



PARTICIPANT GUIDE

Satellite and
Internet
Broadcast
April 9 – 10, 2014
Program 14C9002



NATIONAL INSTITUTE OF CORRECTIONS MISSION

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LGBTI Populations: Intake – Creating a Culture of Safety

Program Contact Information:

Prior To Broadcast Day

1-800-995-6429, Follow prompts for “Academy Division”

On Broadcast Days – April 9 and 10, 2014

9am-12pm Pacific (12 – 3pm Eastern)

See the live telecast at www.nicic.gov/viewbroadcast

Join the online live chat discussion during the program at

<http://nicic.gov/LiveChat>

Participate in the Live On-Air Discussion via:

Phone: 1-800-278-4315

FAX: 509-354-7714

Email: nic@ksps.org

Continuing Education Units

CEUs are available through Eastern Washington University.

1. Site Coordinator should print out the EWU registration form, program evaluation form, participant sign-in sheet and participant sign-out sheet. (Forms follow this page in the Participant Guide.)
2. Participants sign-in, complete the CEU registration form, take part in teleconference, fill out the evaluation and sign out. Submission of sign –in and sign-out sheets is required by IAECT which approves CEUs.
3. At conclusion of the program, the site coordinator should mail all forms and a fee of \$20.00 payable to EWU for each participant who desires CEUs.

Mail Forms to;

Barbara Papke, Program Specialist
Eastern Washington University
300 Senior Hall
Cheney, WA 99004-2442
Phone: 509-359-6143

NOTE: *Coordinators should only send in forms if there are participants who are applying for CEUs.*

4. Once EWU receives and processes the registration forms, each participant will receive via mail a CEU form which details course information and each participant's information.



**Office of Continuing Education & Professional Advancement
Credit Course Workshop Evaluation**

Workshop: LGBTI Populations: Creating a Culture of Safety

Location: Satellite Broadcast

Date: April 9-10, 2014 **Time(s):** 9:00am – 12:00 p.m. (Pacific Time)

Facilitator: National Institute of Corrections

Originator: EWU

Your feedback is important. It is the basis of our continuous improvement to ensure that programs meet or exceed your expectations. Thank you for taking the time to complete this evaluation.

Response Code

5-Excellent 4-Good 3-Adequate 2-Poor 1-Desire changes

Instructor Effectiveness

Knowledge of subject	5	4	3	2	1
Ability to teach according to the student's level	5	4	3	2	1
Organization of class meeting	5	4	3	2	1
Ability to answer questions	5	4	3	2	1
Ability to encourage participation	5	4	3	2	1

Course Information

Written course objectives met expectations	5	4	3	2	1
Course written materials contributed to learning	5	4	3	2	1

Facilities and General

Comfort of classroom for learning	5	4	3	2	1
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Overall

Overall, I rate the learning experience	5	4	3	2	1
I would recommend this course to others	Yes				No

Comments: Suggestions for improvement

THANK YOU

Course Description:

Good correctional practice includes applying principles of risk-based classification to all adult and juvenile offenders. To ensure a culture of safety, understanding and practicing respectful, appropriate and professional language with LGBTI and gender non-conforming populations at intake is important. Intake personnel are “gatekeepers” for correctional systems and facilities and are a critical component in the information gathering process. If information obtained at intake is inaccurate or misleading, it can have dire consequences and affect safety. Staff must have clear guidelines allowing for the consistent identification of LGBTI offenders and the collection of key information. Establishing good communication at intake is essential to obtain the necessary information for appropriate housing, medical and mental health referrals, programs, security level, and services in the community. During this broadcast we will demonstrate effective and professional communication with LGBTI offenders during intake and make recommendations to improve the intake process. This 2-day, 6-hour live online training broadcast runs for 3 hours each day and is brought to you by the National Institute of Corrections.



Course Objectives:

- Establish the relevance of initial information-gathering and how it impacts LGBTI populations from intake to successful reentry
- Provide recommendations and good correctional practice examples to ensure a culture of respect and safety at intake for LGBTI populations and correctional staff
- Provide practical examples and demonstrate professional communication with LGBTI populations at intake

Overview of Satellite/Internet Broadcast

Day 1

Welcome and Introduction

Housekeeping

Video Web Streaming

Closed Captioning

CEUs

Broadcast Schedule

Call-in Process

Overview

Content

Materials

Pre- and Post-work

Purpose

Segment 1 – Overview of Broadcast Content

Break

Segment 2 – Intake Setting and Interviews

Closing and Day 2 Preview

Off-Air Activities



Overview of Day 2

Welcome and Introduction

Housekeeping

Video Web Streaming

Closed Captioning

Broadcast Schedule

Call-in Process

Questions and Answers

Segment 3 – Intake Questioning

Break

Segment 4 – Recommendations and Resources

Closing

Off-Air Activities

Resources Available



Presenter Bios



Lorie Brisbin is a Correctional Program Specialist in the Community Services Division of the National Institute of Corrections (NIC). She is a recognized authority in the area of sexual violence in correctional settings and has expertise in both offender and victim perspectives. Prior to coming to NIC in 2010, she was employed by the Idaho Department of Correction for ten years, serving as a probation/parole officer, statewide Parole Coordinator, Transitions Coordinator, PREA Program Coordinator and as an investigator in the Office of

Professional Standards. Throughout her career Lorie has demonstrated a commitment to the fair and equitable treatment of both staff and offenders. She loves a challenge and looks for opportunities to challenge others to excel.



Marcia Morgan, Ph.D. is a criminologist, writer, trainer and researcher from Bend, Oregon who has worked in the area of sexual violence and gender issues for 40 years. She has been involved with PREA since its inception, including the standards, and has trained extensively on this topic throughout the country. She has written over 20 national training curricula on PREA, operational practices, women offenders, LGBTI issues, girls in juvenile justice and child sexual abuse for NIC and other agencies. Marcia and a colleague were the

original developers of the “Anatomically-Correct Dolls”, now used in 40 countries worldwide for sex crime investigation interviews with child victims. Marcia is a former correctional officer and law enforcement officer who headed up one of the first all-female sex crime response teams. She is passionate about social justice and fairness. When vulnerable populations experience sexual violence, it not only traumatizes a human life but exposes an inequity in a culture that is not protecting all its members.



Kuma J. Deboo is a criminal justice consultant after retiring from the Federal Bureau of Prisons in May 2012. Prior to retirement, she was the Warden at three Federal Correctional Institutions. During her 22-year career with the Bureau of Prisons, Deboo held positions of increasing responsibility. Kuma is passionate about this issue because she believes it’s the right thing to do! She has been an ally of the LGBTI community for decades - as a sister, cousin, friend and co-worker. Kuma believes that it’s time for corrections to ensure

appropriate treatment of all offenders – just as we would want our family and friends treated.



Mykel Selph is a Criminal Justice Consultant at The Moss Group, Inc. where her current concentration is criminal justice reform in the areas of gender, the LGBTI population, and sexual safety in correctional institutions. Mykel's corrections career began at the Cook County Juvenile Temporary Detention Center in Chicago and is centered on advocacy and services for at-risk individuals. Mykel is passionate about all things related to social justice, particularly the needs and rights of the LGBTI community. She views freedom of expression as a fundamental human need.



Angela Willis has over 12 years with the Denver Sheriff Department, 6 years of that in the Classification Unit. Willis currently serves as a board member with the Transgender/Gender Variant Review Board and helped write the Transgender and Gender Variant Department Order. Willis also delivers training for current officers and recruits on the Department Order. As a gay woman, Angela feels that all LGBTI members should receive fair and equal treatment in the criminal justice system.



