Terminology

Vulnerable adult - a person eighteen years of age or older who has a physical or mental condition which substantially impairs the person from adequately providing for his or her own care or protection. This includes a person who is impaired in the ability to adequately provide for the person's own care or protection because of the infirmities of aging including, but not limited to, organic brain damage, advanced age, and physical, mental, or emotional dysfunction. A resident of a facility is a vulnerable adult.

Psychological abuse - deliberately subjecting a vulnerable adult to threats or harassment or other forms of intimidating behavior causing fear, humiliation, degradation, agitation, confusion, or other forms of serious emotional distress.

Physical abuse - intentionally inflicting or allowing physical injury to be inflicted on a vulnerable adult by an act or failure to act. Physical abuse includes, but is not limited to, slapping, hitting, kicking, biting, choking, pinching, burning, actual or attempted sexual battery, use of medication outside the standards of reasonable medical practice for the purpose of controlling behavior, and unreasonable confinement. Physical abuse also includes the use of a restrictive or physically intrusive procedure to control behavior for the purpose of punishment except that a therapeutic procedure prescribed by a licensed physician or other qualified professional or that is part of a written plan of care by a licensed physician or other qualified professional is not considered physical abuse. Physical abuse does not include altercations or acts of assault between vulnerable adults.

Neglect - the failure or omission of a caregiver to provide the care, goods, or services necessary to maintain the health or safety of a vulnerable adult including, but not limited to, food, clothing, medicine, shelter, supervision, and medical services. Neglect may be repeated conduct or a single incident which has produced or can be proven to result in serious physical or psychological harm or substantial risk of death. Noncompliance with regulatory standards alone does not constitute neglect. Neglect includes the inability of a vulnerable adult, in the absence of a caretaker, to provide for his or her own health or safety which produces or could reasonably be expected to produce serious physical or psychological harm or substantial risk of death.

Exploitation - (a) causing or requiring a vulnerable adult to engage in activity or labor which is improper, unlawful, or against the reasonable and rational wishes of the vulnerable adult. Exploitation does not include requiring a vulnerable adult to participate in an activity or labor which is a part of a written plan of care or which is prescribed or authorized by a licensed physician attending the patient (b) an improper, unlawful, or unauthorized use of the funds, assets, property, power of attorney, guardianship, or conservatorship of a vulnerable adult by a person for the profit or advantage of that person or another person (c) causing a vulnerable adult to purchase goods or services for the profit or advantage of the seller or another person through: (i) undue influence, (ii) harassment, (iii) duress, (iv) force, (v) coercion, or (vi) swindling by overreaching, cheating, or defrauding the vulnerable adult through cunning arts or devices that delude the vulnerable adult and cause him to lose money or other property.
Interview - a meeting at which information is obtained from a person
INTERVIEWING STRATEGIES: COMMUNICATION ISSUES

Many victims of elder abuse are healthy and active and do not have significant disabilities or health issues. Functional abilities and limitations can affect interviews and investigations. Consider the following strategies if communication is an issue during an elder abuse investigation.

Ask the person if he or she can understand what the officers are saying and if there is another form of communication (i.e., writing answers, communication boards, computers, blinking) that would make it easier for them.

- Ask if an interpreter is needed and what type.
- In some cases, using visual aids to communicate with the older victim may be helpful.
- Face the older adult so the older adult can observe facial expressions and lip and hand movements.
- Do not assume that because the older adult has hearing impairments that the older adult can read lips.
- Does the older adult know ASL? Be sure to use a certified interpreter if one is available. In order to obtain accurate information, officers should never use the caregiver, friends or family members as interpreters.

Written Materials

- Ask if reading glasses or other adaptive equipment would make it easier for the victim to see any written material.
- Ensure that what is written or drawn is in large print or enlarged image.
- Move what is written or drawn into a position where the older adult can see the material. Some degenerative vision impairments result in being able to see in the peripheral but not what is straight ahead. These vision impairments are also a reason some older adults may not look directly at officers.
- Offer to fill out forms and read aloud written information for victims. Explain what printed materials you are providing and make those materials available—as is legally required, with few exceptions, by ADA and Section 504—in alternative format, including large print, audiotape, computer diskette, and Braille, on request.
INTERVIEWING CONSIDERATIONS: POTENTIAL ELDER ABUSE VICTIMS

When possible, considering the following:

- Speak slowly and clearly, but avoid shouting and over-enunciating. Attempt to minimize distractions.

- Ask questions one at a time and do not rush the older adult to answer the questions. Give the older victim time to organize and collect his/her thoughts. Be patient in waiting for responses. Realize that silence does not necessarily mean s/he does not understand the question.

- Use plain language, avoid jargon and use short sentences. Be careful not to use a condescending tone.

