



**“DEATH BY
A THOUSAND CUTS”**

**STORIES FROM INSIDE COFFEE CREEK
CORRECTIONAL FACILITY**

A REPORT SERIES BY THE WOMEN'S JUSTICE PROJECT
VOLUME 1



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Oregon Justice Resource Center

OJRC is a Portland, Oregon, 501(c)(3) nonprofit founded in 2011. We work to promote civil rights and improve legal representation for communities that have often been underserved in the past: people living in poverty and people of color among them. Our clients are currently and formerly incarcerated Oregonians. We work in partnership with other, like-minded organizations to maximize our reach to serve underrepresented populations, train public interest lawyers, and educate our community on civil rights and civil liberties concerns. We are a public interest law firm that uses integrative advocacy to achieve our goals. This strategy includes focused direct legal services, public awareness campaigns, strategic partnerships, and coordinating our legal and advocacy areas to positively impact outcomes in favor of criminal justice reforms.

Women's Justice Project

The Women's Justice Project (WJP) is a program of OJRC. It is the first and only program in Oregon to exclusively address issues related to women in Oregon's criminal legal system. Since 2014, WJP staff have been providing direct legal services and other supports to people incarcerated in Coffee Creek Correctional Facility (CCCF), Oregon's only women's prison. The WJP advocates for more just and humane treatment of women in the criminal legal system. In pursuit of our efforts, we document and track women's experiences, develop creative litigation opportunities, advocate for legislative and other reforms, and provide public education.





Content Warning

The Oregon Justice Resource Center wishes to present a full and frank account of what people incarcerated at Coffee Creek Correctional Center have told us about their experiences. For that reason, this report contains references to topics that may disturb some readers including racism, misogyny, suicide, self-harm, sexual assault, and physical and psychological abuse.

A Note on Anonymity

Over the past decade, countless adults in custody have shared with the Women's Justice Project their experiences while incarcerated at CCCF. The many AICs we have learned from and worked with have helped us to build up a picture of life within the prison and how the conditions have shifted over time. To this work we bring our expertise as lawyers focused on the plight of incarcerated Oregonians and our particular interest in women in the criminal legal and punishment systems. We recognize that anonymously presented information may give some readers pause and that readers may question how they can be sure of the reliability of unattributed accounts. The information we present has come directly from AICs drawing on their firsthand knowledge of life at CCCF. These accounts are not opinion or speculation but lived experience. Our major concern—and that of many of the people who have shared with us—is the serious risk of retaliation toward anyone in prison who speaks out about the conditions they endure. We do not believe that it would be safe to publish a report that is as specific and direct about the harm being done to AICs at CCCF as this report is if we were to attribute the accounts to the individuals who told them to us. This context is important to understanding why we have chosen to present the information shared with us anonymously. Creating the likelihood of further harm by naming people would run counter to the entire purpose of publishing this report and of the work of the Women's Justice Project.

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Introduction

We can't continue to live like this. It is extremely detrimental to our physical, mental, and spiritual health.

– Woman incarcerated in CCCF in 2022

I was closer to killing myself this last summer than during the 20 years that I've been here.

– Woman incarcerated in CCCF in 2022

We are housed in here like cattle with no outlet and no timeframe when this will change.

– Woman incarcerated in CCCF in 2022

We are all implicated when we allow others to be mistreated.

– Bryan Stevenson

AS THIS REPORT goes to press, in July 2023, people who are incarcerated in Coffee Creek Correctional Facility (CCCF) are sharing stories with the Women's Justice Project (WJP) on a near-daily basis, describing the current conditions at Oregon's only women's prison. Although their accounts touch on many complex topics, a clear message rings through again and again: many

adults in custody at CCCF are experiencing profound suffering and despair, and the sense that prison conditions are worse than they have ever been.

In the wider community in 2022, there was a sense of "returning to normal," as the burdens of the pandemic gradually lifted. By contrast, throughout 2022, we at the WJP heard countless reports from adults in

custody (AICs) describing severe conditions at CCCF and pleading for their situation to be acknowledged. Many shared that the harsh, stressful environment at CCCF was reminiscent of the worst days of 2020. We received and continue to receive numerous disturbing reports of increases in drug use, self-harm/cutting, discipline issues, suicidal ideation and attempts, despair, depression, mental health crises and death. AICs continue to report that the morale and well-being of AICs are worse now than in pre-pandemic times. In fact, AIC “lifers”—individuals serving lifetime sentences—have shared that these are the worst conditions they have ever experienced or witnessed in CCCF. There is a heavy sense that the lows reached during the pandemic have become the new norm. CCCF AICs share their stories with a sense of urgency and hope that by speaking out, their plight will escape the darkness of prison and somehow spur change.

We have written this report to amplify the AICs’ voices and to shine a light on the desperate conditions at CCCF. This report consists of a collection of stories and quotes from phone calls and letters that we received from AICs. We hope that by sharing their stories, we will educate the public and state officials about the urgent need for changes to the culture and conditions at CCCF.

The alarming situation reported by AICs deserves the sustained attention of the public and state leadership. Therefore, this will be the first report in a series. It will lay a foundation for our ongoing documentation of the conditions at CCCF as reported by AICs. Because this report sets the foundation, we have included significant background information about CCCF in the sections preceding the accounts of present conditions. This information is necessary context for a more complete understanding of the gravity of AICs’ current reports.

THIS REPORT BEGINS with basic information about the physical environment and operations at CCCF, then goes on to explain the underlying culture at CCCF, which permeates all aspects of operations. Next, the report highlights major events at CCCF during 2020 and 2021, and how the prison environment drastically worsened during that time. The report culminates with a description of current conditions providing context for quotes from CCCF AICs. Throughout this report, the information presented is drawn from what has been shared with us by countless AICs in CCCF over the last decade.

Admittedly, this report includes what may seem like an overwhelming amount of information—a plethora of details of various circumstances, hardships, and experiences. But that sense of overwhelm, the bombardment of problems and difficulties, mirrors the cumulative indignities that CCCF AICs face on a daily basis. As one AIC told us, it feels like “death by a thousand cuts.” They do not experience these varying harsh conditions as isolated problems, but rather as a constant onslaught of interrelated challenges, every day, every moment. We encourage you to persist through any discomfort and allow the information to open your eyes to the reality of life in prison at CCCF, such that you can no longer ignore the plight of people incarcerated there, most of whom will return to the broader community.

Basic Information About CCCF Operations

THIS SECTION PROVIDES a brief overview of prison operations at CCCF, the daily routines of CCCF AICs, and a description of the facility itself. Awareness of this basic information is necessary to understand the perspective of the AICs whose accounts inform this report.

Coffee Creek Correctional Facility (CCCF) is located in Wilsonville, Oregon, about 15 miles south of Portland. It is the only women's prison in the state and has capacity to house 1253 people. CCCF became operational in 2001 and replaced the Oregon Women's Correctional Center

(OWCC) in Salem. CCCF is situated on 108 acres and has 508,000 square feet of indoor space. The CCCF campus includes an intake facility, where all individuals sentenced to ODOC custody are held before being transported to their assigned prisons elsewhere in the state.

CCCF contains minimum-security and medium-security facilities which are physically separated by a large parking lot. AICs at CCCF with approximately five years or less on their sentence are housed on the



Fig. 1 Aerial view of CCCF. Source: Wikipedia

minimum-security facility. The minimum side contains four dormitory-style housing units capable of housing about 100 people, as well as a smaller unit for AICs participating in treatment programs. AICs sleep in bunk beds spaced a few feet apart from each other. The minimum-security facility buildings encircle an outdoor area containing a garden and recreational area. There have historically been more rehabilitative programs and activities available to AICs on the minimum-security side than the medium-security side.

the medium-security housing units contains cells; one of the incentive units is an open dormitory.

The cell housing units are built with two tiers of cells stacked on one another. AICs share cells with a bunkmate. The cells are about 6 x 9 square feet and are constructed with hard concrete floors and metal furniture including a bunk bed, sink, toilet, small shelf, and a small desk with two metal seats. AICs are expected to follow detailed and strict rules about how their cells are



Fig. 2 Stock photo of prison cell similar to those in CCCF Medium.

