

**DEATH
BY A
THOUSAND
CUTS** VOL. 2

**STORIES FROM INSIDE COFFEE CREEK
CORRECTIONAL FACILITY**

A REPORT SERIES BY THE WOMEN'S JUSTICE PROJECT



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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 Facility 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.

Introduction

“There’s a great amount of fear in here. They own you and can pretty much do anything they want at any time. There is a very high stress factor, and very low trust.”

“We are having a huge mold issue from the dilapidated roof. [We] are all having headaches, sore throats . . . the mold smell is so thick.”

“He doesn’t treat us like human beings, we are garbage to him. And he makes that very well known.”

“Everything about CCCF is compromising my sense of being safe.”

The “Death by a Thousand Cuts” Report Series at a Glance

This is the second volume of our ongoing report series on conditions at Coffee Creek Correctional Facility (CCCF), Death by a Thousand Cuts (DBATC). When the Women’s Justice Project (WJP) launched this series in July 2023, our intention was to shine a light on the alarming conditions at CCCF by amplifying the voices of people incarcerated there. We created this report series because throughout 2022 and into 2023, adults in custody (AICs) at CCCF were sharing concerning stories with us nearly every day about the harsh environment at CCCF, and describing extreme hardships in nearly every aspect of daily life in the facility. We heard an overwhelming number of reports from AICs about

unprecedented levels of suffering at CCCF and expressing despair that, as the worst impacts of the pandemic subsided in the wider community, no one was acknowledging the unrelenting crisis at CCCF. The name “Death by a Thousand Cuts” came from a comment of an AIC explaining the devastating cumulative impact of ongoing poor conditions, and the sense of overwhelm and degradation that AICs experience from navigating countless different indignities and harms at CCCF every day. In our first volume, we outlined the longstanding serious problems and entrenched toxic culture at CCCF; the numerous ways in which the pandemic exacerbated already poor conditions there; and the persistence of those devastating harms, which AICs at CCCF continue to endure. 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 Gender Informed Practices Assessment at CCCF (“GIPA”)

Since the publication of volume one of DBATC seven months ago, WJP has continued to hear not only additional troubling stories of dire conditions at CCCF, but also reports of increased retaliation, ill-treatment, and frustration

from CCCF AICs following the release of the “GIPA report” in August 2023.

On August 17, 2023, a 228-page report of the Gender Informed Practices Assessment (GIPA) conducted at CCCF was made public. The GIPA, funded by the Oregon legislature, was conducted by a team of out-of-state experts from the Women’s Justice Institute and the Center for Effective Public Policy. This assessment is unprecedented in Oregon. It is the first comprehensive audit of the functioning and effectiveness of an entire Oregon prison. The GIPA report details extremely concerning conditions and widespread dysfunction throughout every area of prison operations, causing incredible harms to AICs incarcerated at CCCF, their families, and prison staff. The report not only finds that CCCF is not gender responsive, evidence-based, nor trauma-informed; it also describes a prison that is replete with dysfunction and dominated by a para-military and punitive culture. The findings describe CCCF’s culture as “dehumanizing,”¹ resulting in a “harmful environment for both staff and residents.”² Excessively punitive discipline was revealed to be a major driver of the culture at CCCF; GIPA assessors found that CCCF’s disciplinary practices “re-enact trauma, cause harm, and have numerous short- and long-term impacts on women.”³ The GIPA findings provide overwhelming evidence that CCCF is a profoundly unsafe environment for AICs.

In August 2023, Governor Tina Kotek acknowledged that the GIPA report was “sobering” and directed the Oregon

1 Alyssa Benedict, Deanne Benos, & Marilyn Van Dieten, Women’s Justice Institute, *Gender Informed Practices Assessment (GIPA): Report of Findings & Opportunities, Coffee Creek Correctional Facility (CCCF) 100* (2023), <https://www.oregon.gov/doc/Documents/gipa-report.pdf>.

2 *Id.* at 99.

3 *Id.* at 9.

Department of Corrections (ODOC) to identify within 60 days immediate responsive actions it can take without additional resources.⁴ In September 2023, the governor convened an Advisory Panel on Gender Responsive Practices in Corrections to discuss and implement recommendations in the GIPA report. The Advisory Panel is made up of advocates, formerly incarcerated people, and other community members and coordinated by a Gender Responsive Policy Analyst from the governor’s office. Joan Palmateer, who was the first superintendent at CCCF, was hired by ODOC to lead implementation of the GIPA recommendations at CCCF. CCCF staff formed internal teams to develop ideas for implementing recommendations, and selected AICs to serve on an “AIC Council” to discuss GIPA implementation with the staff teams.

However, despite all of the resource spending, busyness, and rhetoric from the governor, her office, and the ODOC, CCCF AICs are reporting little to no improvements. In fact, as described later in this report, conditions have worsened in some respects, as AICs have experienced significant backlash from those staff at CCCF who are opposed to any GIPA-related changes.

We are releasing the second volume of DBATC at this time to bring attention to how the GIPA and state responses to the GIPA have affected recent conditions at CCCF. Similar to volume one, the stories and descriptions in this volume were reported to us by people incarcerated at CCCF and people formerly incarcerated at CCCF.

4 Press Release, State of Oregon Newsroom, New Report Assesses Needs of Incarcerated Women (Aug. 17, 2023), <https://www.oregon.gov/newsroom/Pages/NewsDetail.aspx?newsid=203725>.

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CCCF's Approach to GIPA Implementation Has Been Harmful and Disheartening for Many AICs

Early response to the GIPA report

When the GIPA was made public, many AICs expressed that the report accurately captured the challenges and hardships they face living in CCCF, and some expressed hope for the possibility of improved conditions. ODOC hired Joan Palmateer to oversee CCCF's initial response to the GIPA. Some AICs who knew Joan Palmateer from her time as superintendent of the former women's prison, the Oregon Women's Correctional Center (OWCC), and as the first superintendent of CCCF, believed she would be effective in bringing improvements and that she was well-suited to confront resistance by staff who oppose changes. CCCF selected AICs to participate in a GIPA AIC Council to represent the AICs on their unit. Some

council members expressed that they looked forward to sharing their input and were enthusiastic about the opportunity to contribute to positive changes at CCCF. AICs said they were told that CCCF was creating 12 staff teams, one for each domain of the GIPA report. It initially appeared to some AICs, as well as to some staff, that change was coming to CCCF.

We also received reports from AICs who were initially very skeptical about any positive changes happening at CCCF, as well as reports of tension and division among staff about the GIPA report.

"I can tell you all that all these reports are a [sic] bitter sweet here at CCCF! The divide is now Grand Canyon wide between administration,

line staff (union backed), and AICs. It is getting worse before getting better! We are all walking on eggshells!”

“Line staff and upper management are at each other’s throats.”

While AICs shared that some CCCF staff and corrections officers were supportive of changes at CCCF and felt that the GIPA report accurately described problems that need attention, AICs more often shared disturbing comments of CCCF staff and corrections officers (COs) expressing their anger and frustration with the GIPA report. A sampling of these reports is below:

- An AIC saw a CO throw the GIPA report against the wall and yell that it was “bullshit.”
- COs were celling people in frequently to display their authority and provoke CCCF administration; and COs apparently wanted to flex this power while they could before any of their discretion to discipline was taken away.
- [The grievance coordinator] was upset about the GIPA and told AICs that she felt like she is being “raked over the coals about the grievance process.” When AICs asked her to train them about how to use the grievance process, she yelled, “Do your own research!”
- When the governor’s GIPA Advisory Panel toured CCCF, a unit officer told an AIC, “I’ve got to behave, GIPA is here.”

