

COTA

For older Australians



2024

2025

FEDERAL BUDGET

POLICY ALERT

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Introduction

This Budget was a mixed bag of positive and welcome initiatives and missed opportunities. In our response on budget night, we welcomed many good initiatives that will support older people manage the cost of living crisis including the \$300 energy rebate for every household, a 5-year freeze to the cost of PBS medicines for pensioners and concession card holders and a continuation of the freeze on deeming rates. But we are also identifying the areas where more work needs to be done and where COTA Australia will continue its advocacy, like the new rights based Aged Care Act and a Seniors Dental Benefits Scheme, to make sure older people are getting the support they need when they need it.

We will also be continuing to raise the spectre of ageism which impacts in so many aspects of our lives and in policy setting. Making sure that Government understands the role it can play and getting them to act will remain a key focus of COTA Australia's advocacy.

Housing

Government committed funding to build more affordable housing, increase rental assistance and support social housing and homelessness services. Many housing initiatives involve working constructively and developing agreements with the states and territories and targeting women, including older women at risk of homelessness. Funding includes:

- \$1.9 billion over five years from 2023–24 (and \$0.5 billion per year ongoing from 2028–29) to increase all Commonwealth Rent Assistance maximum rates by 10 per cent from 20 September 2024 to help address rental affordability challenges for recipients.
- \$423.1 million over five years from 2024–25 in additional funding to support the provision of social housing and homelessness services by states and territories under a new National Agreement on Social Housing and Homelessness. This is subject to state and territory government agreement. The additional funding will increase annual funding under the new agreement to \$1.8 billion per year from 2024–25, with over \$9.28 billion provided to states and territories over the life of the agreement.
- supporting more community housing providers to access finance through the Affordable Housing Bond Aggregator by increasing the cap on the Government's guarantee of Housing Australia's liabilities by \$2.5 billion to \$10.0 billion, with an associated increase in the line of credit that supports the Affordable Housing Bond Aggregator of \$3.0 billion to \$4.0 billion
- \$19.7 million over six years from 2024–25 to support housing research, fast-track feasibility studies on the release of Commonwealth land to support social and affordable housing and maintain Treasury's capability to develop, advise on and implement housing policy and programs.
- \$2.0 million over three years from 2024–25 to build the financial capability of community housing providers and Aboriginal and Torres Strait Islander community-controlled housing organisations.

In addition, the Government will:

- target the \$1.0 billion for social housing under the National Housing Infrastructure Facility in the 2023–24 MYEFO towards crisis and transitional accommodation for women and children fleeing domestic violence, and youth, including redistributing the mix of concessional loans and grants to increase the proportion of grants to \$700.0 million.
- provide \$1.9 billion in concessional finance to support community housing providers to deliver social and affordable housing under the Housing Australia Future Fund and the National Housing Accord.

We welcome the 10 percent increase in Commonwealth Rent Assistance (CRA) in this Budget. This is on top of the 15 percent increase in last year's Budget. This is a step towards the 60 percent increase to the maximum rental amount used to calculate the CRA amount that we, and many other advocates, think is required. About 42 percent of CRA recipients are older people aged 55 years and over.¹ We also welcome the focus on older women and want to see more details on how funding will be prioritised.

In addition to increases in the maximum payments of CRA, the methodology and design of the payment must be reviewed with changes made to improve its effectiveness. CRA needs to better align with rents in local areas and sharpen its focus on alleviating rental stress as rents continue to increase at rates faster than the Consumer Price Index (CPI). Eligibility rules could be examined as part of a review and new rent assistance models considered that are targeted to addressing housing need not just providing an income support supplement.

It is encouraging that the new National Agreement on Social Housing and Homelessness is close to being finalised, providing a clear national framework and state and territory targets for the provision of social housing and homelessness services. It is hoped that this supports a new National Housing and Homelessness Plan scheduled for release this year. A lack of affordable housing is an issue impacting all Australians, including older people. If our governments prioritise social and affordable housing, everyone benefits.

