				OMB	No. 1121-0292:	Approval Expires 06/30/2017
FORM <b>SSV-1</b> (4-21-2016)	A TOTAL CARE	SURVEY OF SEXUAL Federal Bure Summa	au of Pris	•	5 BU	DEPARTMENT OF JUSTICE REAU OF JUSTICE STATISTICS ND ACTING AS COLLECTION AGENT U.S. DEPT. OF COMMERCE conomics and Statistics Administration U.S. CENSUS BUREAU
		DATA SUI	PLIED B	Y		
Name			Title			
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						

#### What facilities are included in this data collection? Report All confinement facilities operated by the Federal Bureau of Prisons

- 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. (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, 2015, and December 31, 2015.

- 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.

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

### **Reporting instructions:**

- Please complete the entire SSV-1 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 govs.ssv@census.gov
- Please return your completed summary and substantiated incident forms by September 1, 2016.
- 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): 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

#### 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). 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;

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• Contact between the penis and the vulva or the penis and the anus including penetration, however slight;

#### OR

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 unwanted 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.

1.	<b>Does the Federal Bureau of Prisons record</b>			
	allegations of inmate-on-inmate			
	NONCONSENSUAL SEXUAL ACTS?			

 $_{01}$   $\square$  Yes  $\rightarrow$  a. Do you record all reported occurrences, or only substantiated ones?

|--|

02 Substantiated only

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

- 01 Both attempted and completed
- 02 Completed only

 $_{02}$  No  $\rightarrow$  Please provide the definition used by the Federal Bureau of Prisons for inmate-on-inmate NONCONSENSUAL SEXUAL ACTS in the space below. Use that definition to complete Items 2 and 3.

2. Between January 1, 2015, and December 31, 2015, how many allegations of inmate-on-inmate **NONCONSENSUAL SEXUAL ACTS were reported?** 

#### Number reported

- None
- If an allegation involved multiple victimizations, count only once.
- Exclude any allegations that were reported as consensual.
- 3. Of the allegations reported in Item 2, 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).

None

None

b. Unsubstantiated

The investigation concluded that evidence was insufficient to determine whether or not the event occurred.

None c. Unfounded

 The investigation determined that the event did NOT occur.

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 None 3a through 3d) . . . . . . . . .
  - The total should equal the number reported in Item 2.

<ul> <li>4. Does the Federal Bureau of Prisons record allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT? (See definitions on page 2.)</li> <li>01 ☐ Yes → Can these be counted separately from allegations of NONCONSENSUAL SEXUAL ACTS?</li> <li>01 ☐ Yes</li> <li>02 ☐ No → Skip to Item 7.</li> <li>02 ☐ No → Please provide an explanation in the space below and then skip to Item 7.</li> </ul>	<ul> <li>7. Does the Federal Bureau of Prisons record allegations of inmate-on-inmate SEXUAL HARASSMENT? (See definitions on page 2.)</li> <li>01 ☐ Yes → Do you record all reported allegations or only substantiated ones?</li> <li>01 ☐ All</li> <li>02 ☐ No → Please provide an explanation in the space below and then skip to Section II.</li> </ul>
<ul> <li>5. Between January 1, 2015, and December 31, 2015, how many allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT were reported?</li> <li>Number reported  None</li> <li>If an allegation involved multiple victimizations,</li> </ul>	<ul> <li>8. Between January 1, 2015, and December 31, 2015, how many allegations of inmate-on-inmate SEXUAL HARASSMENT were reported?</li> <li>Number reported \_ None</li> <li>If an allegation involved multiple victims or</li> </ul>
<ul> <li>If all allegation involved multiple victimizations, count only once.</li> <li>Exclude any allegations that were reported as consensual.</li> <li>6. Of the allegations reported in Item 5, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)</li> </ul>	<ul> <li>If all allegation involved intriple victims of inmate perpetrators, count only once.</li> <li>Exclude any allegations that were reported as consensual.</li> <li>9. Of the allegations reported in Item 8, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)</li> </ul>
<ul> <li>a. Substantiated</li> <li>b. Unsubstantiated</li> </ul>	a. Substantiated None None
<ul> <li>c. Unfounded</li> <li>d. Investigation ongoing</li> </ul>	<b>c. Unfounded</b>
<ul> <li>e. TOTAL (Sum of Items 6a through 6d)</li></ul>	<ul> <li>e. TOTAL (Sum of Items 9a through 9d)</li></ul>

# 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 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 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 statements, 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 the Federal Bureau of Prisons record allegations of STAFF SEXUAL MISCONDUCT?

#### of ☐ Yes → Do you record all reported occurrences, or only substantiated ones?

01 🗌 A	١I
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02 Substantiated only

02 No → Please provide an explanation in the space below and then skip to Item 13.

11. Between January 1, 2015, and December 31, 2015, how many allegations of STAFF SEXUAL MISCONDUCT were reported?

Number reported

\_ 🗌 None

- If an allegation involved multiple victimizations, count only once.
- **12. Of the allegations reported in Item 11, 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	🗆 None
c. Unfounded	🗆 None
d. Investigation ongoing	
e. TOTAL (Sum of Items 12a through 12d)	One

• The total should equal the number reported in Item 11.

$\left( \right)$		Section III – TOTAL SUBSTANTIATED
(13	<ul> <li>Does the Federal Bureau of Prisons record allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 4.)</li> <li>1 Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT? <ul> <li>01 Yes</li> <li>02 No → Skip to Item 16.</li> </ul> </li> <li>02 No → Please provide an explanation in the space below and then skip to Item 16.</li> </ul>	INCIDENTS OF SEXUAL VICTIMIZATION         16. What is the total number of substantiated incidents reported Items 3a, 6a, 9a, 12a, and 15a?         Total substantiated incidents         incidents         Please complete an Incident Form (Adult, SSV-IA) for each substantiated incident of sexual victimization.         NOTES
14	Between January 1, 2015, and December 31, 2015, how many allegations of STAFF SEXUAL HARASSMENT were reported?     Number reported	
15	<ul> <li><b>5.</b> 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.)</li> <li><b>a. Substantiated</b></li> <li><b>b. Unsubstantiated</b></li> </ul>	
	c. Unfounded       None         d. Investigation ongoing       None         e. TOTAL (Sum of Items 15a through 15d)       None         or None       None         • The total should equal the number reported in Item 14.	