The South Carolina Coalition Against Domestic Violence and Sexual Assault (SCCADVASA) is a statewide coalition made up of the 23 domestic violence and sexual assault advocacy organizations in South Carolina. Since 1981, SCCADVASA has been a leader in representing the critical needs of survivors and their families with a mission to end domestic violence and sexual assault in South Carolina by influencing public policy, advocating for social change, and building the capacity of member agencies, allied organizations, and communities across the state.

For more information or to view a list of member organizations across the state:

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Letter from the Executive Director

Sara Barber, SCCADVASA

SCCADVASA is excited to present to the community this PREA advocate manual, the first of its kind in our state. Prison rape and sexual abuse behind bars is a crime that has for decades gone largely unnoticed in institutions across the United States. Lack of knowledge by rape crisis advocates, lack of access to prisoners, and complicated funding structures are just a few of the stumbling blocks that have traditionally stood in the way of providing equitable and fair services to incarcerated survivors. But times are changing and this manual is just a start of a larger initiative by SCCADVASA and its partners and allies to provide every victim of rape and intimate partner violence the services that they desire and deserve.

South Carolina is home to four federal corrections institutions, over 50 detention centers and jails, 24 state Department of Corrections institutions, and numerous other juvenile facilities. We do not have accurate data on prison rape statistics in our state. Survivors of sexual abuse behind bars are often reluctant to report assault due to fear of retaliation by fellow inmates and/or staff, concern of being labeled as a “snitch,” or because they do not even know that what was done to them was rape and is a punishable crime. Access to community-based advocates will allow incarcerated survivors to have a safe, confidential person outside of the prison setting to talk to about what happened to them, to learn how to cope with the effects of their trauma, and to understand the options available to them. This in turn will contribute to the healing of the survivor so that when they return to the community, as the majority of incarcerated people will eventually do, they will not carry with them the baggage of their victimization.

SCCADVASA is pleased to be collaborating with the South Carolina Department of Corrections and the Federal Bureau of Prisons to assist them with reaching their National PREA Standards, thus creating inroads to survivors to access advocacy services via crisis telephone hotline, hospital accompaniment, written correspondence, and in-person advocacy. These services are a long-time coming and they will take some time still to be put into place, but with the training and technical assistance provided by national partners such as Just Detention International, and the support and collaboration of our state partners and member organizations, we will soon be a state that can be proud of its commitment and delivery of services to all survivors.
# Table of Contents

Committing to Justice: Serving Survivors Who Are Incarcerated  
SCCADVASA  
1

Working from the Same Page: What Is Prison Rape Elimination Act?  
Washington Coalition of Sexual Assault Programs  
2

Victim Service Standards for Prisons, Jails, and Juvenile Facilities  
Department of Justice  
3-4

Program Highlight: People Against Rape (PAR)  
Kris Mady, Outreach and Follow Up Coordinator, PAR  
5-6

Cross-Training: An Opportunity  
Pensylvania Coalition Against Rape  
7

Hope Behind Bars: An Advocate’s Guide to Helping Survivors of Sexual Abuse in Detention  
Just Detention International  
8-12

Program Highlight: Sexual Trauma Services of the Midlands (STSM)  
Tanyeka Hopkins, Prison Rape Crisis Advocate, STSM  
13-14

People in Custody Who Identify as LGBT  
15

Tips for Getting Services Started in South Carolina Correctional Institutions  
Adapted from Vermont Network Against Domestic and Sexual Violence  
15-17

Committing to Justice: Questioning Oppression  
Pennsylvania Coalition Against Rape  
18
The South Carolina Coalition Against Domestic Violence and Sexual Assault is committed to ending domestic violence and sexual assault in South Carolina by influencing public policy, advocating for social change, and building the capacity of allied organizations across the state. The Coalition recognizes that sexual, intimate partner, and domestic violence are deeply rooted in historical oppression and imbalances of power and privilege between individuals and within systems in society. In order to adequately serve victims of sexual, intimate partner, and domestic violence and ultimately to eradicate violence from our homes and communities, SCCADVASA embraces a social justice framework in our advocacy, education, and collaboration.

It is within this social justice framework that the Coalition places its core value that no one deserves to be sexually assaulted, nor does anyone deserve to be abused by an intimate partner. We also prioritize advocating for equal access to services, regardless of a person’s race, creed, nationality, sexual identity or orientation, gender identity or expression, life circumstances, (dis)ability, or any other reason.