Soon after the AIC GIPA Council was formed, several AICs on the

council reported disappointment and increased skepticism about change. Council members said that they were instructed early on that their role is to report specific information to the AICs on their living units, and that CCCF administration will dictate what they are allowed to share with other AICs. In their second meeting, council members were reportedly given the first two pages of an 18-page list of staff ideas for changes, and told they were forbidden from showing the list to other AICs and could only verbally share the information. AICs reported that the ideas were not based on AIC concerns, that they were not asked for their input, and that they were told, “We’re not really taking suggestions right now.” AICs subsequently reported that, due to their own advocacy, there are now some processes for AICs to provide input about needed changes.

CCCF staff’s ongoing response

AICs reported that the GIPA has appeared to only make the dynamics between AICs and staff worse. Some said it feels like mentioning or being associated with the GIPA will lead to retaliation. AICs have noticed that COs are imposing more cell-ins—when a person is confined to their cell for hours, e.g., 8-, 24-, 48-, 72-hours—and are enforcing “weird rules” that had not been rules before. Some COs have reportedly expressed to AICs that they are upset about the idea of being re-trained and losing their discretion to discipline as they please. AICs also reported that some CCCF officers view AIC participation in the GIPA as a betrayal of a code of silence within CCCF. An officer

reportedly referred to AICs who shared information with GIPA assessors as “informants” and “rats.” AICs also noticed large black paper cutouts of rats on the walls of a hallway and in the Workforce office. A CO was heard saying that the pictures of rats would not be taken down because AICs had caused the GIPA by “telling on us.” One AIC said that a picture of a rat in the medical clinic was meant to be a warning about “ratting people out,” explaining that medical staff “like to joke about that kind of thing.” Another AIC observed that there have been rubber rat toys sitting in a counselor’s office and in the medical infirmary for a long time, for no clear reason.

AICs have noted that some COs are strongly opposing even minor changes stemming from GIPA efforts. For example, some COs were reportedly unhappy when an announcement was made that AICs would soon be allowed to wear their shirts untucked. The AIC Council was reportedly told that staff pushed back hard and immediately “bombarded” administrators with emails protesting the change, claiming that AICs would use the rule change to hide contraband and weapons in their shirts. In the week before the policy change, AICs noticed an uptick in discipline for untucked shirts.

“All of us are saying that it will be so much quieter in the corridor [next week] because they scream and yell at you, ‘Tuck in your shirt!’ every time you leave the unit. I watched girls getting

celled in last night for their shirts not being tucked. [COs are] just being vindictive because they don’t want to be part of this [change]. Not everyone, but a large group.”

Shortly after CCCF began allowing AICs to wear untucked shirts, AICs told us that the underlying problem has not improved—i.e., AICs continued to be disciplined and scrutinized for minor details. AICs noticed that when the rule change allowing untucked shirts was announced, CCCF posted prominent notices all around the facility reminding people of the rules governing attire.

COs have reportedly simply shifted their emphasis to other things, such as rolled pant cuffs, or imperfectly tied shoelaces. One AIC said she was told by a CO that her shoelaces were in violation because the left side appeared slightly longer than the right. The CO asserted that the AIC was making a gang signal with her shoelaces, which the AIC found absurd because she has never been affiliated with gangs and has a clean conduct record. Another AIC reported that a CO told her that a hair tie was contraband because it was on her wrist and not in her hair.

“Now they’re looking below the belt. They found something else to pick on. At least it’s not [focused on] our chests and torsos.”

AICs continue to engage but feel less hopeful for change.

While we have heard that AICs continue to participate in the AIC GIPA Council and are trying to make the most of the opportunity for change that is available to them, most reports from AICs concerning the GIPA are expressing disappointment and frustration with CCCF's response to the GIPA. Many AICs feel that CCCF is not showing a genuine commitment to making the significant changes that the GIPA warrants.

AICs have reported receiving mixed messages from CCCF about whether their ideas and feedback are welcomed. For example, CCCF reportedly aired a video to AICs inviting them to submit ideas for the GIPA by sending kytes (written communication forms). Then, AICs reportedly began hearing from the AIC Council that staff are not taking suggestions from AICs.

Additionally, AICs, including some on the AIC Council, have expressed that they do not feel heard by staff, and that updates and information from staff about GIPA implementation is often vague, opaque, and performative. CCCF has reportedly decided to respond to ideas and input from AICs via virtual "town hall meetings," which involve broadcasting a video of staff reading kytes and purporting to respond to the concerns raised in the kytes. AICs have shared that the responses have been unsatisfying, and that the overall presentation is "phony," "stagey," and "embarrassing."

"[At GIPA meetings] we hear a lot of run-on sentences without time frames. They say, 'It's under review, we're looking into it.' They tell us that there is a lot we will never know and that they will never tell us because then we'll share it with everybody and they're not ready for that. We're being told that the ideas are coming from the [staff] domain teams and that our role is just to pass on information to our housing units. But we get more questions [from AICs], because we're not getting the actual information. And they get frustrated."

"[The town hall video] is ridiculous stage acting. [AICs] are turning it off; they know [staff] are lying. They are trying to placate [us]."

"I know stuff is supposed to change, but nothing ever happens. I don't see it happening. It's all talk. There's no point to go get your hopes up."

"They [CCCF staff] are in a lot of meetings and everyone's patting themselves on the shoulder."

Lack of meaningful changes

Since the GIPA was released, AICs have been sharing that they observe little to no improvement. AICs and members of the governor’s advisory panel have proposed changes that involve little to no cost or resources. For example, it was proposed that CCCF staff stop strip searching people returning from workforce because those AICs are the highest incentive level, are unlikely to jeopardize their higher paying jobs, and already follow procedures to ensure they are not leaving with tools or items from work. CCCF declined to consider this proposal. As another example, in response to CCCF claiming that they did not have room for programs, AICs recommended that CCCF assess the use of space and identify the rooms that are regularly not utilized. AICs continue to wait for this assessment to be done. AICs report that the changes made thus far are superficial, are tokens, and do not reflect their most pressing needs and concerns, such as lack of programs, abusive treatment by officers, inability to communicate with family members, inadequate medical services, punitive discipline practices, etc. AICs also noticed that many of the changes were things that had already been completed or in progress before the GIPA. Below are examples of the changes that CCCF has implemented to respond to GIPA—which, again, painted a horrifying and grim picture of conditions at CCCF—as of March 2024, according to AIC reports:

- Installing soda machines in the living units.

- Providing new exercise equipment. (CCCF had already planned to purchase these pre-GIPA.)
- Putting birdfeeders in the yard. (A CCCF staff person purchased these five years ago and had been refusing to install them.)
- Offering smaller shoe sizes for slip-on shoes.
- Installing full-length mirrors on housing units. (Glass mirrors were initially installed, but they were quickly replaced with plastic mirrors. AICs report that the plastic mirrors are not very functional and actually undermine self-esteem because they create distorted, “funhouse” reflections, which is especially upsetting for AICs experiencing body dysmorphia.)
- Holding virtual “town hall” Q&A sessions with administrators. (“They did not give us a whole lot of information.” CCCF used to have in-person town hall meetings, which allowed AICs to have a dialogue with administration.)