Wendy Williams, Ed.D. is the Director of Training for the Alabama Department of Corrections. Wendy has over 27 years of experience working in the criminal justice system with extensive experience in education and professional development as well as the implementation of the PREA standards. Her passions include contributing to an agency culture that encourages an environment of learning and promotes good correctional practice to sustain safety and respect for all offenders.



Jim Wiseman is currently the Chief of Staff Training for the Missouri Department of Corrections and manages the training for more than 11,000 MDOC employees. Jim has worked in Corrections for more than 29 years-working as a Corrections Officer, Corrections Sergeant, Institutional Training Officer, Academy Training Officer, Regional Training Administrator and now as Chief of Staff Training. Jim is passionate about delivering the necessary training to ensure the safety of staff and the offender population they supervise.

Icons Used in this Manual



Used when the off-site audience will be asked to phone in responses to the activity.



Used when the off-site audience will take notes based on the presentation or discussion.



Used when the off-site audience is encouraged to participate in the live on-air discussion via email or chat.

Activity Instructions:

Many of the activities in this program will direct participants to work in small groups. However, all of these activities can be done by individuals if you are not part of a group. To gain the maximum benefit from this course we strongly urge you to complete all the activities, including the off-air activities and Action Plan at the end of the course.

Definition of Terms

Asexual: a person who is not romantically or sexually attracted to any gender

Bisexual: a person who is romantically or sexually attracted to more than one gender or sexual category

Gay: commonly refers to men typically attracted to other men

Gender: a socially constructed concept classifying behavior as either “masculine” or “feminine,” unrelated to one’s external genitalia

Gender expression: a person’s expression of their gender identity, including appearance, dress, mannerisms, speech, and social interactions

Gender identity: distinct from sexual orientation and refers to a person’s internal, deeply felt sense of being male or female

Gender non-conforming: gender characteristics and/or behaviors that do not conform to those typically associated with a person’s biological sex

Gender “norms”: the expectations associated with “masculine” or “feminine” conduct, based on how society commonly believes males and females should behave

Gender variant behavior: conduct that is not normatively associated with an individual’s biological sex

Heterosexual: sexual or romantic attraction to a sex differing from one’s own.

Homosexual: sexual, emotional, and/or romantic attraction to persons of the same sex

Intersex: a condition in which a person is born with external genitalia, internal reproductive organs, chromosome patterns, and/or an endocrine system that does not fit typical definitions of male or female

LGBTI: acronym for a group of sexual minorities including lesbian, gay, bisexual, transgender, questioning and intersex individuals

Lesbian: commonly refers to women typically attracted to other women

Questioning: active process in which a person explores her or his own sexual orientation and/or gender identity and questions the cultural assumptions that they are heterosexual and/or gender conforming

Sex: one's anatomical make-up, including external genitalia, chromosomes, and reproductive system

Sexual identity: the sex that a person sees themselves as. This can include refusing to label oneself with a sex

Sexual orientation: romantic and/or physical attraction to members of the same or different sex

Transgender: a person whose gender identity differs from their birth sex

Transgender girl: a person whose birth sex was male but who understands herself to be, and desires to live her life as, a female

Transgender boy: a person whose birth sex was female but who understands himself to be, and desires to live his life as, a male

Transsexual: a person whose physical anatomy does not match his or her gender identity, and seeks medical treatment (sex reassignment surgery or hormones)

Transvestite: a person who engages in gender non-conforming behavior, such as adopting the gender expression of the opposite sex for purposes of sexual or emotional gratification, but does not necessarily consider their gender identity to be different from their biological sex

Two spirit: a term used by many Native Americans to identify LGBTI and gender variant persons within their community. Historically, in some Native American traditions, two spirit people were viewed as privileged and sacred

Segment 1: Foundation and Overview of Content

Objective

In this segment, we will present general information and an overview of broadcast content.



Why this topic and why now?





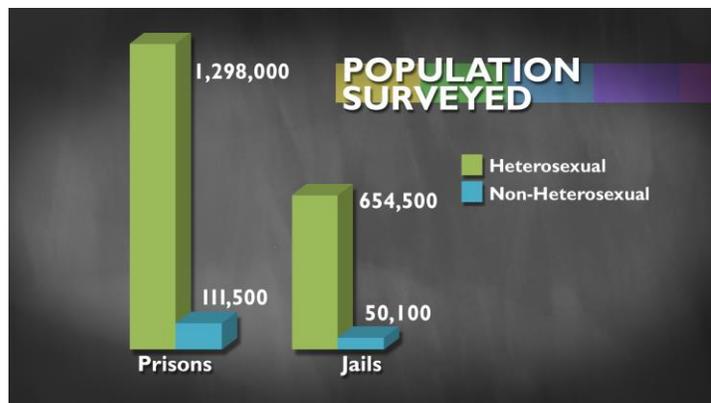
How large is the population of LGBTI offenders?



(Allen J. Beck, Marcus Berzofsky, Rachel Caspar, Christopher Krebs, Bureau of Justice Statistics, NCJ 241399, Sexual Victimization in Prisons and Jails Reported by Inmates, 2011-12 (2013), available at <http://www.bjs.gov/content/pub/pdf/svpjri1112.pdf>)



If such a small percentage of the overall population, why is there so much concern?

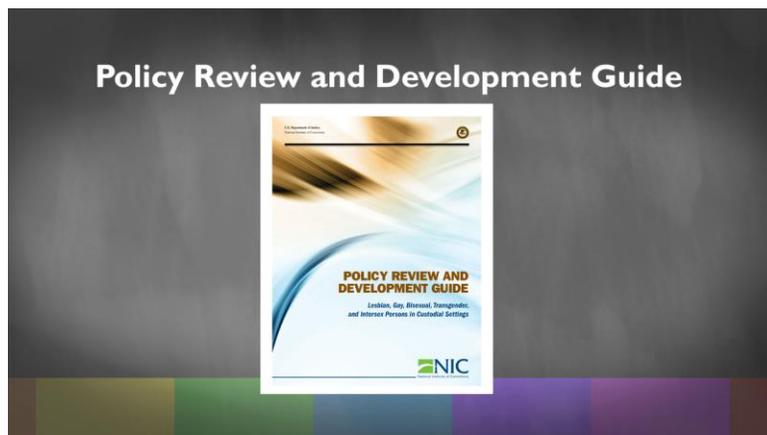




What do we know about LGBTI populations and sexual abuse in custody?



What are legal liability and relevant laws?





“This is a really important moment in the development, articulation and understanding of the rights of LGBTI individuals. There are huge shifts happening in the legal protections available to LGBTI individuals both in the community and in custodial settings. Almost every week, there is news about a city, state, country or organization examining its practices relating to its treatment of LGBTI individuals.”

– Professor Brenda V. Smith
American University, Washington College of Law

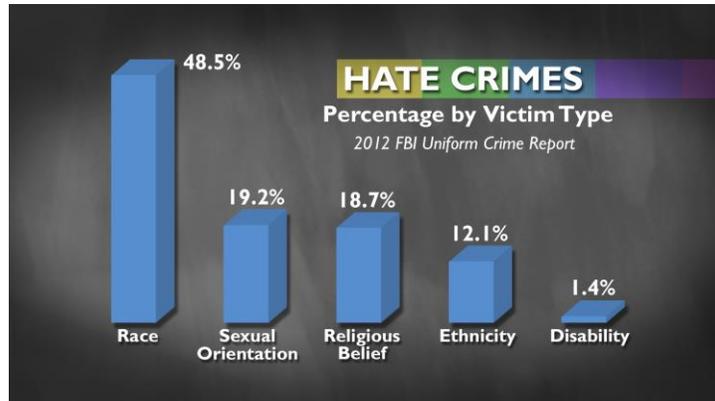


The Prison Rape Elimination Act (PREA):





How do Civil Rights relate to liability?



