The following 2013 PREA statistics for investigations was submitted online to the Department of Justice. This submission was required by September 1, 2014.

Total PREA Investigations

NDCS investigated 151 PREA allegations in 2013.

Substantiated allegations: 9
Unsubstantiated allegations: 59
Unfounded allegations: 75
Ongoing investigations: 8

Breakdown by Type of Allegation

Non-Consensual Sex Acts Perpetrated by Another Inmate – 16

Substantiated allegations: 0 Unsubstantiated allegations: 3 Unfounded allegations: 8 Ongoing investigations: 5

Abusive Sexual Contact Perpetrated by Another Inmate – 13

Substantiated allegations: 2 Unsubstantiated allegations: 8 Unfounded allegations: 2 Ongoing investigations: 1

Sexual Harassment Perpetrated by Another Inmate- 33

Substantiated allegations: 1 Unsubstantiated allegations: 21 Unfounded allegations: 11 Ongoing investigations: 0

Sexual Misconduct Perpetrated by Staff – 56

Substantiated allegations: 2 Unsubstantiated allegations: 17 Unfounded allegations: 35 Ongoing investigations: 2

Sexual Harassment Perpetrated by Staff – 33

Substantiated allegations: 4 Unsubstantiated allegations: 10 Unfounded allegations: 19 Ongoing investigations: 0 The following 2014 PREA Statistics for investigations were submitted online to the Department of Justice. This submission is required by September 1, 2015.

Inmate on Inmate Non-Consensual Sex Acts - 14

Substantiated: 0 Unsubstantiated: 6 Unfounded: 6

Investigation Ongoing: 2

Inmate on Inmate Abusive Sexual Contact - 23

Substantiated: 8 Unsubstantiated: 10 Unfounded: 5

Investigation Ongoing: 0

Inmate on Inmate Sexual Harassment - 53

Substantiated: 7 Unsubstantiated: 29 Unfounded: 17

Investigation Ongoing: 0

Staff on Inmate Sexual Misconduct - 79

Substantiated: 1 Unsubstantiated: 24 Unfounded: 52

Investigation Ongoing: 2

Staff on Inmate Sexual Harassment- 60

Substantiated: 1 Unsubstantiated: 19 Unfounded: 40

Investigation Ongoing: 0

Total PREA Investigations-229

Substantiated: 17 Unsubstantiated: 88 Unfounded: 120

Investigation Ongoing: 4

The following 2015 PREA Statistics for investigations were submitted online to the Department of Justice. This submission is required by September 1, 2016.

Inmate on Inmate Non-Consensual Sex Acts - 13

Substantiated: 0 Unsubstantiated: 6 Unfounded: 3

Investigation Ongoing: 4

Inmate on Inmate Abusive Sexual Contact - 25

Substantiated: 5 Unsubstantiated: 14 Unfounded: 6

Investigation Ongoing: 0

Inmate on Inmate Sexual Harassment - 53

Substantiated: 6 Unsubstantiated: 32 Unfounded: 14

Investigation Ongoing: 1

Staff on Inmate Sexual Misconduct - 60

Substantiated: 0 Unsubstantiated: 22 Unfounded: 34

Investigation Ongoing: 4

Staff on Inmate Sexual Harassment- 44

Substantiated: 0 Unsubstantiated: 25 Unfounded: 19

Investigation Ongoing: 0

Total PREA Investigations- 197

Substantiated: 11 Unsubstantiated: 100 Unfounded: 77

Investigation Ongoing: 9

FORM SSV-2 (5-17-2017)



Area code

402

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 BY

Name Danielle Reynolds Title PREA Coordinator

OFFICIAL ADDRESS

TELEPHONE

Number and street or P.O. Box/Route Number Folsom and West Prospector Place, Bldg #1 City State Lincoln NE

Area Code

402

FAX NUMBER ZIP Code 68509 Number 4795619

E-MAIL ADDRESS

danielle.reynolds@nebraska.gov

Number

4795660

280000000070000002800

Nebraska Department of Correctional Services

(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 (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 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

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.

