

# Submission to the Special Rapporteur on Violence against Women and Girls on Violence against Older Women.

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## Executive Summary

Violence against older migrant and refugee women in Europe remains significantly underreported, under-recognised, and insufficiently addressed. It is driven by the intersection of inequality between women and men, age-based discrimination, and migration-related vulnerabilities, and is often the result of cumulative disadvantage across the life course.

Older migrant and refugee women face heightened exposure to economic, psychological, physical, and structural forms of violence, frequently occurring within family or caregiving relationships. Their dependency on perpetrators, combined with barriers such as language, limited digital literacy, insecure legal status, and restricted access to services, significantly reduces their ability to seek protection and justice.

This submission of the European Network of Migrant Women highlights key gaps in legal frameworks, service provision, data collection and participation, and calls for a comprehensive, trauma-informed and life-course approach that includes the specific vulnerabilities of migrant and refugee older women.

## A. Manifestations and Perpetrators of Violence

### What are the causes of violence against older women and who are the most common perpetrators of violence against them:

Violence against older migrant and refugee women is driven by a combination of structural inequalities and interpersonal dynamics. Lifelong economic marginalisation, exclusion from formal labour markets, and limited access to pension systems contribute to financial dependency in older age. This is particularly evident among women who have worked in informal sectors, including domestic work and care work, where labour protections and social contributions are absent or insufficient.

These patterns are closely linked to the cumulative impact of the motherhood penalty across the life course. Many women, and particularly migrant women, take prolonged or repeated breaks from formal employment due to caregiving responsibilities, including raising children and supporting extended family members. The longer the absence from formal employment, the more difficult it becomes to re-enter the labour market. As a result, many women face long-term exclusion from stable employment, with some never able to return to the labour market at all.

These structural inequalities significantly reduce lifetime earnings, access to social protection, and pension entitlements, resulting in heightened economic insecurity and dependency in older age. This dependency, in turn, increases vulnerability to various forms of violence, including economic abuse, coercive control, and neglect.

At the same time, sex-based expectations around caregiving persist, often placing older women in roles

where they continue to provide care while receiving little support themselves. These roles may extend into later life even in conditions of declining health or capability.

Migration-related factors further exacerbate vulnerability, including insecure legal status, language barriers, social isolation, and limited familiarity with legal and institutional systems. These factors intersect with ageism and sexism, reinforcing the marginalisation and invisibility of older women, and contributing to societal perceptions of older women as dependent or without value.

Perpetrators are most found within the immediate environment of the victim, particularly family members, including adult children, spouses, and extended relatives. Informal and formal caregivers may also perpetrate violence, particularly in situations of dependency. In some cases, institutional neglect or inadequate care practices can amount to systemic forms of violence.

### **Are there specific emerging or underreported forms of violence against older women, including those who have been migrants, or exploited in systems of prostitution and surrogacy; in rural or conflict areas; in medical, housing or financial settings?**

Older migrant and refugee women are exposed to a range of specific and often underreported forms of violence that are shaped by lifelong structural inequalities, societal expectations on the basis of sex, and evolving socio-economic and technological contexts.

A central and cross-cutting issue is economic dependency, often rooted in lifelong exclusion from formal labour markets and reinforced by stereotyped caregiving roles. Many older women have spent decades in unpaid or informal care work and therefore lack independent income, pensions, or access to assets. This dependency frequently places them in situations of domestic and familial violence, where perpetrators (often family members) exercise control over financial resources, housing, and access to services.

In this context, administrative violence has emerged as a significant but under-recognised form of harm. Increasing reliance on digital systems for access to pensions, healthcare, and legal documentation can effectively exclude older migrant women who face language barriers, lack of digital literacy, or do not possess required documentation. This exclusion can result in loss of entitlements, forced dependency on third parties, and heightened exposure to exploitation.

Particular attention must be paid to older women who have been exploited in systems of prostitution. They often reach older age without pensions or savings, and may experience ongoing stigma, social exclusion, and unaddressed trauma. Importantly, exploitation does not necessarily end with age. Evidence suggests that women exploited in prostitution face long-term health consequences, high exposure to violence, and severe mental health impacts, with studies indicating that a majority experience mental health disorders linked to sustained exploitation and marginalisation. In the absence of viable exit pathways or social protection, some women continue being exploited into older age, often under increasingly exploitative conditions, including heightened physical risks and intensified dependency.

At the same time, there is a growing shift towards digital forms of sexual exploitation, including pornography. Older women may be coerced or economically pressured into producing or participating in pornographic content. Digital platforms can thus perpetuate exploitation, exposing women to ongoing abuse, surveillance, and loss of control over their lives, consent and bodies.

As a result, older women exploited in prostitution represent a highly marginalised and largely invisible group, whose specific needs remain insufficiently recognised in both ageing and violence prevention frameworks.

Similarly, emerging concerns arise in relation to women exploited in the system of surrogacy. Although research remains limited, there is growing evidence that women exploited in surrogacy arrangements may face long-term physical and psychological consequences, including reproductive health complications,

trauma, and lack of follow-up care. In older age, these women may be left without adequate healthcare, social protection, or recognition of the harms experienced, rendering their situation largely invisible.