We argue that older people, aged 50 years and older, should be a clear priority group under the National Housing and Homelessness Plan. Comparable overseas strategies, like the Canadian National Housing Strategy, considers seniors as a priority population with unique housing needs.² Improvements to data and research are required to determine the prevalence and diversity of housing needs for older people and develop innovative approaches to improve housing outcomes.

Health

The Federal Government's \$8.5bn investment in health continues the strategic focus on:

- strengthening and modernising Medicare (\$2.8 billion).

¹ Department of Social Services, [Expanded DSS Benefit and Payment Recipient Demographics – December 2023](#)

² Government of Canada, [National Housing Strategy](https://www.placetocallhome.ca/about-national-housing-strategy) <https://www.placetocallhome.ca/about-national-housing-strategy>

- delivering cheaper medicines (\$4.3 billion).
- supporting a fit and healthy Australia (\$1.3 billion).

The implementation of many of the associated budgetary measures should have a positive effect on older Australians' access to Medicare funded services in their local communities and give added confidence to being able to purchase PBS medicines when required.

For many older Australians and pensioners, the change to the low-income threshold for Medicare is positive. To account for inflation, the threshold for single seniors and pensioners has been increased to \$41,089, and the family threshold for seniors and pensioners has been increased to \$57,198.

Strengthening and modernising Medicare

Medicare Urgent Care Clinics \$277 million over three years is allocated to add a further 29 Medicare bulk billed urgent care clinics across Australia - adding to the existing 58 existing urgent care clinics. The purpose of these clinics is to reduce pressure on hospitals and emergency departments by providing a Medicare funded walk-in service to people with urgent, but not life-threatening illnesses or injuries assisting.

These clinics have the potential to provide a good community-based health service model for older Australians. However, if urgent care clinics are to meet the health needs of older people, they will need to be appropriately staffed with accessibility being continued over extended weekday hours and weekends. To maximise access, it is important that the clinics are located close to community transport and have safe, adequate parking. Locations of the new clinics will be announced over the coming couple of weeks.

Medicare mental health services. \$361 million over four years to expanding the range of free mental health services. The major initiatives, which together demonstrate further adoption of a stepped model of care, include:

- a new national low intensity mental health digital service that anyone can access for free, whenever they need it (\$588.5 million over eight years). The aim is to ensure people can access mental health support before their distress escalates. There is no need for a person to have a medical referral or mental health diagnosis.
- an upgraded nationwide network of 61 Medicare Mental Health Centres to offer free, walk-in access to a multidisciplinary team of mental health care professionals for adults with more complex mental health needs (\$29.8 million over four years). These Centres build on the existing Head to Health network.
- funding Primary Health Networks to work in partnership with general practices to commission mental health workers (including nurses, social workers, counsellors and peer workers) to offer wraparound care for people with high needs in between medical appointments (\$71.7 million over four years).
- a new national peer workforce association will help to mobilise, professionalise and unlock the potential of this segment of the mental health workforce (\$7.1 million).

While this provides some way of responding to Australia’s mental health crisis, none of the measures are specifically focused on the mental health concerns and needs of older people. This is an issue because accessing appropriate mental health services has been a challenge for older people on low fixed incomes and those without comprehensive private health insurance coverage. Free digital access will not assist all older people. Our research³ shows that digital and online services are not always accessible to older Australians.

Although the above measures provide Australians with the promise of enhanced access to locally based mental health services there will also need to be a more substantial investment supporting the expansion and upskilling of the mental health workforce. We agree with others⁴ that without an appropriately qualified workforce (including psychiatrists and psychologists who specialise in the assessment, diagnosis and treatment of older people with mild to severe mental illness and/or dementia) waitlists for services will remain impossibly high and the population’s mental health and wellbeing continue to deteriorate.

