



DEPARTMENT OF JUSTICE
ElderJustice
INITIATIVE

A photograph of a woman with curly hair, wearing a white lab coat, smiling and supporting an elderly woman. The woman in the lab coat has her hand on the elderly woman's shoulder. The background is a blurred indoor setting, possibly a home or a care facility.

SAFE

(Safe Accessible Forensic Interviews for Elders)

Course Overview

- This course was designed for professionals with experience in interviewing and/or working with older adults.
- Topics include:
 - Elder Abuse
 - Communicating with Older Adults
 - Forensic Interviewing Strategies
- Strategies:
 - Instruction, partner work, small and large group activities

Course Agenda

Day 1	Day 2	Day 3	Day 4
<u>8:45AM-12:00PM</u>	<u>9:00AM-12:00PM</u>	<u>9:00AM-12:00PM</u>	<u>9:00AM-12:00PM</u>
Pre-Assessment Activity	Instruction and Activities	Instruction and Activities	Practicum
<u>1:00PM-4:30PM</u>	<u>1:00PM-4:30PM</u>	<u>1:00PM-4:30PM</u>	<u>1:00PM-4:30PM</u>
Instruction and Activities	Instruction and Activities	Instruction and Activities	Practicum



Introduction and Purpose

Elder Abuse

Elder abuse can manifest itself in many ways:

- An older parent isolated and neglected by an adult child or caregiver;
- Domestic violence by a partner (long-term or new),
- Sexual assault by a stranger, caregiver, or family member;
- Abuse or neglect by a partner with advancing dementia;
- Financial exploitation by a stranger, trusted family member, or professional; or
- Systemic neglect by a long-term care provider

Type of Interview	Motivational Interview	Cognitive Interview	Forensic Interview
Goals	Engage a person to make changes	Gather reliable and thorough testimony from a victim or eyewitness	Gather reliable, relevant evidence from a victim for a criminal investigation
Typically used by	APS investigators and human service professionals	APS and law enforcement investigators	MDTs conducting criminal investigative interviews
Strategies	Questioning that expresses empathy, develops discrepancy, rolls with resistance, and supports self-efficacy	Questioning that is open, contextual; transfers control for a free report to witness	Questioning that is non-leading, non-suggestive, victim-focused, and victim-led

Trauma-Informed Approach

- Trauma
 - Event
 - Series of Events
 - Set of Circumstances
- Up to 90% of older adults have experienced at least one traumatic event
- Always use a trauma-informed approach



Strength-Based Perspective

- Focus on:
 - Positive Traits
 - Resiliency Factors
 - Fostering Trust
 - Mutual Respect
 - Reducing Power Differential



Pre-Assessment

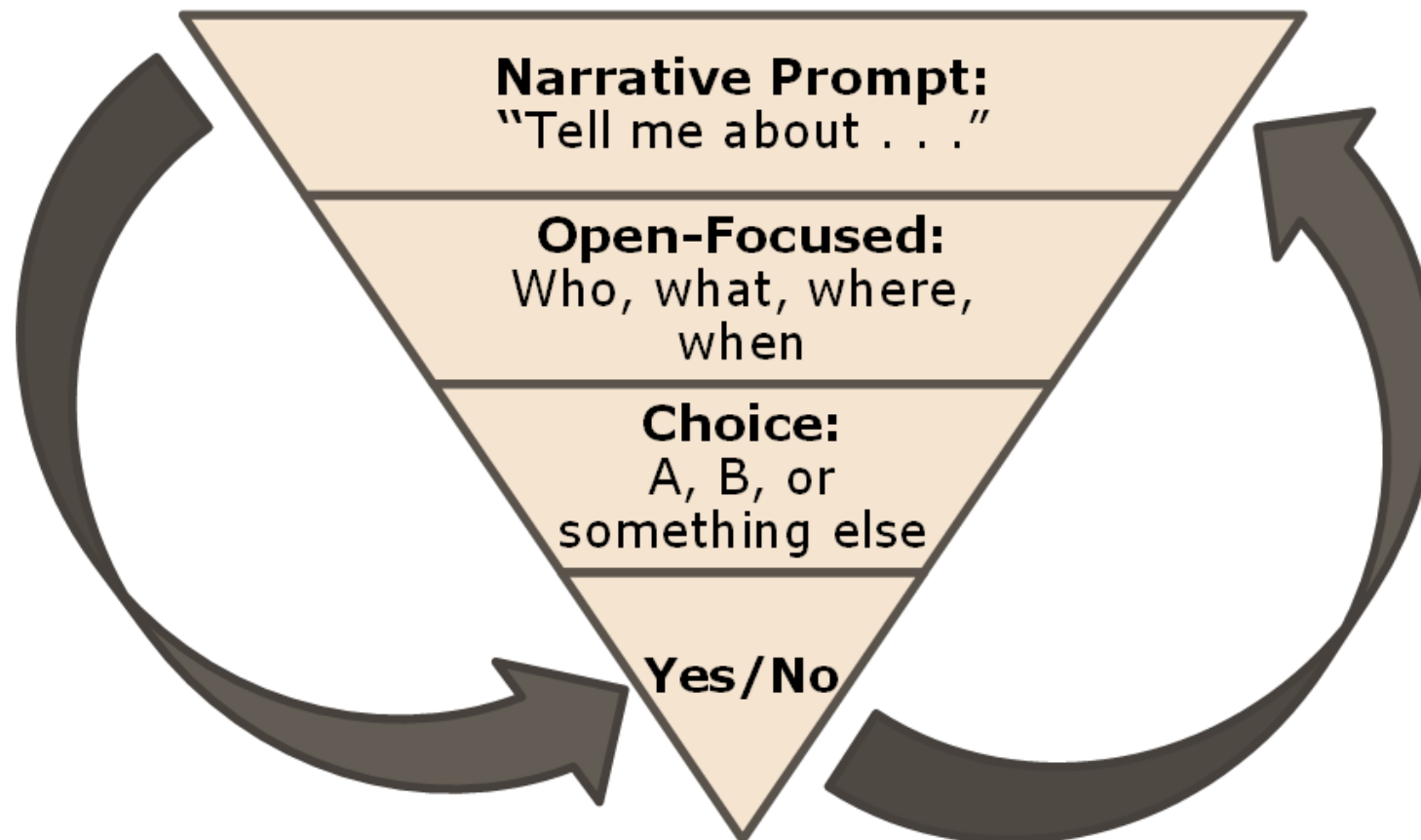
Virtual Instructions

1. Participants will be sent to breakout rooms in groups of three.
2. Each participant has been assigned a case scenario, this will be the scenario you **INTERVIEW** for the pre-assessment and throughout the course.
3. Each participant will have the opportunity to complete a **FOUR MINUTE** pre-assessment interview (disclosure/topic of concern portion only).
4. Each participant will have the opportunity to fill each role: interviewer, interviewee, recorder.
5. The practicum requires participants to use **Appendix I and II**.

Narrative Interview Mapping

- Narrative Interview Mapping is a technique for **visually summarizing** the type and sequence of questions used in a forensic interview.
- Narrative Interview mapping is based on a “**recycling funnel**” model.
- Questions are located at various positions on a funnel, based on their degree of openness/desirability.

Most Reliable



Least Reliable

Interview Mapping Funnel Practice

1. *Tell me about going out to dinner last night.*
2. *Where did you go eat?*
3. *Did anyone else go with you?*
4. *Tell me about Tammy.*
5. *When you were at Johnny's, did you sit at a table, a booth, or someplace else?*

Narrative Prompt

1 4 6

Open-focused

2 7

Choice

5

Yes/No

③ 8

6. *Tell me everything that you saw from the booth where you sat.*
7. *What was everyone in the family wearing?*
8. *Do you remember anything about any other pictures on the wall?*

Poll 1

- What is the most open/desirable question type?
 - Narrative Prompt
 - Open Focused
 - Choice
 - Yes/No

Roles

1. Interviewer:

- Assume rapport and completion of early stages of interview have taken place
- Begin as soon as interviewee makes initial disclosure statement
- Obtain as much information as possible about the event or events in question

Roles

2. Interviewee:

- Start by making the “Interviewee Disclosure Statement” (listed for each case scenario in Appendix I).
- Assume rapport has been established and narrative event practice has taken place.
- Be cooperative but **only answer the specific question asked**.
 - Make the interviewer work to get the information (e.g., do not just volunteer information).
 - If a yes/no question is asked, answer only “yes” or “no” and do not elaborate.
- Make up additional case details as needed (names, locations, hobbies, etc.).

Roles

3. Recorder:

- Pay attention to the question that the interviewer asks and where the question is on the map.
- Number each question as you go on the interview mapping funnel provided (Appendix II).
 - Pay close attention to the actual question being asked
 - If a yes/no question is asked, circle the question number if the response is “Yes”.

Pre-Assessment Round 1

Pre-Assessment Round 2

Pre-Assessment Round 3

Small Group Discussion

- Each recorder will share information from the Pre-Assessment Narrative Interview Map they recorded
- Possible topics:
 - Openness/Desirability of questions
 - Question Sequence/Pattern (e.g., recycling habits)
 - Yes/No Strings (i.e., asks more than 1 yes/no question in a row)

Discussion

1. How did that go?
2. What did you notice?
 - As the interviewer
 - As the interviewee
 - As the recorder
3. Was it tempting to ask more yes/no questions?
4. Anything else?





