



The role of the initial responder (first responder):

1. The importance of knowing your state laws, agency policies and facility procedures and preparing for an effective response to a sexual abuse or misconduct is critical.
2. The key responsibilities of an initial responder including detailed descriptions of each step you took as a first responder is critical.
3. The boundaries that an initial responder must recognize when responding appropriately to an incident of sexual abuse or misconduct is also critical.

Documenting factual information is one of the key responsibilities of the first responder.

- How is he/she acting?
- What words is he or she using?
- How does he/she look?

Document the above information in your notes as specifically as possible, do not assume, or make assumptions about what you think they're saying! Document as specifically as possible "in their words", "their language" and how they appear. (specifically – she had a black eye - busted lip - blood on her head/hands etc.) (He "got me" I told him no but I could not stop him)

It is the First Responder's duty to only obtain the most basic information:

Ascertain what happened

- Who was involved?
- Where the incident occurred?
- When the incident took place?

It is vital to remember – We are not investigators!

In order to aid and help the investigation, you should document:

- The exact language the inmate or client used
- The names and title of everyone with whom you spoke since you were told about the assault.
- Contact information for any medical personnel who treated the victim

What are some things that you should be looking for in your initial observations?

- Multiple crime scenes
- Anything that looks out of place
- Suspicious items
- Handprints
- Puddles and stains
- The lighting in the area
- The victim's appearance and demeanor
- The behavior of anyone nearby



Listed below are the steps to an effective response to an incident report:

Keys to a successful First Responder interaction with the Victim

Ask if the victim is injured		Secure medical attention to the victim
Stabilize the situation		Control inmate movement in the general area
Secure the scene		Ensure that bedding, clothing, or personal items are secured
Observe closely		Look for anything suspicious or out of place
Obtain the basic information		Discern what happened, who was involved, where if and when
Instruct the victim		Tell him/her that you'll need to report the assault
Communicate the incident		Give your supervisor an immediate verbal report
Document carefully		Fully document <u>every</u> known detail as soon as possible

When we discuss “staff” in terms of PREA an initial response to a sexual assault, to whom are we referring?

- ✓ Management
- ✓ Administrative office staff
- ✓ Court Officer
- ✓ Security monitor
- ✓ All Residential personnel
- ✓ Case Officers
- ✓ Non-custody personnel
- ✓ Contractors
- ✓ Volunteers
- ✓ Clergy
- ✓ Medical and mental health staff
- ✓ Food Services personnel
- ✓ And/or any other non-inmate personnel in the facility

The term of “sexual abuse” is used primarily to describe:

- A broad range of sexual activity including harassment.



The importance of effective communication:

It is imperative that all professional staff use effective communication when dealing with reports of sexual abuse. An inmate or confinement center client may come to any on duty staff to report such an event. All personnel must be prepared to deal with the report as it is submitted to them.

- Establish good rapport with the victim of sexual abuse
- Keep the interaction private
- Consider your nonverbal behavior during the interaction
- Reassure the traumatized victim

All of these considerations can help make a victim comfortable enough to report the abuse and cooperate with the investigation.

Setting the tone:

Techniques for establishing a report with a victim of sexual abuse including keeping in the interaction private, considering your nonverbal behavior during the interaction and reassuring the victim, plus explaining your role to the victim will help the victim through this difficult process.

What can you do to make the victim feel comfortable as you respond to an incident of sexual abuse or misconduct?

- Don't make assumptions
- Secure private location if possible
- Be patient
- Use active listening skills
- Use a supportive voice
- Maintain eye contact
- Reassure the victim
- Explain your role as an initial responder

What are some things that an inmate or a confinement client the fear as he or she considers reporting an incident of sexual assault or abuse?

- Retaliation from other inmates/clients
- Retaliation from staff
- Sexually transmitted diseases
- Pregnancy
- The report will not be taken seriously



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Consider your nonverbal signals and how they may be interpreted by victim of sexual abuse:

Folding your arms	-----	may communicate that you are "closed" the victim's report
Standing over someone	-----	may be intimidating
Shifting or not focusing	-----	may indicate that you're distracted or uninterested

Key Notes:

- Never make promises or guarantees
- A victim and a perpetrator could be anyone
- Explain your role
- Assure the victim
- Be careful not to use judgmental words or phrases
- Only obtain basic information talking to other witnesses, gossiping or other inappropriate actions involving your role may affect the investigation negatively.
- Be approachable and nonthreatening
- Secure a private setting
- Stay calm
- Take the issue seriously
- Never make fun or joke about the incident

Never make assumptions because of:

- The victim's sexual orientation
- Gender
- Race
- Religion
- Disability
- Because a staff member is or could be involved

Understanding the limits as a first responder:

Your role as a first responder is critical as you are a major contributor to the investigations of sexual harassment or sexual abuse. **Professional boundaries must be adhered to.**

Dangerous mistakes and initial responder can make include:

- Interviewing additional witnesses
- Collecting evidence on your own

As a first responder you should only:

- Separate the victim and the aggressor
- Quadrant off the crime scene
- Call investigating agencies, dial 911 when necessary

Confidentiality must be adhered to in all cases:



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- Never gossip about the incident
- Never leave your documentation in plain view
- Never talk about the incident other than on a need to know basis
- Never make jokes about the case

Any of the above actions could compromise confidentiality. Investigators investigate, first responders follow the four specific duties in their role, listed above.

