TEACHER’S GUIDE FOR

INCARCERATION LAW AND POLICY SEMINAR:
DEATHS BEHIND BARS

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Loyola University New Orleans,
College of Law
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INTRODUCTION

Welcome to the Teacher’s Guide for our Incarceration Law and Policy course, which collects records of deaths behind bars, memorializes lives lost, and publishes facility-specific memoranda that provide an overview of a local jail or prison!

Check out our Incarceration Transparency project website at www.incarcerationtransparency.org

- Statewide Death Database
  https://bit.ly/3A0sbao

- Deaths Behind Bars: 2015-2019 report and dataset
  https://bit.ly/3SwMmUv

- In Memoriam

- Project Contributors
  https://bit.ly/3JyLRp1

This guide contains all the instructions and project materials needed to start teaching this course! Materials include assignments with grading rubrics, reading assignments, instructional memos for teachers and students, and slides/materials for units on trauma and interviews. In addition, this entire guide and all of the individual documents are available here: https://bit.ly/3OBEnSN.

If you are interested in additional support for teaching this course, or for assistance in building a database/website to publish your course results, please reach out to Prof. Andrea Armstrong at incarcerationtransparency@gmail.com.
Why we created this course...

Working with family members of decedents, people formerly incarcerated, and local leaders, we developed this course for law students. In Louisiana, we did not have a comprehensive list of people who had died behind bars. The only data available was usually outdated and aggregated, such that we couldn’t tell which facilities in Louisiana had higher rates of deaths than others. We also couldn’t analyze this information to determine whether there were disparities by certain demographics. At the individual level, some families had never received official information about the cause (or circumstances) of death for their loved one.

Based on these conversations, we created a class that both teaches students important legal skills, while also producing information that is missing from criminal justice reform efforts. This class produces annual data and analysis on deaths behind bars, memorials for people who died behind bars, and informational overviews of specific facilities in Louisiana.

Acknowledgements...

Special thanks to the people who taught this course with me over the years: Erica Navalance, Shanita Farris, Nishi Kumar, Rob Harrison, & Meredith Booker. We are grateful for the ongoing guidance of members of the East Baton Rouge Parish Prison Reform Coalition, Voice of the Experienced, and the Promise of Justice Initiative, who have helped us navigate difficult questions and inspired us to continue. This project would also not have been possible without the efforts of over 60 law students (to date) since Fall 2019. This project is also grateful for financial support from the Law Visiting Committee Professorship at Loyola University and from Arnold Ventures.
SEMINAR OVERVIEW

This class combines doctrinal learning with development of experiential skills in public records requests, interview skills, and trauma-informed communication. It is designed as a 2 credit seminar, with classes once a week for an hour and fifty minutes over a 14 week semester. The classes are designated either as doctrinal (i.e. case law and incarceration policy) or workshop (skills development). Class size averages 20 students.
Materials:
This class uses a combination of readings from a traditional law school casebook, *Incarceration and the Law: Cases and Materials,* with a few supplementary readings, and materials developed by Prof. Rob Harrison, a licensed clinical social worker who has co-taught this course for three years.

The casebook has a teacher’s manual that details the cases and materials and is available for download via Westlaw. All other teaching materials, including the mental health materials, assignments and grading rubrics, etc are included in this guide.

Personnel:
This class is designed to be taught as a team including a lead professor, a staff attorney with a civil rights organization, and a mental health professional.

The lead professor is the pedagogical lead, ensuring that materials and classes are consistent with law school pedagogy. The staff attorney and the lead professor will usually divvy up the doctrinal classes, with each taking the lead on specific classes, as well as grading. The lead professor is responsible for reviewing all grades recommended by the staff attorney and assigning final grades in the course.

The staff attorney, in addition to taking lead in teaching designated classes, ensures that both the doctrinal and workshop classes are practically useful and helps students understand how these topics and skills can be used later in their careers.

A mental health professional (MHP) is an individual with a background in social work, counseling, or psychology. The individual should have a higher level of licensure, e.g. Licensed Clinical Social Worker (L.C.S.W.). A background in trauma training is preferred. The MHP will provide two lectures over the course of the semester. The first lecture is on trauma, and the potential impact on an individual that has experienced a traumatic event. The lecture also explores secondary trauma and the importance of self-care for professionals working with populations in difficult settings. The second lecture provides tools for the students to better interview individuals experiencing grief and/or trauma.

The MHP will also provide up to 5 group sessions, which we have dubbed “Coffee Talk Sessions.” These are debriefing sessions for the students to discuss frustrations, share positive coping strategies, and allow for free range of discussion with their cohorts.

The MHP can also be a ready resource for students to access help with role-playing interviewing techniques, debriefing after difficult interviews/sessions, and connecting

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them to resources. The MHP is not to act as a clinical therapist to the students. The MHP is in an advisory/professor role. The MHP, in an indirect manner, is teaching students how to interact and utilize professionals in other disciplines to help further the current work they are engaged in.

**Database:**
The materials and documents generated from this class are intended to be publicly available via an electronic database. The Incarceration Transparency project can help you build a database (to enter and organize data received) and a public facing website that allows the general public access and search for records in the database. The database and website were all developed using open-source technology. You can view an example on the Incarceration Transparency [Statewide Database] page.

**Assignments:**
All students must complete four assignments total during the semester. There is no final exam.

1. File and follow up on public records requests for information on deaths behind bars for 7-10 facilities
2. Investigate and profile the life of a person who died behind bars
3. Research and write an overview of one facility in Louisiana and produce a single summary slide
4. Participate in one group “coffee talk” session with Prof. Rob Harrison, LCSW. (This assignment is not graded, but is mandatory to receive a final grade in the class.)
### Class Description

This class provides an overview of incarceration in the U.S., with a focus on the operation of the U.S. constitution within prisons and jails. Specific topics include prison health care, involuntary labor, freedom of speech and religion. This is a practical class that involves student filing of public records requests, investigation of deaths in the New Orleans jail, and assessing the transparency of an assigned facility in Louisiana. 2 credits.

### Required Casebook


ISBN: 9781683287964


### Course Objectives

The objectives of the course are to master these particular areas of constitutional doctrine, to situate the doctrine within a particular historical context, and to further refine each student’s legal reasoning, investigative and critical thinking skills.
Your grade in this class is based on the following four components:

1. Public Records Requests: 25%

Each student will submit 7-10 public record requests from a list of facilities provided by the instructor.

2. Memorial Narrative: 25%

Each student will compile a narrative dossier, with photos if available, about a person who died in the New Orleans jail, based on a list and criteria to be provided by the instructor.

3. Pre-Litigation Memo: 40%

Each student will produce a “Better Know a Louisiana Jail/Prison” project, which will include at a minimum: demographics, current and historical population, budget, programming, litigation, leadership, and policies, with a particular focus on the experiences of people detained in the selected facility.¹ Students will use legal and news databases, online resources, and public record requests to provide a written overview of the facility, including any deaths in custody. Students will also be graded on their presentation to the class.

4. Class participation 10%

Class participation is essential for an informed and thoughtful discussion. Class observations should be grounded in the assigned reading and related class work.

MANDATORY: Must attend one small group coffee session with [NAME] LCSW to be held during the semester

Assignment details, examples, and grading rubrics will be posted on Canvas class website!

¹ This list is illustrative of the general categories to be discussed. Additional categories, to the extent they are available, would include costs for people detained (phone, email, canteen, medical, etc), visitation and disciplinary policies, etc.
<table>
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<tr>
<th>Attendance</th>
<th>Students must adhere to the University’s 80% Attendance Policy and a student roll will be distributed each day of class. You are responsible for signing the roll during class. After class sign-ins will not be permitted.</th>
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| What to Expect in Class             | • Classes are designated as doctrinal or workshop. For doctrinal classes, you should read and brief the materials as usual. For workshop classes, you should have your project materials and PRA log up to date, come prepared to report on your progress as well as any questions/concerns, and be willing to offer suggestions or tips to your classmates.  
  • Active, thoughtful, and constructive participation is essential. I strongly encourage volunteers, but will also moderate discussion, including cold-calling if necessary, such that discussion is shared by all and not dominated by a few voices.  
  • Be prepared for in class discussions.  
  • Stay informed and up to date via Canvas! |
| Class Preparation Tips              | • This class is different than your standard doctrinal class. In this class, we are developing your capacity as a future leader.  
  • For assigned cases, brief each case with particular attention on the incarcerated person’s rights/outcome.  
  • For assigned articles/pleadings/policy pieces take notes on central arguments and rationale, as well as key facts presented.  
  • For all readings, think about how you would have decided or argued differently, if at all. What is missing? What could have been said, but wasn’t?  
  • After you have completed the readings, step back and look at the readings as a whole - - What is the theme across all of the cases? what does this mean for the treatment of people incarcerated? |
| **Support** | Law school presents unique challenges sometimes requiring special assistance.

For academic support: contact [NAME Academic Success], for further information at [Email] or [Telephone].

For mental health support: contact University Counseling services @ [Telephone] to schedule a remote consult or speak to a counselor over the phone. The counselor on-call is available 24/7, 365 by calling [Telephone]. |

https://bit.ly/3odsRm1
# SEMINAR READING/WORK ASSIGNMENTS

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<th>Class</th>
<th>Topic</th>
<th>Reading/Learning Objectives</th>
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| 1     | Prison Deaths; Public Records Requests | **Read:**
1) Review the three reports below and skim the tables.
   A. [BJS Mortality in Jails 2001-2018 (April 2021)](#)
   B. [BJS Mortality in Prisons 2001-2018 (April 2021)](#)
   C. [Louisiana Death Behind Bars 2015-2019 (June 2021)](#)

   How do Louisiana prisons compare to other states for mortality rates? What are the leading causes of deaths in prison? Are any demographic groups more likely to die in prison than others (race, age, gender)?

