			OMB N	lo. 1121-0292	: Approval Expires 09/30/2021
FORM SSV-4 (4-16-2020)	And the second s	SURVEY OF SEXUAL V Other Correction Summary	nal Facilities	BUF	DEPARTMENT OF JUSTICE REAU OF JUSTICE STATISTICS ID ACTING AS COLLECTION AGENT U.S. DEPT. OF COMMERCE U.S. CENSUS BUREAU
DATA SUPPLIED BY					
Name		Т	ïtle		
OFFICIAL ADDRESS	Number and s	street or P.O. Box/Route Number	City	State	ZIP Code
TELEPHONE	Area code	Number	FAX NUMBER	Area Code	Number
E-MAIL ADDRESS					

(Please correct any error in name, mailing address, and ZIP Code)

What facilities are included in this data collection?

- PRIVATELY OPERATED FACILITIES: All privately owned or operated confinement facilities including prisons, jails, detention centers, community-based facilities, and other correctional facilities that are intended for adults but sometimes hold juveniles. INCLUDE privately operated multi-jurisdictional facilities.
- FACILITIES OPERATED BY OR FOR:
- THE UNITED STATES MILITARY
- THE BUREAU OF IMMIGRATION AND CUSTOMS ENFORCEMENT
- TRIBAL AUTHORITIES
- THE BUREAU OF INDIAN AFFAIRS

What inmates and incidents are included in this data collection?

Inmates under your custody between January 1, 2019, and December 31, 2019.

- INCLUDE incidents involving inmates under the authority, custody, or care of your confinement or community-based facilities or staff.
- EXCLUDE inmates held in other jurisdictions.

Reporting instructions:

- Please complete the entire SSV-4 Form.
- If the answer to a question is "not available" or "unknown," write "DK" do not know) in the space provided.

- If the answer to a question is "not applicable," write "NA" in the space provided.
- Section I: when exact numeric answers are not available, provide estimates and mark the box beside each figure.
- Sections II, III, and IV: if the answer to a question is "none" or "zero," write "0" or mark the box ∑ provided.

Substantiated incidents of sexual violence:

 Please complete an Incident Form Adult, SSV-IA) for each substantiated incident of sexual victimization.

Returning forms:

- If you need assistance, please call the U.S. Census Bureau toll-free at 1-888-369-3613, option 2, or e-mail govs.ssv@census.gov
- Please return your completed summary and substantiated incident forms by November 13, 2020.
- You may complete these forms online (see enclosed instructions). Or if you prefer, you may return these forms by mail or fax.
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE) TO: 1-888-262-3974

Burden statement

Under the Paperwork Reduction Act, we cannot ask you to respond to a collection of information unless it displays a currently valid OMB control number. The burden of this collection is estimated to average 30 minutes per response, including reviewing instructions, searching existing data sources, gathering necessary data, and completing and reviewing this form. Send comments regarding this burden estimate or any aspect of this survey, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. Do not send your completed form to this address.

