

The background of the slide features a faint, stylized illustration of two hands shaking, symbolizing agreement or support. The hands are rendered in a light, semi-transparent beige color against the overall light beige background.

Responding to Inmate on Inmate Sexual Violence

Medical and Mental Health Care

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NIC/WCL Project on Addressing Prison Rape
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Objectives

- Identify common reactions to sexual violence
- Identify medical and mental health services needed by and available for men and women
- Define and understand confidentiality concerns and requirements
- Understand the public health implications of sexual violence in correctional settings

Common Reactions to Sexual Assault: Feelings

- **Emotional shock:**
 - I feel so numb. Why am I so calm? Why can't I cry? Why don't I feel anything?
- **Disbelief:**
 - I can't believe this happened to me.
- **Shame:**
 - I feel so dirty.
- **Guilt:**
 - Did I do something to make this happen? Could I have done something to stop it? If only I had . . .
- **Powerlessness:**
 - Will I ever feel in control again?
- **Denial:**
 - It wasn't really rape. Nothing happened.

Common Reactions to Sexual Assault: Feelings

- **Anger:**
 - I want to kill that person!
- **Fear:**
 - What if I am pregnant or have a STD? These thoughts keep going through my head. I'm afraid to close my eyes.
- **Depression:**
 - I'm so tired. I feel so hopeless. Maybe I'd be better off dead.
- **Triggers:**
 - I keep having flashbacks.
- **Anxiety:**
 - I feel so confused. Am I going crazy?
- **Helplessness:**
 - Loss of self-reliance. Will I ever be able to function on my own?

Common Reactions to Sexual Assault: Behaviors

- **Expressive:**
 - Crying, yelling, shaking, being angry, swearing, etc. Anger may be directed at friends, family.
- **Calm:**
 - May behave extremely composed, controlled or unaffected.
- **Withdrawn:**
 - May shrink inside herself; provide one word answers or none at all; offering no information without being prodded.
- **Nightmares:**
 - Survivor may have difficulty sleeping or have nightmares of being chased or attacked.

Common Reactions to Sexual Assault: Behaviors

- **Flashbacks:**
 - These may occur while the survivor is fully awake. The memories will seem intensely real to survivor because the assault seems to be happening all over again.
- **Changing eating habits.**
- **Lack of concentration or energy.**
- **Rape Trauma Syndrome or Post-traumatic Stress Disorder.**

Rape Trauma Syndrome (RTS)

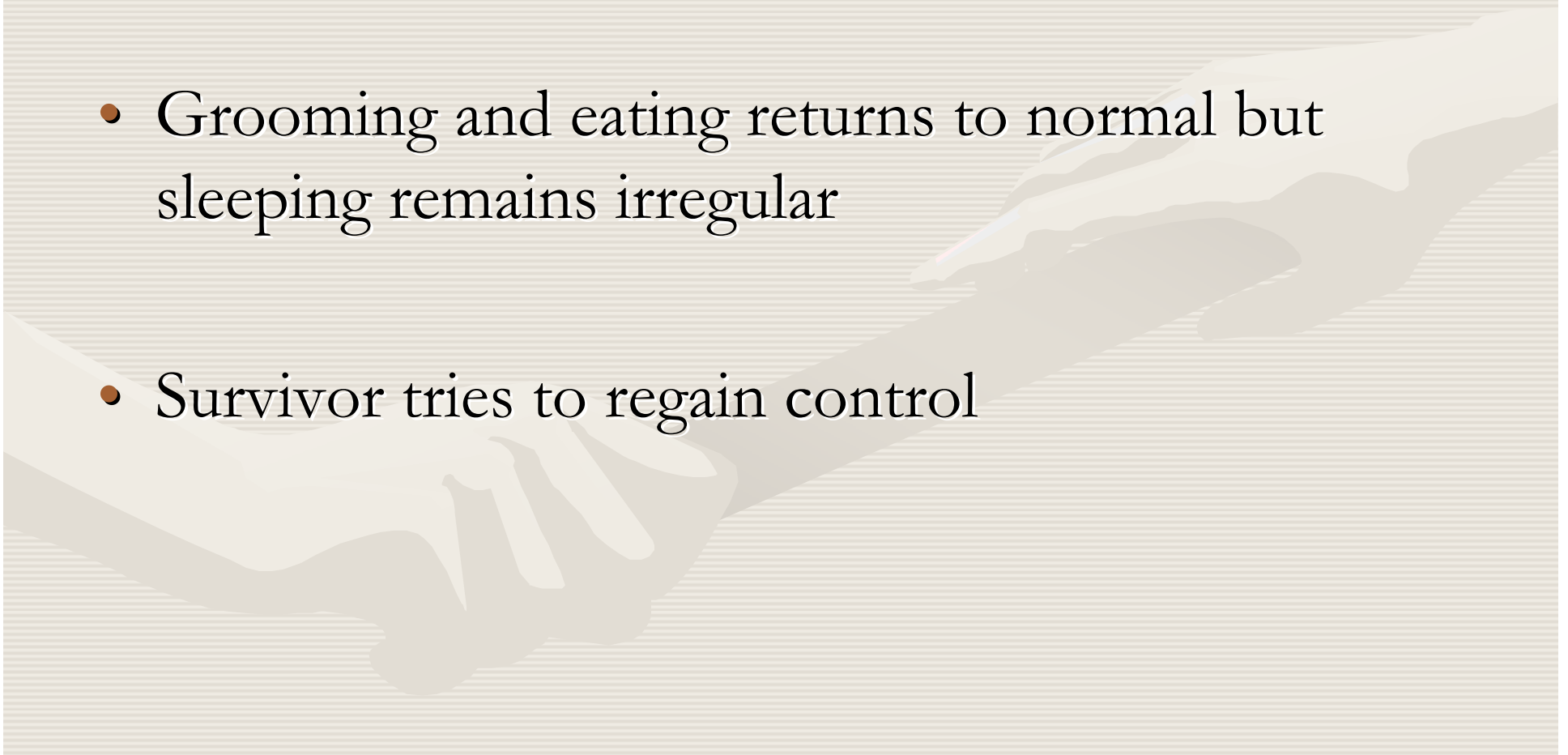
- Rape Trauma Syndrome is a common reaction to a rape or sexual assault. It is the human reaction to an unnatural or extreme event.
- Three Phases
 - Acute Crisis Phase
 - Outward Adjustment Phase
 - Integration Phase
 - Reactivation

Acute Crisis Phase

- Occurs right after the assault
- Physical Reactions
 - Change in sleep patterns, change of appetite, poor concentration, acting withdrawn, jumpy
- Emotional Reactions
 - Depression, guilt, anger, anxiety, fear
- Behavioral Reactions
 - Acting out, change in hygiene, refuse to change room, harm to self, suicidal thoughts

