience abuse by an intimate partner, especially physical abuse and neglect.^{vii}
- Women made 100% of reports of older people experiencing sexual abuse by their spouse.^{viii}
- 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.^{ix}

This is consistent with our survey findings. Where men talked about feeling unsafe, they did so in the context of not feeling safe in the community or fearing strangers – not in their home or from family member or intimate partners.

Response – support to navigate complex systems

System complexity needs outreach

The existing systems that offer support to older people experiencing violence are fragmented and difficult to navigate. Our survey findings suggest that older women do not access help or support through existing service points (i.e. FDVS/elder abuse services) but through other means. The Rapid Review noted that ‘older people vulnerable to elder abuse also frequently attend GPs and, in the context of coercive control and isolation, those health professionals may be their only external source of support.’ This is backed up by all our engagement which shows that often it is not the police or hotlines people seek help from but will reach out to trusted GPs or others they have a relationship with. Policing is often seen as an inadequate response. This has implications for early intervention, prevention, and response – all the service level intervention across the life course.

With the Rapid Review, COTA Australia agrees that ad hoc and fractured responses in law, policy and practice, ‘often fail to involve the voices of lived experience from the communities for which they are designed’. COTA Australia also notes that community-led, sustained genuine co-design is crucial for creating lasting and meaningful change. COTA Australia engagement

with older people across Australia consistently shows that place-based, community based and outreach are the most effective strategies for supporting marginalised older people. Effective long-term change for violence experienced by older women must be co-designed and informed by their lived experience and the solutions they ask for.

What older women say would help

In our survey, 887 women answered the broader question about supporting older people at risk of violence. Of the 838 women who reported their age, 19% were aged 65 or under, 60% were 66-80 and 21% were 81 or older.

Understandings of safety, violence and abuse varied across the age groups:

- Women aged 50-65 and under discussed violence and safety through a life course approach and emphasised the cumulative impacts of violence. They feared that the financial and psychological consequences of violence would be lifelong, affecting their retirement, earning capacity and resulting in inadequate savings, insecure housing and limited options as they aged. They wanted support and interventions that facilitated their safety but did not compromise their further economic security.
- Between ages 66-80, respondents were more likely to describe intimate partner violence from current and former partners, and abuse by adult children, particularly older sons who were also experiencing mental health issues. They wanted support to manage the long-term impacts of violence, especially on their mental health, recognition of the different types of violence they experienced and again, the financial impacts.
- Women aged 81 and over experienced frailty, disability reduced mobility and dependence on carers and understood that this increased their vulnerability to abuse, particularly from relatives and carers. They wanted support to maintain autonomy and protection when dependence on relatives, carers and institutions increases.

For the majority, practical interventions were the most important:

- 75% safe housing options
- 69% financial support to leave
- 66% education and awareness about available options

For the older women in our survey, housing **and financial support were more important than awareness, training and counselling**: information about violence has limited value when a woman has nowhere safe to live and cannot afford to leave. A lack of safe housing and money are the most important barriers to safety. The Leaving Violence Program supports people experiencing intimate partner violence with financial support to leave, not those experiencing

‘elder abuse’. Policies that support women to leave are focused on younger women with children - this is the experience of older women seeking emergency housing and being turned away because the policy is to prioritise the safety of younger women with children, even if the older woman equally needs support.

The housing situation for older women is DIRE! Over last 18 yrs, from age 58, I have moved 16 times+, living, for example, in unsafe Rooming Houses, sublet from website, couch surfing, motels- no kitchen, rundown Housing SA unit, caravan parks near flood, Church run retirement Village with bullying, unaffordable private rentals and evicted by adult children. Despite broad work experience and volunteering, 3 Degrees, paid work availability is poor/ non-existent.

What COTA Australia would like to see

The suggestions below are in line with Recommendation 3 of the Rapid Review which calls on ‘The Commonwealth and state and territory governments to prioritise the experiences of communities that are marginalised especially ... older women... in implementing all of the recommendations in [its] report.’

