FORM **SSV-2** (6-7-2022)



SURVEY OF SEXUAL VICTIMIZATION, 2021

State Prison Systems Summary Form

U.S. DEPARTMENT OF JUSTICE BUREAU OF JUSTICE STATISTICS AND ACTING AS COLLECTION AGENT U.S. DEPT. OF COMMERCE U.S. CENSUS BUREAU

	OK JUSTICE PRO	Summa	ry Form				
DATA SUPPLIED BY							
Name			Title				
	4				1 -	I	
OFFICIAL ADDRESS	Number and	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?

All State-operated confinement facilities that are intended for adults but sometimes hold juveniles.

- INCLUDE prisons, penitentiaries, and correctional institutions; boot camps; community correction facilities; halfway houses; prison farms; reception, diagnostic, and classification centers; road camps; forestry and conservation camps; vocational training facilities; prison hospitals; and drug and alcohol treatment facilities for prisoners.
- INCLUDE State-operated local detention facilities in Alaska, Connecticut, Delaware, Hawaii, Rhode Island, and Vermont.
- EXCLUDE privately operated facilities and facilities operated and administered by local governments. (These facilities will be contacted directly for data on sexual victimization.)
- EXCLUDE facilities that hold only juveniles. (These facilities will be contacted directly for data on sexual victimization.)

What inmates and incidents are included in this data collection?

Inmates under your custody between January 1, 2021, and December 31, 2021.

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

Reporting instructions:

- Please complete the entire SSV-2 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.
- If the answer to a question is "none" or "0," mark the box (X) 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 Greta Clark at the U.S. Census Bureau toll-free at 1-800-253-2078, or e-mail greta.b.clark@census.gov
- Please return your completed summary and substantiated incident forms by November 12, 2022.
- You may complete these forms online at: https://ssv.census.gov/
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE): 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 60 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.

Section I - INMATE-ON-INMATE SEXUAL VICTIMIZATION

1.

2.

3.

DEFINITIONS

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;

OF

 Contact between the mouth and the penis, vulva, or anus:

OR

 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;

AND

- Intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks of any person.
- EXCLUDE incidents in which the contact was incidental to a physical altercation.

SEXUAL HARASSMENT

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.

Does your State prison system record allegations of inmate-on-inmate NONCONSENSUAL SEXUAL ACTS?			
01 ☐ Yes → a	Do you record occurrences, ones?		
	01 All		
	02 Substantiat	ted only	
	b. Do you reco NONCONSE or only com	NSUAL S	EXUAL ACTS
	01 Both atte	mpted and	completed
	02 Complete	ed only	
S N S	Please provide the o State prison system IONCONSENSUAL pace below. Use the Tems 2 and 3.	for inmate- SEXUAL A	on-inmate ACTS in the
how many a	nuary 1, 2021, a Illegations of in NSUAL SEXUAL	mate-on-i	nmate
Number rep	orted		□ None
If an allega count only	tion involved multip	ole victimiza	itions,
,	y allegations that w	ere reporte	ed as
Of the alleg many were responsible for	ations reported — (Please contact or investigating alle or order to fully com	the agency gations of s	y or office sexual
a. Substant	iated		□ None
The even have occurrent.	nt was investigated curred, based on a e (28 C.F.R. §115.7	prepondera	mined to ance of the
b. Unsubsta	ntiated		□ None
The investing insufficient occurred.	estigation concluded ent to determine wh d.	d that evide ether or no	ence was t the event
c. Unfounde	ed		☐ None
 The inverse occur. 	estigation determine	ed that the	event did NOT
d. Investiga	tion ongoing .		☐ None
 Evidence and a fire 	e is still being gathe nal determination ha	ered, proce as not yet b	ssed or evaluated, een made.
e. TOTAL (S 3a throug	um of Items h 3d		☐ None
The total	I should equal the r	number rend	orted in Item 2

