

PREA ADVOCACY MANUAL:

Tools for Advocates Working with Incarcerated Victims of
Sexual Violence in Wisconsin

2017



WISCONSIN COALITION AGAINST SEXUAL ASSAULT

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INTRODUCTION

Advocates have all heard the stereotypes. People provoke sexual assault by the way they dress or flirt. People who are intoxicated or under the influence have no one to blame but themselves if they are sexually assaulted. A husband or wife cannot be sexually assaulted by their spouse. A gay man enjoys sexual contact with other men regardless of whether it's consensual or not. These are just a few of the myths surrounding sexual assault which advocates play an important role in dispelling.

While advocates have made some progress dispelling these harmful misconceptions, there is a sexual assault myth that has embedded itself so deep into today's culture that it is accepted as a mainstream joke. "Don't drop the soap" can be heard in TV shows, movies, stand-up comedy routines, and online on a regular basis. People laugh because it's funny...right? The perpetual myth is that sexual assault in correctional institutions is a humorous and inevitable consequence of incarceration. Inmates should expect it. Besides, they're criminals...who cares?

Sexual assault is never acceptable under any circumstance. It is not a laughing matter, nor is it punishment for a crime. Sexual assault is a crime, and it is no more tolerable when its victims have committed crimes of their own. Working with incarcerated victims comes with its own unique challenges; it takes an experienced advocate with a lot of support and a good relationship with correctional institution staff to work with this specialized population.

The first half of this tool is intended to provide information on the background, prevalence, and dynamics of sexual abuse and sexual harassment (including abuse and harassment perpetrated by a staff member) in correctional institutions, as well as incarcerated victim responses. The second half of this tool is designed to provide best practice guidelines for advocates who are providing services to incarcerated victims of sexual violence within correctional institutions. While many of the tools, guidelines, and suggestions depict working with prison rape survivors, these same or similar methods are valuable when working with survivors of sexual assault in all forms of detention.

BACKGROUND

The Prison Rape Elimination Act of 2003 (PREA) is a federal law that was created to eliminate sexual abuse in correctional institutions. In addition to providing federal funding for research, programs, training, and technical assistance to address the issue, the legislation mandated the development of national standards. “The Act applies to all correctional and detention facilities, including prisons, jails, juvenile facilities, military and Indian country facilities, and Immigration and Customs Enforcement (ICE) facilities.”¹

The National Prison Rape Elimination Commission developed national standards for addressing sexual abuse and sexual harassment in correctional institutions. The final standards became effective on June 20, 2012, when they were published by the U.S. Department of Justice (DOJ) in the Federal Register.² In February 2014, the U.S. Department of Homeland Security (DHS) finalized regulations to prevent, detect, and respond to sexual abuse in DHS immigration detention and holding facilities.

The PREA Standards are a valuable tool in creating a zero-tolerance environment by preventing, detecting, and responding to sexual assault in correctional institutions. For too long, incidents of sexual assault against incarcerated persons have not been taken as seriously as sexual assaults in the outside community. This can have severe consequences for victims, correctional institutions, and the safety and well-being of the communities to which nearly all incarcerated persons will eventually return.

Just like responding to a sexual assault in the community, advocates play a vital role in responding to sexual assault in correctional institutions. Section §115.53(a) of the PREA Standards calls for correctional institutions to “provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations...”³ In Wisconsin, the Department of Corrections also allows for in-person advocacy for victims of sexual assault who are confined within the state prison system. PREA standards also require that institutions enable communication between inmates and advocacy organizations in as confidential a manner as possible. Section §115.53(b) mandates that the facility “shall inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.”⁴

To find correctional institutions in your community, a map of Department of Corrections Facilities can be found in Appendix I.

¹ Wisconsin Office of Justice Assistance. (2011). Wisconsin Adult Sexual Assault Response Team Protocol. Available online at: http://www.wcasa.org/file_open.php?id=203

² National PREA Resource Center. Prisons and Jail Standards. Available online at: <https://www.prearesourcecenter.org/training-technical-assistance/prea-101/prisons-and-jail-standards>

³ Ibid.

⁴ Ibid

PREVELANCE

It is important to understand the scope of sexual violence within correctional institutions to provide high quality advocacy services. The most recent comprehensive prevalence data available is the Bureau of Justice Statistics *Sexual Victimization in Prisons and Jails Reported by Inmates, 2011–12* report which highlights the following statistics:

- An estimated 4.0% of state and federal prison inmates and 3.2% of jail inmates reported experiencing one or more incidents of sexual victimization by another inmate or facility staff in the past 12 months or since admission to the facility, if less than 12 months.
- About 1.6% of jail inmates reported an incident with another inmate, 1.8% reported an incident with staff, and 0.2% reported both an incident by another inmate and staff.
- Among state and federal prison inmates, 2.0% reported incidents involving another inmate, 2.4% reported an incident involving facility staff, and 0.4% reported both an incident by another inmate and staff.
- The rate of inmate-on-inmate sexual assault is four times higher in women’s correctional institutions than in men’s. Conversely, male inmates are more likely to experience sexual assault by a corrections staff member.⁵

These may seem like small percentages, but any number above zero is unacceptable. The inmate population reported by the Wisconsin Department of Corrections adult and juvenile institutions averaged over 22,500 from January 2013 through January 2017.⁶ From 2013-2015, the average daily inmate population in Wisconsin jail facilities was over 12,000 inmates.⁷

It is also important to recognize the prevalence of incarceration rates within communities of color. In 2003, the Sentencing Project determined that while 1 in 17 white men were likely to be imprisoned during their lifetime, 1 in 3 black men, and 1 in 6 Latino men faced the same consequence.⁸

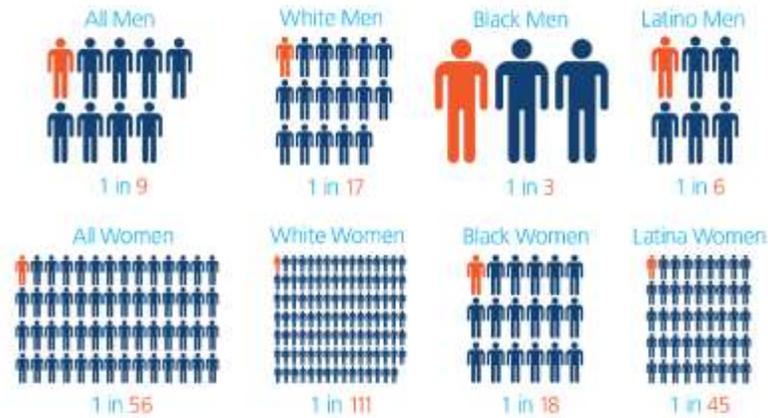
⁵ Bureau of Justice Statistics. *Sexual Victimization in Prisons and Jails Reported by Inmates, 2011–12: National Inmate Survey, 2011–12*. Available online at: <http://www.bjs.gov/content/pub/pdf/svpjri1112.pdf>

⁶ Wi Department of Corrections, Notable Statistics, Population Statistics <http://doc.wi.gov/about/data-and-research/notable-statistics>

