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PREA Noncompliance and Sexual Assault Allegations in U.S. Immigration Detention Facilities, 2018–2026

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Abstract

Background

The Prison Rape Elimination Act (PREA) establishes standards to prevent, detect, and respond to sexual abuse in U.S. immigration detention facilities. Despite implementation in U. S. detention facilities in 2014, sexual assault allegations persist. We evaluated PREA compliance and its association with reported sexual assault allegations.

Methods

We analyzed publicly available PREA audits of U.S. Immigration and Customs Enforcement detention facilities from 2017 to 2026. We assessed initial deficiencies, compliance following corrective action, and common deficient standards. Mixed-effects negative binomial regression examined associations between PREA deficiencies and facility-level sexual assault allegations from 2018 to 2022. Audit narratives were descriptively reviewed to identify illustrative examples of noncompliance for commonly deficient standards.

Results

We reviewed 230 audits representing 118 facilities. Seventy percent (n = 161) identified at least one deficient standard, and 21.6% (n = 50) identified 10 or more. Of 1,337 initially unmet standards, 177 remained unmet following corrective action. Twenty percent (n = 33) of initially noncompliant audits remained noncompliant. Each additional unmet standard was associated with a 5% higher rate of reported sexual assault allegations (rate ratio [RR] 1.05, 95% confidence interval [CI] 1.03–1.08), including an 8% higher rate of staff-on-detainee allegations (RR 1.08, 95% CI 1.05–1.12). Common deficiencies involved risk assessments, sexual abuse incident reviews, language access, and staff screening.

Conclusions

PREA noncompliance was common across U.S. immigration detention facilities and associated with higher rates of reported sexual assault allegations. These findings highlight the need for stronger oversight, accountability, and implementation of safeguards against sexual violence.

INTRODUCTION

Immigration detention has become an increasingly common component of U.S. immigration enforcement, with average daily detention populations exceeding 65,000 individuals [1]. Although immigration detention is intended to be a civil rather than criminal process, detention may expose

individuals to conditions that adversely affect health and health outcomes [2–4]. Individuals held in immigration detention are dependent on facility systems for basic needs, medical care, personal safety, and protection from harm. Sexual violence is a particularly concerning detention-related harm. Reports of sexual assault in immigration detention facilities have been documented for decades and continue to persist [5–6].

In response to widespread concerns regarding sexual assault against individuals in confinement settings, Congress enacted the Prison Rape Elimination Act (PREA) in 2003. Under a subsequent congressional mandate, the Department of Homeland Security was required to adopt PREA standards for immigration detention facilities, which were issued in 2014 [7]. These standards were intended to establish a zero-tolerance approach to sexual abuse and harassment and create mechanisms for the prevention, detection, reporting, investigation, and response to sexual violence. Despite the implementation of PREA, sexual assault allegations continue to occur in ICE facilities. Previous work documented 922 sexual assault allegations between 2018 and 2022, including allegations involving facility staff, contractors, volunteers, and other detained individuals [6]. The persistence of these allegations raises concerns about whether the systems intended to protect individuals from sexual violence are functioning as intended. These concerns are particularly important given the health consequences associated with sexual violence. Survivors of sexual assault experience higher rates of mental health disorders (anxiety, depression, post-traumatic stress disorder, suicidality) and chronic physical health sequelae (chronic pain syndromes, gastrointestinal disorders) [8–11]. For individuals in immigration detention, many of whom have experienced prior trauma and violence, exposure to sexual assault may further compound existing structural vulnerabilities.

Given the ongoing reports of sexual assault in immigration detention facilities and the health consequences associated with sexual violence, examining whether systems designed to protect individuals in detention are being effectively implemented is critical. The objectives of this study were 1) to evaluate compliance with PREA standards in U.S. immigration detention facilities; 2) to examine the relationship between PREA deficiencies and reported sexual assault allegations; and 3) to describe illustrative examples of common PREA deficiencies documented in audit narratives.