Understanding the victim and a perpetrator:

Trauma will manifest itself in many ways.

What are some of the ways that trauma might manifest itself in a victim of sexual abuse?

- Signs of deep pain
- Violent anger
- Hostility
- Tears
- Laughing nervously
- Being withdrawn

(Or some combination of any of the above behaviors)

In general, men and women may tend to react differently to sexual assault in that:

Women may sometimes have an intense emotional reaction while men and may sometimes try to appear unaffected or become angry.

Ignoring stereotypes:

Being aware of the kind of stereotypes you should ignore will help you be informed and objective as you respond to an incident of sexual abuse at your facility.

Types of stereotypes:

Some stereotypes about inmates:

- A big guy with a bald head and tattoos must be bad.
- She was a prostitute so she couldn't be right - she gives it away.

Some common stereotypes about mentally ill inmates:

- She's delusional because of her condition.
- He probably consented; he doesn't know any better.

Some, and stereotypes about homosexual or transgendered inmates.

- He's gay so he was probably asking for it.
- She's gay and has consented before so how is this any different?

While juveniles are not held in HHSE facilities, we should know the following:



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Juveniles being housed in adult facilities may be of particular risk for assault. These younger inmates may not understand the system well, due to their inexperience. Their lack of understanding could make them targets for predators. If a juvenile would report an assault, it may have occurred in the context of the role they've been assigned against their will.

Homosexual and transgendered offenders:

Homosexual or transgendered inmates have sometimes been misunderstood when they tried to report an assault, due to the assumption that they had consented. Even if one of these inmates/clients is known to have consented many times in the past, a staff member cannot assume that he or she always consents.

No individual judgment or assumption should be made when responding to a report of sexual assault. Regardless of the inmate sexual identity or history, every report should be taken as credible.

Other special populations:

What other special populations exist within our facility? What stereotypes are associated with these groups? It is crucial that you know as much about your particular population? If you feel that your knowledge is lacking make sure to speak with more experience staff members and supervisors who will be able to tell you a great deal about the inmate/client. If stereotypes are prevalent in our facility it is our responsibility to ignore them when filing a report for an assault

Mentally ill inmates:

Mentally ill inmates may have difficulties understanding what has happened to them. They may also be unable to clearly relate an incident to a first responder. However, you cannot assume that these inmates are delusional or have not been assaulted. Instead, you may have to get assistance from a mental health professional in order to communicate effectively with these inmates. Again, every report needs to be treated as credible. Don't assume that, just because an individual has a mental illness or developmental disability, they cannot be credible witnesses and be telling the truth about a sexual assault.

Cultural differences:

Cultural differences can also change the way certain victim report an incident. In some cultures, being sexually assaulted increases the level of pain dramatically. The victim may feel that he or she will never be accepted or cared for again, and even become suicidal.

Also, different cultural groups may use different communication styles. In some cultures, for example, it is considered rude or inappropriate to make eye contact, whereas in the United States we may feel that someone is hiding something or lying if he or she consistently avoids eye contact during the discussion.

Always ignore stereotypes!

Understanding inmate and staff sexual dynamics:



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Three predominant dynamics among incarcerated females:

- The creation of a “prison family” – this may also take place in jails and community confinement centers such as HHSE.
- Women who want a one-on-one relationship.
- Women who form close relationships with deep attachments.

Reasons that prisoners/clients engage in sexual activity:

- For pleasure
- For love
- For trade or barter
- As an expression of self
- For the thrill of breaking the rules
- Social dominance and control
- For procreation
- For the promise of protection
- Because they are forced

Male victims may have some or all of the following characteristics:

- Convicted of nonviolent crimes
- Often first-time offenders
- Unfamiliar with the prison culture
- Not streetwise
- Young, smaller in stature or possess feminine characteristics
- May have a mental or physical disability

Distinguishing traits of perpetrators:

- Violent crime convictions
- Long sentences
- Identify strongly with the prison culture
- Large stature
- Confidence
- Significant social status within the prison and or confinement center.

It should be noted, for many women in prison, childhood sexual abuse led them into an adult pattern of continued involvement in abusive relationships as a victim. This pattern usually includes early drug use and for some women, prostitution.

