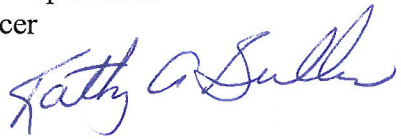




Since 1961.

**To:** Carrie Hessler-Radelet, Acting Director  
Stacy Rhodes, Chief of Staff/Chief of Operations  
Daljit Bains, Chief Compliance Officer

**From:** Kathy A. Buller, Inspector General 

**Date:** September 27, 2012

**Subject:** Final Report on the Review of the Peace Corps' Implementation of Guidelines Related to Volunteer Victims of Rape and Sexual Assault (IG-12-08-E)

Transmitted for your information is our final report on the Review of the Peace Corps' Implementation of Guidelines Related to Volunteer Victims of Rape and Sexual Assault.

Management concurred with 12 recommendations. All 12 recommendations remain open pending confirmation from the chief compliance officer that the documentation identified in management's response has been received. In its response, management described actions it is taking or intends to take to address the issues that prompted each of our recommendations. We wish to note that in closing recommendations, we are not certifying that the agency has taken these actions or that we have reviewed their effect. Certifying compliance and verifying effectiveness are management's responsibilities.

Our comments, which are in the report as Appendix D, address these matters. Unless otherwise noted, please respond with documentation to close the open recommendations within 90 days of receipt of this memorandum.

You may address questions regarding follow-up or documentation to Assistant Inspector General for Evaluations Jim O'Keefe at 202.692.2904.

Please accept our thanks for your cooperation and assistance in our review.

#### Attachment

cc: Elisa Montoya, White House Liaison/Senior Advisor to the Director  
Bill Rubin, General Counsel  
Esther Benjamin, Associate Director, Global Operations  
Edward Hobson, Associate Director, Safety and Security  
Brenda Goodman, Deputy Associate Director, Volunteer Support  
Dick Day, Regional Director, Africa  
Carlos Torres, Regional Director, IAP  
Helen Lowman, Regional Director, EMA  
Sonia Stines Derenoncourt, Director, Office of Programming and Training Support

Paul Weinberger, Director, Congressional Relations  
Barry Simon, Director, Office of Medical Services  
Kellie Greene, Director, Office of Victim Advocacy  
Estrella Alam, Acting Director, Human Resource Management  
Tim Lawler, Deputy Director, VS/Counseling and Outreach Unit  
Jennifer Parrish Taylor, Special Assistant to the Chief Compliance Officer



# Peace Corps Office of Inspector General

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**Final Report: Review of the Peace Corps' Implementation of  
Guidelines Related to Volunteer Victims of Rape and Sexual Assault  
(IG-12-08-E)**

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**September 2012**

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## EXECUTIVE SUMMARY

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More than 200,000 Americans have served as Peace Corps Volunteers in 139 countries for over 50 years. Volunteers live and work in a broad range of unique and challenging environments around the world, and while Peace Corps service is often a fulfilling, life-defining opportunity, there are health and safety risks inherent in service, including the risk of sexual assault or other serious crime incidents. The safety and security of its Volunteers has been identified by the agency as a primary objective and a responsibility of Peace Corps staff, Volunteers, and trainees.

During 2010 and 2011 Returned Peace Corps Volunteer (RPCV) rape and sexual assault victims brought their concerns regarding the agency's response to their rape or sexual assault to the Peace Corps Director, elected officials, the Office of Inspector General (OIG), and the media. RPCV sexual assault victims, agency officials, and subject matter experts testified before Congress in May 2011 and again in September 2011. Victims voiced concerns that the agency's response was inadequate, uncompassionate, victim-blaming, and ineffective and cited a lack of staff accountability to or oversight of the response effort. They called on the Peace Corps to adopt the highest standards for response to and care for victims.

In 2011 OIG initiated a review of the Peace Corps' implementation of guidelines related to Volunteer victims of rape and sexual assault. The purpose of the review was to examine agency guidelines and protocols, make recommendations to improve support to Volunteer victims of sexual assault, and identify best practices we observed at selected posts. We examined Volunteer sexual assault incidents that occurred from 2009-2011. We used the following researchable questions to guide our work:

1. Is the agency's guidance for responding to Volunteer victims of sexual assault sufficient to meet victim needs?
2. Is the agency's sexual assault training for staff sufficient to prepare them to respond to victims?
3. Are victims sufficiently supported?
4. How does the agency's response to and care of sexual assault victims compare to other organizations and to the standards recommended by subject matter experts?

As mandated under the Kate Puzey Peace Corps Volunteer Protection Act of 2011 (Kate Puzey Act),<sup>1</sup> OIG will issue reports in 2013 evaluating the effectiveness and implementation of Volunteer sexual assault risk reduction training and the sexual assault policy developed as a result of the Act, as well as other aspects of agency operations.

The Peace Corps accomplished a number of initiatives during 2011 that addressed concerns raised by sexual assault victims. The agency's *Commitment to Sexual Assault Victims* was issued, which spelled out a framework for responding to sexual assaults that is predicated on compassion, safety, open communication, and respect for the privacy of victims. In May 2011, a victim advocate was hired to work with Volunteers and post and headquarters staff to enhance

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<sup>1</sup> Public Law 112-57.

support for victims of sexual assault and other serious crimes. The agency developed and implemented new guidance and training during 2011 for post and headquarters staff through its *Guidelines for Responding to Rape and Sexual Assault (Response Guidelines)*. While the *Response Guidelines* established a uniform notification and response protocol for Volunteer or trainee (V/T) sexual assault incidents at all Peace Corps posts, we found that the agency needs to take additional steps to ensure that its response to Volunteer sexual assault incidents are consistent, that staff are accountable, and there are systems in place to assess and address any shortcomings.

The agency response to sexual assault should be considered in the context of the overall Volunteer safety and security program. Prior to issuance of the *Response Guidelines* in February 2011 each Peace Corps post established post-specific procedures for responding to V/T rape and sexual assault crimes. This created the potential for inconsistencies or lapses in the agency's response effort. As we reported in our 2010 audit report *Peace Corps Volunteer Safety and Security Program*, without standardization of the security program and clear lines of authority for oversight and monitoring compliance, the agency cannot ensure that posts fully and consistently implement effective safety and security policies.<sup>2</sup> The agency-wide sexual assault *Response Guidelines* issued in 2011 and mandatory staff training should help ensure a standardized step-by-step response and notification protocol and other necessary response elements are integral to each post's response effort. Standardized response and notification protocols will support more consistent response and care to victims. Prior to the dissemination of the *Response Guidelines* and mandatory training sessions, posts were not required to conduct annual sexual assault response training for staff with response and care duties. The content of each post's staff training program was defined by post-specific crime response protocols rather than a standard sexual assault protocol employed at every Peace Corps post. A uniform agency-wide sexual assault response training module will support a more consistent level of staff preparedness for the response and care effort.

Staff members who participated in the *Response Guidelines* training sessions reported greater confidence in their ability to respond to Volunteer victims. Staff members we interviewed told us that the training sessions provided a forum to discuss American and host country perceptions, culture, laws and norms regarding sexual behavior or assault, and to consider these issues in the context of the agency's *Commitment to Sexual Assault Victims*. Some posts have used country-specific information generated from those discussions to strengthen sexual assault awareness and mitigation strategies in their Volunteer training programs. Incorporating this information into Volunteer, counterpart, partner agency, and post staff training programs is a best practice that could be extended to other posts as they conduct annual *Response Guidelines* or other related staff training.

We found that the rape and major sexual assault victims we interviewed whose incidents occurred from 2009–2011 were generally satisfied with the agency's response. However, Volunteers who reported "other sexual assault" (OSA) incidents were not consistently receiving

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<sup>2</sup> OIG final audit report: *Peace Corps Volunteer Safety and Security Program*, IG-10-08-A, [http://files.peacecorps.gov/multimedia/pdf/policies/PC\\_Safety\\_and\\_Security\\_Final\\_Audit\\_Report\\_IG1008A.pdf](http://files.peacecorps.gov/multimedia/pdf/policies/PC_Safety_and_Security_Final_Audit_Report_IG1008A.pdf).

medical consultations or the follow-up care or support that some of them needed.<sup>3</sup> For some cases we reviewed, OSA victims had not received support because post medical officers were not informed of the incident by the staff member taking the initial incident report. These lapses can be attributed in part to the lack of standardized protocols and procedures for this type of incident. The *Response Guidelines* lack a protocol for response, care and follow-up support to Volunteers who report an OSA incident. As a consequence, we found that for some OSA victims, staff members had not met the support obligations made in the agency's *Commitment to Sexual Assault Victims*. The lack of an agency-wide protocol for response and care to OSA incidents creates the potential for inconsistencies or lapses in the agency's response effort and we recommended that a response protocol for OSA victims be developed and added to the *Response Guidelines*.

We found that the agency did not use a centralized case management system to verify sexual assault response requirements had been fulfilled and to assess performance and provide feedback to responders to make process improvements. The lack of a centralized system makes it difficult to confirm the quality or consistency of victim care provided or to identify and correct lapses in services or response to victims. We identified several issues related to the *Response Guidelines* training that require attention. We determined that the participation of country directors and post medical officers in the 2011 *Response Guidelines* training had been inconsistent; some of them had not attended the training sessions as required. Some CDs were not fully familiar with the information contained in the post's "Survey of the Local Legal Environment" (LES) which contains specific information relative to the crime of rape or sexual assault in the host country and detailed information on the legal process. Post staff members who may be assigned as acting country director (CD) were not consistently trained to conduct incident response or oversee sexual assault incident management. Additionally, some headquarters staff members with responsibilities for victim response and care had not received training on the *Response Guidelines*.

Our report contains 12 recommendations, which, if implemented, should strengthen the agency's response and care to Volunteer victims of rape and sexual assault and correct the deficiencies detailed in the accompanying report.

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<sup>3</sup> See Table 2, page 2 for the agency's definitions of rape/attempted rape, major sexual assault, and other sexual assault.

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## **BACKGROUND**

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### **Survivor Concerns Regarding the Peace Corps' Response to Rape and Sexual Assault**

During 2010 and 2011, RPCV rape and sexual assault victims approached the Peace Corps Director, elected officials, OIG, and the media to express concerns regarding the agency's response to their rape or sexual assault. In May 2011 and September 2011, RPCV rape and sexual assault victims, agency officials, and subject matter experts were invited to testify before Congress. Testimony at those hearings, along with victim accounts submitted to agency officials and OIG, highlighted concerns that the agency's response to sexual assault incidents both in the recent past and spanning many prior years had been inconsistent, uncompassionate, victim-blaming, or ineffective. Volunteer victims expressed concerns regarding staff accountability and a lack of oversight of the response effort. Sexual assault victims testified they did not receive the support they expected to receive from the Peace Corps and that improvements were not made after they complained about the quality of response and care.

### **The Peace Corps' Commitment to Volunteer Safety and Security**

Peace Corps Volunteers live and work in a broad range of unique and challenging environments around the world. While Volunteer service has long been considered a fulfilling, life-defining opportunity, the experiences of more than 200,000 Americans spanning 50 years in 139 countries reflects that there are inherent health and safety risks. In its present policy statements, the safety and security of Volunteers has been highlighted by the agency as a "paramount objective of the Peace Corps" and a primary responsibility for its managers, staff, Volunteers, and trainees.

While the agency advises Peace Corps applicants that there are inherent risks in Peace Corps service, it also strives to select work sites and place Volunteers in locations that do not pose unreasonable or inordinately high risk to their safety or well-being. This is challenging given the current operating context including increasing political unrest, rising crime rates, and threats of terrorism. Female Volunteers particularly have indicated over the past decade that feeling unsafe during their Peace Corps service was a concern for them.<sup>4</sup>

The Peace Corps emphasizes community acceptance as the key to maintaining Volunteer safety and security. It has found that safety is best ensured when Volunteers are well-integrated into host communities as extended family members and seen as contributors to their communities' development. Volunteers play an important role in ensuring their own safety: they are expected to comply with post safety and security policies and exercise good judgment.

### **Prevalence and Effects of Sexual Violence**

According to subject matter experts, sexual violence includes rape, incest, child sexual assault, ritual abuse, non-stranger rape, statutory rape, marital or partner rape, sexual exploitation, sexual

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<sup>4</sup> Bridgeland, John M., Wofford, Harris, Quigley, Kevin F.F., & Milano, Jessica A., *A Call To Peace: Perspectives of Volunteers on the Peace Corps at 50*, (D.C Civic Enterprises and National Peace Corps Association, 2011), p. 25, [http://www.civicerprises.net/MediaLibrary/Docs/a\\_call\\_to\\_peace.pdf](http://www.civicerprises.net/MediaLibrary/Docs/a_call_to_peace.pdf).



contact, sexual harassment, exposure, and voyeurism, and is motivated by the desire to control, humiliate or harm. Unfortunately, sexual violence is a risk for Volunteers in every country where the Peace Corps serves.

While anyone can experience sexual violence, most victims are female. The perpetrator is typically male, often known to the victim, and possibly a friend, coworker, or neighbor. According to the World Bank, one out of three women worldwide have experienced rape or sexual assault.<sup>5</sup> A 2010 Centers for Disease Control and Prevention survey indicated that nearly one in five women and one in 71 men in the United States have been raped.<sup>6</sup> Sexual violence takes an immeasurable toll on its victims. Victims of sexual violence may experience sexually transmitted disease, pregnancy, or chronic disease. They may also face short- and long-term psychological, social and behavioral impacts including depression, post-traumatic stress disorder, loss of productivity, substance abuse, strained relationships, and fear of crime.

Sexual assault victims often do not report their assaults due to shame, embarrassment, fear they will not be believed, or threats of further harm by their attackers. Some victims may not immediately identify the experience as a sexual assault, particularly if the perpetrator is known to them or if physical force is not used; others may be reluctant to report due to mistrust or fear of losing anonymity or privacy. According to the Department of Justice, in 2010 only 50 percent of persons aged 12 or older who experienced a rape or sexual assault in the United States reported the incident to local police. The agency’s anonymous 2009 *Annual Volunteer Survey* indicated that 54.9 percent of Volunteer sexual assault victims and 66.7 percent of Volunteer rape victims did not report their assault to the Peace Corps.

The Peace Corps categorizes sexual assaults into one of three incident definitions: rape/attempted rape, major sexual assault, or other sexual assault (OSA), and uses the following incident definitions:

**Table 2: Peace Corps’ Incident Classifications of Sexual Assault**

<b>Rape/ Attempted Rape</b>	Penetration of the vagina or anus with a penis, tongue, finger or object without the consent and/or against the will of the Volunteer. This includes when a victim is unable to consent because of ingestion of drugs and/or alcohol. Rape also includes forced oral sex, where: (a) the victim’s mouth contacts the offender’s genitals or anus OR (2) the offender’s mouth contacts the victim’s genitals or anus, OR (3) the victim is forced to perform oral sex on another person.
<b>Major Sexual Assault</b>	Intentional or forced contact with the breasts, genitals, mouth, buttocks, or anus, OR disrobing of the Volunteer or offender without contact of the Volunteer’s aforementioned body parts, for sexual gratification AND any of the following: (1) the use of a weapon by the offender, OR (2) physical injury to the victim, OR when the victim has to use <i>substantial</i> force to disengage the offender.
<b>Other Sexual Assault</b>	Unwanted or forced kissing, fondling, and/or groping of the breasts, genitals, mouth, buttocks, or anus for sexual gratification.

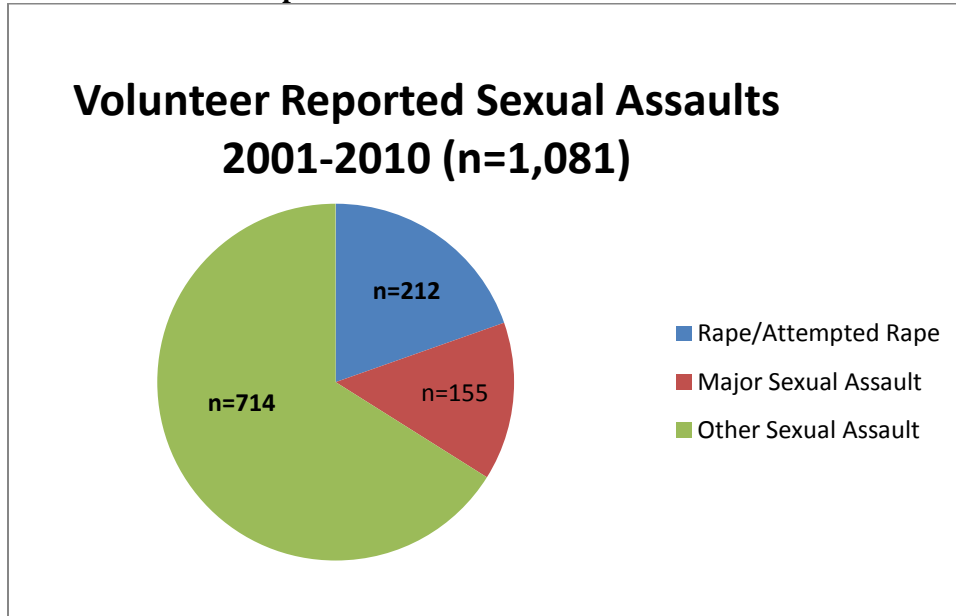
Source: Peace Corps.