01 ☐ Yes → a. Do you re occurrence ones?		orted substantiated
ot 🗷 All		
	antiated only	
	record atte	mnted
NONCO		SEXUAL ACTS
of 🗷 Both	n attempted a	nd completed
o₂ ☐ Con	npleted only	
oz ☐ No → Please provide State prison sy NONCONSEN: space below. U Items 2 and 3.	stem for inma SUAL SEXUA	te-on-inmate
NDCS expressly prohibit		
acts between inmates an		
employees, volunteers, o contractors.	official visitor	s and
Between January 1, 20 how many allegations of NONCONSENSUAL SEX	of inmate-or	n-inmate
Number reported	8	□ None
. If an allegation involved r		
count only once.	nultiple victim	izations,
 count only once. Exclude any allegations t 		
 Exclude any allegations to consensual. 	hat were repo	rted as
 count only once. Exclude any allegations t 	rted in Item ntact the ager allegations o	rted as 2, how ncy or office I sexual
Exclude any allegations to consensual. Graph of the allegations reports any were — (Please corresponsible for investigating)	rted in Item ntact the ager allegations o	rted as 2, how ncy or office I sexual
Exclude any allegations to consensual. Of the allegations report many were — (Please corresponsible for investigating victimization in order to fully)	rted in Item ntact the ager allegations o complete this	rted as 1 2, how 1 2, how 1 2 or office 1 sexual 2 form.) None ermined to
count only once. Exclude any allegations to consensual. Of the allegations report many were — (Please corresponsible for investigating victimization in order to fully) a. Substantiated The event was investigned and evidence (28 C.F.R. §	rted in Item ntact the ager allegations o complete this	rted as 1 2, how 1 2, how 1 2 or office 1 sexual 2 form.) None ermined to
Exclude any allegations to consensual. Of the allegations report many were — (Please corresponsible for investigating victimization in order to fully) Substantiated The event was investighave occurred, based evidence (28 C.F.R. § Unsubstantiated The investigation condinsufficient to determine	rted in Item ntact the ager allegations o complete this 0 gated and det on a prepond 115.72). 3	rted as 1 2, how 1 2, how 1 2 or office 1 sexual 2 form.) None 1 ermined to 1 erance of the 1 None 2 dence was
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Exclude any allegations to consensual. Of the allegations report many were — (Please corresponsible for investigating victimization in order to fully) Substantiated The event was investigned evidence (28 C.F.R. § Unsubstantiated The investigation concinsufficient to determine occurred. Unfounded	rted in Item ntact the ager allegations o complete this 0 gated and det on a prepond 115.72). 3 cluded that evide whether or	rted as 1 2, how ncy or office of sexual of form.) None ermined to erance of the None idence was not the event
Exclude any allegations to consensual. Of the allegations repo many were — (Please corresponsible for investigating victimization in order to fully) Substantiated The event was investighave occurred, based evidence (28 C.F.R. § Unsubstantiated The investigation concinsufficient to determine occurred.	rted in Item ntact the ager allegations o complete this gated and det on a prepond 115.72). 3 cluded that evi e whether or	rted as 1 2, how ncy or office of sexual of form.) None ermined to erance of the None idence was not the event
Exclude any allegations to consensual. Of the allegations report many were — (Please corresponsible for investigating victimization in order to fully) a. Substantiated The event was investig have occurred, based evidence (28 C.F.R. § b. Unsubstantiated The investigation condinsufficient to determine occurred. c. Unfounded The investigation determined.	rted in Item ntact the age allegations of complete this gated and det on a prepond 115.72). 3 cluded that evi whether or 3 rmined that the	rted as 1 2, how ncy or office of sexual of form.) None ermined to erance of the None idence was not the event
Exclude any allegations to consensual. Of the allegations report many were — (Please corresponsible for investigating victimization in order to fully) Substantiated The event was investigned evidence (28 C.F.R. § Unsubstantiated The investigation concinsufficient to determine occurred. Unfounded The investigation determined.	hat were reported in Item ntact the age allegations of complete this of complete and det on a prepond 115.72). 3 cluded that evice whether or a mined that the grant and that the grant and that the grant and the	rted as 1.2, how 1.cy or office of sexual is form.) None ermined to erance of the None idence was not the event None in e event did NOT None cessed or evaluated
count only once. Exclude any allegations to consensual. Of the allegations repo many were — (Please coresponsible for investigating victimization in order to fully) a. Substantiated The event was investig have occurred, based evidence (28 C.F.R. § b. Unsubstantiated The investigation condinsufficient to determine occurred. c. Unfounded The investigation determined occurred. c. Unfounded The investigation ongoin Evidence is still being	hat were reported in Item ntact the age allegations of complete this of complete and det on a prepond 115.72). 3 cluded that evice whether or a grant and that the grant and	rted as 1.2, how 1.cy or office of sexual is form.) None ermined to erance of the None idence was not the event None in e event did NOT None cessed or evaluate

allegations of inmate-on-inn SEXUAL CONTACT? (See def	nate ABUSIVE	allegations of inmate-on-inma HARASSMENT? (See definitions	
of ▼ Yes → Can these be cou allegations of NO SEXUAL ACTS?	nted separately from NCONSENSUAL	01 ▼ Yes → Do you record all allegations or only ones?	reported y substantiated
01 Yes		01 ≭ All	
02 □ No → Skip to Item	7.	02 Substantiated of	nly
№ No → Please provide an exbelow and then skip	planation in the space to Item 7.	02 ☐ No → Please provide an exp below and then skip to	lanation in the space Section II.
5. Between January 1, 2016, and how many allegations of inm ABUSIVE SEXUAL CONTACT	ate-on-inmate	8. Between January 1, 2016, an how many allegations of inm SEXUAL HARASSMENT were	ate-on-inmate
If an allegation involved multiple count only once.	11 □ None victimizations,	Number reported If an allegation involved multiple inmate perpetrators, count only of the count of the	26 None victims or once.
 Exclude any allegations that we consensual. 	re reported as	 Exclude any allegations that wer consensual. 	re reported as
 Of the allegations reported is many were — (Please contact to responsible for investigating allegations in order to fully composition.) 	ne agency or office tions of sexual	 Of the allegations reported in many were — (Please contact the responsible for investigating allegate victimization in order to fully complete. 	e agency or office tions of sexual
a. Substantiated	0 × None	a. Substantiated	5 None
b. Unsubstantiated	10 None	b. Unsubstantiated	18 None
c. Unfounded	1 None	c. Unfounded	3 None
d. Investigation ongoing	0 × None	d. Investigation ongoing	0 None
e. TOTAL (Sum of Items 6a through 6d)	11 None	e. TOTAL (Sum of Items 9a through 9d)	26 None
The total should equal the n item 5.	umber reported in	The total should equal the null tem 8.	umber 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;

Completed, attempted, threatened, or requested sexual acts;

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;

Repeated profane or obscene language or gestures.

10. Does your State prison allegations of STAFF SI MISCONDUCT?	
--	--

on Yes -> Do you record all reported occurrences, or only substantiated ones? on X All Substantiated only No → Please provide an explanation in the space below and then skip to Item 13. Between January 1, 2016, and December 31, 2016, how many allegations of STAFF SEXUAL MISCONDUCT were reported? ■ None Number reported 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.) 4 None a. Substantiated 10 ☐ None b. Unsubstantiated 15

> 12a through 12d) The total should equal the number reported in Item 11.

