

PREA INFORMATION FOR FACILITY RESIDENTS

Zero-Tolerance Policy for Sexual Abuse and Sexual Harassment Resident's Right to Report Abuse, Neglect, Exploitation, and Death

The Prison Rape Elimination Act (PREA) is a federal law that supports the elimination, reduction, and prevention of sexual abuse in adult and juvenile facilities as well as community corrections programs.

Pursuant to PREA, the National Standards to Prevent, Detect and Respond to Prison Rape became law on August 20, 2012. The standards apply to the facilities operated by the Denton County Juvenile Probation Department.

As a resident of this facility, you have the right to be free from abuse, neglect, and exploitation. This includes not being subjected to sexually assaultive, abusive, and/or harassing behavior from staff, contractors, volunteers, interns and other residents.

The following definitions of abuse, neglect, and exploitation are taken from a brochure entitled "If Abuse Happens to You...End the Silence: A Teen's Guide to Reporting Abuse, Neglect, and Exploitation in Juvenile Justice Facilities."

- **Physical Abuse:** something done to you that causes physical pain or injury to your body, often considered an assault. It may involve hitting, kicking, punching, choking, shoving or other act done by an adult or another resident against you.
- **Sexual Abuse:** a sexual act committed against you or intentional touching in a sexual manner by another person, or another person asks you to engage in any sexual behavior.
- **Neglect:** when a person responsible for your care fails to do so, and may involve unreasonable delay or refusal to provide medical care or failure to provide proper supervision which results in you or another resident being assaulted, hurt, or abused.
- **Emotional Abuse:** an action by another person that may cause you extreme embarrassment, mental, or emotional harm. It may involve a person cursing at you, making crude sexual remarks or comments, or comments about your race, gender, family, or the way you look.
- **Exploitation:** when someone in authority takes advantage of you by asking or requiring personal favors for them or someone else.

- **Sexual Harassment:** is defined by PREA as repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one resident directed toward another; and repeated verbal comments or gestures of a sexual nature to a resident by a staff member, contractor or volunteer including demeaning references to gender, sexually-suggestive language or derogatory comments about body or clothing, or obscene language or gestures.

As a resident of the facility, there are some things you can do to minimize your risk of becoming a victim of sexual assault, abuse, or harassment:

- Avoid isolated or secluded areas of the facility
- Be aware of your own body language and behavior
- Never share your personal information with another resident
- Never accept gifts or favors from another resident
- Never give gifts to or do favors for another resident
- Be cautious of residents who attempt to be overly friendly with you, try to prevent you from interacting with other residents or staff, or repeatedly show interest in your personal matters
- Report all incidents of actual or attempted sexual contact, threats against you or your family, intimidation, or sexual conversations

If you or another resident are sexually assaulted, sexually abused, sexually harassed, physically or emotionally abused, neglected or exploited by any staff or resident(s) you are encouraged to immediately report the incident so the facility can ensure your safety and the safety of other residents. You will be provided any emergency or on-going medical treatment needed as result of being the victim of sexual assault or abuse that occurs in the facility. You will also be provided an assessment by one of the Department's mental health providers and provided any needed mental health services as a result of being the victim of sexual assault or abuse that occurs in the facility. These medical and mental health services will be provided at no cost to you or your family.

You have the right to confidentially report, whether for yourself or for another resident, sexual assault, sexual abuse, sexual harassment, physical or emotional abuse, neglect or exploitation to a Juvenile Supervision Officer, a Counselor, a volunteer, an intern, Shift Supervisor or Shift Leader, the Therapeutic Program Coordinator, the Facility Administrator, or you may use the facility's grievance process.

You may also confidentially report, whether for yourself or for another resident, sexual assault, sexual abuse, sexual harassment, physical or emotional abuse, neglect or exploitation directly to either or both of the following outside agencies:

- Texas Juvenile Justice Department at **1-877-STOP ANE (1-877-786-7263)**; or
- Denton County Child Advocacy Center at **972-317-2818**.

Texas law requires that any report of sexual assault, sexual abuse, sexual harassment, physical or emotional abuse, neglect or exploitation made to any facility staff, volunteer, intern, or counselor will be reported to the Texas Juvenile Justice Department and law enforcement or to the appropriate government agency.

The Denton County Juvenile Probation Department strictly prohibits any form of retaliation against you, other residents, staff members or any other person that reported or cooperated with an investigation of abuse, to include sexual abuse and sexual harassment, neglect or exploitation.

or cooperate with an investigation, Residents and other persons who report or cooperate with an investigation will be protected from and their well-being monitored for possible signs of retaliation.

If you feel you have been subjected to retaliation from staff or other residents you are encouraged to report it to another staff member or submit a grievance. All allegations of retaliation will be investigated to the fullest extent by the Facility Administrator or designee.

I have received a copy of this notice.

Signature of Child

Date

I certify that provided a copy of this notice to the resident identified above during the facility orientation.

Signature of Staff Member

Date