	INFORMATION	Section II – INMATE-ON-INMATE SEXUAL VICTIMIZATION
How many persons under t facility were—	he supervision of your	DEFINITIONS
 a. CONFINED on December INCLUDE persons on transfacilities but who remain un INCLUDE persons out to cijurisdiction. INCLUDE persons held for EXCLUDE inmates on AW transfer to other jurisdiction EXCLUDE all persons in me based programs run by you (e.g., electronic monitoring service, day reporting, wor 	sfer to treatment nder your jurisdiction. ourt while under your other jurisdictions. OL, escape, or long-term ns. on-residential community- ur facility , house arrest, community k programs).	The survey utilizes the definition of "sexual abuse" as provided by 28 C.F.R. §115.6 in the National Standards to Prevent, Detect, and Respond to Prison Rape (under the Prison Rape Elimination Act of 2003). Attempted nonconsensual sexual acts are included if recorded by the facility. For purposes of SSV, sexual abuse is disaggregated into three categories of inmate-on-inmate sexual victimization. These categories are: NONCONSENSUAL SEXUAL ACTS Sexual contact of any person without his or her consent, or of a person who is unable to consent or refuse; AND • Contact between the penis and the vulva or the penis and the anus including penetration, however slight; OR
Inmates on	Male Female	 Contact between the mouth and the penis, vulva, or anus;
December 31, 2019		OR
 b. ADMITTED to your facilit INCLUDE new admissions officially booked into and h formal legal document and courts or some other official INCLUDE repeat offenders 	only, i.e., persons housed in your facilities by I by the authority of the al agency.	 Penetration of the anal or genital opening of another person however slight, by a hand, finger, object, or other instrument. ABUSIVE SEXUAL CONTACT Sexual contact of any person without his or her consent, or of a person who is unable to consent or refuse;
 EXCLUDE returns from es appointments/treatment fac appearances. 	cape, work release, medical cilities, and bail or court Male Female	 AND Intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks of any person.
New admissions during 2019		 EXCLUDE incidents in which the contact was incidental to a physical altercation.
		SEXUAL HARASSMENT
 Between January 1, 2019, a December 31, 2019, what we daily population of your control of your and your of persons for each day anuary 1, 2019, through December 2019, thr	was the average nfinement facility? / population, add the av during the period	Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one inmate directed toward another.
	Male Female	

3. Does your facility record allegations of inmate-on- inmate NONCONSENSUAL SEXUAL ACTS? (See definitions on page 2.)	6. Does your facility record allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT? (See definitions on page 2.)
01 Yes → a. Do you record all reported occurrences, or only substantiated ones? 01 All	01 ☐ Yes → Can these be counted separately from allegations of NONCONSENSUAL SEXUAL ACTS?
02 Substantiated only	01 🗌 Yes
b. Do you record attempted	₀₂ 🗌 No → Skip to Item 9.
NONCONSENSUAL SEXUAL ACTS or only completed ones?	02 No → Please provide an explanation in the space below and then skip to Item 9.
01 Both attempted and completed 02 Completed only	
02 □ No → Please provide the definition used by your facility for inmate-on-inmate NONCONSENSUAL SEXUAL ACTS in the space below. Use that definition to complete Items 4 and 5.	
4. Between January 1, 2019, and December 31, 2019, how many allegations of inmate- on-inmate NONCONSENSUAL SEXUAL ACTS were reported?	7. Between January 1, 2019, and December 31, 2019, how many allegations of inmate- on-inmate ABUSIVE SEXUAL CONTACT were reported?
Number reported	Number reported
If an allegation involved multiple victimizations, count	 If an allegation involved multiple victimizations, count
only once.	only once.Exclude any allegations that were reported as consensual.
 Exclude any allegations that were reported as consensual. 	• Exclude any allegations that were reported as consensual.
5. Of the allegations reported in Item 4, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)	8. Of the allegations reported in Item 7, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)
a. Substantiated	
 The event was investigated and determined to have occurred, based on a preponderance of the evidence (28 C.F.R. §115.72). 	a. Substantiated
b. Unsubstantiated	b. Unsubstantiated None
 The investigation concluded that evidence was insufficient to determine whether or not the event occurred. 	
	c. Unfounded None
c. Unfounded	
• The investigation determined that the event did NOT occur.	d. Investigation ongoing 🗆 None
d. Investigation ongoing	
• Evidence is still being gathered, processed or evaluated, and a final determination has not yet been made.	e. TOTAL (Sum of Items 8a
e. TOTAL (Sum of Items 5a through 5d)	e. TOTAL (Sum of Items 8a through 8d) In None The total about actual the number reported in Item 7
 The total should equal the number reported in Item 4. 	 The total should equal the number reported in Item 7.
	je 3