Because of their past sexual history and physical emotional abuse, many offenders both male and female, may have what is called Post Traumatic Stress Disorder or PTSD.



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PTSD is a diagnosable condition that can affect anyone who has suffered severe emotional trauma. **Symptoms may include, sleep disorders, flashbacks, anxiety, tiredness, and depression. Women, especially, may suffer from PTSD due to their past victimization.**

As a first responder, understanding the symptoms of PTSD may help you during a report the incident.

Reasons staff may engage in sexual misconduct:

- Feel a need to exploit their power
- Fall in love
- Sympathize with or want to protect inmates
- Feel isolated from their peers and begin to identify with inmates
- Find an inmate who makes them feel special and needed

Special note: While some of the dynamics we discussed between inmate on inmate sexual involvement may be similar to staff on inmate involvement, when it comes to staff sexual misconduct, there are some major differences:

1. We know it can be particularly difficult for every one when staff persons are accused of sexual misconduct.
2. We know as corrections professionals that we're all responsible for the safety and security of the inmates/clients. This creates **an unnatural imbalance of power** given that the staff is responsible for the day to day management and control of the client within the facility.

We cannot under estimate the fact that inmates depend on us for their daily needs. Staff arrange visits, medical requirements, work and program assignments and so much more. So, when staff, unfortunately choose to "cross the line" and abuse their roles, they have **betrayed the basic tenets of our profession and they have broken the law.**

What is the continuum of sexual coercion?

The definition of consent follows a wide continuum, it goes from

"FULL CONSENT", (this is inmates engaging in consensual sex) through **"FULL COERSION"**, (this is sexual assault forced and or violent rape).

Full consent through **full coercion** may follow the continuum below:

1. Full consent, when inmates engage in consensual sex
2. Inmates who voluntarily trade sex for luxury items or money
3. Other behaviors in which the inmate engages in sex primarily to retain control
4. Inmates who agreed to sex in order to secure basic needs, such as food
5. Inmates who engage in protective pairing
6. Being "turned out" as a "punk" or other forms of sexual enslavement
7. **Full coercion**, sexual assault force and or violent or rape



Prevention:

Exploring strategies for preventing sexual abuse and misconduct are imperative in the operation of any confinement facility, jail and prisons. It is very important that you know of a culture of your facility, as it will help you recognize if something is inappropriate or illegal and if it is taking place. Knowing specific red flags or warning signs in the correctional setting that may alert you to sexual abuse that could be occurring.

Reporting culture: It is imperative that HHSE maintain a reporting culture. All complaints must be investigated and all complaints must be reported.

Increase your awareness/what to look for:

Inmate on inmate red flags:

Changes in routine

Changes in mood

Changes in behavior

Changes in eating, hygiene and sleeping habits

Clients sleeping in close

Clients avoiding staff members

“Leg Hanging” or too close to staff – following staff – staying near staff

Decrease in showering or taking sink baths

Isolating, staying in bed or cell

Staying out of the dining hall or yard

Increase and mental health symptoms

Irritability/mood swings

Suicide attempts or threats

Acting out, aggressiveness or risk-taking behavior

Increase in write-ups for misconduct

Requesting cell or bed changes

Bruises or other injuries

Hiding physical injuries, providing no explanations

Having no property

Joining in a group or gang



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PC'ing up (requesting protective custody)

Increase and mental health or medical call outs

Lots of notes to staff members and or other inmates or clients

Self-harm

Missing medication, "cheeking" Meds

Asking for help

Calling a hotline

Fears and tensions among inmates are clients

Rumors that surface

Anonymous Kytes or letters

A constant avoidance of certain jobs or areas

Signing up for showers together

An increase or decrease in physical assaults

Changes in med lines

Excessive canteen purchases

More weapons or contraband within the facility

Changes of groupings on the yard

More red flags:

Stalking or grooming another inmate or client

Trading favors

Extortion

Older guy giving lots of attention to a younger or weaker guy

Money transfers

Bragging about getting some one

Extra canteen but no money or paying more fees with no money

Perceived as intimidating by others

Always wants a two-person cell

History of past violence

Bullying or name calling aimed at one person



Opportunistic behavior

Switching jobs constantly

Higher status

Lookouts set throughout the facility

Exerting power and control

Refusing searches

No work but has money

Mentioned or referred to in another inmate's mail

Showing special interest or concern about another inmate or client

Spending a lot of time with a particular inmate or client

Defending or interceding on the behalf of another inmate or client

Distancing self from other staff

Leaving an area when staff show up

Changes in mood of behavior

Drop in work performance

Favoritism toward specific inmate or client

Changes in appearance

Personal problems or life changes

Taking breaks and hanging out where the inmate is

Coming in early or staying late

Inmates family calling to speak to a specific staff member

Talking to the same inmate or client without specific reasons

Requesting shifts or work assignments when the inmate is available or alone

Infractions are being ignored

Being away from the Work Station or being MIA

Excessive socialization or an over familiarity with an inmate

Bringing inappropriate items to work

Staying in the office with doors locked and blinds closed



Receiving notes or letters from a particular inmate

Secrecy

Change in professional boundaries

Referring to inmates or clients in a derogatory or possessive way

Comments about inmate's or client's appearance

Being on grounds during off-hours

Familiar touching of an inmate or client or standing close

Using staff members first name

Isolating self from other inmates

Too much personal knowledge about staff

Increase status on the unit

What can you do to help prevent an assault in your facility?

