

**Purpose:** The terminology used to describe elder abuse teams can be confusing for those starting teams in their communities, especially when distinguishing between different models. While the Elder Justice Initiative (EJI) and its partners support a flexible approach that prioritizes community-specific needs over strict adherence to any one model, it remains essential for stakeholders to share a clear understanding of key terms in the field to avoid misunderstandings.

This document is designed to foster discussion and consensus around the definitions of various team models within the elder justice field. Many elder abuse teams, or networks, may combine elements of the models listed below or otherwise adapt these models to best serve their clients. No list of terms can ever describe every type of network, nor should teams feel they must conform their work to strict definitions. Instead, this serves as a reference for those establishing new teams, offering them clarity on the different models. It also aims to promote a shared vocabulary among elder justice professionals when discussing elder abuse teams.

There are many ways to categorize types of teams. Common categories include clustering teams by their function, such as holding case review meetings. Other categories include organizing teams by funding streams, jurisdiction, or community partnerships or affiliations such as medical-legal partnerships, teams connected to hospitals or universities, or public-private partnerships. There is no wrong way to group teams together so long as it furthers one's understanding of various models. This document lists teams in alphabetical order, with each team type containing general descriptions of team membership, focus, and function, and examples of teams where available.

EJI drafted this document in 2024 using research articles, funder provided descriptions, and publicly available self-descriptions of MDT work provided in documents and MDT websites. These draft definitions were then reviewed and updated in consultation with our federal and national partners. The combined input was then reviewed by local MDTs in the elder justice field through a series of MDT Listening Sessions. This draft incorporates suggestions from those conversations. This document will be disseminated at the May 2025 Virtual Elder Justice MDT Summit and shared through the EJI website. This is a living document intended to evolve with further understanding of and advances in elder abuse MDT practices.

To support the development of shared definitions, a broad term encompassing all types of teams was required. Consistent with terminology used by other governmental agencies, the term "[network](#)" was selected (see CFPB's [Elder fraud prevention and response network stakeholders](#)). "Network" is frequently used interchangeably when referring to multidisciplinary teams or elder abuse teams more broadly. A network convenes key stakeholders and resources to prevent, detect, and respond to elder abuse and elder financial exploitation within the community. For the purposes of this document, network is used as an inclusive term representing all types of elder abuse teams. It should be emphasized that all networks that review cases, co-investigate elder abuse, or otherwise interact with elder abuse victims, operate under confidentiality policies and must navigate complex dynamics including, but not limited to, issues related to capacity.

Network goals may include:

- Case review and resolution
- Community education and outreach
- Local or regional protocols and response
- Systems improvement
- Policy development
- Cross training

In addition to the team types and broad categories defined here, the elder justice field includes a wide array of specialized terms and [acronyms](#) that can be challenging to navigate. A resource for a few common additional terms can be referenced in the Elder Abuse MDT Guide and Toolkit [Glossary](#).

## Types of Elder Abuse Networks

<b>Case Review Multidisciplinary Teams (MDTs)</b>	<p>MDTs<sup>1</sup> are groups comprised of members with varied but complementary experience, qualifications, and skills, bound by a common purpose (the MDT has a shared goal and shared definition of the problem they are addressing), working collaboratively to achieve a shared goal.</p> <ul style="list-style-type: none"> <li>• <b>Members:</b> Comprises professionals from various disciplines (e.g., social workers, healthcare providers, law enforcement, attorneys) who collaborate to address individual elder abuse cases.</li> <li>• <b>Focus:</b> Primarily focuses on investigating and responding to specific elder abuse cases on a case-by-case basis.</li> <li>• <b>Function:</b> Provides a coordinated and comprehensive response to individual elder abuse cases, with a focus on victim support and case resolution.</li> </ul> <p>Examples:</p> <p>Examples of elder abuse MDTs can be found by searching the <a href="#">Elder Justice Network Locator Map</a> and USC’s Center for Elder Justice <a href="#">MDT Project: Draft List of MDTs</a></p>
<b>Coalitions</b>	<p>A coalition<sup>2</sup> is a formal relationship among more than two organizations, and perhaps involving individual members as well, which enables them to work together on a specific issue or project. Quite often the coalition will have its own funds and staff, either allocated from members’ own organizational budgets and human resources or funded by an external source.</p> <p>The <a href="#">National Center for State and Tribal Elder Justice Coalitions</a> (NCSTEJC) defines coalitions as multidisciplinary collaboratives operating at the state or tribal level. These coalitions bring together professionals from various fields to identify and address elder justice issues specific to their communities. Membership in the NCSTEJC is inclusive, allowing participation from any profession, including for-profit entities, provided they adhere to federal guidelines for allowable activities.</p> <p>These coalitions are designed to be broad-based, fostering collaboration among diverse stakeholders to effectively tackle elder justice concerns within their respective jurisdictions.</p> <ul style="list-style-type: none"> <li>• <b>Members:</b> Brings together a diverse group of stakeholders that may include government agencies, nonprofits, healthcare, legal, social services, financial institutions, community members, and even members of the media.</li> <li>• <b>Focus:</b> Generally, concentrates on prevention, awareness, and education regarding elder abuse in a community or region.</li> <li>• <b>Function:</b> Works collaboratively to raise awareness, educate the public, advocate for policy changes, and provide resources and support for elder abuse prevention.</li> </ul> <p>Examples:</p> <p><a href="#">Greater Augusta County Coalition Against Adult Abuse</a></p> <p><a href="#">California Elder Justice Coalition</a></p> <p><a href="#">Colorado Coalition for Elder Rights and Abuse Prevention</a></p>
<b>Community Complex Care</b>	<p>C3RTs<sup>3</sup> are a Geriatric Nursing Model that includes a specialized group of professionals and organizations (nurses, EMTs, hospital dispatchers, and many other professionals) that work together to address the complex needs of vulnerable individuals, including older adults who are facing a multitude of challenges. These challenges may encompass various aspects of</p>

