

PUBLIC LAW 108-79—SEPT. 4, 2003

PRISON RAPE ELIMINATION ACT OF 2003

117 STAT. 972

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Public Law 108–79
108th Congress

An Act

Sept. 4, 2003
[S. 1435]

Prison Rape
Elimination Act
of 2003.
45 USC 15601
note.

To provide for the analysis of the incidence and effects of prison rape in Federal, State, and local institutions and to provide information, resources, recommendations, and funding to protect individuals from prison rape.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) **SHORT TITLE.**—This Act may be cited as the “Prison Rape Elimination Act of 2003”.

(b) **TABLE OF CONTENTS.**—The table of contents of this Act is as follows:

- Sec. 1. Short title; table of contents.
- Sec. 2. Findings.
- Sec. 3. Purposes.
- Sec. 4. National prison rape statistics, data, and research.
- Sec. 5. Prison rape prevention and prosecution.
- Sec. 6. Grants to protect inmates and safeguard communities.
- Sec. 7. National Prison Rape Reduction Commission.
- Sec. 8. Adoption and effect of national standards.
- Sec. 9. Requirement that accreditation organizations adopt accreditation standards.
- Sec. 10. Definitions.

42 USC 15601.

SEC. 2. FINDINGS.

Congress makes the following findings:

(1) 2,100,146 persons were incarcerated in the United States at the end of 2001: 1,324,465 in Federal and State prisons and 631,240 in county and local jails. In 1999, there were more than 10,000,000 separate admissions to and discharges from prisons and jails.

(2) Insufficient research has been conducted and insufficient data reported on the extent of prison rape. However, experts have conservatively estimated that at least 13 percent of the inmates in the United States have been sexually assaulted in prison. Many inmates have suffered repeated assaults. Under this estimate, nearly 200,000 inmates now incarcerated have been or will be the victims of prison rape. The total number of inmates who have been sexually assaulted in the past 20 years likely exceeds 1,000,000.

(3) Inmates with mental illness are at increased risk of sexual victimization. America’s jails and prisons house more mentally ill individuals than all of the Nation’s psychiatric hospitals combined. As many as 16 percent of inmates in State prisons and jails, and 7 percent of Federal inmates, suffer from mental illness.

(4) Young first-time offenders are at increased risk of sexual victimization. Juveniles are 5 times more likely to be sexually

assaulted in adult rather than juvenile facilities—often within the first 48 hours of incarceration.

(5) Most prison staff are not adequately trained or prepared to prevent, report, or treat inmate sexual assaults.

(6) Prison rape often goes unreported, and inmate victims often receive inadequate treatment for the severe physical and psychological effects of sexual assault—if they receive treatment at all.

(7) HIV and AIDS are major public health problems within America’s correctional facilities. In 2000, 25,088 inmates in Federal and State prisons were known to be infected with HIV/AIDS. In 2000, HIV/AIDS accounted for more than 6 percent of all deaths in Federal and State prisons. Infection rates for other sexually transmitted diseases, tuberculosis, and hepatitis B and C are also far greater for prisoners than for the American population as a whole. Prison rape undermines the public health by contributing to the spread of these diseases, and often giving a potential death sentence to its victims.

(8) Prison rape endangers the public safety by making brutalized inmates more likely to commit crimes when they are released—as 600,000 inmates are each year.

(9) The frequently interracial character of prison sexual assaults significantly exacerbates interracial tensions, both within prison and, upon release of perpetrators and victims from prison, in the community at large.

(10) Prison rape increases the level of homicides and other violence against inmates and staff, and the risk of insurrections and riots.

(11) Victims of prison rape suffer severe physical and psychological effects that hinder their ability to integrate into the community and maintain stable employment upon their release from prison. They are thus more likely to become homeless and/or require government assistance.

(12) Members of the public and government officials are largely unaware of the epidemic character of prison rape and the day-to-day horror experienced by victimized inmates.

(13) The high incidence of sexual assault within prisons involves actual and potential violations of the United States Constitution. In *Farmer v. Brennan*, 511 U.S. 825 (1994), the Supreme Court ruled that deliberate indifference to the substantial risk of sexual assault violates prisoners’ rights under the Cruel and Unusual Punishments Clause of the Eighth Amendment. The Eighth Amendment rights of State and local prisoners are protected through the Due Process Clause of the Fourteenth Amendment. Pursuant to the power of Congress under Section Five of the Fourteenth Amendment, Congress may take action to enforce those rights in States where officials have demonstrated such indifference. States that do not take basic steps to abate prison rape by adopting standards that do not generate significant additional expenditures demonstrate such indifference. Therefore, such States are not entitled to the same level of Federal benefits as other States.

(14) The high incidence of prison rape undermines the effectiveness and efficiency of United States Government expenditures through grant programs such as those dealing with health care; mental health care; disease prevention; crime prevention, investigation, and prosecution; prison construction,

maintenance, and operation; race relations; poverty; unemployment and homelessness. The effectiveness and efficiency of these federally funded grant programs are compromised by the failure of State officials to adopt policies and procedures that reduce the incidence of prison rape in that the high incidence of prison rape—

(A) increases the costs incurred by Federal, State, and local jurisdictions to administer their prison systems;

(B) increases the levels of violence, directed at inmates and at staff, within prisons;

(C) increases health care expenditures, both inside and outside of prison systems, and reduces the effectiveness of disease prevention programs by substantially increasing the incidence and spread of HIV, AIDS, tuberculosis, hepatitis B and C, and other diseases;

(D) increases mental health care expenditures, both inside and outside of prison systems, by substantially increasing the rate of post-traumatic stress disorder, depression, suicide, and the exacerbation of existing mental illnesses among current and former inmates;

(E) increases the risks of recidivism, civil strife, and violent crime by individuals who have been brutalized by prison rape; and

(F) increases the level of interracial tensions and strife within prisons and, upon release of perpetrators and victims, in the community at large.

(15) The high incidence of prison rape has a significant effect on interstate commerce because it increases substantially—

(A) the costs incurred by Federal, State, and local jurisdictions to administer their prison systems;

(B) the incidence and spread of HIV, AIDS, tuberculosis, hepatitis B and C, and other diseases, contributing to increased health and medical expenditures throughout the Nation;

(C) the rate of post-traumatic stress disorder, depression, suicide, and the exacerbation of existing mental illnesses among current and former inmates, contributing to increased health and medical expenditures throughout the Nation; and

(D) the risk of recidivism, civil strife, and violent crime by individuals who have been brutalized by prison rape.

42 USC 15602.

SEC. 3. PURPOSES.

The purposes of this Act are to—

(1) establish a zero-tolerance standard for the incidence of prison rape in prisons in the United States;

(2) make the prevention of prison rape a top priority in each prison system;

(3) develop and implement national standards for the detection, prevention, reduction, and punishment of prison rape;

(4) increase the available data and information on the incidence of prison rape, consequently improving the management and administration of correctional facilities;

(5) standardize the definitions used for collecting data on the incidence of prison rape;

(6) increase the accountability of prison officials who fail to detect, prevent, reduce, and punish prison rape;

(7) protect the Eighth Amendment rights of Federal, State, and local prisoners;

(8) increase the efficiency and effectiveness of Federal expenditures through grant programs such as those dealing with health care; mental health care; disease prevention; crime prevention, investigation, and prosecution; prison construction, maintenance, and operation; race relations; poverty; unemployment; and homelessness; and

(9) reduce the costs that prison rape imposes on interstate commerce.

SEC. 4. NATIONAL PRISON RAPE STATISTICS, DATA, AND RESEARCH. 42 USC 15603.

(a) ANNUAL COMPREHENSIVE STATISTICAL REVIEW.—

(1) IN GENERAL.—The Bureau of Justice Statistics of the Department of Justice (in this section referred to as the “Bureau”) shall carry out, for each calendar year, a comprehensive statistical review and analysis of the incidence and effects of prison rape. The statistical review and analysis shall include, but not be limited to the identification of the common characteristics of—

(A) both victims and perpetrators of prison rape; and

(B) prisons and prison systems with a high incidence of prison rape.

(2) CONSIDERATIONS.—In carrying out paragraph (1), the Bureau shall consider—

(A) how rape should be defined for the purposes of the statistical review and analysis;

(B) how the Bureau should collect information about staff-on-inmate sexual assault;

(C) how the Bureau should collect information beyond inmate self-reports of prison rape;

(D) how the Bureau should adjust the data in order to account for differences among prisons as required by subsection (c)(3);

(E) the categorization of prisons as required by subsection (c)(4); and

(F) whether a preliminary study of prison rape should be conducted to inform the methodology of the comprehensive statistical review.

(3) SOLICITATION OF VIEWS.—The Bureau of Justice Statistics shall solicit views from representatives of the following: State departments of correction; county and municipal jails; juvenile correctional facilities; former inmates; victim advocates; researchers; and other experts in the area of sexual assault.

(4) SAMPLING TECHNIQUES.—The review and analysis under paragraph (1) shall be based on a random sample, or other scientifically appropriate sample, of not less than 10 percent of all Federal, State, and county prisons, and a representative sample of municipal prisons. The selection shall include at least one prison from each State. The selection of facilities for sampling shall be made at the latest practicable date prior to conducting the surveys and shall not be disclosed to any facility or prison system official prior to the time period studied in the survey. Selection of a facility for sampling during any

year shall not preclude its selection for sampling in any subsequent year.

Confidentiality.