The medium-security facility is a more restrictive environment. It houses AICs with more than five years left on their sentence, as well as AICs who are deemed to have disciplinary issues. Movements of AICs within the medium facility are more closely monitored and regulated, and many of the indoor areas have a highly institutional, enclosed atmosphere. A long corridor runs down the length of the medium facility. There are several heavy, loud metal doors throughout the facility at certain entry points, which can only be opened from a control booth staffed by officers.

The medium side has six regular housing units. Two of the housing units are “incentive” units where AICs are allowed slightly more time out of their cells/dorms and there is a slightly less strict atmosphere. All but one of

maintained and must keep their cells “inspection ready” at all times. The cell doors are solid metal with a small slot for mail. The doors open and shut frequently during the day on a timed schedule, two or three times per hour, depending on the unit and the time of day, resulting in constant loud banging sounds throughout the day.

The medium side also has “special housing” areas including the Disciplinary Segregation Unit (DSU) and the Mental Health Infirmary (MHI). AICs who incur certain types of discipline violations may be isolated in DSU for up to 90 days. DSU sanctions are routinely imposed on AICs, including for various non-violent infractions. AICs in the DSU experience conditions of solitary confinement; they are confined in-cell for more than 23 hours per day; are only permitted very



Fig. 3 Stock photo of housing unit similar to those at CCCF Medium.

limited personal property, and have severe restrictions on allowable phone calls and visits with loved ones or others on the outside. Solitary confinement has been demonstrated to cause severe negative psychological impacts, including long-term effects in some cases. Even shorter terms of isolation can cause a person's mental health to rapidly decompensate. The conditions in the MHI, which is intended to house AICs with serious mental health conditions, are also highly restrictive. The medium facility also contains Health Services (where AICs go for medical appointments), a medical infirmary unit, and a hospice unit.

The typical day for an AIC at CCCF begins at 5:30am, when AICs report to the breakfast meal. After breakfast, AICs go back to their housing unit, then report to their work assignments or other programs such as education or treatment. There is a "count" at 11:05 am and again at 4:30pm. During count AICs must sit up on their bed and are not allowed to talk or make noise, while officers count each AIC, which usually takes about thirty minutes. Count may take longer for various reasons, such as if an AIC is not accounted for. Delays in count may cause mealtimes

to be delayed. There is another count at 10:15pm, but AICs are not required to be sitting up for it.

The daily activities of AICs are dictated by their institutional "case plan." Typically, there are blocks of time when AICs can go outside for "yard time" and participate in recreational activities in a shared area known as the "day room." When moving from one area of the facility to another, AICs must follow the rules of "line movement." AICs are required to always walk on the right side of the corridor and they must go directly to their assigned activity or area. On units with cells, the cell doors open and shut to correspond with regular "line movements," such as when AICs line up to receive medications, and to attend meals. During line movements, AICs are not permitted to stop and talk to others or make stops at a different area without permission, or else they may be subject to discipline for "being in an unauthorized area." Sometimes, hall passes are used to give AICs permission to travel to a different area. By about 9pm, AICs must remain in their cells or dorms for the night.

The daily routine of AICs is subject to interruption by “lockdowns.” Lockdowns are ostensibly a security measure taken to allow staff to address emergency situations including injury, death, overdose, and incidents of violence and self-harm. As discussed later in this report, lockdowns have increasingly been used in non-emergency situations, such as when there are staff shortages at CCCF. Lockdowns mean that AICs are mostly confined to their cell or housing unit. During a shorter, partial-day lockdown, AICs may be prohibited from leaving their cell for any reason; for example, AICs have reported having to forego showers after a long workday. During a longer-term lockdown of a full day or longer, AICs may be confined to their cell or housing unit for up to 23+ hours per day, and typically only allowed to leave their cell for brief periods of as little as 30 minutes, to shower and make phone calls. Sometimes, meals are served in the communal dining area known as the “chow hall,” but during other lockdowns, AICs must eat meals inside their cells (on Medium) or sitting on their bunk beds (on Minimum). Depending on the AIC’s work assignment and the type of lockdown, AICs may be unable to work or only work reduced hours. If work is allowed to continue, the lockdown may be referred to as “modified operations.” Yard time is curtailed or may be eliminated, and use of the day rooms is prohibited.

AICs maintain contact with their family and friends on the outside through mail, phone calls, video calls, text messaging, and in-person visiting hours. Contact with people on the outside is subject to numerous restrictions. For example, phone numbers must be validated through a multi-step process which many people are not able to complete. Phone and video calls are expensive and often represent a significant portion of AICs’ meager monthly earnings.

Poor Conditions and a Harmful Culture Have Been Ever-Present at CCCF

IN THIS SECTION we provide a summary of the long-standing poor conditions at CCCF, and the harmful culture which shapes the environment at CCCF and permeates every aspect of daily operations. In order to grasp how deep-rooted the problems plaguing CCCF are, and the impact the environment at CCCF has on AICs, one must first be aware of this background.

AICs generally describe the culture within CCCF as degrading, excessively punitive, unpredictable, frightening, traumatic, and placing great strain on their physical and psychological well-being, which hinders their ability to function in a healthy manner and prepare for successful release. Below are some of the most concerning aspects of longstanding conditions that AICs have reported.

Sexual Abuse by Correctional Officers Poses a Constant Threat to AICs

Among the most serious problems facing AICs at CCCF is the threat of sexual assault, sexual harassment, and sexual exploitation by correctional officers (COs) and prison staff.¹ AICs commonly report of COs exploiting AICs by pressuring them into sex in exchange for preferential treatment; of sexual harassment by staff; and

of staff intimidation of AICs who report harassment and inappropriate behavior.

A related problem is that AICs are routinely subjected to strip searches and pat-downs. These practices are commonplace at CCCF and are highly intrusive experiences that are hardly distinguishable from abuse. Strip searches can be excessive and lack apparent justification. One AIC shared that her cellmate was strip searched 56 times in one year because a certain officer would select about a third of the “Work Force” AICs to strip search as they left their work assignment every day. Notably, Work Force AICs pose little security threat because AICs must have a clean disciplinary conduct record in order to be considered for these preferential work assignments. These practices are a disturbing violation of AICs’ privacy, dignity, and autonomy, and appear to be a gratuitous display of force by staff.

Demeaning, Paternalistic, and Hostile Treatment by Staff

Day-to-day interactions with CCCF staff play a large role in how AICs experience the prison environment. AICs report that the general tone of communication from staff is paternalistic and condescending; that certain COs are extremely verbally abusive; and that shaming

¹ See, e.g., Mark Wilson, *Sex Scandal Rocks Oregon’s “Camp Cupcake” Women’s Prison – Again*, Prison Legal News, Nov. 15, 2010, <https://www.pris-womens-prison-again/>; *Oregon Prisons Culture In Need of Correction: Editorial*, Oregonian, Feb. 15, 2017, <https://www.oregonlive.com/opinion/2017/02/oregon-prisons-culture-in-need.html>; Whitney Woodworth, *Another Sexual Abuse Lawsuit Has Been Filed Against Coffee Creek Women’s Prison*, Statesman Journal, Sept. 22, 2019, <https://www.statesmanjournal.com/story/news/crime/2019/09/22/reports-sex-abuse-plague-coffee-creek-correctional-facility-womens-prison-oregon/1858708001/>; Conrad Wilson, *Former Oregon Prison Nurse Indicted on 25 Counts of Sexual Assault, Perjury*, OPB, Mar. 14, 2022, <https://www.opb.org/article/2022/03/14/oregon-womens-prison-nurse-indicted-tony-klein-sexual-assault-indictment/>.

and ridicule by staff is common. Many AICs report that the overall culture is suffused with sexism. Some AICs say that they are treated poorly because many COs view women as inferior; other AICs have speculated that some COs are comfortable with verbally abusing female AICs because women are perceived as less of a physical threat compared to male AICs. AICs report that they are exhausted and humiliated from being yelled at throughout the day, and that it seems like they are being provoked to see how they will react. AICs with histories of abuse share that being berated like this can trigger symptoms of post-traumatic stress.