⁷ Wisconsin Department of Corrections, Office of Detention Facilities, 2015 Annual Report [http://doc.wi.gov/Documents/WEB/ABOUT/OVERVIEW/OFFICEOF THESECRETARY/OFFICEDETENTIONFACILITIES/2015%20ODF%20Annual%20Report.p](http://doc.wi.gov/Documents/WEB/ABOUT/OVERVIEW/OFFICEOF THESECRETARY/OFFICEDETENTIONFACILITIES/2015%20ODF%20Annual%20Report.pdf)
[df](http://doc.wi.gov/Documents/WEB/ABOUT/OVERVIEW/OFFICEOF THESECRETARY/OFFICEDETENTIONFACILITIES/2015%20ODF%20Annual%20Report.pdf)

⁸ The Sentencing Project; Criminal Justice Facts <http://www.sentencingproject.org/criminal-justice-facts/>

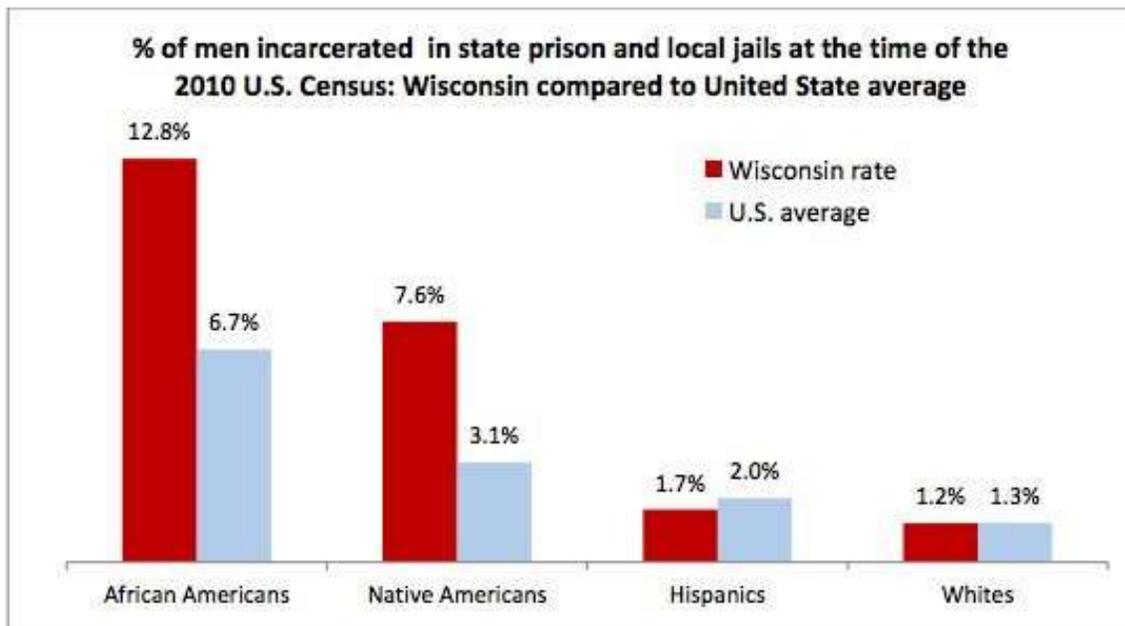
Lifetime Likelihood of Imprisonment



Source: Bonczar, T. (2003). *Prevalence of Imprisonment in the U.S. Population, 1974-2001*. Washington, D.C.: Bureau of Justice Statistics



In Wisconsin, those numbers show an even greater disparity. Black and Native American populations in Wisconsin are incarcerated at twice the rate as the national average.⁹



⁹ UW Milwaukee Wisconsin's Mass Incarceration of African American Males: Workforce Challenges for 2013
<https://www4.uwm.edu/eti/2013/BlackImprisonment.pdf>

DYNAMICS

Sexual violence is any act or behavior (verbal or physical) that is sexual in nature and conducted through force, threats, coercion, or manipulation. Sexual violence is a tool of oppression often used to intimidate and target historically marginalized communities and populations. However, sexual violence affects people of all identities, ages, and abilities. Perpetrators of sexual violence come from all walks of life and identities. They can be acquaintances, family members, intimate partners, trusted individuals, or strangers and are motivated by the need to control, humiliate, and harm. They use sex as a weapon to dominate and hurt others. Sexual violence is never the fault of the victim/survivor. Perpetrators are fully responsible for their actions. Sexual violence can have a profound effect on a person's well-being and the healing process is different for everyone. Some survivors find support from local sexual assault programs, family, and friends.

Sexual assaults within correctional institutions can pose unique characteristics and challenges. The name Prison Rape Elimination Act itself may lead people to believe that it only relates to a violent, forced act of penetration, when in actuality the standards apply to any form of sexual abuse or sexual harassment.¹⁰

In correctional institutions, the following behaviors may be present in both inmate-on-inmate and staff-on-inmate sexual assaults:

- Power and control may be exerted by using a position of authority, dominating behaviors, intimidating behaviors, or denying privileges.
- Manipulation and coercion may manifest as quid pro quo demands, offering favors, threatening consequences, bartering, or using sex as a commodity.
- Grooming may be exhibited by horseplay, showing preference, offering favors or special privileges, or protective pairing.

Protective pairing may be a new concept for community-based professionals, but it is important to understand. Just Detention International reports that in some protective pairing scenarios an older, more experienced, more dominant inmate will partner with a younger, less experienced, submissive inmate. The dominant partner agrees to provide complete protection for their partner from further sexual assaults, violence, theft, and other forms of disrespect. The submissive partner has to give up independence and control over their own body to his partner for the price of this protection.¹¹

Another form of protective pairing occurs with inmates who are resource poor; or in other words, lack financial, physical or emotional resources. To buy items from canteen, they may partner with another inmate who can offer them what they need. However, this relationship does not come free of charge.

¹⁰ National PREA Resource Center. Prisons and Jail Standards. Available online at: <https://www.prearesourcecenter.org/training-technical-assistance/prea-101/prisons-and-jail-standards>

¹¹ Just Detention International. (2014). Hope Behind Bars: An Advocate's Guide to Helping Survivors of Sexual Abuse in Detention. Available online at: http://www.nasmhpd.org/docs/NCTIC/PREA_Toolkit_Advocates_Manual_FINAL.pdf

An exchange of goods or services must be made. When an inmate is unable to repay a canteen debt, for instance, they may be forced to repay sexually.

Protective pairing is never totally voluntary for the submissive partner; it is often coercive, the alternatives are frightful, and it is motivated above all by the need to survive in a place where the submissive partner has been marked as a perpetual target for rape and other forms of assault.

While anybody can be a victim of sexual assault in a correctional facility, there are certain factors that may make an inmate more vulnerable to being victimized. Inmates with the following characteristics are often targeted by sexual assault perpetrators:

- Mental illness, physical disability or developmental disability.
- Small stature.
- First time or very young offenders.
- Limited English proficiency.
- Intoxicated or under the influence.
- Resource poor.
- Sex offenders.
- Prior sexual victimization.
- Identified/perceived as Lesbian, Gay, Bisexual, Transgender, or Intersex (LGBTI) or gender non-conforming.