(5) **SURVEYS.**—In carrying out the review and analysis under paragraph (1), the Bureau shall, in addition to such other methods as the Bureau considers appropriate, use surveys and other statistical studies of current and former inmates from a sample of Federal, State, county, and municipal prisons. The Bureau shall ensure the confidentiality of each survey participant.

(6) **PARTICIPATION IN SURVEY.**—Federal, State, or local officials or facility administrators that receive a request from the Bureau under subsection (a)(4) or (5) will be required to participate in the national survey and provide access to any inmates under their legal custody.

(b) **REVIEW PANEL ON PRISON RAPE.**—

(1) **ESTABLISHMENT.**—To assist the Bureau in carrying out the review and analysis under subsection (a), there is established, within the Department of Justice, the Review Panel on Prison Rape (in this section referred to as the “Panel”).

(2) **MEMBERSHIP.**—

(A) **COMPOSITION.**—The Panel shall be composed of 3 members, each of whom shall be appointed by the Attorney General, in consultation with the Secretary of Health and Human Services.

(B) **QUALIFICATIONS.**—Members of the Panel shall be selected from among individuals with knowledge or expertise in matters to be studied by the Panel.

(3) **PUBLIC HEARINGS.**—

(A) **IN GENERAL.**—The duty of the Panel shall be to carry out, for each calendar year, public hearings concerning the operation of the three prisons with the highest incidence of prison rape and the two prisons with the lowest incidence of prison rape in each category of facilities identified under subsection (c)(4). The Panel shall hold a separate hearing regarding the three Federal or State prisons with the highest incidence of prison rape. The purpose of these hearings shall be to collect evidence to aid in the identification of common characteristics of both victims and perpetrators of prison rape, and the identification of common characteristics of prisons and prison systems with a high incidence of prison rape, and the identification of common characteristics of prisons and prison systems that appear to have been successful in deterring prison rape.

(B) **TESTIMONY AT HEARINGS.**—

(i) **PUBLIC OFFICIALS.**—In carrying out the hearings required under subparagraph (A), the Panel shall request the public testimony of Federal, State, and local officials (and organizations that represent such officials), including the warden or director of each prison, who bears responsibility for the prevention, detection, and punishment of prison rape at each entity, and the head of the prison system encompassing such prison.

(ii) **VICTIMS.**—The Panel may request the testimony of prison rape victims, organizations representing

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such victims, and other appropriate individuals and organizations.

(C) SUBPOENAS.—

(i) ISSUANCE.—The Panel may issue subpoenas for the attendance of witnesses and the production of written or other matter.

(ii) ENFORCEMENT.—In the case of contumacy or refusal to obey a subpoena, the Attorney General may in a Federal court of appropriate jurisdiction obtain an appropriate order to enforce the subpoena.

(c) REPORTS.—

(1) IN GENERAL.—Not later than June 30 of each year, the Attorney General shall submit a report on the activities of the Bureau and the Review Panel, with respect to prison rape, for the preceding calendar year to—

Deadline.

(A) Congress; and

(B) the Secretary of Health and Human Services.

(2) CONTENTS.—The report required under paragraph (1) shall include—

(A) with respect to the effects of prison rape, statistical, sociological, and psychological data;

(B) with respect to the incidence of prison rape—

(i) statistical data aggregated at the Federal, State, prison system, and prison levels;

(ii) a listing of those institutions in the representative sample, separated into each category identified under subsection (c)(4) and ranked according to the incidence of prison rape in each institution; and

(iii) an identification of those institutions in the representative sample that appear to have been successful in deterring prison rape; and

(C) a listing of any prisons in the representative sample that did not cooperate with the survey conducted pursuant to section 4.

(3) DATA ADJUSTMENTS.—In preparing the information specified in paragraph (2), the Attorney General shall use established statistical methods to adjust the data as necessary to account for differences among institutions in the representative sample, which are not related to the detection, prevention, reduction and punishment of prison rape, or which are outside the control of the State, prison, or prison system, in order to provide an accurate comparison among prisons. Such differences may include the mission, security level, size, and jurisdiction under which the prison operates. For each such adjustment made, the Attorney General shall identify and explain such adjustment in the report.

(4) CATEGORIZATION OF PRISONS.—The report shall divide the prisons surveyed into three categories. One category shall be composed of all Federal and State prisons. The other two categories shall be defined by the Attorney General in order to compare similar institutions.

(d) CONTRACTS AND GRANTS.—In carrying out its duties under this section, the Attorney General may—

(1) provide grants for research through the National Institute of Justice; and

(2) contract with or provide grants to any other entity the Attorney General deems appropriate.

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(e) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated \$15,000,000 for each of fiscal years 2004 through 2010 to carry out this section.

42 USC 15604.

SEC. 5. PRISON RAPE PREVENTION AND PROSECUTION.

(a) INFORMATION AND ASSISTANCE.—

Establishment.

(1) NATIONAL CLEARINGHOUSE.—There is established within the National Institute of Corrections a national clearinghouse for the provision of information and assistance to Federal, State, and local authorities responsible for the prevention, investigation, and punishment of instances of prison rape.

(2) TRAINING AND EDUCATION.—The National Institute of Corrections shall conduct periodic training and education programs for Federal, State, and local authorities responsible for the prevention, investigation, and punishment of instances of prison rape.

(b) REPORTS.—

Deadline.

(1) IN GENERAL.—Not later than September 30 of each year, the National Institute of Corrections shall submit a report to Congress and the Secretary of Health and Human Services. This report shall be available to the Director of the Bureau of Justice Statistics.

(2) CONTENTS.—The report required under paragraph (1) shall summarize the activities of the Department of Justice regarding prison rape abatement for the preceding calendar year.

(c) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated \$5,000,000 for each of fiscal years 2004 through 2010 to carry out this section.

42 USC 15605.

SEC. 6. GRANTS TO PROTECT INMATES AND SAFEGUARD COMMUNITIES.

(a) GRANTS AUTHORIZED.—From amounts made available for grants under this section, the Attorney General shall make grants to States to assist those States in ensuring that budgetary circumstances (such as reduced State and local spending on prisons) do not compromise efforts to protect inmates (particularly from prison rape) and to safeguard the communities to which inmates return. The purpose of grants under this section shall be to provide funds for personnel, training, technical assistance, data collection, and equipment to prevent and prosecute prisoner rape.

(b) USE OF GRANT AMOUNTS.—Amounts received by a grantee under this section may be used by the grantee, directly or through subgrants, only for one or more of the following activities:

(1) PROTECTING INMATES.—Protecting inmates by—

(A) undertaking efforts to more effectively prevent prison rape;

(B) investigating incidents of prison rape; or

(C) prosecuting incidents of prison rape.

(2) SAFEGUARDING COMMUNITIES.—Safeguarding communities by—

(A) making available, to officials of State and local governments who are considering reductions to prison budgets, training and technical assistance in successful methods for moderating the growth of prison populations without compromising public safety, including successful methods used by other jurisdictions;

(B) developing and utilizing analyses of prison populations and risk assessment instruments that will improve State and local governments' understanding of risks to the community regarding release of inmates in the prison population;

(C) preparing maps demonstrating the concentration, on a community-by-community basis, of inmates who have been released, to facilitate the efficient and effective—

(i) deployment of law enforcement resources (including probation and parole resources); and

(ii) delivery of services (such as job training and substance abuse treatment) to those released inmates;

(D) promoting collaborative efforts, among officials of State and local governments and leaders of appropriate communities, to understand and address the effects on a community of the presence of a disproportionate number of released inmates in that community; or

(E) developing policies and programs that reduce spending on prisons by effectively reducing rates of parole and probation revocation without compromising public safety.

(c) GRANT REQUIREMENTS.—

(1) PERIOD.—A grant under this section shall be made for a period of not more than 2 years.

(2) MAXIMUM.—The amount of a grant under this section may not exceed \$1,000,000.

(3) MATCHING.—The Federal share of a grant under this section may not exceed 50 percent of the total costs of the project described in the application submitted under subsection (d) for the fiscal year for which the grant was made under this section.

(d) APPLICATIONS.—

(1) IN GENERAL.—To request a grant under this section, the chief executive of a State shall submit an application to the Attorney General at such time, in such manner, and accompanied by such information as the Attorney General may require.

(2) CONTENTS.—Each application required by paragraph (1) shall—

(A) include the certification of the chief executive that the State receiving such grant—

(i) has adopted all national prison rape standards that, as of the date on which the application was submitted, have been promulgated under this Act; and

(ii) will consider adopting all national prison rape standards that are promulgated under this Act after such date;

(B) specify with particularity the preventative, prosecutorial, or administrative activities to be undertaken by the State with the amounts received under the grant; and

(C) in the case of an application for a grant for one or more activities specified in paragraph (2) of subsection (b)—

(i) review the extent of the budgetary circumstances affecting the State generally and describe how those circumstances relate to the State's prisons;

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(ii) describe the rate of growth of the State's prison population over the preceding 10 years and explain why the State may have difficulty sustaining that rate of growth; and

(iii) explain the extent to which officials (including law enforcement officials) of State and local governments and victims of crime will be consulted regarding decisions whether, or how, to moderate the growth of the State's prison population.

(e) **REPORTS BY GRANTEE.**—

Deadline.

(1) **IN GENERAL.**—The Attorney General shall require each grantee to submit, not later than 90 days after the end of the period for which the grant was made under this section, a report on the activities carried out under the grant. The report shall identify and describe those activities and shall contain an evaluation of the effect of those activities on—

(A) the number of incidents of prison rape, and the grantee's response to such incidents; and

(B) the safety of the prisons, and the safety of the communities in which released inmates are present.

