

POLICY AND ADMINISTRATIVE PROCEDURE

Manual of Policies and Procedures

Title

TRANSGENDER AND INTERSEX YOUTH

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Legal References	Related Policies/Procedures	Other References
(includes but is not limited to)	(includes but is not limited to)	(includes but is not limited to)
IC 11-8-2-5(a)(8)	00-01-103 03-02-101	ACA Standards:
IC 11-8-2-9	00-02-301 03-02-103	
IC 11-10-1-1 et seq.	00-04-201 03-03-101	JTS: 3-JTS-3D-06-1 thru 3-JTS-
IC 11-10-2-1 et seq.	01-02-101	3D-10
IC 11-10-3-1 et seq.	01-03-103	
IC 11-11-6-1	03-02-104	CO: 2-CO-3C-01, 2-CO-4F-01
IC 16-21-8-1.5	01-04-104	
IC 35-42-4-1	04-03-103	
IC 35-42-4-2	01-05-101	
IC 35-42-4-8		
IC 35-44.1	HCSD 2.30Y	
IC 35-45-4-5	Health Services Sexual	
	Assault Manual	
United States Department of		
Justice National Standards to		
Prevent, Detect, and Respond to		
Prison Rape Final Rule		
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I. PURPOSE:

The purpose of this policy and administrative procedure is to provide guidelines for the Department to meet the federal Prison Rape Elimination Act of 2003 (PREA) standards, and to address the appropriate programming, safety, security, and health needs of transgender and intersex youths.

II. <u>POLICY STATEMENT:</u>

The Department of Correction shall receive, evaluate, house, and provide secure and humane custody of all youths adjudicated to, or held by the Department. A youth's sex and gender identity are recognized as factors in determining whether the youth is likely to become a victim of abuse in a Department facility and shall be considered in applicable

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decision processes regarding the youth. The Department shall screen youths to help identify potential aggressors and victims in accordance with Policy and Administrative Procedure 02-01-115, "Sexual Abuse Prevention."

III. DEFINITIONS:

For the purpose of this policy and administrative procedure, the following definitions are presented:

- A. GENDER: The male or female division of a species, especially as differentiated by social and cultural roles and behavior.
- B. GENDER DYSPHORIA: A mental health diagnosis of a strong and persistent cross-gender identification. It is manifested by a stated desire to be the opposite sex and persistent discomfort with his/her own biologically assigned sex. Not all transgender youths will have a diagnosis of gender dysphoria.
- C. GENDER IDENTITY: A person's internal, deeply felt sense of being male or female, regardless of the person's sex at birth.
- D. GENDER NONCONFORMING: A person whose appearance or manner does not conform to traditional societal gender expectations.
- E. INTERSEX: A person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development. An intersex diagnosis does not necessarily mean the youth identifies as transgender.
- F. IRIS: Department Records Management System. The electronic storage system used by the Department for the storing and maintenance of youth records.
- G. LGBTI: Lesbian, Gay, Bisexual, Transgender, Intersex
- H. YOUTH: A juvenile adjudicated to a department of correction (federal, state, or local) and housed or supervised in a facility either operated by the department of correction or with which the department of correction has a contract, including a juvenile under parole supervision; under probation supervision following a commitment to a department of correction; in a minimum security assignment, including an assignment to a community transition program.

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- I. PRISON RAPE ELIMINATION ACT (PREA): The federal law addressing sexual violence in prison, jails, and other correctional facilities. Under PREA, the National Prison Rape Elimination Commission was created with the responsibility for establishing standards for the prevention, detection, response, and monitoring of sexual abuse and violence within correctional systems.
- J. TRANSGENDER: A person whose gender identity (i.e., internal sense of feeling male of female) is different from the person's assigned sex at birth.

IV. <u>INTAKE:</u>

This section is applicable to all incoming youths, adjudicated or otherwise, ordered to the Department. While it is intended primarily for use at the designated Intake facilities, this section shall be applied to youths who arrive from outside agencies at other Department facilities as Parole Violators or returnees from the community.

A. Reception Screening

In accordance with Health Care Services Directive 2.03Y, "Reception Screening," prior to the youth's intake nursing assessment, the youth shall be asked to complete State Form 45999, "Offender Health History."

If the youth self-identifies as transgender, the youth shall be referred to Health Services for further evaluation. When an youth self-identifies as a gender other than that assigned at birth and the youth's genital status is unknown, the status shall be determined during the medical intake reception screening process by reviewing available medical records or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner during the Intake Health Appraisal (IHA).

