RESOLVED, That the American Bar Association urges federal, state, local, and territorial governments to improve the administration of elections to facilitate voting by all individuals with disabilities, including people with cognitive impairments, by:

1. Studying and developing best practice guidelines for ballot design to maximize access;
2. Adapting their laws, practices and technologies to permit “mobile polling” stations;
3. Ensuring that instructions, signage, and other communications regarding elections are accessible; and
4. Permitting sufficient alternative forms of identification verification to facilitate registering and voting.

FURTHER RESOLVED, That the American Bar Association urges federal, state, local, and territorial governments to ensure that no governmental entity exclude any otherwise qualified person from voting on the basis of medical diagnosis, disability status, or type of residence. State constitutions and statutes that permit exclusion of a person from voting on the basis of mental incapacity, including guardianship and election laws, should explicitly state that the right to vote is retained, except by court order where the following criteria must be met:

1. The exclusion is based on a determination by a court of competent jurisdiction;
2. Appropriate due process protections have been afforded;
3. The court finds that the person cannot communicate, with or without accommodations, a specific desire to participate in the voting process; and
4. The findings are established by clear and convincing evidence.
FURTHER RESOLVED, That the American Bar Association urges federal, state, local, and territorial governments to permit citizens to opt freely for absentee (“vote at home”) balloting, permanently or temporarily, including at the time of registration, with the ability to change one’s choice thereafter.

FURTHER RESOLVED, That the American Bar Association urges state, local, and territorial governments to improve access to voting by residents of long-term care facilities that provide room, board, and any level of personal care to persons in need of assistance. Such efforts should include the following:

1. Establishing mobile polling stations in long-term care facilities under the supervision of trained teams of local election officials;

2. Where mobile polling is not available, providing teams of election officials at the local level to conduct absentee voting in long-term care facilities; and

3. Training residents, staff, and others involved in the care of residents about the rights of persons with disabilities in relation to voting and the community resources available to provide assistance.

4. Clarifying that people who provide assistance in voting do not have authority to determine capacity to vote, and that assistance in voting is limited to assisting voters to express the voter’s intent. If people who provide assistance are unable to determine the voter’s intent, then, to avoid the possibility of fraudulent manipulation, they must decline to mark the ballot for the voter.

FURTHER RESOLVED, That the American Bar Association urges federal, state, local, and territorial governments to require and fund the development of voting systems that achieve universal design, such that all voters can cast ballots privately and independently on the same voting machine, adaptable to accommodate any impairment, including physical, sensory, cognitive, intellectual, or mental.

FURTHER RESOLVED, That the American Bar Association urges federal, state, local, and territorial governments to recruit and train election workers to address the needs of voters with disabilities, including physical, sensory, cognitive, intellectual, or mental disabilities.
I. INTRODUCTION

These recommendations are based on the March 2007 working symposium of experts, entitled Facilitating Voting as People Age: Implications of Cognitive Impairment. The symposium concluded a year-long effort on the topic, described below. The need to address voting by aging citizens who face some level of cognitive or other brain impairment has emerged from the relative shadows and into the light of day because of four salient, intersecting trends.

First, based on the 2000 presidential election dispute, it is clear that very important elections are often won by perilously small numbers of votes. In 2000, George W. Bush officially won the Florida vote over Al Gore by a margin of 930 votes (out of six million), a virtual statistical tie. Because the counting of millions of ballots by any method is liable to error, a razor-thin margin of victory such occurred in the 2000 election continues to foment concern about the accuracy and legitimacy of every vote cast.  

Second, older Americans vote in larger numbers than other age groups. In the 2004 presidential election, 71.8 percent of citizens age 55 and older reported voting. The next highest voting group were those age 45 to 54 years old (68.7 percent reported voting). Even in the oldest age category tracked (age 75 and older), 68.5 percent reported voting.

Third, the numbers of older Americans is growing at a rate unprecedented in history. Between years 2000 and 2030, the over age 65 population in the United States is projected to more than double from 35 million to 71.5 million, with the cohort of persons age 85 and over increasing at the highest percentage rate.

Finally, there are increasingly larger numbers of Americans with dementia and other cognitive impairments that may diminish their capacity to vote, and the frequency of these conditions increases with age. In the case of Alzheimer’s disease and other dementias, the time between the onset of the disease and serious incapacity may be years. The total number of people with dementia in the United States is not known with certainty, but in 2000 researchers estimated 4.5 million people age 65 and over had Alzheimer’s disease. A more recent statistical report of the Alzheimer’s Association estimates that number to be 4.9 million as of 2007, with another 200,000 individuals younger than 65 with early onset Alzheimer’s. By 2030, those numbers are expected to increase by more than 50 percent. Alzheimer’s disease comprises 50 percent to 70 percent of cases of dementia.