As the United States embarks on long overdue conversations about mass incarceration, the disproportionate number of racial minorities and people from economically poor communities in the criminal justice system, and the need for criminal justice reform in this country, the time is ripe to also address how victims of sexual assault who are living behind bars have faced many barriers to accessing advocacy and sexual assault services. Working with incarcerated survivors has traditionally posed a unique challenge for advocates. Difficulties with maintaining client confidentiality, safety considerations for advocates, and funding restrictions at rape crisis centers have made it difficult for victim advocates and counselors to provide services to incarcerated survivors. It is not a stretch to say that many people who have been incarcerated in South Carolina face historical and systemic oppression that make it difficult for them to extricate themselves once in it. Furthermore, once in prison they face a prison subculture that perpetuates power and control dynamics and can lead to sexual abuse by some inmates as a form of control and coercion. The stigma of incarceration is then compounded by lack of access to services for incarcerated victims or subtle (and sometimes overt) beliefs in society that if a person is incarcerated they deserve further punishment, including rape and assault behind bars.

SCCADVASA is proud to be working alongside advocates in the field and our partners within the corrections institutions to build collaboration and capacity to provide services to incarcerated survivors of sexual assault. This manual is just one way that the Coalition is helping to improve access to services. We are proud of the work being done in South Carolina and we look forward to continuing to advance our call for social justice for all survivors of violence and abuse in our state.
“PREA” is an acronym that advocates in the field have heard for years. But what are the implications for rape crisis centers? The following is a summary of PREA and how community-based advocates play a part in the law, used with permission from WCSAP’s *Connections*, Volume XVIII, Winter 2015.

**Prison Rape Elimination Act (PREA) Victim Services Standards**

The Prison Rape Elimination Act (PREA) was signed into law in 2003 and in 2012, the Department of Justice Standards that govern its implementation in most types of detention facilities were finalized. The purpose of these standards is to tell facilities that are covered under PREA what they need to do in order to be compliant.

A number of these standards relate to facility’s responsibility to provide incarcerated survivors with access to sexual assault advocacy services. These services are intended to be confidential and provided by a community program. Since most detention facilities are required to comply with PREA, including the victim services standards, they are likely to contact sexual assault advocacy programs near to their facilities to coordinate that service provision. It is helpful for advocates at community programs to know what facilities are required to provide in terms of access to victim services, as they begin to work together to bring these services to survivors.

The Department of Justice was responsible for writing the PREA Standards for Prisons, Jails, and Lockup. These can all be found on the PREA Resource Center website: http://www.prearesourcercenter.org/training-technical-assistance/prea-essentials. Below some of the important standards related to victim services for prisons, jails, and juvenile facilities are outlined.
Prison & Jail Standards

115.21 Evidence Protocol and Forensic Medical Examinations

(c) The agency shall offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible...

(d) The agency shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency shall make available to provide these services a qualified staff member from a community based organization, or a qualified agency staff member. Agencies shall document efforts to secure services from rape crisis centers. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance...to victims of sexual assault of all ages.

(e) As requested by the victim, the victim advocate...shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.

115.53 Inmate Access to Outside Confidential Support Services

(a) The facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse... [and] shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.

(c) The agency shall maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse. The agency shall maintain copies of agreements or documentation showing attempts to enter into such agreements.

115.82 Access to Emergency Medical Health Services

(a) Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services...

115.83 Ongoing Medical and Mental Health Care for Sexual Abuse Victims and Abusers

(a) The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.

(b) The evaluation and treatment of such victims shall include, as appropriate, follow-up services, [and] treatment plans...
Community Confinement Facility Standards

115.221 Evidence protocol and forensic medical examinations.

(mirrors Prison and Jail Standards)

115.282 Access to emergency medical and mental health services.

(a) Resident victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services...

115.283 Ongoing medical and mental health care for sexual abuse victims and abusers.

(mirrors Prison and Jail Standards)

Juvenile Facility Standards

115.321 Evidence protocol and forensic medical evaluations.

(mirrors Prison and Jail Standards)

115.353 Resident access to outside support services.

(mirrors Prison and Jail Standards)

115.382 Access to emergency medical and mental health services.

(mirrors Prison and Jail Standards)

115.383 Ongoing medical and mental health care for sexual abuse victims and abusers.

(mirrors Prison and Jail Standards)
Some sexual assault centers in South Carolina have already been working to build relationships with the prisons and jails in their areas. SCCADVASA interviewed Kris Mady, Outreach and Follow Up Coordinator at PAR (see below), and Tanyeka Hopkins, Prison Rape Crisis Advocate at STSM (see page 16), to hear more about the work they are doing in the correction centers and to get some tips to share with other centers who are just starting this work.

Interview with Kris Mady, PAR:

SCCADVASA: What is your role in working with incarcerated survivors of sexual assault?

PAR: I am the Outreach and Follow Up Coordinator at People Against Rape (PAR). I have two main roles in regards to PREA and working with survivors. It is my role to make the connections with the correctional facilities in PAR’s service area and maintain MOUs with each agency as well as provide trainings to our volunteers about working with incarcerated survivors. I also provide direct services to incarcerated survivors. This includes hospital accompaniment, hotline crisis calls, as well as follow up letters, phone calls, and in-person visits.

