



**Dementia  
Australia®**

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

February 2025

## **Dementia Australia**

Dementia Australia is the peak dementia advocacy organisation in Australia.

Our organisation engages with people with dementia, their families and carers in our activities, planning, policy and decision-making, ensuring we capture the diversity of the living experience of dementia across Australia.

Our advocacy amplifies the voices of people living with dementia by sharing their stories and helping inform and inspire others. As the trusted source of information, education, and support services, we advocate for positive change for people living with dementia, their families and carers, and support vital research across a range of dementia-related fields.

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## **Dementia in Australia**

Dementia is the term used to describe the symptoms of a large group of complex neurocognitive conditions which cause progressive decline in a person's functioning.

Dementia is not just memory loss - symptoms can also include changes in speech, reasoning, visuospatial abilities, emotional responses, social skills and physical functioning. There are many types of dementia, including Alzheimer's disease, vascular dementia, frontotemporal dementia and Lewy body disease.

In 2025 there are an estimated 433,300 people living with all forms of dementia in Australia. This figure is projected to increase to an estimated 812,500.<sup>1</sup> An estimated 1.7 million people in Australia are involved in the care of someone living with dementia.<sup>2</sup>

Dementia is the leading cause of disease burden among Australians aged 65 and over.<sup>3</sup> Dementia is the second leading cause of death for Australians and the leading cause of death of women.<sup>4</sup>

## Introduction

Dementia Australia welcomes the opportunity to contribute to the Consultation draft of the National Plan to End the Abuse and Mistreatment of Older People.

People living with dementia are at a heightened risk of abuse due to factors including cognitive impairment, communication challenges, social isolation, and dependence on others for care.<sup>5</sup>

Dementia Australia believes the National Plan presents an opportunity to embed dementia-specific considerations into the focus areas and actions. We welcome the National Plan's recognition that people living with dementia and cognitive impairment can and should be supported to participate in decision-making in accordance with human rights principles.

Dementia Australia supports the National Plan in principle, recognising it provides a strong foundation for addressing all forms of elder abuse.

### Key concerns:

- Dementia and cognitive impairment are not explicitly addressed as a priority group within the plan despite the evidence of heightened risk of elder abuse.
- Co-design in this plan uses vague language and risks losing meaningful engagement.
- Front-line services—including legal, financial, medical, and aged care sectors—require dementia education and training to identify and respond to elder abuse among people living with dementia.
- Existing studies, including the National Elder Abuse Prevalence Study, have not captured the experiences of people living with dementia in the community or residential aged care.
- The plan does not explicitly acknowledge the need for dementia-friendly communities which play a critical role in reducing stigma, increasing social inclusion, and providing safer environments for people living with dementia, who are at heightened risk of elder abuse.

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<sup>1</sup> Dementia Australia (2023) Dementia Prevalence Data 2024-2054, commissioned research undertaken by the Australian Institute of Health and Welfare

<sup>2</sup> Based on Dementia Australia's analysis of the following publications - National Dementia Action Plan; Australian Institute of Health and Welfare (2024) 2023 Aged Care Provider Workforce Survey: Summary report, AIHW, Australian Government

<sup>3</sup> Australian Institute of Health and Welfare (2022) Dementia in Australia, AIHW, Australian Government

<sup>4</sup> National Health and Medical Research Centre, Cognitive Decline Partnership Centre (CDPC) (2019) Supported Decision-Making in Dementia Care: Final Project Report. Sydney: NHMRC Cognitive Decline Partnership Centre, <https://cdpc.sydney.edu.au>

<sup>5</sup> Rogers, M. M., Storey, J. E., & Galloway, S. (2023). Elder Mistreatment and Dementia: A Comparison of People with and without Dementia across the Prevalence of Abuse. *Journal of applied gerontology : the official journal of the Southern Gerontological Society*, 42(5), 909–918. <https://doi.org/10.1177/07334648221145844>

- Dementia Australia notes that younger onset dementia is currently outside the scope of the National Plan, despite the fact that people with younger onset dementia experience the same heightened risk of all forms of abuse. The National Plan does not clearly outline how safeguarding measure for this group will be addressed.

## Recommendations

### Explicitly recognise dementia and cognitive impairment as a priority group throughout the plan

- The 2008 United Nations Convention on the Rights of People with a Disability (UN-CRPD) recognised dementia as a cognitive disability but unlike physical disability, understanding of dementia as a disability remains limited in the health and social care sector and broader community. This is at least in part because, unlike a physical disability, the cognitive and other changes that are associated with the condition are often under recognised, misunderstood or rendered invisible.
- Dementia Australia recommends that the plan include people living with dementia as a priority group in the National Plan's focus areas.
- Dementia Australia acknowledges that the National Plan recognises the intersection between cognitive impairment and other risk factors such as social isolation, financial disadvantage, and cultural or linguistic diversity. The Plan also highlights the need for further understanding of abuse experiences across different parts of society. To build on this, we recommend that the Plan provide a more detailed outline of how communication difficulties, discrimination, and social isolation specifically increase the risk of elder abuse for people living with dementia.

### Co-design with people with lived experience

- Co-design under this plan should be mandatory and structured. The current language e.g. "where possible" and "may involve" should be stronger. It should include people living with dementia at all stages of planning, implementation and evaluation. Co-design must be genuine, ensuring that people living with dementia and their carers actively shape the national plan with clear mechanisms for their participation in decision-making processes.

### Expand training and capacity-building initiatives

- Dementia Australia recommends that Focus Area 1 includes reference to education on the risks, needs and associated issues of elder abuse for people living with dementia.
- Support the development of culturally safe and trauma-informed education programs for engaging with First Nations people and diverse communities living with dementia.

### Strengthen research and data collection

- Commit to research into the prevalence, causes, and experiences of abuse among people living with dementia, including those in residential aged care.
- Ensure future studies, such as updates to the National Elder Abuse Prevalence Study, capture data from people living with cognitive impairment and dementia in community and residential aged care settings.

## Recognise younger onset dementia

- The National Plan should clearly articulate how people with younger onset dementia will be protected from abuse and mistreatment as they face similar risks of abuse.

## Dementia Friendly communities

- Dementia Australia recommends that Action 1.4 explicitly include the promotion of dementia-friendly communities as a strategy to improve age-friendly environments, social inclusion and reduce stigma.

## Conclusion

Dementia Australia would welcome the opportunity to discuss the recommendations or issues raised in this submission in more detail with the Attorney-General's Department.

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