



**Adult Advocacy
Centers**

Frequently Asked Questions about the AACs

What are the Adult Advocacy Centers (AACs)?

Ohio will be the first state to develop centers that will be equipped to provide holistic, accessible and trauma-informed services to adult crime victims with disabilities in a universal and multi-sensory environment. The 10 Adult Advocacy Centers (AACs) will be located throughout Ohio and will work in partnership with state, regional and community agencies to coordinate a response that promotes the safety and well-being of all individuals. To provide these services, the AACs will facilitate multi-disciplinary teams (MDTs) within local communities that are typically comprised of law enforcement agencies; uniquely trained forensic interviewers; prosecutors; victim advocates; staff from adult protective services, disability-specific agencies and local hospitals; medical and mental health professionals; survivors; and guardians (when applicable).

What makes the AACs unique, and why is this important to Ohio?

The AACs conducted a needs assessment in 2019 through the county boards of developmental disabilities. The assessment validated what had long been suspected: Ohio currently lacks adequate support services, prosecutions and appropriately trained forensic interviewers for adult victims of crime with disabilities. The AACs are unique because they will be the first of their kind in the nation. Ohio is committed to working toward equality in the field of victim services, and the AACs will be the embodiment of this commitment.

Who are the AACs for?

The Americans with Disabilities Act defines a person with a disability as a person who has a physical or mental impairment that substantially limits one or more major life activity. The AACs serve adults with disabilities ages 18 and up, though clients between 18 and 21 years old may choose to work with their local Child Advocacy Center (CAC), if they prefer.

Why regional AACs?

The AACs will break new ground by incorporating both universal and multi-sensory design into each location, allowing us to serve each client safely and purposefully, according to the needs of their disability. The 10 regional centers and one mobile RV unit will allow all adults with disabilities to access victim services in an equal, inclusive and accessible way, no matter where they live in the state.

Why the MDT approach?

Multi-disciplinary teams are comprised of community agencies working together for a common goal. MDTs have always existed in some shape or form within the disability community because of the intersectional nature of disability. The MDT model has also been used successfully to coordinate

and advocate within victim services. The AACs' MDTs will include local county boards of DD, mental health agencies, AAC staff counselors, victim service agencies/advocates, law enforcement agencies, prosecutors, medical staff, adult protective services, and other agencies, as needed.

I've noticed you're using the word "victim" sometimes. Shouldn't that be "survivor"?

A lot of language in the disability community depends on what each person prefers. "Victim" and "survivor" are no different. Some people in the disability community prefer to call themselves "victims" because they feel it better reflects what happened to them. Some people embrace "survivor." Some will move from one to the other, and perhaps back again, over time. We want to honor where people are, so we use the words interchangeably in our publications and by request in each individual case.

What cases will the AACs take?

The AACs will take any cases that require forensic evidence collection or that involve victims of crime or investigating agencies. Medical services are not necessarily a determining factor for services. Examples may include but are not limited to:

- Sexual abuse cases
- Domestic violence cases
- Physical assault or abuse cases
- Others on a case-by-case basis

Community agencies that sit on the MDT may refer cases, and the AACs will also be prepared to provide services that would assist a victim of a crime at the request of MDT members, even if no charges are filed, on a case-by-case basis. Examples may include but are not limited to:

- Courtesy forensic interviews
- Courtesy forensic medical exams
- Consultations
- Victim assistance
- Mental health services
- Connection to support groups or training opportunities
- Continuing educational opportunities

What services will the AACs provide?

The AACs will provide equal, accessible and holistic trauma-informed services, including:

- Forensic interviews by highly trained and skilled investigators
- Forensic medical exams conducted by forensic nurses who specialize in working with victims of crime with disabilities
- Connection to law enforcement agencies
- Early connection to prosecutors
- Mental health screenings, consultations and services
- Connection to disability specific agencies and organizations
- Victim services, advocacy, court accompaniment, case updates and notifications
- 24/7 emergency medical responses (at local ERs)
- Mobile forensic interview teams for individuals in locations unable to reach an AAC
- Monthly case review meetings with the MDTs
- Ongoing training to better serve crime victims with disabilities
- Peer review to help forensic interview team members stay up-to-date on current best practices