9. Does your facility record allegations of inmate-on-	Section III – STAFF-ON-INMATE SEXUAL ABUSE	
inmate SEXUAL HARASSMENT? (See definitions on page 2.)	DEFINITIONS	
 Yes → Do you record all reported allegations or only substantiated ones? 01 All 02 No → Please provide an explanation in the space below and then skip to Section III. 	The survey utilizes the definition of "sexual abuse" by a staff member, contractor or volunteer as provided by 28 C.F.R. §115.6 in the <i>National Standards to Prevent, Detect, and</i> <i>Respond to Prison Rape</i> (under the Prison Rape Elimination Act of 2003). For purposes of SSV, sexual abuse is disaggregated into two categories of staff-on-inmate sexual abuse. These categories are: STAFF SEXUAL MISCONDUCT	
	 Any behavior or act of a sexual nature directed toward an inmate by an employee, volunteer, contractor, official visitor or other agency representative (exclude family, friends or other visitors). Sexual relationships of a romantic nature between staff and inmates are included in this definition. Consensual or nonconsensual sexual acts include— Intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks that is unrelated to official duties or with the 	
10. Between January 1, 2019, and December 31, 2019, how many allegations of	 intent to abuse, arouse, or gratify sexual desire; OR Completed, attempted, threatened, or requested sexual acts; OR Occurrences of indecent exposure, invasion of privacy, 	
inmate-on-inmate SEXUAL HARASSMENT were reported?	or staff voyeurism for reason unrelated to official duties or for sexual gratification.	
 If an allegation involved multiple victims or inmate perpetrators, count only once. Exclude any allegations that were reported as consensual. 	Repeated verbal comments or gestures of a sexual nature to an inmate by an employee, volunteer, contractor, official visitor, or other agency representative (exclude family, friends, or other visitors). Include—	
11. Of the allegations reported in Item 10, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)	 Demeaning references to gender; or sexually suggestive or derogatory comments about body or clothing; OR	
a. Substantiated	Repeated profane or obscene language or gestures.	
b. Unsubstantiated		
c. Unfounded None		
d. Investigation ongoing 🗆 None		
 e. TOTAL (Sum of Items 11a through 11d) In None The total should equal the number reported in Item 10. 		

12. Does your facility record allegations of STAFF SEXUAL MISCONDUCT? (See definitions on page 4.)	15. Does your facility record allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 4.)
01 Yes → Do you record all reported occurrences, or only substantiated ones?	01 ☐ Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT?
01 All 02 Substantiated only	01
02 ○ No → Please provide an explanation in the space below and then skip to Item 15.	02 ○ No → Please provide an explanation in the space below and skip to Item 18.
13. Between January 1, 2019, and December 31, 2019, how many allegations of STAFF SEXUAL MISCONDUCT were reported?	16. Between January 1, 2019, and December 31, 2019, how many allegations of STAFF SEXUAL HARASSMENT were reported?
Number reported	Number reported
 If an allegation involved multiple victimizations, count only once. 	 If an allegation involved multiple victims or staff, count only once.
14. Of the allegations reported in Item 13, how many were — (Please contact the agency or office responsible for investigation allegations of sexual victimization in order to fully complete this form.)	17. Of the allegations reported in Item 16, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)
a. Substantiated	a. Substantiated
b. Unsubstantiated	b. Unsubstantiated
c. Unfounded None	c. Unfounded
d. Investigation ongoing None	d. Investigation ongoing 🗆 None
 e. TOTAL (Sum of Items 14a through 14d) In None The total should equal the number reported in Item 13. 	 e. TOTAL (Sum of Items 17a through 17d) Invite through 17d. The total should equal the number reported in Item 16.

Section IV – TOTAL SUBSTANTIATED INCIDENTS OF SEXUAL VICTIMIZATION	NOTES
18. What is the total number of substantiated incidents reported in Items 5a, 8a, 11a, 14a, and 17a?	
Total substantiated incidents	
Please complete a Substantiated Incident Form (Adult, SSV-IA) for each substantiated incident of sexual victimization.	
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Clear Fields

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Print Form