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.
- EXCLUDE privately operated facilities and facilities operated and administered by local governments. (These facilities will be contacted directly for data on sexual violence.)
- EXCLUDE facilities that hold only juveniles. (These facilities will be contacted directly for data on sexual violence.)

What inmates and incidents are included in this data collection?


- 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 "zero," mark the box (X) provided.

Substantiated incidents of sexual violence:

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

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 govs.ssv@census.gov
- Please return your completed questionnaire and substantiated incident forms by September 16, 2011.
- If you prefer, you may also return these forms by mail or fax.
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE): 1-888-891-2099

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 VIOLENCE

DEFINITION OF SEXUAL VIOLENCE

The definition of "rape" as required under the Prison Rape Elimination Act of 2003 will be operationalized by disaggregating sexual assault into two categories of inmate-on-inmate SEXUAL VIOLENCE. These categories reflect uniform definitions formulated by the National Center for Injury Prevention and Control, in "Sexual Violence Surveillance: Uniform Definitions and Recommended Data Elements," Centers for Disease Control and Prevention. The categories of inmate-on-inmate SEXUAL VIOLENCE are:

NONCONSENSUAL SEXUAL ACTS:
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 vagina or the penis and the anus including penetration, however slight;

OR

• Contact between the mouth and the penis, vagina, or anus;

OR

• Penetration of the anal or genital opening of another person by a hand, finger, or other object.

ABUSIVE SEXUAL CONTACTS:
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 intent of the sexual contact is to harm or debilitate rather than to sexually exploit.

1. Does your State prison system record allegations of inmate-on-inmate NONCONSENSUAL SEXUAL ACTS?

a. Do you record all reported occurrences, or only substantiated ones?

   ☐ All
   ☐ Substantiated only

b. Do you record attempted NONCONSENSUAL SEXUAL ACTS or only completed ones?

   ☐ Both attempted and completed
   ☐ Completed only

2. Between January 1, 2010, and December 31, 2010, how many allegations of inmate-on-inmate NONCONSENSUAL SEXUAL ACTS were reported?

   Number reported

3. Of the allegations reported in Item 2, how many were —

   (Please contact the agency or office responsible for investigating allegations of sexual violence in order to fully complete this form.)

   a. Substantiated

   b. Unsubstantiated

   c. Unfounded

   d. Investigation ongoing

   e. TOTAL (Sum of Items 3a through 3d)
Section II – STAFF SEXUAL MISCONDUCT AND HARASSMENT

DEFINITION OF STAFF SEXUAL MISCONDUCT

The definition of STAFF SEXUAL MISCONDUCT is based on "Training for Investigators of Staff Sexual Misconduct," prepared by the National Institute of Corrections. STAFF SEXUAL MISCONDUCT includes any behavior or act of a sexual nature directed toward an inmate by an employee, volunteer, contractor, official visitor, or other agency representative (exclude inmate 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 including:

- Intentional touching of the genitalia, anus, groin, breast, inner thigh, or buttocks 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 sexual gratification.

DEFINITION OF STAFF SEXUAL HARASSMENT

The definition of STAFF SEXUAL HARASSMENT was also developed by the National Institute of Corrections. STAFF SEXUAL HARASSMENT includes repeated verbal statements or comments of a sexual nature to an inmate by an employee, volunteer, contractor, official visitor, or other agency representative (exclude inmate family, friends, or other visitors).

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

**OR**

Repeated profane or obscene language or gestures.

7. Does your State prison system record allegations of STAFF SEXUAL MISCONDUCT?

01 □ Yes → Do you record all reported occurrences, or only substantiated ones?

01 □ All
02 □ Substantiated only

02 □ No → Please provide an explanation in the space below and then skip to Item 10.

---

4. Does your State prison system record allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACTS? (See definitions on page 2.)

01 □ Yes → Can these be counted separately from allegations of NONCONSENSUAL SEXUAL ACTS?

01 □ Yes
02 □ No → Skip to Item 7.

02 □ No → Please provide an explanation in the space below and then skip to Item 7.

---

5. Between January 1, 2010, and December 31, 2010, how many allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACTS were reported?

   Number reported . . . . . . None

   • If an allegation involved multiple victimizations, count only once.

6. Of the allegations reported in Item 5, how many were — (Please contact the agency or office responsible for investigating allegations of sexual violence in order to fully complete this form.)

   a. Substantiated . . . . None
   b. Unsubstantiated . . . . None
   c. Unfounded . . . . None
   d. Investigation ongoing . None
   e. TOTAL (Sum of Items 6a through 6d) . . . . . None

---

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8. Between January 1, 2010, and December 31, 2010, how many allegations of STAFF SEXUAL MISCONDUCT were reported?

<table>
<thead>
<tr>
<th>Number reported</th>
<th>□ None</th>
</tr>
</thead>
</table>

- If an allegation involved multiple victims or staff, count only once.

9. Of the allegations reported in Item 8, how many were:

<table>
<thead>
<tr>
<th>a. Substantiated</th>
<th>□ None</th>
</tr>
</thead>
<tbody>
<tr>
<td>b. Unsubstantiated</td>
<td>□ None</td>
</tr>
<tr>
<td>c. Unfounded</td>
<td>□ None</td>
</tr>
<tr>
<td>d. Investigation ongoing</td>
<td>□ None</td>
</tr>
<tr>
<td>e. TOTAL (Sum of Items 9a through 9d)</td>
<td>□ None</td>
</tr>
</tbody>
</table>

- Please contact the agency or office responsible for investigating allegations of sexual violence in order to fully complete this form.

10. Does your State prison system record allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 3.)

<table>
<thead>
<tr>
<th>□ Yes</th>
<th>Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>□ Yes</td>
</tr>
<tr>
<td></td>
<td>□ No → Skip to Item 13.</td>
</tr>
<tr>
<td>□ No</td>
<td>Please provide an explanation in the space below and then skip to Item 13.</td>
</tr>
</tbody>
</table>

11. Between January 1, 2010, and December 31, 2010, how many allegations of STAFF SEXUAL HARASSMENT were reported?

<table>
<thead>
<tr>
<th>Number reported</th>
<th>□ None</th>
</tr>
</thead>
</table>

- If an allegation involved multiple victims or staff, count only once.

12. Of the allegations reported in Item 11, how many were:

<table>
<thead>
<tr>
<th>a. Substantiated</th>
<th>□ None</th>
</tr>
</thead>
<tbody>
<tr>
<td>b. Unsubstantiated</td>
<td>□ None</td>
</tr>
<tr>
<td>c. Unfounded</td>
<td>□ None</td>
</tr>
<tr>
<td>d. Investigation ongoing</td>
<td>□ None</td>
</tr>
<tr>
<td>e. TOTAL (Sum of Items 12a through 12d)</td>
<td>□ None</td>
</tr>
</tbody>
</table>

- Please contact the agency or office responsible for investigating allegations of sexual violence in order to fully complete this form.

Section III – PRIVATE AND LOCAL ALLEGATIONS

13. Did any of the allegations reported in items 2, 5, 8, or 11 occur in a privately operated facility?

| □ Yes | |
| □ No  | |

14. Did any of the allegations reported in items 2, 5, 8, or 11 occur in a facility operated and administered by local governments?

| □ Yes | |
| □ No  | |

Section IV – TOTAL OF SUBSTANTIATED INCIDENTS OF SEXUAL VIOLENCE

15. What is the total number of substantiated incidents reported in Items 3a, 6a, 9a, and 12a?

| Total substantiated incidents | □ None |

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

NOTES