The two greatest indicators of vulnerability are prior sexual victimization, whether in the community or confinement, and the identification of, or perception of, being LGBTI or gender non-conforming.

Inmate perpetrators often possess characteristics contrary to the vulnerability factors listed above. They often have experience in correctional settings, are larger in physical stature, and have a violent criminal history.¹²

Staff perpetrators may be from any profession or classification, including: correctional officers, teachers, social workers, food service workers, pastors, or volunteers. The Bureau of Justice Statistics (BJS) reports that the majority of staff sexual misconduct incidents were perpetrated by females, while the majority of staff sexual harassment incidents were perpetrated by males.¹³

INCARCERATED VICTIM RESPONSE

Just as with a sexual assault victim in the community, there is no such thing as a “typical response” from an incarcerated victim. They will likely experience the same wide range of emotions other victims may feel, including: guilt, shame, denial, fear, anger, anxiety, embarrassment, and frustration.

Living in a correctional institution may exacerbate a victim’s response to a sexual assault. Trauma from their victimization may give them feelings of disorientation, confusion, and anxiety, which may make an incarcerated victim unable to follow rules. The lack of control over their environment,

¹² ibid

¹³ Bureau of Justice Statistics (2011). Special Victimization Reported by Adult Correctional Authorities, 2007-2008. Available online at: <http://www.wcl.american.edu/endsilence/documents/SexualAbuseReportedbyCorrectionalAuth2007-8.pdf>

including their movement, personal effects, and personal space may intensify these feelings. The trauma response can lead to negative consequences within the prison system as correctional staff will likely be unaware of why an inmate is acting out or refusing to follow directives. It is important to recognize that sharing or talking about victimization or feelings may not be safe for victims in correctional institutions.

Female victims of sexual assault in correctional institutions may find it especially difficult to adjust to a coercive, invasive, and restrictive environment. The lack of privacy, room searches, and body searches may replicate past sexual assault(s). The very nature of the environment may provide constant triggers, which can be any sensory reminder of the trauma (people, sounds, smells, touch, etc.)

Male victims of sexual assault in correctional institutions may feel, or actually may be, unheard and unrecognized as victims. Being acutely aware of the inmate code and their ranking within the walls, they may guard their feelings to mask vulnerability. For male victims whose perpetrator was also male, the victim may fear that if they come forward they will be seen as gay, which may increase vulnerability and risk for further victimization.

Data shows that only one-third of sexual assault victims report their assault to law enforcement,¹⁴ and there is no reason to believe these numbers are any different for individuals who are incarcerated. Although many reasons for not reporting are similar to survivors in the community, inmate survivors face additional barriers.

As discussed earlier, our society trivializes sexual abuse in confinement, and media regularly jokes about it as a natural consequence of serving time in detention. Inmates themselves frequently believe that sexual abuse is to be expected. When sexual abuse in confinement is trivialized, it further marginalizes those survivors.

As with other victims, the complex nature of consent can lead to self-blame. Incarcerated victims may comply with unwanted behavior due to sexual coercion, fear of future physical harm, and/or negative consequences such as loss of recreation privileges or denial of family phone calls or visits. If the abuser is a staff member, the victim may feel it would be dangerous for them to refuse or report, and the victim may question their ability to say no due to the power differential.

Inmates also fear if they report a sexual assault they will be moved to another facility, removed from programming or be placed in segregation. Many inmates are distrustful of the system and believe if they report, nothing would be done and their complaints would not even be investigated. Inmates are often ostracized, isolated from family and friends, and feel they have no one to talk to about the assault or what action to take.

Additionally, there is also an unwritten code inside facilities that you don't "snitch." Victims of sexual abuse in confinement fear being labeled a snitch as well as a victim, which makes them more vulnerable to further assaults. Sometimes, victims may not know to report because they don't consider themselves victims because of experiences they have had in the past. They may have been groomed or subtly manipulated to believe they are compliant or complicit, or they may have engaged in consensual sexual activity previously with the perpetrator, and feel a sense of responsibility to continue the activity.

¹⁴ National Institute of Justice; Reporting of Sexual Violence Incidents
<https://www.nij.gov/topics/crime/rape-sexual-violence/pages/rape-notification.aspx>

ADVOCACY WITHIN A CORRECTIONAL SETTING- BEST PRACTICES

To deliver high quality advocacy services to incarcerated survivors, it is important to understand the key disciplines involved and their respective priorities. As advocates, a victim-centered approach is the top priority, while for correctional staff, safety takes precedence. These two mindsets, victim-centered and safety-first, while equally important, can sometimes feel like they are in direct conflict with one another.

It is highly recommended that advocates build strong working relationships with correctional staff to provide effective services. This section will provide strategies for building those relationships. Also included in this section are tips specific for working with incarcerated victims, including responding to correctional institutions, answering crisis calls, responding to written correspondence, and Sexual Assault Nurse Examiner (SANE) advocacy.

Building Relationships with Correctional Staff

One of the most vital components of providing quality services to incarcerated victims is building a professional relationship with correctional institution staff. Advocates are highly encouraged to meet with correctional staff for a tour of the facility and guidance on the dynamics of the correctional institution's environment. Ideally this should happen before services are needed.

Creating a Memorandum of Understanding (MOU) with correctional facilities is also addressed in the PREA standards. Section §115.53(c) states correctional facilities "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."¹⁵ An MOU should give a clear outline of the protocols, reporting procedures, expectations, and responsibilities of each participating agency. Confidentiality, privilege, and informed consent should also be clearly defined. Advocates are encouraged to review local MOU's and become familiar with the role of the advocate in responding to inmate survivors. A sample MOU used with state correctional facilities in Wisconsin is included in Appendix I. This MOU was created in cooperation with the Department of Corrections after receiving feedback from local Sexual Assault Service Providers (SASPs), and has also been adapted for use in county jails.

It is important to understand and value the distinct roles advocates and correctional staff fulfill, and to discuss the reason for the differences. For example, an advocate's role is to provide services that include: trusting the experience reported by the incarcerated victim, empowering them in their healing, and supporting their self-determined decisions. On the other hand, the primary focus of correctional staff is to maintain the secure care and custody of the inmate, as well as the safety of every person in that correctional institution, including the advocate. These roles and responsibilities may seem to conflict with each other at times, and it will take time to become familiar with each entities role. Establishing cooperation and mutual respect with correctional staff from the beginning of the collaboration will greatly enhance advocates' work with incarcerated victims.

¹⁵ National PREA Resource Center. Prisons and Jail Standards. Available online at: <https://www.prearesourcecenter.org/training-technical-assistance/prea-101/prisons-and-jail-standards>

If advocacy services are requested, the correctional institution's victim services coordinator will most likely be the main point of contact, and will assist in arranging for the initial visit with the incarcerated victim. The victim services coordinator will facilitate entry into the correctional institution by handling the completion of a background check, issuing a visitor authorization memo, and scheduling a room to meet in.