(2) **DISSEMINATION.**—The Attorney General shall ensure that each report submitted under paragraph (1) is made available under the national clearinghouse established under section 5.

(f) **STATE DEFINED.**—In this section, the term “State” includes the District of Columbia, the Commonwealth of Puerto Rico, and any other territory or possession of the United States.

(g) **AUTHORIZATION OF APPROPRIATIONS.**—

(1) **IN GENERAL.**—There are authorized to be appropriated for grants under this section \$40,000,000 for each of fiscal years 2004 through 2010.

(2) **LIMITATION.**—Of amounts made available for grants under this section, not less than 50 percent shall be available only for activities specified in paragraph (1) of subsection (b).

42 USC 15606.

SEC. 7. NATIONAL PRISON RAPE REDUCTION COMMISSION.

(a) **ESTABLISHMENT.**—There is established a commission to be known as the National Prison Rape Reduction Commission (in this section referred to as the “Commission”).

(b) **MEMBERS.**—

President.

(1) **IN GENERAL.**—The Commission shall be composed of 9 members, of whom—

(A) 3 shall be appointed by the President;

(B) 2 shall be appointed by the Speaker of the House of Representatives, unless the Speaker is of the same party as the President, in which case 1 shall be appointed by the Speaker of the House of Representatives and 1 shall be appointed by the minority leader of the House of Representatives;

(C) 1 shall be appointed by the minority leader of the House of Representatives (in addition to any appointment made under subparagraph (B));

(D) 2 shall be appointed by the majority leader of the Senate, unless the majority leader is of the same party as the President, in which case 1 shall be appointed by the majority leader of the Senate and 1 shall be appointed by the minority leader of the Senate; and

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(E) 1 member appointed by the minority leader of the Senate (in addition to any appointment made under subparagraph (D)).

(2) PERSONS ELIGIBLE.—Each member of the Commission shall be an individual who has knowledge or expertise in matters to be studied by the Commission.

(3) CONSULTATION REQUIRED.—The President, the Speaker and minority leader of the House of Representatives, and the majority leader and minority leader of the Senate shall consult with one another prior to the appointment of the members of the Commission to achieve, to the maximum extent possible, fair and equitable representation of various points of view with respect to the matters to be studied by the Commission.

(4) TERM.—Each member shall be appointed for the life of the Commission.

(5) TIME FOR INITIAL APPOINTMENTS.—The appointment of the members shall be made not later than 60 days after the date of enactment of this Act. Deadline.

(6) VACANCIES.—A vacancy in the Commission shall be filled in the manner in which the original appointment was made, and shall be made not later than 60 days after the date on which the vacancy occurred. Deadline.

(c) OPERATION.—

(1) CHAIRPERSON.—Not later than 15 days after appointments of all the members are made, the President shall appoint a chairperson for the Commission from among its members. Deadline. President.

(2) MEETINGS.—The Commission shall meet at the call of the chairperson. The initial meeting of the Commission shall take place not later than 30 days after the initial appointment of the members is completed. Deadline.

(3) QUORUM.—A majority of the members of the Commission shall constitute a quorum to conduct business, but the Commission may establish a lesser quorum for conducting hearings scheduled by the Commission.

(4) RULES.—The Commission may establish by majority vote any other rules for the conduct of Commission business, if such rules are not inconsistent with this Act or other applicable law.

(d) COMPREHENSIVE STUDY OF THE IMPACTS OF PRISON RAPE.—

(1) IN GENERAL.—The Commission shall carry out a comprehensive legal and factual study of the penological, physical, mental, medical, social, and economic impacts of prison rape in the United States on—

(A) Federal, State, and local governments; and

(B) communities and social institutions generally, including individuals, families, and businesses within such communities and social institutions.

(2) MATTERS INCLUDED.—The study under paragraph (1) shall include—

(A) a review of existing Federal, State, and local government policies and practices with respect to the prevention, detection, and punishment of prison rape;

(B) an assessment of the relationship between prison rape and prison conditions, and of existing monitoring, regulatory, and enforcement practices that are intended to address any such relationship;

(C) an assessment of pathological or social causes of prison rape;

(D) an assessment of the extent to which the incidence of prison rape contributes to the spread of sexually transmitted diseases and to the transmission of HIV;

(E) an assessment of the characteristics of inmates most likely to commit prison rape and the effectiveness of various types of treatment or programs to reduce such likelihood;

(F) an assessment of the characteristics of inmates most likely to be victims of prison rape and the effectiveness of various types of treatment or programs to reduce such likelihood;

(G) an assessment of the impacts of prison rape on individuals, families, social institutions and the economy generally, including an assessment of the extent to which the incidence of prison rape contributes to recidivism and to increased incidence of sexual assault;

(H) an examination of the feasibility and cost of conducting surveillance, undercover activities, or both, to reduce the incidence of prison rape;

(I) an assessment of the safety and security of prison facilities and the relationship of prison facility construction and design to the incidence of prison rape;

(J) an assessment of the feasibility and cost of any particular proposals for prison reform;

(K) an identification of the need for additional scientific and social science research on the prevalence of prison rape in Federal, State, and local prisons;

(L) an assessment of the general relationship between prison rape and prison violence;

(M) an assessment of the relationship between prison rape and levels of training, supervision, and discipline of prison staff; and

(N) an assessment of existing Federal and State systems for reporting incidents of prison rape, including an assessment of whether existing systems provide an adequate assurance of confidentiality, impartiality and the absence of reprisal.

(3) REPORT.—

Deadline.

(A) DISTRIBUTION.—Not later than 2 years after the date of the initial meeting of the Commission, the Commission shall submit a report on the study carried out under this subsection to—

- (i) the President;
- (ii) the Congress;
- (iii) the Attorney General;
- (iv) the Secretary of Health and Human Services;
- (v) the Director of the Federal Bureau of Prisons;
- (vi) the chief executive of each State; and
- (vii) the head of the department of corrections of each State.

(B) CONTENTS.—The report under subparagraph (A) shall include—

- (i) the findings and conclusions of the Commission;
- (ii) recommended national standards for reducing prison rape;

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(iii) recommended protocols for preserving evidence and treating victims of prison rape; and

(iv) a summary of the materials relied on by the Commission in the preparation of the report.

(e) RECOMMENDATIONS.—

(1) IN GENERAL.—In conjunction with the report submitted under subsection (d)(3), the Commission shall provide the Attorney General and the Secretary of Health and Human Services with recommended national standards for enhancing the detection, prevention, reduction, and punishment of prison rape.

(2) MATTERS INCLUDED.—The information provided under paragraph (1) shall include recommended national standards relating to—

(A) the classification and assignment of prisoners, using proven standardized instruments and protocols, in a manner that limits the occurrence of prison rape;

(B) the investigation and resolution of rape complaints by responsible prison authorities, local and State police, and Federal and State prosecution authorities;

(C) the preservation of physical and testimonial evidence for use in an investigation of the circumstances relating to the rape;

(D) acute-term trauma care for rape victims, including standards relating to—

(i) the manner and extent of physical examination and treatment to be provided to any rape victim; and

(ii) the manner and extent of any psychological examination, psychiatric care, medication, and mental health counseling to be provided to any rape victim;

(E) referrals for long-term continuity of care for rape victims;

(F) educational and medical testing measures for reducing the incidence of HIV transmission due to prison rape;

(G) post-rape prophylactic medical measures for reducing the incidence of transmission of sexual diseases;

(H) the training of correctional staff sufficient to ensure that they understand and appreciate the significance of prison rape and the necessity of its eradication;

(I) the timely and comprehensive investigation of staff sexual misconduct involving rape or other sexual assault on inmates;

(J) ensuring the confidentiality of prison rape complaints and protecting inmates who make complaints of prison rape;

(K) creating a system for reporting incidents of prison rape that will ensure the confidentiality of prison rape complaints, protect inmates who make prison rape complaints from retaliation, and assure the impartial resolution of prison rape complaints;

(L) data collection and reporting of—

(i) prison rape;

(ii) prison staff sexual misconduct; and

(iii) the resolution of prison rape complaints by prison officials and Federal, State, and local investigation and prosecution authorities; and

(M) such other matters as may reasonably be related to the detection, prevention, reduction, and punishment of prison rape.

(3) LIMITATION.—The Commission shall not propose a recommended standard that would impose substantial additional costs compared to the costs presently expended by Federal, State, and local prison authorities.

(f) CONSULTATION WITH ACCREDITATION ORGANIZATIONS.—In developing recommended national standards for enhancing the detection, prevention, reduction, and punishment of prison rape, the Commission shall consider any standards that have already been developed, or are being developed simultaneously to the deliberations of the Commission. The Commission shall consult with accreditation organizations responsible for the accreditation of Federal, State, local or private prisons, that have developed or are currently developing standards related to prison rape. The Commission will also consult with national associations representing the corrections profession that have developed or are currently developing standards related to prison rape.

(g) HEARINGS.—

(1) IN GENERAL.—The Commission shall hold public hearings. The Commission may hold such hearings, sit and act at such times and places, take such testimony, and receive such evidence as the Commission considers advisable to carry out its duties under this section.

(2) WITNESS EXPENSES.—Witnesses requested to appear before the Commission shall be paid the same fees as are paid to witnesses under section 1821 of title 28, United States Code. The per diem and mileage allowances for witnesses shall be paid from funds appropriated to the Commission.

(h) INFORMATION FROM FEDERAL OR STATE AGENCIES.—The Commission may secure directly from any Federal department or agency such information as the Commission considers necessary to carry out its duties under this section. The Commission may request the head of any State or local department or agency to furnish such information to the Commission.

