

Strengthening Protections Against Violent Workplace Incidents Amendment Bill 2026

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Submission By: Queensland Nurses and Midwives' Union

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This submission contains content that discusses incidents of violence and sexual violence

Submission to

State Development, Infrastructure and
Works Committee

Strengthening Protections Against Violent Workplace Incidents Amendment Bill 2026

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1.0 Introduction

The Queensland Nurses and Midwives' Union (QNMU) thanks the State Development, Infrastructure and Works Committee (the Committee) for the opportunity to provide feedback on the Strengthening Protections Against Violent Workplace Incidents Amendment Bill 2026 (Amendment Bill).

The QNMU is Queensland's largest and only registered union for nurses and midwives, representing over 80,000 members. The QNMU is a state branch of the Australian Nursing and Midwifery Federation (ANMF) with the ANMF representing over 356,000 members.

Our members work in health and aged care including public and private hospitals and health services, residential and community aged care, maternity services, mental health, general practice, and disability sectors across a wide variety of urban, regional, rural, and remote locations.

The QNMU is run by nurses and midwives, for nurses and midwives. We have a proud history of working with our members for over 100 years to promote and defend the professional, industrial, social, and political interests of our members. Our members direct the QNMU's priorities and policies through our democratic processes.

The QNMU expresses our continued commitment to working in partnership with Aboriginal and Torres Strait Islander peoples to achieve health equity outcomes. The QNMU remains committed to the Uluru Statement from the Heart, including a pathway to truth telling and treaty. We acknowledge the lands on which we work and meet always was, and always will be, Aboriginal and Torres Strait Islander land.

Warning this submission does discuss violence, and incidents of violence, including sexual violence.

The QNMU acknowledges that some of the recommendations and themes that we have outlined within this submission overlap with a recent submission to the Queensland's independent review of the Workers' Compensation and Rehabilitation Act.

2.0 Recommendations

Our key recommendations in relation to the Amendment Bill are outlined below. The rationale for these recommendations is detailed throughout our submission.

The QNMU recommends:

Recommendation 1	The Committee recommend that the Bill be passed to extend notification duties by inserting the definition of 'violent incident' into the relevant acts. The Committee should also recommend the additional recommendations outlined below.
Recommendation 2	SafeWork Queensland to publish 'violent incident' reporting data, including the number of investigations undertaken, actions taken by the Regulator and steps taken since an incident (including education and training) to promote safety for Queensland workers.
Recommendation 3	SafeWork Queensland to provide online readily available guidance for employers and employees on incident response and investigation steps.
Recommendation 4	Urgently undertake an in-depth analysis of the actual workplace violence and aggression incidents in Queensland.
Recommendation 5	Urgently restore Respect@Work protections and introduce a positive duty that requires employers to take reasonable and proportionate measures to eliminate or prevent discrimination or sexual harassment.
Recommendation 6	Urgently address the high rates of occupational violence experienced by healthcare workers and workers in educational settings.
Recommendation 7	Urgently address the high incidence of psychological injuries amongst female workers and ensure they have access to safe reporting options.
Recommendation 8	Undertake further research to identify the factors contributing to occupational violence, including the effectiveness of workplace control measures to manage exposure to violence and aggression, access to workers' compensation, claim making behaviour, the type and frequency of violence experienced, support provided by employers following exposure, injury severity, and interactions with other psychosocial hazards. (As suggested by Safe Work Australia, 2024, August).
Recommendation 9	Increase the number of workplace inspectors (including female inspectors) who are trained in psychological safety, occupational violence and healthcare settings.
Recommendation 10	Create safer workplaces by taking a more proactive approach to preventing occupational violence with a focus on preventing mental health injuries.
Recommendation 11	Examine the impact of occupational violence on Queensland's workforce.
Recommendation 12	The Public Sector Commission to publish the gender safety gap for Queensland to ensure ongoing visibility of gender safety issues in the workplace.
Recommendation 13	The Queensland Government to investigate the true cost of workplace violence including sexual harassment.
Recommendation 14	The Queensland Government engage with Safe Work Australia's Cultivating Systemic Safety and Inclusion to Prevent Workplace Sexual Harassment project and apply its findings in Queensland workplaces.

3.0 Background

Meaningful change is required to ensure that everyone can feel safe at work. The current requirement for notifiable incidents provides employers the power and opportunity to overlook a crime, as there is no obligation to report to the regulator actual or threatened sexual assaults and assaults in the workplace.

The World Health Organization (WHO) reported that violence against women remains devastatingly pervasive with one in three women experiencing violence.¹ Many women who are victims of violence are also subject to abuse and harassment in their workplace.²

Violence and harassment against healthcare workers is not new. However, verbal and physical violence against nurses is an underestimated component of today's worldwide public health problem and is receiving inadequate attention from policymakers and legislative efforts to resolve the problem remain insufficient.³ Without stronger action, healthcare workers will continue to bear the consequences of a risk that is preventable.

The QNMU will provide evidence to the Committee demonstrating:

- The high rates of violence against women, including in the workplace,
- Predatory behaviours that go unchecked can escalate,
- Increasing reports of occupational violence against workers in healthcare and education align with increasing rates of psychological injury in Queensland,
- Unsafe working environments adversely affect patient safety,
- Violence costs an estimated \$30 billion a year in Australia,⁴ and
- Nurses and midwives, as a predominantly female workforce, are well placed to inform reforms that address long-standing inequality between women and men.

A workplace without violence and harassment should be a fundamental right for every Queensland worker.

3.1 Notifiable incidents

In Queensland, a person who conducts a business or undertaking **must** ensure the regulator is notified immediately after becoming aware of a notifiable incident arising out of the conduct of the business or undertaking.⁵ Notifiable incidents include the death of a person, serious injury or illness of a person,⁶ or a dangerous incident.⁷

Once a notification is made, the site of an incident must not be disturbed.⁸ The regulator may then assess the severity of the incident, determine whether an onsite response or formal investigation is required, and consider whether a breach of work health and safety laws has occurred. Where appropriate, enforcement action may

¹ World Health Organization. (2021, March). *Devastatingly pervasive: 1 in 3 women globally experience violence*. Retrieved from <https://www.who.int/news/item/09-03-2021-devastatingly-pervasive-1-in-3-women-globally-experience-violence>.

² De Raeve, P., Xyrichis, A., Bolzonella, F., Bergs, J., & Davidson, P. M. (2023). Workplace Violence Against Nurses: Challenges and Solutions for Europe. *Policy, politics & nursing practice*, 24(4), 255–264. <https://doi.org/10.1177/15271544231182586>

³ Ibid.

⁴ Ballard, A., and Bozin, D. (2023). The true (financial) costs of workplace violence in Australia, *Alternative Law Journal*, 48(3). <https://doi.org/10.1177/1037969X231174672>

⁵ *Work Health and Safety Act 2011* (WHS Act), section 38.

⁶ WHS Act, section 36.

⁷ WHS Act, sections 35 and 37.

⁸ WHS Act, section 39 and Queensland Government. (Worksafe Qld). (2026) *Don't disturb the site of an incident*. Retrieved from <https://www.worksafe.qld.gov.au/safety-and-prevention/incidents-and-notifications/notify-us-of-an-incident/dont-disturb-the-site-of-an-incident>.

be taken, including criminal prosecution (against individuals or companies) in cases involving severe negligence or safety failures.⁹

Notifying the regulator can help identify causes of incidents and prevent similar incidents occurring at the workplace and other workplaces. The regulator can then carry out the function they are legislated to provide, which includes monitoring and enforcing compliance with the *Work Health and Safety Act 2011* (WHS Act), collecting, analysing and publishing statistics and promoting and supporting education and training on matters relating to work health and safety.¹⁰

Currently, there is no obligation to report to the regulator actual or threatened sexual assaults and assaults in the workplace, among other matters. Evidence suggests that multi-component interventions can produce greater effects, such as introducing workplace violence reporting systems and structured education programs.¹¹ Extending incident reporting conditions will provide valuable data to identify systemic failures and highlight indicators before incidents occurs. Workplaces must remain accountable to strengthen safety culture.

3.2 Proposed changes to notifiable incidents.

On 30 August 2024, Safe Work Australia instructed the Australasian Parliamentary Counsel's Committee to draft amendments to the Work Health and Safety (WHS) Model.¹² The amendments were published on 5 December 2025 and included changes to Part 3 of the model WHS Act to clarify and expand notification requirements. These changes introduced new notification duties for extended worker absences, violent incidents and work-related suicide and attempted suicide.¹³ The definition for 'a violent incident' is outlined below.

Amendment of Model Work Health and Safety Bill

37 What is a violent incident

In this Part, violent incident means 1 or more of the following that exposes a person to a serious risk of psychological harm:

- (a) a sexual assault or suspected sexual assault;
- (b) a physical assault, including with bodily fluids;
- (c) deliberate deprivation of a person's liberty without lawful authority;
- (d) a threat of sexual or physical assault, or a threat to deprive a person of the person's liberty, where there is a reasonable belief that, at the time the threat is made, the person making the threat: (i) intends to carry out the threat; and (ii) has the means to carry out the threat.¹⁴

⁹ NSW Government (SafeWork NSW). (Retrieved 10 June 2026). *SafeWork NSW incident response and investigations – what to expect*. Retrieved from https://www.safework.nsw.gov.au/_data/assets/pdf_file/0010/956224/SafeWork-NSW-incident-response-and-investigations-what-to-expect-Customer-Service-Standard.pdf

¹⁰ WHS Act sections 152 (b), (d), and (f).

¹¹ De Raeve, P., Xyrichis, A., Bolzonella, F., Bergs, J., & Davidson, P. M. (2023). Workplace Violence Against Nurses: Challenges and Solutions for Europe. *Policy, politics & nursing practice*, 24(4), 255–264. <https://doi.org/10.1177/15271544231182586>

¹² Australasian Parliamentary Counsel's Committee. (2025). *Model Work Health and Safety Legislation Amendment (Incident Notification) 2025*. Retrieved from https://www.safeworkaustralia.gov.au/sites/default/files/2025-12/model_whs_bill_incident_notification_amendment_2025.pdf

¹³ Safe Work Australia. (2025, December). *Model Work Health and Safety Legislation Amendment (Incident Notification) 2025*. Retrieved from <https://www.safeworkaustralia.gov.au/doc/model-work-health-and-safety-legislation-amendment-incident-notification-2025>

¹⁴ Australasian Parliamentary Counsel's Committee. (2025). *Model Work Health and Safety Legislation Amendment (Incident Notification) 2025*. Retrieved from https://www.safeworkaustralia.gov.au/sites/default/files/2025-12/model_whs_bill_incident_notification_amendment_2025.pdf

The model WHS Act provides a balanced and nationally consistent framework for protecting the health and safety of workers and workplaces.¹⁵ Queensland adopted the model WHS laws on 1 January 2012 and has committed to maintaining a nationally harmonised approach to work health and safety.¹⁶

Since that time, the model WHS laws have been amended to strengthen worker protections, including through expanded notification requirements for violent incidents. While these amendments have been incorporated into the model laws, they will only take legal effect in Queensland once they are adopted into Queensland legislation.¹⁷

The Strengthening Protections Against Violent Workplace Incidents Amendment Bill 2026 (Amendment Bill) implements these changes by inserting the updated model WHS Act definition of “violent incident” into the WHS Act and corresponding provisions in the *Safety in Recreational Water Activities Act 2011*. Adopting these amendments will support national consistency and ensure Queensland workers receive the same protections available under the updated model WHS laws.¹⁸

Notification requirements play an important role in preventing future harm.¹⁹ Reporting incidents and near misses helps identify patterns, uncover root causes and inform strategies to reduce risk.²⁰ In the same way that healthcare organisations use incident reporting to improve patient safety, reporting violent workplace incidents can support prevention, early intervention and safer workplace.

The QNMU has long advocated for and championed the implementation of the Positive Practice Environment Standards,²¹ which recognise that nurses and midwives must be able to work in physically, psychologically and culturally safe environments.²² The QNMU submits that achieving this requires a strong and consistent response to workplace violence, particularly sexual violence. Violence and threats of violence should never be accepted as an inherent part of healthcare work.

Effective reporting and notification requirements are critical to this response. Reporting violent incidents supports investigation, accountability and prevention, and helps ensure harmful behaviours are identified and addressed rather than normalised or dismissed. Exposure to violence, including threats of violence, contributes to psychological injury, burnout and poor staff morale. Healthcare workers should not be expected to compromise their own safety in order to care for others.

QNMU members have reported experiencing shocking and unacceptable incidents of violence. The following distressing incidents have been provided for the Committee to consider the significance of this Bill and why immediate changes are necessary.

¹⁵ Safe Work Australia. (accessed 10 June 2026). *Model WHS Laws*. Retrieved from <https://www.safeworkaustralia.gov.au/law-and-regulation/model-whs-laws>

¹⁶ Safe Work Australia. (2025, December). *Incident notification*. Retrieved from <https://www.safeworkaustralia.gov.au/safety-topic/managing-health-and-safety/incident-notification>

¹⁷ Safe Work Australia. (Accessed 10 June 2026). *Legislation*. Retrieved from <https://www.safeworkaustralia.gov.au/law-and-regulation/legislation>

¹⁸ WHS Act section 3h – ‘maintaining and strengthening the national harmonisation of laws relating to work health and safety and to facilitate a consistent national approach to work health and safety in Queensland’.