<b>Response Teams (C3RTs)</b>	<p>their well-being, such as medical, social, legal, and psychological needs. Borne out of a CCR, the C3RT is more aligned with the ideas underlying geriatric nursing transitional care models (<a href="#">Continuity of Care: The Transitional Care Model</a>) and involves information sharing and shared decision-making among professionals through a case management system (as opposed to face to face interactions), when consent of the victim has been obtained. To address the complex needs of older adults, this multi-sector model offers everything from skilled nursing care to legal aid, foreclosure assistance, mental health, social programs, meals-on-wheels.</p> <ul style="list-style-type: none"> <li>• <b>Members:</b> Includes professionals from diverse fields, such as healthcare providers, social workers, legal experts, community organizations, and advocates.</li> <li>• <b>Focus:</b> Addresses the full spectrum of an older adult's needs, considering physical, mental, social, legal, and other dimensions of well-being. Typically, it serves older adults who are particularly vulnerable due to factors like chronic health conditions, mental health challenges, substance abuse, or complex social situations. Deals with cases that are often intricate and require a multidisciplinary approach to support and intervention.</li> <li>• <b>Function:</b> Conducts comprehensive assessments to understand the complex needs of the older adult and provides coordination of services, crisis intervention, advocacy and support, and case monitoring and follow-up.</li> </ul> <p>Examples:</p> <p><a href="#">Yale School of Medicine C3RT</a></p>
<b>Consortium</b>	<p>A consortium is an agreement, combination, or group (as of companies) formed to undertake an enterprise beyond the resources of any one member (<a href="#">Merriam-Webster Dictionary</a>).</p> <ul style="list-style-type: none"> <li>• <b>Members:</b> Involves a broad range of organizations, agencies, and stakeholders, similar to coalitions.</li> <li>• <b>Focus:</b> Often works on a wide range of elder abuse-related issues, including awareness, prevention, education, research, policy advocacy, and support services.</li> <li>• <b>Function:</b> Collaborates on multiple fronts to address elder abuse comprehensively, often with a broader regional or systemic focus.</li> </ul> <p>Examples:</p> <p><a href="#">C3A Consortium</a></p>
<b>Coordinated Community Response (CCR)</b>	<p>CCRs<sup>4</sup> provide a multidisciplinary approach and response to issues around sexual assault, domestic violence,<sup>5</sup> and abuse in later life by creating an infrastructure that will facilitate systems-level, and ultimately societal-level, change. CCR teams focus on improving the policies, procedures and practices of various agencies to address elder abuse while working to create a seamless response to older survivors<sup>6</sup> (<a href="#">NCALL</a>).</p> <ul style="list-style-type: none"> <li>• <b>Members:</b> Includes professionals and community stakeholders from various sectors, similar to coalitions.</li> <li>• <b>Focus:</b> Focuses on creating a coordinated response to elder abuse at the community or regional level.</li> <li>• <b>Function:</b> Develops strategies for preventing elder abuse, enhancing identification and reporting, and providing comprehensive support services to victims within a specific community or region.</li> </ul> <p>Examples:</p>