(i) PERSONNEL MATTERS.—

(1) TRAVEL EXPENSES.—The members of the Commission shall be allowed travel expenses, including per diem in lieu of subsistence, at rates authorized for employees of agencies under subchapter I of chapter 57 of title 5, United States Code, while away from their homes or regular places of business in the performance of service for the Commission.

(2) DETAIL OF FEDERAL EMPLOYEES.—With the affirmative vote of $\frac{2}{3}$ of the Commission, any Federal Government employee, with the approval of the head of the appropriate Federal agency, may be detailed to the Commission without reimbursement, and such detail shall be without interruption or loss of civil service status, benefits, or privileges.

(3) PROCUREMENT OF TEMPORARY AND INTERMITTENT SERVICES.—Upon the request of the Commission, the Attorney General shall provide reasonable and appropriate office space, supplies, and administrative assistance.

(j) CONTRACTS FOR RESEARCH.—

(1) NATIONAL INSTITUTE OF JUSTICE.—With a $\frac{2}{3}$ affirmative vote, the Commission may select nongovernmental researchers and experts to assist the Commission in carrying out its duties

under this Act. The National Institute of Justice shall contract with the researchers and experts selected by the Commission to provide funding in exchange for their services.

(2) OTHER ORGANIZATIONS.—Nothing in this subsection shall be construed to limit the ability of the Commission to enter into contracts with other entities or organizations for research necessary to carry out the duties of the Commission under this section.

(k) SUBPOENAS.—

(1) ISSUANCE.—The Commission may issue subpoenas for the attendance of witnesses and the production of written or other matter.

(2) ENFORCEMENT.—In the case of contumacy or refusal to obey a subpoena, the Attorney General may in a Federal court of appropriate jurisdiction obtain an appropriate order to enforce the subpoena.

(3) CONFIDENTIALITY OF DOCUMENTARY EVIDENCE.—Documents provided to the Commission pursuant to a subpoena issued under this subsection shall not be released publicly without the affirmative vote of $\frac{2}{3}$ of the Commission.

(l) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated such sums as may be necessary to carry out this section.

(m) TERMINATION.—The Commission shall terminate on the date that is 60 days after the date on which the Commission submits the reports required by this section.

(n) EXEMPTION.—The Commission shall be exempt from the Federal Advisory Committee Act.

SEC. 8. ADOPTION AND EFFECT OF NATIONAL STANDARDS.

Deadlines.
42 USC 15607.

(a) PUBLICATION OF PROPOSED STANDARDS.—

(1) FINAL RULE.—Not later than 1 year after receiving the report specified in section 7(d)(3), the Attorney General shall publish a final rule adopting national standards for the detection, prevention, reduction, and punishment of prison rape.

(2) INDEPENDENT JUDGMENT.—The standards referred to in paragraph (1) shall be based upon the independent judgment of the Attorney General, after giving due consideration to the recommended national standards provided by the Commission under section 7(e), and being informed by such data, opinions, and proposals that the Attorney General determines to be appropriate to consider.

(3) LIMITATION.—The Attorney General shall not establish a national standard under this section that would impose substantial additional costs compared to the costs presently expended by Federal, State, and local prison authorities. The Attorney General may, however, provide a list of improvements for consideration by correctional facilities.

(4) TRANSMISSION TO STATES.—Within 90 days of publishing the final rule under paragraph (1), the Attorney General shall transmit the national standards adopted under such paragraph to the chief executive of each State, the head of the department of corrections of each State, and to the appropriate authorities in those units of local government who oversee operations in one or more prisons.

(b) APPLICABILITY TO FEDERAL BUREAU OF PRISONS.—The national standards referred to in subsection (a) shall apply to the

Federal Bureau of Prisons immediately upon adoption of the final rule under subsection (a)(4).

(c) ELIGIBILITY FOR FEDERAL FUNDS.—

(1) COVERED PROGRAMS.—

(A) IN GENERAL.—For purposes of this subsection, a grant program is covered by this subsection if, and only if—

(i) the program is carried out by or under the authority of the Attorney General; and

(ii) the program may provide amounts to States for prison purposes.

(B) LIST.—For each fiscal year, the Attorney General shall prepare a list identifying each program that meets the criteria of subparagraph (A) and provide that list to each State.

(2) ADOPTION OF NATIONAL STANDARDS.—For each fiscal year, any amount that a State would otherwise receive for prison purposes for that fiscal year under a grant program covered by this subsection shall be reduced by 5 percent, unless the chief executive of the State submits to the Attorney General—

(A) a certification that the State has adopted, and is in full compliance with, the national standards described in section 8(a); or

(B) an assurance that not less than 5 percent of such amount shall be used only for the purpose of enabling the State to adopt, and achieve full compliance with, those national standards, so as to ensure that a certification under subparagraph (A) may be submitted in future years.

Deadline.

(3) REPORT ON NONCOMPLIANCE.—Not later than September 30 of each year, the Attorney General shall publish a report listing each grantee that is not in compliance with the national standards adopted pursuant to section 8(a).

(4) COOPERATION WITH SURVEY.—For each fiscal year, any amount that a State receives for that fiscal year under a grant program covered by this subsection shall not be used for prison purposes (and shall be returned to the grant program if no other authorized use is available), unless the chief executive of the State submits to the Attorney General a certification that neither the State, nor any political subdivision or unit of local government within the State, is listed in a report issued by the Attorney General pursuant to section 4(c)(2)(C).

(5) REDISTRIBUTION OF AMOUNTS.—Amounts under a grant program not granted by reason of a reduction under paragraph (2), or returned by reason of the prohibition in paragraph (4), shall be granted to one or more entities not subject to such reduction or such prohibition, subject to the other laws governing that program.

Procedures.

(6) IMPLEMENTATION.—The Attorney General shall establish procedures to implement this subsection, including procedures for effectively applying this subsection to discretionary grant programs.

(7) EFFECTIVE DATE.—

(A) REQUIREMENT OF ADOPTION OF STANDARDS.—The first grants to which paragraph (2) applies are grants for the second fiscal year beginning after the date on which the national standards under section 8(a) are finalized.

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(B) REQUIREMENT FOR COOPERATION.—The first grants to which paragraph (4) applies are grants for the fiscal year beginning after the date of the enactment of this Act.

SEC. 9. REQUIREMENT THAT ACCREDITATION ORGANIZATIONS ADOPT ACCREDITATION STANDARDS. 42 USC 15608.

(a) ELIGIBILITY FOR FEDERAL GRANTS.—Notwithstanding any other provision of law, an organization responsible for the accreditation of Federal, State, local, or private prisons, jails, or other penal facilities may not receive any new Federal grants during any period in which such organization fails to meet any of the requirements of subsection (b).

(b) REQUIREMENTS.—To be eligible to receive Federal grants, an accreditation organization referred to in subsection (a) must meet the following requirements: Deadlines.

(1) At all times after 90 days after the date of enactment of this Act, the organization shall have in effect, for each facility that it is responsible for accrediting, accreditation standards for the detection, prevention, reduction, and punishment of prison rape.

(2) At all times after 1 year after the date of the adoption of the final rule under section 8(a)(4), the organization shall, in addition to any other such standards that it may promulgate relevant to the detection, prevention, reduction, and punishment of prison rape, adopt accreditation standards consistent with the national standards adopted pursuant to such final rule.

SEC. 10. DEFINITIONS. 42 USC 15609.

In this Act, the following definitions shall apply:

(1) CARNAL KNOWLEDGE.—The term “carnal knowledge” means contact between the penis and the vulva or the penis and the anus, including penetration of any sort, however slight.

(2) INMATE.—The term “inmate” means any person incarcerated or detained in any facility who is accused of, convicted of, sentenced for, or adjudicated delinquent for, violations of criminal law or the terms and conditions of parole, probation, pretrial release, or diversionary program.

(3) JAIL.—The term “jail” means a confinement facility of a Federal, State, or local law enforcement agency to hold—

(A) persons pending adjudication of criminal charges;

or

(B) persons committed to confinement after adjudication of criminal charges for sentences of 1 year or less.

(4) HIV.—The term “HIV” means the human immunodeficiency virus.

(5) ORAL SODOMY.—The term “oral sodomy” means contact between the mouth and the penis, the mouth and the vulva, or the mouth and the anus.

(6) POLICE LOCKUP.—The term “police lockup” means a temporary holding facility of a Federal, State, or local law enforcement agency to hold—

(A) inmates pending bail or transport to jail;

(B) inebriates until ready for release; or

(C) juveniles pending parental custody or shelter placement.

(7) PRISON.—The term “prison” means any confinement facility of a Federal, State, or local government, whether administered by such government or by a private organization on behalf of such government, and includes—

(A) any local jail or police lockup; and

(B) any juvenile facility used for the custody or care of juvenile inmates.

(8) PRISON RAPE.—The term “prison rape” includes the rape of an inmate in the actual or constructive control of prison officials.

(9) RAPE.—The term “rape” means—

(A) the carnal knowledge, oral sodomy, sexual assault with an object, or sexual fondling of a person, forcibly or against that person’s will;

(B) the carnal knowledge, oral sodomy, sexual assault with an object, or sexual fondling of a person not forcibly or against the person’s will, where the victim is incapable of giving consent because of his or her youth or his or her temporary or permanent mental or physical incapacity; or

(C) the carnal knowledge, oral sodomy, sexual assault with an object, or sexual fondling of a person achieved through the exploitation of the fear or threat of physical violence or bodily injury.

