



# IT REMINDS US HOW WE GOT HERE

**(RE)PRODUCING ABUSE,  
NEGLECT, AND TRAUMA  
IN NEW YORK'S PRISONS  
FOR WOMEN**

Correctional Association  
of New York



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New Hour for Women & Children – LI

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# EXECUTIVE SUMMARY

For decades, the Correctional Association of New York (CANY) has been advocating on behalf of incarcerated and formerly incarcerated women alongside other community based and grassroots organizations and directly impacted individuals and their families. While the experiences of incarcerated women have been largely obscured by the dominating narratives of incarcerated men’s needs and experiences, system-involved women often experience their own unique challenges and marginalization. Women’s pathways into and out of the criminal legal system reflect their stratified places within society.<sup>1, 2</sup> Furthermore, despite their smaller population when compared to men, the United States incarcerates more women than any other country on earth, with 231,000 women incarcerated across the United States and 1,899 women incarcerated in New York state alone.<sup>3, 4, 5</sup>

CANY seeks to recognize this issue by centering the voices of women and individuals incarcerated in prisons for women.<sup>6</sup> This report provides information about the current state of people incarcerated in prisons for women, and in particular, those who have been impacted by domestic and gender-based violence, as up to 95% of women who go to prison—disproportionately Black and brown, low-income, immigrant and LGBTQ—bring with them histories as survivors of domestic and gender-based violence.<sup>7, 8</sup>

In the following report, CANY will present findings that discuss how incarceration fails to prioritize the needs of those incarcerated in prisons for women. The Correctional Association of New York utilized three forms of data collection and analysis in preparing this report: in-person monitoring conducted at Bedford Hills Correctional Facility by CANY’s staff, board members, and volunteers, and two surveys, each containing quantitative and qualitative components. Our findings are compelling. One of the most salient issues among respondents was the issue of violence, retraumatization, and abuse in their prisons. For many incarcerated people, particularly those in prisons for women, violent abuse and the trauma that follows are emblematic of the experience of incarceration. While many women in prison have extensive histories of sexual abuse, violence, behavioral health issues, and physical health issues that pre-date their incarceration, the abusive dynamics and trauma that they experienced in these situations are often reproduced within prisons themselves.

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1 Barbara Bloom, Barbara Owen, and Stephanie Covington, “Women Offenders and the Gendered Effects of Public Policy,” *Review of Policy Research* 21, no. 1 (2004): pp. 31-48, <https://doi.org/10.1111/j.1541-1338.2004.00056.x>

2 Meda Chesney-Lind, “Women and the Criminal Justice System: Gender Matters,” *Topics in Community Corrections*, Annual Issue (2000): 7-10, <http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.216.5308&rep=rep1&type=pdf>

3 Alex Kajstura, “States of Women’s Incarceration: The Global Context 2018,” Prison Policy Initiative, 2018. <https://www.prisonpolicy.org/global/women/2018.html>

4 Alex Kajstura, “Women’s mass incarceration: The whole pie 2019,” Prison Policy Initiative, 2019. <https://www.prisonpolicy.org/reports/pie2019women.html>

5 According to DOCCS “under custody” data from January 2020 obtained through FOIA.

6 While data from DOCCS identifies every person incarcerated in a women’s prison as “female”, it is important to note that not everyone incarcerated in prisons for women are women or identify within the gender binary. Throughout this report, we make reference to “individuals incarcerated in prisons for women” rather than incarcerated women when applicable.

7 Melissa Dichter, “Women’s Experiences of Abuse as a Risk Factor for Incarceration: A Research Update,” National Online Resource Center on Violence Against Women. 2015, <https://vawnet.org/material/womens-experiences-abuse-risk-factor-incarceration-research-update>.

8 Survived and Punished, “Research Across the Walls,” Survived and Punished, 2019, [https://survivedandpunished.org/wp-content/uploads/2019/02/SP\\_ResearchAcrossWalls\\_FINAL-compressedfordigital.pdf](https://survivedandpunished.org/wp-content/uploads/2019/02/SP_ResearchAcrossWalls_FINAL-compressedfordigital.pdf)

In the survey to Bedford Hills Correctional Facility, 74% of 110 respondents identified that they had witnessed some form of violence or abuse by staff, including physical, sexual, and verbal abuse, while 53% of respondents reported experiencing these acts of violence by staff themselves. One respondent reflected that:

“ *Some officers like to abuse their power as an office[r]. In some cases, it reminds us of our abusers and how we got here.* ”

Another major finding was dissatisfaction with prison policies, particularly the grievance process, reflecting a system riddled with abuses and contradictions, a lack of accountability for these actions, and an overall lack of consistent, uniform application of procedures. Despite the general view that the grievance program is failing, the grievance process is still widely used, with 71% of 110 respondents at Bedford Hills stating they filed a grievance in the past year. This speaks to how important this process is for incarcerated people, as it is often their only pathway forward in combating abuse.

The above highlights from our findings demonstrate that as we work to improve conditions for incarcerated people, we must concurrently push for efficient mechanisms that allow for greater transparency, critiques, accountability, and changes to the criminal legal system. Our recommendations — which include undertaking a massive reexamination of all cases where domestic and gender-based violence was a factor leading to incarceration and increasing the effectiveness and legitimacy of the grievance process — advocate for decarceration as a means to counter mass incarceration by promoting the release of those incarcerated, aiming for less people to be incarcerated in the first place, and supporting shorter sentences for those to be incarcerated. Decarceration as a policy solution is critical in this endeavor, as the goals of punishment and confinement will often supersede and contradict the objectives of rehabilitation for individuals in prisons; accordingly, the most effective strategy of meeting the needs of survivors of domestic and gender-based violence is to both release incarcerated survivors and to retire incarceration as a path to justice for survivors.

The United States incarcerates more women than any other country on earth, with 231,000 women incarcerated across the United States and 1,899 women incarcerated in New York state alone.<sup>1,2,3</sup> Though the population of incarcerated women is small compared to that of men, their increasing rates of incarceration make them a rapidly growing population behind bars.<sup>4</sup> Black and brown women are overrepresented in prisons and jails compared to their population, as are those who are LGBTQ.<sup>5,6</sup> Women's pathways into and out of the criminal legal system reflect their stratified places within society, with women living in poverty facing disproportionately higher rates of incarceration.<sup>7,8</sup> Upon release, these women typically encounter the same challenges they faced pre-incarceration— lack of employment and/or education, relapse and recidivism, caring for children, difficulty attaining food, clothing and shelter, and community acceptance.<sup>9,10</sup> Additionally, their social networks are often limited, and many women in prison have partners and/or family members who are also involved in the criminal legal system.<sup>11</sup> Often, women who eventually go through the criminal legal system are subjected to injurious climates long before they are ever incarcerated. These women are impacted by violence on both an individual and institutional level. Up to 95% of women who go to prison—disproportionately Black and brown, low-income, immigrant and LGBTQ—bring with them histories as survivors of domestic and gender-based violence.<sup>12,13</sup> This report seeks to provide information about the current state of people incarcerated in prisons for women in New York, and in particular, those who have been impacted by domestic and gender-based violence.

1 Alex Kajstura, "States of Women's Incarceration: The Global Context 2018," Prison Policy Initiative, 2018. <https://www.prisonpolicy.org/global/women/2018.html>

2 Alex Kajstura, "Women's mass incarceration: The whole pie 2019," Prison Policy Initiative, 2019. <https://www.prisonpolicy.org/reports/pie2019women.html>

3 According to DOCCS "under custody" data from January 2020 obtained through FOIA.

4 Wendy Sawyer, "The gender divide: Tracking women's state prison growth," Prison Policy Initiative, 2019. [https://www.prisonpolicy.org/reports/women\\_overtime.html](https://www.prisonpolicy.org/reports/women_overtime.html)

5 The Sentencing Project. "Incarcerated Women and Girls," The Sentencing Project, 2019. <https://www.sentencingproject.org/publications/incarcerated-women-and-girls/>

6 Ilan H. Meyer et al., "Incarceration Rates and Traits of Sexual Minorities in the United States: National Inmate Survey, 2011–2012," *American Journal of Public Health* 107, no. 2 (2017): pp. 267-273. <https://doi.org/10.2105/ajph.2016.303576>.

7 Barbara Bloom, Barbara Owen, and Stephanie Covington, "Women Offenders and the Gendered Effects of Public Policy," *Review of Policy Research* 21, no. 1 (2004): pp. 31-48. <https://doi.org/10.1111/j.1541-1338.2004.00056.x>

8 Meda Chesney-Lind, "Women and the Criminal Justice System: Gender Matters," *Topics in Community Corrections*, Annual Issue (2000): 7-10. <http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.216.5308&rep=rep1&type=pdf>

9 Brenda Clubine, Mary Heinen, and Antoinette Johnson. "Three Formerly Incarcerated Women Talk about Reentry." National Clearinghouse for the Defense of Battered Women, 2016.

10 Courtney Cross, "Victimized Again: How the Reentry Process Perpetuates Violence Against Survivors of Domestic Violence," National Clearinghouse for the Defense of Battered Women, 2013.

11 Cayse C. Hughes, "From the long arm of the state to eyes on the street: How poor African American mothers navigate surveillance in the social safety net," *Journal of Contemporary Ethnography*, 48(3), 339-376. doi:10.1177/0891241618784151

12 Melissa Dichter, "Women's Experiences of Abuse as a Risk Factor for Incarceration: A Research Update," National Online Resource Center on Violence Against Women. 2015. <https://vawnet.org/material/womens-experiences-abuse-risk-factor-incarceration-research-update>.