(Uniform Crime Report, US Department of Justice, Federal Bureau of Investigation, Hate Crime Statistics, 2012 (2013), available at http://www.fbi.gov/about-us/cjis/ucr/hate-crime/2012/topic-pages/victims/victims_final)



Take a snapshot of your agency or program:

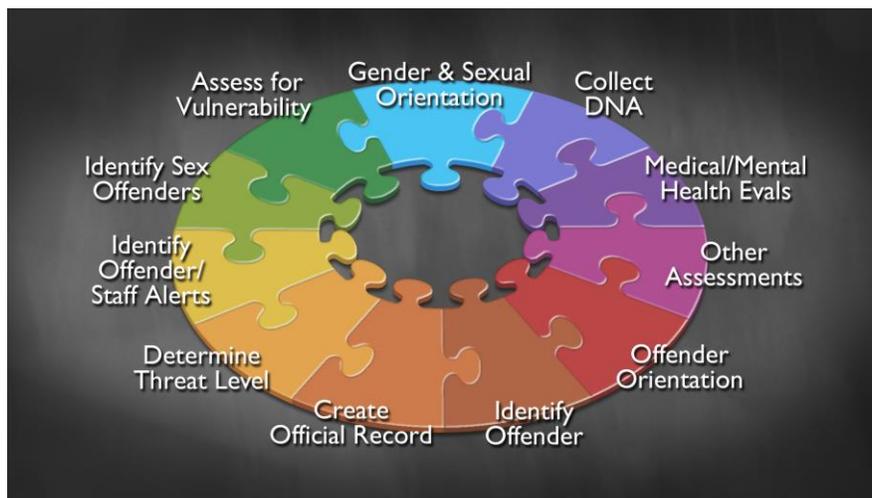
- Check your policies
 - Get legal advise
 - Create a task force
 - Get the community plus
 - What is your agency doing right now?
 - What's working, what's not working?
-
-
-



Why is intake such a critical part of addressing legal liability and responsibility?



What are the elements of intake?





Why does this topic make some uncomfortable?



Call us with any questions you might have at 1-800-278-4315.



Join the live chat at <http://nicic.gov/LiveChat>

Segment 2: Intake Setting and Interviews

Objectives:

- ✓ After exploring intake processes, participants will analyze the key components to conducting professional intake interviews with offenders who identify as LGBTI.
- ✓ After viewing a role-play vignette, participants will distinguish between appropriate and inappropriate methods of collecting information at intake according to good correctional practice provided in this training.
- ✓ Utilizing the information discussed in this training, participants will develop an understanding of recommendations and training components essential to good correctional practice at intake with LGBTI offenders.



How would you describe good correctional practice at intake?

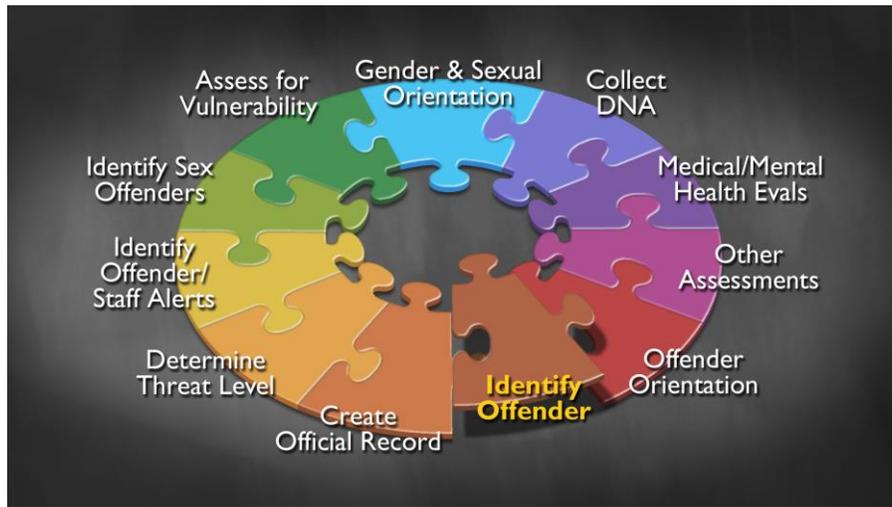


Key components of conducting professional intake interviews for LGBTI offenders:





What agency staff has a 'need to know' confidential information obtained at intake about LGBTI offenders?



Considerations for housing LGBTI offenders?

Discuss the three questions below in your small groups, chart responses, and report out.



- ✓ What are some examples of appropriate language during an intake interview that might put the offender at ease?
- ✓ How should we ask questions that will put the interviewee and interviewer both at ease, even with some of the tough topics?



- ✓ Is it okay to include some humor in the process?



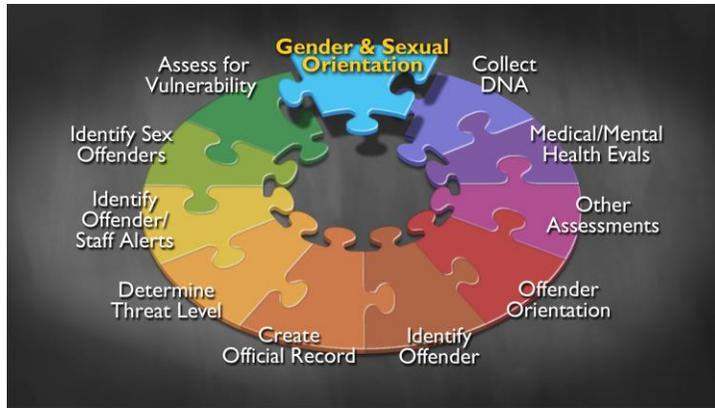
What are some of the barriers that often impede self-disclosure by LGBTI offenders?

Rational Calculation: _____

Etiquette: _____

Self-Esteem: _____

Trauma: _____



What about asking directly about sexual orientation and transgender status?

Vignette – Part I – Intake Official conducts interview at intake (Take I)

Consider the following three questions:



What observations did you make about the intake setting?



Did the intake officer provide an environment conducive to confidential information sharing?



Did the offenders appear to be comfortable with the environment?

Vignette – Part 2 – Intake Official conducts interview at intake (Take II)

Discuss the following three questions in your small groups, chart your responses, and report out:



What differences did you note between the setting in the first clip and the setting we just observed?





Did the intake official provide an environment conducive to confidential information sharing?





Did the offenders appear to be comfortable with the environment?





Suggested training components for agencies to consider with respect to LGBTI populations and intake processes:



Recommendations for agencies to consider with respect to LGBTI populations at intake:

QUIZ: Good Correctional Practice at Intake, or Not?