2) Read the sample public records request
3) Complete Public Records Quiz

**Learning Objectives:**
- Know the leading causes of death in custody nationwide in prisons and jails
- Know the leading causes of death in custody in prisons and jails in Louisiana (and differences between nationwide and Louisiana)
- Understand the key elements of Louisiana public records law sufficient to draft a sample request

| 2     | Workshop: Primary and Secondary Trauma | **Due:** ASSIGNMENT #1: proof of sending PRA’s uploaded to Canvas

**Read:**
No assigned reading

**Learning Objectives:**
- To understand the role that trauma plays in incarceration - including for people incarcerated, their friends and families, communities, and the people who serve and advocate
- To gain a deeper understanding of traumatized clients and how to approach difficult interviews
- To begin developing ways to identify and process trauma, including what “secondary trauma” might look like and how to address it
- To develop empathy skills, for yourself and others

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| 3 | Eighth Amendment: Use of Force; Overcrowding | Read:  
1) Use of force: CB p.101-109 (Hudson v. McMillian)  
2) Overcrowding: CB p.771-811 (Brown v. Plata)  

Think About:  
• What are conditions like in these cases?  
• What constitutional rights do incarcerated people retain in these cases?  
• What is the PLRA process in Brown v. Plata?  
• What standard do courts apply in use of force cases?  

Learning Objectives:  
• To understand how overcrowding can impact conditions of incarceration  
• To learn the legal doctrines governing use of force and overcrowding complaints under the 8th amendment  
• To understand the impact of the Prison Litigation Reform Act and the process for judicial orders for population reduction |
| 4 | Eighth Amendment: Medical and Mental Health Care | Due: select and submit name of person to be memorialized on OPP Dossier in Assignment #2 Module  

Read:  

Optional: CB p.658-667 (gender confirmation surgery)  

Learning Objectives:  
• To learn the legal doctrine governing 8th Am. claims of failure to provide constitutionally adequate medical and mental health care  
• To better understand the challenges of receiving health care while incarcerated, including treatment of chronic conditions  
• To develop an appreciation for the healthcare failures in Angola (Louisiana’s max security prison) |
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<th>Workshop: Interviewing/ Research + PRA check-in</th>
<th>Read:</th>
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<td>No assigned reading</td>
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<td>For this workshop class, you should have:</td>
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<td>1) Begun initial database and electronic research about the person you are researching and potential people to interview.</td>
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<td>2) An up-to-date PRA log and be able to report on the status of each of your assigned facilities.</td>
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<td>3) Identified if you have any non-responsive jurisdictions and attempted alternative methods of contact.</td>
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<td><strong>Learning Objectives:</strong></td>
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<td>• Understand expectations for Assignment #2</td>
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<td>• Be able to use trauma-informed, open-ended interview questions and develop your interview “style”</td>
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<td>• Develop a plan for self-care while completing Assignment #2</td>
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<td>• To encourage collaborative learning and team work through sharing lessons and tools developed during the PRA project with other students</td>
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<td>Vulnerable Populations</td>
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<td>1) Race in Prison: CB p.541-549</td>
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<td>2) Women in Prison: CB p.575-599</td>
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<td>3) LGBTQ rights in Prison: CB p.629-635</td>
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<td>4) Transgender rights in Prison: CB p.647-657</td>
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<td>Optional: Reimagining prison for women, CB p.616-621; OPP Access to Language case study, CB p.569-574</td>
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<td><strong>Learning Objectives:</strong></td>
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<td>• Understand the racial and gender make up of prison populations</td>
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<td>• Identify how certain prison populations are harmed or discriminated against, and any legal claims they can raise</td>
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| 7    | First Amendment| 1) Prisoner Voices, CB p.335-338; Observations on a Prison Visit, CB p.413-414  
2) Turner v. Safley, CB p.355-366  
3) O’Lone v. Estate of Shabazz, CB p.366-377  
4) Thornburgh v. Abbott, CB p.377-386  
Optional: Critiques of the Legitimate Penological Interest Test, CB p.416-420; Andrea C. Armstrong, Racial Origins of Doctrines Limiting Prisoner Protest Speech (Links to an external site), 60 Howard L.J. 221 (2016) | • What is the general test/legal standard for evaluating the right to free speech inside of prison? What are the factors that courts consider? Do these factors really balance or adequately weigh the different interests at stake or are there other factors that should be considered?  
• Why do you think the exercise of religion and other rights protected under the First Amendment is particularly important for people in jails and prisons? What reasons does Justice Brennan point out in his dissent in O’Lone v. Estate of Shabazz?  
• What is the substantive legal standard that applies to prison regulations that burden religious exercise? How do the majority and concurrence in Holt v. Hobbs apply this standard differently? | • To understand the interplay of the different statutory and constitutional protections for freedom of expression and religious practice in incarceration settings  
• To develop appreciation for the challenges of incarcerated people in exercising their freedom of expression and religious faith  
• To be able to summarize and apply the constitutional tests for freedom of expression and religious freedom in prisons |
| 8    | Workshop: Trauma/PRAs/Research (potential inspiring guest speaker) | Due: Assignment #2  
Read:  
No assigned reading  
Review Assignment #3 Instructions | Learning Objectives:  
• To assess progress on PRAs  
• To collectively problem-solve PRA issues  
• To share insights from dossiers |
| 9   | Thirteenth Amendment | **Due:** Select and submit name of facility for your Assignment #3 memo  
**Read:**  
1) CB p.261-276  
2) Andrea C. Armstrong, (82 Ohio St. L.J. 1039 (2021)) - Beyond the 13th-Captive Labor  
3) Wendy Sawyer, How much do incarcerated people earn in each state? Prison Policy Initiative (04/10/2017)  
**Learning Objectives:**  
• To better understand the constitutional and statutory law governing use of incarcerated labor  
• To analyze the role of incarcerated labor within the larger carceral system  
• To develop a historical understanding of incarcerated labor |
| 10  | Discipline           | **Read:**  
1) Procedural due process in prison, CB p.461-2, 470-484  
2) Sandin v. Connor, CB p.502-509  
3) Andrea Armstrong, Race, Prison Discipline, and the Law (skim p. 759-773, 782)  
Optional: Pre-Sandin doctrine, CB p. 488-502  
**Learning Objectives:**  
• To better understand how carceral disciplinary systems work  
• To analyze how race (or other identity characteristics) may play a role in carceral discipline  
• To apply due process analysis to disciplinary and improper transfer claims |
| 11  | Workshop: PRAs & Initial Trends | **Read:** No Assigned Reading  
**Learning Objectives**  
• To assess progress on PRAs  
• To collectively problem-solve PRA issues  
• To identify and discuss trends in the death records collected so far |
| 12 | **Solitary Confinement** | **Read:**  
1) CB p.509-516 (Austin), 211-220, 228-240 (Ashker case study), 240-243 (Ayala).  
We will also have Kiana Calloway as a guest speaker. He is a survivor of solitary, currently works with Roots of Renewal and is a member of the [LA Stop Solitary Coalition](https://lasstopsolitarycoalition.org).  
**Learning Objectives:**  
• To better understand the harms and impact of solitary confinement  
• To understand how the U.S. Constitution regulates solitary confinement as punishment  
• To develop awareness of possible reforms to mitigate solitary confinement harms |
|---|---|---|
| 13 | **Workshop: PRAs/Guest Speaker** | **Read:**  
[Background on guest speaker]  
Be prepared to discuss the status of your public records requests.  
**Learning Objectives:**  
• To assess progress on PRAs  
• To collectively problem-solve PRA issues  
• To learn from the direct experience of a formerly incarcerated person |
| 14 | **Final Presentations** | **Due:** Assignment #3  
**Class Presentations**  
All students will present a three minute overview of their facility in class. |

ASSIGNMENT # 1
ASSIGNMENT #1 PREPARATION

As the teacher, you will have to make a series of decisions and prepare a few basic reference tools to structure this assignment, which collects records of deaths behind bars within your state via the state public records law.

1) WHO?

Who (or which entity) will receive the public records request?
Our class files the requests directly with every known prison, jail, or detention center in Louisiana, including federal, private, youth, local or state facilities. We have found an average two-year delay for filings with federal entities, but we can usually secure records from the majority of other facilities within the semester. (This is why this is the first assignment and requests go out before the second class of the semester.)

Depending on your state public record laws, you might also consider filing public records requests with local coroners for coroner reports and/or investigations of deaths that occurred in correctional facilities.

2) WHAT?

Which records should you request?
Our class files public record requests for deaths behind bars that are reported to the U.S. Department of Justice, however you can make the requests broader. The reason we file for the federally reported data is that the federal reporting is a uniform survey instrument across all facilities. Occasionally we will get a response that no deaths were reported to DOJ, in which case we follow up with a broader request for records of all deaths in that facility. Students will then usually receive larger files from which they need to find and extract the relevant data points to enter into the database.

If you have chosen to file requests with local coroners, your state public records laws will structure the type of information available.

With coroner requests or broader requests for all records, students should be warned that they may receive pictures and videos. These files should be saved in the online folder, but should not be uploaded for public view.
3) WHEN?

Which time period should you request?
If this is your first time collecting the information, you should request the entire time period available under your state public records laws. For subsequent collections, students must identify the relevant time period needed based on prior data collection efforts, which are tracked on online spreadsheets.

4) PREPARATION

What do I need to prepare for students to complete this assignment?

A. Facility List

You will need a comprehensive list of each facility within your state, including physical/mail address and telephone information. I assign students alphabetically to facilities, usually organized by county/parish. Students then will have several facilities within the same geographic area/region.

Sample Carceral Facility Assignment List

https://bit.ly/3Pmm9WE
B. Document Index

This is a listing of each facility name and students then enter the type of information received for a given year. This index helps future students quickly identify what years they need to request. It is also helpful for identifying facilities that respond but have zero deaths behind bars for a given year.

Sample Document Index

C. Request Log

Students must track their requests via a log that is maintained throughout the semester. These logs are saved in the county/parish folder and are helpful for students the following year to identify particular people who have been helpful at the facilities in the past. As our class is only a semester long, we do not litigate failure to provide records, but we do publicize the failure to comply. Maintaining these records is helpful for both.

Sample Public Records Request Log

ASSIGNMENT #1 STUDENT INSTRUCTIONS

Each student must file electronic or paper public records requests to determine if any person in custody died in the last five years in the specified facility.