¹⁹ Wolf, Z., and Hughes, R. Error Reporting and Disclosure. In: Hughes RG, editor. *Patient Safety and Quality: An Evidence-Based Handbook for Nurses*. Rockville (MD): Agency for Healthcare Research and Quality (US); 2008 Apr. Chapter 35. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK2652/>

²⁰ Sergi C, Davis DD. Incident Reporting. [Updated 2023 Jul 25]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2026 Jan-. Retrieved from: <https://www.ncbi.nlm.nih.gov/books/NBK560498/>

²¹ QNMU. (Accessed 15 June 2026). *Positive Practice Environment Standards*. Retrieved from <https://www.qnmU.org.au/Web/Campaigns/PPE-Standards.aspx>

²² QNMU Positive Practice Environment Standard 2.

Sexually violent incident by a work colleague:

This member complained she was raped after a work function by a colleague. When she reported it to her employer, the employer permitted the perpetrator to make a counter complaint against her, failed to implement any safety plan, failed to commence an investigation for many months, and failed to ensure the complainant was rostered safely. The matter was not reported to WHS Queensland.

Incidents of sexual violence by patients:

Incident 1

The nurse was sexually assaulted (violently grabbed on the breast, and on the vulva) by a patient in a regional hospital. While the nurse reported this and was permitted to take leave, management did not enact any trauma-informed follow up with her. It did not update her on any safety plan regarding the patient, including his whereabouts when she returned from leave. The patient had earlier sexually assaulted another nurse. Had the employer been required to report the assault as a 'notifiable incident' and the site preserved as required under current WHS laws, it is more likely that (1) external assessment of the patient's location in the hospital would have occurred and (2) the second assault would not have occurred.

Incident 2

This member was violently sexually assaulted by a patient. Despite immediately reporting the assault to various levels of management and colleagues, the nurse was provided no support. The site of the assault was not secured, and she was required to keep providing care to the patient, including administering medication. The nurse was not offered medical assessment or treatment. This failure to intervene allowed the perpetrator the opportunity to later assault a visitor to the hospital. The patient remained in the unit for some days after the assault. The nurse's colleagues reported distress that they had not been advised of the risks of managing the patient and that no further action had been taken at the unit to control that risk. Only after the nurse made her own police complaint and the union became involved that the employer took action to address the risk of further violent incidents from the patient.

Threats of sexual violence by a work colleague:

The member was a nurse whose first language was not English. She received sexually violent SMSs with threat of rape, from a colleague. Our member reported these to her employer and, later, to the police. When the employer was notified of the incident, they did not notify WHS or the police, rather, they commenced internal investigations, where the nurse was required to stand down from work.

Once a 'violent incident' notification is made, an obligation not to disturb the site of an incident will follow. This is an important step in protecting the integrity of any investigation. In the above cases, an obligation to report a violent incident (including a sexual assault, suspected sexual assault, a threat of sexual assault) would likely

have increased the employer's awareness of the seriousness of the issue. While there may be challenges involved in securing the site of a sexual assault, suspected sexual assault, a threat of sexual assault, or other 'violent incident', this obligation speaks to the seriousness of the risk of harm caused by those incidents. These challenges should not impede progressive legal reform.

The QNMU supports the insertion of the new definition of 'violent incident,' as zero tolerance for violence cannot be considered seriously without this change. We also note that psychological harm can still be sustained by threats of behaviour regardless of whether the person making the threat had the intention or means to carry it out. Although we acknowledge that expanding notification requirements is a positive step towards improving workplace safety for Queensland workers, particularly for women, further urgent action is required.

Recommendation 1: The Committee recommend that the Bill be passed to extend notification duties by inserting the definition of 'violent incident' into the relevant acts. The Committee should also recommend the additional recommendations outlined below.

Recommendation 2: SafeWork Queensland to publish 'violent incident' reporting data, including the number of investigations undertaken, actions taken by the Regulator and steps taken since an incident (including education and training) to promote safety for Queensland workers.

Recommendation 3: SafeWork Queensland to provide online readily available guidance for employers and employees on incident response and investigation steps.

The following sections will outline the concerning rise of violent assaults and sexual assaults (including threats of violence), the impacts of harm on both the individual and the system, the importance of a safe workplace, whilst including further recommendations for the Committee to consider.

3.3 Prevalence of violent and sexual assaults (including threats)

Workplace violence and aggression is any incident where a person is abused, threatened or assaulted at the workplace or while they are working. These incidents can result in psychological and physical harm to workers and others and can harm the person they are directed at as well as anyone who witnesses the behaviour.²³

In 2024, Safe Work Australia, analysed data from Safe Work Australia's workers' compensation claims data, as well as data from the Australian Bureau of Statistics (ABS) Personal Safety Survey (PSS) and the People at Work (PAW) Survey. The ABS PSS results indicate that over the last 10 years, 176,100 incidents of workplace violence occurred, which included 145,900 physical assault incidents and 30,200 sexual assault incidents (as shown in figure 1). They further highlight that only approximately 46% (80,900) of these incidents were formally reported as workplace/on-the-job incidents.²⁴

²³ Safe work Australia. (2024, August). *Workplace and work-related violence and aggression in Australia*. Retrieved from https://data.safeworkaustralia.gov.au/sites/default/files/2024-08/Work-related-violence-and-aggression_Report_August2024.pdf
²⁴ Ibid.

Figure 1– (Image retrieved from Safe work Australia, 2024, August, page 13)



Concerningly, Safe Work Australia's 2023 Traumatic Injuries Fatalities (TIF) data (preliminary data), showed there were at least six worker deaths resulting from being assaulted by a person or persons.²⁵ Data extracted from the PAW survey (a validated Australian psychosocial risk assessment survey), for the period from 1 January 2023 to 31 December 2023, also showed there are over 250,000 workers estimated to have experienced physical violence by a male employer, manager, supervisor or co-worker (as shown in figure 2).²⁶

These figures highlight the prevalence of workplace violence. Safe Work Australia has also reported high numbers of serious workers' compensation claims for assault or occupational violence for the Healthcare and social assistance industry (this is shown in figure 3).

Figure 2– Experienced physical violence since the age of 15 ABS PSS (2021-22) (Image retrieved from Safe work Australia, 2024, August, page 12)

	Estimate ('000)
Women's experience of work-related physical violence	
Physical violence by a male employer/manager/supervisor	22.9
Physical violence by a male co-worker	63.9
Physical violence by a male client/patient/customer	167.7
Physical violence by a female client/patient/customer	111.4
Men's experience of work-related physical violence	
Physical assault by a male co-worker	187.3*
Physical assault by a male client/patient/customer	204.6*

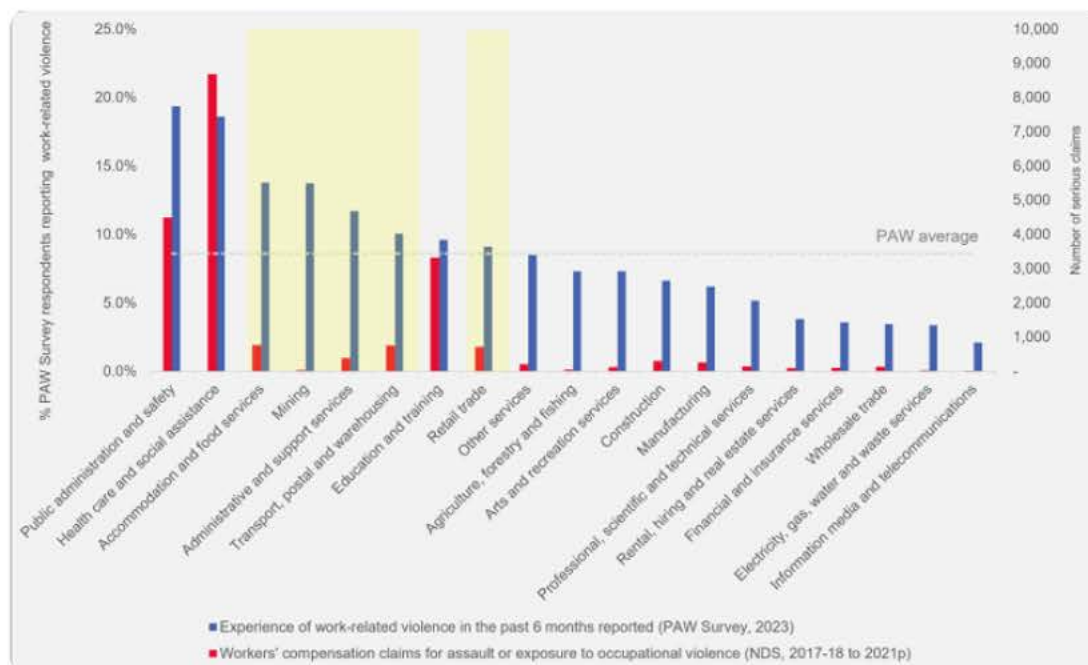
* estimate has a relative standard error of 25% to 50% and should be used with caution

Source: ABS Personal Safety Survey.

²⁵ Safe work Australia. (2024, August). *Workplace and work-related violence and aggression in Australia*. Retrieved from https://data.safeworkaustralia.gov.au/sites/default/files/2024-08/Work-related-violence-and-aggression_Report_August2024.pdf

²⁶ Ibid.

Figure 3— Experienced physical violence since the age of 15 ABS PSS (2021-22) (Image retrieved from Safe work Australia, 2024, August, page 6)



Source: People at Work Survey and Safe Work Australia National Dataset for Compensation-based Statistics.

However, these figures are likely to underestimate the true extent of workplace violence and aggression as sexual assault is widely recognised as an underreported crime, with only 13% of incidents formally reported to law enforcement.²⁷ The ABS's PSS indicated that 92% of women who experienced sexual assault by a male did not report their most recent incident to police.²⁸

My employer attempted to rape me on one occasion and then did rape me on another [occasion]. I had just turned 20 years of age. I was terrified. I did not tell anyone [and] locked the memory of the rape away to keep myself safe and subsequently thought it was odd when I started having panic attacks. So began ... years of chronic anxiety, depression and [post-traumatic stress disorder].

Taken from the Australian Human Rights Commission's Respect@Work report page 259

Everyone has a role to play in promoting safety in the workplace. The following data (taken from the ABS's website) illustrates the disturbing prevalence of violent incidents, including threats of physical and sexual violence.

❖ Violence

The ABS's 2021-22 PSS estimated eight million people (41%) aged 18 years and over have experienced violence (physical and/or sexual) since the age of 15, including 43% of men (4.1 million) and 39% of women

²⁷ Wieberneit, M., Thal, S., Clare, J., Notebaert, L., & Tubex, H. (2024). Silenced Survivors: A Systematic Review of the Barriers to Reporting, Investigating, Prosecuting, and Sentencing of Adult Female Rape and Sexual Assault. *Trauma, violence & abuse*, 25(5), 3742–3757. <https://doi.org/10.1177/15248380241261404>.

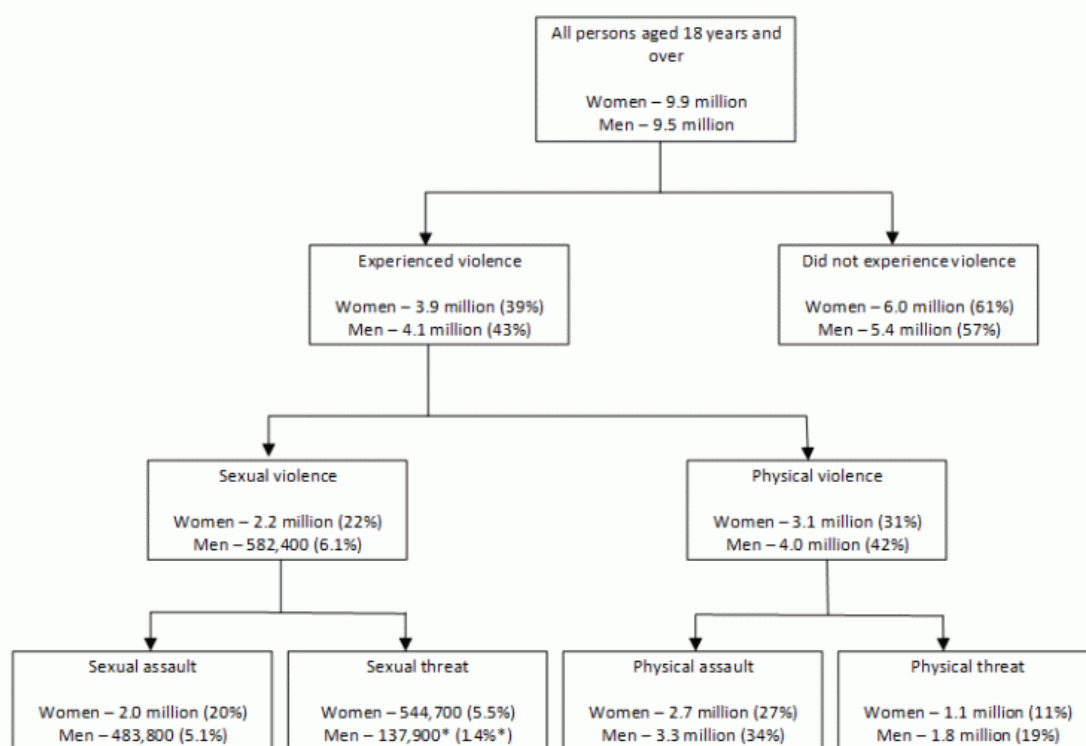
²⁸ Australian Bureau of Statistics. (2023, August). *Sexual violence*. Retrieved from <https://www.abs.gov.au/statistics/people/crime-and-justice/sexual-violence/2021-22>

(3.9 million) (as shown in figure 4). Specifically for Queensland, it is estimated 831,400 women (42%) have experienced violence (physical and/or sexual) since the age of 15, including 24% (479,900) who experienced sexual violence and 34% (671,500) who experienced physical violence.²⁹

Physical violence (including threats of violence)

The 2021-22 PSS showed an estimated seven million people aged 18 years and over (36%) have experienced physical violence (assault and/or threat) since the age of 15. For men, four million (42%) have experienced physical violence, including 3.3 million (34%) who experienced physical assault and 1.8 million (19%) who experienced physical threat. For women, 3.1 million (31%) experienced physical violence, including 2.7 million (27%) who experienced physical assault and 1.1 million (11%) who experienced physical threat (as shown in figure 5).³⁰ The 2021-22 PSS highlighted that for men the majority (74%) of incidents occurred at a non-residential location, including at work, a place of entertainment or recreation, or outside. Concerningly, for women 10% or 96,100 incidents of physical assault which occurred by a male, occurred in their workplace (figure 6). In addition, of the women who had experienced physical assault by a female, 17% or 49,800 reported this occurred in their workplace (figure 7).³¹

Figure 4 – Experiences of violence since the age of 15, 21-22 (image retrieved from ABS 2023, March Personal Safety, Australia)



a. People may have experienced multiple types of violence but are only counted once in composite totals. Subcomponents therefore may not sum to the composite totals.