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6 Id.
percent of all cases of dementia, so estimates of the total population with dementia of any type could be as much as double the above figures.\textsuperscript{7}

Beyond dementias, there are many diseases and conditions that result in impairment of brain function, including amyotrophic lateral sclerosis (ALS), brain tumor, epilepsy, HIV (AIDS), Huntington’s disease, multiple sclerosis, and traumatic brain injury. The Family Caregiving Alliance estimates that the total prevalence of brain impairment of all types, including dementias, ranges from 13 million to 16 million Americans.\textsuperscript{8}

The convergence of these numbers brings into focus a variety of questions about whether persons with brain impairments who have a fundamental right and the threshold ability to vote are being disenfranchised, although they may need assistance. What kind of assistance may be needed and what kind is appropriate? Can technology help? And who makes decisions about capacity to vote, and by what criteria? Conversely, concerns abound about the potential for fraudulent exercise of the franchise by unscrupulous persons or political organizations taking advantage of groups within this population, especially those living in group settings such as nursing homes.\textsuperscript{9}

Both failure to ensure proper access to the polls and failure to protect against the fraudulent manipulation of the vote of vulnerable populations compromises the integrity of elections. And as the above demographic trends continue, so the danger increases.

To address these issues, the ABA Commission on Law and Aging joined together with the Borchard Foundation Center on Law and Aging and the Capital Government Center on Law and Policy at the Pacific McGeorge School of Law in Sacramento to host a working symposium of invited national experts in law and aging, medicine, long term care, voting technology, and elections administration on the topic Facilitating Voting As People Age: Implications of Cognitive Impairment. The impetus for the symposium began with the work of Dr. Jason Karlawish and others who took the first steps in raising the questions posed above.\textsuperscript{10} The Symposium convened from March 21-24, 2007, at the Pacific McGeorge School of Law to address five key facets of these issues: (1) how aging and cognitive impairments fit into broader issues of access to voting; (2) issues in absentee balloting; (3) voting in long term care settings; (4) defining and assessing capacity to vote; and (5) the implications of voter technology for those with cognitive impairments. Prior to the symposium, the sponsors had commissioned six

\textsuperscript{7} Other classifications of dementia besides Alzheimer’s include vascular dementia, mixed dementia, Parkinson’s disease, dementia with Lewy bodies, frontotemporal dementia, Creutzfeldt-Jakob disease, normal pressure hydrocephalus, and mild cognitive impairment (MCI). Id at 2-3.


\textsuperscript{9} See, e.g., Glover v. South Carolina Democratic Party, No. C/A 4-04-CV-2171-25, 2004 WL 3262756 (D.S.C. 2004), aff’d by Reaves v. S. Carolina Democratic Party, 122 Fed. Appx. 83 (4th Cir. 2005) (allowing an unsuccessful candidate for the South Carolina state senate to successfully challenge the results of a democratic primary race by alleging voting irregularities including voting fraud with regards to the absentee ballots of nursing home residents); State v. Jackson, 102 Ohio St.3d 380 (Ohio 2004) (considering an evidentiary issue in a criminal case of an Ohio election board employee who allegedly marked nursing home residents ballots contrary to residents’ wishes). Also see, David Josar & Lisa M. Collins, State Targets Detroit Ballots, DETROIT NEWS, Nov. 1, 2005 (reporting on a Detroit City Council candidate who initiated a lawsuit against the Detroit City Council clerk alleging that election officials assisted legally incapacitated persons to vote at a Detroit nursing home).

\textsuperscript{10} Jason H. Karlawish \textit{et al.}, \textit{Addressing the Ethical, Legal and Social Issues Raised by Voting By Persons with Dementia}, 292 J.A.M.A 1345 (2004).
background papers that provided the starting points for discourse and analysis of each of the key facets.

The symposium culminated with the adoption of a number of recommendations intended to protect voting rights of people with legal capacity and provide necessary assistance in voting, while protecting the integrity of the voting process. Only those recommendations that received a majority vote of all present were adopted as recommendations of the symposium. The recommendations do not necessarily represent the views of any individual participant in the symposium, nor the views or policy of any symposium sponsor or organization with which any participant is affiliated.

The conference recommendations, which are over 2600 words in length, along with the working papers that formed the basis of the group’s deliberations and the keynote address of Vermont Secretary of State and head of the National Association of Secretaries of State, Deborah Markowitz Esq., are being published in a forthcoming issue of the McGeorge Law Review.

