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INSTITUTIONAL ELDER NEGLECT IN CIVIL COURT: PERCEPTIONS OF VIDEO RECORDED VICTIM TESTIMONY

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ABSTRACT OF THESIS

INSTITUTIONAL ELDER NEGLECT IN CIVIL COURT: PERCEPTIONS OF VIDEO RECORDED VICTIM TESTIMONY

Mock juror perception of institutional elder neglect (IEN) was investigated in a civil court context. Participants (N=148) read a fictional IEN civil trial summary in which an alleged elderly female victim filed a lawsuit against her nursing home for failure to provide adequate care but died prior to trial. Participants read a version in which (a) previously recorded video testimony from the alleged victim was presented, (b) the alleged victim's floor-mate testified about witnessing the neglect, or (c) no witness testimony was presented. An ageism scale was completed, and participants indicated the amount of time they spend with elders. Results indicated that there were no main effects of testimony or ageism on likelihood of ruling for the alleged victim, but recorded victim testimony had an indirect effect on ruling through overall plaintiff's case credibility and pro-victim ratings. Participants who typically had more contact with elders were more likely to rule for the plaintiff and have pro-victim ratings. Results are discussed in terms of the importance of juror attitudes towards elderly people in IEN cases.

KEYWORDS: Elder Abuse, Juries, Victimization, Legal Testimony, Nursing Homes

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August 1, 2010

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RECORDED VICTIM TESTIMONY

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THESIS

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INSTITUTIONAL ELDER NEGLECT IN CIVIL COURT: PERCEPTIONS OF VIDEO
RECORDED VICTIM TESTIMONY

THESIS

A thesis submitted in partial fulfillment of the
requirements for the degree of Master of Science in the
College of Arts and Sciences
at the University of Kentucky

By

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2010

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Chapter One

Introduction

Many reports indicate that mistreatment of elderly nursing home residents is becoming an increasingly pervasive problem. Recent news headlines such as “Charges filed against nursing home manager, owner in deadly neglect case,” (Pulkkinen, 2009) and “Needless nursing home death; Aide pleads guilty” (Jones, 2009) indicate that institutional elder neglect (IEN) cases are receiving more attention from society, specifically the criminal justice system. However, the literature on elder abuse in nursing homes has not adequately addressed this problem from a legal perspective (Payne & Cikovic, 1995). In particular, civil proceedings of elder abuse and neglect cases remain poorly documented. There is only a small amount of case law on elder abuse, although it appears that an increasing number of such cases are being heard by the civil courts (Steigel, 2000). The purpose of the present paper is to investigate perceptions of IEN in the context of a civil court trial.

Elder neglect is generally defined as including “the refusal or failure of a caregiver to fulfill his or her obligations or duties to an older person, including... providing any food, clothing, medicine, shelter, supervision, and medical care services that a prudent person would deem essential for the well-being of another” (Clark & Pierson, 1999, p. 632). Neglect can occur due to ineptness or inability of the caregiver (“passive” neglect), or as an intentional means of harming an individual (“active” neglect; Douglass, 1983). Elder neglect may occur in domestic or institutional settings, although those who live in residential settings that offer long-term care are especially at risk. Approximately 1.6 million people live in about 17,000 licensed nursing homes in

the U.S. (Hawes, 2002). Most suffer from several chronic diseases that lead to limitations in physical and cognitive functioning, rendering these elders dependent on others for assistance with basic daily activities, largely unable to protect themselves, and extremely vulnerable (Hawes, 2002).

Despite an abundance of anecdotal evidence, there has not been a systematic study of the pervasiveness of IEN. Incidence and prevalence rates are difficult to determine due to a lack of uniform data collection across institutions and variations in the agencies that receive such reports (Goldstein, 1995). However, the available evidence indicates that elder abuse of all types is a serious problem. The best available estimates approximate that between 1 and 2 million Americans age 65 or older experience injury, exploitation, or other mistreatment by someone on whom they depend for care or protection each year (Bonnie & Wallace, 2003). In 2004, Adult Protective Services substantiated 191,908 reports of elder and vulnerable adult abuse for victims of all ages across 42 states, representing a 15.6% increase from 2000. Of substantiated reports, 20.4% of them were for caregiver neglect (National Center on Elder Abuse [NCEA], 2006). In a nursing home setting, state Long Term Care Ombudsman programs nationally investigated 12,916 complaints of abuse, gross neglect, and exploitation on behalf of residents in 2008 (National Ombudsman Reporting System Data Tables, 2008). For IEN specifically, in 2000, the Atlanta Long-Term Care Ombudsman study reported that of 80 nursing home residents interviewed, 95% had experienced neglect or witnessed other residents being neglected (Atlanta Legal Aid Society, 2004).

Although interviews may indicate a high occurrence rate, many incidences of IEN go unreported for various reasons. First, many elders may not realize that they are being

treated in an inappropriate manner. In a study by Wood and Stephens (2003), when asked to identify different types of abuse exhibited in a variety of video scenarios, assisted living facility residents correctly identified neglect only 42% of the time. Additionally, residents' responses to an inquiry about the actions they would take if they were concerned with the quality of care they were receiving indicated that they would have difficulty reporting elder abuse and difficulty making alternate living arrangements without assistance from their family members (Wood & Stephens, 2003). Although it is within their rights, nursing home residents and families are often unwilling to file a formal complaint of neglect for reasons such as fear of retaliation or other negative effects on their lives, or a belief that complaining would be futile. In addition, many cases of elder neglect may go undetected due to difficulties distinguishing effects of neglect from those of the chronic diseases found among many elderly people (Hawes, 2002). Lastly, in instances where nursing homes are responsible for making a formal complaint (e.g., those receiving federal money through Medicare and Medicaid), it may not be in the facility's best interest to report the abuse. Employees may try to cover up the abuse or make it not look as bad as it was (Billups, 2006).

Ageism

The victimization of elderly individuals is symptomatic of the general devaluing of elders in the United States. Historical and cultural transformations have led to a diminished social status of aging adults (Cuddy & Fiske, 2002). Unfavorable attitudes and negative biases towards a person simply due to advanced age are referred to as "ageism" (Kite & Wagner, 2002). Cuddy and Fiske (2002) suggest that elderly people are perceived as warm and incompetent. Consequently, individuals generally endorse

prejudice towards them in the form of pity and sympathy. Such stereotypes can be exhibited through discriminatory communication or behavior across settings, such as medical care or the workplace (Cuddy & Fiske, 2002). If older individuals are perceived as incompetent, they are likely to be treated as incompetent. This perspective has implications not only for how elders will be treated as nursing home residents, but also how elderly individuals will be perceived should they report an instance of abuse or neglect.

Legal Issues

After IEN cases are reported, the ideal next step would be that perpetrators are pursued by the justice system. However, there are many legal issues that can affect the pursuit of elder abuse cases in court. Criminal courts deal with cases in which the state prosecutes individuals for violating the law (Stiegel, 2001). Law enforcement is responsible for investigating the reported abuse and presenting their findings to the prosecutor. Yet numerous cases that could be prosecuted are not prosecuted due to a lack of resources. For instance, many police departments and prosecutors lack training on the investigation and prosecution of elder abuse cases (Brandl et al., 2007). Additionally, a guilty verdict in criminal cases requires that the prosecution prove the defendant satisfied the definition of the crime beyond a reasonable doubt. Because this standard of proof is so high, many prosecutors who have not previously worked on elder abuse cases are reluctant to take them on since they are unsure if they will be able to win (W. Delaplane, personal communication, November 12, 2009).

Few elder abuse cases are prosecuted criminally compared to those tried in civil court (W. Delaplane, personal communication, November 12, 2009). Civil courts handle

non-criminal matters such as claims for compensation due to harm or to recover financial losses. Specifically for institutional elder abuse, civil action brought against a nursing home usually involves a lawsuit against the management or facility owners, rather than the nursing aides or low-level staff who may have committed the actual abuse or neglect. As a result, legal actions against the facility itself may ultimately result in better care for all of its residents (Brandl et al., 2007). In general, more civil cases tend to be brought up because the standard of proof is less strict (W. Delaplane, personal communication, November 12, 2009). Unlike criminal trials, a civil trial involves jurors making decisions about monetary settlements based on the preponderance of evidence. If the majority of evidence favors the plaintiff, he or she wins, and the defendant is required to reimburse the plaintiff (Standler, 1998). In addition, civil suits are completely initiated by the individual victim or his or her family. Because criminal charges are always brought by the government (e.g., the District or Commonwealth Attorney), the decision to press charges is completely outside of the family, which may contribute to a preference among family members to seek retribution for abuse of their loved one in civil court (W. Delaplane, personal communication, November 12, 2009).

Despite the challenges of addressing elder abuse in the justice system, the number of elder abuse and neglect cases being pursued in both criminal and civil courts appears to be growing today. Reasons for this change include an enhanced awareness of elder abuse among a wider range of professionals and increased training of law enforcement and prosecutors (Stiegel, 2000). Yet, there are no updated statistics on the number of elder abuse cases prosecuted currently (American Prosecutors Research Institute, 2003). The most recent available figure dates back to 1995 and indicates that 13% of reported

elder abuse cases went to trial; it is unclear how many of those were neglect (Payne & Cikovic, 1995). The main obstacle in quantifying the number of elder abuse cases being pursued in the courts is that many criminal and civil court decisions in such cases are not categorized as elder abuse. Thus, case law can be hard to find and virtually impossible to monitor (Stiegel, 2000). An increasing number of states are passing statutes or provisions specifically authorizing criminal prosecution for various types of elder abuse, and some states have separate laws to address investigation of abuse, neglect, or exploitation of individuals who live in long-term care facilities or other institutions (Stiegel & Klem, 2007). Also, in states where specific elder abuse laws are not available, these cases are generally prosecuted under a jurisdiction's basic criminal laws (e.g., battery, assault, theft, fraud, rape, manslaughter, or murder). Even in places where specific elder abuse laws exist, prosecutors may prefer to pursue a case under a basic criminal law because it may be easier to prosecute in this way. In the state of Kentucky, the elder abuse law is not listed in the penal codes (i.e., statutes dealing with crimes and their punishments) and does not clearly state what actions are punishable as elder abuse. Thus, it may be beneficial to prosecute an elder physical abuse case as assault. In civil court, actions are generally not classified as elder abuse cases (Brandl et al., 2007). For example, an elder financial abuse case may be classified as fraud. An individual doing legal research would not easily be able to determine that there was an underlying issue of elder abuse (Stiegel, 2000).