Elder Abuse Definitions

Elder Abuse

- Definition:
 - Some injury, deprivation, or dangerous condition has occurred to the elder person and
 - Someone else bears responsibility for causing the condition or failing to prevent it
- Responsible person:
 - Intimate partner
 - Family member
 - Caregiver
 - Person with fiduciary relationship





Elder

- Definition:
 - 60+
 - 50+
 - 50-55
 - 65+
 - 18+ with a disability that makes them vulnerable or dependent
- Dependent on jurisdiction, culture, agency, etc.



Standards of Proof in Elder Abuse Cases

Standards of Proof

- Reasonable suspicion: standard that should exist to report elder abuse/start an investigation
- Preponderance of the evidence: standard of proof typically met for the founding of an allegation.
- Clear and convincing evidence: depending on local laws, is the standard of proof to be met in cases requiring civil interventions such as guardianship or a restraining order.
- Beyond a Reasonable Doubt: standard of proof to be met to convict someone of a crime.



Understanding Elder Abuse

Forms of Elder Abuse

- Physical
- Sexual
- Neglect by Caregiver
- Financial
- Scams
- Emotional/Psychological



Forms of Elder Abuse

- Multiple Events
- Polyvictimization
- Cultural Perspectives





Settings

- Home
- Long-term care facilities



Competency, Capacity and Consent

- Older adults are presumed to have capacity to manage their lives and make decisions for themselves



Competency, Capacity and Consent

- Capacity
 - Clinical term describing a person's abilities
- Consent
 - Requires that the person have adequate decision-making capacity
- Competency
 - Court determinations of competency are based on findings about relevant capacities



History of Elder Abuse

2000-Present

- Over the last two decades there have been major advancements in federal legislation to address Elder abuse
- 2017-The Elder Abuse Prevention and Prosecution Act
- Today-Law enforcement and APS are working together to develop best practices to pursue both civil and criminal remedies, when appropriate, to provide justice for older adult victims.



Statistics & Incident Rates

Statistics

- In 2018:
 - More than one in every seven people in the United States was 65 years of age or older
 - More older women (29.1 million) than older men (23.3 million)
 - Nearly 10% of older adults lived below the poverty level.
- Racial and ethnic minority populations have increased from 19% of the older adult population to 23% of older adults, with a projection of reaching 34% of older adults by 2040.

(Administration for Community Living, 2020)

Incidence Rates

- 2017-52 studies in 28 countries, estimated that 15.7% of people aged 60 years and older were subjected to some form of abuse over the past year.
- The breakdown of reported abuse by type:
 - Psychological abuse 11.6%
 - Financial abuse 6.8%
 - Neglect at 4.2%
 - Physical abuse 2.6%
 - Sexual abuse 0.9%

(World Health Organization, 2021)

Incidence Rates

In the United States:

- Financial exploitation by a family member-5.2% of older adults
- Neglect-5.1% of older adults
- Psychological Abuse-4.6% of older adults
- Physical abuse-1.6% of older adults
- Sexual abuse-.6% of older adults

(DOJ, 2020)

Under-Reporting

The New York State Elder Abuse Prevalence Study (2021):

- 24 unreported cases of abuse for every reported case.
- The same report found:
 - Neglect (1:57)
 - Financial (1:44)
 - Physical/Sexual (1:20)
 - Emotional (1:12)

(DOJ, 2020)



Impact of Elder Abuse

Physical Health Impacts

Immediate Impacts

- Abrasions
- Lacerations
- Bruises
- Burns
- Fractures
- Head injuries

Long-Term Impacts

- Skin breakdown
- Infections
- Bone/Joint problems
- Digestive problems
- Chronic Pain
- Heart problems
- Premature death



Psychological and Social Impact

- Mental health conditions
- Substance use disorder
- Family relationships
- Social relationships
- Social isolation



Financial Impact

- Medical expenses
- Community services
- Justice systems
- Institutional settings
- Care expenses

Virtual Small Group Activity

- For your assigned impact, discuss the implications for the interview and some ideas for addressing those impacts:
 - Groups 1 and 4 Physical Health
 - Groups 2 and 5 Psychological and Social
 - Groups 3 and 6 Financial
- Select a spokesperson to present your ideas
- You have 10 minutes to work as a group

Report Back—Implications for the Interview

- Groups 1 and 4 Physical Health
- Groups 2 and 5 Psychological and Social
- Groups 3 and 6 Financial

Physical Health: Implications for the Interview

- Medication(s)
- Time of day
- Accommodate any assistive devices
- Body position
- Length of interview





Psychological and Social Impact: Implications for the Interview

- Empathy
- Normalization
- Engagement and rapport
- Establish safe environment
- Address concerns
- Explain the process
- Empower interviewee



Financial Impact: Implications for the Interview

- Reluctance to report
- Dependency on the offender
- Minimize abuse
- Self-blame

Implications for the Interview

- Reluctant to disclose abuse
- Minimize impact
- Self-blame
- Shame
- Embarrassment





Biases & Assumptions

Class Activity: Bias and Assumptions

Case Synopsis:

- Jenny is the reported victim of domestic violence. The police report indicates the argument began when she accused her husband, Marty, of having an affair. Jenny reports that Marty said she was “crazy”, and he became angry. Marty tried to embrace her; she pushed him away and told him to stay away from her. Marty came toward Jenny in an aggressive manner, pushed her backwards into a wall and then began to strangle her. Jenny reports that she saw stars and then things went dark. The next thing she knew she was lying on the floor.
- You are conducting an interview with Jenny. She tells you that her brain feels like scrambled eggs and her mind is a blank, she is 25.

Ageism

“The stereotyping and discrimination against individuals or groups on the basis of their age” (World Health Organization)

- Common stereotypes of aging:
 - All older adults will get dementia
 - Older adults are not sexually active
 - Older adults are set in their ways
 - Older adults are not capable of learning new information
 - Most people end up in a nursing home
 - Older adults all act alike
 - Older adults are irritable and angry
 - Older adults are not tech-savvy

Addressing Stereotypes in the Interview

- Be aware of biases/assumptions
- Don't use condescending and patronizing language and tone
- Don't assume that you should speak loudly or slowly
- Allow sufficient time
- Use a strengths-based perspective



Older Adults & Abuse Dynamics

Victims

- Diverse group
- Continuum from independent to highly dependent
- Varying levels of independence
- Bring rich life experiences
- Life-long problem solvers



Elder Abuse Dynamics

A small percentage of elder abuse cases are reported

- 2018-states received 1.7 million reports of adult maltreatment
 - 45% were accepted for investigation
 - 52.7% were referred by APS
 - 10.7% were referred by relatives
 - 5.2% were self referrals

Elder Abuse Dynamics

- Inability to report
 - Cognitive limitations
 - Physical limitations
 - Lack of telephone or other means to report
 - Isolation
 - Abuser tactics
- Victim's fears
 - Looking foolish
 - Fear of publicity
 - Loss of independence
 - Not being believed
 - Losing support
 - Further harm or abuse
 - Retaliation
 - Deportation



Risk Factors for Abuse

- Gender
- Race
- Marital status
- Relationships/prior abuse
- Health and dependency
- Social isolation
- Low supports
- Income
- Age prejudice



Implications for the Interview

- Interviewees may:
 - Be reluctant
 - Recant
 - Self-blame
 - Minimize offending behaviors
 - Defending or protecting the offender

Perpetrators

- People in ongoing and trusted relationships
 - Intimate partners
 - Family members
 - Caregivers
 - Friends
 - Faith leaders
 - Cultural leaders
 - Fiduciaries