1. Investment in outreach supports for marginalised older women to navigate a fragmented system, with navigators who are trauma informed and ageing informed. It should support older women to navigate the legal, housing, health, economic and related services to reach safety. Information alone is insufficient where a person cannot travel, use digital services, complete forms or organise a move without support. Our survey findings suggest that this needs to be further explored for older women aged 75+, as articulated by one respondent who wrote that

There are so many old women [escaping violence] that I know personally who are struggling and who can’t get help. Living in cars, not claiming their pension because they don’t have access to technology, not claiming Medicare rebates because it’s too hard to do online or over the phone and it’s too much to get to a physical office, abuse by a family that when even reported was ignored. The list goes on.

This could take the form of funding for a pilot navigator project to work with older women at risk of or experiencing violence. ^x Such a model could draw on the Aged Care Navigators program, which was trialled to support marginalised older people to find appropriate and aged care services (this was rolled out nationally as the Care Finder Program). It could draw on the expanded pilot of the Justice Navigators, which helps victims and survivors of sexual violence navigate the justice system and aims to ‘strengthen referral pathways, including restorative justice pathways, helping victims and survivors understand and exercise their rights and navigate the various support and justice options available to them.’^{xi}

2. Tailored, specialist services that can also train up and support frontline, mainstream domestic violence and elder abuse systems, to provide age informed and appropriate support. A model is the Adira Centre, the [NSW Multicultural Centre for Women’s and Family Safety](#), funded through NSW Domestic and Family Violence Plan 2022-27. It provides culturally responsive outreach, community information sessions, direct support, capacity-building to the FDVS sector and to women who are often the ‘first responders’ in their communities. Such a model could be piloted with marginalised older women at risk of violence and homelessness.
3. Early intervention/prevention approaches that go beyond education and advice. A priority outcome of the Rapid Review was ‘better understanding pathways into perpetration to improve targeting of early intervention initiatives, with the aim of preventing violence from occurring.’ Prevention is not limited to education and resources but must include training up and supporting the people and organisations that older women use and engage with – to be aware of violence, to intervene and suggest referral pathways. In our experience, community- and place-based initiatives are best placed to support and work with users of violence, and those at risk of being abused.

In addition, policing can also be preventative – systems used to record and identify FDVS users can be used to identify and work with people who are at risk of committing elder abuse/violence against older women. These systems and data – such as online activities, mental health data, family law process– do exist, but we need police and agency commitment to using these systems for detecting and monitoring potential users of violence, these systems. This has also been recognised by the Rapid Review in the context of adult children returning to live with their parents after having used DFSV against an intimate partner and continuing to use violence against a parent. Our engagement activities support this, particularly in regional and socio-economically disadvantaged regions of Australia, where older women living on their own in isolated farms are at risk. Again, it is the most vulnerable who are at risk – if the Second Action Plan gets it right for them, it will benefit all women at risk.

ⁱResearch published in The Guardian <https://www.theguardian.com/global/2025/jan/27/older-women-killed-by-family-members-a-silent-crisis-no-one-is-talking-about-experts-say-ntwnfb>. Relying on this data indicates the lack of clear data on older women and how their deaths are measured.

ⁱⁱ*Unlocking the Prevention Potential: Report of the Rapid Review of Prevention Approaches Accelerating action to end domestic, family and sexual violence*

ⁱⁱⁱ Commonwealth of Australia (Department of Social Services) 2023 First Action Plan & Outcomes Framework 2023–2027

^{iv} Commonwealth of Australia (Department of Social Services) 2023 First Action Plan & Outcomes Framework 2023–2027

^v National Plan to End the Abuse and Mistreatment of Older People 2026-2036

^{vi} R Kaspiew, R Carson and H Rhoades *Elder abuse in Australia* <https://aifs.gov.au/research/family-matters/no-98/elder-abuse>

^{vii} 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.

^{viii} 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*.

^{ix} ABS, *Personal Safety, Australia*, Australian Government, 2021-22.

^x Australian Healthcare Associates, 2020, *Evaluation of the Aged Care System Navigator Measure Final Report*, Australian Government Department of Health.

^{xi}See <https://ministers.ag.gov.au/media-centre/national-rollout-sexual-violence-legal-services-pilot-now-complete-15-05-2026>