“A lot of [CCCF’s initial GIPA planning] is basic maintenance that should be done regardless. Nothing is being done for our phone system that is still an issue, or more treatment for AICs to be able to accept more into the program; no kind of work release. Nothing that is helping us be successful upon our release or helping us make sure we don’t come back.”

“They gave us low hanging fruit that they were already going to do and had funds for.”

“Why aren’t they supporting something that can be part of someone’s rehabilitation?”

“They started letting us wear sandals in the yard; they give us these weird incentives. I don’t care about that—how does that benefit us or our rehabilitation? I want to be successful in the community when I leave.”

“We’re afraid to complain [about how CCCF implements GIPA], because then they will say you can’t wear slides in the day room or punish us [in another way].”

“A lot of AICs have quit the GIPA Council because they don’t feel like anything is being accomplished.”

The rest of the sections in this report below, covering various areas of poor conditions at CCCF reported to us in recent months, further illustrate why AICs are expressing such disappointment with CCCF’s response to the GIPA.

Physical Conditions Remain Hazardous and are Rapidly Deteriorating

**The roof on
Minimum is in
severe disrepair,
jeopardizing health
and safety.**

In December of 2023, we heard alarming reports that longstanding problems with water leaks from the dilapidated roof have become severe and caused serious structural damage, flooding, and mold in several areas of the Minimum facility living units. On December 13, 2023, women housed in the Minimum facility sent a letter to Governor Kotek asking her to take action to improve conditions at CCCF and specifically outlining the problems caused by the deteriorated state of the physical structure. The letter indicates that the disrepair has been causing problems for a long time and is now at a critical point.

The Honorable Tina Kotek
Governor of the State of Oregon
900 Court Street Northeast
Salem, Oregon 97301

December 13, 2023

Madam Governor,

We the residents of Coffee Creek Correctional Facility, are reaching out to you for help. The roof of the minimum-security dormitory building is in a sorry state of disrepair. Ceiling tiles have collapsed—in some cases onto prisoners' bunks, causing damage to personal property—and almost all the units stink of mold. Older inmates with compromised immune systems and women with breathing issues such as asthma are suffering especially.

The issues, by unit, include:

F100 Unit: The occupants of bunks 11, 12, and 13 had to be moved because the ceiling collapsed. Inmate property was damaged by the water and debris that poured from the ceiling. Water had been streaming down the wall there for some time (and was reported to staff), and inmates resorted to putting towels down overnight so that they wouldn't wake up and step into puddles of water. Laundry workers report that the drywall above the washing machines is dripping, and that the light fixtures there often fill up with water.

F200 Unit: There is a significant leak in the drywall above the handicap stall, and disabled residents have had to go to neighboring units to use the restroom. The wall behind the washing machines is damaged because the pipes within the wall itself are leaking—water was spurting out from this wall every time the handicap toilet flushed. The light fixtures mounted to the ceiling above the toilets are filled with water. There are buckets placed all over F200 to catch water dripping from the ceiling. Residents in the front aisle of bunks claim they are getting sick from the black mold from a leak in the ceiling there.

F300 Unit: There is a strong odor of mold along the back wall, where a ceiling tile next to the air duct has a rust-colored stain from a leak there. A few months back, water was pouring from the ceiling above the washing machines.

* The contents of the original letter were typed by the Oregon Justice Resource Center for presentation in this report.

F400 Unit: The ceiling tiles outside F400 collapsed due to water damage. Residents of that unit also report a mold stench throughout the unit, and many ceiling tiles are discolored from water damage.

There are also several leaks in the ceiling in the F building corridor that have damaged the mural painted there and require recycle bins to be placed to catch the steady stream of water.

The living conditions are rendered more miserable because, according to an AIC on the building maintenance detail, the heating and cooling systems are so out of date that they're obsolete, so workers can't replace the parts that are damaged. Entirely new HVAC systems are desperately needed, but the prison doesn't have the budget for it. Most recently, women on F300 unit were without adequate heat for half of the month of December, wearing multiple socks, thermal underwear, sweatpants, sweatshirts, beanies, and even wool-lined jackets to bed. When the heat did turn on, the air from the vents stunk of mold and mildew. These heating issues affect units seemingly at random. The hot water also goes out—sometimes for weeks at a stretch, as it did for F400 unit in November—and women have to be escorted onto other units to use the showers there, or resort to rinsing themselves with pitchers of hot water filled from the coffee dispenser. (The showers themselves, by the way, are also riddled with black mold because the prisoners paid to clean them are not trusted with bleach.)

The nearby treatment building, also located on the minimum-security campus, is no better than the dormitory building: there was a recent mechanical fire in the heating system, and residents report that their bedrooms have no heat whatsoever (although areas occupied by staff are comfortably warm).

The United Nations notes in its standard minimum rules for the treatment of prisoners that being kept apart from friends and family is the punishment—the conditions within a prison should not be additionally punitive. All of us here are grieving another holiday season spent away from those we love, while being housed in buildings that are barely livable and perhaps even making us ill: prolonged exposure to mold such as *stachybotrys chartarum* can cause respiratory symptoms and illness, especially the immunocompromised. We hope desperately that you will act to improve conditions here at Oregon's only women's prison.

Thank you for your time, Madam Governor, and we wish you happy holidays.

—The women of Coffee Creek

AICs also shared with us that there are “huge water marks” on the ceiling in common areas and “big bubbles” of water in the ceiling in the hallway. One AIC reported hearing loud splashing sounds in the ceiling above the bathroom area. In addition to housing units and corridors, water has reportedly been leaking in the salon, a supply closet, and the canteen unit.

“I got woken up...as rain drops are falling on the ceiling tiles above beds. I’m worried about the structure of the building. I see large splits in the posts supporting the roof.”

“This last week we have had several roof leaks. There are buckets everywhere and also ceiling tiles that have fallen apart due to water leaks. So there [are] now holes in the ceiling and you can smell the mold.”

“The more it rains, the more it smells.”

AICs told us that they heard that the roof is in such dilapidated condition that it feels soft and mushy to walk on, that seams in the construction of the roof are coming apart with grass and moss growing all over the roof, and that there are areas where water is trapped under the surface.

AICs also shared alarming descriptions of severe mold on the housing units on Minimum. The smell of mold was so

powerful on one unit that an AIC said it “kick[s] you in the face.” AICs reported mold “from floor to ceiling” in some areas, on walls right next to bunks where people sleep, and mold in the showers. Many AICs reportedly became ill from mold exposure, and sought medical treatment for skin rashes, sore throats, and headaches.

At a GIPA AIC Council meeting, a CCCF administrator reportedly told the AICs that “we have been putting lipstick on a pig for a long time,” referring to the leaky roof. The AIC Council was reportedly told by staff that a contractor assessed CCCF over a year ago and determined that there is significant structural damage on both sides of the facility that may cost up to \$17 million in total to repair; that the roofs on both Minimum and Medium need to be entirely replaced; that repairs will take about three years to complete; that the initial repairs will be on the F Building in Minimum and may cost \$1.6 million; and that repairing the roof on the entire Minimum side is estimated to cost \$3.8 million.

We heard concerns from AICs that the repair process will be disruptive and likely lead to more lockdowns, more closing of the yard, and an increased risk of injury for AICs due to a hazard of construction materials falling off of the roof.

“They’ll need equipment trucks to come in, so that will shut the facility down. It brings up all kinds of issues and concerns for AICs; the equipment they’re going to bring in, what kind of lockdowns, and [having]

zero yard time. Anytime they bring in construction crews, like when they did the [fiber] optic lines, that means no yard time, because they have to disarm the fences when they bring in equipment.”

