

Module 7: Overcoming Communication Challenges

Purpose

To help victim and disability service providers improve communication skills when interacting with crime victims with disabilities.

Lessons

1. Interacting With Crime Victims
2. Interacting With People With Disabilities
3. Meeting Complex Communication Needs
4. Service Animals

Learning Objectives

By the end of this module, you will be able to:

- List several guidelines for interacting effectively with crime victims.
- List several guidelines for interacting effectively with people with disabilities.
- Identify ways to meet specific complex communication needs.
- Explain how to interact with service animals.

Participant Worksheets

- Worksheet 7.1, Interacting With Crime Victims With Complex Communication Needs
- Worksheet 7.2, Rape in New Jersey

1. Interacting With Crime Victims

Victim service professionals receive a considerable amount of training before they begin to provide assistance to crime victims. They also receive training in assisting target populations; hopefully, this includes crime victims who have disabilities.

A good victim service provider *always* observes respectful and empathetic communication guidelines when supporting victims of crime.

2. Interacting With People With Disabilities

So many of the basic guidelines for assisting crime victims are the same as assisting an individual with a disability. They help us see the individual as a person first. The fact that a person has a disability should not be a factor.

3. Meeting Complex Communication Needs

A disability may impact someone's ability to communicate. For example, some people may not have the capacity to speak, and will rely on gestures or sign language to communicate. Others, such as people with severe cerebral palsy or people who are Deaf or have a hearing disability, may be able to speak, but their speech may be difficult to understand. And other people with disabilities may be able to speak clearly, but have difficulty understanding. These are complex communication issues, which can become exacerbated if the person is anxious or upset as the result of crime victimization.

Complex communication issues are not always the result of physical disabilities. Depending on their specific illness, crime victims with psychiatric disabilities can exhibit a wide range of symptoms that impact communication. The DSM IV (American Psychiatric Association, 1994) identifies 15 general areas of adult mental illness:

- Factitious disorders.
- Dissociative disorders.
- Sexual dysfunction, paraphilias, and gender identify disorders.
- Eating and sleep disorders.
- Impulse control disorders.
- Adjustment disorders.
- Personality disorders.

Remember that these labels may not prove to be useful since they don't guide how we communicate with a person with a particular type of mental illness.

As an example, a person with an obsessive compulsive disorder may feel compelled to rearrange objects in a room rather than interact with a crime victim advocate. A crime victim with a paranoid personality disorder may perceive hostility or malevolence in the advocate's attempt to help. Or, a crime victim with schizophrenia may believe those who attempt to help are able to read her mind, or that her thoughts are being transmitted to others.

In many cases, the crime itself is a stressor that can trigger the emergence or recurrence of symptoms. Victim service providers must be prepared to find methods of communicating with all crime victims, regardless of disability or type of disability.

It's important to understand that abusers and perpetrators may take advantage of communication issues to silence people with disabilities.

Communicating effectively with victims of crime is challenging. When the crime victim has a disability that further impacts communication, the challenge is even greater. However, the need to communicate effectively in the crisis of being a victim of crime is critical.

(Find general guidelines that you might find helpful when working with crime victims with disabilities in *A Law Enforcement Guide for Working with Children with Autism, Intellectual and Communication Disabilities*, developed by Scott J. Modell, Ph.D. and Marcie Davis, M.S., and published by the New Mexico Coalition of Sexual Assault Programs, Inc., and by the Disability and Business Technical Assistance Centers, www.adata.org/adaportal/Communication/communication-techniques.html.)

Sometimes, even if the mechanics of communication are not problematic, *understanding* may be. For example, you may be able to talk to someone, and he or she may be able to respond, but that doesn't mean that an individual has a complete understanding of what you say. This is particularly true of crime victims who have intellectual or developmental or psychiatric disabilities.

Often crime victims are uncomfortable discussing a crime, particularly if it was sexual in nature. Some may not know the correct terminology. And others, especially those persons with developmental disabilities, may not understand that a crime has actually occurred. It's helpful if victim service providers are knowledgeable about the characteristics of people with intellectual and developmental disabilities, such as listening for euphemisms and metaphors, and a reluctance to discuss the crime itself. While it's not within the scope of this training to teach you how to identify these nuances, training and information are available.

If a crime victim has acquired a disability as a result of a crime, the issues are very different. Not only is the crime victim dealing with the crime itself, but he or she is adapting to a profound change in their life. A crime victim with a disability may very well be more likely to focus on the crime itself, while the crime victim who has just become disabled may be more concerned about the newly acquired disability.

Communicating with crime victims – whether or not they have a disability – is not easy. But that’s our job – to provide support to all crime victims. We need to see the person first, treat them with respect and empathy, and identify any supports they may need. In addition, we need to do what we can to ensure that they are as safe as possible from future harm.

In many cases, a Safety Plan or Individual Response Plan can be vital in creating sense of security for the crime victim, and protecting the individual from further abuse. Response plans should be tailored specifically for the individual at risk.

4. Service Animals

Service animals are defined as dogs that are individually trained to do work or perform tasks for people with disabilities. Beginning on March 15, 2011, only dogs were recognized as service animals under titles II and III of the ADA. Examples of work or tasks include:

- Guiding people who are blind.
- Alerting people who are deaf.
- Pulling a wheelchair.
- Alerting others and protecting a person who is having a seizure.
- Reminding a person with mental illness to take prescribed medications.
- Calming a person with posttraumatic stress disorder during an anxiety attack.

Service animals are working animals, not pets. The work or task a dog has been trained to provide must be directly related to the person’s disability. Dogs whose sole function is to provide comfort or emotional support do not qualify as service animals under the ADA.

Some state and local laws define service animal more broadly than the ADA does. Information about such laws can be obtained from the State Attorney General’s Office.

There are also emotional support animals, which provide emotional support in cases of extreme anxiety or panic attacks. Emotional support animals do not necessarily have “task specific” training that supports the disabled person and are therefore trained differently than service animals. Generally, title II and title III entities must permit service animals to accompany people with disabilities in all areas where members of the public are allowed to go.

Do *not* pet service animals; they might lose their concentration, which could put their owners in danger. They are working animals, not pets!