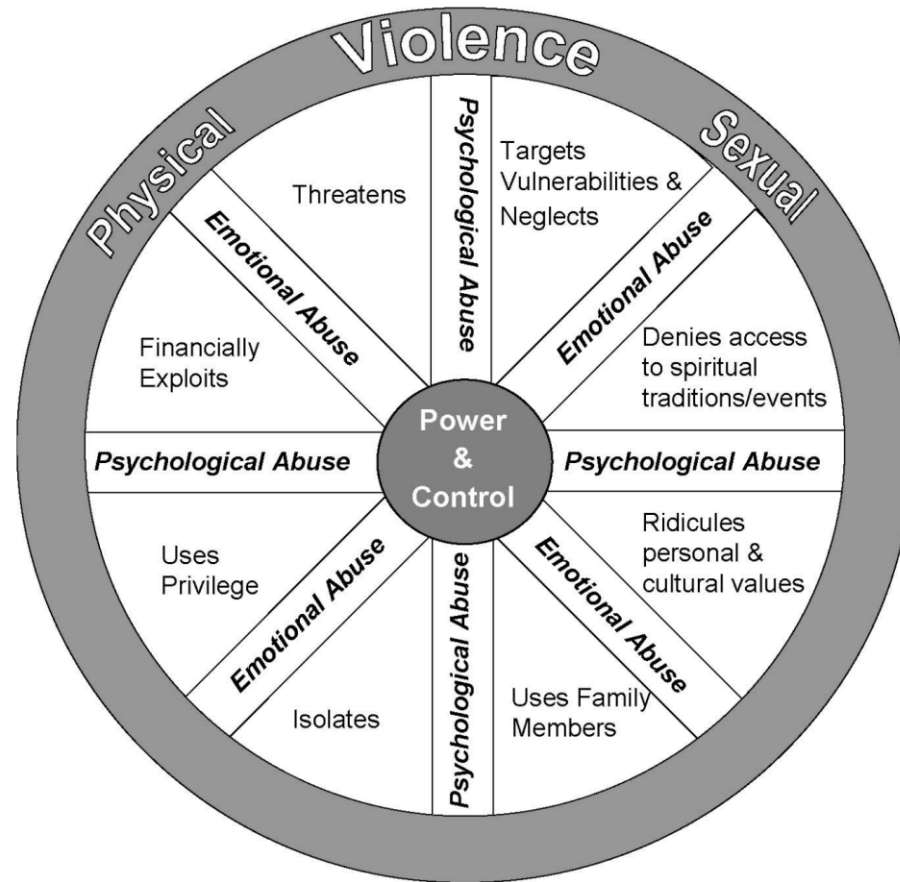


Perpetrator Tactics

- Power and Control
 - Threats
 - Intimidation
 - Economic control
 - Emotional abuse
 - Use of children
 - Isolation
 - Assertive privilege
 - Physical violence
 - Sexual violence

- Power and Control in Later Life
 - Abuse of dependency
 - Ridiculing values
 - Using family
 - Isolation
 - Financial exploitation
 - Emotional abuse
 - Psychological abuse

Abuse in Later Life Wheel





Perpetrator Tactics

- Undue Influence

“Excessive persuasion that causes another person to act or refrain from acting by overcoming that person’s free will and results in inequity.”

Multiple Hypotheses

- Remain open-minded, objective and neutral
- Consider any reasonable explanations from the report
 - Try to come up with at least THREE
- This will reduce likelihood of drawing premature conclusions
- Allows interviewer to remain unbiased

Small Group Activity: Perpetrator Tactics and Establishing Alternative Hypotheses

1. You will be placed in breakout rooms
2. Everyone in your breakout room will have the same scenario
3. You will have 10 minutes to discuss:
 - Possible perpetrator tactics for your case scenario
 - 3 hypotheses for your case
4. After 10 minutes, you will return to the large group
5. Designate a spokesperson in your group to report back

Small Group Activity: Perpetrator Tactics and Establishing Alternative Hypotheses

- Discussion
- Perpetrator tactics
- Alternative hypotheses



Pre-Interview Considerations

Pre-Interview Considerations

- Not intended as a questionnaire
- Guide the MDT to gather information
- Trauma-informed
- Private conversation

- Two types
 - Self Reported
 - Caregiver Reported

The Aging Body

- Pre-Interview Considerations
 - Consult with medical staff
 - Medications
 - Care needs
 - Level of supervision
 - Length of interview
 - Location of interview
 - Body position





Biological Changes

- Vision
 - Reading materials
 - Proper lighting
 - Asking about details
- Hearing
 - Hearing aids
 - Use a normal tone of voice
 - Maintain eye contact
- Neither are indicator of cognitive abilities***



Biological Changes

- Taste and Smell
 - Taste buds and age
 - Less sensitive to certain tastes
 - Asking about details



Biological Changes

- Skin
 - Thinning skin
 - Changes in elasticity
 - Bruises



Problematic Injuries/Conditions

- Bruises
 - Color does not indicate age
 - 90% of accidental bruises were on extremities and not the trunk, neck or head
 - Less than ¼ of older adults with accidental bruises remembered how they got them
 - Medications impact bruising
 - Bruises on face, arms and back are highly suggestive of abuse

(Mosqueda et al., 2005)

Problematic Injuries/Conditions

- Pressure Ulcers (bedsores, decubitus ulcers)
 - Persistent pressure
 - Limits of blood flow
 - Most common: heels, ankles, hips shoulder blades, spine, tailbone
 - Poor nutrition
 - Incontinence
 - Insufficient hydration
 - Hours, days, weeks, months





Biological Changes

- Motor Function and Strength
 - Muscle atrophy
 - Falls/fractures
 - Layout of room



Pre-Interview Considerations

- Physical accessibility
 - Canes, walkers, wheelchairs, transfers
- Considerations for scheduling
 - Medications, time of day, typical schedule
- Interview environment
 - Neutral, safe, private, comfortable, transportation considerations



Considerations for Medications and Medical Issues

- Dosage
- Reactions
- Counter acting medications/supplements
- Abuse
 - Obtain compliance
 - Keep someone quiet
 - Create confusion
 - Suggest incompetence



Pre-Interview Considerations

- Informed Consent
 - Maintain dignity/respect
 - Transparency:
 - Steps of the interview process
 - Purpose of recording
 - Who the information will be shared with
 - Ability to take breaks
 - Right to revoke consent



Pre-Interview Considerations

- Individual needs
 - ADA compliant
 - Appropriate furniture
 - Accessible bathrooms
 - Offer drinks/snacks
 - Transfers/positioning
- Comfort items
 - Weighted blankets, pillows, manipulatives

Pre-Interview Considerations

- Use of Victim Advocates/Support Persons
 - Advantages
 - Calms victim
 - Trauma informed
 - May assist with redirection
 - Disadvantages
 - May influence responses
 - Increases number of people present
 - May lead to unnecessary distractions





General Considerations: Interviewing Older Adults



The Aging Brain

Normal Changes to the Brain

**Varies from person to person

- Decreased ability to
 - Pay attention
 - Find words
 - Recall names
 - Multitask
 - Divide attention
- Increased abilities
 - Extensive vocabulary
 - Inductive reasoning
 - Accentuating the positive
 - Attaining contentment



General Considerations

- Make the interview a conversation
- Older adult is the expert
- Create victim/witness-centered environment
- Prioritize gathering what the older adult knows
- Remain open-minded, neutral and objective
- Be aware of biases/assumptions



Communication Style of Some Older Adults

- Negative qualifiers
 - (e.g., “I think,” “I’m not sure,” etc.)
- Pacing
 - Older adults may speak slower
- Language
 - May have occasional problems with word finding

Communication Style of Some Older Adults

- Details and narrative organization
 - May provide fewer details spontaneously
 - Creates need to ask follow-up questions
 - Be careful of making follow-up questions leading/suggestive
 - May relay information out of order
 - May provide information that is superfluous/off-topic
 - Be patient and redirect back to matter at hand without being dismissive



As with victims of all ages

- Avoid
 - Leading/suggestive language
 - Negative/double negatives
 - Figurative language
 - Professional jargon/technical terms
 - Vague language
 - Compound/complex questions
 - Stacked questions
 - Patronizing tone
 - Questions that begin with “why”



Communication Style of Older Adults

- Be strengths based
 - Use strengths-based language
 - Pose questions in a neutral manner
 - Use clear and concrete language
 - Word pace and pause to mirror the older adult
 - Utilize prompting cues that use the older adult's words
 - Use polite language to redirect
 - Cultural humility

Leading and Suggestion

- People of all ages are susceptible to leading/suggestion
- Memory is not a complete copy of events
- Dependent on how information is encoded at the time

- Suggestive: “Did they have a knife?”
- Leading: “They took your money, didn’t they?”

Happy 110th Birthday Flossie Dickey!



News Studio

Cheney, WA

(whooshing)

FOX 28

8:52 39°

Cognitive Decline

- Reversible

- Infection
- Depression
- Medication reaction
- Medication overdose
- Illicit drugs
- Alcohol
- Opioid Pain medications
- Sleep Medications
- Antidepressants

- Irreversible

- Neurocognitive Disorders (NCDs)
 - AKA: Dementia

Types of Dementia

- Alzheimer's disease
 - Vascular NCD
 - Frontotemporal NCD
 - Substance/medication-induced NCD
 - NCD with Lewy bodies
- NCD due to:
 - Parkinson's disease
 - Traumatic brain injury
 - HIV infection
 - Huntington's disease
 - Prion disease
 - Other medical conditions
 - Multiple etiologies

WHAT IS DEMENTIA?