The recommendations herein represent a careful distillation of the full set of symposium recommendations, and are fashioned to convey the essential, priority principles of the symposium in a form that expands and does not duplicate existing ABA policy.¹¹

II. CONTENT OF THE RECOMMENDATION

The first resolved clause states four broad cross-cutting actions needed to be taken to benefit not only voters with cognitive or other impairments but all voters: (1) the study and development of best practices for ballot design; (2) the use of “mobile polling”; (3) the use of communications accessible to those with disabilities; and (4) the acceptance of alternative forms of identification.

Mobile polling is the process by which election officials bring a polling station to voters in long-term care facilities or other outreach sites. The polling device used depends on the technology available in the voting district, but it uses some sort of polling device rather than an absentee ballot. It is preferable to reliance on mail-in, paper absentee ballots, because the latter can be hard for anyone with diminished reading ability to understand as well as much more susceptible to abuse. Most states do not yet have the technology to bring accessible portable electronic balloting capability to long-term care settings, but that technology is on the horizon. In the meantime, some twenty-three states currently prescribe responsibilities for absentee voting by nursing home or assisted living residents under some circumstances, and all place responsibilities on election officials to assist.¹²

Acceptance of alternative forms of identification is critical for voters with disabilities, especially those in long-term care settings, who are less likely to have driver’s licenses or other standard forms of identification.

¹¹ The full set of principles are included as an Appendix to this Report.
The second resolved clause addresses the issue of mental capacity to vote and due process protections necessary to ensure that the right is never arbitrarily or prematurely forfeited. A premise of this recommendation is that, because voting is a fundamental constitutional right and a hallmark of democracy, the emphasis should be on expanding the franchise and enhancing access to and assistance with the ballot for persons who are capable of voting. Any limitations should be narrowly circumscribed in terms of specific functional abilities, rather than on categorical exclusions.

In contrast to that principle, co-authors Hurme and Appelbaum found that state constitutions and election laws often fall far short. The constitutions in all but 12 states bar people with various kinds of mental impairment from voting – for example, those who are *non compos mentis*, admitted to a mental institution, under guardianship, incapacitated, or mentally ill. The categories are sweeping and imprecise. State statutes addressing voter eligibility on cognitive grounds do not necessarily track state constitutional provisions, using different terminology in all but 14 states. Additionally, the vagueness of many of the provisions creates uncertainty concerning capacity. At the same time, election laws in some 29 states do not address voter eligibility due to mental status at all.

In the context of guardianship law, only 19 states have specific statutory provisions that persons under full or limited guardianship *retain* all legal and civil rights not explicitly removed – which would include the right to vote. Along with additional provisions that favor limited guardianship, a total of 32 states do appear to allow a judicial determination that a person under guardianship may retain the right to vote. Only a few statutes and cases specifically articulate a *requirement* for the court to determine capacity to vote.

This second resolved clause supports expansion of the approach that requires an individualized determination of capacity to vote in a judicial setting with strict due process protections. This approach would be applicable in any jurisdiction that permits exclusion of a person from voting on the basis of mental incapacity. As to a legal standard for assessing capacity to vote, scant existing case law and statutes provide some guidance, but as a legislative policy principle, this recommendation calls for a standard that can be applied universally with little potential for discrimination – specifically, whether the person indicates that he or she has a specific desire to participate in the voting process. This provides a low threshold that is most inclusive and most

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14 Id.
15 Id.
16 See e.g., Wash. Rev. Code § 11.88.010(5). (the imposition of a guardianship does not result in the loss of the right to vote unless the court determines that the person lacks the capacity to exercise the franchise, and the court’s order must specify whether the ward retains voting rights); also see, Doe v. Rowe, 156 F. Supp. 35 (D. Me. 2001) (striking down Maine’s constitutional provision that automatically excluded from the polls persons under guardianship by reason of mental illness).
17 E.g., Washington’s statute characterizes incompetence to vote as “lacking the capacity to understand the nature and effect of voting, such that she or he cannot make an individual choice” Wash. Rev. Code § 11.88.010(5). Wisconsin similarly looks to whether the person is “incapable of understanding the objective of the elective process.” Wis. Stat. § 54.25(2)(c)1.g. The federal District Court in Doe v. Rowe, 156 F. Supp. 35 (D. Me. 2001) adopted a functional standard identical to that found in the Washington statute.
protective of the right. The objective is to not treat people any differently in voting rights based on any perceived impairment or other personal characteristic.

The third resolved clause urges government to expand the option for absentee balloting and suggests the use of a more normal characterization of it as “vote-at-home” balloting. In recent decades, absentee balloting has become a central feature of our electoral landscape. All states now allow at least some categories of voters to cast their votes before election day, most commonly by mail. And, most states now permit “no excuse” absentee voting. However, as of 2004, only 17 states provided for permanent absentee voting.18 This recommendation advocates for no-excuse temporary or permanent absentee status, available as an option to choose at the time of registration or at a later time.