<sup>5</sup> “Worldwide Sexual Assault Statistics,” George Mason University Sexual Assault Services; <http://www.nsvrc.org/publications/fact-sheets/worldwide-sexual-assault-statistics>.

<sup>6</sup> Black, M.C., Basile, K.C., Breiding, M.J., Smith, S.G., Walters, M.L., Merrick, M.T., Chen, J., & Stevens, M.R., *The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Summary Report*, Atlanta: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, 2010), p. 1, <http://www.cdc.gov/violenceprevention/nisvs/>.

According to data compiled and reported by the agency’s Office of Safety and Security (SS) from its Consolidated Incident Reporting System (CIRS), from 2001 to 2010 there were 1,081 rapes/attempted rapes, major sexual assaults, and other sexual assaults reported by V/Ts. Other sexual assault incidents comprised 714 of the reported incidents.

**Table 3: Volunteer Reported Sexual Assaults 2001-2010**



Source: Peace Corps Consolidated Incident Reporting System.

According to the agency’s analysis of reported Volunteer crime incidents, the data for this period reflects the following trends in incidence rates for sexual assault crimes:

- The incidence rate for reported V/T rape/attempted rape has remained relatively unchanged over the 10-year period at .50 incidents per 100 V/T years.<sup>7</sup>
- The incidence rate for reported major sexual assaults has varied from a high of 0.56 incidents per 100 V/T years in 2001 to a low of 0.24 incidents per 100 V/T years in 2004.
- The incidence rate for reported other sexual assaults for the 10-year period has fluctuated around an average of 1.69 incidents per 100 V/T years.

SS provided summary data related to the status of rape/major sexual assault cases compiled from CIRS for the period from 2009 through 2011. During this period, 45 percent of Volunteer victims of rape or major sexual assault (58 of 128) who reported the incident to the agency chose

<sup>7</sup> The Volunteer population fluctuates throughout the year as trainees arrive and Volunteers complete their service. To more accurately compare Volunteer/trainee numbers across years, the agency uses Volunteer/trainee years (V/T years). V/T years take into account both the number of Volunteers and the length of time each Volunteer served. Since Volunteers may serve less than a full calendar year, counting V/T years is more accurate than counting individual Volunteers. There were 7,736 V/T years in calendar year 2010.

to report their assault to local or national police or civil/local authorities. For cases where Volunteers agreed to report their assaults to local authorities, SS reports that arrests were made in 71 percent of cases (41 of 58), and suspects have been found guilty in 56 percent of cases that have gone to trial.

### **The Importance of a Victim-Centered Response**

Sexual assault response experts emphasize that a “victim-centered response recognizes that the one person to whom all responders are responsible to is the victim.” A victim-centered response acknowledges that “it is important for victims to have an experience of justice” and that “justice exists when victims are listened to and taken seriously,”<sup>8</sup> regardless of the legal outcome of their incident.

Experts who work regularly with sexual assault response and care have found that “victims of sexual assault who experience a supportive and compassionate response, regardless of the criminal justice system outcome, have lower rates of post-traumatic stress than victims who experience secondary trauma in the form of disbelief and blame.” Treating psychological symptoms as soon as possible may also reduce the duration and severity of distress experienced by sexual assault victims.<sup>9</sup>

### **Growth and Change in Agency Sexual Assault Response Strategy and Resources**

Before 1998, Volunteer rape and sexual assault response and care was managed at posts by the Peace Corps medical officers (PCMOs) and at headquarters by the Office of Medical Services (OMS); the direct involvement of the Country Director in the immediate response to the Volunteer varied according to post-specific policies and procedures. At headquarters, a Volunteer Safety Council, coordinated by the Office of Special Services, addressed ongoing issues and concerns surrounding Volunteer safety. In 1995 a Volunteer Safety Coordinator was hired to plan, coordinate and facilitate the activities of the council. In 1998, as a result of the work of the coordinator and council, the agency issued its *Rape Response Handbook* to guide Peace Corps posts’ sexual assault response and care efforts, and CDs were tasked with overall responsibility for managing the response to a Volunteer sexual assault incident. The handbook included a notification protocol and a flow chart listing the headquarters offices that PCMOs and CDs were to contact for support to the victim or response to the crime. In 2000 the agency hired regionally-based Peace Corps safety and security officers (PCSSO) to provide technical assistance to posts and support the response to all crimes committed against Volunteers.

In 2003 the Office of Safety and Security was established under the direction of the associate director for safety and security who reports to the agency’s deputy director. SS was charged with

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<sup>8</sup> *Sexual Assault Response Team SART Handbook*, Oklahoma Office of Attorney General Victim Services Unit, Version III, July 2009, supported by Grant No. 2008-TA-AK-K029 awarded by the Office on Violence Against Women, U.S. Department of Justice.

<sup>9</sup> Yuan, Nicole P., Koss, Mary P., Stone, Mirto, *Current Trends in Psychological Assessment and Treatment Approaches for Survivors of Sexual Assault Trauma*, National Resource Center on Domestic Violence, 2006, p. 1, [http://www.vawnet.org/assoc\\_files\\_vawnet/ar\\_svtreatment.pdf](http://www.vawnet.org/assoc_files_vawnet/ar_svtreatment.pdf).

the responsibility for establishing the agency's safety and security policies and supporting posts in implementing policies through guidance, training, supervision and oversight.

During 2002, the Peace Corps established a new post staff position, safety and security coordinators (SSCs), and subsequently assigned them to each post to assist CDs with monitoring and assessing the in-country security environment and conducting ongoing safety assessments of Volunteer sites. The SSCs' duties also currently include reporting and tracking Volunteer and staff crime incidents at post, assisting Volunteer victims with filing a police report, accompanying the Volunteer to legal proceedings, and updating the Volunteer on the status of his or her case. In addition, in 2003 the Peace Corps also hired regional security advisors for each of the three geographic regions (Europe, Mediterranean, and Asia; Inter-America and Pacific; and Africa) to coordinate activities between headquarters and their region's SSCs.

In March 2008 a Sexual Assault Working Group (SAWG)<sup>10</sup> was established to bring agency staff together to examine the issue of Volunteer sexual assault and make recommendations in a broad range of programmatic, training, and safety and security areas, including: how the agency informs applicants about sexual assault issues before entering service, in its initial and ongoing training programs after entering service, and in its capability and readiness to respond in the aftermath of a sexual assault.

In April 2008 the Peace Corps launched the Crime Incident Reporting System, now known as the Consolidated Incident Reporting System (CIRS). The CIRS serves as a centralized database of all post-reported crimes and safety incidents involving Peace Corps Volunteers and trainees.

In April 2010 OIG issued an audit report on the agency's Volunteer safety and security program. The report's findings and recommendations focused on aspects of its safety and security program where improvements were needed to ensure the agency's program was complete, implemented consistently, and positioned to meet the unique safety and security challenges it faced.<sup>11</sup> The agency concurred with 27 and partially concurred with one of the report's 28 recommendations.

### **Office of Inspector General Responsibilities Related to Volunteer Crime**

OIG responsibilities relative to Volunteer sexual assault and rape changed as the agency developed and deployed its own systems and staff resources to respond to Volunteer crime incidents. From 2003 to 2008, OIG was responsible for coordinating the interagency investigation of violent crimes committed against Volunteers, including sexual assaults and rapes committed against Volunteers. These responsibilities encompassed coordination with the Department of Justice and other U.S. law enforcement and criminal investigative agencies, and coordination of investigative and prosecutorial support to foreign law enforcement agencies.

During this period, OIG served as the principal office guiding CDs and other agency officials on all investigative and prosecutorial matters related to Volunteer sexual assault and rape. OIG

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<sup>10</sup> In early 2012 the SAWG was renamed The IDEAL Council. Comprising staff members from 16 departments of the agency and functioning as an interdisciplinary team, the IDEAL Council focuses on sexual education, prevention and help for both Volunteers and staff.

<sup>11</sup> OIG, *Peace Corps Volunteer Safety and Security Program*.

investigators provided investigative support to the Volunteer victim, coordinated on retention of legal counsel for the Volunteer, and compiled and maintained the agency's investigative file for each crime. OIG supported investigations in the host country with the U.S. Embassy regional security officer (RSO), who has responsibility under the authority of the Chief of Mission for contact to and liaison with the local police.

In September 2008, the responsibility to coordinate the investigative response to crimes committed against Volunteers, including rape and sexual assault crimes, was transferred from OIG to the Peace Corps' SS office, with the exception of reported cases in which a Volunteer has been sexually assaulted by another Volunteer or by a Peace Corps staff member. OIG maintains sole responsibility for investigating such incidents.<sup>12</sup> According to the agency's CIRS data, from 2009 through 2011 there were 16 reports of rape, major sexual assault or other sexual assault where the alleged perpetrator was another Peace Corps Volunteer, and one report of another sexual assault incident in which the alleged perpetrator was a staff member.

### **Peace Corps Staff Roles and Responsibilities**

*Peace Corps Manual* section 270, "Volunteer/Trainee Safety and Security," specifies the offices with primary responsibility for the agency's safety and security program. The Peace Corps manages its Volunteer safety and security programs through two offices: the SS office, which directs, oversees, and supports Volunteer safety and security programs; and the Office of Global Operations (OGO) which manages and supervises Volunteers and trainees through three regional directors (RDs) and the CDs assigned to Peace Corps posts. SS establishes the general safety and security programs for the agency, and the Office of Global Operations has responsibility for ensuring implementation of these programs at posts.

At the post level, the CD has overall responsibility for the day-to-day management and execution of Volunteer safety and security programs. This effort is coordinated with support from staff at the post, regional, and headquarters levels, including medical, safety and security, legal, and administrative staff. When crimes are committed against Volunteers overseas, investigative and prosecutorial jurisdiction frequently lies with that country's police and judicial system. Prosecution in the U.S. is available only for crimes over which the United States has extraterritorial jurisdiction.<sup>13</sup> Even for those crimes, local prosecution may be preferred because of evidentiary and legal considerations.<sup>14</sup> Therefore, in order to develop a comprehensive Volunteer safety and security program and provide support to the Volunteer victim, CDs must be familiar with local laws and with local customs and culture.

At posts, the CD and the Peace Corps Medical Officer (PCMO) are responsible for conducting staff sexual assault response training, responding and caring for the victim, notifying required

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<sup>12</sup> See *Peace Corps Manual* section 861 & Inspector General Act of 1978. OIG conducts investigations of criminal, civil, and administrative misconduct related to the Peace Corps' programs and operations. OIG serves as the law enforcement arm of the Peace Corps and works closely with other federal agencies.

<sup>13</sup> Such crimes include but are not limited to those occurring within the special maritime and territorial jurisdiction of the United States pursuant to 18 U.S.C. §7, or where a federal criminal statute expressly provides for U.S. extraterritorial jurisdiction.

<sup>14</sup> See generally, *Extraterritorial Application of American Criminal Law*, Congressional Research Service, September 10, 2007.

offices, and pursuing legal options in the host country. They are supported by the Office of Volunteer Support medical and counseling staff, safety and security staff, and administrative staff in the field and at headquarters. Depending on the circumstances of the rape or sexual assault crime, OIG, the Office of General Counsel (OGC), and the U.S. embassy's RSO all may be notified.

The agency's Office of Volunteer Support (VS) describes its headquarters offices, services and responsibilities as follows:

- The Office of Medical Services clinical programs unit provides clinical oversight and management of the Volunteer health system, along with guidance and support to the PCMOs and agency-contracted health personnel.
- OMS and the counseling and outreach unit (COU) provide medical and mental health services and support to worldwide Peace Corps posts. The COU supports the emotional well-being of both Volunteers and staff, assists posts in the management of Volunteer behavioral and adjustment challenges, provides consultation throughout the agency, and serves as a liaison for families of Volunteers during crises or emergencies

### **2011 Agency Organizational and Policy Changes**

In 2011 the agency updated its policy and guidance for responding to Volunteer sexual assault. In January, the Peace Corps published its *Commitment to Sexual Assault Victims* (hereafter *Commitment*) defining and describing the agency's overarching commitment to Volunteer victims of sexual assault (Table 4).

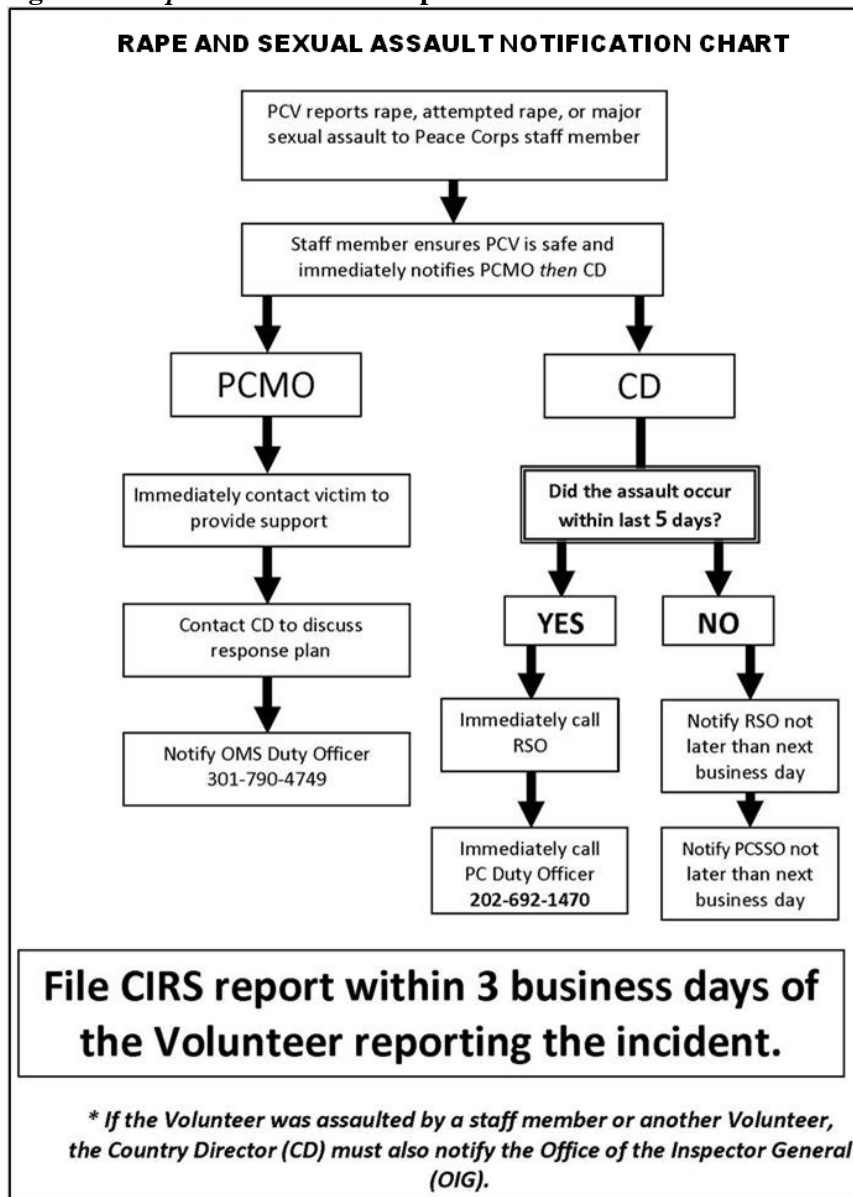
**Table 4: The Peace Corps' Commitment to Sexual Assault Victims**

<p>Peace Corps is committed to providing a compassionate and supportive response to all Volunteers who have been sexually assaulted. To that end, the Peace Corps makes the following commitment to our Volunteers who are victims of sexual assault.</p> <p><b>1. COMPASSION</b> <i>We will treat you with dignity and respect. No one deserves to be a victim of a sexual assault.</i></p> <p><b>2. SAFETY</b> <i>We will take appropriate steps to provide for your ongoing safety.</i></p> <p><b>3. SUPPORT</b> <i>We will provide you with the support you need to aid in your recovery.</i></p> <p><b>4. LEGAL</b> <i>We will help you understand the relevant legal processes and your legal options.</i></p> <p><b>5. OPEN COMMUNICATION</b> <i>We will keep you informed of the progress of your case, should you choose to pursue prosecution.</i></p> <p><b>6. CONTINUATION OF SERVICE</b> <i>We will work closely with you to make decisions regarding your continued service.</i></p> <p><b>7. PRIVACY</b> <i>We will respect your privacy and will not, without your consent, disclose your identity or share the details of the incident with anyone who does not have a legitimate need to know.</i></p> <p>Peace Corps staff worldwide will demonstrate this commitment to you through our words and actions.</p>
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Source: Peace Corps.