c. Unfounded

d. Investigation ongoing

e. TOTAL (Sum of Items

■ None

None

■ None

29

(Se	es your State prison syst egations of STAFF SEXUA e definitions on page 4.) Yes Can these allegs separately from SEXUAL MISCOI	AL HARASSMENT?	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? OI Yes OZ NO
02 [o₂ □ No → Skip to □ No → Please provide an ex below and then skip	planation in the space	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? or Yes or 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 10 None
De	tween January 1, 2016, a cember 31, 2016, how m STAFF SEXUAL HARASSI ported?	any allegations MENT were	Form (Adult, SSV-IA) for each substantiated incident of sexual victimization.
	mber reported	15 None	NOTES
15. Of ma	f an allegation involved multiple count only once. the allegations reported any were — (Please contact ponsible for investigating alleg timization in order to fully comp	in Item 14, how the agency or office ations of sexual	
a.	Substantiated	1 None	
b. (Unsubstantiated	None	
c.	Unfounded	None	
d.	Investigation ongoing .	None	
е.	TOTAL (Sum of Items 15a through 15d)		
	The total should equal the n ltem 14.	umber reported in	

FORM **SSV-2** (9-25-2018)

ADDRESS



SURVEY OF SEXUAL VICTIMIZATION, 2017

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 BY						
Name Danielle Reynolds Title PREA Coordinator						
OFFICIAL ADDRESS		street or P.O. Box/Route Number and West Prospector Place, B		City Lincoln	State NE	ZIP Code 68509
TELEPHONE	Area code 402	Number 4795660		FAX NUMBER	Area Code 402	Number 4795619
E-MAII				,		

28000000070000002800

danielle.reynolds@nebraska.gov

Nebraska Department of Correctional Services

(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, 2017, and December 31, 2017.

- 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 January 18, 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

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;

• Contact between the penis and the vulva or the penis and the anus including penetration, however slight;

• Contact between the mouth and the penis, vulva, or

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 ▼ Both attempted and completed
	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, 2017, and December 31, 2017, how many allegations of inmate-on-inmate NONCONSENSUAL SEXUAL ACTS were reported?
	Number reported 11 None
	 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
	Substantiated
	b. Unsubstantiated 5 None
	 The investigation concluded that evidence was insufficient to determine whether or not the event occurred.
	c. Unfounded 2 None
	The investigation determined that the event did NOT occur.
	d. Investigation ongoing . 3 None
	 Evidence is still being gathered, processed or evaluated and a final determination has not yet been made.
	e. TOTAL (Sum of Items 3a through 3d
	The total should equal the number reported in Item 2.

7. Does your State prison system record allegations of inmate-on-inmate SEXUAL HARASSMENT? (See definitions on page 2.)
on ☐ Yes → Do you record all reported allegations or only substantiated ones?
o1 ☐ All o2 ☐ Substantiated only
No → Please provide an explanation in the space below and then skip to Section II.
8. Between January 1, 2017, and December 31, 2017,
how many allegations of inmate-on-inmate SEXUAL HARASSMENT were reported?
Number reported
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
b. Unsubstantiated 2 None
c. Unfounded
d. Investigation ongoing
e. TOTAL (Sum of Items 9a through 9d)
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;

ΩR

Repeated profane or obscene language or gestures.

10.	allegations of STAFF SEXUAMISCONDUCT?	em recoi AL	'a
	01 ☐ Yes → Do you record al occurrences, or ones?	l reporte only subs	d stantiated
	01 ✗ All 02 ☐ Substantiated	only	
	02 ☐ No → Please provide an exbelow and then skip	oplanation to Item 13	in the space
11	Between January 1, 2017, a	and	
• • •	December 31, 2017, how many STAFF SEXUAL MISCONDU	any alleg CT were	ations of reported?
	Number reported	11	□None
	 If an allegation involved multip count only once. 	le victimiza	ations,
12.	Of the allegations reported many were – (Please contact to responsible for investigating alleg victimization in order to fully compared to the	he agency gations of s	or office sexual
	a. Substantiated	1	□ None
	b. Unsubstantiated	6	□ None
	c. Unfounded	5	□ None
	d. Investigation ongoing .	0	□ None
	e. TOTAL (Sum of Items 12a through 12d)	7	□ None
	The total should equal the I Item 11.	number rep	oorted in

13.	Does your State prison system record	Section III - PRIVATE AND LOCAL ALLEGATIONS
	allegations of STAFF SEXUAL HARASSMENT? (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 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? o1 Yes o2 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? o1 Yes
	below and then skip to item 10.	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 8 None
14.	Between January 1, 2017, and December 31, 2017, 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	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 None	
	c. Unfounded	
	d. Investigation ongoing 0 None	
	e. TOTAL (Sum of Items 15a through 15d) 14 None	
	 The total should equal the number reported in Item 14. 	

FORM SSV-2 (9-25-2018)

Save As

FORM SSV-2



SURVEY OF SEXUAL VICTIMIZATION, 2018

State Prison Systems Summary Form U.S. DEPARTMENT OF JUSTICE BUREAU OF JUSTICE STATISTICS AND ACTING AS COLLECTION ABENT U.S. DEPT. OF COMMERCE U.S. CENSUS BUREAU

	DATA	A SUPPLIED BY		
Danieli	le Reynolds	PREA /ES	Coordin	nator
OFFICIAL ADDRESS	Numbered street or P.O. Box/Route No	or Place Lineo	n NE	68309-4661
TELEPHONE	A non-code Number	FAX	Area Code	Number
E-MAIL ADDRESS	danille rynolds	Nibraska.gov		

NE002 X#m527354355

28 0 000 000 07 00000 028 00 SEQ001-00011 Nebraska Department of Correctional Services Scott Frakes Director Folsom & Prospector Place, Building 1 PO Box 94661 Lincoln NE 68509-4661

(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

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 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.

