				OMB N	o. 1121-0292:	Approval Expires 06/30/2017
FORM <b>SSV-2</b> (4-21-2016)	MULTIC ULT	SURVEY OF SEXUAL State Priso Summa	on Systen	•	BUF AN	DEPARTMENT OF JUSTICE REAU OF JUSTICE STATISTICS ID ACTING AS COLLECTION AGENT J.S. DEPT. OF COMMERCE conomics and Statistics Administration U.S. CENSUS BUREAU
DATA SUPPLIED BY						
Name Title						
Bryan Pearson Executive Director of PREA Compliance			npliance			
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## 1500000007000001500

Indiana Department of Correction

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

#### **Reporting instructions:** What facilities are included in this data collection? All State-operated confinement facilities that are intended for Please complete the entire SSV-2 Form. adults but sometimes hold juveniles. If the answer to a question is "not available" or "unknown," write "DK" (do not know) in the space provided. INCLUDE prisons, penitentiaries, and correctional institutions; boot camps; community correction facilities; If the answer to a question is "not applicable," write "NA" halfway houses; prison farms; reception, diagnostic, and in the space provided. classification centers; road camps; forestry and If the answer to a question is "none" or "0," mark the conservation camps; vocational training facilities; prison box (X) provided. hospitals; and drug and alcohol treatment facilities for prisoners. Substantiated incidents of sexual violence: INCLUDE State-operated local detention facilities in Alaska, Connecticut, Delaware, Hawaii, Rhode Island, Please complete an Incident Form (Adult, SSV-IA) and Vermont. for each substantiated incident of sexual victimization. **EXCLUDE** privately operated facilities and **Returning forms:** facilities operated and administered by local governments. (These facilities will be If you need assistance, please call Greta Clark at the contacted directly for data on sexual U.S. Census Bureau toll-free at 1-800-253-2078, or victimization.) e-mail govs.ssv@census.gov EXCLUDE facilities that hold only juveniles. (These facilities will be contacted directly for data on sexual Please return your completed summary and substantiated incident forms by victimization.) September 1, 2016. What inmates and incidents are included in this You may complete these forms online (see data collection? enclosed instructions.) Or if you prefer, you may Inmates under your custody between January 1, 2015, and return these forms by mail or fax. December 31, 2015. MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000 INCLUDE incidents involving inmates under the authority, custody, or care of your confinement or FAX (TOLL FREE): 1–888–262–3974 community-based facilities or staff. **EXCLUDE** incidents involving inmates held in

#### **Burden Statement**

local jails and facilities in other jurisdictions.

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 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. Does your State prison system record allegations of inmate-on-inmate NONCONSENSUAL SEXUAL ACTS?			
<sub>01</sub>	Do you record all reported occurrences, or only substantiated		

	_	
1		ΔII

ones?

02 Substantiated only

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

01 Both attempted and completed

35

None

02 Completed only

02 No → Please provide the definition used by your State prison system 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 .....

- 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 ..... 4 None
    - The event was investigated and determined to have occurred, based on a preponderance of the evidence (28 C.F.R. §115.72).

Unsubstantiated	24	None
<ul> <li>The investigation concluded insufficient to determine who occurred.</li> </ul>	d that evide ther or no	ence was of the event
Unfounded	7	None

The investigation determined that the event did NOT occur.

d.	Investigation	ongoing	
•	IIIVESLIGALIUII	unguing .	_

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

0

None

- e. TOTAL (Sum of Items 35 None
  - The total should equal the number reported in Item 2.

h.

c.