Your letter must specify:

- The types of records being sought
- Any and all copies of records submitted or uploaded to the U.S. Department of Justice (Bureau of Justice Statistics or Bureau of Justice Assistance) concerning or detailing deaths of people while in custody.
- Definition of a “record”
  - For the purposes of this request, the terms “records” and “documents” are intended to include, without limitation, any and all written, typed, printed, recorded, graphic computer-generated, or other matter of any kind from which information can be derived, whether produced, reproduced, or stored on paper, cards, tapes, films, electronic facsimiles, computer storage devices, or any other medium. They include, without limitation, letters, memoranda (including internal memoranda), calendars, schedules, books, indices, notes, printed forms, publications, press releases, notices, minutes, summaries or abstracts; reports, files, transcripts, computer tapes, printouts, drawings, photographs, recordings (including both videotapes and audiotapes), telegrams, and telex messages, as well as any reproductions thereof that differ in any way from any other reproduction, such as copies containing marginal notations.
- Definition of “custody”
  - The term “deaths in custody” is intended to include any deaths that occurred while the person was under the legal authority of your office, whether that death occurred in your facility or elsewhere, including but not limited to deaths during transport, in a hospital/ambulance, etc.
- Citation to the Louisiana Public Records Act as needed
- The relevant time period for the requested records (example: 2014-2019)
- Your contact information (phone, mail, and email)
- Deadline for an answer to your request
You may “borrow” the relevant language from the two example letters posted on Canvas as needed.

**Proof requirements:**

- You should maintain a log of contacts for all of your public record requests, including initial contact. This log will be reviewed with you during our workshop classes.

- Students will submit a single combined PDF that includes all of the assigned facilities on Canvas to complete the assignment.
  - If you file electronically, you must save a PDF of each sent email (including the time/date/address sent), then combine into a single PDF.
  - If you file a paper request, you must submit your sealed and addressed envelopes to Prof. Armstrong for postage/mailing. You must also retain a PDF of each letter sent, then combine into a single PDF and upload to Canvas.
  - If you need Adobe Acrobat to combine PDFs, please let Prof. Armstrong know so we can make arrangements.

ASSIGNMENT #1 STEP BY STEP GUIDE

1. **Learn** about Louisiana’s Public Records Act (PRA) by completing your first assignment on Canvas (Public Records Quiz).

2. **Identify** which parishes and/or facilities you are responsible for. Professor Armstrong has assigned these on the 2021 Student Carceral Facility List Sheet.

3. **Identify** for each facility:
   a. The **time period** to be requested
   b. The **type of form** to be requested
   c. Confirm the **contact information** for the request

4. **Identify time period:** Identify which years Professor Armstrong already has data for and which years you will need to request when filing your Public Records Requests (PRRs).
   a. Review and confirm information entered in the Death In Custody Document Index Sheet is correct for your facility.
   b. Verify correct information by reviewing prior correspondence in your parish folder
   c. Enter the time period you are submitting your PRR for in the 2021 Student Carceral Facility List Sheet.
   d. Currently data is most robust 2015-2019. If you have never gotten a response from your facility, please start with 2014– but remember, they are only obligated to retain records for the three prior years.

5. **Identify types of Forms**
   a. BJS (Bureau of Justice Statistics for data 2014-2020)
      i. **CJ-9, CJ-9A** (jails)
         1. CJ-9A -Summary form for Deaths in Custody information. This will have the total number of deaths for a calendar year
         2. CJ-9 -If there are deaths at a facility they will submit this form for each individual who died and provide information about that individual’s death and circumstances surrounding their incarceration.

      ii. **CJ-10, CJ-10A** (private or multi-jurisdictional)
         1. CJ-10A -Summary form for Deaths in Custody information. This will have the total number of deaths for a calendar year
         2. CJ-9 -If there are deaths at a facility they will submit this form
for each individual who died and provide information about that individual’s death and circumstances surrounding their incarceration.

iii. **NPS-4, NPS-4A** (state operated prisons)
   1. **NPS-4A – Summary form for Deaths in Custody information.**
      This will have the total number of deaths for a calendar year
   2. **NPS-4** - If there are deaths at a facility they will submit this form for each individual who died and provide information about that individual’s death and circumstances surrounding their incarceration.

b. BJA (Bureau of Justice Assistance for data 2020-2021 EXCEPT JUVENILES)
   i. “DCRA Performance Measure Questionnaire” form
   ii. Any Data entered in the PMT at [https://bjapmt.ojp.gov](https://bjapmt.ojp.gov)

c. Census Bureau (for juveniles for all years)
   i. **CJ-14/15** = Juvenile census form, which includes question on deaths in facilities.
      1. They fill out form CJ-15 for even years and form CJ-14 for odd years.

d. **ZDL = Zero Deaths Letter**
   i. Correspondence on letterhead from the facility that confirms ZERO deaths for the requested time period

6. **Confirm contact information**
   a. **Quick Tip:** Before sending out your letters, you may want to call each facility or do some googling to confirm who the contact person/custodian of records is for each facility. This information may have changed from the last time someone reached out to them and may need updating prior to sending out your letters.

7. **Draft PRR Letters:** You can use the example letters on Canvas to help you.
   a. **HINT:** Prof. Armstrong's 2020 PRA provides an example to request data submitted to both BJS and BJA, BUT note that the type of form may be different for your facilities.

8. **Send your PRRs**
a. Postal Mail: Get stamps from Professor Armstrong and drop your letters in the mail. If you pay for your own stamps, you can receive a reimbursement from Professor Armstrong by contacting her with a receipt.
b. Email: Draft a brief email to each custodian and attach your PRR to the email.

9. Submit proof via the Canvas Assignment Page
   a. Combine all correspondence in a single PDF and upload.

10. Log responses:
    a. Enter information into your own PRA log (downloaded from Canvas) once you send out your PRRs and update it as you follow-up and receive responses.
    b. Log each interaction with the facility—every call, every voicemail, every email—even if you don’t speak to anyone.
    c. Logs will be reviewed in class approximately every two weeks

11. Follow-up on each request via phone call or email, at your discretion. (A good rule of thumb is to follow-up on a weekly basis.)

12. Upload correspondence and documents: Make a new folder titled “2021 Materials” and save all correspondence and records received from each facility in the corresponding parishes folder.
   a. Tip: If a facility tells you that there were no deaths at their facilities for the time period that you are requested, you should ask for a “zero death letter” (ZDL)—a letter signed by the custodian stating that there were no deaths during the time period that you are requesting.

13. Check for duplicates: After you have received responses and records from facilities and uploaded them to the parish folder. Review the Document Index Sheet and Incarceration Transparency website to see if these are duplicative records or new.
   a. If they are duplicative, make sure everything is saved in the google folder and you’re done.
   b. If they’re new, update the Document Index Sheet with the type of record that you received and enter the documents into the database.

14. Database entry: To enter documents into the database, you will receive an email with log-in information from the Incarceration Transparency Wordpress site. Once you log-in go to “Manage Deaths Data” on the left sidebar. Select “+ Add New” and then fill in the required fields for each record and hit “Submit” at the bottom of the page.
a. Upload the individual death record to the database and link in the Documents column in the data entry page for that individual.
b. See Public Records Module for specific death database instructions.

15. Verify facility deaths through searches
   a. Sometimes facilities don’t provide details for all deaths or claim zero deaths. You will have to verify their responses (or even non-response) through database searches, including:
      i. Docketbird (search for filed complaints for the sheriff/facility for wrongful deaths in the relevant federal district court, i.e. Eastern, Middle, and Western Districts of Louisiana)
      ii. News searches via Lexis and google for the facility name
      iii. If you find deaths not reported by the facility, save the news item or complaint and upload to your parish folder. Enter information/document in database.

16. Exit Interview: Towards the end of the semester, Professor Armstrong will ask you to schedule an exit interview with her. Fill out the “Exit Interview Rubric” and submit it to Professor Armstrong prior to your Exit Interview.
   a. If there is any additional information needed following the interview, complete it, update the rubric sheet, and follow up with Professor Armstrong to notify her that the tasks are complete.

LA Public Records Act Quiz
LA RS §44:1 et seq (2020)

Name: _________________________

1. Who can request public records? § 44:31, 31.1

2. How long must records be retained by the custodian of records? § 44:36

3. What types of records are NOT subject to public records requests? § 44:3, 7

4. May the custodian charge fees for producing the record? § 44:32

5. How long does the custodian have to produce the requested records? § 44:32

6. May portions of the records be redacted? § 44:32

7. If your request is unanswered or denied, what can you do? La. R.S. §44:35

8. If your request is actually denied, must the custodian provide a reason? § 44:32

9. If you are researching mortality in Louisiana jails and prisons, who might you send a public record request to?

1. Who can request public records? § 44:31, 31.1
   - Any person 18 years and older, except for “[a]n individual who is “in custody after
   sentence following a felony conviction [and] who has exhausted his appellate
   remedies” is not a person entitled to request public records unless the request
   relates to efforts to obtain post-conviction relief. The custodian may ask whether the
   requestor is such an individual.

2. How long must records be retained by the custodian of records? § 44:36
   - Generally three years, but Department of Corrections must retain for 6 years from
   date of death or expiration of sentence.

3. What types of records are NOT subject to public records requests? § 44:3, 7
   - Medical files
   - Police and prosecution documents for pending criminal prosecution
   - Juvenile adjudications and arrests (there is no statutory cite for this, but the statute is
     specific to adult records).

4. May the custodian charge fees for producing the record? § 44:32
   - Yes, the custodian “may establish and collect reasonable fees for making copies of
     public records” but may not charge for just viewing.

5. How long does the custodian have to produce the requested records? § 44:32
   - Three days under law, but allows for weekends, so five days.

6. May portions of the records be redacted? § 44:32
   - Yes - it is the job of the custodian to segregate any non-public information from
     the publicly available information; if the record cannot be reasonably redacted, the
     custodian must provide a reason in writing and provide the location of the record.

