

B. Statistical Methods

1. Respondent Universe and Sampling Methods

The feasibility study does not have a respondent universe because data will be collected using a convenience sample. Participation by the correctional facilities is voluntary. Correctional systems will be identified by the Bureau of Justice Statistics (BJS) based on 1) willingness to participate, 2) estimated prevalence of sexual violence as determined by the BJS administrative record review and inmate surveys, and 3) average daily inmate population as a measure of the size of the facility.

CDC/BJS will initially contact correctional systems in Illinois, Pennsylvania, Florida, Texas, Louisiana, Georgia, and California to determine willingness to participate. These states represent the largest correctional systems in the United States by inmate population. In addition, these states have expressed some initial interest through discussions with the Association of State Correctional Administrators. These seven states include hundreds of individual correctional facilities that may potentially participate. We will work with these seven state correctional systems to identify eligible facilities to participate in the prospective data collection as based on the procedures outlined in section 2 below.

If necessary, CDC/BJS will contact additional states and jail jurisdictions to participate, based on criteria outlined in section 2 below. The total number of facilities that will be contacted is unknown; it will depend on the level of support from prison and jail administrators (which is perceived to be high) and willingness of “high-rate” facility administrators to permit surveillance to better understand initial results from BJS PREA surveys.

The respondents providing information for the proposed project are health-care providers working in the selected correctional facility in which the surveillance is conducted. Providers will report cases of sexual violence as defined by the surveillance form for all male inmates 18 years of age or older.

Youth have been excluded from the feasibility study due to the additional time that would be involved in gaining approval from state institutional review boards as well as the additional challenges associated with mandatory reporting of abuse and neglect. In addition, youth facilities are typically very small in size, and surveillance programs in such facilities would likely yield few (if any) reports related to sexual violence.

Similarly, females comprise 7.2% of prison inmates (Sabol and Couture 2008) and 12.9% of jail inmates (Sabol and Minton 2008). While prior surveys have shown that female inmates are more likely to be victimized than male inmates (5.1% vs. 2.9% in jails), the nature of victimization among females has been shown to largely involve unwanted touching (without physical injury). As a result, the pretest in female facilities would likely yield few (if any) reports related to sexual violence.

The feasibility study has been designed to maximize the likelihood of detecting physical injury among inmates. As a consequence, it is focused on males in correctional facilities. Depending

on the outcome and experience within male facilities, BJS would anticipate conducting a feasibility study and/or pilot test in female and youth facilities before mounting a national surveillance program.

Feasibility Study Sample Size

The CISVC feasibility study will attempt to capture all cases of the conditions likely associated with sexual violence. No inmates will be interviewed directly but rather forms will be filled out by medical providers for those inmates who seek medical care and either make an allegation of sexual abuse or who exhibit one of five medical conditions. The estimated number of inmates meeting these criteria is based on the inmate population for larger prisons (4,000) and jails (10,000), the estimated prevalence of sexual violence in prisons (4.5%) and jails (3.2%), and the proportion of assaults in prisons (18%) and jails (19.5%) that result in an injury. Based on these parameters, we expect up to 810 surveillance forms to be filled out by medical providers across the 25 participating prisons (roughly 33 forms per prison) and up to 624 surveillance forms to be filled out by medical providers across the 10 participating jails (roughly 63 forms per jail) over the period of a year.

2. Procedures for the Collection of Information

Main steps in data collection

The recruitment of facilities is not based on statistical sampling procedures that are used to generalize to the correctional population. The facilities that will be recruited are a convenience sample of correctional facilities. However, an effort will be made to recruit facilities that have been identified with higher than expected rates of sexual violence allegations as determined by the BJS administrative record review (the 2007 Survey on Sexual Violence) or with higher than expected rates of inmate self-reported sexual violence victimization as determined by the BJS survey of inmates (the 2007 National Inmate Survey).