Dementia/NCDs

- Approximately 10% of people over 65 years
- Up to 50% of people over 85 years
- Onset can be slow or sudden
- May affect ability to recall old information or learn new information
- Not all dementias affect memory (especially in early stages)

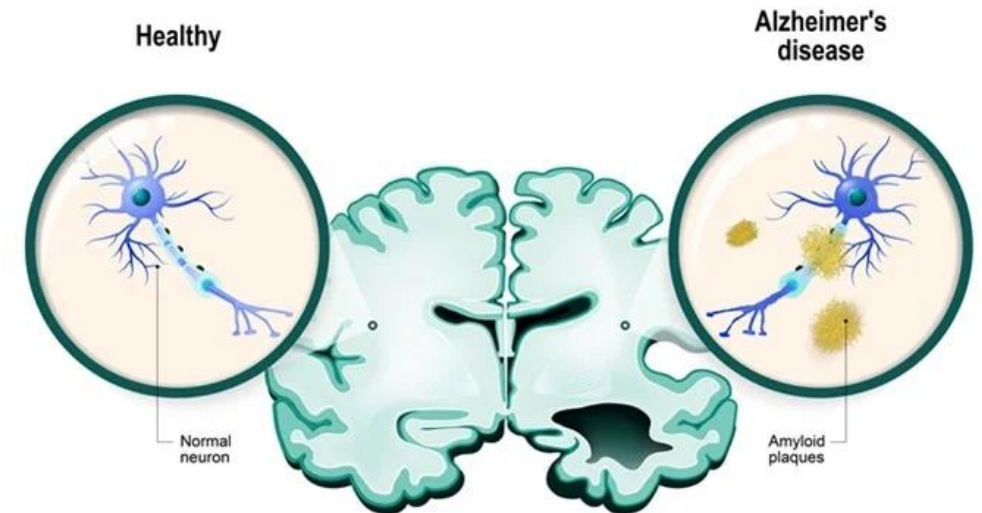


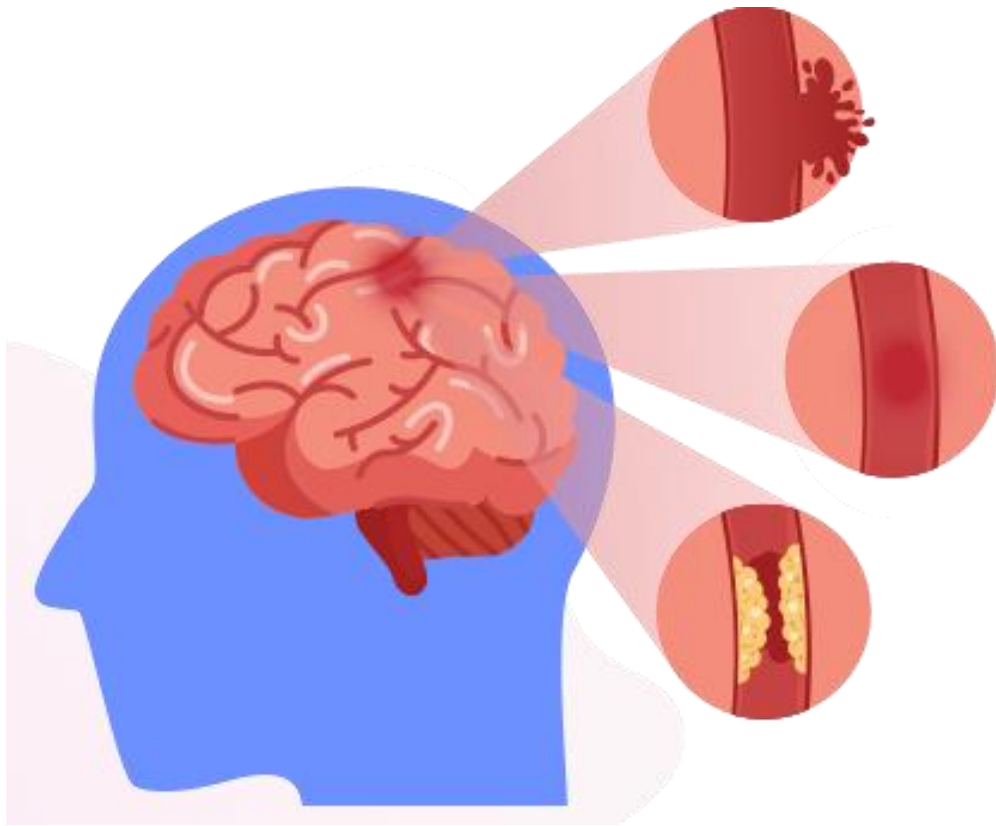
Dementia/NCDs

- Diagnosis
 - Significant cognitive decline from a previous level of performance in one or more area:
 - Learning and memory
 - Language
 - Executive function
 - Complex attention
 - Perceptual-motor
 - Social cognition

Common Subtypes of Dementia/NCDs

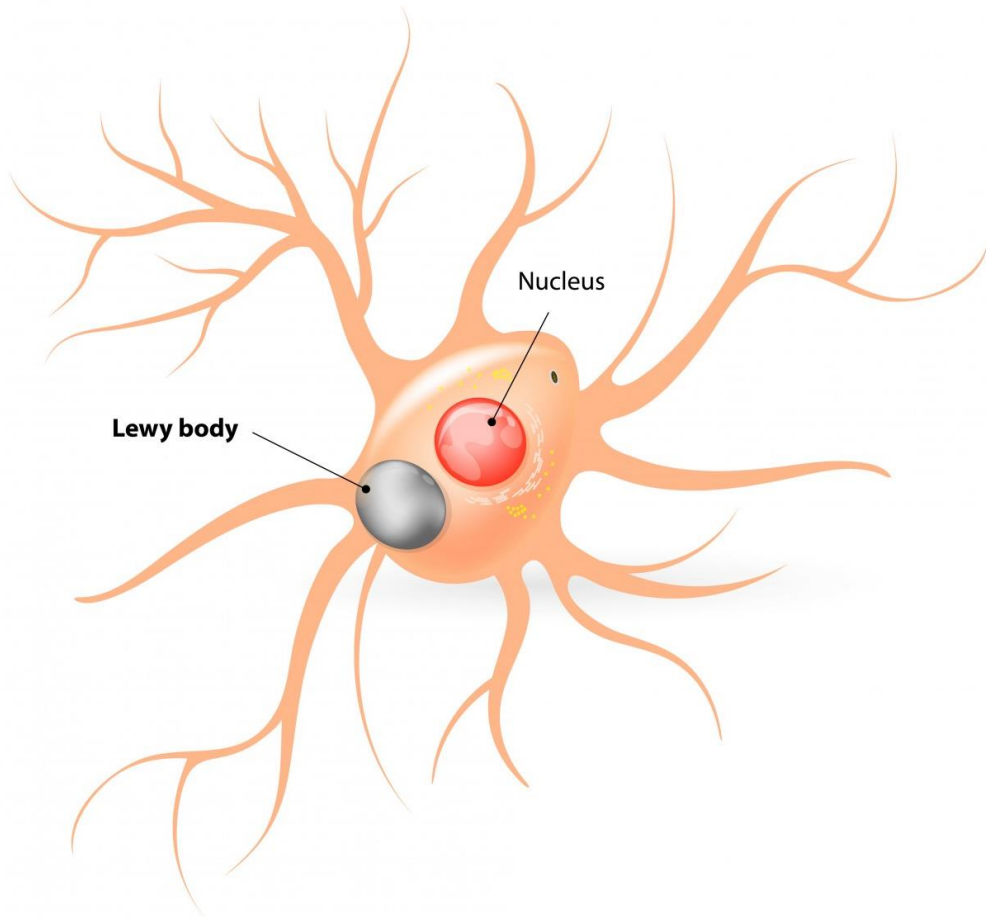
- Alzheimer's disease
 - Affects approximately 5.8 million Americans
 - 5th leading cause of death for older Americans
 - Gradual onset
 - Progressive Degeneration
 - Memory impairment
 - Language deficits
 - Declines in visual/spatial processing





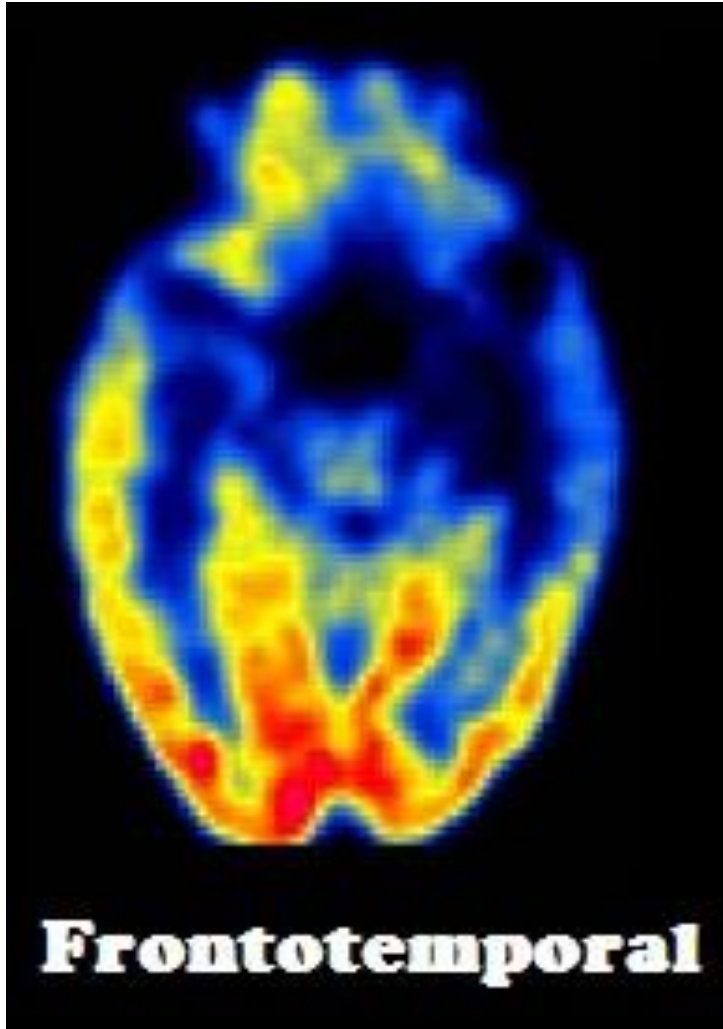
Common Subtypes of Dementia/NCDs

- Vascular Dementia
 - Damage to the brain
 - Restricts blood flow
 - Series of small strokes
 - Single major stroke
 - Other chronic conditions
 - Functional and cognitive deficits are determined by location of stroke(s)