In addition to the challenge of not having case law to follow, lawyers face many issues when taking on elder abuse or neglect cases, such as obtaining alleged victim testimony, if he or she has survived the abuse or neglect. In a case of elder neglect,

obtaining testimony from the alleged victim may present a challenge for prosecutors in that the alleged elderly victim must be competent to testify. Elders may suffer from cognitive disorders that cause problems with attention, memory, reasoning, understanding or expressing information (American Bar Association Commission on Law and Aging & American Psychological Association, 2005), which may be worsened by the trauma of being neglected. Elders with cognitive impairments may not be able to demonstrate that they (a) were able to correctly perceive the situation at the time the neglect occurred, (b) can recall the situation and communicate that memory, (c) understand the difference between truth and falsity, and (d) understand the obligation to tell the truth in court (Myers, 1993). Lawyers must judge whether their clients' capacity is diminished and may seek professional consultation or make a formal referral for assessment (American Bar Association, 2005).

Another challenge in elder neglect cases is that the slow pace of the legal process can be burdensome for elderly victims (Stiegel, 2001). Elder mistreatment has been shown to increase mortality rates among victims (Lachs, Williams, O'Brien, Pillemer, & Charlson, 1998); as such, there is a risk that a victim may die before the case goes to trial. To help prevent this situation from occurring, courts in some states allow special procedures for obtaining an elder's testimony for later use, such as videotaping a deposition (i.e., a statement made under oath that is taken down in writing). This testimony can be obtained from an elderly person in a location convenient to him or her, such as a hospital or nursing home. If the victim is later unavailable to testify at trial due to illness or death, the record of this testimony may be presented in court under certain circumstances (Heisler, 2000). This testimony is generally not admissible in criminal

trials as it violates a defendant's 6th Amendment right to confront his or her accuser. However, in civil court, a deposition is part of the ordinary process of discovery (i.e., gathering case facts). Both sides are represented and able to question whomever is giving the statements. Thus, this testimony, or a portion of it, may be deemed admissible by a judge in a civil case.

Perceptions of Elder Witnesses and Elder Abuse in Court

While pursuing elder abuse cases in court is imperative, it is important to understand how elders are perceived in the courtroom, particularly if their testimony will be presented. Previous research has presented mixed findings on juror perceptions of older adult witnesses. Yarmey (1984) suggested that stereotypes of elders, such as being psychologically helpless and intellectually inferior, generally lead juries to perceive elder witnesses as having low credibility. However, more recent research indicates that this relation is not straightforward.

Mueller-Johnson, Togli, Sweeny, and Ceci (2007) examined the impact of ageism on perceived credibility of elder witnesses. In their second experiment, mock jurors read a transcript of an involuntary manslaughter trial in which the sole witness was either a male or female 79-year-old. Participants then rated various witness characteristics, indicated how much time they typically spent with elders, and completed two ageism scales. Researchers found that those with more positive attitudes towards older persons rated the elderly witness more favorably in terms of convincingness, accuracy, quality of observation and memory, and level of cognitive functioning. Additionally, they found that those participants with more positive attitudes as measured by one of the ageism scales (the Fraboni Scale of Ageism) gave the highest credibility

ratings to the elderly witness when they did not spend much time with adults. Credibility ratings were thus modified by exposure to older adults such that credibility ratings decreased as exposure increased. Such findings indicate the complexity of perceptions of elders as witnesses in court generally. But are elderly witnesses viewed differently when they are also the victims?

Very few studies have investigated the perception of elder abuse in court or the impact of victims testifying as witnesses in these cases. Nunez, McCoy, Clark, and Shaw (1999) examined perceptions of an older adult victim/witness of a robbery who was described as a senior citizen, grandfather, or elder statesman. Believability ratings did not differ by the stereotype described. The only significant finding was that a higher number of guilty verdicts were obtained when the witness was described as a statesman rather than a senior citizen or grandfather. The researchers explained this finding in that a crime against a distinguished citizen (i.e., statesman) may cause individuals to react more negatively towards the defendant causing a prosecution bias. Overall, mock jurors were not likely to convict the defendant the majority of the time. But the scenario described in this study was not a typical elder abuse case in that the elderly person was a victim of an aggravated robbery; therefore, these findings may not generalize to IEN cases.

Some research on elder physical abuse presents findings that may be more representative of mock juror perceptions of elder victim/witnesses in court cases of elder abuse specifically. Golding, Yozwiak, Kinstle, and Marsil (2005) examined a domestic elder physical abuse case in a criminal court context from the perspective of gender differences in mock juror verdicts. They found that women were more likely than men to

believe the elderly alleged victim's testimony, less likely to believe the defendant's testimony, and more likely to convict the defendant. Kinstle, Hodell, and Golding (2008) investigated mock juror perceptions of a similar case but explored how victim characteristics influenced verdict decisions. They employed a trial that varied the alleged victim's health status as either healthy, confused (i.e., cognitively impaired), or frail (i.e., physically impaired). Results indicated that the verdict was not influenced by the alleged victim's health status, but mock jurors were less confident in their verdicts when the alleged victim was described as "confused." Overall, the majority of mock jurors in both studies of elder physical abuse rendered guilty verdicts.

Only one study has examined elder neglect – a criminal case taking place in a domestic setting (Golding, Allen, Yozwiak, Marsil, & Kinstle, 2004). Mock jurors in the Golding et al. (2004) study read a trial summary in which a man allegedly neglected his elderly mother by not checking in on her for several days. The trial varied as to whether the alleged victim was described as having a physical disability or a cognitive impairment. Although there was no difference between the believability of the alleged victim's testimony in either condition, mock jurors were more likely to render guilty verdicts when the alleged victim was described as physically disabled rather than cognitively impaired. The researchers explained these findings such that the cognitive deficit gave mock jurors a reason to doubt the alleged victim's account of the event, despite believing that she was telling the truth as she perceived it. This study provides valuable information about perceptions of elderly victims in criminal cases of elder neglect, particularly that their health status can influence mock juror judgments.

There are no published studies investigating juror perceptions of civil cases of IEN, or of such cases in which the elder may not be able to testify. However, Wasarhaley and Golding's (2010) unpublished research provides insight into the perception of alleged victim testimony in these cases and provides the basis for the present research. They completed a mock juror study in which participants read and answered questions about a summary of an IEN civil trial in which an elderly nursing home resident sued the nursing home for \$1 million for failure to attend to her with the necessary degree of care. The plaintiff's case presented testimony from the alleged victim or the alleged victim's floor-mate, or no witness to the neglect testified. Mock jurors were equally likely to rule for the plaintiff when the alleged victim testified and when the floor-mate testified, and more likely to rule for the plaintiff than in the no witness condition. This relationship was fully mediated by mock jurors' perceived overall credibility of the plaintiff's case. When the alleged victim or floor-mate testified, participants perceived the plaintiff's entire case as more credible, which made them more likely to rule for the plaintiff. Surprisingly, mock jurors who were presented with alleged victim testimony were not more likely to have pro-victim attitudes (e.g., sympathy towards victim, anger towards defendant) than those presented with floor-mate testimony or not presented witness testimony. While it appears that testimony from the alleged victim or another witness to the neglect increased perceived credibility of the plaintiff's case, it is unknown whether use of previously documented testimony from the alleged elderly victim, in the event that he or she cannot testify in person, will similarly influence credibility.

In summary, the psychological and legal literature is greatly lacking in elder abuse research, and the pervasiveness of IEN warrants specific attention. Lawyers face

many challenges in taking on these cases; particularly, they must deal with a victim/witness who is likely frail and may not live until or through the trial. The little elder abuse and neglect research that exists in this area indicates that mock jurors are willing to decide in favor of the victim in certain circumstances. Consequently, it is important that a case in which the alleged victim is unable to testify be examined. Juror responses in a case where the alleged victim is unable to testify but still have his or her voice heard (via recorded deposition) can prove informative to lawyers in determining what evidence they will need to make a strong case and hopefully encourage them to take on more of these cases. It is also important to investigate other factors, such as juror attitudes towards elders, which may influence the perception of alleged elderly victim testimony.

Overview of Experiment

In the present research, IEN was examined in a civil court context by conducting an online mock juror experiment to investigate the impact of alleged victim testimony in the event that the alleged victim was dead at the time of trial. The impact of juror attitudes toward older adults in such a case was also examined. Participants read a trial summary in which a 76-year-old female nursing home resident filed a civil lawsuit against the nursing home, charging failure to attend to her with the degree of care and skill ordinarily expected of reasonable and prudent nursing homes under similar circumstances. An alleged female victim was described in this case, as female elders are more likely to be the victims of most types of abuse (NCEA, 1998). The summary indicates that the alleged victim died before the trial, which was continued by her son. The trial summary varied with regard to whether the plaintiff's case presented no

testimony from the alleged victim or a previously video recorded deposition from the alleged victim that was taken before she died. A third condition employed a trial summary containing no alleged victim testimony, but presented testimony from the alleged victim's floor-mate to ensure that any differences in participant responses to the trials cannot be solely attributed to the amount of testimony presented. Participants then completed a questionnaire in which they individually ruled for the plaintiff or defendant. They answered various rating questions about the credibility of the different witnesses and their affective reactions, such as anger, to the alleged victim and defendant. Participants also completed an ageism scale, whose presentation was counterbalanced with the trial summary.