1. It is better to ask directly about sexual orientation and transgender status rather than to guess or try to interpret based on visible traits. True or False
2. The setting at intake does not have an impact on whether an offender will self-identify or not. True or False
3. The use of follow-up questions is often helpful in collecting additional information related to gender identity and risk factors. True or False
4. Due to their vulnerability, most agencies expedite transgender offenders through the entire intake process. True or False
5. Intake interviews must be conducted in a separate room or office. True or False
6. It is always best for agency policy to address unique considerations, such as garments, prosthetics, make-up, and hair pieces / extensions. True or False
7. Agencies do not have to worry about how gender non-conforming (GNC) offenders will affect assumptions by staff and offenders. True or False



Role-play observations:

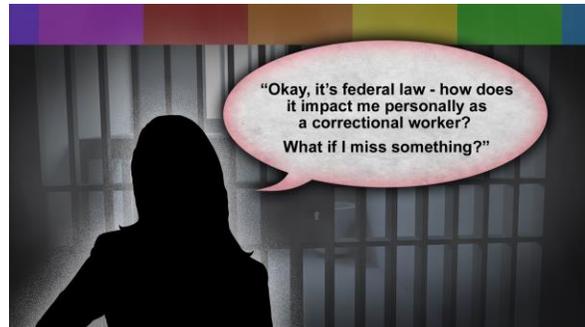
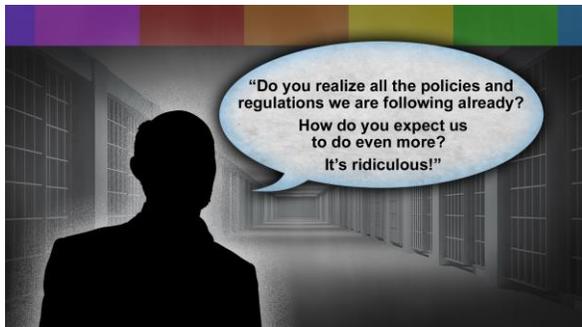
Segment 3: Intake Questioning

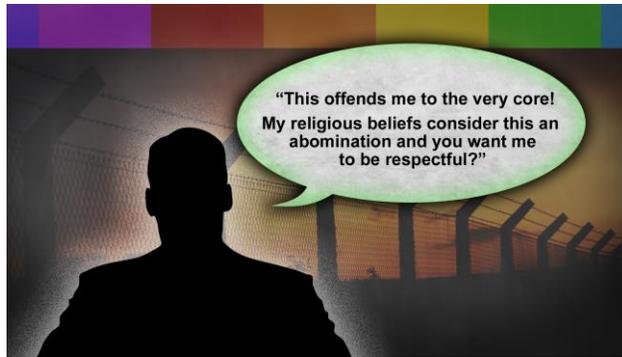
Objectives:

- ✓ After brainstorming, participants will determine the impact proper intake questions can have on the safety of staff and offenders according to PREA standard §115.41.
- ✓ After viewing a role-play vignette, participants will distinguish between appropriate and inappropriate questions that should be asked during intake according to the guidelines provided.
- ✓ After observing a role play, participants will utilize an intake screening form and answer the questions in order to develop screening procedures in accordance with the minimum criteria cited in PREA standard §115.41.



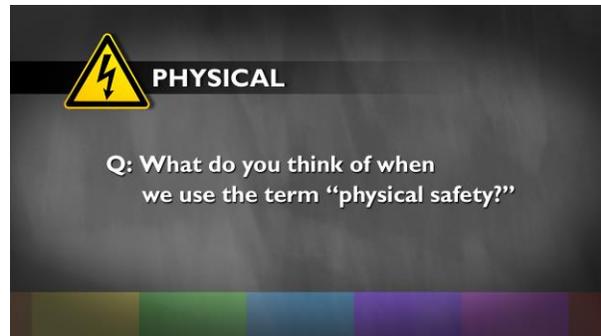
Observations from the ‘People on the Street:’





Why are we asking questions about sexual orientation and gender identity relevant to corrections?’

(Jeffrey L. Metzner, Jamie Fellner, Journal of the American Academy of Psychiatry and the Law Online 38:1:104-108 2010 (2014), Solitary Confinement and Mental Illness in U.S. Prisons: A Challenge for Medical Ethics, available at <http://www.jaapl.org/content/38/1/104.full>)



What do you think of when we use the term “physical safety?”



What do you think of when we use the term “sexual safety?”

SEXUAL

Q: What do you think of when we use the term “sexual safety?”



What do you think of when we use the term “emotional safety?”

EMOTIONAL

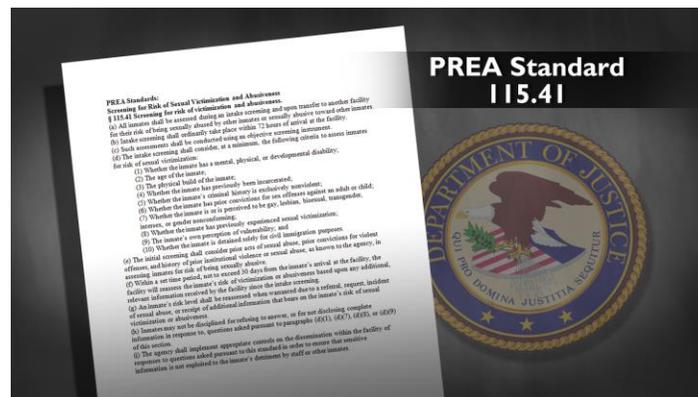
Q: What do you think of when we use the term “emotional safety?”



Relevant statistics involving transgender and gender non-conforming individuals?

(Ann P. Haas, Philip L. Rodgers, Jody L. Herman, American Foundation for Suicide Prevention and The Williams Institute, Suicide Attempts among Transgender and Gender Non-Conforming Adults: Findings of the National Transgender Discrimination Survey, 2014)

(Valerie Jenness, University of California, Irvine. Center for Evidence-Based Corrections, Transgender Inmates in California's Prisons: An Empirical Study of a Vulnerable Population, 2009)



PREA requirements involving LGBTI populations:

Vignette – Gender Classification Specialist

Discuss the following three questions in your small groups, chart your responses, and report out:



How did the interviewer ask about issues concerning sexual orientation and gender identity? What specific language was used?





How did the interviewer ask about issues concerning feelings of vulnerability, safety, and history of past victimization and aggression?





How did the interviewer ask about issues concerning history of suicide attempts / current risk of suicide and family connections? What specific language was used?



Vignette – Juvenile Offender

Consider the following two questions:



What if any differences did you note as to how the gender specialist asked the juvenile offender questions vs. the adult offender?



Can you think of any differences you would incorporate dealing with juvenile vs. adult offenders?

QUIZ: Juvenile Myths

1. “Adolescents are too young to know that they are lesbian, gay, bisexual or transgender.” True or False
2. LGBTI juvenile offenders tend to be manipulative. True or False
3. Corrections staff should discourage LGBTI juvenile offenders from being too open and expressive about their sexual orientation and/or gender identity in order to protect them from being harassed and to prevent them from influencing other youth. True or False
4. “Kids pick on each other for a range of things (being too fat, living in another neighborhood, having a big nose) so being picked on for being gay (transgender or gender nonconforming) is no different.” True or False
5. “LGBTI youth in our facility never complain about being mistreated. This means that they are being treated fine.” True or False
6. LGBTI juvenile offenders must be separated from the general population to ensure their safety. True or False
7. “The only way to provide a safe environment for LGBTI youth is to create separate group homes or housing areas exclusively for LGBTI youth.” True or False
8. As a matter of policy, facility staff members do not call youth by nicknames or street names, so we should not call transgender by the name they prefer to be called. True or False
9. We should not allow transgender youth to wear clothing according to their gender identity because this may arouse the other youth. True or False
10. We should not discuss heterosexual or same sex issues in the facility because we do not want to encourage residents to have sexual relations within the facility. True or False

(Daugnelli, A., Grossman, A., and Starks, M., “Parents’ Awareness of Lesbian, Gay and Bisexual Youth’s Sexual Orientation”, Journal of Marriage and Family, May 2005, p. 478.)