METHODS

Data Sources

We digitally extracted data from publicly available Prison Rape Elimination Act (PREA) audit reports for U.S. Immigration and Customs Enforcement (ICE) detention facilities from 2017 to 2026 [12]. The Department of Homeland Security mandates routine audits to evaluate compliance with PREA standards. Depending on the facility, these audits assess between 25 and 41 standards and occur every three years. Facilities failing to meet all standards are provided a corrective action period and subsequently reevaluated. Importantly, noncompliance with any component of a standard results in a determination of “non-compliant” for the entire standard. For each audit, we recorded facility

characteristics, the number of standards initially determined to be non-compliant, and the number of standards that remained non-compliant following the corrective action period. To contextualize these findings, we conducted a descriptive review of audit narratives from the most common deficient standards. This review included audits from 2017–2025, representing approximately 80% of the audits. Although this did not involve formal qualitative analyses, we selected excerpts from the most commonly documented deficiencies to illustrate findings.

To generate counts of sexual assault allegations we utilized data from ICE Facility Significant Incident Reports from 2018 through 2022 to evaluate the relationship between PREA compliance and reported sexual assault allegations [13]. These methods have been previously described [6]. From 2018–2022, these reports were produced annually to assess compliance with ICE detention standards and include facility-level reports of sexual abuse and assault allegations. Facilities are required to submit monthly reports of allegations involving detained individuals, including detainee-on-detainee, detainee-on-inmate, inmate-on-detainee, and staff-, contractor-, or volunteer-on-detainee incidents. ICE facilities may also house local “inmates,” defined as individuals charged with crimes, while detained individuals may be housed in county jails, sheriff’s offices, correctional centers, or federal prisons. Because PREA audits occur every three years whereas sexual assault allegations are reported annually, audit findings were applied to the year of publication and the two preceding years. This approach allowed alignment of audit findings with annually reported allegation data. Facility-level average daily population (ADP) data were obtained from publicly available ICE reports and were used to standardize allegation rates across facilities and years. Five facilities lacked available data for certain years, and these were excluded from the analysis. This study utilized publicly available data and was determined not to constitute human subjects research according to institutional review board policies.

Statistical Analysis

For the first study objective, we used descriptive statistics to summarize facility characteristics, the frequency of PREA deficiencies, and the standards most commonly identified as non-compliant. For the second study objective, we evaluated associations between the number of deficient PREA standards and reported sexual assault allegations using mixed-effects negative binomial regression models. The mixed-effects model was used in order to account for non-independence within facilities (i.e., individual facilities reported data across multiple years). We used an autoregressive covariance structure to account for temporal autocorrelation within facilities. We report the rate ratio and 95% confidence intervals (95% CI) linking the number of unmet standards to the number of allegations. The total number of individuals who were detained at a given facility/year was included as a model offset, allowing rate ratios to be interpreted as the relative increase/decrease in allegations per detainee. All analyses were conducted using R (v4.3; R Core Team) [14].

RESULTS

PREA Audit Outcomes

A total of 230 PREA audits were reviewed, representing 118 ICE detention facilities between 2017 and 2026. Fifty-four percent (n = 64) of facilities underwent more than one audit during the study period. Only 30% (n = 69) of audits initially demonstrated compliance with all PREA standards, while 70% (n = 161) identified at least one deficient standard. Following the corrective action period, 20% (n = 33) of audits remained noncompliant.

Across all audits, 1,337 standards were initially identified as noncompliant. Following corrective action, 177 standards remained noncompliant. Deficiencies were often substantial. Overall, 21.6% (n = 50) of audits identified 10 or more deficient standards and 8.7% (n = 20) identified 20 or more deficiencies. The highest proportion of deficient standards was observed in 2023, when 31.2% (n = 409) of assessed standards were initially determined to be noncompliant and 5.3% (n = 75) remained noncompliant following the corrective action period.

PREA Deficiencies and Sexual Assault Allegations

Increasing PREA noncompliance was associated with higher rates of reported sexual assault allegations (Table X). For every additional unmet standard, total sexual assault allegations per person detained increased by 5% ($p < 0.001$); detainee-on-inmate allegations increased by 36% ($p < 0.001$); detainee-on-detainee allegations increased by 2% ($p = 0.24$), inmate-on-detainee allegations increased by 23% ($p < 0.001$), and staff-on-detainee allegations increased by 8% ($p < 0.001$).

