



Impact Justice, PREA Resource Center 1342 Florida Avenue NW Washington, DC 20009

March 1, 2025

re: 2024 Murray Unit PREA audit report deficiencies

To the PREA Resource Center:

Trans Pride Initiative (TPI) is filing this comment letter concerning the final Prison Rape Elimination Act (PREA) audit report for the Texas Department of Criminal Justice (TDCJ) Murray Unit conducted by auditor Matthew Taylor and Corrections Consulting Services, LLC, formerly PREA Auditors of America. The onsite portion of the audit was conducted from November 14 to 15, 2024, no interim report appears to have been produced, and the final report was published on December 28, 2024.

TPI has been working with incarcerated persons since 2013, mainly trans and queer persons in the Texas prison system.<sup>1</sup> During that time, we believe we have gained an understanding of the Texas prison system that is sufficient to enable us to comment substantively on PREA audits, especially where the treatment of trans and queer persons is concerned. Based on that understanding, we believe that this audit fails to meet the spirit or letter of PREA audit requirements for reasons that will be provided below. Thus TPI asserts that this audit report does not reflect compliance with the PREA standards.

PREA auditors have an exceptional amount of power in the PREA certification process. Texas must submit an annual certification that jails and prisons operating under state jurisdiction are in full compliance with the PREA standards or face a reduction in certain federal grant funds.<sup>2</sup> The certification of full compliance is issued by the governor, PREA § 115.501 requires that "the Governor shall consider the results of the most recent agency audits," and the Department of Justice (DOJ) notes that those audits are "to be a primary factor in determining State-level 'full

<sup>1.</sup> PREA identifies LGBTI as lesbian, gay, bisexual, transgender, and intersex persons. TPI is much more affirming and comprehensive in our understanding of vulnerabilities and marginalization, and as such we include under the PREA "LGBTI" umbrella all non-cisgender non-hetero-normative persons. We believe this is the only interpretation consistent with the spirit of PREA.

<sup>2.</sup> The requirements are defined at 34 USC § 30307, <a href="https://uscode.house.gov/view.xhtml?req=granuleid:USC-prelim-title34-section30307&num=0&edition=prelim">https://uscode.house.gov/view.xhtml?req=granuleid:USC-prelim-title34-section30307&num=0&edition=prelim</a>.





compliance.'"<sup>3</sup> Thus audits reflecting full compliance with PREA standards are in the best interest of state certification and full funding for prison operations, even when running counter to the PREA legislative objective of zero tolerance of sexual abuse and sexual harassment.

Audit quality and the resulting assessments are key factors in addressing problems hampering work toward the goals of the PREA legislation. DOJ's PREA Management Office is responsible for PREA audit oversight, which includes evaluation of auditor performance and development of auditor skills and thoroughness with the objective of "ensuring the high quality and integrity of PREA audits." This effort includes audit assessment, review, mentoring, remediation, and where necessary discipline. TPI's primary purpose in submitting this letter is to contribute information to the audit oversight process in any or all of these efforts to address problems in achieving the legislative goals of PREA.

TPI's secondary purpose in submitting this comment letter is to provide relevant information for the PREA Management Office in their review of Texas' certifications of full compliance, and for the National PREA Resource Center for use in auditor performance assessment.<sup>5</sup> Although audit deficiencies will not cause the audit to be overturned or denied, TPI believes information in this report should raise serious questions about the state's certification of full compliance, past and present.

TPI has documented a total of 55 incidents of violence against persons housed at Murray Unit, none of which occurred in the past 12 months. Of the total documented incidents, two involved noncompliance with some element of the PREA standards.<sup>6</sup>

The data presented in this letter is not comprehensive and only encompasses what is reported to TPI, so it should be considered only a small portion of the incidents of violence, including sexual violence, that is actually occurring at Murray Unit. This letter should also not be considered a complete inventory of PREA deficiencies, but an itemization and discussion of a few of the problems TPI has been able to identify with operations at Murray Unit.

All comment letters prepared by TPI for PREA audits of Texas prison facilities may be viewed at <a href="https://tpride.org/blog/category/prison-comm/prea-issues/">https://tpride.org/blog/category/prison-comm/prea-issues/</a>.

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<sup>3.</sup> U.S. Department of Justice, "National Standards To Prevent, Detect, and Respond to Prison Rape," *Federal Register* 77, no. 119 (June 20, 2012): 37188, <a href="https://www.ojp.gov/sites/g/files/xyckuh186/files/media/document/PREA-Final-Rule.pdf">https://www.ojp.gov/sites/g/files/xyckuh186/files/media/document/PREA-Final-Rule.pdf</a>.

<sup>4.</sup> U.S. Department of Justice, PREA Management Office, *PREA Auditor Handbook*, Version 2.1, November 2022: 91, <a href="https://www.prearesourcecenter.org/sites/default/files/library/PREA%20Auditor%20Handbook%20V2.1%20-%20December%202022.pdf">https://www.prearesourcecenter.org/sites/default/files/library/PREA%20Auditor%20Handbook%20V2.1%20-%20December%202022.pdf</a>.

<sup>5.</sup> The National PREA Resource Center is joint governmental and public nonprofit entity, so the views and opinions of the PRC are considered to represent the views and opinions of the DOJ as well.

<sup>6.</sup> These data are all available at the Trans Pride Initiative web site. General information and all incidents of violence are available via our Prison Data Explorer (<a href="https://tpride.org/projects-prisondata/index.php">https://tpride.org/projects-prisondata/index.php</a>), and specific PREA related data for each facility is available via our auditor data tool (<a href="https://tpride.org/projects-prisondata/prea.php">https://tpride.org/projects-prisondata/prea.php</a>).





In this report, excerpts from the PREA standards are highlighted in purple to make them easier to recognize. Excerpts from PREA auditor tools and guidelines are highlighted in green.

# **Summary of Deficiencies**

Table 1 provides a summary of the report deficiencies, with page references for the discussion and a classification of whether each referenced item:

- 1. Contains questionable information;
- Contains false information or information showing audit requirement (such as minimum interviews) not met;
- 3. Contains problematic language indicating bias;
- 4. Assessed a standard as exceeded without sufficient supporting information;
- 5. Is vague, confusing, inaccurate, or inappropriate;
- Indicates standard compliance is questionable;
- 7. Indicates standard compliance not met; or
- 8. Documents that standard compliance not met.

Table 1 of this comment letter provides a summary of deficiencies identified in this audit report, described in the main body of this comment letter. Audit deficiencies include the reporting of questionable information, reporting of false information, use of problematic problematic language, and apparent failures to comply with minimum audit requirements. In addition, this comment letter documents questionable information in the discussion of at least five standards, false information for at least two standards, that two standards were assessed as exceeding compliance with inadequate justification, and vague or inappropriate discussion of two standards. Based on these deficiencies, it appears that compliance is questionable for at least eight standards, there is an indication of compliance is not met for five standards, and the report documents a failure to comply with two standards with no corrective action required.

# **Request for Action**

TPI requests that the following actions be taken:

- That this audit report be considered deficient, and not be considered to support state compliance for the purpose of PREA § 115.501 certification of state compliance.
- That additional measures be taken to train and assist the auditor in compliance considerations and supporting documentation.
- That auditors give serious consideration to information about PREA compliance concerns provided by incarcerated persons in interviews, and to provide justification for dismissing such information.

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**Table 1. Summary of Deficiencies** 

1 2 3 4 5 6 7 8

| Audit Item  | (see definitions at bottom) |   |   |   |   |   |   |
|---|-----------------------------|---|---|---|---|---|---|
| Problematic audit report overall.                                     | X                           | X | X | X | X |   |   |
| Fails to adhere to person-first language guideline (see page 5).      |                             |   | X |   |   |   |   |
| Genders of persons at facility misrepresented (see page 5).           |                             | X |   |   |   |   |   |
| Fails to identify any corrective actions (see page 6).                | X                           |   |   |   |   |   |   |
| Time spent onsite less than minimum requirement (see page 6).         | X                           |   |   |   |   |   |   |
| Facility information appears inaccurate (see page 7).                 |                             | X |   |   |   |   |   |
| Target interviews fail to meet minimum requirement (see page 8).      |                             | X |   |   | X |   |   |
| PREA § 115.11, zero tolerance deficiencies (see page 10).             |                             |   |   |   | X | X |   |
| PREA § 115.13, supervision and monitoring deficiencies (see page 11). |                             |   |   |   | X | X |   |
| PREA § 115.15, viewing and search deficiencies (see page 15).         |                             | X |   |   | X | X |   |
| PREA § 115.21, SANE exam deficiencies (see page 21).                  | X                           |   |   | X |   |   | X |
| PREA § 115.31, staff training deficiencies (see page 22).             |                             |   |   | X |   |   |   |
| PREA § 115.41, screening deficiencies (see page 22).                  |                             |   |   |   |   | X |   |
| PREA § 115.42, screening data use deficiencies (see page 24).         |                             |   |   |   |   | X |   |
| PREA § 115.43, protective custody deficiencies (see page 27).         |                             | X |   |   | X |   | X |
| PREA § 115.52, administrative remedy deficiencies (see page 35).      |                             |   |   |   |   |   | X |
| PREA § 115.64, first responder deficiencies (see page 35).            |                             |   |   |   |   |   | X |
| PREA § 115.67, retaliation deficiencies (see page 36).                | X                           |   |   |   |   |   |   |
| PREA § 115.68, victim protective custody deficiencies (see page 36).  | X                           |   |   |   |   |   | X |
| PREA § 115.71, investigation deficiencies (see page 37).              | X                           |   |   |   |   |   |   |
| PREA § 115.72, evidence deficiencies (see page 37).                   |                             |   |   |   |   |   | X |
| PREA § 115.87, data collection deficiencies (see page 38).            |                             |   |   |   | X | X |   |
| PREA § 115.401, audit scope deficiencies (see page 39).               |                             |   |   |   |   | X |   |
| PREA § 115.402, audit qualification deficiencies (see page 40).       | X                           |   |   |   |   |   | X |

- 1: Discussion contains questionable information.
- 2: Discussion contains false information.
- 3: Discussion contains problematic language indicating bias.
- 4: Exceeds standard given, discussion supporting assessment insufficient.
- 5: Discussion is vague, confusing, inaccurate, or inappropriate.
- 6: Discussion indicates standard compliance questionable.
- 7: Discussion indicates standard compliance not met.
- 8: Discussion documents standard compliance not met.





- That highly problematic language in the Auditor Compliance Tool that ignores trauma and encourages sexual violence against transgender, nonbinary, and gender nonconforming populations be amended to eliminate bias, stigmatizing constructs, and discrimination.
- That at a minimum, PREA §§ 115.21, 115.43, 115.52, 115.64, 115.68, and 115.72 be considered to need corrective action at the next audit.
- That at a minimum, additional information be provided to support a finding of compliance for all remaining compliance issues mentioned in this comment letter.

#### **TPI Data**

### **Discussion of Audit Deficiencies**

#### **General Audit Information Issues**

#### Audit Report Language

The DOJ has provided guidelines to use person-first language such as "persons in confinement" or "confined person." This is discussed in the 2022 Auditor Handbook, and the handbook notes that the PREA Management Office and the PREA Resource Center "are shifting the way we identify people who are incarcerated by using person-first language." This audit report ignores this shift by continuing to use terms like "offender" and "inmate" throughout this report. In fact, the word "offender" is used 25 times in the report, and the word "inmate" is used 911 times. Although use of the word "inmate" may be considered acceptable in some places because that is the term TDCJ currently uses, continued use of the derogatory terms "offender" and "inmate" throughout an audit report more that two years after this guidance was issued is not acceptable. There is no excuse for every new document completed under the aegis of the PREA compliance system to not follow person-first practices.

#### **Facility Characteristics**

The audit report states that the population at the Murray Unit consists of "womens/girls," when in fact this is false. The Murray Unit houses cisgender females, transgender males, and other persons who may not belong to either of those two populations. This is also contrary to PRC guidance effective November 13, 2024, and announced as early as September 19, 2024, that requires documentation of genders housed at facilities beyond dismissive binary-only categories. The Murray Unit may falsely classify transgender men and other non-female persons as "female," but that is not an accurate description of the populations housed at the unit for PREA assessment purposes. This not only erases the existence of trans persons, this type of misclassification and erasure encourages violence against trans persons, including

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<sup>7.</sup> U.S. Department of Justice, PREA Management Office, PREA Auditor Handbook, 1 - 2.

<sup>8.</sup> PREA Resource Center, OAS Updates and Q&A. *Webinars* web page, September 19, 2024: 14:29 – 17:14, https://vimeo.com/1014881110.





sexual abuse and sexual harassment. Refusal to affirm a person's gender dehumanizes the person, and dehumanization is a significant step in excusing and justifying institutional and individual harm and violence. Further, this misapplication of the PREA standards allows the audit to ignore violations under 115.15 and other PREA standards. To identify transgender males as "females"—or to identify transgender females as "males"—is an act of violence that not only denies the identity of transgender men and transgender women and nonbinary persons, but also encourages violence, sexual harassment, and sexual abuse of transgender persons by dismissing our core identity.