Common Subtypes of Dementia/NCDs

- Lewy body disease (LBD)
 - Sleep disturbances
 - Visual hallucinations
 - Visuospatial impairment
 - With or without memory impairment
 - May also develop Alzheimer's, which does cause memory loss



Common Subtypes of Dementia/NCDs

- Frontotemporal Dementia (FTD)
 - Affects frontal and temporal parts of the brain
 - Changes in personality
 - Changes in behavior
 - Memory is not affected in early stages
 - Movement is affected: tremors, rigidity, muscle spasms, loss of coordination, swallowing problems
 - Most people develop symptoms between 45 and 60 years



Person First Language

- Do not use the word “demented”
- Instead
 - Explore what that means for the individual
 - Ask about how they learned the individual has dementia
 - Discuss how dementia is affecting the individual

Changes to the Brain

Implications for the interview

1. Be prepared for differences when interviewing older adults verses younger adults
2. Ask about any accommodations (Pre-interview considerations)
3. Be patient, give sufficient time





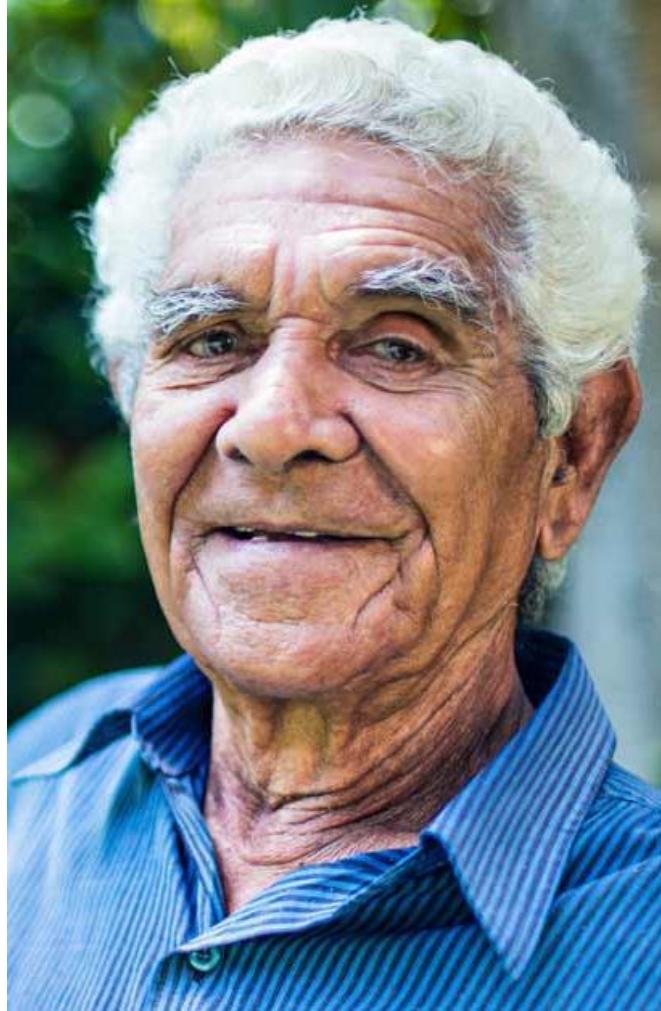
Dementia/NCDs

- Possible behavioral characteristics
 - Inability to complete simple tasks
 - Poor judgment
 - Unrealistic plan making
 - Combative behavior
 - Suicidal ideation
 - Frequent falls/stumbling
 - Disregarding social conventions
 - Levying accusations against others



Stages of Alzheimer's Dementia

- Continuum of stages:
 - No impairment – Severe decline
- Based on signs and symptoms on how the brain's functions to meet the older adult's needs are impacted
- **NOT** solely based on memory/recall
- Varies from person to person



Stages of Alzheimer's Dementia

- Older adults with severe impairment
 - Severe memory loss
 - Unable to recognize people close to them or themselves
 - Believe they are in a different place
 - Believe they are in a different time period
- May not be able to participate in a forensic interview
 - If attempted, proceed with caution
 - Ensure interview is legal and ethical
 - Watch for signs of distress

Stages of Alzheimer's Dementia

- Older adults with mild to moderate impairments
 - Forgetful of details, especially recent events
 - Likely to repeat
 - Likely to lose train of thought
 - Slower to grasp complex ideas
 - Difficulty handling money
 - Losing interest in hobbies/activities
- Likely can participate in a forensic interview
 - May need to be re-oriented to time/place

Mild and Moderate Impairments

Reorienting to time/place example:

Interviewer: “Tell me about the place you are at right now.”

This should not be a routine question but can be used when trying to reorient an individual or see if cognitive decline is affecting the interview.

Interviewee: “I am at a police station.”

Mild and Moderate Impairments

Reorienting to time/place example:

Interviewer: “Tell me about the place you are at right now.”

Interviewee: “I am at your house.”

This could be cause for concern because it is out of context.

Mild and Moderate Impairments

Reorienting to time/place example:

Interviewer: “Tell me about the place you are at right now.”

Interviewee: “I am at a police station.”

Interviewer: “Why do you think you are at a police station?”

Interviewee: “Because you are a police officer and that is where you work.”

Do not correct before asking for their reasoning

Mild and Moderate Impairments

- Other signs
 - Talk about people who are not present or deceased as if they are there
 - Poor judgment
 - Inability to explain actions logically
 - Wandering
 - Becoming lost easily
 - Not knowing where they live
 - Rapid mood swings
 - Suspiciousness/agitation
 - Slow walking gait/shuffling
- Interviewers should not guess or attempt to diagnose

Interview Challenges

- Do not make assumptions based on diagnosis or lack of diagnosis
- Be aware of these patterns
 - Difficulty finding words/the right words
 - Repeat stories
 - Feeling overwhelmed
 - Extensively use familiar words
 - Describe objects instead of naming them
 - Lose track of ideas when speaking
 - Unable to answer a question that asks them to describe multiple events

Dementia: Strategies for Communicating

- Show interest
- Listen
- Be respectful
- Plan for more time
- Consider best time of day
 - Sundowning
- Physical approach
 - Approach from the front
 - Face the person
 - Maintain eye contact
 - Minimize using hands
 - Avoid sudden movements

Dementia: Strategies for Communicating

- Make water available
- Remove distraction
- Minimize number of people
- Consider medications
- Physical approach
 - Stay 6 feet apart
 - Wave as approaching
 - Approach from dominant side
 - Shake hands, but don't force
 - Stay at supportive angle, do not lean in unless mirroring the older adult's body language

Dementia: Strategies for Communicating

- Style/Affect

- Be warm, friendly, conversational
- Low-pitched, reassuring tone
- Don't shout or yell
- Take breaks
- Don't argue
- Gently redirect
- Beware of triggers

- Verbal approach

- Introduce yourself
- Ask how they would like to be addressed
- Develop rapport
- Do not infantilize
- Speak slowly and clearly
- Keep conversation brief
- Pause
- Explain steps/actions

Question Structure

- Do
 - Use real names
 - Repeat if necessary
 - Give simple step-by-step instructions
 - Take time to establish rapport
 - Use the entire funnel to establish a baseline
- Don't
 - Use pronouns
 - Use slang/figures of speech
 - Finish the older adult's sentences
 - Stack instructions or questions
 - Say "I've already told you that..." or "like I said before..."