The feasibility study is designed to include 25 prisons and 10 jails. These facilities will be selected from each of the 4 Census regions. Large facilities and facilities identified by BJS as “high-rate” facilities will be targeted. This strategy is based on initial reports that suggest incidents of sexual violence involving physical injuries are relatively rare (0.8% among prisoners in 2007). Consequently, the feasibility study will target facilities most likely to generate data in the surveillance system; it is not intended to provide prevalence estimates for sexual violence in facilities nationwide, rather it is intended as a precursor to a national pilot.

The feasibility study will collect information using one of two methods. For correctional facilities with electronic medical records, the data elements from the electronic medical record will be used to capture the data elements for the pilot surveillance form for all inmates who meet the case definition. Data will be transmitted to CDC electronically via a secured data network and will be imported into a CDC-designed database for analysis. For facilities that do not have electronic medical records, a paper surveillance form will be completed for all inmates who meet the case definition. The paper records will be sent to CDC either via the U.S. Postal System or via a secure facsimile transmission which encrypts the data and creates an electronic record. For

paper records received by CDC, data will be entered into the CDC-designed database. Data will be requested quarterly over the period of a year.

Quality Control

Data quality is ensured by use of a standard form, standard operating procedure manual, medical provider training and monitoring, site visits, and data editing.

A half-day training of local health-care providers occurred on November 16, 2009. This training discussed the background of the project, reviewed of all data elements on the surveillance form to ensure that health-care providers understood the purpose of each, and how to complete the surveillance form (see Attachment 8 - *CISVC Implementer Training Agenda.doc* - for the final agenda). Based on the results of this meeting, the surveillance form was modified and materials related to training have been fine-tuned. A draft of the reporter instructions document is attached (Attachment 9 - *Reporter Instructions.doc*). In addition, drafts of the frequently asked questions (Attachment 10 - *Frequently Asked Questions.doc*), a self-learning training PowerPoint presentation (Attachment 11 - *Self-Learning Training PowerPoint.ppt*), and standard operating procedures (Attachment 12 - *Standard Operating Procedures.doc*) are included.

The November 2009 training included:

Denise Thomas
Corrections Health Care Administrator
SCI-Somerset
1590 Walters Mill Road
Somerset, PA 15510
(814) 443-8100

Jerilyn Wickersham
Director of Nursing
Tecumseh State Correctional Institution
2725 N Hwy. 50
Tecumseh, NE 68450
(402) 335-5998

Ted Williams
Corrections Health Care Administrator
SCI-Rockview
1 Rockview Place
Bellefonte, PA 16823
(814) 355-4874

Lisa Feeken
Acting Associate Director of Nursing
Nebraska State Penitentiary
4201 S. 14th St.
Lincoln, NE 68502
(402) 471-3161

Cynthia Kielen
Director of Nursing
Westville Correctional Facility
5501 South 1100 West
Westville, IN 46391
(219) 785-2511

April Meggs
Director of Nursing/Site Manager
South Mississippi Correctional Institution
P.O. Box 1419
Leakesville, MS 39451
(601) 394-5600

Jeff Renzi
Associate Director Planning and Research
Rhode Island Department of Corrections
40 Howard Avenue
Cranston, RI 02920
(401) 462-1000

Norma Evans
Director of Nursing/Site Manager
Mississippi State Penitentiary
P.O. Box 1057
Parchman, MS 38738
(662) 745-8912

David Karandy
Facility Director of Health Services
Great Meadow Correctional Facility
11739 State Route 22
P.O. Box 51
Comstock, NY 12821-0051
(518) 639-5516

Cathy Jo Shuman
Nurse 2
Ulster Correctional Facility
P.O. Box 800
750 Berne Road
Napanoch, NY 12458
(845) 647-1670

Leon Vickers
Health Services Administrator
Jefferson City Correctional Center
8200 No More Victims Road
Jefferson City, MO 65101
(573) 751-3224

Tammy Harr
Director of Nursing
Northeast Correctional Center
13698 Airport Rd
Bowling Green, MO 63334

Stephanie Kasting
Director of Nursing
Southeast Correctional Center
300 East Pedro Simmons Drive
Charleston, MO 63834
(573) 683-4409

Pamela Leite
Assistant Director of Patient Care Services
UMass Correctional Health Program
333 South St.
Shrewsbury, MA 01545
(508) 793-1221

