

Inquiry into Elder Abuse in Queensland

Submission No: 28
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Publication: Making the submission and your name public
Attachments: See attachment
Submitter Comments:



20 March 2025

Mr Nigel Hutton MP
Chair
Education, Arts and Communities Committee
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Submission to the Elder Abuse Inquiry by Sandy Bolton MP

Dear Mr Hutton,

Thank you for the efforts of the Committee in holding a public hearing for the Elder Abuse Inquiry in Noosa.

This is a critical issue for our communities with our matriarchs and patriarchs often vulnerable in a myriad of ways where they can be exploited, taken advantage of, and at times, left homeless by our very own systems.

In the Noosa electorate suburb of Noosaville, where the inquiry's hearing was held, the median age is 56 years, in comparison to Queensland median of 38 years, with 45 percent of our population over the age of 60 years. Thus, this issue is of critical importance to our community, as well as government through the associated costs that are often not factored into policies and fiscal realities.

The Australian Institute of Health and Welfare (AIHW) this year reported¹ that one in six older people living in the community in Australia, that is over 16 percent, experienced elder abuse in the prior year. This is a shocking and shameful reality, with psychological abuse most common, with half of the abuse committed by a family member, and only one third of victims having sought help from a third party. The AIHW had to draw on a range of sources to construct data sets on this abuse, highlighting the need for better data collection to reflect the broad range of abuses, which go beyond what is currently recognised.

The Australian Institute for Family Studies (AIFS) in 2021 undertook a survey² of 7000 aged persons to gain more accurate information on elder abuse. They found that the abuse was mostly committed by family members, with adult children being the most common perpetrators, with intimate partners also commonly involved.

¹ <https://www.aihw.gov.au/family-domestic-and-sexual-violence/population-groups/older-people>

² <https://aifs.gov.au/research/research-reports/national-elder-abuse-prevalence-study-final-report>



State criminal data studied by the Queensland Government Statistics Office (QGSO) in 2023 for their report “Insights into the abuse of older Queenslanders”³, found that older victims were underrepresented in the crime statistics. This underreporting may be due to the AIHW finding that two thirds of victims do not seek help from a third party (the findings do not show why victims do not seek help, another area that needs further investigation). The QGSO report also showed a nearly 100 percent increase in reported elder abuse in Queensland from 2008-09 to 2020-21.

These statistics are telling us that elder abuse is widespread, that it is largely hidden from view, and that it has serious effects on victims who are some of our most vulnerable. It does not however account for reports on what is currently not considered elder abuse, with examples given of the following -

- Unacceptable wait times for property settlements can cause serious problems leading to homelessness, depression and at times suicide.
- Health care provision wait times or access to, including mobility surgeries leading to depression/loss of physical capacity, etc.
- The failing of the in-home aged care support system, with the under provision of services and the elderly being unaware of service availability or being taken advantage of, including non-delivery of services by providers.
- While the Governments objective of encouraging our elderly to stay in their own homes is welcomed, it has exacerbated some issues. This includes isolation, with reports that often Meals-on-Wheels are the only contacts these elders have. With such isolation there is also a heightened risk of abuse, mental and physical degradation.
- Our emerging elders are often support carers for their children, grandchildren, siblings, partners or parents who have left their paid employments to care for others. They are 'retiring' into poverty due to a lack of superannuation for their own retirement, as well may be penalised due to a small amount of superannuation accumulated prior making them ineligible for government housing.
- Insufficient funding to ensure connectivity and accessibility for our elderly and disabled in our communities including basic path maintenance for wheely walker use, etc. Simple remedies such as this could increase connectivity and health, while reducing isolation and mental health challenges.

The risk factors for elder abuse were identified by the World Health Organisation as: functional dependence/disability, poor physical health, cognitive impairment, poor mental health and low income⁴. As they reported: “Many strategies have been tried to prevent and respond to abuse of older people, but evidence for the effectiveness of most of these interventions is limited at present. Strategies considered most promising include caregiver interventions, money management programmes; helplines and emergency shelters; and multi-disciplinary teams.”

In any multi-dimensional approach to prevention, there are a number of potential avenues. These include globally recognised intergenerational living and learning models which encompass supports, connectivity and ‘aging in place’. Examples include ‘GrandSchools’ which is a planning model for vibrant senior living integrated with schools, within a community, bringing together our young and elders for mutual benefits including social impact endeavours.

³ <https://www.qgso.qld.gov.au/issues/12786/insights-abuse-older-qlders.pdf>

⁴ <https://www.who.int/news-room/fact-sheets/detail/abuse-of-older-people>

Such innovation provides security through connectivity for our seniors, better learning through appreciation and respect of elder's wisdom, as well provision of skill sets through the connected community organisations.

Ultimately, the term 'elder abuse' is poorly understood. As stated by the AIHW, there is no agreed definition for elder abuse, and sometimes people do not believe or understand it applies to them. There are many examples as above which are perpetrated by failing systems including a shortfall in resources, or that are relegated to other terms, such as 'Domestic Violence' which does not show the full extent of the abuse.

There is also a stigma attached to the term 'elder abuse' leading to an inability or unwillingness for some to talk about it. The result is that it is often outside of inquiries where residents relay a myriad of traumatic experiences. The above highlights a number of issues, as well investigations that should be held. It also raises the question as to whether there is a need for a Queensland Age and Disability Commissioner or Commission be initiated to advocate for and report on the multiple contributors to elder abuse, including these currently not acknowledged as being a contributor such as the family hardships, in a similar manner to the Queensland Family and Child Commission.

Thank you, and to the rest of the committee and the secretariat, for your work on this inquiry as it is extremely important and reflective of us all as a society.

If you have any questions, please do not hesitate to contact myself on [REDACTED] or my office on 53193100.

Yours sincerely

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Member for Noosa