Hypothesis 1: Recorded Alleged Victim or Floor-mate Testimony Compared to No Testimony

Mock jurors presented with the alleged victim's recorded testimony or the floor-mate's testimony were predicted to be more likely to rule for the plaintiff as well as have ratings consistent with a pro-victim attitude (e.g., lower ratings of sympathy towards defendant), as Wasarhaley and Golding (2010) found.

Hypothesis 2: Statistical Mediation

Should the above association be found, it was predicted that the relationship between testimony and ruling would be mediated by plaintiff's case credibility ratings, such that the recorded victim testimony or floor-mate testimony would lead to higher credibility ratings for the plaintiff's case, which would explain the higher tendency to rule for the plaintiff, also based on Wasarhaley and Golding's (2010) findings. The pattern of results for the victim's recorded testimony compared to the floor-mate's testimony was

unclear. Wasarhaley and Golding (2010) observed no difference between alleged victim testimony and floor-mate testimony conditions, but their study included live testimony from the alleged victim. The fact that the alleged victim in the present study was dead and “speaking from the grave” may have increased sympathy or credibility as mock jurors could attribute the alleged victim’s death to the neglect (even though it was not stated explicitly as such), thus increasing the likelihood that they will rule for the plaintiff in comparison to those in the floor-mate condition. Or, the fact that the witness did not testify in person may have no effect on sympathy or credibility because she is not present, thus the likelihood of mock jurors to rule for the plaintiff may be no different from when no witness testifies.

Hypothesis 3: Gender Effects

A main effect of gender was predicted. Based on the gender effects observed in Golding et al.’s (2005) elder physical abuse study, it was expected that women would be more likely than men to rule for the plaintiff and have pro-victim attitudes.

Hypothesis 4: Ageism Effects

Participants with stronger ageist attitudes (i.e., higher scores on the ageism scale) were predicted to be less likely to rule for the plaintiff and have lower pro-victim ratings (e.g., higher sympathy for the defendant) than those with lower scores on the ageism scale. Ageist attitudes were also predicted to moderate the effects of the testimony conditions such that participants with stronger ageist attitudes would be equally likely to rule for the plaintiff in the testimony conditions as when no testimony was presented. As higher levels of ageism have been related to more negative attitudes towards elderly witnesses (Mueller-Johnson et al., 2007), exposure to the eyewitness testimony was not

expected to increase the likelihood of ruling for the plaintiff for those high on ageism, as that testimony is coming from an elderly person.

Additional Question: Contact with Elders

As Mueller-Johnson et al. (2007) found that exposure to elders had mixed effects on ratings of an elderly witness, contact with elders was examined as a variable of interest although no specific hypothesis was made.

Chapter Two

Method

Participants

Participants were 233 undergraduates (97 men and 136 women) who were recruited from an introductory psychology course as partial fulfillment of course requirements. Two participants (one male, one female) exited the study without completing the trial questionnaire and ageism measure. Listwise deletion was used to remove these participants from the dataset. Data for 33 male and 50 female participants were also discarded from analyses due to failing at least one manipulation check (e.g., failure to recall that the victim was dead [35], failure to recall that the victim testified when the condition included this testimony [18], failure to recall that the victim's testimony was presented via pre-recorded video [8], failure to recall that the floor-mate testified when the condition included this testimony [9], or erroneously indicating that the victim or floor-mate testified when the condition did not include this testimony [27, 15, respectively]) leaving a final sample of 148 participants (63 men and 85 women). Further discussion of excluded participants will be provided below. Eighty-eight percent of participants self-identified as White, 7% as Black, 2% as Asian or Pacific Islander, 1% as multi-racial, and 2% as other. All participants were English-speaking U.S. citizens at least 18 years of age ($M = 19.5$, $SD = 2.80$) and had not served on a jury within the 24 months prior to completing the study.

Design

A 3 (Testimony: none, recorded alleged victim, or floor-mate) x 2 (Participant Gender) between-participants design was employed.

Materials

Civil law summary. A description of civil laws and the ruling process in civil cases was provided to all participants. It informed participants that they should rule for the plaintiff if the evidence favors the plaintiff, or rule for the defendant if the evidence favors the defendant or they are unable to decide which side the evidence favors. See Appendix A for the full description.

Civil trial summary. A fictional case summary of a neglect trial in which the alleged victim's family sued the nursing home for \$1 million in damages was presented to all participants. The summary contained a general description of the trial, the plaintiff's case, the defense's case, and the judge's instructions. In each condition, the case summary featured the same general information, varying only details necessary to change the condition (i.e., presence of alleged victim recorded testimony or floor-mate testimony). The summary indicated that the alleged victim was unable to testify (or testify in person) because she was deceased. The trial summary contained information about the direct- and cross-examination of witnesses for both the plaintiff's and the defense's cases. A prosecutor with extensive experience in elder abuse cases reviewed the trial summary to ensure that the details of the case were realistic. See Appendix B for the trial summary for the recorded victim testimony condition.

The plaintiff's case included testimony from the alleged victim's son and an Adult Protective Services (APS) worker. In the testimony conditions, the plaintiff's case also included either a video recorded deposition from the alleged victim or testimony from the alleged victim's floor-mate. The control condition contained no additional testimony.

In the trial summary the son stated that during his monthly visit to the nursing home, he discovered his mother lying in her own feces with bedsores on both hips. The son had never seen his mother in this condition previously. The APS worker testified that she was called in to investigate the possible abuse and after hearing the alleged victim's account of the situation, she encouraged her to press charges against the nursing home. In the alleged victim recorded testimony condition, the summary indicated that the alleged victim's testimony was videotaped under oath prior to the trial, and that the defense had an opportunity to cross-examine her. The alleged victim stated that she was a resident of the nursing home for five years, had severe arthritis and had difficulty getting in and out of bed. She had experienced inconsistent help from nursing home staff over the past few weeks, including staff taking over two hours to clean her after soiling herself, and neglecting to tend to bedsores after not being helped out of bed for several days.

The floor-mate testimony condition included testimony from the alleged victim's nursing home floor-mate who witnessed the neglect. The floor-mate testified that she lived across the hall from the alleged victim for five years and noticed that the nursing home staff had been inconsistent in helping the alleged victim in the past few weeks. She noticed on some occasions that staff took several hours to clean the alleged victim after the victim soiled herself, and heard the staff tell the alleged victim that there was nothing wrong with her skin, after the alleged victim informed them of her bedsores.

The defense's case included testimony from a nursing home staff assistant, a nurse, and the nursing home owner. The staff assistant stated that he worked on the alleged victim's floor for a year and never had a problem with any of the residents. He

also said that residents often soil themselves and although the staff cannot get there immediately to help the residents, it has never taken staff two hours to clean up a resident. However, in cross-examination he acknowledged that he had been under a great deal of pressure at work lately, which may have caused him to take longer to assist a resident than that resident would have liked. The nurse stated that she had been treating the alleged victim's bedsores as per the doctor's orders and that they seemed to be getting better. The owner stated that prior to this lawsuit, the nursing home had not been involved in any civil proceedings against it, although in cross-examination he indicated that that there may have been any number of activities that occurred in the nursing home of which he was unaware.

The judge's instructions stated that jurors should rule for the plaintiff if they were satisfied that the nursing home staff failed to comply with their duty to exercise the degree of care and skill ordinarily expected of a reasonable and prudent nursing home, and that such failure was a substantial factor in causing the plaintiff's injuries.

Trial questionnaire. Participants answered various questions pertaining to the case. All rating questions only had the endpoints labeled. Participants indicated their ruling (for the plaintiff or defendant) and rated their confidence in their ruling on a 1 (*not at all*) to 10 (*completely*) scale. They were then asked to provide the reason(s) for their decision and how much in damages they would award if they ruled for the plaintiff. In addition, rating questions (using a 1-*not at all* to 10-*completely* scale) asked participants how credible and honest the various witnesses were (only those exposed to the alleged victim's testimony answered these questions about the alleged victim and only those exposed to the floor-mate's testimony answered these questions about the floor-mate),

how angry and sympathetic they felt toward the alleged victim and the defendant, and how responsible the alleged victim and defendant were for the neglect. Participants also rated how credible the overall testimony was for both the plaintiff's and the defendant's cases on a 1 (*not at all*) to 10 (*completely*) scale, and the alleged victim's general ability to remember and report daily events and to remember the alleged neglect on a 1 (*extremely poor*) to 10 (*excellent*) scale. Finally, they rated their exposure to elders by indicating how much contact they have with adults approximately aged 65, 75, and 85, and how much time they spend in nursing homes in a typical week on a 1 (*none at all*) to 10 (*a lot*) scale. See Appendix C for the full questionnaire.

Fraboni Scale of Ageism (FSA) (Rupp, Vodanovich, & Credé, 2005). This scale consists of 29 items with statements about older adults such as "I sometimes avoid eye contact with old people when I see them." The statements were designed to measure three levels of prejudice: (1) antilocution, or expressions of antagonism fuelled by misconceptions about elderly people, (2) avoidance, or preferences to withdraw from social contact with the elderly, and (3) discrimination, or a more active prejudice regarding political rights, segregation, and intervention into the activities of elderly people (Fraboni, Saltstone, & Hughes, 1990). Participants rated their responses on a 1 (*strongly disagree*) to 4 (*strongly agree*) scale such that higher scores indicated a greater level of prejudice against older persons. Some items were reverse scored. See Appendix D for the complete FSA. (Note: The FSA was supposed to be scored on a 1 (*strongly disagree*) to 5 (*strongly agree*) scale. Due to an oversight, the middle rating option was omitted in the current study. Thus, the maximum score participants could receive was a 116 instead of a 145, as in the original scale.)

