FORM \$\$V-2 (6-7-2022)	THE NO CONTRACT OF THE SECOND	SURVEY OF SEXUAL State Priso Summa		2022 ATION, 2022	U.S. I BUF AN	Approval Expires 08/31/2024 DEPARTMENT OF JUSTICE REAU OF JUSTICE STATISTICS ID ACTING AS COLLECTION AGENT J.S. DEPT. OF COMMERCE U.S. CENSUS BUREAU		
DATA SUPPLIED BY								
Name Jennifer Sprafke			Title Director	, PREA				
OFFICIAL ADDRESS		street or P.O. Box/Route Number		City Waterbury	State VT	ZIP Code 05671		
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Vermont Department of Correction

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 in the space provided. classification centers; road camps; forestry and conservation camps; vocational training facilities; prison box (X) provided. 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 **Returning forms:** facilities operated and administered by local governments. (These facilities will be contacted directly for data on sexual victimization.) e-mail greta.b.clark@census.gov EXCLUDE facilities that hold only juveniles. (These facilities will be contacted directly for data on sexual victimization.) 2023. What inmates and incidents are included in this data collection? https://ssv.census.gov/ Inmates under your custody between January 1, 2022, and December 31, 2022. 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

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.

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

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"
- If the answer to a question is "none" or "0," mark the

Substantiated incidents of sexual violence:

- Please complete an Incident Form (Adult, SSV-IA) for each substantiated incident of sexual victimization.
- If you need assistance, please call Greta Clark at the U.S. Census Bureau toll-free at 1-800-253-2078, or
- Please return your completed summary and substantiated incident forms by December 8,
- You may complete these forms online at:
- MAIL TO: U.S. Census Bureau, P.O. Box 5000,
- community-based facilities or staff.

What facilities are included in this data collection?

EXCLUDE incidents involving inmates held in local jails and facilities in other jurisdictions.

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). Attempted nonconsensual sexual acts are included if recorded by the facility. For purposes of SSV, sexual abuse is disaggregated into three categories of inmate-on-inmate sexual victimization. These categories are:

NONCONSENSUAL ŠEXUAL 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.

1. Does your State prison system record allegations of inmate-on-inmate NONCONSENSUAL 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 **X** Both attempted and completed

4

2

1

0

None

None

None

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, 2022, and December 31, 2022, 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 1 None
 - The event was investigated and determined to have occurred, based on a preponderance of the evidence (28 C.F.R. §115.72).

b. Unsubstantiated

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

c. Unfounded

• The investigation determined that the event did NOT occur.

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 _____4 ___ None

• The total should 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.) 01 X Yes → Can these be counted separately from allegations of NONCONSENSUAL SEXUAL ACTS? 01 X Yes 02 No → Skip to Item 7. 02 No → Please provide an explanation in the space below and then skip to Item 7. 	 7. Does your State prison system record allegations of inmate-on-inmate SEXUAL HARASSMENT? (See definitions on page 2.) o1 ≥ Yes → Do you record all reported allegations or only substantiated ones? o1 ≥ All o2 ⊇ Substantiated only o2 ⊇ No → Please provide an explanation in the space below and then skip to Section II.
 5. Between January 1, 2022, and December 31, 2022, how many allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT were reported? Number reported 24 None If an allegation involved multiple victimizations, count only once. 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.) 	 8. Between January 1, 2022, and December 31, 2022, how many allegations of inmate-on-inmate SEXUAL HARASSMENT were reported? Number reported 24 None If an allegation involved multiple victims or inmate perpetrators, count only once. Exclude any allegations that were reported as consensual. 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 2 None	a. Substantiated
c. Unfounded	c. Unfounded
 d. Investigation ongoing 0 None e. TOTAL (Sum of Items Ga through 6d) • The total should equal the number reported in Item 5. 	 d. Investigation ongoing . 0 None e. TOTAL (Sum of Items 24 None 9a through 9d) 24 None The total should equal the number reported in 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 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?

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

01	X	All

02 Substantiated only

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

11. Between January 1, 2022, and December 31, 2022, how many allegations of STAFF SEXUAL MISCONDUCT were reported?

Number reported

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

12

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.*)



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

13.	Does your State prison system reco allegations of STAFF SEXUAL HARA (See definitions on page 4.) 01 ¥ Yes → Can these allegations be separately from allegation SEXUAL MISCONDUCT? 01 ¥ Yes 02 O No → Skip to Item 16. 02 O No → Please provide an explanation below and then skip to Item 16	ssment? counted ons of STAFF	Section III - PRIVATE AND LOCAL ALLEGATIONS 16. Did any of the allegations reported in Items 2, 5, 8, 11, or 14 occur in a privately operated facility? 01 Yes 02 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? 01 Yes 02 No 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?		
14.	Between January 1, 2022, and December 31, 2022, how many alleg of STAFF SEXUAL HARASSMENT we	ations ere	Total substantiated incidents 8 None → Please complete a Substantiated Incident Form (Adult, SSV-IA) for each substantiated incident of sexual victimization.		
	reported?		NOTES		
	 Number reported	□ □ None or staff,			
15.	Of the allegations reported in Item 1 many were — (Please contact the agenc responsible for investigating allegations of s victimization in order to fully complete this for	y or office sexual			
	a. Substantiated 2	_ 🗆 None			
	b. Unsubstantiated 4	_ 🗆 None			
	c. Unfounded	_ □ None			
	d. Investigation ongoing . 0	_ 🗆 None			
	 e. TOTAL (Sum of Items 15a through 15d) The total should equal the number rep Item 14. 	_ □ None orted in			
	FORM SSV-2 (6-7-2022)	Pa	ige 5		
	Save As		t Form Clear Fields		