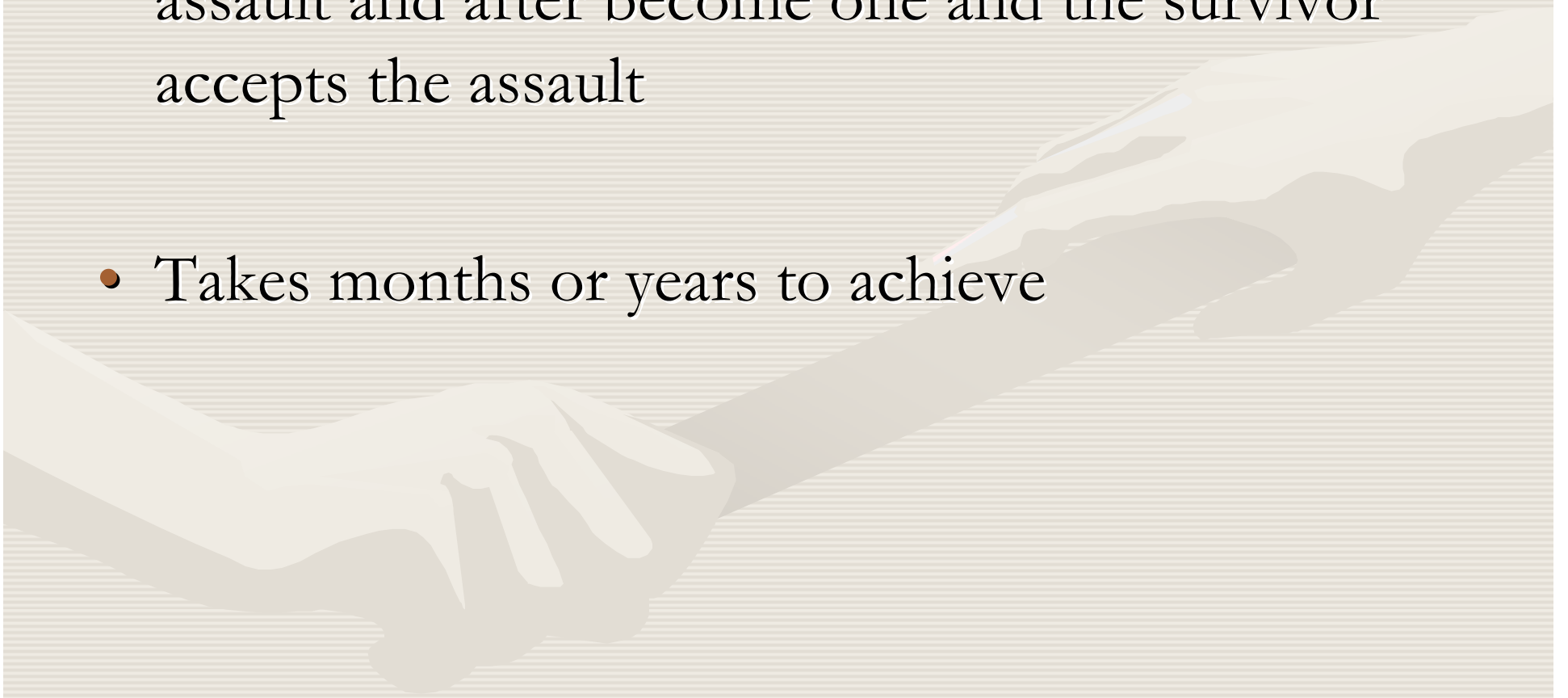
Outward Adjustment Phase

- Survivors feel a need to get back to normal
- Grooming and eating returns to normal but sleeping remains irregular
- Survivor tries to regain control



Integration Phase

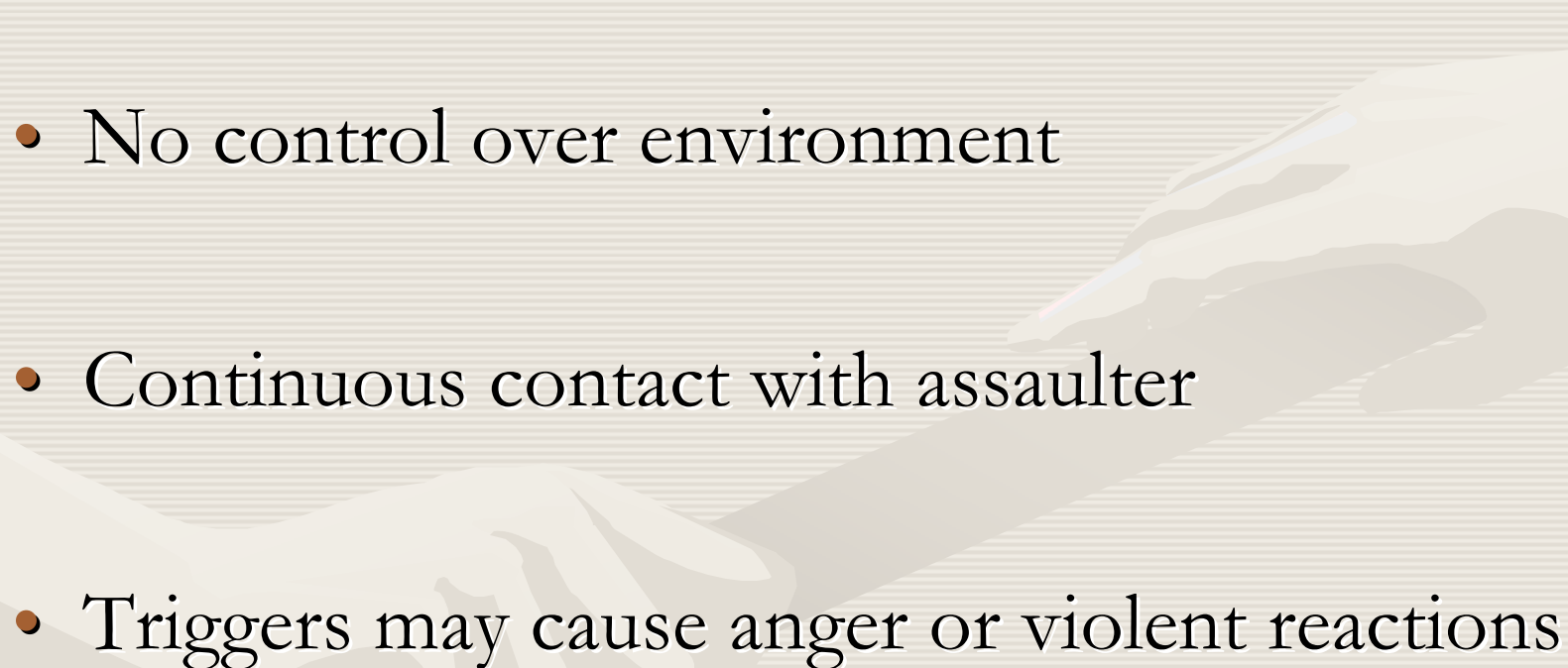
- The survivors idea of who they were before the assault and after become one and the survivor accepts the assault
- Takes months or years to achieve