In medical and care settings, including hospitals, nursing homes, and hospice facilities, forms of violence include neglect, overmedication, lack of informed consent, and treatment that undermines dignity and autonomy. Older migrant women may face additional risks due to language barriers, and limited ability to advocate for themselves. Trauma histories, particularly among refugee women and survivors of forms of exploitation, are often not recognised or addressed within these settings.

In financial contexts, older women are increasingly targeted through digital scams, fraud, and coercive financial practices. These may include manipulation by family members or third parties, misuse of bank accounts, or pressure to transfer assets. Limited digital literacy and reliance on others for financial management heighten exposure to such abuse.

Older migrant and refugee women in rural or conflict-affected areas face compounded risks due to isolation, limited access to services, and weakened institutional protections. In such contexts, older women are often overlooked in humanitarian responses, despite continuing to carry caregiving responsibilities for grandchildren or other dependents. Displacement, loss of property, and breakdown of community networks further increase vulnerability to neglect, exploitation, and violence.

Across all these contexts, a pervasive and underlying issue is the social perception of older women as burdensome or no longer productive. This ageist and sexist stereotyping contribute to their marginalisation, reduces prioritisation in policy and service provision, and normalises neglect and abuse. It also reinforces their exclusion from decision-making processes, further entrenching invisibility and vulnerability.

### **What evidence and data exist on violence against older women in institutional settings such as nursing homes, long-term care, assisted living facilities, or hospitals?**

Global evidence on older people in institutional care shows that abuse is both widespread and underreported. The World Health Organization estimates that around 1 in 6 older persons experience some form of abuse, with institutional settings such as nursing homes, long-term care facilities, and hospitals being high-risk environments. Common forms of abuse include neglect, psychological abuse, physical abuse, overmedication, and violations of dignity and autonomy, while sexual abuse, though less frequently reported, is documented in multiple contexts. Staff shortages, time pressures, and inadequate training contribute to systemic risks, creating conditions in which neglect and inappropriate care practices can become normalised.

Evidence from European Union Member States confirms similar patterns. In Italy, studies in healthcare and long-term care environments reveal that abuse, particularly neglect, is often unrecognised by professionals themselves, and reporting procedures are poorly understood or inconsistently applied. Estimated prevalence of elder abuse ranges from 10-12.7%, yet official reporting rates are far lower, demonstrating substantial underreporting. Documented cases in Italian residential care facilities, including physical and psychological abuse, restraint, malnutrition and sexual abuse, illustrate the severity of institutional violence. Similarly, in Germany, a significant proportion of caregivers report witnessing abuse in institutional settings, with neglect, psychological abuse, and use of physical or chemical restraints among the most common forms. Structural factors such as staff shortages, insufficient training, and time constraints exacerbate the risks, while overmedication and inappropriate restraint practices raise concerns about dignity and bodily integrity.

Despite this evidence, most studies are not disaggregated by sex, making it difficult to determine the specific prevalence, forms, and impacts of institutional abuse on older women. While older women comprise the majority of institutionalised populations and are thus likely disproportionately affected, systematic data on the sexed dimension of abuse, particularly sexual and psychological violence, remains

extremely limited. Similarly, evidence is scarce on how institutional abuse intersects with disability, cognitive impairment, or other vulnerabilities.

Evidence specific to migrant and refugee older women is even more limited. Research indicates that these women face additional layers of vulnerability, including language barriers, social isolation, and reduced awareness of complaint mechanisms. Structural and systemic discrimination can exacerbate neglect and limit access to healthcare or protective services. These vulnerabilities are compounded by barriers in digital literacy, administrative hurdles, and insufficient culturally competent care. The absence of disaggregated data means that the experience of older migrant and refugee women in institutional care remains largely invisible, despite strong indications of heightened risk.

### **What mechanisms do States have in place to effectively monitor and report violence committed against older women, as well as their ability to access justice and redress mechanisms for abuse in these settings?**

At the European Union level, several frameworks and bodies exist to monitor and address violence against older persons, including older women, though none are fully dedicated to this population. The EU's Victims' Rights Directive establishes minimum standards for access to justice, support services, and protection for victims of crime, which can be applied to institutional abuse of older persons. The EU Directive on Violence against Women and Domestic Violence represents an important step forward, however it does not adequately address age as a factor shaping women's exposure to violence, nor does it sufficiently reflect the specific risks and barriers faced by older women, including those in situations of dependency or institutional care.

More broadly, the absence of a dedicated EU strategy on older persons contributes to the continued marginalisation of older women in policy frameworks. While initiatives such as the EU approach to intergenerational fairness make reference to older populations, they provide limited attention to women and only marginal reference to migrants. At the European Parliament level, structures such as the intergroup on "Europe for All Ages" exist but remain limited in size and visibility, with insufficient evidence of impact to date.