	<p><a href="#">Clay County Minnesota Coordinated Community Response Team</a></p> <p>OVW <a href="#">NCALL Abuse Later in Life Grant Program</a> (establishing CCRs)</p>
<b>Coordinating Council</b>	<p>An Elder Abuse Coordinating Council is a collaborative entity formed to address elder abuse at a systemic level. It brings together various stakeholders, including professionals, agencies, and community members, with the aim of coordinating efforts to prevent, detect, and respond to elder abuse in a coordinated and effective manner. They play a crucial role in creating a coordinated and effective response to elder abuse at a systemic level.<sup>7</sup></p> <ul style="list-style-type: none"> <li>• <b>Members:</b> Comprises a diverse group of experts and community members, including healthcare workers, legal experts, social service providers, and community leaders.</li> <li>• <b>Focus:</b> Addresses elder abuse at a community-wide level, aiming to develop strategies, policies, and programs to prevent and respond to elder abuse.</li> <li>• <b>Function:</b> Works to coordinate efforts, develop policies, conduct education and awareness campaigns, and facilitate collaboration among different agencies and organizations.</li> </ul> <p>Examples:</p> <p>Kentucky's Elder Abuse Coordinating Council<sup>8</sup></p> <p><a href="#">Michigan Elder Justice Coordinating Council</a></p> <p>SC Adult Protection Coordinating Council (<a href="#">Training Manual</a>)</p>
<b>Elder Abuse Fatality Review Teams (EA-FRTs) (also known as Elder Death Review Teams)</b>	<p>EA-FRTs conduct examinations of the causal and contributing factors in an older victim's death to improve future services to other victims so that they receive appropriate interventions before a fatality occurs (<a href="#">NCALL</a>).</p> <p>EA-FRTs use case reviews, identify learning points about elder abuse and neglect detection, and appropriate interventions for professionals from a variety of disciplines. Team members participate in educational opportunities to disseminate this information. The team ultimately seeks to promote changes in policies and procedures of governmental and private agencies to close service gaps (<a href="#">Center on Elder Abuse</a>).</p> <p>Pre-adjudication EA-FRTs assist in the legal investigation of elder deaths, while post-adjudication EA-FRTs conduct reviews after legal proceedings have concluded to identify systemic issues and make recommendations for prevention and improvement. Both types of teams play essential roles in addressing elder abuse and preventing future incidents, but their focus and timing are different.</p> <ul style="list-style-type: none"> <li>• <b>Members:</b> Typically includes professionals like law enforcement, healthcare experts, legal professionals, and community advocates.</li> <li>• <b>Focus:</b> Specifically investigates cases of elder abuse that resulted in fatality or serious harm, aiming to understand how these situations occurred and how they can be prevented in the future.</li> <li>• <b>Function:</b> Conducts in-depth case reviews, identifies gaps in services or system failures, and makes recommendations for improvements in policies and procedures.</li> </ul> <p>Examples:</p> <p>ABA list of <a href="#">state EA-FRTs</a></p> <p>Elder Abuse Fatality Review Team (<a href="#">Florida</a>)</p>

<b>Elder Abuse Forensic Centers (EAFCs)</b>	<p>EAFCs are enhanced MDTs that co-locate services for better coordination, have a designated coordinator, include medical, legal and psychological professionals on their team, and engage in coordination activities outside of the team meeting, such as conducting coordinated home visits where two or more team members visit the clients home for the purpose of evaluation, consultation, or interviewing the client in their environment.</p> <p>EAFCs, in general, serve as a focal point for analyzing complex cases of elder abuse by convening experts for the purpose of doing a forensic examination of open complex cases. Identifying and documenting the forensic markers of elder abuse when encountered by those in the medical and scientific fields is one focus of forensic centers. EAFCs also are conveners, and often are the locus for coordinated community response on a case-by-case basis. (<a href="#">ACL/AoA 2016 Innovation Grants</a> and <a href="#">Grants</a> awarded to USC).</p> <p>EAFCs work collaboratively to review cases of elder abuse and to create action plans. They have a greater array of disciplines, and have more focused and action-orientated collaborations than traditional multidisciplinary teams. Each member of the EAFC is expected to provide a service for the given case within the constraints of the particular agency. Meetings are held on a weekly basis. A plan of action is determined by the collective and team members assist in carrying out the recommendations (<a href="#">NCALL</a>).</p> <ul style="list-style-type: none"> <li>• <b>Members:</b> Typically staffed by forensic professionals, including forensic nurses, geriatricians, and legal experts.</li> <li>• <b>Focus:</b> Concentrates on conducting medical and forensic examinations, evidence collection, and legal support in elder abuse cases.</li> <li>• <b>Function:</b> Provides specialized services for investigating elder abuse, collecting evidence, and ensuring the well-being of victims, often involving forensic expertise.</li> </ul> <p>Examples:</p> <p>UC Irvine Elder Abuse Forensic Center (<a href="#">toolkit</a>)</p> <p>LA County Elder Abuse Forensic Center<sup>9</sup></p> <p>San Francisco elder abuse <a href="#">prevention program</a> (San Francisco Elder Abuse Forensic Center and MDTs)</p> <p><a href="#">New York City Elder Abuse Center</a><sup>10</sup></p>
<b>Elder Abuse Interdisciplinary Teams (I-Teams)</b>	<p>I-Teams are formal collaborations of professionals often from county-based agencies such as adult protective services, law enforcement, healthcare, and legal services. These professionals work together to identify, investigate, and respond to elder abuse, neglect, and exploitation. Mandated in states like Ohio and established voluntarily in others, I-Teams promote consistent, coordinated case handling and systems-level improvements through cross-agency communication and shared protocols. These teams are functionally very similar to elder abuse MDTs and other case review teams and these terms are often used interchangeably.</p> <ul style="list-style-type: none"> <li>• <b>Members:</b> Comprised of representatives from key mandated entities including adult protective services, county prosecutor's office, sheriff or chief law enforcement officials, and county coroner. Additional members may include aging services, long-term care ombudsman programs, mental health boards, developmental disabilities boards, housing authorities, health departments, and others relevant to elder abuse response.</li> <li>• <b>Focus:</b> Focuses on creating a unified, county-wide approach to preventing, identifying, and responding to elder abuse, neglect, and exploitation. Teams aim to</li> </ul>