Reactivation of Crisis

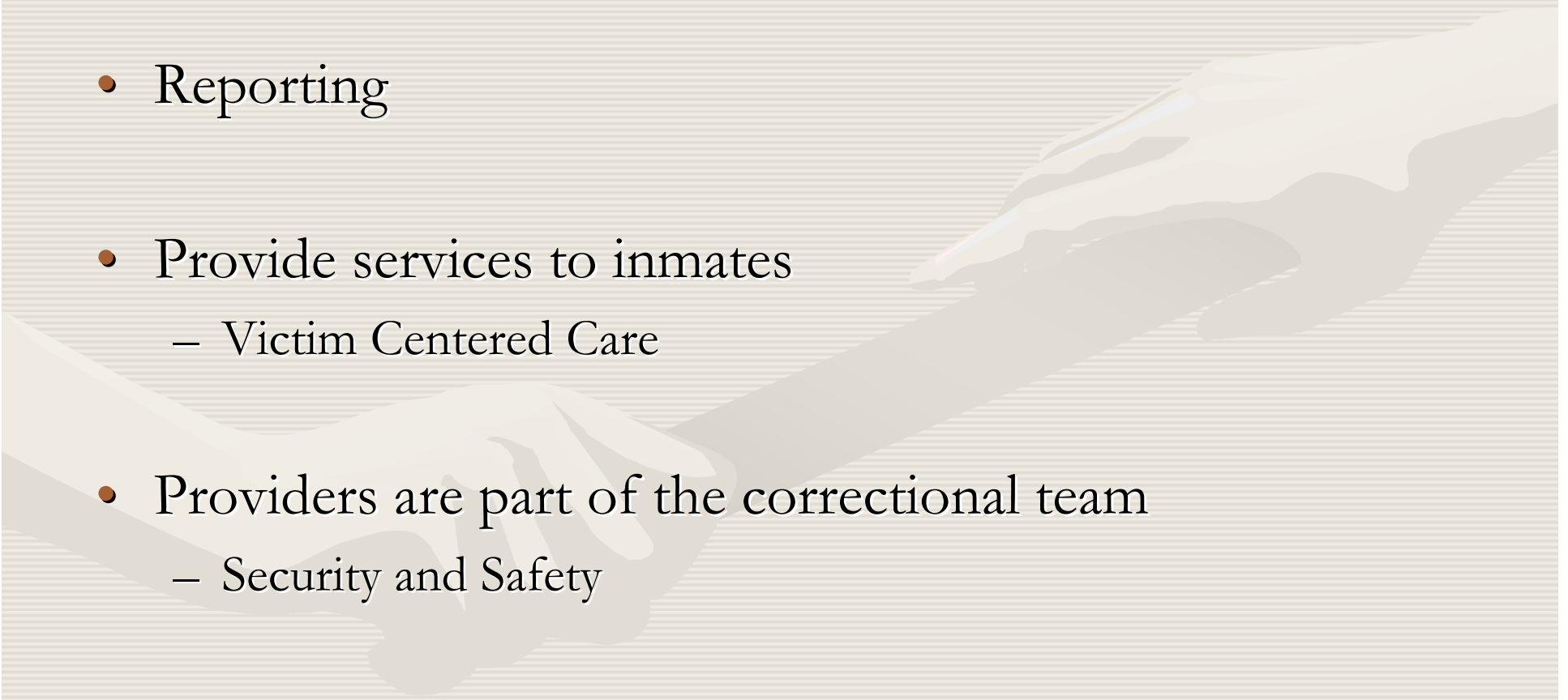
- Can happen at any time and during any of the phases
- Reactivation mirrors the acute phase
- Can be triggered by sights, smells, sounds, situations or memories

RTS in Correctional Settings

- Repeated sexual assault situations
 - No control over environment
 - Continuous contact with assaulter
 - Triggers may cause anger or violent reactions
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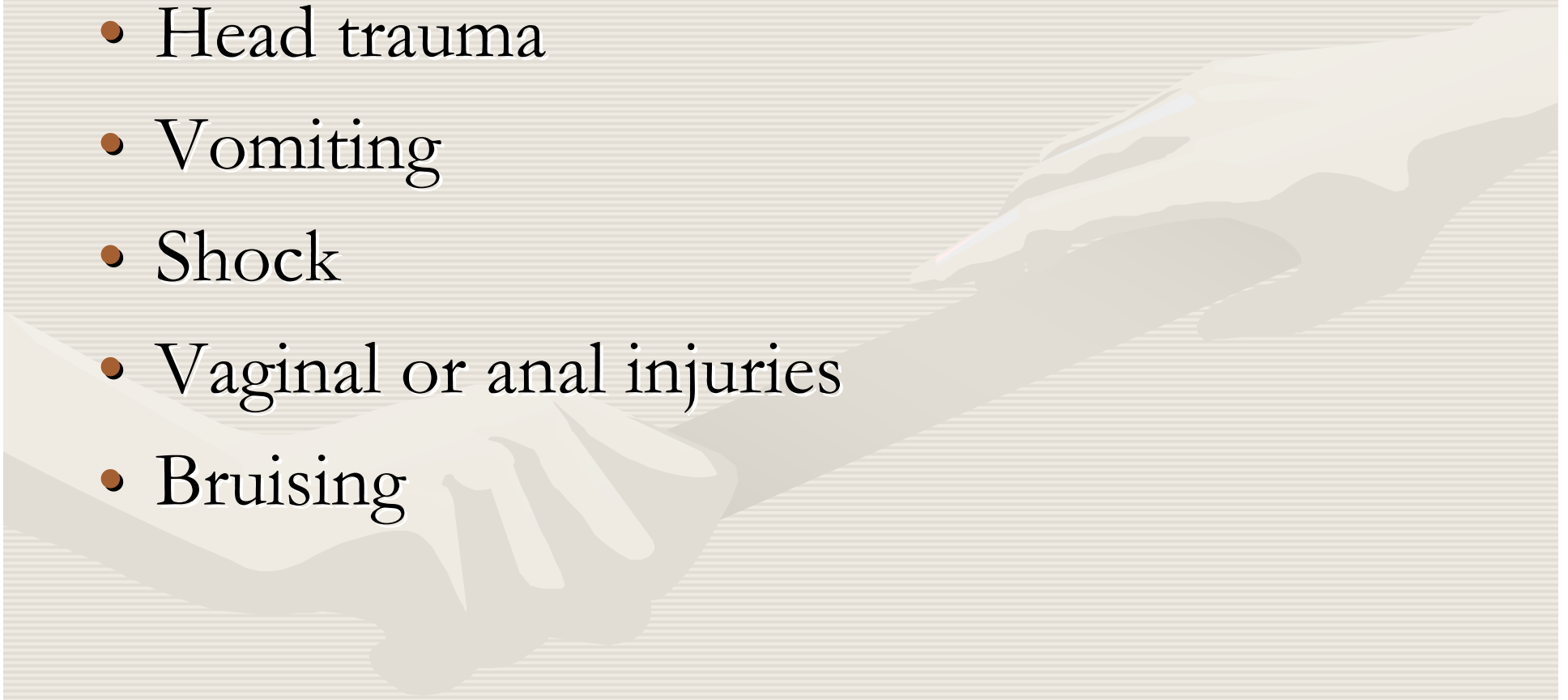
Role of Health Care Providers

- Confidentiality
- Reporting
- Provide services to inmates
 - Victim Centered Care
- Providers are part of the correctional team
 - Security and Safety