Helene Murphy
Regional Director of Site Operations
UMass Correctional Health Program
333 South St.
Shrewsbury, MA 01545
(508) 793-1221

Glen Babich
Assistant Medical Director
CMS Arkansas
6814 Princeton Pike Road
Pine Bluff, AR 71603
(870) 247-4791

Brenda Bearden
ADC Assistant Medical Administrator
6814 Princeton Pike Road
Pine Bluff, AR 71603
(870) 247-4791

Laura Webster
Director of Nursing
Hutchinson Correctional Facility
P.O. Box 1568
Hutchinson, KS 67504
(620) 662-2321

Ellen Bartz
Health Services Administrator
Lansing Correctional Facility
301 East Kansas St.
Lansing, KS 66043
(913) 727-3235

Jessica Lee
Regional Health Educator
Prison Health Services, Inc.
MOD II
8001 State Road
Philadelphia, PA 19136
(215) 685-7888

Avery Hart
Chief Medical Officer
Cermak Health Services of Cook County
2800 S. California Avenue
Chicago, IL 60608
(773) 869-7000
Nelson Aguilar
Clinic Director
Jacksonville City Department of Corrections
300 East Bay Street
Jacksonville, FL 32202
(904) 630-0500

Brooks Plowden
Lead Correctional Health Nurse
Multnomah County Jail
11540 NE Inverness Dr
Portland, OR 97220
(503) 243-7600

Dana Rice
Health Promotion/Disease Prevention
Wayne County Jail
1231 St. Antoine
Detroit, MI 48226
(313) 224-2222

Zoran Vukcevic
Medical Director
Correctional Health Services
234 N. Central Ave., 5th Fl.
Phoenix, AZ 85303
(602) 506-2906

Landon Stephens
Health Services Administrator
Lubbock County Sheriff's Office
811 Main Street
Lubbock, TX 79401-3417
(806) 775-1493

Jamie Lynn Clayton
Administrative Lieutenant
San Joaquin Custody Division
7000 Michael Canlis Blvd
French Camp, CA 95231
(209) 468-4400

Karen Davies
Medical Unit
North Broward Jail
1550 Blount Road
Pompano Beach, FL 33069
(954) 831-5900

Cynthia Booker
Nurse Consultant
District of Columbia Department of Corrections
1923 Vermont Ave., NW
Washington, DC 20001
(202) 673-7316

Reena Chakraborty
Statistician, Forecasting
District of Columbia Department of Corrections
1923 Vermont Ave., NW
Washington, DC 20001
(202) 673-7316

Henry Lesansky
Health Services Administrator
District of Columbia Department of Corrections
1923 Vermont Ave., NW
Washington, DC 20001
(202) 673-7316

Nader Marzban
Medical Director
District of Columbia Department of Corrections
1923 Vermont Ave., NW
Washington, DC 20001
(202) 673-7316

Mark Pflaum
IT Specialist
District of Columbia Department of Corrections
1923 Vermont Ave., NW
Washington, DC 20001
(202) 673-7316

James Riddick
Director, Case Management
District of Columbia Department of Corrections
1923 Vermont Ave., NW
Washington, DC 20001
(202) 673-7316

Gloria Robertson
Program Specialist
District of Columbia Department of Corrections
1923 Vermont Ave., NW
Washington, DC 20001
(202) 673-7316

Doug Caulfield
Warden
Correctional Treatment Facility
1901 E Street, SE
Washington, DC 20003
(202) 698-3000

Dwyne Shoemaker
Investigator
Correctional Treatment Facility
1901 E Street, SE
Washington, DC 20003
(202) 698-3000

Brenda Hatcher
Sexual Misconduct Coordinator
Correctional Treatment Facility
1901 E Street, SE
Washington, DC 20003
(202) 698-3000

Diana Lapp
Medical Director
Unity Health Care
1901 D Street, SE
Washington, DC 20003
(202) 673-8136

Nilesh Kalyanaraman
Assistant Medical Director
Unity Health Care
1901 D Street, SE
Washington, DC 20003
(202) 673-8136