Many AICs who share stories of mistreatment also say that they are hesitant to complain because they fear discipline or other negative repercussions. AICs may seek redress by filing a written grievance; however, this process may place the AIC at risk of retaliation by staff, and AICs often report that it is not worth the risk. Further, grievances are consistently denied as lacking basis and it is exceedingly rare for grievances to lead to meaningful results.

CCCF's Disciplinary Practices are Often Questionable and Excessively Punitive

AICs report that disciplinary consequences are always looming, and that staff often impose discipline arbitrarily and excessively. AICs at CCCF are frequently disciplined for minor incidents such as sharing a coloring book, using a television purchased by another AIC, or having an untucked shirt. Discipline may result in the AIC suffering significant additional harms, such as losing their work assignments and rehabilitative programs, loss of earned time credit (meaning that the AIC will serve a longer period of incarceration), and mental health consequences. Disciplinary decisions can be unpredictable, and varying outcomes can occur depending on which CO happens to be in charge, the mood of the CO, and on whether the AIC has a clean record or is known as a “troublemaker.” Some discipline appears entirely arbitrary and capricious. For example, we heard of an incident where an AIC was disciplined for putting both cream cheese and jelly on her bagel. The officer humiliated the AIC in front of a group of women and ordered her to “eat it all right now,” then ordered the AIC to remain in her cell (known as a disciplinary

“cell-in”) for violating a purported rule to “eat foods as intended.” The next day, officers put up a sign stating that mixing condiments is not allowed.

According to AICs, the negative impacts of the punitive culture at CCCF can be worse for AICs of color due to racist and discriminatory decisions and actions by staff. Black and Indigenous AICs have reported being called racial slurs, being singled out for discipline, and being picked on and bullied by staff. AICs share that AICs of color have received more unfounded discipline reports, are removed from programs unfairly or not selected for programs, and that they often do not receive preferential treatment that white AICs receive.

Many Aspects of Conditions at CCCF Create Serious Risks to AICs' Health and Safety

AIC reports indicate that conditions at CCCF are not merely uncomfortable and stressful; they are often dangerously unsafe. For example, the facility is extremely hot in the summer and cold in the winter. The quality of food is very poor; a 2017 lawsuit alleged AICs were served food from boxes labelled, “not for human consumption.”² The metal furniture and concrete floors create safety hazards. An especially salient concern for AICs is that their bunk beds are unsafe. We have heard of many incidents of AICs falling from bunk beds and becoming seriously and permanently injured.

Perhaps the most disturbing stories we hear about CCCF, in terms of threats to AICs' lives and safety, relate to the appalling lack of adequate medical care and mental health care services. AICs frequently go for months or years awaiting necessary medical care and experience unnecessary worsening of their health conditions, sometimes with irreversible consequences. AICs report that medical staff can be callous, disorganized, and dismissive. People with mental health conditions also report that the available care is not adequate. Some AICs observe that CCCF over-relies on medications, to the detriment of AICs, because it is cost-effective and keeps AICs more compliant. AICs say that they do not disclose when they feel depressed or suicidal because the response from CCCF—often a stint of solitary

2 Monte McCain, *Lawsuit Alleges Four Oregon Prisons Served Food “Not for Human Consumption,”* Prison Legal News, Nov. 6, 2017, <https://www.prisonlegalnews.org/news/2017/nov/6/lawsuit-alleges-four-oregon-prisons-served-food-not-human-consumption/>.

confinement in the Mental Health Infirmiry—feels more like a punishment than care.

2020 to 2021: The Pandemic Brought Conditions to New Lows

TO FULLY UNDERSTAND the current desperate conditions at CCCF, it is necessary to be familiar with the unprecedented hardships that AICs endured throughout 2020 and 2021. This section summarizes the dire circumstances AICs experienced with the arrival of the COVID-19 pandemic and during the next two years. With unabating crisis upon crisis, many AICs reported that they were struggling to cope and reaching a breaking point. These years brought the dangers of COVID-19, constant lockdowns, drastic reductions in programs and services, staff shortages, the historic wildfires of 2020, and new financial burdens for AICs.

AICs Reported a Frightening and Highly Stressful Environment Amid the COVID-19 Threat

According to reports from AICs at CCCF, the early days of the COVID-19 emergency were extremely chaotic. Early on, the environment at CCCF was in disarray and it appeared to AICs that staff had no idea how to maintain a safe environment. AICs were being constantly moved around the prison in ways that seemed to increase the risk of COVID-19 spread. For example, we heard reports that AICs whom CCCF had classified as “medically vulnerable” were removed from their single- or double-occupant cells and grouped together in a shared dormitory unit, purportedly to isolate and protect them from the risk of COVID-19 spread. However, AICs from different units were then continuously rotated in and out of the shared dormitory, potentially exposing the most vulnerable AICs to the virus.

The fears of serious illness or death from COVID-19, combined with the confusing responses of ODOC, caused AICs to feel extremely stressed, panicked, and demoralized. AICs reported that they felt helpless to protect themselves against infection and at the mercy of staff decisions that often did not appear logical. Additionally, throughout 2020 and 2021, AICs shared that lengthy and frequent lockdowns were a source of intense distress. AICs were continuously subjected to lockdowns of 10, 14, or 21 days, largely due to CCCF’s response to positive cases of COVID-19.

For those AICs who contracted COVID-19, the environment at CCCF made the experience much more frightening and dangerous. CCCF placed some AICs with COVID-19 in the Disciplinary Segregation Unit in conditions identical to those imposed on AICs being punished for discipline violations. People returning to CCCF from outside medical treatment were also typically moved to “medical isolation” for up to 21 days, meaning that sick AICs were forced to live in degrading conditions resembling solitary confinement. To avoid being placed in isolation, some AICs refrained from seeking medical care.

Staffing Cuts Following the Onset of the Pandemic Caused Further Stress to AICs

Unrelated to the pandemic, but less than a week after ODOC’s closure to the public, Director Colette Peters (who has since moved on to be appointed to Director of the Federal Bureau of Prisons) announced that the agency was experiencing a \$60 million budget shortfall due to an increase in health services costs that ODOC

leaders failed to properly predict and budget for.³ This announcement would lead to layoffs, reduced services and personnel training, a hiring freeze, and a halt to critical infrastructure improvements, all at a time when AICs needed additional support and resources to adapt to the pandemic.

The negative consequences of ODOC's lack of planning primarily fell on AICs. At CCCF, AICs reported that the staff shortages exacerbated existing issues of poor treatment by COs and created new problems. AICs saw an increase in lockdowns, and reported that overworked staff became increasingly punitive, hostile, and indifferent towards AICs. By 2021, AICs observed that officers were visibly exhausted from working double shifts, and unit officers were sleeping at their stations. One staff person reportedly crashed a golf cart into a fence due to fatigue.

General Access to Medical Services Was Severely Curtailed During the Height of the Pandemic

For all of 2020 and the early half of 2021, AICs who did not have COVID-related medical needs or emergency medical needs reported that they were unable to access medical care. AICs reported that CCCF prevented them from seeing needed specialists and outside providers. In late 2021, medical staff shortages had become so severe that AICs were showing up to appointments only to find no one was there to see them. When one AIC asked for an appointment, staff laughed and told her that unless it was an emergency she would not be seen, because "we're barely getting through the day."

The Loss of Programs and Services at CCCF Was Devastating for AICs

Throughout 2020 and 2021, CCCF drastically reduced programs and classes as contractors and volunteers, who ran most programs, were denied access into the prison or unable to work in the prison for other reasons. AIC accounts indicated that loss of programs had a serious negative impact on AICs and that ODOC intensified the crisis through poor decision-making. A striking example

of ODOC's mishandling of this situation was the abrupt suspension in March 2020 of intensive treatment and services to AICs known as alternative incarceration programs (AIPs). AIPs are programs for AICs with a history of mental health and substance addiction issues and include an opportunity for early release upon successful completion. ODOC suspended the AIPs with little notice. We received many panicked phone calls from AICs reporting that their release dates were being pushed back by weeks or months; and of feeling left emotionally "open and raw" with the abrupt interruption of their intensive treatment during the intensely stressful time in CCCF.