In February 2011, the agency issued its *Response Guidelines: Guidance for Staff to Provide Compassionate and Timely Support* (hereafter *Response Guidelines*). The agency advised posts in its transmittal memo that the *Response Guidelines* were “designed to serve as the game plan by which post will provide timely and effective response, especially in the first crucial hours after the incident is reported.” The *Response Guidelines* were developed with input from SS, OMS, COU, OGO, regional directors, regional security advisors, and OGC. This step-by-step guidance spells out the process for taking a call from a sexual assault victim, including a flow chart defining staff notification responsibilities, as well as actions to be taken and responsibilities of the country director and other post staff for initial and extended support to the victim (Figure 1).

**Figure 1: *Response Guidelines* Rape and Sexual Assault Notification Flow Chart**



Source: Peace Corps.

CDs were instructed in a memorandum that accompanied the *Response Guidelines* training module to ensure that key staff members, especially those who serve as duty officers, were fully trained on the *Response Guidelines* by March 29, 2011. The *Response Guidelines* instruct country directors to ensure that the post has completed a “Survey of the Local Legal Environment” (LES) and update it at least annually so they are familiar with host country laws for reporting a crime to local authorities and for prosecuting a crime in the host country.

The agency demonstrated continued steady progress in policy and program implementation related to Volunteer rape and sexual assault throughout 2011:

- In April 2011, Peace Corps staff members from OMS attended sexual assault nurse examiner training designed to train individuals to provide care to victims and conduct medical forensic examinations, and in May 2011 staff from OMS, SS, COU, and the victim advocate attended sexual assault response team trainings, where they collected sexual assault prevention and response best practices and training materials. OMS incorporated sexual assault nurse examiner trainings into PCMO trainings, and the agency adapted its first response protocol from the sexual assault response team model used by responders nationwide.
- In May 2011, a victim advocate was hired to work with Volunteers and post and headquarters staff to enhance support for victims of sexual assault and other serious crime incidents.
- In June 2011, the Peace Corps formed a panel of experts in the field of sexual assault prevention and response representing federal agencies, nonprofit organizations, medical professions and universities to provide expertise and assistance. Experts from the Department of Defense Sexual Assault Prevention and Response Office and other subject matter experts provided feedback on trainings for Volunteers and staff and input regarding the agency’s sexual assault policy.
- In August 2011, OMS revised *Medical Technical Guideline* (TG) 540: “Clinical Management of Sexual Violence.” This protocol is used by medical officers to provide immediate and follow-up medical care to Volunteer victims. The update includes detailed medical and forensic examination instructions and additional notification procedures.
- In November 2011, the Peace Corps issued *Interim Policy Statement* 1-11 “Immunity from Peace Corps Disciplinary Action for Victims of Sexual Assault.” The interim policy provides the victim, as well as any witness who provides information or assistance in relation to the sexual assault, with immunity for Peace Corps policy violations related to the incident. This policy is intended to discourage focusing on the victim's behavior or otherwise blaming the victim and to encourage the reporting of sexual assault by the victim or other witnesses.
- Over the course of 2011 the Peace Corps entered into written agreements with two organizations to carry out specific collaborative sexual assault and prevention and



response duties. The Rape, Abuse and Incest National Network agreed to carry out collaborative activities, including sharing information and expertise in the areas of sexual assault prevention and response. The Department of Justice National Institute of Justice agreed to assist with planning for evaluation of the agency's sexual assault risk reduction and response program, and support in drafting a confidential survey of Volunteers regarding the safety of the Volunteers and the effectiveness of programs and staff.

On November 21, 2011, the President signed into law the Kate Puzey Act. This act establishes requirements for the agency to mitigate and respond to Volunteer rape and sexual assault through sexual assault risk reduction and response training, the development of a sexual assault policy, the establishment of an office of victim advocacy and a sexual assault advisory council, and other efforts. (See Appendix A for discussion of the agency's ongoing work to fulfill the Kate Puzey Act requirements.)

The Peace Corps continued to focus its efforts on mitigating sexual assault during 2012 by modifying and standardizing Volunteer safety and security trainings, along with other efforts. As mandated under the Kate Puzey Act, OIG will issue reports in 2013 evaluating the agency's implementation of Volunteer sexual assault risk reduction training and the sexual assault policy developed as a result of the Act, as well as other aspects of agency operations.

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## RESULTS OF REVIEW

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### *A. PEACE CORPS' GUIDANCE FOR RESPONDING TO VOLUNTEER VICTIMS OF SEXUAL ASSAULT*

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The Peace Corps developed and implemented new guidance and training during 2011 for post and headquarters staff through its *Response Guidelines*. The issuance of the *Response Guidelines* established a uniform response and notification protocol for Volunteer or trainee sexual assault incidents at all Peace Corps posts. The agency also issued its *Commitment to Sexual Assault Victims*, which spells out a response strategy predicated on compassion, safety, open communication, and respect for the privacy of sexual assault victims, which Volunteer victims had identified and underscored as a pressing need.

The agency's response to sexual assault should be considered in the context of the overall Volunteer safety and security program. Prior to issuance of the *Response Guidelines*, according to agency policy established in *Peace Corps Manual* section (MS) 270 "Volunteer Safety and Security," each post was expected to establish its own post-specific procedures for responding to V/T security incidents, including rape and sexual assault crimes committed against V/Ts. As we reported in our 2010 audit of the Peace Corps safety and security program, without standardization of the security program and clear lines of authority for oversight and monitoring compliance, the agency cannot ensure that posts fully and consistently implement effective safety and security policies. The agency-wide sexual assault *Response Guidelines* issued in 2011 should help ensure that a standardized step-by-step response and notification protocol and other necessary response elements are integral to each post's response effort.

In order to determine if Volunteer sexual assault victims were effectively supported, we evaluated post staff members' preparation and response to Volunteers reporting a sexual assault at selected posts from 2009 to 2011. Our interviews and document review focused on first response assistance, medical care, and safety, legal and administrative support. We interviewed Volunteer victims of sexual assault whose incidents occurred from 2009 through 2011 and staff members with first response, care, and support roles for sexual assault incidents. We conducted reviews of Volunteer medical and related files to assess support services provided to Volunteer victims.

The Volunteer victims of rape and major sexual assault we interviewed during our fieldwork at posts between June and September 2011 were generally satisfied with the quality of the agency's response and support received in the aftermath of their assaults. However, as discussed below, a standard agency protocol for response and care to Volunteers who report an OSA incident is not included in the *Response Guidelines*. As a consequence, we found that some staff members had not met all their support obligations to some OSA victims. The lack of an agency-wide protocol for response and care to OSA incidents creates the potential for inconsistencies or lapses in the response effort. The agency needs to take additional steps to ensure that its responses to all Volunteer sexual assault incidents are consistent, that staff are accountable, and there are systems in place to assess and address any shortcomings.

We describe a number of issues in our findings below where the rape and sexual response protocols or guidance are not sufficiently clear, resulting in some confusion among staff tasked with response to victims. Some of the confusion is caused by the lack of detailed descriptions of roles and responsibilities for staff members and offices. For instance, there is insufficient guidance regarding the agency's response to a Volunteer sexual assault when the alleged perpetrator is a Volunteer or Peace Corps staff member. Additionally, guidance outlined in the *Response Guidelines* and in TG 540 "Clinical Management of Sexual Violence" contains conflicting wording or instructions regarding notification of headquarters offices following a sexual assault, which has confused some staff members and could lead to lapses in response or care to the Volunteer victim.

***Sexual assault resources and guidance underwent significant revision during 2011 and more support was available to staff responders and Volunteer victims.***

According to the National Victim Assistance Standards Consortium's *Standards for Victim Assistance Programs and Providers*<sup>15</sup> (hereafter *Standards*), clear and comprehensive victim assistance program standards are essential to ensure quality, responsiveness, and accountability of services. Victim assistance program standards describe what should be accomplished by the program, methods of service delivery, and accessibility of victim services.

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<sup>15</sup> The *Standards for Victim Assistance Programs and Providers* was prepared under a grant awarded by the Office for Victims of Crime, Office of Justice Programs, U.S. Department of Justice. The National Victim Assistance Standards Consortium was established to address standards and credentialing for victim assistance providers. The *Standards* include: Victim Assistance Program Standards, Competency Standards for Victim Assistance Providers, and Ethical Standards for Victim Assistance Providers. (Dehart, D.D. *National Victim Assistance Standards Consortium: Standards for Victim Assistance Programs and Providers*, South Carolina: Center for Child and Family Studies, University of South Carolina, 2003).

The Peace Corps made significant additions and changes to its sexual assault policy and response guidelines during 2011. In January the agency issued the Peace Corps' *Commitment to Sexual Assault Victims* articulating seven principles Peace Corps staff are expected to employ when responding to a Volunteer victim of sexual assault. The *Commitment* is stressed during staff sexual assault training sessions, available on the Peace Corps' website, and is published in the *Volunteer Handbook*. Issuance of the *Response Guidelines* has provided the basis for a more uniform response and notification protocol at all Peace Corps posts for Volunteer sexual assault. Prior to the February 2011 dissemination of the *Response Guidelines* and the mandatory training session, posts were not required to provide sexual assault response trainings to first responder staff annually. Additionally, the content of each post's staff training programs was defined by post-specific crime response protocols rather than a standard sexual assault protocol employed by every Peace Corps post. A uniform agency-wide training module will support a more consistent level of staff preparedness for the response and care effort.

### Staff Training Supported Improvements in Immediate Response and On-going Support to Victims

OIG conducted interviews with field staff members at 15 posts and confirmed that they were familiar with the *Commitment*, and that the *Response Guidelines* training session was conducted as required following its dissemination. The *Response Guidelines* training included an overview of the *Commitment* and scenarios and role-plays intended to familiarize staff with a process to provide a victim-centered response. Staff members with first response roles and those with other responsibilities in the aftermath of an incident expressed confidence that they understood how each staff member and the post as a whole is expected to respond to Volunteer sexual assault crimes. There was broad agreement among staff members we interviewed that they were better prepared to respond according to the agency's *Commitment* and *Response Guidelines* goals to demonstrate a compassionate attitude and focus their attention on the victim's immediate safety and health care needs.

Staff with first response duties said the training session role play exercises allowed them to practice interacting with a victim using compassionate, non-blaming language in a simulated situation and that training increased their awareness of the medical, legal and support care to be provided by the post. PCMOs reported they are pleased that post staff is trained to ensure, first and foremost, that the victim is safe and to offer appropriate emotional support before referring the Volunteer to their care. Comments from staff about the training included below are representative of their overall comments:

“It was interactive, role plays, we were in the situation of the Volunteer...previous trainings were lectures and hard to remember.”

“...terrific, helpful, useful training. Very thorough...the role play was really good training...the step-by-step guideline was really clear and helpful.”

“Now I have better information and am able to explain the options the Volunteer has...for the most recent incident, the Volunteer has chosen to prosecute.”

### Some Posts Included All Post Staff or Repeated the *Response Guidelines* Training Sessions

A theme that emerged from our interviews with post staff members was the need for *Response Guidelines* “refresher” training sessions to be conducted at posts beyond the requisite one session per year. Staff believed this would be useful in order to ensure the response steps are well understood, and to allow first responders to practice role plays so they feel confident and prepared for a real incident. First responders who had multiple opportunities through role plays to practice providing a response to Volunteer victims reported feeling more confident to respond to actual incidents. Staff members also reported that receiving refresher training would be necessary to stay prepared. One staff member stated, “If nothing happens you have to stay refreshed to be prepared to respond.”

We found that CDs selected staff to be trained and conducted the *Response Guidelines* training differently at the 15 posts we reviewed. At eight of the posts we visited, all of the staff participated in the *Guidelines* training. Seven of the posts included just those staff members with defined roles as first responders, including duty officers, the SSC, and PCMOs. Some posts provided multiple trainings to ensure all staff members attended.

Many of the post staff members we interviewed felt that all post staff should be exposed to the *Response Guidelines* material, with in-depth training provided for first responders more than once per year. We concluded from our field work that conducting in-depth refresher trainings for first responders more frequently than once per year will help to ensure first responders feel prepared and ready to effectively respond to a Volunteer sexual assault incident. We also concluded that there are benefits to including all staff in a *Guidelines* training, such as ensuring staff understand the Peace Corps’ *Commitment to Sexual Assault Victims* and the importance of safeguarding the victim’s privacy. Including all staff in such trainings would ensure that all post staff members would be aware of the agency’s expectation regarding Volunteer sexual assault response, care, follow-up support, and the victim’s right to privacy and confidentiality, even if they do not have a defined response or support role. For example, drivers or program staff may not be informed that a sexual assault incident had occurred, but they frequently transport Volunteer victims or assess safety or other program considerations at a Volunteer site where a crime has occurred. Providing all post staff with training on the agency’s guidelines and protocols related to Volunteer sexual assault would also address the requirements contained in the Kate Puzey Act to train all staff outside the United States regarding the agency’s sexual assault policy.

### SS Office and Victim Advocate Services Headquarters Support

Volunteer victims of sexual assault who spoke with OIG, testified before Congress, or submitted written accounts of their assaults made it clear that more professional expertise should be brought to the agency’s response effort. Subject matter experts stress the importance of the accessibility of quality advocacy services following an assault as vital to diminishing the short- and long-term impacts of trauma.<sup>16</sup> In testimony to Congress, a subject matter expert who reviewed the agency’s response protocols testified that “Having a victim advocate there from the

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<sup>16</sup> DeHart, D.D., *National Victim Assistance Standards Consortium: Standards for Victim Assistance Programs and Providers* (South Carolina: Center for Child and Family Studies, University of South Carolina, 2003), p. 53.

beginning of the process...[will] allow [the victim] to focus on their recovery instead of navigating multiple systems.”

We found that for the rape and major sexual assault incidents we examined, the SS lead security specialist or, after May 2011, the victim advocate were available to assist posts in their response effort. Assistance to post staff included timely review and consideration of victim safety in the aftermath of a sexual assault, the host country legal environment and forensic medical examination process, and how and where to identify and collect evidence.

In February 2011, the agency initiated a search for a victim advocate to be responsible for:

- Serving as the principal agency advocate for Volunteers who become victims of crime.
- Developing processes to ensure effective communications channels for victims.
- Establishing best practice protocols for victim support.
- Developing training objectives and course materials for formal training programs in the area of victim's advocacy.
- Liaising and consulting with other federal agencies and outside organizations on victims' support and advocacy.

In May 2011 the victim advocate entered on duty and assumed a case management role to ensure Volunteer victims receive timely support services in the aftermath of serious crime incidents. During the remainder of 2011 the victim advocate provided support to 48 Volunteers in 28 countries. She supported 34 Volunteers and four RPCVs reporting sexual assault and 10 other Volunteers reporting crimes including physical assault, aggravated assault, burglary with assault, harassment, and stalking.

The type of services provided by the victim advocate included: explanation of support services available; in-country legal options; and assistance with site changes, country transfers, medical evacuations, and receipts of benefits. During her work at posts, the victim advocate accompanied victims to meetings with local police and court appearances. The victim advocate has worked with OIG, OGC, SS, OMS, and region and post staff to ensure consideration of victims' needs and perspectives, and to ensure that victims of sexual assault or other crime or safety incidents are treated with compassion and respect.

### **We recommend:**

- 1. That posts conduct annual “all staff” sexual assault training sessions and periodic first responder refresher sessions to ensure all post staff are fully informed of the agency’s sexual assault response policies and understand the response and care protocols.**

***Rape and major sexual assault victims we interviewed whose incidents occurred between 2009 and 2011 were generally satisfied with the agency's response.***

In issuing its *Response Guidelines* in February 2011 the agency advised posts that the guidelines were a “game plan by which post will provide timely and effective response, especially in the first crucial hours after the incident is reported.”

In its 2011 *Commitment to Sexual Assault Victims* the agency signaled a commitment to provide a compassionate and supportive response to all Volunteers who have been sexually assaulted. Sexual assault victims who had previously approached the agency regarding their incident, those who provided congressional testimony in 2011, and others who submitted written accounts of their experience expressed a range of concerns:

- Staff did not know what to say to the Volunteer victim or what support to offer.
- Staff “explained away” the attacker’s actions.
- Staff took no action when victims reported concerns about their personal safety.
- Victims felt pressured to leave their post or to leave service altogether.

We interviewed 17 Volunteer sexual assault victims who reported a rape, major sexual assault or other sexual assault between 2009 and 2011.<sup>17</sup> We asked Volunteer victims to discuss which elements of the staff members’ responses worked well and what could be improved. In addition to our interviews with these 17 victims, we interviewed five victims whose sexual assaults occurred before 2009. We also analyzed written statements submitted to OIG from 42 victims to identify aspects of the agency’s response they considered either satisfactory or unsatisfactory in their view. Written statements submitted to OIG provided perspective on agency response and care to victims prior to 2009; however, because of data limitations we could not verify statements made or determine the quality of the agency’s response and support provided to those victims. While we considered the issues and information brought to our attention by victims of sexual assault whose assaults dated back several decades or more, we established the 2009 to 2011 timeframe for our review in order to examine the agency’s response preparedness and capabilities in a contemporary timeframe, and to review action taken to support victims in relation to policies, protocols and guidelines.