	ate prison sys f inmate-on-in ISUAL SEXUA	mate	d
opX Yes → a.	Do you recor occurrences ones?	d all repor , or only s	ted ubstantiated
	OLE AII		
	02 Substantia	ated only	
)	b. Do you rec NONCONS or only con	ENSUAL S	EXUAL ACTS
	01 X Both at	tempted and	completed
	02 Comple		
St No sp	ease provide the ale prison syster ONCONSENSUA ace below. Use ms 2 and 3.	n for inmate L SEXUAL /	on-inmate ACTS in the
2. Between Jar how many al NONCONSER	legations of in	nmate-on-i	mber 31, 2018, nmate ere reported?
Number repo	wheel	18	None
If an allegation	on involved mult	Marie and the second	
count only o			4 a. (1) E (1) (1)
 Exclude any consensual. 	allegations that	were repone	id as
responsible for	ations reporte — (Please contact investigating all order to fully con	of the agenc legations of a	y or office sexual
		0	None
have occ	it was investigate urred, based on (28 C.F.R. §115	a preponder	mined to
Company of		10	
The inverse insufficient occurred.	stigation conclud nt to determine w	ed that evide whether or no	nce was of the event
c. Unfounde	d	8	None
	stigation determin		Control of
d. Investigat	ion ongoing	0_	□ None
 Evidence and a fin 	is still being gat al determination	hered, proce has not yet t	ssed or evaluated, seen made.
e. TOTAL (Se	m of Items	. 18	□ None
The total	should equal the	number rep	orted in Item 2.

4. Does your State prison system record allegations of inmate-on-inmate ABUSIN SEXUAL CONTACT? (See definitions on page	
01 Yes → Can these be counted separa allegations of NONCONSENS SEXUAL ACTS?	tely from UAL Yes → Do you record all reported allegations or only substantiated ones?
or Yes or No → Skip to Item 7.	ot ⊋All oz ☐ Substantiated only
№ ☐ No → Please provide an explanation in the below and then skip to Item 7.	e space No → Please provide an explanation in the space below and then skip to Section II.
	Service of State of S
5. Between January 1, 2018, and Decembe how many allegations of inmate-on-inma ABUSIVE SEXUAL CONTACT were report	te how many allegations of inmate-on-inmate
Number reported 14	None Number reported 13 None
 If an allegation involved multiple victimizations count only once. 	Notice Telephoton
 Exclude any allegations that were reported as consensual. 	 Exclude any allegations that were reported as consensual.
 Of the allegations reported in Item 5, ho many were — (Please contact the agency or responsible for investigating allegations of sexus victimization in order to fully complete this form.) 	office many were — (Please contact the agency or office responsible for investigating allegations of sexual
a. Substantiated	None a. Substantiated 2 None
b. Unsubstantiated 6	None b. Unsubstantiated 10 None
c. Unfounded	None c. Unfounded
d. Investigation ongoing	None d. Investigation ongoing None
e. TOTAL (Sum of Items 6a through 6d)	None 9a through 9d) 13 None
 The total should equal the number reported item 5. 	d in 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;

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 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?

ot ≥ Yes → Do you record all reported occurrences, or only substantiated ones?

OLDOAN

02 Substantiated only

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

11. Between January 1, 2018, and December 31, 2018, how many allegations of STAFF SEXUAL MISCONDUCT were reported?

Number reported

20 None

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

3

☐ None

b. Unsubstantiated

6

☐ None

c. Unfounded

10

d. Investigation ongoing

/ □ Non

e. TOTAL (Sum of Items 12a through 12d) 20 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.) 1 Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT?	16. Did any of the allegations reported in Items 2, 5, 8, 11, or 14 occur in a privately operated facility?
os No → Please provide an explanation in the space	∞ № № 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?
below and then skip to Item 16.	or Yes or □ No Section IV - TOTAL SUBSTANTIATED
	18. What is the total number of substantiated
	incidents reported in Items 3a, 6a, 9a, 12a, and 15a? Total substantiated None
14. Between January 1, 2018, and December 31, 2018, 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 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 None	
b. Unsubstantiated 2 None	
c. Unfounded S None	
d. Investigation ongoing . ONONE	
e. TOTAL (Sum of Items	
15a through 15d) None	
The total should equal the number reported in	
The total should equal the number reported in	

FORM **SSV-2** (4-14-2020)



SURVEY OF SEXUAL VICTIMIZATION, 2019

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	Summ	ary Form					
	DATA SUPPLIED BY							
Name Danielle Reynolds			Title PREA C	Coordinator				
OFFICIAL ADDRESS		street or P.O. Box/Route Number West Prospector Place, Bldg		City Lincoln	State NE	ZIP Code 68509		
TELEPHONE	Area code 402	Number 4795660		FAX NUMBER	Area Code 402	Number 4795619		
E-MAIL ADDRESS	danielle.reynolds@nebraska.gov							

28000000070000002800

Nebraska Department of Correctional Services

(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.
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Inmates under your custody between January 1, 2019, and December 31, 2019.

- 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 30, 2020.
- 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

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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:

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AND

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OR

 Contact between the mouth and the penis, vulva, or anus:

OR

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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 system record allegations of inmate-on-inmate NONCONSENSUAL SEXUAL ACTS?				
01 ▼ Yes → a. Do you record occurrences, ones?				
01 X All				
02 ☐ Substantia	ted only			
b. Do you reco NONCONSE or only com	NSUAL S	EXUAL ACTS		
01 🗷 Both atte	empted and	l completed		
02 Complete	ed only			
02 ☐ No → Please provide the of State prison system NONCONSENSUAL space below. Use to Items 2 and 3.	for inmate SEXUAL .	-on-inmate ACTS in the		
Between January 1, 2019, a how many allegations of in NONCONSENSUAL SEXUAL	mate-on-i	inmate		
Number reported	22	_ □ None		
 If an allegation involved multip count only once. 	ole victimiza	ations,		
 Exclude any allegations that w consensual. 	ere reporte	ed as		
Of the allegations reported many were — (Please contact responsible for investigating alle victimization in order to fully com-	the agence gations of	ey or office sexual		
a. Substantiated	1	× None		
The event was investigated have occurred, based on a evidence (28 C.F.R. §115.7)	preponder	mined to		
b. Unsubstantiated	11	× None		
The investigation concluder insufficient to determine who courred.	d that evide nether or no	ence was		
c. Unfounded	6	□ None		
 The investigation determine occur. 	ed that the	event did NOT		
d. Investigation ongoing .	4	□ None		
Evidence is still being gather and a final determination has a final determination has a final determination has a final determination.	ered, proce as not yet b	essed or evaluated, been made.		
e. TOTAL (Sum of Items 3a through 3d	22	None		

• The total should equal the number reported in Item 2.

