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Special Rapporteur on Violence against Women and Girls
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By Email: hrc-sr-vaw@un.org

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Dear Ms Alsalem

Violence against Older Women

Feminist Legal Clinic Inc. is a community legal service based in Sydney that works to advance the human rights of women and girls. Our casework and advocacy are specifically focused on defending women from male violence and human rights abuses. We welcome the opportunity to make this submission in which we will focus on violence against older women in Australia's aged care system and the failure to honestly identify the drivers of this violence.

There are far more women than men at older ages and using aged care.¹ Over half of those in aged care in Australia have dementia. Nearly two-thirds of those with dementia are women.² Due to a combination of their physical frailty and their frequently impaired ability to recall and report events, women in aged care are a population particularly vulnerable to targeted sexual assault, as well as other violence, by both carers and other residents.

According to the executive summary of the Final Report of the Australian Royal Commission into Aged Care, Quality and Safety (the Royal Commission) published on 1 March 2021, *'in 2019–20, residential aged care services reported 5718 allegations of assault under the mandatory reporting requirements of the Aged Care*

¹ Australian Institute of Health and Welfare, 'Older Australians' <https://www.aihw.gov.au/reports/older-people/older-australians/contents/aged-care>, accessed 10 April 2026.

² Australian Institute of Health and Welfare, 'Dementia in Australia' <https://www.aihw.gov.au/reports/dementia/dementia-in-aus/contents/aged-care/residential-aged-care>, accessed 10 April 2026

Act. Further the Report noted that *'in the same year, a further 27,000 to 39,000 alleged assaults occurred that were exempt from mandatory reporting because they were resident-on-resident incidents'*³

Until 2021, the Australian Government did not require providers of residential aged care to report physical and sexual assaults committed by fellow residents with cognitive impairment. The Royal Commission records *'[a]n estimated incidence of physical and sexual assault of 13–18 per 100 residents, when assaults that are exempt from reporting are included.'*⁴ However, despite acknowledging the under-reported reality of assaults by fellow residents, the Royal Commission does not make any recommendations about the need to make single sex aged care accommodation available.

Although the Serious Incident Response Scheme introduced in July 2021 now requires a broader range of serious incidents to be reported, many (if not most) assaults will still go unreported due to the victim's lack of cognitive capacity and recall.⁵ According to the Royal Commission: *'[t]he estimated number of alleged incidents of unlawful sexual contact in 2018–19 could be as high as 2520, or almost 50 per week.'*⁶ Disappointingly, the Royal Commission fails to differentiate its findings according to the sex of the victim or the perpetrator of assaults, effectively obscuring the sex-based reality of the situation.

The Royal Commission does record that seven out of 10 primary carers are women and that the aged care workforce is made up predominantly of women – *'87% of direct care workers in residential care and 89% of direct care workers in home care were women.'*⁷ This is a sector that is notoriously underpaid. An example was given to the Royal Commission of a woman who had to pay a man \$150 an hour to clean her gutters, when as an aged care worker, she is only paid \$21 an hour to clean a person and *'everything that goes with that, to provide dignity and care and support'*.⁸

Other witnesses to the Royal Commission spoke of the financial stress suffered by carers, including the increasing numbers of older women facing homelessness. Accounts were given of women giving up their employment to care for their mothers, only to then experience severe financial hardship when unable to re-enter the workforce when close to 60. Carers are described as the silent sufferers of the global

³ Final Report of the Royal Commission into Aged Care, Quality and Safety, Executive Summary, p68 <https://www.royalcommission.gov.au/system/files/2021-03/final-report-executive-summary.pdf>, accessed 9 April 2026.

⁴ Final Report of the Royal Commission into Aged Care, Quality and Safety, Vol 2, p29. <https://www.royalcommission.gov.au/system/files/2021-03/final-report-volume-2.pdf> accessed 9 April 2026

⁵ Final Report of the Royal Commission into Aged Care, Quality and Safety, Vol 2, p45. <https://www.royalcommission.gov.au/system/files/2021-03/final-report-volume-2.pdf> accessed 9 April 2026

⁶ Final Report of the Royal Commission into Aged Care, Quality and Safety, Vol 1, p140, <https://www.royalcommission.gov.au/system/files/2024-03/aged-care-rc-final-report-volume-1.pdf>, accessed 9 April 2026.

⁷ Final Report of the Royal Commission into Aged Care, Quality and Safety, Vol 1 p29-30 <https://www.royalcommission.gov.au/system/files/2024-03/aged-care-rc-final-report-volume-1.pdf>

⁸ Final Report of the Royal Commission into Aged Care, Quality and Safety, Vol 4b, p528 <https://www.royalcommission.gov.au/system/files/2021-03/final-report-volume-4b.pdf>

dementia pandemic.⁹ Indeed, women aged 55 and over are the fastest-growing cohort of homeless people in Australia.¹⁰

However, although most carers continue to be women, male participation in the aged care workforce has been steadily rising from roughly 10% in the 2010s to 23% in 2021-2022.¹¹

The Royal Commission records: *‘[t]here were 426 allegations of sexual assault reported to the Australian Department of Health in 2014–15, compared with the 2019-20 figure of 851. This is more than two reports per day on average, every day of the year’*.¹² This represents a doubling of reports, but no discussion follows as to the likely cause or probable impact of increased male staffing in aged care during this period.