The victim services coordinator will also help coordinate the victim's future access to an advocate, determine frequency of contact, and continually reevaluate the victim's needs. It is highly recommended that advocates meet with the victim services coordinator prior to responding to a correctional institution. This will allow advocates the opportunity to tour the facility and learn more about the security procedures of the correctional institution.

The advocate may want to ask the victim services coordinator to explain the following:

- If an advocate responds to provide services when the victim services coordinator is not on the grounds, who is the point of contact?
- What are the different security classifications for inmates at the correctional institution and how will those impact the logistics of the visit? Will the inmate be in restraints? Will the inmate be accompanied by a correctional officer? Will the advocate be allowed to meet with the inmate face-to-face? Will the room be private or a no-contact booth?
- Does the correctional institution offer trainings for volunteers/contractors that are available for the advocate to learn more about safety, security, and correctional institution protocols? (Although it is beneficial to attend a volunteer orientation, an advocate should not become a volunteer as this classifies them as a mandatory reporter under PREA standards.)
- What, if any, items can the advocate bring into the facility?
- What is a realistic amount of time that an advocate will be at a correctional institution? What is the best time to come? How long will it take to get through security?
- What happens during correctional institution inmate count? What happens if the facility goes on lock down?

Advocates and the Incarcerated Survivor

The advocate's primary responsibility is to offer victim-centered support. Best practice guidelines as documented in the *Wisconsin Adult Sexual Assault Response Team Protocol* suggest that "advocates do not encourage or discourage victims from reporting or participating in the criminal justice system. An advocate assists victims in making informed choices. The victims' choices and needs determine how the advocate proceeds."¹⁶

¹⁶ Wisconsin Office of Justice Assistance. (2011). Wisconsin Adult Sexual Assault Response Team Protocol. Available online at: http://www.wcasa.org/file_open.php?id=203

It is important to know that the role of the advocate is to provide immediate, crisis intervention services following an assault, not to introduce a long-standing therapeutic relationship. The duration of services needed should be cooperatively worked out between the advocate and the victim services coordinator at the institution.

The advocate will need to remain open minded when working with incarcerated survivors. Inmates know the stigma their sentence brings and they may want to talk about their life before incarceration to prove they are more than just an inmate number or jumpsuit.

It is important for the advocate to acknowledge their own biases when working with inmates, especially inmates who may have an assaultive or sexually violent history. Avoid discussing an inmate survivors criminal record or prior offenses in order to help combat any preconceived beliefs about this population.

Advocates working with confined survivors will need to demonstrate patience, consistency, and persistence. It will take time to build trust as inmates are used to seeing programs and people come and go from their lives and the institution. It is common for inmates to disclose only small bits of information at a time in order to gauge responsiveness. Being consistent in words and actions will help build trust with an inmate. Information may need to be repeated several times for these survivors to believe that the advocate is being honest and forthright.

One of the most difficult things for inmate survivors to believe is that the services being provided are truly confidential. Small disclosures of information may be used in order to test the system and the advocate. Sharing any information with staff after talking to an inmate could be detrimental to the relationship, and potentially harmful to the inmate's safety. The grapevine within the institution is powerful. If an inmate learns that something they shared with you has been disclosed to staff or other inmates, even if the information seems harmless, trust with that inmate will be destroyed. It is possible that any real or perceived violation of trust will be shared amongst inmates, making future survivors less likely to reach out for help.

Incarceration can also make individuals feel very alone. Inmates are often cut-off from their family and friends for extended periods of time, or feel they deserve or should have expected the abuse simply because they are incarcerated. These feelings can make an inmate survivor feel even more isolated. It is important to remind survivors they are not alone and there are people who care about them and their experiences, and want them to be safe.

Many survivors have a history of trauma that predates their incarceration. Be prepared to address not only the current trauma, but also the past trauma, keeping in mind it is possible this is the first time they have sought help.

Advocates also need to remember that inmates generally have few resources and may ask for help working on problems that are unrelated to their abuse. They may make requests such as reaching out to a friend or family member on their behalf, sending a letter because they have no money for postage or bringing something into the facility for them. No matter how innocent and harmless the request may seem, do not agree to perform such tasks. Doing so could be a violation of a court order or pose a threat to the safety of the institution. Be clear about the role of an advocate and expect to have to remind them of this frequently.

It is important when working with inmates to maintain boundaries, both physical and emotional, and to avoid personal disclosures. Remember it is always acceptable and within your rights to discontinue services with an inmate who is violating the inmate/advocate relationship.

Strengths and Challenges

It may be difficult for advocates to overcome the struggle they feel working with inmates, especially those who may have committed violent crimes or perpetrated sexual assaults. However, no one deserves to be sexually assaulted. Providing advocacy to inmates does not equate to approval of their past behaviors, rather it signifies an understanding of the benefit of advocacy services in the healing processes for sexual abuse survivors.

Advocates will face challenges when working with incarcerated survivors. Prisons and jails are culturally distinct environments that are unfamiliar to many people. An advocate may feel concerned for their safety especially when working with people who have a history of violence or those who have committed sex crimes. These are unfamiliar populations and advocates will need to adapt their interventions to fit the environment. Much of the work will be done with little or no increased funding. If there are safety concerns, correctional staff is dedicated to keeping you safe. Advocates should not hesitate to all upon staff if they are feeling unsafe or unsure about a situation.

Despite these challenges, the greatest strength an advocate has is that they already possess the skills needed to work with survivors. Advocates should trust their expertise and remember that in the community, they already work with a diverse group of people and already adapt interventions to meet the needs of individual survivors. For incarcerated survivors, advocates provide emotional support, crisis intervention, information and referrals, hospital accompaniment, investigatory interviews/court accompaniment, and assistance with preparing victim impact statements and other forms, just as they do in the community.

Important Information to Remember:

- Incarcerated victims experience trauma in the same way a person in the community would, however, traditional options for healing may be limited.
- Incarcerated victims have very little control over their lives, choices, and environment. When in a correctional institution, they are directed when to eat, sleep, socialize, and exercise. It is important to give incarcerated victims a sense of control where possible. This may be something as simple as asking if they prefer to meet in the morning or the afternoon.
- Incarcerated victims may be in close proximity to their offender, revisit the location of the abuse nearly every day or hear/smell/see reminders of the abuse in a way that doesn't always exist in the community. These constant reminders of a traumatic event can greatly impact how inmates react to abuse and may compound the existing trauma, causing the inmate to behave in unpredictable ways. These behaviors may pose additional safety concerns for staff and other inmates if not addressed.
- Inmates don't have the ability to circumvent real or perceived unsafe situations the way survivors in the community do.

- Incarcerated victims may refuse advocacy services for a variety of reasons. They may not trust or believe that the services being offered are truly confidential. Inmates fear that coming forward as a victim will make them a target for further victimization due to perceived weakness or vulnerability.
- Inmates typically do not trust authority figures. The role of staff is to ensure the safety and security of the inmates and the facility, however, this can sometimes be construed by inmates as disbelief and lack of concern for their well-being. Inmates fear that if they come forward with reports of abuse, especially if the report is against a staff member, they will not be believed.
- Some correctional institutions may use segregation or a form of protective custody during sexual misconduct investigations, and inmates may fear the loss of privileges, including programming and visitation if they report.