Procedure

Participants were directed to a website that contained information about the study and they electronically consented to take part by submitting their name and student identification number into the webpage. (This information is kept in a file separate from participants' questionnaire responses.) They were then directed to a new website, which administered the entire study in an online format (via SurveyMonkey.com). Participants were first prompted to enter their gender, ethnicity, and age. Then they were informed that they would read a description of civil law, read a civil trial summary, and answer various questions. The trial summary was presented with each witness testimony and cross-examination as a separate webpage. Participants proceeded through the trial summary at their own pace by clicking a "Next" button at the bottom of each page. They were prompted to answer a multiple choice question about the trial content before being allowed to advance to the next section of the trial. This was to ensure that participants read and comprehended the trial and did not simply skip through the pages. At the conclusion of the trial summary they answered the questionnaire as described above. They also completed the FSA questions, whose presentation was counterbalanced with the trial summary/questionnaire to reduce any influence of the order in which materials were presented. Upon completion of the questionnaires, participants were directed to read a general explanation of the study and print a copy of the consent sheet. The study took approximately 20 minutes to complete.

Chapter 3

Results

Data Screening

Prior to analysis, the main variables of interest were examined for multivariate normality, outliers, and multicollinearity. Normality was assessed by examining the univariate distributions of the rating variables and ageism scores in SPSS and was found to be satisfactory. The rating variable anger toward victim was positively skewed and leptokurtotic, and anger toward defendant was also leptokurtotic, as the critical ratios for these variables (skewness and kurtosis values divided by the standard error) exceeded the guidelines of three and two, respectively. However, no action was taken as the rating variables were condensed. Examination of scatterplots did not indicate the presence of any outliers.

Means, standard deviations, and total number of participants for each of the primary dependent variables are presented in Table 1. Correlations among the major variables are presented in Table 2. As many of the rating variables were highly related, the variance inflation factor (VIF) values for the association of the main predictor variables of interest to the various rating variables were examined. Specifically, the associations of interest were overall plaintiff case credibility with the ratings for the alleged victim and plaintiff witnesses, and overall defense case credibility with the defendant and defense witnesses. All VIF values were below the rule of thumb of 10 for VIF values, indicating that multicollinearity was not a concern. The Ageism variable was centered prior to subsequent analyses, and a variable called “contact with elders” was

computed by averaging time spent with 65 year olds, 75 year olds, 85 year olds, and in nursing homes.

Counterbalancing Effects

A preliminary analysis to investigate possible differences in responses for participants who were presented the trial first or the ageism scale first was completed. Independent samples t-tests indicated no difference in ruling or ageism scores for any of the three testimony conditions. As for the rating variables, independent samples t-tests showed no differences due to counterbalancing in the no testimony condition. There was a significant order effect on victim general memory for the floor-mate and victim conditions ($t[49] = -2.03, p = .05$; $t[48] = -2.53, p < .05$, respectively) such that those participants who completed the FSA first rated the alleged elderly victim as having a higher ability to remember and report daily events. In the floor-mate condition, there was also a significant order effect for psychological harm to victim ($t[49] = -2.36, p < .05$) with participants who completed the FSA first reporting more psychological harm experienced by the victim. The rating variables were condensed (see below) and independent samples t-tests indicated no differences in the resulting subscales due to counterbalancing. Thus, presentation order was not included as a factor in any further analyses.

Hypothesis 1: Effects of Testimony

Participants ruled for the plaintiff 57% of the time overall. To test for the predicted differences in ruling by testimony condition, the ruling data were analyzed using logistic regression controlling for gender, contact with elders, and ageism. The testimony condition data was dummy coded such that recorded alleged victim testimony

and floor-mate testimony were dummy variables and the no witness testimony condition was the reference group. Despite the dispersion of rulings in the predicted direction such that a higher percentage of participants in the recorded victim and floor-mate testimony conditions ruled for the plaintiff compared to the no testimony condition (recorded victim testimony: 61% plaintiff; floor-mate: 65% plaintiff; no testimony: 45% plaintiff), this analysis did not lead to a significant effect of testimony condition. A logistic regression analysis in which dummy coding allowed for a comparison of the alleged victim recorded testimony and floor-mate testimony conditions (with floor-mate testimony as the reference group) indicated that there was no difference between these groups. To identify effects of testimony on ruling confidence, a linear regression analysis controlling for participant gender, contact with elders, and ageism was conducted. This analysis revealed no differences in ruling confidence due to testimony. For those participants who ruled for the plaintiff, a linear regression analysis exploring the effects of testimony on amount of damages awarded to the plaintiff (controlling for gender, contact with elders, and ageism) did not yield a significant difference.

Prior to testing predictions related to pro-victim ratings, an exploratory factor analysis (principal component analysis with an oblique promax rotation) was conducted to reduce the rating variables that all participants had completed (i.e., ratings specific to the victim or floor-mate were not included). The overall rating for plaintiff's case credibility and defendant's case credibility were not included in the data reduction as these questions were designed to isolate general perceptions of credibility from affective reactions and credibility of individual witnesses. This analysis yielded three subscales: pro-victim (sympathy for victim, victim general memory, victim memory for neglect,

psychological harm to victim, physical harm to victim, son credibility, responsibility of defendant, and anger towards defendant; factor loadings ranging from .57 to .75), defendant witness credibility (APS worker credibility, staff assistant credibility, nurse credibility, owner credibility, and owner honesty; factor loadings ranging from .48 to .89), and pro-defendant (anger towards victim, responsibility of victim, and sympathy towards defendant; factor loadings ranging from .57 to .83). Subscale scores were computed by averaging the component variable scores.

A series of linear regression analyses was conducted to test the prediction that participants in the testimony conditions would have more pro-victim ratings than in the no testimony condition. The dependent variables were overall plaintiff's case credibility, defendant's case credibility, pro-victim subscale, defendant witness credibility subscale, and pro-defendant subscale, with participant gender, contact with elders, and ageism controlled. Exposure to victim testimony significantly predicted overall plaintiff's case credibility ($\beta = .33, p < .001$) and the pro-victim subscale ($\beta = .22, p < .05$). In addition, floor-mate testimony significantly predicted overall plaintiff's case credibility ($\beta = .19, p < .05$). Thus, this hypothesis was supported.

Hypothesis 2: Statistical Mediation

Although the predicted associations between testimony and ruling were not found, a logistic regression analysis was performed to test the effects of the overall credibility ratings and the subscales on ruling, controlling for gender, contact with elders, and ageism. The results showed that overall plaintiff's case credibility, the pro-victim subscale, and the defendant witness credibility subscale predicted ruling (OR = 1.86, $p < .01$; OR = 3.77, $p < .001$; OR = .53, $p < .05$, respectively). The odds ratios (OR) greater

than 1.00 represent the increase in odds of ruling for the plaintiff that are associated with increasing values of plaintiff's case credibility and pro-victim subscale, in that order. The OR less than 1.00 (for the defendant witness credibility subscale) represents the decrease in odds of ruling for the plaintiff associated with increasing values of defendant witness credibility. Because the above linear regression analysis demonstrated that recorded victim testimony significantly predicted plaintiff's case credibility and the pro-victim subscale, which both predicted ruling, the indirect effect of recorded victim testimony on ruling was tested for significance. Sobel (1982) tests indicated that the indirect effect of victim testimony on ruling through both plaintiff's case credibility and the pro-victim subscale were significant, $z = 2.26, p < .05$; $z = 2.12, p < .05$. (Note that the Sobel test was performed using coefficients from a logistic regression; thus, the results may not be accurate.)

Hypothesis 3: Gender Effects

Participant gender was not a significant predictor of ruling, as indicated by the logistic regression analysis. The linear regression analyses revealed no gender differences for ruling confidence or any of the pro-victim ratings.

Hypothesis 4: Ageism Effects

The logistic regression analysis of ruling indicated that ageism did not influence ruling as expected. As for pro-victim ratings, the series of linear regression analyses revealed that ageism significantly predicted overall plaintiff's case credibility ($\beta = -.18, p < .05$) such that higher levels of ageism were associated with lower ratings of the plaintiff's case credibility. The indirect effect of ageism on ruling was not significant. Interaction terms between ageism and recorded victim testimony as well as ageism and

floor-mate testimony were calculated and entered in the second step of the logistic regression analyses for ruling and the second step of the linear regression analyses for pro-victim ratings. No significant interactions were found.

Additional Question: Contact with Elders

Contact with elders significantly predicted ruling such that participants who typically had more contact with elders were more likely to rule for the plaintiff (OR = 1.36, $p = .05$). The linear regression analyses investigating pro-victim ratings indicated that participants who had more contact with elders had significantly higher ratings on the pro-victim subscale than participants who had less contact with elders ($\beta = .25, p < .01$).