Bianca Thompson
Director of Nursing
Unity Health Care
1901 D Street, SE
Washington, DC 20003
(202) 673-8136

Bruce Reid
Director, Mental Health
Unity Health Care
1901 D Street, SE
Washington, DC 20003
(202) 673-8136

Allen Beck
Senior Statistical Advisor
810 Seventh Street, NW
Washington, DC 20531
(202) 307-0765

Paul Guerino
Statistician
810 Seventh Street, NW
Washington, DC 20531
(202) 307-0765

Paige Harrison
Statistician
810 Seventh Street, NW
Washington, DC 20531
(202) 307-0765

Marie Garcia
Social Science Analyst
National Institute of Justice
810 Seventh St. NW
Washington, DC 20531
(202) 514-7128

Laurie Reid
Co-Chair, Corrections Workgroup
Centers for Disease Control and Prevention
1600 Clifton Rd, NE
Atlanta, GA 30333
(404) 639-8461

Andra Teten
Behavioral Scientist
Centers for Disease Control and Prevention
1600 Clifton Rd, NE
Atlanta, GA 30333
(770) 488-3936

Matt Breiding
Behavioral Scientist
Centers for Disease Control and Prevention
1600 Clifton Rd, NE
Atlanta, GA 30333
(770) 488-1396

Kristin Holland
Project Coordinator
Centers for Disease Control and Prevention
1600 Clifton Rd, NE
Atlanta, GA 30333
(770) 488-3954

Audrey Aaron-Moffitt
Public Health Advisor
Centers for Disease Control and Prevention
1600 Clifton Rd, NE
Atlanta, GA 30333
(404) 639-6105

Katie Salo
Project Coordinator
Centers for Disease Control and Prevention
1600 Clifton Rd, NE
Atlanta, GA 30333
(404) 639-6110

Drew Voetsch
Project Officer
Centers for Disease Control and Prevention
1600 Clifton Rd, NE
Atlanta, GA 30333
(404) 639-8088

During the data collection period, CDC staff will periodically monitor progress of the data collection via telephone. CDC will contact each facility on a regular basis (at least monthly) to ensure data are being collected according to protocol and to resolve problems that occur with the data collection procedures. CDC will also conduct one site visit to each correctional system during data collection. The purpose of the site visit will be to monitor adherence to the protocol, review completed surveillance forms, and obtain feedback on surveillance procedures.

Generalizability

Because a convenience sample of correctional facilities will be chosen for the feasibility study, the results will not be generalizable to the inmate population of the United States.

Evaluation

CDC and BJS will conduct an evaluation of the surveillance form and data collection methods during implementation and at the conclusion of data collection. This evaluation will encompass survey procedures and results. Relevant findings from these evaluations will be incorporated into the design of possible future data collection, and BJS will release these findings in a project report. Specific findings related to analysis of the data collected will be made available to users of the data.

BJS Project Staff

All BJS project staff can be reached at the following address and phone number:

Bureau of Justice Statistics
810 Seventh Street, NW
Washington, DC 20531
Phone: (202) 307-0765

Allen Beck, PhD
Chief of the Corrections Statistics Program
Email: Allen.Beck@usdoj.gov

Paul Guerino
Project Officer
Email: Paul.Guerino@usdoj.gov

NIJ Project Staff
Marilyn Moses
Social Science Analyst
Email: Marilyn.Moses@usdoj.gov

CDC Project Staff
All CDC project staff can be reached at the following address and phone number:

Behavioral and Clinical Surveillance Branch
Division of HIV/AIDS Prevention
Centers for Disease Control and Prevention
1600 Clifton Rd, NE
MS E-46
Atlanta, GA 30333
Phone: (404) 639-2090

Drew Voetsch, PhD
Project Officer
Email: aav6@cdc.gov

Alexandra Balaji, PhD
Project Officer
Email: dvi7@cdc.gov

James Heffelfinger, MD, MPH
Team Leader, Specials Studies and Diagnostic Team
Email: izh7@cdc.gov