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4. Does your State prison system record allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT? (See definitions on page of the page of t	HARASSMENT? (See definitions on page 2.) ely from JAL o1 Yes → Do you record all reported allegations or only substantiated ones? o1 All o2 Substantiated only
5. Between January 1, 2021, and December 3 how many allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT were reporte	e how many allegations of inmate-on-inmate
 Number reported	Number reported None If an allegation involved multiple victims or inmate perpetrators, count only once. Exclude any allegations that were reported as consensual.
6. Of the allegations reported in Item 5, how many were — (Please contact the agency or offic responsible for investigating allegations of sexual victimization in order to fully complete this form.)	9. Of the allegations reported in Item 8, how fice many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)
a. Substantiated No	one a. Substantiated
b. Unsubstantiated No	one b. Unsubstantiated
c. Unfounded	one c. Unfounded
d. Investigation ongoing	one d. Investigation ongoing None
e. TOTAL (Sum of Items 6a through 6d)	
 The total should equal the number reported in Item 5. 	 The total should equal the number reported in Item 8.

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SECTION II - STAFF-ON-INMATE SEXUAL ABUSE

DEFINITIONS

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 *National Standards to Prevent, Detect, and Respond to Prison Rape* (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 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 intent to abuse, arouse, or gratify sexual desire;

OR

• Completed, attempted, threatened, or requested sexual acts;

OR

 Occurrences of indecent exposure, invasion of privacy, or staff voyeurism for reasons unrelated to official duties or for sexual gratification.

STAFF SEXUAL HARASSMENT

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—

 Demeaning references to gender; or sexually suggestive or derogatory comments about body or clothing;

OR

Repeated profane or obscene language or gestures.

10.	Does your State prison system record allegations of STAFF SEXUAL MISCONDUCT?			
	0	o you record al ccurrences, or nes?	l reported only subs	d stantiated
	Ĭ	1 All 2 Substantiated	only	
	02 ☐ No → Plo	ease provide an ex Plow and then skip	kplanation i to Item 13.	in the space
11.	Between Ja December 3 STAFF SEXU	nuary 1, 2021, a 1, 2021, how m JAL MISCONDU	and any alleg CT were	ations of reported?
	Number rep	orted		None
	 If an allegat count only of 	ion involved multip once.	le victimiza	tions,
12.	many were - responsible for	ations reported - (Please contact to r investigating alleg order to fully com	he agency gations of s	or office exual
	a. Substanti	ated		. None
	b. Unsubsta	ntiated		.□ None
	c. Unfounde	d		. None
	d. Investiga	tion ongoing .		. None
	e. TOTAL (S 12a throu	um of Items gh 12d)		. None
	• The total Item 11.	should equal the r	number rep	orted in

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13.	Does your State prison system record allegations of STAFF SEXUAL HARASSMENT?	Section III - PRIVATE AND LOCAL ALLEGATIONS
	(See definitions on page 4.) 101 Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT? 101 Yes 102 No → Skip to Item 16. 102 No → Please provide an explanation in the space below and then skip to Item 16.	 16. Did any of the allegations reported in Items 2, 5, 8, 11, or 14 occur in a privately operated facility? o1 Yes o2 No 17. Did any of the allegations reported in Items 2, 5, 8, 11, or 14 occur in a facility operated and administered by local governments? o1 Yes o2 No
		Section IV – TOTAL SUBSTANTIATED INCIDENTS OF SEXUAL VICTIMIZATION
		18. What is the total number of substantiated incidents reported in Items 3a, 6a, 9a, 12a, and 15a? Total substantiated
		incidents □ None
14.	Between January 1, 2021, and December 31, 2021, how many allegations of STAFF SEXUAL HARASSMENT were reported?	→ Please complete a Substantiated Incident Form (Adult, SSV-IA) for each substantiated incident of sexual victimization.
	Number reported	NOTES
	 If an allegation involved multiple victims or staff, count only once. 	
15.	Of the allegations reported in Item 14, 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 None	
	b. Unsubstantiated	
	c. Unfounded	
	d. Investigation ongoing \square None	
	e. TOTAL (Sum of Items 15a through 15d)	
	 The total should equal the number reported in Item 14. 	
·		/

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Save As

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Print Form