Critical Issues: Victims with Dementia

- Interviews should always be considered or attempted
- Other considerations
 - Using supportive touch
 - Addressing agitation
 - Dealing with reality disorientation



Critical Issues: Victims with Dementia

- Using supportive touch
 - When initiated by the interviewee
 - Intentional decision
 - Rapport building
 - Redirection

Critical Issues: Victims with Dementia

- Addressing agitation
 - Use language that implies doing an activity together: “Let’s talk”
 - Keep body language soft/open
 - Use calm tone
 - Use simple language
 - Use short questions
 - Redirect to a new topic
 - Do not argue
 - Provide supportive statements



Critical Issues: Victims with Dementia

- Reality disorientation
 - Redirect
 - Do not correct
 - Do not attempt to reorient to reality
 - Reduce anxiety



Reality Disorientation Example:

Interviewee: *Where's my father? I'm looking for my father!*

Interviewer: *I have not seen him. Tell me about your father.*

Interviewee: *My father is a good man. I miss him.*

Interviewer: *Thank you for telling me about your father. I'm not sure where he is but let me ask someone to find out. Now I'm going to ask you more about _____.*

Reality Disorientation Example:

Interviewee: *I want to go home!*

Interviewer: *Tell me about your home.*

Interviewee: *I want to go home!*

Interviewer: *I hear you saying you want to go home. I've never seen your home before—what does it look like?*

Reality Disorientation Example

- What if verbal redirection doesn't work?
 - Consider engaging in an activity
 - Offer a snack
 - Adjust the room temperature
 - Take a bathroom break
 - Watch for signs of pain/discomfort
 - Take a break
 - Come back a different day



Virtual Small Group Activity: Pre-Interview Considerations

1. Participants will be placed in breakout rooms based on your scenario.
2. Participants will have 10 minutes to work together to discuss which pre-interview considerations checklist would be most appropriate to use based on the case example (i.e., Caregiver or self-reported checklist).
3. As a group, discuss which considerations might need to be made based on the information provided.
4. Choose a representative from your group to share what was discussed with the large group after the activity.
5. After 10 minutes, participants will return to the main room to discuss as a large group.



SAFE Model



SAFE Semi-Structured Steps

- **Establishing rapport**
- Establishing interview guidelines
- Establishing a baseline
- Check-in
- Transition to allegation(s)
- Exploring allegations
- Respectful closure



Establishing Rapport

- Creates a relaxed and supportive environment
- Reduces the older adult's anxiety
- Establishes trust between the interviewer and older adult
- Helps the interviewer get to know the older adult and create a baseline for the interviewer to:
 - Identify strengths
 - Identify cognitive and social issues
 - Assess the older adult's comfort level
 - Assess the older adult's mode of communication



Establishing Rapport

Introduction

- Introduce self and role
 - Interviewer: *Hi, my name is _____, and I am a _____ (forensic interviewer, police officer, social worker, etc.). My job is to _____.*
- Ask the older adult how they would like to be addressed

Introduction Example

Interviewer: *Hi, Martha Jones. My name is _____. How would you prefer I address you as we are talking here today?*

Martha Jones: *All my friends call me Marty.*

Interviewer: *Do you mind if I call you Marty?*

Martha Jones: *Just don't call me Martha. My parents and teachers were the only ones to call me that.*

Establishing Rapport

Make it personal

Interviewer: *I'm looking forward to talking with you today and before we get started, I'd like to get to know you better. Tell me about yourself.*

Interviewee: *I play cards and bingo on the weekends; I also enjoy crocheting.*

Interviewer: *You said that you play cards on the weekends. Tell me more about playing cards.*



Establishing Rapport

- Be friendly, warm conversational
- Body language should remain neutral, not cold.
- Engage in conversation about topics of the older adult's choosing
- Consistently pose open-ended questions
- Use prompting cues that repeat the end of the previous statement
- Do not move away from engagement and rapport until the older adult is demonstrating that they are comfortable, and that anxiety is reduced.
- Consider taking breaks or a multisection interview
- Be prepared to return to rapport building at any point during the interview

Redirection strategies:

- Ask about their day
- Ask about the people around them
- Ask about the place they live
- Ask about their family
- Ask about their work
- Any hobbies/interests earlier in life



SAFE Semi-Structured Steps

- Establishing rapport
- **Establishing interview guidelines**
- Establishing a baseline
- Check-in
- Transition to allegation(s)
- Exploring allegations
- Respectful closure



Establishing Interview Guidelines

- Introduce guidelines conversationally
- Avoid listing guidelines
- Guidelines to consider when interviewing older adults:
 1. Don't know/don't guess
 2. Don't understand/doesn't make sense
 3. Correct me
 4. Don't want to talk about it
 5. Say it when you remember it

Establishing Interview Guidelines

1. Don't Know/Don't Guess

Example:

Interviewer: *“If I ask you a question and you don't know the answer, tell me you don't know. I don't want you to guess.”*

Establishing Interview Guidelines

2. Don't Understand

Example:

Interviewer:

“If I ask you a question that is confusing or does not make sense, please tell me, and I will try to make the question clearer.”

Establishing Interview Guidelines

3. Correct Me

Example:

Interviewer: *“If I get something wrong, please correct me. I want to make sure I understand everything you tell me.”*

Establishing Interview Guidelines

4. Don't Want to Talk About It

Example:

Interviewer: *“If I ask a question that you don't want to answer, just tell me, and I will ask you about something else. We will only discuss what you want to talk about.”*

Establishing Interview Guidelines

5. Say It When You Remember It

Example:

Interviewer: *“If you remember information about something we have already talked about, please share that with me as soon as you think of it.”*

Establishing Interview Guidelines

- Summary
 - Guidelines should be conversational and agreed upon.
 - Guidelines should not just be listed for the older adult.
 - If a follow-up interview is needed, the interviewer should revisit the guidelines in each session.

Pivoting

- Take notice of the verbal cues and/or body language
- Take a break/consider multisection interview
- The interviewer should watch for and address any signs that presenting a guideline may have created a block or barrier in communication with the older adult

Virtual Small Group Activity: Introduction, Engagement and Rapport, and Interview Guidelines

1. Each participant will be to a breakout room in groups of 2.
2. To start, have the groups decide who will be the first interviewer and interviewee.
3. The first interviewer will have 15 minutes to introduce themselves, their role, the setting, develop rapport, and interview guidelines with the interviewee.
4. When being asked questions, the interviewee should share things about themselves (e.g., hobbies, hometown, food, sports music, etc.)
5. Then the participants will switch roles. The interviewee now becomes the interviewer and will have 15 minutes to introduce themselves, develop rapport, and establish interview guidelines.
6. After the groups are finished, participants will return to the main room and will debrief as a large group.



SAFE Semi-Structured Steps

- Establishing rapport
- Establishing interview guidelines
- **Establishing a baseline**
- Check-in
- Transition to allegation(s)
- Exploring allegations
- Respectful closure



Establishing a Baseline

- Continues rapport
- Establishes mutual understanding
- Allows older adult to demonstrate abilities
- Gives interviewer baseline for question response

- Topic selection
 - Rich in details
 - Neutral
 - Episodic

Establishing a Baseline

Example:

Interviewer: *“I understand you enjoy baking. Tell me about a time that you baked one of your favorite dishes.”*

Establishing a Baseline

- Organizing of accounting
 - Older adult controls information
 - Interviewer guides the flow
- Older adult feels successful
- Demonstrates that the interviewer wants to know everything
- Familiarizes the older adult with the question types
- Allows demonstration of free recall



Establishing a Baseline

While engaged in baseline development during organization of accounting, it is important to keep in mind the ICE acronym:

- **Identify** an event.
- **Continue** through accounting.
- **Elicit** additional information.

Establishing a Baseline

Identify an event

Bookending prompt example:

Interviewer: *“Think about your morning this morning. When you’re ready, tell me everything that happened from the time you woke up until the time you left your home.”*

Establishing a Baseline

Continue through accounting

Interviewer: *“When I ask questions about something that happened, I want you to tell me everything about it from beginning to end, even things that may not seem important. Think about your morning this morning, and when you’re ready, tell me everything that happened, starting with when you woke up and ending when you left your home.”*

Establishing a Baseline

Elicit details

Interviewer: *“The first thing that you told me is that you woke up. Tell me more about waking up this morning.”*

Interviewee: *“I woke up because my dog was barking at my bedroom door. He really needed to go outside. So, I walked to our backdoor and let him out in the yard. I waited there until he was finished and shut the door when he came back inside. Then I went to the bathroom and started getting ready for the day.”*

Establishing a Baseline

- Summary

- Spend an appropriate amount of time
- Ask assorted question types and pay attention for most productive responses
- Topic selection is very important
- Be consistent in your use of episodic language (e.g., “What happened after you got home?”)
- Use prompting cues that repeat the end of the previous statement
- Depending on the needs of the older adult, it may be appropriate to take a break or consider a multisession interview after any of the semi-structured steps

Virtual Small Group Activity: Establishing a Baseline

1. Each participant will be to a breakout room in groups of 2.
2. To start, have the groups decide who will be the first interviewer and interviewee.
3. The first interviewer will have 10 minutes to establish a baseline with the interviewee by discussing a neutral/positive event.
4. When being asked questions, the interviewee should share things about themselves (e.g., hobbies, hometown, food, sports music, etc.)
5. Then the participants will switch roles. The interviewee now becomes the interviewer and will have 10 minutes to establish a baseline with the interviewee by discussing a neutral/positive event.
6. After the groups are finished, participants will return to the main room and will debrief as a large group.