AICs Were Traumatized by the Disastrous Evacuation During 2020 Wildfires

In early September 2020, another crisis hit AICs when historic and catastrophic wildfires began raging across the state. Yet again, ODOC seemed woefully unprepared and its management of the crisis caused trauma and harm to AICs. Due to its proximity to the fires, CCCF was evacuated and the entire population of 1303 AICs were transported to Deer Ridge Correctional Institution (DRCI), a drive of over two and a half hours.

AICs described being subjected to inhumane treatment during the chaotic evacuation. AICs were directed onto buses in the parking lot, where the AICs waited for several hours. Some AICs were zip-tied. During the drive, AICs had no access to restrooms. Some were forced to urinate on themselves while menstruating AICs bled through their clothing. Some were told to urinate outside in full view of officers and passersby. AICs reported that people vomited on the bus and sustained injuries during the ride.

After the buses arrived at DRCI, AICs were forced to remain on the buses for hours longer, as DRCI failed to adequately prepare to accommodate the entire CCCF population. AICs were kept up until about 2:00 AM due to the time it took to find space for everyone to sleep. There was a lack of adequate food and drink, and AICs were told there were not enough supplies to feed everyone. One woman reported that in a 29-hour period, the only food she received was a single peanut butter sandwich. Many AICs did not receive their daily medications; others did

³ Noelle Crombie, *Layoffs, Hiring Freeze Follow \$60 Million Shortfall at Oregon Corrections Department*, Oregonian, Mar. 26, 2020, <https://www.oregonlive.com/politics/2020/03/layoffs-hiring-freeze-follow-60-million-shortfall-at-oregon-corrections-department.html>.

not receive them reliably or as needed. AICs were housed in units at DRCI that had been in disuse and had not been cleaned. Some women ended that first evening sleeping on bare metal bed frames or on the floor. When AICs were transferred back CCCF, we heard reports that, again, no bathroom breaks were provided. The entire ordeal was traumatic, degrading, and caused AICs a serious increase in mental health symptoms and extremely high levels of anxiety due to the utter chaos they experienced.

ODOC Caused Financial Burdens to AICs by Collecting Money for Court-Ordered Financial Obligations

The following month, in October 2020, ODOC implemented a law that had been passed three years prior, whereby ODOC automatically collects money from AICs to pay for outstanding court-ordered financial obligations (COFOs).⁴ This created significant additional hardship. The decision to begin collections during the pandemic emergency defied reason and starkly contrasted with statewide pandemic relief measures implemented in 2020 to ameliorate financial hardship, including expanded unemployment benefits, an eviction moratorium, and debt collection relief.

Most AICs have very modest amounts of money which are quickly depleted each month to pay for basic necessities. They rely on meager prison work earnings, which at that time ranged from between \$8 to \$82 a month, and financial help from family and friends. Phone calls to family can cost upwards of \$30 per month. Basic writing materials for mail correspondence cost roughly \$8 or more. AICs are also required to purchase their own hygiene products like toothpaste and soap, which are not provided at a discount and not provided for free unless an AIC has no funds whatsoever. These monthly withdrawals for COFOs lead many incarcerated Oregonians to choose between staying in contact with family and friends or buying necessary personal items.

The Cumulative Impact of These Pandemic Conditions Caused Intense Suffering for AICs

AIC reports in 2020 and 2021 indicated that these conditions took a tremendous toll on people's mental health and well-being. Even AICs who described themselves as having relatively good mental health expressed that constantly being in close proximity to others in crisis was difficult. AICs faced numerous overlapping stressors within an increasingly desperate atmosphere. AICs reported increased incidents of violence, self-harm, and suicides. One AIC shared with us how shaken she was after another AIC committed suicide in 2021. She was particularly upset by the death, she explained, because of the cruel way the woman had been treated by COs. She said that the day before the woman's death, the woman had been self-harming and COs responded by trying to strip-search her. As the woman became increasingly upset, the officers ridiculed her and said she was just trying to get attention.

Generally speaking, the AICs reported that the conditions at CCCF during the pandemic caused irreversible harm and trauma to many, and was highly stressful, demoralizing, and frightening, for the entire community of AICs.

⁴ During the 2017 Legislative Session, lawmakers passed a bill that created ORS 423.105, which permits ODOC to collect 10 or 15% of eligible monies from AIC trust accounts to pay for COFOs, including court fines and fees, restitution, and certain civil judgment money awards. See Or Laws 2017, ch 692, § 1.

2022 to Present: New Lows for Conditions Have Persisted and Continue to Harm AICs

THIS SECTION WILL explore details of the present conditions at CCCF, as reported by AICs, including quotes from AICs. We have included extensive information in this section in an effort to accurately convey the extensive suffering that AICs are experiencing at CCCF, through innumerable forms of harm.

While society at large has more or less returned to a pre-pandemic sense of normalcy, the conditions at CCCF remain dire. The Women's Justice Project continues to receive countless calls and letters from CCCF AICs filled with despair and hopelessness about the ongoing harsh and demoralizing environment in CCCF. The exacerbated hardships of 2020 and 2021 seem to have become the "new normal," and AICs are fearful that there is no end in sight to this situation.

One AIC who has been at CCCF for many years, shared that the conditions at CCCF have become so dire and inhumane that she had thoughts of hanging herself in 2022, something she had never before contemplated.

I was closer to killing myself this last summer than during the 20 years that I've been here.

AICs at CCCF continue to experience a range of terrible conditions at CCCF, which are summarized

below. The AIC accounts below describe ongoing frequent lockdowns, financial hardships, unsafe physical conditions, abusive and demeaning treatment, horrendous medical care, new barriers to communication with loved ones, and a lack of programming.

The weight and impact of AICs' following accounts is best understood by keeping in mind the bare and restrictive prison environment, the general underlying toxic culture of CCCF and the pandemic hardships that led up to where things now stand, summarized in the previous sections of this report.

These last three years have been the hardest of the twenty I've done.

Ongoing Frequent Lockdowns Create Intense Stress and Desperation for AICs

AICs are reporting that lockdowns are now being imposed constantly, largely due to ongoing staff shortages. This situation is causing tremendous harm to the mental health and well-being of AICs. AIC reports indicate that being locked down drastically worsens the daily experience of prison. The reports emphasize that enduring frequent lockdowns for over three years has had a cumulative negative impact, and caused many people

to feel desperate and hopeless. Due to the severity and urgency of this situation, this section includes a generous selection of quotes from AICs about the impact of lockdowns.

In 2022, AICs reported that COVID-related lockdowns—full lockdowns of up to 21 days—remained common, and that “modified operations” lockdowns occurred 2-3 times per week. During 2023, reports of COVID-related lockdowns have dwindled. However, AICs report that there are multiple staff shortage lockdowns per week, and typically at least one lockdown per week due to an emergency incident (e.g., self-harm, violence, or injury). One AIC recently reported that her unit was on lockdown eighteen of the thirty-one days in May. According to AICs, another factor in frequent lockdowns is that when an emergency happens, CCCF will put the entire facility or one side of the facility on lockdown, instead of only the unit where the emergency occurred. Additionally, AICs report being locked down due to incidents in the men’s intake unit, and that this has become more common following a recent serious staff assault on the men’s intake unit. Reportedly, the women’s units are locked down so staff can attend to the men’s intake unit, where administration is more concerned about violence.

AICs also report frustration that staff seem to impose lockdowns casually, without consideration for the impact on AICs, and often with questionable justification. For example, AICs report that lockdowns tend to occur more frequently on weekends, when administrators are not on site to oversee staff. AICs report that lockdown status sometimes changes with the CO shift change, which makes AICs suspect that the duration of lockdown is up to staff discretion rather than legitimate security needs. Additionally, AICs report that low morale among staff, and increasingly aggressive behavior of COs, exacerbates the distress and tension caused by lockdowns.