Table 1 Descriptives for dependant variables

Variable	<i>N</i>	<i>M</i>	<i>SD</i>
Ruling	148	1.43	.50
Ruling Confidence	148	6.97	1.47
Damages	78	466,525.64	296,851.48
Alleged Victim Credibility	50	7.28	1.67
Alleged Victim Honesty	50	8.06	1.54
Floor-mate Credibility	51	6.84	1.60
Floor-mate Honesty	51	7.37	1.36
Sympathy Toward Alleged Victim	147	7.64	1.75
Anger Toward Alleged Victim	147	1.82	1.39
Alleged Victim Responsibility	147	2.53	2.03
Alleged Victim General Memory	147	5.64	1.99
Alleged Victim Memory for Neglect	147	5.13	2.91
Psychological Harm to Victim	147	5.07	2.92
Physical Harm to Victim	147	5.84	2.83
Plaintiff Case Credibility	147	6.60	1.89
Son Credibility	147	6.16	2.09
APS Credibility	147	6.63	1.99
Defendant Case Credibility	147	6.30	1.89
Staff Assistant Credibility	147	6.17	1.70
Nurse Credibility	147	6.66	1.77
Owner Credibility	147	5.73	2.17

Owner Honesty	147	6.54	2.25
Sympathy Toward Defendant	147	3.41	2.27
Anger Toward Defendant	147	4.52	2.87
Defendant Responsibility	147	6.41	2.77
Ageism	148	53.01	10.15
Contact with Elders	147	2.21	1.25

Table 2 Correlation matrix for variables

	1	2	3	4	5	6	7	8
1. Victim								
2. Floor-mate	-.53**							
3. Ruling	-.05	-.11						
4. Ruling Confidence	.09	-.05	-.06					
5. Damages	-.07	-.08						
6. Vic Cred			-.29*	.42**	.38			
7. Vic Honesty			-.06	.54**	.23	.64**		
8. Floor-mate Cred			-.06	-.11	.00			
9. Floor-mate Honesty			.10	-.20	-.06			
10. Sympathy Toward Vic	.12	.00	-.42**	.18*	.19	.31*	.24	.26
11. Anger Toward Vic	-.11	.13	.13	-.10	-.11	.02	-.08	.21
12. Vic Responsibility	-.01	-.01	-.01	-.15	-.07	-.07	-.06	-.09
13. Victim Gen. Memory	.27**	-.12	-.36**	.21*	.09	.57**	.47**	-.04
14. Vic Memory for Neglect	.23**	-.07	-.40**	.15	-.03	.13	.06	-1.22
15. Psych Harm to Vic	.02	.06	-.47**	.06	.23*	.05	-.19	.08
16. Physical Harm to Vic	.15	-.04	-.48**	.09	.17	.31*	.22	-.02
17. Plaintiff Case Cred	.22**	.03	-.50**	.29**	.13	.69**	.54**	.29*
18. Son Cred	.06	-.09	-.40**	.27**	.27*	.44**	.53**	.41**
19. APS Cred	.08	-.09	-.12	.18*	.22	.03	.24	.29*
20. Defendant Case Cred	.08	-.12	.29**	.01	.00	.06	.27	.47**
21. Staff Asst Cred	.08	-.09	.29**	.11	.00	-.05	.16	.33*
22. Nurse Cred	.07	-.08	.29**	.07	.16	.09	.19	.17
23. Owner Cred	.06	-.16	.24**	.01	.09	-.11	.08	.28*
24. Owner Honesty	-.01	-.11	.24**	-.03	.13	-.06	.13	.25
25. Sympathy Toward Def	.05	-.18*	.27**	-.04	.03	-.07	-.11	.05
26. Anger Toward Def	-.11	.24**	-.53**	.10	.36**	.30*	-.001	-.06

Table 2 (continued)

	9	10	11	12	13	14	15	16
1. Victim								
2. Floor-mate								
3. Ruling								
4. Ruling Confidence								
5. Damages								
6. Vic Cred								
7. Vic Honesty								
8. Floor-mate Cred								
9. Floor-mate Honesty								
10. Sympathy Toward Vic	.14							
11. Anger Toward Vic	.07	-.27**						
12. Vic Responsibility	-.25	.24**	-.30**					
13. Victim Gen. Memory	-.08	.41**	-.19*	-.11				
14. Vic Memory for Neglect	-.29*	.34**	-.03	.05	.49**			
15. Psych Harm to Vic	-.06	.33**	-.20*	.10	.21*	.47**		
16. Physical Harm to Vic	-.12	.34**	-.09	.06	.22**	.45**	.55**	
17. Plaintiff Case Cred	.29*	.50**	.21**	-.04	.52**	.32**	.35**	.35**
18. Son Cred	.22	.47**	-.20*	-.10	.46**	.18*	.28**	.32**
19. APS Cred	.34*	.40**	-.15	.24**	.32**	.18*	.14	.15
20. Defendant Case Cred	.55**	.03	-.05	-.10	.17*	-.14	-.08	-.12
21. Staff Asst Cred	.37**	.06	-.11	-.10	.18*	-.09	-.08	-.24**
22. Nurse Cred	.24	.04	.14	-.07	.14	-.13	-.09	-.23**
23. Owner Cred	.25	-.01	-.02	-.05	.04	-.05	-.14	-.09
24. Owner Honesty	.18	-.05	-.002	-.004	.14	-.04	-.09	.01
25. Sympathy Toward Def	.09	-.20*	.20*	.10	-.03	-.14	-.24**	-.22**
26. Anger Toward Def	-.23	.48**	-.06	-.13	.28**	.38**	-.40**	.37**

Table 2 (continued)

	17	18	19	20	21	22	23	24	25
1. Victim									
2. Floor-mate									
3. Ruling									
4. Ruling Conf									
5. Damages									
6. Vic Cred									
7. Vic Honesty									
8. Floor-mate Cred									
9. Floor-mate Honesty									
10. Sympathy Toward Vic									
11. Anger Toward Vic									
12. Vic Responsibility									
13. Victim Gen. Memory									
14. Vic Memory for Neglect									
15. Psych Harm to Vic									
16. Physical Harm to Vic									
17. Plaintiff Case Cred									
18. Son Cred	.64**								
19. APS Cred	.42**	.52**							
20. Def Case Cred	.07	.21*	.34**						
21. Staff Asst Cred	.13	.11	.29**	.74**					
22. Nurse Cred	.10	.05	.24**	.64**	.83**				
23. Owner Cred	.09	.11	.31**	.33**	.69**	.62**			
24. Owner Honesty	.04	.20*	.19*	.45**	.51**	.47**	.66**		
25. Sympathy Toward Def	-	.21**	-.15	-.05	.25**	.27**	.32**	.32**	.25**
26. Anger Toward Def	.34**	.28**	.08	-.38**	-.29**	-.30**	-.28**	-.20*	-.37**

Table 2 (continued)

	1	2	3	4	5	6	7	8
27. Defendant Responsibility	.03	.15	-.55**	.14	.05	.36*	.35*	.11
28. Ageism	-.04	-.01	.13	-.17*	.03	-.31*	-.35*	.25
29. Contact with Elders	-.14	.13	.19*	.25**	.17	.03	.25	-.05
	9	10	11	12	13	14	15	16
27. Defendant Responsibility	.13	.44**	-.26**	-.12	.36**	.37**	.42**	.49**
28. Ageism	.27	-.23**	.20*	.18*	-.31**	-.08	-.06	-.06
29. Contact with Elders	-.07	.19*	-.10	-.02	.13	.17*	.13	.24**
	17	18	19	20	21	22	23	24
27. Defendant Responsibility	.48**	.46**	.27**	-.07	-.09	-.10	-.19*	-.12
28. Ageism	-.25**	-.27**	-.07	-.05	-.09	-.09	.02	-.06
29. Contact with Elders	.16	.22**	.11	-.09	-.01	-.02	-.02	-.02
	25	26	27	28				
27. Defendant Responsibility	-.33**	.48**						
28. Ageism	.09	-.09	-.17*					
29. Contact with Elders	-.11	.18*	.22**	-.23**				

Chapter Four

Discussion

The intent of this study was to examine mock juror perceptions of institutional elder neglect, specifically in an instance in which the alleged elderly victim is deceased at the time of the trial. Participants read a fictitious civil court trial in which a nursing home was sued for neglecting an elderly resident. The witness testimony was manipulated such that participants received no testimony, testimony from the alleged victim's nursing home floor-mate, or testimony from the alleged victim that was recorded prior to her death and played on video during the trial. The data in this experiment did not support the main hypothesis that mock jurors would be more likely to rule for the plaintiff when recorded victim or floor-mate testimony was presented compared to no victim testimony. Despite the lack of difference in rulings between the testimony conditions, those in the recorded victim and floor-mate testimony conditions rated the plaintiff's case as more credible than in the no testimony condition. Additionally, participants in the recorded victim testimony condition had higher pro-victim ratings than those in the no testimony condition.

The lack of main effects for ruling differences in the predicted direction differs from those found by Wasarhaley and Golding (2010) and could be explained by differences in the trial summaries used. When the fictional trial summary was reviewed for accuracy, it was suggested that elder neglect cases will not be taken to court without certain pieces of evidence (e.g., bedsores at an advanced stage; K. Connor, personal communication, February 16, 2010). Thus, some of the more ambiguous details of the trial summary utilized by Wasarhaley and Golding (2010) were altered to be more

explicitly severe in the current study (e.g., mentioning that the elderly alleged victim rang her call button for help without receiving a response). This could have caused an increase in the likelihood of ruling for the plaintiff in the no testimony condition, reducing the impact of the floor-mate or recorded victim testimony in comparison. Furthermore, participants in this study read the trial. Not being able to see the elderly victim testimony being presented on video, or the floor-mate testimony being presented, may have led to fewer rulings for the plaintiff than had visuals been presented. However, the recorded victim's testimony did have a significant indirect effect on ruling through overall plaintiff's case credibility and pro-victim subscale. When the alleged victim's testimony was presented, participants saw the plaintiff's case as more credible, and the perceived credibility made them more likely to rule for the plaintiff. Additionally, when the recorded victim testimony was presented, participants rated the alleged victim more positively, which increased the likelihood that they would rule for the plaintiff.