In our interviews with Volunteer rape and major sexual assault victims whose incidents occurred from 2009 to 2011, the Volunteers’ accounts of the support received in the aftermath of their assault reflected general satisfaction with the agency’s response, care and support efforts. The Volunteer victims we interviewed generally agreed that:

- Volunteers were able to promptly contact staff in the aftermath of their incident.
- Staff responded compassionately.
- First responders and key staff members coordinated timely responses so that medical and safety/security staff could meet with Volunteers in person for medical and safety assessments.

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<sup>17</sup> See “Interviews Conducted” page 40 for a breakdown of Volunteers interviewed by sexual assault category.

- Staff adequately explained options for counseling and legal options to the Volunteer.
- PCMOs and/or, after May 2011, the agency’s victim advocate followed up with the Volunteer to monitor their well-being and to provide status updates on legal efforts or their continued service.

However, as we will discuss in our next finding, we found that some Volunteer victims of OSA incidents were less satisfied with the quality of the agency’s response and care, and that lapses in the response effort had occurred. This can be attributed in part to the lack of standardized protocols and procedures for this type of incident.

### Effectiveness of Post Staff’s First Response Effort

Volunteer victims we interviewed generally described staff members’ responses as “attentive,” “thorough,” and “available.” Staff were described as using non-blaming language while collecting information from the Volunteer regarding their location, safety and medical needs. In the aftermath of the immediate response effort, staff members discussed and offered victims options for counseling or to pursue prosecution. Volunteers who received counseling were generally satisfied with the counseling they received from headquarters COU or local counselors. Those choosing to pursue prosecution felt the appropriate steps were taken to collect forensic evidence and to accompany and support them when filing police reports or taking other legal action.

The following are examples of feedback provided by Volunteer victims describing their attitude about the overall response effort by post staff:

“The staff was very responsive.... The PCMO called me weekly to check on my situation.... The SSC checked on me several times.”

“More than anything else, [the PCMO] gave me some space to think about what happened. I was emotionally distraught.”

“Post was responsive, accommodating, available.... The SSC said the right things, ‘I’m sorry this happened to you.’”

“I called the SSC right away. Reporting was stressed in pre-service training... the SSC inquired about my condition... the PCMOs called me the next day... they put several options out for me for the future if I was having any problems. The SSC called me again in 2-3 weeks to see how I was doing.... I am very pleased with how this was handled.”

“I had more than adequate support from the medical office... the [in-country] counselor was phenomenal.”

### Staff Self-assessment of Preparedness to Respond

There was a consensus among the staff members we interviewed who serve as first responders that they have the necessary training and guidance to receive a sexual assault report and to help the Volunteer access support and begin their process for recovery. According to the OMS programming and training expert, a result of the focus given to this issue during 2011 in OMS’s Medical Overseas Training (MOST) and Continuing Medical Education (CME) seminars is that,

“PCMOs are better trained to sit with the victim and listen to their story, and to discuss options with the Volunteer to stay in country or be medically evacuated.”

Post staff members we interviewed described their preparedness to respond to a sexual assault as follows:

“[The] focus of the agency is to make sure we offer more psychological support, that the victim advocate is made available, that PCMOs are advocates for Volunteer welfare.”

“The most recent response worked well. The SSC coordinated with the RSO and the local police for evidence collection. The CD was coordinator and oversaw the response. Communication between each actor was good.”

“What works well in this post is they have a process and people work as a team, know their roles. They know they need to respond to the physical, emotional and the legal aspects.”

Written statements and testimony to Congress reflects that some past Volunteer victims felt that staff had taken no action in response to concerns they voiced regarding their personal safety at their sites. The agency has worked to address such issues through additional guidance and policy to staff. In September 2011 the agency issued *Safety and Security Instruction 202*, a guide for posts to respond to situations that threaten the well-being of Volunteers, including situations in which Volunteers express concern for their safety. This guidance includes removing Volunteers from their sites until the environment is assessed and any imminent threats are mitigated. In the interviews we conducted with Volunteers reporting sexual assaults from 2009-2011, we did not receive reports of staff failing to respond to site safety considerations.

### Support and Response to Victims in the Aftermath of the Assault

Blaming the victim has been raised as an issue by past Volunteer victims of sexual assault. In the past some Volunteer victims had been asked to develop written statements summarizing behavior that may have led to their assault. Others reported being placed on “behavioral contracts” concerning the abuse of alcohol. Subject matter experts emphasize that victim-centered response strategy recognizes “that victims are never responsible, in all or part, for their assault, regardless of the circumstances leading up to or surrounding the assault.” For instance, the *Standards* underscore that responders should refrain “from behaviors that communicate victim blame, suspicion regarding victim accounts of the crime, condemnation for past behavior, or other judgmental...sentiment.”

In November 2011 the Peace Corps issued *Interim Policy Statement 1-11* “Immunity from Peace Corps Disciplinary Action for Victims of Sexual Assault.” The purpose of the interim policy is to encourage Volunteers to report sexual assault and to discourage staff from focusing on the victim’s behavior or otherwise blame the victim for the assault, either directly or indirectly. The interim policy provides the sexual assault victim, as well as any witness who provides information or assistance in relation to the sexual assault, with immunity for policy violations related to the incident.

Subject matter experts stress that an important role of staff members responsible for the sexual assault response effort is to “mitigate the harm and trauma that victims experience” and allow



victims to experience a sense of justice regardless of the legal outcome of their case. It is important to establish an environment in which the victim believes “reporting to and participating in the criminal justice system is a safe and viable option.”<sup>18</sup>

We found that for some 2011 sexual assault incidents we examined, Volunteers were asked to submit a written statement to confirm that they declined to seek legal prosecution. Senior SS staff and others responsible for sexual assault response who we interviewed recognized this may be re-traumatizing for the victim. Senior SS staff have provided direct instructions to post staff to document the victim’s wishes in case notes and CIRS rather than collecting a written statement from the victim. They have also reviewed how staff should properly address this topic in staff training sessions, which is particularly important since the decision to proceed with prosecution may still be made by a victim at a later date. Use of a centralized case management system, which we address later in this report, would also offer a mechanism to collect and document information regarding victims’ wishes regarding prosecutorial or other legal options.

Volunteer victims who ended their service as a result of their sexual assaults had expressed concerns about the negative effects of the abrupt end to their Peace Corps service. They described emotional and re-adjustment challenges brought on by the sudden return home without having traditional end of service ceremonies and activities, as well as the challenges posed by explaining the unexpected early return to family and friends, or when seeking employment. We reviewed records of 2011 Volunteer sexual assault victims who had received support from OMS counselors and found that they had supported assault victims in close of service paperwork and had helped them prepare to respond to questions about their Volunteer service and abrupt close of service.

### Maintaining Victim Confidentiality

An element of victim-centered response is prioritizing the privacy of the victim and his or her right to confidentiality. The agency’s *Commitment to Sexual Assault Victims* underscores that staff will respect victim privacy and will not, without their consent, disclose their identity or share the details of the incident with anyone who does not have a legitimate need to know. Some staff members with long experience responding to Volunteer sexual assault and some subject matter experts who reviewed the *Response Guidelines* expressed concerns about maintaining victim confidentiality due to the increased number of staff members who have a role in the response effort.

Volunteer victims we interviewed whose incidents occurred during 2009-2011 did not raise breaches of their confidentiality as an issue. All PCMOs interviewed confirmed that, to their knowledge, victim confidentiality had been maintained for the incidents they handled. Staff members with first response roles indicated that a benefit of the *Response Guidelines* training was that they felt better prepared to take an initial victim report in a compassionate and thorough fashion, and at the same time, to limit questions and information gathered to what is required for an immediate response.

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<sup>18</sup> *The Sexual Assault Response Team (SART) Handbook*, Version III, July 2009 (Grant No. 2008-TA-AK-K029 awarded by the Office on Violence Against Women, U.S. Department of Justice).

MS 268 “Medical Confidentiality” and TG 150 “Medical Confidentiality” outline steps for safeguarding Volunteers’ medical information. The federal government also mandates specific rules for protecting personally identifiable information and certain medical information under both the Privacy Act and the Health Insurance Portability and Accountability Act of 1996.<sup>19</sup> Of note, some external subject matter experts reviewing the *Response Guidelines* recommended additional guidance and clarification from the agency regarding which staff members had a “need to know” about sexual assaults. Experts point out that without further guidance and clarification Volunteer victims might not feel comfortable reporting an incident. Due to the scope limitations of this review, we were unable to verify whether Volunteer victims view the number of staff members involved in the current response and support effort as a reporting deterrent.

***The agency does not have a standard protocol for response and support to Volunteers who are victims of “other sexual assault” incidents.***

The agency’s *Commitment to Sexual Assault Victims* states, “Peace Corps is committed to providing a compassionate and supportive response to all Volunteers who have been sexually assaulted,” and further states, “We will provide you with the support you need to aid in your recovery.” Most of the Volunteer sexual assault victims we interviewed reported that staff were responsive to their initial incident reports and followed up regarding their safety and well-being in the days and weeks after their assaults. However, Volunteers that reported OSA incidents were not consistently receiving medical consultations or the follow-up care and support they may have needed. Volunteers we interviewed who reported other sexual assault incidents received varied forms of response, and some received little or no safety and security or medical staff follow-up.

According to agency Volunteer crime incident data, from 2002 to 2010 sixty-six percent of reported sexual assaults were other sexual assaults. However, the agency’s *Response Guidelines* do not include a protocol for response to Volunteers who report OSA incidents. The response procedures contained in the *Response Guidelines* address actions to be taken only for victims of a rape/attempted rape or major sexual assault, and do not provide instructions for medical, legal, or safety and security support to OSA victims.

TG 540 provides guidance for PCMOs to treat and report Volunteer sexual assaults, including incidents that meet the definition of other sexual assault. TG 540 requires that PCMOs notify the CD, the victim advocate, the Office of Volunteer Support duty officer, and the area or regional PCMO when managing a Volunteer sexual assault incident. However, the *Response Guidelines* do not include protocols or instructions to staff.

MS 270 requires that CDs establish response and support procedures for all crimes committed against Volunteers. Therefore, crime notification and post follow-up procedures for OSA incidents are established individually by each post. Referring an OSA victim to the medical officer is dependent on post-developed protocol and may be at the discretion of individual staff

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<sup>19</sup> The Privacy Act of 1974 (P.L. 93-579), applicable to all U.S. agencies, protects the privacy of information the government keeps about individuals in name-retrievable files, but permits sharing of information on a need to know basis. The Health Insurance Portability Act of 1996 (P.L. 104-191) requires the establishment of national standards for electronic health care transactions and national identifiers for providers, health insurance plans, and employers; and also helps to ensure the security and privacy of health data.

members responding to the incident. Under these circumstances, PCMOs may not be informed of an OSA incident if there is no physical injury, or if the victims do not choose to report directly to the PCMO or seek counseling themselves after the incident.

The OSA cases we reviewed often required some ongoing monitoring by a PCMO or other staff member. Many of the Volunteers we interviewed said they benefited from a check-in and follow-up from staff after they reported their sexual assault. For example, a PCMO continued to check on a Volunteer's well-being after the decision was made to continue to serve in the same community where she was assaulted. Another PCMO informed of an OSA was able to promptly treat a Volunteer who began experiencing panic attacks a month after the incident occurred.

However, for some cases we reviewed, OSA victims received little or no follow-up because PCMOs were not informed of the incident, or the SSC taking the initial report of the incident did not refer the Volunteer to the PCMO for consultation. We found that without a physical injury, PCMOs were less likely to receive notification of an OSA either directly from a Volunteer or from the SSC. PCMOs may not routinely have access to the post's crime incident reports, and those with access may not be immediately informed of a Volunteer OSA by another staff member when the incident occurs.

OSA victims said PCMO follow-up would have helped them to better cope with psychological or emotional issues that emerged after the incident. These issues included symptoms of stress and negative attitudes towards their host community. Some Volunteers who reported OSA incidents had experienced serial or escalating incidents of harassment or sexual assault. Follow-up contact by medical staff or the SSC offers the opportunity to review Volunteer safety preparedness, site security, or to suggest mitigation strategies.

Volunteer OSA victim comments regarding incidents in which the PCMO was not notified included the following:

"...the only area I would want some different approach on was I never got any other follow-up from SSC [name] or maybe the PCMO — I don't know if they did not see a need to, or if it was overlooked, but I reported and that was it. Maybe [the SSC] determined I was not too bothered by it and did not pursue it."

"The SSC told me a PCMO would call me and it never happened. At the time I realized I really would like to process this a little more with someone. I was mad that these events had occurred and even got a little down about the country as a result."

According to MS 270, the SSC "is responsible for the overall coordination of the post's Volunteer safety and security support system and must collaborate closely with other staff to ensure that all required components of the Volunteer safety and security support system are operational and are being properly executed." However, we determined that some SSCs had made their own judgments regarding the well-being of the Volunteer OSA victim without involving the PCMO or other post staff. It is clearly inappropriate for an SSC to make clinical judgments regarding a Volunteer's physical or emotional well-being.

Senior staff at the posts we visited and headquarters medical and safety specialists agreed that PCMOs should always be notified when a Volunteer reports an OSA. The PCMO is the only post staff member qualified to recognize symptoms of behavior triggered by a traumatic event

and develop a treatment plan for a sexual assault victim. PCMOs have the training and experience to conduct physical examinations of Volunteers and to detect post-trauma symptoms. PCMOs and regional or headquarters medical staff have access to Volunteers' medical histories and may have knowledge of previous traumatic events, including prior sexual assaults, which may influence the services or treatment provided to the victim.

Without a standardized protocol for responding to OSA incidents, post staff cannot consistently provide response and follow-up care to Volunteer OSA victims. The lack of a standardized protocol presents the potential for lapses in the first response effort or poor quality care for Volunteers who experience OSA incidents. Prompt and appropriate care for OSA victims would help prevent or reduce post-trauma symptoms that may occur in the aftermath of the incident. Documentation of all OSA incidents in the Volunteer's medical record also ensures the Volunteer receives any treatment that may be needed after the close of service.

**We recommend:**

- 2. That the agency develop sexual assault policy and guidance for other sexual assault (OSA) incidents including procedures for taking reports and responding to the care or support needs of OSA victims, and that it incorporate this guidance into its *Response Guidelines*.**

***Procedural or informational gaps in the Guidelines for Responding to Rape and Major Sexual Assault led to confusion or delays in reporting some incidents.***

In order to establish a clear understanding of the duties assigned to staff members who respond to sexual assault and to ensure accountability, the *Standards* recommend written guidelines for all program staff. The *Response Guidelines* are missing guidance related to the responsibilities of some key staff members or Peace Corps offices with Volunteer sexual assault victim response duties. We found that:

- Some CDs lacked a full understanding of the lines of responsibility between the agency and OIG.
- The *Response Guidelines* do not define the role of the victim advocate hired in May 2011 or describe the specific support role of the SSC in Volunteer sexual assault incidents.
- Differences in protocols contained in the *Guidelines* and TG 540 "Clinical Management of Sexual Violence" were confusing to some CDs and PCMOs.

Addressing these gaps and the differences in policy and protocol will lead to improved support of Volunteer victims of sexual assault.

## Role of OIG in Response to Volunteer Sexual Assault

Some rape or sexual assault incidents at Peace Corps posts involve incidents in which a Volunteer or a Peace Corps staff member is the alleged perpetrator, or both the victim and alleged assailant are Volunteers. According to CIRS data, from 2009 through 2011 there were 16 reported rapes or sexual assaults in which the alleged perpetrator was another Volunteer, and one reported other sexual assault in which the alleged perpetrator was a Peace Corps staff member. During this three-year period, in total, there were 450 reported rape or sexual assault incidents against Volunteers.

MS 861 “Office of the Inspector General” stipulates that its investigative unit will investigate suspected or reported allegations of wrongdoing or serious misconduct when allegations involve agency employees, Volunteers, trainees, companies, consultants, experts or others receiving funds from the Peace Corps. MS 861 specifically instructs that all allegations of Volunteer sexual assault in which the alleged perpetrator is a Volunteer, trainee, or staff member be reported to OIG. When OIG assumes responsibility for cases of alleged sexual assault involving a Volunteer victim and a Volunteer or staff perpetrator, it advises Peace Corps staff that interaction with the involved Volunteers should be limited to providing medical and other support until an OIG investigator is available to respond.

Some CDs have misinterpreted or misunderstood the *Response Guidelines* regarding reporting to OIG or the actions to be taken in the immediate aftermath of reported Volunteer-on-Volunteer sexual assault. This has resulted in the interview of an alleged Volunteer perpetrator prior to reporting the incident to OIG. In another case, a CD was uncertain regarding the requirement to immediately report allegations to OIG, resulting in delays in notification.

According to OIG senior managers, the OIG is required to carry out investigations “in accordance with applicable laws, rules, standards and regulations and with due respect for the rights and privacy of those involved.” Interviews of Volunteer victims or perpetrators conducted by staff in advance of OIG investigation can interfere with OIG’s ability to carry out its investigation and may jeopardize the legal or privacy rights of those involved. Any delay in reporting or initiating investigative activity could negatively impact the outcome of an OIG investigation.