SCCADVASA: What advocacy strategies have worked for you with these survivors? What do you think would be important for other advocates to know about working with incarcerated survivors of sexual assault?

PAR: When working directly with incarcerated survivors the same advocacy skills need to be used as you would use with any other survivor. Along with this, I believe it is vital to have an understanding of the increased traumatization and victimization someone may face when they are incarcerated. The general lack of resources for someone who is incarcerated as well as daily living in an incarcerated setting can make the healing process after an assault more difficult. As advocates in the field of sexual assault, we are very used to working with people from all walks of life and when working with incarcerated survivors, advocates need to have a strong understanding of oppression and various identities and how that connects with sexual assault.

SCCADVASA: How have you partnered successfully with the Department of Corrections facility where you support incarcerated survivors?

PAR: Working with various administrations including the DOC has been hugely important to my ability to provide services for incarcerated survivors. There are 8 correctional facilities in PAR’s service area and the correctional facilities with passionate PREA coordinators have really made the difference.
contact and regular check-ins have really aided my work. Also taking a tour of each facility to understand the different ways that each facility operates helps to create connections to the correctional officers that you will come in contact with if you do in-person visits.

SCCADVASA: **What would you tell a sexual assault center that may be struggling with providing sexual assault advocacy services to incarcerated survivors?**

PAR: I think one of the things stopping sexual assault centers from providing services to incarcerated survivors is a worry about the role as an advocate in correction settings and a general lack of understanding. Sexual assault centers absolutely have a role in working with all survivors, incarcerated or not, and not providing services is not an option. The clients I work with who are incarcerated often have no one else who is emotionally supporting them, and sexual assault agencies have the ability to empower clients and bring out their resiliency.

SCCADVASA: **What challenges have you experienced? What lessons have you learned from these experiences?**

PAR: As PREA is so new for everyone, it is hard to get everyone (from PREA coordinators, to correctional staff, to volunteers, to SANES) on the same page. It can be really helpful to try to understand each position and build connections with as many people as possible. I have also learned to stay persistent despite non-response (or negative response) and to try different approaches to explaining why PREA is so important.

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### Incarceration Statistics

**In Our Own Backyard, a 2015 report by Vera Institute of Justice**

- Over the past 44 years, the number of people held in jails in the United States has **more than quadrupled**, from 157,000 people in 1970 to 690,000 in 2014.

- Jasper and Georgetown Counties showed the highest increases in incarceration rates in the state. **Jasper’s incarceration rate increased by 886% for the period. Georgetown saw an increase of 817%.**

- African Americans and other racial minorities are disproportionally represented in correctional institutions. **Lexington County has the highest rate of incarceration for African Americans** - 1700 per 100,000 residents.

- The number of women in jail has increased fourteen-fold since 1970 and **the South leads the nation in women’s jail incarceration rates**. Darlington and Cherokee Counties have the highest rate of female incarceration-157.2 and 140.4 per 100,000 residents, respectively.
Cross-Training: An Opportunity
Pennsylvania Coalition Against Rape (PCAR)

PREA Standards spell out detailed instructions for corrections administration on the training of employees, contractors, and volunteers. Institutions must be trained on such topics as the dynamics of sexual abuse and harassment and how to detect and respond to signs of threatened and actual sexual abuse. This might be a place to start when community-based advocates are beginning to develop relationships with local institutions. The following excerpt is used with permission from the Pennsylvania Coalition Against Rape’s (PCAR) PREA advocate manual, Meeting the Needs of Prison Rape, 2006.

Training as a First Step towards Collaboration

Collaboration may not be possible without adequate training of both corrections staff and rape crisis advocates on the problem of prison rape; the unique needs of its victims; and the different cultures, goals, and missions of corrections and the anti-sexual violence movement.

Corrections staff and administrators may not be aware of the seriousness of rape in correctional settings. They may lack the skills and knowledge to respond to a sexual assault emergency. Furthermore, they may be ill equipped to address “non-emergency” situations such as rape, sexual abuse, or incest that may have occurred prior to an inmate’s incarceration.

Advocates and counselors may also have room to grow and skills to develop in meeting the needs of victims of prison rape. When opportunities arise, engage in cross-training with prison staff. These exchanges may help rape crisis advocates teach prison staff about sexual violence, the needs of victims, and the goals and mission of rape crisis services. In turn, cross-training will also help crisis advocates integrate their services within the prison environment in an effective and informed way.
Overcoming Barriers to Providing Services Behind Bars

Providing services to incarcerated survivors can pose a number of challenges to rape crisis centers. Some organizations may have concerns about securing the funding to serve inmates, or may lack experience working with people behind bars. Even service agencies that have sufficient resources and staff training may nonetheless face obstacles in developing partnerships with corrections departments. The following section provides guidance on how to overcome the most common barriers to providing rape crisis services to inmates.

