Introduction

National statistics show that individuals with disabilities are more likely to experience abuse than people without disabilities (Harrell, 2017).\(^1\) The Disability and Abuse Project (2013) reported that more than 70% of people with disabilities who were surveyed reported that they had been victims of abuse. More than 63% of family members said their loved one with a disability had been a victim of abuse. In spite of the high rates of abuse and trauma faced by individuals with disabilities, there is still a shortage of research and training regarding how to provide support for crime victims with disabilities (McGilvery, 2018).\(^2\) These statistics demonstrate a significant prevalence of abuse against people with disabilities and the clear need for a unique response.

The Adult Advocacy Centers (AACs) is a new model of services that is being developed to support adults with disabilities who have been abused. This will be carried out by implementing a forensic protocol that optimizes the possibility that perpetrators will be prosecuted. To achieve this goal, the AACs are partnering with local and state agencies and organizations to ensure that crime victims with disabilities are supported in a comprehensive and trauma-informed manner.

The AACs will ensure that a forensic interview takes place, coordinate treatment and advocate for the prosecution of crimes against adults with disabilities by utilizing a Multi-Disciplinary Team (MDT) approach, in a single location, that will create a safe, disability-inclusive and trauma-informed environment. To accomplish this, the AACs plan to build centers strategically throughout Ohio, based on population and need.

The overarching protocol that would be used at the AACs would start with an adult with a disability arriving at one of the centers. A forensic interview would occur and evidence would be collected by a highly trained Forensic Nurse Examiner. Photos would be taken, if needed, using state-of-the-art equipment. Witnesses may also be interviewed. The AACs would of-

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fer counseling, courtroom preparation, victim advocacy, case management, and referrals to resources and other needed services. By using a MDT approach, victims would not have to travel to different agencies and share their experiences multiple times. The AACs would also coordinate monthly case reviews where all MDT members (a victim advocate, the prosecution, a forensic interviewer, law enforcement, a medical professional, a mental health provider, and additional team members specific to the individual’s case) would attend and provide case-related updates.

The AACs model would consist of four core components:

- Investigative Team
- Treatment
- Victim Advocacy
- Case Coordinator or MDT

**Needs Assessment**

County boards of developmental disabilities (county boards) will be indispensable partners when creating and implementing the AAC model. County boards have an established infrastructure for investigating allegations of abuse, certified Investigative Agents (IAs) in all counties and a state-of-the-art computerized database for reporting incidents of abuse. As the AAC model develops, county boards will be key in ensuring the success of this new service in Ohio.

To demonstrate the need for the establishment of AACs, assessments were mailed to all county boards in Ohio. The AACs received responses from more than 35 county boards. This robust response is appreciated, as it allows the AACs to capture the deep need for services for crime victims with disabilities in Ohio.

The following report contains the assessment questions and, in blue boxes on each page, a summary of some responses received from the county boards. Tabulated response totals are then listed by category using pie charts, followed by a brief summary.
Responses from the County Boards of Developmental Disabilities

Question #1
Where do you refer crime victims who have disabilities and who have been sexually and/or physically abused for treatment and/or support services in your county and/or state?

- We refer crime victims with disabilities to our local hospitals and police departments.
- We currently refer individuals to a hospital for a Sexual Assault Nurse Examiner (SANE) exam, and we have sent some individuals to children’s hospital for a physical abuse exam. For counseling we do not have a specific agency. We have agencies we can suggest. We also refer individuals to Project Woman for assistance.
- Our county has a victim’s advocate that we refer individuals to if they have experienced sexual or physical abuse and there is court involvement. The county board works with the victim’s advocate and the individual to determine where the individual can receive services that best meets their needs.