There is limited agency guidance on how to handle some of the unique issues that arise in responding to Volunteer-on-Volunteer sexual assault allegations. The agency’s *Response Guidelines* have a single reference to the role of OIG: “If the Volunteer was assaulted by a staff member or another Volunteer, the Country Director (CD) must also notify the Office of the Inspector General (OIG).” In our interviews with staff members who had recently managed a Volunteer-on-Volunteer sexual assault, some reported that they lacked specific guidance on the steps to take, including provisions to be made for the safety, housing, support, or care to both the victim and the alleged perpetrator in the immediate aftermath of these allegations. A revision to the *Response Guidelines* that describes OIG’s role and investigative responsibilities and updating sexual assault response training modules to include this information, would help eliminate confusion on the part of staff.

## Role of the Victim Advocate

A victim assistance provider's role may encompass a range of services and activities depending on a victim's individual mental, physical, social, and emotional needs. Typical victim assistance services include crisis intervention, assessment of basic victim needs, information and referral, court accompaniment, intermediate and long-term support services, case planning, and consultation with other professionals involved in the response to and support of the victim.

The agency hired a victim advocate who entered on duty in May 2011. The victim advocate immediately initiated response support to Volunteer victims of crime. However, due to the fact that the victim advocate was hired several months after the *Response Guidelines* were distributed, the role of the victim advocate is not delineated in that document. The agency did not issue written guidance to posts describing the role of the victim advocate until November 10, 2011. In that communication, posts were advised that "the victim advocate serves as a liaison between and advisor to Peace Corps posts and offices involved in providing response and support services to Volunteers who have been victims of sexual assault and violent crime."

As a result of this six-month lapse in notification, there was some confusion at posts regarding the victim advocate's role and responsibilities during her initial months of service. Some field staff members reported they were uncertain of the victim advocate's role when initially contacted by her and were not certain of the protocol for sharing Volunteer sexual assault information with the victim advocate. Over time, staff reported that the victim advocate's role became better understood and that the support provided has been useful. A full description of the victim advocate's services and role in the *Response Guidelines* document and in sexual assault response training modules would help eliminate confusion on the part of post staff.

## Role of Safety and Security Coordinator

SSCs are assigned to all Peace Corps posts as part of the agency's commitment to the safety and security of Volunteers. The SSC *Statement of Work* lists the following responsibilities for support functions related to a Volunteer crime incident:

- "Develop and maintain contact with embassy security staff and local law enforcement... to foster relationships that can be leveraged... in response to crime incidents;"
- Provide "immediate and direct support to a [Volunteer] in the event of an incident" including to refer Volunteers "to necessary medical and emotional support, assist [Volunteer] to file a police complaint, and reevaluate the Volunteer's site and/or home;"
- "Participate in the legal environment survey... so that they can accurately advise the CD and [Volunteer] when crime incidents occur;"
- Coordinate the post duty officer system and "train designated duty officers on their roles and responsibilities for responding to and reporting of incidents."

The SSCs we interviewed reported that, as a result of the 2011 *Response Guidelines* training, they understand the steps the post is expected to take in its response to a Volunteer sexual assault incident. They described their duties in the aftermath of a sexual assault, such as submitting CIRS reports to headquarters, assisting Volunteers with police reports, or assessing the safety and security of a Volunteer victim and the Volunteer community. However, the SSC-specific

roles and responsibilities in the aftermath of a Volunteer sexual assault are not directly addressed in the *Response Guidelines*.

The *Response Guidelines* section “Resources in the Field” describes services the U.S. Embassy’s RSO and regionally-based Peace Corps safety and security officer may provide in the aftermath of a sexual assault; however, there is no reference in this section to the SSC as an available resource in the sexual assault response effort. SSCs are dedicated safety and security resources in place at each post who can help ensure the post is providing a quality response and fulfilling its *Commitment to Sexual Assault Victims*. In order to be deployed effectively as a resource, SSC responsibilities for response and support to Volunteer sexual assault victims should be clearly spelled out in the *Response Guidelines* and included in sexual assault response training modules.

#### Mixed Agency Guidance Regarding Headquarters Notification of Volunteer Sexual Assault

Post staff members are expected to follow the *Response Guidelines* disseminated in February 2011 to conduct a timely and effective response in the first crucial hours after an incident is reported. However, the notification protocols described in the *Response Guidelines* and TG 540 “Clinical Management of Sexual Violence” created some confusion regarding the process for reporting to headquarters. As a result, we found situations in which PCMOs had not notified the headquarters OMS Duty Officer in the aftermath of a sexual assault because they believed that CD notification to the Peace Corps headquarters duty officer satisfied the requirement to notify Peace Corps headquarters (see Figure 1, p. 8 for the current reporting protocols).

The purpose of TG 540 is “to establish procedures to provide patient-centered medical care and appropriate medical-legal management of Volunteers who have been sexually assaulted.” According to TG 540, when managing a sexual assault PCMOs must “contact the headquarters Volunteer Support duty officer and the Peace Corps regional medical officer or area Peace Corps medical officer as soon as possible, but no later than 24 hours after the incident.”<sup>20</sup> Notifying OMS staff ensures that timely, adequate medical and mental health support is provided to the victim. In addition to the PCMO’s TG 540 reporting requirements, the *Response Guidelines* require that the CD report rape/attempted rape and major sexual assault to SS to ensure the victim’s safety and security needs are met. The *Response Guidelines* require that the CD verify that the PCMO has contacted the OMS duty officer.

We asked PCMOs at posts we visited to describe their responsibilities for sexual assault response. It was unclear from the responses PCMOs provided that they were all fully aware of their responsibility to notify the OMS duty officer in the aftermath of a reported sexual assault. SS and OMS staff agreed that there was a need to align the *Response Guidelines* notification protocol with the TG 540 instructions. The *Response Guidelines* do not state a specific time requirement to notify the OMS duty officer; TG 540 instructs the PCMO to notify the Volunteer Support duty officer and the regional or area medical officer within 24 hours. The policies refer to the OMS duty officer using different titles: one refers to the medical duty officer as the “Volunteer Support duty officer,” and the other refers to the same individual as the “OMS duty officer.”

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<sup>20</sup> Regional or area medical officers provide support to post PCMOs.

**We recommend:**

- 3. That the agency incorporate the following topics into its *Response Guidelines* and staff training modules: the role of the victim advocate, the role of the safety and security coordinator, and the role of the Office of Inspector General for investigating Volunteer sexual assault.**
- 4. That the agency clarify notification requirements and align instructions in the *Response Guidelines* and *Medical Technical Guideline 540* to ensure clear and specific instructions for notification of headquarters offices in the aftermath of a Volunteer rape or sexual assault.**

#### ***B. SEXUAL ASSAULT STAFF TRAINING***

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To assess sexual assault training provided to Peace Corps staff in 2011, we reviewed curricula and observed staff safety and security and rape/sexual assault response training sessions conducted by the agency in 2011. We interviewed staff with response and care responsibilities during and after these training sessions and asked them about their preparedness to respond to sexual assault victims. We compared staff training programs conducted in 2011 with staff training delivered prior to 2011 and learned about changes in the training modules from participating staff.

Peace Corps added to and expanded sexual assault awareness and response training for staff in 2011. The agency delivered more in-depth training on safety and security and sexual assault topics to staff in a variety of training settings during the year. It delivered training to CDs and directors of program and training (DPTs) who participated in the Overseas Staff Training (OST) program in June and October 2011; to SSCs, DPTs and training managers in regional safety and security training-of-trainer presentations conducted in 2011; and to PCSSOs in a training conference held in July 2011. All PCMOs in our review of 15 posts received in-depth sexual assault training either at a regional continuing education conferences or at the Medical Overseas Staff Training sessions offered during 2011.

We determined that the 15 Peace Corps posts we visited had delivered the *Response Guidelines* training session as required. Staff members who received these trainings reported that they felt better-prepared to respond to Volunteer victims of sexual assault. However, we found that not all staff members with responsibilities as first responders at these posts had attended the mandatory *Response Guidelines* training as required.

Staff members we interviewed told us that the *Response Guidelines* training provided a forum to discuss American and host country perceptions, culture, laws and norms regarding appropriate and inappropriate sexual behavior, and to consider these attitudes in the context of the agency's *Commitment to Sexual Assault Victims*. Some posts have used the country-specific information



generated from those discussions to strengthen harassment and sexual assault awareness and mitigation strategies in their Volunteer training programs. Capturing and incorporating this information into Volunteer, counterpart, partner agency, and post staff training programs is a best practice that could be extended to other posts as they conduct annual *Response Guidelines* or related staff training.

We found that staff members assigned as acting CD were not consistently trained to conduct incident response or oversee sexual assault incident management during a CD's absence. We also observed that some headquarters staff members with rape and sexual assault response and support roles did not receive formal *Response Guidelines* training in 2011.

***Participation of country directors and medical officers in the 2011 Response Guidelines training was inconsistent.***

The *Standards* recommend written guidelines for the required hours of training and content for staff providing victim services, and for ongoing professional staff development in order to build the necessary skills for direct services and coordination of services to victims.

Prior to the February 2011 dissemination of the *Response Guidelines* to all Peace Corps posts and the mandatory training sessions on the *Guidelines*, posts were not required to regularly provide standardized sexual assault response trainings to first responder staff. The content of each post's staff training programs was defined by the post-specific crime response protocols rather than a standard protocol used by every Peace Corps post. The agency began offering the *Response Guidelines* training to new CDs in OST training programs delivered during 2011. Prior to 2011, sexual assault training was provided to new PCMOs in MOST each year, and every few years PCMOs also received refresher trainings during CME conferences.

On February 24, 2011, the agency transmitted the *Response Guidelines* to all posts, and the following month it transmitted *Guidelines* training materials and a facilitator's guide to posts. In the agency's transmittal memo accompanying the *Response Guidelines*, CDs were advised "it is essential that you become intimately familiar with the procedures set forth in the *Response Guidelines* and ensure that they are followed in the event that such an incident occurs at your post." CDs were advised to personally convene training sessions to be conducted by appropriate staff members, such as the Director of Programming and Training (DPT), PCMO, SSC, or regional PCSSO, and to ensure that key staff members, especially those who serve as duty officers, were trained in the new procedures. CDs were further instructed to provide this training annually to all staff members with first responder or other care and response roles.

We interviewed staff members from 15 country programs who participated in the 2011 *Response Guidelines* training conducted at their posts. Post staff members who participated in these trainings reported they felt better prepared to respond to Volunteer sexual assaults. Volunteer sexual assault victims' feedback confirmed that post staff members' responses have improved.

We found that not all CDs and PCMOs attended the *Response Guidelines* trainings as instructed. One CD and three PCMOs we interviewed reported they did not attend the *Response Guidelines* training. We discussed with staff the benefits of CDs and PCMOs attending the *Response*

*Guidelines* training, such as confirming staff members' willingness and ability to serve as first responders, and participating in discussions and answering questions.

**We recommend:**

- 5. That the agency ensure that all country directors, Peace Corps medical officers and staff with a sexual assault response and care role attend annual *Response Guidelines* training sessions, and that staff participation in training be tracked and documented.**

***Staff members assigned as acting CDs were not consistently trained to conduct incident response or oversee sexual assault incident management.***

Volunteer sexual assault victims submitted complaints to the agency and OIG that they had not received adequate response or support from acting or back-up staff in the aftermath of their assault incident. We reviewed the agency's process and materials for training staff to serve as back-up CD. We also observed the OST sessions related to Volunteer safety and response to crime incidents. We found that staff members who serve in an acting capacity were not consistently receiving training that would prepare them to perform the Volunteer sexual assault response and follow-up duties expected of an acting CD. We note that the agency's Sexual Assault Working Group identified this as an issue in 2008.

Post directors of management operations (DMOs) and DPTs are routinely asked to act on behalf of the CD in his/her absence. We reviewed DMO and DPT position descriptions and performance plans furnished to us by regional management and the Office of Human Resources. We found that the position descriptions and performance plans are not consistent in referencing the responsibilities to manage the post response to sexual assault while serving on behalf of the CD in his or her absence.

Some of the staff members we spoke with at posts, including those who had received the 2011 *Response Guidelines* training, reported that they did not feel fully prepared to respond to sexual assault incidents while serving as acting CD. We observed overseas staff training sessions in 2011 and reviewed the materials provided to staff. DPTs and DMOs participated in the sexual assault awareness and response training sessions; however, their specific responsibilities while serving as acting CD were not treated in these training modules. Instead, the DPTs and DMOs were encouraged to consult with their CDs at post to discuss these duties further.

We reviewed materials distributed at the OST training program. The guidance distributed to DPTs regarding their duties as acting CD stated they must be prepared to respond to Volunteer rape and sexual assault and ensure the safety and well-being of Volunteers in a crisis situation. However, the distributed materials referenced outdated policies and did not reference the *Response Guidelines* or the post's LES. For instance, the training materials advised acting CDs to phone the regional director or the country desk officer in the event of a major crisis. This

conflicts with the *Response Guidelines* requirement to notify the headquarters duty officer that a rape/attempted rape or major sexual assault had been reported by a Volunteer, and could make it more difficult for the duty officer to provide immediate guidance to acting CDs.

**We recommend:**

- 6. That the agency provide Volunteer sexual assault response training for staff members who will serve as acting country director, and include the duties for managing sexual assault response in overseas staff training modules.**
- 7. That, for those staff who will serve as acting country director, the agency include the duties and responsibilities for managing Volunteer sexual assault response in position descriptions and performance plans.**

***Some headquarters staff members with responsibilities for response or care to sexual assault victims had not participated in the 2011 sexual assault Response Guidelines training.***

The agency's *Commitment to Sexual Assault Victims* states that the Peace Corps will take appropriate steps to provide for the victim's ongoing safety, to help them understand the relevant legal processes and legal options, and to provide the support needed to aid in recovery. In order to meet that commitment, headquarters staff members with responsibilities for responding to Volunteer sexual assault incidents, and those with responsibilities for training Peace Corps staff members as first responders, need to be fully knowledgeable of the agency's sexual assault policies and response protocols.

In 2011 some headquarters staff members with responsibilities to support post staff or Volunteer victims were provided with *Response Guidelines* training. This included selected staff from SS, OMS, and COU, among others. However, we confirmed in interviews that not all VS, OMS and OGC staff with responsibilities for responding to Volunteer sexual assault incidents participated in training sessions on the *Response Guidelines*.

We attended training sessions presented in the October 2011 MOST program and observed OMS headquarters staff facilitating case study scenarios and role plays. Some of the MOST facilitators were not fully familiar with the *Response Guidelines* and did not consistently reinforce current policy and protocol when they fielded questions in those training sessions. As a result, information provided to MOST participants regarding headquarters notification and the time-frames in which to make notifications conflicted with the *Response Guidelines*. Additionally, some headquarters staff drew upon their prior field experience and referred to policies and practices for responding to Volunteer sexual assault victims that are no longer current.

The agency's MOST training program is the primary opportunity to provide new PCMOs with information on response, care and reporting requirements and to discuss the issues and challenges involved with response to Volunteer victims of sexual assault before they take up their work at posts. Outdated or incorrect information delivered in MOST sessions could result in inconsistencies in a PCMO's response to a Volunteer sexual assault incident or in how headquarters staff provides support to them in the field. Headquarters staff members responsible for response or support of Volunteer sexual assault incidents or for training or supporting first responders would be better prepared to provide more consistent victim-centered care if they all receive the *Response Guidelines* training annually.

**We recommend:**

- 8. That the agency provide annual *Response Guidelines* training to all headquarters staff members responsible for supporting victims or training staff in the response to Volunteer sexual assault incidents.**

*C. VOLUNTEER SEXUAL ASSAULT VICTIM SUPPORT*

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In order to determine if Volunteer sexual assault victims are effectively supported, we reviewed the policy requirements for each post according to MS 270 "Volunteer/Trainee Safety and Security," as well as the instructions issued February 2011 in the *Response Guidelines*. We also referred to the Peace Corps' *Commitment to Sexual Assault Victims* as a basis to evaluate the response and support provided to Volunteers. To assess post preparation to support Volunteer crime victims, and sexual assault and rape victims in particular, we asked CDs and embassy regional security officers to describe the support the post may receive from the U.S. embassy regional security officer in the event of serious crimes committed against a Volunteer. The *Response Guidelines* specify six actions that must be completed at every post to ensure it is prepared to respond to a rape or major sexual assault:

- Identify a local attorney for consultation
- Complete the LES
- Develop useful contacts
- Determine whether the PC-supplied sexual assault exam kit can be used
- Train staff to respond to a rape or major sexual assault, and
- Train Volunteers on sexual assault risk reduction strategies.<sup>21</sup>

As we previously reported, the Volunteer victims of rape and sexual assault we interviewed whose incidents occurred between 2009 and 2011 were generally satisfied with the response and support they received from the agency, but some OSA victims did not receive a consistent

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<sup>21</sup> Volunteer safety and security training, including newly developed standardized training for Volunteers on sexual assault awareness, risk reduction strategies, Peace Corps reporting and response protocols, and bystander intervention mandated under the Kate Puzey Act will be the subject of a separate OIG review during Fiscal Year 2013.

response from staff. We found that some posts we visited would be better prepared to respond to sexual assaults by completing or updating their LES, sharing this information with post staff members who have a role in the response, and discussing any updates to the Peace Corps' sexual assault policy and protocol with the U. S. Embassy's regional security officer. The agency could also improve the effectiveness of its overall response effort, and provide performance feedback to staff who respond to and support victims, through use of a standard case management database for sexual assault incidents.