The fourth resolved clause focuses on voting in long-term care settings, broadly defined. The prevalence of dementia in the nursing home population is estimated to range from a quarter to more than two-thirds of the population.19 The prevalence of dementia in assisted living facilities is even less certain, although one survey of assisted living facilities reported that over one-third of residents had moderate to severe dementia.20 A diagnosis of dementia, in itself, does not mean that the individual lacks capacity to vote. Some still retain the capability and some do not. However, little is known about how many of these nursing home and assisted living facility residents actually have the capacity to vote. Even less is known about the voting capacity of persons residing in other long-term care settings such as adult homes, community care facilities, and group homes for persons with a variety of disabilities.

This recommendation applies principles articulated in the first resolved clause to long-term care settings by urging governments to make mobile polling stations a reality for long-term care residents; and in the interim, to utilize election officials proactively in the role of overseeing absentee balloting in these settings. It also calls for training of residents, staff, and others involved in the care of residents regarding the voting rights of persons with disabilities and the resources available to assist in the exercise of those rights. Finally, it seeks to clarify that people who provide assistance in voting do not have authority to determine capacity to vote, and that assistance in voting is limited to assisting voters to express the voter’s intent. If people who provide assistance are unable to determine the voter’s intent, then, to avoid the possibility of fraudulent manipulation, they must decline to mark the ballot for the voter.

The fifth resolved clause addresses balloting technology, currently undergoing a major transformation in the direction of electronic systems, such as direct-recording electronic (DRE) voting systems. Electronic systems are still very much in their infancy. Most currently deployed voting systems do not meet current HAVA and ADA disability accommodation requirements, and they are far from compliant with the U.S. Election Assistance Commission’s Voluntary Voting System Guidelines.21 The premise of this recommendation is that technology’s goal is

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19 Jay Magaziner, et. al., The Prevalence of Dementia in a Statewide Sample of New Nursing Home Admissions Aged 65 and Older, 40 Gerontologist 663, 663 (2000).
to create *access*, which is different from *assistance*. The more access is facilitated and barriers removed, the less need there is to depend on assistance by another person in the voting booth or with paper absentee ballots, and thus, the less danger there is of fraud or undue influence by persons assisting with balloting.

In his review of evolving voting technology and its implications for voters with cognitive impairments, Prof. Ted Selker identified several design approaches that have shown promise but are still under trial and development. Evolving design characteristics with particular promise include: electronic interfaces that focus on one task at a time; simplified navigation through the steps of the voting process with an ability to refer back to instructions; redundancy of information; feedback (audio as well as visual) on selections made with the opportunity to change selections. The ultimate goal embodied in this recommendation is to design effective optional capabilities into all voting stations so that accessibility is truly universal and segregation of voting by disability accommodation is unnecessary.

The sixth and final resolved clause addresses the need for sufficient numbers of election workers, appropriately trained to meet the needs of voters with disabilities of any kind. If poll workers and other election officials do not understand how to accommodate the increasingly broad range of disabilities voters present at the polls, or they do not understand how to operate the new technologies being introduced in polling sites, then even the best technologies will fall short. Many poll workers serve as volunteers, and training may be brief and informal. This recommendation recognizes that recruitment and training is an essential component to ensuring access to the polls and urges governments to place a greater emphasis on that task.

**III. RELATED ABA POLICY**

This recommendation builds upon a line of ABA policy that goes back several years, all supporting increased access to the polls and fairness and reliability in procedures. Greatly paraphrased, current ABA policy supports:

- “enactment of federal legislation facilitating the ability of all citizens to vote in federal elections” (Annual meeting, 1974);
- “efforts to increased voter registration” (Annual meeting, 1990);
- “efforts to insure the participation of homeless persons in the electoral process” (Annual meeting, 1993);
- “the availability and reliability of political information and discourse on the Internet” (Annual meeting, 2000);
- “changes designed to improve and simplify the presidential election process and ensure that it accurately reflects the will and intentions of the voters” (Midyear meeting, 2001);
- The 2003 *Model Statutory Language on Provisional Balloting and Commentary* (Annual meeting, 2003);
- “ensuring the fairness and reliability of the procedures prescribed for voting” (Annual meeting, 2004); and

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• The 2005 *Election Administration Guidelines and Commentary* (Annual meeting, 2005).

**IV. NEED FOR ABA ACTION**

The present recommendation focuses with particularity on the needs of voters with disabilities, particularly the special needs that accompany any kind of brain impairments. It is consistent with the highest values of the ABA in preserving fundamental civil rights for all citizens.