On top of this problem, each year in May, CCCF imposes a week-long lockdown during National Correctional Employees Week (aka “staff appreciation week”), during which staff members socialize outside, grill food in the parking lot, and enjoy specially catered meals. Normal operations are suspended and AICs are locked down from 9:30 AM to 6:00 PM. With AICs already under strain from frequent lockdowns, the additional confinement during this week is difficult for many AICs to cope with.⁵

Selected quotes from AICs demonstrating the destructive impacts of lockdowns are listed below.

Mental Health Crises and Self-Harm

We have more cutting and mental health issues than we’ve ever had. People are defeated.

We see [the cuts] on the girls. It comes in batches... two weeks ago, a girl tried to swallow a razor. It is quite often.

[Lockdown] begins to get to people - they’re pounding on the door, they’re screaming, or they’re cutting [themselves]. It gets really chaotic sometimes. [Lockdown creates] a domino effect. It’s beginning to be too

⁵ Lucas Manfield, *Oregon Women’s Prison is “Modifying Operations” Amid Celebrations and Short Staffing*, Willamette Week, May 19, 2023, <https://www.week.com/news/courts/2023/05/19/oregon-womans-prison-is-modifying-operations-amidst-celebrations-and-short-staffing/>.

much. A lot of people struggle with PTSD and trauma, so it's really nerve-wracking.

There's so much self-harm in here. The self-harm is the more common [type of emergency causing lockdowns]. And there's a lot of overdoses, at least one every other week.

Despair, Fear, and Malaise

We've been locked down what seems like every other day, at least half the day, for the last couple of weeks. It's a nightmare. We're stuck in our cells all day long, so it's hard, especially when we have to eat in our cells.

There's a stagnant and negative energy. It's inhumane at some point, you know? It changes you...you become stagnant, in a haze.

[We need to] go outside with the fresh air, it doesn't even have to be a nice sunny day. Just to hear a plane fly overhead... there's a psychological benefit of being outside.

We're on lockdown right now from staff shortages. It's been a continuous thing lately. Every time, it's like that fear all over again from when we were locked down from

COVID. We're [thinking], how long will we be locked down this time?

We don't know when we'll be on lockdown or for how long.

It's depressing just sitting on your bed, you can't do much of anything else.

Tension and Conflict Among AICs

People are short-fused. It's hard to be patient when you're so anxious all the time. I feel this tension building up.

Lately there's been a lot of confrontation and bad energy in the air.

This is what we're used to, being on lockdown. When we get out, we're not going to want to be social, and be around people. I don't even go to chow anymore because I don't like being around people. I make my own food and stay on my own bunk. When they finally let us out [from lockdown], everyone is really loud, and it gives me anxiety.

We were locked down all last week for staff appreciation week. Then after the week was over, all these COs [were] calling in. We ended up being locked down Saturday almost all day, then Sunday for a couple of hours. It

was miserable. You can tell everybody is in a different mood, people are more willing to argue with each other and with COs, because we can't go outside and it's nice out.

Difficulty Meeting Basic Needs (Food, Water, Showers)

On Saturday, we were told the lockdown would be until Monday because it was Juneteenth weekend and "nobody is here." Then we were told it would be 7 days, then 10, then 12, and it ended up being 14 days. Over the first weekend, sack lunches were served. There was one day when they didn't serve lunch. They said, "you guys have enough food in your drawer.

We're just going to feed you extra at dinner." People were furious.

My unit is currently on a 10-day quarantine and things are so off course. . . We were made to eat last for all meals, which means half of us end up getting what was for lunch and we get 5-10 minutes to eat as opposed to the required 20 minutes.

The lockdowns are getting ridiculous. Sometimes they let us shower and sometimes they don't.

As soon as we hear "modified" [on the officer's radio], we go out and fill up our pitchers

with water and ice. We have a couple of good people who will run a line movement a couple of times an hour so we can go get water and take a shower. [Other officers] will say, “we don’t have to let you out.”

don’t manage things very well. They get over the top. They’ll get really short with us. They set the tone on the unit.

Some [COs] aren’t suitable for [working around AICs struggling with lockdowns] because they are harsh and rude, and not understanding of the mental health struggles. They use discipline; they just say rules are rules, and that’s it.

These reports indicate that excessive lockdowns at CCCF are causing alarming and widespread harm to AICs.

Harsh and Indifferent Treatment by Staff

If a certain amount of people call in, they say, “Should we do modified operations or lockdown?” and they laugh about it. It’s really getting to be inhumane.

A lot the officers are working overtime, so that adds to the negative energy [during lockdowns] because they are tired, they are overworked, and they

ODOC Deprived AICs of Work Earnings and Charged AICs More for Canteen Items in 2022

In 2022, AICs reported that the lockdowns affected their ability to work, which impacted their earnings. Some struggled to pay for their basic needs.

I was denied going back to work [and denied my pay] . . . I did not have nor did I get COVID during the latest lockdown so it is unfair I was denied the ability to return to work with my peers.

We can't support ourselves.

Adding to this financial burden, AICs reported that prices for items sold in the commissary were raised in 2022. AICs said that staff told them that inflation and supply chain issues made the price increases necessary. Commissary goods were already exorbitantly high in proportion to AICs' low pay, and the increases made some items prohibitively expensive, forcing AICs to cut back on essential items, as there was no corresponding increase to AIC's monthly pay until 2023.⁶

It's really a struggle. I only order every other week and try to stick to spending \$20-30 per week, otherwise I won't have enough money. I'm going without coffee. I recently went

without shampoo and toothpaste for a week while waiting for my pay. I had to brush my teeth with water.

I only order once a month, when I get paid, because I don't want to put it on my family to help. I get paid like \$50 per month. I usually buy hygiene products, and some crackers... I have to make sure I have enough money to call my kids. They said [canteen prices are] going to keep going up because of inflation.

Physical Conditions Continue to Create Unacceptable Risks to AIC Health and Safety

AICs report that poor physical conditions at CCCF continue to cause hardships. A few of the most salient concerns shared by AICs are described below.

6 OAR 291-077-0030 (May 16, 2023).

Excessive Heat

During the summer of 2022, AICs expressed the suffering caused by the intense heat inside the prison, combined with frequent lockdowns.

The living conditions have declined. That was especially felt when our fans were removed in the peak of our hot summer.

AICs reported that in July of 2022, ODOC administrators instructed staff to remove large fans from the housing units, regardless of the temperature. AICs said that the heat and lack of proper ventilation created an intolerably hot, stifling, and dangerous environment. Reportedly, at least one AIC lost consciousness and was taken to the hospital.

There's no relief from it. We get into the shower with our clothes on and go to bed wet.

AICs reported that when they asked officers to open unit doors for brief periods to get fresh air, officers refused without explanation. Similarly, people on the medium side asked if they could prop open the small mail slot in their metal cell doors, to allow some airflow, and officers refused to allow this. On the minimum side, AICs were reportedly only allowed one cup of ice per day to mitigate the heat.

Compounding the feeling of being trapped in suffocating heat, AICs reported being subjected to lockdowns during the summer of 2022. At times, AICs were not allowed to go outside for periods of several days, because officers said it was too hot outside. After a ten-day lockdown in June, one AIC shared:

It was so hot in here – the airflow in the unit was turned off – we were all screaming and yelling. It was horrible. I'm glad that's over.

Dangerous Bunk Beds

AICs continue to report of serious injuries due to falls from the top bunk. (This in turn leads to more lockdowns for 911 calls.) AICs have shared many such incidents; a few of the reports are the following:

- A woman who should have been approved for a lower bunk due to her weight fell from the bed, broke two ribs, and one of her lungs was punctured and collapsed.
- An elderly woman got her foot tangled in sheets and fell off the top bunk while trying to descend the bed. She came back from the hospital with stitches in her head.
- A woman fell and “broke her back.”

AICs say that the bunk beds are “scary” and “really dangerous,” especially because people fall directly onto metal furniture and hard concrete floors. Free-standing bunk beds that are not abutted by a wall are doubly precarious. AICs have pointed out that the frames appear to be assembled incorrectly because the lip of the metal frame faces down, instead of facing up to hold the mattress in place. This makes the mattresses prone to sliding around when people move. Many AICs have chronic nightmares which can cause them to move in their sleep. Many also take medications to help them sleep, and being drowsy makes them more vulnerable to accidents if they need to wake up to use the bathroom in the middle of the night. AICs have made suggestions to staff to improve the safety of the beds, including attaching metal safety rails, securing the mattress in some way, or placing anti-slip stickers onto the frame. Reportedly, CCCF has rejected these ideas.

