



**STATE OF INDIANA  
Department of Correction**

Indiana Government Center—South

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## 2025 Sexual Abuse Prevention Program Annual Report

This report provides a summary of the sexual incident report data collected in 2025, compares reporting data with the previous two years, summarizes problems identified and corrective actions completed, changes made to improve compliance with PREA standards, and identifies continued needs for compliance for the Agency.

### 1. Summary of SIR data for 2025

<b>2025 AGENCY TOTALS</b>	<b>Substantiated</b>	<b>Unsubstantiated</b>	<b>Unfounded</b>	<b>Ongoing Invest</b>	<b>Total</b>
<b>Inmate Sexual Harassment</b>	4	114	13	9	<b>140</b>
<b>Abusive Sexual Contact</b>	1	53	12	21	<b>87</b>
<b>Nonconsensual Sexual Act</b>	3	63	17	37	<b>120</b>
<b>Staff Sexual Harassment</b>	3	13	22	8	<b>46</b>
<b>Staff Sexual Misconduct</b>	14	20	17	11	<b>62</b>
<b>Totals</b>	<b>25</b>	<b>263</b>	<b>81</b>	<b>86</b>	<b>455</b>

### 2. Comparison of 2025 SIR data with previous two years.

<b>2024 AGENCY TOTALS</b>	<b>Substantiated</b>	<b>Unsubstantiated</b>	<b>Unfounded</b>	<b>Ongoing Invest</b>	<b>Total</b>
<b>Inmate Sexual Harassment</b>	12	69	24	6	<b>111</b>
<b>Abusive Sexual Contact</b>	11	64	9	24	<b>108</b>
<b>Nonconsensual Sexual Act</b>	1	52	12	23	<b>88</b>
<b>Staff Sexual Harassment</b>	2	46	18	10	<b>76</b>
<b>Staff Sexual Misconduct</b>	18	14	18	5	<b>55</b>
<b>Totals</b>	<b>44</b>	<b>245</b>	<b>81</b>	<b>68</b>	<b>438</b>

<b>2023 AGENCY TOTALS</b>	<b>Substantiated</b>	<b>Unsubstantiated</b>	<b>Unfounded</b>	<b>Ongoing Invest</b>	<b>Total</b>
<b>Inmate Sexual Harassment</b>	6	65	24	4	<b>99</b>
<b>Abusive Sexual Contact</b>	17	67	18	12	<b>114</b>
<b>Nonconsensual Sexual Act</b>	1	21	9	12	<b>43</b>
<b>Staff Sexual Harassment</b>	5	49	30	3	<b>87</b>
<b>Staff Sexual Misconduct</b>	14	26	14	5	<b>59</b>
<b>Totals</b>	<b>43</b>	<b>228</b>	<b>95</b>	<b>36</b>	<b>402</b>

The number of substantiated reports for the last three years is as follows:

2023 - 43 total substantiated reports  
2024 - 44 total substantiated reports  
2025 - 25 total substantiated reports

In comparing the data from the prior two years to 2025, the overall number of PREA incidents reported increased slightly by 3.8 percent from 2024. The total number of substantiated investigations in 2025 fell by nineteen from the prior year, which represents a 43 % decrease. This data reversed the prior two-year trend of an increased total in substantiated reports. Future data monitoring and evaluation will be required to determine if additional targeted training for investigators is needed to improve their understanding of the evidentiary standards required to substantiate an investigation. Secondly, ongoing investigations increased by 26 %, which may be due to increased investigator staffing vacancies across the agency. Third, nonconsensual sexual act (NSA) reports increased by 36% from 2024 to 2025, which was the largest single category increase. The number of substantiated NSA investigations increased from one to three. Lastly, inmate sexual harassment (ISH) reports increased noticeably, while the number of substantiated ISH reports decreased significantly. Multiple facility PREA Compliance Managers attribute the increase in ISH reports to a “weaponizing of PREA”.

### **3. Problems identified and corrective actions taken.**

**The following are problems identified or corrective actions as a result of incident reviews by facilities during 2025:**

#### Indiana Women’s Prison

- Additional cameras were installed throughout the facility improving video monitoring capabilities.
- Body Worn Cameras were added for use by front line correctional staff and have already been a beneficial tool for investigations.
- Ensuring staff working at IWP from male facilities receive PREA training for gender differences before working at IWP.
- PREA posters and signage were updated throughout the facility.

#### Miami Correctional Facility

- Error in PREA incident data tracking identified and corrected. Staff trained on proper incident identification and reporting.
- MCF experienced a significant increase in reports over the last year. While the overall number of reports increased there was only one substantiated investigation.
- Retaliation monitoring, incident reviews, outcome notifications, Quarterly reviews, and other required documents were identified missing during an internal audit. New staff person was

identified and trained to complete task and required documentation. A new facility PREA Compliance Manager was selected and trained.

- Facility had no staff certified as a SART instructor. Staff person was certified and course scheduled for facility SART members to certify or re-certify.

#### Plainfield Correction Facility

- Additional cameras were installed in the facility improving video monitoring capabilities.
- Additional lighting was installed in the facility improving visibility.
- Body Worn Cameras were added for use by front line correctional staff.

#### Chain O'Lakes Community Re-entry Center

- Two cameras were installed in the recreation building to improve video monitoring capabilities.
- Staff person retrained on proper pat and strip search procedures

#### Pendleton Correctional Facility

- Staff vacancy rate has risen. Actively recruited to improve staffing rate in the facility and improving ways to retain staff.
- Upgrade and add cameras in areas that don't currently have cameras.