(10) SEXUAL ASSAULT WITH AN OBJECT.—The term “sexual assault with an object” means the use of any hand, finger, object, or other instrument to penetrate, however slightly, the genital or anal opening of the body of another person.

(11) SEXUAL FONDLING.—The term “sexual fondling” means the touching of the private body parts of another person (including the genitalia, anus, groin, breast, inner thigh, or buttocks) for the purpose of sexual gratification.

(12) EXCLUSIONS.—The terms and conditions described in paragraphs (9) and (10) shall not apply to—

(A) custodial or medical personnel gathering physical evidence, or engaged in other legitimate medical treatment, in the course of investigating prison rape;

(B) the use of a health care provider’s hands or fingers or the use of medical devices in the course of appropriate medical treatment unrelated to prison rape; or

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(C) the use of a health care provider’s hands or fingers and the use of instruments to perform body cavity searches in order to maintain security and safety within the prison or detention facility, provided that the search is conducted in a manner consistent with constitutional requirements.

Approved September 4, 2003.

LEGISLATIVE HISTORY—S. 1435:

CONGRESSIONAL RECORD, Vol. 149 (2003):

July 21, considered and passed Senate.

July 25, considered and passed House.

WEEKLY COMPILATION OF PRESIDENTIAL DOCUMENTS, Vol. 39 (2003):

Sept. 4, Presidential statement.



34 U.S. Code § 10132. Bureau of Justice Statistics

U.S. Code Notes

(a) ESTABLISHMENT

There is established within the Department of Justice, under the general authority of the Attorney General, a Bureau of Justice Statistics (hereinafter referred to in this subchapter as "Bureau").

(b) APPOINTMENT OF DIRECTOR; EXPERIENCE; AUTHORITY; RESTRICTIONS

The Bureau shall be headed by a Director appointed by the President. The Director shall have had experience in statistical programs. The Director shall have final authority for all grants, cooperative agreements, and contracts awarded by the Bureau. The Director shall be responsible for the integrity of data and statistics and shall protect against improper or illegal use or disclosure. The Director shall report to the Attorney General through the Assistant Attorney General. The Director shall not engage in any other employment than that of serving as Director; nor shall the Director hold any office in, or act in any capacity for, any organization, agency, or institution with which the Bureau makes any contract or other arrangement under this Act.

(c) DUTIES AND FUNCTIONS OF BUREAU The Bureau is authorized to—

- (1)** make grants to, or enter into cooperative agreements or contracts with public agencies, institutions of higher education, private organizations, or private individuals for purposes related to this subchapter; grants shall be made subject to continuing compliance with standards for gathering justice statistics set forth in rules and regulations promulgated by the Director;

- (2)** collect and analyze information concerning criminal victimization, including crimes against the elderly, and civil disputes;
- (3)** collect and analyze data that will serve as a continuous and comparable national social indication of the prevalence, incidence, rates, extent, distribution, and attributes of crime, juvenile delinquency, civil disputes, and other statistical factors related to crime, civil disputes, and juvenile delinquency, in support of national, State, tribal, and local justice policy and decisionmaking;
- (4)** collect and analyze statistical information, concerning the operations of the criminal justice system at the Federal, State, tribal, and local levels;
- (5)** collect and analyze statistical information concerning the prevalence, incidence, rates, extent, distribution, and attributes of crime, and juvenile delinquency, at the Federal, State, tribal, and local levels;
- (6)** analyze the correlates of crime, civil disputes and juvenile delinquency, by the use of statistical information, about criminal and civil justice systems at the Federal, State, tribal, and local levels, and about the extent, distribution and attributes of crime, and juvenile delinquency, in the Nation and at the Federal, State, tribal, and local levels;
- (7)** compile, collate, analyze, publish, and disseminate uniform national statistics concerning all aspects of criminal justice and related aspects of civil justice, crime, including crimes against the elderly, juvenile delinquency, criminal offenders, juvenile delinquents, and civil disputes in the various States and in Indian country;
- (8)** recommend national standards for justice statistics and for insuring the reliability and validity of justice statistics supplied pursuant to this chapter;
- (9)** maintain liaison with the judicial branches of the Federal Government and State and tribal governments in matters relating to justice statistics, and cooperate with the judicial branch in assuring as much uniformity as feasible in statistical systems of the executive and judicial branches;
- (10)** provide information to the President, the Congress, the judiciary, State, tribal, and local governments, and the general public on justice

statistics;

(11) establish or assist in the establishment of a system to provide State, tribal, and local governments with access to Federal informational resources useful in the planning, implementation, and evaluation of programs under this Act;

(12) conduct or support research relating to methods of gathering or analyzing justice statistics;

(13) provide for the development of justice information systems programs and assistance to the States, Indian tribes, and units of local government relating to collection, analysis, or dissemination of justice statistics;

(14) develop and maintain a data processing capability to support the collection, aggregation, analysis and dissemination of information on the incidence of crime and the operation of the criminal justice system;

(15) collect, analyze and disseminate comprehensive Federal justice transaction statistics (including statistics on issues of Federal justice interest such as public fraud and high technology crime) and to provide technical assistance to and work jointly with other Federal agencies to improve the availability and quality of Federal justice data;

(16) provide for the collection, compilation, analysis, publication and dissemination of information and statistics about the prevalence, incidence, rates, extent, distribution and attributes of drug offenses, drug related offenses and drug dependent offenders and further provide for the establishment of a national clearinghouse to maintain and update a comprehensive and timely data base on all criminal justice aspects of the drug crisis and to disseminate such information;

(17) provide for the collection, analysis, dissemination and publication of statistics on the condition and progress of drug control activities at the Federal, State, tribal, and local levels with particular attention to programs and intervention efforts demonstrated to be of value in the overall national anti-drug strategy and to provide for the establishment of a national clearinghouse for the gathering of data generated by Federal, State, tribal, and local criminal justice agencies on their drug enforcement activities;

(18) provide for the development and enhancement of State, tribal, and local criminal justice information systems, and the standardization

of data reporting relating to the collection, analysis or dissemination of data and statistics about drug offenses, drug related offenses, or drug dependent offenders;

(19) provide for improvements in the accuracy, quality, timeliness, immediate accessibility, and integration of State and tribal criminal history and related records, support the development and enhancement of national systems of criminal history and related records including the National Instant Criminal Background Check System, the National Incident-Based Reporting System, and the records of the National Crime Information Center, facilitate State and tribal participation in national records and information systems, and support statistical research for critical analysis of the improvement and utilization of criminal history records;

(20) maintain liaison with State, tribal, and local governments and governments of other nations concerning justice statistics;

(21) cooperate in and participate with national and international organizations in the development of uniform justice statistics;

(22) ensure conformance with security and privacy requirement of section 10231 of this title and identify, analyze, and participate in the development and implementation of privacy, security and information policies which impact on Federal, tribal, and State criminal justice operations and related statistical activities; and

(23) exercise the powers and functions set out in subchapter VII.

(d) JUSTICE STATISTICAL COLLECTION, ANALYSIS, AND DISSEMINATION

(1) IN GENERAL To ensure that all justice statistical collection, analysis, and dissemination is carried out in a coordinated manner, the Director is authorized to—

(A) utilize, with their consent, the services, equipment, records, personnel, information, and facilities of other Federal, State, local, and private agencies and instrumentalities with or without reimbursement therefor, and to enter into agreements with such agencies and instrumentalities for purposes of data collection and analysis;

(B) confer and cooperate with State, municipal, and other local agencies;

(C) request such information, data, and reports from any Federal agency as may be required to carry out the purposes of this chapter;

(D) seek the cooperation of the judicial branch of the Federal Government in gathering data from criminal justice records;

(E) encourage replication, coordination and sharing among justice agencies regarding information systems, information policy, and data; and

(F) confer and cooperate with Federal statistical agencies as needed to carry out the purposes of this subchapter, including by entering into cooperative data sharing agreements in conformity with all laws and regulations applicable to the disclosure and use of data.

(2) CONSULTATION WITH INDIAN TRIBES

The Director, acting jointly with the Assistant Secretary for Indian Affairs (acting through the Office of Justice Services) and the Director of the Federal Bureau of Investigation, shall work with Indian tribes and tribal law enforcement agencies to establish and implement such tribal data collection systems as the Director determines to be necessary to achieve the purposes of this section.

(e) FURNISHING OF INFORMATION, DATA, OR REPORTS BY FEDERAL AGENCIES

Federal agencies requested to furnish information, data, or reports pursuant to subsection (d)(1)(C) shall provide such information to the Bureau as is required to carry out the purposes of this section.

(f) CONSULTATION WITH REPRESENTATIVES OF STATE, TRIBAL, AND LOCAL GOVERNMENT AND JUDICIARY

In recommending standards for gathering justice statistics under this section, the Director shall consult with representatives of State, tribal, and local government, including, where appropriate, representatives of the judiciary.

(g) REPORTS

Not later than 1 year after July 29, 2010, and annually thereafter, the Director shall submit to Congress a report describing the data collected and analyzed under this section relating to crimes in Indian country.

(Pub. L. 90–351, title I, § 302, as added Pub. L. 96–157, § 2, Dec. 27, 1979, 93 Stat. 1176; amended Pub. L. 98–473, title II, § 605(b), Oct. 12, 1984, 98 Stat. 2079; Pub. L. 100–690, title VI, § 6092(a), Nov. 18, 1988, 102 Stat. 4339; Pub. L. 103–322, title XXXIII, § 330001(h)(2), Sept. 13, 1994, 108 Stat. 2139; Pub. L. 109–162, title XI, § 1115(a), Jan. 5, 2006, 119 Stat. 3103; Pub. L. 111–211, title II, § 251(b), July 29, 2010, 124 Stat. 2297; Pub. L. 112–166, § 2(h)(1), Aug. 10, 2012, 126 Stat. 1285.)