Responding to a Correctional Institution

When working directly with incarcerated victims in a correctional institution, advocates need to be aware of security restrictions. Individual correctional institutions have specific protocols and procedures that visitors must follow. The victim services coordinator can advise the advocate on the specific procedures for their facility.

As a general rule, an advocate can expect the following when responding to correctional institutions:

- Visits will be facilitated by the victim services coordinator. The victim services coordinator will be the advocates main point of contact for questions or concerns regarding a visit to the institution.
- Advocates need to have a criminal background check performed by the correctional institution prior to providing services. Obtaining clearance prior to receiving a call for support will help avoid delays in the ability to serve inmates.
- Advocates should call the correctional institution the day of the visit to confirm the visit will proceed as scheduled. Confirm that the inmate is still housed at that facility and is able to see professional visitors and that the facility is not on lockdown. Know that institutional operations will supersede advocacy services or any other external appointments.
- All advocates are required to provide valid photo identification and sign a visitor log. Valid identification includes a current driver's license or state identification card, tribal ID card or passport. Some facilities may issue the advocate a personal alarm.
- Advocates will be hand stamped prior to entrance to the correctional institution and will be required to wear a visitor badge while in the facility.
- Advocates must pass through and clear a metal detector. Any concerns about passing through the metal detector should be discussed with security staff in advance. Wire in undergarments and metal in shoes will not clear the metal detector and should not be worn,

if possible. Jewelry other than a wedding band or single ring, watch, single strand necklace, and single pair of earrings is not allowed. Any piercing of the body should be removed, if possible. It is also best to avoid wearing a lot of other metal, such as belt buckles and buttons on a coat.

- Advocates will be escorted by facility staff throughout the facility and guided to the meeting space. Some institutions may allow visitors to move about more freely, however if the advocate is uncomfortable doing so, ask for an escort.
- All materials brought into the facility for distribution must be pre-approved and may need to be distributed by the victim services coordinator. Ensure paper materials are free from staples, fasteners and paper clips. All other materials may be considered contraband.
- Advocates should make sure to take all items with them when they leave, including writing instruments.
- Cell phones, smoking materials, wallets, purses, cash, and credit cards will not be allowed in the facility.
- It is beneficial to tour local institutions. Although it is natural to be nervous, seeing the facility and familiarizing yourself with the facility in advance helps to reduce anxiety. The tour will provide an opportunity to view the meeting space, make connections with staff, and learn about the day to day functioning of the institution. The more that is known about the facilities layout and how inmates move around during the day, the better equipped an advocate will be to help.

Use professional judgment when determining wardrobe options, but consider dressing conservatively. The following is among apparel that could result in denial of visiting privileges:

- Shorts that are shorter than fingertip length.
- Skirts or dresses shorter than fingertip length plus three inches.
- Skirts with any type of slits (front, back or side) extending past fingertip level.
- Strapless, tubes, or halter tops.
- Tops which expose the midriff or bust line.
- Camouflage clothing of any type.
- Transparent clothing of any type.
- Shoes must be close toed with heels no higher than three inches. Many correctional institutions are quite large and a lot of walking is often required, so it is advised to wear comfortable shoes that are easy to remove if they need to be inspected.

Safety and Self-Care

It is natural to feel nervous when responding to a correctional facility, but remember that correctional officers and staff are there to keep you safe. If you are ever feeling unsafe or threatened, check in with the nearest staff person immediately.

- Be observant and aware of surroundings.
 - Report rule violations and suspicious or unusual behavior.
 - Examine physical space for an escape route.
 - Never assume an issue is too minor to report and receive guidance.
 - Remain mindful of nonverbal communication.
- Remain professional.
 - Be respectful, compassionate and consistent.
 - Use safe and effective communication to clearly communicate expectations, directions and intentions.
 - Refer to inmates as Mr./Ms. [last name].
 - Do not allow physical contact other than a brief arms-length handshake.
- Maintain consistent, fair and firm boundaries.
 - Learn how to be effective in saying “no.”
 - Never take anything into or out of the facility on behalf of an inmate.
 - Do not accept gifts from inmates.
 - Do not mail letters or contact others on behalf of the inmate.
- Be aware of your emotional space.
 - Avoid personal disclosures.
 - Use caution when disclosing personal stories as a teaching tool or to illustrate a point.
- Obtain information regarding rules and policy clarification from staff rather than inmates.
 - Remind inmates that they have a formal complaint process that can be effective in determining policy changes.
 - Seek guidance and clarification from the victim services coordinator.
- Remain mindful of individual differences.
 - Ensure the services provided are accessible to people with cognitive disabilities, visual impairments, or English Language Learners.
 - Continue developing culturally relevant services and how they benefit communities of color.
- Seek support from a supervisor or colleague.
 - Identify and acknowledge personal biases.
 - Accept that feelings of fear and nervousness are normal.
 - Process feelings before and after contacts with an inmate.

ADVOCACY IN PRACTICE

Advocates are skilled at providing services to survivors of sexual assault, and in general, these same skills will be used when providing services to incarcerated survivors. However, there are some key differences to be aware of when serving this population. In this section, advocates will find tips for providing in-person services, answering crisis calls, responding to written correspondence, and accompaniment at medical forensic exams.

In-Person Advocacy/Confined Survivors

Advocates serving confined survivors need to remember that inmates do not have the freedom to move about at will and their resources are limited. Interventions working with this population will need to be adapted to fit the setting. Understand that privacy for an inmate is very limited. If an inmate does not wish to talk about a topic, don't probe. Respect their privacy and recognize an unwillingness to disclose information may be one way they are keeping themselves safe.

Many aspects of daily life in an institution can be triggering and survivors face potential re-traumatization at every turn. An advocate should assist incarcerated survivors with recognizing potential triggers and developing practical coping skills. Inmates can learn and develop self-contained coping skills such as: meditation, breathing exercises, guided imagery, grounding, reading, exercise, or journaling. It is important to remind them that anything they write carries the risk of being discovered by staff or other inmates.

To help an inmate develop a safety plan, the advocate first needs to help the inmate assess the threats to their safety. Validate the survivor's concerns. Identify if the threat is from other inmates, staff, or both. Review with the inmate actions they have already taken to try to achieve safety and build on what already works for them. Identify if there are people or places within the facility that the inmate feels safe, and help them develop a plan to get to those places or reach out to those individuals in times of need.

It is not uncommon for inmates to express suicidal or self-harm ideations. An advocate should determine in advance, with guidance from their supervisor, how these threats will be handled. Remember suicide watch in an institution often means segregation. The inmate should be advised upfront of your procedure for handling these issues.