Funding for Services in Detention Behind Bars

Rape crisis centers typically operate on extremely limited budgets. Many struggle to fund even core services, such as a hotline or crisis counseling. The prospect of developing new programs to reach inmates can be daunting. In addition, many corrections departments have limited funding to compensate rape crisis programs for their work with inmates. Some departments have the funding, but have not yet developed a strategy to include rape crisis services in their programs.

Community service providers are eligible for federal funding to support their work with survivors of sexual abuse in custody. However, the program guidelines for the State Victim Assistance Program under the Victims of Crime Act (VOCA), a primary funding source for rape crisis centers, have prohibited grantees from using these funds to serve incarcerated individuals. At the time of writing, the Department of Justice has proposed changing the guidelines to allow grantees to serve incarcerated survivors. As a result of extensive advocacy efforts by JDI and allied groups and the openness of the Department of Justice to revisit this outdated prohibition, the regulations that denied some survivors life-saving support are set to change in the near future.

Even with the VOCA restriction in place, rape crisis programs were, and are, able to use other resources to serve prisoners without jeopardizing their VOCA funding. Funding made available through the Office on Violence Against Women (OVW) can be used to help prisoner rape survivors — specifically STOP (Services, Training, Officers, and Prosecutors) grants and SASP (Sexual Assault Services Program) grants.
There are private donors and foundations that are willing to support work with inmates. There are also corrections agencies that have contracted with rape crisis programs to provide services. Some rape crisis centers use specially trained volunteers to work with incarcerated survivors (rather than having to pay a staff member) and share resources with other agencies. Others work with local detention facilities to develop innovative programs that might be attractive to private or government funders.

**Ensuring the Safety of Advocates**

The prospect of working with inmates gives some service providers pause. Advocates, especially those who have little or no experience with prisoners, may worry about their safety when faced with an incarcerated survivor in crisis. A typical fear is that advocates may be taken advantage of, manipulated, or even attacked by an inmate. While these concerns are understandable, they are largely rooted in myth rather than fact. Advocates should certainly take precautions when providing services to inmates. However, many advocates will find that incarcerated survivors are similar to their clients in the community, and no more dangerous to serve. The vast majority of inmates are grateful—and often surprised—to get outside help and treat visitors with gratitude or curiosity. Services for inmates are rare in detention facilities, and it is unlikely that a prisoner would do anything to compromise this help. Even inmates with a violent past and who may not need rape crisis services are unlikely to try to harm a visitor, knowing that any violent behavior may result in additional criminal charges, revocation of privileges, or placement in isolation.

Service providers who are concerned for their safety—or who have little or no experience in corrections facilities—can request an orientation and tour and ask to meet with staff and inmates before the onset of services. Having face-to-face contact with prisoners can help to dispel fears about this population and provide advocates with an opportunity to learn more about their backgrounds and experiences.

Corrections officials are responsible for protecting visitors, and they take this role seriously. If a service provider ever feels that a situation may be unsafe—or if the advocate feels threatened—protective measures can be taken, such as providing a staff escort or limiting physical contact between advocates and survivors. Any agreement that is established between rape crisis centers and corrections agencies should cover safety protocols for rape crisis center staff. Some of the steps advocates can take include assessing the room in which they will meet with inmates, talking with staff about emergency procedures, and checking in with a corrections staff contact person before and after meeting with a client.

**Bridging the Culture Gap**

Even for those community-based groups that are willing to work with corrections departments, bridging the cultural divide between these agencies may seem overwhelming. On the surface, rape crisis programs and corrections agencies operate with completely different missions and philosophies, and their staff may be uncomfortable working together initially. Outsiders are not always welcome in corrections facilities that, by nature, are closed off from the community. As such, prisons and jails tend to lack strong connections to outside groups.
Rape crisis programs that work with law enforcement or the military will find similarities between such agencies and corrections departments, which tend to be hierarchical and resistant to change. In order to work together successfully, community service providers and corrections agencies should identify common goals and objectives. Successful advocates know how to work within a corrections system, rather than against it. Cross-training is an important way for advocates and corrections officials to share their approaches and philosophies with each other. Rape crisis programs and corrections staff share a commitment to safety, which can provide a basis for working together.

The national PREA standards offer the most concrete and useful mechanism for rape crisis programs and corrections agencies to work together to end sexual abuse in detention and to serve survivors. As mentioned earlier, the PREA standards require that corrections agencies work with community rape crisis centers and other service providers to offer survivors services, including: confidential support via hotlines and letters; advocacy during sexual assault forensic examinations; and crisis intervention and supportive follow-up services. The standards also require that all facility staff receive training, including on the dynamics of sexual abuse, a clear area of expertise of rape crisis programs.