Contrary to expectations, no gender effects were observed in this study, indicating that male jurors may have an increased likelihood or female jurors a decreased likelihood of ruling for the plaintiff in neglect cases. Although previous research of juror perceptions in cases such as elder physical abuse (e.g. Golding et al., 2005) has indicated that women mock jurors tend to be more "pro-victim" than men, the current research suggests that such findings may not extend to elder neglect cases. This lack of gender effects was also observed in a study of IEN (Wasarhaley & Golding, 2010) as well as elder neglect in a criminal context (Golding et al., 2004), providing additional support for the suggestion that the specifics of elder neglect cases may make these cases unique in

terms of gender effects. This proposal warrants future research that focuses more specifically on participant gender.

As for the effects of ageism, the data in this experiment did not support the hypothesis that ageism would influence ruling. However, ageism did predict credibility ratings such that those with higher ageism scores rated the plaintiff's case as less credible. This supports the finding of Mueller-Johnson et al. (2007) that ageism scores predicted credibility ratings of an elderly witness. This result has noteworthy repercussions for the justice system. Considering the growing elderly population in the United States, more elderly individuals are likely to be involved in legal proceedings. Existing ageist attitudes can affect how they are perceived not only in neglect cases, but potentially other abuse cases or as witnesses in general, which could have an impact on the outcome of a case.

Though no specific predictions were made, contact with elders was found to have a significant impact on ruling, such that those with more contact with elders were more likely to rule for the plaintiff. Those with more contact also had higher pro-victim ratings than participants who had less contact with elders. This finding lends some explanation to the mixed effects of contact with elders on perceptions of elderly witnesses found by Mueller-Johnson et al. (2007). These researchers found that while elderly male witnesses (79 and 89 years old) were consistently rated more positively than a younger male witness (49 years old), higher contact with elders led to ratings of the elderly witnesses as less honest than those with less exposure to elders. Additionally, Mueller-Johnson et al. (2007) found that more exposure to elders led participants to rate the elderly witness at the same level of suggestibility as the younger witness, compared to those with low

exposure to elders who rated the elderly witness as more suggestible. The authors explained this finding in that exposure to elderly individuals may lead to less stereotypical attitudes towards the elderly, for both positive (honest) and negative (suggestible) stereotypes. The finding in the current study that more contact with elders lead to higher pro-victim ratings could be consistent with this interpretation in that the pro-victim subscale included rating items such as victim general memory. The present study and the study by Mueller-Johnson et al. (2007) employed different measures of contact or exposure to elders as well as different rating variables. Rather than asking participants to rate contact with elders in a typical week as in the current study, their participants indicated the typical amount of time spent with elders during university term time. In addition, participants in Mueller-Johnson et al.'s (2007) study rated witnesses on the following attributes not featured in the current study questionnaire: convincing, competent, accurate, confident, and suggestible. Further studies could more explicitly tease apart the relationship between contact with elders and stereotypical attitudes by including more extensive measures of both of these elements.

Despite the contributions of the above findings to our understanding of how elder neglect is perceived in civil court, certain limitations deserve mention. First, the use of a student sample may be of concern in generalizing the results. It is acknowledged that juries are not comprised mainly of college students. However, many mock jury studies utilize undergraduate samples, and research has indicated that this typically does not have much impact on the results of such studies (Bornstein, 1999). In a study of elder physical abuse that employed a sample of college students and community members, participant age did not significantly impact conviction rates (Kinstle et al., 2008). Furthermore,

while no clear pattern of age differences in attitudes toward aging exists in the current literature (Kite & Wagner, 2002), Hummert (1999, as cited in Kite & Wagner, 2002, p. 147) suggests that older and younger people generally agree about the stereotypes associated with aging. Secondly, that this study only focused on individual juror perceptions and did not include jury deliberations could potentially reduce the applicability of the present findings (Weiten & Diamond, 1979). As little research in this area exists, the present research served as an early step in understanding perceptions of IEN in a civil context. It is hoped that future research will incorporate an element of deliberation to increase the applicability of the findings.

Another area of concern is that the study was conducted in an online format. Gosling, Vazire, and Srivastava (2004) identified a main concern about using internet methods as the potential for anonymity compromising the data (i.e., having participants who complete the study multiple times). Yet the current study was designed in a way that minimized this possibility: participants were required to enter their student identification number and could not complete the study if that particular number had already been entered. Moreover, an analysis comparing a web-based study to an identical traditional study indicated that the data provided by internet methods was at least as good as that collected in a paper-and-pencil manner (Gosling et al., 2004).

Despite the precautions taken to preserve the quality of data collected online, the large number of participants that had to be excluded for failing one if not multiple manipulation check questions puts this method into question. It is unclear why so many participants incorrectly answered these questions, compared to the small numbers of participants who had to be excluded in similar studies employing paper-and-pencil

methods (e.g., Wasarhaley & Golding, 2010). At first glance, it would appear that participants did not read the trial summary carefully enough to remember, for example, whether the alleged victim in the case was still alive or dead at the time of trial. An independent samples t-test comparing time to complete the study (in minutes) for those who were included in analyses ($M = 23.47$) to those who were excluded ($M = 20.17$) indicated that those who were included spent significantly longer on the study ($t[208] = 2.84, p < .01$). However, the difference of three minutes does not seem substantial enough to make a major impact on understanding. After each section of testimony was presented, participants were prompted to answer a question about the content of the trial on that particular page to ensure that they read the trial at a level of comprehension. Potentially, the manipulation check questions could have been worded in a way that was unclear to participants. For instance, participants in the floor-mate or no testimony condition who read the question “Was any type of testimony from the alleged victim (Mrs. Georgia Davis) presented during the trial?” could have taken it to mean any testimony pertaining to her case and consequently responded affirmatively, even though they did not receive any testimony from the alleged victim personally. Ultimately, the impact of removing such a high number of participants from analysis likely impacted the power to detect effects of testimony in this study.

For future studies employing similar methodology, it is imperative to design manipulation check questions that will be clearer to the participants. Alternatively, the questions used to check for comprehension throughout the trial, which force participants to be more attentive, could be specific to the manipulations used. Accordingly, participants would have to identify early on whether the alleged victim was alive, for

example, rather than after filling out some of the questionnaire. Finally, the trial summary itself may need to be clearer. In this particular trial, the alleged victim's testimony was presented via video, a detail which may have been hard to recollect since the testimony was read. The trial summary could include additional reminders of such important facts, or could include pictures of the various witnesses to help participants better remember the details.

Overall, the present findings further our knowledge of juror perceptions of IEN. The indirect effect of recorded victim testimony on ruling through overall plaintiff's case credibility was consistent with Wasarhaley and Golding (2010). The results also shed light on the impact of individual differences among jurors in IEN cases, specifically ageism and the typical amount of contact that mock jurors have with elderly individuals. Including measures of ageism and contact with elders was an important step in better understanding juror perceptions of IEN, as so little research in this area exists. The results present information that could be of use for prosecutors of IEN and other elder abuse cases. Asking a potential juror how much contact he or she has with elders or establishing the presence of ageist attitudes during the voir dire proceedings (i.e., when a juror is examined to establish competence) could inform a prosecutor how that particular juror might respond in such a case. In conclusion, as the growing population of elderly Americans continues to rely on others for care needs, it is imperative to understand how IEN cases are perceived in court as legal ramifications may serve as a deterrent for mistreatment of elders. It is hoped that these results will lead to additional research that further investigates the impact of alleged victim testimony as well as the effects of

individual factors such as ageism and exposure to elders on juror decision making in such cases.

Appendix A

Civil Law Summary

Civil laws define the rights and liabilities of individuals in relation to each other and to society. For example, actions in civil law may enable one person to recover money from another. In civil cases, the plaintiff asks the court to determine whether the defendant has violated the plaintiff's rights in some way. Usually the plaintiff also asks the defendant to pay damages if the jury decides the defendant caused injury to the plaintiff. A jury in a civil case finds for the plaintiff if it decides that the evidence favors the plaintiff. If the jury finds that the evidence favors the defendant, its verdict is in favor of the defendant. If the jury cannot decide which side the evidence favors, it finds for the defendant.

Appendix B

Civil Trial Summary

Mr. Ronald Davis on behalf of Mrs. Georgia Davis (Plaintiff) vs. Golden Years Nursing Home (Defendant)

General Description of Trial

On April 9, 2009, 76-year-old Mrs. Georgia Davis filed a civil lawsuit in the Fayette County Circuit Court against Golden Years Nursing Home. The plaintiff (Mrs. Davis) complained that Golden Years Nursing Home neglected to attend to her with the degree of care and skill ordinarily expected of reasonable and prudent nursing homes under similar circumstances during the month of February 2009. The suit asked for damages of \$1 million. The Defense denied the Plaintiff's claims, and a trial was held to resolve the dispute. Mrs. Georgia Davis died prior to the start of the trial, so her son, Mr. Ronald Davis, continued the lawsuit on his mother's behalf. Prior to her death, Mrs. Davis was videotaped giving a deposition (a statement under oath about the abuse) where the defense attorney had the opportunity to cross-examine her.

The Plaintiff will call the following witnesses:

- (1) Mr. Ronald Davis, son of the alleged victim Mrs. Georgia Davis
- (2) Mrs. Diana Cahillane, M.S.W (Master of Social Work and Adult Protective Services worker)
- (3) The Plaintiff will present a videotaped deposition from Mrs. Georgia Davis, alleged victim and resident at Golden Years Nursing Home, which was recorded prior to her death.