13 Survived and Punished, "Research Across the Walls," Survived and Punished, 2019. [https://survivedandpunished.org/wp-content/uploads/2019/02/SP\\_ResearchAcrossWalls\\_FINAL-compressedfordigital.pdf](https://survivedandpunished.org/wp-content/uploads/2019/02/SP_ResearchAcrossWalls_FINAL-compressedfordigital.pdf)

## WOMEN'S PATHWAYS INTO THE CRIMINAL LEGAL SYSTEM

The issues surrounding women's pathways into and out of the system are far from novel. This report comes on the heels of decades of work by the Correctional Association of New York (CANY), community organizations, coalitions, and advocates, especially incarcerated and formerly incarcerated individuals. One historic example of this legacy is the Second Report of the Prison Association of New York (later renamed the Correctional Association of New York), which discusses the Female Department of the organization in 1846.<sup>14</sup> The Female Department (later to become the Women's Prison Association) was created under the Prison Association's constitution to "...have charge of the interest and welfare of prisoners of their sex..."<sup>15</sup> Significantly, many of the women incarcerated at that time were committed for "crimes" that went against social norms for women, like drunkenness, indicating a precedent for a significant proportion of women to be needlessly involved in the criminal legal system. This led the Female Department to advocate against "...the injurious consequences of being subjected to the contamination of our prisons".<sup>16</sup>

More recent literature on women's pathways into prison discuss how survivors of domestic and gender-based violence, including sexual assault and intimate partner violence, can find their way into the criminal legal system after instances of self-defense and survival.<sup>17</sup> Across intersections of race, class, gender, and sexuality, women are often forced into a continuum of state violence when incidents of interpersonal violence precipitate involvement in the criminal legal system. Put differently, survivors of domestic and gender-based violence are routinely criminalized and then re-traumatized by incarceration. Consequently, system-involved women are often enshrouded by violence before, during, and after their incarceration. This exacerbation of violence reduces and, in some cases, altogether denies women the ability to advocate on their own behalf. Fortunately, there has been a proliferation of organizations and coalitions dedicated to fighting for the rights of those impacted by domestic and gender-based violence, including transgender women and gender non-conforming individuals. Many of these organizations and coalitions have called for the decarceration and release of women, focusing particularly on those who have been impacted by domestic and gender-based violence.

## DOMESTIC VIOLENCE SURVIVORS JUSTICE ACT (DVSJA)

One outcome of these collective advocacy efforts led to the passing of the Domestic Violence Survivors Justice Act. The Domestic Violence Survivors Justice Act or DVSJA (S.1077/A.3974)—a New York resentencing law enacted in spring 2019—allows judges to sentence and resentencing domestic violence survivors to shorter prison sentences or alternative-to-incarceration programs if abuse was directly related to the person's crime. The passing of DVSJA follows decades of advocacy concerning the criminalization of survivors, including by survivors themselves. An example of this previous advocacy is the 1985 Bedford Hills Correctional Facility (BHCF) Hearing and subsequent Battered Women and the Criminal Justice System report of the Committee on Domestic Violence and Incarcerated Women.

<sup>14</sup> Prison Association of New York, "Second Report of the Prison Association of New York", 1846, Retrieved from <https://hdl.handle.net/2027/hvd.32044055087316>

<sup>15</sup> Prison Association of New York, "Second Report of the Prison Association of New York", 1846.

<sup>16</sup> Prison Association of New York, "Second Report of the Prison Association of New York", 1846.

<sup>17</sup> Katherine Lorenz and Rebecca M Hayes, "Intersectional Pathways: The Role Victimization Plays in Women's Offending and in Prisons," in *Women and Prison* (Springer, 2020), pp. 97-129, [https://doi.org/https://doi.org/10.1007/978-3-030-46172-0\\_8#ESM](https://doi.org/https://doi.org/10.1007/978-3-030-46172-0_8#ESM).

Incarcerated survivors of domestic violence testified during the hearing, sharing their personal stories of victimization and trauma, as well as identifying strategies for effective change. Advocates validated that these experiences were a result of repeated failures of the legal system to address women's needs. One section of the report illustratively explains the relationship between survivors and the criminal legal system:

*“The battered woman is victimized by her mate and despite attempts to extricate herself she may be victimized again by the legal system which responds ineffectively to her plight. Those who commit crimes of violence against their mates or others may then be even further victimized by our justice system. There is a lack of responsiveness from the police, court officers, district attorneys and judges who ‘often deny the existence, prevalence and seriousness of the violence. Consequently, even when legal remedies may be theoretically available to women, they may be inadequate.’”<sup>18</sup>*

Incarcerated women testified about the failure of other legal system actors to intervene in the cycle of violence before their incarceration. These women also testified about the mental impact of their abuse—survivors bear the emotional scars of domestic violence long after the physical experience is over. Many women also talked about the importance of peer-led programming by individuals who were also survivors of domestic and gender-based violence. They shared the power of gathering with other women who experienced domestic violence and working towards healing in a collaborative way. What was most underscored by the report was how survivors could be criminalized by the very system that was supposed to help them, further removing them from the help they so critically needed.

Advocates understood that legal remedies don't always provide immediate relief, and that is still true today— while the passing of DVSJA was historic, there are intense legal obstacles that remain in order to actually release incarcerated women using the very mechanism that was designed to release them. Thus is the complex reality of survivors in the criminal legal system. Even with well-documented examples of domestic and gender-based violence and state violence, pathways for reducing the number of women incarcerated and the length of their incarceration are limited. Apparent victories such as the DVSJA can obscure what often still remains the status quo of a system that fails to serve the needs of survivors. Take the case of Nikki Addimando, who was sentenced to 19 years to life for the murder of her abuser. Like many system-involved women, Nikki had an extensive history of abuse and trauma and was considered by many to be a strong candidate for sentencing under the DVSJA—however, the court denied her.<sup>19, 20</sup> Narratives about her traumatic past were used as a tool to shame her during her trial, and ultimately, instead of being helped by the passing of the DVSJA, she is currently incarcerated in Bedford Hills Correctional Facility. Or, consider the case of Darlene “Lulu” Benson-Seay, another woman incarcerated at Bedford Hills who had a vast traumatic

<sup>18</sup> Committee on Domestic Violence and Incarcerated Women, “A Report of the Committee on Domestic Violence and Incarcerated Women: Battered Women and Criminal Justice”, 1987, <https://www.ncjrs.gov/pdffiles1/Digitization/107516NCJRS.pdf>

<sup>19</sup> Rachel Louise Snyder, Rachel Aviv, and Katy Waldman, “When Can a Woman Who Kills Her Abuser Claim Self-Defense?,” *The New Yorker*, December 20, 2019, <https://www.newyorker.com/news/dispatch/when-can-a-woman-who-kills-her-abuser-claim-self-defense>.

<sup>20</sup> Justine van der Leun, “She Had Proof She'd Been Abused. But Was It Enough?,” *Medium* (GEN, May 28, 2020), <https://gen.medium.com/nikki-had-proof-shed-been-abused-but-was-it-enough-for-self-defense-bd9f196396eb>.



history and was also considered to be a candidate for DVSJA re-sentencing.<sup>21</sup> Lulu, who was 61 years old, died after contracting COVID-19 in April 2020, even though there were a variety of options to release her, including resentencing under DVSJA and executive clemency. Both of these stories demonstrate how incarceration fails to prioritize the needs of those incarcerated in prisons for women. Their histories of abuse were not properly addressed in their sentencing or upon their incarceration, underscoring how interpersonal violence interacts with state violence, leaving survivors caught in the middle.

## THE CURRENT U.S. CLIMATE

As we set this backdrop of women’s involvement in the criminal legal system, we must also point to the current political climate of the United States. At the time of this report, we are dealing with circumstances that have been characterized as two pandemics—COVID-19 and systemic racism. COVID-19, a novel coronavirus, has been ravaging the globe, responsible for over 25,000,000 infections and 846,000 deaths across the world, and over 6,000,000 positive cases and 183,000 deaths within the U.S. alone at the time of this writing.<sup>22</sup> Impoverished communities of color in the United States have been among those hit the hardest by the pandemic, with disproportionate rates of infection and death for Black and brown individuals.<sup>23</sup> Earlier this year, New York state saw one of the worst outbreaks of COVID-19 in the world, with over 400,000 confirmed cases and over 32,000 deaths in just a few months.<sup>24</sup> Those incarcerated in New York state prisons have been especially affected, with infection rates in New York state prisons being on the rise across the state.<sup>25,26</sup> In fact, prisons and jails have become leading hotspots of COVID-19 transmission<sup>27</sup>; with infection rates relatively stable across the country, prisons and jails show a striking opposing picture.

At the same time, the murders of George Floyd, Breonna Taylor, and Ahmaud Arbery, mostly captured by cellphone footage and communicated through social media, have captivated the attention of the nation and the globe, sparking the largest social protest in U.S. history—spurring calls for systemic change and abolition against state violence.<sup>28</sup> While the data and first-hand accounts discussed in this report were collected prior to the onset of COVID-19 and the current social climate, they are not removed from them. COVID-19 and police violence are connected in that they reveal the unequal experiences of the most marginalized in our society. These individuals are historically, institutionally and systemically oppressed, and disproportionately affected by systems of inequity, and thus are most affected in moments

21 Justine van der Leun, “Death of a Survivor,” *The New Republic*, May 3, 2020, <https://newrepublic.com/article/157589/death-survivor>.

22 The New York Times, “Coronavirus Map: Tracking the Global Outbreak,” August 17, 2020, <https://www.nytimes.com/interactive/2020/world/coronavirus-maps.html>

23 Jill Cowan, “Why Covid-19 Is Deadlier for Black and Latino Californians,” *The New York Times*, April 28, 2020, <https://www.nytimes.com/2020/04/28/us/coronavirus-california-black-latino.html>

24 The New York Times, “New York Coronavirus Map and Case Count,” August 17, 2020, <https://www.nytimes.com/interactive/2020/us/new-york-coronavirus-cases.html>.

25 Timothy Williams, Libby Seline, and Rebecca Griesbach, “Coronavirus Cases Rise Sharply in Prisons Even as They Plateau Nationwide,” *The New York Times*, June 16, 2020, <https://www.nytimes.com/2020/06/16/us/coronavirus-inmates-prisons-jails.html>.

26 Victoria Law, “The Pandemic Hits New York’s ‘Prison Nursing Home,’” *Gothamist*, July 17, 2020, <https://gothamist.com/news/covid-19-pandemic-hits-new-yorks-prison-nursing-home>.