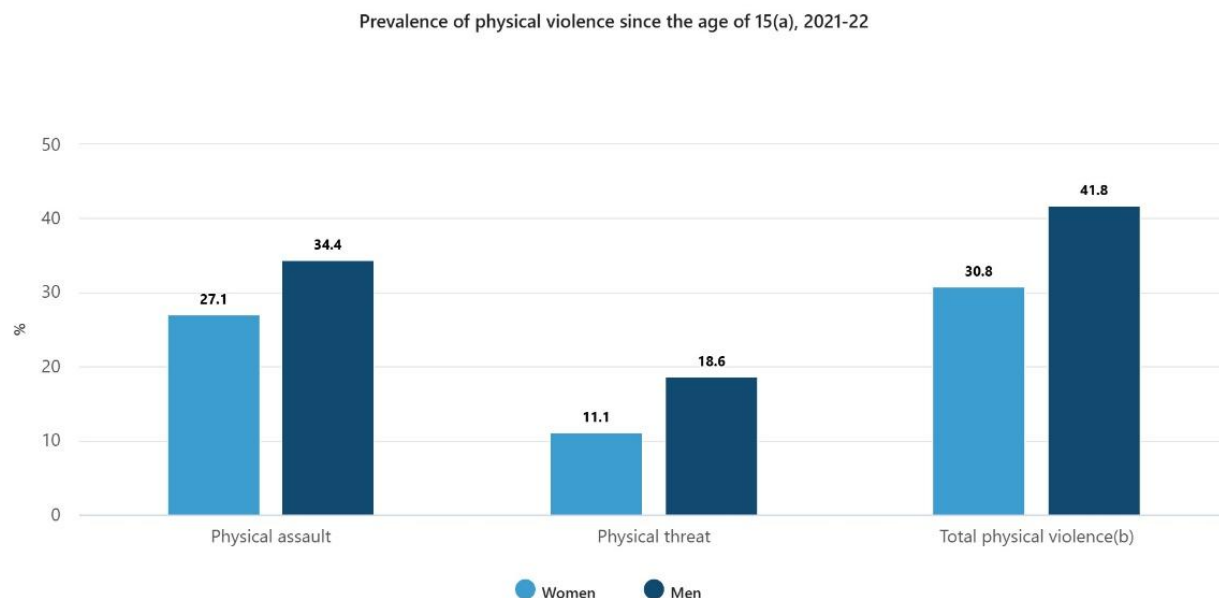
* Estimate has a relative standard error of 25% to 50% and should be used with caution

²⁹ Australian Bureau of Statistics. (2023, March). *Personal Safety Australia*. Retrieved from <https://www.abs.gov.au/statistics/people/crime-and-justice/personal-safety-australia/2021-22>

³⁰ Ibid.

³¹ Australian Bureau of Statistics. (2023, August). *Physical Violence*. Retrieved from <https://www.abs.gov.au/statistics/people/crime-and-justice/physical-violence/2021-22>

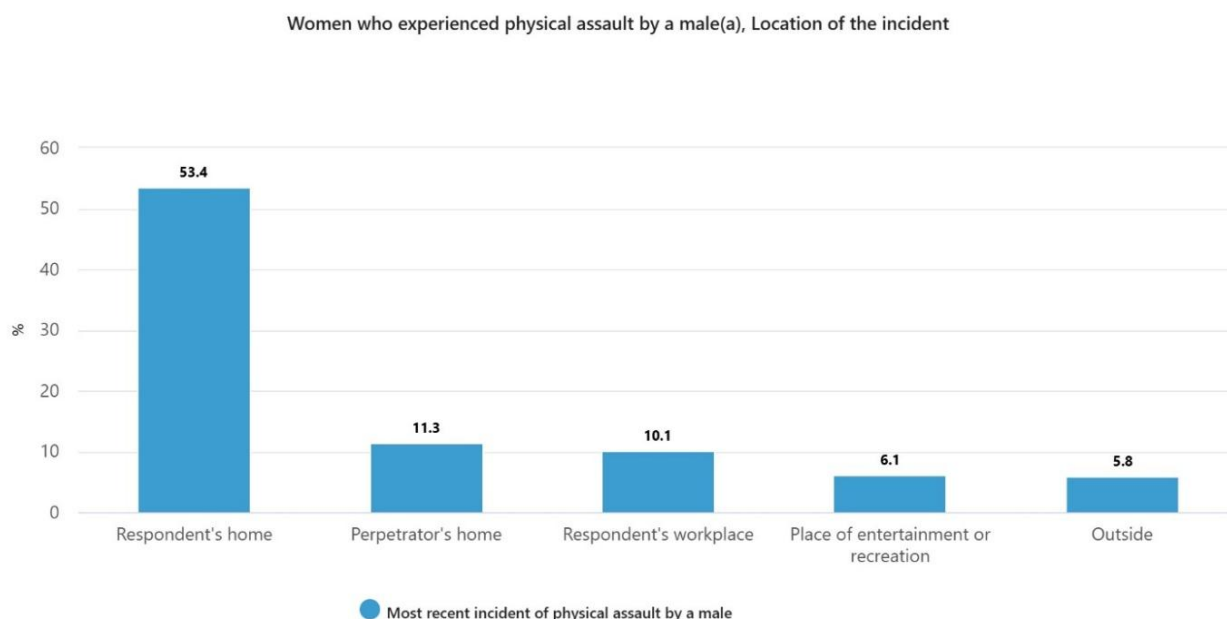
Figure 5 - Prevalence of physical violence since the age of 15, 2021-22 (image retrieved from ABS 2023, March Personal Safety)



a. Refers to the number of men/women who have experienced physical violence since the age of 15, expressed as a percentage of all men/women aged 18 years and over.
 b. Includes physical assault and physical threat. Where a person has experienced both physical assault and physical threat, they are counted separately for each but are counted only once in the aggregated physical violence total.

Source: Australian Bureau of Statistics, Personal Safety, Australia 2021-22 financial year

Figure 6 - Women who experienced physical assault by a male(a), Location of the incident (Image retrieved from ABS, 2023, August, Physical Violence)



a. Refers to the most recent incident of physical assault by a male that occurred in the last 10 years.

Source: Australian Bureau of Statistics, Physical violence 2021-22 financial year

Figure 7 – Location of incident for women who experienced physical assault by a female, (Image retrieved from ABS, 2023, August, Physical Violence)



a. Refers to the most recent incident of physical assault by a female that occurred in the last 10 years.

Source: Australian Bureau of Statistics, Physical violence 2021-22 financial year

The most recent physical assault data shows that in 2024-25, 395,100 people (1.8%) experienced physical assault, 463,400 (2.1%) experienced face-to-face threatened assault and 139,700 (0.6%) experienced non-face-to-face threatened assault. Specifically for Queensland during the 2023-25 reference period, 194,200 people had experienced physical and/or threatened assault in the previous 12 months.³²

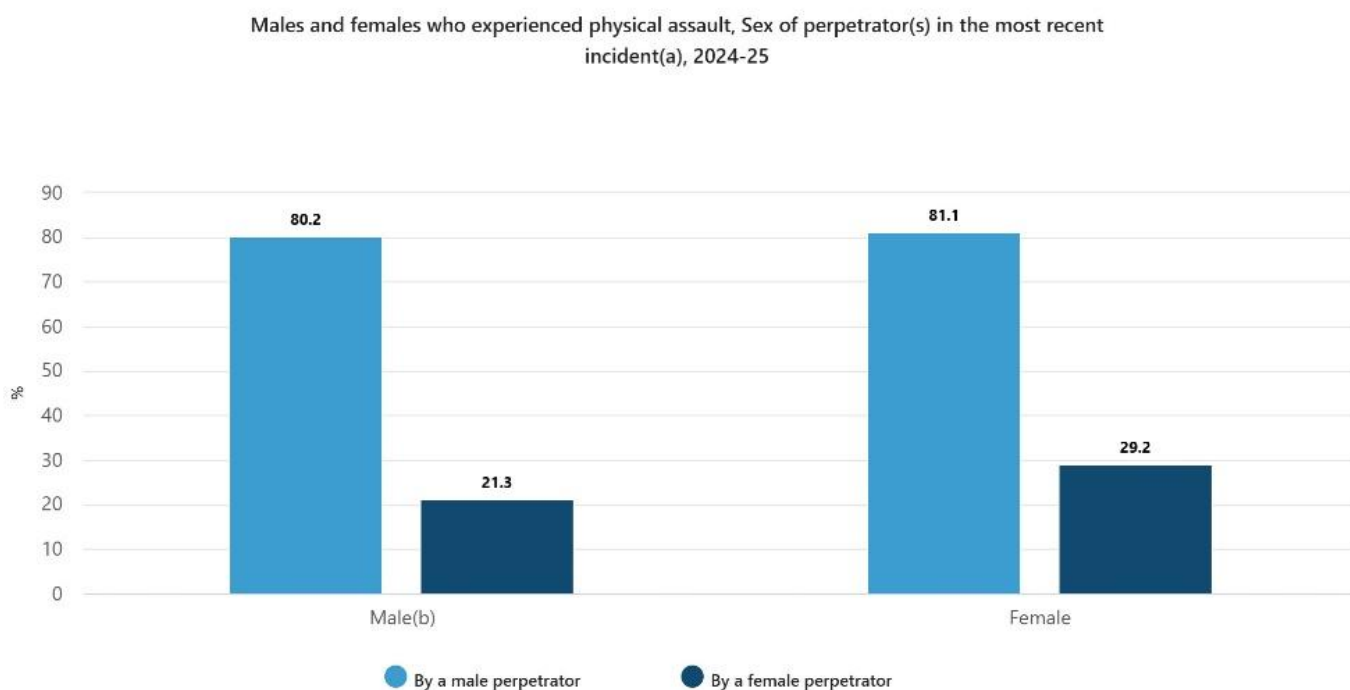
Additionally, of the total estimated 395,100 persons (for the 2024-25 period) who experienced physical assault, 219,200 people (56%) reported the most recent incident to the police. Both males and females were more likely to experience physical assault by a male perpetrator than by a female perpetrator in the most recent incident (as shown in figure 8).³³ Concerningly, for males who experienced physical assault, the incident most often occurred in a non-residential location including 56,700 incidents (27%) that occurred at work. Of the total incidents for males, 92,400 (44%) were physically injured. Furthermore, for females who experienced physical assault, 51,200 (28%) had experienced the incident at work and of the total incidents for females, 86,900 (48%) were physically injured.³⁴

³² Australian Bureau of Statistics. (2026, March). *Crime victimisation*. Retrieved from <https://www.abs.gov.au/statistics/people/crime-and-justice/crime-victimisation/2024-25>.

³³ Ibid.

³⁴ Ibid.

Figure 8 - Males and females who experienced physical assault, Sex of perpetrator(s) in the most recent incident(a), 2024-25 (ABS, March 2026, Crime victimisation)



a. The assault may have involved both male and female perpetrators. As such, components may sum to over 100%.