- Be honest and forthcoming to the victim about confidentiality and mandatory reporting requirements to agencies.

- Avoid interviewing a victim with family or others present.

- If the victim is living in a facility, law enforcement should interview the victim away from the staff and other residents.

- Determine when is the best time of day for the older adult to conduct an interview and any follow-up interviews. Older victims may be taking medications or need to eat or sleep at certain times of the day.

- Plan for and be available for the necessary amount of time. Some interviews with older individuals take longer to complete. Officers may need to conduct more than one interview to obtain the necessary information.

- Consider glare, noise and comfort so both of you are able to concentrate.

- Be sure the victim has any needed items, such as glasses, hearing aids or communication board, to conduct the interview.

- If using printed materials, or if the victim needs to sign any forms, consider having documents in large type.

- Convey the message to the older victim that the abusers are responsible for their own behavior. The offender’s use of abuse is unacceptable and not justified.

- Acknowledge the older victim’s fears, anxiety, anger, or ambivalence; validate the older adult’s feelings. Pay attention to your own body language and reactions, taking care to not appear to blame, accuse, or disbelieve the victim.

- Watch the victim’s body language. Reassure the older victim that cooperation is important and appreciated. The victim is not responsible for the prosecution of the suspect - that it is the responsibility of officers and prosecutors.
SAMPLE QUESTIONS: VICTIM

Physical Abuse

- What happened?
- How did you receive the injury?
- When did you receive the injury? For how long have you had the injury?
- Do you have any injuries that are not visible?
- How would you describe the suspect’s temperament?
- Who was here?
- Who has access to your home?
- Are you taking any medications?
- What did the suspect say during the altercation?
- Has this ever happened before?
- What did you think was going to happen? Why?

Neglect

- How do you get to your appointments?
- How do you get to the store for groceries?
- What medications do you take? Does someone give you the medications when you need to take them? Who helps you sort out what to take and when?
- How do you get your prescriptions?
- Who handles your finances?
- Do you have any friends or family who live nearby? How often do you see them?
- What did you eat and drink today?
- Does anyone help you at home? If so, who?
- Do you pay that person to help you? How much? How often?
- Do you have an agreement with him that he will inherit any part of your estate? Is his name on the title to your house, car, or other property?
- Do you have any advanced directives?
- Do you have a will? When was it written?
Stalking

- Do you know who has been (following you, sending messages, etc.)?
- Have you had a relationship with this person? How well do you know her/him?
- Does this individual have access to weapons?
- How have these incidents affected you? How do they make you feel?
- Are you afraid?
- Have there been any threats?
- How often has this been happening? Have the incidents increased?
- Do you have any dates written down?
- Have you told others about this?
- Has anyone else seen these incidents?
- Has the suspect contacted anyone close to you to get information about you?
- Have you changed your routine because of the incidents?
- Have you moved, changed phone numbers, bought pepper spray, etc.?
- Do you have the letters, gifts, e-mails, etc.?
- Do you have a plan for your safety?

Sexual Abuse

- What happened?
- Did you want to participate in these sexual activities?
- Do you know the person who did this to you?
- Has this happened before?
- Where are you hurt?
- Did he or she say anything before, during, or after the incident?
- Did the suspect make any threats regarding this incident?
- Were there any witnesses?
- Determine the victim's capacity and ability to consent to sexual activity.
- Have you had a medical exam/SANE exam? Would you like to go to the hospital?
- Do you want a sexual assault victim advocate?
- Is there anyone you would like us to contact for you?
- Do you have a guardian?
Financial Exploitation

- How do you decide how to spend your money? For giving gifts? To whom have you previously given items of value? On what occasions?
- Have you signed anything you did not understand? Details?
- What is your educational background? Any jobs or professional positions?
- Do you have a will? Any recent changes to it? Why? Were there changes to the people who are to receive bequests? The amount they were to receive? Any new beneficiaries? What has your relationship been to the people in the first will? What changes have there been?
- Have you always managed your finances? If not, who did? When did you begin managing your financial affairs? Do you find it difficult? Has anyone offered to help you?
- Do you live on a fixed budget? Do you have concerns about having enough money to last for your lifetime? To provide inheritances? For whom? What advanced planning have you done? Who assisted you with those plans? Are there written documents? Where are they?
- Have you changed your plans? If so, in what way? When? Why? Did someone suggest that you make those changes? Did you consult your attorney/financial advisor or a professional in making the changes? Was it the same professional who helped with the original documents? If not, is there a reason you went to someone else? Who suggested the new professional to help you? Did someone drive you to the meeting where the new documents were prepared? Who witnessed the signing? Who was present during the meetings with the professional? Who paid for the professional’s services? Did anyone explain what the changes meant? What do you understand them to mean?
- Where do you bank? How long have you banked there? Have there been any changes to your bank accounts? Any names added to the account? Any new accounts opened? Where are monthly statements sent? Have you checked the statements recently? How much money is in your checking account? Savings? IRAs? Other accounts? If there have been changes, who selected the new bank? Did anyone drive you to the bank to make the changes?
- Have you executed a power of attorney? Who have you designated to be your decision maker? Did you have another POA? Who was the decision maker in the earlier POA? Why did you make the change? Who suggested it? Who drafted it?
SAMPLE QUESTIONS: NEIGHBORS, WITNESSES, AND OTHERS

Physical Abuse

Keep in mind the tips discussed during the interviewing segment regarding disabilities, cultural and generational values.