(Wilber, S., Reyes, C. and Marksamer, J. “Model Standards Project: Creating Inclusive Systems for LGBT Youth in Out-of-Home Care” Child Welfare League of America, 2005, p. 8.)

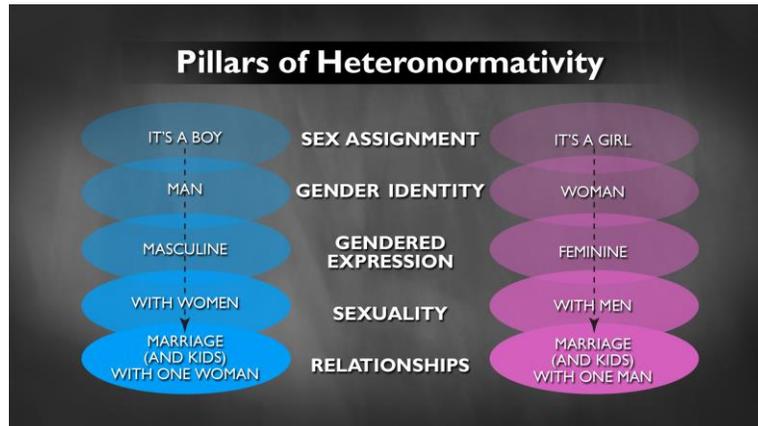


Join us on the chat or call us with your questions/comments.





Terms and issues to avoid when interviewing LGBTI offenders:



(Martin, K. A., & Kazzyak, E. (2009). *Hetero-romantic love and heterosexiness in children's G-rated films*. *Gender & Society*, 23(3), 315-336)



Join us on the chat or call us with your questions/comments.





Role-Play Skills Practice:



- ✓ Based on the interaction you just observed, what changes (if any) should you make to your agency’s policies?
- ✓ Does your local policy address personal grooming items such as hair extensions and acrylic nails?
- ✓ Does your commissary address these types of concerns? Are the lists gender specific?
- ✓ Does your agency have rules regarding inappropriate overt sexual behavior?
- ✓ What other issues or concerns do you have regarding the intake interview that have not been addressed?



Examples of good intake forms:

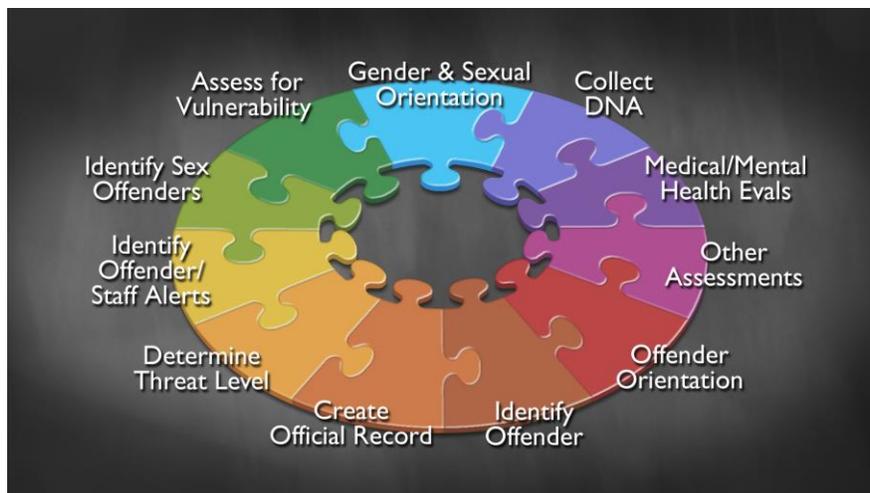
Segment 4: Recommendations and Resources

Objectives:

- ✓ After viewing previous segments, participants will discuss the recommendations offered for good correctional practice in accordance with the broadcast content.
- ✓ Using information shared in this segment, participants will develop a list of resources pertaining to LGBTI populations.



What did we learn from the role-play and skills practice at the end of Segment Three? What other issues surround LGBTI populations?





Review of recommendations offered during this broadcast

Intake Specific Recommendations:

- ✓ Apply principles of risk-based classification
 - ✓ Adhere to suicide prevention policies
 - ✓ Account for unique characteristics of offenders
 - ✓ Provide staff with clear guidelines regarding LGBTI offenders
 - ✓ Provide appropriate staff training regarding LGBTI offenders
 - ✓ Maintain appropriate levels of confidentiality
 - ✓ Make appropriate referrals for evaluations or reviews
-
-
-

General Recommendations:

- ✓ Create or refine your policy that addresses this population, and
 - Incorporate the PREA standards regarding LGBTI into your policy
 - Work with your agency legal counsel to ensure you are meeting all state and federal legal requirements
- ✓ Formation of an advisory team to review for housing, treatment, etc.
- ✓ Assessment of offender at intake and referral to medical/mental health if needed
- ✓ Appropriate medical and mental health response
- ✓ Conduct staff/volunteer/contractor training specific to this population
- ✓ Provide offender education
- ✓ Policy should include:
 - Standard definitions
 - Pronoun usage
 - Search procedures
 - Use of segregation

- Placement of transgender and intersex offenders
 - Transport procedures
 - Privacy and confidentiality
 - Showering and restroom practices
 - Cross-gender supervision
 - Clothing and grooming standards
 - Visitation
-
-
-

✓ **Community Corrections policy:**

- UA collection procedures
 - Supervision strategies specific to this population
-
-
-



Topics of further interest:



What resources do you or your agency need?



LGBTI Web Resources

- The White House
www.whitehouse.gov/lgbt
- U.S. Dept. of Health & Human Services
www.nicic.gov/go/hhs_lgbt
- HealthyPeople.gov
www.nicic.gov/go/hhs_healthypeople
- Centers for Disease Control & Prevention
www.cdc.gov/lgbthealth
- World Professional Association for Transgender Health
www.wpath.org

LGBTI Web Resources

- National Center for Transgender Equality
www.transequality.org
- Transgender Law & Policy Institute
www.transgenderlaw.org
- Lambda Legal
www.lambdalegal.org
- The Equity Project
www.equityproject.org
- Just Detention International
www.justdetention.org



Join us on the chat or call us with your questions.



Action Plan

Review the notes you made on Day 1 and Day 2 of the satellite/internet broadcast. Create an action plan for creating a culture of safety within your agency for LGBTI offenders, beginning at intake.

Action Step	Date
1.	
2.	
3.	
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Participant Pre-Work

Adults:

PREA Standards:

Screening for Risk of Sexual Victimization and Abusiveness

§ 115.41 Screening for risk of victimization and abusiveness.

- (a) All inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.
- (b) Intake screening shall ordinarily take place within 72 hours of arrival at the facility.
- (c) Such assessments shall be conducted using an objective screening instrument.
- (d) The intake screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization:
 - (1) Whether the inmate has a mental, physical, or developmental disability;
 - (2) The age of the inmate;
 - (3) The physical build of the inmate;
 - (4) Whether the inmate has previously been incarcerated;
 - (5) Whether the inmate's criminal history is exclusively nonviolent;
 - (6) Whether the inmate has prior convictions for sex offenses against an adult or child;
 - (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
 - (8) Whether the inmate has previously experienced sexual victimization;
 - (9) The inmate's own perception of vulnerability; and
 - (10) Whether the inmate is detained solely for civil immigration purposes.
- (e) The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive.
- (f) Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.
- (g) An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.
- (h) Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section.
- (i) The agency shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.