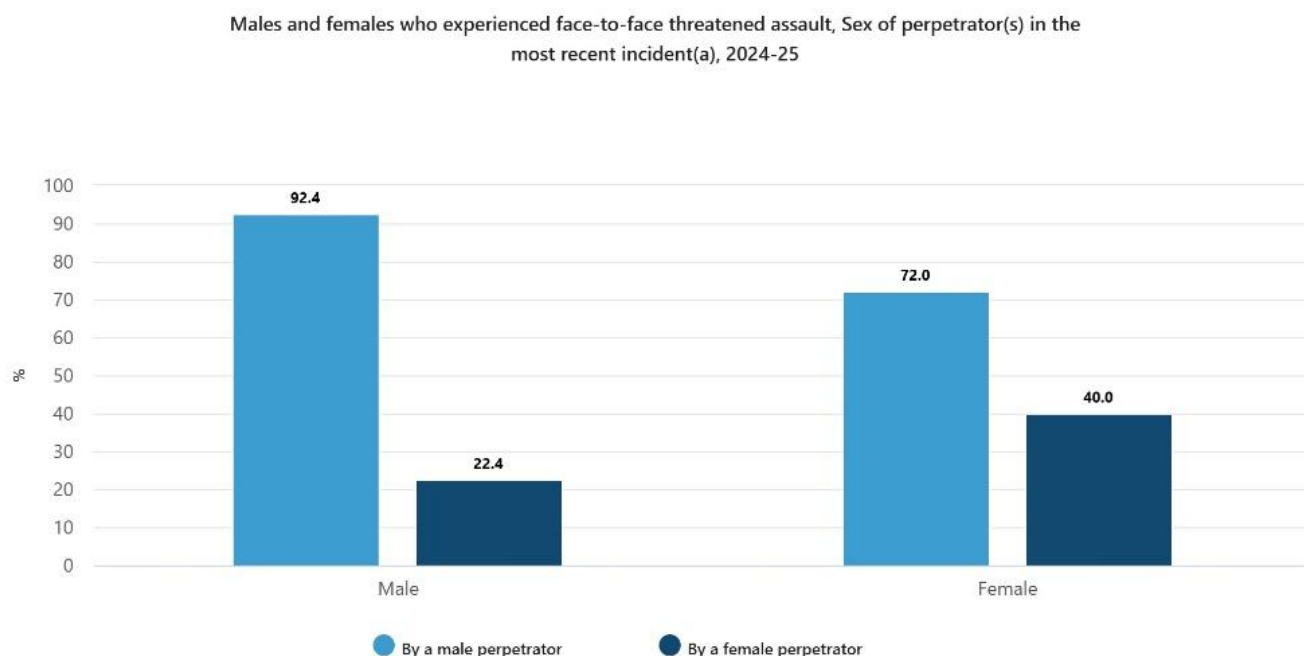
b. Estimate for males who have experienced physical assault by a female perpetrator has a relative standard error of 25% to 50% and should be used with caution.

Source: Australian Bureau of Statistics, Crime victimisation 2024-25 financial year

In 2024-25, 463,400 persons experienced face-to-face threatened assault, which was the same as the rate in 2023-24 (2.1%). Of the estimated 463,400 persons who experienced face-to-face threatened assault, 40% (183,800) reported the most recent incident to the police, similar to the 2023-24 rate (39%). Females were more likely than males to have reported the most recent incident of face-to-face threatened assault to the police (48% compared with 33%). Additionally, both males and females were more likely to experience face-to-face threatened assault by a male perpetrator than by a female perpetrator in the most recent incident as showed in figure 9 below.³⁵

³⁵ Australian Bureau of Statistics. (2026, March). *Crime victimisation*. Retrieved from <https://www.abs.gov.au/statistics/people/crime-and-justice/crime-victimisation/2024-25>

Figure 9 - Males and females who experienced face-to-face threatened assault, Sex of perpetrator(s) in the most recent incident(a), 2024-25 (ABS, March 2026, Crime victimisation)



a. The assault may have involved both male and female perpetrators. As such, components may sum to over 100%.

Source: Australian Bureau of Statistics, Crime victimisation 2024-25 financial year

The ABS's data indicates males were more likely to experience the most recent incident of face-to-face threatened assault by a stranger (61% or 150,100) than by a known person (39% or 94,900). Females were more likely to experience the most recent incident of face-to-face threatened assault by a known person (60% or 128,800) than by a stranger (40% or 84,900).³⁶

Furthermore, for males who experienced face-to-face threatened assault, the incident most often occurred at a non-residential location (81% or 198,300), including 38% (93,700) that occurred at work. For females who experienced face-to-face threatened assault, 64% of incidents (136,500) occurred at a non-residential location, including 38% (81,600) that occurred at work. Of the estimated 139,700 persons who experienced non-face-to-face threatened assault, 31% (42,600) reported the most recent incident to the police, which was similar to the 2023-24 reporting rate (33%).³⁷

Sexual violence

The 2021-22 PSS estimated 2.8 million people aged 18 years and over (14%) experienced sexual violence (assault and/or threat) since the age of 15. For women, 2.2 million (22%) experienced sexual violence, including 2.0 million (20%) who experienced sexual assault and 544,700 (5.5%) who experienced sexual threat. For men, 582,400 (6.1%) experienced sexual violence, including 483,800 (5.1%) who experienced sexual assault and 137,900* (1.4%*) who experienced sexual threat. Women were more likely than men to experience sexual violence (both assault and threat) (as shown in figure 10).³⁸ Women were more likely to

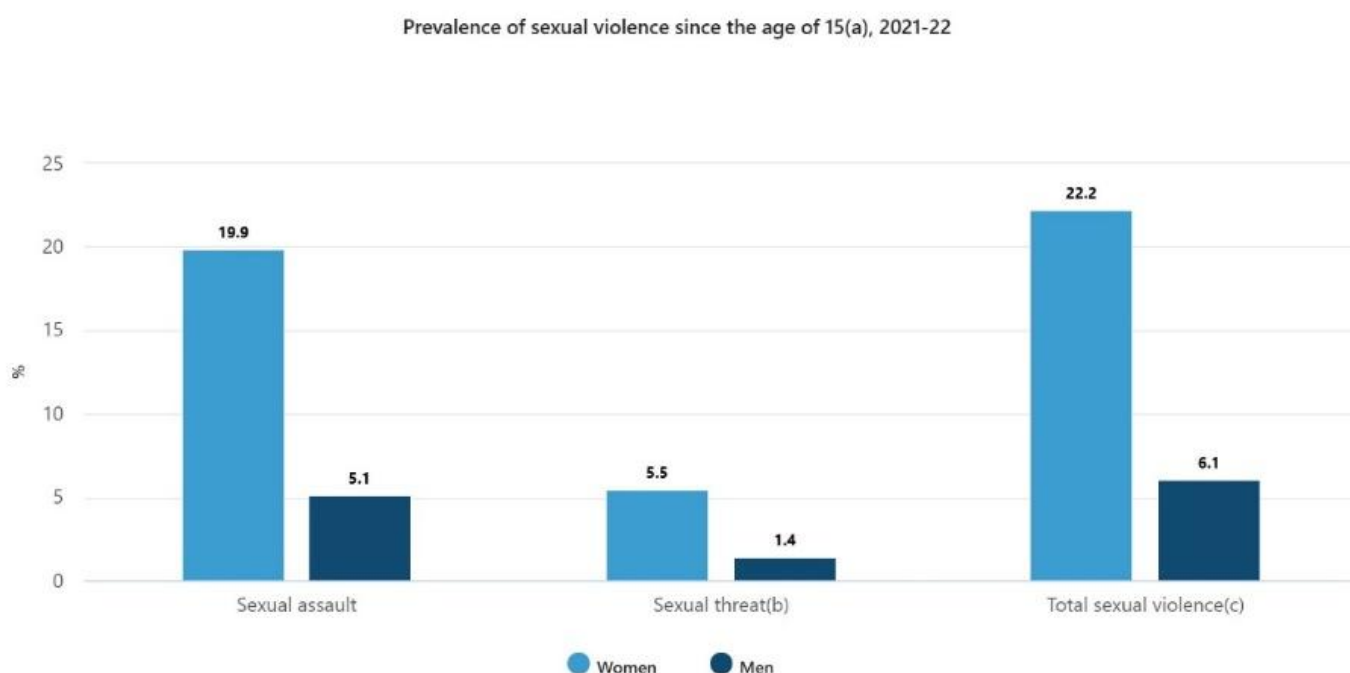
³⁶ Australian Bureau of Statistics. (2026, March). *Crime victimisation*. Retrieved from <https://www.abs.gov.au/statistics/people/crime-and-justice/crime-victimisation/2024-25>

³⁷ Ibid.

³⁸ Australian Bureau of Statistics. (2023, March). *Personal Safety Australia*. Retrieved from <https://www.abs.gov.au/statistics/people/crime-and-justice/personal-safety-australia/2021-22>

experience sexual violence (includes the occurrence, attempt or threat of sexual assault) since the age of 15 by a male than by a female with 2.2 million experienced sexual violence by a male and 67,700 experienced sexual violence by a female.³⁹ The 2021-22 PSS reported that estimated 8.3% of women (61,100) who experienced sexual assault by a male said the police were contacted about the most recent incident. Concerningly, the majority (92% or 680,300) of women who experienced sexual assault by a male did not report the most recent incident to police.⁴⁰ [* indicates a standard error of 25-50%]

Figure 10 - Prevalence of sexual violence since the age of 15 (Image retrieved from ABS, 2023, March, Personal Safety)



a. Refers to the number of men/women who have experienced sexual violence since the age of 15, expressed as a percentage of all men/women aged 18 years and over.
 b. Estimate for men has a relative standard error of 25% to 50% and should be used with caution.
 c. Includes sexual assault and sexual threat. Where a person has experienced both sexual assault and sexual threat, they are counted separately for each but are counted only once in the aggregated sexual violence total.

Source: Australian Bureau of Statistics, Personal Safety, Australia 2021-22 financial year

The ABS data highlighted that estimates for male experiences are subject to high sampling error therefore only information on females' experiences of sexual assault were included.

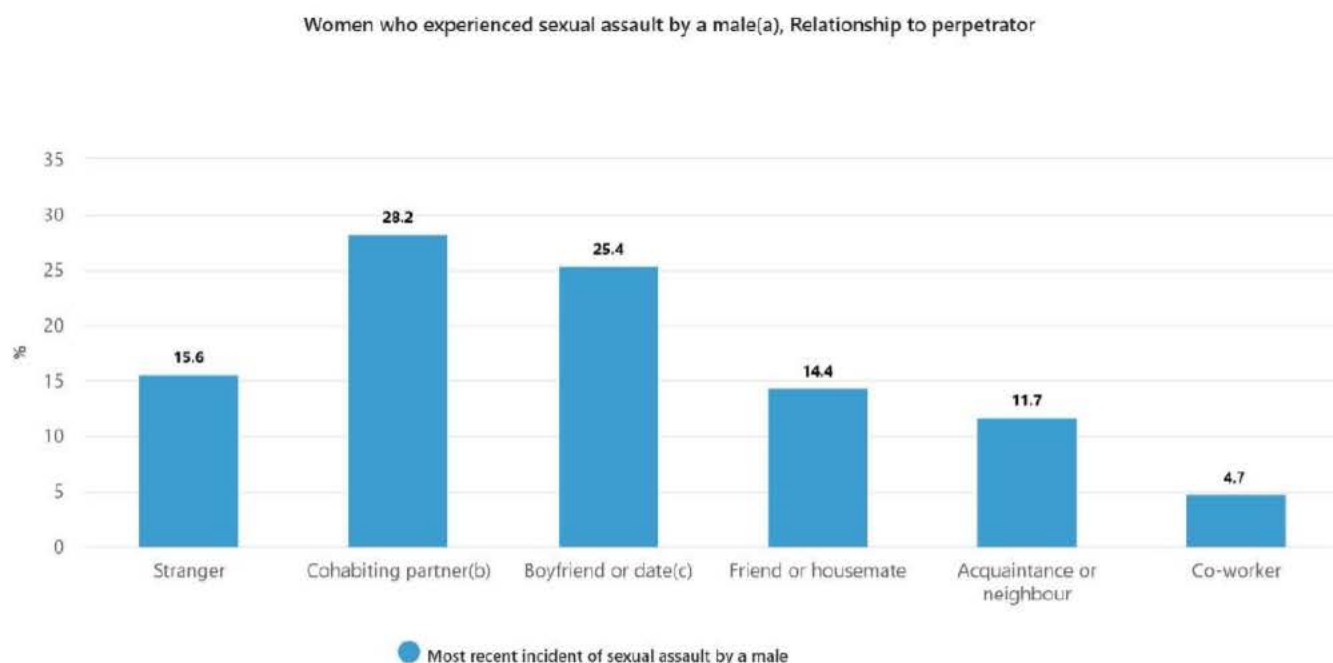
Although the perpetrator was most commonly an intimate partner, figure 11 shows that 4.7% of cases involved a coworker.⁴¹

³⁹ Australian Bureau of Statistics. (2023, August). *Sexual violence*. Retrieved from <https://www.abs.gov.au/statistics/people/crime-and-justice/sexual-violence/2021-22>

⁴⁰ Ibid.

⁴¹ Ibid.

Figure 11 - Women who experienced sexual assault by a male(a), Relationship to perpetrator (Image retrieved from ABS, 2023, March, Sexual violence)



a. Refers to the most recent incident of sexual assault by a male that occurred in the last 10 years.

b. Refers to a partner the person lives with (current partner) or lived with at some point (previous partner) in a married or de facto relationship.

c. This relationship may have different levels of commitment and involvement that does not involve living together. For example, this will include persons who have had one date only, regular dating with no sexual involvement, or a serious sexual or emotional relationship. Includes ex-boyfriend. It excludes de facto relationships.

Source: Australian Bureau of Statistics, Sexual violence 2021-22 financial year

In 2024-25, the ABS's data estimates 68,800 females aged 18 years and over (0.7%) experienced sexual assault, a rate similar to the previous year (0.9%). Of these, 16% (*10,700) reported the most recent incident to police, which was also consistent with the previous year (19%).⁴² [* indicates a standard error of 25-50%]

The evidence demonstrates that physical violence (including threats of violence) remains a significant workplace issue. Women who report sexual assault commonly identify a co-worker as the perpetrator. Both males and females are more likely to experience physical assault by a male perpetrator, while most women who experienced sexual assault do not report the incident.

Workplace violence is both prevalent and unacceptable. The Queensland Government must take all incidents of violence, sexual violence and threats of violence seriously.

Urgent action is also required to analyse trends of workplace violence and aggression trends in Queensland so appropriate controls can be implemented.

Recommendation 4: Urgently undertake an in-depth analysis of the actual workplace violence and aggression incidents in Queensland.