	<p>ensure that older adults receive a coordinated and just response from social, legal, medical, and protective systems.</p> <ul style="list-style-type: none"> <li>• <b>Function:</b> Develops shared procedures for cross-agency collaboration, facilitates timely interventions and criminal justice involvement when needed, supports Adult Protective Services (APS), and promotes consistent case handling while respecting confidentiality provisions.</li> </ul> <p>Examples: Ohio I-Teams (<a href="#">mandated statewide by OAC 5101:2-20-06</a>) and <a href="#">Highlighted by US DOJ's Elder Justice Initiative</a> <a href="#">Jackson County (WI) I-Team</a></p>
<b>Elder Abuse Medical-Legal Partnerships (MLPs)</b>	<p>MLPs integrate legal services into healthcare settings to address social and legal issues affecting older adults' health and well-being, including elder abuse, neglect, and exploitation. By embedding legal professionals within medical teams, MLPs facilitate early identification and intervention in cases where legal remedies can mitigate health-harming social conditions.</p> <ul style="list-style-type: none"> <li>• <b>Members:</b> Comprised of healthcare providers (e.g., physicians, nurses, social workers), legal professionals (e.g., attorneys, legal aid staff), and often including law students or volunteers. These teams collaborate to identify and address legal issues impacting patients' health.</li> <li>• <b>Focus:</b> Primarily focuses on addressing legal needs that affect health outcomes, such as housing instability, access to benefits, and protection from abuse. In elder abuse cases, MLPs work to secure protective orders, guardianships, or other legal interventions to ensure safety and well-being.</li> <li>• <b>Function:</b> Provides a coordinated approach where healthcare and legal professionals jointly screen for legal issues during medical visits, enabling timely legal assistance that can prevent or address elder abuse and its associated health consequences.</li> </ul> <p>Examples: UC Law San Francisco <a href="#">Medical-Legal Partnership for Seniors</a> (<a href="#">Sarah Hooper on Medical Legal Practice Clinics for Seniors Podcast</a>)<sup>11</sup></p>
<b>Enhanced-MDTs (E-MDTs)</b>	<p>E-MDTs are MDTs that require specialists on the team such as forensic accountants and clinicians who can conduct capacity assessments, but otherwise function as an MDT.</p> <ul style="list-style-type: none"> <li>• <b>Members:</b> Comprised of professionals from various disciplines and may include social workers, healthcare providers, law enforcement, attorneys, as well as experts who can deliver specialized services including neuropsychologists or forensic accountants. These professionals collaborate to address individual elder abuse cases.</li> <li>• <b>Focus:</b> Primarily focused on investigating and responding to specific elder abuse cases on a case-by-case basis and gleaning specialized information to inform prosecution or other legal proceedings or to acquire more comprehensive services for older adults who have experienced abuse.</li> <li>• <b>Function:</b> Provides a coordinated and comprehensive response to individual elder abuse cases, with a focus on victim support, legal remedies, and case resolution.</li> </ul> <p>Examples:</p>