Strengthening Medicare – Aged Care related funding

Under the Strengthening Medicare package, states and territories will receive funding to support earlier discharge from hospitals for older Australians, upskill residential aged care workers and deliver outreach services, virtual care, and complex care outside of hospital settings. This funding includes:

- \$610.4 million over four years from 2024–25 for states and territories to invest in initiatives that address long stay older patient challenges, unique to each jurisdiction.
- \$190.0 million over three years from 2025–26 for the extension and redesign of the Commonwealth’s Transition Care Programme to provide short-term care of up to 12 weeks for older people after a hospital stay.
- \$56.8 million over five years from 2023–24 for the expansion of the Commonwealth’s successful Acute to Residential Care Transition Service dementia program to transition long-stay patients with behavioural psychological symptoms of dementia out of hospital into a residential aged care home.
- \$24.9 million over two years from 2024–25 for the continuation of the Comprehensive Palliative Care in Aged Care program to support states to deliver specialist palliative care services in residential aged care. This funding to support older Australians is a component of the \$1.2 billion package of Strengthening Medicare measures agreed at National Cabinet in December 2023 and has been developed in consultation with the states and territories.

Other strengthening and modernising Medicare measures

- \$69.8 million to increase the number of Medicare eligible MRI machines.
- \$266.9 million so Medicare rebates rise each year for nuclear medicine imaging and many common medical tests.
- \$91.1 million to boost the supply of health care in areas of shortage.

³ COTA Australia, Mental health and wellbeing during the COVID-19 Pandemic: The lived experience of Australians aged 75 and over. Available at <https://cota.org.au/wp-content/uploads/2023/04/COTA-COVID-REPORT-2023-Final-Digital-RGB.pdf>

⁴ (<https://psychology.org.au/insights/federal-budget-2024-25-only-scratches-the-surface>)

Cheaper PBS medicines

Approximately \$3 billion (or about \$600 million more each year) is directed to supporting the pharmacy sector to ensure medicines are affordable instead of their cost being affected by inflation. This has important health, wellbeing and cost of living implications for all Australians, especially older Australians with living with complex chronic health conditions and/or a disability are/or experiencing financial hardship.

As part of the Eighth Community Pharmacy Agreement (8CPA) funding measures included in the 2024-25 Budget, the Federal Government will freeze the maximum Pharmaceutical Benefits Scheme (PBS) general co-payment at \$31.60 until 1 January 2026, while the concessional co-payment will remain at \$7.70 per script until 1 January 2030. This is a welcomed development for older Australians – particularly those taking multiple prescribed PBS medications. For pensioners this will mean that while their pension rises each year with inflation, the cost of their medicines will not exceed \$7.70 per script for the next five years. This cheaper PBS medicines measure comes on top of the introduction of 60-day prescriptions, which has already halved the cost of numerous PBS medicines (saving Australians more than \$370 million) and contributes to yet another modest, albeit welcomed, dint in cost-of-living pressures.

The controversial \$1 discount on the PBS patient co-payment applied at the discretion of individual pharmacists will be phased out as part of the new Pharmacy Agreement. Some argue that this was an inequitable discount only apply in some circumstances while others believe it should be retained. We will follow the debate and bring relevant information to you as this plays out. At the end of the day, we just want older people to get the best possible deal.

In addition, the cap on the number of dose administration aids (DAAs, for example Webster Packs) a pharmacy can provide will be increased to 90 per week. This will facilitate more people in the community better managing their medicines, reduce medication misadventure and positively impact medication adherence.

Supporting a fit and healthy Australia

The key measures that fit under this health banner that are especially pertinent to older Australians are:

- \$25.3 million to prevent skin cancer, now and in the future. As part of this measure a new skin care screening roadmap (\$10.3million) will identify enhanced outcomes for people with skin cancer and improve the collection of skin cancer data.
- \$38.8 million to continue funding for free bowel cancer screening. From 1 July 2024, people aged 45-49 will be eligible to receive the free bowel cancer screening kit. Currently, only people aged 50 to 74 are eligible to receive the kit at no cost.

Women's health

The Women's Budget Statement recognises that women experience gender and age bias in the health system, leading to poorer health outcomes. It recognises menopause as a critical life point. The Budget has a suite of measures targeting women's health, which will benefit all women – however, these are the only two that target older women specifically.

- Listing of breast cancer medicine abemaciclib to treat early breast cancer – without subsidy the treatment would cost \$97,000 per course. For those with a concession card, it will now be \$7.70, and will benefit around 2,400 women each year.
- \$1.2 million dollars over 2 years from 2024-25 to train health practitioners to better treat, care and manage women's health during menopause, so that they can provide up to date advice and treatment to women during menopause.

