The traumatic nature of sexual abuse on vulnerable adults and its lasting negative impact on its victims make imperative that investigations, interventions, and prevention efforts be conducted appropriately and in a timely manner. Our study sought to understand the nature of sexual abuse of vulnerable adults living in facility settings whose cases were investigated by Adult Protective Services (APS) and state regulatory agencies. In particular, we studied differences between substantiated sexual abuse reports (i.e., allegations that met the legally set standard of evidence, which are typically more than 50% or the “preponderance standard” for APS and regulatory agencies) and those that were not. The research team collected prospective data on all reported sexual abuse allegations involving victims 18 years of age and older living in residential care facilities reported to APS and other long-term care investigatory agencies in New Hampshire, Oregon, Tennessee, Texas, and Wisconsin over a six-month period in 2005.

Of 410 cases, sexual abuse allegations were substantiated by the investigating agency in 72 cases (18%). At the time of the investigation, the mean age of all alleged victims was 49.8±22.5 years (median 46 years), and 61% were female. Logistic regression modeling revealed that allegations were more frequently substantiated when the time between incident and allegation report was less than three days, when the alleged perpetrator was a facility resident (rather than an employee or other non-resident perpetrator), and when alleged victims verbally disclosed the occurrence of sexual abuse or were visibly injured. We stress that unsubstantiated cases did not necessarily constitute false allegations, but rather, in the opinion of the assigned investigator and following applicable regulations and other protocols, not enough evidence existed to substantiate the allegations.

**PRACTICE & POLICY IMPLICATIONS**

Very few of the 410 cases of alleged sexual abuse were substantiated (18%). Highly trained investigators must be able to investigate the case thoroughly, promptly, and with as much information as possible. These investigators must make substantiation decisions using the appropriate standard for confirmation (e.g., preponderance of the evidence, beyond a reasonable doubt, clear and convincing evidence) as state law dictates. Not doing so may mean that information critical to substantiate a case is inappropriately minimized or is disregarded altogether. It may also mean that cases that should have been substantiated are not, therefore dismissing important and needed forms of intervention to protect and support the victim, potentially discouraging other victims from coming forward, and allowing a perpetrator to continue assaulting vulnerable adults.

Alleged sexual abuse victims in care facilities whose cases are reported quickly, those who are able to and do verbally disclose abuse, those who demonstrate visible injuries, and those who are sexually abused by a fellow resident are far more likely to have allegations substantiated than those who do not meet such conditions. We stress that the degree of violation and trauma experienced by victims is unrelated to whether the perpetrator is a fellow resident or facility employee. Also, we stress that sexual abuse, regardless of the investigatory finding, constitutes an intense and often lasting violation of the victim.

**FURTHER READING**