	<a href="#">Vera House Enhanced Multidisciplinary Team</a> New York City Elder Abuse Center <a href="#">Enhanced Multidisciplinary Teams</a> <a href="#">New York State E-MDTs</a>
<b>Family Justice Centers (FJs)</b>	<p>FJs are a “one stop shop” for victims of domestic violence, sexual assault, child abuse, and elder abuse. Professionals from many different disciplines work together to provide consolidated and coordinated safety, legal, social, and health services to individuals and families in need. At the FJ, victims can come to one location to access a wide range of supportive resources, such as talking with a victim advocate, getting assistance with filing a restraining order, planning for their safety, talking to a law enforcement officer, meeting with a professional to discuss civil and criminal legal issues, receiving medical assistance, and gaining information on how to access shelter and other community resources. The FJ also is a resource for community outreach and education and works with organizations and volunteers. (see <a href="#">Family Justice Center Alliance</a><sup>12</sup>)</p> <p>Family Justice Centers (FJs) are comprehensive, one-stop service centers designed to provide support and assistance to victims of domestic violence, elder abuse, sexual assault, and other forms of interpersonal violence. They are community-based facilities that aim to streamline and coordinate services for victims and their families. While FJs primarily focus on domestic violence, some also address elder abuse as it is a form of domestic violence.</p> <p>Here's how Family Justice Centers relate to elder abuse intervention:</p> <ul style="list-style-type: none"> <li>• <b>Members:</b> FJs take a multidisciplinary approach to the services they provide by bringing together a range of professionals and agencies under one roof. This typically includes law enforcement, prosecutors, social service providers, legal aid, legal clinics, healthcare professionals, counselors, and other community-based organizations.</li> <li>• <b>Focus:</b> FJs are designed to be accessible and welcoming to all individuals, including older adults. They are typically located in easily reachable community locations. While Family Justice Centers primarily focus on domestic violence, they recognize that elder abuse is a critical component of this broader issue. FJs often engage in community outreach and education efforts and offer legal services to victims. This may include assistance with protective orders, navigating the legal system, and providing information about rights and options. FJs focus on advocacy and empowerment by providing victims with information and resources, allowing them to make informed decisions about their own safety and well-being</li> <li>• <b>Function:</b> FJs aim to streamline services to reduce the burden on victims. Instead of having to navigate multiple agencies and systems, victims can access a range of services in one location. FJs provide immediate assistance and support to victims in crisis. This may include emergency shelter, medical care, and counseling. Beyond immediate crisis intervention, FJs offer longer-term support. This can include counseling, case management, housing assistance, legal advocacy, access to support groups and help with the development of safety plans tailored to the client's specific situation.</li> </ul> <p>Examples:</p> <p><a href="#">Elder Justice Center of Alabama</a></p> <p><a href="#">Guilford County Family Justice Center</a></p>



	Nashville's <a href="#">Family Safety Center</a>
<b>Financial Abuse Specialist Teams (FASTs)</b>	<p>FASTs<sup>13</sup> focus on suspected cases of financial exploitation by bringing together justice professionals, adult protective services workers, aging services staff, and people who work in financial institutions. Some teams also provide continuing education, community education, and public awareness on financial abuse. (<a href="#">NCALL</a>). FASTs may take the form of case review, consultation, and/or system change.</p> <ul style="list-style-type: none"> <li>• <b>Members:</b> Consists of financial experts, social workers, law enforcement, legal professionals, and sometimes healthcare providers.</li> <li>• <b>Focus:</b> Specializes in cases of financial exploitation of older adults, aiming to identify, investigate, and prevent financial abuse.</li> <li>• <b>Function:</b> Offers expertise in financial matters, conducts investigations, provides support to victims, and assists in prosecuting financial abuse cases.</li> </ul> <p>Examples:</p> <p><a href="#">Orange County FAST</a></p> <p><a href="#">FAST of Vermont</a></p> <p><a href="#">Sedgewick County (KS) FAST</a></p>
<b>Guardianship Teams</b>	<p>Guardianship teams,<sup>14</sup> in the context of elder abuse, are specialized groups of professionals and experts responsible for overseeing and managing the legal guardianship process for vulnerable or incapacitated older adults. Their primary goal is to ensure that the rights and best interests of the older person are protected when they are no longer able to make decisions for themselves due to physical or mental incapacity.</p> <ul style="list-style-type: none"> <li>• <b>Members:</b> Comprised of legal professionals, including attorneys who specialize in elder law and have expertise in guardianship proceedings, medical professionals, social workers, advocates, family members or people in a position of trust with the older adult, and court staff or judges.</li> <li>• <b>Focus:</b> Guardianship teams focus on guiding the legal process of establishing a guardian for the older adult. This involves determining whether the person is legally incapacitated and, if so, appointing a guardian to make decisions on their behalf. The primary concern of the guardianship team is the well-being and best interests of the older person. This includes decisions about their medical care, living arrangements, financial matters, and other important aspects of their life. Guardianship teams work to strike a balance between respecting the older adult's autonomy and ensuring they receive the necessary care and support.</li> <li>• <b>Function:</b> The team may conduct assessments to determine whether the older adult is legally incapacitated and in need of a guardian. They assist in identifying and appointing a suitable guardian, who may be a family member, a trusted friend, or a professional guardian. The team monitors the actions of the guardian to ensure they are acting in the best interests of the older adult and complying with legal requirements. Guardianship teams may advocate for the rights and preferences of the older person.</li> </ul> <p>Examples:</p> <p><a href="#">Project Guardianship Services</a></p> <p><a href="#">ABA list of State WINGS</a><sup>15</sup></p>