⁴² Australian Bureau of Statistics. (2026, March). *Crime victimisation*. Retrieved from <https://www.abs.gov.au/statistics/people/crime-and-justice/crime-victimisation/2024-25>

3.4 Unchecked behaviours escalate within the workplace

Violence and harassment encompass a range of unacceptable behaviours, practices or threats, whether a single occurrence or repeated, that aim at, result in, or are likely to result in physical, psychological, sexual or economic harm.⁴³ Since 1984, sexual harassment has been unlawful in Australian workplaces. Yet despite over 40 years of investment in policies, awareness raising and training, it remains alarmingly prevalent.⁴⁴ The evidence demonstrates that unchecked behaviour can escalate over time. Without a requirement to report actual or threatened sexual assaults and assaults to the WHS regulator, predatory behaviours may go undetected and continue.

The Australian Human Rights Commission's Respect@Work report found that while only a small proportion of respondents to the 2018 National Survey reported rape or sexual assault as their most recent experience of workplace sexual harassment, the Commission received a concerning number of accounts involving rape or sexual assault in the workplace. The Commission reported that one victim said that her experience 'started with [my manager] asking her a lot of personal questions, questions about boyfriends, questions about family, questions about my sexual activity and experience'. They advised that the harasser's behaviour became increasingly inappropriate and violent, eventually culminating in repeated sexual assaults.⁴⁵

The 2018 National Survey found that, for more than half of workers who said they had been sexually harassed in the last five years, the most recent incident occurring at their workstation or where they worked (52%).⁴⁶ Concerningly, the Survey found that fewer than one in five people who said they experienced workplace sexual harassment in the last five years made a formal report or complaint (17%), or sought support or advice (18%). Among the many reasons victims gave for choosing not to report sexual harassment, some said they wanted to avoid further negative impacts on their mental health, career and finances.⁴⁷

The ABS's 2021-22 PSS found that 426,800 men and 1.3 million women have experienced sexual harassment in the last 12 months. Of these women 70% experienced face-to-face harassment, 57% experienced harassment electronically and 97% were harassed by a male perpetrator. The sexual harassment behaviours experienced by the 1.3 million women included that 32% (401,700) experienced unwanted touching, grabbing, kissing, or fondling.⁴⁸ Women who experienced sexual harassment were more likely to experience it by a male than by a female, with 97% (1.2 million) experienced sexual harassment by a male and 8.9% (110,900) experienced sexual harassment by a female. For women who experienced sexual harassment, more experienced it by a known person (63%) than by a stranger (55%), including 27% (332,400) by a work/professional relationship. For women who experienced sexual harassment, 26% (320,200) of these cases occurred at work.⁴⁹

In 2022, the Human Rights Commission reported that about one in five people had been sexually harassed at work in the last 12 months and one in three people had been sexually harassed at work (41% of women and 26% of men). They highlighted that some people experienced workplace sexual harassment at rates

⁴³ Article 1 (1)(a) of the Violence and Harassment Convention, 2019 (No. 190), taken from International Labour Organization 2020. (2020). *Safe and healthy working environments free from violence and harassment*. Retrieved from https://www.ilo.org/sites/default/files/wcmsp5/groups/public/@ed_protect/@protrav/@safework/documents/publication/wcms_751832.pdf

⁴⁴ Diversity Council Australia. (2026, May). *New DCA data reveals confronting truths about sexual harassment at work*. Retrieved from <https://www.dca.org.au/news/media-releases/new-dca-data-reveals-confronting-truths-about-sexual-harassment-at-work>

⁴⁵ Australian Human Rights Commission. (2020). *Respect@Work: Sexual Harassment National Inquiry Report*. Retrieved from <https://humanrights.gov.au/resource-hub/human-rights/respectwork-sexual-harassment-national-inquiry-report-2020>

⁴⁶ Ibid.

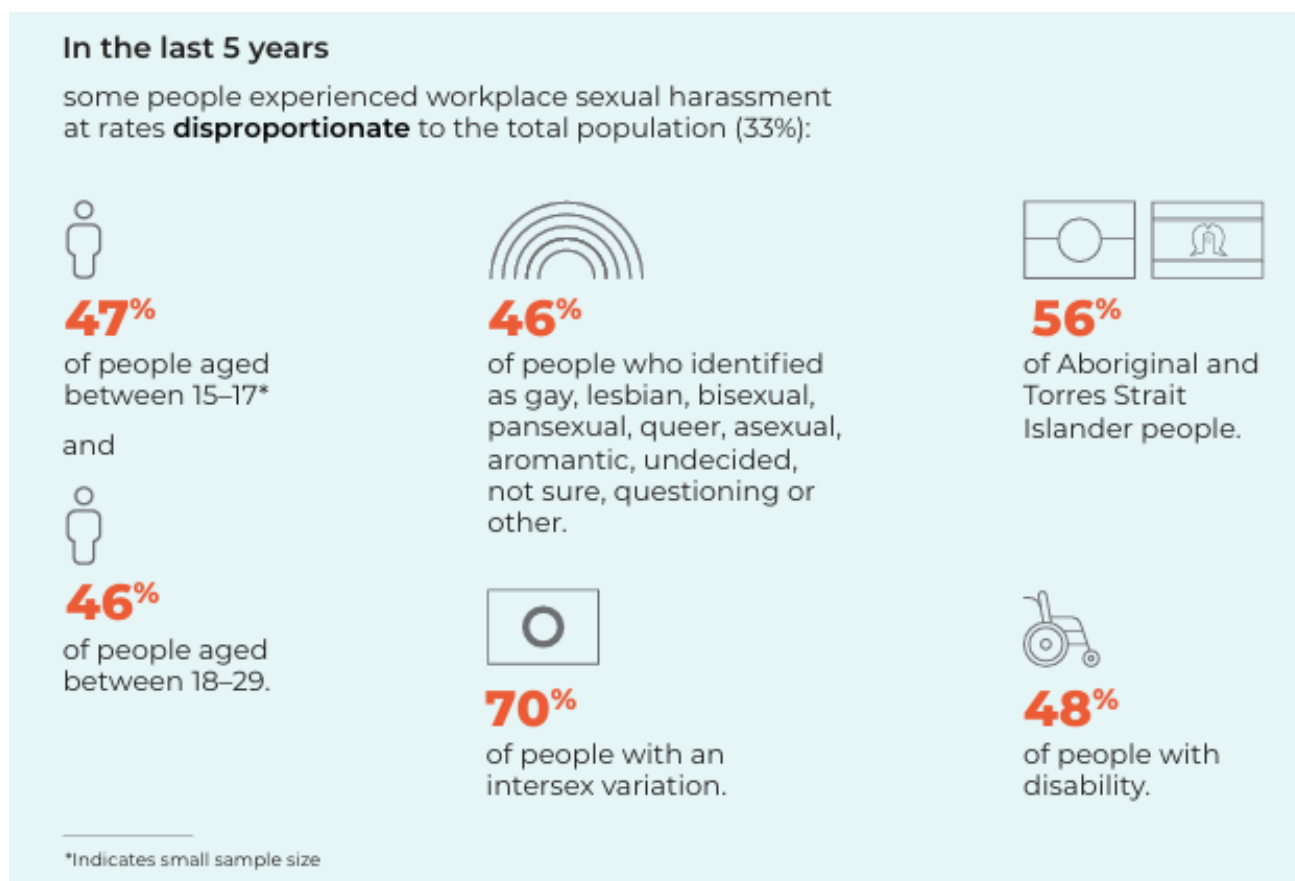
⁴⁷ Ibid.

⁴⁸ Australian Bureau of Statistics. (2023, August). *Sexual harassment*. Retrieved from <https://www.abs.gov.au/statistics/people/crime-and-justice/sexual-harassment/latest-release>

⁴⁹ Ibid.

disproportionate to the total population including that 56% of Aboriginal and Torres Strait Island people, 48% of people with disability, 46% of people who identified as gay, lesbian, bisexual, pansexual, queer, asexual, aromantic, undecided, not sure, questioning or other (as shown in figure 12 below).⁵⁰

Figure 12– Incidence of workplace sexual harassment (Image retrieved from Australian Human Rights Commission’s *Time for respect: Fifth national survey on sexual harassment in Australian workplaces, 2022*, page 47)



The Diversity Council Australia’s (DCA’s) 2025–2026 Inclusion@Work Index survey⁵¹ data further highlights that close to one in five workers (18%) have experienced sexual harassment, with most involving someone from their workplace. A substantial proportion reported experiencing inappropriate physical contact (20%) (as shown in figure 13), while one in 12 workers experienced sexually explicit or image-based behaviours.⁵² The sources of sexual harassment in most cases being from their workplace (as shown in figure 14). Concerningly, 24% of workers said they would take no action if they witnessed sexual harassment at work, and only one in three (33%) said they would check in with the person subjected to the harassment afterwards.⁵³

⁵⁰ Australian Human Rights Commission. (2022, November). *Time for respect: Fifth national survey on sexual harassment in Australian workplaces*. Retrieved

https://humanrights.gov.au/_data/assets/file/0026/46817/2022.11.25_time_for_respect_2022_final_digital.pdf

⁵¹ DCA drew on their 2025–2026 Inclusion@Work Index survey data. The Index is a biennial nationally representative survey of 3,000 workers that maps and track inclusion in the Australian workforce over time.

⁵² Diversity Council Australia. (2026). *Index Insights: Sexual harassment at work*. Retrieved from <https://www.dca.org.au/inclusion-work-index-hub/index-insights-sexual-harassment>

⁵³ Ibid.

Figure 13– Types of sexual harassment (Image retrieved from Diversity Council Australia, 2026)

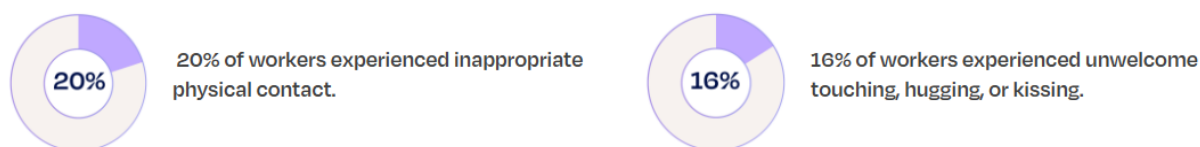
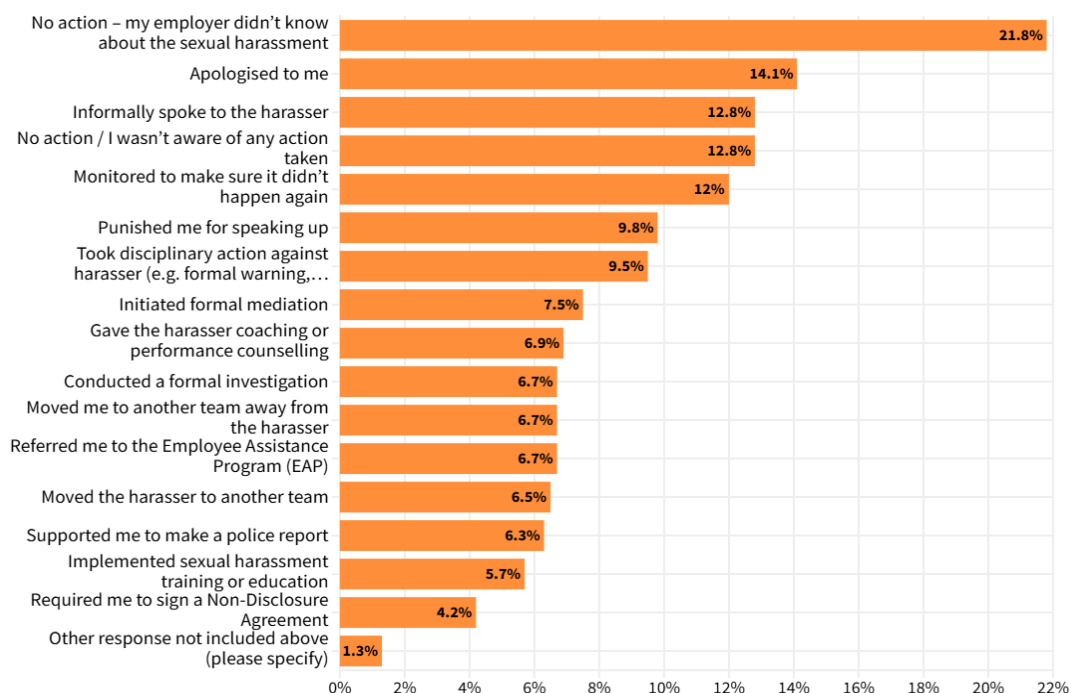


Figure 14– Sources of sexual harassment (Image retrieved from Diversity Council Australia, 2026)



Over one in five (22%) said they did not tell their employer when they were sexually harassed and when they did, formal action was rare. The most common response from employers was to apologise to the employee (14%), followed by speaking informally to the harasser (13%), or monitoring the situation (12%), only 10% said their employer took disciplinary action against the harasser, 13% said their employer didn't take any action that they were aware of. Concerningly 10% of workers reported experiencing punishment after speaking up.⁵⁴

Figure 15 – Employer action (Image retrieved from Diversity Council Australia, 2026)



⁵⁴ Diversity Council Australia. (2026). *Index Insights: Sexual harassment at work*. Retrieved from <https://www.dca.org.au/inclusion-work-index-hub/index-insights-sexual-harassment>

The data also demonstrates how incidents can escalate, with workers who experienced sexually suggestive comments or ‘jokes’ were then nine times more likely to report inappropriate physical contact. Likewise, workers who experienced inappropriate staring or leering were around six times more likely to report inappropriate physical contact.⁵⁵

Hallie’s story

Hallie told the Commission in her submission that the owner-manager of the branch of a company where she worked repeatedly sexually harassed her by making verbal sexualised comments, contacting her through social media, phone and text messages, and on one occasion inappropriate physical contact. Hallie made a number of complaints to the company about this, and in doing so was made aware of two previous sexual harassment complaints made against him by another worker and a customer. Hallie told the Commission that the company ‘chose to ignore the complaints from multiple women and allowed [the harasser] to continue his predatory behaviour’.