# Summary of Facility Audit Findings

The audit report identifies two standards as exceeded and 43 as being met. The audit found that zero corrective actions were required. The 2022 Auditor Handbook states that "the PREA audit was built on the assumption that full compliance with every discrete provision would, in most cases, require corrective action." The fact that the audit report identified no need for any corrective actions—in spite of ample and very clear evidence in this report that corrective actions should have been required—should also be considered in the assessment of a deficient audit. We also point to the discussion of PREA § 115.402 and evidence of conflicts of interest.

The audit report made and extremely dubious claim that Murray Unit exceeded standard PREA § 115.21, and an unsupported claim that the facility exceeded standard PREA § 115.31. As per the PRC, an assessment of a standard being exceeded must be clearly documented as substantially surpassing the material requirements of compliance:

Where an auditor determines that a facility exceeds the requirements of a Standard, the auditor must clearly and specifically explain how the facility meets and then substantially exceeds the requirements of the Standard, and the evidence must justify and support the finding. . . . It is not sufficient for the auditor to describe the facility as meeting the requirement of the Standards and then select "Exceeds Standard" for the Overall Determination.<sup>9</sup>

This report failed to justify these "exceeds" assessments.

#### **Onsite Audit Period**

The audit report notes that the onsite portion of the audit was from November 14 to November 15, 2024. However, for a facility with more than 1,200 persons, just the interviews with incarcerated persons and staff are estimated to take three days, or 30.3 hours. Thus it appears that this audit was conducted without allowing sufficient time to meet all the audit obligations. In addition to the interviews, other tasks were required to competently complete the audit. As per the 2022 Auditor Handbook:

In addition to the time estimated to complete the interviews with persons confined in the facility and staff, auditors must also account for a thorough site review (observations, tests of critical

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<sup>9.</sup> PREA Resource Center, "Common Terminology," <a href="https://www.prearesourcecenter.org/audit/common-terminology">https://www.prearesourcecenter.org/audit/common-terminology</a>.





functions, and informal conversations with individuals confined in the facility and staff), supplemental documentation selection and review, and in-briefs and out-briefs with facility/agency staff. The time required for a thorough site review will range depending on the size of the facility, the complexity of the facility and its processes, and the number of support staff involved. Auditors must allow adequate time to perform all the required activities necessary to complete a thorough site review.<sup>10</sup>

Support Staff Information items 95 and 96 document that the auditor had assistance from one non-certified support staff. The 2022 Auditor Handbook states that "[u]nder no circumstances may individuals who are not DOJ-certified auditors participate or engage in the substantive work of a formal PREA audit unless acting under the direction of a DOJ-certified auditor." This appears to mean that non-certified assistants cannot be solely responsible for the conduct of the interviews, meaning this does not reduce the amount of time required for interviews. The 2022 Auditor Handbook includes extensive discussion about interviews, and in all cases refers to the auditor as the person who must conduct each interview. Thus, TPI feels that even with this assistance, this audit probably did not allow sufficient time to be conducted with competency.

# **Facility Information**

The facility information section of the audit report provides basic information about the facility and the persons housed there. **Items 18 – 29** provide population characteristics at Murray Unit on the first day of the onsite audit. **Items 30 – 33** provide staff levels. **Items 34 – 63** provide the breakdown of random and targeted interviews with incarcerated persons and staff. Document sampling information is provided in **items 64 – 71**, investigation data are provided in **items 72 – 77**, and sexual violence records review information is provided in **items 78 – 94**. An overview of the interviews is provided in Table 2. Problems with the audit interviews and other facility information are discussed as needed, below.

**Item 28** states that there were zero persons that had ever been placed in segregated housing or isolation for risk of sexual victimization at Murray Unit on the first day of the onsite audit, but TPI knows this number to be inaccurate. This represents a major failure to document and audit segregated housing, or protective custody under PREA. This also indicates a failure to investigate and understand how segregated housing is defined confusingly (and appears to be purposefully manipulated by TDCJ to cause confusion) and a failure to perform due diligence in confirming such a claim that zero persons housed at Murray Unit had ever been placed in segregated housing or isolation for risk of sexual victimization. This will be discussed further under PREA § 115.43. See also **item 49** concerning the interviews with this population.

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<sup>10.</sup> U.S. Department of Justice, PREA Management Office, PREA Auditor Handbook, 78.

<sup>11.</sup> U.S. Department of Justice, PREA Management Office, PREA Auditor Handbook, 8.

<sup>12.</sup> U.S. Department of Justice, PREA Management Office, PREA Auditor Handbook, 58 - 78.





**Table 2. Population Characteristics and Interviews** 

| Population Characteristic*                            | Persons<br>Present | Interviews<br>Required | Interviews<br>Completed |
|---|--------------------|------------------------|-------------------------|
| 18/34/39 — Total housed at unit                       | 1,209              | Random: 20             | Random: 20              |
|   |                    | Targeted: 20           | Targeted: 23            |
| 19/40 — Persons with a physical disability            | 17                 | at least: 1            | 4                       |
| 20/41 — Persons with cognitive or functional          | 2                  | at least: 1            | 0                       |
| disability  |                    |                        |                         |
| 21/42 — Persons blind or visually impaired            | 9                  | at least: 1            | 1                       |
| 22/43 — Persons deaf or hard-of-hearing               | 9                  | at least: 1            | 1                       |
| 23/44 — Persons Limited English Proficient            | 38                 | at least: 1            | 4                       |
| 24/45 — Persons identifying as lesbian, gay, or       | 268                | at least: 2            | 2                       |
| bisexual  |                    |                        |                         |
| 25/46 — Persons identifying as transgender or         | 69                 | at least: 3            | 3                       |
| intersex  |                    |                        |                         |
| 26/47 — Persons who reported sexual abuse in facility | 19                 | at least: 4            | 5                       |
| 27/48 — Persons who reported prior sexual             | 231                | at least: 3            | 4                       |
| victimization   |                    |                        |                         |
| 28/49 — Persons placed in segregated housing for      | 0                  | at least: 2            | 0                       |
| risk of sexual victimization                          |                    |                        |                         |

<sup>\*</sup> The numbers at left refer to the audit report facility information numbers providing the information.

**Item 41** notes that no person with a cognitive or functional disability was interviewed for the audit. According to Table 2 in the 2022 Auditor Handbook, the minimum number of interviews for a unit with the overall population of Murray Unit should have been one. <sup>13</sup> The audit report provides a vague explanation either none were there (in contrast to the report documenting that on the first day of the audit two were present), that the facility was unable to provide a list (a deficiency in facility data collection), or even more vaguely that "willingness to participate . . . impacted the audit team's ability to meet the mandatory number of interviews." It should not be so difficult to provide a clear, valid explanation for the lack of interviews with this target population. The lack of such indicates a failure to do appropriate due diligence to meet this requirement.

**Item 49** states that no person who had ever been placed in segregated housing or isolation for risk of sexual victimization were interviewed by the auditor. According to Table 2 in the 2022 Auditor Handbook, the minimum number of interviews for a unit with the overall population of Murray Unit should have been at least two. <sup>14</sup> It is absolutely certain that some people had met this requirement. As with **item 28**, this indicates a failure to investigate and understand

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<sup>13.</sup> U.S. Department of Justice, PREA Management Office, PREA Auditor Handbook, 65.

<sup>14.</sup> U.S. Department of Justice, PREA Management Office, PREA Auditor Handbook, 65.





how segregated housing is manipulated by TDCJ to cause confusion; this will be discussed further under PREA § 115.43.

**Items 72** – 77 provide totals for sexual violence allegations and investigations for the 12 months prior to the audit. These numbers are summarized in Table 3. Problems that TPI finds with these numbers are discussed in below the table.

The "Referred" row is highlighted because the discussion of PREA § 115.71(h) states that one "allegation of conduct" not further specified was "referred for prosecution." That this allegation was not reported in this data indicates a failure to adequately document audit findings, a problem with facility data, or other similar problems. We also note that the discussion of PREA § 115.86 indicates there were 17 sexual abuse incidents excluding unfounded incidents, rather than the 16 indicated here. That appears to refer to the 16 listed here plus the one not listed here. This contradiction also indicates a problem with the audit findings, a problem with facility data, or other issues.

Table 3. Sexual Violence Investigations and Outcomes

|                               | Sex   | xual Abuse by       | Sexual Harassment by |                     |  |  |
|-------------------------------|-------|---------------------|----------------------|---------------------|--|--|
|                               | Staff | Incarcerated Person | Staff                | Incarcerated Person |  |  |
| Allegations                   | 16    | 6                   | 2                    | 3                   |  |  |
| Administrative investigations | 16    | 6                   | 2                    | 3                   |  |  |
| Ongoing                       | 0     | 0                   | 0                    | 0                   |  |  |
| Unfounded                     | 6     | 0                   | 0                    | 0                   |  |  |
| Unsubstantiated               | 10    | 6                   | 2                    | 3                   |  |  |
| Substantiated                 | 0     | 0                   | 0                    | 0                   |  |  |
| Criminal Investigations       | 4     | 3                   | 0                    | 0                   |  |  |
| Ongoing                       | 4     | 1                   | 0                    | 0                   |  |  |
| No Action                     | 0     | 2                   | 0                    | 0                   |  |  |
| Referred                      | 0     | 0                   | 0                    | 0                   |  |  |
| Indicted                      | 0     | 0                   | 0                    | 0                   |  |  |
| Convicted                     | 0     | 0                   | 0                    | 0                   |  |  |
| Acquitted                     | 0     | 0                   | 0                    | 0                   |  |  |

**Item 75** provides the outcomes for administrative investigations of sexual abuse allegations during the previous 12 months. **Item 72** shows incarcerated persons reported 22 allegations of sexual abuse by staff and other incarcerated persons. Per **item 75**, administrative investigations found zero substantiated, 16 unsubstantiated, and six unfounded. That is, 100% of the allegations were found to have less than a 51% chance of having occurred. According to PREA § 115.72, the agency "shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated," yet not one allegation was substantiated. This indicates a failure of the administrative investigations





to adequately assess evidence in allegations of sexual abuse, and a failure of the audit to identify this problem and pursue an explanation of what appears to be a failure to properly investigate allegations.

**Item 77** provides the outcomes for administrative investigations of sexual harassment allegations during the previous 12 months. **Item 73** shows incarcerated persons reported five allegations of sexual harassment by staff and other incarcerated persons. Per **item 77**, administrative investigations found all five unsubstantiated. That is, 100% of the allegations were found to have less than a 51% chance of having occurred. According to PREA § 115.72, the agency "shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated," yet not one allegation was substantiated. This indicates a failure of the administrative investigations to adequately assess evidence in allegations of sexual harassment, and a failure of the audit to identify this problem and pursue an explanation of what appears to be a failure to properly investigate allegations.

# **PREA Standards Compliance Assessment Issues**

#### PREA § 115.11, Zero Tolerance

PREA § 115.11 primarily considers policy at the Murray Unit and the agency overall. Policy is certainly essential to reaching such goals, but policy alone is inadequate, and how policy is implemented may even increase harm. TPI has seen many instances where an agency or responsible entity states something to the effect "that does not happen because we have policy against it" or "because we have training against it." This excuse covers up and may even encourage violence such as sexual abuse and sexual harassment by providing a means of covering up such violence. The 2022 Auditor Handbook addresses this negative potential by stating that:

The PREA audit is not only an audit of policies and procedures. It is *primarily* an audit of practice. The objective for the auditor is to examine enough evidence to make a compliance determination regarding the audited facility's *actual practice*. *Policies and procedures do not demonstrate actual practice*, although they are the essential baseline for establishing practice and should be reviewed carefully [emphasis added].<sup>15</sup>

Negative effects of policy are also seen where claims that sexual violence is "investigated" are accompanied by clear indications that the investigations have little or no merit due to the extremely high rate of dismissal. This can also serve to cover up—and may even encourage—violence such as sexual abuse and sexual harassment by providing a means of simply ignoring such violence through improper investigations.

Due to our work in general at Murray Unit, TPI has doubts that this unit fully complies with PREA § 115.11.

15. U.S. Department of Justice, PREA Management Office, PREA Auditor Handbook, 46.

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#### PREA § 115.13 Supervision and Monitoring

- (a) The agency shall ensure that each facility it operates shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect [incarcerated persons] against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration:
  - (1) Generally accepted detention and correctional practices;
  - (2) Any judicial findings of inadequacy;
  - (3) Any findings of inadequacy from Federal investigative agencies;
  - (4) Any findings of inadequacy from internal or external oversight bodies;
  - (5) All components of the facility's physical plant (including "blind-spots" or areas where staff or [incarcerated persons] may be isolated);
  - (6) The composition of the [incarcerated person] population;
  - (7) The number and placement of supervisory staff;
  - (8) Institution programs occurring on a particular shift;
  - (9) Any applicable State or local laws, regulations, or standards;
  - (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
  - (11) Any other relevant factors.
- (b) In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the plan.
- (c) Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to:
  - (1) The staffing plan established pursuant to paragraph (a) of this section;
  - (2) The facility's deployment of video monitoring systems and other monitoring technologies; and
  - (3) The resources the facility has available to commit to ensure adherence to the staffing plan.
- (d) Each agency operating a facility shall implement a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such policy and practice shall be implemented for night shifts as well as day shifts. Each agency shall have a policy to prohibit staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.