After a visit with the advocate, an inmate will most likely be returned directly to their unit. As a result, it can be helpful to allow time at the end of a session for the inmate to regroup prior to being returned to the unit. Since an advocate's role within the institution is to provide short-term crisis intervention services, it is important to develop self-care plans promptly so the survivor has the skills necessary even if they can no longer work with an advocate. Advocates can also provide incarcerated survivors with information about how they can receive long term services within the institution setting. The survivor services coordinator can assist the advocate with learning about the internal services available. Finally, advocates can also inquire about release dates and potential transfers to other facilities so that the advocate can provide referral services.

Inmates are entitled to receive advocacy services whether or not they chose to file a report. However, services without an official report may be limited to hotline calls and mail correspondence. If an inmate does choose to report, investigators may need to be reminded that an advocate's

communication with an inmate is not part of the investigation. Advocates are bound by the domestic violence or sexual assault advocate-victim privilege statute (Wisconsin Statute §905.045). The statute states:

“A victim has a privilege to refuse to disclose and to prevent any other person from disclosing confidential communications made or information obtained or disseminated among the victim, a victim advocate who is acting in the scope of his or her duties as a victim advocate, and persons who are participating in providing counseling, assistance, or support services under the direction of a victim advocate, if the communication was made or the information was obtained or disseminated for the purpose of providing counseling, assistance, or support services to the victim.”¹⁷

Keep in mind, the presence of a correctional officer or other third party during the advocate’s interaction with an incarcerated survivor may impact the confidentiality of the information shared. As a result, that information may not be privileged, and an advocate could be compelled to share what was discussed in court. For more information, please review the WCASA Information Sheet, *Confidentiality of Communications Between an Advocate and a Victim*.¹⁸

Crisis Calls

It is possible that SASPs may get hotline calls from an inmate in a correctional institution. Treat these as you would any other hotline call. Inmates in the Wisconsin Prison System have access to free, unrecorded, confidential calls which can be placed directly to SASPs. Inmates may not believe these calls are truly confidential and may test the system. Calls from other correctional facilities such as county jails, lock-ups and immigration centers may not have the same protections, and inmates should be reminded of any limits to confidentiality.

Advocates should always ask the caller if there are others in the room or the near vicinity. Inmates may use coded language or expect that the advocate fill in the blanks if they are in an area where they believe others may overhear them.

Some basic tips for handling crisis calls from a correctional facility:

- Remain calm.
- Ask for the caller’s first name and how they wish to be addressed.
- Use active listening skills.
- Reflect back what the caller is saying.
- Ask how support can best be offered.

¹⁷Wis. Stat. § 905.045. Available online at: <https://docs.legis.wisconsin.gov/statutes/statutes/905/045>

¹⁸ Wisconsin Coalition Against Sexual Assault (WCASA). (2014). Confidentiality of Communications Between an Advocate and a Victim. Available online at: http://www.wcasa.org/file_open.php?id=189

- Help the caller make a plan.

Advocates should be aware of some key differences in calls coming from correctional institutions and jails.

- Clarify the purpose of the hotline and the role of the advocate.
- Share ways in which an inmate can report sexual abuse.
- Remind the inmate, if speaking over the phone, that the conversation may be overheard. This may impact the confidentiality of the information.
- Special requests should not be granted (i.e. forwarding calls, calling another on behalf of the inmate, etc.).
- Calls that are not “on topic” should be redirected and terminated if necessary.
- If the caller could benefit from an in person visit, encourage them to contact the facilities victim services coordinator to arrange this.
- Remind inmates of support services available to them within the institution, but also remind them of internal employee’s responsibility to report all cases of sexual abuse.

Medical Forensic Exam Advocacy

Providing advocacy to an incarcerated survivor during a medical forensic exam is in some ways different from advocacy provided in the community. As discussed earlier, advocates and correctional staff have different perspectives and practices. Advocates should be informed of and open minded about correctional practices. It may be necessary for an advocate to describe their role to the correctional staff so that both entities can work together to best meet the survivors needs.

Some differences in providing advocacy to incarcerated survivors include:

- Incarcerated survivors will likely be in a correctional institution uniform and handcuffed or otherwise restrained.
- Advocates may not be allowed to touch the incarcerated survivor.
- Correctional officers will often be present during the exam to maintain the custody of the incarcerated survivor as well as the safety of the medical personnel and the advocate.

While there are some noted differences in providing advocacy during a medical forensic exam to an incarcerated survivor in comparison to a community-based survivor, there are many similarities too. Advocates should:

- Ask the survivor how they wish to be addressed (i.e. first name).

- Describe your role to the survivor.
- Inform the incarcerated survivor of their rights, such as the ability to decline any part of the exam.
- Offer non-judgmental emotional support and encouragement.
- Advise the survivor they can request an advocate be present during examination and during investigatory interviews.
- Ensure the survivor is as comfortable as possible.
- Remain uninvolved in the evidence collection and do not hold items for the Sexual Assault Nurse Examiner (SANE).
- Ask the SANE clarifying questions to ensure the survivors understands all components of the medical forensic exam.
- After the exam, ensure the survivor understands what will happen next.

After the medical forensic exam is completed, advocates can offer to have a private/confidential meeting with the survivor. Due to security issues, this may be challenging. If correctional staff do not allow such a meeting, the discussion may need to be held in a corner of the examination room where staff has visual, and possibly auditory, contact with the survivor.

Advocates will want to prepare the inmate for return to the facility. Most survivors will return to the facility where the assault occurred, even if only temporarily. Describe to the survivor what will happen next (i.e. they will be transported back to the facility, may not return to their housing unit, could be placed in protective custody, medical may follow-up, the victim services coordinator will connect with them, they will meet with investigators, etc.) Talk with correctional staff to understand the process or next steps, if needed.

Discuss with the survivor any concerns they have about returning to the facility and provide options to address their concerns. As mentioned earlier, develop a safety plan with the survivor and review coping skills that would be effective while incarcerated. Discuss with the survivor the option of signing a release of information allowing the advocate to communicate safety/placement concerns to staff.

The advocate should offer referrals and follow up care to the survivor. Provide the inmate with your agency's contact information and explain facility-based services, including medical and mental health services available as well as information about the facility's victim services coordinator. If they're interested in face-to-face advocacy with an outside agency, they will need to request this through the facility's victim services coordinator.

Written Correspondence

Inmates frequently use mail as their preferred method of communication. Often, they are simply looking for basic advocacy services. Advocates should provide them with information about sexual abuse, emotional support, common responses to sexual abuse, and general coping skills. Include

methods to report sexual abuse in the response as well as information about the crisis line. It may be helpful to develop a generic letter to respond to written correspondence from inmates. If an agency chooses to respond to letters individually, remember that written correspondence can be monitored by staff and that letters or other communication could be seen by other inmates as well.

When responding to a letter from an inmate the following tips may be helpful:

- Use simple, clear, concise, respectful language (average 6th grade reading level).
- Express validation.
- Personalize when possible (remember to use their inmate number on all correspondence).
- Offer information, resources and referrals.
- Describe agency services available to incarcerated survivors.

A sample generic response letter is included in Appendix III of this manual.