7. If your request is unanswered or denied, what can you do? §44:35
   - Sue to enforce
   - Continue to seek files by email and phone, keeping records of attempted and actual
     communications.

8. If your request is actually denied, must the custodian provide a reason? § 44:32
   - Yes. “D. In any case in which a record is requested and a question is raised by the
     custodian of the record as to whether it is a public record, such custodian shall within
     three days, exclusive of Saturdays, Sundays, and legal public holidays, of the receipt
     of the request, in writing for such record, notify in writing the person making such
request of his determination and the reasons therefor. Such written notification shall contain a reference to the basis under law which the custodian has determined exempts a record, or any part thereof, from inspection, copying, or reproduction.”

9. **If you are researching mortality in Louisiana jails and prisons, who might you send a public record request to?**

   - **Jail:**
     - Warden
     - Sheriff for the parish
     - Coroner for the parish

   - **Prison:**
     - Warden of the prison
     - Department of Public Safety & Corrections
     - Coroner for the parish

   - Sometimes parishes will have a custodian of records or a records department.

INSTRUCTIONS FOR ENTERING RECORDS IN DATABASE

STEP ONE:
Scan your received records. Scan must be OCR (text searchable) PDF. (I use the Scanner Pro app on my phone, but any scanner should do).

- File name for a summary record should be: Year Facility, i.e. 2019 Angola
- File name for an individual specific record should be: Year Facility First Last Name, i.e. 2019 Angola Charles George

Note: your pdf should include all pages for that individual. Do NOT upload page 1 for Charles George, then separately page 2 for Charles George.

STEP TWO:
Upload your scanned files to the 2021 folder for the correct parish here.

STEP THREE:
Log into death database at web address below URL: https://incarcerationtransparency.org/wp-admin

Username: Loyno user ID
Password: [to be provided]

Click on Manage Death Data in the left menu at the bottom.
Click on Add New at the top of the page.

STEP FOUR:
Enter the data as requested by the form and click save changes at the end of the form.
* Note that the ID # is automatically generated.
* Your facility should already be named...if it is not, enter all the info you can, make a note of it, and send me an email with the notation.

https://bit.ly/3zhTa0P
June 21, 2021
Custodian of Records
Louisiana Department of Public Safety & Corrections
P.O. Box 94304, Baton Rouge, LA 70804 Ph.: 225-342-6697
Via email: docpublicrecords@la.gov

To Whom It May Concern:
I am writing to request from the Louisiana Department of Public Safety and Corrections (DPSC) documents and records containing:

• Data submitted to the U.S. Department of Justice, Bureau of Justice Statistics OR the Bureau of Justice Assistance or a statewide agency/office for deaths in legal custody of DPSC during calendar year 2020, whether housed in a state prison, local jail, or private facility. Forms submitted may include, but are not limited to, NPS-4, NPS-4A, CJ9, CJ9A, “Death In Custody Reporting Act” form, or submitted/uploaded to the following websites: https://ojpssso.ojp.gov, https://bjapmt.ojp.gov

This request is pursuant to the Louisiana Public Records Act § 44:1 et seq. I request these records whether they are maintained in the files of an individual deputy or administrative staff member; in the possession of members or former members of the DPSC, as well as any outside contractors; warehoused; on microfilm, microfiche, or electronic storage; or otherwise stored or maintained.

For the purposes of this request, the terms “records” and “documents” are intended to include, without limitation, any and all written, typed, printed, recorded, graphic computer-generated, or other matter of any kind from which information can be derived, whether produced, reproduced, or stored on paper, cards, tapes, films, electronic facsimiles, computer storage devices, or any other medium. They include, without limitation, letters, memoranda (including internal memoranda), calendars, schedules, books, indices, notes, printed forms, publications, press releases, notices, minutes, summaries or abstracts; reports, files, transcripts, computer tapes, printouts, drawings, photographs, recordings (including both videotapes and audiotapes), telegrams, and telex messages, as well as any reproductions thereof that differ in any way from any other reproduction, such as copies containing marginal notations.
Under the Public Records law, your office has five business days from the date of this request to provide access to the records requested. *La.R.S. 44:35(A).* *Should you wish to raise any question* as to whether the requested material is a public record subject to disclosure you must notify me in writing within three business days of the basis for holding any such record exempt. *La.R..S. 44:32(D).*

*Please send me a complete copy of the above-requested documents at [email] if available electronically. This material is for a seminar class at [University], thus I would greatly appreciate waiver or minimization of copy costs.*

If I should direct this request elsewhere, please do let me know. In addition, please feel free to contact me at [telephone #] or [email] if you have any questions or concerns. Thank you very much for your prompt assistance.

Sincerely,

## ASSIGNMENT #1 GRADING RUBRIC

**Student Name:**
**Date:**

<table>
<thead>
<tr>
<th>Task</th>
<th>Complete?</th>
<th>Notes/Comments</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Update Facility contact information? (5 points)</td>
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<tr>
<td>2021 Student Carceral Facility List</td>
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<tr>
<td>Update Document Tracking Index with records received for years</td>
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<tr>
<td>requested If nothing received, enter -- (5 points)</td>
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<tr>
<td>Death In Custody Document Index Sheet</td>
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<tr>
<td>Upload all sent and received correspondence and records received?</td>
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<td>(5 points)</td>
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<tr>
<td>Parish folder</td>
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<tr>
<td>Enter deaths into Death Database, if records received?</td>
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<tr>
<td>(5 points)</td>
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<tr>
<td>IncarcerationTransparency/Statewide Deaths</td>
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<tr>
<td>Upload PRA log to parish folder? (5 points)</td>
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<tr>
<td>Parish folder</td>
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<tr>
<td>Records and/or ltr of zero deaths received for every assigned facility?</td>
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<tr>
<td>List complete facilities (5 points)</td>
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<tr>
<td>List facilities still awaiting documentation? (5 points)</td>
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<tr>
<td>For incomplete facilities, list status and contact information. (If this is clearly marked in PRA log, then “see log” may be entered.) (5 points)</td>
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<tr>
<td>Total – 40 points</td>
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</table>

ASSIGNMENT #2 PREPARATION

This assignment requires students to research the life of someone who died behind bars and memorialize their findings. Ideally, a student will be able to locate a family member or friend who knew the decedent and conduct an interview with them. In all cases, students develop investigative and research skills and are encouraged to be creative in their investigations.

PREPARATION

Prior to this assignment, it will be necessary to get comprehensive, multi-year death data from a facility in your jurisdiction. A sample of the list and accompanying data that Loyola Law students used to select their person who dies while in custody is available here: https://bit.ly/3BMknKr.

Sample Narrative Assignment Template


If you are unable to obtain death data for students to complete this assignment, have students search local news stations for a recent death in custody in their state or hometown to complete the narrative.

In addition, we have a workshop class preparing for these friends and family interviews. Students practice interviewing, where students are given pieces of information and then role-play interviewing a family member. During this session, we also discuss creative investigation techniques (public library, contacting schools/churches, online research tools).
**PUBLICATION**

A selection of these narratives are subsequently published on the Incarceration Transparency website. Student memorials are edited to remove details about death or their criminal record/alleged crimes, since the aim of the project is to remember the person as they were before incarceration.

ASSIGNMENT #2 STUDENT INSTRUCTIONS

You should research and draft a biographical narrative about a person who died in the New Orleans jail. The idea is that people who have died in the jail are often known only by the charge and limited information about their death. Try to tell the story of the person’s life - this should not just be a list of statistics or bullet point questions and answers, but a piece of writing that allows the reader to get to know your person. These narratives will ultimately be published on a website that provides an overview of the Louisiana prisons and jails, including deaths in custody at the New Orleans jail.

The narrative, particularly if it includes quotes from family members or small pics, should be at least 3 pages single spaced (flex) and should be uploaded to Canvas before [Date/Time].

Your narrative can be completed through internet and in person research:

The following is a non-exhaustive list of prompts to start your research:

- Demographics - race, gender, age, birthplace, last known residence/area, nicknames
- Education - highest level accomplished? What elementary school? Favorite teacher/subject? Are yearbooks available that have pictures?
- Work - Training? Experiences?
- Community Groups, other organizations that they participated in
- Talents - What were they particularly good at?
- What was important to them? Hobbies, pets, sports teams, TV shows, funny stories, etc.
- Childhood - what neighborhood did they grow up in?
- Pictures of the decedent at any age.

The following is a non-exhaustive list of potential sources:

- Bloomberg law: Search for federal court claims filed on their behalf (post-conviction or civil rights claims). Search the docket for all Louisiana federal courts for their names and if you’re lucky, you can pull complaints and related materials.
- Public records: If the criminal case is older and final, consider a public records request to NOPD (and arresting police if different) and the New Orleans district attorney’s office for their investigative files. They may have files on 1) the death of the person and related investigations and 2) the criminal case that led to their incarceration. [DO NOT FILE A PUBLIC RECORDS REQUEST WITH THE ORLEANS SHERIFF - I WILL FILE A COMPREHENSIVE ONE FOR ALL STUDENTS]
- Library: The main public library may have yearbooks or other additional genealogical material. You can also visit the reference desk of the Loyola library for additional
suggestions/databases.

- Family members, friends, school teachers, church leaders, former attorneys (both criminal defense attorneys and lawyers who may have represented them on other related matters) may all be willing to provide interviews, photos, leads to other material.
- Lexis news search for the name and family members
- Westlaw state law search for cases (their criminal case, maybe family members)
- Orleans docket master for docs related to the decedent’s criminal matter

https://bit.ly/3yUrA8g
ASSIGNMENT #2 GRADING RUBRIC

Student Name:

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Possible Points</th>
<th>Grade Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>At least two personal photographs</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Basic biographical information (birthdate, family names)</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Basic facts about the person's death</td>
<td>5</td>
<td></td>
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<tr>
<td>Interview with family or attorneys (or documentation of significant attempts to do so)</td>
<td>15</td>
<td></td>
</tr>
<tr>
<td>Clarity of writing, grammatically correct</td>
<td>10</td>
<td></td>
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<tr>
<td>Creative investigation (Former schools, libraries, etc)</td>
<td>10</td>
<td></td>
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<tr>
<td>Citations to at least four different sources</td>
<td>20</td>
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<tr>
<td>Personal story (focus on the person’s life, not death)</td>
<td>30</td>
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<tr>
<td><strong>Total</strong></td>
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</tbody>
</table>

* Notes

ASSIGNMENT #3
ASSIGNMENT #3 PREPARATION

This assignment requires students to write a brief overview of a specific facility and prepare a single summary slide of the most important information. During the last class, each student briefs the class on their facility.