27 The Marshall Project. (2020, August 27). A State-by-State Look at Coronavirus in Prisons. The Marshall Project. <https://www.themarshallproject.org/2020/05/01/a-state-by-state-look-at-coronavirus-in-prisons>

28 Larry Buchanan, Quoctrung Bui, & Jugal Patel, “Black Lives Matter May Be the Largest Movement in U.S. History,” *The New York Times*, July 24, 2020, <https://www.nytimes.com/interactive/2020/07/03/us/george-floyd-protests-crowd-size.html>

## BACKGROUND

of national crisis. As calls for equitable public health responses and demands for reform and abolition of policing across the U.S. rise, it is important to recognize the necessity of including incarcerated people within those discussions. Many of the aforementioned calls fail to identify how the two pandemics are compounded for individuals who are incarcerated, and to point out that their invisibility puts them at greater risk for disproportionate negative effects. In other words, there can be no conversation about state violence and health inequity in the U.S. without also including those who are behind bars.

## CANY'S PRISON OVERSIGHT MODEL

At CANY we seek to recognize compounded vulnerability by centering the voices of women and individuals incarcerated in prisons for women.<sup>29</sup> This is just one part, though a crucial one, of a larger strategy for decarceration. The larger goals of effective monitoring and system reform cannot be accomplished without incorporating the unique experiences of these individuals, as they give context to the ways that policies, legislation, and practices can disproportionately impact a population, and inversely, how specific attention to incarcerated, marginalized populations can make a tremendous difference to their treatment and experiences.

Prison oversight provides an avenue for advocacy in a system that does not prioritize the dignity, health, and personhood of those incarcerated. CANY's authority as an independent party that monitors New York state prisons, reports to the legislature and the public, and advocates for system-wide change creates a platform for people inside prison to participate in and shape the public debate. Through this report, CANY builds on the past work of advocates who have fought for system-involved individuals while using new reports and data collected from incarcerated people to shed light on the current situation for those incarcerated in New York's prisons for women.

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<sup>29</sup> While data from DOCCS identifies every person incarcerated in a women's prison as "female", it is important to note that not everyone incarcerated in prisons for women are women or identify within the gender binary. Throughout this report, we make reference to "individuals incarcerated in prisons for women" rather than incarcerated women when applicable.

## METHODOLOGY

The Correctional Association of New York utilized three forms of data collection and analysis in preparing this report: one method was in-person monitoring conducted at Bedford Hills Correctional Facility by CANY's staff, board members, and volunteers. The second and third methods of data collection were the use of two surveys, each containing quantitative and qualitative components, which were mailed to respondents. For insight on the limitations of our methodology, see Appendix A.

### IN-PERSON MONITORING

On October 11, 2019, CANY representatives conducted a monitoring visit at Bedford Hills Correctional Facility, a prison for women in Bedford, New York. The CANY delegation is typically comprised of 12 representatives who meet with each prison's executive staff, incarcerated individuals who serve as representatives from the Inmate Liaison Committee (ILC) and the Inmate Grievance Review Committee (IGRC), medical staff, mental health staff, and academic and vocational staff. During these meetings, CANY staff and volunteers ask targeted questions and take notes to document experiences and issues identified at each prison. Visual observation by CANY representatives, in addition to input from the Department of Corrections and Community Supervision (DOCCS) staff, are used to corroborate reports made by incarcerated people, with the aim of ensuring that findings presented in CANY reports are sufficiently verified.

When not meeting in the groups described above, CANY representatives walk throughout each prison and speak with incarcerated people who are either inside cells or in their program areas. During interviews with incarcerated people, CANY representatives utilize an intake form for each person interviewed, which captures basic identifying information as well as issues any incarcerated person reports. Other individuals in attendance during the meetings and interviews include DOCCS Central Office staff, the prison's Executive Team staff, and security staff. At the conclusion of each monitoring visit, CANY representatives compile data, review notes made during the monitoring visit, and compare them to relevant historical data. The information is then synthesized to develop high level, preliminary findings about each prison. Using this information, CANY staff prepare a memo detailing these preliminary findings for the Commissioner of DOCCS and relevant staff, and then request follow-up conference calls to discuss the findings and recommendations. CANY then sends a summary of that same memo, along with a post-visit follow-up survey, to each of the incarcerated people with whom CANY representatives spoke during the monitoring visit.

### SURVEY RESEARCH

Two paper surveys were administered to respondents at two different stages: The DVSJA survey was distributed first to better understand which issues were most prominent for incarcerated people affected by domestic and gender-based violence. This survey was sent to a group of people incarcerated in prisons for women across New York state in September 2019. The other survey was a post-visit monitoring survey administered to the incarcerated people that CANY representatives met during the Bedford Hills monitoring visit. This survey was mailed out in October 2019. Note

that although the two surveys were separate, some respondents received and responded to both surveys.

### DVSJA SURVEY

The first survey, which we will refer to as the DVSJA Survey, was sent to 487 respondents across New York state prisons for women and girls. These respondents were identified beforehand as being possibly eligible for resentencing under the DVSJA, and this short survey on issues surrounding the experience of survivors in prison was sent to them along with information and resources about eligibility, legal assistance, and a timeline for resentencing related to the DVSJA prepared by CANY's partner advocacy organizations.

While the DVSJA survey was not about experiences of domestic violence explicitly, it was an important and relevant theme throughout the responses. It is also important to note that the context in which the survey was sent (i.e., enclosed with "know your rights" legal materials for domestic violence survivors) likely contributed to the way questions were interpreted and answered.

The DVSJA survey was comprised of two separate questionnaires. The first questionnaire (Q1) contained multiple-choice items that asked respondents to rate how important each named issue was to them on a 5-point scale; this survey provided quantitative data. The second questionnaire (Q2) consisted of narrative response items that asked respondents to further explain their ratings of issues from the first questionnaire. This questionnaire also gave respondents the opportunity to share any relevant, significant experiences they have had in prison, as well as expectations for re-entry upon release. Responses from Q2 provided both qualitative and quantitative data; qualitative data from their narrative responses and quantitative data once the data were analyzed and sorted into particular themes. Throughout this report, first-hand accounts have been excerpted from these forms to reiterate the salient themes from monitoring findings.

There were 103 respondents to the DVSJA survey (a 21% response rate) who came from four prisons across New York state: three prisons for women—Bedford Hills Correctional Facility (n=82), Taconic Correctional Facility (n=11), and Albion Correctional Facility (n=9); and one youth prison—Hudson Correctional Facility (n=1). The age range of participants was between 17 and 75 years old, with a median age of 39 years old. Respondents to this survey were also more likely to be people of color when compared to the general population of individuals incarcerated in prisons for women. While the majority of people incarcerated in New York's prisons for women are White, most of the respondents to this survey were Black (54.4%), followed by White (35.9%), Other or Unknown (6.8%), Asian (1.9%), and Native American (1.0%). In terms of ethnicity, Hispanic respondents of any race were slightly more represented in the survey than in DOCCS' prisons for women overall, at 20.6% of respondents.

### POST-VISIT MONITORING SURVEY

The second survey administered was a post-visit monitoring survey sent to respondents at Bedford Hills Correctional Facility after CANY's in-person visit there. Post-visit surveys are provided to a sample of incarcerated people after each in-person monitoring visit in



order to provide an additional opportunity to share information about living conditions and other issues. While most of the survey is comprised of general survey questions that all respondents answer across facilities, each survey also had a small number of prison-specific questions, focused on issues that were reported at a given prison during in-person monitoring visits. These surveys also included an additional narrative response form for collecting qualitative data from incarcerated people and giving them the opportunity to use their own words to describe their experiences. Similar to the post-visit surveys, these narrative response forms are mostly uniform across facilities but also include a small number of additional prison-specific questions.

There were 110 respondents to the Bedford Hills post-monitoring survey (a 24% response rate), of which 106 had demographic data available. Participants ranged in age from 19 years old to 80 years old, with a median age of 39 years old. In contrast to the DVSJA survey, where Black respondents were more represented, White respondents were the most represented in the post-visit survey to Bedford Hills (45.3%), followed by Black (40.6%), Other or Unknown (11.3%), and Asian (2.8%) respondents. When looking at ethnicity, Hispanic respondents of any race made up 16.0% of respondents.

### **OVERLAPPING PARTICIPATION**

Bedford Hills was the most represented prison in the DVSJA survey with 82 of the 103 participants. Because Bedford Hills is a maximum-security prison, it follows that individuals charged with crimes of harm and eligible for the DVSJA are disproportionately incarcerated there due to the nature of their charges. With this in mind, there was some overlapping participation across the two surveys, where 28 respondents incarcerated at Bedford Hills responded to both the DVSJA survey and post-visit monitoring survey.

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While our findings represent the experiences of people incarcerated in prisons for women in fall 2019, it is crucial to acknowledge how the COVID-19 pandemic has overtaken and changed life for most people living in the United States—including those incarcerated in state prisons. Thus, while our findings speak to the issues that were happening at that moment in time, they are unable to capture the complex and multifaceted challenges that COVID-19 has brought upon incarcerated people.

### RETRAUMATIZATION AND THE (RE)PRODUCTION OF ABUSIVE SETTINGS

Research indicates that between 71% and 95% of incarcerated women report histories of domestic and gender-based violence in adulthood.<sup>30</sup> Additionally, survivors of such violence who are women of color, living in poverty, immigrants, or LGBTQ, experience heightened risk of criminalization, prosecution, and incarceration due to their experiences of disproportionate policing, bias, and profiling.<sup>31, 32</sup> Thus, many women have extensive histories of trauma before they are even incarcerated. For many incarcerated people, particularly those in prisons for women, violent abuse and the trauma that follows are emblematic of the experience of incarceration. Women with histories of trauma are often punished for their response to these experiences—in particular, survivors of chronic domestic and gender-based violence face criminal convictions and incarceration, even when their offense was directly tied to their survival.<sup>33</sup>

The pain and experience that come with past trauma was a prevalent issue discussed throughout the data. Responses to the DVSJA survey indicate that for respondents, issues involving their past traumatic experiences were among the most significant issues experienced in prisons, with 78.6% of respondents (n= 77) citing it as a “most important” issue—more than any other issue in the survey. One DVSJA respondent, when asked why she identified past trauma as one of the most important issues she faces in prison, stated:

*“...we tend to carry the demons that were created from such trauma and mental health throughout the rest of our lives. It is very hard and you never forget what happened to you. You can only learn through techniques and medicine to treat such traumas.”*

While many women in prison have extensive histories of sexual abuse, violence, behavioral health issues, and physical health issues that pre-date their incarceration, the abusive dynamics and trauma that they experienced in these situations are often reproduced within prisons themselves. Women with histories of abuse have indicated

30 Melissa Dichter, “Women’s Experiences of Abuse as a Risk Factor for Incarceration: A Research Update,” National Online Resource Center on Violence Against Women. 2015, <https://vawnet.org/material/womens-experiences-abuse-risk-factor-incarceration-research-update>.