HOW TO REPORT SEXUAL ABUSE

PREA Standards §115.51 require correctional agencies to “provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.”¹⁹ Facilities must also “provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency... allowing the inmate to remain anonymous upon request.”²⁰

Inmates in the Wisconsin Department of Corrections have several ways to report sexual abuse. Inmates may:

- Dial 777 (Internal Reporting Hotline).
- Dial 888 (External Reporting Hotline. Allows inmate to report to an agency outside the Department of Corrections. This report may be anonymous if the inmate so chooses).
- Tell any staff person.
- Tell a family member, friend or support person.
- File a complaint.
- Contact local law enforcement.
- Staff must accept reports verbally, in writing, anonymously, and from third parties.
- Reports can be filed on behalf of an inmate online at DOC PREA website.

Inmates in other correctional facilities can be directed to contact their local Police/Sheriff’s Department or tell any staff person.

¹⁹ National PREA Resource Center. Prisons and Jail Standards. Available online at: <https://www.prearesourcecenter.org/training-technical-assistance/prea-101/prisons-and-jail-standards>

²⁰ Ibid.

CONCLUSION

Advocates play a vital role in empowering survivors of sexual violence, including those assaulted while in confinement. This tool is designed to outline best practices for advocates as they respond to cases of sexual assault within correctional institution settings.

No one deserves to be sexually assaulted. Given that most inmates will inevitably return to communities, it is imperative to provide survivors with advocacy services prior to release to ensure they are equipped with strategies and coping skills necessary to heal from the trauma. Community-based advocates are uniquely poised to provide such services.

The role of advocacy in correctional institutions can be challenging. Building strong working relationships with correctional staff is critical to providing comprehensive, survivor-centered services.

Advocates must be aware of their own personal bias when delivering services to incarcerated survivors. This manual provides advocates with general tips for responding to incarcerated sexual assault survivors whether those services are provided in-person, via phone, through written correspondence, or during a medical forensic exam.

Advocates are encouraged to expand their knowledge of the PREA Standards, prison culture, and the dynamics and prevalence of sexual violence within correctional institution settings. Understanding the challenges providing services in correctional settings increases an advocate's ability to support an incarcerated survivor to make informed choices and to empower healing.

RESOURCES:

PREA Resource Center

<https://www.prearesourcecenter.org/>

Just Detention International: Hope for Healing: Information for Survivors of Sexual Assault in Detention (2009).

https://justdetention.org/wp-content/uploads/2015/10/Advocates_Manual_FINAL.pdf

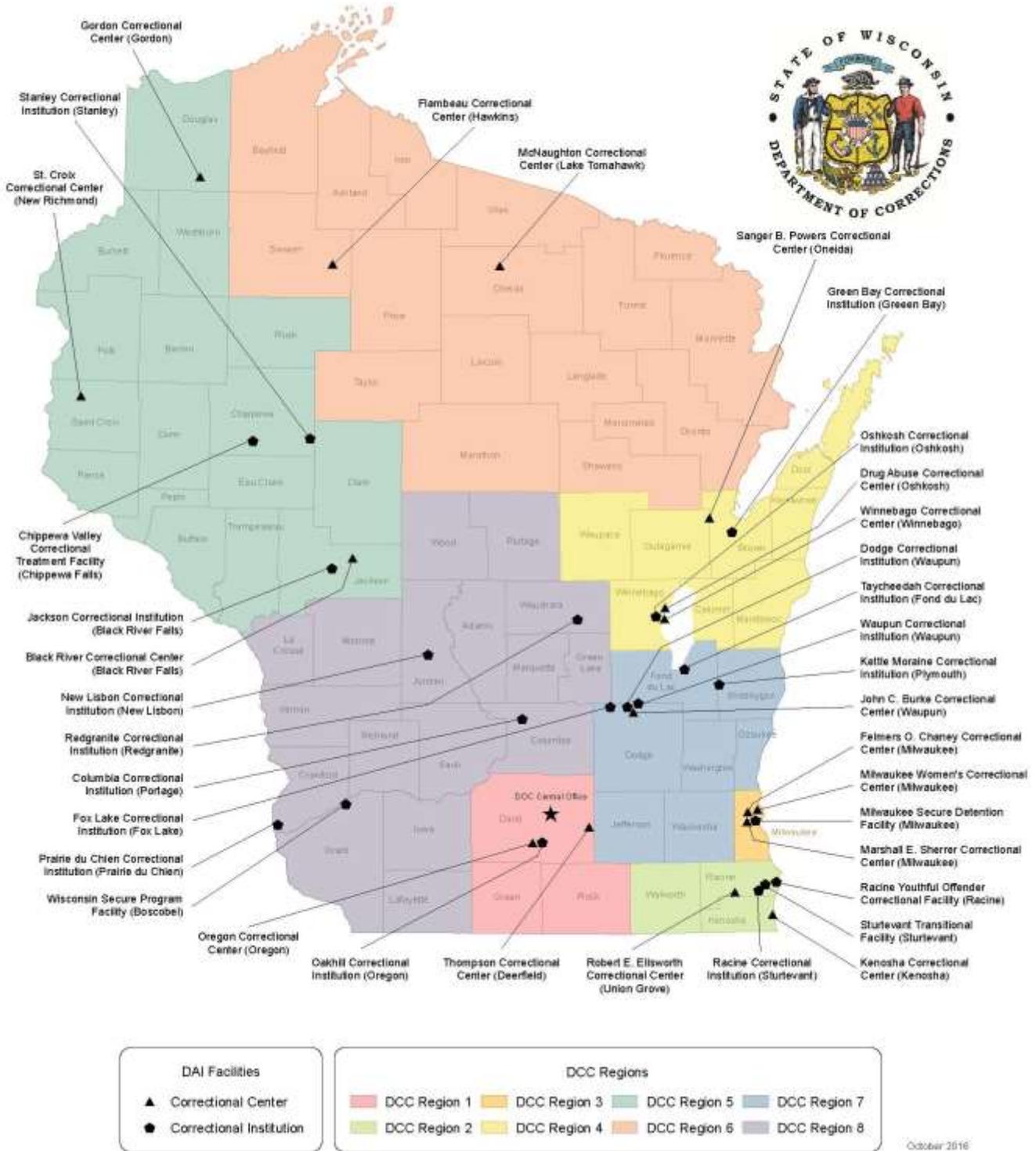
Wisconsin Department of Corrections-PREA Office

608-240-5113

<http://doc.wi.gov/about/doc-overview/office-of-the-secretary/prison-rape-elimination-act-unit>

APPENDIX I: MAP OF WISCONSIN PRISONS/CORRECTIONAL CENTERS

Division of Adult Institutions Correctional Facilities



APPENDIX II: MEMORANDUM OF UNDERSTANDING

MEMORANDUM OF UNDERSTANDING

Between

Wisconsin Department of Corrections

And

[Agency]

PURPOSE

This Memorandum of Understanding (MOU) between the Wisconsin Department of Corrections (referred to herein as DOC) and [Agency] (referred to herein as Sexual Assault Service Provider or SASP) is entered into to assure coordinated, safe and confidential emotional support, accompaniment, crisis intervention, information and referral to victims of sexual abuse in confinement as required by the Prison Rape Elimination Act (PREA) (42 U.S.C. § 15601) and the Prison Rape Elimination Act final rule (28 C.F.R. Part 115). This MOU is intended to provide an outline of the roles and responsibilities of DOC and SASP, which shall enhance their cooperative commitment to providing advocacy services to victims of sexual abuse in confinement.