3

FORM SSV-2 (4-14-2020) Page 2

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-inr HARASSMENT? (See definition	nate 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?	l reported nly substantiated
	01 ▼ Yes 02 □ No → Skip to Ite	m 7.	01 ☒ All 02 ☐ 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, 2019, a how many allegations of in ABUSIVE SEXUAL CONTAC	nate-on-inmate	8. Between January 1, 2019, 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 only	16 \ None le victims or y once.
	 Exclude any allegations that w consensual. 	ere reported as	 Exclude any allegations that w consensual. 	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
	a. Substantiated	3 _ None	a. Substantiated	4 None
	b. Unsubstantiated		b. Unsubstantiated	7 None
	c. Unfounded	9 None	c. Unfounded	5 None
	d. Investigation ongoing	0 🗷 None	d. Investigation ongoing .	0 × None
	e. TOTAL (Sum of Items 6a through 6d)	None	e. TOTAL (Sum of Items 9a through 9d)	16 None
	The total should equal the left tem 5.	number reported in	 The total should equal the learn 8. 	number reported in

FORM SSV-2 (4-14-2020) Page 3

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:

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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

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 Demeaning references to gender; or sexually suggestive or derogatory comments about body or clothing;

OR

Repeated profane or obscene language or gestures.

10.	allegations of STAFF SEXUAMISCONDUCT?		a
	01 ▼ Yes → Do you record al occurrences, or ones?	l reported only subs	d stantiated
	01 ✗ All 02 ☐ Substantiated	only	
	02 ☐ No → Please provide an exbelow and then skip	xplanation to Item 13.	in the space
11.	Between January 1, 2019, a	and	
	December 31, 2019, how me STAFF SEXUAL MISCONDU	anv alleg	ations of reported?
	Number reported	24	None
	If an allegation involved multip count only once.	le victimiza	
12.	Of the allegations reported many were – (Please contact to responsible for investigating alleg victimization in order to fully compared to the control of th	he agency gations of s	or office exual
	a. Substantiated	4	□ None
	b. Unsubstantiated	7	. None
	c. Unfounded	13	. None
	d. Investigation ongoing	0	None None
	e. TOTAL (Sum of Items 12a through 12d)	24	□ None
	The total should equal the ritem 11.	number rep	orted in

FORM SSV-2 (4-14-2020) Page 4

13.	Does your State prison system record allegations of STAFF SEXUAL HARASSMEN	IT?	Section III – PRIVATE AND LOCAL ALLEGATIONS
	(See definitions on page 4.) 101 ★ Yes → Can these allegations be counts separately from allegations of SEXUAL MISCONDUCT? 101 ★ Yes 102 No → Skip to Item 16. 102 No → Please provide an explanation in the specific below and then skip to Item 16.	ed STAFF	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 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, 2019, and December 31, 2019, 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 13 Non	e	NOTES
	If an allegation involved multiple victims or staff, count only once.	U	
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.)	e	
	a. Substantiated	ne	
	b. Unsubstantiated 5 No	ne	
	c. Unfounded	ne	
	d. Investigation ongoing 0 No	ne	
	e. TOTAL (Sum of Items 15a through 15d)	ne	
	The total should equal the number reported in Item 14.		

FORM SSV-2 (4-14-2020)

Save As

Page 5

Print Form

Clear Fields

FORM **SSV-2** (3-9-2021)



SURVEY OF SEXUAL VICTIMIZATION, 2020

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

		DATA SUI	PLIED B	Y		
Name Danielle Reynolds	3		Title PREA C	Coordinator		
OFFICIAL ADDRESS		street or P.O. Box/Route Number West Prospector Place, Bldg	#1	City Lincoln	State NE	ZIP Code 68509
TELEPHONE	Area code 402	Number 4795660		FAX NUMBER	Area Code 402	Number 4795619

E-MAIL ADDRESS

danielle.reynolds@nebraska.gov

28000000070000002800

Nebraska Department of Correctional Services

(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
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- 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, 2020, and December 31, 2020.

- INCLUDE incidents involving inmates under the authority, custody, or care of your confinement or community-based facilities or staff.
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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:

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Returning forms:

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- Please return your completed summary and substantiated incident forms by November 12, 2021.
- You may complete these forms online at: https://ssv.census.gov/
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- FAX (TOLL FREE): 1-888-262-3974

Burden Statement

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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 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-in NONCONSENSUAL SEXUAL	mate
01 ▼ Yes → a. Do you record occurrences, ones?	d all reported or only substantiated
01 X All	
02 Substantiat	ted only
	rd attempted NSUAL SEXUAL ACTS pleted ones?
01 🗷 Both atte	empted and completed
02 Complete	ed only
NONCONSEÑSUAL	definition used by your for inmate-on-inmate SEXUAL ACTS in the hat definition to complete
Between January 1, 2020, a how many allegations of in NONCONSENSUAL SEXUAL	mate-on-inmate
Number reported	
 If an allegation involved multip count only once. 	ole victimizations,
 Exclude any allegations that w consensual. 	vere reported as
B. Of the allegations reported many were — (Please contact responsible for investigating alle- victimization in order to fully com-	t the agency or office gations of sexual
a. Substantiated	0 × None
The event was investigated have occurred, based on a evidence (28 C.F.R. §115.7)	preponderance of the
b. Unsubstantiated	6 None
 The investigation concluded insufficient to determine who occurred. 	d that evidence was nether or not the event
c. Unfounded	0 × None
 The investigation determine occur. 	ed that the event did NOT
d. Investigation ongoing	6 None
	ered, processed or evaluated as not yet been made.
e. TOTAL (Sum of Items 3a through 3d	12 □ None

The total should equal the number reported in Item 2.