We're getting locked down for people falling off their bunks. People fall off their bunks all the time. A lady the other day fell and split her forehead open. I fell off the bunk once, onto the toilet seat. My whole thigh was black for a week.

which has led to mold spots in the ceiling above the AIC units that are directly below the leaks.

The [water] pipes, the smell that comes off them -- they're not up to code. You would not believe the smell. It's horrible. Our sinks are always clogged, our toilets are always going out.

AICs have also shared concerns that laundry facilities are not well maintained, and that machines do not function well. One AIC contracted scabies after her laundry was washed together with the bedding of an AIC who had a similar-looking rash. There were also reported lice outbreaks at CCCF in 2022, and AICs reported that the protocol for screening new intakes for lice had become lax prior to the outbreak.

Generally Poor Utilities and Hygiene

AICs report that the water quality at CCCF is poor. When they arrive at CCCF, they are warned to limit hot water when showering because the water is very hard. The water causes many AICs to experience dandruff, very dry skin, and rashes, and it irritates and worsens skin conditions such as psoriasis and eczema.

On Medium, the cells have sinks attached to the toilets. The water from these sinks reportedly smells bad, contains sediment, and tastes “chemically, warm, [and] disgusting.” During lockdowns, this water is sometimes the only water available to drink.

AICs report that the hot water for showers and laundry “comes and goes,” and that the water is often “ice cold.” Outages of hot water have been reported during the cold winter months. At times, hot water will last through the day but run out by the evening. This reportedly causes laundry workers to conserve hot water by only using cold water to wash clothing and bedding, raising additional concerns about hygiene.

Plumbing issues also are cited by AICs as creating unsanitary and hazardous conditions. There are reportedly significant water leaks in the laundry area,

Prison Protocols at CCCF Have Become Increasingly Intrusive and Punitive

In 2022, AICs reported a disturbing shift in prison protocols. AICs told us that CCCF was becoming a more rigid and punitive environment. We heard many accounts decrying invasive protocols and the “dysfunctional culture of abuse” at CCCF.

AICs reported that there is a culture of “bullying” from officers. To some, it appears that the harsher COs treat AICs, the more they “rise up” in rank. AICs often report that they are scrutinized and picked on for minor infractions remarkably often. AICs have also shared that they are told by staff that, because CCCF is also the general men’s intake facility, extra restrictions are necessary for all AICs.

AICs observe that there are many “entrenched staff,” as well as some newer staff, who seem committed to maximizing the punitive aspect of the prison environment. At the same time, AICs have observed that other more empathetic staff who care about the welfare of AICs are often “chased off” or chastised.

The last two captains were more “pro-AIC.” They did little things to make things feel more normal, like allowing new craft items, letting us wear shorts in the day room, and letting us bring cups and bowls into the day room. Now it feels like something is shifting. It feels very menacing. Everything is so rigid all of a sudden. The new captain goes around ripping down signs and telling people what they are doing wrong.

AICs report feeling demoralized and exhausted from being treated with increased hostility and suspicion. They explain that certain officers are entirely uninterested in supporting AICs or treating them with humanity, and are laser-focused on control, maintained through verbal intimidation, new arbitrary rules, and rigid imposition

of discipline and threats of discipline. Possibly due to staff shortages, AICs say that new officers are coming in frequently and imposing sudden changes to rules. AICs are jarred by the shifting expectations of harsher or different rules, because officers often make no effort to understand the needs of the population at CCCF, or they are simply abusive.

Staff are doubling down by reintroducing stringent and draconian rules that they had been moving away from [pre-pandemic], towards normalization. They have made it clear that they are threatened by normalization because they would have to change how they treat us, and thereby lose some of their power and arbitrary control.

On the medium side in 2022, CCCF imposed a new policy of line movements every 30 minutes, random pat downs during line movements, and pat downs every time AICs left their housing units. CCCF’s justification to AICs was that this was the way things used to be before the pandemic. AICs explained that this policy is actually significantly worse than pre-pandemic protocols, because line movements did not previously include random pat downs. Moreover, CCCF provided no explanation or obvious necessity for the sudden imposition of stricter line movements and pat downs. The explanation given was simply, “This is the way it used to be.” We often

hear comments from AICs that random pat downs are traumatic and humiliating.

Kitchen workers... [had] to pat themselves down in front of a male kitchen coordinator. [It] looked very awkward and demeaning. I had to look away because I was ashamed and embarrassed for [them], like I was seeing something private happening. The poor girl looked ashamed and downtrodden about doing it, very uncomfortable. [It was] very inappropriate.

It feels like the Gestapo stopping you and asking you for your papers. I asked an officer whether this policy helps them

find contraband. He said, “No, it is really just a show of force.”

One AIC observed during line movement that certain women “are stopped all the time and made to wait while others are searched first [which] makes them late to their appointments.” Being late for appointments causes AICs to risk falling out of compliance with the institutional plan that they are required to follow and can lead to disciplinary action.

Many AICs find that these protocols are arbitrary and can change at any time, depending on the officer in charge. AICs have reported being singled out and treated more harshly by officers for no apparent reason. AICs report that certain COs seem to approach protocols with an aim to demean and intimidate AICs.

AICs explain that the excessive focus on punishment and control, even in relatively innocuous circumstances, contributes to a demoralizing and degrading environment. For example, CCCF reportedly began applying “progressive discipline” for late library books in 2022. Progressive discipline involves warnings and informal measures like “cell-ins” (periods of in-cell confinement) before formal discipline is imposed.

It used to be, they would send you a late notice and you could then renew it. [If you did not renew it] you just couldn’t check out new books until you turned in the old one. [Then] they announced they were going to do DRs [formal discipline

reports] for late books. People complained and the captain said that was way too harsh, so now it's progressive discipline. First, it's a 72-hour warning, then a 4-hour cell in, then a 24-hour cell in, then it escalates [to formal discipline], all the way up to going to the hole [disciplinary segregation].

One AIC reported that the fear of punishment, combined with how difficult it can be to reliably access the library drop-off to turn in books on time, has deterred her from using the library.

Who wants to be threatened with a cell in? The library is the one escape we have during COVID. To self-educate, explore, be creative. To have that be a threat is so much stress and anxiety.

You're only allowed to go to the library every two weeks. You might have to cancel your library session if it conflicts with work or a callout. You can turn in books at your session, or at the hallway book drop. But you can't do that unless you're in that hallway. It's way down by Medical. All the officers assume you can drop them off on your way to a callout [appointment]. But if you don't have a callout, or you don't go to Medical, you may not have an opportunity to be in that hallway.

One AIC summarized the recent atmosphere at CCCF this way:

Coffee Creek is continuing to regress back to the old ways of

treating inmates and away from the “Oregon Way” of humanization and normalization that ODOC pushes to the public as their direction.⁷ It feels like we have gone backwards by ten years.

AICs Experience Demeaning Treatment from CCCF Staff

A related concern often shared by AICs is the generally degrading way that CCCF staff speak to and treat them. AICs share accounts of being routinely treated with aggression, dismissiveness, and/or condescension.

[One officer] talks to people like they’re pieces of crap. She says things like, “you’re my job security, so the more stuff I do to

you, the longer you’ll stay in here.” She calls [AICs] “F-ing C---.”

They kick you when you’re down.

A verbal yes is given for something, but never happens. No plans are made, no date is announced, no actionable agenda is laid out. There is no intention of following through with the request.