***Posts' preparation for legal or prosecutorial support to the Volunteer in the aftermath of a sexual assault was incomplete.***

The Peace Corps' *Commitment to Sexual Assault Victims* states that the agency will help the victim understand legal processes and options, and keep them informed of the progress of their case should they decide to pursue prosecution. Some Volunteer victims who had previously provided testimony and affidavits on their experience to the agency and OIG said that they were not provided with sufficient information to help them with this decision, or to understand the legal process that would take place should they decide to pursue prosecution.

The *Standards* encourage establishing written guidelines that outline resources and procedures for providing information to victims on justice interventions, including information on current laws, and appropriate resources.

The *Response Guidelines* stress that the CD, PCMO, and SSC must familiarize themselves with local laws regarding the collection of evidence, because knowledge of the proper procedures to follow when a sexual assault occurs is critical to the outcome of legal proceedings and to ensure the rights of the victim are protected. The *Response Guidelines* state that CDs are to complete a post-specific LES and to review this information before taking any response action. According to the *Response Guidelines*, the LES is to be reviewed annually by the CD and updated as necessary.

The LES is expected to contain specific information relative to the crime of rape or sexual assault in the host country and detailed information on the legal process, filing a complaint in a criminal case, the prosecution and court process, the rights of the suspect and victim, as well as resources that may be of assistance during an investigation or prosecution. The *Response Guidelines* instruct the CD to develop useful contacts with host country law enforcement officers, senior officials in the judicial branch, and sexual assault examiners, and to identify an attorney who can provide information about the local court system and be available for emergency consultation before a crime incident occurs. Detailed information in the post's LES helps ensure that staff accurately provide the Volunteer victim an overview of the legal process, such as the steps involved in filing a police report and for pursuing a prosecution. Knowledge of this information is critical to ensure mistakes which could jeopardize the Volunteer's ability to prosecute are not made. The information contained in the LES is also used to train staff and Volunteers.

We interviewed CDs, PCMOs and SSCs and found that some of them were not fully familiar with the information contained in their post's LES. In particular, some staff members lacked

sufficient knowledge regarding the host country's legal processes or the process for collecting forensic evidence. This has led to misinformation to victims regarding the local legal process, or situations where PCMOs unfamiliar with the process for collecting forensic evidence initiated this process incorrectly.

Five of the ten CDs we interviewed said they were not sufficiently knowledgeable of all local laws related to a sexual assault and criminal prosecution of rape or sexual assault. One CD was unfamiliar with the next steps in legal proceedings after a police report is filed. Other staff members we interviewed described gaps in their knowledge of the post's LES. An SSC indicated that he was not sufficiently familiar with the legal process when a Volunteer victim decides to pursue prosecution. Another SSC reported that the LES was not frequently referred to at his post because no Volunteer rape victims had decided to pursue prosecution since his hiring in 2005. We found that two PCMOs had performed forensic examinations which did not conform with host country laws. In both cases their LES indicated that, for evidence to be admissible in court, a host country medical doctor must perform the forensic exam. We found that the lack of staff familiarity with local laws related to sexual assault crimes and their prosecution was attributable to either inattention to regular updating of the post's LES or to insufficient knowledge of its contents.

Although the *Response Guidelines* instruct CDs to complete an LES and update it at least annually, the agency has not established a policy requirement regarding its completion or for the systematic oversight or review of its contents for completeness. The *Response Guidelines* instruct CDs who do not have a completed LES for their post to schedule a visit with their regional PCSSO to assist with completing one as soon as possible, and it instructs PCSSOs to complete the survey. According to senior staff members we spoke with, it is up to posts to ensure they have accurate, complete legal environment information.

Frequent monitoring and updates to the LES to incorporate changes to local laws, and a good base of knowledge for reporting, investigating, and prosecuting sexual assault crimes would help ensure a well-coordinated response with local authorities and the best outcomes for Volunteer victims who choose to pursue legal proceedings. We wish to note that those CDs who reported during our interviews that they were not fully familiar with the local legal environment indicated that they planned to perform additional work to complete the LES and to review all the information in it.

**We recommend:**

- 9. That the agency establish policy to require that post staff who have response roles annually review the “Survey of the Local Legal Environment” (LES) to familiarize themselves with information contained in the LES and to determine if updates are required.**
- 10. That the agency review all posts’ “Survey of the Local Legal Environment” to ensure information has been fully and accurately collected.**

***CDs were not well-informed of Department of State support and resources to be applied when crimes against Volunteers occur.***

According to the *Standards*, “whenever possible, written protocols and interagency agreements are to be established” for coordinated responses to sexual assault incidents. The *Standards* recommend that definitions of roles and relationships, communication protocols, and the provision of support be formalized by interagency agreement. Some of the Volunteer victims providing testimony to Congress or written statements regarding the agency’s response to their sexual assaults did not feel that the agency had responded quickly, professionally, and to the fullest extent possible. Formal agreements or memoranda of understanding (MOU) that bring additional resources to the response effort, particularly for investigative activities or legal proceedings, would positively impact the handling of the sexual assault crime incident.

The need for formal documentation between the agency and the Department of State (DS) to clarify roles and responsibilities when crimes are committed against Volunteers has been cited by OIG in a 2010 audit report recommendation<sup>22</sup> and in 2011 testimony to Congress<sup>23</sup> as an important element to ensure that a thorough response effort is carried out. OIG has underscored that such an agreement would be a critical step towards improving the agency’s overall capacity to effectively respond to Volunteer security situations. The Kate Puzey Act required that the Peace Corps consult with DS and enter into an MOU that specifies the duties and obligations of the Peace Corps and the DS Bureau of Diplomatic Security with respect to the protection of Volunteers and staff members, including investigations of safety and security incidents and crimes committed against Volunteers and staff.

On May 11, 2012, the agency entered into an MOU with the DS Bureau of Diplomatic Security. The MOU sets out the understanding of the parties regarding:

- Physical, technical and procedural support by DS for the security of Peace Corps operations abroad.
- DS support in responding to crimes against Peace Corps Volunteers.
- Personnel security investigations of Peace Corps staff by DS.
- Training services provided by DS to Peace Corps staff and Volunteers.
- Funding and reimbursement for services provided to the Peace Corps by DS.

Prior to the establishment of the MOU, support and assistance from U.S. Embassies had been provided to Peace Corps posts on a case-by-case basis as requested by the post or headquarters personnel. We found that the Peace Corps’ and embassy staff members’ awareness of the types of support that may be requested or provided in response to crimes against Volunteers was inconsistent at many of the posts we visited.

In February 2009 the DS transmitted Cable 12291 entitled “PC-Diplomatic Security Response to Crimes against PCVs” to all U.S. diplomatic, consular and Peace Corps posts. The cable contained guidance regarding “inter-agency activities related to crimes against Volunteers

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<sup>22</sup> OIG, *Peace Corps Volunteer Safety and Security Program*.

<sup>23</sup> Kathy A. Buller, Inspector General, Peace Corps, “Peace Corps at 50,” testimony to Committee on House Foreign Affairs, May 11, 2011.

overseas” and defined the relationship between the U.S. Embassy’s regional security officer and the CD in the event of serious crimes committed against Volunteers. The cable advised posts and embassies that “Peace Corps will notify the RSO of any assistance that is being requested, with the understanding that the RSO and embassy determine the scope and extent of RSO involvement and activity in the matter.” The cable was made available to Peace Corps posts on the agency’s SS office website in its “Protocols” section. Until establishment of the Peace Corps-DS MOU in May 2012, Cable 12291 had been the only formal DS-Peace Corps communication available to posts and embassies describing the type of support a U.S. Embassy may provide to a Peace Corps post in response to a Volunteer crime incident.

The *Response Guidelines* also inform posts that “Depending on the circumstances, the local U.S. Embassy—and in particular the Regional Security Officer—may be able to provide significant assistance.” The *Response Guidelines* instruct CDs to notify the U.S. Embassy regional security officer of a rape or major sexual assault immediately if the assault occurred within the last five days, and no later than the next business day if it occurred more than five days prior to reporting by the victim.

The *Response Guidelines* list the types of support the U.S. Embassy’s regional security office may provide:

- Accompany local law enforcement officials during the investigation and provide guidance when appropriate
- Express the U.S. Government’s interest in seeing the investigation conducted in an objective and timely manner
- Update the Peace Corps concerning the progress of the investigation, collection and processing of physical evidence
- Recommend appropriate points of contact within the host country law enforcement community
- Facilitate access to/obtain copies of host country law enforcement reports or documents related to a Volunteer rape or major sexual assault case
- Facilitate the transfer of evidence from host country law enforcement to the Federal Bureau of Investigation when appropriate

We found through our interviews that CDs and U.S Embassy RSOs were generally unfamiliar with DS Cable 12291. Seven of 11 CDs and five of eight RSOs reported they were not familiar with the specific information contained in cable 12291 outlining the services and support available from the embassy regional security officer. Only four of eight RSOs we interviewed confirmed that CDs had discussed the *Response Guidelines* or the post’s LES with them since the *Response Guidelines* were issued in February 2011.

The *Response Guidelines*, the *Commitment* statement, and the other revisions to agency sexual assault policy and protocols are important steps in the agency’s response to Volunteer victims of sexual assault. In order to ensure that all available resources are quickly and fully directed to the response effort, CDs will need to ensure that U.S. Embassy RSOs are aware of the resources and assistance that may be requested in the aftermath of a Volunteer sexual assault. CDs will need to discuss and update RSOs or other embassy officials on changes to the Peace Corps’ sexual assault policy and protocol such as the Peace Corps-DS MOU. It will also be important to clarify the working relationship between the post and the embassy on a periodic basis as Peace Corps or embassy personnel are reassigned or other changes occur.



**We recommend:**

- 11. That country directors provide the U.S. Embassy’s regional security officer with a copy of the “Survey of the Local Legal Environment” and meet to review the support services that may be provided under the Peace Corps-Department of State Memorandum of Understanding in an initial meeting and when new country directors or regional security officers arrive at post.**

*The agency lacked a centralized case management system to verify sexual assault response requirements have been fulfilled, assess performance, and provide feedback to responders to make process improvements.*

In May 2011 congressional testimony Volunteer victims expressed concerns regarding staff accountability and a lack of oversight of the response to their sexual assault. Victims testified they did not receive the support they expected to receive from the Peace Corps and that improvements were not made after they complained about the quality of response and care. In our interviews with Volunteer victims, some did not feel fully informed of action taken in response to their assault, or they expressed confusion about the response effort because staff provided support services without coordinating their communication to victims.

The *Standards* recommends procedures for documenting services, carrying out regular sexual assault response program evaluation and providing performance feedback to responsible staff. These activities help managers and responders to assess victim needs, ensure quality of care, and identify areas for improvement. A performance assessment process and performance feedback activities must be based on a response system that has the capacity to routinely assess performance, communicate about performance to responders, and make adjustments to enhance the quality of service delivery.

Using information from our interviews and our review of agency records, we analyzed the management of individual Volunteer sexual assault cases and the performance feedback agency managers provided to headquarters and field staff. We identified a need to standardize and centralize case management files and to standardize the assessment and staff performance feedback process.

### Case Management

We found the agency lacks a centralized case management system to record and track the response and care provided for individual Volunteer sexual assault cases. Communication among post staff and among multiple headquarters offices occurred in-person, by phone, via email and other electronic transmittals, but were not systematically recorded and maintained in a single case management file. The victim advocate, OMS, COU, and SS all maintained separate databases for tracking the progress of advocacy services, medical and counseling support, and the safety and legal support provided. The manner in which post staff submitted requests for

support and status updates was informal and this information was not consistently noted in all the individual databases listed above.

Field and headquarters staff reported difficulties coordinating their efforts with other staff members and offices. This has been exacerbated by situations, discussed elsewhere in the report, in which communication protocols, roles and responsibilities of staff members and the offices involved, and decision-making authority were unclear. As a result, some Volunteer victims experienced delays in receiving support, staff could not easily confirm that a Volunteer victim had received services, or multiple staff members initiated the same service to the victim. Some field staff members we interviewed said they needed a better way to track care and support provided to victims to ensure nothing was overlooked and to keep everyone informed. Individual tracking systems are inefficient, create the potential for confusion among the multiple offices involved, and fail to capture in a centralized database the key steps and decisions made in the response effort. A centralized case management system helps identify gaps or duplication in service delivery or Volunteer victim needs that have gone unfulfilled. A centralized system would help document all aspects of the agency response and verify that the agency's *Commitment to Sexual Assault Victims* had been adhered to throughout the response effort.

With the multiple staff members and offices involved in the response effort, a case management system available to headquarters staff, the CD and other key post staff members is particularly important to ensure involvement of all the responsible parties and decision-makers. For example, a determination regarding a victim's continued service at their work site or country of service often necessitates input from post, region, and headquarters staff. Decisions made by victims regarding their interest or intent to pursue prosecution or their need for services can be documented and made available to concerned offices. A single, centralized case record will also help ensure that personally identifiable or medically sensitive information is controlled yet available to those with a need to know.

### Performance Feedback

The *Standards* underscore the importance of providing objective feedback on performance to response and care providers and encourages the use of client satisfaction surveys and a mechanism for victims to lodge complaints to assess and enhance quality of service delivery. Performance feedback should focus on whether requirements in the *Response Guidelines* had been completed and whether Volunteer victims are responded to and cared for according to the Peace Corps' *Commitment to Sexual Assault Victims*.

We identified aspects of staff performance that require feedback and accountability so that the response and care effort conforms to agency policy, LES requirements, and the *Commitment* made to victims. Feedback would address response efforts in which:

- CDs placed the victim on a performance plan (i.e. behavioral contract) shortly after reporting a sexual assault;
- PCMOs performed sexual assault examinations that did not conform to the LES-required process for that country; and

- CDs and PCMOs did not immediately notify headquarters duty officers regarding sexual assault incidents reported by Volunteers or adhere to other notification protocols required by the *Response Guidelines*.

According to MS 270, the regional director is responsible for ensuring that CDs in their region establish and effectively manage post Volunteer safety and security support systems. The regional directors provide the oversight to ensure that posts in their region take the necessary corrective actions to address safety and security issues identified during assessments and evaluations. SS provides technical assistance to CDs and oversight of the post's SSC duties. According to MS 261 "Oversight of Medical Offices and Peace Corps Medical Officers," PCMO performance feedback is the shared responsibility of the Associate Director for Volunteer Support and the CD.

In our interviews with staff we were provided with examples of feedback that SS or regional senior staff provided to headquarters and field staff on a case-by-case basis. However, a centralized case management system would allow for a systematic review of individual Volunteer sexual assault incident response efforts, so that regular performance feedback is delivered and any necessary steps are taken to correct deficiencies or problem responses.

**We recommend:**

- 12. That the agency implement a centralized sexual assault case management system that encompasses Volunteer sexual assault response, care, and support activities, and use the case management system to assess staff performance and identify any needed adjustments in its policies and procedures.**

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## OBJECTIVE, SCOPE, AND METHODOLOGY

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The purpose of the Office of Inspector General (OIG) is to prevent and detect fraud, waste, abuse, and mismanagement and to promote economy, effectiveness, and efficiency in government. In February 1989, the Peace Corps OIG was established under the Inspector General Act of 1978 and is an independent entity within the Peace Corps. The Inspector General (IG) is under the general supervision of the Peace Corps Director and reports both to the Director and Congress.

The OIG Evaluation Unit evaluates the management and program operations of the Peace Corps at overseas posts and domestic offices through independent assessments of the design, implementation, and results of agency operations, programs, and policies. OIG evaluations identify best practices and recommend program improvements and ways to achieve agency mission and goals, and increase effectiveness and efficiency.

OIG announced its intent to conduct a review of the agency's implementation of guidelines and protocols related to Volunteer victims of sexual assault on February 1, 2011. The purpose of the review was to examine guidelines and practices, to make recommendations as necessary to improve support to Volunteer victims of sexual assault, and to identify best practices that we observed at selected posts. The scope for our examination of sexual assault cases was calendar years 2009 through 2011. We used the following researchable questions to guide our work:

1. Is the agency's guidance for responding to Volunteer victims of sexual assault sufficient to meet victim needs?
2. Is the agency's sexual assault training for staff sufficient to prepare them to respond to victims?
3. Are Volunteer victims sufficiently supported at select posts?
4. How does the agency's response to and care of sexual assault victims compare to other organizations and to the standards recommended by subject matter experts?