Additional documentation about this standard further explains:

Purpose: To protect inmates against sexual abuse and sexual harassment by limiting the possibility that inmates and staff will be left alone and unmonitored through adequate and ongoing supervision. This purpose is achieved through:





- ➤ Development, documentation and implementation of a staffing plan that provides for adequate levels of supervision and monitoring of the facility's population to prevent, detect and respond to sexual abuse and sexual harassment;
- ➤ Consideration of deployment of video monitoring and other monitoring technologies as appropriate and feasible to augment and enhance staff supervision of inmates to increase sexual safety in the facility; and
- ➤ Performance of periodic unannounced rounds by intermediate and upper-level supervisors on all shifts to deter, prevent, and detect sexual abuse and sexual harassment of inmates in the facility.<sup>16</sup>

During the site review the auditor must compare the written staffing plan against the following observations to determine whether the staffing plan adequately assesses the staffing and/or electronic monitoring needs of the facility with sexual safety in mind, and, whether the facility is staffed according to the plan, as it is written, to later determine whether deviations from the plan have been documented:

- Observe the number of staff, contractors, and volunteers present (including security and non-security staff) and staffing patterns during every shift, including:
  - In the housing units
  - In isolated areas like administrative/disciplinary segregation and protective custody
  - In the programming, work, education, other areas
  - In areas where sexual abuse is known to be more likely to occur according to the staffing plan.
- Observe staff line of sight and assess whether there are blind spots.
- Observe areas where persons confined in the facility are not allowed to determine whether
  movement in and out of that space is monitored (e.g., by cameras or other forms of
  surveillance), to ensure that confined persons never enter those areas.
- Observe the level of supervision and frequency of cell checks in housing areas where confined persons are double-celled, in dormitories, or in holding pens with more than one person (if applicable).
- Observe indirect supervision practices, including camera placement.
  - In addition to observation of camera placement, inquire about and observe the monitoring room, including staffing rotation (i.e., how often is camera feed monitored and by whom).
- Note any staffing concerns, including understaffing, overcrowding, poor line of sight, etc. 17

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<sup>16.</sup> PREA Resource Center, "Prevention Planning, § 115.13, 115.113, 115.213, 115.313 Supervision and Monitoring," *PREA Standards in Focus*, <a href="https://www.prearesourcecenter.org/sites/default/files/library/PREA%20Standards%20in%20Focus%20%28115.13%29.pdf">https://www.prearesourcecenter.org/sites/default/files/library/PREA%20Standards%20in%20Focus%20%28115.13%29.pdf</a>.

<sup>17.</sup> PREA Resource Center. Auditor Compliance Tool, Facility: Prison / Jail. Available at: <a href="https://www.prearesourcecenter.org/sites/default/files/library/ACTPrisonJail.pdf">https://www.prearesourcecenter.org/sites/default/files/library/ACTPrisonJail.pdf</a>.





PREA § 115.13 requires the unit to maintain adequate staff to operate effectively and to "protect [incarcerated persons] against sexual abuse." TDCJ has long shown that they cannot hire or maintain adequate staffing levels at many of their units. Many units in the system are operating at less than 50 percent security staff, some as low as 30 percent. TPI has received reports from a number of units, including many over the 12 months preceding this audit, that incarcerated persons may not even see a security staff person for hours at a time, and that one staff person may be the only assigned staff person for an entire building or wing. Although positions may be filled during an audit, that may not be the case on days when the unit is not being audited.

In addition to our experience and data related to staffing issues, the Texas Sunset Advisory Committee audited TDCJ as a whole in 2024 and provided even more damning conclusions. The following are some excerpts from the commission report.

This Sunset review occurred in the context of both TDCJ's systemwide prison lockdown due to unprecedented levels of contraband and violence and inmate population projections that exceed TDCJ's operational capacity, raising basic questions about TDCJ's ability to handle its current and future realities. The state's criminal justice entities are confronting serious challenges in executing their mission to safely confine, supervise, and provide services for adults convicted of certain crimes in Texas.<sup>18</sup>

While correctional best practice is that staff vacancy rates remain below 10 percent, in fiscal year 2023, TDCJ's vacancy rate among correctional staff was nearly 28 percent agencywide and much higher at certain facilities. At the end of that year, 22 facilities had more than 40 percent of correctional positions vacant, including six facilities with more than half of correctional positions vacant. . . . These vacancy rates are even higher for just COs, with some units operating with up to 70 percent of CO positions unfilled. Agency data indicate vacancy rates have progressively worsened at certain facilities over the last ten years. For example, Sunset staff analyzed a random sample of CO shift turnout rosters from one facility and found it frequently operates with a vacancy rate over 60 percent after accounting for employees on leave or otherwise absent from work. Moreover, Sunset staff learned some facilities have operated with as little as 25 percent of the staff they need on a given day. In practice, this forces TDCJ staff to supervise thousands of inmates with fewer than half of the security staff they need, which has potentially dire consequences for staff, inmates, and others. <sup>19</sup>

Staff members transporting to a facility for one day or for a week or two at a time must quickly learn and adapt to a new environment and system, which can be difficult for both them and the facility's permanent staff. Sunset staff learned from COs that, while the help is appreciated and needed, transported officers are sometimes more prone to mistakes, more reticent to take on difficult assignments, and in some cases, less invested in their tasks and the overall success of the facility. Given limited capacity, most receiving facilities provide little unit-specific training to transported COs, and TDCJ has not provided clear guidance for receiving facilities and supervisors on how to best utilize such staff, further exacerbating these challenges. Overall, the

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<sup>18.</sup> Texas Sunset Advisory Commission, *Sunset Staff Report: Texas Criminal Justice Entities*, September 2024: 1, <a href="https://www.sunset.texas.gov/public/uploads/2024-09/Texas%20Criminal%20Justice%20Entities%20Staff%20Report\_9-26-24.pdf">https://www.sunset.texas.gov/public/uploads/2024-09/Texas%20Criminal%20Justice%20Entities%20Staff%20Report\_9-26-24.pdf</a>.

<sup>19.</sup> Texas Sunset Advisory Commission, Texas Criminal Justice Entities, 24.





staff transport models are costly and an unsustainable short-term solution to what has become a pervasive and long-term problem in hiring and retaining COs at hard-to-staff locations.<sup>20</sup>

| TDCJ Units with the Highest Vacancy Rates, FYs 2014-23 |        |        |        |        |        |        |        |        |        |        |
|--|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Unit   | FY 14  | FY 15  | FY 16  | FY 17  | FY 18  | FY 19  | FY 20  | FY 21  | FY 22  | FY 23  |
| D  | 13.92% | 16.63% | 18.68% | 22.28% | 25.83% | 31.61% | 45.86% | 47.09% | 52.72% | 55.43% |
| E  | 20.05% | 27.19% | 16.19% | 22.15% | 28.87% | 29.84% | 38.86% | 43.44% | 52.59% | 53.55% |
| G  | 20.83% | 27.01% | 11.45% | 20.63% | 28.72% | 31.43% | 36.77% | 41.62% | 48.52% | 52.77% |
| В  | 27.39% | 16.67% | 16.24% | 30.70% | 31.82% | 44.91% | 41.67% | 43.46% | 51.69% | 53.89% |
| W  | 15.71% | 17.84% | 8.70%  | 8.74%  | 11.16% | 15.65% | 15.78% | 27.85% | 43.78% | 49.90% |
| J  | 11.53% | 17.13% | 10.14% | 17.38% | 28.15% | 27.57% | 32.74% | 35.61% | 45.14% | 47.98% |
| C  | 24.36% | 16.85% | 6.88%  | 20.15% | 14.34% | 12.04% | 25.37% | 44.11% | 47.40% | 51.74% |
| A  | 1.53%  | 3.89%  | 9.16%  | 7.50%  | 19.92% | 23.16% | 32.68% | 42.24% | 59.09% | 56.57% |
| R  | 13.56% | 8.47%  | 9.40%  | 10.17% | 25.66% | 5.08%  | 16.10% | 32.48% | 41.96% | 48.68% |
| О  | 40.14% | 21.35% | 12.43% | 27.69% | 23.22% | 36.43% | 36.29% | 52.55% | 51.85% | 48.67% |

**Figure 1:** Facilities with the top 10 staffing shortages. Source: Texas Sunset Advisory Commission. (September 2024). Sunset Staff Report: Texas Criminal Justice Entities, page 25.

Forty percent of respondents to Sunset's correctional staff survey said they feel unsafe in TDCJ facilities, and many facilities are so critically understaffed they cannot operate by the agency's own safety standards. TDCJ's staffing plans identify the roles minimally necessary to operate each facility safely, called "Priority One" positions, an example of which is described in the *Correctional Housing Rovers* textbox on the following page [not provided in this excerpt]. Some portion of Priority One positions routinely go unfilled in several critically understaffed facilities. Priority Two positions, which further aid in the safe functioning of the facility and typically support inmate rehabilitation programming and recreation, often go entirely unfilled in these facilities.<sup>21</sup>

A Sunset staff analysis found facilities are more dangerous now than a decade ago. . . . [I]n fiscal year 2023 the agency recorded more than 2,000 adverse events, surpassing a pre-COVID-19 high, and these events have been rising as a percentage of the inmate population over the last 10 years. Even while the inmate population decreased, the amount of contraband such as drugs, weapons, and cellphones found in TDCJ facilities has increased significantly over the last 10 years, which can contribute to conflict and violence in prisons. Nearly 70 percent of respondents to Sunset's correctional staff survey indicated they have experienced or witnessed an adverse event, nearly half of whom said they are exposed to these events daily or weekly. A majority of respondents indicated adverse events make their jobs more difficult and negatively impact their physical or

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<sup>20.</sup> Texas Sunset Advisory Commission, Texas Criminal Justice Entities, 26.

<sup>21.</sup> Texas Sunset Advisory Commission, Texas Criminal Justice Entities, 40.





mental health. Also at risk for these events are others who work in facilities, including food and laundry service staff, chaplains, medical providers, employees of the Windham School District and the Board of Pardons and Paroles, vendors, and volunteers.<sup>22</sup>

Despite the difficulty — and sometimes physical impossibility — of completing all required tasks with such severe staffing shortages, TDCJ has failed to adjust expectations to the new realities of current staffing levels. In the face of crisis-level staffing at many correctional facilities, parole offices, and other departments, employees are often tasked with more than they can reasonably perform within normal working hours. For example, a correctional housing rover responsible for 300 inmates across multiple housing areas would have just six seconds to perform a security check on each inmate, which TDCJ policy requires every 30 minutes. Even assuming there are no interruptions or inmate needs to attend to, this would be nearly impossible and is just one of the many recurring tasks rovers must perform throughout their shift. Furthermore, officers from across the facility are regularly pulled to cover unfilled Priority One positions, leaving their primary duties undone. Despite widespread staffing shortages, supervisors assigning positions on understaffed facilities have received limited guidance from executive or senior leaders about what tasks to prioritize or how to adjust the requirements set out in policy.<sup>23</sup>

These are only a few of the serious issues noted by the Sunset Commission audit, indicating much more than a cursory glance at policy and rosters needs to be done during PREA audits to actually assess compliance with this standard. The lack of any meaningful discussion of this standard indicates it cannot be determined from this audit report whether or not Murray Unit is in compliance with this standard.

### PREA § 115.15 Preface, Defining Cross-Gender

Before addressing cross-gender viewing and searches under PREA § 115.15, it is essential to understand what "cross-gender" means for the purposes of PREA compliance. And in understanding what cross-gender means, we must first consider what gender itself means. With these definitions provided, we can then consider the appropriate understanding of gender in regards to PREA § 115.15.

In a general and over-simplistic (and still biased) view, gender can be seen as predominately consisting of "male" and "female," with "male" including cisgender males and transgender males, and "female" including cisgender females and transgender females. However, gender also includes persons who consider themselves to be specifically "nonbinary" (a gender that is not constrained by social stereotypes around what constitute "male" and "female"), a different gender, or a combination of genders.

For PREA compliance, it matters not at all how the social, political, religious, or other constructed frameworks of prison staff, incarcerated persons, or PREA auditors try to narrow or eliminate these to dismiss a person's deeply felt identity in preference to one's own bias. What

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<sup>22.</sup> Texas Sunset Advisory Commission, Texas Criminal Justice Entities, 41.

<sup>23.</sup> Texas Sunset Advisory Commission, *Texas Criminal Justice Entities*, 44 – 45.





does matter is that failing to recognize these identities leads to the infliction of trauma and the encouragement of sexual violence, and as such undermines PREA compliance.

Because the PREA standards, and especially the PREA auditor tools in their current state, add a conflicting term "opposite gender" that ultimately serves no purpose other than to provide an opening for abusive conduct and exemption of transgender and gender nonconforming persons, we must also define this term, as well as advocate for its removal. "Opposite gender" is a term that means the "further side" of a thing or the "reverse" of someone or something. The implication of an "opposite" when applied to a single concept such as "gender" is to create a mutually exclusive dichotomy, thus eliminating other possibilities. In considerations of PREA compliance, the use of "opposite" in terms of gender itself is a violence that erases any other possible genders, and that may be misconstrued to even eliminate everything other than the two "opposites" of cisgender males and cisgender females.