Other health budget measures that have important implications for the health and wellbeing of older Australians:

- \$1.4 bn over 13 years in groundbreaking new health and medical research.
- \$49.1m for higher Medicare rebates to see a gynaecologist for complex conditions.
- \$631.1 million over four years (and \$112.1 million per year ongoing) to support access to vaccines, including for COVID-19 and shingles and postherpetic neuralgia.
- \$121.3 million over four years to support the Royal Flying Doctor Service (\$71.3million over three years) and expand Healthdirect Australia (\$47.5 million over four years) to expand services (particularly to remote communities).
- \$3.4 billion over five years to list new medicines on the PBS - includes treatments for COVID-19, leukaemia, cystic fibrosis, multiple sclerosis, chronic kidney disease and ovarian cancer.
- \$16 million over four years to implement system changes to MyMedicare.

While there are many positive health initiatives there was one major omission that would enhance health and social outcomes for tens of thousands of older Australians, as well as contribute to alleviating hospital system pressures - a Senior Dental Benefits Scheme.

We have called for the Federal Government to establish a Senior Dental Benefits Scheme program, bulk billed through Medicare, with an initial focus on older people on low incomes, all people living in a residential aged care home, all people receiving a home care package, or upon admission to hospital.

This Budget missed a vital opportunity to strengthen its support for the holistic health and wellbeing of older Australians particularly those on fixed, low incomes and/or without adequate primary health insurance coverage. We will continue to advocate for this in the lead up to next year's budget and the Federal Election.

Retirement Incomes

Superannuation contributions

The increase of the concessional contributions cap for superannuation to \$30K is a welcome measure. Whilst all employees will benefit, it may offer some relief to women still in the paid workforces. From 1 July employees can make extra contributions to their retirement fund.

This measure will have generational impacts and will benefit women who have time to accumulate the benefits of compounding interest within superannuation. It will be of limited value to women who are close to retirement, have retired or have been forced into early retirement, and have insufficient superannuation or assets.

Superannuation on Paid Parental Leave

This Budget introduces superannuation on government paid parental leave, something we have been advocating for some time. This measure will go some way to boosting retirement incomes of women into the future.

The unpaid superannuation entitlements owed by employers in liquidation or bankruptcy to workers will be targeted for recovery through improvements to the Fair Entitlements Guarantee Recovery Program from 1 July 2024. This measure is expected to recover \$44.4 million in additional payments to employees' super accounts over four years.

JobSeeker

COTA Australia is disappointed the Federal Government has made no substantial change to JobSeeker. Over 50 percent of JobSeeker recipients are aged 45 years and older. Older women make up a large cohort of Jobseeker recipients and longer term unemployed.

The only budget-related JobSeeker change is for people with limited work capacity to work up to 14 hours a week who will now be eligible for the higher rate, an increase of \$54.90 a fortnight. The change is expected to benefit 4,700 people. This makes it fairer for these people.

As for the other 99.4 per cent, they'll stay on the same payment, for a single person 55 or older, after 9 continuous months on an income support payment, the maximum amount remains \$816.90 per fortnight (or \$50.35 per day).

Enhancing employment prospects for Carer Payment recipients

We applaud the flexibility adjustments to the Carer Payment and the focus on unpaid care. This \$18.6 million investment over five years will have a positive impact on the lives of 31,000 Carer Payment recipients who are disproportionately women, around 25,000.

The change to the 25 hour per week rule to up to 100 hours over a 4-week settlement period, provides carers greater flexibility and choice regarding how to best tailor their work commitments around their caring role. Education and volunteering activities are no longer included in those hours which will support carers to build skills to facilitate a return to work or increase hours of workplace participation as and when they can.

Deeming rates freeze

The budget delivered an extension of the existing freeze on deeming rates at current their levels by a further 12 months. The lower deeming rate of 0.25 per cent and upper deeming rate of 2.25 per cent will remain frozen until June 30, 2025. The freeze will benefit approximately 876,000 income-support recipients, including 450,000 age pensioners.