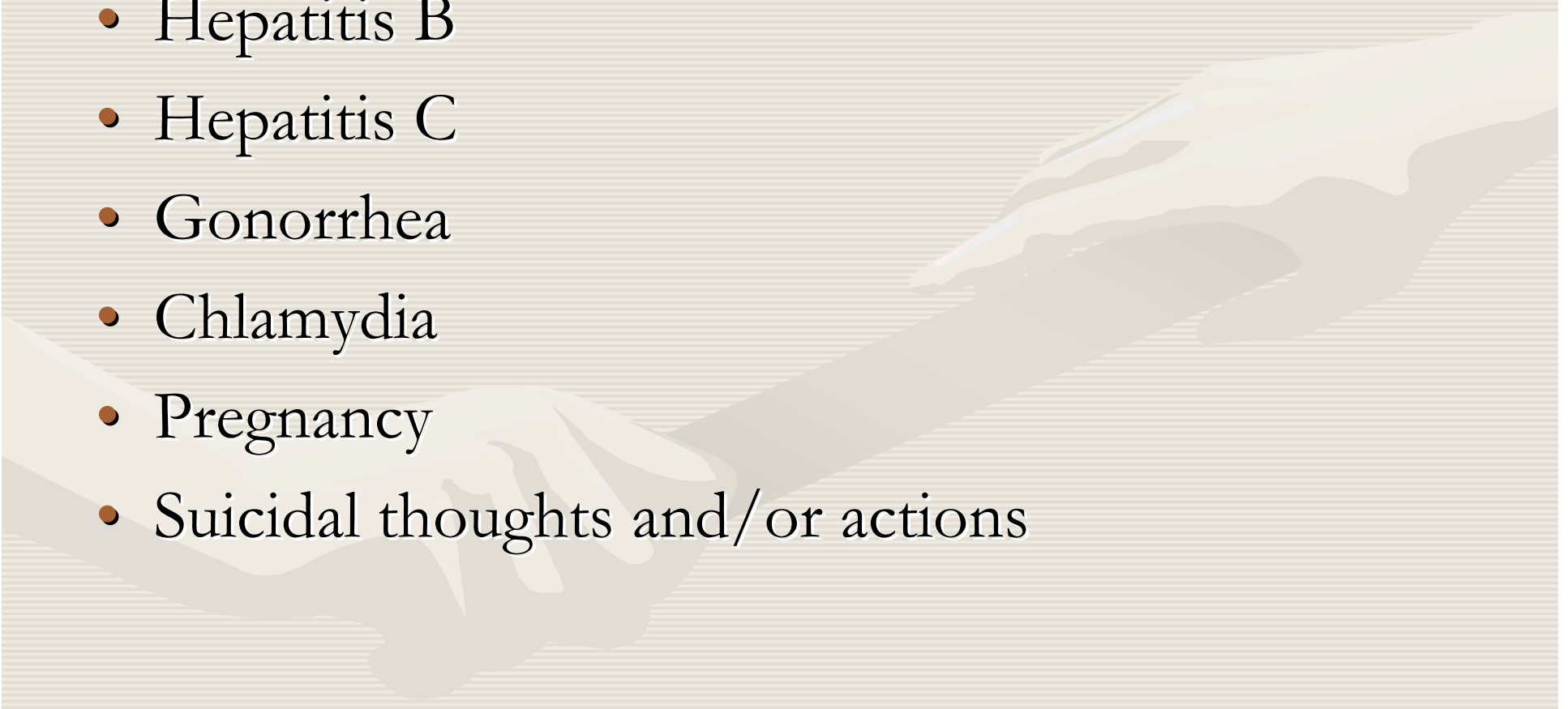
Immediate Medical Concerns

- Bleeding
- Head trauma
- Vomiting
- Shock
- Vaginal or anal injuries
- Bruising



Long Term Health Care Concerns

- HIV/AIDS
- Hepatitis B
- Hepatitis C
- Gonorrhea
- Chlamydia
- Pregnancy
- Suicidal thoughts and/or actions

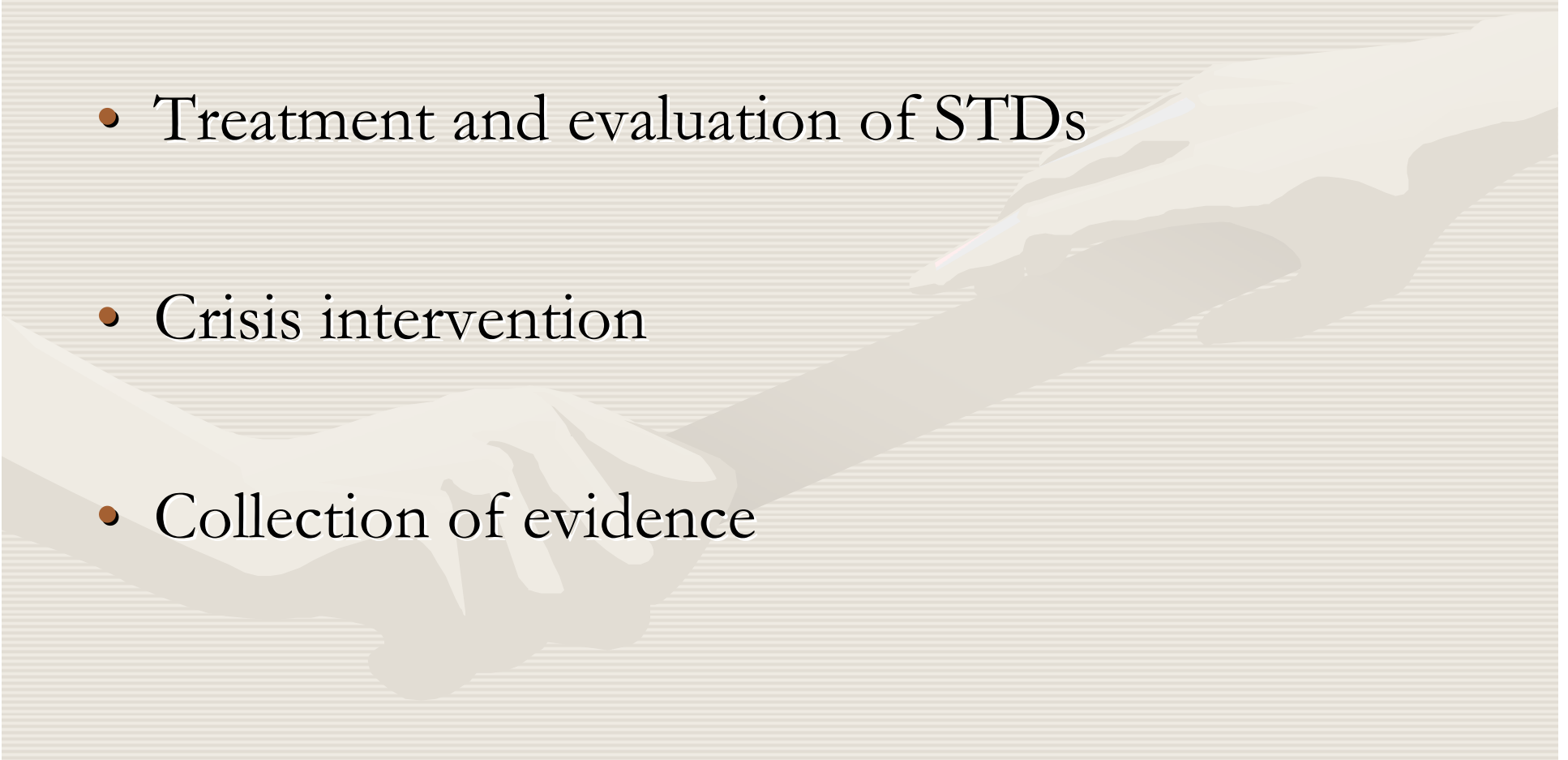


Sexual Assault Exam (SANE)

- Can be performed within 96 hours of assault
- Consideration should be given to if you are doing it in-house or in a medical facility
- Exam lasts over an hour
- Chain of custody for evidence **MUST** be followed for it to be valid