Summary
Responses indicate that law enforcement is notified promptly of allegations of abuse, and individuals are routinely referred to a local hospital for an exam. However, responses indicate that referrals for counseling services are rare due to a lack of resources. A minority of counties are using their Child Advocacy Centers (CACs) for adults with disabilities who are victims of crime. Although the CAC model includes a forensic interview, it is not geared toward adults or individuals with disabilities. Additionally, responses indicate that there is poor linkage to the County Prosecutor, and a forensic interview is rare, requiring individuals to be interviewed several times by different agencies, possibly resulting in repeat trauma. The responses also indicate that there are not cohesive teams, comprised of appropriate agencies, that routinely convene to respond to allegations of abuse by an adult individual with a disability.
Question #1a
Does your county have response teams? Please list those teams.

- No, our county has no response teams specifically for people with disabilities.
- Not for the adults in our county. With the children we go through the Children’s Advocacy Center (CAC) and Children’s Service Board (CSB).
- We have our county’s victim witness and whatever law enforcement agencies respond; no specific team. If there is a Sexual Assault Response Team (SART), we are not on it.

Summary
County boards indicated that a 24-hour crisis line is available to report abuse. Twenty-three percent of counties reported that they did not have a response team in their county. Of the few counties that reported the existence of a response team, this largely consisted of having good working relationships with other relevant agencies, rather than a specified team designated to respond collaboratively to allegations of abuse.
Question #1b
Are service providers invited to attend Multi-Disciplinary Team (MDT) meetings or just notified about the meeting?

- Our county does not have MDTs, but when there is an incident of physical or sexual abuse, the team for the individual will meet to develop a prevention plan. If the team feels that others should be invited to the team meeting, such as medical professionals or teachers, then they would be invited to assist with the prevention as well as health and welfare.
- We are not invited to MDT any longer.

Summary
Generally, there is confusion regarding MDTs. Only 31% of the counties responded that they are invited to MDT meetings.
Question #2
What kinds of investigations occur in your county when there is an allegation of sexual and/or physical abuse involving an individual with a disability?

- The county board completes an administrative investigation. This county board has a contract with the Sheriff’s Office for a full-time Deputy, who reviews and conducts any criminal investigations. The interviews and investigative work are frequently done jointly between the Deputy and the assigned Investigative Agent.

- In our DD system statewide, each county board has an Investigative Agent that determines and provides follow-up on Major Unusual Incidents (MUI), including abuse allegations, per the protocol established in Ohio Revised Code (ORC) 5123-17-02, titled Addressing major unusual incidents and unusual incidents to ensure health, welfare, and continuous quality improvement. The protocol in the rule includes the Investigative Agent assuring local police departments are notified of the abuse allegations, and allowing the police departments to take the lead on these abuse cases.

Summary
Consistently, counties were diligent about reporting allegations of abuse to law enforcement. Responses differed regarding relationships and interactions with law enforcement. The majority of narratives indicated that law enforcement was always the lead investigator. Only 14% of county boards responded that joint investigations occur in their county. This hierarchical arrangement between county boards and law enforcement may result in unnecessary delays. In counties where law enforcement investigates without county board accompaniment, the knowledge and experience provided by county boards is lost. Changing to a MDT model would have the effect of limiting delays and reducing the possible trauma caused by multiple interviews.
Question #3

What interview protocols exist in your county for crime victims with disabilities?

- When an individual requires an interview and law enforcement has chosen not to investigate the allegation, the county board’s Investigative Agent sets up the interview process with the individual. The Investigative Agent follows the Major Unusual Incident (MUI) rule regarding the interview process. At times this process consists of the Investigative Agent and the individual’s Service and Support Administrator (SSA), as the SSA usually has an excellent rapport with the individual. The SSA is able to provide the individual a comfortable environment while the Investigative Agent is able to conduct the interview.

- The protocol for the MUI rule is followed.

- We are not aware of any formal protocol for people with disabilities. Law enforcement will contact us if they need our help, especially if the individual needs assistance communicating. If law enforcement has already interviewed the individual, we try not to re-interview. If the individual has not yet filed a report with law enforcement, we can call and ask Victim Witness to help the individual with filing the report. If it is domestic violence, we have a DV Task Force, and they appoint an advocate to complete a victim impact statement through our local abuse shelter, and we can assist in that process, if we are notified.