SAFE Semi-Structured Steps

- Establishing rapport
- Establishing interview guidelines
- Establishing a baseline
- **Check-in**
- Transition to allegation(s)
- Exploring allegations
- Respectful closure



Check In

- How is the older adult feeling?
- Do they have any questions?
- Assess for any blocks or barriers
- Provide reassurance

Check In

Example:

Interviewer: *“Before we keep going, I’d like to know how are you feeling so far about talking with me today.”*

Interviewee: *“I feel okay.”*

Interviewer: *“Do you have any questions for me about the interview?”*

Interviewee: *“No.”*

Check In-Overcoming Blocks and Barriers

- Presentation of older adult:
 - Appears nervous, scared, apprehensive, or withdrawn
 - Stops answering questions
 - Changes in body language
 - Changes in voice, volume or tone
- Interviewer strategies:
 - Acknowledge change (don't assume reason)
 - Provide reassurance
 - Take a break

Check In-Overcoming Blocks and Barriers

Example:

Interviewer: *"I noticed that you stopped answering questions. Tell me about not answering questions."*

Interviewee: *"I don't want to talk about it."*

Interviewer: *"It's okay with me if you don't want to talk about it. I want to understand how you are feeling right now—how are you feeling?"*

Interviewee: *"I'm scared."*

Interviewer: *"Tell me about feeling scared."*

Interviewee: *"I'm scared because they said if I told anyone they would hurt me."*

Check In-Overcoming Blocks and Barriers

If blocks and barriers can't be broken down:

Interviewer: *“Thank you for letting me know you don't want to talk any more today. Before we finish, I want to check in with you. How are you feeling right now?”*



Check In-Overcoming Blocks and Barriers

- Supportive Statements
 - Be empathetic
 - Express concern
 - Address older adult's feelings
 - Reorient as needed
 - Provide reassurance

Check In-Overcoming Blocks and Barriers

Supportive Interviewer Statements:

“From what you have told me, I can understand how you would be (stated emotion).”

“I really appreciate you helping me understand what happened.”

“Take your time—you are doing good job providing information about ____.”

“Lots of people that I listen to tell me that they feel ____ when we are talking—it is okay to feel ____.”

Virtual Small Group Activity: Overcoming Blocks and Barriers

1. Participants will be placed in breakout rooms based on your scenario.
2. As a group, participants will have 5 minutes to identify and discuss at least three barriers your assigned scenario.
3. Choose a representative from your group to share what was discussed with the large group after the activity.
4. After 5 minutes, participants will return to the main room to discuss as large group.



SAFE Semi-Structured Steps

- Establishing rapport
- Establishing interview guidelines
- Establishing a baseline
- Check-in
- **Transition to allegation(s)**
- Exploring allegations
- Respectful closure



Transition to Allegation(s)

- Open-ended
- Consider strengths
- Consider baseline
- Consider communication style
- Jurisdiction/team input
- Start by acknowledging what has already happened

Transition to Allegation(s)

- Sample Language

- *“Thank you for telling me about . . . “*
- *“Now that I have learned about you . . .”*
- *“Now that I have learned about some things you like to do. . .”*
- *“Now that I have learned more about your family. . . “*
- *“Now that you have told me about your job. . .”*



Transition to Allegation(s)

- Transition Options:
 - Open invitation
 - Externally verifiable information/context

Transition to Allegation(s)

Externally verifiable information/context

- Considerations
 - Trauma-informed
 - Don't be interrogative
 - Ensure the information can be verified
 - Never link any person to an act/allegation

Transition to Allegation(s)

- Externally verifiable information/context
 - *“I understand you went to the hospital yesterday. Tell me about going to the hospital.”*
 - *“I see you have a cast on your arm. Tell me about the cast.”*
 - *“I understand you told your daughter that you don’t feel safe at the place where you live. Tell me more about not feeling safe.”*
 - *“Tell me everything you saw yesterday when Samuel was in the hallway with Sally.”*
 - *“I understand the police came last night. Tell me more about the police coming.”*

Virtual Small Group Activity: Transition to Allegations

1. Participants will be placed in breakout rooms based on your scenario.
2. As a group, discuss any transition options.
3. Choose a representative from your group to share what was discussed with the large group after the activity.
4. After 10 minutes, participants will return to the main room to discuss as large group.



SAFE Semi-Structured Steps

- Establishing rapport
- Establishing interview guidelines
- Establishing a baseline
- Check-in
- Transition to allegation(s)
- **Exploring allegations**
- Respectful closure

Exploring Allegations

- Continue to gather reliable information
- Utilize format established during baseline development
- Continue to ask open-ended questions
- Avoid assumptions

Question Structure

- Do
 - Use real names
 - Repeat if necessary
 - Give simple step-by-step instructions
 - Take time to establish rapport
 - Use the entire funnel to establish a baseline
- Don't
 - Use pronouns
 - Use slang/figures of speech
 - Finish the older adult's sentences
 - Stack instructions or questions
 - Say "I've already told you that..." or "like I said before..."



As with victims of all ages

- Avoid
 - Leading/suggestive language
 - Negative/double negatives
 - Figurative language
 - Professional jargon/technical terms
 - Vague language
 - Compound/complex questions
 - Stacked questions
 - Patronizing tone
 - Questions that begin with “why”

Mindset

- Dynamics of physical abuse
- Dynamics of sexual abuse
- Dynamics of financial abuse
- Dynamics of neglect



Exploring Allegations

- Older adult is the expert
- Interviewer guides the flow
- Encourage free recall
 - General overview
 - ICE
 - Identify an event
 - Continue through accounting
 - Elicit additional information

Exploring Allegations

- General Overview
 - Abuse/Neglect
 - Allow for a general overview of the situation before discussing an event from beginning to end
 - Gives interviewer a sense of abuse/maltreatment overall
 - Helps interviewer/interviewee to identify the first topic to discuss

Exploring Allegations

- Identify
 - Abuse/Neglect
 - Pick a particular event or encourage the interviewee to pick an event
 - Prompt the older adult to provide details from beginning to end
 - Do not ask about additional details or solicit any other information until the end is reached
 - May require the use of book-ending prompts

Exploring Allegations

- Identify
 - Abuse/Neglect
 - The most recent event or most distant event may be easier to remember, depending on the older adult and/or diagnosis
 - Some older adults may benefit from working backwards-starting with the end of an event and working toward the beginning

Exploring Allegations

- Continue
 - Abuse/Neglect
 - Use words like “What happened next?” or “And then what happened?”
 - Do this until the natural end of the event
 - Use words like “What happened right before?”
 - Do this until the natural beginning
 - Resounding can be helpful with both

Exploring Allegations

- Elicit
- Abuse/Neglect
 - Ask about any outstanding details
 - Location, other parties present, conversations, thoughts, feelings, etc.
 - Continue to use the most open-ended question types
 - If a direct question is asked, follow up with an open-ended question
 - Use the older adult's exact words, do not paraphrase

G-ICE: Physical Abuse Example

General overview Example:

Interviewer: *“You told me you aren’t feeling safe at the place where you live. Tell me more about that.”*

Interviewee: *“Everything started off okay when I first moved in; everyone was really nice. As I got to know people more, and as staff changed, things have not been so good. I am afraid to ask staff for anything because they make me feel like a burden, and it takes them forever to even show up. It’s only been bumps and bruises so far—they don’t seem to care about me, but I’m afraid all the time that things will get worse.”*

G-ICE: Physical Abuse Example

Identify Example:

Interviewer: *“You told me that staff was rough with you and caused the bumps and bruises. When you’re ready, tell me everything that happened from the beginning to the end.”*

Interview Adaptations

Breaking down questions may be necessary

Interviewer: *“Think about what happened when staff was rough with you. When you’re ready, tell me everything that happened from the beginning to the end.”*

Interviewer: *“Tell me about the first thing that happened when staff got rough with you.”*

Interview Adaptations

Breaking down questions may be necessary

Interviewer: *“What was the first thing staff did when they got rough with you?”*

Interviewer: *“When staff first got rough with you, were you sitting, standing, or something else?”*



Exploring Allegations

- Sensory Questions
 - Sensory details can be very powerful
 - Can assist in memory retrieval
- Examples:
 - *Tell me everything you saw when _____.*
 - *Tell me about everything you heard when _____.*
 - *Tell me about everything you smelled when _____.*
 - *Tell me about everything you tasted when _____.*



Exploring Allegations

- Questions about thoughts and feelings
 - Do not naturally come up when sharing about an event
 - Can correlate thoughts and emotions
 - Demonstrates that their feelings are important/valuable
- Sample Questions
 - *How were you feeling when _____?*
 - *What were you thinking about when _____?*

Exploring Allegations

- General Overview
 - Financial Crimes
 - Allow for a general overview of what has been happening
 - Helps interviewer/interviewee to identify who is involved, how the crime happened

Exploring Allegations

- Financial Crimes
 - Identify
 - Ask about conversations or events one at a time-
 - Conversations (phone call, in person, on-line, etc.)
 - Trip to a bank/financial institution
 - Signing of paperwork
 - How the older adult found out
 - Allow the older adult to tell the story from start to finish

Exploring Allegations

- Remember...
 - The most recent event or most distant event may be easier to remember, depending on the older adult and/or diagnosis
 - Some older adults may benefit from working backwards-starting with the end of an event and working toward the beginning

Exploring Allegations

- Continue
 - Use words like “What happened next?” or “And then what happened?”
 - Do this until the natural end of the event
 - Use words like “What happened right before?”
 - Do this until the natural beginning
 - Resounding can be helpful with both