4. Does your State prison system record	7. Does your State prison system record		
allegations of inmate-on-inmate ABUSIVE	allegations of inmate-on-inmate SEXUAL		
SEXUAL CONTACT? (See definitions on page 2.)	HARASSMENT? (See definitions on page 2.)		
on └─ Yes →Can these be counted separately from	01 Yes → Do you record all reported		
allegations of NONCONSENSUAL	allegations or only substantiated		
SEXUAL ACTS?	ones?		
01 $\checkmark$ Yes	01 C All		
02 $\square$ No $\rightarrow$ Skip to Item 7.	02 Substantiated only		
02 □ No → Please provide an explanation in the space	02 ○ No → Please provide an explanation in the space		
below and then skip to Item 7.	below and then skip to Section II.		
5. Between January 1, 2015, and December 31, 2015,	8. Between January 1, 2015, and December 31, 2015,		
how many allegations of inmate-on-inmate	how many allegations of inmate-on-inmate		
ABUSIVE SEXUAL CONTACT were reported?	SEXUAL HARASSMENT were reported?		
<ul> <li>Number reported 33 None</li> <li>If an allegation involved multiple victimizations, count only once.</li> </ul>	<ul> <li>Number reported <u>30</u> None</li> <li>If an allegation involved multiple victims or inmate perpetrators, count only once.</li> </ul>		
<ul> <li>Exclude any allegations that were reported as</li></ul>	<ul> <li>Exclude any allegations that were reported as</li></ul>		
consensual.	consensual.		
6. Of the allegations reported in Item 5, how	<b>9. Of the allegations reported in Item 8, how</b>		
many were — (Please contact the agency or office	<b>many were</b> — (Please contact the agency or office		
responsible for investigating allegations of sexual	responsible for investigating allegations of sexual		
victimization in order to fully complete this form.)	victimization in order to fully complete this form.)		
a. Substantiated 4 None	a. Substantiated 2 None		
<b>b. Unsubstantiated</b> 18 None	<b>b. Unsubstantiated</b> 21 None		
<b>c. Unfounded</b> <u>11</u> None	<b>c. Unfounded</b>		
<b>d. Investigation ongoing</b> 0 None	<b>d. Investigation ongoing</b> . <u>1</u> None		
e. TOTAL (Sum of Items	e. TOTAL (Sum of Items		
6a through 6d)	9a through 9d)		
<ul> <li>The total should equal the number reported in</li></ul>	<ul> <li>The total should equal the number reported in</li></ul>		
Item 5.	Item 8.		

## 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 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?

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

01 🗹 All

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

 If an allegation involved multiple victimizations, count only once.

34

None

**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	8 None
<b>b. Unsubstantiated</b>	14 None
c. Unfounded	12 None
d. Investigation ongoing	0 None
e. TOTAL (Sum of Items 12a through 12d)	34 🗌 None

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

Does your State prison syst	em record	Section III – PRIVATE AND LOCAL ALLEGATIONS
<ul> <li>(See definitions on page 4.)</li> <li>O1 ♥ Yes → Can these allegations separately from SEXUAL MISCON</li> <li>O1 ♥ Yes</li> <li>O2 ■ No → Skip to</li> <li>O2 ■ No → Please provide an example.</li> </ul>	ations be counted allegations of STAFF NDUCT? 1 Item 16. (planation in the space	<ul> <li>16. Did any of the allegations reported in Items 2, 5, 8, 11, or 14 occur in a privately operated facility?</li> <li>01 Yes</li> <li>02 No</li> <li>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?</li> <li>01 Yes</li> <li>02 No</li> </ul>
		Section IV – TOTAL SUBSTANTIATED INCIDENTS OF SEXUAL VICTIMIZATION
		<ul> <li>18. What is the total number of substantiated incidents reported in Items 3a, 6a, 9a, 12a, and 15a?</li> <li>Total substantiated</li> </ul>
		incidents
December 31, 2015, how m	any allegations	→ Please complete an Incident Form (Adult, SSV-IA) for each substantiated incident of sexual victimization.
Number reported	57 🗌 None	NOTES
count only once. • Of the allegations reported many were — (Please contact responsible for investigating alleg	<b>in Item 14, how</b> the agency or office nations of sexual	
a. Substantiated	None	
<b>b. Unsubstantiated</b>	<u>43</u> _ None	
c. Unfounded	12 🗌 None	
d. Investigation ongoing	0 None	
<ul> <li>e. TOTAL (Sum of Items 15a through 15d)</li> <li>The total should equal the r Item 14.</li> </ul>	57 None number reported in	
	<ul> <li>allegations of STAFF SEXUA (See definitions on page 4.)</li> <li>or Yes → Can these allegations sexual MISCO or Yes or No → Skip to</li> <li>or No → Please provide an expension of the skip</li> <li>Between January 1, 2015, at December 31, 2015, how most STAFF SEXUAL HARASSis reported?</li> <li>Number reported</li></ul>	01 Yes       Yes       > Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT?         01 Yes       02 No → Skip to Item 16.         02 No → Please provide an explanation in the space below and then skip to Item 16.         02 No → Please provide an explanation in the space below and then skip to Item 16.         02 No → Please provide an explanation in the space below and then skip to Item 16.         02 No → Please provide an explanation in the space below and then skip to Item 16.         03 Period         04 Period         05 Period         06 Period         07 Press         08 Period         09 Press         09 Press         01 Period         01 Period         01 Period         02 None         03 Period         04 Press         05 Pressonsible for investigating allegations of sexual victimization in order to fully complete this form.)         04 Press contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)         05 Pressonsible for investigating allegations of sexual victimization in order to fully complete this form.)         05 Pressonsible for investigating allegations of sexual victimization in order to fully complete this form.)         01 Pressonsible for investigating allegations of sexual victimization in order to f