While there is no proposed legislation that this recommendation immediately addresses, there are many critical activities underway at the federal, state, territorial, and local government level to modify voting procedures that this recommendation impacts. For example, at the federal level the 2002 Help America Vote Act has gave the National Institute of Standards and Technology (NIST) a key role in helping to realize nationwide improvements in voting systems. To assist the Election Assistance Commission with the development of voluntary voting system guidelines, HAVA established the Technical Guidelines Development Committee and directed NIST to chair the Committee. NIST research activities have included:

- security of computers and computer data storage used in voting systems;
- methods to detect and prevent fraud;
- protection of voter privacy; and
- the role of human factors in the design and application of voting systems, including assistive technologies for individuals with disabilities and varying levels of literacy.

However, NIST has not had a focus on cognitive impairments or other brain impairments, a focus that this recommendation would encourage.

At the state level, in addition to election improvements, the ABA has had a long history of supporting guardianship reform and long-term care quality regulation, especially through its Commission on Law and Aging. This recommendation has immediate implications for key aspects of guardianship law and long-term care regulation relevant to cognitively impaired elders and other adults. Access to and integrity of the voting process has never been a more important issue in America than it is today. The recommendation furthers the ABA’s role and responsibility in providing leadership in addressing emerging issues affecting the franchise.

Respectfully submitted,

Joseph D. O’Connor, Chair
Commission on Law and Aging
August 2007
APPENDIX

RECOMMENDATIONS OF THE SYMPOSIUM
Facilitating Voting as People Age: Implications of Cognitive Impairment

1. Basic Principles and Goals

Although the symposium focused on disability caused by cognitive impairments, the principles underlying these recommendations apply to all disabilities, whatever the cause, including physical, sensory, cognitive, intellectual, and mental. Therefore, “disability” as used in these recommendations is intended to be as broad and inclusive as possible. Where the recommendations expressly focus on “cognitive impairment,” the intention is for emphasis and is not intended to exclude other disabilities. The term “cognitive impairment,” as used here, includes not only conditions resulting from Alzheimer’s disease and other causes of dementia, but also impaired cognition caused by other diseases, disorders, and conditions that impair cognition.

Basic Principles:

1. A democratic society should facilitate access to the voting process while preserving the integrity of that process.

2. People with disabilities should not be held to a different or higher voting standard than people without disabilities.

3. Public and private entities must provide reasonable accommodations to ensure that people with disabilities have access to voting.

Goal 1: Preventing unfair and/or unlawful exclusion from voting.

A. In those states with voting eligibility limits based on lack of capacity, everyone should be presumed to have capacity to vote absent a constitutionally adequate adjudication that they lack capacity vote.

B. It is inappropriate for any population to be screened for decisional capacity to vote based on age, disability, diagnosis, place of residence, guardianship status, or other characteristics.

Goal 2: Maximizing access by providing adequate and appropriate assistance.

A. People with disabilities are entitled to assistance from the person of their choice to help formulate, express, and record their vote.
B. People providing voting assistance should not attempt to assess the decisional capacity of the person being assisted, but should decline to provide assistance if they are unable to ascertain the person’s voting intent.

C. Safeguards are needed to ensure that the ballot reflects the voter’s intent, including an affirmation signed by the person providing assistance.

Goal 3. Improving the administration of elections to facilitate voting by all individuals, particularly people with cognitive impairments.

(5) The Elections Assistance Commission (EAC) and other governmental and non-governmental organizations should study and establish best practice guidelines for ballot design to maximize access by people with cognitive impairments.

(6) States and localities should adapt their laws, create practices and procedures, develop technologies, and invest resources to permit mobile polling. At a minimum, mobile polling technology should provide access to the statewide voter checklists and the ballots of multiple jurisdictions, and assure ballot integrity.23

(7) States and localities should ensure that instructions, signage, and other communications regarding elections are accessible to people with disabilities, including cognitive impairments.

(8) States with voter identification requirements should allow sufficient alternative forms of verification to enable all persons, including persons with disabilities, to register and cast ballots.

(9) Persons with disabilities who have been denied access to vote privately and independently should have a private right of action under HAVA.

Goal 4: Ensuring that individuals with cognitive impairments have the opportunity to register to vote.

A. People registering voters should not attempt to assess a prospective registrant’s decisional capacity to vote.

B. States and localities should comply fully with the National Voter Registration Act and all other applicable federal laws and the federal government should vigorously enforce these laws.

C. States should examine registration deadlines and consider innovative approaches to increase registration opportunities, such as Election Day registration or automatic registration.