§ 115.42 Use of screening information.

- (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 inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.
- (b) The agency shall make individualized determinations about how to ensure the safety of each inmate.
- (c) In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems.
- (d) Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.
- (e) A transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration.
- (f) Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.
- (g) The agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.

§ 115.43 Protective custody.

- (a) Inmates 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 inmate in involuntary segregated housing for less than 24 hours while completing the assessment.
- (b) Inmates 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.
- (c) The facility shall assign such inmates 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.
- (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 inmate's safety; and
 - (2) The reason why no alternative means of separation can be arranged.
- (e) Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.

Check List – From NIC Policy Review Guide (8/2013)

Intake and Risk Assessment Policy Checklist	YES	NO
During intake and initial classification, does the agency ascertain information about the inmate's or resident's sexual orientation and/or gender identity?		
During the course of the inmate's or resident's incarceration, does the agency periodically update information regarding his/her sexual orientation and gender identity?		
Do the agency employees who conduct initial screening and classification receive training regarding sensitivity in conducting interviews with LGBTI inmates or residents?		
Does the agency policy require that an inmate's or resident's sexual orientation and/or gender identity be verified by multiple sources prior to classification?		
Are medical practitioners the only staff permitted to physically examine inmates or residents to gather information about gender identity?		
Does the agency policy have a process to document and accommodate the concerns of LGBTI inmates or residents in terms of safety, name, pronoun, shower preference, and searches?		
Do the agency medical and mental health staff use screening tools that are developed specifically for LGBTI inmates or residents?		
Does the agency policy require diversity training for employees that includes the impact of name-calling and harassment?		

Policy Language Examples:

Harris County Texas – LGBTI Policy (11/2013)

C. Identification

1. The following shall be used as identifiers:
 - a. Prisoner's appearance or behavior – it shall be an identification indicator if a prisoner's appearance or behavior does not match the name or gender marker on the prisoner's arresting/transportation paperwork or identification.
 - b. Prisoner self-reporting.
 - c. Prior booking records.
 - d. Any questioning done by personnel shall be conducted in a private and respectful manner.
2. Due to their vulnerability, prisoners identified as transgender shall be expedited from time of arrest to classification.

E. Intake Screening

1. Supervisors assigned to the Inmate Processing Center will be certified as Gender Classification Specialists. They shall supervise and manage the intake screening process so that it complies with this policy.
2. The receiving deputy will notify the Gender Classification Specialist sergeant on duty in the Inmate Processing Center when an LGBTI inmate is received. The sergeant will be responsible for the initial determination of vulnerability of the prisoner and shall notify a Gender Classification Specialist in Classification of the prisoner's status.
3. LGBTI prisoners may not be placed in segregated housing against their will due to the sole purpose of their sexual orientation. (See Classification Manual for procedures on reassessment periods)
4. Specially trained Gender Classification Specialists shall assist in the process upon which the Classification Division will base their housing decisions. The mere identification of an inmate as LGBTI is insufficient to warrant an assumption of enhanced risk that the inmate will be sexually abusive.
5. Due to their vulnerability, transgender prisoners shall be expedited through the entire booking process until classification has determined housing, in accordance with PREA standards. The sergeant on duty in the Inmate Processing Center will be responsible for expediting the LGBTI prisoner to Classification.
6. All inmates, within 72 hours of arrival at a HCSO detention facility, shall be assessed for their risk of being sexually abused by or sexually abusive towards other inmates in compliance with PREA standards.
7. If an indication of need arises, a Gender Classification Specialist shall conduct a screening interview in a private and respectful manner. The Gender Classification Specialist will only ask questions related to sexual orientation, gender identity or gender expression for the purpose of making intake, housing and classification assignments. If necessary the inmate will be referred to HCSO Medical for screening. An inmate/detainee shall be referred to a Gender Classification Specialist, at any time during his/her custody in a Harris County detention facility when any of the following occurs:
 - a. Self-Reporting - An inmate indicates that they are LGBTI upon arrest, at the Inmate Processing Center (IPC), or anytime during their custody
 - b. Observation - An inmate's gender identity, appearance, overt expression, or behavior differs from their apparent birth sex or genitalia.
 - c. Complaint - An issue has been raised that focuses on an enhanced risk of an inmate being sexually abused or sexually abusive during their custody in a Harris County detention facility based on LGBTI identity.
 - d. Error - It is discovered that a gender designation made by the HCSO differs from a gender designation that has previously been made by any public entity, government agency or law enforcement agency.
8. Screening assessments of all inmates, including LGBTI inmates, shall be respectfully conducted using department approved screening instruments.
9. Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to screening questions.

F. Gender Classification Committee

The Gender Classification Committee has the final authority in all matters related to the classification of LGBTI inmates.

1. Additional Responsibilities
 - a. Gender Classification Specialist certification and assistance
 - b. Housing assignment arbitration
 - c. Required reporting
2. Mandatory Review Meetings
 - a. Placement of transgender inmates
 - b. Gender Classification Specialist Weekly

Documentation Review

- c. Inmate Housing Appeals
 - d. 30 day Reviews
3. Monitoring and Reassessment - the housing and well-being of LGBTI inmates shall be monitored and reassessed when needed by the Gender Classification Committee. The Committee will document and maintain records of all such monitoring and any reassessment deemed necessary.

J. Use of Screening Information / Confidentiality

1. A person's LGBTI status is considered confidential information. This information, including electronic records, shall have strict dissemination controls. HCSO shall keep LGBTI screening information confidential except as necessary to conform to required protocols.
2. The HCSO shall implement appropriate controls on the dissemination within the facility and to the media in response to questions asked in order to ensure that sensitive information is not exploited to the inmate's detriment by staff, other inmates or the media. Any media request and/or media notification must first be screened and approved for dissemination by HCSO-PIO or HCSO media department prior to any release.
3. Classification shall use the information from the risk screening to determine housing, bed, work, education, and program assignments with the goal of keeping separate LGBTI inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.
4. Classification shall make individualized determinations on how to ensure the safety of each inmate.
5. In deciding whether to assign a transgender inmate to a facility for male or female inmates, and in making other housing and programming assignments, Classification shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems.
6. The policy and procedure for and record of placements for transgender inmates shall be reassessed at least twice each year to review any threats to safety experienced by the inmate(s). Classification will record and keep these findings for permanent review and referrals for future training.
7. An LGBTI inmate's own views with respect to his or her own safety shall be given significant consideration and recorded on their inmate record.
8. Classification shall strive not to place LGBTI inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is necessary for their safety, or such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.

K. LGBTI Liaison(s)

1. The Sheriff will appoint a LGBTI Advisory Committee and LGBTI Liaison(s). Liaison(s) shall be visible to the public and the point people for all complaints from the community and external agencies. Contact information will be available publicly via the Internet.
2. Each division in the HCSO shall have a designated LGBTI Liaison.

Juveniles:

PREA Standards:

Screening for Risk of Sexual Victimization and Abusiveness

§ 115.341 Obtaining information from residents.

