NSW AGEING AND DISABILITY COMMISSION

SUBMISSION TO THE STATUTORY REVIEW OF THE COERCIVE CONTROL REFORM

August 2026

1. Introduction

The Ageing and Disability Commission (ADC) is an independent NSW government agency that commenced on 1 July 2019 with the objectives of protecting adults with disability and older people from abuse, neglect and exploitation, and protecting and promoting their rights.

Of direct relevance to this submission, key functions of the ADC include:

- handling reports about alleged abuse, neglect and exploitation of adults with disability[1] and older people[2], including by providing advice, making referrals, and conducting investigations
- raising awareness and educating the public about matters relating to the abuse, neglect and exploitation of adults with disability and older people
- inquiring into and reporting on systemic issues relating to the abuse, neglect and exploitation of adults with disability and older people, or the protection and promotion of their rights.

The ADC focuses on reports about abuse, neglect and exploitation of adults with disability and older people by relatives, intimate partners, informal carers, and members of the community. We do not typically handle reports about alleged abuse, neglect or exploitation by paid workers as these matters are dealt with by other agencies.

2. Context of the ADC's submission[3]

2.1 Data

Between 1 July 2019 and 30 June 2026, the ADC received 29,066 reports about abuse, neglect and exploitation of adults with disability and older people \in their family, home and community. Of these reports:[4]

- Most have been about older people (22,450; 77%). One-quarter of the reports have been about adults with disability who were not older people (6.616; 23%).
- Most have involved alleged abuse, neglect and exploitation of women, including 67% of the reports about older people (14,934) and 54% of the reports about adults with disability (3,583).
- The main alleged perpetrators of the abuse, neglect and exploitation, primarily domestic abuse, have been relatives and intimate partners:[5]
    - In relation to older people, relatives have been the subjects of allegation in 62.6% of the reports (14,053), primarily adult children[6] (12,678; 56.5%). Current or former intimate partners have been the subjects of allegation in 13.5% of the reports about older people (3,031).

[1] Aged 18 years and over with a disability as defined in the *Disability Inclusion Act 2014*.
[2] Aged 65 years and over, or 50 years and over if Aboriginal and/or Torres Strait Islander.
[3] More data on calls, enquiries and reports to the ADC is available via the data dashboard on our website: https://ageingdisabilitycommission.nsw.gov.au/tools-and-resources/dashboard-data.html
[4] Data current as at 25 August 2026.
[5] Current or former paid staff have also been commonly reported as the subjects of allegation, including in 6.4% of reports about older people and 14.9% of reports about adults with disability. We have not included paid staff in the above summary as our primary role in these matters has been to refer them on to the appropriate agency.
[6] Includes adult children, grandchildren, stepchildren, children-in-law.

- In relation to adults with disability, relatives have been the subjects of allegation in 51% of the reports (3,379), mainly parents[7] (2,096; 31.7%). Current or former intimate partners have been the subjects of allegation in 13.3% of the reports about adults with disability (880).

Many of the subjects of allegation in reports to the ADC are identified as being in a 'carer' role in relation to the adult with disability or older person. However, this does not always mean that they are providing care or support to the adult.

Coercive and controlling behaviours in reports to the ADC

Many reports to the ADC involve an adult with disability or older person who is subject to coercive and controlling behaviours. In August 2025, we made changes to our case management system to enable enhanced data capture and reporting on the alleged forms of abuse, neglect and exploitation reported to the ADC, including abusive behaviours used in the context of coercive control and other domestic violence.

Between 1 August 2025 and 30 June 2026, the ADC received 3,976 reports about older people and adults with disability, involving 7,154 allegations of abuse, neglect and/or exploitation. Table 1 identifies the number of allegations received for each abuse type, for both older people and adults with disability.

Table 1: Type of alleged abuse of older people and adults with disability in reports to the ADC, 1 Aug 2025 – 30 June 2026

Type of alleged abuse	Number of allegations	Percentage of all allegations
Psychological abuse	2,690	37.6
Neglect	1,890	26.4
Financial abuse	1,747	24.4
Physical abuse	651	9.1
Sexual abuse	104	1.5
Other	72	1
Total	**7,154**	**100**

Table 2 provides the main alleged behaviours associated with coercive control in reports to the ADC, and the number of times they were reported during this time. The data identifies a range of physical and non-physical abusive behaviours that are consistent with those recorded by police in relation to the coercive control offence to date and reflect the domestic violence experience of many adults with disability and older people in NSW.