Taken from the Australian Human Rights Commission’s Respect@Work report, page 216

Employers who are reluctant to make information known about incidents or complaints in their workplace due to potential reputational damage or potential legal liability, allow individuals to engage in sexually harassing behaviour over long periods of time. Providing employers with the ability to choose not to disclose inappropriate conduct against individuals to the Regulator, results in a lack of transparency and creates unsafe working conditions. Additionally, nondisclosure agreements and confidentiality clauses can facilitate ‘serial predatory conduct’. Whilst victims leave the workplace with a settlement payment and the harassers either remain employed or simply relocate to a new workplace where the new employer may not be aware of the allegations. Consequently, the most egregious cases and the repeat offenders frequently remain under the radar and bypass detection.⁵⁶

A submission from a former senior manager for an organisation in the health sector described systematic sexual harassment by ‘high value’ practitioners employed by the organisation: On a weekly basis, we were dealing with [practitioners] who were either abusing their staff in a physical manner or taking advantage of them sexually ... In 100% of cases, the women would be dismissed and the [practitioner] would continue practising his predatory ways with the next unsuspecting nurse to be employed into his practice ... [The] organisation would do everything to cover the situation up ... so that [the practitioner] could continue to generate revenue for the company.

Taken from the Australian Human Rights Commission’s Respect@Work report, page 156

Workplace sexual harassment remains prevalent and workers, particularly women, continue to experience significant financial, social, emotional, physical and psychological harm as a result.⁵⁷ Queensland workers are entitled to safe workplaces, and urgent action is required to prevent sexual harassment and its impacts.

⁵⁵ Diversity Council Australia. (2026). *Index Insights: Sexual harassment at work*. Retrieved from <https://www.dca.org.au/inclusion-work-index-hub/index-insights-sexual-harassment>

⁵⁶ Australian Human Rights Commission. (2020). *Respect@Work: Sexual Harassment National Inquiry Report*. Retrieved from <https://humanrights.gov.au/resource-hub/human-rights/respectwork-sexual-harassment-national-inquiry-report-2020>

⁵⁷ Ibid.

It is concerning that, on 13 May 2026, the Queensland Parliament did not pass the Strengthening Protections for Queensland Workers Amendment Bill 2026. The Bill sought to restore Respect@Work protections and introduce a positive duty requiring employers to take reasonable and proportionate measures to eliminate or prevent discrimination and sexual harassment (Queensland, 2026, 1354).⁵⁸ During debate on the Bill, the Honourable Shannon Fentiman (Shadow Minister for Women) urged members to support its referral to a parliamentary committee, to allow workers to share their experiences of workplace sexual harassment. The Bill was subsequently opposed and did not proceed.⁵⁹

Given the prevalence of workplace sexual harassment and the significant harms it causes, the QNMU considers these reforms both necessary and overdue. Urgent action is required to strengthen prevention, accountability and worker protections.

Recommendation 5: Urgently restore Respect@Work protections and introduce a positive duty that requires employers to take reasonable and proportionate measures to eliminate or prevent discrimination or sexual harassment.

3.5 Occupational violence against frontline workers

Occupational violence and aggression increase the risk of post-traumatic stress disorder (PTSD) and also places workers at risk of physical injury or even death.⁶⁰ Healthcare workers are frequently exposed to, or witness acts of occupational violence. Queensland Health data shows more than 35,000 reported incidents of occupational violence against staff across Metro North and Metro South hospitals and health services from July 2019 until the end of September 2025. During this period, physical assaults, threats of violence and verbal abuse against staff working in Brisbane's public hospitals have nearly doubled (as shown in figure 16).⁶¹

In the 2023 edition of the QNMU's Grow Your Voice member survey: 67.5% of members reported having experienced workplace violence within the past twelve months, 58% experienced verbal abuse, 24.6% had been physically attacked, 8.8% experienced racial harassment and 5.4% had been sexually harassed.⁶²

Grant et. al (2022) also found that occupational violence and aggression is estimated to affect 95% of healthcare workers in Australia, with verbal aggression being the most commonly reported occupational violence and aggression type. Occupational violence and aggression places workers at risk of both physical and psychological harm and has financial implications for organisations, including absenteeism, and workers' compensation claims. Furthermore, reporting the occupational violence and aggression may compromise public health more broadly by adversely affecting the quality of clinical care.⁶³

⁵⁸ Queensland. Parliamentary debates. Legislative Assembly. 13 May 2026, 1354-1356 (Hon. SM Fentiman, Waterford ALP) and Australian Human Rights Commission. (2020). Respect@Work Report

⁵⁹ Queensland. Parliamentary debates. Legislative Assembly. 13 May 2026, 1354-1356 (Hon. SM Fentiman, Waterford ALP).

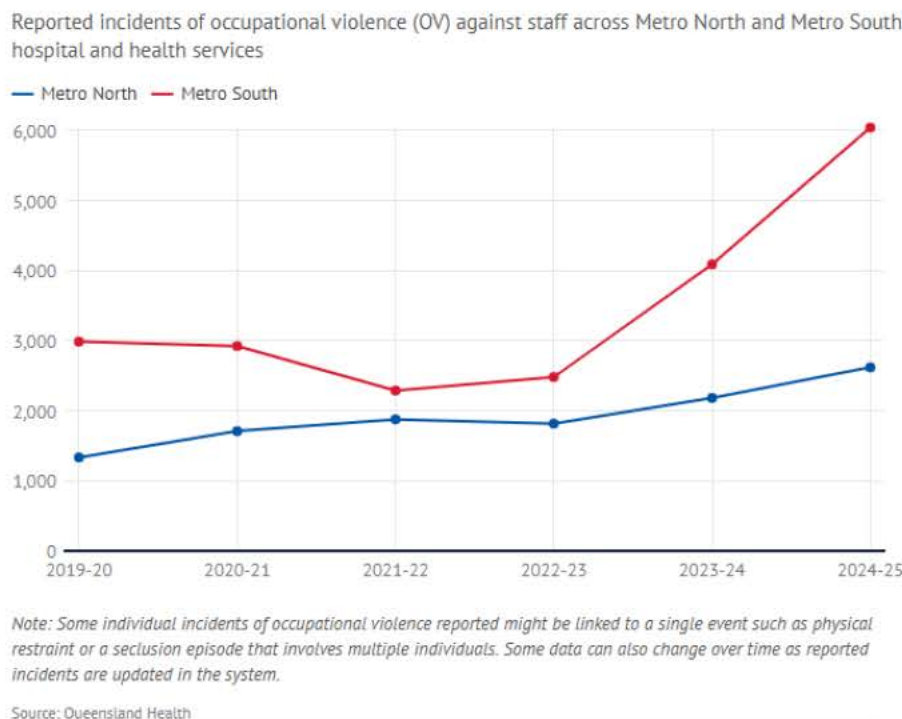
⁶⁰ Grant, S. L., Hartanto, S., Sivasubramaniam, D., & Heritage, K. (2022). Occupational violence and aggression in urgent and critical care in rural health service settings: A systematic review of mixed studies. *Health & social care in the community*, 30(6), e3696–e3715. <https://doi.org/10.1111/hsc.14039>

⁶¹ Kruk, C. (2025, November). 'Bashed, stabbed and spat at': Violence in public hospitals on the rise. Retrieved from <https://www.smh.com.au/national/queensland/bashed-stabbed-and-spat-at-violence-in-public-hospitals-on-the-rise-20250910-p5mu0z.html>

⁶² Queensland Nurses and Midwives' Union & Queensland University of Technology. (2023) *Grow your voice 2023 project. Interim report*. Brisbane: QNMU.

⁶³ Grant, S. L., Hartanto, S., Sivasubramaniam, D., & Heritage, K. (2022). Occupational violence and aggression in urgent and critical care in rural health service settings: A systematic review of mixed studies. *Health & social care in the community*, 30(6), e3696–e3715. <https://doi.org/10.1111/hsc.14039>

Figure 16 – Violence against hospital staff on the rise (Image retrieved from Kruk, 2025, November).



New South Wales Nurses and Midwives' Association (NSWNMA) has reported that occupational violence towards nurses and midwives has surged in the last six years, with a recent report revealing that 88% of nurses, midwives and carers who were surveyed over six months during 2025 had experienced or witnessed violence and aggression, up from 80% reported in 2019.⁶⁴ The report highlights that in relation to serious workers' compensation claims, the intersection between gender, industry and experience of occupational violence must be given serious consideration when looking for solutions.⁶⁵

Healthcare workers are not alone in relation to threats of occupational violence. In the last three years, reported incidents of violence against Queensland's state school teachers, and staff have almost quadrupled, with data tabled in State Parliament revealing it has risen from 5,748 to 20,833. These employees include teachers, teacher aides, cleaners, and administration staff.⁶⁶

Recommendation 6: Urgently address the high rates of occupational violence experienced by healthcare workers and workers in educational setting.

3.6 Workplace claims for occupational violence injuries and incidents

In Australia, Healthcare and social assistance recorded the highest volume of serious claims, accounting for 29,100 claims or 19.9% of the national total. Mental stress accounted for 16,800 serious claims, with the most

⁶⁴ NSW Nurses and Midwives' Association. (2026a, March). *Report shows growing rates of violence on nurses, midwives and carers*. Retrieved from <https://www.nswnma.asn.au/report-shows-growing-rates-of-violence-on-nurses-midwives-and-carers/>

⁶⁵ NSW Nurses and Midwives' Association and Australian Nursing and Midwifery Federation NSW Branch. (2026, March). *Occupational Violence has no place in my workplace*. Retrieved from <https://www.nswnma.asn.au/wp-content/uploads/2026/04/%E2%80%8B%E2%80%8BOccupational-Violence-Report-2026.pdf>

⁶⁶ Brewster, A. (2026, January). *Violence against state school teachers and staff nearly quadruples in three years, new data shows*. Retrieved from <https://www.abc.net.au/news/2026-01-09/queensland-state-school-violence-against-teachers-quadruples/106214512>

common causes being harassment/workplace bullying (33.2%), work pressure (24.2%) and exposure to violence and harassment (15.7%).⁶⁷

In 2024, Safe Work Australia examined trends relating to psychosocial hazards and workplace mental health. The healthcare and social assistance industry recorded the highest number of serious claims for work-related mental health conditions and demonstrated high exposure to psychosocial hazards, including emotional demands, workplace bullying and work-related occupational violence.⁶⁸ The Australian Human Rights Commission (2022) also reported that 14% of workplace sexual harassment cases over the previous five years occurred in the healthcare and social assistance industry. Of those who experienced workplace sexual harassment, two thirds (67%) reported associated negative mental health impacts (71% of women and 59% of men), although formal reporting rates remained low, with only 18% reporting incidents.⁶⁹

Healthcare and social assistance industry accounted for the highest number of claims for exposure to occupational violence (30.4% of all occupational violence claims).⁷⁰ Safe Work Australia noted a 56% increase in workers' compensation claims for being assaulted and exposure to workplace violence since 2017-18. Further highlighting a 73% increase in claims made by women compared to a 33% increase in claims made by men over the last 10 years.⁷¹

Workers' compensation data (for the period 2017-18 to 2021-22) coupled with the PAW Survey shows that four of the five occupations with the most claims for exposure to workplace violence or being assaulted have a high female share of employment (as shown in figure 17).⁷²

Figure 17– Occupations with most claims for exposure to workplace violence or being assaulted with female share of employment, NDS (2017-18 to 2021-22p) and ABS Census (2021) (taken from Safe Work Australia, 2024, August, page 8)

Occupation	Number of serious claims	Female share of employment
Registered nurses	1,848	88%
Welfare support workers	1,701	74%
Aged and disabled carers	1,501	77%
Police	1,476	29%
Nursing support and personal care workers	1,386	79%

Source: Safe Work Australia National Dataset for Compensation-based Statistics and ABS Census..

⁶⁷ Safe Work Australia. (2025, October). *Key work health and safety statistics Australia*. Retrieved from https://data.safeworkaustralia.gov.au/sites/default/files/2025-10/Key_Work_Health_and_Safety_Statistics_Australia_2025.pdf

⁶⁸ Safe Work Australia. (2024a, February). *Snapshot: Psychological health and safety in the workplace*. Retrieved from https://data.safeworkaustralia.gov.au/sites/default/files/2024-02/Psychological-health-in-the-workplace_Snapshot_February2024.pdf

Safe Work Australia. (2024b, February). *Psychological health and safety in the workplace*. Retrieved from https://data.safeworkaustralia.gov.au/sites/default/files/2024-02/Psychological-health-in-the-workplace_Report_February2024.pdf

⁶⁹ Australian Human Rights Commission. (2022, November). *Time for respect: Fifth national survey on sexual harassment in Australian workplaces*. Retrieved from <https://humanrights.gov.au/resource-hub/by-resource-type/publications/uncategorised/time-for-respect-2022>

⁷⁰ Safe Work Australia. (2024b, February). *Psychological health and safety in the workplace*. Retrieved from https://data.safeworkaustralia.gov.au/sites/default/files/2024-02/Psychological-health-in-the-workplace_Report_February2024.pdf

⁷¹ Safe Work Australia. (2024, August). *Workplace and work-related violence and aggression in Australia*. Retrieved from https://data.safeworkaustralia.gov.au/sites/default/files/2024-08/Work-related-violence-and-aggression_Report_August2024.pdf

⁷² Ibid.