The Need for SANE Exams in Correctional Settings

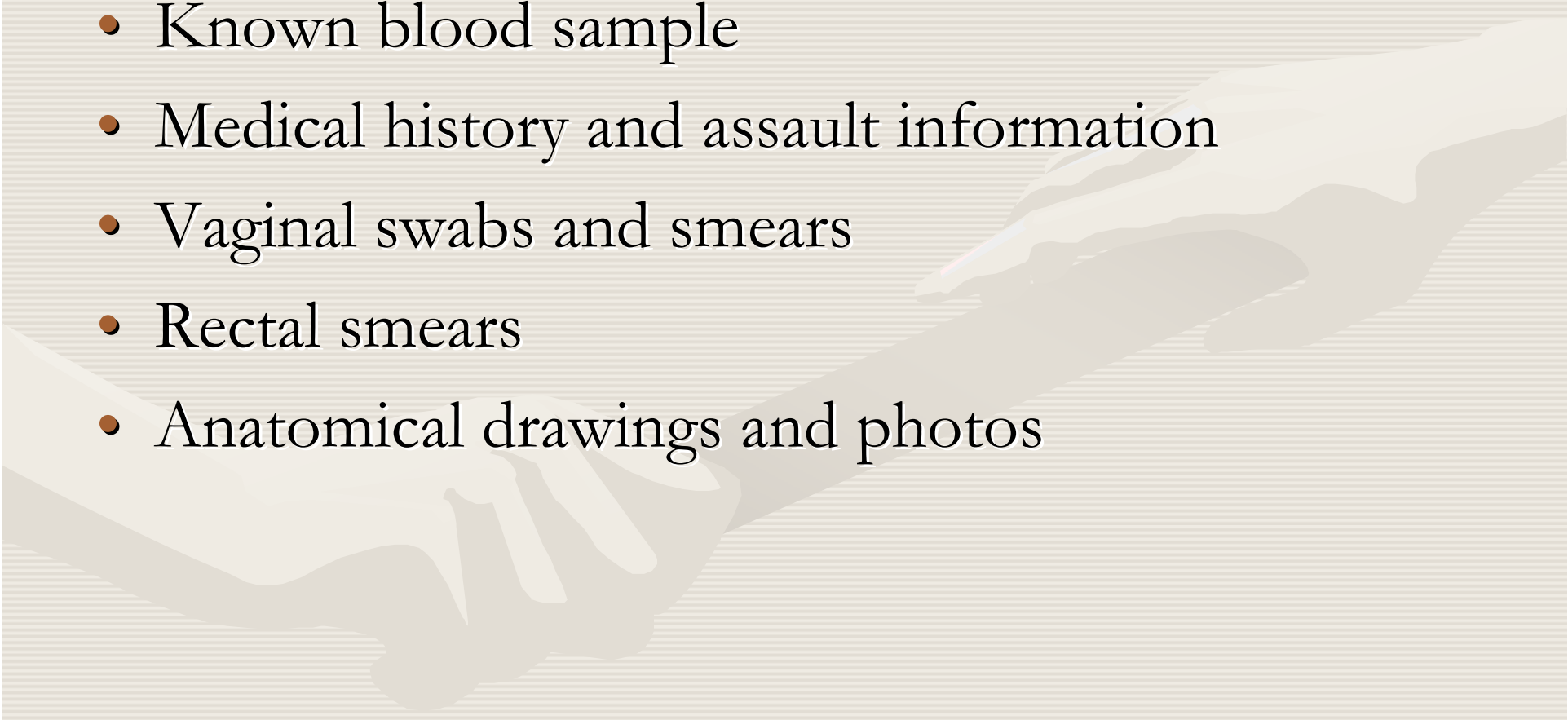
- Treatment and documentation of injuries
- Treatment and evaluation of STDs
- Crisis intervention
- Collection of evidence



Sexual Assault Evidence Collection- The Steps

- Authorization from victim
 - May not be needed in correctional settings
- Collection of clothing, underwear and foreign materials
- Debris collection from body
- Collection of control swabs
- Oral swabs and smear
- Pulled head hairs

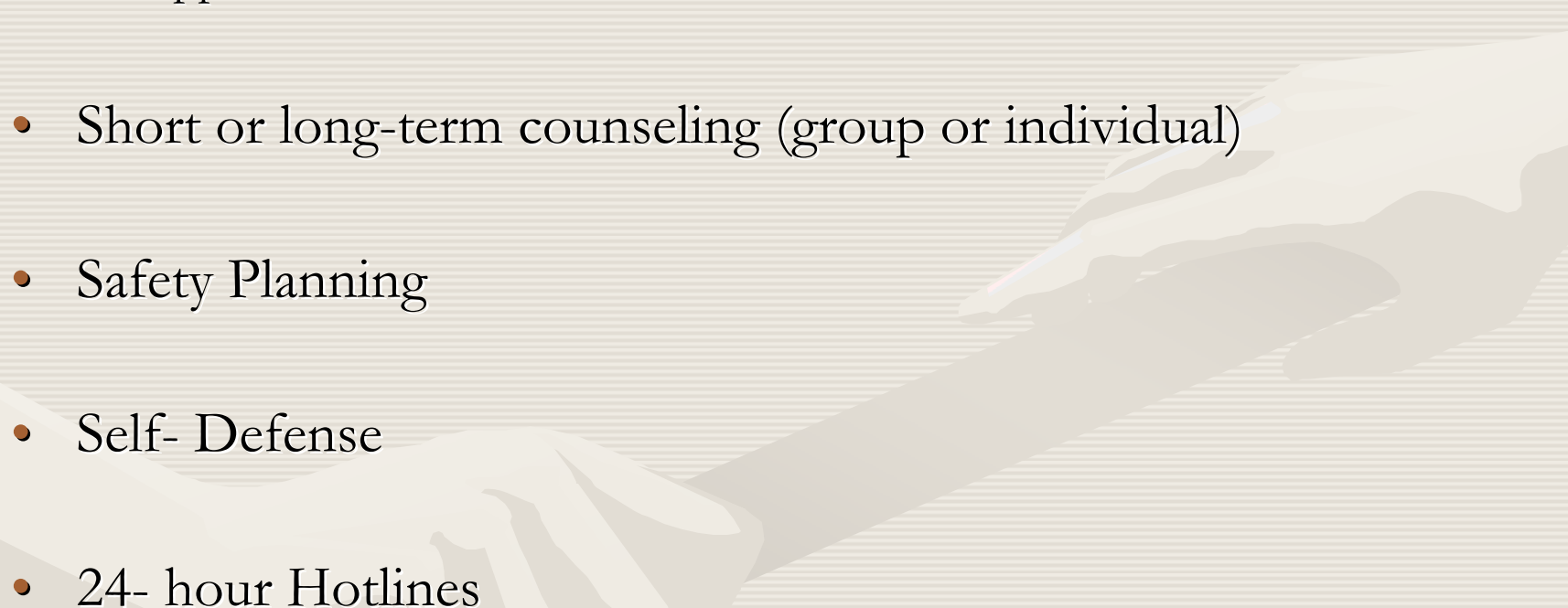
Sexual Assault Evidence Collection- The Steps

- Pubic hair combing
 - Known blood sample
 - Medical history and assault information
 - Vaginal swabs and smears
 - Rectal smears
 - Anatomical drawings and photos
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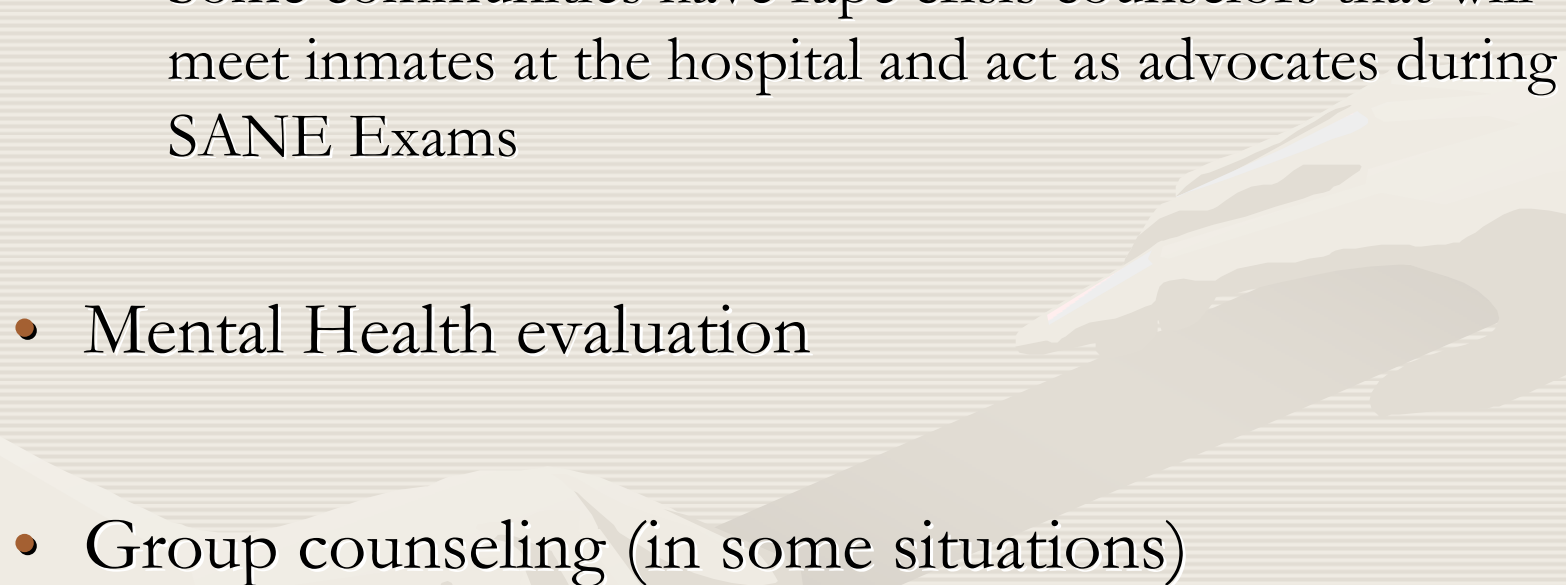
Sexual Assault Response Teams

