FORM SSV-2 (6-7-2022)	A CONTRACT OF CONTRACTON OF CONTRACT OF CONTRACT OF CONTRACT OF CONTRACT OF CONTRACTON OF CONTRACT OF CONTRACT OF CONTRACT OF CONTRACT OF CONTRACT OF CONTRACT OF CONTRACTON OF CONTRACT OF CONTRACTON OF CONTRACTON OF CONTRACT OF CONTRACTON OF CONTRACTON OF CONTRACTON OF CONTRACT.	SURVEY	OF SEXUAL V State Priso Summar	n Systen	ATION, 2021	U.S. BUI At	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 Carole Mattis	Title Chief, Standards, Audits and Accreditation						
OFFICIAL ADDRESS	Number and s		ox/Route Number logy Parkway		City Mechanicsburg	State PA	ZIP Code 17050
TELEPHONE	Area code 717	Number 7282092			FAX NUMBER	Area Code	Number
E-MAIL ADDRESS	cmattis@pa.gov						

3900000007000003900

Pennsylvania Department of Correction

What facilities are included in this data collection? **Reporting instructions:** All State-operated confinement facilities that are intended for Please complete the entire SSV-2 Form. adults but sometimes hold juveniles. write "DK" (do not know) in the space provided. 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 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 contacted directly for data on sexual victimization.) e-mail greta.b.clark@census.gov EXCLUDE facilities that hold only juveniles. (These Please return your completed summary and facilities will be contacted directly for data on sexual victimization.) 2022. What inmates and incidents are included in this You may complete these forms online at: data collection? https://ssv.census.gov/ Inmates under your custody between January 1, 2021, and December 31, 2021. MAIL TO: U.S. Census Bureau, P.O. Box 5000, • INCLUDE incidents involving inmates under the Jeffersonville, IN 47199-5000 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

local jails and facilities in other jurisdictions.

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)

- If the answer to a question is "not available" or "unknown,"
- If the answer to a question is "not applicable," write "NA"

- If you need assistance, please call Greta Clark at the U.S. Census Bureau toll-free at 1-800-253-2078, or
- substantiated incident forms by December 1,

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 K Both attempted and completed

145

84

45

15

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, 2021, and December 31, 2021, 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 145 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 Yes → Can these be counted separately from allegations of NONCONSENSUAL SEXUAL ACTS? 01 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, 2021, and December 31, 2021, how many allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT were reported? Number reported 145 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, 2021, and December 31, 2021, how many allegations of inmate-on-inmate SEXUAL HARASSMENT were reported? Number reported 341 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	a. Substantiated
c. Unfounded	c. Unfounded
 d. Investigation ongoing 8 None e. TOTAL (Sum of Items 6a through 6d) The total should equal the number reported in Item 5. 	 d. Investigation ongoing5 None e. TOTAL (Sum of Items341 None 9a through 9d) 341 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

11. Between January 1, 2021, and December 31, 2021, how many allegations of STAFF SEXUAL MISCONDUCT were reported?

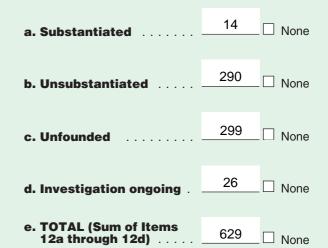
Number reported

 If an allegation involved multiple victimizations, count only once.

629

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.	 13. Does your State prison system record allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 4.) 01 ▼ 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. 			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? Total substantiated		
14.	Between January 1, 2021, a December 31, 2021, how ma of STAFF SEXUAL HARASSI reported?	any allegations	incide → Pleas Form	ents		
	Number reported	566 🗆 🗆 None		NOTES		
	 If an allegation involved multiple count only once. 					
15.	Of the allegations reported many were — (Please contact responsible for investigating alleg victimization in order to fully comp	the agency or office nations of sexual				
	a. Substantiated	10 🔲 None	e			
	b. Unsubstantiated	0 None	9			
	c. Unfounded	147 🔲 None	e			
	d. Investigation ongoing	9 🗆 None	Э			
	e. TOTAL (Sum of Items	566				
	 15a through 15d) The total should equal the n ltem 14. 		9			
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		_	Page 5			
	Save As		Print Form	Clear Fields		