Additionally, Safe Work Australia's 2024 report highlights that between 2017-18 and 2021-22, 57.8% of serious claims for mental health conditions were made by women. Data also shows that women are more likely to be exposed to harmful behaviours at work including sexual harassment, bullying and work-related violence and aggression.⁷³ However, Safe Work Australia notes that workers' compensation claims data underrepresents the incidence of work-related harassment, with 41% of women in the 2022 National Survey reporting that they had been sexually harassed at work in the last five years.⁷⁴ Recent data from the ABS Personal Safety Survey indicates that women were more than 2.5 times as likely as men to experience workplace-related sexual harassment in the previous 12 months.⁷⁵

The Office of Industrial Relations most recent published workers' compensation scheme statistics report (2023–24) indicates that females accounted for 60.9% of psychological and psychiatric injury claims, the only injury category where females were represented more than males.⁷⁶

These results are concerning for Queensland's nursing and midwifery workforce, as it is well recognised that nursing and midwifery is predominantly a female workforce. The nursing and midwifery workforce should not continue to sacrifice their own safety to care for others.

Recommendation 7: Urgently address the high incidence of psychological injuries amongst female workers and ensure they have access to safe reporting options.

Recommendation 8: Undertake further research to identify the factors contributing to occupational violence, including the effectiveness of workplace control measures to manage exposure to violence and aggression, access to workers' compensation, claim making behaviour, the type and frequency of violence experienced, support provided by employers following exposure, injury severity, and interactions with other psychosocial hazards. (As suggested by Safe Work Australia, 2024, August).

3.7 Urgent proactive action is required

Amidst rising reports of occupational violence in healthcare settings, greater proactive action is required. This includes increasing the number of workplace inspectors with expertise in healthcare environments. Although Queensland has experienced an increase in active field inspectors in 2023-24 (as shown in figure 18), Queensland has not had a steady increase in previous years with the increasing population. We note other jurisdictions including Victoria and the Australian Capital Territory (ACT) have had a steady increase in active inspectors.⁷⁷

⁷³ Safe Work Australia. (2024a, February). *Snapshot: Psychological health and safety in the workplace*. Retrieved from https://data.safeworkaustralia.gov.au/sites/default/files/2024-02/Psychological-health-in-the-workplace_Snapshot_February2024.pdf
Safe Work Australia. (2024b, February). *Psychological health and safety in the workplace*. Retrieved from

https://data.safeworkaustralia.gov.au/sites/default/files/2024-02/Psychological-health-in-the-workplace_Report_February2024.pdf

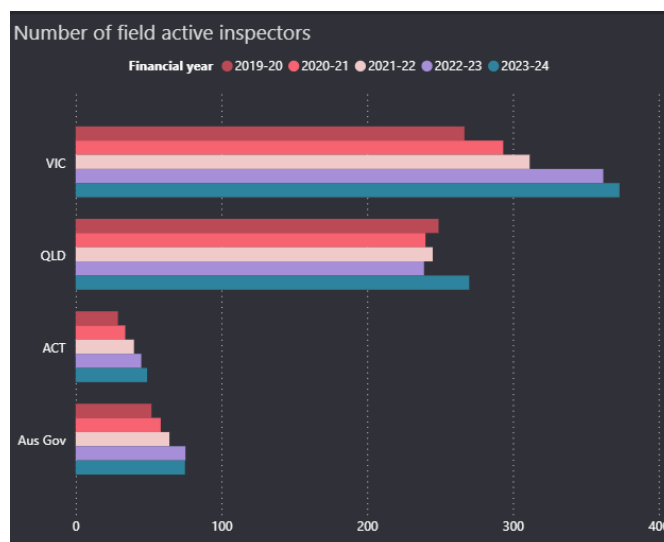
⁷⁴ Australian Human Rights Commission. (2022, November). *Time for respect: Fifth national survey on sexual harassment in Australian workplaces*. Retrieved from <https://humanrights.gov.au/resource-hub/by-resource-type/publications/uncategorised/time-for-respect-2022>

⁷⁵ Safe Work, 2024a and 2024b and Australian Bureau of Statistics. (2023). *Personal safety, Australia*. Retrieved from <https://www.abs.gov.au/statistics/people/crime-and-justice/personal-safety-australia/2021-22>

⁷⁶ Queensland Government (Office of Industrial Relations). (2025). *Queensland workers' compensation scheme statistics 2023-24*. Retrieved from https://www.worksafe.qld.gov.au/__data/assets/pdf_file/0027/145566/workers-compensation-scheme-statistics-2023-2024-full-report.pdf

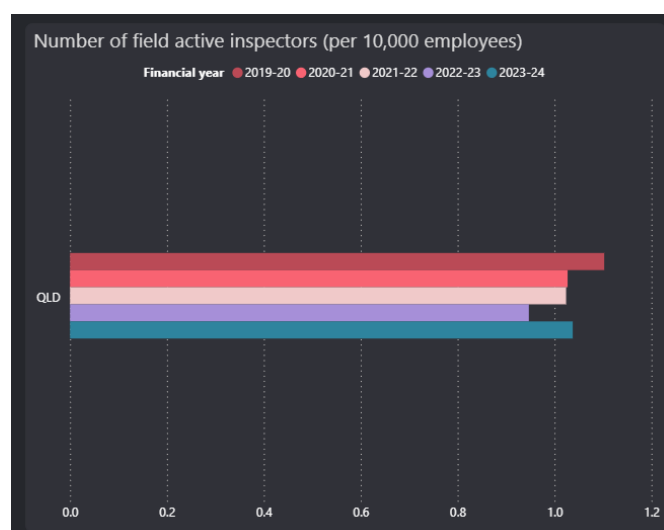
⁷⁷ Safe Work Australia. (2026, February). *Jurisdictional Comparison Dashboards*. Retrieved from <https://data.safeworkaustralia.gov.au/interactive-data/topic/jurisdictional-comparison>

Figure 18 – Safe Work Australia’s number of field active inspectors for certain jurisdictions Queensland (Retrieved from Safe Work Australia, Jurisdictional Comparison, 2026 February)



We do acknowledge that the number of active inspectors per 10,000 employees in Queensland has increased since the 2022-23 period (as shown in figure 19). Nevertheless, we highlight that in relation to other jurisdictions, Queensland has the third lowest number of active inspectors per 10,000 employees in the nation (figure 20).⁷⁸ Given more women are more likely to be exposed to harmful workplace behaviours including sexual harassment, bullying and work-related violence and aggression,⁷⁹ we submit that more female inspectors are required in Queensland.

Figure 19– Safe Work Australia’s number of field active inspectors per 10000 employees in Queensland (Retrieved from Safe Work Australia, Jurisdictional Comparison, 2026 February)



⁷⁸Safe Work Australia. (2026, February). *Jurisdictional Comparison Dashboards*. Retrieved from <https://data.safeworkaustralia.gov.au/interactive-data/topic/jurisdictional-comparison>.

⁷⁹ Safe Work Australia. (2024a, February). *Snapshot: Psychological health and safety in the workplace*. Retrieved from https://data.safeworkaustralia.gov.au/sites/default/files/2024-02/Psychological-health-in-the-workplace_Snapshot_February2024.pdf
 Safe Work Australia. (2024b, February). *Psychological health and safety in the workplace*. Retrieved from https://data.safeworkaustralia.gov.au/sites/default/files/2024-02/Psychological-health-in-the-workplace_Report_February2024.pdf

Figure 20— Safe Work Australia's number of field active inspectors per 10000 employees in different jurisdictions (Retrieved from Safe Work Australia, Jurisdictional Comparison, 2026 February)



Recommendation 9: Increase the number of workplace inspectors (including female inspectors) who are trained in psychological safety, occupational violence and healthcare settings.

Recommendation 10: Create safer workplaces by taking a more proactive approach to preventing occupational violence with a focus on preventing mental health injuries.

3.8 Importance of safe working environments

Feeling safe at work is vital, not only for employees but for the broader industry and the individuals in their care. In the nursing and midwifery professions, research indicates that workplace bullying does not only impact the individual involved, but it also threatens patient safety and the overall standard care.⁸⁰ Goh et al. (2022) reported seven patient safety consequences of workplace bullying: (1) patient falls, (2) errors in treatments or medications, (3) patient satisfaction or patient complaints, (4) adverse event or patient mortality, (5) altered thinking or concentration, (6) silence or inhibited communication, and (7) delayed care. The first four themes identify patient-related consequences of workplace bullying, while the remaining three focus on the negative impact on nursing performance related to patient safety.⁸¹ Piri et al. (2024) also identified that bullying can result in various consequences, such as medication errors, treatment errors and patient falls, ultimately leading to higher patient mortality rates.⁸² Generating a culture that promotes psychological safety will enable

⁸⁰ Machul, M., Krasucka, K. N., Pelc, D., & Dziurka, M. (2024). Impact of Workplace Bullying on Nursing Care Quality: A Comprehensive Review. *Medical science monitor: international medical journal of experimental and clinical research*, 30, e944815. <https://doi.org/10.12659/MSM.944815>

⁸¹ Goh, H. S., Hosier, S., & Zhang, H. (2022). Prevalence, antecedents, and consequences of workplace bullying among nurses - A summary of reviews. *International journal of environmental research and public health*, 19(14), 8256. <https://doi.org/10.3390/ijerph19148256>

⁸² Piri, S., Jalali, R., & Khatony, A. (2024). Consequences of workplace bullying from nurses' perspectives: A qualitative descriptive study in Iran. *Nursing open*, 11(10), e70060. <https://doi.org/10.1002/nop2.70060>

all healthcare professionals to provide the best care for their patients,⁸³ as practice environments with favourable organisational support will ultimately strengthen the workforce and positively impact patient, nurse, and midwifery outcomes.⁸⁴

De Raeve et al. (2023) advised that violence and harassment against healthcare workers remains unacceptable, especially given the enormous negative impact on nurses' psychological and physical well-being, job motivation and turnover, quality of care, and risk to patient safety.⁸⁵

A strong and healthy workforce is critical to ensure Queenslanders have access to a high quality and sustainable healthcare system. Queensland Health projects a 50.5% increase in demand for nurses and midwives by 2032. An additional 21,331 nursing FTE and 967 midwifery FTE will be required to meet projected demand.⁸⁶ Queensland Health reports persistent midwifery workforce gaps (>12 months) in regional areas (13.0%) and in rural and remote locations (14.6%), with shortages also evident in metropolitan areas (8.1%). Notably, 44.24% of midwives have four or fewer years of clinical experience as a midwife. Queensland Health anticipates the midwifery workforce shortfall will increase over the period to 2032, posing a significant risk to service continuity and patient outcomes. For nursing, workforce gaps are most pronounced in rural and remote areas, including a shortfall of 189.1 FTE (4.8%) between approved and filled FTE positions, alongside a reported gap of 1.9% in regional areas. Queensland Health also reported shortages for mental health nursing in rural areas (29.3%) and persistent gaps in neonatal nursing (16.4%), paediatric nursing (12.8%), and critical care nursing (12.7%).⁸⁷

Concerningly, in 2024 the QNMU conducted a survey of 20,000 members and found that 46% of Queensland Health nurses and midwives were considering leaving the profession in the next 12 months.⁸⁸ Nationally, 36.6% of midwives who completed the Midwifery Futures workforce survey advised they were considering leaving the midwifery profession (70% for reasons other than retirement).⁸⁹ By 2035, workforce projections across all sectors indicate an undersupply of 70,707 nursing FTE.⁹⁰

The ABS data also shows that the number of people in their current job between one and four years has risen slightly since 2024, up from 39% to 40% (shown in figure 21).⁹¹ This data aligns with findings from Queensland's Health Gap analysis which reported that 44.24% of midwives have four or fewer years of experience as a clinical midwife, highlighting concerns that only a small, experienced mid-career workforce is

⁸³ Rennie, S. et al. (2024). Psychological safety in surgery: the negative impact of bullying for surgeons and patients and how we can all do better. *ANZ Journal of Surgery*, 94 (1-2), 6-7. <https://doi.org/10.1111/ans.18868>

⁸⁴ Doleman, G., Bloxome, D., Wang, R., & Whitehead, L. (2025). *Fostering a Resilient Healthcare System: Supportive Practice Environment Initiatives to Support Nurse and Midwives a Scoping Review*. *Journal of nursing management*, 2025, 8898411. <https://doi.org/10.1155/jonm/8898411>

⁸⁵ De Raeve, P., Xyrichis, A., Bolzonella, F., Bergs, J., & Davidson, P. M. (2023). Workplace Violence Against Nurses: Challenges and Solutions for Europe. *Policy, politics & nursing practice*, 24(4), 255–264. <https://doi.org/10.1177/15271544231182586>

⁸⁶ Queensland Health. (2025b). *Workforce gap analysis – Part B: The Professional Lens*. Retrieved from https://www.health.qld.gov.au/__data/assets/pdf_file/0024/1472721/workforce-gap-analysis-part-b.pdf

⁸⁷ Ibid.

