2018 ANNUAL INTERNAL REPORT ON SEXUAL ASSAULT DATA

OHIO DEPARTMENT OF REHABIITATION AND CORRECTION

AN ANALYSIS OF 2016-2017 SEXUAL ASSAULT DATA

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Introduction

The Federal Prison Rape Elimination Act (PREA) of 2003 was established to address the sexual abuse and sexual harassment of offenders in confinement settings. On August 20, 2012, the PREA Standards Final Rule, to help prevent, detect, and respond to sexual violence, staff sexual misconduct, and sexual harassment behind bars was released. It is the policy of the Ohio Department of Rehabilitation and Correction to provide a safe, humane and appropriately secure environment, free from the threat of sexual misconduct for all inmates by maintaining a program of prevention, detection, response, investigation, and tracking. The Department shall maintain a zero tolerance for sexual misconduct in its institutions and in any facilities with which it contracts for the confinement of inmates. Sexual misconduct among inmates and by staff towards inmates is strictly prohibited. All allegations of sexual misconduct and/or sexual harassment shall be administratively and/or criminally investigated.

Each year, the Ohio Department of Rehabilitation and Correction (ODRC) collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. Annually, the ODRC completes the U.S. Department of Justice, Bureau of Justice Statistics Survey of Sexual Victimization (SSV-2) report. The SSV-2 report (attached) provides data on every allegation of an inmate on inmate and staff on inmate sexual misconduct and is posted on the DRC Internet to make available to the public. The following analysis is ODRC's annual internal report that targets confirmed inmate on inmate and staff on inmate sexual abuse incidents. This report provides a comparison of incidents from 2016 and 2017 and will be utilized by the DRC PREA Coordinator to identify problem areas and formulate corrective measures in efforts of reducing future incidents of sexual abuse.

GENERAL DEFINITIONS

Resulting determinations from completed investigations are classified as outlined in the Code of Federal Regulations Title 28, Chapter 1, subpart A, section 115.5, *General Definitions* (28 C.F.R. § 115.5) as Substantiated, Unsubstantiated, or Unfounded. This standard states that agencies shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

Substantiated Allegation - An allegation was investigated and determined to have occurred based on a preponderance of the evidence.

Unsubstantiated Allegation - An allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether the event occurred.

Unfounded Allegation - An allegation that was investigated and determined not to have occurred.

DEFINITIONS OF SEXUAL VICTIMIZATION

The Ohio Department of Rehabilitation and Correction (ODRC) utilizes uniform definitions as provided by 28 C.F.R. §115.6 in the National Standards to Prevent, Detect, and Respond to Prison Rape (under the Prison Rape Elimination Act of 2003). These definitions are used to categorize

gations of sexual abuse within ODRC correctional facilities and to separate allegations by offender type (staff or inmate) and type of abuse. Like the Survey on Sexual Victimization (SSV), the following categories of sexual abuse have been placed into five categories as indicated below.

STATISTICS:

The following are statistics of reported allegations within ODRC adult institutions, by category:

- **Inmate on Inmate Nonconsensual Sexual Acts**

	2014	2015	2016	2017
Substantiated	2	2	7	9
Unsubstantiated	49	57	107	60
Unfounded	59	57	52	29
Ongoing Investigation	0	0	0	0
Total:	110	116	166	98

Inmate on Inmate Nonconsensual Sex Acts is defined as Sexual contact of any person without his or her consent, or of a person who is unable to consent or refuse; and Contact between the penis and the vulva or the penis and the anus including penetration, however slight; or Contact between the mouth and the penis, vulva, or anus; or Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument.

In 2016, the number of allegations for Nonconsensual Sex Acts was 166. In 2017, the number of allegations for Inmate on Inmate Nonconsensual Sex Acts was 98, which equates to a decrease of 41 percent.

- **Inmate on Inmate Abusive Sexual Contact**

	2014	2015	2016	2017
Substantiated	17	10	4	17
Unsubstantiated	58	68	71	57
Unfounded	19	51	29	16
Ongoing Investigation	0	0	0	0
Total:	94	129	104	90

Inmate on Inmate Sexual contact of any person without his or her consent, or of a person who is unable to consent or refuse; and Intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks of any person.

In 2016, the number of allegations for Inmate on Inmate Abusive Sexual Contact was 104. In 2017, the number of allegations for Abusive Sexual Contact was 90, which equates to a decrease of 14 percent.