Summary

A majority of responders indicated compliance with the timelines and activities reflected in Ohio Administrative Code, Section 5123-17-02. Three percent reported the use of specific interview protocols.
Question #4
What treatment protocols exist in your county for crime victims with disabilities?

- We only have the local mental health services to utilize unfortunately. We are getting training in trauma-informed care. We have found a counselor nearby who seems to have a good understanding of trauma, but we are just getting started.
- We do not have a treatment protocol.

Summary
Although counties performed an admirable job providing referrals to their local mental health agencies and providing non-abuse specific coordination of services, these activities were completed on a case-by-case basis without the benefit of a guiding protocol.
Question #5
Do any support groups exist in your county for crime victims with disabilities?

- We aren’t aware of any Developmental Disabilities (DD)-specific support groups for crime victims. If there are groups in the community, our Board-eligible individuals would access as the general public does.
- I am unaware of any support groups for crime victims with disabilities.

Summary
Counties overwhelming responded that there were no specific support groups for people with disabilities. A few counties reported that there were groups in their county that may be appropriate and helpful, however, access to these groups appeared inconsistent.
Question #6
What programs have been successful in your county, regarding serving crime victims with disabilities?

- The Children’s Network has been helpful and willing to conduct interviews for individuals with disabilities on request. This does help in reducing the need for multiple interviews, as they are not able to address any related medical concerns for adult victims. These interviews are recorded. Involved parties including County’s Investigative Agents can be present in another room to witness the interview in real time. Our Prosecutor’s Office through their Victims of Crime program does advocate for individuals with disabilities.

- No existing or standing programs are available outside of alternative services available to everyone in the community.

Summary
Responses to this question point to a dire need for disability-focused programs in all counties. Reports of successful programs included informal collaborations with local mental health agencies, adult protective services and county boards.
**Question #6a**
Why do you think these programs have been successful?

- These organizations have committed to work together to provide various services and supports for victims of crime. These organizations are very good at working together when an individual is in crisis, and they are excellent at working together to ensure an individual’s health and welfare.

- Many of our staff and providers in our service system have been trained in the concepts of trauma-informed care. These principles are intended to help guide the care planning and service implementation process in a manner that addresses the trauma and does not re-traumatize the individual inadvertently.

**Summary**
The majority of county boards did not provide a response to this question. Narrative responses that were received indicate that there is a local willingness to collaborate with other agencies but there is a lack of available resources.
Question #7
What programs have not been successful in your county, regarding serving crime victims with disabilities?

- **Medical services**, as medical staff at times do not take concerns, complaints or accusations made by individuals with disabilities seriously.

- **While not unsuccessful, the development of the County’s Sexual Assault Team has been somewhat slow. At this point it is not really focused on sexual assault victims/ Sexual Abuse Response Teams (SART) as much as community education and services available to all victims.**

Summary
This question generated few responses. This lack of response may be attributed to a lack of programs specific to individuals with disabilities.
Question #7a
Why do you think they have not been successful?

• The team has always struggled with other agencies participating in the meetings. Historically, these meetings have occurred prior to, or after Child Abuse Response Team (CART) meetings. Commitment of time has always seemed to be an issue in participation.
• There are not enough resources and qualified professionals in our very rural county that are able to deal effectively with individuals with Developmental Disabilities (DD) and those with dual diagnosis who have been traumatized.
• Cases are not always being heard in court because they do not think individuals with disabilities are capable of being credible witnesses.

Summary
This question received few responses. Lack of participation, resources and qualified professionals are concrete problems that must be resolved if a victim is to receive appropriate services following an incident of abuse.
Question 8

What is the biggest barrier/obstacle to providing crime victim services to people with disabilities in your county?