Chronic problems with utilities (plumbing, HVAC, water).

In recent months, when discussing conditions at CCCF with AICs, we noticed that there are certain problems with the infrastructure which AICs are so accustomed to, they do not even think to complain about them. Exposure to sewage and dirty water, outages of basic utilities, poor ventilation, mold, and disgusting odors are some of these constant and long-standing problems.

A woman who was formerly incarcerated and recently released from CCCF explained that sewage frequently creates blockages in the pipes that eventually spill out. She explained that inside the lower-level cells on Medium, “raw sewage spews from behind the toilet” on a regular basis, causing sewage liquid to enter the cells from behind the plumbing wall. AICs use rolled-up towels to try to keep the moisture from spreading.

“Any time they work on [the plumbing], it spills out. Feces and urine sits there [inside the wall] and seeps through the concrete walls. It is constantly

wet and reeks. If it was really rainy, we would get a puddle under the bottom of the bunk.”

She also shared that there are several drains in the floor of the units and that a “disgusting” smell emanates from the drains due to stagnant grey water accumulating in the pipes under the floor. Other AICs shared that there are drains directly in front of some cells; others are in between the tables people eat at. Some people reportedly try to mask the smell by pouring cleaning liquids down the drain, but it does not help. AICs reported that the smell from the drains disturbs AICs “in the middle of meals” and while they are trying to sleep. For some it reportedly triggers migraine headaches, and many AICs get frequent migraines.

“Any time you walk by those drains, it just reeks. You learn to hold your breath or circumvent them when you can. When it pours rain, it backs the whole system up.”

“The plumbing is constantly backed up and the smell is ghastly.”

“It’s vile and disgusting. It smells worse than raw sewage. It is very bad when the weather is warm.”

“Cells get flooded when pipes connected to the washing machines get backed up.”

Recently, AICs have reportedly been submitting grievances because they want CCCF to do something about the “chronic unhealthy air.” The impact of bad air is exacerbated because AICs continue to be locked down frequently, cannot go outside, and “most officers won’t let us prop open the door” for ventilation. One person told us that when she once tried to clean out the air vent in her unit, there was so much “black dust” in the air that it set off the smoke alarm. Air vents were described as “hairy” and disgusting; AICs say there is no designated crew to clean them regularly. AICs also report there is no ventilation in the showers and there is “a lot of mold” in the showers. AICs also reported a serious mold problem in the kitchens.

“You can’t hold your breath the whole time you take a shower. If you look up it’s growing in the vents — you don’t want to look up.”

“The black mold is really severe from the constant moisture. There are a lot of people with respiratory issues and the black mold really compounds it.”

“[In the kitchen] it’s all over the white garbage cans, in the dish pit area, on the walls, on the floors, and around the grill.”

During a recent visit to CCCF, we noticed a powerful stench of sewage outside and inside the Medium facility. An AIC who was unfazed by the smell told us that the stench is a regular occurrence and

that CCCF often has to call in plumbers to unclog drains and pipes. Around the same time, we heard reports of flooding on the intake housing unit.

AICs have reported that due to ongoing problems with the outdated HVAC system, it continues to be extremely cold in the winter and extremely hot in the summer. Over the years, AICs have reported that the HVAC systems are so old that CCCF is unable to get the proper replacement parts for repairs, and instead are using random parts to “band-aid” the problem.

“[In one housing area] it feels like a sauna all summer long because it gets full sun.”

Hot water and warm air continue to frequently go out for several days at a time. AICs reported a fire on the treatment unit due to the HVAC system. Additionally, staff shortages have reportedly caused frequent shutdowns of the “clothing room” where the facility’s general laundry is washed (all laundry except for from the housing units), which means dirty laundry “just sits and doesn’t get done.”

Automatic cell doors are excessively noisy and impede privacy.

Some AICs have reported that the frequent sound of loud opening and closing of cell doors is causing chronic stress and hearing loss on at least one unit. AICs pointed out that doors could be left open during the day and closed at

night, as was the practice at Deer Ridge Correctional Institution when CCCF AICs were evacuated there during the 2020 wildfires. AICs also shared that their privacy is sometimes violated because cell doors open and close automatically:

“There are doors opening while people are using the toilet. It is awkward as a woman [when] a man can come by when you are in the most vulnerable position; your legs are spread [and] there is nowhere you can go.”

AICs reported that the noise of the cell doors slamming is causing people to lose their hearing. One woman said that the doors slam so hard during line movements that it “shakes screws out of the walls.” She said that CCCF staff measured the decibel levels and told AICs it was 92dB and safe, but that AICs did their own research to confirm that 92dB is high enough to damage hearing. According to the CDC, noise over 70dB over a prolonged period can damage hearing.⁵

“Three people are almost deaf and they are blaming the doors.”

Health hazards from CCCF mishandling of cleaning products.

AICs shared that many people are becoming ill due to frequent exposure to cleaning solutions in the air they breathe. The most common complaint was that cleaning products are not being sufficiently diluted, resulting in a powerful chemical odor. Cleaning solutions are used daily on surfaces; additionally, CCCF sprays heavily concentrated solutions onto surfaces and into the air with an ionizer which emits a chemical mist

“I start coughing and feel like I can’t breathe.”

AICs suspect they are becoming sickened from the cumulative and acute effects of the chemicals and are reportedly experiencing symptoms including respiratory issues, asthma attacks, difficulty breathing, headaches, nausea, vomiting, nose bleeds, ear bleeds, rashes, skin irritation, shortness of breath, muscle aches, blurred vision, and throat irritation. Some AICs reportedly try to limit their exposure to the contaminated air by stuffing towels under their cell doors. AICs said that when they complained of respiratory issues, they were tested for COVID, but many AICs felt their symptoms were different than COVID. AICs have observed that COs have also been sickened from the chemical spray; one

⁵ Centers for Disease Control and Prevention, *What Noises Cause Hearing Loss?*, https://www.cdc.gov/nceh/hearing_loss/what_noises_cause_hearing_loss.html (accessed Feb. 28, 2024).

CO reportedly told AICs not to spray while she was on duty.

Meal portions are often insufficient and AICs are sickened by inedible and spoiled food.

The poor quality of the food served to AICs continues to be a common complaint. As a result, many AICs reportedly live primarily on food purchased from the canteen. In October 2023, an AIC told us that they were served beef stew prepared with meat that had expired over three years ago.

More recently, we heard a report that several AICs on both sides of the facility suffered food poisoning after eating spoiled turkey that was served to them on Christmas Day 2023 at lunchtime. An AIC told us that the turkey served on Minimum appeared greyish and “had an off flavor.” She told us that she became dangerously ill after eating the meal; she experienced abdominal pain so severe she could hardly walk and felt very weak for several days afterwards. She said that when she went to medical for help, they immediately asked her, “Did you eat the turkey?” Medical staff reportedly told her that so many AICs went to medical services after the meal and the following morning that medical staff sent someone to the kitchen to ask them what had been served.

Adding insult to injury, AICs were reportedly served a sack lunch for dinner on Christmas that included pears that were rotten to the point of being inedible, that were “oozing and had black spots.” The remaining Christmas dinner sack lunch served to AICs was a meager bag of chips, a piece of lunchmeat and piece of cheese wrapped together, PB&J sandwich, four pieces of bread, and a tea bag. A few days after Christmas 2023, we heard a report that spoiled ham lunchmeat that looked “grey and green” was served to AICs for dinner.

