FORM **SSV-2** (9-12-2019)



# **SURVEY OF SEXUAL VICTIMIZATION, 2018**

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

	USTICE PE		Summar	y Form				
DATA SUPPLIED BY								
Name Peggy Steimel				Title STATEV	VIDE PREA C	OORDINATO	)R	
OFFICIAL ADDRESS	Number and		Box/Route Number Jackson Street		City Topeka	State KS	ZIP Code 66603	
TELEPHONE	Area code 785	Number 2913074			FAX NUMBER	Area Code 785	Number 2960014	
E-MAIL ADDRESS	peggy.steimel@doc.ks.gov							

# 1700000007000001700

Kansas Department of Corrections

(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, 2018, and December 31, 2018.

- 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 29, 2019.
- 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;

#### 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 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 syst allegations of inmate-on-inmonCONSENSUAL SEXUAL	nate	rd		
01 ▼ Yes → a. Do you record occurrences, ones?				
01 ✗ AⅡ				
02 Substantiat	ted only			
b. Do you reco NONCONSE or only com	<b>NSUAL S</b>	EXUAL ACTS		
01 Soth attempted and completed				
	02 Completed only			
02 ☐ No → Please provide the of State prison system NONCONSENSUAL space below. Use the ltems 2 and 3.	for inmate SEXUAL .	-on-inmate ACTS in the		
2. Between January 1, 2018, a how many allegations of in NONCONSENSUAL SEXUAL	mate-on-	inmate		
Number reported	15	None		
If an allegation involved multip count only once.	le victimiza			
<ul> <li>Exclude any allegations that w consensual.</li> </ul>	ere report	ed as		
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 Cubatantistad	2	None		
<ul> <li>Substantiated</li></ul>				
h Harabatantiatad	10	None		
The investigation concluded that evidence was insufficient to determine whether or not the event occurred.				
c. Unfounded	3	☐ None		
The investigation determined that the event did NOT occur.				
d. Investigation ongoing	0	None		

Evidence is still being gathered, processed or evaluated, and a final determination has not yet been made.

The total should equal the number reported in Item 2.

None

e. TOTAL (Sum of Items

3a through 3d

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4.	Does your State prison sys allegations of inmate-on-in SEXUAL CONTACT? (See de	mate ABUSIVE	7. Does your State prison syst allegations of inmate-on-ini HARASSMENT? (See definition	mate SEXUAL
	01 ▼ Yes → Can these be co allegations of No SEXUAL ACTS?	unted separately from ONCONSENSUAL	01 ▼ Yes → Do you record al allegations or or ones?	ll reported nly substantiated
	01   Yes 02 No → Skip to Ite	m 7.	<sub>01</sub> ∡ All <sub>02</sub> ☐ Substantiated	only
	02 ☐ No → Please provide an e below and then skip	explanation in the space to Item 7.	02 ☐ No → Please provide an e below and then skip	xplanation in the space to Section II.
	Between January 1, 2018, a how many allegations of in ABUSIVE SEXUAL CONTAC	mate-on-inmate	8. Between January 1, 2018, a how many allegations of in SEXUAL HARASSMENT we	mate-on-inmate
	Number reported  If an allegation involved multip count only once.	□ None le victimizations,	Number reported  If an allegation involved multip inmate perpetrators, count onl	
	<ul> <li>Exclude any allegations that w consensual.</li> </ul>	ere reported as	<ul> <li>Exclude any allegations that w consensual.</li> </ul>	ere reported as
	Of the allegations reported many were — (Please contact responsible for investigating alleg victimization in order to fully com	the agency or office	9. Of the allegations reported many were — (Please contact responsible for investigating alleg victimization in order to fully com	the agency or office gations of sexual
	a. Substantiated	4 □ None	a. Substantiated	5 None
	b. Unsubstantiated	None	b. Unsubstantiated	None
	c. Unfounded	15 None	c. Unfounded	None
	d. Investigation ongoing	0 None	d. Investigation ongoing	0 None
	e. TOTAL (Sum of Items 6a through 6d)		e. TOTAL (Sum of Items 9a through 9d)	
	The total should equal the left tem 5.	number reported in	The total should equal the ltem 8.	number reported in

## **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;

#### OB

Repeated profane or obscene language or gestures.

10.	allegations of STAFF SEXUAL MISCONDUCT?			
	01 ▼ Yes → <b>Do yo</b> occur ones?	rences, or	l reported only subs	d stantiated
	01 <b>x</b> A	ull Substantiated	only	
	02 ☐ No → Please below a	provide an ex and then skip	oplanation to Item 13.	in the space
11.	Between Januar December 31, 20 STAFF SEXUAL I	)18, how ma	any alleg	ations of reported?
	Number reported	<b>.</b>	25	None
	If an allegation in count only once.		le victimiza	
12.	Of the allegation many were – (Ple responsible for inve- victimization in orde	ase contact tl stigating alleg	he agency gations of s	or office exual
	a. Substantiated	l	7	□ None
	b. Unsubstantiat	ted	7	. None
	c. Unfounded .		11	. None
	d. Investigation	ongoing .	0	. None
	e. TOTAL (Sum of 12a through 1	of Items 2d)	25	. None
	<ul> <li>The total shoultem 11.</li> </ul>	ıld 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.)  11  Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT?  12  Yes  13  Yes  14  Yes  15  Yes  16  Yes  17  Yes  18  Yes  19  Yes  10  No → 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?  □1  Yes □2 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?  □1 Yes □2 No  Section IV - TOTAL SUBSTANTIATED			
	18. What is the total number of substantiated incidents reported in Items 3a, 6a, 9a, 12a, and 15a?			
14. Between January 1, 2018, and December 31, 2018, how many allegations of STAFF SEXUAL HARASSMENT were reported?	incidents			
Number reported 20 None	NOTES			
<ul> <li>If an allegation involved multiple victims or staff, count only once.</li> </ul>				
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 1 None				
<b>b. Unsubstantiated</b>				
c. Unfounded 12 None				
<b>d. Investigation ongoing</b> 0 None				
e. TOTAL (Sum of Items 15a through 15d)				
<ul> <li>The total should equal the number reported in Item 14.</li> </ul>				
	]			

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Save As

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**Print Form** 

**Clear Fields**