The current level of deeming rates has applied since May 1, 2020. We will continue to monitor any movement in this area.

Mature Employment

People aged 50 years and older tell us they want the choice to work beyond the traditional age of retirement. Our economy can be more productive by empowering people to work for as long as they want. For some increasing their hours of paid employment is a challenge, for others the challenge is simply to find a job.

This Budget is heavily focused on upskilling. Key initiatives include the 'Future Made in Australia' program, enhancement to the government-funded paid parental leave scheme, employment services reform and reforms targeted towards Closing the Gap for Indigenous Australians. While there are no initiatives targeted specifically at enhancing employment prospects for older workers, particularly for long term unemployed people, several training initiatives could be useful for those seeking to upskill and reposition within the job market:

- \$777.4 million (over five years) to develop local jobs, services and economic opportunities in remote regions.
- \$536.1 million to fund the creation of 3,000 jobs in remote Australia, through a phased roll out over three years from September 2024.
- \$188.7 million for a Community Jobs and Business Fund, to support community development and the creation of employment opportunities through funding capital, equipment and capacity building services.
- \$55.6 million to support women's participation in male dominated industries. This program aims to support women into flexible, safe and inclusive work and training opportunities and drive structural and cultural change across the male-dominated industries key to A Future Made in Australia - Workforce and Trade Partnerships for Renewable Superpower Industries.
- 20,000 more fee-free TAFE places.

- A new \$100 million Outcomes Fund which is a partnership between Federal & State/Territory Governments and social enterprises to tackle disadvantage. This is the Federal Government’s first response to the Social Impact Investing report written by the Impact Investing Taskforce Expert Panel. In addition, \$11.6 million will fund a Social Enterprise Development Initiative, which will support ‘for purpose’ organisations such as social enterprises and charities to build their capability to access capital and support improved social outcomes.

There is also an additional \$68.6 million allocated to the Digital Contact Centre to provide better support for people using Workforce Australia Online. This investment will be welcomed by many older people seeking paid employment opportunities.

We are encouraged to see the government Closing Loopholes laws assisting in stopping the underpayment and undercutting of worker’s conditions by eliminating some of loopholes that certain employers had been exploiting such as undercutting pay and conditions of labour hire workers. These legal changes include defining “casual work” in law to prevent the exploitation of casuals.

Although, in his Budget speech the Treasurer spruiked there has been record jobs growth during a first term of the Albanese Government, he also highlighted a ‘softening labour market’ in the forthcoming and financial year. Over the last 4 to 5 years, people aged 50 years and older have significantly increased their participation in the labour market and it is critical that governments at all levels ensure that mature workers are not adversely targeted as the unemployment rate increases.

We want to see the Federal Government lead the way in eliminating all forms of discriminatory workplace practice – including ageism. When older workers are locked out of employment, workers of all ages miss out on the skill sharing and breadth of knowledge, experience and enthusiasm that comes with having age diverse workplaces. Older people are forced to rely on government support earlier, which has an impact on our budget bottom line.

Aged Care

The Government has allocated an additional \$2.2 billion over five years to aged care. The most substantive measure is focussed on improving digital systems and ICT infrastructure in preparation for the implementation of the Aged Care Act, the new Support at Home Program, and the Single Assessment system from 1 July 2025. The funding measures in aged care include:

Home Care Packages

- \$531.4 million in 2024–25 to release 24,100 additional home care packages in 2024–25.

An extra 24,100 home care packages in 2024-25 (an increase of 9.3 percent from 2023) is insufficient to meet growing demand and need and to reduce wait times. This is about half the increase in home care packages provided in previous budgets. The Department states that this measure will reduce wait times to an average of 6 months. Whilst there might be some improvement, we believe that the most important measure of a successful home care program would be to ensure that any older person needing support is receiving it within 30 days of being assessed. This Budget set a new target for low level assessments of 40 days – just for the assessment to be completed. Currently, many people are waiting over a year for home care services they are assessed as needing. Older Australians should not be left stranded in hospital, forced into residential aged care, or die waiting for support that never comes.