- (a) Within 72 hours of the resident's arrival at the facility and periodically throughout a resident's confinement, the agency shall obtain and use information about each resident's personal history and behavior to reduce the risk of sexual abuse by or upon a resident.
- (b) Such assessments shall be conducted using an objective screening instrument.
- (c) At a minimum, the agency shall attempt to ascertain information about:
 - (1) Prior sexual victimization or abusiveness;
 - (2) Any gender nonconforming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse;
 - (3) Current charges and offense history;
 - (4) Age;
 - (5) Level of emotional and cognitive development;
 - (6) Physical size and stature;
 - (7) Mental illness or mental disabilities;
 - (8) Intellectual or developmental disabilities;
 - (9) Physical disabilities;
 - (10) The resident's own perception of vulnerability; and
 - (11) Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents.
- (d) This information shall be ascertained through conversations with the resident during the intake process and medical and mental health screenings; during classification assessments; and by reviewing court records, case files, facility behavioral records, and other relevant documentation from the resident's files.
- (e) The agency shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents.

§ 115.342 Placement of residents in housing, bed, program, education, and work assignments.

- (a) The agency shall use all information obtained pursuant to § 115.341 and subsequently to make housing, bed, program, education, and work assignments for residents with the goal of keeping all residents safe and free from sexual abuse.
- (b) Residents may be isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only until an alternative means of keeping all residents safe can be arranged. During any period of isolation, agencies shall not deny residents daily large-muscle exercise and any legally required educational programming or special education services. Residents in isolation shall receive daily visits from a medical or mental health care clinician. Residents shall also have access to other programs and work opportunities to the extent possible.
- (c) Lesbian, gay, bisexual, transgender, or intersex residents shall not be placed in particular housing, bed, or other assignments solely on the basis of such identification or status, nor shall agencies consider lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator of likelihood of being sexually abusive.
- (d) In deciding whether to assign a transgender or intersex resident to a facility for male or female residents, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether the placement would present management or security problems.
- (e) Placement and programming assignments for each transgender or intersex resident shall be reassessed at least twice each year to review any threats to safety experienced by the resident.
- (f) A transgender or intersex resident's own views with respect to his or her own safety shall be given serious consideration.
- (g) Transgender and intersex residents shall be given the opportunity to shower separately from other residents.
- (h) If a resident is isolated pursuant to paragraph (b) of this section, the facility shall clearly document:
- (1) The basis for the facility's concern for the resident's safety; and
 - (2) The reason why no alternative means of separation can be arranged.
- (i) Every 30 days, the facility shall afford each resident described in paragraph (h) of this section a review to determine whether there is a continuing need for separation from the general population.

Check List – From NIC Policy Review Guide (8/2013)

Intake and Risk Assessment Policy Checklist	YES	NO
During intake and initial classification, does the agency ascertain information about the youth's sexual orientation and/or gender identity?		
During the course of the youth's confinement, does the agency periodically update information regarding the youth's sexual orientation and gender identity?		
Do the agency employees who conduct initial screening and classification receive training regarding sensitivity in conducting interviews with LGBTQI youth?		

Intake and Risk Assessment Policy Checklist	YES	NO
Does the agency policy require that a youth's sexual orientation and/or gender identity be verified by multiple sources prior to classification?		
Are medical health practitioners the only staff permitted to physically examine youth to gather information about gender identity?*		
Does the agency policy have a process to document and accommodate the concerns of LGBTQI youth in terms of safety, name, pronoun, showering, and searches?		
Do the agency medical and mental health staff use screening tools that are developed specifically for LGBTQI youth?		
Does the agency provide youth orientation that discusses diversity and describes the harms that result from name-calling, bullying, and harassment?		

Policy Language Examples:

New York State Office of Children and Family Services (3/17/2008)

SECTION II: DISCLOSURE

A. The only way that anyone knows someone's sexual orientation or gender identity is if they tell you. There are no tools or instruments to assess a person's sexual orientation or gender identity.

B. Youth will disclose their sexual orientation and/or gender identity to staff when, and if, they feel ready and when, and if, a safe environment and trusting relationship has been created for such disclosure. Staff should not directly ask youth if they are LGBTQ. Direct questioning can make it more difficult for a youth to disclose. Most youth who are directly asked will deny that they are, mostly for reasons related to safety or perceived differential negative treatment. If youth disclose that they are lesbian, gay, bisexual, transgender, or questioning, it is important to talk with them about it in an open and understanding fashion. Staff should never just move on; talk about what it means for this youth to be lesbian, gay, bisexual, transgender, or questioning.

C. It is important to respect a youth's interest in confidentiality. Consistent with general practice, information must be reported to a supervisor if it involves a danger to self and others. If you are not in a position to keep information that a youth discloses private, you should tell the youth that such information may have to be shared with your supervisor or fellow staff. Also, youth should be informed that under certain circumstances, such as in connection with a preferred name request or placement/transfer request, parents may become aware that a youth has disclosed that he or she is LGBTQ or has raised issues relating to gender identity, gender expression, or sexual orientation.

District of Columbia – Department of Youth Rehabilitation Services (5/2012)

VIII. INTAKE AND CLASSIFICATION

- A. DYRS staff who do not provide medical or behavioral health services shall not directly ask youth residents at DYRS secure facilities if they are LGBTQI. Intake staff at New Beginnings and YSC shall inquire every youth resident, regardless of sexual orientation, gender identity, or gender expression, whether there are any circumstances that make youth concerned about their safety or whether they might be harassed at the facility.
- B. If a youth discloses his or her sexual orientation, gender identity, or gender expression, staff shall talk with the youth about it in an open and non-judgmental, understanding manner and determine if the youth has particular concerns or needs related to being LGBTQI.
- C. The classification committee shall decide on housing assignments for all youth residents at DYRS secure facilities. The committee shall follow the classification policy, taking into account the completed assessments and any information the youth has shared during intake that may indicate a need for a particular housing situation.
- D. All classification and housing decisions at DYRS secure facilities shall be based on youths' individualized needs, prioritizing the youth's physical and emotional well-being. Transgender and intersex youth shall not automatically be housed according to their genitalia. In addition to the general considerations that apply to all classification and housing decisions, DYRS staff shall make housing decisions for transgender youth taking into account the youth's perception of where he or she will be most secure, as well as any recommendations from the youth's health care provider.
- E. Pending a decision of the classification committee, youth at DYRS secure facilities shall be housed and supervised in a manner to keep them safe.
- F. LGBTQI youth at DYRS secure facilities shall not be placed in isolation or segregation as a means of keeping them safe from discrimination, harassment or abuse except under court order or for medical reasons. LGBTQI youth shall not be treated or classified as sex offenders unless required by a court.
- G. If a DYRS secure facility is overcrowded and there is a need for housing youth together in common rooms, LGBTQI youth shall not be prohibited from having roommates or sleeping in overflow areas based on their actual or perceived sexual orientation, gender identity, or gender expression.

Additional Information

Accord Alliance - Disorders of Sexual Development. <http://www.accordalliance.org/>

Andrea Fields, et al., Plaintiffs-Appellees, Cross-Appellants, v. Judy P. Smith, et al., Defendants-Appellants, Cross-Appellees. Appeals from the United States District Court for the Eastern District of Wisconsin”. No. 2:06-cv-00112-CNC, August 5, 2011. The U.S. Appeals Court affirms the District Court's decision that Wisconsin's Act 105, the Inmate Sex Change Prevention Act, violates the Eighth Amendment's ban on cruel and unusual punishment. It should be noted that the plaintiffs had been receiving hormone treatment prior to the Acts passage.
<http://nicic.gov/Library/025835>

Answers to Your Questions about Transgender People, Gender Identity, and Gender Expression
Transgender is an umbrella term used to describe people whose gender identity (sense of themselves as male or female) or gender expression differs from that usually associated with their birth sex.
<http://apa.org/topics/sexuality/transgender.aspx>

Answers to Your Questions for a Better Understanding of Sexual Orientation & Homosexuality.
<http://www.apa.org/topics/sexuality/orientation.aspx>

Cohen, Fred. Transgender Prisoners’ Right of Access to Medical Care in Prison, Correctional Mental Health Report 13, no. 4 (2011): 49-63.