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**National Inmate Survey: Year 4 Prisons
Questionnaire Specifications for Combined Instrument
4/20/20**

Modules Included in the Main and Alternative NIS-4 Prisons Instruments

Module Topic	Begins on Page	Main Instrument (95% of interviews)	Alternative Instrument (5% of interviews)
Interview Set-up	2	X	X
CAPI Demographics	4	X	X
Computer Tutorial	7	X	X
ACASI Demographics	10	X	X
Criminal History	12	X	X
Sexual Identity and Pre-Incarceration Information	16	X	X
Sexual Activity with Inmates	22	X	
Description of Non-consensual Sexual Acts (NCSAs)	39	X	
Staff Sexual Misconduct	41	X	
Determination of Specific Incident for Inmate Incident Report	45	X	
Incident Characteristics for Inmate-on-Inmate Victimization	48	X	
Determination of Specific Incident for Staff Incident Report	57	X	
Incident Characteristics for Staff-on-Inmate Victimization	58	X	
Other Victimization While Incarcerated	67	X	
Pat Downs and Strip Searches	68	X	
Facility Conditions, Support and Safety	69	X	
Mental Health	73	X	
Disability Status	76	X	
Parental Involvement	78	X	
Restrictive Housing	82	X	
Childhood Experiences	84		X
Living Area and Activities	87		X
Altercations, Fights and Grievances	92		X
Work Assignments	96		X
Program Participation	99		X
Visitors and Outside Contact	102		X
Post-Release Plans	104		X
Interview Debriefing	106	X	X

INTERVIEW SETUP

- A1** TYPE OF INTERVIEW:
- 1 ENGLISH MALE
 - 2 ENGLISH FEMALE
 - 3 SPANISH MALE
 - 4 SPANISH FEMALE

DEFINE CONFIRM_FILL

IF A1 = 1 THEN CONFIRM_FILL = "AN **ENGLISH** INTERVIEW WITH A **MALE** INMATE"

IF A1 = 2 THEN CONFIRM_FILL = "AN **ENGLISH** INTERVIEW WITH A **FEMALE** INMATE"

IF A1 = 3 THEN CONFIRM_FILL = "A **SPANISH** INTERVIEW WITH A **MALE** INMATE"

IF A1 = 4 THEN CONFIRM_FILL = "A **SPANISH** INTERVIEW WITH A **FEMALE** INMATE"

A1_CONFIRM INTERVIEWER: YOU INDICATED YOU WANT TO ADMINISTER [CONFIRM_FILL]. IS THIS CORRECT?

- 1 YES
- 2 NO

PROGRAMMER: PLEASE ROUTE 'NO' RESPONSES BACK TO A1. DK/REF ARE NOT ALLOWED FOR THIS ITEM.

DEFINE GENDER:

IF A1 = 1 OR 3 THEN GENDER = 1

IF A1 = 2 OR 4 THEN GENDER = 2

OMB INTERVIEWER: IF RESPONDENT ASKS ANY QUESTIONS ABOUT OMB APPROVAL FOR THIS STUDY, YOU MAY READ THE INFORMATION BELOW. OTHERWISE TOUCH THE **NEXT** BUTTON TO GO TO THE NEXT SCREEN.

Notice: Public reporting for this collection of information is estimated to average 35 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is XXXX-xxxx.

I1 FACILITY ID

I2 ENTER YOUR INTERVIEWER ID NUMBER:

_____ [ALLOW 6 DIGITS]

I3 IS THIS INMATE BEING OFFERED AN INCENTIVE?

- 1 YES

2 NO

CAPI DEMOGRAPHICS

A2 In what year were you born?

4-DIGIT YEAR: _____
DK/REF

DEFINE CALCAGE:

CALCAGE = AGE CALCULATED BY SUBTRACTING A2 YEAR FROM CURRENT YEAR.

A3 [IF A2 NE (DK OR REF)] Are you CALCAGE – 1 or CALCAGE?

1 CALCAGE – 1
2 CALCAGE
DK/REF

UPDATE CALCAGE:

IF A3 = 1 THEN CALCAGE = CALCAGE - 1
ELSE CALCAGE = CALCAGE

A4 [IF (A2=DK OR REF) OR A3 = DK OR REF] How old are you?

AGE: _____
DK/REF

UPDATE CALCAGE:

IF A4 NE BLANK OR DK OR REF THEN CALCAGE = A4
IF A4 = DK THEN CALCAGE = DK
IF A4 = RE THEN CALCAGE = RE

I4 [IF CALCAGE < 18] HAS THIS FACILITY APPROVED PARTICIPATION FOR 16 AND 17-YEAR OLDS?

NOTE: THIS INFORMATION IS INCLUDED IN THE FACILITY LOGISTICS PLAN.

1 YES
2 NO

A4a [IF CALCAGE < 16 AND I4 = 1] Thank you for your willingness to participate, but we cannot interview anyone who is younger than 16 for this study.

[IF CALCAGE < 18 AND I4 = 2] Thank you for your willingness to participate, but we cannot interview anyone who is younger than 18 for this study.

PRESS **NEXT** BUTTON TO END INTERVIEW.

Note to Programmers: Route these cases to M20

A4b [IF A4 = DK/REF] Thank you for your willingness to participate, but we cannot interview if we don't know how old you are.

PRESS **NEXT** BUTTON TO END INTERVIEW.

Note to Programmers: Route these cases to M20

B1. How old were you the **first time** you were arrested or taken into custody for any offense?

AGE: _____ [RANGE: 6 – CALCAGE]

DK/REF

A5 When were you admitted to this facility?

A5a. 2-DIGIT MONTH: _____ [RANGE: 1 – 12] DK/REF

A5b. 2-DIGIT DAY: _____ [RANGE: 1 – 31] DK/REF

A5c. 4-DIGIT YEAR: _____ [RANGE: 1915 – current year] DK/REF

A6 [IF A5a = DK/REF AND A5c NE DK OR REF] What time of year was it? Was it winter, spring, summer, or fall when you were admitted to this facility?

1 WINTER

2 SPRING

3 SUMMER

4 FALL

DK/REF

DEFINE CALCTIME:

CALCTIME = CALCULATED BY “SUBTRACTING” DATE OF INCARCERATION FROM DATE OF INTERVIEW AND THEN ROUNDING. (less than 2 months report as days; 2 – 11 months report as months; 12 months or more round to nearest year)

DEFINE DOAFILL1:

If facility admission date is at least 12 months ago then DOAFILL1 = During the past 12 months

If facility admission date is less than 12 months ago then DOAFILL1 = Since you arrived at this facility

DEFINE DOAFILL2:

If facility admission date is at least 12 months ago then DOAFILL2 = during the past 12 months

If facility admission date is less than 12 months ago then DOAFILL2 = since you arrived at this facility

A7 [IF CALCTIME NE 0 DAYS] That means you have been here for about [CALCTIME]. Is that correct?

1 YES

2 NO

A8 [IF (A5c=DK OR REF) OR CALCTIME=0 DAYS OR A7 = 2] How long have you been in this facility?

INTERVIEWER: PROBE THOROUGHLY TO AVOID A DK OR REFUSE RESPONSE IF AT ALL POSSIBLE.

1 LESS THAN 1 WEEK

2 AT LEAST 1 WEEK BUT LESS THAN 1 MONTH

3 AT LEAST 1 MONTH BUT LESS THAN 2 MONTHS

4 AT LEAST 2 MONTHS BUT LESS THAN 6 MONTHS

5 AT LEAST 6 MONTHS BUT LESS THAN 1 YEAR

6 AT LEAST 1 YEAR BUT LESS THAN 5 YEARS

7 AT LEAST 5 YEARS BUT LESS THAN 10 YEARS

8 10 YEARS OR MORE

DK/REF

UPDATE DOAFILL1:

IF A8 = 1 – 5 THEN DOAFILL1 = Since you arrived at this facility

IF A8 = 6 – 8 OR DK OR REF, THEN DOAFILL1 = During the past 12 months

UPDATE DOAFILL2:

IF A8 = 1 – 5 THEN DOAFILL2 = since you arrived at this facility

IF A8 = 6 – 8 OR DK OR REF, THEN DOAFILL2 = during the past 12 months

RANDOMIZATION: PROGRAMMER, PLEASE IMPLEMENT RANDOMIZING ROUTINE 95/5.

A9a. Did you spend last night in disciplinary or administrative segregation, or solitary confinement?

1 YES

2 NO

DK/REF

A9b. [IF A9a = 1] How many days have you been in disciplinary or administrative segregation, or solitary confinement?

1 1 day or less

2 More than 1 day but less than 7 days

3 At least 7 days but less than 14 days

4 At least 14 days but less than 30 days

5 30 days or more

DK/REF

A9c. [IF A9a = 2 OR DK OR REF] Which of the following best describes the housing unit where you spent last night?

[IF A9a = 1] Which of the following best describes the housing unit in disciplinary or administrative segregation, or solitary confinement where you spent last night?

1 An open dorm

2 A dorm with cubicles

3 A unit with cells

4 A unit with rooms

5 An area not originally intended as housing, such as a gym, classroom, or day room

6 NONE OF THESE

DK/REF

A10. How tall are you?