➢ **Inmate on Inmate Sexual Harassment**

	2014	2015	2016	2017
Substantiated	43	31	25	16
Unsubstantiated	142	105	85	38
Unfounded	52	40	15	8
Ongoing investigation	0	0	0	0
Total:	237	176	125	62

Inmate on Inmate Sexual Harassment is defined as repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one inmate directed toward another.

In 2016, the number of allegations for Inmate on Inmate Sexual Harassment was 125. In 2017, the number of allegations for Inmate on Inmate Sexual Harassment was 62, which equates to a decrease of 50 percent.

➢ **Staff on Inmate Sexual Misconduct**

	2014	2015	2016	2017
Substantiated	14	15	12	7
Unsubstantiated	65	43	33	35
Unfounded	44	33	42	27
Ongoing investigation	1	0	1	0
Total:	124	91	88	69

Staff Sexual Misconduct is defined as any behavior or act of sexual nature directed toward an inmate by an employee, volunteer, contractor, official visitor or other agency representative (exclude family, friends or other visitors). Sexual relationships of a romantic nature between staff and inmates are included in this definition. Consensual or nonconsensual sexual acts include—Intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks that is unrelated to official duties or with the intent to abuse, arouse, or gratify sexual desire; or completed, attempted, threatened, or requested sexual acts; or occurrences of indecent exposure, invasion of privacy, or staff voyeurism for reasons unrelated to official duties or for sexual gratification.

In 2016, the number of allegations for Staff Sexual Misconduct was 88. In 2017, the number of allegations for allegations for Staff Sexual Misconduct was 69, which equates to a decrease of 22 percent.

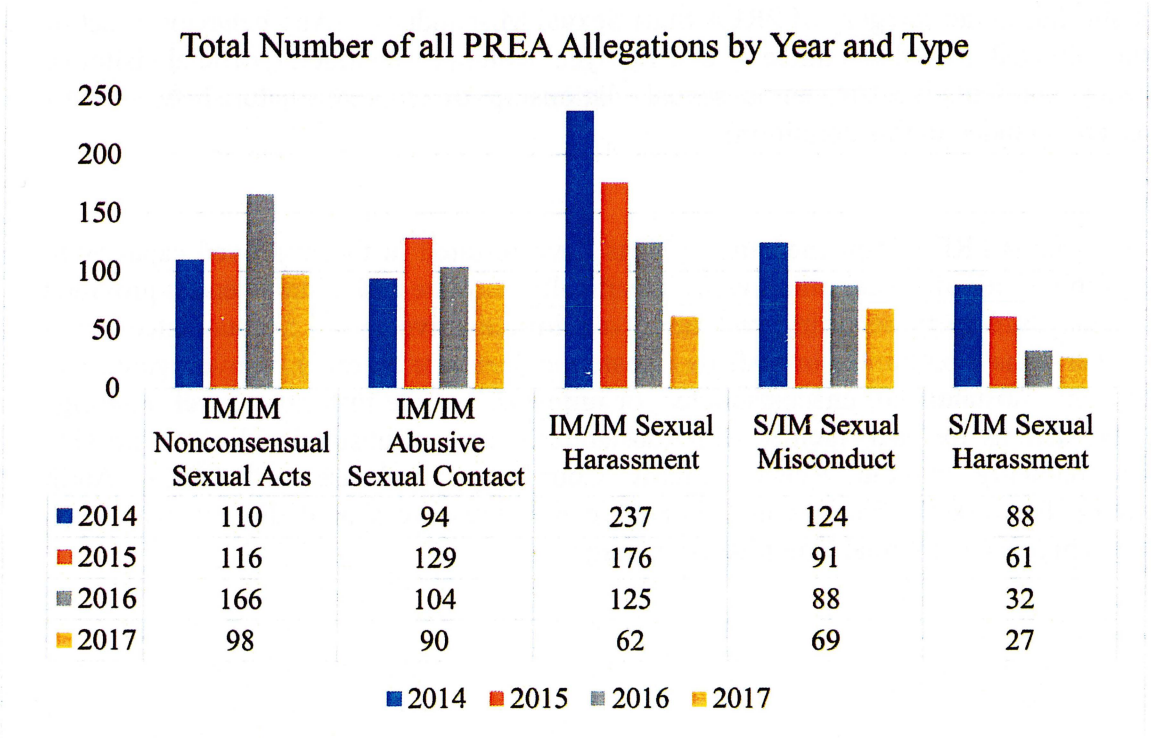
➢ **Staff on Inmate Sexual Harassment**

	2014	2015	2016	2017
Substantiated	3	3	0	0
Unsubstantiated	56	54	22	15
Unfounded	29	15	10	11
Ongoing investigation	0	0	0	0
Total:	88	61	32	27