Assistant Inspector General for Evaluations Jim O'Keefe and Senior Evaluator April Miller conducted the evaluation's preliminary research and fieldwork from February 1 to November 30, 2011. Additional fieldwork was conducted by OIG evaluation unit staff during the course of country program evaluation work conducted during 2011. To understand current guidance for response to Volunteer sexual assault, we reviewed agency policies and documented practices. We reviewed the Peace Corps' *Guidelines for Responding to Rape and Major Sexual Assault*, the Peace Corps' *Commitment to Sexual Assault Victims*, and relevant *Peace Corps Manual* policies and Office of Medical Services technical guidelines for response to Volunteer sexual assaults. We interviewed headquarters and field staff at Peace Corps posts with responsibilities for response and support to Volunteer victims. We conducted a limited review of standards and best practices in the field of sexual assault prevention and response. We compared select organizations' standards and best practices with the Peace Corps' current guidance and practices. We interviewed subject matter experts to learn about their perspectives on the agency's approach to response to and care of Volunteer sexual assault.

Fieldwork at selected Peace Corps posts occurred from February 22 to October 7, 2011. We selected four posts for a focused field review: PC/Dominican Republic, PC/Guatemala, PC/Mali, and PC/Moldova. We interviewed 17 Volunteer victims at these four posts who had reported they were sexually assaulted (five additional victim interviews were conducted by telephone or in person in Washington, DC). OIG evaluation staff performed additional limited fieldwork in: PC/China, PC/Fiji, PC/Kazakhstan, PC/Kyrgyz Republic, PC/Liberia, PC/Peru, and PC/Uganda. We interviewed CDs, PCMOs, SSCs, programming and training staff, and embassy RSOs at 15 Peace Corps posts regarding their sexual assault response and care practices and training.

To assess the agency's implementation of guidelines and protocols related to Volunteer victims of sexual assault, we reviewed the guidance disseminated by the agency for response to Volunteer sexual assault and the related staff training to support that response. We evaluated the agency response to selected sexual assault incidents reported from 2009 to 2011. While we considered all the issues and information brought to our attention by victims of sexual assault whose assaults dated back several decades or more, we established the more recent 2009-2011 timeframe for our review in order to examine the agency's response preparedness and capabilities in a contemporary timeframe and to review action taken to support victims in relation to policies, protocols and guidelines.

We examined the written statements of 42 sexual assault victims whose assaults occurred from the 1970s to 2011. We reviewed reports received from sexual assault victims via our OIG Hotline and other sources. Written statements submitted to OIG describing assaults that occurred before 2009 provided perspectives on agency response and care to victims. However, we were not able to verify statements made or determine the quality of the agency's response and support provided to those victims. It is also important to note that policies and protocols related to Volunteer sexual assault were issued or updated by the agency during 2009 to 2011, which created limitations in establishing direct correlation between the quality of services provided and agency policies.

To determine if agency guidance for responding to sexual assaults is sufficient and to gather feedback on agency's handling of Volunteer sexual assaults using the 2011 *Response Guidelines*, we interviewed field staff and sexual assault victims who are current or former Volunteers. We compared current policy and guidance to former policy and guidance to understand how the Peace Corps handled sexual assault response or care differently over time.

To assess the sufficiency of training to prepare staff to respond to Volunteer sexual assault, we reviewed staff training curriculum and interviewed staff members responsible for designing and providing the training. We observed sexual assault awareness and response training provided to overseas staff during 2011. At headquarters, we observed the September 2011 Overseas Staff Training program provided to new country directors, administrative officers, and programming staff, and the October 2011 Medical Overseas Staff Training program provided to new medical officers. We observed Continued Education Training of Peace Corps medical officers conducted in Orlando, Florida, in August 2011. We also observed a safety and security training of country directors and safety and security and training staff in Bamako, Mali in September 2011. We compared our observation of staff trainings with the 2011 *Response Guidelines* and with the training curriculum. We interviewed field staff and current and former Volunteer victims to help

understand whether staff trainings sufficiently prepared staff to respond to Volunteer sexual assaults that occurred in 2011.

To determine if Volunteers have received sufficient support as a result of the 2011 *Response Guidelines* and other agency efforts in 2011, we selected and evaluated sexual assault cases reported by Volunteers from 2009 to 2011. We conducted voluntary interviews with Volunteer sexual assault victims and reviewed written testimonies, sexual assault incident reports, medical files and other information related to selected incidents. We conducted interviews of victims and headquarters and field staff members involved in the handling of sexual assault incidents during this period to assess the usefulness of the new guidance for handling sexual assaults and staff members' first response and follow-up care for Volunteer victims. We received additional reports from Volunteers who were sexually assaulted during their service prior to 2009 via our OIG Hotline and other sources. We compared feedback provided by Volunteer victims of sexual assault that described the first response and follow-up care they received prior to 2009 with feedback provided by Volunteers from 2009 to 2011.

This review did not evaluate Volunteer training. We did not assess the causes of Volunteer underreporting of sexual assault. We did not evaluate services available to Volunteers after their service ended, such as the Federal Employees' Compensation Act application process or benefits made available for Volunteer sexual assault victims. We conducted a limited review of reported allegations of Volunteer sexual assault in which a Volunteer or staff member was the alleged perpetrator.

This evaluation was conducted in accordance with the Quality Standards for Inspections, issued by the Council of the Inspectors General on Integrity and Efficiency (CIGIE). The evidence, findings, and recommendations provided in this report have been reviewed by agency stakeholders affected by this review.

## INTERVIEWS CONDUCTED

Interviews were conducted with 22 Volunteer sexual assault victims, 95 staff members serving at Peace Corps posts, 30 headquarters staff members serving in Washington D.C., 11 U.S. Embassy staff members, and nine subject matter experts.

We interviewed 17 Volunteer sexual assault victims who reported they were sexually assaulted between 2009 and 2011. Thirteen interviews were conducted in-person, and four by telephone. In addition, we interviewed five female RPCVs who were sexually assaulted prior to 2009.<sup>24</sup>

**Table 5: Interviews of Volunteers Sexually Assaulted from 2009 to 2011**

Type of Sexual Assault	Count
Rape/attempted rape	6
Major Sexual Assault	1
Other Sexual Assault	10
Gender	
Female	15
Male	2

Source: OIG analysis.

**Table 6: Interviews Conducted with Peace Corps Overseas Staff Members and Embassy Officials**

Position	Status
Country Director (11)	Overseas Posts <sup>25</sup>
Peace Corps Medical Officer (28)	Overseas Posts
Safety and Security Coordinator (12)	Overseas Posts
Director of Programming and Training (6)	Overseas Posts
Training Director (4)	Overseas Posts
Associate Peace Corps Director/Program Manager (17)	Overseas Posts
Volunteer Support Coordinator	Overseas Posts
Program Assistant (2)	Overseas Posts
Regional Manager (3)	Overseas Posts
General Services Manager	Overseas Posts
Regional Security Officer (11)	U.S. Embassies <sup>26</sup>
Peace Corps Safety and Security Officer (10)	Overseas Posts

Data as of February 2012.

<sup>24</sup> Two of these interviewees also testified in congressional hearings conducted during 2011.

<sup>25</sup> We conducted interviews with field staff serving in posts in the following countries: Benin, China, Costa Rica, Dominican Republic, Guatemala, Honduras, Fiji, Kazakhstan, Kyrgyzstan, Kenya, Liberia, Mali, Moldova, Peru, and Uganda.

<sup>26</sup> RSO interviews were conducted at U.S. Embassies in China, Dominican Republic, Guatemala, Fiji, Kazakhstan, Kyrgyzstan, Liberia, Mali, Moldova, Peru, and Uganda.

**Table 7: Interviews Conducted with PC/Headquarters Staff and Subject Matter Experts**

Position	Office/Organization
Peace Corps Victim Advocate/Director, Office of Victim Advocacy	Office of Victim Advocacy
Senior Advisor/Sexual Assault Working Group Coordinator	Office of Safety and Security
Deputy Director of Counseling and Outreach	Counseling and Outreach Unit
Counselor (2)	Counseling and Outreach Unit
Psychologist	Counseling and Outreach Unit
Inspector General	Office of Inspector General
Deputy Inspector General	Office of Inspector General
Assistant Inspector General, Investigations	Office of Inspector General
Criminal Investigators (3)	Office of Inspector General
General Counsel	Office of General Counsel
Deputy Associate Director	Office of Volunteer Support
Chief, Epidemiology and Surveillance	Office of Medical Services
Quality Improvement Manager	Office of Medical Services
Quality Improvement Nurse	Office of Medical Services
Post-Service Manager	Office of Medical Services
Programming and Training Expert	Office of Medical Services
Pre-Service Nurse	Office of Medical Services
Associate Director	Office of Safety and Security
Chief, Overseas Operations	Office of Safety and Security
Lead Security Specialist, Overseas Operations	Office of Safety and Security
Regional Director	Inter-America and the Pacific Operations (IAP Region)
Regional Security Advisor	IAP Region
Expert	Office of the Director
Regional Director	Europe, Mediterranean, and Asia Operations (EMA Region)
Regional Security Advisor	EMA Region
Regional Director	Africa Operations (AF Region)
Regional Security Advisor	AF Region
Attorney (3)	WilmerHale
Founder	First Response Action
Program Manager	Colorado Coalition Against Sexual Assault
Program Coordinator, Victim Services Network	Denver District Attorney's Office
Hotline and Affiliate Service Director	Rape, Abuse and Incest National Network
Senior Victim and Response Office Assistance Advisor	Department of Defense Sexual Assault and Response Office
Training Director <sup>27</sup>	DC Coalition Against Domestic Violence

<sup>27</sup> Also testified in congressional hearings conducted during 2011.



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## LIST OF RECOMMENDATIONS

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### WE RECOMMEND:

1. That posts conduct annual “all staff” sexual assault training sessions and periodic first responder refresher sessions to ensure all post staff are fully informed of the agency’s sexual assault response policies and understand the response and care protocols.
2. That the agency develop sexual assault policy and guidance for other sexual assault (OSA) incidents including procedures for taking reports and responding to the care or support needs of OSA victims, and that it incorporate this guidance into its *Response Guidelines*.
3. That the agency incorporate the following topics into its *Response Guidelines* and staff training modules: the role of the victim advocate, the role of the safety and security coordinator, and the role of the Office of Inspector General for investigating Volunteer sexual assault.
4. That the agency clarify notification requirements and align instructions in the *Response Guidelines* and *Medical Technical Guideline 540* to ensure clear and specific instructions for notification of headquarters offices in the aftermath of a Volunteer rape or sexual assault.
5. That the agency ensure that all country directors, Peace Corps medical officers and staff with a sexual assault response and care role attend annual *Response Guidelines* training sessions, and that staff participation in training be tracked and documented.
6. That the agency provide Volunteer sexual assault response training for staff members who will serve as acting country director, and include the duties for managing sexual assault response in overseas staff training modules.
7. That, for those staff who will serve as acting country director, the agency include the duties and responsibilities for managing Volunteer sexual assault response in position descriptions and performance plans.
8. That the agency provide annual *Response Guidelines* training to all headquarters staff members responsible for supporting victims or training staff in the response to Volunteer sexual assault incidents.
9. That the agency establish policy to require that post staff who have response roles annually review the “Survey of the Local Legal Environment” (LES) to familiarize themselves with information contained in the LES and to determine if updates are required.
10. That the agency review all posts’ “Survey of the Local Legal Environment” to ensure information has been fully and accurately collected.
11. That country directors provide the U.S. Embassy’s regional security officer with a copy of the “Survey of the Local Legal Environment” and meet to review the support services that may be

provided under the Peace Corps-Department of State Memorandum of Understanding in an initial meeting and when new country directors or regional security officers arrive at post.

12. That the agency implement a centralized sexual assault case management system that encompasses Volunteer sexual assault response, care, and support activities, and use the case management system to assess staff performance and identify any needed adjustments in its policies and procedures.

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## LIST OF ACRONYMS

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CD	Country Director
CIRS	Consolidated Incident Reporting System
CME	Continuing Medical Education
COU	Counseling and Outreach Unit
DMO	Director of Management Operations
DPT	Director of Programming and Training
DS	Department of State
IG	Inspector General
LES	Survey of the Local Legal Environment
MOST	Medical Overseas Staff Training
MOU	Memorandum of Understanding
MS	<i>Peace Corps Manual Section</i>
OGC	Office of General Counsel
OGO	Office of Global Operations
OIG	Office of Inspector General
OMS	Office of Medical Services
OSA	Other Sexual Assault
OST	Overseas Staff Training
PC	Peace Corps
PCM	Peace Corps Manual
PCMO	Peace Corps Medical Officer
PCSSO	Peace Corps Safety and Security Officer
PSC	Personal Services Contractor
RPCV	Returned Peace Corps Volunteer
RSO	Regional Security Advisor
SAWG	Sexual Assault Working Group
SS	Office of Safety and Security
SSC	Safety and Security Coordinator
TG	Medical Technical Guideline
V/T	Volunteer/Trainee
VS	Office of Volunteer Support

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## **KATE PUZEY PEACE CORPS VOLUNTEER PROTECTION ACT OF 2011 (P.L. 112-57)<sup>28</sup>**

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On November 21, 2011, the President signed into law the Kate Puzey Peace Corps Volunteer Protection Act of 2011 (P.L. 112-57, Kate Puzey Act), which enhances Volunteer safety and security and the Peace Corps' response to Volunteer victims of sexual assault. The legislation will necessitate numerous improvements and changes to existing agency policies, processes, and training, as well as office functions and responsibilities. The Kate Puzey Act focuses on enhancing Volunteer safety and security and the agency's response to Volunteer sexual assault. Additional elements addressed include agency hiring practices, management oversight, performance reporting, country portfolio reviews, and strengthening of OIG independence.

Under the new legislation, OIG is required to issue to Congress: (1) a report no later than November 21, 2013, and November 21, 2016, respectively, which evaluates the effectiveness and implementation of the agency's sexual assault risk-reduction and response training and policy, including a review of sexual assault cases; (2) a report no later than November 21, 2013, regarding how the agency hires/terminates its CDs, including an assessment of the implementation of CD performance plans, and how CDs hire post staff; and (3) a report on allegations received from Volunteers relating to misconduct, mismanagement, or policy violations of Peace Corps staff, any breaches of the confidentiality of Volunteers, and any actions taken to assure the safety of Volunteers who provide such reports. This report is due no later than November 21, 2012, and every two years through September 30, 2018. Another provision of the legislation strengthens OIG independence by excluding the IG and OIG employees from the agency's five-year term employment limitation.

The majority of the provisions in the Kate Puzey Act affect agency programs and operations. The legislation includes requirements to:

- Develop and implement a comprehensive sexual assault policy and a policy on stalking.
- Develop and implement sexual assault risk reduction and response training for Volunteers and staff.
- Develop a restricted reporting process for sexual assault victims.
- Establish an Office of Victims Advocacy and a Sexual Assault Advisory Council
- Establish a 24 hour sexual assault hotline.
- Provide Volunteer applicants with crime risk information and contact information for OIG and Victim Advocate.
- Establish a confidentiality policy applicable to both staff and Volunteers with penalties for breaches of the policy.
- Establish goals, metrics, monitoring, and evaluation standards for all agency programs.
- Conduct an annual volunteer survey.

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<sup>28</sup> Appendix B reflects information reported in the Peace Corps OIG *Semiannual Report to Congress*, October 1, 2011–March 31, 2012.

## Appendix B: Kate Puzey Act

- Establish performance plans with performance elements for CDs which must incorporate feedback from the all-volunteer survey.
- Conduct portfolio reviews (once every three years) for all countries where Volunteers serve.
- Establish a process for removal of Volunteers from alleged unsafe sites.
- Establish a memorandum of understanding (MOU) with the United States Department of State outlining duties and obligations for protection of Volunteers and staff.
- Submit an annual report to Congress that includes summarized information on sexual assaults, other crimes against Volunteers, number of arrests, prosecutions, incarcerations, and early terminations.
- Authorize the agency to retain counsel for Volunteers involved as parties, victims, or witnesses to crimes.
- Repeals limitations on personal services contractors (PSC) hired by the agency to perform inherently governmental activities.

The agency has established an interagency working group, which includes more than a dozen sub-groups responsible for implementing the new legislation. The agency has established the Office of Victim Advocacy. During 2011 the agency developed four standardized Volunteer training modules. The agency reports that over 200 overseas staff members were trained on how to deliver newly developed standardized training to Volunteers on sexual assault awareness, risk reduction strategies, Peace Corps reporting and response protocols, and bystander intervention. The agency hired a sexual assault nurse examiner to coordinate care for victims of sexual assault and has established a medical support program that assists Volunteers who are medically evacuated as a result of sexual crimes. In collaboration with the Department of Justice National Institute of Justice, the agency created a framework, performance measures, and timeline to launch its sexual assault risk reduction and response program. The agency also indicates it has begun tracking arrests, prosecutions, and incarcerations involving Volunteer incidents in its existing reporting system.