CHSP

The Government has reprioritised unallocated funds from the Commonwealth Home Support Programme (CHSP) over five years from 2023–24 to other sub-programs within aged care services. This is a concern as many older people are currently not able to access these services as they are not available in their region. Some older people are informed these services are available but are placed on waiting lists. In areas across Australia, the type of CHSP services older people miss out on include Domestic Assistance, Allied Health, Transport and Social Support.

We have raised the concern on this and will continue to push for the establishment of the new Support at Home Program (due in 2027) to ensure that no one waits more than 30 days to get the services they need.

Digital infrastructure

- \$1.2 billion over five years from 2023–24 for sustainment of, and essential enhancements to, critical aged care digital systems so they remain legislatively compliant and contemporary and can support the introduction of the new Aged Care Act from 1 July 2025.
- \$174.5 million over two years from 2024–25 to fund the ICT infrastructure needed to implement the new Support at Home Program and Single Assessment System from 1 July 2025.
- \$4.1 million over three years from 2023–24 to undertake ICT preparation work to configure the new Basic Care Tariffs in the AN-ACC funding model.

Regulation

- \$110.9 million over four years from 2024–25 to increase the regulatory capability of the Aged Care Quality and Safety Commission as part of the Government’s response to the Final Report of the Capability Review of the Aged Care Quality and Safety Commission, and to implement a new aged care regulatory framework from 1 July 2025.
- The Aged Care Quality and Safety Commission is critical to the success of the new Act and funding to enhance its capacity is supported.

Aged care workforce

- \$65.6 million over four years from 2024–25 to attract and retain aged care workers, collect more reliable data, and improve the outcomes for people receiving aged care services through existing aged care workforce programs.

- \$21.6 million over three years from 2024–25 to extend the Home Care Workforce Support Program for an additional three years to facilitate the growth of the care and support workforce in thin markets.

Dementia

- \$30.4 million over three years from 2024–25 to states and territories to continue to deliver the Specialist Dementia Care Program.
- \$1.7 million in 2024–25 for the Australian Dementia Network to continue preparing the health system for developments in biomarkers and disease-modifying therapies.

My Aged Care contact centre

- \$37.0 million over two years from 2024–25 to reduce wait times for the My Aged Care Contact Centre due to increased demand and service complexity.
- More details are required on how the My Aged Care Contact Centre will reduce its waiting times and the program of governance activities to implement the new Aged Care Act including the extension of the Aged Care Approvals Round (ACAR).

Implement the Aged Care Act

- \$11.8 million over three years from 2023–24 to implement the new Aged Care Act, including governance activities, program management and extension of the Aged Care Approvals Round.

Palliative aged care

- \$10.8 million over two years from 2024–25 to extend the Palliative Aged Care Outcomes Program and the Program of Experience in the Palliative Approach program to continue to upskill the aged care and primary care workforce to further embed palliative care capacity in the aged care workforce.

Funding for aged care providers in thin markets

- \$7.8 million over two years from 2024–25 to extend funding to aged care service providers in thin markets as they transition their business operations to accommodate the new Australian National Aged Care Classification (AN-ACC) funding model.

Service Funding for Veterans

- Additional funding of \$59.6 million over three years is provided for Veterans' access to health and support programs including access to home care, community nursing, medical treatment, chaplaincy, and mental health programs.
- Funding of \$194.4 million over 4 years is also allocated to support and improve the claims processing and digital capability of the Department of Veterans' Affairs.

Aged Care Act

The Government announced that the commencement date of the new Aged Care Act to 1 July 2025. This means we have an end date but no timetable on how that date will be met. The current Exposure Draft has no details about the design of the Support at Home Program or the Governments response to the Aged Care Taskforce recommendations on how aged care will be paid for. Details of both are needed so that there is a complete Act for parliamentary scrutiny and debate and to provide stakeholders like COTA Australia to advocate for any changes required.