The term "opposite gender" is only used in one provision of the PREA standards for adult prisons and jails, § 115.15(d), where discussing the examination of a person to determine genital status. Yet the PREA auditor tools amplify the concept of "opposite" genders, an action that deliberately and intentionally serves to diminish the consideration of the PREA standards as applied to transgender, nonbinary, and gender nonconforming persons. The term is unnecessary, and in fact PREA purposes would be better served by the use of "cross gender" to address the abusive and offensive "curiosity" with transgender persons' genitals that cisgender persons seem to have.

The DOJ provides a comment in a discussion of staff genders that clearly sets out how PREA § 115.15 should be viewed in terms of addressing the overall goals of the PREA standards:

facilities should make an individualized determination based on the gender identity of the staff member and not solely based on the staff member's sex assigned at birth, the gender designation of the facility or housing unit to which the staff member is assigned, the related and required job duties of the specific staff member, the limits to cross-gender viewing and searches in PREA Standard 115.15, and the goal of the PREA Standards **to prevent trauma and sexual abuse** [emphasis added].<sup>24</sup>

Even if this is about staff gender, it is important to note the perspective, and that this statement cites the overall objective of PREA: "to prevent trauma and sexual abuse." There are some important points to make concerning this overall PREA objective.

• To claim that a transgender man is a woman for 115.15 compliance issues does not prevent trauma, and in many cases may actively cause trauma and may encourage sexual harassment and sexual abuse.

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<sup>24.</sup> FAQ | "How should transgender staff and non-binary staff be classified. . . ." Frequently Asked Questions, National PREA Resource Center, May 1, 2023, <a href="https://www.prearesourcecenter.org/frequently-asked-questions/how-should-transgender-staff-and-non-binary-staff-be-classified-purposes">https://www.prearesourcecenter.org/frequently-asked-questions/how-should-transgender-staff-and-non-binary-staff-be-classified-purposes</a>.





- To claim that a transgender woman is a man for 115.15 compliance issues does not prevent trauma, and in many cases may actively cause trauma and may encourage sexual harassment and sexual abuse.
- To claim that a nonbinary person is a man or a woman for 115.15 compliance issues does not prevent trauma, and in many cases may actively cause trauma and may encourage sexual harassment and sexual abuse.

Once again, the biases of the staff, other incarcerated persons, or the auditor are not themselves at issue in the assessment of this standard. What is at issue is what reduces trauma and sexual violence. Erasing and dismissing identities does neither.

The primary term used in the PREA standards is "cross-gender," and this should be understood as its most simple and obvious meaning of being of a different gender. To insist that "cross-gender" means the same as "opposite-gender" is engaging in harmful duplicity that has no purpose but to diminish or erase consideration of the safety of transgender, nonbinary, and gender nonconforming persons.

With this in mind, we can state that regardless of whether a person is assigned to a facility designated as "male" or "female," if that person identifies as transgender, then viewing and searches by persons of a gender different from the incarcerated person's self-identified gender are cross-gender searches, and may be noncompliant with PREA standards.

Failure to recognize this fact in an audit is a failure to properly assess whether or not cross-gender searches and viewing are occurring at a facility. A blanket practice of misclassifying transgender females as "males," transgender males as "females," or nonbinary transgender persons according to any stereotype is inappropriate, is noncompliant with PREA § 115.15, and willful disregard of this fact may constitute violence against transgender persons.

The DOJ has stated support for this position by noting that:

[a]gencies or facilities that conduct searches **based solely on the gender designation of the facility** without considering other factors such as the gender identity or expression of the individual [incarcerated person] or the [incarcerated person's] preference regarding the gender of the person conducting the search, **would not be compliant with Standard 115.15** [emphasis added].<sup>25</sup>

It should be emphasized that this does not state "may not be compliant," it states "would not be compliant."

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<sup>25. &</sup>quot;FAQ | Can you please clarify the parameters of conducting a search of a transgender, . . ." Frequently Asked Questions, National PREA Resource Center, October 24, 2023, <a href="https://www.prearesourcecenter.org/frequently-asked-questions/can-you-please-clarify-parameters-conducting-search-transgender-or">https://www.prearesourcecenter.org/frequently-asked-questions/can-you-please-clarify-parameters-conducting-search-transgender-or</a>.





At this point, we can proceed to the guidance in the Auditor Compliance Tool,<sup>26</sup> which fails to encourage progress toward zero-tolerance, fails to prevent trauma, and **in many cases may** actively cause trauma and may encourage sexual harassment and sexual abuse.

In the audit site review comments for PREA § 115.15(a), the Auditor Compliance Tool provides the following highly problematic language:

Note: the Standard use the term "cross-gender," but for the purposes of clarity in the site review instructions we use both "cross-gender" and "opposite-gender" when referring to viewing or searches of persons confined in the facility by staff of the opposite gender.<sup>27</sup>

This redefines "cross-gender" as "opposite-gender," which effectively, at a minimum, erases the existence of nonbinary and some gender nonconforming persons, and implies on the one hand that only persons who adhere to stereotypes of what constitutes "male" and "female" norms are worth considering in this standard, and on the other hand can allow auditors to claim only physical characteristics meet "opposite-gender" descriptions. This instruction undermines PREA claims of zero tolerance for sexual violence as it applies to transgender, nonbinary, and gender nonconforming persons; and it promotes the application of harmful stereotypes for these same populations.

The Auditor Compliance Tool audit site review comments for PREA § 115.15(b) and (c) refer to the provision (a) guidelines, here encouraging a false and discriminatory treatment specifically of transgender females. At a minimum, the site review comments must address that "female" here includes transgender and cisgender females. Otherwise, the insistence of the review comments on the crudely reductive "opposite gender" language serves to allow or even encourage the dismissal of transgender females as somehow not "opposite." Doing so, again, may actively cause trauma and may encourage sexual harassment and sexual abuse.

The Auditor Compliance Tool audit site review comments for PREA § 115.15(d) again insists on diminishing the humanity of transgender persons by insisting on the use of "opposite gender." Here and earlier, the instructions state that this is "for the purposes of clarity," which indicates the clarity of discrimination only. There is nothing that insistence on such terminology "clarifies" except an intent to deliberately dismiss the consideration of harm to, and encourage erasure and sexual abuse of, transgender, nonbinary, and gender nonconforming persons. This is continued and underscored by statements such as "staff of both genders," which very clearly erases all but the narrow gender binary stereotypes.

Understanding these ways that the Auditor Compliance Tool contributes to the infliction of trauma and encourages sexual harassment and sexual violence, we move on to the auditor's assessment of this standard.

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<sup>26.</sup> TPI strongly advises modification of the Auditor Compliance Tool to eliminate the bias it encourages. The tool is available at: <a href="https://www.prearesourcecenter.org/sites/default/files/library/ACTPrisonJail.pdf">https://www.prearesourcecenter.org/sites/default/files/library/ACTPrisonJail.pdf</a>.

<sup>27.</sup> PREA Resource Center. Auditor Compliance Tool, Facility: Prison / Jail. Available at: <a href="https://www.prearesourcecenter.org/sites/default/files/library/ACTPrisonJail.pdf">https://www.prearesourcecenter.org/sites/default/files/library/ACTPrisonJail.pdf</a>.





#### PREA § 115.15, Cross-Gender Viewing and Searches

Please see the PREA § 115.15 Preface, above, for additional information about serious issues with how PREA implementation instructions undermine the goals of PREA compliance for transgender, nonbinary, and gender nonconforming persons.

(a) The facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners.

Purpose: To limit intimate bodily contact of inmates by staff and enable bodily privacy for both [cisgender and transgender] male and [cisgender and transgender] female [and nonbinary and gender nonconforming incarcerated persons] in order to prohibit abuse and trauma that might arise from that contact or viewing.<sup>28</sup>

The audit report states that "Murray Unit does not conduct cross-gender strip searches or cross-gender visual body cavity searches" except in exigent circumstances, but because this audit report failed to acknowledge the gender of at least 69 identified transgender and intersex persons housed at the facility during the audit, it cannot be determined whether or not the audit report claim for provision (a) is true.

(c) The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches, and shall document all cross-gender pat-down searches of female [incarcerated persons].

The failure by the audit report to accurately reflect that the unit houses transgender males and nonbinary transgender persons also results in deficient assessment of PREA § 115.15(c), requiring that the facility document all cross-gender strip searches and cross-gender visual body cavity searches.

(d) The facility shall implement policies and procedures that enable [incarcerated persons] to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Such policies and procedures shall require staff of the opposite gender to announce their presence when entering an [incarcerated persons] housing unit.

Concerning PREA § 115.15(d), which TPI points out incorrectly discusses "opposite" gender viewing (see the PREA § 115.15 Preface, above), the refusal to acknowledge the gender of transgender persons also results in a failure to meet this standard. The audit report documents that 20 random interviews with incarcerated persons supported compliance, but does not refer to any responses from incarcerated transgender and intersex persons. Although not a required

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<sup>28.</sup> PREA Resource Center, "Prevention Planning, § 115.15, 115.115, 115.215, 115.315 Limits to Cross-Gender Viewing and Searches," *PREA Standards in Focus*, <a href="https://www.prearesourcecenter.org/sites/default/files/library/115.15.pdf">https://www.prearesourcecenter.org/sites/default/files/library/115.15.pdf</a>.





question in interview protocol, this would seem to be an obligatory question that a competent audit would pursue, especially where there is such a large transgender and intersex population.

TPI would like to point out that also of relevance to PREA § 115.15(d) is that in circumstances requiring constant or near constant observation (which in TDCJ includes both CDO, or constant direct observation, and SOS, or security observation status, neither of which are covered in the audit report), the facility is likewise accountable for compliance with PREA § 115.15(d). Per the National PREA Resource Center FAQ:

[A] cross gender staff can be assigned to suicide watch, including constant observation, so long as the facility has procedures in place that enable an [incarcerated person] on suicide watch to avoid exposing himself or herself to nonmedical cross gender staff. This may be accomplished by substituting same gender correctional staff or medical staff to observe the periods of time when an [incarcerated person] is showering, performing bodily functions, or changing clothes. It may also be accomplished by providing a shower with a partial curtain, other privacy shields, or, if the suicide watch is being conducted via live video monitoring, by digitally obscuring an appropriate portion of the cell. Any privacy accommodations must be implemented in a way that does not pose a safety risk for the individual on suicide watch. The privacy standards apply whether the viewing occurs in a cell or elsewhere.

The exceptions for cross gender viewing under exigent circumstances or, for [incarcerated persons] who are not on constant observation, when incidental to routine cell checks apply to suicide watch as well. Because safety is paramount when conducting a suicide watch, if an immediate safety concern or [] conduct makes it impractical to provide same gender coverage during a period in which the [incarcerated person] is undressed, such isolated instances of cross gender viewing do not constitute a violation of the standards. Any such incidents should be rare and must be documented.<sup>29</sup>

The audit report failed to discuss any of the practices involving such observation at Murray Unit.

(f) The agency shall train security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex [incarcerated persons], in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

The audit report discussion of PREA § 115.15(f) documents that the audit only considered staff claims and training materials in the evaluation of this provision. Based on the audit report, no transgender person was asked about whether or not policy is adhered to in practice, indicating a deficiency in the audit.

Based on these issues, TPI asserts that it cannot be determined from this audit report whether or not Murray Unit is in compliance with this standard.

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<sup>29. &</sup>quot;FAQ | How do the requirements of standard 115.15(d) apply to inmates who have been, . . ." Frequently Asked Questions, National PREA Resource Center, December 18, 2015, <a href="https://www.prearesourcecenter.org/frequently-asked-questions/how-do-requirements-standard-11515d-apply-inmates-who-have-been-placed">https://www.prearesourcecenter.org/frequently-asked-questions/how-do-requirements-standard-11515d-apply-inmates-who-have-been-placed</a>.





#### PREA § 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. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFEs or SANEs.

The audit report documents that Murray Unit provided three SANE exams during the last 12 months, so an astounding 86% of the persons making allegations of sexual abuse (3 of 22 total) were NOT allowed forensic medical exams. The audit report provides no explanation for such a paucity of SANE exams, and the lack of an explanation strongly indicates a lack of compliance.

The audit report references policy OIG-7.13, which states that staff will "determine if a forensic medical examination will be offered." It appears that policy SPPOM-05.01, not referenced in the audit report, makes the same statement in section 1.F. PREA § 115.21(c) states that **all** survivors of sexual abuse shall be offered access to forensic medical examinations; and PREA § 115.21(e) allows the survivor to request a forensic medical examination. OIG-7.13 and SPPOM-05.01 indicate that is not being done either at the agency level or at Murray Unit, but instead staff are deciding whether to offer the survivor access to a forensic medical examination. <sup>30</sup>

The most recent PREA Ombudsman annual report appears to have no data on the number of forensic medical exams conducted during the covered year (calendar year 2023). It may be that TDCJ uses a 96-hour time limit instead of the state defined 120-hour limit.<sup>31</sup> This may be done to make it easier to delay victim reports beyond the limit and refuse a SANE exam under the claim that the report was made too late. In fact, TDCJ appears to have only used the 120-hour reporting limit for a portion of 2019, the year the expanded limit became effective under state law.

Compliance with this standard is also called into question by the audit report documentation that 12 of the reports were "within a time period that still allowed for the collection of physical evidence" (see the audit report discussion of PREA § 115.64(a)). This begs the question of why only three of 12 (25%) reported within the 96 or 120 hour time limit were provided SANE exams. This serious and very significant discrepancy is not addressed in the audit report.