23 While the ideal of mobile voting, defined below in Recommendation 4, is to bring the appropriate ballot to residents no matter where they may be registered, it is recognized that current realities limit that ability to in-state jurisdictions.
2. Capacity and Voting

A. Presumption of Capacity. To promote the democratic process to the fullest extent possible, no governmental entity should exclude any otherwise qualified person from voting on the basis of medical diagnosis, disability status, or type of residence. A person’s capacity to vote should be presumed regardless of guardianship status. State laws, including guardianship and election laws, should explicitly state that the right to vote is retained, except by court order in accordance with the following two recommendations, 2-B and 2-C.

B. Due Process Protection. If state law permits exclusion of a person from voting on the basis of incapacity, such exclusion should have legal effect only if:

1. The exclusion is based on a determination by a court of competent jurisdiction;
2. Appropriate due process protections have been afforded; and
3. The court states on the record that the basis for the exclusion has been established by clear and convincing evidence.

C. Capacity Standard. If state law permits exclusion of a person from voting on the basis of incapacity, a person should be determined to lack capacity only if the person cannot communicate, with or without accommodations, a specific desire to participate in the voting process.

3. Absentee Voting

A. Vote at Home.

1. Governments and other stakeholders in the election process should adopt the term “vote at home” as a substitute for terms such as “permanent absentee voting,” “no excuse absentee voting,” or “mail ballot voting.”

2. All jurisdictions should permit voters to vote at home. At the time of registration, registration forms should provide voters with this option. Voters should be allowed at any time to change their choice. Jurisdictions should make it as easy as possible for voters to exercise their choice.

B. Voting Jurisdiction.

Federal and state governments should develop a uniform standard for determining the jurisdiction in which people should register to vote. The default presumption for registration should be that individuals register to vote where they are physically located.24

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24 This recommendation should be read in combination with Recommendation 4.E.2 which urges accommodation of a long-term care facility resident’s desire to register to vote either in the location of the facility or in their previous place of residence.
C. Privacy and Independence.
All voters who vote at home should be enabled to cast a private and independent ballot. Federal and state law needs to be sensitive to potential tensions between the secrecy of the ballot and the request of some voters for assistance.

D. Signature Verification
Federal and state laws regarding signatures on absentee and vote-at-home ballot return envelopes should be amended to take into account the problems that will arise with signature verification for people with disabilities. This is important because signatures can change over time.

E. Vote-at-Home Information.
Federal and state election officials should provide simple and accurate information about the vote-at-home option to voters, individuals assisting voters, and facilities. Such information should be written in plain language and include:

(1) Periodic information to all voters explaining the vote at home option. Each vote at home ballot packet should contain an explanation of the vote–at-home option and instructions on how to complete and submit the ballot. Packets should also indicate how to receive assistance in completing the ballot and how to contact election officials with additional questions.

(2) Information to all voters explaining how other private individuals can assist them in casting their ballots. This information should set out clearly what actions are permissible and what actions are prohibited. Permissible actions would include reading the ballot to the voter, physically marking the ballot as directed by the voter. Impermissible actions include telling the individual how to vote or casting a vote without an express indication of the voter’s preference.

(3) Information to long-term care facilities explaining any affirmative legal obligations a facility may have to assist residents in voting, permissible assistance facilities can provide residents, and any actions that are prohibited by law.

4. Voting in Long-Term Care Facilities
For purposes of these recommendations, the following definitions apply:

Mobile Voting – A process by which two or more election officials visit a long-term care facility to provide residents the appropriate ballot, conduct voting at a common location, or in the case of residents who cannot come to the voting location, conduct voting in their room or another location convenient for the resident.

Long-Term Care Facility -- Institutions licensed to provide room, board, and any level of personal care to persons in need of assistance with activities of daily living (ADLs) or instrumental activities of daily living (IADLs).
A. **States’ Responsibilities**

(5) States and local election officials should play an active role in facilitating voting in long-term care facilities.

(6) States should enact laws and regulations to provide for mobile voting for residents of long-term care facilities.

(7) Where states do not provide for mobile voting in long-term care facilities, states should provide for teams of election officials at the local level to conduct vote-at-home or absentee voting in long-term care facilities.

B. **Long-Term Care Facilities’ Responsibilities**

(1) States should require all long-term care facilities to provide a resident with information about how to register to vote in the facility’s locale and how to change their address for the purpose of voting, including necessary forms, within fourteen days (14) of the resident’s admission to the long-term care facility.

(2) States should require all long-term care facilities to ask each resident if he or she wishes to register to vote and should assist those who, when asked, indicate that they wish to do so. This assistance shall consist of providing proper forms within a reasonable period of time prior to the registration deadline for a statewide or national election, and assisting with their completion and submission. This can be done either by long-term care facility staff, in collaboration with non-partisan voter registration drives, or through election officials.