It is too early to assess the efficacy of agency actions to date or whether these measures comply with the requirements under the Kate Puzey Act.

OIG provided recommendations and suggestions to the agency regarding the development and execution of an MOU with DS Bureau of Diplomatic Security addressing the protection of overseas Volunteers and staff members to include investigations of safety and security incidents and crimes committed against Volunteers and staff members. The establishment of an MOU was recommended in the 2010 OIG audit of the Peace Corps Volunteer Safety and Security Program. Since passage of the Kate Puzey legislation, OIG directly participated in negotiations leading to development of the MOU signed on May 11, 2012, with DS. Volunteers are not under chief of mission authority and are not considered employees; therefore, our recommendations focused on ensuring the MOU addresses Volunteer safety and security so that the Peace Corps is able to support a Volunteer should a serious crime or other incident take place. Throughout the negotiations, OIG suggested the MOU define roles and responsibilities to the greatest extent possible when responding to serious crimes or incidents against Volunteers and staff members.

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## AGENCY RESPONSE

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Since 1961.

**MEMORANDUM**

**To:** Kathy Butler, Inspector General

**Through:** Daljit K. Bains, Chief Compliance Officer *[Signature]*

**From:** Carrie Hessler-Radelet, Acting Peace Corps Director *[Signature: Carrie Hessler-Radelet]*

**Date:** September 24, 2012

**CC:** Stacy Rhodes, Chief of Staff  
Joaquin Ferrao, Deputy Inspector General  
Esther Benjamin, Associate Director, Global Operations  
Ed Hobson, Associate Director, Office of Safety and Security  
Brenda Goodman, Associate Director, Volunteer Support  
Kellie Greene, Associate Director, Office of Victim Advocacy  
Garry Stanberry, Deputy Associate Director, Management  
Sonia Stines-Derenoncourt, Director, Office of Programming and Training Support

**Subject:** Agency Response to the **OIG Preliminary Evaluation Report: Review of the Peace Corps' Implementation of Guidelines Related to Volunteer Victims of Rape and Sexual Assault**

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Enclosed please find the agency's response to the recommendations made by the Inspector General for **Peace Corps/Preliminary Evaluation Report: Review of the Peace Corps' Implementation of Guidelines Related to Volunteer Victims of Rape and Sexual Assault** sent to the Agency on July 27, 2012.

The Kate Puzey Peace Corps Volunteer Protection Act of 2011 obligates the agency to adopt a number of policies as part of a comprehensive sexual assault policy. The agency's proposed response to the Preliminary Evaluation Report may be adjusted to take into account these policies.

The Agency concurs with all 12 recommendations provided by the OIG in its Preliminary Evaluation Report and will work to respond to recommendation in an expeditious and timely manner.

**Recommendation 1:**

**That posts conduct annual “all staff” sexual assault training sessions and periodic first responder refresher sessions to ensure all post staff are fully informed of the agency’s sexual assault response policies and understand the response and care protocols.**

**Concur:**

The *Guidelines for Responding to Rape and Sexual Assault* was initially distributed to all posts by the Deputy Director in February 2011. In March 2011, a joint memo from the Associate Director of Safety and Security and the Associate Director of Global Operations was sent to all posts instructing them to conduct training of all staff with first responder responsibilities by March 29, 2011.

The *Guidelines for Responding to Rape and Sexual Assault* will be updated by the Office of Safety and Security by May 2013 to include additional information for training purposes. The training on this updated Guide will now be required of all staff on an annual basis.

The Office of Safety and Security will coordinate with the Office of Global Operations to communicate this mandate to all posts by March 2013 with the intent that all overseas staff will complete that year’s training by August 2013 and have annual refresher trainings after that point. Additionally, all overseas staff that could be in a position of being a first responder will be required to take the online *Sexual Assault Awareness and Victim Sensitivity Training* by March 2013. Other overseas staff will also be encouraged to take the online training but will not be required to do so. Posts will be required to track who has taken both the *Response Guidelines* training and the online *Sexual Assault Awareness and Victim Sensitivity Training* and submit this information to the Office of Safety and Security on an annual basis beginning August 2013.

**Documents to be Submitted:**

- Updated *Guidelines for Responding to Rape and Sexual Assault* - May 2013
- Link to: *Sexual Assault Awareness and Victim Sensitivity Training* – November 2012

**Completion Date:**

August 2013

**Recommendation 2:**

**That the agency develop sexual assault policy and guidance for other sexual assault (OSA) incidents including procedures for taking reports and responding to the care or support needs of OSA victims, and that it incorporate this guidance into its *Response Guidelines*.**

**Concur:**

The Office of Safety and Security will develop guidelines for post to address crimes which fall in the category of other sexual assault (OSA) by February 2013.

**Documents to be Submitted:**

- OSA Guidelines – February 2013

**Completion Date:**

February 2013

**Recommendation 3:**

**That the agency incorporate the following topics into its *Response Guidelines* and staff training modules: the role of the victim's advocate, the role of the safety and security coordinator, and the role of the Office of Inspector General for investigating Volunteer sexual assault.**

**Concur:**

The Office of Safety and Security will incorporate the above mentioned topics into the revised *Response Guidelines* by May 2013.

**Documents to be Submitted:**

- Updated *Guidelines for Responding to Rape and Sexual Assault* - May 2013

**Completion Date:**

May 2013

**Recommendation 4:**

**That the agency clarify notification requirements and align instructions in the *Response Guidelines* and *Medical Technical Guideline 540* to ensure clear and specific instructions for notification of headquarters offices in the aftermath of a Volunteer rape or sexual assault.**

**Concur:**

Once the restricted reporting policy has been put into effect, the *Response Guidelines* will be revised to incorporate updated instructions for post staff, including medical staff, on notifying headquarters of Volunteer rapes and sexual assaults. Instructions to medical staff on notifying headquarters of Volunteer rapes and sexual assaults will be removed from *Medical Technical Guideline 540* and instead *Medical Technical Guideline 540* will cross-refer to the instructions in the *Response Guidelines*. The updated *Guidelines* and *TG* will be distributed in electronic format to HQ and field staff by the end of FY13Q3 by Volunteer Support. Supplemental, focused training on the *Guidelines* and *TG* will be provided to applicable staff at HQ and in the field by FY13Q4.

**Documents to be Submitted:**



- Updated Guidelines and TG 540 will be distributed concurrently in electronic format to HQ and field staff
- Supplemental, focused training on the Guidelines and TG will be provided to applicable staff at HQ and in the field see note above

**Completion Date:**

May 2013

**Recommendation 5:**

**That the agency ensure that all Country Directors, Peace Corps medical officers and staff with a sexual assault response and care role attend annual *Response Guidelines* training sessions, and that staff participation in training be tracked and documented.**

**Concur:**

Per the response to Recommendation 1 and Recommendation 6, the agency will ensure that all staff at post and all new incoming CDs, PCMOs and staff with a sexual assault response and care role will receive training on the *Response Guidelines* and that information will be tracked by the Office of Safety and Security with input from the Office of Global Operations.

The Office of Global Operations and the Office of Safety and Security will communicate this expectation to staff.

**Documents to be Submitted:**

- Updated *Guidelines for Responding to Rape and Sexual Assault* - May 2013
- Link to: *Sexual Assault Awareness and Victim Sensitivity Training* - November 2012

**Completion Date:**

May 2013

**Recommendation 6:**

**That the agency provide Volunteer sexual assault response training for staff members who will serve as acting country director, and include the duties for managing sexual assault response in overseas staff training modules.**

**Concur:**

Office of Safety and Security, in cooperation with Overseas Program and Training Support (OPATS), provides sexual assault training during Overseas Staff Training (OST) for all new incoming staff members, including Country Directors and staff likely to be assigned Acting Country Director duties. This training is conducted two to three times each year for new Country Directors, Directors of Programming and Training, Directors of Management and Operations and any other American Associate Peace Corps Director since these are the staff who would be authorized to serve in the acting capacity in the absence of the Country Director. Locally employed staff who participate in OST will also receive the same sexual assault response training. OPATS will track participation and report attendance at the session to the Office of Safety and Security.

**Documents to be Submitted:**

- OST Training schedule for February 2013

**Status and Timeline for Completion:**

Office of Safety and Security began providing the Response training for all OST participants June 19, 2012. This action is ongoing, future dates for training determined by OST dates will be posted on Peace Corps intranet.

**Recommendation 7:**

**That, for those staff who will serve as acting country director, the agency include the duties and responsibilities for managing Volunteer sexual assault response in position descriptions and performance plans.**

**Concur:**

The Office of Global Operations, in coordination with the Regions and Human Resources Management, will update position descriptions for Directors of Programming and Training (DPTs), Directors of Management and Operations Overseas (DMOOS), and other overseas staff who may be assigned acting Country Director duties to include the duties and responsibilities for managing Volunteer sexual assault response. Performance plans will also be amended to reflect these duties and to allow for more effective performance management of sexual assault response.

**Documents to be Submitted:**

- Updated, DPT, DMOO and other overseas USDH staff position descriptions by -  
**February 2013**
- Updated DPT, DMOO other overseas USDH staff performance plans templates -  
**February 2013**

**Completion Date:**

March 2013

**Recommendation 8:**

**That the agency provide annual *Response Guidelines* training to all headquarters staff members responsible for supporting victims or training staff in the response to Volunteer sexual assault incidents.**

**Concur:**

All Headquarters staff responsible for supporting victims or training staff in the response to Volunteer sexual assault incidents will be required to annually attend *Response Guidelines* training at one of the OST sessions beginning Winter OST (February 2013). The respective offices (Victim Advocacy, Safety and Security, Volunteer Support) will be responsible for identifying appropriate staff and give a list of those staff to the Office of Safety and Security. Office of Safety and Security will communicate to those offices when the training will be available. The respective office leaders will be responsible for ensuring their staff have attended the requisite training.

**Completion Date:**

February 2013

**Recommendation 9:**

**That the agency establish policy to require that post staff who have response roles annually review the "Survey of the Local Legal Environment" (LES) to familiarize themselves with information contained in the LES and to determine if updates are required.**

**Concur:**

By April 2013, the Office of Safety and Security will recommend to the SPC updates to MS 270 to incorporate a policy for an annual review, and as needed, revision of the Survey of the Local Legal Environment.

**Documents to be Submitted:**

- Updated MS 270

**Completion Date:**

April 2013

**Recommendation 10:**

**That the agency review all posts' "Survey of the Local Legal Environment" to ensure information has been fully and accurately collected.**

**Concur:**

By April 2013, the Office of Safety and Security will develop a Safety and Security Instruction (SSI) that will outline procedures for conducting, reviewing and revising the post-specific Survey of the Local Legal Environment.

**Documents to be Submitted:**

- SSI on how to create a Survey of the Legal Environment

**Completion Date:**

April 2013

**Recommendation 11:**

**That country directors provide the U.S. Embassy's regional security officer with a copy of the "Survey of the Local Legal Environment" and meet to review the support services that may be provided under the Peace Corps Department of State Memorandum of Understanding in an initial meeting and when new country directors or regional security officers arrive at post.**

**Concur:**

By April 2013, the Office of Safety and Security will develop a Safety and Security Instruction that will outline the procedures for conducting, reviewing, revising and sharing the Survey of the Local Legal Environment with incoming RSOs. In addition, OGO will work with OPATS to include language in the New CD Checklist provided at OST, instructing new CDs to review the LES and MOU with their RSO within the first 90 days of arrival at post.

**Documents to be Submitted:**

- SSI on how to create a Survey of the Legal Environment
- Updated CD First 90 Days Checklist by May 2013

**Completion Date:**

May 2013

**Recommendation 12:**

**That the agency implement a centralized sexual assault case management system that encompasses Volunteer sexual assault response, care, and support activities, and use the case management system to assess staff performance and identify any needed adjustments in its policies and procedures.**

**Concur:**

The Office of Victim Advocacy (OVA) has been working with CIO to develop a case management system to track cases of sexual assault and other violent crime specifically for the OVA. In moving forward, the OVA will explore the possibilities of creating a centralized system for the agency.

A centralized system comes with inherent obstacles that will need to be addressed such as protection of an individual's medical history and privacy of personally identifiable information. If it is determined that it is not possible to develop a centralized case management system, the agency will develop a method in conjunction with the Coordinated Agency Response System (CARS) to better track the response, care, and support activities provided by each of the various offices involved in the process. A component of CARS will be quarterly meetings to review cases to identify needed adjustments to policies and procedures until it can be determined whether a case management system can have the functionality of assessing staff performance.

**Completion Date:**

March 2013

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## OIG COMMENTS

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Management concurred with all 12 recommendations. In its response, management described actions it intends to take to address the issues that prompted each of our recommendations. All 12 recommendations remain open. OIG will review and consider closing recommendations when the documentation reflected in the agency's response to the preliminary report is received.

In closing recommendations we are not certifying that the agency has taken these actions or that we have reviewed their effect. Certifying compliance and verifying effectiveness are management's responsibilities. If we determine it is warranted, we may conduct a follow-up review to confirm that action has been taken and to evaluate the impact.

We provide the following analysis of the agency's response to recommendations 2 and 6.

**Recommendation 2:**

**That the agency develop sexual assault policy and guidance for other sexual assault (OSA) incidents including procedures for taking reports and responding to the care or support needs of OSA victims, and that it incorporate this guidance into its *Response Guidelines*.**

**Agency Response: Concur:**

The Office of Safety and Security will develop guidelines for post to address crimes which fall in the category of other sexual assault (OSA) by February 2013.

**Documents to be Submitted:**

OSA Guidelines — February 2013

**Completion Date:**

February 2013

**OIG analysis:**

In its response the agency indicated that the Office of Safety and Security will develop guidelines for post to address crimes which fall in the category of other sexual assault (OSA) by February 2013. Please clarify when the OSA Guidelines will be distributed to posts. Per your response to recommendation 1, we take note of the agency's plans and schedule to re-issue updated *Guidelines for Responding to Rape and Sexual Assault* by May 2013 and to require posts to complete training on the updated *Guidelines* by August 2013. We believe it is important for the agency to transmit the OSA Guidelines to all posts when they are developed in February 2013 so posts respond to OSA incidents according to the newly developed procedures as soon as possible.

We request your response within 30 days from issuance of the final report.

**Recommendation 6:**

**That the agency provide Volunteer sexual assault response training for staff members who will serve as acting country director, and include the duties for managing sexual assault response in overseas staff training modules.**

**Agency Response: Concur:**

Office of Safety and Security, in cooperation with Overseas Program and Training Support (OPATS), provides sexual assault training during Overseas Staff Training (OST) for all new incoming staff members, including Country Directors and staff likely to be assigned Acting Country Director duties. This training is conducted two to three times each year for new Country Directors, Directors of Programming and Training, Directors of Management and Operations and any other American Associate Peace Corps Director since these are the staff who would be authorized to serve in the acting capacity in the absence of the Country Director. Locally employed staff who participate in OST will also receive the same sexual assault response training. OPATS will track participation and report attendance at the session to the Office of Safety and Security.

**Documents to be Submitted:**

OST Training schedule for February 2013

**Status and Timeline for Completion:**

Office of Safety and Security began providing the Response training for all OST participants June 19, 2012. This action is ongoing; future dates for training determined by OST dates will be posted on Peace Corps intranet.

**OIG analysis:**

Along with the Response training that has been offered OST participants beginning in June 2012, we believe all OST participants who may serve as acting country director, including participants in the October 2012 OST, need training sessions that thoroughly review their duties and responsibilities relative to response to Volunteer sexual assault.

Please provide OIG with information and training materials used with staff attending the October 2012 OST that demonstrates they received training sessions and appropriate materials relative to responsibilities for response to Volunteer sexual assault while acting as country director. Should additional training materials be developed for the February 2013 OST, we welcome those by the above-stated deadline of February 2013.

We request your response in 30 days from issuance of the final report.

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## PROGRAM EVALUATION COMPLETION AND OIG CONTACT

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### **PROGRAM EVALUATION COMPLETION**

This program evaluation was conducted under the direction of Jim O’Keefe, Assistant Inspector General for Evaluations, by Jim O’Keefe and Senior Evaluator April Miller. Additional contributions were made by Senior Evaluators Jerry Black, Susan Gasper, Reuben Marshall, and Lead Evaluator Heather Robinson.



Jim O’Keefe  
Assistant Inspector General for Evaluations

### **OIG CONTACT**

Following issuance of the final report, a stakeholder satisfaction survey will be distributed. If you wish to comment on the quality or usefulness of this report to help us improve our products, please e-mail Jim O’Keefe, Assistant Inspector General for Evaluations, at [jokeefe@peacecorps.gov](mailto:jokeefe@peacecorps.gov), or call (202) 692-2904.

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U.S./International: 202.692.2915

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Email: [OIG@peacecorps.gov](mailto:OIG@peacecorps.gov)

Web Form: [www.peacecorps.gov/OIG/ContactUs](http://www.peacecorps.gov/OIG/ContactUs)

Mail: Peace Corps Office of Inspector General  
P.O. Box 57129  
Washington, D.C. 20037-7129

Main Office: 202.692.2900