<b>Sexual Assault Response Teams (SARTs)</b>	<p>SARTs<sup>16</sup> offer specialized sexual assault intervention services to victims. A SART may also work on increasing the reporting of sexual assault and increased convictions (<a href="#">NCALL</a>).</p> <ul style="list-style-type: none"> <li>• <b>Members:</b> Usually includes medical professionals, law enforcement, legal experts, and victim advocates.</li> <li>• <b>Focus:</b> Specializes in providing coordinated care and support for victims of sexual assault, including older adults.</li> <li>• <b>Function:</b> Ensures a victim-centered, trauma-informed response, including medical care, counseling, legal support, and advocacy.</li> </ul> <p>Examples:</p> <p><a href="#">District of Columbia Sexual Assault Response Team</a> (SART)</p> <p>Wisconsin SART <a href="#">Considerations for Responding to Elderly Survivors</a></p>
<b>Task Force</b>	<p>A task force is a temporary group of people formed to carry out a specific mission or project, or to solve a problem that requires a multidisciplinary approach.<sup>17</sup> These teams often disband after meeting their mission or completing their project. Common missions and projects include evaluating an issue, writing a report of findings on a specific topic, or working collaboratively to address a specific local issue.</p> <ul style="list-style-type: none"> <li>• <b>Members:</b> Usually includes professionals from law enforcement, legal, and related fields.</li> <li>• <b>Focus:</b> Typically formed for a specific purpose, such as investigating elder abuse in a particular jurisdiction or combating a specific type of abuse (e.g., financial exploitation).</li> <li>• <b>Function:</b> Focuses on a specific investigative or enforcement mission related to elder abuse, often with a clear mandate for action.</li> </ul> <p>Examples:</p> <p><a href="#">The Elder Justice Task Force of the New River Valley</a></p> <p>Michigan Department of Attorney General <a href="#">Elder Abuse Task Force</a></p>
<b>Tribal Elder Protection Teams (TEPTs)</b>	<p>TEPTs are multidisciplinary teams formed within tribal communities to address the unique challenges faced by older tribal members experiencing abuse, neglect, or exploitation. These teams incorporate cultural and traditional practices into their responses and often include tribal Elders, social service providers, law enforcement, healthcare professionals, and legal experts. It should be noted that these teams often have a more person-centered or community-centered model focused on including the older adult, the alleged abuser, and other family or community members and often take a restorative justice approach.<sup>18</sup></p> <ul style="list-style-type: none"> <li>• <b>Members:</b> Typically composed of tribal Elders, community advocates, healthcare providers, law enforcement, and legal professionals, all working together to protect vulnerable older adults within the tribal community. Many teams also include the older adult, their family, and community members.</li> <li>• <b>Focus:</b> Emphasizes culturally appropriate prevention, intervention, and protection strategies, ensuring that responses to elder abuse align with tribal traditions and values.</li> <li>• <b>Function:</b> Provides coordinated case management, support services, and legal protection to older adults, while also engaging in community education and advocacy to prevent future instances of abuse.</li> </ul>