- How well do you know the victim, suspect, or both?
- How would you describe the relationship between the victim and the suspect?
- Have you witnessed any physical abuse or injuries?
- Who comes to the victim’s house?
- Is the victim receiving any services?

Neglect

- Who does the victim live with?
- What do you know about the victim’s health? Finances?
- Who are the victim’s children? Close friends? Visitors?
- Who do you see visiting the victim, if anyone? How often?
- Do you ever see the victim leave the home? When was the last time?
- Who is the victim’s caregiver, if anyone? Do you ever talk to this person about concern for the victim’s well-being? What was his/her response? Ever see him/her leave the house with the victim? How often?
- Have you ever gone to the victim’s home? What did you observe?
- Ever call 911? Ever try to help in any other way?
- Does the victim receive any services from any agencies?

Stalking

- Have you noticed any changes in the victim’s behavior or habits?
- Have you noticed anything unusual occurring at the victim’s house?
- Do you know who is doing this to the older adult?
- What has the relationship history been between the victim and suspect?

Financial Exploitation

- Has the victim suffered a personal, financial, or other loss?
- Is the victim ill? Have there been any recent changes in health status?
• Is the victim depressed? Is there any history of mental illness, including depression?
• Is the victim isolated? In what ways? By whom?
• What is the relationship between victim and suspect? Has it changed over time?
• How does each party characterize the relationship?
• Is the victim “different” since the suspect entered the victim's life?
• Does the victim engage in the same activities as before the suspect entered the relationship?
• Is the victim seeing the same visitors and family as previously?
• What relationship did the victim previously have with family members?
• Have you noticed any changes in the victim's behavior?
• What did you see?
• What caused you to be concerned and to report this incident?
• How did you get this information?
• Did you witness any of the reported incidents?
• Are you worried that providing information may affect (employment, friendship, safety)?
• Is there anyone else who has regular contact with the victim with whom we should talk with?
Tips on Using Focused, Open-Ended Questions

Too often when reconstructing a crime, the questions focus on details of where, when, who, what, and how. Open-ended questions may present challenges for people with cognitive limitations or dementia, but it is even harder when they are asked to pinpoint details when there are many to sort through. Organizing what they remember into these categories is extremely difficult. When it comes to "reconstructing the circumstances" of the crime, victims with cognitive limitations, including dementia, may have trouble sequencing events . . . knowing the exact hour and day something happened . . . or answering complex questions about the crime. Use focused open-ended questions as a strategy to gather information from these victims without leading them.

- Establish the victim’s daily routine without asking about the crime. This will help sequence and time the events so you can then ask whether details of a crime happened before or after a specific daily event (such as getting up, showering, eating breakfast, catching the bus to go to work, watching TV, and so forth). Check exact times and sequence with a trusted friend, relative, caregiver, or facility staff person.

- Construct each subsequent question building on what the victim has already told you. Since victims with cognitive disabilities can be easily led, it is important not to unintentionally introduce new words or concepts in questioning. Use the victim’s exact words and phrases. If she tells you that, after she woke up, she “combed my teeth,” make sure you use that exact phrase when building on the victim’s information to construct your questions.

- Another way to simplify a conversation is to switch from “retrieval” questions to “recognition” questions. As individuals age, they may have difficulty remembering specific words for an object or occurrence (aphasia), and some individuals with cognitive disabilities may have trouble finding the words to describe what they do.

- In these instances, officers can ask the older adult victim if she can draw or show the object or what happened, or officers can ask process of elimination questions. If officers believe they know the word the older adult is looking for, officers should not say that particular word.

- Officers should ask more specific questions, rather than broad questions as a method to help the older adult to grasp a larger concept by addressing components individually, and then tying the pieces together.

- Listen patiently and redirect as needed if the older victim digresses. Use memory cues such as “What were you doing before this happened?”
• Do not discount the alleged abuse simply because the victim has made statements that seem untrue or the result of delusions (i.e., the CIA is watching me or aliens have taken me to their planet). Take statements of abuse seriously and believe what the older adult has said about the abuse unless the evidence proves differently. Be aware that even if the evidence or statements others are providing do not support the allegations, the abuse may still have occurred.