Denver Sheriff Department. Office of the Director of Corrections/Undersheriff. “Transgender and Gender-Variant Inmates”. Department Order 4005.1, Denver, CO, 2012. Implementation and procedural guidelines. <http://nicic.gov/Library/026337>

Estrada, Rudy and Jody Marksamer. “The Legal Rights of Young People in State Custody: What Child Welfare and Juvenile Justice Professionals Need to Know When Working with LGBT Youth”. San Francisco: National Center for Lesbian Rights; New York: Lambda Legal, 2006.

Fact Sheet from Just Detention International
http://nicic.gov/assets/ExternalLink.aspx?url=http://justdetention.org/en/factsheets/JDFact_Sheet_LGBTQ_vD.pdf

Federal Appeals Court: It’s Cruel And Unusual Punishment To Deny Transgender Inmates’ Surgery. <http://thinkprogress.org/lgbt/2014/01/17/3182501/federal-appeals-court-cruel-unusual-punishment-deny-transgender-inmates-surgery/>

Hembree, Wylie C., et. al. "Endocrine Treatment of Transsexual Persons: An Endocrine Society Clinical Practice Guideline". *Journal of Clinical Endocrinology & Metabolism* 94, no. 9 (2009): 3231-3154. Accessed September 12, 2012. Objective: The aim was to formulate practice guidelines for endocrine treatment of transsexual persons.

<http://www.endo-society.org/guidelines/final/upload/endocrine-treatment-of-transsexual-persons.pdf>

Hilton, Bruce, "Can Homophobia be Cured?", Abingdon Press, 1992

Irvine, Angela. *We've Had Three of Them: Addressing the Invisibility of Lesbian, Gay, Bisexual and Gender Non-Conforming Youths in the Juvenile Justice System*. *Columbia Journal of Gender and Law* 19, no. 3 (2010): 675-701. <http://nicic.gov/Library/026476>

Kendig, Newton E. and Charles E. Samuels, Jr. "Gender Identity Disorder Evaluation and Treatment". U.S. Bureau of Prisons. Memorandum for Chief Executive Officers, May 31, 2012. <http://nicic.gov/Library/025522>

Lesbian, Gay, Bisexual, Transgender and Questioning Youth. Albany, NY: New York State Office of Children and Family Services, 2008. Accessed September 12, 2012. http://www.equityproject.org/pdfs/LGBTQ_Youth_Policy_PPM_3442_00.pdf

Lewis, Don, "Gender Identity Disorder", U.S. Bureau of Prisons. Webinar and transcript, March 27, 2012. Issues related to gender identity are discussed. <http://nicic.gov/Library/025870>
<http://nic.learn.com/files/upload/webinars/Gender%20Identity%20Disorder%20Webinar.wmv>

LGBTI Resource Card <http://nicic.gov/Downloads/General/LGBTI.pdf>

LGBTI: Lesbian, Gay, Bisexual, Transgender, and Intersex Offenders (Selected Resources for Criminal Justice Professionals) <http://nicic.gov/Library/026518>

Majd, Katayoon, Jody Marksamer, and Carolyn Reyes. "Hidden Injustice: Lesbian, Gay, Bisexual, and Transgender Youth in Juvenile Courts", San Francisco: Legal Services for Children; Washington: National Juvenile Defender Center; San Francisco: National Center for Lesbian Rights, 2009.
http://www.nclrights.org/site/DocServer/Hidden_Injustice.pdf?docID=6701

Non-Discriminatory, Developmentally-Sound Treatment of Lesbian, Gay, Bisexual and Transgender (LGBT) Youth - New Orleans Juvenile Detention Center (New Orleans, LA); Louisiana Dept. of Human Services (Baton Rouge, LA). <http://nicic.gov/Library/025748>

Opportunities to Diagnose, Treat, and Prevent HIV in the Criminal Justice System.
<http://nicic.gov/Library/025675>

Policy Recommendations Regarding LGBT People in California Prisons". *Transgender Law Center*. <http://www.transgenderlawcenter.org/issues/prisons/policy-recommendations-regarding-lgbt-people-in-california-prisons>

PREA Resource Center, <http://www.prearesourcecenter.org/>

Preventing the Sexual Abuse of Lesbian, Gay, Bisexual, Transgender, and Intersex People in Correctional Settings. Washington: National Center for Transgender Equality; San Francisco: National Center for Lesbian Rights; New York: American Civil Liberties Union; San Francisco: Transgender Law Center; New York: Lambda Legal. Last modified May 10, 2010. http://www.nclrights.org/site/DocServer/PREA_Standards_Comments_-_ACLU_Lambda_NCLR_NCTE_TLC_.pdf?docID=7542

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Scope of Services for the Treatment of Gender Identity Disorder. Colorado Department of Corrections. Administrative Regulation 700-14, November 1, 2009. http://www.doc.state.co.us/sites/default/files/ar/0700_14.pdf

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The Equity Project. <http://nicic.gov/assets/ExternalLink.aspx?url=http://equityproject.org/index.html>

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Transgender Inmates in California's Prisons: An Empirical Study of a Vulnerable Population

<http://nicic.gov/Library/023832>

Tribal Equity Toolkit: Tribal Resolutions and Codes to Support Two Spirit & LGBT Justice in Indian Country. Portland, OR: Legal Aid Services of Oregon, Native American Program, Lewis & Clark College, and Western States Center. 2012.

Vanessa Adams, legal name, Nicholas Adams, Plaintiff, v. Federal Bureau of Prisons, et al., Defendants. United States District Court, District of Massachusetts. Civil Action No. 09-10272-JLT, June 7, 2010. "Plaintiff, an inmate in the custody of the Federal Bureau of Prisons, asserts that Defendants have subjected her to cruel and unusual punishment in violation of the Eighth Amendment to the United States Constitution by denying her appropriate medical treatment for her diagnosed condition of Gender Identity Disorder. <http://nicic.gov/Library/025834>

Where the Margins Meet: A Demographic Assessment of Transgender Inmates in Men's Prisons
<http://nicic.gov/Library/023837>

White, Mel, *Strangers at the Gate*, Plume / Penguin Books, 1994

Wilber, Shannan, Caitlin Ryan, and Jody Marksamer. "CWLA Best Practices Guideline: Serving LGBT Youth in Out-of-Home Care". Washington: Child Welfare League of America, 2006. Accessed September 12, 2012.

Wolf, Mark L. MICHELLE L. KOSILEK, Plaintiff, v. LUIS S. SPENCER, in his official capacity as Commissioner of the Massachusetts Department of Correction, Defendant. Memorandum and Order on Eighth Amendment Claim". C.A. No. 00-12455-MLW. September 4, 2012. This is "an unprecedented court order requiring that the defendant Commissioner of the Massachusetts Department of Correction (the "DOC") provide him with sex reassignment surgery to treat his major mental illness, severe gender identity disorder."
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