A youth who self-identifies as transgender or is diagnosed as intersex shall be evaluated in accordance with Health Care Services Directive 3.01Y, "Health Services for Transgender and Intersex Youths." The facility PREA Compliance Manager shall be notified of all youths identified as transgender or intersex.

B. PREA Compliance Manager

Upon receiving notification that a youth self-identifies as transgender or diagnosed as intersex, the PREA Compliance Manager shall place the youth on the facility's tracking mechanism for LGBTI youths.

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The PREA Compliance Manager shall review the youth's SVAT and ensure a new Sexual Violence Assessment Tool (SVAT) is completed upon any new placement on the tracking mechanism and/or any new identification of transgender/intersex youth.

The PREA Compliance Manager shall ensure an initial placement and programming assessment with subsequent reassessments are conducted every six (6) months in accordance with Section XI of Policy and Administrative Procedure 02-01-115, "Sexual Abuse Prevention."

V. <u>YOUTHS DIAGNOSED OR SELF-IDENTIFYING AFTER THE RECEPTION PROCESS:</u>

A youth who self-identifies as transgender or is diagnosed as intersex after completing the reception process shall be referred to Health Services and evaluated in accordance with Health Care Services Directive 3.01Y, "Health Services for Transgender and Intersex Youths." Medical and Mental Health staff shall complete State Form 56492, "Transgender Evaluation" and forward a copy to the facility PREA Compliance Manager.

The youth shall be placed on the facility PREA Compliance Manager's tracking mechanism for LGBTI youths and ensure an initial placement and programming assessment, with subsequent reassessments, are conducted every six (6) months in accordance with Policy and Administrative Procedure 02-01-115, "Sexual Abuse Prevention."

VI. FACILITY/HOUSING ASSESSMENTS:

After the facility PREA Compliance Manager receives the completed State Form 56492, "Transgender Evaluation," from the facility Health Services Administrator (HSA), the PREA Compliance Manager shall convene the facility PREA Committee to complete State Form 56615, "Transgender/Intersex Placement Review" The PREA Committee shall consider the following information to compete State Form 56615:

- 1. The youth's own views of where he/she feels safe;
- 2. Medical and Mental Health assessment;
- 3. Security Threat Group (STG) affiliation;
- 4. Criminal history sex or violent offense;
- 5. Conduct history sex or violent offense;
- 6. PREA flag status;
- 7. Gender expression gender non-conforming;

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- 8. Policy and Administrative Procedure 03-02-104, "Juvenile Classification and Comprehensive Case Management;"
- 9. Security level;
- 10. Input / thoughts and concerns of parent(s)/guardian(s); and,
- 11. Any other factors impacting safety and security.

The PREA Committee shall make a recommendation on State Form 56615 for the placement of the youth based on all information reviewed. The PREA Compliance Manager shall forward the completed State Form 56615, most current SVAT and State Form 56492, "Transgender Evaluation" to the Executive Director of PREA.

The Executive Director of PREA shall convene a committee of designated Executive Staff, including the Chief Medical Officer (CMO), to discuss and determine the youth's placement. Serious consideration shall be given to the facility's assessment recorded on State Form 56492. The findings of this committee shall be documented and a recommendation forwarded to the office of the the Executive Director of Youth Services or designee for review and decision.

VII. FACILITY/HOUSING ASSIGNMENT:

Following the Executive Director of Youth Services or designee's decision on the recommendation, it shall be forwarded to the facility's Warden and cause the Executive Director of Youth Service's decision to be effected. The completed State Form 56492 and State Form 56615 shall be filed in the youth's medical record, in the confidential section of the youth's packet, and scanned into IRIS.

Transgender and intersex youths may not be assigned to gender-specific facilities based solely on their external genital anatomy. While determining housing placement, the Department shall consider physical plant design and youth privacy issues when determining location. In deciding whether to assign a transgender or intersex youth to a facility for male or female youths, and in making other housing and programming assignments, the Department shall consider, on a case-by-case basis, whether a placement would ensure the youth's health, safety, and security; and whether the placement would present management or other safety or security concerns. Serious consideration shall be given to such a youth's own views, as well as that of his/her parent(s)/guardian(s), with respect to his or her own safety. Facilities shall not place transgender or intersex youths in dedicated buildings, units, or ranges solely on the basis of such identified status.

The Division of Youth Services, in consultation with the Department's Executive Staff, including the Chief Medical Officer, shall ensure transgender and intersex youths are

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housed in a manner consistent with their medical and mental health needs, sentencing level, and in accordance with Policy and Administrative Procedure 03-02-104.

VIII. <u>APPLICABILITY:</u>

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Robert E. Carter, Jr.	Date	
Commissioner		