Table 2: Leading reported allegations associated with coercive control in reports to the ADC about adults with disability and older people, 1 Aug 2025 – 30 June 2026

Reported allegation	Number of cases
Verbal abuse	729
Failure to meet support needs	693
Financial exploitation by manipulation	580
Prevent/restrict access to family/others	371
Prevent/restrict access to supports/services	362
Medical neglect	317
Excessive/degrading demands	284
Intimidation	189

[7] Includes parents, grandparents, stepparents, parents-in-law.

Prevent Person's access to/use of their own money	181
Hit/kick/punch	156
Harassment	137
Push/shove/grab/shake	100
Manipulation/gaslighting	99
Threat of harm	81
Prevent/restrict access to the community	74
Failure to provide necessities of life	51
Prevent/restrict access to aids/equipment	46
Threat/damage to property	44
Use of object or weapon	42
Stalk/track/surveillance	30
Sexual assault	29
Deprivation of liberty	21
Choke/strangulation	20
Threat to harm self	20
Actual or threat to harm pets	9
Cyber abuse	9

2.2 Case studies

The following case studies highlight the experience of adults with disability and older people who are subject to coercive control, and the abusive behaviours involved.

Case study 1 – coercive control by intimate partner

The ADC received multiple reports about Tess, a woman with disability who lived with her husband in regional NSW. Tess had a physical impairment that meant she could not move or reposition herself in bed and had very limited use of her arms.

Tess was admitted to hospital severely ill with infected pressure wounds. The attending doctor noted that while he was there, Tess complained of being thirsty, but her husband refused to provide her with water.

The husband also refused to allow mobility equipment. This prevented Tess from receiving personal care from service providers and being able to be safely moved and repositioned in bed. Instead, Tess's husband insisted on lifting her himself, putting Tess at risk of injury and creating a physical dependence on him. Tess was injured many times through this physical handling and was described as having 'black and blue' skin from the bruising it caused. On at least one occasion she had a fractured bone from him moving her this way.

Tess's husband withheld cigarettes from her and prevented her access to prescribed pain medication. She had no means to access, control or spend her money as she could not get out of bed and had no access to technology that was adapted for her needs. A simple request for a particular brand of soap that was not the cheapest available was enough to subject her to abuse from him.

Tess's husband refused to allow her to own any clothes that would be appropriate to wear in the community, so she only owned nightgowns that were tattered and soiled. When a service provider was finally engaged to provide personal care to Tess, she told them that her husband had become irate that she was not totally dependent on him for her showering support and that he did not have access to her body at that time.

As Tess had no means of physically removing herself from the violence and could not use a phone, she was provided with a Medi Alarm to enable her to contact emergency services at any time. However, her husband simply removed this alarm and placed it out of her reach.

Case study 2 – coercive control by relative

The ADC received a report about Lin, an 80-year-old woman living with her son. The report came to us after Lin slipped a note to a contractor visiting her home that said, 'Help me'. Lin was from a culturally and linguistically diverse background and did not confidently speak English. We made inquiries and found a safe way to speak with Lin, in her first language.

Lin disclosed that her son controlled all aspects of her life and she was not allowed to leave the house. Lin used to attend a place of worship and connect with her community, but her son had told her she was no longer allowed to attend. Lin's son locked her in the house whenever he left the property. Lin told the ADC she was interested in receiving aged care supports but her son had cancelled these on her behalf, despite Lin being able to make her own decisions.

Lin had no access to a phone, and her son had hidden her passport. He had also gained control of her bank accounts via internet banking. Even in her medical appointments, Lin's son was always present and acted as her interpreter. Lin wanted the situation to change but also valued her relationship with her son and was concerned that taking any protective action would end their relationship.