31 Survived and Punished, “Research Across the Walls,” Survived and Punished, 2019, [https://survivedandpunished.org/wp-content/uploads/2019/02/SP\\_ResearchAcrossWalls\\_FINAL-compressedfordigital.pdf](https://survivedandpunished.org/wp-content/uploads/2019/02/SP_ResearchAcrossWalls_FINAL-compressedfordigital.pdf)

32 National Center for Transgender Equality, “Standing with LGBT prisoners: an advocate’s guide to ending abuse and combating imprisonment,” National Center for Transgender Equality, 2014, <http://www.transequality.org/issues/resources/standing-lgbt-prisoners-advocate-s-guide-ending-abuse-and-combating-imprisonment>.

33 Meda Chesney-Lind, “Women and the Criminal Justice System: Gender Matters,” Topics in Community Corrections, Annual Issue (2000): 7-10, <http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.2.16.5308&rep=rep1&type=pdf>

that experiencing or witnessing subsequent abuse inflicted by correctional officers and staff can often retraumatize them and resurface prior incidences of abuse.<sup>34</sup> Responses from the DVSJA survey suggest that the primary triggers of survivors' trauma-related distress are correctional officers' interactions with incarcerated people and some operational practices. For one respondent, "trauma issues are constantly resurfacing because of the nature of the setting," including, "body cameras on male and female officers entering showers [and] the yelling and tone officers use against us." Another respondent shared that, as a domestic violence survivor, she has "problems seeing male officers take down females during fights." Other reported triggers included loud noises (e.g., keys clanging) and yelling or screaming. One respondent stated,

“Some officers like to abuse their power as an office[r]. In some cases, it reminds us of our abusers and how we got here.”

Another respondent commented on how these incidences can resurface experiences of abuse from their past:

*“The condescending and abusive manner that we are treated by security staff is retraumatizing.”*

Many of the DSVJA survey respondents who shared their experiences of retraumatization in prison commented on correctional staff's insensitivity to their histories of trauma. As one respondent noted,

*“Officers will scream, yell at us not knowing and understanding that 90% of inmates in Bedford Hills ha[ve] been raped, abused, traumatize[d] by men in our lifetime before.”*

While incarcerated, respondents report being harassed, humiliated, threatened, intimidated, and verbally degraded by correctional officers. Respondents also reported concerns about excessive use of force and threats of force. Respondents have been “hit,” “beat up,” “slammed,” “punched,” “stomped out,” and threatened with force by correctional officers. Other reported abuses include correctional staff's neglect and indifference to incarcerated people's needs. Multiple respondents from the DVSJA survey also complained about sexual misconduct by prison staff; respondents reported sexual assault and harassment, rape, and voyeurism—including male officers watching incarcerated individuals while they shower and use the toilet. In many ways, these triggers and experiences of assault can replicate elements

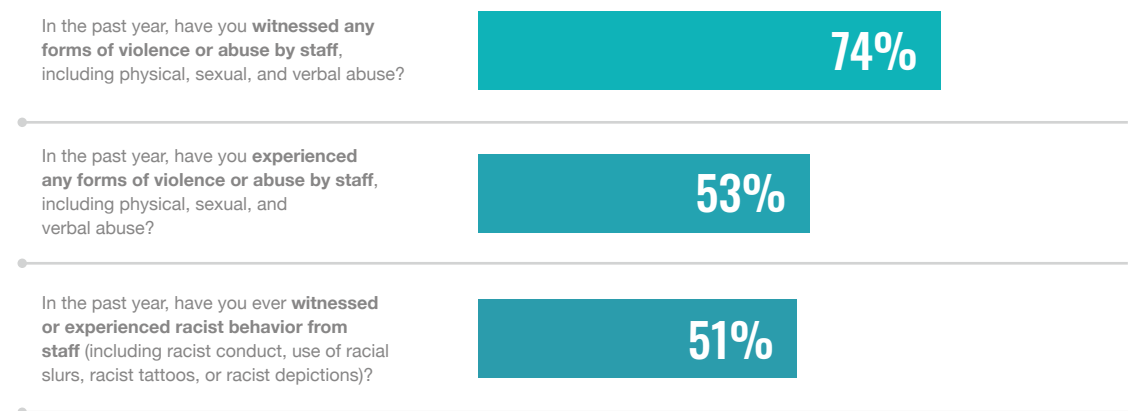
<sup>34</sup> Office of the Inspector General, “The Department of Justice's Efforts to Prevent Staff Sexual Abuse of Federal Inmates,” U.S. Department of Justice, 2009, <https://oig.justice.gov/reports/plus/e0904.pdf>

## FINDINGS

of survivors' former interpersonal violence. The power, control, and surveillance that survivors undergo during their incarceration can mirror the power, control, and surveillance of their past abusive interpersonal relationships, underscoring the continuum of violence that survivors face. This illuminates why the experience of incarceration itself can be traumatic for survivors of domestic and gender-based violence. These experiences are particularly exacerbated for women of color in prison, as respondents also report that correctional officers use racist obscenities to refer to individuals, regardless of ethnicity/race. One respondent expressed her daily fear of interacting with officers and other individuals because of the prevalent racism in their interactions.

The reports from CANY's in-person monitoring visits and from the respondents' qualitative survey responses are also confirmed throughout the quantitative results from the post-visit monitoring survey to Bedford Hills. In this survey, 74% of 110 respondents identified that they had witnessed some form of violence or abuse by staff, including physical, sexual, and verbal abuse, while 53% of respondents reported experiencing these acts of violence by staff themselves. Additionally, 51% of respondents reported experiencing or witnessing racist behavior from prison staff, including the use of racial slurs and remarks.

### PERCENT OF INDIVIDUALS RESPONDING YES



**Figure 1. Questions from the Post-Visit Monitoring Survey on Abuse**

These issues become even more exacerbated alongside reports of inadequate avenues to seek redress and protection from custodial abuse. Respondents' reports suggest that an ineffective grievance system facilitates staff's misconduct and abuse. For example, one respondent wrote:

*“Writing Albany for help with brutality we never hear nothing back, it feels like we’re on Devil’s Island. We’re the forgotten, so that makes correctional officer[s] feel like they can rape us, beat us, degrade us, and deprive us of our rights.”*



Respondents stated that their reports to prison officials are often ignored and uninvestigated, with major delays in administrative responses to grievances, and staff retaliation for using the grievance system. Thus, those incarcerated in prisons for women are often stuck in a cycle of past abuse and traumatization that occurred before their incarceration which resurfaces, is magnified, and becomes seemingly inescapable.

## THE PHYSICAL CONDITIONS OF INCARCERATION AND THE IMPACTS ON HEALTH

While it is important to consider how trauma and harmful mental health dynamics can be reproduced in prisons for women, it is also important to consider the impact of the physical conditions of incarceration. Just as interactions with correctional staff contribute to the culture of a prison and the potential for rehabilitation, how incarcerated people interact with their physical environment is also important to this end. Among the issues reported during the monitoring trip to Bedford Hills, in addition to the two surveys distributed, some of the most salient topics discussed were related to the living conditions for those incarcerated. Included in these reports were issues surrounding policies and practices that contribute to disrupted sleeping and concerns around the cleanliness and maintenance of the prison.

### DISRUPTIVE SLEEPING CONDITIONS

Perhaps the most salient issue discussed by the IGRC and other incarcerated individuals during the monitoring visit to Bedford Hills was the issue of disrupted sleeping. Many women reported not being able to get adequate sleep due to two recent shifts in policy and practices at the prison: a policy requiring individuals to stand while being counted, and the recent shift in practices that allowed individuals to sleep with only a single mattress.

As reported by the IGRC, the new standing count policy requires that every incarcerated person at Bedford Hills must stand while they wait to be counted, during a count that occurs four times a day. The first standing count begins at 5:30 AM, but those incarcerated are woken by a loud, disruptive countdown at 5:15 AM to signal them to stand in their cells. Two more counts occur during the day before the final standing count of the day at 10:15 PM. Individuals reported to us that, due to the nature of the standing count, it is virtually impossible for any person to sleep for more than seven hours at a time, and many reported even less sleep than that, as the security rounds conducted throughout the night wake them. While this policy is troubling because of the way it deprives incarcerated people of sleep and rest, the punitive measures that follow if someone misses a standing count are even more concerning. If an incarcerated person misses a standing count, CANY representatives were told that they are given a 30-day Keeplock—a sanction that restricts people to their cells and restricts their access to phones, programs, visits, and jobs. This can greatly impact a person's experience in prison, causing them to lose progress in their educational or college programs as well as lose the jobs many have worked hard to receive. Because of this, some of the women from the ILC and IGRC described sleeping at Bedford Hills as a constant state of frenzy and panic, where the anxiety of potential consequences inhibits their ability to get a proper night's sleep during an already restricted sleeping schedule.