Many corrections agencies will reach out to rape crisis centers directly, asking for help. Rape crisis programs can also take the first step and offer to help nearby prisons, jails, youth facilities, and community confinement facilities to comply with some of the key requirements of the standards. The standards require that each facility designate a PREA Coordinator, who is responsible for ensuring compliance with the standards and is the natural first contact for any rape crisis program that is willing to help.

The Sexual Assault Response Team (SART) model is an area of common ground that advocates can use to work with corrections facilities and help incarcerated survivors. The PREA standards require that all facilities develop a coordinated response plan that is similar in intent and format to SARTs in the community. SARTs are multi-disciplinary units tasked with responding to sexual abuse, ensuring evidence collection and a forensic exam, and arranging for emergency and ongoing medical and mental health services. Community SARTs and coordinating bodies for community services can offer to support the development of SARTs in institutions, invite corrections agencies to join community SARTs, and revise community protocols to include services for incarcerated survivors explicitly.

The foundation of any effective SART is the twofold goals of ensuring the well-being of the survivor and improving prosecution rates. Central to a SART’s success is the commitment of each team member to carrying out his or her role in the service of these goals. Incarcerated survivors benefit tremendously when corrections officials join community SARTs and form SARTs in their institutions. Both the model itself and the interaction with community advocates change the culture of corrections facilities. Across the country, since the release of the PREA standards, such collaborations are increasing transparency, exposing corrections staff to new ways of understanding sexual abuse, and opening doors for survivors to get the help they need.
**Protecting Survivor Confidentiality**

Despite having a shared goal of survivor safety and well-being, advocates can expect to have detailed and sometimes difficult conversations with corrections officials about confidential communication with survivors. It is unimaginable to many corrections agencies that someone would learn of a sexual assault that occurred within their facility and not immediately report it. Their fear is often that criminal activity will go unchecked if survivors have confidential access to community-based advocates. No matter what corrections officials’ concerns may be, advocates should not compromise their principles and responsibility to survivors because a survivor is incarcerated. A survivor’s right to confidentiality does not change depending on where the survivor lives, and nor do advocates’ legal and ethical obligations.

An effective approach to reaching agreement on confidentiality can be to educate corrections officials about advocates’ professional obligations and state laws regarding confidentiality. Advocates can also educate officials about how survivors in the community are more likely to report sexual abuse and participate in a prosecution when they have access to confidential counseling services. In recognition of the effectiveness of SARTs, the Department of Justice incorporated the principles of this model in the PREA standards.

Corrections officials’ concerns about safety are real and valid. It is their responsibility to keep the facility safe, and they fear that if they do not know about a sexual assault against an inmate, they will be unable to protect others from the perpetrator. Advocates should be prepared to make clear to corrections staff that a rape crisis advocate is the one person whose only concern is the survivor’s well-being. Every other person an incarcerated survivor comes in contact with on a daily basis is mandated to report crimes that occur within the facility. Having access to one person who is able to provide confidential support, information, and resources is likely to lead to an increase in inmate reporting.

Agreements about confidentiality should be documented clearly in memoranda of understanding or other written agreements. Rape crisis program staff can help to institutionalize confidential services for survivors by participating in staff training and inmate education, and they can also explain the role of the advocate and the extent to which communication with the advocate is confidential.

**Sustaining Partnerships**

Rape crisis centers know from experience that collaborative partnerships with other agencies can be challenging to maintain. Corrections-community partnerships may be particularly difficult to sustain given the differing philosophies, limited funding, and high staff turnover in the agencies.

An effective tool to build and sustain partnerships between rape crisis centers and corrections agencies is to develop a written memorandum of understanding that formalizes each agency’s role in working with survivors. The PREA standards require that corrections agencies enter into such agreements with rape crisis centers, and many departments will be eager to formalize these
collaborations. To ensure continuity, community service providers should build relationships with several people in their local detention facilities, such as PREA Coordinators, front-line custody officers, and agency leaders. Including corrections staff in coordinated response meetings in the community can also help to ensure that partnerships are sustainable beyond the individuals who begin the collaboration. Scheduling regular check-ins and remaining in close contact can also ensure that these partnerships will continue as long as incarcerated survivors are in need of rape crisis services. As with any collaboration, it is important to assess and adjust the terms of the agreement regularly to make sure that the partners are working well together and that survivors are getting the help they need.

Success Story: Pitkin County Jail, Colorado

Pitkin County Jail, in Colorado, is a small, rural facility with an average daily population of just 16 inmates. The jail does not have a 24-hour medical attendant, and the nearest sexual assault nurse examiner is more than 100 miles away.