- Composed of:
 - Law Enforcement
 - Mental Health/ Rape Crisis Providers
 - Medical Health Provider
- Benefit:
 - Allows a comprehensive response to sexual assault
 - Information sharing while minimizing re-victimizing by asking the survivor to repeat the story multiple times

Needed Services: Rape Crisis Interventions

- Companion Services
 - a rape crisis counselor to be with you during the SANE exam and at court appearances
 - Short or long-term counseling (group or individual)
 - Safety Planning
 - Self- Defense
 - 24- hour Hotlines
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- A faint, stylized illustration of two hands shaking, symbolizing support and intervention. The hands are rendered in a light beige color with soft shadows, set against a background of horizontal lines. The handshake is positioned in the lower right quadrant of the slide, partially overlapping the text.

Services Available to Inmates

- Advocates
 - Some communities have rape crisis counselors that will meet inmates at the hospital and act as advocates during SANE Exams
 - Mental Health evaluation
 - Group counseling (in some situations)
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Partnering with Local Crisis Centers

- PROS

- Specialized training for care of sexual assault victims
- Victims may be more comfortable with a provider outside of the correctional institution
- Ability to provide a wider range of services

- CONS

- Counselors may not be trained in dealing with inmates or regulations of correctional environments
- May not agree with or understand policies that may go against ethical codes and beliefs

Confidentiality

- **Guidance on reporting obligations comes from:**
 - The Health Insurance Portability and Accountability Act of 1996 (HIPAA)
 - State Laws
 - Case law
 - Health Organizations- Professional Codes of Ethics
 - Correctional Institution Policies and Procedures

Privilege

- There are three kinds of privilege
 - Absolute
 - Complete protection against disclosure
 - Semi-Absolute
 - Confidentiality is guaranteed except in specific circumstances- harm to self or others, criminal acts committed against a minor, and/or if there is a qualified privilege provision in the confidentiality statute
 - Qualified
 - Privilege can be breached by court order when a judge finds there are countervailing interests

Medical Confidentiality But...

- Confidentiality is not applicable in cases where the patient is a harm to himself or to another.
- Communicable diseases should be reported according to applicable laws.
- Confidentiality may need to be modified in order to protect the patient, other innocent parties and in circumstances of mandatory disclosure for public health reasons.

Special Concerns of Medical Workers in Correctional Settings

- Communicable diseases are generally reportable, but that may go against ethical codes of confidentiality (e.g. HIV)
- Requires assessment of the importance of state laws, ethical codes and correctional policies and procedures for reporting.

Mental Health Confidentiality But...

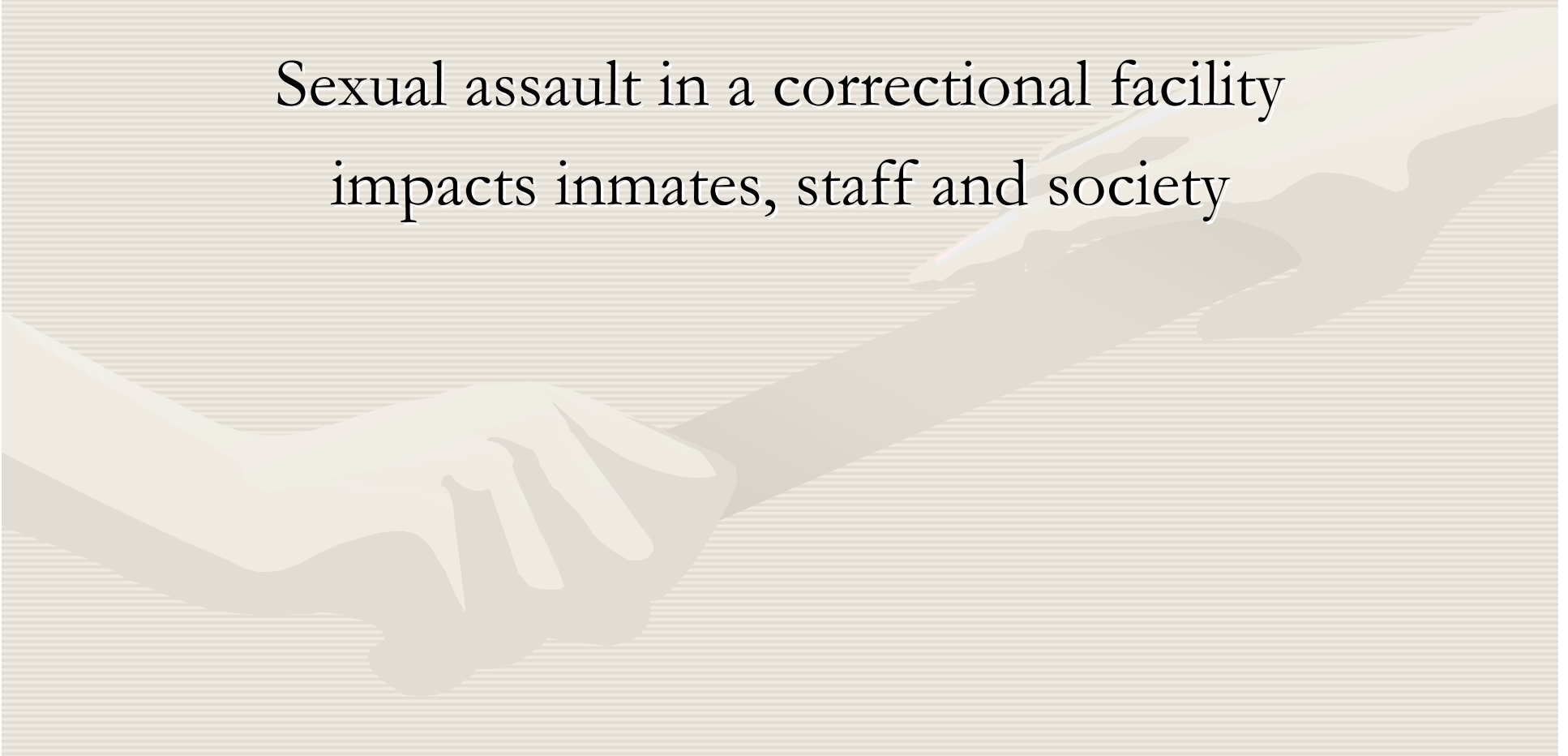
- Confidentiality can be breached in the free world for three reasons:
 - When the sexual abuse is committed against a minor or another vulnerable victim- then a counselor is a mandatory reporter and by law is required to report the incident;
 - If the client talks about harming themselves or another person; and
 - If a state has a qualified privilege statute and a judge feels that the benefit of the evidence outweighs the victim's privacy.