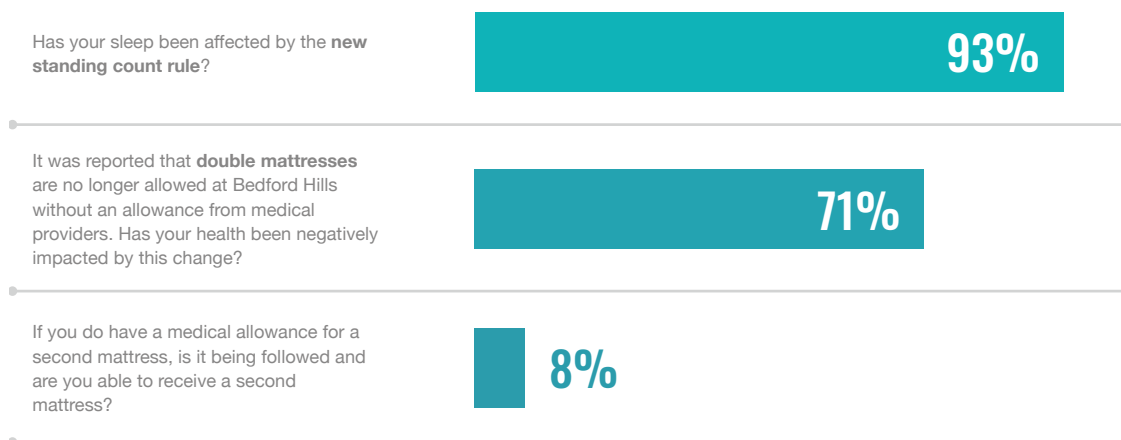
The IGRC stated that as of fall 2019, they believe over 100 people have already been placed under Keeplock conditions because of this policy, and that they have received hundreds of

grievances about this issue since it was instituted earlier that year. When talking about the standing count, one respondent to the DVSJA survey stated:

*“...right now the standing count has us all lacking sleep. The times I used to be able to catch up on sleep I cannot because I must stand on each master count. I don’t get to sleep enough, it keeps me nervous and I don’t think as clearly as I did with enough rest.”*

Another issue that was reported by both the IGRC and by individuals in housing areas is the new practice of only allowing a single mattress. While many of the people at Bedford Hills had historically been granted a second mattress for medical reasons or reasons surrounding personal well-being, CANY representatives were told that this practice has stopped, and the administration at Bedford Hills has confiscated all additional mattresses. As reported by representatives at Bedford Hills, through this policy, people who had been sleeping with double mattresses for years, even those with previous medical permission, had their second mattress taken away and now sleep on a single mattress. While the deputy superintendent for security and primary care providers can issue approvals for double mattresses, Bedford Hills’ IGRC stated that they are not doing so, even after this issue has been raised by many in the prison. This issue, coupled with the new standing count policy, provides insight into how the conditions at Bedford Hills are impacting the health and well-being of those incarcerated—specifically, the ability to sleep and rest. When asked about these issues in the post-visit survey, 71% of 100 respondents at Bedford Hills stated that their health had been negatively impacted by the withdrawal of the second mattress. In addition to this, 92% of those with an allowance for a second mattress said that they were not able to receive one.

## PERCENT OF INDIVIDUALS RESPONDING YES



**Figure 2. Questions from the Post-Visit Monitoring Survey on Disruptive Sleeping Conditions**

Issues surrounding adequate sleep and rest are of particular importance to the health and well-being of incarcerated people, given that many of those incarcerated are already facing health issues. At Bedford Hills, the population of those over 50 years old makes up 19% of the total population (n=123). While these individuals are already impacted by vast trauma histories, many of them are also aging and elderly, and facing additional serious physical health issues.

### FACILITY MAINTENANCE AND LIVABILITY

At Bedford Hills, incarcerated people reported that it was the prison's policy to wait until October 15 before turning on the heating system for the winter season. One respondent stated she was ticketed for a disciplinary infraction after wearing a hat indoors to keep herself warm due to "freezing" temperatures inside the prison. This was backed up by data from the Bedford Hills post-visit survey, where 66% of 105 respondents reported that the prison is not heated appropriately in the winter months.

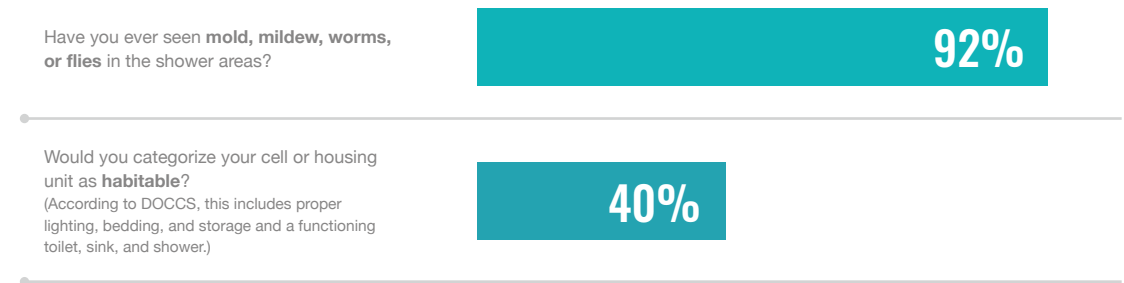
The issue of cleanliness and overall maintenance of prison spaces was also discussed throughout reports from incarcerated people. During CANY's meeting with the ILC, the ILC discussed how their request to have the shower rooms power washed once a month was not granted.

The staff proposed instead to adopt a shower schedule that would allow time for the showers to be properly cleaned and allowed to dry completely between use. One respondent to the DVSJA Survey who is incarcerated at Bedford Hills commented specifically on the issue of cleanliness in showers, citing it as a major issue at the prison:

*"Something that is disturbing that I have experienced while being incarcerated is the fact that every day there are women showering in showers where black mold is growing and you have worms and maggots coming up from the drain."*

To further validate these reports, when asked about the cleanliness of shower areas, a startling 92% of respondents to the Bedford Hills post-visit survey stated they had seen mold, mildew, worms, or flies in the shower areas. To add to this problem of maintaining the general cleanliness of the prison, when asked if they would categorize their living areas as hospitable, 60% of respondents stated that their current facilities were inhospitable according to the DOCCS definition of basic living standards, which includes proper lighting, bedding, storage and a functioning toilet, sink, and shower.

### PERCENT OF INDIVIDUALS RESPONDING YES



**Figure 3. Questions from the Post-Visit Monitoring Survey on Cleanliness and Livability**

The calls for a hygienic and sanitary environment in which to wash themselves are particularly concerning given the current state of the COVID-19 spread throughout New York and inside prisons. While these concerns were expressed before the global pandemic, they provide insight into how sanitation practices were being upheld in the months before the pandemic. If prisons are unable to sufficiently provide the appropriate, basic sanitation measures during typical, day-to-day operations, it is hard to grasp how they would be able to undertake them in the midst of a pandemic.

## THE LACK OF TRAUMA-INFORMED REHABILITATION AND PROGRAMMING IN WOMEN’S PRISONS

Throughout the data, the need for comprehensive, trauma-informed programming was discussed. As it stands, prisons for women do not have the resources and were not designed to address the complex programming and rehabilitation needs of survivors of domestic and gender-based violence. From programming on education and healing, to accessing trauma-informed mental health services, re-entry resources, and safety planning, these programs are rarely designed with such survivors in mind, a fact that is quite concerning considering the high prevalence of incarcerated women who are survivors and the potential for the harmful conditions of incarceration to retraumatize survivors.<sup>35</sup> In addition, the few programs that women report to be helpful are rarely available, meaning many are stuck serving their sentences without meaningful programming, and thus denied meaningful mechanisms of growth and rehabilitation.

<sup>35</sup> Katherine Lorenz and Rebecca M Hayes, “Intersectional Pathways: The Role Victimization Plays in Women’s Offending and in Prisons,” in *Women and Prison*, ed. Jada Hector (Springer, 2020) 97-129, [https://doi.org/https://doi.org/10.1007/978-3-030-46172-0\\_8#ESM](https://doi.org/https://doi.org/10.1007/978-3-030-46172-0_8#ESM).

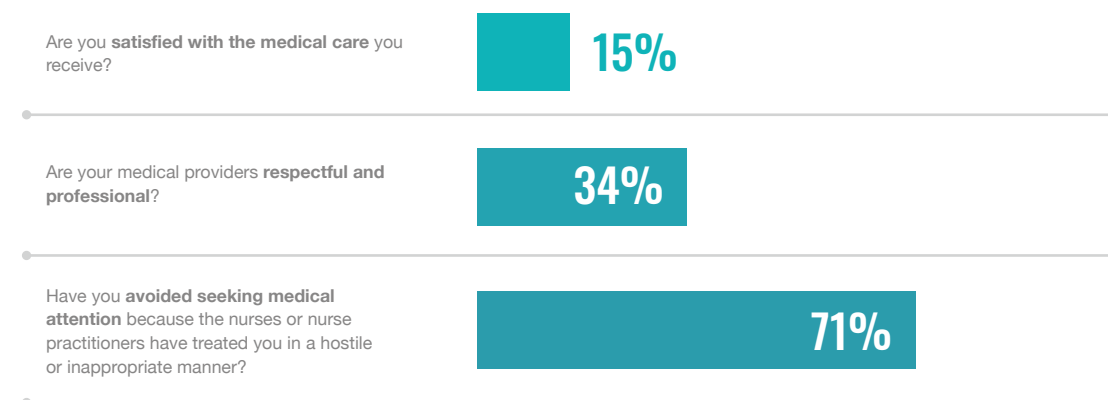


## HEALTHCARE

Addressing the healthcare needs of women and individuals incarcerated in prisons for women is essential, as many of them faced disproportionate health challenges prior to incarceration. However, incarceration often exacerbates pre-existing conditions and exposes individuals to further healthcare issues. This is an urgent point because many chronic health issues lead to acute emergencies that could be prevented with thorough preventive care.

While respondents to both of the surveys and those interviewed during the in-person monitoring visits mentioned issues with healthcare, many of the chief complaints from those at Bedford Hills focused on the disjointed approach to care by medical professionals, as demonstrated by the responses to the post-visit survey. While 85% of 110 respondents to the survey stated that they are not satisfied with the medical care they receive, perhaps even more troubling was the lack of professionalism that was reported. Only 34% of respondents reported that medical providers were respectful and professional when treating them. Further, 71% of the 110 respondents stated that they have avoided seeking medical attention to avoid being treated in an inappropriate manner—demonstrating how the lack of professionalism among medical staff can have adverse health outcomes for incarcerated people. Dental and mental health care were also reported to be inaccessible throughout the post-visit survey responses, with 45% of respondents reporting not having access to a dentist when needed, and 43% of respondents not having access to a mental health professional when needed. The lack of available mental health outlets for many of the respondents is especially concerning given that so many are survivors of violence with extensive trauma histories.