Table X. Comparison of Deficient PREA Standards and Reported Sexual Assault Allegations.

Type	Rate Ratio	95% CI	p
Total allegations	1.05	1.03–1.08	< .001
Detainee on Detainee	1.02	0.99–1.05	0.24
Detainee on Inmate	1.36	1.16–1.58	< .001
Inmate on Detainee	1.23	1.16–1.31	< .001
Staff on Detainee	1.08	1.05–1.12	< .001

Illustrative Examples of PREA Noncompliance

The standards most frequently identified as deficient were Standard 41 (Assessment for Risk of Victimization and Abusiveness), Standard 86 (Sexual Abuse Incident Reviews), and Standard 16 (Accommodating Detainees with Disabilities and Limited English Proficiency). Other commonly deficient standards included Standard 65 (Coordinated Response) and Standard 17 (Hiring and Promotion Decisions).

Review of audit narratives identified recurrent deficiencies related to language access, risk assessment procedures, reporting and investigation of allegations, staff screening practices, and post-incident review processes. For example, auditors documented instances in which detained individuals with limited English proficiency were required to sign PREA documentation before receiving information in a language they could understand (Standard 16). Standard 41, which requires facilities to assess an individuals' risk of sexual victimization and use this to inform housing and protective measures, was frequently documented as deficient. Deficiencies included how these assessments were conducted (e.g. inadequate interpretation, incomplete, not confidential, did not screen at all) and failure to reassess an individual after they reported a sexual abuse allegation. At one facility, 18 individuals concealed their sexual orientation or history of victimization because screening occurred in the presence of other individuals detained.

Standard 86 requires facilities to review sexual abuse investigations to identify institutional or environmental conditions that may facilitate sexual abuse or increase the risk of it occurring, and identify ways to improve these factors. Auditors frequently documented failure to conduct required incident reviews, evaluate contributing factors, or identify improvements. At one facility, all of the 11 sexual abuse incidents were documented as having no contributing factors despite investigators identifying opportunities to improve prevention, detection, and response to these cases.

Deficiencies related to standard 17 were particularly concerning. This standard establishes safeguards to prevent individuals with a history of sexual abuse or misconduct from being hired, promoted, or permitted to work directly with individuals detained. Auditors documented deficiencies in screening applicants and employees for prior sexual misconduct, conducting required criminal background checks, and obtaining information from previous institutional employers about substantiated allegations of sexual abuse. At one facility, none of 12 reviewed staff files documented a pre-employment criminal background check or screening for prior sexual misconduct. At another, auditors found that mental health contractors had not undergone background checks. Other facilities did not inquire about substantiated sexual abuse allegations or resignations during pending investigations when contacting previous institutional employers.

DISCUSSION

In this national analysis of PREA audits conducted across U.S. immigration detention facilities, we found that deficiencies in PREA compliance were common. Over two-thirds of audits identified at least one deficient standard, and a substantial proportion of facilities demonstrated extensive noncompliance. Although many deficiencies were corrected following the remediation period, a meaningful number persisted after corrective action. Importantly, PREA regulations do not establish penalties for facilities that remain noncompliant after the remediation period, raising concerns about accountability for noncompliant facilities. Additionally, we found that increasing PREA noncompliance was associated with higher rates of reported sexual assault allegations. Together, these findings raise concerns about the

systemic ability to protect individuals detained from sexual violence, especially within an institution with existing concerns about inadequate oversight and accountability.