In subsequent conversations with the ADC, Lin disclosed physical violence from her son, including that he would grab her around the neck when he was frustrated with her. Lin repeated the allegations to police, but her son dismissed these concerns stating that he was providing manual handling assistance to Lin. Police advised the ADC that they would not be taking further action, citing concerns about the lack of support for Lin's son and carer stress, not recognising that Lin's son was the reason there were no services in place.

3. Consultation questions

We have focused on the consultation questions within the ADC's expertise and experience.

Mental element

The discussion paper seeks views as to whether the mental element of the coercive control offence should be extended to include recklessness and, if so, what the mental element should be directed towards (coercion or control, causation of mental and physical harm, or another impact).

The ADC supports the mental element of the coercive control offence being extended to include recklessness. We recognise that recklessness sits below intention in the hierarchy of the criminal law. However, it is a common element of many criminal offences and its inclusion does not risk overreach or overcriminalisation. Rather, in our experience dealing with the abuse of adults with disability and older people, the exclusion of recklessness as an element of a coercive control offence risks enabling and perpetuating behaviours that should be captured by the criminal law.

For example, we often see perpetrators argue that they have a 'carer' role in relation to the person and that their conduct is "protective" rather than coercive or controlling. Similarly, we also often see perpetrators who are appointed as decision-makers in relation to a person (such as an Enduring Guardian or Enduring Power of Attorney) argue that they are simply fulfilling their appointed role when they repeatedly prevent or limit the person's access to necessary services, or their own money.

We consider that extending the mental element to include recklessness would more accurately capture the type of egregious behaviours we routinely see – that is, where a perpetrator knows their actions might cause harm or create danger, but they choose to do it anyway.

Adding recklessness as an element of the offence would also assist other parties to develop the skills and mindset to identify the conduct as potentially coercive or controlling. In our experience, we note that parties including bystanders and police can get overly focused on the perspective of the identified carer rather than that of the older person or adult with disability who is the alleged victim-survivor.

We would also support the extension as recklessness in relation to causing physical or psychological harm.

Scope of relationships

We maintain our consistent and informed view that the scope of the coercive control offence should cover broader domestic relationships and not be limited to intimate partner relationships. iWe submit that the domestic relationships thatcovered by the offence of coercive control should be extended to include relatives and carer relationships.

In our experience, the impact of coercive control on adults with disability and older people is very similar across domestic relationships, whether they be intimate partners, relatives or carers. However, by dint of its current narrow application to intimate partners, there is no parity in the criminal justice response options. An older person subject to coercive control by a relative does not have the same access to justice as an older person subject to the same abusive behaviours by an intimate partner. We submit that this exposes a significant gap in NSW and discounts the lived experience of many adults with disability and older people subject to coercive control. It also sends a message to adults with disability and older people that they are not 'legitimate' victim-survivors, hampering efforts to increase engagement and address significant under-reporting.

The serious and devastating impacts of coercive control are not limited to intimate partner relationships

We acknowledge the evidence provided in the excellent work of the Domestic Violence Death Review Team as to why there is a need for criminalisation of coercive control in intimate partner relationships, as noted in the discussion paper. However, this does not mean that there is not also a strong basis for criminalising coercive control in other domestic relationships, and we agree with the discussion paper that caution should be exercised in only recognising domestic abuse in the context of homicide. In our experience and research,[8] coercive control and other domestic abuse of adults with disability and older people is associated with high levels of neglect, including serious neglect and death.

[8] See, for example, our research with UNSW Social Policy Research Centre on 'Neglect among Adults with Disability and Older People in NSW', https://unsworks.unsw.edu.au/entities/publication/14a2f3f2-92eb-4225-aecb-bb9cca16996a and https://ageingdisabilitycommission.nsw.gov.au/reports-and-submissions/neglect-among-adults-with-disability-and-older-people-in-nsw.html

Potential criminal neglect of older people and adults with disability (and its related contributory factors, including coercive control) is rarely considered by relevant frontline agencies, such as hospital staff and police. Consequently, there is therefore minimal opportunity for the resulting deaths to be appropriately recognised as occurring in the context, or as a result, of domestic abuse.

