

Managing Vulnerable Victims

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Managing Vulnerable Victims

- Developmentally Disabled
- Hearing Impaired
- Limited Language Ability
- Mental Ill
- Victimized
- Personality Disordered
- Other Vulnerable Victims
- Cultural Factors
- Consent Issues
- Factors Impacting Misconduct
- Final Thoughts

Essential Interview Techniques

- **Confidentiality**
- **Create Safe Setting**
- **Genuineness & Authenticity**
- **Active Listening**
- **Effective Questioning**
- **Paraphrasing, Summarizing & Clarifying**
- **Non-verbal**
- **Response time**
- **Multiple Interviews**
- **Interview Teams**
- **Avoid judging, attacking, condescending, denial**
- **Avoid offering pity**
- **Avoid beginning with preconceived outcome**
- **Truth Finding**

Developmentally Disabled

- **A severe, chronic disability of an individual that:**
 - **Is a mental or physical impairment or a combination of the two**
 - **Is likely to continue indefinitely**
 - **May result in mental retardation, autism, cerebral palsy, fetal alcohol syndrome or epilepsy**

Developmentally Disabled

- **Results in substantial functional limitations in 3 or more of the following areas of major life activity:**
 - **Self-care, articulation, comprehension, learning, mobility, capacity for independent living, self-direction, self-sufficiency**

Developmentally Disabled

- **Wants to please people in authority**
- **Relies on authority figures for the solution**
- **Watches clues from interviewer; wants to be friends; wants to please**
- **Real memory gaps**
- **Quick to take blame**
- **Short attention span**
- **Allow person to use their own words**
- **Do not ask leading questions**
- **Use concrete ideas (who, what, when, where, how)**
- **Beware of vocabulary (anatomically correct dolls)**

Deaf or Hearing Impaired

- A certified sign language interpreter (ADA)
- Consider videotaping
- Do not use staff if not certified
- Give the interpreter time to establish rapport and trust

Deaf or Hearing Impaired

- Ask the interpreter if she or he is comfortable with subject matter – if not, make other arrangements
- Speak directly to the interviewee
- Establish the ground rules
- Do not interrupt – the hearing impaired person wants to tell the whole story

Limited Language Ability

- Use vocabulary and sentences that are at the individual's level of cognitive and language development
- Ask one question at a time; avoid lengthy complex, 2-part questions
- Speak slowly and allow sufficient wait time

Mentally III

- Depression
- Anxiety
- Post Traumatic Stress Disorder
- Schizophrenia
- Bipolar Disorder

Mentally III

- Interview in private
- Make sure the interviewee feels safe (inside vs. outside location)
- Be prepared to walk/pace during the interview
- Offer frequent breaks; keep the interview short
- Offer something to drink, allow smoking
- Consider the time of the interview in terms of the interviewee's medications

Mentally III

- Be aware of your body language (avoid distracting behaviors, do not interrupt, stay calm)
- Be aware of interviewee's body language
- Inconsistencies in story may not = lying
- Do not underestimate the interviewee
- Consider involving mental health service provider
- Takes time

Victimized

- **“Victim” pattern in lifestyle and relationship choices**
- **Low self-esteem**
- **Mistrust**
- **Emotional pain**
- **Distorted view of self, relationships & reality**
- **Past histories of institutional abuse**
- **Personality Disorders- Maladaptive Patterns of Interacting**

Personality Disordered

- **Antisocial**
- **Borderline**
- **Histrionic**
- **Schizoid**
- **Set limits**
- **Do not personalize**
- **Be redundant**
- **Be patient**
- **Boundary clarification**
- **Clarify role**
- **Clarify goals**
- **Provide accurate , straightforward information**
- **Maintain professionalism**
- **Focus on facts & behavior**

Other Vulnerable Victims

- **Young inmates**
- **First-timers**
- **Gay, Lesbian & Transgendered**
- **Untreated Addicts**
- **Targets**
- **Adjustment barriers**
- **Be prepared to deal with feelings of intense fear and terror**
- **Emotional distress**
- **Crisis intervention**