Based on these serious issues, TPI asserts that it is highly unlikely that Murray Unit is compliant with PREA § 115.21. This audit report claims that Murray Unit "substantially exceeds" the

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<sup>30.</sup> TPI does not have access to policy OIG-7.13, we are reporting what we understand to be true. However, the version of SPPOM 05.01 that we have, dated July 2014, has the same statement in section 1.F.: "The OIG investigator will determine whether a forensic medical examination is required." This, too, is counter to PREA § 115.21.

<sup>31.</sup> Texas Department of Criminal Justice, *Safe Prisons/Prison Rape Elimination Act (PREA) Program Annual Report, Calendar Year* 2023, Texas Department of Criminal Justice, December 2024: 27, <a href="https://www.tdcj.texas.gov/documents/PREA\_SPP\_Report\_2023.pdf">https://www.tdcj.texas.gov/documents/PREA\_SPP\_Report\_2023.pdf</a>. Evidence of the 96-hour standard is provided in tables documented reporting time frames as "within 4 days" or greater than four days.





standard requirements but includes absolutely no information that would justify such an assessment.

### PREA § 115.31, Employee Training

The audit report claims that Murray Unit "substantially exceeds" the standard requirements but includes no information that would justify such an assessment. The discussion simply reflects apparent compliance.

# PREA § 115.41, Screening for Risk of Victimization and Abusiveness

- (a) All [incarcerated persons] shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other [incarcerated persons] or sexually abusive toward other [incarcerated persons].
- (b) Intake screening shall ordinarily take place within 72 hours of arrival at the facility.

The audit report documents that the staff claimed all 983 of the persons who entered Murray Unit and stayed at least 72 hours were screened under PREA § 115.41, but also notes that out of 40 incarcerated persons interviewed, some apparently reported that was not true. This discrepancy indicates a lack of compliance, but the discrepancy is not addressed in the report, thus it cannot be considered resolved.

(c) Such assessments shall be conducted using an objective screening instrument.

TPI notes that an "objective" screening tool does not guarantee a nondiscriminatory screening tool. For example, the Static-99R screening tool discriminates by claiming persons who have had same gender relations are more apt to commit sexual violence. Such conclusory scoring would not comply with the essential features described by the DOJ that risk factors must be scored based on "reasonably informed assumptions" rather than agency bias. <sup>32</sup> In addition, actual practice in applying the screening tool can result in intentional or unintentional bias. As per DOJ comments for this standard, "[e]ffective and professional communication requires a basic understanding of sexual orientation, gender identity, gender expression, and how sex is assigned at birth. It also requires staff to be aware of their own gaps in knowledge and cultural beliefs, and how these factors may impact the ability to conduct effective interviews and assessments."<sup>33</sup>

(d) The intake screening shall consider, at a minimum, the following criteria to assess [incarcerated persons] for risk of sexual victimization:

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<sup>32. &</sup>quot;FAQ | What is meant by the term "objective screening instrument" in PREA Standard 115, . . . " Frequently Asked Questions, National PREA Resource Center, May 10, 2021, <a href="https://www.prearesourcecenter.org/frequently-asked-questions/what-meant-term-objective-screening-instrument-prea-standard-11541">https://www.prearesourcecenter.org/frequently-asked-questions/what-meant-term-objective-screening-instrument-prea-standard-11541</a>.

<sup>33. &</sup>quot;FAQ | Does standard § 115.41 (§ 115.241, § 115.341) require facilities to, . . ." Frequently Asked Questions, National PREA Resource Center FAQ, October 21, 2016, <a href="https://www.prearesourcecenter.org/frequently-asked-questions/does-standard-11541-115241-115341-require-facilities-affirmatively">https://www.prearesourcecenter.org/frequently-asked-questions/does-standard-11541-115241-115341-require-facilities-affirmatively</a>.





- (1) Whether the [incarcerated person] has a mental, physical, or developmental disability;
- (2) The age of the [incarcerated person];
- (3) The physical build of the [incarcerated person];
- (4) Whether the [incarcerated person] has previously been incarcerated;
- (5) Whether the [incarcerated person's] criminal history is exclusively nonviolent;
- (6) Whether the [incarcerated person] has prior convictions for sex offenses against an adult or child;
- (7) Whether the [incarcerated person] is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- (8) Whether the [incarcerated person] has previously experienced sexual victimization;
- (9) The [incarcerated person's] own perception of vulnerability; and
- (10) Whether the [incarcerated person] is detained solely for civil immigration purposes.

TPI asserts that TDCJ PREA compliance policy excludes persons who identify as gender nonconforming and possibly nonbinary. According to the TDCJ *Safe Prisons/PREA Plan* and the PREA Standards, the term transgender refers to "a person whose gender identity (i.e., internal sense of feeling male or female,) is different from the person's assigned sex at birth." This implies an old and limited definition of "transgender" that does not include nonconforming and nonbinary persons. PREA and the Safe Prisons Plan technically address this by including "gender nonconforming" in their discussions. The PREA Final Rule notes that:

The standards account in various ways for the particular vulnerabilities of [incarcerated persons] who are LGBTI or whose appearance or manner does not conform to traditional gender expectations. The standards require training in effective and professional communication with LGBTI and gender nonconforming [incarcerated persons] and require the screening process to consider whether the [incarcerated person] is, or is perceived to be, LGBTI or gender nonconforming. The standards also require that post-incident reviews consider whether the incident was motivated by LGBTI identification, status, or perceived status.

The PREA standards require under § 115.41(d) that screening for risk of sexual victimization shall consider several factors, including "(7) Whether the [incarcerated person] is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming" (emphasis added). If TDCJ risk screening markers include only LGBXX (unknown code), TRGEN, and INTSX, to be compliant with this requirement, it appears that gender nonconforming and nonbinary persons must be included in one of these categories, with TRGEN being the category generally most appropriate for risk assessment. TPI notes that SPPOM-03.01 screening in Section II for "Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI), and Gender Non-conforming" persons does not provide a coding entry for gender nonconforming persons. Questions 9 and 10 on Attachment E only include lesbian, gay, bisexual, heterosexual, transgender, and intersex. Section IV follow-up questions only address the "perceived to be" portion of this requirement, not the "is" portion. Therefore, it is not clear

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how TDCJ identifies persons in these classes, or how these criteria are applied for PREA § 115.42 purposes. This appears to indicate TDCJ policy makes it easy to exclude considerations of vulnerability for gender nonconforming and nonbinary persons.

TPI asserts that based on the documentation in this audit report, it cannot be determined whether or not Murray Unit is compliant with this standard.

### PREA § 115.42, Use of Screening Information

Purpose [per the Standards in Focus]: To reduce the risk of inmate-on-inmate sexual abuse and sexual harassment (referred to throughout the remainder of this document as "sexual abuse" or "sexual victimization") by:

- -- Maintaining separation between inmates at risk of being sexually victimized and inmates at risk of being sexually abusive;
- --Using intake screening information from § 115.41 to inform all inmate housing, bed, work, education, and program assignments: and
- -- Providing additional protections for transgender and intersex inmates, based on the unique risks these populations face while incarcerated.<sup>34</sup>
- (a) The agency shall use information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those [incarcerated persons] at high risk of being sexually victimized from those at high risk of being sexually abusive.

For PREA § 115.42, the DOJ has clarified that the manner of separation will depend on the circumstances of confinement, providing examples:

- In facilities that are comprised of only a single dormitory for housing, persons at risk for victimization should generally be housed on the opposite side from persons who have been screened as a risk for being abusive;
- In facilities with cells in a single housing unit, persons should be housed vulnerable persons should be housed in different cells from persons who are potentially abusive;
- In facilities that include multiple housing units, vulnerable persons should be assigned to different housing units from persons who are potentially abusive.<sup>35</sup>

TPI receives routine complaints from transgender persons incarcerated in TDCJ that these guidelines are not followed. Our correspondents report they are housed in housing units or even in the same cell with persons who are a danger to them (including danger of sexual

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<sup>34.</sup> PREA Resource Center, "Screening for Risk of Sexual Victimization and Abusiveness, § 115.42, 115.142, 115.242, 115.342, Use of Screening Information," *PREA Standards in Focus*, <a href="https://www.prearesourcecenter.org/sites/default/files/library/115.42%20SIF">https://www.prearesourcecenter.org/sites/default/files/library/115.42%20SIF</a> 0.pdf.

<sup>35. &</sup>quot;FAQ | What does 'separate' mean in the context of the screening standards, which, . . ." Frequently Asked Questions, National PREA Resource Center FAQ, December 2,2016, <a href="https://www.prearesourcecenter.org/node/5166">https://www.prearesourcecenter.org/node/5166</a>.





harassment and sexual abuse) because the other persons in the same housing unit or cell are antagonistic toward transgender persons specifically, LGBTI persons in general, or non-affiliated or "solo" persons who are vulnerable to exploitation. The antagonism may be due to personal or religious hatred, but it can also be due to affiliation with organizations that have rules against or that stigmatize any fraternization or association—including sharing a cell—with a transgender person or any LGBTI person. TPI does not contend that TDCJ does not have a screening process or use the screening information, but that both as currently implemented are inadequate to properly achieve the separation required under PREA § 115.42. Simply having policy addressing these requirements is not sufficient. The policy must be efficacious at achieving it's purpose.

(c) In deciding whether to assign a transgender or intersex [incarcerated person] to a facility for male or female [incarcerated persons], and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the [incarcerated person's] health and safety, and whether the placement would present management or security problems.

Concerning PREA § 115.42(c), TPI notes that based on reporting to us, we have heard of only a single transgender or intersex incarcerated person NOT housed according to their gender assigned at birth in TDCJ, and our information indicates that person has had genital surgery. Thus TDCJ appears to have, in practice, a blanket rule of making housing assignments for transgender and intersex persons based on genital configuration, not on a case-by-case basis.

#### The DOI has stated that an auditor:

must examine a facility or agency's actual practices in addition to reviewing official policy. A PREA audit that reveals that all transgender or intersex [incarcerated persons] in a facility are, in practice, housed according to their external genital status [as is true in at Boyd Unit and across TDCJ facilities] raises the possibility of non-compliance. The auditor should then closely examine the facility's actual assessments to determine whether the facility is conducting truly individualized, case-by-case assessments for each transgender or intersex [incarcerated person]. The auditor will likely need to conduct a comprehensive review of the facility's risk screening and classification processes, specific [incarcerated person] records, and documentation regarding placement decisions.<sup>36</sup>

The PREA Standards in Focus provides specific instructions to auditors:

Examining a facility's actual practices, in addition to reviewing official policy. For example, a PREA audit that reveals that all transgender and/or intersex inmates are, in practice, housed according to their genital status raises the possibility of non-compliance, even if the agency's policies are consistent with all of the requirements in § 115.42. The auditor must conduct a comprehensive review of the agency's screening and reassessment processes, and examine

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<sup>36. &</sup>quot;FAQ | Does a policy that houses transgender or intersex inmates based exclusively on, . . ." Frequently Asked Questions, National PREA Resource Center FAQ, March 24,2016, <a href="https://www.prearesourcecenter.org">https://www.prearesourcecenter.org</a> /frequently-asked-questions/does-policy-houses-transgender-or-intersex-inmates-based-exclusively.





specific inmate records/files to determine if individualized, case-by-case housing and programming assignments of transgender and/or intersex inmates are being made.<sup>37</sup>

This audit report contained no information that such required investigation during the audit was completed.

(d) Placement and programming assignments for each transgender or intersex [incarcerated person] shall be reassessed at least twice each year to review any threats to safety experienced by the [incarcerated person].

TPI has often heard from incarcerated transgender persons throughout TDCJ that the twice yearly assessments by UCC are cursory and ineffective. Reports generally convey that many staff make it clear they are simply there to check off the items they are required to ask, and many persons note that if they report issues, those are either dismissed or ignored, or addressed by locking the person in restrictive housing, likely with little or no property, for a week or more while an "investigation" is conducted then found unsubstantiated at best. The process appears seldom conducive to meeting the spirit of the PREA standard, and instead may offer staff opportunities to discourage reports of sexual victimization risks. TPI feels it is inadequate to simply parrot policy in support of meeting this standard, as is done by this auditor, and it must be supported by genuine investigation into the efficacy of the process for incarcerated transgender and intersex persons.

(f) Transgender and intersex [incarcerated persons] shall be given the opportunity to shower separately from other [incarcerated persons].

TPI notes that for two-person cells where the shower is in the cell, if one of the persons is transgender or intersex and one is not, that housing is not in compliance with 115.42(f).<sup>38</sup> If both persons are transgender or intersex, such housing may comply with this standard if both persons housed in the cell agree that the housing arrangement is acceptable, but only for as long as both persons housed in the cell agree that the arrangement is acceptable.

In addition, full compliance with PREA § 115.42(f), as per the DOJ, requires that facilities "adopt procedures that will afford transgender and intersex [incarcerated persons] the opportunity to disrobe, shower, and dress apart from other [incarcerated persons]," not simply have a minimally compliant "separate" shower.<sup>39</sup>

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<sup>37.</sup> PREA Resource Center, "Screening for Risk of Sexual Victimization and Abusiveness, § 115.42, 115.142, 115.242, 115.342, Use of Screening Information," *PREA Standards in Focus*, <a href="https://www.prearesourcecenter.org/sites/default/files/library/115.42%20SIF\_0.pdf">https://www.prearesourcecenter.org/sites/default/files/library/115.42%20SIF\_0.pdf</a>.