FORM SSV-2 (3-9-2021) Page 2

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-inn HARASSMENT? (See definition	nate 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?	l reported nly substantiated
	01 Yes 02 No → Skip to Ite	m 7.	01 ✗ All 02 ☐ Substantiated	only
	02 ☐ No → Please provide an e below and then skip		₀₂ ☐ No → Please provide an ex below and then skip	xplanation in the space to Section II.
	Between January 1, 2020, a how many allegations of in ABUSIVE SEXUAL CONTAC	mate-on-inmate	8. Between January 1, 2020, a how many allegations of inr SEXUAL HARASSMENT wer	nate-on-inmate
	Number reported If an allegation involved multip count only once.	□ None le victimizations,	Number reported	19 None le victims or y once.
	 Exclude any allegations that w consensual. 	ere reported as	 Exclude any allegations that w consensual. 	ere reported as
	Of the allegations reported many were — (Please contact responsible for investigating allegoric timization in order to fully com	the agency or office gations of sexual	9. 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	None	a. Substantiated	10 None
	b. Unsubstantiated	8 None	b. Unsubstantiated	8 None
	c. Unfounded	3 None	c. Unfounded	1 None
	d. Investigation ongoing	0 × None	d. Investigation ongoing	0 x None
	e. TOTAL (Sum of Items 6a through 6d)	13	e. TOTAL (Sum of Items 9a through 9d)	
	The total should equal the Item 5.	number reported in	 The total should equal the r Item 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;

ΩR

Repeated profane or obscene language or gestures.

allegations of STAFF SEXUAMISCONDUCT?	AL	u
01 ▼ Yes → Do you record al occurrences, or ones?	l reported only subs	d stantiated
01 ✗ All 02 ☐ Substantiated	only	
02 ☐ No → Please provide an exbelow and then skip	planation to Item 13.	in the space
December 31, 2020, how ma	anv alleg	ations of reported?
Number reported	12	. 🗆 None
•	le victimiza	
many were – (Please contact to responsible for investigating alleg	he agency gations of s	or office exual
a. Substantiated	0	None None
b. Unsubstantiated	4	. ☐ None
c. Unfounded	7	. None
d. Investigation ongoing	1	. None
e. TOTAL (Sum of Items 12a through 12d)	12	. □ None
The total should equal the I Item 11.	number rep	orted in
	allegations of STAFF SEXUMISCONDUCT? 01	allegations of STAFF SEXUAL MISCONDUCT? 01

FORM SSV-2 (3-9-2021) Page 4

13.	Does your State prison system record allegations of STAFF SEXUAL HARASSMENT?	Section III - PRIVATE AND LOCAL ALLEGATIONS
	(See definitions on page 4.) 101 ★ Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT? 101 ★ Yes 102 No → Skip to Item 16. 102 No → Please provide an explanation in the space below and then 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 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 incidents 13 None
14.	Between January 1, 2020, and December 31, 2020, 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 <u>12</u> 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 4 None	
	c. Unfounded	
	d. Investigation ongoing 0 None	
	e. TOTAL (Sum of Items 15a through 15d) 12 None	
	The total should equal the number reported in Item 14.	
\ \		/

FORM SSV-2 (3-9-2021)

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Page 5

Print Form

FORM **SSV-2** (6-7-2022)



SURVEY OF SEXUAL VICTIMIZATION, 2021

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

	OK JUSTICE PRO	Summa	ry Form				
		DATA SUI	PPLIED B	Y			
Name			Title				
OFFICIAL ADDRESS	Number and	street or P.O. Box/Route Number		City	State	ZIP Code	
TELEPHONE	Area code	Number		FAX NUMBER	Area Code	Number	
E-MAIL ADDRESS							

(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, 2021, and December 31, 2021.

- 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 December 1, 2022.
- You may complete these forms online at: https://ssv.census.gov/
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE): 1-888-262-3974

Burden Statement

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 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;

• Contact between the mouth and the penis, vulva, or

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 Both attempted and completed		
	02 Completed only		
	O2 ☐ 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		
	The event was investigated and determined to have occurred, based on a preponderance of the evidence (28 C.F.R. §115.72).		
	b. Unsubstantiated None		
	 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 . None		
	 Evidence is still being gathered, processed or evaluated, and a final determination has not yet been made. 		
	e. TOTAL (Sum of Items 3a through 3d		
	The total should equal the number reported in Item 2		

	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.) 01
- 1	Between January 1, 2021, and December 31, 202 how many allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT were reported?	1, 8. Between January 1, 2021, and December 31, 2021, how many allegations of inmate-on-inmate SEXUAL HARASSMENT were reported?
	Number reported □ None • If an allegation involved multiple victimizations,	Number reported
	count only once.	inmate perpetrators, count only once.
,	 Exclude any allegations that were reported as consensual. 	 Exclude any allegations that were reported as consensual.
1	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	a. Substantiated
	b. Unsubstantiated	b. Unsubstantiated None
	c. Unfounded	c. Unfounded None
	d. Investigation ongoing	d. Investigation ongoing None
	e. TOTAL (Sum of Items 6a through 6d)	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.

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 recordallegations of STAFF SEXUAL MISCONDUCT?	d
	01 ☐ Yes → Do you record all reported occurrences, or only subsones?	l tantiated
	01 ☐ All 02 ☐ Substantiated only	
	No → Please provide an explanation in below and then skip to Item 13.	n the space
11.	Between January 1, 2021, and December 31, 2021, how many allega STAFF SEXUAL MISCONDUCT were in	ations of reported?
	Number reported	□None
	 If an allegation involved multiple victimiza count only once. 	tions,
12.	Of the allegations reported in Item 1: many were – (Please contact the agency responsible for investigating allegations of so victimization in order to fully complete this for	or office exual
	a. Substantiated	☐ None
	b. Unsubstantiated	☐ None
	c. Unfounded	☐ None
	d. Investigation ongoing	☐ None
	e. TOTAL (Sum of Items 12a through 12d)	☐ None
	The total should equal the number replacem 11.	orted in