In 2011, the head of the facility, Don Bird, reached out to a community-based organization to help set up victim services for inmates at the jail. The resulting partnership between the jail and the advocacy group, called RESPONSE, has been groundbreaking. With JDI’s support, RESPONSE has created a sexual assault response team (SART) at the facility. In addition, the jail’s staff are now trained in how to handle cases of sexual abuse.

Don Bird and Jill Gruenberg, Advocacy and Prevention Program Coordinator at RESPONSE, talked about creating successful community-corrections partnerships:

“For me, the key thing is having a comfortable relationship with the jail staff in which there is mutual respect. We’re seeing each other weekly, saying hello, and gaining insight into each other’s roles. In the natural flow, I might have a question that’s relevant to the jail. Having the relationship means I can pick up a phone and just ask.”

— Jill Gruenberg, RESPONSE

“Any cooperative enterprise in a community is beneficial. Jails tend to be fairly insular. I’ve always tried to make the jail part of the community and get community involvement to the extent that we can. Jill has a network with her group and, so by extension, we can partner with the greater community. One of the benefits of living in a small town is that you can make those connections.”

— Don Bird, Pitkin County Jail
Interview with Tanyeka Hopkins, Prison Rape Crisis Advocate, STSM

SCCADVASA: What is your role in working with incarcerated survivors of sexual assault?

STSM: Sexual Trauma Services of the Midlands’ role is to provide sexual assault services to incarcerated sexual assault survivors from a non-judgmental perspective. Those services include crisis intervention, hospital accompaniment, crisis hotline and sexual assault trainings/presentations to inmates and staff. STSM supplements existing services and provides inmate survivors with options.

SCCADVASA: What advocacy strategies have worked for you with these survivors? What do you think would be important for other advocates to know about working with incarcerated survivors of sexual assault?

STSM: It is important for advocates to research and develop strategies to effectively serve the targeted population. This is done by building relationships with staff in the institutions and collecting data to prepare a plan for action. As well, advocates must feel comfortable working with incarcerated survivors. Advocates should believe that inmates are human first and want to provide them with the best possible service, keeping in mind at least 95 percent will ultimately be released from prison and will bring their medical and emotional issues home with them.

“[A]dvocates must feel comfortable working with incarcerated survivors. Advocates should believe that inmates are human first and want to provide them with the best possible service; keeping in mind at least 95 percent will ultimately be released from prison.”

- Tanyeka Hopkins, STSM

SCCADVASA: How have you partnered successfully with the Department of Corrections facility where you support incarcerated survivors?

STSM: The staff at the Department of Corrections has been open in sharing their point of view and opportunities for growth. Our services seek to fill gaps in the area of sexual assault. The development and success of the prison rape program relies on it being a collaborative effort. There were initial conversations with the Statewide PREA Coordinator about the importance of STSM’s work. PREA Coordinators within the Department of Corrections have been supportive during the implementation of the prison rape program through providing STSM staff with tours of the correctional facilities and providing their expertise concerning prison-/inmate-related matters.
SCCADVASA: What would you tell a sexual assault center that may be struggling with providing sexual assault advocacy services to incarcerated survivors?

STSM: My advice to a sexual assault center that is struggling would be to research and reach out to other states that are currently providing services to this population and ask what they have found effective and ineffective in their approach and implementation of services. I would recommend that advocates visit the institutions/facilities they will be servicing to establish a rapport with the staff. Additionally, Just Detention International has information and a number of webinars you can view related to effectively serving the incarcerated population. I have found it is important for advocates to know that providing sexual assault services to inmates is a process in which we are all learning on the job in real time. This is a new initiative, but with time and effective communication and collaboration, we will hopefully be able to change the culture of prison rape.

SCCADVASA: What challenges have you experienced? What lessons have you learned from these experiences?

STSM: From conversations with prison staff, some believe most sexual encounters between inmates are “consensual” despite there being no consensual sex in prison. It is my belief that to appropriately address the issue and change the culture of prison rape it will begin with education, awareness and a systematic approach to assess a person’s vulnerability to ensure safe-housing. I have also experienced that the community does not believe there is a need for providing this service to this population. Research states at least 95 percent of inmates are ultimately released from prison, and they bringing their medical and emotional issues home with them. The prison rape services are beneficial in that they are intended to help survivors learn to cope after a sexual assault so they may return to the community and, we hope, thrive. In addition, I have learned it is important to do your research as this is a new service and no one has a lot of experience providing this service. It is helpful to find and connect with resources and people in other states who have been doing this work to gather their successes and opportunities.
People In Custody Who Identify as LGBT