<sup>38.</sup> This generally would be the case even if the unit claims that opportunities for separate showers are provided because during lock downs and even periods of staff shortages, those opportunities are some of the first to be overlooked or set aside.

<sup>39. &</sup>quot;FAQ | Standard 115.42, 'Use of Screening Information,' requires that transgender, . . ." Frequently Asked Questions, National PREA Resource Center FAQ, April 23,2014, <a href="https://www.prearesourcecenter.org/frequently-asked-questions/standard-11542-use-screening-information-requires-transgender-inmates-be">https://www.prearesourcecenter.org/frequently-asked-questions/standard-11542-use-screening-information-requires-transgender-inmates-be</a>.





Further, interview protocol requires that transgender and intersex persons be asked about the practice of providing opportunities for separate showers. The audit report makes no mention of the responses to this question.

Based on these deficiencies, TPI asserts that it cannot be determined whether or not Murray Unit is compliant with this standard.

### PREA § 115.43 Preface, TDCJ "Protective Custody" Designations

PREA § 115.43 covers the separation or segregation of persons at high risk for sexual victimization, and the section uses several terms that provide opportunities for manipulation of the standard. These include "protective custody," "segregated housing," and "involuntary segregated housing." None of these are specifically defined in PREA § 115.5 general definitions, nor are definitions provided in the FAQ available online via the National PREA Resource Center. The PREA Final Rule<sup>40</sup> also does not provide definitions for these terms. In discussing this section, the Final Rule appears to use "segregated housing" and "involuntary segregated housing" to refer somewhat more generally to any type of separate housing for safety reasons, and "protective custody" and "involuntary protective custody" as separate housing for the purpose of providing immediate safety. 41 However, the discussion makes it clear that all these terms refer to separating the person from endangerment by placement in separate housing, and that all of these are considered "protective custody." For the sake of consistency, TPI will refer here to all separation for investigations of alleged sexual abuse or due to assessment as being at risk for sexual abuse to be "protective custody." If the person being segregated agrees with the segregation, that segregation will be "voluntary protective custody"; if the person being segregated does not agree with the segregation, that segregation will be "involuntary protective custody." TPI also asserts that due to the requirement at PREA § 115.41(d)(9) that the incarcerated person's own views of vulnerability taken into account, considerations of whether separate housing is "voluntary" or "involuntary" may change over time as the person's views about the need for protective custody changes. This can be important for persons provided TDCJ "safekeeping designation" because in many cases, persons will initially agree and want the designation, but later wish to be released from safekeeping designation due to the limits on education, training, work, and program opportunities. At that point, safekeeping becomes involuntary protective custody. Requests to be released from safekeeping designation are not always granted, and when not granted, documentation requirements under PREA § 115.43 should be triggered.

The following discussion provides definitions and descriptions of a number of types of protective custody in use in TDCJ. All of these should be considered "protective custody" for PREA § 115.43 and PREA § 115.68 purposes because all can be used to separate persons at risk of sexual victimization or after reporting sexual victimization.

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<sup>40.</sup> Federal Register (2012): vol. 77 no. 119, Fed. Reg. page 37106-37232 (June 20, 2012).

<sup>41.</sup> Federal Register (2012): vol. 77 no. 119, Fed. Reg. page 37154-37155 (June 20, 2012).





Protective safekeeping: "Protective safekeeping" is defined in the TDCJ Classification Plan as being "for [incarcerated persons] who require the highest level of protection in a more controlled environment than other general population [persons], due to threats of harm by others or a high likelihood of victimization." This designation is more fully discussed in the *Protective Safekeeping Plan*, a document that is not made public and to which TPI does not have access. Protective safekeeping is also identified as custody levels P6 and P7, with P7 having more restrictions. We should point out that one way TDCJ makes this confusing can be seen in this definition, where they compare persons in protective safekeeping to "other general population" persons. This allows TDCJ to claim even protective safekeeping is not actually "segregation" because it is "general population." However, TDCJ protective safekeeping is very separate, and there are only about three units in the TDCJ system with housing designated for protective safekeeping.<sup>42</sup>

This designation, based on reports from the one person with a P6 designation that we have been in contact with, is mainly used for persons who are politicians and other high-profile figures, persons with law enforcement history, and persons who have testified against powerful syndicates or cartels. This person did not mention anyone being in there due to a risk of sexual victimization, although there certainly could be. TDCJ protective safekeeping is absolutely separate from all other TDCJ populations, with no mixing outside P6 and P7. As far as TPI is aware, protective safekeeping is never recommended for only a risk of sexual victimization. We have never heard of any person being designated as "protective safekeeping" due to sexual violence or risk of sexual violence. This contrasts with TDCJ responses to PREA auditors that tend to indicate this is the only "protective custody" meeting PREA § 115.43 requirements. All TDCJ classification discussions we are aware of related to separation due to the potential for sexual victimization focus on "safekeeping status" (P2 through P5), not "protective safekeeping" (P6 and P7).

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<sup>42.</sup> TPI also notes that a 2016 PREA audit report documents that starting November 1, 2015, "TDCJ no longer uses the term 'Protective Custody' and now refers to these areas as 'Protective Safe Keeping.'" Agency staff would likely claim the change eliminated confusion about the nature of the housing, but TPI strongly asserts that this is simply a means of obscuring actual conditions, much the way other types of abusive segregation have been renamed from "solitary confinement" to "administrative segregation" to "restrictive housing" over the years to obscure the abusive nature of solitary confinement. Ralph P. Woodward, "TDCJ Rufus H. Duncan Unit, PREA Audit Report Final," March 23, 2016: 15, <a href="https://www.tdcj.texas.gov/documents/prea">https://www.tdcj.texas.gov/documents/prea</a> report/Duncan Unit 2016-02-26.pdf.

<sup>43.</sup> This appears to be an agency-wide position. In a response letter dated August 17, 2022, from TBCJ PREA Ombudsman Cassandra McGilbra (letter not further identified for privacy considerations, but a redacted copy may be provided if needed), McGilbra stated that "[t]he PREA Ombudsman Office concluded our investigative review on August 17, 2022, and found no violations of PREA Standard § 115.43. [Incarcerated person] [name redacted] was never assigned to **Protective Safekeeping** or **Restrictive Housing** preventing [her] from participating in available TDCJ jobs, education, or programs" (emphasis in the original). This indicates TDCJ only considers persons in housing designated as protective safekeeping or restrictive housing for PREA § 115.43 compliance, which TPI asserts is insufficient. We also note that restrictive housing is nearly always in a disciplinary environment, and is usually taken to refer to persons identified as potential abusers.





TPI has seen many audit reports that appear to simply accept TDCJ's implied or stated claims that the only legitimate PREA § 115.43 "protective custody" in the system is TDCJ protective safekeeping. That is far from true. TPI believes such statements should be considered deliberate and intentional efforts to manipulate PREA data collection, PREA audits, and PREA compliance.

**Safekeeping status:** Safekeeping designation or status is defined in the TDCJ Classification Plan as:

a status assigned to [incarcerated persons] who require separate housing within general population due to threats to their safety, vulnerability, a potential for victimization, or other similar reasons. [Incarcerated persons] in safekeeping are also assigned a principal custody designation, including safekeeping Level 2-P2 [minimum custody], safekeeping Level 3-P3 [minimum custody], safekeeping Level 4-P4 [medium custody], and safekeeping Level 5-P5 [closed custody].

Safekeeping status is sought by incarcerated persons who experience vulnerabilities, including vulnerabilities related to sexual violence. However, safekeeping status is provided only in relatively few cases, and some people experience sexual violence over and over and are refused safekeeping status because of the length of their incarceration, their body size, or in some cases for specious reasons such as being "too intelligent." Once in safekeeping, incarcerated persons see reduced access to job opportunities, educational and training programs, and other benefits that may be offered to persons not in safekeeping status. In one example, TPI advocated for a transgender woman who was denied educational opportunities due to her safekeeping status, even though she tried for several years to be released from safekeeping status. When TPI filed a complaint, we were told that her safekeeping status did not prevent her from entering the education program, and that she had been accepted for the program, but could not access it because there was no housing for her on any unit where that program was offered. The more

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<sup>44.</sup> Some reports from our correspondents note that they are told they do not qualify for safekeeping because they are "too smart" or similar reasons. Zollicoffer v. Livingston (4:14-cv-03037) also documents the extensive measures TDCJ goes to in avoiding safekeeping designation: <a href="https://www.courtlistener.com/docket/4394368/zollicoffer-v-livingston/">https://www.courtlistener.com/docket/4394368/zollicoffer-v-livingston/</a>.

<sup>45.</sup> Note that just as TDCJ confusingly describes "protective safekeeping" as "general population," safekeeping designation is also considered "general population" even though safekeeping housing is separate from general population because housing sections are designated for safekeeping persons only.

Also, in a response letter dated August 17, 2022, from TBCJ PREA Ombudsman Cassandra McGilbra (letter not further identified for privacy considerations), McGilbra stated in addressing restrictions on a safekeeping designated individual, that "the agency also has a responsibility of making decisions for [] housing, jobs, and programming [for incarcerated persons] based on sound correctional practices to ensure the [incarcerated person] is overall safe from being victimized or abusive," which serves to document that individuals in safekeeping may experience (TPI would suspect always experience) limitations to privileges and opportunities.

<sup>46.</sup> In a response letter dated August 17, 2022, from TBCJ PREA Ombudsman Cassandra McGilbra (letter not further identified for privacy considerations), McGilbra stated that "[t]he PREA Ombudsman found the McConnell Unit's position not to remove [redacted] from Safekeeping was within the agency's guidelines." This provides a definitive statement that TDCJ refuses safekeeping designation removal, meaning safekeeping designation can be involuntary.





complete explanation was that there was no *safekeeping* housing on the units where the program was offered. Perhaps in a warped sense of logic it may be said that safekeeping was not the reason she was denied, but it is entirely disingenuous to claim that safekeeping status did not prevent her from entering the program. Her safekeeping status was finally relinquished after our complaint (and after she voluntarily de-identifed as transgender in the system so she could access the program), and she entered the program. That was the only impediment to her participation in that program. TDCJ's insistence that "housing availability" instead of the safekeeping designation kept her from the program should be considered deliberate manipulation to avoid PREA documentation and data requirements.

On paper, safekeeping persons may be able to access all the benefits of general population, but in practice the safekeeping population is often segregated in abusive ways at meals, recreation, and other unit movement and programs; and in some cases they are kept from some or all work assignments, this apparently being unit-level practice at some facilities, depending on the administration of the moment. Further, safekeeping housing is often in restrictive housing areas, meaning those housed there are subjected to the same disciplinary environment as persons in separate—or sometimes the same—sections or cell blocks who are there for disciplinary reasons. These prohibitions and disciplinary conditions are sometimes used to harass persons with safekeeping designations, who are often identified as "snitches" and "punks" and other derogatory terms. Safekeeping persons may be denied access to educational opportunities, training programs, and other benefits, sometimes by claiming the denial is not because of the safekeeping designation but for other reasons such as housing, as noted above.

TDCJ also seems to claim that safekeeping designation is not "protective custody" under PREA § 115.43, and that only "protective safekeeping" is "protective custody." This claim is absolutely not consistent with practice or even the definition of the housing designation. TPI also knows of persons who were placed in safekeeping over their objections. And some who initially agreed to the designation may later see no need for continued safekeeping designation. Certainly a person's understanding of their own vulnerability and need for safekeeping can change over time. If the person on safekeeping does not agree they have a continuing need for safekeeping status, then they are in involuntary protective custody, and the documentation requirements under PREA must be met.

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<sup>47.</sup> TPI has received a number of complaints that minimum custody level safekeeping persons and general population persons with a "cool bed score" are housed with medium and close custody persons in restrictive housing sections that are designated for safekeeping and for persons requiring temperature control. Texas Government Code 501.112 prohibits such mixed classifications "unless the structure of the cellblock or dormitory allows the physical separation of the different classifications." It appears this practice is considered not a violation of TGC 501.112 because persons housed in these areas are locked in their cells much of the time, and must be escorted when leaving the cell (standard restrictions in this type of housing, which are disciplinary in nature). This abusive treatment of safekeeping and cool bed persons appears to be surreptitious disciplinary actions meant to discourage requests for safekeeping and suits about excessive heat. Housing in disciplinary environments should certainly be considered in assessments related to PREA protective custody compliance





Likewise, TDCJ seems to claim that safekeeping as a whole is not "involuntary protective custody," apparently because in most cases, people request or agree to be placed in safekeeping designation—at least initially. However, it is certainly not something a person can easily request or volunteer for and be assigned, and in many cases requests for removal of the safekeeping designation are denied, sometimes even after outside advocacy for removal of the safekeeping designation.

Thus safekeeping designation is definitely a type of "protective custody" under the PREA standards, and may be considered "involuntary protective custody" requiring documentation and on-going assessments of continuing need for PREA compliance.

