

**Responding to Sexual Abuse of Inmates in Custody: Addressing the Needs of Men, Women, and Gender Nonconforming Populations**  
**Notification of Curriculum Use**  
**April 2014**

The enclosed Responding to Sexual Abuse of Inmates in Custody: Addressing the Needs of Men, Women, and Gender Nonconforming Populations curriculum was developed by the Project on Addressing Prison Rape at American University, Washington College of Law as part of contract deliverables for the National PREA Resource Center (PRC), a cooperative agreement between the National Council on Crime and Delinquency (NCCD) and the Bureau of Justice Assistance (BJA). The Prison Rape Elimination Act (PREA) standards served as the basis for the curriculum's content and development with the goal of the Responding to Sexual Abuse of Inmates in Custody: Addressing the Needs of Men, Women, and Gender Nonconforming Populations curriculum being to satisfy specific PREA standards requirements.

It is recommended that the Responding to Sexual Abuse of Inmates in Custody: Addressing the Needs of Men, Women, and Gender Nonconforming Populations curriculum be reviewed in its entirety before choosing which modules to use. Any alterations to the original materials require either acknowledgement during their presentation or removal of the PRC and Project on Addressing Prison Rape logos.

BJA is currently undergoing a comprehensive review of the enclosed curriculum for official approval, at which point the BJA logo may be added.

*Note: Use of the enclosed curriculum, either in part or whole, does not guarantee that an auditor will find that a facility "meets standards." Rather, an auditor will take into consideration the curriculum used as part of their overall determination of compliance.*

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**Training Curriculum:  
Responding to Sexual Abuse of Inmates in Custody:  
Addressing the Needs of Men, Women and Gender Non-Conforming  
Populations**

## **Module 7: Gender and Victimization**

**The Project on Addressing Prison Rape  
February 2014**

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*Requests for permission to make copies of any part of this publication can be made to:*

*The Project on Addressing Prison Rape  
American University Washington College of Law  
4801 Massachusetts Ave, NW  
Washington, DC 20016  
202-274-4385  
[endsilence@wcl.american.edu](mailto:endsilence@wcl.american.edu)*

# Objectives

Explore gender-influenced socialization, communication styles and behaviors of men, women and gender non-conforming individuals

Explore past abuse histories & implications for institutional victimization

Discuss vulnerable victims and implications

Identify staff characteristics and behavior that contributes to inmate victimization



# **Gender-influenced Socialization, Communication Styles and Behaviors**

# MEN

- Guard inner feelings
- Emphasis on suppression of emotions considered weak
- Identity based on defining self with focus on independence, self-sufficiency, autonomy
- Reluctant to ask for help
- Non-verbal
- Focus on strategy
- More able to express anger; less able to express fear, anxiety, sadness

# WOMEN

- Emotionally expressive, even if emotions are displaced or reactive
- Identity based on defining self in relation to others; survival in inter-dependence
- Emphasis on connection
- More likely to ask for help
- Often verbal; attempt resolution thru speech
- More able to express feelings, weaknesses, vulnerability, confusion



# **Past Victimization Histories: Implications for Institutional Victimization**



# Previously Victimized

Often have:

- A history of early victimization - family, neighborhood, school
- Exposure to aggression, dominance, and control
- Distorted view of self and relationships
- Merged concepts of love and aggression

# Abuse Histories: Men

- History of abuse by parents or guardians
- Involvement in subsequent childhood or adolescent aggression and delinquency
- Connection between sexual/ physical victimization and aggressive and self-destructive behavior
- Report past abuse associated with violent crime

# Abuse Histories: Men

- Defend against feelings associated with victimization (shame, stigma)
- Victimization experience falls outside gender role of being strong and in control
- May have fears about sexual identity and preference
- Feel the best defense is a good offense
- May imitate their aggressors

# Implications: Men

- Feel shame and denial
- Felt (or were) unheard and unrecognized as abuse victims
- Guard feelings to mask vulnerability
- Are acutely aware of prison code and their ranking inside
- Fear that if they come forward they will be seen as gay (if male perpetrator)

# Abuse Histories: Women

- History of abuse by parents/guardians; other family; friends of family
- Involvement in subsequent childhood or adolescent delinquency and substance abuse
- Often have prior history of abuse in institutional or inpatient settings
- Abuse begins in childhood; continues into adulthood with intimate partners and strangers

# Abuse Histories: Women

- Sexual molestation increases risk for delinquency, addiction, offending, and early offending
- Report violent crime associated with abusive associates, male partners
- May imitate their aggressors
- At risk for unhealthy relationships with authority figures, based on perceptions of their power to harm or to help

# Implications: Women

- Difficulty adjusting to coercive, invasive, restrictive environments
- Lack of right to privacy, cell searches, bodily searches may replicate past abuse.
- Constant triggers
- Vulnerable to abusive authority figures
- Concern with how reporting may interrupt relationships (including calls & visits)

# Implications: Women

## Faced with sexual assault situations

- May not understand it is possible to refuse
- May lack perception of a 'right' to refuse
- May believe it is always dangerous to refuse

## Realistic appraisal of

- Retaliation by perpetrator or their friends for non-compliance (especially with staff)
- Lack of safe, non-stigmatizing response options



# Previously Victimized Individuals

Often have:

- Deep mistrust & sense of danger
- Emotional (and for women, physical) pain
- Post-trauma effects -- depression, anxiety, anger, substance abuse/addiction
- Post-traumatic Stress Disorder (PTSD)
- Past histories of institutional abuse
- Ingrained emphasis on keeping secrets

# MAPPING

Prison Procedures = Prior Abuse Experiences

- Bodily/body cavity searches
- Observed, enforced nudity
- Must obey orders; right to escalate penalties
- Personal effects, living space searches
- 24-hour vulnerability and lack of privacy
- Restraint, seclusion, confinement
- Control of contact with family
- Use of force, command voice, threats

# Potential Victim Responses to Sexual Victimization

Comply, repeat victimization

Pretend it never happened

Seek other affiliations for protection

- other staff; gangs; protective pairing

Withdraw from activities, associations

Take control by deciding sexual activity is/was wanted

- Can't be forced if...

# Potential Victim Responses to Sexual Victimization

- Commit violation to pull move to segregated housing
- Refuse to report to avoid segregated housing
- Seek help [where?]
- Take anger out on others
- Self harm, suicide ideation/attempts

# Contributors to Repeat Victimization

Repeated sex with perpetrator(s)  
facilitated by:

- Danger of retaliation for refusal, reporting
- Responses to sexual assault/rape = numbing, PTSD, fatalism, depression
- Perception of no safe remedies within the facility
- Fear of being put in protective housing, of getting victim status inside, so don't report
- Facility non-identification or non-response

# Implications

Psychological effects

HIV/STD infections

Physical injury

Pregnancy

Control issues– victims and general population

Suicide or attempts

Self-harm

Staff responsibilities

Ethical issues

- Reporting- medical and mental health care professionals



# VULNERABLE POPULATIONS

# Preparation Before You Need It!

- Understand who the vulnerable victims are
- Understand how vulnerable victims can impact the investigative process
- Identify tools which will allow you to best deal with these victims during the investigative process
- Identify resources that will be helpful to you in managing vulnerable victims; build links to these resources



# Especially Vulnerable Victims

- Previously victimized
- Limited language ability
- Developmentally disabled
- Mentally ill
- Hearing Impaired
- Untreated Addicts
- Gender non-conforming
- Juveniles

# Developmentally Disabled

- Wants to please people in authority
- Relies on authority figures for solution
- Watches for clues from interviewer; wants to be friends; wants to please
- Real memory gaps
- Short attention span
- Quick to take blame

# Developmentally Disabled

- Allow person to use their own words
- Do not ask leading questions
- Use concrete ideas (who, what, when, where, how)
- Be respectful, let them take their time

# Deaf/Hearing Impaired

- Use a A certified sign language interpreter (ADA)
- Consider videotaping (if not re-traumatizing)
- Do not use staff if not certified
- Ask the interpreter if they are comfortable with the subject matter. If not, make other arrangements

# Persons with Mental Illness

- Construct an environment where the victim is most likely to feel safe
- Remember that those charged with keeping the victim safe were unable to
- Have pre-interview safety planning
- Be prepared to let the victim walk/pace during the interview if safe
- Keep the interview short
- Time the interview in terms of the victim's medications and sleep patterns

## Recent/Untreated Addicts

- Estimate time since last ingestion of substance(s)
- Know medical history and current medications
- Expect heightened sense of generalized fear, of defensiveness
- Expect lack of trust
- Expect history of severe prior victimization
- Be prepared for attention span/organization problems
- Understand that emotional reaction may not be what you expect for the story (lack of match)
- Utilize your resources for addiction prevention and recovery programs (certified)

# Gender Non-Conforming

- Only ask questions that are absolutely necessary regarding gender
- Use identifiers the interviewee prefers
  - Gender identity is a persons' sense of their own gender, communicated to other's by their gender expression
- Use gender neutral language (e.g., "partner" instead of girlfriend or boyfriend)
- Utilize support groups, advocates, mental health services, as resources
- Have an accurate and current base of information for making effective referrals and obtaining critical knowledge

# Juveniles

- Be aware of their perception of the interviewer – an adult, in authority
- Know that peer relationships are their first priority
- Remember that intimacy and sexuality develop slowly; their views of sex and use of terms may be different from an adult's
- Watch for non-verbal communication. Know that inability to communicate does not equal untruth
- Be aware of prior victimization histories
- Utilize advocates, outside resources, therapists, etc.





# **Staff Characteristics that May Contribute to Victimization**

# Staff Characteristics

- Stress from daily heavy emotional demands on staff
- Burnout due to
  - low morale, lack of respect, low pay, managing difficult and demanding inmates, understaffing, overtime, shift work, overcrowding, disillusionment
- Highly unfulfilling private life; substance abuse
- Lack of normal support networks

# Staff Characteristics

- Role ambiguities: counseling and treatment responsibilities vs. surveillance and control
- Inadequate preparation for supervising offenders and understanding their complexity
- Tendency to victimize; prior abuse histories
- Inadequate supervision
- Familiarity/over-identification with inmates
- Problems in personal life contributing to onset
- Personal vulnerability to manipulation or intimidation by inmate

# Summary

Gender plays important part in risk and response to victimization in institutional settings

Past victimization and special issues can affect abuse and investigations into abuse

Agency policies, procedures and practices can increase or decrease impact of victimization