Feet: _____

Inches: _____

DK/REF

COMPUTER TUTORIAL

- C1** [NO AUDIO REQUIRED] You will complete the rest of this interview on your own using the computer and headphones. Before you start, we'll go through a short practice session together so you can learn how to use this computer to answer the interview questions. After this introduction, I will move away from the computer and will not be able to see your answers so that you can take the interview in private.

You do not need the mouse or keyboard to answer questions. You can simply touch the buttons on the screen using your finger.

MOVE COMPUTER SO RESPONDENT CAN SEE THE SCREEN.

For each question, the answers will appear on the screen, like these yes and no answers. POINT TO YES AND NO ANSWERS ON SCREEN. When you have the headphones on you'll also hear instructions that will help you know where to touch the screen. To choose an answer you will need to use your finger to touch the button next to ~~for~~ your answer on the computer screen, like this.

PRESS **YES** BUTTON.


1 Yes

2 No

Don't Know

Refuse

Back Next



After you choose your answer, you must touch the **NEXT** button. TOUCH THE **NEXT** BUTTON.

- C2** [NO AUDIO REQUIRED] If you want to go back to the previous question, this is the **BACK** button. POINT TO **BACK** BUTTON.

Now I will show you how to use the back button to go back to the previous question and change the answer to no.

NOW DEMONSTRATE USE OF **BACK** BUTTON BY PRESSING IT TO GO BACK TO THE PREVIOUS SCREEN AND CHANGE YOUR ANSWER TO NO. THEN RETURN TO THIS SCREEN BY PRESSING **NEXT**.

If you don't know the answer to the question, touch the button next to **DON'T KNOW** [POINT TO DON'T KNOW] and then press **NEXT**. PRESS **DON'T KNOW** BUTTON AND THEN **NEXT**.

- C3** [NO AUDIO REQUIRED] If you don't want to answer the question, you can touch the button next to **REFUSE** [POINT TO THE **REFUSE** BUTTON] and then press **NEXT** to go to the next question. PRESS **REFUSE** BUTTON AND THEN **NEXT**.
- C4** [NO AUDIO REQUIRED] If you want the computer to read the question again, you can press the **AUDIO** button [POINT TO **AUDIO** BUTTON].
- C5** [NO AUDIO REQUIRED] You can adjust the volume here [DEMONSTRATE VOLUME ADJUSTMENT, ON THE HEADPHONE CORD]. Or if you want to turn the volume off you can adjust it on your headphones or take your headphones off.

Please put on your headphones. When you are ready, let me know.

MOVE COMPUTER SO RESPONDENT CAN USE IT. ONCE RESPONDENT HAS HEADPHONES ON, TOUCH THE **NEXT** BUTTON SO RESPONDENT CAN BEGIN PRACTICE SESSION.

PLAY AUDIO FOR ALL FOLLOWING SCREENS

- C6** This screen will play while you adjust the volume in your headphones. When you have adjusted the volume to a level that is comfortable to you, touch the **NEXT** button to continue with the practice session.
- C7** For the rest of this interview you will control the interview and answer in complete privacy. You can read the questions on the computer screen and hear them read through the headphones. Nobody, not even your interviewer will know how you answer the questions. [IF CALAGE = 16 OR 17] Because you are under 18 I want to remind you that if you speak to your interviewer about any abuse you have experienced at this facility the interviewer or his or her supervisor may need to report it to the agency in this state that investigates abuse.

First, you will learn how to use the system and complete some practice questions.

Touch the **NEXT** button on your screen.

- C8** After you hear the question, you will hear the possible answers. To answer the question, use your finger to touch the button on the screen next to your answer and then touch the **NEXT** button.

Do you like ice cream?

- 1 Yes
- 2 No
- Don't Know
- Refuse to Answer

- C10** For some questions you will enter your answer using a keypad like the one shown below. Try using the keypad to answer the question below. If you need to change your answer touch the "**X**" button in the lower right corner of the keypad to remove what you have already entered and then put in a new answer. After you answer the question, touch the **NEXT** button.

How many meals have you eaten today?



[RANGE: 0 – 999]

- C11** Sometimes there will be more than one question to answer on a screen like the example shown below. For these questions the answer choices and the **REFUSED** and **DON'T KNOW** buttons are shown to the right of each question. Try answering the questions below and then touch the **NEXT** button to go to the next screen.

Has a doctor or other health care provider **ever** told you that you are allergic to...

	Yes	No
C11a. Pollen?	1	2
C11b. Dust?	1	2
C11c. Mold?	1	2

DK/REF

- C14** If you have any questions, ask your interviewer now. If not, tell the interviewer you are ready to begin and he or she will move away from the computer.

Touch the **NEXT** button when you are ready to begin.

ACASI DEMOGRAPHICS**A11** Are you of Hispanic, Latino, or Spanish origin?

- 1 Yes
 2 No
 DK/REF

A13 Which of these categories describes your race?

You may answer yes to one or more of these categories.

	Yes	No
A13a. White?	1	2
A13b. Black or African American?	1	2
A13c. American Indian or Alaska Native?	1	2
A13d. Asian?	1	2
A13e. Native Hawaiian or other Pacific Islander?	1	2

DK/REF

A16 How much do you **currently** weigh in pounds?

CURRENT WEIGHT: _____ [RANGE: 50 – 700]

DK/REF

A17 Did you graduate from high school?

- 1 Yes
 2 No
 DK/REF

A18 [IF A17 = 1] Did you receive a high school diploma or a GED for finishing high school?

- 1 A high school Diploma
 2 A GED

DK/REF

A19 [If A17 = 2] Did you receive a GED?

- 1 Yes
 2 No
 DK/REF

A20 [IF A17 =1 OR A19 =1] What is the highest level of school you have completed?

- 1 High school or GED
 2 Some college but you did not receive a degree
 3 Associate Degree
 4 Bachelor's Degree
 5 An advanced degree such as a Master's, MBA, or PhD

DK/REF

A21 [IF A17 =2 AND A19 =2] Did you attend high school?

- 1 Yes
- 2 No
- DK/REF

V1. Have you **ever** served in the United States Armed Forces?

- 1 Yes
- 2 No
- DK/REF

V4 [IF V1 = 1] Are you **currently** serving in the United States Armed Forces?

- 1 Yes
- 2 No
- DK/REF

V8 [IF V4 = 2] What type of discharge did you receive from the United States Armed Forces?

- 1 Honorable
- 2 General under honorable conditions
- 3 Other than honorable
- 4 Bad conduct
- 5 Dishonorable
- 6 Some other type of discharge
- DK/REF

A22. Are you a U.S. citizen?

- 1 Yes
- 2 No
- DK/REF

CRIMINAL HISTORY

B0. These next questions are about your experience with crime and the criminal justice system.

Touch the **NEXT** button to go to the next screen.

B2. Altogether, how many times have you been arrested or taken into custody for any offense?

- 1 One time
- 2 2-3 times
- 3 4-10 times
- 4 11 times or more
- DK/REF

B3. Before you were admitted to this facility, had you **ever** spent time as an adult or juvenile in a prison, jail, or other correctional facility?

- 1 Yes
- 2 No
- DK/REF

B4. Are you **currently** in this facility because you have been sentenced to serve time for an offense?

- 1 Yes
- 2 No
- DK/REF

B5. [IF B4 = 2 OR DK OR REF] Are you **currently** being held in this facility for a property offense? Property offenses include crimes like burglary, larceny, theft, auto theft, bad checks, fraud, forgery, arson, or possession of stolen goods.

- 1 Yes
- 2 No
- DK/REF

B6. [IF B4 = 2 OR DK OR REF] Are you **currently** being held in this facility for a drug offense? Drug offenses include crimes like possessing, selling, trafficking, importing, smuggling, or manufacturing illegal drugs or drug paraphernalia.

- 1 Yes
- 2 No
- DK/REF

B7. [IF B4 = 2 OR DK OR REF] Are you **currently** being held in this facility for a violent offense? Violent offenses include crimes like physical or sexual assault, rape, robbery, manslaughter, murder, attempted murder, or kidnapping.

- 1 Yes
- 2 No
- DK/REF

B8. [IF B4 = 2 OR DK OR REF] Are you **currently** being held in this facility for other crimes against people? Other crimes against people include crimes like vehicular homicide, hit and run, reckless endangerment, child neglect, harassment, or stalking.

1 Yes
2 No
DK/REF

B9. [IF B4 = 2 OR DK OR REF] Are you **currently** being held in this facility for a sexual offense? Sexual offenses include crimes like rape, statutory rape, sexual assault, child molestation, child pornography, incest, or indecent exposure.

1 Yes
2 No
DK/REF

B10. [IF B4 = 2 OR DK OR REF] Are you **currently** being held in this facility for a probation, parole, or community supervision violation?

1 Yes
2 No
DK/REF

B28. [IF B4 = 2 OR DK OR REF] Are you **currently** being held in this facility for a weapons offense? Weapons offenses include things like possessing an illegal or stolen weapon, illegally discharging a firearm, using a weapon during the commission of a crime, or violating probation, parole, or community supervision by possessing a firearm.

1 Yes
2 No
DK/REF

B12. [IF B4 = 2 OR DK OR REF] Are you **currently** being held in this facility for driving under the influence or driving while intoxicated?

1 Yes
2 No
DK/REF

B11. [IF B4 = 2 OR DK OR REF] Are you **currently** being held in this facility for a procedural violation? Procedural violations include things like failure to appear in court, violating a restraining order, failure to obey a lawful order of a police officer, contempt, escape, resisting arrest without violence, or a regulatory or tax offense.