There’s no common sense in this place. A person can be bullied for months by someone before an officer will do anything about it, even if 20 people

⁷ The Oregon Way is a philosophy that ODOC began touting several years ago, after correctional staff from Oregon traveled to Norway to tour Norwegian prisons in 2017 and 2018. ODOC’s website states, “At its foundation, the Oregon Way is about prioritizing employee health and wellbeing by normalizing the correctional environment and, in turn, improving the outcomes for incarcerated people,” and that it is “based on based on best practices in security and the belief that humanizing and normalizing the prison environment is beneficial for employees and the people we incarcerate.” Oregon Dep’t of Corrections, The Oregon Way, <https://www.oregon.gov/doc/about/Pages/oregon-way.aspx#:~:text=The%20Oregon%20Way%20is%20a,and%20the%20people%20we%20incarcerate> (last visited June 5, 2023).

are telling them about it. Because they're too busy focusing on people tucking their shirts in.

Most of the staff here act in an unprofessional manner . . . a general attitude of disrespect. The tone is often condescending, reprovng (as if talking to a two-year-old), sarcastic . . . oftentimes openly abusive and compounded by mistreating the person in the presence of other AICs.

I was surprised to see how many kytes [written communications to staff] are completely ignored. It's just one more way to show their contempt

for us as adults and human beings worthy of common courtesy and respect. And yet, if we even begin to question their behavior or point out inappropriate behavior, their immediate response is to either threaten, or in many cases, carry out sanctions.

One AIC explained that she had been persistently bullied by another AIC at work and was frustrated by staff's failure to take the situation seriously:

I'm missing out on learning at work [about] the career I want, that would support me and my child, and it's all due to DOC letting an unsafe situation continue, and turning a blind eye to [it].

Another AIC reported that when she inquired about the lack of response to a grievance she had filed, staff reacted as follows:

[Staff] brought the kyte down to my housing unit, waving it around, saying they don't always respond to grievances... she [was] aggressive, demanding...this makes it very difficult to have a sensible conversation... Where I have not found clarity in the rule, I have reached out and found myself feeling reprimanded for having done so.

AICs have also shared examples of staff scrutinizing their appearance to a humiliating degree. They say that punitive attention on female AICs' appearance and dress causes some women to feel shame, self-consciousness, and indignation. AICs expressed frustration with certain officers' harsh enforcement of a purported rule to keep shirts tucked in while walking in the hallway. One officer reportedly imposes immediate cell-ins for this infraction. Another AIC said that staff has told female AICs that, for the protection of male staff, AICs are not to wear clothing that is too tight or revealing.

They literally bark at us to tuck our shirts in if not tucked in. [These behaviors are] designed to constantly remind

us that they control our bodies beyond imprisoning them.

They have us "model" shirts and pants to the clothing room officer when we ask for new clothing. It must meet his or her subjective approval as not being "too suggestive" and if so, [they make us] try on new items.

When you go in to get a pair of jeans, you have to [try them on and get officer approval], and it's usually a man. They say that if we wear clothes too tight it puts the male officers in jeopardy.

These comments reveal a disturbing attitude among CCCF staff of shifting blame onto women for the ongoing problem of male officers committing sexual misconduct against AICs.

Half the officers in here are having affairs with inmates. These young girls, I don't blame them. They come from terrible circumstances, and that's their survival. The guards exploit it.

Access to Medical Services and Mental Health Care at CCCF is Severely Inadequate

AICs report that staff shortages and other problems continue to seriously hamper AICs' access to adequate medical care.

Medical Services

AICs report long delays to get treatment for urgent medical conditions, and that recommended treatments and surgeries are often postponed indefinitely. Medical appointments are routinely rescheduled and cancelled. Approved procedures such as X-rays have been delayed because staff "forgot" to schedule them. Preventative health care appears practically non-existent, given how difficult it is for AICs to secure a medical appointment. AICs also reported a significant drop-off in the number of volunteers to care for AICs in hospice care last year. AICs said CCCF staff told them that they do not have the funds to train more volunteers. We also heard reports that at least two cancer patients died in hospice last year at CCCF. To illustrate the scope of the problems with medical services, below is a sampling of reports from AICs about medical services at CCCF.

- An AIC recently died in her cell. AICs in her unit report that she did not receive the medical care that she needed.

- An AIC with serious health problems was sent out for tests. Upon her return, CCCF placed her in medical isolation for 14 days, confining her to her cell for over 23 hours per day, except for a 30-minute period during which she had to choose between making phone calls or taking a shower. Meals were delivered to her cell on a tray. After 14 days came and went, she realized that staff had seemingly forgotten to move her out of isolation. When she reported the oversight to a CO, he told her he had no control over it. On day 18, a psychiatrist visited her, and by this point she was in such poor condition that the psychiatrist told the officer to move her out of isolation immediately.
- An AIC was scheduled 8 or 9 times for a medical appointment to address severe pain from a toe injury, which was exacerbated by the work boots she needed to wear for her job. At each appointment she was turned away and told the appointment would be rescheduled. This caused her to miss time at work and to risk repercussions from her supervisor. Eventually, she gave up and asked to switch to a work assignment where she could wear tennis shoes to mitigate the pain.
- AICs commonly report they will not be sent out for specialized care if they are too close to their release date. One AIC who was three months to her release date was told she needed radiation treatment to treat a serious autoimmune condition, but that CCCF would not schedule the treatment.
- *"The nurse practitioner [NP] is only here [on Minimum] three days this month. So if you don't have a pressing matter [you can't get an appointment]. All these people are on hold for medications because the NP has to sign off on them. There used to be a doctor. [In the past] I had an appointment with the doctor, and he told me they just cancelled his contract because they don't want to pay for a doctor. They're just going to use the NP and split her between the two sides."*
- *"Most people have [a wedge pillow] for an ongoing [medical] situation. There's no need for an expiration date. [Mine was removed because they] said I wasn't on the list [of approved AICs]. If it was another officer who was strict, I would have gotten in trouble for that, maybe for lying to an officer, which could have affected my job. I kyted medical, I asked for it to be renewed – they sent back a [form] saying they no longer handle "leisure items." I have lymphedema and cellulitis; my legs swell and retain water because I'm on my feet all day and I need to elevate my legs. They're saying the pillow can now only be used*

under the mattress at the head of your bed. There's a lot of people with leg issues like DVT [deep vein thrombosis], a lot of people that need it to put their legs up for swelling, or to alleviate stress on their back. These wedges are medical devices."

- An AIC who ran out of distilled water for her CPAP machine was forced to go without water for 12 days, during which she ran the machine without water.
- An AIC went three weeks waiting for a refill of her diabetes and blood pressure medication.
- An AIC experienced permanent loss of eyesight because she waited so long for treatment of her macular degeneration.
- An AIC was treated for hepatitis for a month, before being told that it was a mistake and she never tested positive for hepatitis.
- An AIC was mistakenly called to medical for a syphilis treatment and, upon realizing their mistake, staff announced to the entire unit that "whoever has syphilis" should immediately report to medical.

Mental Health Care

AICs have also reported that access to mental health care remains sorely inadequate. For example, one AIC sent "a stack of kytes" [written communications] asking for help with her mental health, but CCCF staff ignored her requests. Her mental health declined, leading to an emotional outburst at work. She was disciplined and lost her job, but still did not receive mental health care. She saw no point in trying to challenge the discipline decision, saying, "I'm tired of fighting this place." Other AICs shared that available mental health care is heavily focused on medication, and that meetings with behavioral health counselors are usually too infrequent to meet people's needs for therapy and support.

Medication Assisted Treatment Program

Several AICs have raised concerns about the administration of the Medication Assisted Treatment program, intended for AICs with opioid use disorder. AICs have reported that they believe the program is not being

administered properly. They believe this because of the alarming changes they observe in some of the women enrolled in the program. AICs report that it is "so sad" to see previously energetic young women who look different after starting the program. "Their eyes are dead, they're slurring, they don't wash their hair." They reportedly appear impaired or intoxicated, fall asleep frequently in the daytime, and seem desperate for the medications, even to the point of "pounding on the cell doors" to go to medical services. We also heard several reports from AICs who were very concerned about mismanagement of the MAT program because of a sudden death of an AIC in the program.

Increased Barriers to Maintaining Contact With Loved Ones Causes Despair and Isolation

Over the last few years, AICs have faced numerous barriers to seeing and talking to their loved ones. AICs report frequent and unpredictable suspension of visiting hours. Also in 2022, ODOC announced a policy requiring phone numbers of AIC contacts to undergo a cumbersome validation process. We received numerous reports from AICs about how this cut them off from family members and other supports, causing widespread panic, frustration, and hopelessness.

