

PEER COUNSELING FOR EARLY STAGES OF DEMENTIA

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Why Peer Counseling?

- To get in touch with others living with a stigmatizing condition as memory problems or dementia,
- To exchange related experiences – common basis that a non-affected person will not achieve
- To motivate to get a diagnose and and learn to be open about the changes in his or her life
- Because there is little to none post-diagnostic support in Austria

Roots/Origin

- Anonymous Alcoholics were among the first to offer peer counseling
- Independent Living Movement in USA/Canada
- Peer Counseling \neq Peer Support
- Supported Self Help Groups
- The EWG/PWD of Alzheimer Europe

Setup – How does it work?

- Call for an appointment – be very clear that this is not an offer for care-partners/supporters
- 2 times a month, in the office or at home or via telephone/skype
- The peer counselor acts with a supporter during the counseling session to provide specific information if needed or talk separately to family members
- Confidentiality is vital
- Not acting on someone's behalf

Empowerment

- To exchange strategies, coping skills and attitudes
- To learn about the rights of a person with dementia/disability
- To learn to self-advocate on his/her behalf – not being a „sufferer“ or „victim“ of dementia
- To change the perspective of memory problems and dementia from negativity/losses to a more resource-based approach

Case Studies

- 16 dates were offered January to October 2019
- 2 visiting peercounseling, 5 in the office, 1 telephone, 1 in private, 1 at the Alzheimer Café
- 3 counselees without support, 8 with support
- 1 appointment was cancelled

Challenges

- Supporter/family members talked too much
- Couselee with speech-impairment
- Couselee spoke english rather than german because of the progression
- Lack of interest by institutions to offer peercounseling
- Volunteers can only act like forerunners
- No funding for evaluation

Findings

- Empowerment concepts in memory problems and dementia in Austria lack so far that decision making, disease management and control over their own lives is too often taken over by relatives, supporters and health-care personnel
- Human rights based approach
- Define dementia as a disability and therefore apply the right for assistance
- **No funding – no future**

Contact



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