PREPARATION

Students choose their facility from one of the facilities they were previously assigned for the public records requests in Assignment #1. For subsequent classes, students must review the county/parish page to see if a specific facility has been profiled. Students must select a facility that has not yet been profiled.

A sample memo and slide are available here: https://bit.ly/3uYH4qN
ASSIGNMENT #3 STUDENT INSTRUCTIONS

Students will produce a brief (3-5 single spaced memo) that provides an overview of a jail or prison. The jail or prison should be one of the larger facilities that the student previously contacted for Assignment #1 PRA documents. In addition, students will produce a single summary slide in powerpoint conveying the most important information from their memo.

The goal of the memo is to provide an overview of how that facility operates, with a focus on transparency/oversight. This project can be done primarily with secondary online research, with perhaps a few phone calls as needed. Do NOT file PRAs for this assignment. Each memo should include evidence and discussion of:

1) # of deaths since 2014 and trends¹ (if info received via PRA)

2) Jail characteristics:
   a) Capacity/size² and any available population data³
   b) Address/Location/website⁴
   c) Leadership, including term and history of current sheriff
   d) Annual budget/financing⁵

3) Evidence of oversight (i.e. has anyone been watching?)
   a) Accreditation by any national associations (ACA, NCCHC, etc)
   b) Audits performed (and results if available) (e.g. LA-DOC, US-DOJ, LCLE, LA Legislative Auditor, PREA etc)
   c) Hearings on operations by Parish, City Council?
   d) Judicial orders (injunctive) or consent decrees in effect currently or previously within last five years.

¹ If multiple deaths, do you notice any trends? Were most of the deaths suicides? From violence? Did most of them occur early in detention or later? What commonalities do you see, if any, among the deaths?
² Bed count or capacity
³ Race, gender, type of crime, pre-trial v. convicted v. ICE population, youth? You may not be able to find all of these characteristics, but try to paint a brief picture of who is incarcerated there.
⁴ Rural, urban, suburban? Parish wide or just limited municipalities, etc.
⁵ Often this type of information is available through annual reports on the sheriff website, city/parish council website/hearing minutes/reports, local newspaper reporting, etc.
4) Evidence of transparency (i.e. is info available if we wanted?)
   a) Public briefings on jail operations by jail officials or city
   b) Availability of data on people inside (sheriff “inmate locator” website?; overall populations; etc)
   c) Reports or research by advocacy groups?
   d) Your assessment of filing and receiving initial PRAs (Assignment #1)

5) Notable cases or complaints on prison/jail conditions in the last 5 years

# ASSIGNMENT #3 GRADING RUBRIC

Student Name:

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Possible Points</th>
<th>Grade Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Summary Slide</td>
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<td></td>
</tr>
<tr>
<td># of deaths since 2014 and trends</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Jail characteristics:</td>
<td>15</td>
<td></td>
</tr>
<tr>
<td>capacity/size, population data, address/location/website,</td>
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<tr>
<td>Leadership, including term and history of current sheriff, annual</td>
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<tr>
<td>budget/financing</td>
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<tr>
<td>Evidence of oversight:</td>
<td>25</td>
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<tr>
<td>accreditation by any national associations (ACA, NCCHC, etc);</td>
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<tr>
<td>audits performed (and results if available) (e.g. LA-DOC, US-DOJ,</td>
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<tr>
<td>LCLE, LA Legislative Auditor, PREA etc); hearings on operations</td>
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<tr>
<td>by Parish, City Council?; judicial orders (injunctive) or consent</td>
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<tr>
<td>decrees in effect currently or previously within last five years.</td>
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<tr>
<td>Evidence of transparency:</td>
<td>25</td>
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<tr>
<td>public briefings on jail operations by jail officials or city;</td>
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<tr>
<td>availability of data on people inside (sheriff “inmate locator” website?;</td>
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<tr>
<td>overall populations; etc); reports or research by advocacy groups;</td>
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<tr>
<td>your assessment of filing and receiving initial PRAs (Assignment #1)</td>
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<tr>
<td>Notable cases/complaints on conditions in the last 5 years</td>
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<tr>
<td>Clarity of writing, grammatically correct</td>
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<td><strong>Total</strong></td>
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</table>

Notes:

What is Trauma?

Ask students if there are similarities between the two definitions provided.

A key aspect of understanding trauma is to understand that the event or experience is completely subjective. Often, we place ourselves in a given situation, and explain how we would react. However, trauma is not about the objective observer, it is concerning the person that is stuck in a moment, which permeates their life.

You can provide your own brief example. An example that I give: a woman from North America (Betty) goes to live in an English speaking European country. She is living with her boyfriend who is from said country and two other local women. Everyone is in their mid-20s. After a month of living together, Betty feels that the other people are not maintaining appropriate cleanliness of the home they all live in. She notes that dishes are not being cleaned after use, and clothing articles are being left around. There are also problems with people having free range in the refrigerator without compensation or replenishment.

Betty discusses the situation with her boyfriend, who seems to feel that is not a big deal, but maybe they have a discussion at a bar they were meeting up later that evening. Betty, who is non-confrontation, makes a list of her grievances and practices how she is going to approach the situation. She is nervous, but believes having her boyfriend there, and a neutral location the outcome will be positive.

The bar had a few people, but it was still early. Betty sees her boyfriend and two roommates sitting together. She gets a pint of beer, and walks over. She feels nervous, but determined to discuss the issues. As she sits, she is immediately confronted by one of the roommates stating, “You have a problem with us.” Betty attempts to compose herself, but before she can say anything, the other female roommate begins to berate her. Calling her “stupid,” “stuck-up,” “a bitch,” and a slew of other insults. Her boyfriend says nothing. She is in shock, and finds that her mind is blank. She slowly gets up, and walks out of the door. Her boyfriend follows. She gets into his car, and begins to cry.

For thirteen years, this moment has been invasive in her mind. She will be sitting and working on a project, and the memory of that moment will replay in her mind. Her body reacts as though she is experiencing the memory in the present day. Her skin feels hot, her mind goes blank, and she begins to cry. If she experiences any conflict, she immediately shuts down, and becomes non-verbal. She has persistent negative beliefs about herself, “I am broken,” and “I’m always wrong.” She struggles with interpersonal relationships both at work and in social settings. She goes to very few events and does not have close relationships. She works from home.
The Neurobiology of Trauma

There are four main areas of the brain that are important to consider when attempting to understand trauma. The areas are the thalamus, amygdala, hippocampus, and medial pre-frontal cortex. The thalamus takes in all the information around us using our senses. It creates an autobiographical soup in the moment, a coherent experience. It provides, “This is what is happening to me now.” The information is passed to two different locations- the amygdala and the medial prefrontal cortex.

The information reaches the amygdala first as this is near the thalamus. It is the shortest distance. It identifies if incoming input is dangerous. If it identifies an event as dangerous, it will start our survival process by sending signals to other parts of the brain to release hormones that assist with our fight or flight responses.

The amygdala is assisted by the hippocampus. The hippocampus is vital for learning, memory, and spatial navigation. It relates the current experience to the past. It confirms with the amygdala that the event unfolding in the now is dangerous.

To put this all in context, imagine going for a walk or run on a path in the woods. In the middle of the road, you see an object that is the width of the path. Your thalamus pulls in the information, and identifies it as a snake. The information is passed to the amygdala and the medial prefrontal cortex. The amygdala gets the information, and confirms with the hippocampus. The hippocampus provides past events with snakes. Maybe, there was a documentary on poison snakes you saw last night, or a baby garden snake that bit you when you were 10-years-old. It confirms that snakes are dangerous. The amygdala begins to activate the survival response. As this is happening, the information has reached the medial prefrontal cortex, implores us to wait, and take a closer look. It turns out to be a stick. It overrides the amygdala, and stops the fear response. We quickly de-escalate. Conversely, if it is a snake, we might turn back and go the other way, or pick up a stick to encourage it to go away. Either way, after the event we are able to return to equilibrium.

This is how a non-traumatized brain reacts to a situation- it accesses the situation, handles the situation appropriately, and returns to an equilibrium.

On the other hand, a traumatized brain would struggle to recognize the object in the road. It would take longer and their body would be in full fight or flight mode. Further, it would take longer for the body to maintain equilibrium. In other words, a traumatized brain blocks recovery and places a person in a heightened state of arousal and agitation.

This cycle can be in perpetuity. The brain (and body) are in a constant state of arousal, and perceive danger everywhere. A person gets “stuck” in the past. Their bodies go into survival mode when there is no danger. An example I give, “A person experienced an attempted kidnapping. They were followed while hiking in a forested area and

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attempted to be grabbed. The person had a backpack on, and was able to slide out of the grasp of the attacker, but before they could get away, the person swung a machete, which sliced open their back. The person ran, got help, and recovered. The person cannot watch movies with sword violence because every time they heard the created sound it elicited a panic attack. They would be transported back to that moment. Further, they are hyper aware of their surroundings, even in what others would describe as a safe environment.” The constant release of stress hormones can have lasting physical damage, including causing brain atrophy and increased risk of coronary disease.\(^3\)

**Three Levels of Safety\(^4\)**

When we are in a dangerous situation we have three levels of safety. The first is social engagement. This is where we have others around us that offer protection and can help us elude or evade the threatening event. We call out for help, support, or protection. If no one is around or comes to our aid, or the threat is immediate, we revert to a more primitive survival mode - fight or flight.

At this point, our body is engaged, our heart rate is increased, adrenal glands are secreting. We are ready to face the danger or run and hide. Our rational thinking is suspended, and we are in a primal state for survival.