Exploring Allegations

- Elicit
 - Ask about any outstanding details
 - Location, other parties present, conversations, thoughts, feelings, etc.
 - Continue to use the most open-ended question types
 - If a direct question is asked, follow up with an open-ended question
 - Use the older adult's exact words, do not paraphrase

G-ICE: Financial Crime Example

General overview Example:

Interviewer: *“You told me you have concerns about someone taking money from your bank account, tell me more about that...”*

Interviewee: *“My bank called to say that I was overdrawn on my checking account. I have plenty of money, there is no reason why my it should be overdrawn. I keep plenty of money in there. Either the bank put my deposits in someone else’s account by mistake or the bank is stealing my money.”*

G-ICE: Financial Crime Example

Identify Example:

Interviewer: *“You told me that the bank told you that your account was overdrawn. When you are ready, please tell me everything about the call from the bank from beginning to end.”*

Exploring Allegations

- Witnesses and Corroboration
 - Ask about conversations during the event
 - Both what was said and heard
 - Ask about conversations after the event
 - Who they talked to and what was said
 - Ask who knows about the abuse/neglect
 - Eyewitness, outcry witness, corroborating witnesses, other victims



Exploring Allegations

- Witnesses and Corroboration examples:
 - *“What made you decide to tell about _____?”*
 - *“How did people find out about _____?”*
 - *“Was there someone who helped you decide to tell?”*
 - *(If yes) “Tell me more about _____.”*
 - *“Who was the first person that you told about _____?”*

Multiple Events/Incidents

- Start by isolating an event
 - Event that is salient or most memorable
 - If other events come up, redirect the older adult to complete discussing one event at a time
- Prompt the older adult to think about a time they remember best or most

Multiple Events/Incidents

- Some individuals may not be able to isolate an event
- Interviewers must still gather as much information as possible!

Example:

Interviewee:

“I don’t remember a specific time.”

Interviewer:

“Thanks for letting me know that you don’t remember a specific time you’ve gotten bumps and bruises. Let’s talk about what would usually happen. Think about what usually happens when you get bumps and bruises, and when you’re ready, tell me what would usually happen from beginning to end.”

Polyvictimization

- *Has something like what happened with _____ happened on a different day?*
- *Has something like what happened with _____ happened in a different place?*
- *Has something like what happened with _____ happened in a different way?*
- *Has something like what happened with _____ happened with a different person?*

Polyvictimization

- *Has _____ done something else that made you feel [repeat their exact words]?*
- *Are there other reasons that you are concerned about _____?*
- *Are there other ways that you feel unsafe?*

Polyvictimization

- If past or current victimization is reported:
 - *“Have you ever talked to someone else about this?”*
 - *“Who did you talk to?”*
 - *“What was the outcome?”*
- It may not be necessary for the older adult to explore all of the details depending on the answers to these questions
 - *“Is this something you would like to talk about with me today?”*
- **Consider a multisession interview**



Conflicting Statements

- If something doesn't make sense, clarify in an open-ended way:
 - *"I want to make sure I understand."*
 - *"You said . . ."*
 - *"Tell me more about that."*
 - *"Did I get that right?"*

Group Interview Activity: Exploring Allegations

Activity-

1. Instructors
 1. Instructor Interviewee
 2. Interview Moderator
2. Read case referral (next slide)
3. Participants will interview as a team to elicit information about the topic of concern from the instructor interviewee by posing questions about the case referral

Group Interview Activity

Case Referral

- Harold is an 80-year-old man who has Parkinson's disease and uses either a walker or wheelchair to ambulate. Harold has a sit to stand lift to further assist him with his ADLs.
- When his son, David, stopped by to see him today, David noticed that the left side of Harold's face was bruised and that he had a small laceration on his temple close to his left eye.
- Harold told David that he struck the side of his face on the sit to stand because Josh, his in-home aid, did not place him in his wheelchair when Josh was moving him from the shower to his bedroom.

Work with the team

- Take a break
- Check in with your team
- Communicate to the older adult what is happening
- Consider a multi-session interview
- Prepare any follow-up questions prior to ending the interview



Introducing Evidence

- Only utilize if trained
- May be used as a transition option
- Often used post disclosure for clarification
- Do not use to correct or impeach
- Should not be interrogative in nature



SAFE Semi-Structured Steps

- Pre-interview considerations
- Establishing rapport
- Establishing interview guidelines
- Establishing a baseline
- Check-in
- Transition to allegation(s)
- Exploring allegations
- **Respectful closure**



Respectful Closure

- Provides a gentle transition to end the session
- Probe for any additional information
- Check in with how they are feeling
- Offer opportunity for questions
- Communicate any immediate next steps
- Leave the session open ended

Respectful Closure

- Probe for any additional information
 - Is there something else you would like me to know?
 - Is there something that we left out?
 - I know I have asked you a lot of questions today. Is there anything else you wish I had asked about?
 - How are things different now that you've talked about what happened with _____?
 - What do you hope will happen now?

Respectful Closure

Ask about what they hope will happen Example:

Interviewer: *“Now that you’ve told me about what happened with your son, what do you think should happen next?”*

Interviewee: *“I really don’t want him to get in trouble.”*

Interviewer: *“Tell me more about not wanting him to get in trouble.”*

Respectful Closure

Example (continued):

Interviewee: *“What he did was not okay, but he is still my son, and I love him. I don’t want him to go to jail.”*

Interviewer: *“Thank you for telling me about what you think should happen. It is important for the team to know what you think. Someone going to jail or not isn’t a decision that I make or that can be made today because a full and investigation still needs to take place. You will be kept informed by the investigative team throughout the remainder of the process.”*

Respectful Closure

Check in

- *“How do you feel after talking today?”*
- *“Do you have any worries now that we are finished talking?”*
- *“Do you have any questions about the things we talked about today?”*



Respectful Closure

Communicate immediate next steps

- *“Today after we are finished talking, we are going to go back into the waiting room where a victim advocate is going to meet with you before you leave today.”*

Respectful Closure

Leave the session open ended

- *“You told me there were some things about staff we did not talk about today. We are going to talk again tomorrow so I can understand everything that happened.”*
- *“Sometimes as the investigation continues, I may need to ask you some additional questions. Would it be okay with you if we needed to talk again on another day?”*
- *“After we leave here today, there may be something else you remember or would like to talk about. If that happens, please let us know, and we can schedule another time to talk”*



Respectful Closure

Return to a neutral topic

- *“Thank you for coming to talk with me today. Before we go, what are your plans are for the rest of the day?”*

Respectful Closure

Summary:

- Probe for additional information not yet discussed.
- Inquire about current feelings and any concerns.
- Offer an opportunity for the older adult to ask questions.
- Communicate immediate next steps.
- Prepare for additional interview sessions as needed.
- Thank the older adult for their time.
- Return the conversation to a neutral topic.
- Guide the older adult to the next step.
- Provide written directions if necessary.

Post-Interview Considerations

Any involved team members should meet after the interview with the older adult to accomplish these things:

- Share information from all sources
- Determine what immediate services are needed
- Identify other issues to be considered before moving forward
- Discuss any next steps with the older adult or any family/support person/caregiver

Post-Interview Considerations

Team should discuss next steps with the older adult and/or support persons (as appropriate):

- The results of the interview
- Safety planning
- The next steps in the investigation
- Appropriate follow-up and referrals
- Connecting the older adult to resources
- Ask the older adult what they think should happen next
- Address any concerns about the individual being in crisis

Post-Interview Considerations

Post-Interview Crisis Assessment

- Is the older adult in crisis?
- An assessment should be conducted by a mental health professional
- Focus on immediate mental health status
- Assessment for self harm, suicidal ideation or homicidal ideation

Vicarious Trauma Considerations

Post-Interview Crisis Assessment

- Identify if there are issues related to secondary traumatic stress for any team members
- Discuss vicarious traumas with team members, supports, supervisors, if necessary
- Any affected team member should consider withdrawing from the case or involvement with the victim/family

Local Resources



Practicum

Practicum

- Purpose: Participants will have the opportunity to utilize the skills they have been taught and observe other participants.
- Each participant will complete a 25-minute interview based on their scenario
- The practicum is pass/fail, a rating of Needs Improvement in 4 or more of the 16 assessment areas, this will be considered a failing rating.

Practicum

- When a Team member plays the role of Participant Actor Interviewee, they will have additional information for that scenario.
- The role of each participant will rotate after each interview so that all participants perform all roles; your role will be assigned.
- Each scenario has the following roles:
 - Interviewer
 - Participant Actor Interviewee
 - Funnel Recorder
 - Peer Reviewer(s)

Practicum

- Each Interview/Scenario will take one hour:
 - Team Prep (10 minutes)
 - Interview (25 minutes)
 - Instructor and Peer Review (20 minutes)
 - The Interviewer shares their thoughts about how the interview went.
 - The Instructor gives feedback to the Interviewer.
 - The Peer Reviewer(s) give feedback to the Interviewer.
 - The Funnel Recorder provides the scoring sheet.
 - The Participant Actor Interviewee and gives feedback to the Interviewer.
 - Transition to next Interview (5 minutes)