To fulfill the intentions of the Aged Care Royal Commission, we need the Government to introduce the Act into Parliament as a priority to allow proper scrutiny and community conversation. The whole Parliament should work to ensure it is passed by the end of this calendar year, so the sector is ready to implement it from 1 July 2025. Older people have been waiting too long for their rights to be enshrined in legislation and need certainty and security in accessing services and a guarantee that what they will be asked to pay is fair. We can't afford to miss this window or there is a real risk that the new Act, the rights based system and ensuring that there will be services available to meet needs (a sustainable system) will not proceed at all or at least not until after an election.

Digital

- \$288.1 million to expand Digital ID into a whole-of-economy service for Government and businesses. We are still concerned about the implementation of this measure. We know 2.1 million older people don't have access to these services because their state/territory government issued ID card (other than drivers licenses) are not yet linked to the system.
- Introduction of a comprehensive, multi-regulator approach to crack down on scams. We look forward to hearing more details about this measure.
- \$12.4 million for the Australian Communications and Media Authority to oversee the review and improve existing scam call and SMS code for telecommunication service providers, and boost enforcement action to prevent, detect, and disrupt scams.

Women's Budget Statement 2024/25

In 2024, the government released its Working for Women: A strategy for gender quality, its ten-year roadmap to achieving gender equality. It recognises that women's safety and equality are linked, and prioritises addressing the following five areas:

- Gender based violence
- Unpaid and paid care
- Economic equality and security
- Health
- Leadership, representation and decision-making

Gender based violence

Safety is central to equality, and there are many measures in the budget that speak to women's safety. The impacts of violence over a lifetime can be profound, affecting everything from women's financial security, housing options physical and mental health.

The Budget has allocated \$1.3 million to fund a rapid review of targeted prevention approaches to gender-based violence, including a focus on homicides, and will be guided by a panel of experts.

A disproportionate number of women rely on their male partners (34% compared to 7% of men) to meet their living costs into retirement⁵, creating vulnerability and increasing the risk of violence, including economic and financial abuse. This risk created by the vulnerability of both age and gender should inform the work of the violence rapid review task force.

We would like to see that the needs of older women experiencing violence – many of whom will have lived with violence over a lifetime – are included in this review and inform the panel. This must include the experience of older women in settings including residential aged care, and those experiencing all forms of violence as they age from family members and carers (elder abuse).

Paid care work

The Women's Budget Statement recognises that "paid care roles are traditionally undervalued, underpaid and insecure."

The aged care workforce remains a largely older female older workforce, particularly in the lower paid Personal Care Worker roles, where 70% are aged 45 and over. Two measures will have a positive impact:

- The revised stage 3 tax cuts will boost lower paid workers' income – and women hold a disproportionate number of such jobs. Those on \$50,000 to \$130,000 will see the biggest benefit from the change. The tax cut will now be \$929 a year for someone on \$50,000, while the average will be about \$1,650.
- Targeted wage increases in aged care and childcare. Again, these will have an impact on older women in the paid care workforce (age and childcare). These follow the Fair Work Commission's approval of an increase for the former and likely approval in June of the latter. The Government has committed to funding this increase to wages once the final decision is delivered, building on the \$11.3 billion already allocated to support the interim increase of 15 per cent for aged care workers.
- The Government is also investing \$87.2 million in workforce initiatives to support, attract and retain aged care staff. This will benefit women, who comprise over 85 per cent of the current aged care workforce.

⁵ Padma Raman, ED Office for Women [2024 International Women's Day breakfast & Helen Williams Oration](#), Canberra 2024. Also reported in The Mandarin, [Senior PM&C figure says Australia needs sophisticated and sustained solutions to crack gender inequality](#)

Other measures target education and training to attract women into male dominated industries are outlined in our summary of measures for mature workers on page 9. We would have welcomed targeted funding for free courses for women aged 55+ who want to retrain as aged care workers, or for older aged care workers who want to retrain into other fields of work.

Overall, there was very limited consideration to the specific issues the current generation of older women face. There were 2 specific references including support for people going through menopause and that older women take five or more medications so would benefit from the PBS freeze. Both are welcomed measures but don't address the serious disadvantage experienced by older women.

We are pleased to see initiatives that will positively impact future generations but more needs to be done to address the challenges older women face today in staying in or re-entering the workforce.