If this fails, we’re held down or trapped, we attempt to preserve ourselves by shutting down and expending as little energy as possible. Our heart rate plunges, breathing reduces, our gut stops working or evacuates- we disengage, collapse, and freeze. People will talk about “leaving their bodies” or “floating above their bodies”. Awareness shuts down. We dissociate from ourselves.

**Healthy Versus Traumatic Memory**

Memories are stories that we tell to convey an experience. Memories can alter and change over time. Two people can experience the same event and have different narratives and reactions. An example I give; growing up my brother and I would go over to our paternal grandparents’ house. My grandmother was not much of a homemaker. She enjoyed her PallMall cigarettes, old-fashions (an alcoholic drink), Little Debbie treats, and her grandchildren. For lunch we always got ham sandwiches with sliced cheese layered with mayonnaise and a side of Charlie’s Chips. To this day, I love mayo and my brother despises it. My brother also remembers my grandmother not letting us leave the table until we finished. He would sit at the table stubbornly and slowly eat the sandwich, trying

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\(^4\) Kolk, supra note 1 at 82-84.
to wash it down immediately with whatever beverage was given to us - usually some sort of Kool-Aid. I have no recollection of this as I loved those sandwiches.

Also, I conceive of our memories as a form of spiderwebs. Each node represents a memory. If a memory is accessed it can have a rippling effect. Memories that are closer in association to the current accessed memory are triggered, but some memories not as close can be impacted. A stream of consciousness is jumping from memory to memory. Further, when we access a memory, it can awaken another association that is faint, and our conscious brain does not recognize the connection immediately.

The way a memory is developed is based, in part, on level of arousal. The rational (prefrontal cortex) and the emotional brain (limbic and brainstem) work together to place it in context and create a narrative, a memory. Recall important moments- marrying the love of your life, divorcing the love of your life. The birth of your child. Acceptance letter to your university. The awful thing a loved one said to you. The acceptance you felt when revealing a secret aspect of yourself. There are thousands of moments that we can access, whether pleasant or uncomfortable. We access these moments with ease and clarity, or sometimes claiming, “I forgot about that,” as a friend retells a moment from an earlier point in life. Yet, the mundane will float into the void of oblivion. An example I give; The events of 9/11 were a cornerstone in modern America. I will give details about being informed of the events. Then I state, I can’t remember anything about 9/10. Memories can be associated with certain people, smells, sounds. Anytime I hear a song from Pink Floyd's album The Wall, I am transported back to being 7-years-old at our house. I can see the room. It is Saturday morning, my dad is awake and he lets me play what I want on the turntable. The only requirement is silence from me while he reads the paper. I poured over that album’s artwork. There are two other albums the same thing happens, Santana’s Abraxas, and Big Brother and the Holding Company’s Cheap Thrills. I don’t have a single date, but I have a collection of thoughts, feelings, and smells that transport me back to that time. Healthy memory is adaptive, the stories are flexible and can be modified. Consider the idea of a break up with a partner. There is a period of grief, and being stuck in the moment of the ending of the relationship- whether wanted or not. As we process the grief, we move past the point of the ending, and the relationship is integrated into our narrative experience. On the other hand, those who have been traumatized and develop PTSD, do not modify their accounts, yet there is also the absence of linear, coherent narrative.

There is a point where there is a diminishing returns of arousal helping to solidify a memory. The system becomes overwhelmed and breaks down. As discussed, our prefrontal lobe is shut down in the fight or flight and freeze stages. We are trying to escape the danger. This creates a separate narrative structure, one that is frozen and outside the healthy integrated memory network. Further, people with traumatic memories have intense physical

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Kolk, supra note 1 at 177-178.
and emotional reactions when triggered. Brain scans (fMRI) show that when a traumatic memory is triggered the amygdala is engaged as though the threat is occurring in the present not the past. It begins to tell the other parts of the brain to go into the fight or flight stage. This is why you will see with traumatized people hypersensitivity, aggression, swings in emotion. Their brain is, in essence, misfiring, but it is not something they can control.

Also, when a person attempts to tell the narrative of a trauma, it is in fragments because it is coded in fragments. Some details are remembered too clearly, smells, colors, specific sounds, but other details are forgotten, e.g. who helped them, moments before and after the event.

Dissociation is the essence of trauma.

**Historical Trauma**

Working with populations that may have a lineage of trauma. It is important to understand the impact of instances of genocide, slavery, forced relocation, or destruction of cultural practice can have generational impact at the individual level. *For example, Native Americans, Africans (both Africans forced into slavery and genocide in Rwanda with Hutus 100 days killing Tutsi), Armenian genocide, China destroying Tibetan culture in Tibet.*

In the powerpoint there is a short video that helps illustrate the ideas behind historical trauma. This adds another dimension when working with clients.

**Risk and Prognostic Factors**

It is important to understand that simply experiencing an event does not mean PTSD or other stress-related disorders will manifest. There are three types of factors that can come into play- temperamental, environmental, and genetics/physiological.

Temperamental is the...temperament of an individual. Early development such as do they come from a dysfunctional home environment or positive home environment. Does the individual have a previous mental health diagnosis, e.g. panic disorder or OCD? Our environment impacts us, and sometimes in ways that we are not fully aware. It could be that individuals grew in poor areas that often have a lack of access to resources. Positive social support prior to a traumatic event can be a protective factor. If an individual has positive support from home, social circles, etc. this can provide a framework to help minimize or alleviate the direct impact of a traumatic event.

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7 APA. DSM-5. 277-278
Genetics can potentially play a role in anxiety and fear. For example, there are genetic structures that may increase dopamine levels, thus may increase the response to stress excessive and contribute to worry and risk for anxiety disorders. On the other hand, physiological factors can include age, gender at the time of exposure.

**Trauma and Stress Related Disorders**

Something becomes a disorder when it impacts our ability to cope in daily life. Remember, this is about the individual's experience.

You can conceive these disorders in a fear or anxiety-based concept. Many individuals that are exposed to a traumatic or stressful event exhibit most prominently anhedonic/dysphoric, anger/aggression, or dissociative symptoms.

**PTSD**

What is presented here is a truncated symptomatology found in the Diagnostic Statistical Manual 5.

**Psychological Impacts of Trauma**

An individual that experiences a traumatic event, can have a varied impact on their mental health. The individual could experience an increase in feelings of depression or heightened anxiety. Self-medication through the abuse of drugs or medications to help alleviate the psychological burden that they are experiencing post traumatic event. This isn’t just recreational use, it is a crutch that impacts functioning in day to day life. With an increase in anxiety, there can be a heightened sense of fear or paranoia. Recalling earlier that the traumatized brain is stuck in a loop, and is not functioning correctly. This hyper-vigilance can be prescribed to people that the individual has known for long periods of time and have a strong emotional connection. In other words, paranoia directed at loved ones can occur. Insert example. The example I use is I had a client that was in a horrific car accident. She was riding with a friend. The friend died, but she survived. She went through very difficult rehabilitation. Afterwards, she could not be a passenger. She feared that everyone who was driving, but her, were putting her life in danger. Her husband, parents, and old friends that had previously driven her many times could no longer be the driver with her in the car. She understood that this was irrational on a certain level, but the fear and anxiety was overwhelming and she kept believing in those moments when

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8 Stahl, supra note 3 at 766.
others were in the driver seat and not her that they would kill her in an accident.

Further, someone that is in a constant state of fight or flight you may see behavioral outbursts or even personality changes. Individuals can continuously re-experience the event. Reference previous client discussed that had relived the same event for 12 years. If someone is in a heightened state of arousal that is going to impact their ability to sleep.

**Behaviors You Might See**

This is not a complete list, but some common behaviors to be aware of when working with clients that have experienced trauma.

**What is “Secondary Trauma”***?

From the DSM-5, “Experiencing repeated or extreme exposure to aversive details of the traumatic event(s) (e.g. first responders collecting human remains; police officers repeatedly exposed to details of child abuse)”\(^{10}\)

I tend to use the terms Vicarious Trauma and Secondary interchangeably. Vicarious trauma was coined by Pearlman & Saakvitne (1995) to describe the profound shift in worldview that occurs in helping professionals when they work with clients who have experienced trauma.\(^{11}\)

Working with immigrant populations seeking asylum, I learned a lot about the nightmares struggles that people in Central America suffered. Hearing the stories of kidnapping, rape, and torture impacted various aspects of my life. At a certain point, I stopped dating. I struggled with intimacy. I worked, interacted with a small group of friends, but otherwise kept myself removed from a personal life. Once, I recognized that the stories over the course of three years were taking a toll on how I moved through the world. This is in essence a shift in perspective that needed to be addressed to continue providing positive services to my clients.

Compassion fatigue occurs when professionals take on the suffering of clients who have experienced extreme stress or trauma. Compassion fatigue can impact how you interact with your clients. Further, the professional can experience depression and anxiety, physical and emotional exhaustion, less enjoyment of work, and more arguing.\(^{12}\)

I have found that at certain periods of work where I was not taking a break, I would struggle to interact with family and friends. I wouldn’t want to go to family functions or social engagements. I was in a perpetual state of exhaustion after work, where I would exert all the energy I had to help others. I find that taking a long vacation refuels to help abate compassion fatigue.

\(^{10}\) APA. DSM-5. 277-278


The symptoms of secondary traumatic stress symptoms include anxiety, intrusive thoughts, hypervigilance, numbness or feelings of having nothing left to give. We briefly discussed these when talking about trauma related disorders. However, I think it is important to touch on the increased use of alcohol and drugs. Recreational use of alcohol and drugs is a problematic issue. One in three practicing lawyers are problem drinkers, based on the volume and frequency of alcohol consumed, 28 percent suffer from depression, and 19 percent show symptoms of anxiety, according to the study “The Prevalence of Substance Use and Other Mental Health Concerns Among American Attorneys,” which involved 12,825 licensed, employed lawyers in 19 states around the country. When your decompression is to drink, opposed to a treat, it becomes habit. Once something becomes a habit, it can escalate to a crutch. Once mind-altering substances are seen as necessary to function, it can create a decrease in healthy functioning, which permeates throughout various aspects of one’s life.