13.	Does your State prison system record	Section III – PRIVATE AND LOCAL ALLEGATIONS
	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.	16. Did any of the allegations reported in Items 2, 5, 8, 11, or 14 occur in a privately operated facility? 11 Yes 12 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? 11 Yes 12 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 incidents
14.	Between January 1, 2021, and December 31, 2021, 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	NOTES
15.	 If an allegation involved multiple victims or staff, count only once. 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	
	c. Unfounded	
	d. Investigation ongoing . — None	
	Total (Sum of Items 15a through 15d)	

FORM **SSV-2** (6-7-2022)

ADDRESS



SURVEY OF SEXUAL VICTIMIZATION, 2022

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

DATA SUPPLIED BY Danielle Reynolds PREA Coordinator Number and street or P.O. Box/Route Number ZIP Code **OFFICIAL** City State **ADDRESS** Lincoln NE 801 West Prospector Place, Bldg #1 68509 Number Area code Area Code Number **FAX TELEPHONE** 402 4795660 NUMBER 402 4795619 E-MAIL

28000000070000002800

danielle.reynolds@nebraska.gov

Nebraska Department of Correctional Services

(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, 2022, and December 31, 2022.

- 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 December 8, 2023.
- You may complete these forms online at: https://ssv.census.gov/
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE): 1-888-262-3974

Burden Statement

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 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.

allegations of	ate prison sys of inmate-on-in USUAL SEXUAL	mate	rd
01 X Yes → a.	Do you record occurrences, ones?	d all repo , or only s	rted substantiated
	01 X All		
	02 Substantia	ted only	
	b. Do you reco NONCONSE or only com	INSUAL S	SEXUAL ACTS
	01 🗷 Both atte	empted and	d completed
	02 Complet	ed only	
St No sp	ease provide the ate prison system ONCONSENSUAI ace below. Use t ems 2 and 3.	for inmate SEXUAL	-on-inmate ACTS in the
Nonconser Number repo	legations of in NSUAL SEXUA	mate-on- L ACTS w	rere reported?
count only o			
consensual.			0 I
many were - responsible for	ations reported — (Please contact investigating alle order to fully con	t the agence gations of	y or office sexual
a. Substantia	ated	3	□ None
have occ	it was investigated urred, based on a (28 C.F.R. §115.	preponder	
b. Unsubstai	ntiated	6	_ □ None
The investigation	stigation conclude nt to determine wh	d that evidenether or ne	ence was ot the event
c. Unfounde	d	3	□ None
The investoccur.	stigation determine	ed that the	event did NOT
d. Investigat	ion ongoing	1	□ None
 Evidence 		ered, proce as not yet l	essed or evaluated been made.
a TOTAL (S.	ım of Itams		

3a through 3d

The total should equal the number reported in Item 2.

None

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-inr HARASSMENT? (See definition	nate 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?	l reported nly substantiated
	01 ▼ Yes 02 □ No → Skip to Ite	m 7.	01 ☒ All 02 ☐ Substantiated	only
	02 ☐ No → Please provide an e below and then skip		02 ☐ No → Please provide an e below and then skip	xplanation in the space to Section II.
	Between January 1, 2022, a how many allegations of in ABUSIVE SEXUAL CONTAC	nate-on-inmate	8. Between January 1, 2022, 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 only	34 None le victims or y once.
	 Exclude any allegations that w consensual. 	ere reported as	 Exclude any allegations that w consensual. 	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 pations of sexual
	a. Substantiated	3 □ None	a. Substantiated	7 None
	b. Unsubstantiated	18 None	b. Unsubstantiated	
	c. Unfounded	6 None	c. Unfounded	
	d. Investigation ongoing	0 × None	d. Investigation ongoing	0 x None
	e. TOTAL (Sum of Items 6a through 6d)		e. TOTAL (Sum of Items 9a through 9d)	34 None
	The total should equal the Item 5.	number reported in	 The total should equal the litem 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;

ΩR

Repeated profane or obscene language or gestures.

10.	allegations of STAFF SEXUAL MISCONDUCT?		
	01 ▼ Yes → Do you record al occurrences, or ones?	l reported only subs	d stantiated
	01 x All 02 □ Substantiated	only	
	02 ☐ No → Please provide an exbelow and then skip	kplanation i to Item 13.	in the space
11.	Between January 1, 2022, a December 31, 2022, how m STAFF SEXUAL MISCONDU	and any alleg CT were	ations of reported?
	Number reported	27	None
	 If an allegation involved multip count only once. 	le victimiza	tions,
12.	2. 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	3	. None
	b. Unsubstantiated	17	. None
	c. Unfounded	7	. None
	d. Investigation ongoing	0	. None
	e. TOTAL (Sum of Items 12a through 12d)	27	□ None
	The total should equal the litem 11.	number rep	orted in

13. Does your State prison system record allegations of STAFF SEXUAL HARASSMENT?	Section III – PRIVATE AND LOCAL ALLEGATIONS
(See definitions on page 4.) 101 ★ Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT? 11 ★ Yes 12 No → Skip to Item 16. 13 No → Please provide an explanation in the space below and then 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
	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, 2022, and December 31, 2022, how many allegations of STAFF SEXUAL HARASSMENT were reported?	incidents
Number reported 14 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 <u>10</u> None	
c. Unfounded	
d. Investigation ongoing 0 x None	
e. TOTAL (Sum of Items 15a through 15d)	
 The total should equal the number reported in Item 14. 	

FORM SSV-2 (6-7-2022)

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FORM **SSV-2** (07-17-2024)



SURVEY OF SEXUAL VICTIMIZATION: 2023

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

DATA SUPPLIED BY Title Danielle Reynolds PREA Coordinator Number and street or P.O. Box/Route Number ZIP Code **OFFICIAL** City State **ADDRESS** lincoln NE 68509 801 west prospector r Area code Number Area Code Number **FAX TELEPHONE NUMBER** E-MAIL danielle.reynolds@nebraska.gov **ADDRESS**

(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, 2023, and December 31, 2023.