Jails and prisons are a traumatizing place for anyone, but can be more dangerous to those individuals who identify as lesbian, gay, bisexual, transgender, or gender non-conforming (LGBT). According to Standing with LGBT Prisons: An Advocate’s Guide to Ending Abuse and Combating Imprisonment, published by the National Center for Transgender Equality, LGBT people are more likely to end up behind bars and more likely to face abuse while in custody. Individuals who identify as or are perceived to be LGBT or gender non-conforming are likely targets of “protective pairing,” a practice whereby one inmate coerces sexual consent from another in exchange for protection or other favors. LGBT individuals face more harassment and maltreatment by fellow inmates and staff alike and are often placed in solitary confinement for their own protection, a practice which in reality increases their vulnerability to victimization. Although practices are changing, transgender and gender non-conforming individuals are often housed according to their genital anatomy, rather than their gender identity, which continues to place them at higher risk of assault and abuse.

National PREA policy requires correctional institutions to implement special conditions and considerations for lesbian, gay, bisexual, transgender, and gender non-conforming individuals, as well as for those with intersex conditions. However, further advocacy is needed in this area. Rape crisis advocates are in a special position to become allied activists to assist with proper implementation of these specialized PREA considerations, as well as to provide training to prison staff and much needed counseling and advocacy to incarcerated survivors who face extra stigmatization and trauma.

Tips for Getting Started in South Carolina Correctional Institutions

Getting started is always the hardest part of any journey. Adapted from the Vermont Network Against Domestic and Sexual Violence’s Advocates’ Guide to the Prison Rape Elimination Act, these tips can help a rape crisis center get started on the right foot.

Schedule a tour at the local facility or institution.

Think ahead of time and determine who at your agency is the most appropriate staff member and the best equipped to respond to hospital and hotline calls from survivors who are incarcerated. You are welcome to contact SCCADVASA for support and assistance on PREA. SCCADVASA can work with the South Carolina Department of Correction’s PREA Coordinator to facilitate access to local facilities so that you can meet their staff and receive a tour of the facility. SCCADVASA also has relationships with the Federal Bureau of Prisons and can help establish relationships at these facilities as well. It is helpful to meet with the staff from local institutions ahead of meeting with incarcerated inmates to talk to the staff about where you will meet an inmate survivor, what you’re allowed to bring to the facility, and other general expectations and safety guidelines.
The balance of personal safety for the advocate and the integrity of security of the facility will be taken very seriously by facility staff. You will want to know what types of security and confidentiality exist for advocates who go to the facility to meet with the survivor in person. Will there be glass that separates the two? Will the inmate be shackled? Is the meeting room observed? Is there private space to meet? Remember, private is not the same as confidential. Talk with staff about your need for confidentiality with clients, come to an agreement on the procedures, and sign a memorandum of agreement for the agreed-upon services.

**Prepare staff and volunteers to accept calls and letters from prisoners.**

Many programs already have a process for accepting calls from survivors who are incarcerated. Calls from prisons and jails, however, can be so infrequent that newer staff/volunteers may not be aware of the organization’s practice. Advocates around the country and at SCCADVASA’s member organizations have found working with incarcerated survivors well worth the effort. Make sure that the protocol for taking calls from survivors who are incarcerated are included in standard operating procedures and in hotline/advocacy training. While all staff and volunteer advocates should be prepared to respond to calls from inmate survivors, it is a good idea to have one or two advocates who have special expertise in following up with these calls, including responding to an inmate at your hospital emergency department. Some organizations have implemented a policy that volunteers do not take hospital calls from survivors who are incarcerated. That decision is best left up to individual organizations, but SCCADVASA believes that all advocates (volunteers and paid staff) should be trained and equipped to provide services to all victims, regardless of life circumstances, and that measures should be put into place to ensure that equal access is provided to all.

It is also important to know that inmate mail and email are subject to search and is, therefore, not confidential. SCCADVASA is currently working with the SC Department of Corrections to explore options for using the prisons’ legal mail system, whereby mail can be opened by not read by prison staff. Until that option is made a reality, it is important to inform all inmate survivors that any mail sent to them from a sexual assault center can be read by prison staff and is neither secure nor confidential.

**Discuss with staff their feelings about working with inmates who are victims.**

For some advocates, this could be a population they are concerned about or will find difficult to work with because of their own backgrounds and histories, particularly when survivors who are incarcerated have also been offenders of sexual or domestic violence. It is important that all staff at an agency, as well as the board and, in some cases, volunteers, discuss key questions around providing equal access to all victims of sexual violence. See below for sample discussion questions. Coming to a common understanding will help alleviate conflicts later down the line when it comes to implementing services.
Discuss personal safety consideration with advocates.