**Lockup for reporting sexual violence:** TDCJ seems to go to some effort to indicate only "protective safekeeping" (custody classification P6 and P7) constitutes "protective custody" or "involuntary protective custody" for PREA purposes, and TDCJ protective safekeeping can constitute PREA protective custody but appears to be seldom used for that in actual practice. As explained above, "safekeeping designation" is definitely "protective custody" under PREA when related to addressing risk for sexual violence, and may also constitute "involuntary protective custody." Likewise, lockup for reporting sexual violence is "protective custody" under PREA, and often constitutes "involuntary protective custody" under PREA. In almost every report we have had documenting a TDCJ response to a report of sexual abuse, if the report is not ignored, the person reporting is placed in a separate cell and isolated for an Inmate Protection Investigation (IPI). 48 This probably generates documentation that "all available alternatives" have been reviewed, but in practice it is an automatic action that is done even if the person reporting states definite reasons that they are in no further danger. TPI has even documented this happening when someone reported sexual abuse at a different unit and there was no conceivable danger at the current unit. In these cases, there is certainly no legitimate evaluation of "all available alternatives," regardless of staff claims or policy. IPI lockups also routinely last for more than 24 hours, and are often handled as disciplinary actions, with the person being strip searched and their property taken (the latter is often the consequence of being locked up immediately, without being allowed to pack their property, so ostensibly they are not "denied" their property, although that and property loss are effects of the action). Since IPI lockups are usually in the same areas as restrictive housing, they also routinely entail the same security restrictions that apply to those being held for disciplinary reasons. Such lockups may be called "restrictive housing," "transient housing," and other terms. Clearly such treatment discourages reports of sexual victimization.

TPI also points out that in the Final Rule, the DOJ makes it clear that such lockups and other segregated housing for reporting sexual abuse is included under PREA § 115.68, which is often the driver behind these initial placements in segregated housing and requirements for PREA § 115.43 compliance:

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<sup>48.</sup> This term has varied over time. What is currently called an IPI was until about 2022 identified as an OPI for "offender protection investigation," and in the past has been known as an LID, or "life in danger" investigation.





Section 115.66 in the proposed rule (now renumbered as  $\S$  115.68) provided that any use of segregated housing to protect an [incarcerated person] who is alleged to have suffered sexual abuse shall be subject to the requirements of  $\S$  115.43.<sup>49</sup>

**Protective Management:** Some PREA audit reports for TDCJ facilities have mentioned a housing designation called "protective management." The housing designation is described as segregated housing for protection. TPI has not ever seen this phrase in any other context, although we do believe there are several additional segregation categories not covered here. We mention this here because it appears to be directly related to PREA compliance with PREA §§ 115.43 and 115.68, but is not always covered in audit report assessments. It appears that this "protective management" designation should also be considered to be PREA protective custody, and sometimes may constitute involuntary protective custody.

This discussion shows that without a doubt, TDCJ "protective safekeeping" is absolutely not the only classification that meets the "protective custody" definition under the PREA standards, nor is it the only classification that can be considered "involuntary protective custody." This discussion should also show the extent of the manipulation that TDCJ administration has engaged in to deliberately misrepresent PREA compliance and mislead PREA auditors, in some cases with what should be considered fully knowledgeable participation of the auditors. Without a doubt, protective custody and involuntary protective custody are sometimes necessary and of great benefit to survivors of sexual abuse and those threatened with sexual violence. But TDCJ manipulates this practice for the benefit of the agency—and without necessary transparency, often causes great harm and compounds the sexual violence a survivor has experienced by adding personal and systemic violence from the staff and agency.

#### PREA § 115.43, Protective Custody

PREA § 115.43 concerns segregation practices for persons at high risk of sexual victimization, and due to potentially confusing language in the standards—and the way TDCJ has created deliberate confusion around what constitutes segregation in TDCJ—the requirements must be considered carefully. Each provision is discussed separately here.

(a) [Incarcerated persons] at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the [incarcerated person] in involuntary segregated housing for less than 24 hours while completing the assessment.

This provision covers housing that is both separate due to a risk of sexual violence, and that is considered involuntary. This is not limited to any specific housing category or classification or location, it includes any separation for a PREA concern that is not done with the concurrence of the person being separated. In TDCJ, this can include all types of transit and restrictive housing,

49. Federal Register (2012): vol. 77 no. 119, Fed. Reg. page 37154 (June 20, 2012).

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SOS, CDO, any type of "lockup," "protective management," and all other types of separation such as safekeeping and protective safekeeping (see the section below concerning TDCJ types of protective custody). Such separation must be supported by an assessment that there is no other safe alternative to separation from a likely abuser within 24 hours, and PREA § 115.43(d) provides the specifics that must be included in the documentation of that assessment.

Regardless of policy, reports to TPI indicate that placement in involuntary segregation due to immediate endangerment seldom considers any other options outside segregation, often involuntary. This practice in effect serves to punish persons for reporting endangerment and to discourage reporting. Concerning high risk of sexual victimization that is not imminent but may be an ongoing risk due to a person's presentation or other factors, TDCJ often fails to separate by providing safekeeping designation to persons who repeatedly experience sexual violence at multiple facilities, nearly always claiming a unit transfer will solve the issues.

In the assessment of this provision, the audit report refers to documents solely involving restrictive housing and protective safekeeping, which do not adequate cover the policy under which at-risk persons may be housed in segregation or involuntary segregation.

- (b) [Incarcerated persons] placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document:
  - (1) The opportunities that have been limited;
  - (2) The duration of the limitation; and
  - (3) The reasons for such limitations.

This provision does not limit segregation to being involuntary, so it covers all segregated housing for the purpose of separating persons at risk of victimization from potential abusers. Again, this is not limited to any specific housing category or classification or location, it includes any separation, voluntary or involuntary, of a person at risk for victimization from potential abusers. This includes all types of transit and restrictive housing, SOS, CDO, any type of "lockup," "protective management," "safekeeping designation," "protective safekeeping," and all other types of separation. All such placements must document restrictions to "programs, privileges, education, or work opportunities" per the specified requirements.

TPI correspondence relates that some units have a blanket prohibition against safekeeping designated persons being assigned job duties, even when there is no endangerment from the job assignment and work assignments, and when work assignments are desired by the incarcerated person. Safekeeping designation also results in exclusion from many programs, privileges, education, and work opportunities, with TDCJ claiming that it is not protective custody that prohibits the exclusion but the lack of safekeeping housing on units with those programs. That is a specious claim at best. Regardless, safekeeping designation is the cause of the exclusion, and





the exclusion must be documented according to provision b requirements. TPI believes these requirements are not being met by claiming it is not safekeeping that causes the exclusion.

The assessment of compliance with this provision fails to consider anything but restrictive housing, which is a disciplinary housing and would not even encompass persons segregated under the auspices of this provision.

(c) The facility shall assign such [incarcerated persons] to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.

This provision is limited to involuntary segregation, again encompassing any type of transit and restrictive housing, SOS, CDO, any type of "lockup," "protective management," and all other types of separation where the incarcerated person does not specifically volunteer for that housing. In general, any such involuntary segregation should be for no more than 30 days.

It also seems reasonable to consider in an audit how a facility handles persons who once agreed with safekeeping designation as an appropriate means of separation from likely abusers, but who have changed their mind and want to be released from safekeeping. Once a request for removal is submitted, continued designation as safekeeping should be considered involuntary, and it must be reassessed every 30 days. The auditor did not assess any safekeeping designated persons for this, a deficiency in this audit.

In the discussion of this provision, the audit report states that not one person was assigned to segregated housed for longer than 30 days. This statement is almost certainly false. On paper, the housing designation will change within 30 days, but the actual physical placement in segregated housing often does not change for many weeks. This claim of the audit report is almost certain to be false.

- (d) If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document:
  - (1) The basis for the facility's concern for the [incarcerated person's] safety; and
  - (2) The reason why no alternative means of separation can be arranged.

This provision defines the documentation required for PREA § 115.43(a) placements in involuntary segregated housing. The audit report failed to include any consideration of this provision. However, because the facility manipulates definitions of segregated housing to avoid documentation requirements, compliance with this provision is also highly likely deficient.

(e) Every 30 days, the facility shall afford each such [incarcerated person] a review to determine whether there is a continuing need for separation from the general population.

This provision does not state that it is only for involuntary segregation, and because other provisions specify where applicable to involuntary segregated housing, this provision must be read as encompassing all segregation for risk of sexual victimization. Thus all persons held in any type of segregated housing, voluntary or involuntary, for risk of victimization from

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potential abusers—including safekeeping, protective safekeeping, all types of transit and restrictive housing, SOS, CDO, any type of "lockup," "protective management," and all other types of separation—are to be reviewed every 30 days to determine if there is a continuing need for separation.

TPI believes it is highly unlikely that TDCJ provides a review of each person in safekeeping designated housing a review of the continuing need for separation every 30 days.

Due to these very serious deficiencies in the audit report, TPI asserts that it cannot be determined whether or not Murray Unit is complaint with this standard, and that it is almost certain that the facility is not compliant.

# PREA § 115.52, Exhaustion of Administrative Remedies

- (d)(1) The agency shall issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance.
  - (2) Computation of the 90-day time period shall not include time consumed by [incarcerated persons] in preparing any administrative appeal.
  - (3) The agency may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The agency shall notify the [incarcerated person] in writing of any such extension and provide a date by which a decision will be made.
  - (4) At any level of the administrative process, including the final level, if the [incarcerated person] does not receive a response within the time allotted for reply, including any properly noticed extension, the [incarcerated person] may consider the absence of a response to be a denial at that level.

The discussion of this provision of PREA § 115.52 states that "[o]verwhelmingly, [incarcerated persons] interviewed reported that he was [sic, probably should be they were] never advised of the outcome of the investigation." The auditor then simply dismisses this "overwhelming" interview response by simply denying it. Without a more substantive response to such information, it must be considered that these interview responses document a failure to comply with this provision.

TPI asserts that the audit report documents a failure to comply with PREA § 115.52, with no requirement for a corrective action.

### PREA § 115.64, Staff First Responder Duties

- (a) Upon learning of an allegation that an [incarcerated person] was sexually abused, the first security staff member to respond to the report shall be required to:
  - (1) Separate the alleged victim and abuser;
  - (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;

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- (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and
- (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

The audit report documents that in only 18 out of 22 reports of sexual abuse did first responders separate the victim and abuser, but provides no explanation of why the other reports did not require separation, and no corrective action was required.

The audit report also indicates that only slightly over half of the reports (12 out of 22, 55%) were within a time period that would allow collection of physical evidence (apparently 96 hours in TDCJ), yet only three of those 12 (25%) were provided SANE exams (see the discussion of PREA § 115.21). These discrepancies are not adequately—or rather not at all—explained in the audit report.

(b) If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.

The audit report documents that on four occasions, the first responder was not a security staff person, yet does not discuss whether or not compliance with this provision was met.

Based on these clearly problematic issues documented in the audit report, TPI asserts that it is very likely Murray Unit is not compliant with this standard.

### PREA § 115.67, Protection Against Retaliation

The audit report claims that in the 12 months prior to the audit, in spite of there being at least 27 allegations of sexual abuse and sexual harassment, there was not one instance of retaliation reported by either an incarcerated person or staff. Although we have no definite indication of this being false, logic and common sense indicate this is very hard to believe, especially since almost every PREA audit report TPI has reviewed has stated there are no instances or retaliation, yet we regularly receive reports of serious and consistent retaliation.

#### PREA § 115.68, Post-Allegation Protective Custody

Any use of segregated housing to protect an [incarcerated person] who is alleged to have suffered sexual abuse shall be subject to the requirements of § 115.43.

The standard response in TDCJ, if there is a response, when someone reports an incident of sexual violence or a risk of sexual victimization is to place the person reporting in transit or restrictive housing for an IPI (which requires PREA § 115.43 consideration, in some cases via

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PREA § 115.68), and that placement generally lasts several days to sometimes weeks (although the designation often changes during that time to obscure the extended stay in segregated housing). Such housing also involves separation from and loss of property, as well as loss of opportunities, even though very often a cell change to a different section could address the issue while the investigation is ongoing. It is highly unlikely that of the [number] reports of sexual abuse, none were placed in segregated housing involuntarily during the preceding 12 months. Most people reporting such treatment to TPI indicate the placement in such segregated housing is often done involuntarily to discourage reports of sexual violence.

As with the discussion under PREA § 115.43, TDCJ engages in manipulation of what constitutes "protective custody" by making misleading statements about what "protective safekeeping" and "safekeeping designation" are. Also, in TPI's experience, TDCJ automatically places all or almost all persons who report sexual violence in involuntary protective custody (restricted housing for inmate protection investigation, or IPI) regardless of whether there are alternatives to such placement or not. TPI receives regular reports of persons not wanting to report incidents due to not wanting to be placed in segregation.

Regardless of the claims of compliance in the audit report, TPI asserts that Murray Unit is with near certainty not compliant with this standard.

# PREA § 115.71, Agency Investigations

The discussion of PREA § 115.71(h) states that there was one allegation that was "referred for prosecution," but this data was not provided in the facility data section, calling into question the accuracy of even the data collection portion of the audit, data collection at Murray Unit, or indicating other data-related problems.

#### PREA § 115.72, Evidentiary Standard for Administrative Investigations

The agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

This audit report states "The Texas Department of Criminal Justice **does impose a standard higher than a preponderance of the evidence** in determining whether allegations of sexual abuse or sexual harassment are substantiated" (emphasis added).

This documents a failure to comply with the standard, without requiring a corrective action.