As a result of many AICs avoiding the meals cooked in the kitchen, AICs have said that it commonly happens that kitchen staff will underestimate how much food they need to cook, and not enough food is prepared to serve every AIC a full serving. An AIC who said she could not afford to supplement meals by purchasing food from canteen shared:

This label for frozen cooked beef indicates that the product should only be consumed until September 2020. In October 2023, a woman in CCCF sent us this label with a note explaining that expired meat packaged with this label was currently being served to AICs.



“They’re not feeding us enough. I get too hungry and my blood sugar drops. They either run out, or they underserve, and they just don’t care.”

AICs who work on the fire crew, a highly physically demanding job, reported they do not get enough food when they are out fighting fires. They say that their meals are not larger, and not more caloric, than the usual meals served to AICs at the facility. According to a woman on fire crew, a typical meal is a sandwich with expired meat or a PB&J, veggies, and an apple. Sometimes, they will only be served a protein bar and an apple for lunch. Similarly, AICs who work outside CCCF at a distribution center warehouse reportedly are often served sack lunches with inedible food, such as tuna or chicken salad sitting in an unidentifiable liquid.

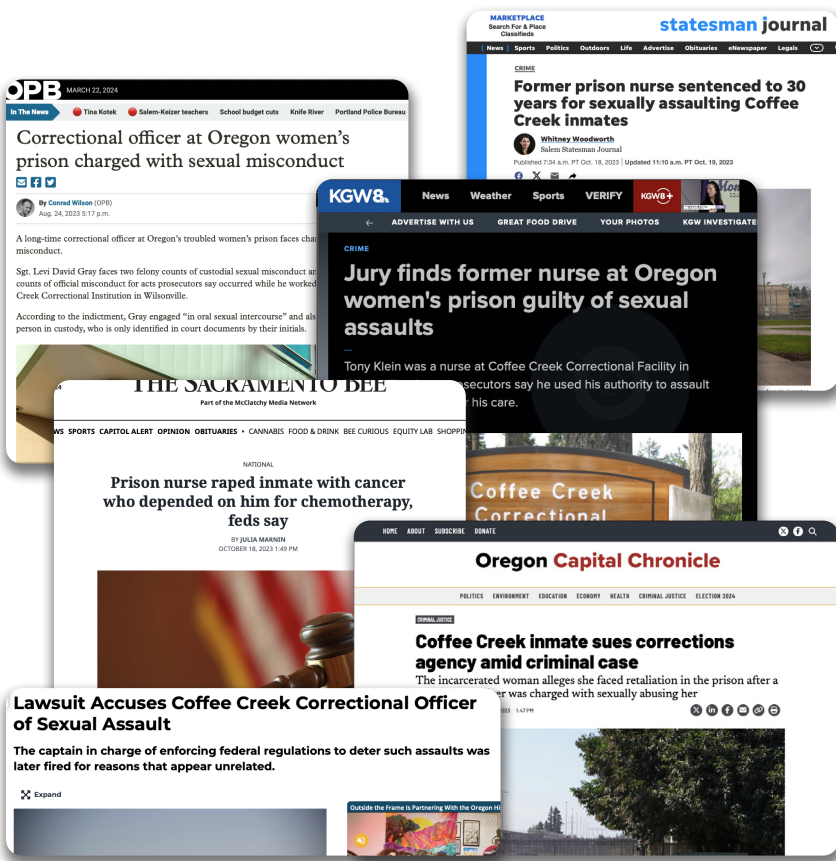
“The meat is half-frozen or it smells. It’s just gross. They give us veggies in a plastic bag . . . but they’re sour or stink or [are] rotten.”

“If the health department came in and did an inspection, it would definitely fail. Frozen meat comes in expired . . . [once thawed] it’s only good for a day and then it goes bad. It smells so bad.”

Reportedly, many AICs who are missing teeth cannot chew vegetables that they are served, so they have recently been advocating for permission to bring meals back to their units in order to soften the vegetables in the microwave.

AICs Continue to Describe an Environment of Rampant Sexual Abuse and Sexual Assault

WE CONTINUE TO hear horrifying accounts from AICs at CCCF about sexual assault, sexual harassment, and the total lack of appropriate services for survivors of abuse at CCCF. Meanwhile, recent lawsuits alleging horrific incidents of sexual assault at CCCF, and related news media reports, have called increased attention to the severity and urgency of this longstanding crisis at CCCF.



Rape and sexual assault by staff.

AIC comments shared with us about the persistent problem of sexual abuse of AICs by staff at CCCF included the following:

“This facility is a human sex trafficking warehouse that does nothing to keep its inmates safe or provide them with services and referrals into psychiatric care facilities to get the help we need after being raped repeatedly by this facility’s staff[.]”

“This facility and its managers are saying what happened to you is ok by your blatant disregard. There are laws that protect victims and allow for services referrals . . . none of this is something any managers, directors, administrators of ODOC [have] ever been concerned with.”

“All your staff does is sit on a computer texting each other, sleeping with each other and inmates, youtubing and facebooking, looking up guns, watching movies. This is what goes on here.”

Sexual harassment by staff.

AICs shared the following accounts of sexual harassment and privacy intrusions by staff:

- According to AIC reports, at least two officers have repeatedly stood very close to the shower and bathroom stalls, lingered in the area, and made eye contact with women who are showering or standing up after using the bathroom.
 - *“It’s too close; it’s a creepy feeling and he knows that people feel that way, it’s almost like, oh, you don’t like it? I’m going to do it more . . . he thought it was funny when people complained.”*
- *“If you’re naked and you hear that man’s voice so close, it’s triggering for 99 percent of people in here. For people that have PTSD, it causes panic attacks; nightmares. It shakes them up.”*
- *“[Staff] said it was a training issue, not a PREA issue. The training officers are old-school.”*
- *“Female staff said male staff have no business going into the shower area, but the male staff say that they can . . . they have that attitude of they can do whatever they want.”*
- One officer reportedly has a reputation for brushing his pelvis against women as he walks by.
- An officer with a reputation for sexually harassing women, who had been “walked out” of CCCF some time ago, was reportedly back working at CCCF. AICs reported that the officer was known for frequently strip-searching women and humiliating them by laughing at them and making degrading comments like mocking them for wearing a tampon and making sexual comments such as “spread those cheeks.”
- In December 2023, we heard that a CO was fired because he left a sexually harassing note on an AIC’s bed, concealed in a blank kyte to make it look like returned mail, that said, “What would you do for your officer?”

Traumatic strip-searches.

We also heard distressing accounts from AICs about the traumatic impact of strip searches:

“I saw [a] girl say, ‘I’m not getting naked for you guys again; it’s humiliating.’”

“I notice they do it right before people are getting ready to leave [be released]. They drag you out in handcuffs if you refuse to strip. It’s scary, it’s demeaning, it’s traumatizing.”

“One girl said [a particular CO] always stripped her when she worked at CDC until she told her, ‘I don’t like getting strip searched,’ and [the CO] said ‘why not?’ And she said, ‘because it reminds me of being molested.’”

Lack of services for survivors of abuse.

Many AICs have been abused prior to incarceration at CCCF. AICs say

there is no support in CCCF to help victims of abuse heal and that living in an environment surrounded by frequent sexual abuse and staff indifference perpetrates ongoing harm to survivors of abuse.

“I have no one to talk to about it in here. This place is making me worse.”