The Royal Commission fails to consider whether the increasing level of male staff has contributed to the problem of violence against older women in aged care. Indeed, we found very few references to the issues that arise from having male staff attending to women’s intimate care. One quote from a witness statement was included but framed in terms of cultural issues rather than addressing the more obvious sex-based safety issue -

‘Far too often elderly women are receiving “women’s business” care performed by young male carers who often can’t speak enough English to understand let alone understand the elderly Indigenous resident or their cultural requirements’.¹³

Another speaker is quoted saying -

*‘My wife refuses to be showered by a male nurse and where there isn’t a second female nurse in attendance she isn’t showered.’*¹⁴

There were other oblique indications that not all female residents were comfortable with being attended to by male staff, but the report framed these in terms of other complaints. For example -

*‘The Resident was visibly cold, with goose bumps and was shivering. The resident stated words to the effect to [redacted] “he shouldn’t be allowed in women’s rooms.’*¹⁵

⁹ Final Report of the Royal Commission into Aged Care, Quality and Safety, Vol 5, p52

<https://www.royalcommission.gov.au/system/files/2021-03/final-report-volume-5.pdf>

¹⁰ Australian Human Rights Commission, ‘Risk of Homelessness in Older Women’,

<https://humanrights.gov.au/resource-hub/by-resource-type/projects2/risk-homelessness-older-women>

¹¹ Australian Bureau of Statistics, A Caring Nations, <https://www.abs.gov.au/media-centre/media-releases/caring-nation-15-cent-australias-workforce-health-care-and-social-assistance-industry>

accessed 10 April 2026

¹² Final Report of the Royal Commission into Aged Care, Quality and Safety, Vol 3b, p522

<https://www.royalcommission.gov.au/system/files/2021-03/final-report-volume-3b.pdf>, accessed 9 April 2026.

¹³ Final Report of the Royal Commission into Aged Care, Quality and Safety, Vol 3b, p38

<https://www.royalcommission.gov.au/system/files/2021-03/final-report-volume-3b.pdf>, accessed 9 April 2026.

¹⁴ Final Report of the Royal Commission into Aged Care, Quality and Safety, Vol 5, p79

<https://www.royalcommission.gov.au/system/files/2021-03/final-report-volume-5.pdf>,

¹⁵ Final Report of the Royal Commission into Aged Care, Quality and Safety, Vol 4b, p556

<https://www.royalcommission.gov.au/system/files/2021-03/final-report-volume-4b.pdf>

It seems the Royal Commission chose to minimise the seriousness of what would appear to be a growing epidemic of sexual predation on a vulnerable cohort. The following is a rare detail in their report of sexual misconduct by a male staff member:

*‘The facility notified the Australian Department of Health of an allegation by a resident that a male staff member kissed her and made inappropriate sexual comments to her. The notification entry for this incident states that the resident ‘is physically disabled and speech can be difficult to understand but [the resident] is cognitively intact’. The notes record that the resident said that “in light of the escalation to physical contact...this has made her feel very uncomfortable”’.*¹⁶

Unfortunately, most residents subjected to sexual abuse are unlikely to report how it made them feel due to their pre-existing cognitive impairment. It is this characteristic that likely makes them a target in the first place.

There have been far more disturbing descriptions of unaddressed sexual abuse in nursing homes reported in the mainstream media. However, these appear to have received little examination by the Royal Commission.¹⁷ Unsurprisingly in view of this failure to directly address the issue of male violence against older women, there has been little change in the rate of assaults in aged care since the Royal Commission.¹⁸ It is hoped the Rapporteur can now lend her voice to calls for meaningful intervention, including making available single sex aged care for women, with exclusively female staffing where possible.

Thank you again for this opportunity and for all your work protecting women and girls from violence. We would be happy to expand on any element of this submission if required.



Anna Kerr
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Feminist Legal Clinic Inc.
Organization in Special Consultative Status with the Economic and Social Council (ECOSOC) since 2023.

¹⁶Final Report of the Royal Commission into Aged Care, Quality and Safety, Vol 4b
<https://www.royalcommission.gov.au/system/files/2021-03/final-report-volume-4b.pdf> p425

¹⁷ <https://www.abc.net.au/news/2019-04-14/aged-care-sexual-assault-dorothy-major/10917524>
<https://www.abc.net.au/listen/programs/backgroundbriefing/the-invisible-killer-01-aged-care-true-crime-healthcare-murder/104927502>

¹⁸ <https://www.theguardian.com/australia-news/2022/jun/06/shocking-rate-of-sexual-abuse-against-aged-care-residents-barely-changed-since-royal-commission>
<https://www.opalinstitute.org/prevalence.html>