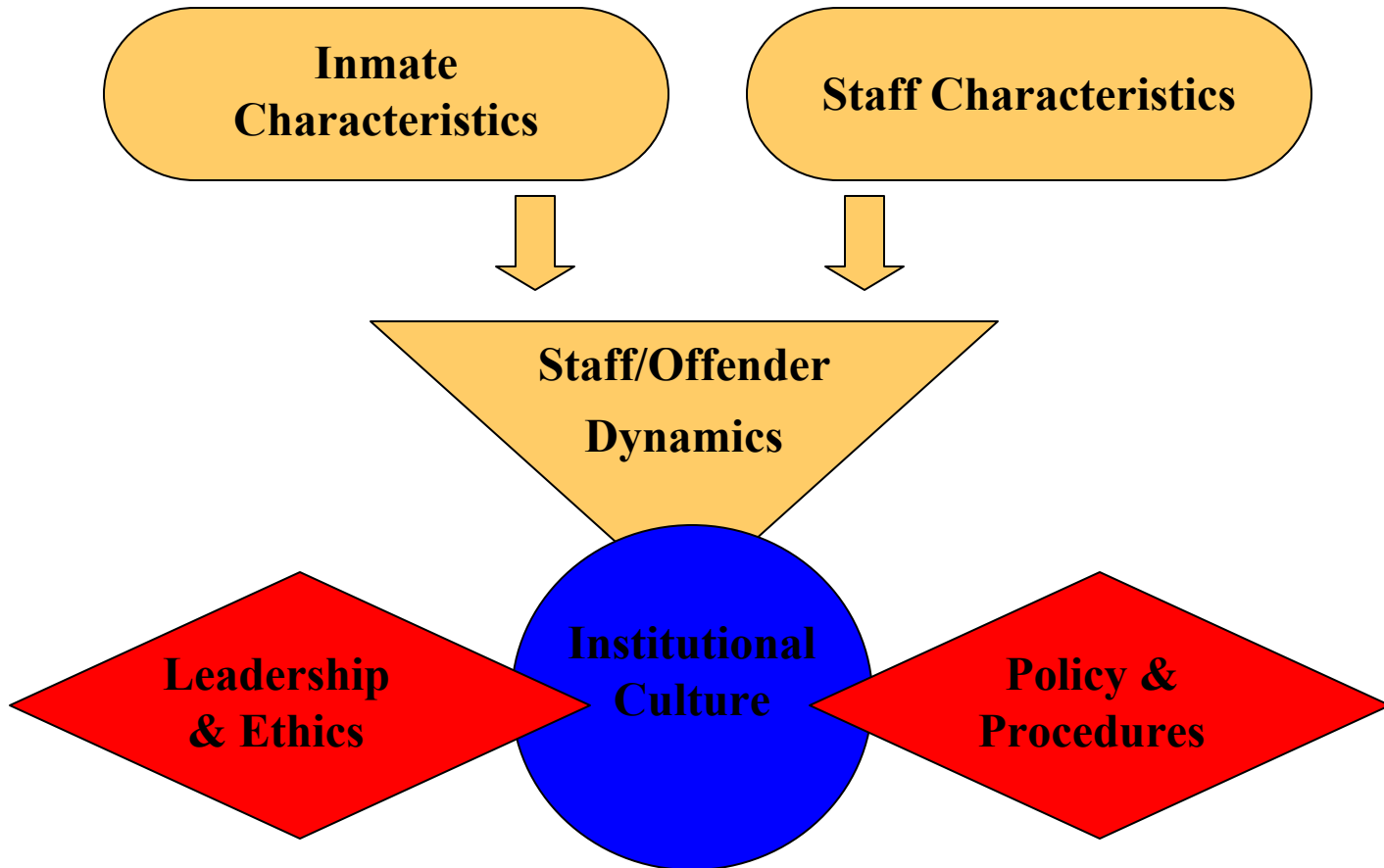
Cultural Issues

- Conflicting views on men/women/sexual behavior
- Racism/Sexism/Homophobia
- Code of silence
- Unwilling to talk about what we perceive as inappropriate behaviors
- Coercion versus choice

Consent Myth

- **There is no such thing as consensual sex between offender and staff member**
 - **Power differential**
 - **Participate in sexual misconduct as an erosive coping mechanism**
 - **Combat feelings of emptiness, loneliness, loss, desperation, helplessness, powerlessness**
 - **“A means to an end”**
 - **“By any means necessary”**
 - **“Going along to get along”**
 - **Avoid retaliation**
 - **No real choice or consent**

Factors Impacting Misconduct



Final Thoughts

- Start Where The Subject Is
- Know Thyself
 - Culture, Values, Prejudices, Strengths, Weaknesses
- Fairness, Impartiality, Objectivity
- Patience
- Respect