Staff on Inmate Sexual Harassment is defined as repeated verbal comments or gestures of a sexual nature to an inmate by an employee, volunteer, contractor, official visitor, or other agency representative (exclude family, friends, or other visitors). Including - demeaning references to gender; or sexually suggestive or derogatory comments about body or clothing; or repeated profane or obscene language or gestures.

In 2016, the number of allegations for Staff on Inmate Sexual Harassment was 32. In 2017, the number of allegations for Staff on Inmate Sexual Harassment was 27, which equates to a decrease of 16 percent.

For Calendar year 2017 the Total number of Substantiated Incidents of Sexual Victimization was 49



IM/IM = Inmate on Inmate S/IM = Staff on Inmate

The percentages decrease from calendar year 2016 to 2017 in the number of overall allegations reported in the DOJ SSV report is attributed to the agency's continued emphasis in mandating a zero tolerance for sexual misconduct in its institutions and in any facilities with which it contracts for the confinement of inmates. A continued emphasis is placed on annual PREA training for all staff and offender PREA education. Also, the implementation of the ODRC Electronic PREA Incident Reporting system allows for the collection of more accurate and uninformed data. The 2017-SSV Report is more in line with the requirements of U.S. Department of Justice, Bureau of Justice Statistics definitions for completing the SSV report.

The below table depicts substantiated incidents of sexual abuse by facility and security level for calendars year 2016 and 2017. The numbers are for confirmed Staff on Inmate Contact Sexual Assaults and confirmed Inmate on Inmate Contact Sexual Assaults.

Inmate on inmate sexual abuse incidents increased from 13 cases in 2016 to 25 cases in 2017. Many of the incidents involved inappropriate touching or physical contact with offenders and were not an actual violent sexual assault. Staff on inmate incidents of sexual abuse decreased from 12 cases in 2016 to 7 cases in 2017. Four cases involved contract staff and 3 included a facility staff member. It should be noted all 4 cases involving contract staff were consensual in nature, but still fall in the category of PREA Staff Sexual Misconduct – (Any behavior or act of sexual nature directed toward an inmate by an employee, volunteer, contractor, official visitor or another agency representative. Consensual sexual relationships of a romantic nature between staff and inmates are included in this definition).

The agency's robust PREA implementation efforts have resulted in the improved capacity to substantiate more cases of sexual misconduct, specifically with the additional avenues provided for anonymous, third-party reporting and improved investigative tools. Substantiated cases involving either inmate on inmate or staff on inmate incidents are thoroughly investigated and determined to be substantiated, unsubstantiated, or unfounded at the institution level. Findings and corrective actions for each facility with substantiated and unsubstantiated cases are also reviewed individually by the Agency PREA Coordinator and assigned PREA Audit Administrators. Each case's findings and corrective measures are shared directly with each facility's Warden and Operational Compliance Manager.

	Security Level	Staff on Inmate Contact Sexual Assault 2016	Inmate on Inmate Confirmed Sexual Assault 2016	Staff on Inmate Contact Sexual Assault 2017	Inmate on Inmate Confirmed Sexual Assault 2017
AOCI	1/2	0	1	1	1
BECI	1/2	1	1	0	1
CCI	1/2	0	0	0	1
CRC	3	0	0	0	2
DCI **	1/ 2/ 3	0	1	0	0
FMC **	1-4	0	0	0	1
GCI	1/2	0	0	1	0
LECI	3	0	0	1	2
LOCI	1/ 2	0	1	0	3
LORCI	3	0	1	0	1
MACI	1/2/3	0	2	0	0
MANCI	3	0	3	0	0
MCI	1/ 2	0	0	0	0
NCI	1/ 2	0	0	0	3
NERC **	1/2	0	0	3	2
ORW **	1/ 2	4	0	0	3
OSP	4/ 5	0	0	0	0
PCI	1/ 2	1	0	0	0
RICI	1/ 2	2	0	0	3
RCI	3	0	0	0	0
SCC	1/ 2	2	1	1	1
SOCF	4/ 5	0	0	0	0
TOCI	4	1	0	0	0
TCI	3	0	0	0	1
WCI	3	1	0	0	0
NCCC ***	2/3	0	1	0	0
NEOC ***	3/4	0	1	0	0
LAECI ***	2	0	0	0	0
TOTAL		12	13	7	25

