

- **Sheet 1** Legal and social interventions in elder abuse – counselling phone lines

- **Sheet 2**
 - Advantages of emergency and counselling telephones:
 - Low threshold and anonymity
 - Easy access and manageability
 - Bandwidth from "mere" listening to crisis intervention
 - Requirements:
 - Uniform access number, no possibility of confusion
 - High level of awareness through public relations
 - reachability
 - Greater precision in intervention through specialization
 - Establishment of an intervention chain

- **Sheet 3** Experiences of the advice phone from Pro Senectute
 - Two thirds of the calls are from older people (65+), otherwise from relatives, neighbours, employees of institutions...
 - 9 out of 10 callers are female
 - Variety of topics addressed, not just violent phenomena
 - The reason for the calls: often the need to talk - often takes several hours
 - where is truth? A hotline cannot and does not want to carry out "investigations".
 - Frequently unrealistic ideas about the legal situation and real possibilities for intervention

- **Sheet 4** Most important counselling topic: family relationships
 - Threats, exploitation, deprivation of liberty, physical violence
 - Inviolability of privacy: grievances remain undetected for a long time - afraid to reveal themselves to outsiders
 - The problem of complaining people who then do not follow the suggestions of the counselling or do not attend the mediation appointment
 - Often a long history: unsuccessful involvement of the police, courts, lawyers: reports are often put aside by public prosecutors
 - Remarkable accumulation of cases from rural areas

- **Sheet 5** Typical scenarios in the family
 - Nursing stress and aggression phenomena, especially caused by dementia
 - Marital conflicts, usually initiated by the husband, often exacerbated by alcohol abuse
 - Male demands for control lead wives to helplessness and despair rather than rebellion
 - Use and "abuse" of care allowance, but probably also numerous misinterpretations

- **Sheet 6** neighbourhood conflicts
 - Intolerable behaviour or "neglect" should be "turned off".
 - Desire usually remains illusory because there is no legal basis or psychiatric disorder that requires placement
 - Some degree of harassment has to be tolerated
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- **Sheet 7** Adult representation (formerly guardianship)
 - Complaint that some adult representatives do not live up to their responsibilities
 - Restrictive money management
 - Disinterest in clients
 - Institutions are pushing for an adult representative to be appointed
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- **Sheet 8** Relatives complain about institutions (and vice versa)
 - The quality of the relationship between the professionals and the relatives of the elderly cared for is impaired
 - Allegedly poor quality of care, criticism of medical measures (mobilization, catheter placement) in the hospital
 - Divergent views on the organization of everyday life in the home, especially in homes with a residential character
 - Nursing home management does not feel responsible for problems in public space
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- **Sheet 9** Calls from professionals
 - "Official" complaints failed
 - Fear of repression, of defamation lawsuits (usually unjustified), of job loss
 - advantage of anonymity
 - Also calls from nursing homes' management, but almost only because of disputes with relatives, they wish to inform the public
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- **Sheet 10** Findings from the discussions of the advisory telephone
 - The limits of telephone counselling are reached relatively quickly
 - Afterwards, outreach advice and help would be necessary
 - Often unrealistic ideas about legal intervention options