“This facility does not have any . . . trauma treatment. I cannot even function as I did prior to all of this. I have taken every class they have for self-help. The people that teach the classes are inmates. I’m scared I’m never going to get the help I need.”

“This facility does not care at all. I filed grievances [and] they get denied. I ask for a referral to a sex abuse trauma specialist, and I’m denied.”

The Use of PREA to Punish AICs for Consensual/Innocuous Social Interactions

WE HEARD FROM AICs that while the Prison Rape Elimination Act (PREA) does not appear to deter staff from sexually abusing AICs, CCCF is using PREA to investigate or punish AICs for non-sexual displays of affection, hugs, horseplay; and for having consensual same-sex romantic relationships. AICs reported being moved away from friends because they were “too comfortable” with one another, and that when they complained about staff misuse of PREA, they were retaliated against with threats of discipline.

“PREA is being used to punish and weaponize AICs for any form of affection, touch, hug, or horseplay. . . . Many of us don’t feel safe talking about this because of threats and retaliation from staff. The treatment, the targeting and the retaliation towards women, those who identify themselves [as] gay, transgender, lesbian, or any form of close bonding in friendships is being severely targeted and purposely watched.”

“They wanted to see how we did apart for 30 days. . . . The corporal told us there wasn’t going to be any paperwork and if we did well, we would

move back. In this meeting, I was threatened to be taken to segregation and [told] we’re ‘all nasty bitches.’ She said this before telling the lieutenant to cover his ears.”

One AIC, who shared that couples were being “split up and moved off the unit,” observed that CCCF’s policies around consensual romantic relationships are “too harsh.” She pointed out the hypocrisy of CCCF prohibiting innocuous relationships, while “turning a blind eye to officers’ sexual assault” of AICs.

“[AICs] deserve to have some human simplicity and something normal in their lives so they’re not so fractured when they get out. And these guys are punishing them. If there’s not a threat, what is the problem?”

Demeaning Treatment and Verbal Abuse by Staff Has Not Improved

MANY AICS HAVE told us that the toxic and abusive culture at CCCF is worse than ever and continues to be a source of chronic stress and psychological harm. AICs say that many COs are “bullies” who “bark orders” and make cruel and degrading comments to AICs.

“We have more bad ones than good ones.”

“We have multiple male officers that love to remind us they’re in charge.”

The verbal hostility from officers can be especially traumatic for survivors of abuse. One woman who was in an abusive relationship prior to prison explained that she has been trying to cope with degrading treatment at CCCF by telling herself it could be worse, and that she came to realize that this mirrored the way that her husband’s emotional abuse made her feel:

“I realized that [when] you asked my opinion about things happening [at CCCF] I spoke like it was no big deal. My mindset has always been that I’m in prison, they tell me what to do. I also realize

how horrible conditions are in prisons through the world . . . I think that’s how we think when we’re abused. Thinking others have it worse so I should just shut up and take it. My ex-husband rarely put his hands on me. I remember yelling one day, ‘Will you just blacken my eye already so everyone can SEE what you’re doing to me!’ The emotional abuse lingers much longer than any physical bruise.”

“The ones who are kind are getting bullied by other staff. They don’t want to do anything that gives us a reprieve.”

flagged the AIC as a trouble-maker to other officers.

“When I talked to someone higher up, they agreed with her, not me. . . [this] affects future jobs that I want and follows me.”

Another report involved an officer being reprimanded by management for denying a Black woman a work assignment in favor of a white applicant.

Officers reportedly ridicule AICs for their weight and physical appearance “all the time.” One AIC explained that when some women complained after CCCF shut down the area of the kitchen used for baking bread,

“We were told, ‘you’re fat,’ or ‘you guys don’t need the carbs.’”

“They’ll tease you if you get ‘too much’ canteen. They’ll say ‘how many bags did you get, do you really need any more?’ If someone doesn’t get the full 3 oz [serving] of meat [at meals] they’ll say ‘you don’t need it anyways.’ All these demeaning remarks.”

“One officer walked into the dorm in the morning and immediately turned the fans off. He said, ‘It’s not hot out’ . . . but on the unit it was hot and humid even at 6am. His smirk was hard to deal with.”

“Some [COs] enjoy the flex and throwing their weight around. Some are just miserable and there for a paycheck; and they don’t care [about AICs].”

“We lose all the ones who advocate for us. It seems like they get pushed out by administration.”

We also heard disturbing reports of racist behavior by staff; specifically, Black AICs have reportedly been singled out for unfair treatment and harassment. One Black AIC shared that she was constantly picked on, harassed, and ultimately fired by her work supervisor. She said the supervisor constantly criticized insignificant details of her work performance, told her she was “lazy,” and told her that she was better suited to work in the kitchen, which is generally regarded as the least desirable job in the prison. The supervisor reportedly also

AICs also express that merely advocating for their needs, or trying to do anything to their own benefit, results in staff hostility, defensiveness, and accusations of disrespect. An AIC recalled that when she walked up to an officer to ask a question, he yelled, “Get the fuck away from my desk!”

“I said [to the release counselor], ‘can you call them and tell them [the correct address]?’

He said, ‘Are you telling me how to do my job?’ I said, ‘No, I’m asking for help.’”

A unit officer reportedly told AICs:

“This is not the AICs’ unit, this is my unit. I will open the day room when I feel like it, not when you tell me it is supposed to be open.”

Lack of Accountability for Staff Misconduct; Retaliation Against AICs

AICS DESCRIBE A culture at CCCF where officers are not held accountable for inappropriate behavior and misconduct, and AICs who speak up fear retaliation. Many AICs express that they have nowhere to turn because the formal grievance process does not go anywhere, that valid grievances are denied for frivolous reasons, and that they fear punishment for objecting to misconduct by officers. AICs who have sent kytes or grievances to report behavior by COs have reported being retaliated against through losing yard time, being celled-in, or being strip-searched.

“People are afraid of retaliation if they speak up about someone. They don’t know what will happen, or nothing happens [when they grieve].”

“People are always afraid to stick up for themselves [to officers].”

“The grievance process here is set up with such restrictions that you cannot truly grieve an event. They will deny your grievance.”

“I’ve seen things here that make me scared to death to share for fear of the repercussions.”

“The departments here will never take accountability. Each department blames the other department. I had three kytes from three different people saying it was someone else’s problem.”

“We do believe and understand that we need to be held accountable for our actions.”

However, the staff get away with their conduct on a daily [basis] and should be held accountable for their unprofessional behavior.”

“Our reporting and grievance process is built so you cannot report things. My grievances get denied. Kytes go unanswered. Your family calls and cannot reach anyone. I write to Nichole Brown and never get a response. I am not safe here at all.”

“We don’t have a chance to tell someone on the outside, because once you start doing that, they start cutting visits and things. When people try to take things to the higher ups,

some guards won’t do anything. When you don’t hear back a word after six months, you think, ‘well, you either threw my paper [kyte] away, or you just didn’t care about it.’”

“You feel closed off, like you don’t have no one to talk to. This is what we [AICs] were just talking about the other day. Who can we go and talk to? Everyone [among the officers] works together, so no one’s going to take someone serious [when they grieve].”

“When someone calls him [release counselor] out on his bullshit, he gets vindictive. He’ll tell your PO that you are combative and a flight risk.”

Excessive Restrictions and Punitive Protocols Continue to Flourish Unchecked

“Every day it seems like it’s getting more punitive.”

“An officer said a shirt not tucked in is a gateway to other behavior.”

“They want everything to be very military-like.”