What Helps/Protective Factors

I think one of the more important considerations to take away from this portion of the lecture is self-awareness. How do you hold the stress, anxiety, sadness, or anger within you? Does your back tighten when you are under pressure? Does your stomach ache when experiencing anxiety? Are you struggling with interactions with loved ones? Are you constantly tired? Check in with your feelings and emotions. Further, expressing your thoughts and feelings to people in your life is important. Sometimes we need to vent to place the problems outside of ourselves, getting away from holding all our thoughts in the internal echo chamber.


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Working in the Context of Trauma: Best Practices in Caring for Others and Ourselves

Rob Harrison, L.C.S.W.

Goals for Today:

• Gain a deeper understanding of traumatized clients and how to approach difficult interviews
• Explore what “secondary trauma” might look like and how to address it
• Compassion

What is “Trauma”?  

• Experiences or situations that are emotionally painful and distressing, and that overwhelm people’s ability to cope, leaving them powerless.
  - Center for Nonviolence & Social Justice
What is “Trauma”? pt.2

- Extreme stress that overwhelms a person’s ability to cope. It is an individual's subjective experience that determines whether an event is or is not traumatic.
  - Sidran Traumatic Stress Institute

The Neurobiology of Trauma

- Thalamus
  - Creates autobiographical soup in the moment. “This is what is happening to me.”

- Amygdala
  - Id if incoming input is danger (unconscious brain)

- Hippocampus
  - Memory, Assistant to Amygdala

- Medial Prefrontal Cortex
  - Oversight (conscious brain)

Three Levels of Safety

1. Social Engagement - we call out for help, support, and comfort from people around us.
2. Fight or Flight - Stress Hormones release. Need to either get away or fight off danger.
Healthy Versus Traumatic Memory

- Development of Memory
  - Key factor is level of arousal.
- Problems with Accessing Memory
- Dissociation
  - "characterized by a disruption of and/or discontinuity in the normal integration of consciousness, memory, identity, emotion, perception, body representation, motor control, and behavior." - DSM-5

Historical Trauma

- Genocide, Slavery, Forced Relocation, Destruction of Cultural Practice
- Cumulative Emotional and Psychological Wounds
- Targets whole collective community
- Trauma held personally, across generations

University of Minnesota Extension
Trauma and Stress Related Disorders

- Exposure to traumatic or stressful event
- Variable Symptoms
- Examples:
  - Acute Stress Disorder
  - Adjustment Disorder
  - Reactive Attachment Disorder
  - Disruptive Mood Regulation Disorder
  - Non-Suicidal Self Injury
  - Intermittent Explosive Disorder
  - Dysregulated Social Engagement Disorder
  - Disruptive Impulse Control Disorder

Risk and Prognostic Factors

- Temperamental
  - These include childhood emotional problems by age 6 years and prior mental disorders
- Environmental
  - Includes lower socioeconomic status; childhood adversity; cultural characteristics; lower intelligence; minority racial/ethnicity.
  - Social Support prior to event is protective.
- Genetic and physiological
  - Certain genotypes may either be protective or increase risk of PTSD after exposure

PTSD

Post Traumatic Stress Disorder – must meet specific criteria including:

1. Exposure to actual or threatened death, serious injury, or sexual violence
2. Presence of one or more intrusion symptoms associated with the event
3. Persistent avoidance of stimuli associated with the traumatic event
4. Negative alterations in cognitions and mood associated with the event
5. Marked alterations in arousal and reactivity associated with the event
6. Duration >1 month
7. Significant distress or impairment in important areas of functioning
8. Not attributable to the effects of a substance or medical condition
Psychological Impacts of Trauma:

• Depression
• Anxiety
• Substance Abuse
• Trust/Paranoia
• Behavioral outbursts
• Personality Changes
• Re-experiencing
• Decrease Sleep

Behaviors You Might See:

• Shame
• Guilt
• Fear
• Lack of trust
• Avoidance
• Poor/inconsistent memory
• Emotional/unemotional

What is Secondary Trauma?

• Secondary Trauma/Vicarious Trauma
• Compassion Fatigue
• An acute stress reaction to a traumatic event experienced indirectly
• The psychological signs/symptoms that result from reactions to survivor’s accounts of their traumatic experiences
• The transformation that occurs within the professional as a result of empathic engagement with the client’s trauma experience
Signs/Symptoms
- Fear
- Guilt
- Helplessness
- Anger/Irritability
- Decreased energy
- Sleep disturbances
- Anxious
- Hyper-vigilant
- Cynicism/hopelessness
- Difficulty concentrating
- Detachment
- Over-identification with client
- Disruption in relationships
- Increased use of A/D
- Intrusive thoughts of client’s experience
- Disruption in sleeping
- Poor professional boundaries
- Profound sadness

Risk Factors
- Experience with personal trauma
- Similarities with client’s experience
- Limited supports/isolated
- Difficulty talking about feelings/experiences
- Feeling disempowered (unsure how to help)
- New information that challenges world view
- Unreasonable expectations
- Lack of professional efficacy
- High case loads
- Lack of training in working with clients who have experienced trauma
- Lack of supervision / institutional support
- Limited self care
- Denial of impact

What Helps/Protective Factors
- Developing positive coping skills
- Knowing how you carry the weight
- Self care practices
- Mentality of prevention
- Work/life balance
- Awareness of symptoms
- Debriefing
- Support/Supervision
- Expressing thoughts and feelings
- Knowing your role/boundaries
- Social supports
- Dealing with own trauma
- Spiritual support
- Humor
- Peer support
- Finding meaning in the work
- Strength-based narratives
- Complex trauma requires complex solutions
- Interdisciplinary teams
References

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- DSM-5. American Psychiatric Association
- EMDR: Basic Principles, Protocols, and Procedures. Francine Shapiro, Ph.D.
- The Center for Nonviolence and Social Justice (Center) at the Drexel University School of Public Health https://drexel.edu/cnvsj/
- Sidran Traumatic Stress Institute, Inc. https://www.sidran.org/
- University of Minnesota Extension. Historical Trauma and Cultural Healing https://extension.umn.edu/mental-health/historical-trauma-and-cultural-healing

CLASS 5 LECTURE NOTES: TRAUMA INFORMED INTERVIEWS

Quick Review

Referencing previous lecture on trauma. Remind students how the traumatized brain can possibly process information differently.

Memory is solidified based on the level of arousal. However, there are diminishing returns in extreme situations.¹

Peripheral details vs. Central details² - Central details are the main/clear/gist of an event. Peripheral details are extra details. For example, while driving, a car pulls out, and you have to slam on the brakes to avoid a collision. You might remember that it was a car vs. truck/suv/motorcycle. Peripheral details might be the color of the car or the license plate number.

In a traumatic/emotional event, what an individual would assume are central details might not be remembered by an individual. For example, a person the experience sexual assault might not remember details of the assailant, where it happen, or if a weapon was present, but could clearly remember smells, the color of a building, or details of a ceiling.

Introductions and Considerations

Consider the power dynamic of and the individual you are interviewing. Their perception of you has an impact on reluctance, hesitancy, and possible recalcitrance.

Setting clear boundaries and providing the opportunity for the interviewee to decline your questions can possibly yield more information as power in the dynamic has been given to the interviewer to interviewee.

A quick note on note taking. If you are meeting someone in person, I recommend asking if it is alright that they take notes for accuracy. This helps alleviate ambivalence by the interviewee, and attempts to continue the through line of providing a comfortable space for the interviewee.

¹ Kolk, Bessel van der. 2014. The Body Keeps the Score: Mind, Brain and Body in the Transformation of Trauma. London: Penguin Books. 82-84
Missteps. There is no avoiding them. You can’t know what will have a negative impact on an individual. Missteps are not more about how to recover from them. How you, as an interviewer, apologize and help the individual feel heard.

**Techniques**

This techniques are extrapolated from the skill known as Motivational Interviewing\(^3\) and years of clinical experience.

Open-ended questions are attempts to have the interviewee provide as much information as they feel comfortable. e.g. Were you born in New Orleans? vs. Where did you grow up? Tell me about growing up in New Orleans.

Active listening is the process of being fully engaged with the interviewee. It is not waiting to ask the next question while the other person is talking. It is showing interest and attentiveness with body language and non-verbal cues. Leaning in slightly while someone is talking shows keen interest. Looking down and saying, “uh-huh,” could easily be construed as inattentive.

Reflective listening is a primary skill in outreach. It is vital to learn to think reflectively. This is a way of thinking that accompanies good reflective listening. It includes an interest in what the person has to say and respect for the person’s inner wisdom. Reflective listening is meant to close the loop in communication to ensure breakdowns don’t occur. Some people find it helpful to use some standard phrases:

- So you feel...
- It sounds like you...
- You’re wondering if...

Summarization is repeating, succinctly, what the interviewee has said. It is another way to ensure that you are getting the correct information and the interviewee is being heard. Example starting phrases:
- Let me see if I understand so far... Here is what I’ve heard...

Ending a summarization:
- Did I miss anything?
- Anything you want to add or correct?

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Silence is nothing to fear. Allow silence to exist. Learn to be comfortable in silence. We don’t always need to fill the space with words. Sometimes an interviewee needs a moment to collect their thoughts, or allow an emotional moment to play out.

**Role-Playing Time!**

Students are grouped in pairs. Each student will get a description of an individual that they will role-play. There is limited information, so the student acting as the character can improvise information. The non-character student will role-play interviewing the character. This lasts for about 5-10 minutes before students switch playing character and interviewer. Have the professors walk around to provide support and feedback.

https://bit.ly/3v02hQZ
**CLASS 5: INTERVIEW ROLE-PLAYING MATERIALS**


- **What was something that made Antwoin happy?**
  Antwoin was happy when he was with his family. Especially when he was spending time with his younger brother.

- **What was something was really talented at?**
  Antwoin was really talented at fixing and detailing cars.

- **What was something that was really important to Antwoin?**
  His mom, meme and papa (grandmother and grandfather), and children. His sister had five children, and he always made sure they were taken care of and mentored them. Family was the most important to him.