** Denotes female facility
** House both male and female offenders
*** Privately operated facility's

Conclusion: Continued Monitoring, Improvements, and Looking Forward

Agency - level enhancements and continued PREA Compliance implementation efforts during calendar year (2018)

- Implementation of the agency's electronic PREA Incident Reporting system, the official repository for all ODRC PREA related investigations. The system allows for the collection of uniformed and accurate data to complete the Department of Justice Annual Survey of Sexual Victimization Report (SSV).
- Agency implementation of a new process for completing return from out to court or another criminal justice entity PREA Risk Assessment.
- Continued enhancements to the agency's electronic PREA Risk Assessment system; utilized to track offenders' risk for sexual victimization or sexual abusiveness.
- Updates to agency PREA policies and directives.
- Annual PREA training for the Operational Compliance Managers; staff responsible for monitoring PREA compliance at the Prison level.
- Continued enhancements to the agency's PREA compliance Internal Management Audit (IMA) process. Annually, each prison undergoes a mock PREA audit to identify best practices and/or corrective actions that may be required.

ODRC had (11) prisons that underwent their 2nd PREA audit during Year 2 of Audit Cycle 2. The below facility-specific corrective action measures were identified and corrected during this time. All prisons were found to be fully compliant with the PREA standards.

Correctional Reception Center (CRC)

- It was recommended the 3rd shift staff receive remedial training regarding the use of inmate interpreters and the availability of the interpretive services language line.
- It was recommended at the next PREA staffing plan review it be determined how to provide better surveillance at the outside warehouse.
- It was recommended that staff of the opposite gender in B-2 and D-4 receive remedial training regarding announcing themselves as they enter the housing unit.
- It was suggested that medical personnel completing the first part of the inmate risk assessment as referenced in 115.41 provide an explanation of why they are asking the question.
- It was suggested for all specialty units, but especially for youthful offenders and the mobility impaired unit, that an orientation of PREA is conducted much like that being conducted in the reception units.
- It was suggested there be constant reinforcement regarding the *89 feature on inmate phones.
- It was suggested the OSHP detective receive a slot in the next annual refresher training to emphasize evidence handling.

- It was recommended that ODRC look at their data storage needs for the system and/or institutions. With the continuing addition of cameras, there is a need for more and more storage capability to maintain the 14-day storage requirement for videos.
- It was suggested that ODRC review the requirement for contractor PREA refresher training; especially those contractors who have day to day contact with offenders.
- It was suggested that ODRC review the requirement that medical and mental health staff receive refresher specialty training on a periodic basis.
- It was suggested for CRC that case managers, when they conduct their first face to face meeting with offenders, specifically ask the offender if they have any PREA concerns as a check and balance from the large intake processing.
- Although the audit format does not provide for a place to discuss issues which enhance the sexual safety of offenders, there are four programs which should be cited in this very complicated facility processing more than 11,000 offenders each year.

    1. First, is the logistical processing of all offenders. It is preferred the area have more space to make the process even better, especially as it relates to sound and noise, but the flow of the process is very well done overall.
    2. The GED boot camp in the reception dorms is remarkable and a way of providing for the increase of meaningful, evidence based programming before offenders get to their assigned institutions, reducing the amount of idle time and making the unit safer.
    3. The mentor program for youthful offenders. This group of offenders will be bound over to adult confinement upon attainment of their 18th birthday. The work the program does in preparing this aggressive population is designed to make these offenders less likely to become involved in errant behavior.
    4. The incorporation of all things PREA into the compliance culture of ODRC. This compliance culture and the presence of PREA findings into the yearly Institutional Management Audits makes the process of DOJ PREA review much easier.

Noble Correctional Institution (NCI)

- There was no corrective action required of the Noble Correctional Institution for the PREA audit period that ended December 31, 2017. All standards were either met or exceeded.

