The purpose of the follow-up protocol is to assist the Division of Aging and Adult Services and Adult Protection Services (APS) personnel in interviewing an elder adult client (or those referring elder adult clients) to seek elaboration on concerns an elder adult raised about threats to and/or harm of pets or other animals.

The following statement may be read to the elder adult (or referring agent) to create the context for the questions and to indicate their purpose:

“EARLIER, YOU SAID THAT YOU HAD CONCERNS ABOUT THREATS TO YOUR PET OR OTHER ANIMALS AND/OR CONCERNS ABOUT YOUR PET OR OTHER ANIMALS BEING HARMED BY SOMEONE. I WOULD NOW LIKE TO ASK YOU SOME ADDITIONAL QUESTIONS ABOUT YOUR CONCERNS. IT IS OUR HOPE THAT THIS INFORMATION WILL HELP US TO DETERMINE IF OUR AGENCY CAN ASSIST YOU IN DEALING WITH THESE CONCERNS.”

IF RESPONDENT SAID “YES” TO QUESTION ABOUT HARM TO PETS OR OTHER ANIMALS (Protocol item #13)

1. HOW WAS YOUR PET OR OTHER ANIMAL HARMED?

2. DID THIS HAPPEN ON MORE THAN ONE OCCASION?

3. HOW LONG AGO DID THIS HAPPEN (or WHEN WAS THE LAST TIME THIS HAPPENED)?

4. WHO HARMED YOUR PET OR OTHER ANIMAL?

5. WHY DO YOU THINK THIS PERSON HARMED YOUR PET OR OTHER ANIMAL?
6. WHO ELSE WAS PRESENT WHEN YOUR PET OR OTHER ANIMAL WAS HARMED?

7. HOW SEVERE WAS THE HARM TO YOUR PET OR OTHER ANIMAL?
   7a. ____ minor harm (e.g., missed feeding once)
   7b. ____ minor injury (e.g., minor cut, sprain)
   7c. ____ serious injury (e.g., broken limb, burns)

8a. WAS THE PET OR OTHER ANIMAL TAKEN TO A VETERINARIAN?
   ___ YES   If answers “YES”, TAKEN BY WHOM?______________________
   ___ NO

8b. DID THE VETERINARIAN SUSPECT THAT THE INJURIES WERE NOT THE RESULT OF AN ACCIDENT (e.g., hit by car, caught leg in a fence)?   ___ YES   ___ NO

8c. DID THE PET OR OTHER ANIMAL RECOVER FROM ITS INJURIES?   ___ YES   ___ NO

___ NO   8d. DID THE PET OR OTHER ANIMAL RECOVER FROM ITS INJURIES?   ___ YES   ___ NO

9. WAS THE HARM TO YOUR PET OR OTHER ANIMAL REPORTED TO THE POLICE OR AN ANIMAL CONTROL AGENCY OR A HUMANE SOCIETY?
   ___ YES   If answers “YES”, WHAT WAS THEIR RESPONSE? ______
   __________________________________________________________
   __________________________________________________________
   ___ NO

9a. DID YOU TELL ANYONE ELSE ABOUT THIS?
   ___ YES   If answers “YES”, WHOM DID YOU TELL AND WHAT WAS THEIR RESPONSE? __________________________
   __________________________________________________________
   __________________________________________________________
   ___ NO
FOLLOW-UP PROTOCOL FOR ASSESSING ANIMAL WELFARE AND ELDER ADULT ABUSE AND NEGLECT

10. HOW DID YOU FEEL WHEN YOUR PET OR OTHER ANIMAL WAS HARMED?

__________________________________________________________________________
__________________________________________________________________________

11. DO YOU THINK YOUR PET OR OTHER ANIMAL WAS HARMED IN ORDER TO:

___ FRIGHTEN YOU?
___ INTIMIDATE YOU?
___ MAKE YOU CHANGE YOUR LIFESTYLE OR THE WAY YOU LIKE TO LIVE?
___ FORCE YOU TO GIVE MONEY, POSSESSIONS, OR OTHER PROPERTY TO THE PERSON HARMING THE PET OR OTHER ANIMAL?
___ MAKE YOU CHANGE WHERE YOU LIVE OR YOUR LIVING ARRANGEMENTS?
___ CAUSE YOU EMOTIONAL DISTRESS ABOUT THE HARM TO OR LOSS OF YOUR PET OR OTHER ANIMAL?
___ KEEP YOU FROM TALKING TO OTHERS ABOUT CONCERNS OR NEEDS THAT YOU HAVE?