While PREA was enacted to prevent, detect, and respond to sexual abuse, our findings suggest that implementation is inconsistent across all U.S. ICE facilities. Similar challenges have been documented in correctional settings, where studies have identified gaps in staff knowledge of PREA reporting requirements, inconsistent implementation, and barriers to reporting sexual abuse [15–16]. A recent Government Accountability Office report identified limitations in federal prison PREA audits, noting that facilities were found to be compliant despite ongoing sexual abuse reports [17]. The illustrative examples identified in audit narratives further demonstrate how failures in PREA implementation may create conditions that increase vulnerability to harm. The standards most frequently identified as deficient involved core protective functions rather than administrative or technical standards. For example, it is unclear if volunteers, contractors, and staff undergo any background checks before interacting with detained individuals, leaving it unknown as to whether they may have a history of sexual offenses. Similarly, many facilities were not reporting allegations of sexual abuse involving staff, contractors, or volunteers to the Joint Intake Center (JIC), ICE Office of Professional Responsibility (OPR), or the Department of Homeland Security Office of Inspector General (DHS OIG). The failure to report such allegations allows accused individuals to continue working in the environment where they were accused of sexual assault, thereby placing both survivors and other individuals detained at risk. Additionally, detained individuals with limited English proficiency (LEP) or disabilities frequently did not receive information about PREA standards, sexual assault reporting procedures, or assessments of their risk of sexual victimization or abusiveness in accessible formats or languages they could understand. This raises serious concerns about the underreporting of sexual assaults due to a lack of knowledge or inability to effectively communicate with appropriate channels. Although these examples do not establish causation, they provide important context for understanding how deficiencies may translate into barriers to prevention, reporting, investigation, and accountability.

These findings are particularly important given the substantial physical and psychological health consequences associated with sexual violence. Many individuals in immigration detention have experienced prior trauma, persecution, or violence, and exposure to sexual violence during detention may further compound these vulnerabilities and contribute to long-term adverse health outcomes [18]. As detention populations continue to increase, ensuring effective implementation of safeguards against sexual violence becomes increasingly important. We found that facilities with greater PREA noncompliance reported higher rates of sexual assault allegations, suggesting that deficiencies in PREA implementation may represent meaningful indicators of institutional environments in which sexual violence is more likely to occur or be reported. These findings are particularly concerning given that immigration detention is a civil rather than criminal process and is not intended to be punitive. Strengthening transparency, oversight, and accountability in the investigation of sexual assault allegations, as well as ensuring meaningful implementation of PREA standards, are critical to reducing the risk of sexual violence in detention settings.

Limitations

This study has several limitations. Sexual assault allegations within detention centers are likely underreported, as detained individuals may fear retaliation, lack trust in the reporting system, or be unaware of how to file a report. Relatedly, the classification of allegations as detainee-on-detainee, inmate-on-detainee, or staff-on-detainee may be subject to misclassification or inaccurate reporting by facility staff, potentially affecting the accuracy of reported allegation rates by perpetrator category. Additionally, very few allegations of sexual assault have been substantiated, largely due to the lack of thorough investigations by the DHS Office of the Inspector General (OIG) Joint Intake Center (JIC), or ICE Office of Professional Responsibility (OPR) [19]. Facility-level sexual assault allegations data were publicly available only through 2022, limiting analyses of more recent years. Finally, while associations were observed between PREA deficiencies and reported allegations, causality cannot be established.

CONCLUSION

PREA noncompliance was common across U.S. immigration detention facilities, with some deficiencies persisting beyond the remediation period. Greater noncompliance was associated with higher rates of reported sexual assault allegations, raising concerns about the effectiveness of existing standards. These findings highlight the need for stronger oversight, accountability, and meaningful implementation of PREA standards to protect individuals in immigration detention.

Declarations

Author Contribution

AL: contributed to methodology, data collection, extraction, and analysis, drafted the manuscript, approved of the final versionSB: contributed to data collection, extraction, and analysis, and manuscript review HK: contributed to data collection and extractionNN: contributed to data collection and extractionXD: contributed to data collection and extractionTM:contributed to methodology and performed the statistical analysisJN: contributed to study conceptualization and design, and manuscript reviewAMD: contributed to methodology, interpretation of findings, and manuscript reviewAZ: contributed to study conceptualization and design, interpretation of findings, analysis, critically revised the manuscript

Data Availability

The data analyzed in this study were extracted from publicly available Prison Rape Elimination Act (PREA) audit reports published by U.S. Immigration and Customs Enforcement (ICE). The source reports are publicly accessible through the ICE Freedom of Information Act (FOIA) Library at https://www.ice.gov/foia/library.

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