We note the information in the discussion paper that 'the nature of the offending in intimate partner relationships is very different to abuse in other domestic relationships such as elder abuse'. We agree that the relationship is different and that there can be differences in how the coercive control is executed. However, coercive control of older people and adults with disability in intimate and non-intimate partner relationships has many common elements, and the non-physical behaviours recorded by police in relation to the coercive control offence are highly consistent with those in coercive control matters handled by the ADC (as identified in section 2 of this submission). They include threats or intimidation; financial abuse; shaming, degrading and humiliating; isolating; and harassment, monitoring or tracking.

Importantly, extending the scope of the coercive control offence to appropriately include relatives and carer relationships would not diminish or weaken the application of the offence to intimate partner relationships.

Carer relationships

We do not support the proposition in the discussion paper that extending the offence to apply to carer relationships would constitute criminal law 'overreach', and we consider that the arguments are flawed.

It is critical to distinguish carer relationships involving children under 18 years of age from those involving adults, including adults with disability and older people. They are not the same, and conflating the two fails to recognise the rights of the adults reliant on day-to-day care. For example, the ADC has seen multiple cases in which police have deemed events involving abuse of older people or adults with disability by a relative carer as 'lawful chastisement', despite this only applying to children under 18 and the event coming within the scope of domestic abuse. We consider that it would be appropriate and straightforward to exclude carer relationships involving children under 18 from the scope of the offence.

We do not agree that extending the offence to carer relationships involving adults 'could create a dangerous narrative in the community that all carers are abusive.' It is a truism that the overwhelming majority of informal carers of adults with disability and older people provide vital and quality care and put the needs of the adult above their own. However, it is crucial to recognise that there are informal carers who do exercise coercive control against adults with disability and older people and use their role to camouflage and sustain the abuse, often over an extended period, with devastating impacts on the person. The fact that the perpetrator is perceived as the 'carer' and the adult is reliant on them often exacerbates the risk and makes it harder for the abuse to be identified and for the person to gain help. Extending the scope of the offence to include carer relationships would no more create a narrative that all carers are abusive than the current construction of the offence has created a narrative that all intimate partners are abusive, which has clearly not been the case.

Perception that other offences adequately apply

The discussion paper seems to be underpinned by the notion that broader domestic relationships do not need to be captured under the coercive control offence as there are other options to adequately deal with these matters. For example:

- The discussion paper notes that there are other offences that could capture some coercive and controlling behaviours in broader domestic relationships, including criminal neglect (section 44 of the *Crimes Act 1900*). We agree that this offence is relevant. However, in our experience, the threshold set for this offence is very high and the offence is typically only considered in the wake of death or serious injury to the victim. This is not the equivalent of the coercive control offence, where a key objective is to protect victim-survivors.
- The discussion paper notes the advice of Reference Groups that police have used ADVOs for coercive and controlling behaviours in non-intimate partner relationships. The ADC has been one of the members of the Reference Groups that has provided this advice – we have seen the use of ADVOs in relation to coercive control in some of the reports to our office, including in non-intimate partner relationships. There have been positive outcomes in a range of cases where we have worked with police to have additional conditions added to the ADVO to address particular types of non-physical forms of abusive behaviour. For example, a condition specifying that the defendant must not interfere with or prevent the protected person's access to aged care services. ADVOs provide a valuable safety measure in a range of cases involving coercive control; however, they simply do not fulfil the same purpose, send the same message, or have the same import as the coercive control offence.

It is important to recognise that there remain substantial barriers to adults with disability and older people gaining access to justice, including poor recognition of domestic abuse of these populations. We recognise that extending the scope of the coercive control offence beyond intimate partner relationships will not automatically resolve those barriers, but it would be an important step towards improving their access to justice.

Non-exhaustive list of behaviours

Overall, the ADC considers that the non-exhaustive list of 'abusive behaviours' under section 54F of the Crimes Act captures the types of behaviours we most commonly see in reports to the ADC involving coercive control of adults with disability and older people in domestic relationships.

In relation to achieving greater alignment with the non-exhaustive list of behaviours constituting 'domestic abuse' under section 6A of the *Crimes (Domestic and Personal Violence Act 2007*, there may be merit in including 'behaviour that is sexually abusive, coercive or violent' under section 54F to appropriately recognise sexual violence as coercive and controlling behaviour.