AICs have consistently expressed to us that instead of creating a culture of support and rehabilitation, the culture at CCCF prioritizes control and dominance over AICs. AICs say that officers exert control over every detail of a person’s behavior, appearance, orderliness of cells and bunks, etc., to an exhausting and demoralizing degree. Further, since the GIPA came out, AICs have observed an additional dynamic of backlash against AICs by officers who resent the GIPA. A common refrain from AICs is that officers seem to be looking for any reason to punish them, often through cell-ins. We heard that some AICs are choosing to stay in their cells more

often to avoid punitive harassment from officers.

“Some girls are getting overly punished; guards like to target certain ones who like to speak up for themselves.”

“They’re micromanaging us in here, it’s ‘clean up your rooms, wipe your tables, tie your shoes.’”

AICs say they are kept on their toes because, while AIC are expected to closely observe conduct rules, enforcement of rules is not consistent. A longstanding problem is that the interpretation of discipline rules depends on the individual officer in charge; and AICs say that with high turnover and strain on existing staff, some COs seem to make things up as they go.

“The staff situation is so bad that the rules are ‘at will’ at this point.”

Discipline or informal warnings by officers often takes the form of harassing and shaming women about their appearance and dress.

“They are very intense in their scrutiny of women’s bodies in here. [A CO] yelled at a woman whose basketball shorts slid up her legs while she was on the phone—he said it was inappropriate.”

One AIC recounted her embarrassment when a male officer stared at her chest and said accusingly, “What is in your shirt?” In another example given, an AIC was having her picture taken for her family and was shamed by staff:

“They were saying, ‘You can’t do anything sexy in the photos. You can’t stick your butt out like that.’ I said, ‘I’m not, I’m just standing here.’ I have curves. Just for being a woman, we are told things like that. It’s really awkward that we should have to feel shame about our bodies.”

Enforcement of rules around property and overzealous scrutiny of AIC property is one of the most common ways to punish AICs. One AIC reported being disciplined for leaving a TV remote control on her bed. As another example, it is routine for officers to search through a person’s property to look for “contraband” and/or items lacking

receipts, when they leave the facility for medical appointments or for court hearings. An AIC explained that officers do this to look for petty infractions to write people up for.

“You come back to DRs [discipline reports]—people are coming back from surgery sometimes. They go through your stuff and throw it away. Usually it’s ‘nuisance contraband.’”

Nuisance contraband refers to typically harmless items that are considered prohibited and grounds for discipline, such as having “too many” magazines or books, or a page torn out of a magazine. Any container that is reused for another purpose is nuisance contraband; for example, reusing a coffee canister to store coffee, or combining shampoo from two separate bottles. One AIC shared an incident of COs conducting a cell “shakedown” to look for contraband for no reason other than apparently to harass a transgender AIC; the CO was reportedly laughing while the AIC was visibly upset by the sudden search.

CCCF’s overzealous restriction of AIC property was also apparent when copies of DBATC Volume 1 began entering the facility through the mail. Shortly after we released DBATC, we heard from AICs that CCCF was confiscating copies of the report from AICs. Reportedly, staff were instructed by CCCF administration to collect all copies of the report, and AICs heard that administration told staff they believed the volume posed a threat to safety and security. CCCF reportedly reviewed security footage to determine who had a copy. In the midst of this, we heard that several AICs received

confidential mail marked “legal mail” that had already been opened by staff; AICs suspected that staff were looking for copies of DBATC in legal mail. Staff reportedly told AICs that the reports were being confiscated because some AICs had violated rules against making unauthorized copies, and rules against sharing property. However, we also heard

that copies were taken from AICs even in cases where they had received the report in the mail and not shared it with anyone. AICs reported that although CCCF stopped taking the report after a few weeks, the previously confiscated copies were never returned to their owners.

Medical and Mental Health Care Continues to Be Grossly Inadequate

“Medical is a joke. It is a very scary thought to be sick in prison.”

“Since being incarcerated I have not had adequate care.”

The lack of adequate medical services and poor treatment by medical staff continues to be one of the most harmful and alarming aspects of conditions at CCCF. AICs continue to experience long delays of several months or longer for necessary treatment, even for urgent medical conditions; for routine care such as eye examinations for prescription glasses; and to receive requested medical records. We heard many reports of specialist appointments delayed indefinitely for time-sensitive issues like cancer screening and follow-up care after surgery.

Whether AICs are in need of major interventions such as surgery or cardiac devices, or just minor treatments like over-the-counter medications, many AICs report struggling to get their medical needs met. We also heard reports of AICs avoiding medical services because

they do not trust the medical care or they do not want to endure being dismissed and looked down upon by medical staff. AICs also reported that they are increasingly turned away and instructed to place orders for over-the-counter remedies from the commissary, with no regard for the fact that filling orders can take up to two weeks and many cannot afford to purchase these necessary items.

Examples of accounts from AICs about medical services included the following:

- A woman with a severe ear infection was told by medical staff to purchase allergy medication from the commissary. Instead, she used hot compresses and waited out the infection; she explained, “I had to bring myself back to health.”
- A woman with eye inflammation due to a severe allergic reaction reported that medical staff were skeptical and insulting, asking her if she had washed her bedding. They refused to give her Benadryl, and she was told to “let it run its course,” which ultimately caused her eye to become infected and swollen shut, at which point they finally

prescribed antibiotics. “They wouldn’t help me until I had a fever,” she said. “This is why people don’t go to medical. You’re conditioned to feel like you’re troubling someone or will get in trouble.”

- “I get anxiety [about seeking medical care], because I feel like it’s going to be a hassle and it feels personal.”
- An AIC with a recent history of cancer said, “I’ve been getting flak from the doctor” when seeking her annual cancer screening. “They say I don’t need it.”
- After an AIC experiencing limited mobility and pain after surgery fell and was further injured, her pain became severe, and medical would only treat her pain with lidocaine ointment.
- Explaining the indignity of the disregard that medical staff show to AICs seeking care, one AIC said, “One of the nurses acts like she doesn’t remember me. She took care of me in the infirmary for three months.”
- “I was told [that] if TLC approved me for a [specialist] I shouldn’t expect to see one for at least a few months. Any services the [specialist] will want to do will have to be approved by TLC as well, before they can happen. So basically it’s going to be months and months before I even get help. . . . My quality of life is non-existent. . . . I know it’s prison and I know we don’t have the best quality of life, but what I am living is unacceptable.”
- A woman with rapidly declining health waiting for a specialist appointment said, “I live in constant fear. I need help. Officers have watched me decline, AICs watch it, my counselor is aware. But nothing is getting done.”

- An AIC was forced into observation for nearly two weeks because medical staff insisted, despite her protests otherwise, that she had an eating disorder. The observation was a “humiliating” ordeal because they monitored how much food she ate and monitored her urine quantity and bowel movements.
- AIC whose outside provider had ordered a prompt follow-up appointment after a lump was found in her breast was forced to wait several months for the appointment.

We heard reports of medical services losing refill requests, resulting in delayed prescription refills. Some AICs with prescriptions for chronic conditions like allergies and heartburn reportedly had their refills canceled abruptly and told that their prescriptions “expired” and would need to undergo “chart review” before they could be renewed. One AIC in this predicament was told to purchase a substitute medication from canteen that was less effective, and she had to wait two weeks for her order to be filled.

“[My family and friends] call here and the dome building and are told that I am in great hands and we have exceptional medical care and if there was something wrong with me it would be handled immediately. That’s not the case.”