**Background**

Antwoin Hardin was 28 years-old and had been diagnosed with sickle cell disease and bipolar disorder. Antwoin was homeless and was arrested for refusing to leave a hotel’s lobby. Due to his mental illness, Antwoin refused his sickle cell medication for the 16 days he was in custody. Antwoin’s sickle cell condition was manageable with medication, but the absence of treatment for over two weeks created severe health problems and was ultimately fatal. It also likely caused excruciating pain. The jail’s medical services erroneously places the blame on Antwoin for refusing his medication. However, according to a report released by the Treatment Advocacy Center, mentally ill inmates can be involuntarily treated for up to 15 days with certification from a psychiatrist or other physician, and longer if ordered by a court. There is no indication that Antwoin was ever evaluated by a doctor. Moreover, in failing to treat Antwoin’s mental illness, EBRPP also failed to treat his medical condition. Antwoin’s untreated sickle cell disease caused a blood clot to form that traveled to his lungs and caused his death. Antwoin is not alone. Jeremy Hilliard and David O’Quinn both suffered and died from blood clots after being detained in EBRPP for less than three weeks.


- What was something that made David happy?
  Working on his art, being with his 4-year old niece, Fourth of July on the beach with family, and walking his dog Bogie.

- What was something David was really talented at?
  David received a BS degree in Art and Spanish from the University of Texas and a Masters in Fine Art from UCLA

- What was something that was really important to David?
  At the end, it was his dog, Bogie.

Background
David O’Quin is another tragic example of an unmedicated mentally ill man dying in the parish jail. David was a graduate of University of Texas with a degree in studio art. His family first noticed his alarming behavior during college. David complained of intelligence officials implanting listening devices in his brain, being followed by helicopters and birds, and would often strip naked in public. He was eventually diagnosed as a paranoid schizophrenic. At the time of his arrest, he was not taking his medication and suffering from serious psychosis. Within six days of being incarcerated, David spent 24 hours continuously shackled to a restraint chair. During his time shackled to the chair, he refused to eat and screamed for at least six of those hours. During his incarceration, guards also shot David with a stun gun.

During his thirteen days detained in EBRPP, David spent over 170 hours shackled to a restraint chair with few breaks, resulting in lacerations on his ankles. The lacerations then became infected by David’s feces and urine. David’s treatment was not only fatal, but also degrading and in violation of the jail’s own policies. Internal policies require that all detainees have 24-hour access to restrooms, handwashing facilities, and opportunities to shower once a day. When he was finally released from the chair, he was too weak to move. David ate his last meal lying on a mat on the floor. Thirteen days after being detained, a guard poked a lifeless David through the bars with a broom. David died of blood clots that traveled from his legs to his lungs.

The jail updated its policy and procedures on the use of the restraint chair on April 1, 2018, following David’s death.


3) Paul Cleveland 7/20/1942 – 11/12/2014, Age 72

- **What was something that made Paul happy?**
  Something that made Paul happy was spending time with family. He loved to cook and try new recipes. He always loved feeding the family.

- **What was something Paul was really talented at?**
  Something that Paul was talented at was mechanic work. He could listen to an engine and diagnose its problem just from listening.

- **What was something that was really important to Paul?**
  Something that was really important to Paul was helping those that could not help themselves. He took in people and helped them get back on their feet no matter their circumstances.

**Background**
In November 2014, Paul Cleveland, a 72-year-old U.S. Navy veteran, died of severe cardiac disease in the jail. According to his family, Paul suffered from heart problems, diabetes, high blood pressure, and bipolar disorder, among other conditions. In a wrongful death suit against the parish jail and other liable defendants, Paul's family alleges that the jail's medical staff is not sufficiently trained in interacting, diagnosing, and treating its growing mentally ill population.

4) Lamar Johnson 10/18/1987 – 5/30/2015, Age 27

- **What was something that made Lamar happy?**
  He loved being with family. I would see him just soaking it all in at family reunions, gatherings, parties or just quiet family time watching movies etc. He loved to see people enjoying themselves, laughing, getting along and the children playing. He just lit up in those types of situations.

- **What was Lamar really talented at?**
  He was an amazing athlete. Football was his love but he could play basketball as well. He was all-star material. He also wrote very well written raps, which is poetry, and he danced. He also had the ability to train and motivate others. When he was 10 years old, he motivated his friend to become healthier. He also trained a dear friend’s child in football who later played at the collegiate level.

- **What was really important to Lamar?**
  It was important to Lamar that he provided his children with a safe, loving happy place. Loving people and seeing good in this world was also important to him.

**Background**

Lamar Johnson, a family man with three young children, died after four days in the jail. According to his family, Mr. Johnson was “misclassified, placed in a de facto racially-segregated dorm with little-to-no staff supervision, moved to a solitary confinement unit” that housed individuals with serious mental health conditions, and then “ignored by guards” until he committed suicide. During the first two days of Lamar’s four-day detention, he was cooperative and relaxed. However, as the days passed, he mentally deteriorated; he became delusional, paranoid, and ultimately, suicidal.

Lamar was initially housed in Q8, where one or two guards are responsible for supervising over a hundred detainees. Though the documentation of his time in custody is sparse and incomplete, it appears as if Lamar felt threatened by other detainees in Q8. Witnesses in the jail described Lamar as having hallucinations, possibly due to the availability of synthetic drugs within the unsupervised jail according to one detainee witness. While on Q8, at least four guards participated in beating and pepper spraying Lamar. At some point in his third day in EBRPP, Lamar was moved to solitary confinement Unit II, M01 lockdown unit at EBRPP.

Witnesses in the lockdown unit told Lamar’s family that just prior to his death, he had told them he “couldn’t take it” and “did not want to live”. These witnesses also stated the same guards who had beaten him while he was handcuffed overhead these statements but
did not initiate any suicide prevention protocols. No mental health assessment was ever ordered for Lamar. Jail staff remained indifferent to his worsening conditions and instead isolated him in solitary confinement. On May 30, 2015, the jail was short-staffed, and the jail staff failed to monitor Lamar’s condition every 15-30 minutes. Despite Lamar’s visible and severe distress, including multiple suicidal statements in front of jail staff and being beaten by four guards, EBRPP failed to act. Lamar was found hanging in his cell later that day.

Lamar never should have been in EBRPP in the first place. He was stopped for an alleged traffic violation in Baton Rouge, where police discovered an outstanding warrant in Jefferson Parish for cashing a check under false pretenses. Lamar was taken into custody, but was to be extradited to Jefferson Parish, a 90-minute drive away, within 24 hours.

5) Tyrin Colbert 3/16/1998 – 2/18/2016, Age 17

-What was something that made Tyrin happy?
He was happy being around his mother and father. It used to make his day when his dad would take him to work or take him fishing. Even if he didn’t catch anything, just taking the ferry to Plaquemines Parish and being with his dad made him happy.

-What was Tyrin really talented at?
He was a talented singer and he loved to dance. His favorite songs to sing were “Every Praise” by Hezekiah Walker and ‘This Means War” by Pastor Charles Jenkins.

-What was really important to Tyrin?
He was proud of being a big brother and he loved his little sister. Church was also important to Tyrin. He loved worshipping and dancing in church.

Background
Tyrin was a 17-year-old, 129-pound boy being housed in an adult prison. His cellmate killed him in a dispute over a blanket. Tyrin, who had not been charged at the time of his death, had been incarcerated for 106 days, long past the 60-day statutory requirement to file formal charges. Within those 106 days, Tyrin experienced extreme trauma. He had been sexually assaulted by another inmate, which was reported but not investigated. Another inmate broke Tyrin’s arm and he was not admitted to the hospital for an X-ray and treatment until five days after the assault. Tyrin reported feeling suicidal, hearing voices, and having hallucinations.

On February 17, 2016, Tyrin was heard yelling “I’m sorry” and “I give up,” during an argument with his cellmate over a blanket. The Sheriff’s Office suspects that Tyrin’s cellmate pulled him from the top bunk and choked Tyrin with the blanket. Tyrin was found unresponsive in his cell and transferred to a local hospital. He was initially listed as being in critical condition, however, he died the next morning after being taken off of life support. The incident was not captured on surveillance, since cameras only capture the hallways between the cells. The jail’s physical design, including low ceilings, limits the ability of the jail administrators to install additional surveillance cameras. Tyrin’s cellmate was charged with second-degree murder.


Trauma Informed Interviews

Quick Review

- Traumatized Brain vs. Non-traumatized Brain
- Not all brains are the same
- Memory is a fickle pickle
  - Peripheral details vs. Central details

Introductions and Considerations

- Power dynamic
- Introduction.
- Set boundaries.
  - Give the person the ability to reject your question
- Explain what you are trying to accomplish
- Note taking
- Would it be ok if I...?
  - Give the individual the power
- Missteps
- Compassion
Techniques pt. 1

- **Open-Ended Questions**
  - Were you born in New Orleans? vs. Where did you grow up?
  - Tell me about growing up in New Orleans.

- **Active Listening**
  - Pay Attention - do not think about your next question
  - Non-Judgement

Techniques pt. 2

- **Reflective Listening**
  - So you feel...
  - It sounds like you...

- **Summarizing**
  - Let me see if I understand so far...
  - Here is what I've heard...
  - Tell me if I've missed anything...

- **Silence**
  - Be ok with silence

Grief can mirror depression and trauma. Be Mindful.
Role Playing Time!

The Coffee Talk Sessions have a dual role to allow students to express feelings and discuss self-care. This also helps students feel comfortable approaching the MHP outside for support.

The Coffee Talk Sessions should begin with explaining privacy. Let the students know that what is said in the session will not be relayed back to the professors, but that the limitations of privacy do not extend to potential to harm self and others. Also, ask the students to respect what is said in the session to remain in the session. Free expression is the goal.

To start, beginning from one end and going through each student, asking 1) their name and 2) something(s) that are currently frustrating them. Once every student has provided a frustration, ask what each of them do for self-care. Explore positive self-care.

The MHP can provide insights and suggestions on positive self-care.

https://bit.ly/3IQg9Dg