### PERCENT OF INDIVIDUALS RESPONDING YES

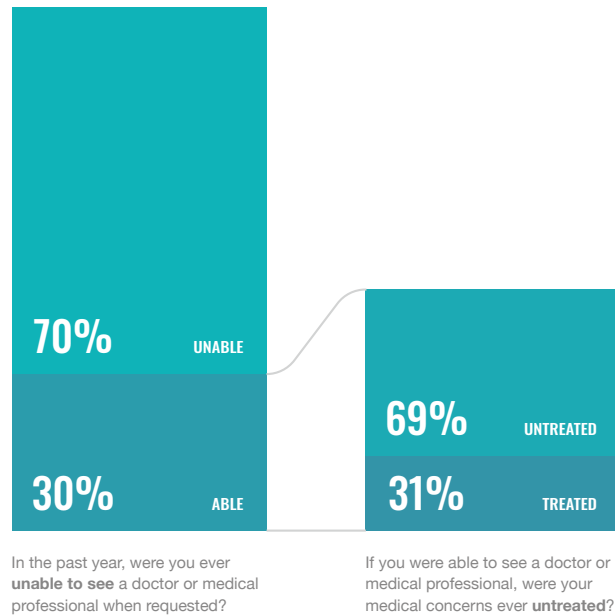


**Figure 4. Questions from the Post-Visit Monitoring Survey on Healthcare Access**

In the narrative responses to the DVSJA survey, one woman defined the prison healthcare system as “horrible,” with tendency to neglect many medical needs. Respondents reported that diagnoses take a very long time to report, and may be inaccurate, or minimized. This type of response was confirmed through the post-visit monitoring survey questions (see Figure 5), in which 70% of respondents stated they were unable to see a doctor or medical professional when requested. Of the 30% of respondents that were able to see a physician,

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69% of respondents stated their medical issue was left untreated. Respondents complained of multiple barriers that patients have to navigate to receive a response to emergencies, reluctance to run further medical tests, and episodes of nurses administering the wrong medicine for an ailment. Respondents also reported that often, physicians do not explain the medications they prescribe, and it is only after persistent follow-ups that an individual can see a specialist or even schedule a surgery.



**Figure 5. Questions from the Post-Visit Monitoring Survey on Healthcare Access**

A succinct description by one respondent summarized the general mentality this way: they were treated “like an inmate, not like a patient.” Medical providers in prison become, in this respondent’s view, arbiters of punitive justice instead of healthcare practitioners whose job it is to care for incarcerated people.

## PROGRAMMING AND EDUCATION

Throughout the reports to CANY, there were several concerns raised related to programming and education. Respondents to the DVSJA survey and Bedford Hills monitoring survey, as well as the incarcerated individuals who spoke to CANY representatives during the in-person monitoring visit, shared their feedback about access to programming, lack of appropriate programming, issues with program duration and availability, and the potential for programs to address issues of trauma, mental health and recidivism.

### *Educational and Vocational Programming*

Respondents to the DVSJA survey talked extensively about educational and vocational programming. This discussion surfaced larger themes of restricted access to education pre-incarceration, consistent with the limited educational and economic attainment of incarcerated women.

Many of the respondents expressed their view of the power of education as a rehabilitative force for their time in prison. Their responses included:

*“...many women didn’t finished their education and can’t read or write”*

*“These women are already at a disadvantage. Give them some skills! Some value!”*

*“Education is the foundation for rehabilitation... this is the way to keep people out of prison.”*

*“...education gives us the tools we need to be successful in the world and it reduces the likelihood of people returning to prison.”*

However, respondents shared that their experiences with the educational programs were not always positive. Some respondents were unable to enroll in the educational programs because they lacked a high school diploma or GED, while some were unable to enroll because they still had too much time remaining on their sentences. For those who were able to enroll, inconsistent teaching and unclear guidelines kept them from successfully advancing. Concerns about vocational programming echoed those of educational programming. Respondents to the DVSJA survey believed that vocational programming could assist them with better opportunities during and after their incarceration, but long waiting lists, scarcity of available programs, and selective participation keep those opportunities out of reach. Respondents also mentioned other forms of programming, like visitation, family, and recreational programming, and the challenges associated with them. Issues with distance from the prison prevented participation from the families of the incarcerated individuals in certain programs. Respondents also mentioned that non-educational and non-vocational programming was limited and did not mirror programmatic opportunities they had received at other facilities. In line with the findings outlined in *Connection With the Outside World: Prison Monitoring Findings and Recommendations*,<sup>36</sup> CANY’s July–September 2019 monitoring report, many of the respondents to the Bedford Hills post-visit survey said that they would like to be involved with aggression replacement training (“ART”) and other programs, but are barred because only incarcerated people within three months of their release date can be accommodated in the program.

<sup>36</sup> Correctional Association of New York, “Connection with the outside world: Prison Monitoring Findings and Recommendations,” Correctional Association of New York, 2020, [https://static1.squarespace.com/static/5b2c07e2a9e02851fb387477/t/5e65f1009369fa095333ef23/1583739189727/Connection-to-the-Outside-World\\_CANYReport-03092020.pdf](https://static1.squarespace.com/static/5b2c07e2a9e02851fb387477/t/5e65f1009369fa095333ef23/1583739189727/Connection-to-the-Outside-World_CANYReport-03092020.pdf)

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Throughout their responses, respondents to the DVSJA survey talked about their desire for a focus on rehabilitation instead of punishment, and indicated that incarcerated women should be viewed through the lens of care. Respondents wanted programs that provided strategies to deal with mental health, trauma, and addiction, and reported that mental health and psychological challenges served as barriers to program participation. Respondents included examples of individuals who would benefit from trauma-informed educational and vocational programming but were instead subjected to disciplinary measures that restricted their access to the programming. One respondent shared this about a friend:

*“She is into hairstyling and cosmetology, but has not been put into vocational yet, she has addiction issues and mental health issues which result in disciplining issues... this facility does not have enough to help someone like her. She’s a really good person with a big heart but she needs more care and more positive and constructive attention inside, not just disciplinary.”*

### *Specialized Programming*

#### **Peer-Led Programs**

At Bedford Hills, the diminishing and restriction of peer-led programs is an issue that was discussed by many of the individuals incarcerated there, and is also an area of concern that has been growing amongst prisons state-wide. During the in-person monitoring visit, it was reported by the IGRC and ILC that much of the programming that had existed historically has been restricted, changed, or outright eliminated. For decades, incarcerated people in the state of New York have worked to organize, develop, and improve programming for themselves and for other people who were incarcerated. One such program was the Family Violence Program, originally started by incarcerated women at Bedford Hills in the 1980s. This peer-led initiative provided educational programming, individual counseling, and support groups for survivors of violence.

Peer-led programs are critical for giving incarcerated people a sense of ownership, purpose, and pride in an environment that provides little autonomy or dignity. In addition to being important because they provide meaning to people who are serving time, these programs are also important for building communities and social networks and acquiring new skills and knowledge that can mitigate the difficulty of the re-entry process. Additionally, it was reported that no rationale was provided for why these programs are disappearing or why it has become more restricted and difficult to organize these groups. Even further, people at Bedford Hills and at other prisons have stated that increased peer programming reduces violence and other negative incidents by providing incarcerated people with more options to pass the time.

Program-treatment needs of survivors

In New York state prisons for women, DOCCS provides two programs for trauma survivors: The Alternative to Violence Project and the Female Trauma Recovery Program (See Table 1).

PROGRAM	FACILITY	DETAILS
ALTERNATIVE TO VIOLENCE PROJECT	ALBION, BEDFORD HILLS	The Alternative to Violence Project provides participants with skills and communication strategies for de-escalation and conflict resolution.
FEMALE TRAUMA RECOVERY PROGRAM	ALBION, TACONIC	The Female Trauma Recovery program is a specialized treatment program for incarcerated people with histories of sexual abuse and trauma. Upon completion, participants with ongoing treatment needs receive an aftercare plan developed by staff. <sup>37</sup>

Table 1. NYDOCCS Programming for Trauma Survivors in Women's Prisons

However, these programs—which serve only 3% of the population in prisons for women as of 2015—do not address domestic and gender-based violence.<sup>38</sup> The inaccessibility of mental health services, as discussed in the preceding healthcare section, coupled with the lack of domestic and gender-based violence counseling and support programs mean that there are few, if any, therapeutic options for survivors to address their personal histories. CANY learned that programs directed toward safety and recovery are among incarcerated survivors’ most important programming needs. Respondents to the DVSJA survey reported their dissatisfaction with the programming in prisons for women, citing the need for domestic violence treatment, education, and prevention programs. However, respondents spoke highly of the Family Violence Program previously offered at Bedford Hills. This 6-month program provided counseling, education, and support groups for survivors of domestic and family violence; respondents who completed the program said it provided information about destructive relationship patterns while simultaneously helping them recover from past trauma and abuse.<sup>39</sup> As one respondent shared:

*“[The Family Violence Program] helped [women like myself] open up about...child abuse &/or domestic violence. With this program being taken away now there is no program for women like myself to utilize to conquer those past issues/trauma.”*

Research suggests that programs like the Family Violence Program help survivors with short- and long-term recovery. For example, a 1999 study on the Family Violence Program found that women who completed the program had a significantly lower recidivism rate than

37 Correctional Association of New York, “Reproductive Injustice: The State of Reproductive Health Care for Women in New York State Prisons,” Correctional Association of New York, 2015, <https://static1.squarespace.com/static/5b2c07e2a9e02851fb387477/t/5c4f5d01758d466ad39b0a97/1548705033102/2015+Reproductive+Injustice+in+New+Yorks+Prisons.pdf>

38 Correctional Association of New York, “HIV Services for Women in New York State Prisons,” Correctional Association of New York, 2015, <https://static1.squarespace.com/static/5b2c07e2a9e02851fb387477/t/5c4f5d01758d466ad39b0a97/1548705033102/2015+HIV+Services+for+Women+in+NY+Prisons.pdf>

39 Correctional Association of New York, “Fact Sheet: Women’s Incarceration: The Experience in New York’s Prisons,” Correctional Association of New York, 2019, <https://static1.squarespace.com/static/5b2c07e2a9e02851fb387477/t/5cc08885fa0d60251a568084/1556121734338/2019+Women%27s+Incarceration+Fact+Sheet.pdf>



women who did not.<sup>40</sup> Respondents who had not participated in the Family Violence Program indicated interest in learning about domestic violence and how to avoid re-victimization post-incarceration—including descriptions of the signs and types of abuse and information on the risk factors and consequences of domestic violence

### RE-ENTRY AND SAFETY PLANNING FOR DOMESTIC AND GENDER-BASED VIOLENCE SURVIVORS

Inadequate resources and attention allocated to survivors' re-entry needs undermine their reintegration prospects. DVSJA respondents report having received minimal guidance on how to prepare for re-entry and access resources upon release. There are few programs and services available in prisons for women to help individuals acquire knowledge and skills in critical areas of their lives before re-entry. Respondents' complaints included the lack of re-entry programs and resources informing people about their options. Concerns about the direct and collateral consequences of their convictions—e.g., employer discrimination, stigmatization, child custody, deportation, and access to affordable housing options—were frequently cited as well. For example, more than 20% of respondents reported concerns about facing discrimination and social stigma (due to their conviction) upon their release.

