

Submission by the Australian Nursing and Midwifery Federation

Royal Commission on Antisemitism and Social Cohesion

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**Australian
Nursing &
Midwifery
Federation**



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Introduction

1. The Australian Nursing and Midwifery Federation (ANMF) is Australia's largest national union and professional nursing and midwifery organisation. In collaboration with the ANMF's eight state and territory branches, we represent the professional, industrial and political interests of more than 356,000 nurses, midwives and care-workers across the country.
2. Our members work in the public and private health, aged care and disability sectors across a wide variety of urban, rural and remote locations. We work with them to improve their ability to deliver safe and best practice care in each and every one of these settings, fulfil their professional goals and achieve a healthy work/life balance.
3. Our strong and growing membership and integrated role as both a trade union and professional organisation provides us with a complete understanding of all aspects of the nursing and midwifery professions and see us uniquely placed to defend and advance our professions.
4. Through our work with members, we aim to strengthen the contribution of nursing and midwifery to improving Australia's health and aged care systems, and the health of our national and global communities.
5. The ANMF thanks the Royal Commission on Antisemitism and Social Cohesion (Royal Commission) for the opportunity to provide a submission.



Background

6. This Royal Commission has been called in the most tragic of circumstances. On 14 December 2025, a mass shooting took place on at Bondi Beach in which 15 people lost their lives and 40 more were wounded. These numbers do not include the attackers.
7. The target of the attack was the Chanukah by the Sea event, a Jewish cultural and religious event attended by Jewish Australians. This ought to have been a safe event for attendees.
8. The ANMF reiterates its statement of 15 December 2025.¹ We continue to express our deepest sorrow to those affected by this tragedy, condemn acts of extreme violence, and stand in solidarity with the Jewish Australian community.
9. Despite the courage, dedication, professionalism and compassion of first responders, including nurses and other healthcare professionals who treated the wounded in their time of need, the impacts on survivors and the broader community cannot be abated.

Terms of Reference

10. The Letters Patent from the Governor-General to the Honourable Virginia Bell AC outline the terms of reference for the Royal Commission.² The ANMF is willing to assist the Royal Commission in its inquiries aimed at tackling antisemitism and strengthening social cohesion in Australia. We note however that many of the terms of reference as they relate to intelligence agencies and law enforcement sit outside of our areas of expertise.

New South Wales Branch

11. The NSW Branch of the ANMF, known as the NSW Nurses & Midwives' Association, has filed a separate submission to the Royal Commission.
12. The NSW Branch experience is informed by the 2025 *Standing Together Against Racism*

¹ ANMF, 'ANMF condemns Bondi Beach mass shootings' (Press Release, 15 December 2025).

² Commonwealth, Royal Commission, Letters Patent (2025).



Report, based on a survey of member experiences of racism within their workplaces.³ While this Report predated the events at Bondi Beach and examines racism as a broader phenomenon, rather than antisemitism specifically, the contents of the Report highlight the prevalence of racial discrimination experienced by healthcare workers.

13. The positions and recommendations of the submission of the NSW Branch to this Royal Commission are wholly supported by the remaining branches of the ANMF and the Federal Office.
14. The recommendations from the NSW Branch submission are restated at the end of this submission.

Antisemitism and Racism in Australian Healthcare

15. The ANMF is concerned about the rise of antisemitism in Australia, which culminated in, but is not limited to, the Bondi Beach attack. We hold particular concern for nurses, midwives, carers, and other healthcare professionals who may experience the negative impacts of antisemitism and other forms of discrimination in their workplaces.
16. The ANMF is aware that there are studies and that we can see that be of longer-term benefit to conduct similar studies in Australia to understand how antisemitism impacts healthcare settings from both consumer and worker perspectives. We have sought to compile the currently available recent academic literature on antisemitism in nursing, midwifery and healthcare settings, which can be summarised as follows:
 - In 2024, a United States based study was conducted to estimate the prevalence and awareness of antisemitism within the medical community. The findings of the study suggest that the likelihood of a Jewish healthcare professional experiencing antisemitism decreases when they state that their colleagues and administration can

³ ANMF, *Standing together against racism: Exploring NSW nurse, midwife, and AiN/care worker experiences with racism at work* (2025).



identify antisemitism.⁴ In other words, the workplace environment, along with colleagues' and administrators' ability to recognise and address antisemitism, will impact Jewish professionals' experience in healthcare settings.

- A 2024 dissertation on the experiences of Orthodox Jewish students enrolled in a pre-licensure nursing program in the United States identified that students practicing Judaism while on campus created a separation between those students and the rest of their cohort.⁵ Students reporting feeling excluded by their peers and not adequately supported by their institution.
- In 2024, the Alliance Against Antisemitism in Healthcare provided a submission to the Commission of Inquiry into the *Antisemitism at Australian Universities Bill 2024* (Cth), which included a survey of 265 Jewish healthcare students and professionals.⁶ Its findings included:
 - Almost half of all respondents have felt the need to hide their Jewish identity;
 - Almost two-thirds are aware of someone else feeling the need to do the same;
 - One-third have experienced antisemitism in the workplace.