Marion Correctional Institution (MCI)

- There was no corrective action required of the Marion Correctional Institution for the PREA audit period that ended December 31, 2017. All standards were either met or exceeded.

Southern Ohio Correctional Facility (SOCF)

- There was no corrective action required of the Southern Ohio Correctional Facility for the PREA audit period that ended December 31, 2017. All standards were either met or exceeded.

Dayton Correctional Institution (DCI)

- Although there is evidence the institution has made inmates aware of the confidentiality of *89, many inmates during interviews indicated they did not know of this. This will continue to take constant monitoring and is one of the reasons for the suggestion at each offender's annual security review that all things PREA be discussed.
- It was also suggested the Warden reiterate the availability of the interpretive services "language line." Many staff indicated they did not know it existed. One of the reasons is virtually all inmates at Dayton understand English. However, as part of annual refresher training, the presence and use of the language line is suggested. This is especially relevant as all staff at Dayton are first responders.
- It was found the one offender who was visually impaired was not provided materials to allow for her to "read" in a large font version of the handbook PREA information. This was corrected during the review. However, staff must be proactive when determining if an inmate has a disability to ensure all steps are taken so they have means to obtain and understand PREA information. While this offender indicated she was present when the PREA video was shown, she was not able to hear all which was spoken. Toward this end, it is also recommended that the showing of the PREA video be completed in an area where there is quiet and not allowing continual talking among inmates and staff. This recommendation was immediately addressed. It is suggested that ODRC develop tools, such as audio recordings of the handbook and braille or "signed" products of the handbook for those who have disabilities.
- In a review of the physical plant, there was a recommendation for a mirror to be placed in the laundry so staff could see behind the washers and dryers. A secondary recommendatory for mirrors in the outside warehouse was made. In the first case, the mirror was placed before the end of the audit; and in the second case, the Warden was going to have staff assess where additional mirrors need to be placed.

Allen Oakwood Correctional Institution (AOCI)

- There was no corrective action required of the Allen Oakwood Correctional Institution for the PREA audit period that ended December 31, 2017. All standards were either met or exceeded.

Franklin Medical Center (FMC)

- There was no corrective action required of the Franklin Medical Center for the PREA audit period that ended December 31, 2017. All standards were either met or exceeded.

Ross Correctional Institution (RCI)

- There was no corrective action required of the Ross Correctional Institution for the PREA audit period that ended December 31, 2017. All standards were either met or exceeded.

Mansfield Correctional Institution (MACI)

- Auditors noted that two inmate bathrooms had solid doors in the school area. When it was brought to the attention of the Operational Compliance Manager, he indicated that the facility was already aware that both doors needed a small glass window in each prior to the visit. The doors were at the facility awaiting installation. The auditors informed the Manager that once completed to forward pictures via email in order to comply with the standard.

Belmont Correctional Institution (BECI)

- There was no corrective action required of the Belmont Correctional Institution for the PREA audit period that ended December 31, 2017. All standards were either met or exceeded.

Madison Correctional Institution (MACI)

- The Auditor found some showers without curtains during the tour. Within 24 hours the facility placed curtains in all locations where required. The Auditor also found inmate bathrooms throughout the institution with solid doors obstructing any view inside. The facility began replacing the full solid door with half doors with privacy, doors with windows and PREA curtains. Prior to the audit team concluding the site visit all doors were corrected allowing staff to view inside ensuring one inmate was in the bathroom at a time without compromising privacy.

ODRC continues to progress in addressing sexual abuse by continually monitoring all allegations of sexual misconduct facilitated by staff or inmates. If any issues or trends are identified, they are addressed immediately both at the agency level and facility level. This may include modifications to existing policy, procedures, education, or training. Additionally, this takes into consideration physical plant limitations and the need for video monitoring equipment. BOC continues to work with the Information Technology department to improve the PREA Incident Reporting and Risk Assessment system; making the operations more user-friendly and informative to facility staff as well as BOC staff. Various stakeholders may evaluate PREA case investigations and after incident review processes at any time. This system also improves the quality of records being retained and providing expedient access to the information.

The Bureau of Operational Compliance internal support efforts, including the internal management audit process, are also critical elements for DRC's continued PREA audit success.

The above overview, findings, and recommendations will serve as a primary guide for ODRC's continued PREA compliance efforts for 2019.

3/6/19

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