- 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," write "0" in the space provided.

Substantiated incidents of sexual victimization:

 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 December 20, 2024.
- You may complete these forms online at: https://respond.census.gov/ssv
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE): 1-888-262-3974

Burden Statement

DEFINITIONS

This survey utilizes the PREA standard definitions for types of sexual victimization. These categories are:

SEXUAL ABUSE

Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

- Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus:
- (3) Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
- (4) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact 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, detainee, or resident directed toward another.

١.	Does your State prison system record allegations of inmate-on-inmate SEXUAL ABUSE?					
	₀₁ ■ Yes =	Do you record occurrences, ones?	d all repo or only s	orted substa	ntiated	
		01 All				
		02 Substantia	ted only			
	02 No -	Please provide a agency does no SEXUAL ABU below, and skip	t record in SE allega	mate-on	n-inmate	
2.	how man	January 1, 202 y allegations of	f inmate-	ecemb on-inm	er 31, 202 ate	3,
	SEXUAL	ABUSE were re	•			
	Number	reported	49			
	perpetra included	legation involved mators, count only or d repeated abuse we petrator/s involved	nce. If an a vith the sa	allegation me victir	า	
	•	any allegations th		-	S	
3.	many we responsible	legations repor ere — (Please con e for investigating on in order to fully	tact the agallegations	gency or s of sexu	office ual	
			4			
	a. Substa					
	have	event was investig occurred, based c ence (28 C.F.R. §1	n a prepo	nderanc	ed to e of the	
	h Hasada	stantiated	37			
		nvestigation concl	——— uded that !	 avidence	wae	
	insuf	ficient to determine	whether	or not th	e event	
	c. Unfour	nded				
	The i occu	nvestigation deteri	mined that	the eve	nt did NOT	
	d. Investi	igation ongoing				
	• Evide and a	ence is still being g a final determination	athered, p on has not	rocesse yet beer	d or evaluate n made.	ed,
		. (Sum of Items ough 3d)	49			
	Ju tiil					

• The total should equal the number reported in Item 2.

allegations of	te prison system record inmate-on-inmate SEXUAL [? (See definitions on page 2.)
alle	you record all reported egations or only substantiated es?
	■ All ■ Substantiated only
your inma HA I	ase provide an explanation as to why r agency does not record ate-on-inmate SEXUAL RASSMENT allegations, in the space ow, and skip to Section II.
Between Janu December 31, inmate-on-inm reported?	uary 1, 2023, and , 2023, how many allegations of nate SEXUAL HARASSMENT were
Number repor	ted
perpetrators, of included repeated in the control of the control o	on involved multiple victims and/or count only once. If an allegation ated harassment with the same perpetrator/s involved, count only once.
 Exclude any a consensual. 	allegations that were reported as

many were — (Please	contact the agency or office ting allegations of sexual ully complete this form.)
a. Substantiated	6
	22

c. Unfounded 0

b. Unsubstantiated

e. TOTAL (Sum of Items 6a through 6d)

• The total should equal the number reported in Item 5.

Section II - STAFF-ON-INMATE SEXUAL VICTIMIZATION

DEFINITIONS

STAFF SEXUAL ABUSE

Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the inmate, detainee, or resident:

- (1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus:
- (3) Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (4) Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (5) Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire:
- (6) Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (1)–(5) of this section;
- (7) Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, detainee, or resident, and
- (8) Voyeurism by a staff member, contractor, or volunteer.

STAFF SEXUAL HARASSMENT

Repeated verbal comments or gestures of a sexual nature to an inmate, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

7.	Does your State prison system record allegations of STAFF SEXUAL ABUSE?		
	01 ■ Yes → Do you record a occurrences, or ones?	ll reported only substantiated	
	01 ■ All 02 □ Substantiated	only	
	02 ☐ No → Please provide an e your agency does n SEXUAL ABUSE below, and skip to I	not record STAFF allegations, in the space	
3.	. Between January 1, 2023, and December 31, 2023, how many allegations of STAFF SEXUAL ABUSE were reported?		
	Number reported	24	
	If the allegation involved mult perpetrators, count only once repeated abuse with the saminvolved, count only once.	. If an allegation included	
Э.	Of the allegations reported many were — (Please contact responsible for investigating alle victimization in order to fully contact.)	t the agency or office gations of sexual	
	a. Substantiated	3	
	b. Unsubstantiated	16	
	c. Unfounded	4	
	d. Investigation ongoing	1	

 The total should equal the number reported in Item 8.

e. TOTAL (Sum of Items 9a through 9d)

24

10. Does your State prison system record	Section in - Private and Local Allegations
allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 4.)	13. Did any of the allegations reported in Items 2, 5, 8, or 11 occur in a privately operated facility?
01 ■ Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL ABUSE?	01 ☐ Yes 02 ■ No
01 ■ Yes	14. Did any of the allegations reported in Items 2,
02 ☐ No → Skip to Item 13.	5, 8, or 11 occur in a facility operated and administered by local governments?
02 ☐ No → Please provide an explanation as to why your agency does not record STAFF SEXUAL HARASSMENT allegations, in the space below, and skip to Item 13.	01 ■ Yes 02 □ No Section IV – TOTAL SUBSTANTIATED
	INCIDENTS OF SEXUAL VICTIMIZATION
	15. What is the total number of substantiated incidents reported in Items 3a, 6a, 9a, and 12a?
	Total substantiated incidents
	Please complete a Substantiated Incident Form (Adult, SSV-IA) for each substantiated incident of sexual victimization.
11. Between January 1, 2023, and December 31, 2023, how many allegations	
of STAFF SEXUAL HARASSMENT were	NOTES
reported?	
Number reported	
 If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated harassment with the same victim/s and perpetrator/s involved, 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	
0	
b. Unsubstantiated	
c. Unfounded	
d. Investigation ongoing	
e. TOTAL (Sum of Items 12a through 12d)	
 The total should equal the number reported in Item 11. 	