This survey is cited in both:

- The Rambam Maimonides Medical Journal;⁷ and

⁴ Alexandra Chana Fishman and Charles Auerbach, 'Antisemitism in American Healthcare: The Role of Workplace Environment' (2025) 65 *Journal of Religion and Health* 502.

⁵ Shulamit Chana Brusnwick, *Experiences of Orthodox Jewish nursing students enrolled in a pre-licensure nursing program* (D Phil Dissertation, Capella University, 2024) 124.

⁶ Alliance Against Antisemitism in Healthcare, Commission of Inquiry into *Antisemitism at Australian Universities Bill 2024*, Submission 632.

⁷ Michael Gordon et al, 'Antisemitism in Medicine: An International Perspective' (2025) 16 *Rambam Maimonides Medical Journal* 1.



- The Australian Health Review.⁸

17. The ANMF notes the limited amount of academic literature around the prevalence of antisemitism in Australian healthcare settings, particularly the extent to which those experiences come from colleagues, patients or elsewhere. We are of the view that the task of tackling antisemitism and other forms of racial and religious prejudice in healthcare settings would be assisted by an expansion of long-term study in this area.

18. While this Royal Commission is tasked with identifying ‘the nature and prevalence of antisemitism in institutions and society, and examining its key drivers in Australia,’⁹ it may be an almost impossible task for the Royal Commission to examine antisemitism at a granular level within particular workplaces and settings. The challenge of this task is compounded by the requirement that the Royal Commission report its findings to the Governor General by no later than 14 December 2026.¹⁰

19. The ANMF recommends that such studies should be funded by the Federal Government and undertaken by Australian tertiary institutions that extend beyond the limited timeframe of the Royal Commission, the findings of which should inform policy and legislative responses going forward.

Human Rights Framework

20. The right to live free from racial and religious prejudice is variously enshrined in Australia’s commitments to international human rights standards, but specifically captured by the *Racial Discrimination Act 1977* (Cth). While an essential component of Australia’s commitment to eliminating racial discrimination (broadly defined, and not limited to antisemitism), this legislation represents a baseline for human rights protections.

21. The reality is that Australia lacks a cohesive federal human rights instrument in the form of

⁸ Naomi T. Katz et al, ‘Isn’t it time for health professionals to shift their focus from preaching politics to promoting peace?’ (2024) 48 *Australian Health Review* 332.

⁹ Commonwealth, above n 1, 2.

¹⁰ Ibid 6.



a Human Rights Act. Such a framework would help address the inadequacy of existing human rights protections in Australia, streamline rights education and improve government policy and accountability. Moreover, the lack of such a framework sets Australia apart from other modern democracies, which in turn undermines standing internationally.

22. In 2024, the Federal Parliamentary Joint Committee on Human Rights published its findings and recommendations following an inquiry into Australia's human rights framework. That report recommended that Australia should legislate a Human Rights Act.¹¹ This recommendation has been echoed by the Australian Human Rights Commission in its *National Anti-Racism Framework*.¹²
23. The rise of antisemitism in Australia represents a failure of Australia to adequately protect the human rights of Jewish people in this country. It is a symptom of our existing human rights framework not being fit for purpose in the 21st century, further eroding social cohesion. The ANMF therefore recommends that the Federal Parliament legislate a Human Rights Act as a matter of urgency.

Recommendations

24. To reiterate, the NSW Branch submission made the following recommendations:
 - A whole-of-system commitment to intentional building of social cohesion, embedding anti-racist practices and positive workplace cultures must be prioritised within health and aged care workplaces.
 - Healthcare services must be subject to urgent review of cultural capability and anti-racist practices. A zero-tolerance policy to racism and hate speech must be enforced and anti-racist practices and education mandated.

¹¹ Parliamentary Joint Committee on Human Rights, Parliament of Australia, *Inquiry into Australia's Human Rights Framework* (2024) xxi.

¹² Australian Human Rights Commission, *The National Anti-Racism Framework: A roadmap to eliminating racism in Australia* (2024) 16.



- Adopting clear definitions of antisemitism, implementing training and education for workers including encouraging proactive allyship, and good cultural safety stewardship in hospitals should be a top priority for healthcare services.
- Australian Human Rights Commission *National Anti-Racism Framework*, UTS *Gari Yala 1 and 2* reports and the NSWNMA *Standing Together Against Racism* report and *Occupational Violence: has no place in my workplace* report recommendations must be given due regard by government and employers, to build social cohesion, safer communities and safer workplaces.
- Long term bipartisan agreement to migration, anti-racism and social cohesion is called for, using the evidence base and framework contained within the *National Anti-Racism Framework*.
- Legislated Positive Duty to mitigate against racism in workplaces.
- Federal Government strategy and bipartisan commitment is required to ensure the NSW Anti-Racism Collaborative (health and aged care workplaces) is replicated across other jurisdictions.
- Aboriginal and Torres Strait Islander, and other racially marginalised communities must be afforded meaningful engagement and included in solution-design.

25. Additional recommendations from the ANMF:

- That rigorous academic studies be undertaken to examine the prevalence of antisemitism and other forms of discrimination in healthcare settings.
- That the Federal Parliament legislate a Human Rights Act.