At the Member State level, mechanisms vary significantly in scope and effectiveness. Many EU countries have national human rights institutions responsible for monitoring the treatment of older persons, including in care settings. Regulatory inspections and licensing authorities in the health and social care sectors are tasked with ensuring compliance with standard of care, detecting neglect, and addressing complaints. In Italy, regional authorities conduct inspections of nursing homes and long-term care facilities. While reporting systems exist, staff often lack training in recognising abuse, and complaint procedures are underutilized. In Germany, care home supervision is regulated at the state level, including periodic inspections and mechanisms for reporting abuse. Independent ombuds offices in some states offer confidential complaint procedures, yet awareness among residents, especially migrant or non-German-speaking older women, remains limited.

Despite the presence of these mechanisms, significant gaps remain. Monitoring and reporting systems are fragmented, inconsistent, and often reactive rather than preventive. Many cases of abuse remain unreported due to dependency on caregivers, fear of retaliation, cognitive impairments, or social stigma. Data collected is rarely sex-disaggregated, making it difficult to understand the specific experiences of older women in institutional care. Furthermore, access to justice and redress mechanisms is often limited by bureaucratic hurdles, lack of awareness, and lengthy legal processes, leaving victims without timely protection or compensation.

For migrant and refugee older women, these gaps are compounded by language barriers, limited familiarity with legal systems, and fear of discrimination or deportation. Migrant older women may also face administrative exclusion, such as difficulties in proving residency or accessing social services, which

reduces their ability to seek redress. Furthermore, histories of exploitation, disability or trauma remain largely invisible within monitoring systems, increasing the risk of ongoing abuse in institutional settings.

While EU and national mechanisms provide a framework for monitoring and addressing violence in institutional settings, structural, cultural, and administrative barriers prevent older women, and particularly migrant and refugee older women, from fully accessing these protections.

Closing these gaps requires strengthened monitoring, accessible reporting channels, and systematic sex-and migration-status disaggregation in data collection, coupled with proactive measures to prevent abuse before it occurs.

## B. Gaps and Barriers

### **How do existing national legal frameworks address violence against older women? Are there any laws and policies that specifically address the risks they face and their needs?**

Across European Union Member States, violence against older women is primarily addressed through general legal frameworks on violence against women, domestic violence, and elder abuse, rather than through laws specifically tailored to older women. While these frameworks provide an important foundation of protection, they often fail to capture the intersection of age and sex, leaving significant gaps in addressing the specific risks faced by older women.

At the core of national systems are violence against women and domestic violence laws, many of which have been strengthened following the ratification of the Council of Europe Convention on preventing and combating violence against women and domestic violence (Istanbul Convention). These frameworks typically criminalise physical, psychological, sexual, and economic violence and provide for protective measures such as restraining orders and access to support services. In principle, they apply to women of all ages. However, in practice, they are largely designed with younger or mid-life women in mind, and often fail to address situations more common in older age, such as dependency, institutionalisation, or long-term economic abuse.

In Spain, for example, the legal framework on violence against women is among the most developed in Europe, with comprehensive legislation, specialised courts, and integrated support services. However, it has historically focused on intimate partner violence within younger populations, and only more recently has there been growing recognition of violence against older women, particularly in relation to care dependency and family-based abuse.

In France, the legal framework similarly provides strong protections against domestic violence and has introduced measures to address economic violence and coercive control. Nonetheless, older women are not explicitly identified as distinct groups within these policies, and challenges remain in recognising abuse in institutional and caregiving contexts, where violence may take the form of neglect, overmedication, or deprivation of autonomy.

In the Netherlands, legal protections exist within both domestic violence frameworks and elder abuse policies. While this represents a more integrated approach, implementation challenges persist, particularly in identifying and reporting abuse among older persons, and in addressing sex-specific patterns of violence affecting older women.

As previously noted, in Germany, protections are embedded in social and long-term care law, alongside inspection systems for care institutions, but these primarily address quality of care and neglect, rather than explicitly framing abuse as violence against women. Similarly, in Italy, criminal law provisions and regulatory oversight mechanisms exist, yet older women are not specifically targeted within national strategies, and issues such as economic exploitation and housing insecurity remain insufficiently

addressed within frameworks on violence against women.

Across these contexts, a key gap lies in the limited recognition of economic and structural forms of violence, which disproportionately affect older women. These include pension inequality, financial dependency, barriers to property and inheritance rights, and exploitation within family or informal care arrangements. While some legal remedies exist, they are rarely framed as part of a broader understanding of violence against women across the life course.

For migrant and refugee older women, legal protection is further complicated by residency status, administrative barriers, discrimination, and cross-border legal issues, particularly in relation to property and inheritance rights. Many women face obstacles in claiming assets in their countries of origin due to discriminatory laws or social norms, while also encountering barriers to accessing justice and social protection in host countries.

Overall, while national legal frameworks across the EU provide formal protections against violence, they remain fragmented and insufficiently adapted to the realities of older women, particularly those facing intersecting forms of discrimination. The absence of explicit recognition of older women within policies addressing violence against women, combined with limited attention to economic, institutional, and transnational dimensions of abuse, results in significant gaps in prevention, protection, and access to justice.