The Defense will call the following witnesses:

- (1) Mr. David Weeks, Staff Assistant at the Golden Years Nursing Home
- (2) Nurse April Farmer, R.N., staff member at the Golden Years Nursing Home
- (3) Mr. Edward Richardson, owner of the Golden Years Nursing Home

Plaintiff's Case

Witness 1: Mr. Ronald Davis

Direct Examination:

Mr. Ronald Davis is the only son of Georgia Davis. Georgia Davis was a resident of the Golden Years Nursing Home. Mr. Ronald Davis visited his mother about once a month to check on her health and to see if he could do anything to help her. On February 20, 2009 he visited the Golden Years Nursing Home to see his mother. His mother was lying in bed when he came into her room. Mr. Ronald Davis immediately noticed that his mother had soiled herself. There was a brown ring of urine on her bed sheet and she was lying in her feces, which had encrusted on her skin. As he was helping his mother get out of bed, he also noticed that his mother had developed bedsores on both of her hips. Mr. Ronald Davis immediately summoned the staff to find out why his mother was in this condition. He then called an ambulance and had his mother transported to the emergency room at St. Mary's Hospital.

Cross Examination:

Mr. Ronald Davis acknowledged that his mother may have recently soiled herself, and thus the staff may simply not have time to notice her situation. In addition, Mr.

Ronald Davis stated that to his knowledge there was never a previous time that his mother was lying in her own feces or that his mother had ever had bedsores before.

Witness 2: Ms. Diana Cahillane, M.S.W (Master of Social Work and Adult Protective Services worker)

Direct Examination:

Ms. Diana Cahillane testified that she was the Adult Protective Services worker assigned to investigate the possible neglect of Mrs. Georgia Davis at St. Mary's Hospital. Adult Protective Services agencies investigate reports of abuse or neglect of elderly people and can provide referrals and arrange for services such as counseling. Ms. Cahillane stated that she arrived at the hospital at approximately 3: 00 PM on February 20, 2009. When she arrived at Mrs. Georgia Davis's hospital room, Mrs. Georgia Davis was lying in bed and appeared to be very upset. She looked as though she had been crying, and Ms. Cahillane handed her a tissue. Ms. Cahillane testified that Mrs. Georgia Davis stated that she knew why Ms. Cahillane was there, and described the situation at Golden Years Nursing Home. Mrs. Georgia Davis was very upset as she gave this description, and Ms. Cahillane sat and held her hand for several minutes. Ms. Cahillane reported that based on the statements made by Mrs. Georgia Davis and her son, she had encouraged them to press charges against the nursing home. They agreed and then they called the police to report the incident and press charges against the nursing home.

Cross Examination:

Ms. Cahillane said that the call she received from the hospital concerning Mrs. Georgia Davis was the first report of any problem between Mrs. Georgia Davis and the

Golden Years Nursing Home; Adult Protective Services had received no complaints prior to February 20, 2009, from Mrs. Georgia Davis or any person acting on her behalf. Ms. Cahillane admitted that Mrs. Georgia Davis did not appear frightened by the staff at the retirement home, although she did appear upset.

Witness 3: Mrs. Georgia Davis, as presented via videotaped deposition recorded prior to her death

Direct Examination:

Mrs. Georgia Davis, aged 76 years old, has been a resident of the Golden Years Nursing Home for five years living in a single room. She has severe arthritis and has difficulty getting in and out of bed. Mrs. Georgia Davis stated that, in general, the staff has helped her deal with everyday activities, including getting out of bed to go to the bathroom and getting dressed. However, Mrs. Georgia Davis said that for the past few weeks the staff has been very inconsistent in helping her. This has led to her soiling herself on several occasions, including the day that her son came to see her. On these occasions, Mrs. Georgia Davis said it has taken the staff some time to clean her, including one time where she had to lay in her own feces for over two hours. Mrs. Georgia Davis said that on these embarrassing occasions she pressed her call button immediately following the accident and tried to call the staff to help her but that she was told someone would come to her room when they were free.

In addition to the problems with soiling herself, Mrs. Georgia Davis described the development of her bedsores. She recounted how after not being helped from her bed for several days she noticed that her skin was getting tender and inflamed on specific parts of

her hips. Mrs. Georgia Davis said these parts seemed to be getting squeezed between her hip bone and the bed. These sores were particularly bothersome and continued to get worse over time. She informed the staff about these bedsores, but she was told that there was nothing wrong with her skin.

When asked by the prosecuting attorney why she had decided to have her son press charges against the retirement home, Mrs. Georgia Davis reported that she had not planned to press charges at first but that the Adult Protective Services worker, Ms. Diana Cahillane, had encouraged her to do so. Mrs. Georgia Davis said that pressing charges against the retirement home was the hardest thing she had ever done. She said that she pressed charges because she believed they were wrong in how they treated her.

Cross Examination:

Mrs. Georgia Davis stated that her care over the five years, except for these current problems, had been excellent. In addition, she stated that he was not sure why she did not complain to her son about her problems; she didn't want to cause any trouble. She also said that she is fond of the staff at the nursing home, and has never known them to be cruel until they did not help her as she described in her direct testimony. She agreed that as far as she knew these acts were uncharacteristic of their usual behavior, and she attributed their behavior to the stress of their work and being shorthanded. She also admitted that no one heard the staff reply to her as she described. When asked whether she has recently had difficulties with controlling her bowels, she answered, "Yes."

Defense's Case

Witness 1: Mr. David Weeks, Staff Assistant at Golden Years Nursing Home

Direct Examination:

Mr. David Weeks is a 26-year-old man. He is currently employed as a Staff Assistant at the Golden Years Nursing Home. Mr. Weeks has been on staff for four years and has worked on Ms. Georgia Davis's floor for the last year. During the time he has worked at the nursing home he has never had a problem with any of the residents. Moreover, he said that he and Mrs. Georgia Davis had a very friendly relationship in the time he has worked on Mrs. Georgia Davis's floor. He has always attended to the residents when they have contacted him. This includes making sure that those residents with any type of disability are helped out of bed, and are assisted while dressing.

When asked if there are ever times that residents soils themselves, Mr. Weeks answered that this happens all of the time, and that he and the other staff are simply not able to get there to help the residents immediately. However, Mr. Weeks said he and the other staff make sure to help clean everything up as soon as they can. He stated that he has never taken more than two hours to clean up a resident, and he knows of no other staff person who has ever taken this long to attend to a resident. As for Mrs. Georgia Davis's bedsores, Mr. Weeks stated that he did notice Mrs. Georgia Davis's skin was inflamed, but when he asked her about it, Mrs. Georgia Davis said that it was not causing her any discomfort.

Cross Examination:

Mr. Weeks admitted that he has become frustrated with the residents on occasion, including Mrs. Georgia Davis. He also acknowledged that he has been under a great deal

of pressure lately due to his work, and this strain may have caused him to be irritable with Mrs. Georgia Davis. Mr. Weeks ended his testimony by stating that it is possible that it took him longer to assist a resident than that resident would have liked.

Witness 2: Nurse April Farmer, R.N., staff member at Golden Years Nursing Home

Direct Examination:

Nurse April Farmer is a registered nurse who has worked at both hospitals and residential facilities for elders. She has been on staff at Golden Years Nursing Home for 15 years and is 48 years old. Nurse Farmer is responsible for dealing with the medical needs of residents on two floors. She helps with dispensing medicine, checking vital signs, and assisting with other medical procedures. Nurse Farmer feels that she gets along well with both the residents (including Mrs. Georgia Davis) and the staff assistants at the nursing home. She cannot recall a single instance of her raising her voice with a resident or a resident complaining about her work

Nurse Farmer was also asked about residents soiling themselves. She said that this occurs often, but that the staff are very mindful of these accidents and do their best to clean up the residents and the furniture, including beds, as quickly as possible. Mrs. Farmer said that she had been keeping a close watch on the bedsores found on Mrs. Georgia Davis's hips. She had been cleaning them with a saline solution and administering Vitamin C and Zinc dietary supplements to promote healing as initially ordered by the doctor. She was also working with the staff to make sure Mrs. Georgia Davis changed her position in bed every few hours. Nurse Farmer stated that when

assessing the bedsores, Mrs. Georgia Davis always said that they did not hurt and that the bedsores seemed to be getting better.

Cross Examination:

Nurse Farmer said that it was possible that the treatment she was giving to Mrs. Georgia Davis for the bedsores was not working and that perhaps she should have consulted with the doctor again. Also, Nurse Farmer acknowledged that there may have been times when the staff did not clean up quickly after residents soiled themselves. She is not aware of every instance where a clean-up is required.

Witness 3: Mr. Edward Richardson, owner of the Golden Years Nursing Home

Direct Examination:

Mr. Edward Richardson is the owner of the Golden Years Nursing Home. He bought the home in 2000 after having been involved in other real estate holdings, such as office buildings. Mr. Richardson is involved in the day-to-day operations of the 100-bed facility. This includes dealing with purchasing and all personnel decisions.

When asked about the condition of the facility, Mr. Richardson stated that although the Golden Years Nursing Home was built in 1985, the structure is in excellent condition and there was a major renovation of all resident rooms in 1998. All of the facility's licenses are up to date. He also stated that prior to this lawsuit there has not been a single civil proceeding against the nursing home. Mr. Richardson is proud of his staff, both nurses and staff assistants, and feels that they always go the extra mile to help the residents. When he walks the floors of the facility he always seems to find the residents smiling and the staff working very hard to assist the elderly residents.

Cross Examination:

Mr. Richardson admitted that there may be any of a number of activities that occur in the Golden Years Nursing Home that he does not know about. He does not check every resident's status every day and he is often at meetings outside of the building. Finally, Mr. Richardson acknowledged that in his time as owner he has had to fire five employees because of complaints registered by the residents on other floors than Mrs. Georgia Davis.