#### Putnamville Correctional Facility

- Ensure bed/housing assignments are based on PREA assessment.
- Cameras were added/installed to aid the supervision of movements and daily activities.

#### Laporte Juvenile Correctional Facility

- Cameras were updated and added to aid the supervision of movements and daily activities.

#### Reception Diagnostic Center

- Cameras installed in areas the previously had none.

#### New Castle Correctional Facility

- Cameras were added/installed to aid the supervision of movements and daily activities.
- PREA investigator position filled after becoming vacant.
- Twenty mirrors installed in general population units to eliminate blind spots

#### Heritage Trails Correctional Facility

- PREA investigator completed specialized required training.

#### **The following are problems identified or corrective actions as a result of facility PREA audits during 2025:**

#### Indiana State Prison

- 115.71 Criminal and administrative agency investigations. Multiple investigations closed while evidence still being processed at state police lab. Investigations re-opened to add lab results.
- 115.15 Limits to cross-gender viewing. Majority of incarcerated individuals interviewed stated they don't hear opposite gender announcements being made on a regular basis. Memo from the Warden issued to all staff detailing current announcement policy/procedure.
- 115.62 Agency protection duties. Staff person was retrained after not responding correctly upon receiving a report of sexual abuse.
- 115.82 Access to emergency medical and mental health services. Staff were trained on the requirements under standard 115.82 and the IDOC sexual assault manual.

#### Wabash Valley Correctional Facility

- 115.86 Sexual abuse incident reviews. Multiple Incident reviews did not properly document everything that was considered during the review and were not filled out completely. Staff was retrained on the incident review process.
- 115.13 Supervision and monitoring. Adequate level of staffing could not be determined from staffing plan. Supplemental minimum staffing report completed.
- 115.67 Agency protection against retaliation. Determined retaliation monitoring meetings had not been completed in the correct time frames for one report. Facility PCM trained on the requirements of the standard.

#### Logansport Juvenile Correctional Facility

- 115.313 Supervision and Monitoring. Logansport Juvenile Correctional Facility did not meet standard 115.313 (c) that requires a staff to student ratio of 1:8 during waking hours and 1:16 during sleeping hours. A successful corrective action was not identified during the audit period.
- 115.315 Limits to cross-gender viewing and searches. Staff training records were not initially supplied to determine staff had been trained in how to conduct cross gender searches. Training records were located and supplied.
- Various documents used as evidence in standards 115.333 and 115.335 not initially supplied. Needed documents were identified and submitted.

#### Rockville Correctional Facility

- Various documents used as evidence in multiple standards not initially supplied. Needed documents were identified and submitted.
- 115.11 Zero tolerance of sexual abuse and harassment; PREA coordinator. PREA compliance manager position was not identified in facility staffing chart. Position of PCM was added to the chart.

#### Westville Correctional Facility

- 115.71 Criminal and administrative agency investigations. Multiple investigations closed while evidence still being processed at state police lab. Investigations re-opened to add lab results.
- 115.63 Reporting to other confinement facilities. Date of report could not be determined for multiple notification documents reviewed. Staff re-trained on notification and standard requirements.
- 115.67 Agency protection against retaliation. Determined retaliation monitoring meetings had not been completed for multiple reports. Multiple documents were not dated or incomplete. Facility PCM trained on the requirements of the standard. New sample group of documents uploaded to show compliance after retraining.

#### **4. Steps taken by the Agency to meet PREA standards.**

The Indiana Department of Correction continued to strive to improve implementation of the PREA standards during 2025. The following are steps the agency took to work toward compliance or improve compliance:

- Seven facilities completed a PREA audit.
- Training was provided to new facility PREA Compliance Managers. The training was focused on PCM responsibilities, and staff received an agency PCM manual.
- The Sexual Abuse Prevention Policy was updated to include current agency procedures and operating systems.
- Cameras were Upgraded and installed at multiple facilities. Body worn camera programs were launched at multiple facilities.
- New SART Instructors and members were trained.
- Monthly meetings with facility Prea Compliance Managers were held. During the meetings substantiated sexual abuse incident reviews were evaluated and any changes needed in policy/procedure were discussed. Various training topics were also covered.
- One facility investigator completed investigative training program offered through the PREA resource center.
- The agency PREA Coordinator and one other staff attended the National PREA Coordinators Conference.

**5. Continued Needs for Compliance**

In October of 2017, the staffing ratios required in standard 115.313 became effective for all juvenile facilities. All three IDOC juvenile facilities were found to not meet the staffing ratios during their last PREA audits. La Porte Juvenile Correctional Facility (2023), Pendleton Juvenile Correctional Facility (2024), and Logansport Juvenile Correctional Facility (2025). The continued need for compliance at these facilities is filling current vacancies and an additional increase in staffing to meet the staffing ratios required by standard 115.313.

**6. Summary**

In 2025, the Indiana Department of Correction continued to make improvements in policy and practice to meet the PREA standards. The IDOC is compliant with all PREA standards except 115.313 (c). The IDOC will continue to work toward 100% compliance and to maintain its current level of compliance. The Agency continues to improve video monitoring technology in several facilities. Seven facilities participated in a PREA audit in 2025, completing year 3 of audit cycle 4. Six received a final report with full compliance. Logansport Juvenile Correctional Facility met all standards except standard 115.313 (c) that requires a staff to student ratio of 1:8 during waking hours and 1:16 during sleeping hours. The IDOC will continue to monitor and evaluate its staffing at juvenile facilities to find a solution to meeting the standard.

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