System-involved survivors often receive fewer and lower quality services than survivors without histories of system involvement due to the shortage and eligibility restrictions of domestic violence shelters and specialized services. For survivors who are women of color, low-income, immigrants or LGBTQ, access to domestic and gender-based violence services and treatment will be limited by the same structural factors that made violence and incarceration more likely in the first place. Because survivors do not receive adequate trauma-related treatment in prison, it is especially important to connect those re-entering to domestic and gender-based violence services in the community in order to begin or continue recovery work post-incarceration.

Although securing safe, affordable housing is hard for all re-entering people, there may be additional violence-based challenges or risks involved for survivors of domestic and gender-based violence. A lack of economic resources and opportunities constrains re-entering survivors' options for safety and increases their vulnerability to violence in the community. When respondents answered questions about why programming for survivors was important to them, they brought up concerns about post-release victimization:

*“[Addressing] issues involving past traumatic experiences is crucial to becoming a stronger [woman] to avoid people and situations where we were previously victims or [learn how to] handle such situations better in the future.”*

*“I believe that [issues about past abuses are] very important because there [are] people like myself that don't fully or didn't understand the domestic [violence] cycle or what 'red flags' to look for in...starting to date.”*

*“Issues with references to the woman's state of mind since the last encounter of the abuser. How she copes with knowing the results of repeated abusive behaviors due to poor choices in mates...How she may feel with re-entering a society that has not changed. Doing what's best for herself to avoid entering this situation again while moving forward with life.”*

Nearly 17% of respondents reported concerns about returning either to places where they had endured trauma or to communities where their abusers or their abusers' families live. Some of the survivors included in this report indicated plans to relocate but have not received assistance with transfers and release planning. Survivors released to unfamiliar areas may require additional guidance since many reported not having social networks to rely on for financial assistance and other supports post-release. The community-level barriers to safety and security that reentering survivors encounter, especially when coupled with the inadequate social and institutional supports they receive inside, highlight the failure of incarceration to meet survivors' short- and long-term needs for healing and recovery.

## THE FAILURE OF CURRENT PATHWAYS TO ACCOUNTABILITY AND CHANGE

While the current policies and procedures upheld by DOCCS in prisons for women are often framed as protecting the safety and well-being of those incarcerated, far too often these policies become weaponized against the people they claim to protect. In the reports from incarcerated people received from the DVSJA survey and the Bedford Hills post-visit survey, much of the discussion around prison policies, particularly the grievance process, reflects a system riddled with abuses of power by correctional officers, a lack of accountability for these actions, and an overall lack of consistent, uniform application of procedures.

## DISCIPLINE AND SANCTIONS

While incarceration is a punishment in and of itself, many incarcerated people have additional disciplinary action taken against them in prisons. Some of these disciplinary practices, such as the use of solitary confinement in Special Housing Units (SHU), cell confinement (Keeplock), and restriction of programming, are regular, approved disciplinary methods used by DOCCS. Other forms of discipline in the form of informal sanctions, known colloquially among incarcerated people and prison staff as “the burn,” are informal disciplinary practices widely reported by incarcerated people across New York state prisons. These sanctions or “burns” typically involve depriving an incarcerated person of an essential need or service such as meals, access to showers, access to phones, and recreational time.

While the use of solitary confinement in SHU and Keeplock are practices that are recorded and reported by DOCCS, the extent to which “burns” are utilized is harder to ascertain because they are unsanctioned and thus, not formally recorded. That said, CANY regularly receives reports about the widespread use of such sanctions across prisons—at Bedford Hills, respondents reported that they more regularly experienced “the burn” than other approved disciplinary methods. While 17% of 110 respondents to the Bedford Hills post-visit survey reported being placed in solitary confinement (SHU) in the last year, 42% of 110 respondents reported being placed in Keeplock in the past year. In contrast with those sanctioned forms of punishment, 50% of respondents stated they were deprived of a basic need or “burned” in the past year and 40% of respondents stated that they are “burned” more than once a month.

## PERCENT OF INDIVIDUALS RESPONDING YES



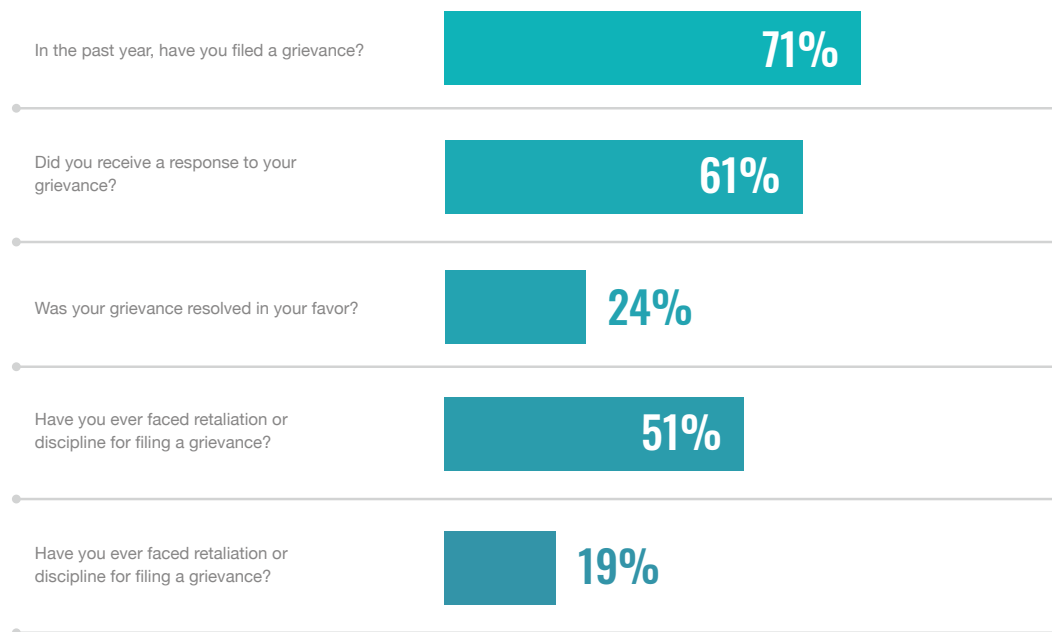
Figure 6. Questions from the Post-Visit Monitoring Survey on Discipline and Sanctions

### THE GRIEVANCE PROCESS AND ACCOUNTABILITY

Many of the issues reported to CANY are also made known to DOCCS staff through a formal grievance process. The grievance process, which, according to DOCCS Directive 4040, “provides each incarcerated person an orderly, fair, simple, and expeditious method for resolving grievances, pursuant to Section 139 of the Correction Law, and allegations of discriminatory treatment,” should function as an essential measure to resolve problems and reduce tension. However, at prisons for women across New York state, the grievance process was frequently cited by incarcerated individuals as failing in its purpose as a meaningful pathway to resolve issues. Reports of issues with the grievance process include ignored grievances, delays in grievances, lack of access to CCTV and body camera footage, and staff retaliation as the key concerns.

The IGRC stated that the same grievances are continuously filed by the bulk of the incarcerated population: inadequate access to medical care, interpersonal issues with correctional officers, failures in the programs and services provided, and grievances about the grievance process itself. The IGRC also stated that the same grievances continue to be filed because they are rarely thoroughly investigated, and the resolutions to the grievances from prison administration are insignificant. Of the respondents to the Bedford Hills post-visit survey who filed a grievance in the past year, 61% of respondents received a response to their grievance, while only 24% stated the grievance was resolved in their favor. In terms of having a meaningful, productive outcome from the grievance process, the results were unfavorable, with 81% of respondents stating that they did not feel as though an adequate investigation of their grievances was ever conducted.

## PERCENT OF INDIVIDUALS RESPONDING YES



**Figure 7. Questions from the Post-Visit Monitoring Survey on Grievances**

Perhaps the most problematic factor in the grievance process is the retaliation experienced by incarcerated people who speak out against issues and abuses. Fifty one percent of respondents to the post-visit survey at Bedford Hills reported they had faced retaliation or discipline for filing a grievance in the past. Issues around retaliation for speaking out are discussed throughout the two surveys, with sexual violence against individuals incarcerated in prisons for women being a major issue. When asked which issues were most important, one respondent to the DVSJA survey stated the following:

*“PREA-related<sup>41</sup> issues with correctional officer including: civilian staff, adult education, teachers, college professors, and administration. It is very important that these people of authority be properly trained and monitored in terms of interaction and using their authority with inmates...retaliation due to not complying to sexual inappropriate behavior or for confronting person of authority for any kind of abuse/misuse of authority. Inmates with history of PTSD due to abuse from family relationship and authority abusing are easy targets.”*

Statements like these point to failures in the grievance process and how incarcerated people filing grievances are treated. Despite the general view that the grievance program is failing, the grievance process is still widely used, with 71% of 110 respondents at Bedford Hills stating they filed a grievance in the past year.