I. SCOPE OF AGREEMENT

A. Wisconsin Department of Corrections agrees to:

1. Offer victims of sexual abuse access to a forensic medical examination any time an incident or allegation of sexual abuse is discovered or reported typically within 120 hours of the incident where evidentiarily or medically appropriate and, if agreeable, transport the victim to the local medical facility with forensic medical examination services; the victim shall be escorted by a security officer who is not the alleged perpetrator.
2. Notify and invite the SASP advocate to accompany and support the victim during the forensic medical examination if the hospital/medical personnel have not already done so.
3. Notify and invite the SASP advocate to accompany and support the victim during investigatory interviews, if requested by the victim.
4. Provide a qualified staff member (i.e. Victim Services Coordinator) to accompany and support the victim during the forensic medical exam and investigatory interviews, if requested by the victim and an advocate from the SASP is unavailable. DOC shall document efforts to secure services from the SASP.
5. Offer victims of sexual abuse access to an advocate from the SASP for emotional support services by giving the victim the respective mailing address and telephone number(s). Provide unmonitored and unrecorded crisis hotline access to the facility's local SASP. On behalf of the victim and with their permission, DOC (i.e. Victim Services Coordinators) may also facilitate an in-person, telephone or telecommunication meeting(s) between the victim and SASP advocate.
6. Prior to giving a victim access to the SASP advocate, DOC shall inform the victim of the extent to which such communications shall be monitored and otherwise maintain confidentiality and/or privileged status.
7. Make best efforts to provide a facility orientation and tour for the SASP advocate(s). Ensure, at minimum, the SASP advocate(s) is provided guidelines for facility safety and security.
8. Ensure the SASP advocate(s) is pre-approved to enter the facility for meetings and training sessions.
9. Designate the SASP advocate visit(s) as a professional (i.e. healthcare or legal) visit.
10. Provide private meeting space for the SASP advocate(s) to meet with the victim(s).

11. Coordinate continuity of internal and external supportive services with the receiving facility if the victim transfers to a DOC-operated confinement facility.

B. Sexual Assault Service Provider agrees to:

1. Provide an advocate to accompany and support victims of sexual abuse through the forensic medical examination and investigatory interview processes, as requested by the victim via DOC, if available.
2. Provide emotional support services to victims of sexual abuse. Support shall include emotional support, crisis intervention, information and referral and may be conducted by mail, in person, by telephone, or an approved telecommunications method. The SASP advocate shall connect with facility personnel (i.e. Victim Services Coordinator) to coordinate telephone, telecommunication and/or in-person meetings.
3. The SASP advocate shall obtain consent and a release of information from the victim before reporting an incident of sexual abuse, any fears or concerns the victim has related to safety, or disclosing other confidential information to DOC.
4. Work with designated DOC officials to obtain security clearance for the SASP advocate(s) trained to provide services under this agreement.
5. Participate in an orientation and tour of each local DOC facility in which the SASP is agreeing to provide services for, if provided. Comply with all guidelines for safety and security.

C. Privacy, Confidentiality And Exchange Of Information

Wisconsin Department of Corrections and Sexual Assault Service Provider agree:

1. Efforts to coordinate reasonable communication in as confidential a manner as possible between the SASP and victim shall be made by DOC.
2. Confidentiality between the SASP advocate and victim shall be directed by law. At the outset of services, and as needed thereafter, DOC and the SASP advocate shall consistently communicate to the victim that their communications with the SASP are confidential as directed by law. The SASP may elect to have the victim sign a services agreement form, which outlines confidentiality and its limits.
3. The SASP advocate and Victim Services Coordinator shall exchange only information necessary to determine the mode and length of services.
4. If confidentiality must be breached, DOC and the SASP shall not share any information beyond what is necessary to address the immediate safety concern.
5. At the medical facility (during a medical forensic examination), any privacy and confidentiality concerns shall be discussed among security staff, the SASP advocate and the health care provider. Privacy shall be accommodated to the extent safely reasonable.
6. DOC shall communicate any questions or concerns regarding this collaborative partnership to the SASP, facility leadership, or PREA Director. Similarly, the SASP shall communicate any questions or concerns to the Victim Services Coordinator, facility leadership, PREA Director or Wisconsin Coalition Against Sexual Assault.

D. Termination Of Services

Wisconsin Department of Corrections and Sexual Assault Service Provider agree:

1. The SASP may terminate services if a victim violates a service agreement. The SASP advocate shall advise DOC that services have been terminated but shall not disclose reasons for termination except as permitted by exceptions to confidentiality.
2. DOC and/or the SASP may modify or terminate services in an effort to uphold safety if there is any knowledge, suspicion or information that the working relationship jeopardizes the SASP advocate's wellbeing, falls outside the scope of sexual assault advocacy, and/or compromises facility security.

II. TERMS OF AGREEMENT

This MOU may be terminated by either party upon no less than 30 calendar days written notice, without cause, unless a lesser time is mutually agreed upon by both parties. Any other amendments must be agreed to and signed by both parties and attached to this MOU as a modification.

III. APPROVAL AND SIGNATURE

Warden or Superintendent Date
Wisconsin Department of Corrections

PREA Director Date
Wisconsin Department of Corrections

Executive Director Date
[Agency]

APPENDIX III: SAMPLE WRITTEN CORRESPONDENCE

John Doe, DOC # 123456
Green Bay Correctional Center
P.O. Box 19033
Green Bay, WI 54307-9033

Dear Mr. Doe:

Thank you for contacting Wisconsin Coalition Against Sexual Assault (WCASA). I am very sorry to hear that you have been going through a difficult time in prison.

In your letter, you wrote that you are in a dark place and that you feel alone. I am so sorry to hear that you are going through so much. I have enclosed some general information regarding sexual abuse, and trauma responses as well as the Hope for Healing handbook which was produced by Just Detention International. I hope this information will provide you with information you need to begin healing.

Please know that it is possible to heal, your feelings matter, and you don't have to go through this process alone. You may want to talk to a counselor or someone else you trust about your feelings. If you feel comfortable doing so, you can reach out to our agency hotline at (999) 999-9999 for support in processing your feelings. Calls to the hotline are free, confidential and not monitored or recorded by the Department of Corrections.

A list of ways that you can report sexual abuse are:

- Dial 777 (Internal Reporting Hotline)
- Dial 888 (External Reporting Hotline)
- Tell any staff person
- Tell a family member, friend or support person
- File a complaint
- Contact local law enforcement
- Staff must accept reports verbally, in writing, anonymously and from third parties
- Reports can be filed on behalf of an inmate online at DOC PREA website

Please let me know if you have any questions or if you would like additional information.

I wish you all the best.

Jane
WCASA