- Increase awareness of your institutions culture
- Observe your daily environment carefully
- Notice any red flags that may indicate an incident of sexual abuse or misconduct
- Participate in briefing sessions and the debriefing sessions or meetings as often as possible.
- **Support the zero-tolerance policy at your facility**

While no one wants to become a "sex cop" or create a "gotcha" culture, we do want an environment with zero tolerance for sexual abuse and staff sexual misconduct misconduct and we do want a safe reporting culture.

Recognizing the red flags can be helpful in preventing sexual abuse and staff sexual misconduct in your facility:

Possible inmate/client red flag-----	staying out of the dining hall or yard
Possible staff red flags-----	spending an inordinate amount of time with one inmate/client
	Distancing self from other staff
General red flags-----	An increase in weapons or contraband
	An increase or decrease in physical assaults

Core elements of an investigation:



(Remember - as a HHSE first responders do not conduct investigations)

You should know the core elements of an investigation, although you do not conduct the actual investigation your work as a first responder will aid the investigator or could hinder him or her, if you fail in your duties.

HHSE personnel should know our state local and facility policies and procedures as well as Federal PREA rules and regulations.

Larger goals of an investigation:

- Determining the truth through proper inquiry
- Providing or maintaining safety and protection
- Filing criminal charges
- Securing a conviction

The investigative process is as follows:

- Secure the scene
- Initial interview
- Assembling of resources
- Forensic evaluation
- Process crime scene
- Interview witness
- Secure other evidence
- Follow-up
- Prosecution/decision making

Securing the scene, the initial interview documentation, and assembling HHSE resources is the responsibility of the first responder. All other investigative processes are the responsibility of the investigative unit.

The investigator makes sure that any crime scene has been secured by the initial responder and, if not, the investigator will take steps to ensure the protection and security of any evidence which may exist.

The investigator will normally:

- Interview the reporting source, this person is not always the victim
- Gather information from the initial Responder & Medical personnel
- Conduct a full interview of the victim

The investigator will verify that the victim and the perpetrator, once identified, have been referred to appropriately trained personnel ideally a sexual assault nurse examiner (SANE) for the application of a forensic a rape kit. This should occur within 72 hours after the incident depending on state requirements an available technology.



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The forensic examination of the person includes, at minimum, documenting any physical injuries and the collection of biological evidence such as hairs, semen, saliva and any other trace evidence which is apparent.

A clear chain of custody must be maintained on all collected evidence.

The investigator will secure search warrants if required and conduct an evidentiary research of the physical crime scene.

The investigator will be looking for additional biological evidence, trace evidence such as hairs or fibers, signs of a struggle, fingerprints, weapons, clothing or any other relevant pieces of physical evidence.

Again, a clear chain of custody must be maintained on all evidence collected. The physical crime scene will be diagrammed and photographed.

The investigator may now interview any identified witnesses or potential witnesses

The investigator may need to secure video surveillance tapes, additional clothing, log books or any other potential evidence that may exist.

The investigator will conduct follow-up interviews with the victim and interview any new or secondary witnesses who have not been previously examined and arrange for an examination and analysis of all evidence.

The final step in the process, the investigator will evaluate all evidence to determine if there is probable cause to arrest/detain the perpetrator.

The investigator will prepare a full case report and presentation of all evidence to the appropriate prosecuting authority.

What are some important goals of an investigation?

- Determine the truth through prompt and proper inquiry
- Provide or maintain safety and protection
- Gather and maintain the continuity of evidence
- Identify and preserve the crime scene
- Conduct interviews and interrogations
- File criminal charges
- Secure a conviction

What are the core elements of an investigation?

- Initial interview
- Assembling of resources
- Forensic evaluation
- Process the crime scene
- Arrest
- Follow-up interviews
- Secure other evidence



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- **REVIEW AND STUDY CLOSELY THE FOLLOWING PREA TRAINING INFORMATION.**
- **THIS IS MANDATORY**
- **BE READY FOR TESTING BY 3.26.18**
- **ALL PERSONEL MUST TAKE THE TEST AND REACH THE MINIMUM SCORE OF 80%**