12. WHAT WOULD YOU DO IF HARM TO YOUR PET OR OTHER ANIMAL HAPPENED AGAIN?

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
13. IS THERE ANYTHING ELSE YOU WOULD LIKE TO ADD OR SOMETHING ELSE YOU WOULD LIKE TO TELL US ABOUT WHEN YOUR PET OR OTHER ANIMAL WAS HARMED?

___ YES - “please go ahead and tell me” _________________________
_________________________________________________________
_________________________________________________________

___ NO

THANK YOU SO MUCH FOR YOUR PATIENCE IN ANSWERING THESE QUESTIONS. OUR AGENCY WILL CONSIDER THE CONCERNS YOU RAISED AND SEE IF WE CAN BE OF ASSISTANCE TO YOU.

IF RESPONDENT SAID “YES” TO QUESTION ABOUT **THREATS** TO HARM PETS OR OTHER ANIMALS (Protocol item #14)

14a. HOW WAS YOUR PET OR OTHER ANIMAL THREATENED?

14b. HOW STRONGLY DID YOU BELIEVE THAT THE THREAT MIGHT BE CARRIED OUT?

___ not strongly at all ___ somewhat strongly ___ very strongly

15. DID THIS HAPPEN ON MORE THAN ONE OCCASION?

16. HOW LONG AGO DID THIS HAPPEN (or WHEN WAS THE LAST TIME THIS HAPPENED)?

17. WHO THREATENED TO HARM YOUR PET OR OTHER ANIMAL?

18. WHY DO YOU THINK THIS PERSON THREATENED TO HARM YOUR PET OR OTHER ANIMAL?

19. WHO ELSE WAS PRESENT WHEN YOUR PET OR OTHER ANIMAL WAS THREATENED?
20. HOW SEVERE WAS THE THREAT OF HARM TO YOUR PET OR OTHER ANIMAL?
   20a. ____ minor (e.g., threatened to skip feeding for one day)
   20b. ____ threatened minor injury (e.g., minor cut, sprain)
   20c. ____ threatened serious injury (e.g., broken limb, burns)

21. WAS THE THREAT TO HARM YOUR PET OR OTHER ANIMAL REPORTED TO THE POLICE OR AN ANIMAL CONTROL AGENCY OR A HUMANE SOCIETY?
   ___ YES  If answers “YES”, WHAT WAS THEIR RESPONSE? _____
            ______________________________________________________
            ______________________________________________________
   ___ NO

21a. DID YOU TELL ANYONE ELSE ABOUT THIS?
   ___ YES  If answers “YES”, WHOM DID YOU TELL AND WHAT WAS THEIR RESPONSE? ______________________
            ______________________________________________________
            ______________________________________________________
   ___ NO

22. HOW DID YOU FEEL WHEN YOUR PET OR OTHER ANIMAL WAS THREATENED?
            ______________________________________________________
            ______________________________________________________
23. DO YOU THINK YOUR PET OR OTHER ANIMAL WAS THREATENED IN ORDER TO:

___ FRIGHTEN YOU?

___ INTIMIDATE YOU?

___ MAKE YOU CHANGE YOUR LIFESTYLE OR THE WAY YOU LIKE TO LIVE?

___ FORCE YOU TO GIVE MONEY, POSSESSIONS, OR OTHER PROPERTY TO THE PERSON HARMING THE PET OR OTHER ANIMAL?

___ MAKE YOU CHANGE WHERE YOU LIVE OR YOUR LIVING ARRANGEMENTS?

___ CAUSE YOU EMOTIONAL DISTRESS ABOUT THE HARM TO OR LOSS OF YOUR PET OR OTHER ANIMAL?

___ KEEP YOU FROM TALKING TO OTHERS ABOUT CONCERNS OR NEEDS THAT YOU HAVE?

24. WHAT WOULD YOU DO IF THREATS TO HARM YOUR PET OR OTHER ANIMAL HAPPENED AGAIN? ______________________________________

____________________________________________________

____________________________________________________

25. IS THERE ANYTHING ELSE YOU WOULD LIKE TO ADD OR SOMETHING ELSE YOU WOULD LIKE TO TELL US ABOUT WHEN YOUR PET OR OTHER ANIMAL WAS THREATENED?

___ YES - “please go ahead and tell me” __________________________

____________________________________________________

____________________________________________________

___ NO

THANK YOU SO MUCH FOR YOUR PATIENCE IN ANSWERING THESE QUESTIONS. OUR AGENCY WILL CONSIDER THE CONCERNS YOU RAISED AND SEE IF WE CAN BE OF ASSISTANCE TO YOU.