	<p>Examples:</p> <p><a href="#">Sac and Fox Nation, Oklahoma</a></p> <p><a href="#">Winnebago Tribe of Nebraska – Adult &amp; Elderly Protective Services Program</a></p> <p><a href="#">Lummi Victim of Crime Enhanced Multidisciplinary Team</a></p>
<h2>Distinguishing Among the Concepts of Multi-, Inter-, and Transdisciplinary</h2>	
<p>The Elder Justice field uses a wide range of terminology to broadly categorize types of elder abuse networks (teams). Interdisciplinary, multidisciplinary (the most common term used in the field today), and transdisciplinary are terms that often are used interchangeably in practice, but that hold distinct technical meanings. The definitions below are included with the intent to understand the subtle differences in this broader terminology as it relates to elder abuse teams. Clarifying a shared language can support field communication, build stronger collaboration, and generate greater consistency across systems and disciplines working to address and prevent elder abuse.</p>	
<b>Multidisciplinary</b>	<p>Multidisciplinary is a term often conflated with inter- and transdisciplinary, but they each have distinct meanings.</p> <p>Multidisciplinarity draws on knowledge from different disciplines but stays within the boundaries of those fields (p. 359).<sup>19</sup> Unlike interdisciplinary and transdisciplinary activities, there is no mutual influence between the perspectives, nor any effort to integrate them (p. 32).<sup>20</sup></p> <p>Here, we are using the term multidisciplinary team to mean a team that is comprised of members with varied but complementary experiences, qualifications, and skills who share a common vision and work collaboratively and cooperatively to achieve a goal and draw on knowledge from different disciplines but each stay within their boundaries. A multidisciplinary team is one in which members use their individual expertise to first develop their own answers to a given problem and then come together to formulate a solution. MDTs (in some states called I-Teams) utilize the varied backgrounds and expertise of team members to improve responses to individual cases of abuse, to explore the best options and remedies for a case, and to coordinate service delivery.</p> <p>MDTs can have a variety of goals including case review, case coordination, systems change, policy, outreach, education, or some combination of those or other activities.</p>
<b>Interdisciplinary</b>	<p>Interdisciplinarity analyzes, synthesizes and harmonizes links between disciplines into a coordinated and coherent whole (p. 359).<sup>21</sup> Developed to tackle “wicked” problems, interdisciplinary approaches not only draw upon, but also attempt to integrate, disciplinary perspectives in a way that may lead to the development of new, overarching knowledge that transcends these individual perspectives (p. 34).<sup>22</sup> For example, combining the disciplines of technology and social science to create innovative approaches to the care of older adults.<sup>23</sup></p>
<b>Transdisciplinary</b>	<p>Transdisciplinarity integrates the natural, social and health sciences in a humanities context, and transcends their traditional boundaries (p. 359),<sup>24</sup> and further, transcend disciplines to include communities and the people affected by the problem when developing solutions (p. 35).<sup>25</sup> Linking ages (older and younger ages) to address violence is an example of a transdisciplinary approach.<sup>26</sup></p>