(3) Where mobile voting is not available, states should require all long-term care facilities to actively assist residents in requesting absentee or vote-at-home ballots. Active assistance means asking each resident within a reasonable period of time prior to the absentee ballot request deadline for a statewide or national election if he or she wishes to vote and, if so, providing proper forms and assisting with their completion and submission. This can be done either by long-term care facility staff or by election officials.

(4) States should require long-term care facility staff to assist a resident with ballot completion where: (a) the resident is unable to mark his or her ballot but is able to communicate how he or she wishes the ballot to be marked, (b) the resident requests assistance with marking the ballot, and (c) election officials are not available to provide such assistance.

C. **Providing Assistance**

State law should declare that, unless adjudicated as lacking capacity to vote, a resident of a long-term care facility is entitled to assistance with obtaining and completing a registration form and a ballot if the resident: (a) is unable to do so independently, (b) is able to communicate that he or she wants such assistance and, (c) in the case of ballot
completion, is able to communicate how he or she wishes the ballot to be marked and requests assistance with marking the ballot.

D. Verification of Voter Identity
States with voter identification requirements should allow a long-term care facility’s identification of a resident to constitute a sufficient verification of voter identity. The federal government shall by law provide that a long-term care facility’s identification of a resident shall constitute a sufficient verification of voter identity where required by federal statutes, including the Help America Vote Act.

E. Residency Requirements
(1) States should accommodate, to the extent possible, residents’ desire to register to vote either in the location of the long-term care facility or their previous residence.25

(2) To the extent that a state otherwise limits eligibility to cast an absentee ballot or vote-at-home ballot, states should make all residents eligible to vote by absentee ballot based on their residency in a long-term care facility.

F. CMS Implementation
The Centers for Medicare and Medicaid Services should amend its Interpretive Guidelines for 42 CFR 483.10(A) to implement the above facility requirements pertaining to voting in long-term care facilities, as appropriate and to the extent possible, given state-to-state variations in voting law.

5. Voting Technology
Congress, State Legislatures and Election Administrators should authorize the following:

A. Election Materials.
Voting and election materials, including ballots, should be in plain language and accessible to people with all disabilities, including those with cognitive impairments, even if this requires providing multiple formats.

B. Voting Systems.
Voting systems should be developed with the goal of achieving universal design, such that all voters in a given polling place, including voters with disabilities, can cast ballots on the same type of system, adaptable to multiple needs. The system should be universally accessible so that persons with any disability -- physical, sensory, cognitive, intellectual, or mental -- can vote privately and independently. The system design should be clear, redundant, and multi-modal. If computers are used, they should display one race per screen. Voting systems should incorporate memory aids, include the full names of all

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25 This recommendation should be read in conjunction with Absentee Balloting Recommendation 2-C which calls for a uniform standard for determining the jurisdiction in which people should register to vote and a default presumption that individuals register to vote where they are physically located. The default presumption is consistent with giving long-term care facility residents a choice of venue to the extent practicable.
candidates, include icons, produce the same type of ballot for all voters, and record voter selections anonymously. The efficiency, effectiveness, and satisfaction of the voter experience should not be degraded by the system used.

C. Quality Development.
Federal funding should be provided for a coordinated and competitive process of prototype development. Voting systems proposed for deployment in federal elections must undergo an independent and transparent testing process that includes both usability and accessibility testing, in coordination with accuracy testing. An independent national clearinghouse should collect and make public data on the use of voting technologies.

D. Online Voter Registration.
State law should authorize online voter registration as one possible registration method.

E. Polling Places.
Polling places should be universally accessible, safeguard privacy, and ensure that all equipment – including any system used for accessibility if different from the primary voting system – be accessible, prominent, and ready to use.

6. Research

Government and private funders should support research on voting and disability, including but not limited to the following matters:

A. Determining what ballot form(s) and technologies would maximize the ability of voters to cast effective, private, and independent votes. In particular the research should consider the specific needs of voters with disabilities, including those with cognitive impairments. The feasibility and cost effectiveness of the following types of programs should be explored: on-site voting assistance, mobile voting assistance (group and individual), HTML and other computer assisted ballot formats, portable voting machines, and ballots with pictures and/or icons.

B. The impact of current laws on the exclusion of persons from voting.

C. The extent of barriers to registration and voting for people with cognitive impairments, wherever they reside.

D. Effective communication strategies to overcome impediments to voting by individuals with cognitive impairments.

E. Voting practices in long-term care facilities and other residential settings, including staff determinations of capacity.