⁸⁸ Queensland Nurses and Midwives' Union. (2024, May). *Queensland Health nurses are considering leaving the profession they love*. Retrieved from https://www.qnmu.org.au/Web/Media_and_Publications/News/News_items/2024/QLD_Health_nurses_are_considering_leaving_the_profession_they_love/

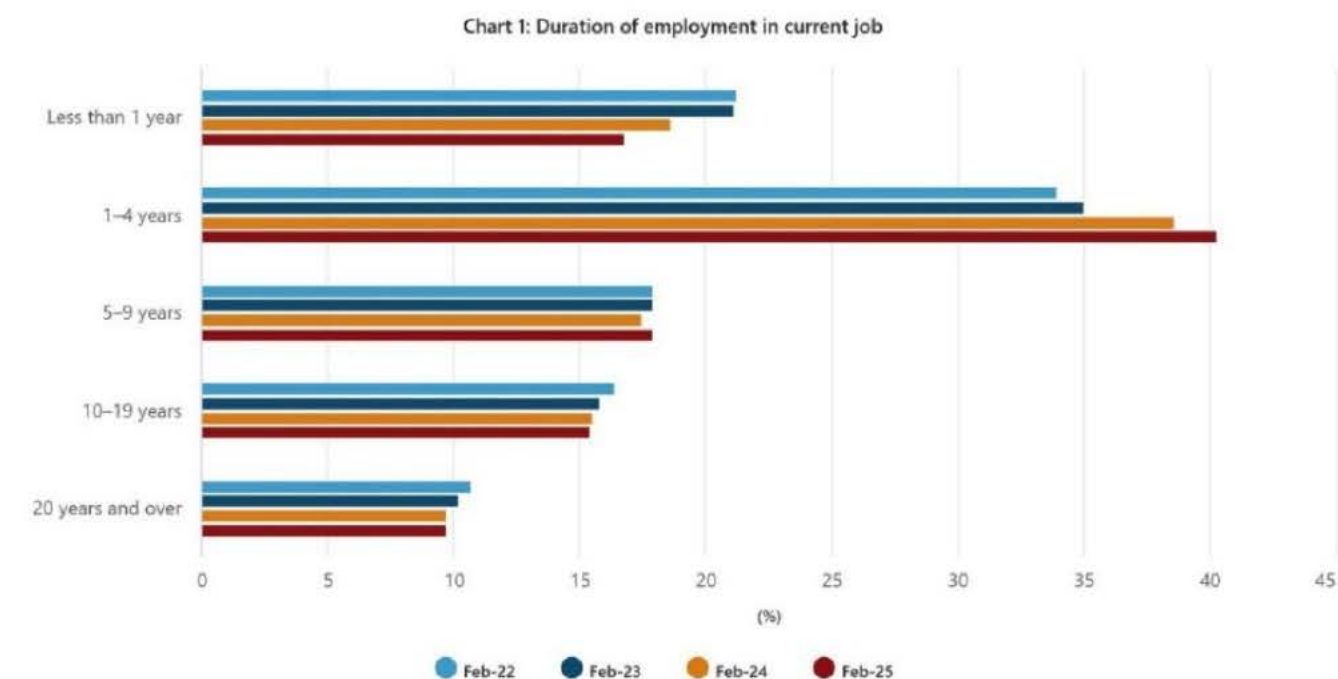
⁸⁹ Homer C., Small K., Warton C., Bradfield Z., Fenwick J., Gray J., et al. Midwifery Futures - Building the future Australian midwifery workforce. A research project commissioned by the Nursing and Midwifery Board of Australia, Burnet Institute, Curtin University and the University of Technology Sydney, 2024 23 October.

⁹⁰ Australian Government (Department of Health and Aged Care). (2024). *Nursing supply and demand study, 2023-2035*. Retrieved from <https://hwd.health.gov.au/resources/primary/nursing-supply-and-demand-study-2023-2035.pdf>

⁹¹ Australian Bureau of Statistics. (2025, July). *Job mobility*. Retrieved from <https://www.abs.gov.au/statistics/labour/jobs/job-mobility/latest-release#:~:text=1.3%20million%20people%20changed%20jobs,changing%20jobs%20during%20the%20year>

available to deliver core services.⁹² Similar observations are also reported in the education sector with teachers. Researchers estimate that up to 50% of graduate teachers leave the profession within their first five years on the job, subsequently, affecting a sector already struggling with workforce shortages.⁹³

Figure 21 – Duration of employment in current job (Image retrieved from ABS, 2025, July)



Recommendation 11: Examine the impact of occupational violence on Queensland’s workforce.

3.9 The power imbalance

Power imbalances can influence workplace culture, behaviour and safety outcomes. The Respect@Work report highlights that the way power is distributed between men and women in private and public spheres, including in the workplace, is an important dimension of gender inequality. Examples include the under-representation of women in Australian parliaments and senior leadership positions, and the persistence of the gender pay gap.⁹⁴

Evidence suggests that unequal power relationships between men and women can contribute to violence against women for several reasons, including:

- Women’s lower status may serve a symbolic function that communicates that women have a lower social value and are less worthy of respectful treatment.

⁹² Queensland Health. (2025b). *Workforce gap analysis – Part B: The Professional Lens*. Retrieved from https://www.health.qld.gov.au/__data/assets/pdf_file/0024/1472721/workforce-gap-analysis-part-b.pdf

⁹³ Rigby, M. (2025, December). *As teacher shortages loom across Australia these Queensland schools are trialling solutions*. Retrieved from <https://www.abc.net.au/news/2025-12-02/teacher-shortage-nearing-crisis-point-solutions/106026086>

⁹⁴ Australian Human Rights Commission. (2020). *Respect@Work: Sexual Harassment National Inquiry Report (2020)*. Retrieved from <https://humanrights.gov.au/resource-hub/human-rights/respectwork-sexual-harassment-national-inquiry-report-2020>

- Violence may be used and accepted as a mechanism for maintaining the dynamic of male dominance and female subordination, especially when male dominance is under threat.
- If women's participation in formal decision-making and civic action is circumscribed, there is less opportunity for women to act collectively in the interests of preventing violence against women.⁹⁵

Queensland Health recently reports that 84.5% of the nursing workforce and 98% of the midwifery workforce are women.⁹⁶ As predominantly female professions, nurses and midwives are directly affected by broader issues of gender inequality, including workplace safety. Gender inequality can be reflected in a range of workplace outcomes, including representation in leadership, pay equity and workplace safety. The gender pay gap is one recognised measure of gender inequality, but it should not be the only one. Addressing the gender pay gap remains a critical consideration in ensuring fair and equitable employment outcomes in Queensland.

Violence against women is not acceptable. The Public Sector Commission publishes Queensland's progress in narrowing the gender pay gap, and consideration should also be given to reporting on gender violence to ensure that data is available and proactive action is taken.

This approach is consistent with the WHO's recommendation to strengthen data collection, invest in high quality surveys on violence against women and improve the measurement of the different forms of violence experienced by women, including those who are most marginalized.⁹⁷

Recommendation 12: The Public Sector Commission to publish the gender safety gap for Queensland to ensure ongoing visibility of gender safety issues in the workplace.

3.10 The true cost of violence within the workplace

Ballard and Boazin (2023) estimate the true cost of workplace violence (excluding sexual harassment) is estimated at \$30 billion a year in Australia. They report since 2001 this intractable and typically gendered workplace problem has been viewed through a mythical lens which suggests it costs Australia between \$6–36 billion every year. They highlight that the (original) annual costs estimate of \$6 billion–\$36 billion has simply languished, unchallenged and repeatedly advanced by successive Australian governments, as gospel. They advise that government needs to take definitive steps to ensure that the true costs and wide-ranging impacts of this injurious phenomenon are properly measured in monetary terms; and ensure that proper transparent and public reporting is mandated along with initiating the development of a better public policy approach to the prevention and effective management of workplace violence.⁹⁸

The Respect@Work report highlighted that the Deloitte Report estimated that in 2018, workplace sexual harassment alone cost the Australian economy \$3.5 billion annually, including approximately \$2.6 billion in lost productivity. The vast majority of the costs associated with lost productivity (approximately \$1.8 billion or 70%) were borne by Australian businesses.⁹⁹ The Deloitte Report also estimated that in 2018, victims of workplace sexual harassment spent \$103.5 million in accessing the health and justice systems. The

⁹⁵ Australian Human Rights Commission. (2020). *Respect@Work: Sexual Harassment National Inquiry Report (2020)*. Retrieved from <https://humanrights.gov.au/resource-hub/human-rights/respectwork-sexual-harassment-national-inquiry-report-2020>

⁹⁶ Queensland Health. (2025b). *Workforce gap analysis – Part B: The Professional Lens*. Retrieved from https://www.health.qld.gov.au/_data/assets/pdf_file/0024/1472721/workforce-gap-analysis-part-b.pdf

⁹⁷ World Health Organization. (2021, March). *Devastatingly pervasive: 1 in 3 women globally experience violence*. Retrieved from <https://www.who.int/news/item/09-03-2021-devastatingly-pervasive-1-in-3-women-globally-experience-violence>

⁹⁸ Ballard, A., and Bozin, D. (2023). The true (financial) costs of workplace violence in Australia, *Alternative Law Journal*, 48(3). <https://doi.org/10.1177/1037969X231174672>

⁹⁹ Australian Human Rights Commission. (2020). *Respect@Work: Sexual Harassment National Inquiry Report*. Retrieved from <https://humanrights.gov.au/resource-hub/human-rights/respectwork-sexual-harassment-national-inquiry-report-2020>

Commission did highlight that the estimates around workplace sexual harassment likely only represents a fraction of the actual cost borne by victims and workplaces and affecting the broader Australian economy. They supported improving transparency around the prevalence and cost of sexual harassment, emphasising that future economic modelling will help create a comprehensive understanding of the nature, extent and impacts of sexual harassment in Australia.¹⁰⁰

The Respect@Work report also emphasised the need to take action to prevent and address workplace sexual harassment, Australia can invest in better health and economic outcomes for its workers and workplaces.¹⁰¹

Recommendation 13: The Queensland Government to investigate the true cost of workplace violence including sexual harassment.

3.11 Further research to ensure systemic change

Nurses and midwives, as a predominantly female workforce, are well placed to inform further research and reform efforts aimed at addressing the long-standing inequality between women and men, both as providers and as recipients of care.¹⁰²

Safe Work Australia is currently undertaking a national research project, *Cultivating Systemic Safety and Inclusion to Prevent Workplace Sexual Harassment*. The project aims to address workplace sexual harassment by transforming the organisational systems and fostering safe, inclusive work environments. Importantly, the project recognises that whilst individual behaviour plays a role, the greatest risks lie within the systems, structures, and cultures that shape daily working life. It seeks to shift the focus from reactive responses to proactive prevention by addressing the organisational contexts that enable harassment to occur.¹⁰³

The QNMU encourages both the Queensland Government and Queensland's employers to engage with the research and applying its findings, to ensure we can build a future where safety and dignity are embedded in every aspect of working life.

Recommendation 14: The Queensland Government engage with Safe Work Australia's *Cultivating Systemic Safety and Inclusion to Prevent Workplace Sexual Harassment* project and apply its findings in Queensland workplaces.

3.12 Conclusion

Immediate action is vital to protect Queensland workers and to encourage more individuals to report workplace incidents. Concerningly, the most recent data (for the 2024-25 period) highlights that in Australia only 56% (of the known) most recent incidents of physical assault cases were reported to the police,¹⁰⁴ physical assault

¹⁰⁰ Australian Human Rights Commission. (2020). *Respect@Work: Sexual Harassment National Inquiry Report*. Retrieved from <https://humanrights.gov.au/resource-hub/human-rights/respectwork-sexual-harassment-national-inquiry-report-2020>

¹⁰¹ Ibid.

¹⁰² De Raeve, P., Xyrichis, A., Bolzonella, F., Bergs, J., & Davidson, P. M. (2023). Workplace Violence Against Nurses: Challenges and Solutions for Europe. *Policy, politics & nursing practice*, 24(4), 255–264. <https://doi.org/10.1177/15271544231182586>

¹⁰³ Safe Work Australia. (2025, December). *Safe Work Australia supporting research to build safe, inclusive work environments*. Retrieved from <https://www.safeworkaustralia.gov.au/media-centre/evidence-matters/2025/safe-work-australia-supporting-research-build-safe-inclusive-work-environments>

¹⁰⁴ Australian Bureau of Statistics. (2026, March). *Crime victimisation*. Retrieved from <https://www.abs.gov.au/statistics/people/crime-and-justice/crime-victimisation/2024-25>.

incidents occurred at work for 56,700 males and 51,200 females;¹⁰⁵ and face-to-face threatened assault incidents occurred at work for 93,700 males and 81,600 females. Of the estimated 139,700 persons who experienced non-face-to-face threatened assault, 31% (42,600) reported the most recent incident to the police.¹⁰⁶

Alarming, most women who experienced sexual assault by a male do not report these incidents and unchecked behaviours in the workplace escalate allowing predatory behaviours to continue to exist.

An employer **must** be required to report incidents of physical violence or sexual violence (including any threats of violence or sexual violence) to the regulator. The regulator can then identify the steps required.

The QNMU welcomes the opportunity to engage further with the Committee, and we encourage the Committee to carefully consider the evidence presented. We should all share a common interest to ensure that Queensland workers are provided a safe working environment, without violence and harassment.

¹⁰⁵ Australian Bureau of Statistics. (2026, March). *Crime victimisation*. Retrieved from <https://www.abs.gov.au/statistics/people/crime-and-justice/crime-victimisation/2024-25>.

¹⁰⁶ Ibid.

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