- 
- <sup>1</sup> Anetzberger, G. J. (2011). The evolution of a multidisciplinary response to elder abuse. *The Marquette Elder's Advisor Law Review*, 13, 107.
- <sup>2</sup> Anetzberger, G. J., Breckman, R., Caccamise, P. L., Freeman, I. C., & Nerenberg, L. (2020). Building a national elder justice movement, state by state. *Generations*, 44(1), 111-116.
- <sup>3</sup> Maxwell, C. D., Almanza, K. R., & Pickering, C. E. (2022). Coordinated community response to prevent elder abuse, neglect, and financial exploitation: Randomized control trial. *Journal of Experimental Criminology*, 1-17.
- <sup>4</sup> Salazar, L. F., Emshoff, J. G., Baker, C. K., & Crowley, T. (2007). Examining the behavior of a system: An outcome evaluation of a coordinated community response to domestic violence. *Journal of Family Violence*, 22(7), 631-641.; Bouffard, J. A., & Muftić, L. R. (2007). [An examination of the outcomes of various components of a coordinated community response to domestic violence by male offenders](#). *Journal of Family Violence*, 22(6), 353-366.; Wasylkewycz, M. N. (1994). The elder abuse resource centre, a coordinated community response to elder abuse: One Canadian perspective. *Journal of Elder Abuse & Neglect*, 5(4), 21-33.
- <sup>5</sup> Coordinated community response components for victims of intimate partner violence: [A review of the literature, 2014](#); [CCRs in six communities](#) (Urban Institute); NCALL [CCR Toolkit](#).
- <sup>6</sup> Typically avoiding case review, there are exceptions. See [North Carolina](#), p. 26 permitting case review.
- <sup>7</sup> An advisory, deliberative, or legislative body of people formally constituted and meeting regularly ([Definition source](#)).; A group of people elected or chosen to make decisions or give advice on a particular subject, to represent a particular group of people, or to run a particular organization ([Cambridge Dictionary](#)).
- <sup>8</sup> Teaster, P. B., & Wangmo, T. (2010). Kentucky's local elder abuse coordinating councils: A model for other states. *Journal of Elder Abuse & Neglect*, 22(1-2), 191-206.
- <sup>9</sup> Navarro, A. E., Wilber, K. H., Yonashiro, J., & Homeier, D. C. (2010). Do we really need another meeting? Lessons from the Los Angeles County Elder Abuse Forensic Center. *The Gerontologist*, 50(5), 702-711.
- <sup>10</sup> Teams offer a central response point for the agencies and people working on elder abuse cases in the community. In addition, they utilize a case consultation model to improve the health and quality of life for older adults. This is accomplished through reviewing, discussing and coordinating cases of elder abuse and neglect; identifying systemic and resource problems that can be brought to the attention of others for strategizing and intervention; and identifying research needs.
- <sup>11</sup> For more information on medical-legal partnerships, visit [National Center for Medical-Legal Partnership](#).
- <sup>12</sup> The FJCA serves as the clearinghouse, research center, and national affiliation organization for Family Justice Centers and other multi-agency models that serve victims of domestic violence, sexual assault, elder abuse, child abuse, and/or human trafficking. (see [Guiding Principles](#))
- <sup>13</sup> Mals, B., Schmidt, C. M., & Austin, M. J. (2002). Elder abuse prevention: A case study of the Santa Clara County Financial Abuse Specialist Team (FAST) program. *Journal of Gerontological Social Work*, 39(3), 23-40.; Mals, B., Buckmaster, J., & Cunningham, L. (2003). *Journal of Elder Abuse & Neglect*, 15(3/4), 55-70.; Price, G., & Fox, C. (1997). The Massachusetts bank reporting project: An edge against elder financial exploitation. *Journal of Elder Abuse & Neglect*, 8(4), 59-71.
- <sup>14</sup> Nack, J. R., Dessin, C. L., & Swift, T. (2012). Creating and sustaining interdisciplinary guardianship committees. *Utah Law Review*, 3, 1667-1690.
- <sup>15</sup> Working Interdisciplinary Networks of Guardianship Stakeholders (WINGS) is a project to support court-led partnerships in states to drive changes in guardianship policy and practice. State WINGS are ongoing court-stakeholder partnerships that drive changes affecting guardianship policy and practice through planning and action. WINGS can galvanize change through “collective impact”—by coordinating actions of organizations with the same goals.
- <sup>16</sup> Greeson, M. R., Campbell, R., Bybee, D., & Kennedy, A. C. (2016). Improving the community response to sexual assault: An empirical examination of the effectiveness of sexual assault response teams (SARTs). *Psychology of Violence*, 6(2), 280.; Wegrzyn, A., Greeson, M. R., & Mihelicova, M. (2021). A qualitative examination of collaborative infrastructure within sexual assault response teams. *American Journal of Community Psychology*, 68(1-2), 154-166.
- <sup>17</sup> A temporary grouping under one leader for the purpose of accomplishing a definite objective. ([Merriam-Webster](#))
- <sup>18</sup> Elder protection teams and tribal elder abuse codes are available at [Native American Elder Justice Initiative](#)
- <sup>19</sup> Choi, B. C., & Pak, A. W. (2006). Multidisciplinarity, interdisciplinarity and transdisciplinarity in health research, services, education and policy: 1. Definitions, objectives, and evidence of effectiveness. *Clinical and Investigative Medicine*, 29 (6), 351.
- <sup>20</sup> McMurtry, A., & Sasser, J. (2020). Interdisciplinary and transdisciplinary approaches to ageing and gerontology. In *Researching Ageing* (pp. 29-40). Routledge.
- <sup>21</sup> Choi, B. C., & Pak, A. W. (2006). Multidisciplinarity, interdisciplinarity and transdisciplinarity in health research, services, education and policy: 1. Definitions, objectives, and evidence of effectiveness. *Clinical and Investigative Medicine*, 29 (6), 351.
- <sup>22</sup> McMurtry, A., & Sasser, J. (2020). Interdisciplinary and transdisciplinary approaches to ageing and gerontology. In *Researching Ageing* (pp. 29-40). Routledge.
- <sup>23</sup> Kleinman, A., Chen, H., Levkoff, S. E., Forsyth, A., Bloom, D. E., Yip, W., ... & Habbal, F. (2021). Social technology: An interdisciplinary approach to improving care for older adults. *Frontiers in Public Health*, 9, 729149.

---

<sup>24</sup> Choi, B. C., & Pak, A. W. (2006). Multidisciplinarity, interdisciplinarity and transdisciplinarity in health research, services, education and policy: 1. Definitions, objectives, and evidence of effectiveness. *Clinical and Investigative Medicine*, 29 (6), 351.

<sup>25</sup> McMurtry, A., & Sasser, J. (2020). Interdisciplinary and transdisciplinary approaches to ageing and gerontology. In *Researching Ageing* (pp. 29-40). Routledge.

<sup>26</sup> Höppner, G., Wanka, A., & Gallistl, V. (2024). Un/Doing Violence and Un/Doing Care\*: Mapping Boundary-Making Practices of Violence in Elder Care from a Transdisciplinary Perspective. In *Linking Ages* (pp. 260-274). Routledge.