This speaks to how important this process is for incarcerated people, as it is often their only pathway forward in combatting abuse. One respondent to the DVSJA survey from Bedford Hills described her experience with the prison policies and the grievance process with frustration:

“ *It is difficult to live in an institution that is governed by specific rules and regulations that security staff nor administration honor. I find myself having to stress over writing grievance after grievance in regards to security staff and administration disregarding directives and forms and it is frustrating.* ”

As mentioned before, the implementation of procedures and policies inside of prisons is up to the discretion of prison staff and often not uniformly practiced. Another way in which this manifests is through the implementation of PREA-related policy and issues. Enacted by the United States Congress in 2003, The Prison Rape Elimination Act (PREA) is a federal law written to protect incarcerated people from sexual harassment and abuse during their incarceration. While initially designed to help people experiencing sexual violence, how PREA is implemented in many prisons can often leave survivors of sexual assault even more frustrated and further delay pathways to justice. Critics of PREA have discussed these issues, stating that while it is a policy in name, it does little more than provide resources to study the prevalence of prison rape through research, information gathering and grantmaking. One critique outlines the way in which PREA fails incarcerated survivors, while giving additional mechanisms of control to the state.<sup>42</sup> This often happens when courts presume irrelevance to the claims of incarcerated plaintiffs while presuming relevance for the defendants—providing the state with a provision to legitimize their complaints in the name of PREA while not providing incarcerated people with the same provisions.

In one case cited in the study, an incarcerated person sued a prison for the improper handling of their sexual assault case. Defendants from the prison in question then argued that, “PREA merely ‘authorizes grant money, and creates a commission to study the [prison rape]

<sup>42</sup> Gabriel Arkles, “Prison Rape Elimination Act Litigation and the Perpetuation of Sexual Harm,” *New York University Journal of Legislation and Public Policy* 17, no. 4 (2014): 801-834, <https://ssrn.com/abstract=2599544>



issue...The statute does not grant prisoners any specific rights.”<sup>43</sup> Conversely, there are a wide range of cases cited in which state prison defendants have used PREA as a method of defense in justifying their own violations, from denying incarcerated transgender people proper hormones to forcing incarcerated survivors to undergo rape kit exams against their will.<sup>44, 45</sup> The way PREA is implemented can also mean that there are additional avenues that incarcerated people must exhaust before any serious avenues of change can be attempted. For instance, in order to pursue legal action against incidences of sexual assault under PREA, incarcerated people must first exhaust the limits of the grievance system—a problematic system in and of itself.<sup>46</sup>

These critiques fall in line with many of the reports received through the DVSJA survey, in which some respondents identified PREA-related concerns as a main issue in their prison experience. One incarcerated person stated, “[When] you report PREA nothing is done, [the accused correctional officers] still work and you see them every day”. Thus, while PREA was instituted to curb incidences of sexual assault and condemn it through zero-tolerance declarations, the way in which sexual assault reporting manifests can often further isolate survivors and provide them with little to no meaningful pathway forward in practice. Faced with the seemingly endless cycle of unaddressed grievances as their only path forward, many respondents discuss the frustration of filing grievance after grievance only to remain unheard.

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43 *W. Virginia Reg'l Jail & Corr. Facility Auth. v. A.B.*, No. 13-0037, 2014 WL 5507522 (W. Va. Oct. 31, 2014).

44 *Battista v. Clarke*, 645 F.3d 449, 452 (1st Cir. 2011)

45 *Lowry v. Honeycutt*, 05-3241-SAC, 2005 WL 1993460, at \*1 (D. Kan. Aug. 17, 2005).

46 Gabriel Arkles, “Prison Rape Elimination Act Litigation and the Perpetuation of Sexual Harm,” *New York University Journal of Legislation and Public Policy* 17, no. 4 (2014): 801-834, <https://ssrn.com/abstract=2599544>

## CONCLUSION

The existing pathways to justice and accountability embedded into our criminal legal system were never designed to address the traumatic experiences of those impacted by violence. The goals of punishment and confinement often supersede the objectives of rehabilitation for individuals in prisons. If prisons, and the criminal legal system generally, are responsible for reforming themselves (e.g., through the use of grievances) but little meaningful change happens, an effective path forward can no longer depend on internal mechanisms. A prison should not be relied upon to reform itself in a manner that respects survivors of domestic and gender-based violence, as the inherent nature of prisons in the U.S. criminal legal system is one that creates punitive rather than rehabilitative conditions.

Thus, while working to improve the conditions for incarcerated people, we must concurrently push for efficient mechanisms that allow for greater transparency, critiques, accountability, and changes to the criminal legal system. It is also important to simultaneously advocate for decarceration as a means to counter mass incarceration, by promoting the release of those incarcerated, aiming for less people to be incarcerated in the first place, and supporting shorter sentences for those to be incarcerated. While this report demonstrates the compounded and complex issues that incarcerated survivors of violence experience, it also offers a significant opportunity for actionable change to occur on a meaningful level. At this moment, calls for decarceration and large-scale changes have galvanized New Yorkers to stand behind these issues at unprecedented levels. From the recent repeal of 50-A, which establishes transparency of law enforcement misconduct, to the ongoing calls to defund police departments and invest in other mechanisms of public safety, the conversation around prisons and policing is shifting. This report, in turn, demonstrates the many ways the criminal legal system fails the most vulnerable and seeks to offer actionable recommendations for the future.

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## RECOMMENDATIONS

By understanding how prisons fail to serve survivors, even as correctional law is rewritten to include them, we gain further insight into how policies centering decarceration are critical for the safety of survivors at large, particularly in the midst of a global pandemic. It is with these factors in mind that CANY makes the following recommendations:

### Recommendations to The Governor

- Cuomo should undertake a mass effort to re-examine all cases where domestic and gender-based violence was a factor leading to incarceration, and resentence or commute the sentences of those individuals impacted by domestic and gender-based violence.
- The Governor should use clemency power to commute the sentences of anyone who has a heightened vulnerability to COVID-19, including the elderly (50+), pregnant women, people with serious illnesses, and people with otherwise compromised immune systems, including people who have applied for medical parole, regardless of whether their convictions are for violent felony offenses.

**Recommendations to the State Legislature**

- CANY recommends that the legislature further explore creating an independent correctional ombuds to investigate complaints related to incarcerated persons' health, safety, welfare, and rights.
- CANY recommends that the legislature reintroduce a bill to establish oversight of DOCCS healthcare services by the State Department of Health.

**Recommendations to DOCCS**

- CANY recommends that, in an effort to increase the effectiveness and legitimacy of the grievance process, DOCCS expedite the planned implementation of an electronic grievance process using tablets.
- In order to better understand trends and outcomes of grievances filed, DOCCS should commission a comprehensive review of the current grievance processes, with particular attention given to grievances whose subject involves abuse by state employee(s). CANY further recommends that, in addition to publishing information about types of grievances filed on a semi-annual basis, DOCCS should publish information about the rates at which grievances are resolved in favor of the incarcerated individual.
- In line with the recent repeal of 50-A, DOCCS should make the personnel records of correctional officers publicly available. DOCCS should proceed to take urgent and appropriate action toward investigating these matters and disciplining correctional officers with past histories of violence and abuse.
- Reallocate funding and facility space to programming that specifically addresses trauma, including abuse, mental health, and addiction, grounded in trauma-informed care and conducted by certified facilitators from community-based organizations.
- Reinstigate and expand the peer-led Family Violence Program and other peer-led programming across all prisons for women.
- Create and implement protocols for meaningful discharge planning in DOCCS, with specific attention to safety planning for survivors of domestic and gender-based violence.
- CANY recommends that DOCCS alleviate some of the gaps in the quality of medical services by improving preventative care through routine screenings, education, and outreach.
- CANY recommends DOCCS develop an electronic system for tracking requests for medical care and responses.
- CANY recommends that DOCCS develop criteria for the repair of key maintenance problems across DOCCS facilities, ensuring that improvements which would have a significant impact on the health and safety of incarcerated people and staff are prioritized. These criteria should be published, along with annual progress reports toward completing the planned improvements.

## RECOMMENDATIONS

### Recommendations to Officials at Bedford Hills Correctional Facility

- In line with the previous recommendation to DOCCS about facility maintenance, CANY also has recommendations for Bedford Hills:
    - Ensure that the basic living conditions guaranteed to incarcerated people are met, including intensive cleaning or power washing showering and living facilities.
    - Ensure that facilities and incarcerated people are kept appropriately warm in the winter months.
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## APPENDIX A: METHODOLOGICAL LIMITATIONS

CANY recognizes that there are various approaches to oversight, each with their own strengths and challenges. Some methodological limitations that should be acknowledged for this report include the logistical coordination of monitoring visits, the reliability of the demographic information reported by DOCCS, and the usual considerations surrounding self-reported survey data. CANY has limited control over which dates are selected as monitoring dates. While CANY is required to provide DOCCS with a 30-day notice for an anticipated visit, it is ultimately at DOCCS' discretion to confirm the proposed dates or suggest alternate times. These variables influence how and when our monitoring work is completed. The reliability of the demographic data provided by DOCCS presents another methodological concern. While the data collected by CANY are largely self-reported, DOCCS demographic data are assigned upon intake. In assigning demographic factors to incarcerated people rather than asking them to self-report their demographics, the accuracy of racial, ethnic, and sex categorizations becomes a matter of perceived phenotype rather than identity.

A final challenge involves the typical considerations present when working with survey data. Because the items in the DVSJA and post-visit surveys rely exclusively on self-reported data, they are vulnerable to response biases, as with most surveys of this nature. Response biases occur when respondents answer survey items inaccurately. While this can happen for a variety of reasons, such as the physical environment where they take the survey or as a matter of social desirability (i.e., answering questions to describe oneself in a favorable light), one factor that incarcerated people report to CANY is the belief that DOCCS staff will read outgoing correspondence and seek retribution. Fear of surveillance may therefore play an important role in response biases.



# IT REMINDS US HOW WE GOT HERE

**(RE)PRODUCING ABUSE, NEGLECT,  
AND TRAUMA IN NEW YORK'S PRISONS  
FOR WOMEN**

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