Providing advocacy to victimized inmates when working within the confines of a facility and its rules can be a challenge. The situation is not ideal. When communicating in person or in writing with an inmate, consider the following guidelines:

- Focus on the victimization, not the crime that brought the person into prison or jail.
- Clarify your role and purpose from the beginning of your interactions.
- Always show respect for the survivor.
- Don’t become overly personal.
- Don’t do favors for your client or agree to contact family or friends outside of the institution on their behalf.
- Don’t give the client gifts or money.
- Always maintain clear boundaries.

Establish what you really need to know about the person to whom you are providing advocacy services.

Curiosity regarding an inmate’s conviction and reason for incarceration is natural. However, would you consider making background inquiries and record checks on other survivors? Assuming your agency has worked out the details of security in advance, how much information do you really need to be an effective advocate for an inmate who reports being sexually assaulted? Advocates already know how to work with victims of trauma and the multiple issues they may have. This population will not be very different in that regard. It is best to let the survivor disclose their reason for incarceration in their own time as they choose.

Understand that not all survivors will report a recent sexual assault to authorities.

A requirement of PREA is that anyone who is incarcerated and who discloses sexual abuse, whether the assault took place behind the fence or not, is entitled to community-based advocacy services. Therefore, adult survivors of child sexual assault could seek services from your organization. Furthermore, according to the PREA standards, survivors who are incarcerated are also entitled to community advocacy services regardless of whether they agree to report their assault to prison authorities.
Exploring the connection between sexual violence and oppression can lead to greater understanding of the roots of violence, better quality services to survivors, and future eradication of violence in our communities and homes. Try discussing one or more of the following questions (provided by the Pennsylvania Coalition Against Rape) at a staff meeting, in-service, volunteer training or board retreat.

- What are the needs of victims of prison rape?
- What are their resources?
- What is known or believed about the prison population?
- What is unknown?
- What is behind one’s knowledge or feelings about the prison population?
- What fears and hopes are at play?
- What past experiences inform present-day feelings, beliefs, fears, and motivations?
- What are ways to overcome personal and professional barriers in working with the prison population?
- What opportunities exist to develop and strengthen knowledge, skills, and awareness?
- What are the ethical principles at play?
- Which ethical principles are in conflict?
- Which ethical principle should take priority and why?
- Are there certain individuals with whom an advocate cannot and should not work because it would be unethical (due to the negative impact the advocate's personal biases, beliefs, and limitations would have on such individuals)?
- If an advocate cannot meet the needs of a victim due to the above, who else in the agency/organization can assist the victim?
- What is the agency/organization's mission?
- What is the role of the advocate or counselor within that mission?
- How do the needs of the prison population fit into that mission?
- How can the agency/organization meet the needs of the prison population?

Who are the people I’d be serving if I work with incarcerated survivors?

What are my fears about working in prisons?

How does advocating for incarcerated survivors make our community safer?
The South Carolina Coalition Against Domestic Violence and Sexual Assault (SCCADVASA) PREA Project provides technical assistance and training to direct service sexual assault agencies and other community allies to support crisis services, advocacy, and trauma-informed care to survivors of sexual assault and abuse who are living behind bars in South Carolina prisons, jails, and detention facilities. Contact SCCADVASA at 803-256-2900 or visit www.sccadvasa.org for more information and resources about PREA advocacy.

The South Carolina Department of Correction’s PREA Coordinator is John Barkley. John, as well as the SCDOC’s Victim Services Program at the Department of Corrections, are committed to collaborating with community organizations to protect inmates in their care against sexual abuse and to eliminate all rape from South Carolina state corrections institutions. The SC DOC PREA Coordinator can be reached at 803-896-6436 and the Victim Services Program at 803-896-1733.

Just Detention International (JDI) has a wealth of information about serving victims of rape who are incarcerated, including webinars for advocates and corrections staff, fact sheets, and other resources. Visit www.justdetention.org for more information.

The National PREA Resource Center offers training, technical assistance, and other services for institution staff and advocates to implement the National PREA standards. Visit www.prearesourcecenter.org for more information.

There are a number of resources that provide statistics about incarceration and information about the impact of oppression and community marginalization on incarceration rates in the United States. Visit the Vera Institute of Justice (www.vera.org) to access the 2015 In Our Own Backyard Report or for further statistics. Also, the Ford Foundation (www.fordfoundation.org) has statistics and further information on incarceration in America. Additionally, Standing with LGBT Prisons: An Advocate’s Guide to Ending Abuse and Combating Imprisonment by Jody Marksamer and Harper Jean Tobin can be found at transequality.org. Finally, the American Civil Liberties Union published an article on how American school policies can push children out of schools and into juvenile detention facilities and correctional institutions. That report can be found at www.aclu.org/fact-sheet/what-school-prison-pipeline.
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SC Says No More

Applications to become a member of the South Carolina Coalition Against Domestic Violence and Sexual Assault can be found at www.sccadvasa.org or by calling 803-256-2900.