

Neglect of the elderly in care increases in Germany

By Werner Albrecht
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A book published last year, *Enough is enough! elderly people also have rights*, presents an unsparing picture of the abuses prevalent in the elderly care system in Germany. Authors Klaus Füssek and Gottlob Schober protest the growing tendency to neglect and isolate those in care caused by the inhumane practice of “counting every minute” and the lack of qualified personnel, which makes it impossible to provide patients with vitally necessary emotional support.

In addition, the authors note that not only those in care, but also their relatives who help out day after day, and around the clock, receive no recognition. Politicians allow the banks and pharmaceutical industry to rake in billions, but for people requiring care and the sick, they offer only a “minuscule care reform.”

The reform adopted by the previous right-wing Christian Democratic Union/Christian Social Union-Free Democratic Party coalition at the end of 2012 proposed to incorporate restricted ability in old age, such as dementia or mental health problems, alongside physical impairments in the care system for the first time.

From January 2013, those affected were to receive the “generous” sum of €120 in care funding per month. This equates to a budget of just €4 per day for each patient’s care. In the more intensive care levels there is a small top-up of up to €85 per month. This only applies, however, to people with “severely limited capability in old age.”—i.e., principally those suffering from dementia.

To finance this reform, the government is planning to increase care charges by 0.5 percent. As the financial daily *Handelsblatt* reported, this met with strong opposition from business interests. “It is not very helpful for employees or businesses when politicians explicitly rule out tax rises while at the same time permanently increasing the burden of charges for social security,” President of the employers’ association, Dieter Hundt, told *Handelsblatt* prior to the finalisation of the current

government’s coalition agreement.

A unique insight was provided by the head of a care home who explained with astonishing openness that due to budgetary considerations, he always sought to run a home in which at least half of all residents were in care level III. According to him, the ideal care resident is immobile, at least in a wheelchair, but preferably confined to bed and fed through a tube, bringing in €3,500 per month. “In that case he only needs to be looked in on every two hours.” An extreme contrast to this would be an extremely mobile and confused resident on care level I, who requires much more care and brings in much less money.

The Dutch care organisation Vierstroom, based in the cheese-producing town Gouda, has worked out another type of pilot project to exploit free labour. Relatives of care residents are not only to be visitors, but to be actively encouraged to participate in care. The organisation intends only to take elderly people into care when their relatives commit to make themselves available for four hours of care every month. If they don’t wish to or cannot give up time, they must pay extra towards the cost of care.

Already in 2008, Füssek and Schober exposed the terrible conditions in the care system in Germany with their bestseller *The care mafia network*. Five years later, they now confirm that almost nothing has changed. People who are bed-ridden continue to wear nappies, since nobody has enough time to provide them with a bed-pan. Many are still pacified with medication or confined to their beds by restraints. Carers continue to be overburdened, guaranteeing future human tragedies.

The authors report on a telephone conversation with one desperate carer who said that she worked every night under prison-like conditions. She is responsible for 64 residents, 34 of whom are in intensive care. During her period of service, seven people have died. She considers

that it is part of her job to accompany dying people on their last journey, to hold their hand and, when necessary, ease their pain, speak to them and stand by the relatives. But this had not been possible in any of the seven cases, because there was simply no time.

In home care, violence is sometimes used against elderly and sick people. Experts at a conference in Berlin drew attention to criminal offences, with an increasing number of relatives turning to violence due to an increasing sense of being overwhelmed and worn out.

Acts of violence against the elderly and people suffering from dementia in the home, which often take place within the family, rarely come to public attention. Such an “outburst” by a relative who has been caring for a family member for a long time is often connected with severe psychological stress, the authors note.

It is to be expected that this criminality will increase due to the mounting impoverishment of future generations of pensioners. Professional care will increasingly be unaffordable for many. Social policymakers are aware of this development, but they are doing nothing to remedy it.

A “catastrophe for social policy” is being revealed, according to the health minister for the state of North-Rhein Westphalia Barbara Steffen (Green Party), who spoke to the *Westdeutsche Allgemeine Zeitung*. A large proportion of the current population between 40 and 60 cannot be cared for adequately within the present system, due to rising demand. In NRW, those requiring care will rise from 550,000 to 700,000 by 2030, she stated.

Ulrich Schneider, spokesman for the welfare association Paritätische Wohlfahrtsverband, considers current developments to be merely a warning of future conditions, and believes that “by the middle of the next decade, we will face a tide of impoverished pensioners.” The long-term unemployed and those who for various reasons had to remain outside employment would only be able to claim a small pension along with 7 million low-wage workers.

Otto Wulff, the chairman of the pensioners’ union, explained that many pensioners could not afford additional insurance. He demanded that when someone had worked hard for their whole life and paid contributions, they should be able to obtain the necessities of life without the need to rely on social welfare benefits. The advisory association for pensioners also complained that due to legal provisions and the trend towards private care, many pensioners were already living below the

poverty line.

On the one hand, the reason why many people in Germany have no private care is because of the lack of resources they have to pay for it. As a consequence of the financial crisis, they also mistrust the banks and insurance companies who profit from their contributions, while barely guaranteeing enough for a comfortable retirement. According to a recent study presented by Postbank, one in six pensioners fear that “they will not be able to provide for the necessities of life alone, or that they will be impoverished.”

The institute reported that almost one in four of those under 30 would be prepared to leave Germany due to the threat of poverty. In order to receive a private pension of €1,000 per month at the age of 67, a 16-year-old would have to save €50 per month, a 25-year-old €90 and a 34-year-old €170.

In their book, Fussek and Schober demand a humane and dignified standard of care as a basic right. The current conditions in many homes for the elderly and care homes are incompatible with the rights formulated in the German constitution of the “inviolable dignity of the person,” and the right to “life and physical integrity.”

They call for an on-going review of the skills of state carers, equal treatment for patients with dementia and others in care, a culture in which grievances can be raised, and a national body for the prevention of torture and defence of transparency in the “jungle of care.”

The current grand coalition of the CDU-CSU and Social Democratic Party have made clear they will continue in the tradition of the predecessor government and thereby intensify the crisis facing the elderly and sick in Germany.

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