Special Concerns of Mental Health Workers in Correctional Settings

- Will reporting requirements in correctional settings deter inmates from seeking emotional and psychological assistance after a sexual assault?
- What happens when reporting would do more harm than good?

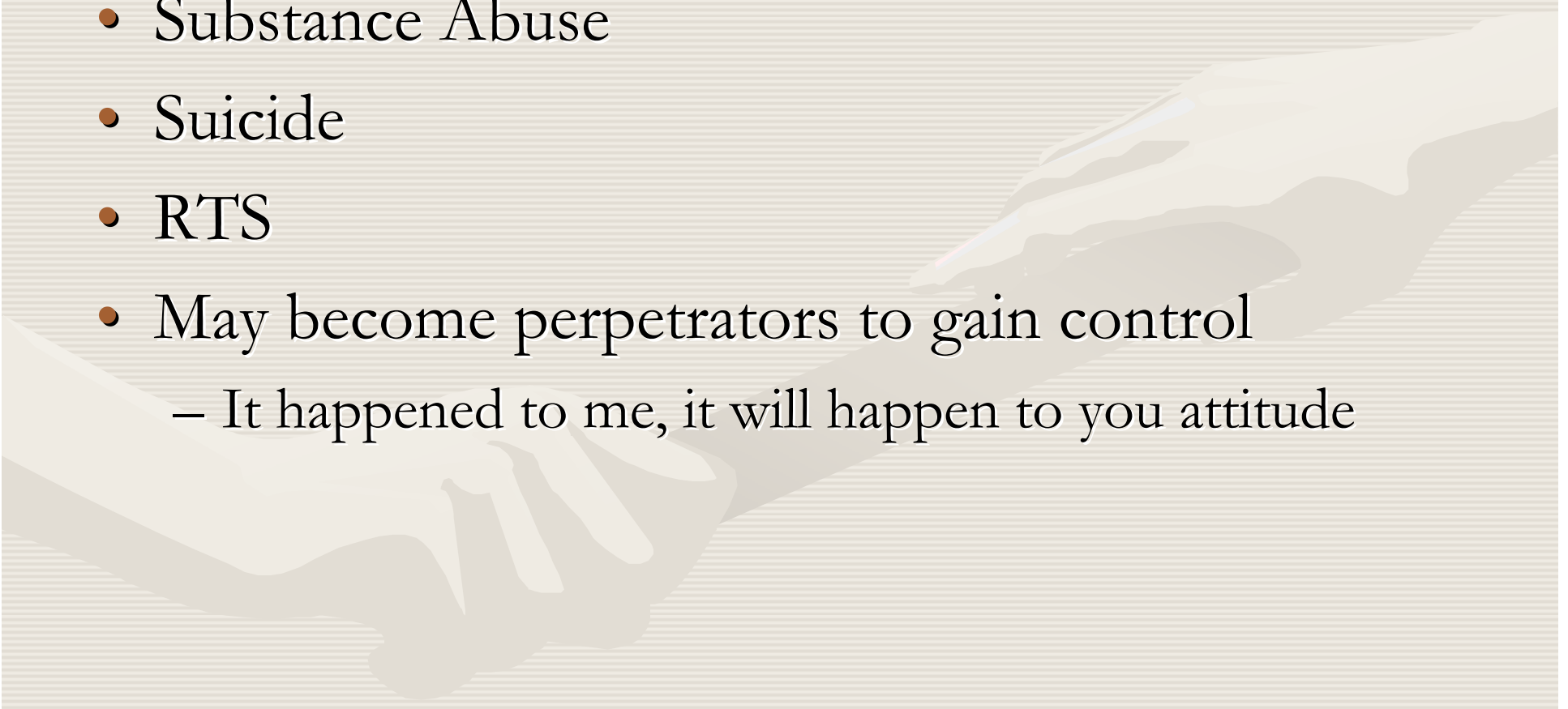
Impact of Sexual Assault

Sexual assault in a correctional facility
impacts inmates, staff and society



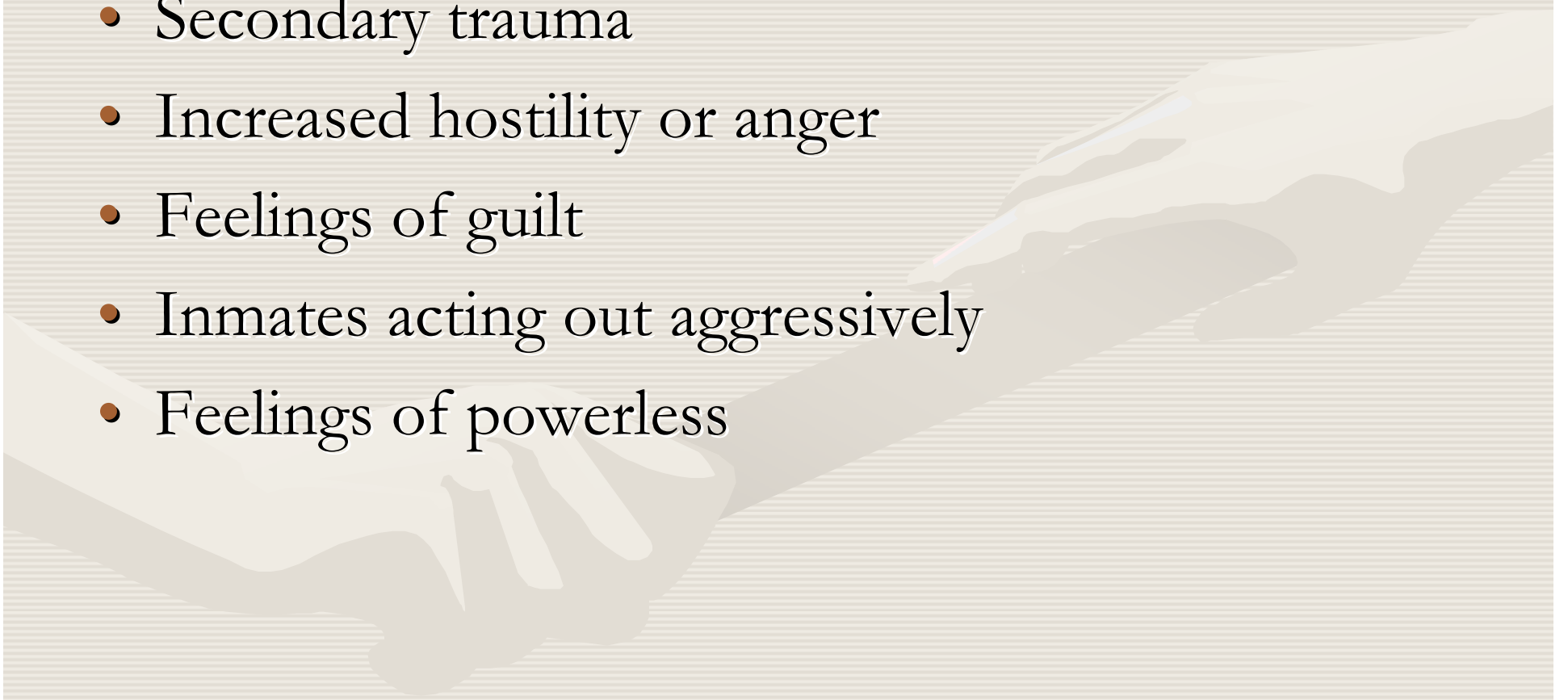
Impact on Inmates

- STDs
- Substance Abuse
- Suicide
- RTS
- May become perpetrators to gain control
 - It happened to me, it will happen to you attitude