In-person visiting

The lack of regular and reliable visits with loved ones for three years has caused significant despair and desperation to AICs. Often these restrictions on in-person visiting are given with little to no notice, resulting in loved ones of AICs travelling great distances only to be advised that they would not be permitted to visit with the AIC. Visitors from other states have been forced to cancel travel plans.

- "[Visits] let me know I have a life other than this place."
- "I had someone coming to visit me from Texas. This is the third time COVID has taken a visit from me. I have had three visits in four years."
- One woman reported that she had not had any visits in three years because cancellations to visiting had

become so frequent and unpredictable that her friends eventually stopped coming altogether.

- “[During lockdown] we heard that the men at two different facilities had Mother’s Day events and photos with their children. We didn’t even get visiting, or a photo opportunity, and we’re the moms.”
- During the holiday season in 2022, CCCF abruptly cancelled visiting due to staff shortages. An announcement was made on December 17 that visiting would be cancelled at least until December 23. Many AICs missed out on planned visits from family, which was “devastating” and caused family to cancel at the last minute, or fly in from another state, show up at CCCF, and be turned away.

Phone validation requirements

Another barrier to communication implemented in 2022, which continues to negatively impact AICs at CCCF, was ODOC’s rollout of phone number validation requirements for all individuals receiving calls from AICs. This requires third parties to register their phone numbers and a credit/debit card through the service provider. The process proved to be incredibly cumbersome and complicated, involving over 20 steps to complete. AICs reported that many of their loved ones had difficulty completing the process, causing delays in communication; others were never able to or were unwilling to complete the process. Many AICs share that phone calls with the outside world are now virtually impossible.

There is nobody on the phone. Nobody can get through.

Numerous hurdles have prevented people from registering their phone numbers. The process requires access to the internet, a bank account, and a credit or debit card, and the ability to read and complete the steps. Family and friends of AICs have many reasons for not validating their phone numbers. Advanced age, health and mental health conditions, lack of internet access, lack of a bank account or credit/debit card, or living outside the United States, are just a few barriers. Others are simply

not comfortable sharing their personal information with the service provider and/or ODOC.

I don’t understand why [this is necessary] if we’re calling with our own money. But I do know that I won’t be able to talk to my sister the rest of my time due to this. I’m so angry . . . [there is] always something to keep us on edge.

AICs have reported feeling overwhelming despair and hopelessness because they cannot call their loved ones. Many shared that their families did not understand how to complete the requirements. Incarcerated parents at CCCF are facing an additional barrier to staying in touch with their children. Many AICs also reported that this policy burdens their families, who are already under stress from having a loved one in prison.

We already feel helpless and separated. This also has an emotional effect on our families, and they are already doing time with us.

My aunt (in her 80s) doesn't even have a computer, so she can't go on the internet.

How does this have anything to do with corrections and safety, when you're cut off from your support? This causes mental health relapses.

AICs also expressed frustration and anger that the phone requirements make it nearly impossible to directly contact transitional housing and other outside resources, which prevents them from taking initiative in their own release planning.

In order for rehabilitation and aftercare to happen, or even for us to just create options for ourselves, we need the ability to reach out to resources. WE are the only ones responsible for our own personal change and growth, and the Department of

Corrections is blocking our ability to become more independent, as well as increasing our chances of returning to prison.

It makes [release planning] a lot harder when I can't even talk to my parents, and I can't ask them if it's okay to put them down as a paroling address.

AICs Report Ongoing Negative Impacts from Drastic Reductions in Programming

AICs reported that programs were slow in returning to CCCF in 2022, and that programming has yet to be restored to what was available prior to the pandemic.

We are housed in here like cattle with no outlet and no timeframe when this will change.

Religious volunteers were scarce in 2022, reportedly due to problems getting badge approval by CCCF. AICs who relied on regular meetings with religious mentors for spiritual support shared that the lack of volunteers made it difficult to cope with the harsh conditions at CCCF.

In 2022, many AICs shared with us the sentiment that it felt like all of their positive outlets had been stripped away during the pandemic, that little relief was on the horizon, and that CCCF appeared to have no concern for the devastating impact this was having on AICs.

The despair of AICs about loss of programs was exemplified in the sudden suspension of the CCCF in-cell craft box program in 2022. Organized through CCCF's Life Skills Department, about 290 AICs participated in this program to knit, crochet, bead, quilt tapestries, and create other art projects. Participants ordered and paid for all their own craft supplies and stored them in a box in their cells. Program participants were allowed to keep their finished items in their cell or to mail them to loved ones. The program provided AICs with a therapeutic and constructive activity that allowed many to meaningfully remain in contact with and express their love to family and friends.

In mid-August 2022, CCCF seized all craft boxes from program participants without any notice. Program participants were hurriedly forced to hand over craft supplies, boxes, and finished products without any justification other than an announcement that the craft boxes were being collected. AICs said that officers informed program participants that if any craft items did not have a corresponding purchase receipt, the items would be considered unauthorized, resulting in disciplinary action and loss of an incentive level. Without receipts for all their items, some AICs threw away many of their items so as not to be punished. Examples of items seized included art supplies, ornate beadwork, large collections of expensive gel pens, crochet blankets, crafted baskets, bags, and stuffed animals.

There seems to be a punitive aspect beyond just taking our crafts.

Many AICs reported that staff wholly disregarded the impact the decision would have on them. AICs expressed that it appeared to be a "group punishment for a very few people who violated the [craft box] contract." The sudden removal of craft materials was devastating because the craft program is "a huge coping mechanism" for many people.

I watched people totally break down. People would break down sobbing as they handed over their craft boxes because it was the last thing they had. During COVID, little by little, things were taken away. They're taking everything away and expecting people to cope. Craft boxes was the final straw. After loss of the music program, and taking away fans during the heat, some people picked up new craft skills because that was something they could do [to cope].

Other comments that AICs made about losing the craft program indicate that the loss had a huge impact:

This has made my life a pure living hell.

*It was like cutting
off my right arm.*

*My crafts are the
only way I can give
something meaningful
to my family while
being incarcerated.*

A visually impaired woman shared: *"My distress has been decreased through the craft program, specifically crocheting since it is about the only activity that I can do by feel. This form of therapy was taken from me."*

In a particularly cruel incident as this unfolded, we heard multiple reports that staff took away a crocheted hat, shawl, and blanket from a terminally ill cancer patient who was visiting a friend in the visiting room. She was told that these were prohibited craft items. The items were only restored to her because her visiting friend strongly protested.

By late fall of 2022, craft boxes were restored, but at the time of this report, AICs have still not been allowed to order craft supplies.

Conclusion

IN OUR CONVERSATIONS with AICs, some have noted, when describing conditions at CCCF, that they accept that being incarcerated is a reality they must face and learn how to deal with. They understand that their incarceration functions as a punishment for the crimes they were convicted of. At the same time, they explain, with justified indignation, “this is not supposed to be part of our punishment.” They perceive that the abysmal treatment at CCCF is an additional, invalid, gratuitous punishment, one that is imposed with little oversight. Taken together, the reports from AICs are a call to the outside world to see that the way they are being treated is not ethical, just, or sensical.

Those who are incarcerated at CCCF are people who have complex lives, and goals for their future, just like anyone else. They work hard to move forward, to heal from past trauma and addiction, and to work towards their goals, all within the constraints of prison. Most of them will be rejoining their families and friends and returning to the broader community in the future. The harm to AICs imposed by the environment at CCCF is a roadblock to their efforts to take their lives in a more positive direction.

Over the last year and a half, AICs have often told us that they feel like they have been forgotten about and that their dire circumstances are going unnoticed. As the world has “moved on” from the pandemic, their situation only seems to worsen. The needless suffering, indignity, and inhumanity that has been allowed to proliferate at CCCF will go on if the voices of AICs continue to be ignored. We urge you, the reader, to consider whether the current situation at CCCF is really how we as Oregonians want to treat the individuals that are confined there. ■