FORM **SSV-2** (5-17-2017)



SURVEY OF SEXUAL VICTIMIZATION, 2016 State Prison Systems Summary Form

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

| | | DATA SUPPLIED | 3)7 | | | |
|-----|---------------------|--|---------------|-----------|----------|--|
| | Name Elisabeth | Copeland State | wide PR | EA Coc | rdunator | |
| · . | OFFICIAL ADDRESS | Number and street or P.O. Box/Route Number 714 SW Jackson, Suite 300 | City | State | ZIP Code | |
| | TELEPHONE | Area code Number 391 - 3074 | FAX NUMBER | Área Code | Number | |
| | E-MAIL ADDRESS | Elisabeth. Copeland @ P.s. gov | · | | | |

KS002

C\$a424383887



17 0 000 000 07 00000 017 00 SEQ001-00004 Kansas Department of Corrections Joe Norwood Secretary 714 S.W. Jackson Street, Suite 300 Topeka KS 66603

(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, 2016, and December 31, 2016.

- 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 (☒) 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 August 15, 2017.
- 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;

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 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.

| allegations of | f inmate-on-inmate SUAL SEXUAL ACTS? |
|---|---|
| ₀₁ ☑ Yes → a. | Do you record all reported occurrences, or only substantiated ones? |
| | 01 [All |
| | ₀₂ Substantiated only |
| b | Do you record attempted NONCONSENSUAL SEXUAL ACTS or only completed ones? |
| | ₀₁ ☐ Both attempted and completed |
| | ₀₂ Completed only |
| Sta NO spa | ase provide the definition used by your te prison system for inmate-on-inmate NCONSENSUAL SEXUAL ACTS in the ace below. Use that definition to complete ms 2 and 3. |
| how many allo | uary 1, 2016, and December 31, 2016 egations of inmate-on-inmate |
| NONCONSEN | SUAL SEXUAL ACTS were reported? |
| Number repor | |
| If an allegatio count only on | n involved multiple victimizations, ce. |
| Exclude any a consensual. | allegations that were reported as |
| many were — responsible for in | ions reported in Item 2, how (Please contact the agency or office nvestigating allegations of sexual rder to fully complete this form.) |
| a. Substantiat | ed None |
| The event whave occur | was investigated and determined to red, based on a preponderance of the 28 C.F.R. §115.72). |
| b. Unsubstant | isted 17 None |
| The investig | gation concluded that evidence was to determine whether or not the event |
| c. Unfounded | 13 None |
| The investigoccur. | gation determined that the event did NOT |
| d. Investigatio | n ongoing None |
| | still being gathered, processed or evaluated determination has not yet been made. |
| e. TOTAL (Sum 3a through 3d) | of Items 31 None |
| The total sh | ould equal the number reported in Item 2 |

| 4. Does your State prison system record allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT? (See definitions on page 2.) | 7. Does your State prison system record allegations of inmate-on-inmate SEXUAL HARASSMENT? (See definitions on page 2.) | | | | |
|---|---|--|--|--|--|
| 01 ☑Yes → Can these be counted separately from allegations of NONCONSENSUAL SEXUAL ACTS? | 01 ☑ Yes → Do you record all reported allegations or only substantiated ones? | | | | |
| 01 LYes | 01 □ AlT | | | | |
| 02 ☐ No → Skip to Item 7. | ₀₂ Substantiated only | | | | |
| 02 ☐ No → Please provide an explanation in the space below and then skip to Item 7. | 02 ☐ No → Please provide an explanation in the space below and then skip to Section II. | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 5. Between January 1, 2016, and December 31, 2016, how many allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT were reported? | 8. Between January 1, 2016, and December 31, 2016, how many allegations of inmate-on-inmate SEXUAL HARASSMENT were reported? | | | | |
| | [10] 생물님, 인원 등 이 시간 [12] 1번 [20] 스키워크 하네 인 | | | | |
| Number reported 49 None | Number reported 122 None | | | | |
| If an allegation involved multiple victimizations, count only once. | If an allegation involved multiple victims or inmate perpetrators, count only once. | | | | |
| Exclude any allegations that were reported as consensual. | Exclude any allegations that were reported as consensual. | | | | |
| 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.) | 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.) | | | | |
| a. Substantiated None | a. Substantiated None | | | | |
| | | | | | |
| b. Unsubstantiated <u>2D</u> □ None | b. Unsubstantiated 39 None | | | | |
| | | | | | |
| c. Unfounded U None | c. Unfounded Le Le _ D None | | | | |
| | c. Unfounded | | | | |
| d. Investigation ongoing 2 None | d. Investigation ongoing None | | | | |
| e. TOTAL (Sum of Items 43 None | e. TOTAL (Sum of Items 9a through 9d) | | | | |
| The total should equal the number reported in Item 5. | The total should equal the number reported in Item 8. | | | | |
| 1 | | | | | |

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;

OΒ

Completed, attempted, threatened, or requested sexual acts;

OF

 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 your State prison system record allegations of STAFF SEXUAL MISCONDUCT?

On Pres - Do you record all reported occurrences, or only substantiated ones?

01 AT

₀₂ Substantiated only

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

11. Between January 1, 2016, and December 31, 2016, how many allegations of STAFF SEXUAL MISCONDUCT were reported?

Number reported 50 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 S

b. Unsubstantiated None

d. Investigation ongoing . ____ None

The total should equal the number reported in Item 11.

| 13. | Does your State prison system record allegations of STAFF SEXUAL HARASSMENT? | Section III – PRIVATE AND LOCAL ALLEGATIONS | | | | |
|-----|---|--|--|--|--|--|
| | (See definitions on page 4.) | 16. Did any of the allegations reported in Items 2, | | | | |
| | 01 ☑ Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT? | 5, 8, 11, or 14 occur in a privately operated facility? | | | | |
| | 01 ☑ Yes | 01 L 165 02 L No | | | | |
| | 02 ☐ No → Skip to Item 16. | 17. Did any of the allegations reported in Items 2, 5, 8, 11, or 14 occur in a facility operated and | | | | |
| | 02 ☐ No → Please provide an explanation in the space below and then skip to Item 16. | administered by local governments? | | | | |
| | and with one to nom to. | 01 | | | | |
| | | 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 | | | | |
| 14. | Between January 1, 2016, and December 31, 2016, 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 147 🗆 None | 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 | | | | | |
| | b. Unsubstantiated 9 None | | | | | |
| • | c. Unfounded 124 None | | | | | |
| | d. Investigation ongoing None | | | | | |
| | ***TOTAL (Sum of Items 15a through 15d) 147 None | | | | | |
| | The total should equal the number reported in Item 14. | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| | | | | , , |
|--|--|---|---|--------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | • | |
| | | | | |
| | | | | |
| | | | | |
| | | · | | |
| | | | | |