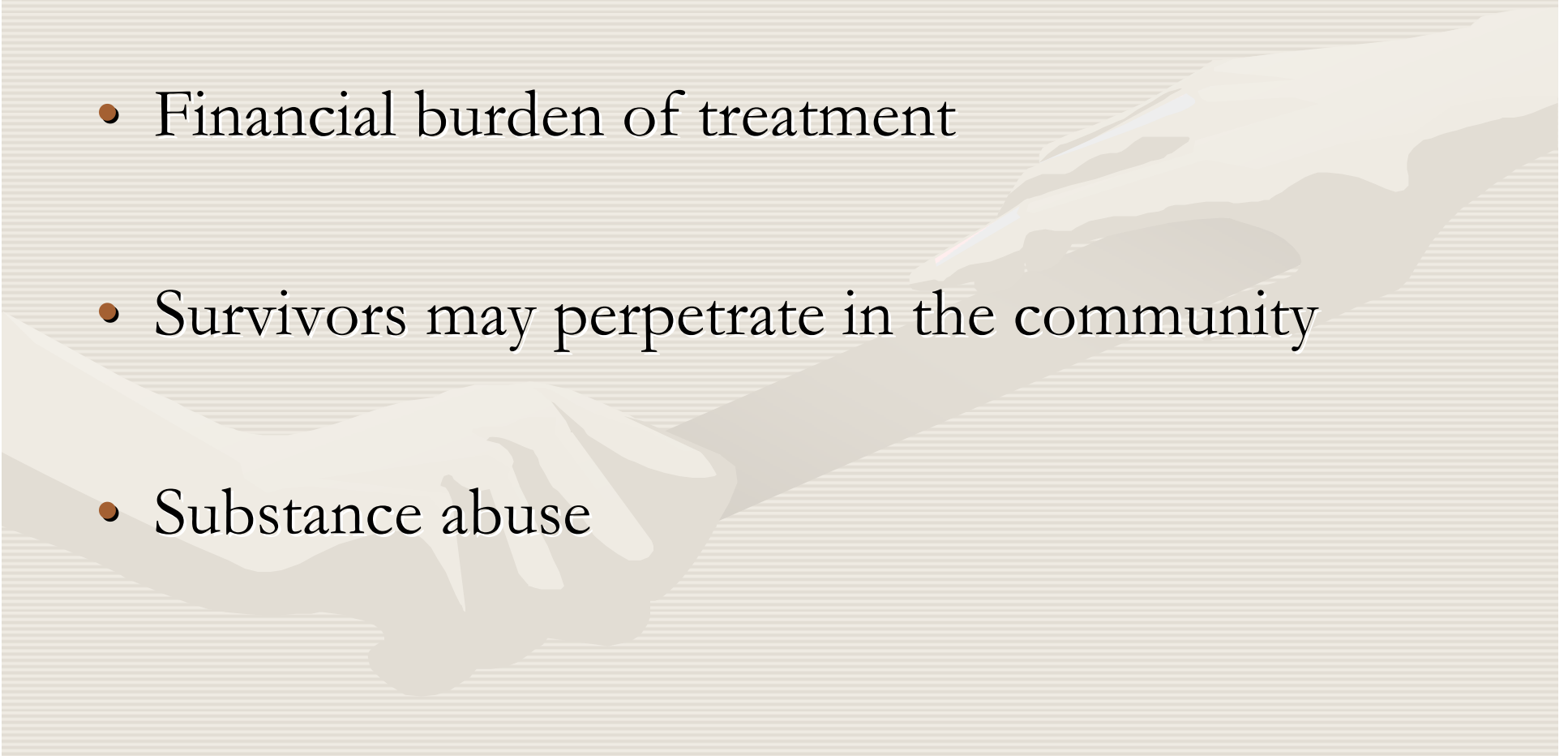
Impact on Staff

- Unmanageable anger from inmates
- Secondary trauma
- Increased hostility or anger
- Feelings of guilt
- Inmates acting out aggressively
- Feelings of powerless



Impact on Society

- Spread of communicable diseases
- Financial burden of treatment
- Survivors may perpetrate in the community
- Substance abuse



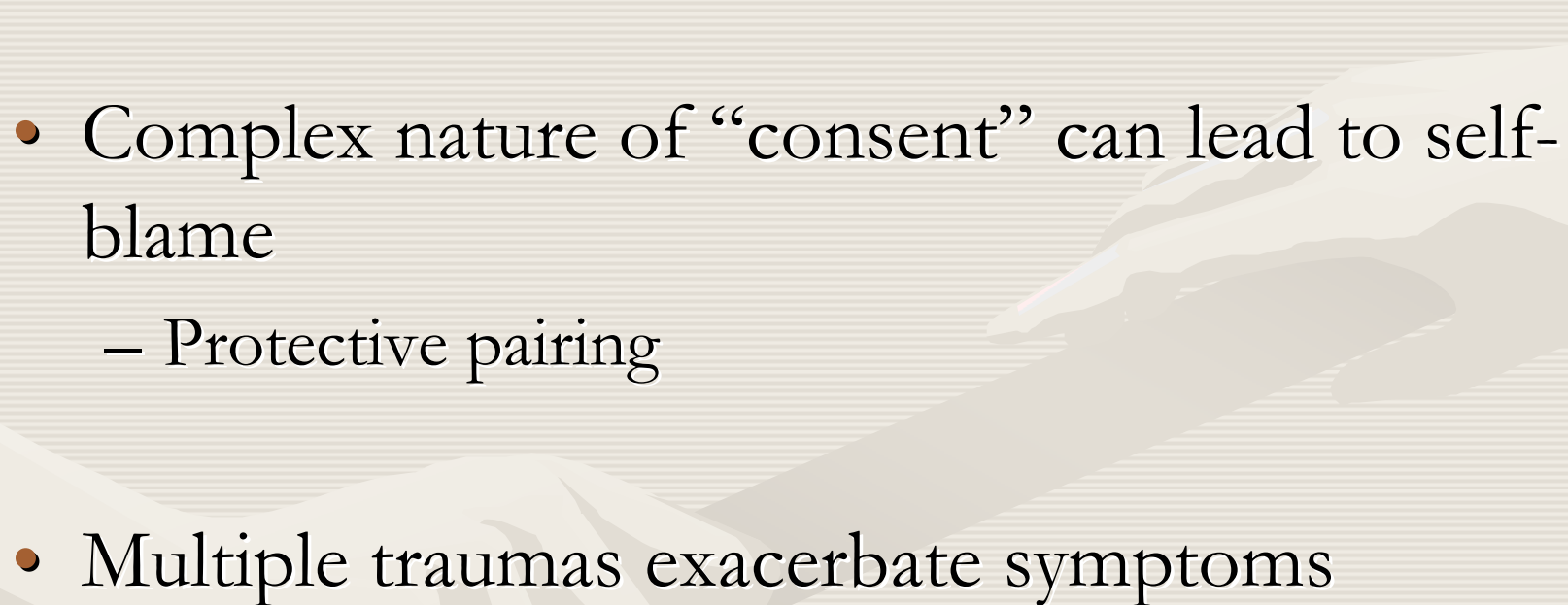
The Impact of Being Incarcerated and Being a Survivor

- Little control over things survivors are sensitive to
 - Noise, light, being alone
- Contradiction in culture and rules
 - I have to be tough but I need to follow the rules and report this

The Impact of Being Incarcerated and Being a Survivor

- Feelings of disorientation and anxiousness may make people unable to follow rules
- Sharing or talking about feelings may be a safety risk for an inmate
- Isolation may be a relief but it could also cause further trauma

The Impact of Being Incarcerated and Being a Survivor

- Increased anger may cause acting out
 - Complex nature of “consent” can lead to self-blame
 - Protective pairing
 - Multiple traumas exacerbate symptoms
- 

Implications for Public Health

- Spread of infectious diseases
 - HIV/AIDS
 - Hepatitis
 - Syphilis
 - Gonorrhoea
 - Chlamydia
- Increased health care costs – mental and medical