Inadequate mental health services.

The most common issue we have heard from AICs about mental health services is that there are simply nowhere near enough services to meet people's needs. For example, AIC with a history of past abuse sought trauma therapy to

cope with being retraumatized by the environment. She told us, "They just want to put me on medication." AICs who resort to seeking outside help during incarceration at CCCF also face an uphill battle. One AIC reported that CCCF refused to allow her to speak to an outside therapist on a secure line, and it took months for her to find a therapist who was willing to speak with her on a recorded line.

Frequent Lockdowns Continue to Negatively Impact AICs

IN OUR FIRST report, we explained the extremely detrimental impact that constant lockdowns and increased time in-cell has on the psychological wellbeing of AICs. AICs have shared that lockdowns still occur very frequently due to staff shortages. For example, the week of Christmas we heard that AICs were locked down “again and again.” During the ice storm of January 2024, AICs were locked down all day for several days, due to lack of staff.

We also heard that treatment of AICs during lockdowns depends on the officer in charge and which unit AICs are in; certain units on Medium are viewed by officers as “the bad units”; and AICs on those units are subject to more restrictions during lockdowns. An AIC on one of these units shared that during lockdowns, AICs are only allowed out of cell for three 20-minute mealtime periods per day, during which time they are only permitted to eat meals. She said that

most officers do not allow people to use the phones during lockdowns, even during the 20-minute period out of cell, and that some officers cut mealtimes down to 15 minutes with no explanation. Depending on the officer’s whim, she explained, there may be “rare moments in the day” when AICs can go get hot water or make a phone call.

“It’s a gorgeous day and we’re locked down.”

ODOC Policies Continue to Restrict AIC Contact with Loved Ones and Supports

IN-PERSON VISITING IS rendered traumatic by humiliating strip searches and aggressive officers.

AICs shared accounts indicating that the process of visiting with loved ones can often ruin what should be a positive experience and in some cases be traumatic. AICs reported random “humiliating” strip searches after visiting family. Some suspected they were being intentionally singled out, either for retaliation, or simply to harass the AIC.

“It’s affecting my mental health and past trauma and bringing up a lot of yucky stuff.”

“They will pick on people who don’t make a fuss, or people who shower more often and are easy [to search].”

One AIC became extremely distressed when out of the blue, every time a particular officer was on duty, the officer strip searched her after her visits with her parents. This made her feel hypervigilant and triggered memories of past sexual abuse:

“It is to the point that I cannot enjoy visitation because I am worried what is going to happen after they leave. I was stripped 4 out of the last 5 visits by my parents [over a two-month period]. The last one my mom came on a Sunday morning and it was so stressful the whole time, I was totally distracted. I am holding off on all visitations because I don’t want to freak out [from being strip searched] and go to the hole. I’ve been having nightmares. I was

raped before I got here, and that's been bringing up a lot of trauma from that. I'm just a lot sadder because that's my only source of uplifting and joy is seeing my parents."

Another common problem reported by AICs is that officers' aggressive behavior can interfere with visiting, demonstrating a complete lack of care for the importance of people spending time with their families of children. For example, an AIC observed a CO telling a mother that she was not allowed to accompany her child to the vending machine to pick out a snack. Another AIC was reportedly celled-in because her child sat on her lap during a visit.

"One time an officer stood across from my parents the whole time [of the visit] and it was just weird. It doesn't make any sense because my parents are in their 70s and are law-abiding."

One AIC described a certain CO in charge of visiting as follows:

"Old school, yells, is impatient . . . made a child cry, [a] nine-year-old girl. [He] refuses to open [the] playground if it's slightly chilly out. [A] three-year-old wanted to go play with another kid . . . mom was redirecting; he came and celled-in the mom."

Another AIC reported that a visit with her young child was ruined and cut short because the officer in charge

was extremely aggressive and yelling, causing significant distress to the child, to the AIC, and to the person who accompanied the child.

In August 2023, we heard that the policy for registering for Through a Child's Eyes (TACE) parent-child events became stricter, resulting in at least 20 AICs being unable to participate because their children's visiting applications were not processed by CCCF before the registration deadline. AICs were reportedly informed of the event about six weeks before the registration deadline, but this was not enough time for some to register their children, because it takes eight to ten weeks to process new visiting authorization forms. Reportedly the TACE event in August was attended by about 1/3 the number of usual participants.

On Christmas Eve, we heard reports that families had to wait outside in the cold because visiting hours were delayed; AICs were told this was because of short-staffing and problems in the Disciplinary Segregation Unit.

Phone validation requirements interfere with important relationships.

The cumbersome validation process that ODOC requires before AICs may make outgoing phone calls has continued to cause serious barriers to AICs' ability to communicate with loved ones, maintain important relationships, and prepare for release. We have heard

and continue to hear countless stories about AICs who are unable to talk to family members because their phone numbers are not able to be validated, and the serious consequences this lack of communication has on their lives, the lives of their loved ones, and their futures. Just a few examples include: One woman shared that she was unable to call a close friend who was having a difficult time and who relied on her for support, and later learned that he had

passed away of a drug overdose. Another AIC shared that she was having serious medical problems but was unable to contact her family to let them know or ask for their help, because they did not understand how to validate their phone number. Several AICs told us that they wanted to reach their children but were unable to even attempt a phone call because the children's father was refusing to validate his phone number or unaware of how to do so.

Lack of Adequate Programming

WE CONTINUE TO hear that AICs are still unable to access many of the programs and services that existed prior to the pandemic.

“We’re having such a hard time getting services and such started back up.”

“It feels like there’s no reentry support . . . and girls are coming back, like in ten days out the gate.”

“This prison . . . does nothing to help people learn real life skills or help them be set up to help themselves. I have helped more people in here get set up with Section 8, Hud housing . . . gotten them linked up with organizations to help them help themselves. Now I need someone to help me.”

AICs Continue to Face Barriers Accessing Courts and Legal Help

AICs seeking legal help or working on their legal matters continue to encounter numerous barriers at CCCF. AICs report that this jeopardizes their relationships with their children; allows their abusers to continue to harass and control them; restricts them from asserting their legal rights and threatens their health and safety; and leads to other consequences that further destabilize their lives and threaten their futures. We most often hear that AICs have a difficult time accessing the law library. Not only can it take weeks to get into the law library, but the library has extremely limited hours making it difficult for AICs who work all day to access legal resources. Additionally, when using the law library, AICs are often

unable to complete necessary basic tasks or access adequate help with their legal matters. AICs frequently report that the rules around what they are allowed to do in the law library change frequently and are inconsistently applied by CCCF staff. It is also often reported that legal assistants are extremely limited in the help that they can provide to AICs, many of whom do not know where to start and how to protect their rights in both criminal and civil matters.

“Staff does anything they can to thwart anyone who is being helpful to other AICs [with legal work].”

Conclusion

IN THE FIRST volume of DBATC, reports from AICs conveyed the urgent message that conditions at CCCF had been appalling for a long time and were worse than ever, yet no one seemed to be noticing or taking action. When the GIPA report was released last year, it appeared to be a promising opportunity for the state to finally address this longstanding crisis and take steps to alleviate the suffering of CCCF AICs. But while the response from the governor's office and ODOC to the GIPA has included much activity and rhetoric, AICs are reporting that no significant improvements have been made to conditions at CCCF. We will therefore continue to listen to AICs and share their stories in this series in the hope that the public and state leaders will not lose sight of the continued daily harms to AICs in CCCF and the need for meaningful action.