Instructions to Jurors

Judge Albert Graham

Judge Graham charged the jurors with the following instructions:

It is the duty of the nursing home and its employees in attending its residents, including the Plaintiff's mother, Mrs. Davis, to exercise the degree of care and skill ordinarily expected of reasonable and prudent nursing homes under similar circumstances. If you are satisfied from the evidence that they failed to comply with that duty and that such failure was a substantial factor in causing the Plaintiff's injuries (physical and/or psychological), you will find for the Plaintiff, otherwise you will find for the nursing home.

9. (If answered "Yes" to #6) How honest was the alleged victim?

1 2 3 4 5 6 7 8 9 10

not at all

completely

10. Is the alleged victim (Mrs. Georgia Davis) alive?

Yes _____

No _____

11. Did the alleged victim's floor-mate from the nursing home testify during the trial?

Yes _____

No _____

12. (If answered "Yes" to #11) How credible was the alleged victim's floor-mate?

1 2 3 4 5 6 7 8 9 10

not at all

completely

13. (If answered "Yes" to #11) How honest was the alleged victim's floor-mate?

1 2 3 4 5 6 7 8 9 10

not at all

completely

14. How credible was the overall testimony for the plaintiff's case (i.e. son of alleged victim)?

1 2 3 4 5 6 7 8 9 10

not at all

completely

15. How much sympathy did you have for the alleged victim?

1 2 3 4 5 6 7 8 9 10

none at all

a lot

16. How much anger did you have toward the alleged victim?

1 2 3 4 5 6 7 8 9 10

none at all

a lot

17. How would you rate the alleged victim's general ability to remember and report daily events?

1	2	3	4	5	6	7	8	9	10	
extremely										excellent
poor										

18. How would you rate the alleged victim's ability to remember and report the neglect?

1	2	3	4	5	6	7	8	9	10	N/A
extremely										excellent
poor										

19. How responsible was the alleged victim for the neglect?

1	2	3	4	5	6	7	8	9	10	N/A
not at all										completely
responsible										responsible

20. How much was the alleged victim psychologically harmed by the neglect?

1	2	3	4	5	6	7	8	9	10	N/A
not at all										completely
harmed										harmed

21. How much was the alleged victim physically harmed by the neglect?

1	2	3	4	5	6	7	8	9	10	N/A
not at all										completely
harmed										harmed

22. How credible was the alleged victim's son?

1	2	3	4	5	6	7	8	9	10
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not at all completely

23. How credible was the Adult Protective Services worker?

1 2 3 4 5 6 7 8 9 10

not at all completely

24. How credible was the overall testimony for the defense's case (i.e. nursing home)?

1 2 3 4 5 6 7 8 9 10

not at all completely

25. How credible was the Staff Assistant?

1 2 3 4 5 6 7 8 9 10

not at all completely

26. How credible was the nurse?

1 2 3 4 5 6 7 8 9 10

not at all completely

27. How credible was the owner of the nursing home?

1 2 3 4 5 6 7 8 9 10

not at all completely

28. How honest was the owner of the nursing home?

1 2 3 4 5 6 7 8 9 10

not at all completely

29. How responsible was the Defendant for the neglect?

1 2 3 4 5 6 7 8 9 10 N/A

not at all completely

responsible responsible

30. How much sympathy did you have for the Defendant?

1 2 3 4 5 6 7 8 9 10

none at all

a lot

31. How much anger did you have toward the Defendant?

1 2 3 4 5 6 7 8 9 10

none at all

a lot

32. What was the alleged victim's gender?

Male _____

Female _____

33. How old was the alleged victim at the time of the alleged neglect? (Assume the age of the alleged victim was the same at the time of the incident and when the lawsuit was filed.) If you do not know the exact age, please estimate the age.

_____years old

34. In a typical week, how much contact do you have with adults who are about 65 years old?

1 2 3 4 5 6 7 8 9 10

none at all

a lot

35. In a typical week, how much contact do you have with adults who are about 75 years old?

1 2 3 4 5 6 7 8 9 10

none at all

a lot

36. In a typical week, how much contact do you have with adults who are about 85 years old?

1 2 3 4 5 6 7 8 9 10

none at all

a lot

37. How much time do you spend in nursing homes in a typical week?

1 2 3 4 5 6 7 8 9 10

none at all

a lot

38. What is the nature of the time you typically spend in nursing homes? Select all that apply.

Visiting and elderly relative

N/A

Volunteering

Other (please specify)

Employed in a nursing home

39. Have you ever served on a jury?

(A) No

(B) Yes

(If answered yes to #39) Please answer the following questions:

40. On how many occasions have you served on a jury? _____

41. For each time you have served on a jury, state what crime was involved.

42. What was the outcome in each of the trials?

43. If you served on a jury that did not reach a unanimous verdict, did you personally think the defendant was guilty or not guilty? Answer this question for each jury in which this occurred.

*22. Most old people are interesting, individualistic people.

1 2 3 4

Strongly disagree strongly agree

23. I personally would not want to spend much time with an old person.

1 2 3 4

Strongly disagree strongly agree

24. There should be special clubs set aside within sports facilities so that old people can compete at their own level.

1 2 3 4

Strongly disagree strongly agree

*25. Old people deserve the same rights and freedoms as do other members of our society.

1 2 3 4

Strongly disagree strongly agree

26. Most old people should not be allowed to renew their drivers licenses.

1 2 3 4

Strongly disagree strongly agree

*27. Old people can be very creative.

1 2 3 4

Strongly disagree strongly agree

28. I would prefer not to live with an old person.

1 2 3 4

Strongly disagree strongly agree

29. Old people do not need much money to meet their needs.

1

2

3

4

Strongly disagree

strongly agree

*Items scored in reverse.

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Vita

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Born: 2/21/1982 in Plainview, NY

Education

Columbia University Teachers College, Master of Arts, 2008
Cognitive Studies in Education
Thesis: Evaluating the impact of interactive video on learning: An exploratory study of a video-based learning environment
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Hamilton College, Bachelor of Arts (Summa Cum Laude), 2004
Psychology (Honors)
Thesis: Emotion and memory in the courtroom: How the emotionality of a trial influences memory accuracy, memory confidence, and deliberations of jurors
Advisor: Penny L. Yee

Professional Experience

Center on Drug and Alcohol Research, University of Kentucky, Lexington, KY
Research Assistant (2009-present)
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Council of State Governments Justice Center, Criminal Justice/Mental Health Consensus Project, New York, NY
Web Coordinator (2008)
Research Assistant (2007-2008)

Canon U.S.A., Inc., Consumer Imaging Group, Internet Marketing Division, Lake Success, NY
Marketing Administration Associate (2005-2007)

CitiDexLL, Inc., Long Island Directory and Web Marketing Firm, Huntington, NY
Market Research Assistant (2004-2005)

Scholastic and Professional Honors

“We’ve Come a Long Way” Award, Canon U.S.A. Consumer Imaging Group 2006 E-Commerce (January 2007)

Phi Beta Kappa (2004)

Jonathan Marder Prize for excellence in the study of psychology (2004)

Psi Chi (National Honor Society in Psychology; 2002), *Chapter President* (2003-2004)

Fillius/Drown Prize Scholarship for academic excellence, outstanding leadership (2003)

Michael Maslyn ’01 Memorial Prize Scholarship for exceptional class spirit (2003)

Kingsley Prize Scholarship for academic achievement and community leadership (2002)

Alexander Hamilton’s List for Excellence in Writing (2001, 2003)

Presentations

Wasarhaley, N. E. (April, 2010). *Perceptions of institutional elder neglect in civil court.* Presentation at the 4th Annual University of Kentucky Graduate Student Congress Interdisciplinary Conference, Lexington, KY.

Wasarhaley, N. E. (November, 2009). *Institutional elder neglect in civil court: Perceptions of elder testimony.* Presentation for University of Kentucky Cognitive Psychology Department, Lexington, KY.

Wasarhaley, N. E., Golding, J. M., Dunlap, E. E., & Hodell, E. C. (March, 2009). *Institutional elder neglect: perceptions in civil court.* Paper presented at American Psychology-Law Society Annual Conference, San Antonio, TX.

Golding, J. M., Hodell, E. C., Dunlap, E. E., **Wasarhaley, N. E.,** & Keller, P. (March, 2009) *Perceiving elder financial abuse in a mock jury context.* Paper presented at American Psychology-Law Society Annual Conference, San Antonio, TX.

Posters

Wasarhaley, N. E., Simcic, T. A., & Golding, J. M. (2010, August). *Perception of a sexual assault nurse examiner in court.* Poster session presented at the 118th Annual American Psychological Association Convention, San Diego, CA.

Webster, J. M., Dickson, M. F., **Wasarhaley, N. E.,** & Staton-Tindall, M. (2010, June). *Lifetime and past year prevalence of drug use and drugged driving among rural Appalachian DUI offenders.* Poster session presented at the 72nd Annual Meeting of the College on Problems in Drug Dependence. Scottsdale, AZ.

Wasarhaley, N. E., Dickson, M. F., & Webster, J. M. (2010, March). *A geographical comparison of DUI-related collisions in Kentucky.* Poster session presented at the 5th Annual Center for Clinical and Translation Science Spring Conference, Lexington, KY.

Dickson, M. F., **Wasarhaley, N. E.**, & Webster, J. M. (2010, March). *Family history of substance and mental health problems among rural Appalachian DUI offenders*. Poster session presented at the 5th Annual Center for Clinical and Translation Science Spring Conference, Lexington, KY.

Webster, J. M., Staton-Tindall, M., Dickson, M. F., **Wasarhaley, N. E.**, Leukefeld, C., & Wilson, J. (2009, June). *Gender differences in employment and employment barriers among drug abusers*. Poster session presented at the annual meeting of the College on Problems of Drug Dependence, Reno/Sparks, NV.