In all likelihood, the auditor will claim this to be a typographic error, but it is more likely conveyance of a subconscious truth.

PREA § 115.72 requires that no standard of evidence higher than a preponderance of the evidence (greater than a 50 percent chance of occurrence—essentially equal to a coin toss) be used in substantiating an allegation of sexual abuse.





It is difficult to understand why anyone would consider a claim that the preponderance of evidence standard was truthfully stated when out of either 22 reports of sexual abuse, not one of those reports had a greater chance of occurring than a 50/50 chance. Not one of those had even a coin toss's chance of having occurred. Such low rates of substantiation indicate serious manipulation of the evidence on the part of the investigators, and a failure to appropriately consider the preponderance of evidence standard.

Due to the extremely low rates of substantiated allegations, as reported in the most recent PREA Ombudsman report for calendar year 2023, it is highly unlikely that a preponderance of evidence standard is used anywhere in TDCJ. In that report, for allegations against staff, only 7% of 505 sexual abuse allegations were substantiated, 1% of 86 sexual harassment allegations were substantiated, and 0% of 147 voyeurism allegations were substantiated. These dismal accountability ratings are actually an improvement over the prior year. Amazingly, TDCJ seriously claims that more than one in three (186 of 505, or 37%) of the allegations of staff on incarcerated persons sexual abuse were false reports, a statement truly beyond belief.

For allegations against other incarcerated persons, only 1.4% of 426 allegations of "nonconsensual sexual acts" were substantiated, and only 2.9% of 421 reports of "abusive sexual contact" were substantiated.<sup>52</sup> Regardless of one's concerns about possible false reporting, these extremely low rates of substantiation indicate a preponderance of evidence is not the standard being used anywhere in the TDCJ system.

For Murray Unit, the data are even more remarkable. The auditor noted that for allegations against staff, 0% of 16 sexual abuse allegations were substantiated, 0% of 2 sexual harassment allegations were substantiated, and voyeurism allegations were not reported. For allegations against other incarcerated persons, 0% of 6 allegations of sexual abuse were substantiated, and 0% of 3 allegations of sexual harassment were substantiated. Not one allegation of sexual violence was substantiated.

Regardless of one's concerns about possible false reporting, these unbelievably low rates of substantiation indicate a preponderance of evidence is not the standard being used, that it is likely not all allegations are being appropriately reported or investigated, and that those that are being investigated are being manipulated or badly investigated.

Based on the information provided in this audit report, it is clear that Murray Unit is not compliance with the PREA § 115.72 standard.

#### PREA § 115.87, Data Collection

(a) The agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.

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<sup>50.</sup> Texas Department of Criminal Justice, Safe Prisons/PREA Annual Report, 2023, 26.

<sup>51.</sup> Texas Department of Criminal Justice, Safe Prisons/PREA Annual Report, 2023, 26.

<sup>52.</sup> Texas Department of Criminal Justice, Safe Prisons/PREA Annual Report, 2023, 26 - 29.





- (b) The agency shall aggregate the incident-based sexual abuse data at least annually.
- (c) The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.
- (d) The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.
- (e) The agency also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its [incarcerated persons].
- (f) Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

Although the audit report refers to the agency audit for this standard, auditing the standard is also relevant at the facility level. As pointed out in various sections above, particularly in the facility information section, there is either a problem with the audit data, the data provided by the facility, or somewhere else. TPI has access to very little of the relevant data for this audit, so when we find any data discrepancies, it is indicative of potentially much larger problems.

Data problems are also documented by the Texas Sunset Commission in their 2024 audit:

Limitations in TDCJ's data management systems often cause the agency to be unsure of the reliability of its data, which can obscure the size and scope of serious issues that occur within the agency and make it difficult to appropriately remediate such issues. The agency has some quality control processes to improve data reliability, but these processes are not standardized and are not always consistently followed, limiting their usefulness. TDCJ lacks master data management processes to ensure that data in its master records are consistent and correct, resulting in time-intensive processes to clean data any time it is pulled from the system and preventing TDCJ from having a single source of truth for data requests. During the review, Sunset staff found several examples of unreliable data.<sup>53</sup>

[in large bold text] TDCJ's inefficient, siloed, and outdated data governance leads to errors that can hinder the agency's ability to ensure safety to inmates, staff, and the public.<sup>54</sup>

Based on the discrepancies and indications of data collection problems, TPI asserts that it cannot be determined based on this report whether or not Murray Unit is compliant with this standard.

#### PREA § 115.401, Frequency and Scope of Audits

(m) The auditor shall be permitted to conduct private interviews with [incarcerated persons], residents, and detainees.

TPI has received reports that these random and targeted interviews include TDCJ staff observing and listening to the responses provided to auditors, and in some cases interviewees

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<sup>53.</sup> Texas Sunset Advisory Commission, *Texas Criminal Justice Entities*, 62 – 63.

<sup>54.</sup> Texas Sunset Advisory Commission, Texas Criminal Justice Entities, 64.





have been warned of retaliation if they do not provide "appropriate" responses. Where this occurs, this is a violation of PREA § 115.401(m). Per the 2022 Auditor Handbook:

The purpose of conducting one-on-one interviews with persons confined in the facility is to provide a safe space where they can freely discuss their experiences in and perspectives of the facility on sensitive issues related to sexual safety.<sup>55</sup>

TPI does not have any explicit evidence that this occurred during this audit, but we feel that without express statements that the interviews were not in the presence of staff and that all interviewees confirmed they were not advised, threatened, or coerced to provide any type or manner of responses, compliance cannot be presumed.

# PREA § 115.402, Auditor Qualifications

- (c) No audit may be conducted by an auditor who has received financial compensation from the agency being audited (except for compensation received for conducting prior PREA audits) within the three years prior to the agency's retention of the auditor.
- (d) The agency shall not employ, contract with, or otherwise financially compensate the auditor for three years subsequent to the agency's retention of the auditor, with the exception of contracting for subsequent PREA audits.

The 2022 Auditor Handbook places a strong emphasis on the audit process being important to engendering and maintaining public trust in the PREA process.

Because PREA auditors are DOJ-certified, they are in a unique position of public trust with the ability to impact public confidence in the integrity of the PREA audit function. Many stakeholders rely on this audit process and its results, including federal, state, local, and private agencies that operate or oversee confinement facilities; facility staff; treatment and service providers; community-based advocacy organizations; courts; attorneys; and people in confinement and their families.<sup>56</sup>

TPI believes that for at least three reasons, this audit does not contribute to this role of maintaining public trust. Influence or potential influence by the contracting entity appears to undermine public trust due to potential, if not actualized, conflicts of interest. General cronyism within prison systems exerts undue influence on auditors, a "fox guarding the hen house" situation that fails to promote public trust. And, auditor bias is apparent across the scope of this and other PREA auditor reports, indicating protection of the status quo is the purpose, not auditing PREA compliance. The following provides details about how these are eroding public trust in the PREA process.

DOJ-certified PREA auditors have a responsibility to avoid any conflicts of interest, or the appearance of any such conflict. Conflicts of interest may adversely impact an auditor's ability, or

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<sup>55.</sup> U.S. Department of Justice, PREA Management Office, PREA Auditor Handbook, 59.

<sup>56.</sup> U.S. Department of Justice, PREA Management Office, PREA Auditor Handbook, 14.





perceived ability, to conduct high quality, reliable, objective, and comprehensive audits. Therefore, auditors should avoid any personal or financial arrangements that could create a conflict of interest, or the appearance of a conflict of interest, that would lead a reasonable person to question their objectivity during the conduct of a PREA audit.<sup>57</sup>

It appears that all Texas prisons are audited through contract with Corrections Consulting Services, LLC (CCS). In the past, CCS only provided PREA audits, and as such potential for conflicts of interest were limited. However, in approximately 2022, CCS started providing a wider range of services, including what are listed on the web site as "accreditation support," "policy and procedure review," "security audits," "staff training," and "technology integration" in addition to "PREA auditing." This expansion means that PREA auditors under contract to CCS may be auditing work by other CCS staff or subcontractors, a definite conflict of interest. In addition, the increase in services could increase direct or indirect or inferred pressure from CCS on PREA auditors to find facilities in full compliance to encourage contracts for additional services. It is difficult to understand why this is allowed as it appears to be an obvious conflict of interest that undermines public trust.

General cronyism within and across prison systems also serves as a basis for conflicts of interest potentially affecting all PREA auditors with current or past connections to the prison system. It is extremely common for prison as well as law enforcement staff to develop an "us against them" mentality that results in the view that what prison staff do and the decisions they make must be defended against all outside questioning. And too many PREA auditors are insiders refusing to meaningfully critique the status quo of the prisons they operate. More is published about this in police culture, but it is clearly woven throughout the fabric of prison staff culture as well.

At the Academy, he was indoctrinated into an "us versus the world" mentality and learned just how deep such dehumanization ran. He said he learned the "colloquial terms for people you encounter, such as 'doper,' 'skell' [short for skeleton], 'mope,' and 'thug.'" He said he understands now how they carry "clear racial undertones," but explained that "it doesn't take long for a recruit to be totally enmeshed into their new cop identity." As a young officer, he embraced police culture, which he now describes as cult-like.<sup>58</sup>

Arguably, such clique or prison culture identities may constitute a kind of "personal relationship" identified as a potential conflict in the 2022 Auditor Handbook.

PREA § 115.402(c) and (d) prohibit an auditor from receiving financial compensation from the agency being audited within three years prior to and after the audit, which is warranted but not sufficient. Due to the "we protect our own" mentality common among persons affiliated with prison operations, TPI believes that auditors should be barred from receiving any financial compensation directly or indirectly from any prison operator or associated agency, at least for

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<sup>57.</sup> U.S. Department of Justice, PREA Management Office, PREA Auditor Handbook, 19.

<sup>58.</sup> Michael J. Moore, "What an Ex-Cop Learned in Prison About Police Culture," *The Nation*, December 31, 2020, <a href="https://www.thenation.com/article/politics/toxic-culture-police-prison/">https://www.thenation.com/article/politics/toxic-culture-police-prison/</a>.





the last three years, due to this potential conflict of interest. Additionally, audit funding must be separate from the system being audited to avoid this conflict of interest.

This auditor can be seen to have completed 8 PREA audits in the PRC audit database for which a final report is available (including Murray Unit), and not one includes a corrective action. By contrast, the 2022 Auditor Handbook states that "the PREA audit was built on the assumption that full compliance with every discrete provision would, in most cases, require corrective action."<sup>59</sup>

Perhaps these audits are influenced by the deep connections this auditor has to the prison industrial complex. The auditor is on staff at the incredibly problematic Arizona Department of Corrections, and has been under the influence of that environment since 1998.

Such potential for conflicts of interest do not engender public trust, but instead strongly indicate a pay-for-compliance service that is focused on protection of the status quo, profit for the prime contractor, and easy compliance, not accountability. Even if the letter of the PREA standard is followed, the spirit of avoiding conflicts of interest that degrade public trust is not.

# Conclusion

Table 1 of this comment letter provides a summary of deficiencies identified in this audit report, described in the main body of this comment letter. Audit deficiencies include the reporting of questionable information, reporting of false information, use of problematic problematic language, and apparent failures to comply with minimum audit requirements. In addition, this comment letter documents questionable information in the discussion of at least five standards, false information for at least two standards, that two standards were assessed as exceeding compliance with inadequate justification, and vague or inappropriate discussion of two standards. Based on these deficiencies, it appears that compliance is questionable for at least eight standards, there is an indication of compliance is not met for five standards, and the report documents a failure to comply with two standards without corrective action required.

TPI requests that the following actions be taken:

- That this audit report be considered deficient, and not be considered to support state compliance for the purpose of PREA § 115.501 certification of state compliance.
- That additional measures be taken to train and assist the auditor in compliance considerations and supporting documentation.
- That auditors give serious consideration to information about PREA compliance concerns provided by incarcerated persons in interviews, and to provide justification for dismissing such information.
- That highly problematic language in the Auditor Compliance Tool that ignores trauma and encourages sexual violence against transgender, nonbinary, and gender

59. U.S. Department of Justice, PREA Management Office, PREA Auditor Handbook, 41.

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nonconforming populations be amended to eliminate bias, stigmatizing constructs, and discrimination.

- That at a minimum, PREA §§ 115.21, 115.43, 115.52, 115.64, 115.68, and 115.72 be considered to need corrective action at the next audit.
- That at a minimum, additional information be provided to support a finding of compliance for all remaining compliance issues mentioned in this comment letter.

I hope that these issues can be addressed in the interest of increasing the safety of all trans and queer persons, and in the interest of more full compliance with PREA standards requiring "zero tolerance toward all forms of sexual abuse and sexual harassment" and legitimate efforts to prevent, detect, and respond to such conduct.

Sincerely

Nell Gaither, President Pronouns: she/her/hers Trans Pride Initiative

cc: Department of Justice, PREA Management Office

TDCJ ED Bryan Collier

TBCJ PREA Ombudsman Cassandra McGilbra

Murray Unit Senior Warden Kamilah Coger

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Pete Flores, Chair, Senate Committee on Criminal Justice

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Lucy McBath, House Judiciary Committee, Subcommittee on Crime and Federal Government Surveillance

Mary Gay Scanlon, House Judiciary Committee, Subcommittee on the Constitution and Limited Government