F. Voting practices concerning persons with cognitive impairments living in the community, including de facto determinations of capacity and proxy voting.
G. The relationship between the standard used to determine residence for voting and standards used to determine residence for other purposes, such as Medicaid, the census, and other state and federal programs.

H. In connection with problems that may arise with signature verification for people with disabilities, research on signature verification procedures, in particular how election officials currently determine what constitutes a signature “match” and whether other, less exclusionary, forms of voter ballot verification are possible, such as signature stamps.

I. Discrepancies between the symposium recommendations and current standards and procedures to determine voting capacity.

J. Evaluation of the outcome and impact of the symposium recommendations

7. Education & Training

A. Legal Obligations. Public and private entities should provide guidance and training to ensure that people providing assistance with voting understand their obligations and limitations.

B. Voter Assistance Training. All people providing voting assistance should be trained to assist voters to successfully express their intent.

C. Long-Term Care Training. State and local election officials should promote the education of residents and staff in long-term care facilities and other residential settings, community service providers, guardians, others involved in the care of persons with disabilities, and such persons themselves about the rights of persons with disabilities in relation to voting and the community resources available to provide assistance and otherwise facilitate voting.

D. Poll Worker Training

(1) States and localities should create poll worker recruitment and training programs that specifically address the needs of voters with cognitive impairments.

(2) Poll worker training should include practice setting up a polling site. This can be supported by interactive simulation, via DVD and/or online materials. Poll workers should be required to demonstrate in advance of their election duties that they can perform their assigned tasks. Poll worker recruitment should include persons with disabilities.
EXECUTIVE SUMMARY

1. **Summary of the Recommendation.**
   This resolution consists of six resolved clauses, all of which focus on protecting and facilitating voting by persons with disability, with a special focus on cognitive impairments and other brain impairments that increase in frequency with age. The seven clauses urge federal, state, local, and territorial governments to:
   - Improve the administration of elections through four enumerated strategies, including the use of mobile polling stations;
   - Ensure retention of the legal right to vote in the event of disability unless four enumerated judicial criteria are met;
   - Expand the availability of absentee or “vote at home” balloting;
   - Improve access to voting by residents of long-term care facilities through three enumerated strategies;
   - Require and fund the development of universal design in voting systems so that persons with any impairment, including physical, sensory, cognitive, intellectual, or mental, can vote privately, independently, and with ease;
   - Recruit and train election workers to address the needs of voters with disabilities.

2. **Summary of the issue that the recommendation addresses.**
   The need to address voting by aging citizens who face some level of cognitive or other brain impairment has emerged from the relative shadows and into the light of day because of four advancing, intersecting trends: (1) the highly controversial occurrences of razor thin margins of victory and defeat in major elections; (2) the high rate of voting by older Americans; (3) the growth of the older population at a rate unprecedented in history; and (4) the continuing increase in the number of Americans with dementia and other chronic cognitive impairments that eventually make them incapable of voting but at a date uncertain.

   The convergence of these numbers brings into focus a variety of questions about whether persons with brain impairments who have a fundamental right and the threshold ability to vote are being disenfranchised. The number of voters to whom this question applies is substantial and growing. What kind of assistance may be needed and what kind is appropriate? Who makes decisions about capacity to vote and by what criteria? Conversely, concerns abound about the potential for fraudulent exercise of the franchise by unscrupulous persons or political organizations taking advantage of groups within this population, especially those living in group settings such as nursing homes.

   Both failure to ensure proper access to the polls and failure to protect against the fraudulent manipulation of the vote of vulnerable populations compromises the integrity of elections. And as the above demographic trends continue, so the danger increases.
3. Please explain how the proposed policy position will address the issue.

The policy is based upon the joint effort of the ABA Commission on Law and Aging, the Borchard Foundation Center on Law and Aging, and the Capital Government Center on Law and Policy at the Pacific McGeorge School of Law in Sacramento. The groups hosted a working symposium of national experts in law and aging, medicine, long term care, voting technology, and elections administration on the topic *Facilitating Voting As People Age: Implications of Cognitive Impairment*, which convened from March 21-24, 2007, at the Pacific McGeorge School of Law to address five key facets of these issues: (1) how aging and cognitive impairments fit into broader issues of access to voting; (2) issues in absentee balloting; (3) voting in long term care settings; (4) defining and assessing capacity to vote; and (5) the implications of voter technology for those with cognitive impairments. The recommendations represent a careful distillation of the full set of symposium recommendations. They convey the essential, priority principles of the symposium in a form that urges specific strategies by federal, state, territorial, and local governments to address the identified issues above.

4. Summary of any minority views or opposition that have been identified.

None to date.