- The availability of money and resources. Due to the economic climate in this area, it can be very difficult to have the available resources needed to assist victims of crimes, especially when the need is immediate.

- Our mental health agencies are reluctant to provide support to people with disabilities. They feel their disability is a barrier to treatment. Individuals and their families are reluctant to report and reluctant to get treatment.

- The resources available are not widely known in the county, and these resources do not typically have direct experience working with individuals with disabilities.

Summary

This question generated robust and numerous responses. One very prevalent thread was the lack of resources. Most concerning were the responses that stated allegations of abuse made by people with disabilities were not taken seriously or individuals with disabilities were not considered capable of testifying or being a witness. A few narrative responses indicated that there is a need to work with prosecutors to ensure that individuals with disabilities have a voice and their cases are prosecuted without discrimination.
Question #9
How often are crimes committed against people with disabilities taken to a grand jury in your county (generally speaking)?

- Very rarely. If an individual is non-vocal or unable to consistently report what occurred, often times the County Prosecutor is unable to press charges or unwilling to go forward as it can be very difficult to make a case. Also, the individuals we serve at times don’t comprehend what is occurring and do not want to participate or cooperate with the criminal legal system.
- The few that get reported do not make it to that level.
- In the past year, five Major Unusual Incident (MUI) cases have been taken to a grand jury, including two for failure to provide care and three related to theft or misappropriation. None of these cases were related to sexual or physical abuse.

Summary
This question generated many concerns and complaints regarding the current system. Frustration was evident and points to a need for a system that values and supports individuals with disabilities and recognizes that individuals with disabilities have the same rights as individuals without disabilities.
Question #10
What is the best way to support your county in creating new programs and services focused on crime victims with disabilities?

- By creating an Adult Advocacy Center to serve adults in the community as the Child Advocacy Center serves children. We have in the past had adults with disabilities complete a forensic interview at the Child Advocacy Center.

- Creating a network including the Sheriff’s office, Victim’s Advocates, mental health partners and the county board.

- I think it is critical to engage Investigative Agents, Law Enforcement and Prosecutors in a collaborative effort.

Summary
The need for collaboration, training and additional resources were the takeaways from this question. There is a clear and consistent desire crossing all counties to initiate an investigative protocol that would enhance the opportunity for prosecution.
Conclusion

The AACs received a comprehensive response from county boards, which was extremely informative and appreciated. These responses verified the need for the AAC model. It is evident that county boards, providers, the Ohio Department of Developmental Disabilities and other system partners take allegations of abuse seriously and take actions to protect individuals with disabilities from future abuse. Although law enforcement is consistently notified about allegations of abuse, what follows this notification varies by county. At times, the county board has no involvement with the investigation until law enforcement notifies the county board that they will not take the case. In other counties, joint investigations between law enforcement and county boards occur.

After receiving notification, law enforcement typically lacks the expertise to investigate when the victim has a disability. This may result in allegations of abuse not being investigated properly or in a timely manner. This practice would cease if the AAC model were utilized. The AAC model would ensure a holistic approach was used to conduct timely forensic interviews and medical exams following an allegation of abuse.

The absence of a forensic interview and protocol hinders prosecution. Current low prosecution rates also point to a need for an AAC model and a forensic interview protocol. Not only would this result in a greater number of prosecutable cases, investigators would be consistently trained in implementing an evidence-based forensic protocol. This would reduce trauma for the individual with a disability and enhance service coordination and treatment following an incident of abuse.

To address these concerns, the AACs are providing regional forensic interview training throughout Ohio. The AACs are also in the process of creating a prosecutor’s guidebook, developing material to aid in the creation of safety plans and will be expanding the training curriculum to include forensic interview techniques for individuals who are non-vocal.

The AACs look forward to partnering and working with county boards and other community partners. Training, collaboration, cooperation and building a trauma-informed culture among all service providers will allow Ohio to create a exemplary system to investigate allegations of abuse and empower prosecutors to provide justice to victims of crime with disabilities.
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