1 Yes
2 No
DK/REF

B13. [IF B4 = 2 OR DK OR REF] Are you **currently** being held in this facility for some other offense? Other offenses include crimes like loitering, prostitution, gambling, drunkenness, disorderly conduct, trespassing, minor traffic violations, or immigration violations.

1 Yes
2 No
DK/REF

- B14.** [IF B4 = 1] Are you **currently** sentenced and serving time in this facility for a property offense? Property offenses include crimes like burglary, larceny, theft, auto theft, bad checks, fraud, forgery, arson, or possession of stolen goods.
- 1 Yes
2 No
DK/REF
- B15.** [IF B4 = 1] Are you **currently** sentenced and serving time in this facility for a drug offense? Drug offenses include crimes like possessing, selling, trafficking, importing, smuggling, or manufacturing illegal drugs or drug paraphernalia.
- 1 Yes
2 No
DK/REF
- B16.** [IF B4 = 1] Are you **currently** sentenced and serving time in this facility for a violent offense? Violent offenses include crimes like physical or sexual assault, rape, robbery, manslaughter, murder, attempted murder, or kidnapping.
- 1 Yes
2 No
DK/REF
- B17.** [IF B4 = 1] Are you **currently** sentenced and serving time in this facility for other crimes against people? Other crimes against people include crimes like vehicular homicide, hit and run, reckless endangerment, child neglect, harassment, or stalking.
- 1 Yes
2 No
DK/REF
- B18.** [IF B4 = 1] Are you **currently** sentenced and serving time in this facility for a sexual offense? Sexual offenses include crimes like rape, statutory rape, sexual assault, child molestation, child pornography, incest, or indecent exposure.
- 1 Yes
2 No
DK/REF
- B19.** [IF B4 = 1] Are you **currently** sentenced and serving time in this facility for a probation, parole, or community supervision violation?
- 1 Yes
2 No
DK/REF
- B29.** [IF B4 = 1] Are you **currently** sentenced and serving time in this facility for a weapons offense? Weapons offenses include things like possessing an illegal or stolen weapon, illegally discharging a firearm, using a weapon during the commission of a crime, or violating probation, parole, or community supervision by possessing a firearm.
- 1 Yes
2 No
DK/REF

- B21.** [IF B4 = 1] Are you **currently** sentenced and serving time in this facility for driving under the influence or driving while intoxicated?
- 1 Yes
2 No
DK/REF
- B20.** [IF B4 = 1] Are you **currently** sentenced and serving time in this facility for a procedural violation? Procedural violations include things like failure to appear in court, violating a restraining order, failure to obey a lawful order of a police officer, contempt, escape, resisting arrest without violence, or a regulatory or tax offense.
- 1 Yes
2 No
DK/REF
- B22.** [IF B4 = 1] Are you **currently** sentenced and serving time in this facility for some other offense? Other offenses include crimes like loitering, prostitution, gambling, drunkenness, disorderly conduct, trespassing, minor traffic violations, or immigration violations.
- 1 Yes
2 No
DK/REF
- B23.** [IF B4 = 1 OR DK OR REF] Are you **currently** serving a life sentence or a life sentence without parole?
- 1 Yes
2 No
DK/REF
- B24.** [IF B23 = 2 OR DK OR REF] Are you **currently** serving a death sentence?
- 1 Yes
2 No
DK/REF
- B25.** [IF B24 = 2 OR DK OR REF] What is your total maximum sentence length for all of the sentences you are serving?
- 1 Less than 1 year
2 At least 1 year but less than 5 years
3 At least 5 years but less than 10 years
4 At least 10 years but less than 20 years
5 20 years or more
DK/REF

SEXUAL IDENTITY AND PRE-INCARCERATION INFORMATION

D1 Are you **currently** married, widowed, divorced or separated, or have you never married?

- 1 Married
- 2 Widowed
- 3 Divorced
- 4 Separated (For reasons other than incarceration)
- 5 Never married
- DK/REF

D2a [IF GENDER = 1] Which of the following best represents how you think of yourself?

- 1 Straight; that is, **not** gay
- 2 Gay
- 3 Bisexual; that is, you are sexually attracted to both men and women
- 4 Something else
- DK/REF

D2b [IF GENDER = 2] Which of the following best represents how you think of yourself?

- 1 Straight; that is, **not** lesbian or gay
- 2 Lesbian or gay
- 3 Bisexual; that is, you are sexually attracted to both men and women
- 4 Something else
- DK/REF

D3a What sex was recorded on your original birth certificate?

- 1 Male
- 2 Female
- DK/REF

D3b Do you currently think of yourself as...?

- 1 Male
- 2 Female
- 3 Transgender
- 4 None of these
- DK/REF

DEFINE CURRSEX FILL

IF D3b = 1 THEN CURRSEX FILL = "describe yourself as male"

IF D3b = 2 THEN CURRSEX FILL = "describe yourself as female"

IF D3b = 3 THEN CURRSEX FILL = "describe yourself as transgender"

IF D3b = 4 THEN CURRSEX FILL = "do not describe yourself as male, female, or transgender"

DEFINE BIRTHSEX

IF D3a = 1 THEN BIRTHSEX = male

IF D3a = 2 THEN BIRTHSEX = female

ELSE BIRTHSEX = BLANK

D3c [IF (D3a = 1 AND D3b = 2 OR 3 OR 4) OR (D3a = 2 AND D3b = 1 OR 3 OR 4)] Just to confirm what you entered, [BIRTHSEX] was recorded on your original birth certificate and now you [CURRSEX FILL]. Is that correct?

- 1 Yes
- 2 No
- DK/REF

D3d [IF D3c = 2] Please answer this question again: What sex was recorded on your original birth certificate?

- 1 Male
- 2 Female
- DK/REF

D3e [IF D3c = 2] Please answer this question again: Do you **currently** think of yourself as male, female, or transgender?

- 1 Male
- 2 Female
- 3 Transgender
- 4 None of these
- DK/REF

DEFINE TRANSID

IF D3b = 3 AND D3e = BLANK THEN TRANSID = 1
IF D3b = 3 AND D3e = 3 THEN TRANSID = 1
IF D3b = 1 OR 2 OR 4 AND D3e = 3 THEN TRANSID = 1
ELSE TRANSID = 2

RANDOM = 95, CONTINUE TO D6

RANDOM = 5, SKIP TO FH_1

D6 [IF GENDER = 2] **Before you entered this facility**, had anyone **ever** physically forced you to have sex or sexual contact – that is unwanted touching of the breasts, genitals, or butt, or vaginal, oral, or anal sex?

[IF GENDER = 1] **Before you entered this facility**, had anyone **ever** physically forced you to have sex or sexual contact – that is unwanted touching of the genitals or butt, or vaginal, oral, or anal sex?

1 Yes
2 No
DK/REF

D7 [IF GENDER=2] **Before you entered this facility**, had anyone **ever** pressured you or made you feel you had to have sex or sexual contact – that is unwanted touching of the breasts, genitals, or butt, or vaginal, oral, or anal sex?

[IF GENDER = 1] **Before you entered this facility**, had anyone **ever** pressured you or made you feel you had to have sex or sexual contact – that is unwanted touching of the genitals or butt, or vaginal, oral, or anal sex?

1 Yes
2 No
DK/REF

DEFINE SECTYPE1:

IF D6 = 1 AND D7 NE 1, SECTYPE1 = “physically forced”

IF D6 NE 1 AND D7 =1, SECTYPE1 = “pressured or made to feel that you had”

IF D6 = 1 AND D7 = 1, SECTYPE1 = “physically forced, pressured, or made to feel that you had”

ELSE SECTYPE1 = BLANK

D8 [IF D6 =1 OR D7 = 1] How many times were you [SECTYPE1 FILL] to have sex or sexual contact before you entered this facility?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

D9 [IF D8 NE 1 AND SECTYPE1 NE BLANK AND CALCAGE = 18 OR OLDER] Were you [SECTYPE1 FILL] to have sex or sexual contact before you were 18 years old, after you turned 18, or both?

1 Before you were 18
2 After you turned 18
3 Both
DK/REF

D10 [IF D8 = 1 AND CALCAGE = 18 OR OLDER] Were you [SECTYPE1 FILL] to have sex or sexual contact before you were 18 years old?

1 Yes
2 No
DK/REF

D11 [IF (D6 = 1 OR D7 = 1) AND B3=1] **Before you entered this facility**, were you [SEXTYPE1 FILL] to have sex or sexual contact while you were an adult or juvenile in a jail, prison, or other correctional facility?

- 1 Yes
- 2 No
- DK/REF

RANDOM = 95, SKIP TO D16

RANDOM = 5, CONTINUE TO FH_1

FH_1 [IF RANDOM = 5] Is this the only facility you've been held in during your **current** incarceration?

- 1 Yes
- 2 No
- DK/REF

FH_2 [IF FH_1 = 2 OR DK OR REF] Including this one, how many **prisons** have you been held in during your **current** incarceration? Please do not include any jails you may have been held in before you were transferred to prison.

NUMBER OF PRISONS: _____ [RANGE: 1 – 15]
DK/REF

D12 Now think about the **6 months** before you were incarcerated.

During the **6 months** before you were incarcerated, did you live for **most of the time**...

- 1 In your own house or apartment, meaning your name was on the title, mortgage, or lease
- 2 In someone else's house or apartment, including your parents' place
- 3 In a residential treatment facility
- 4 In a transitional housing facility or halfway house
- 5 In a shelter
- 6 On the street or you were homeless
- 7 In no set place or you moved around a lot
- 8 In some other place or situation

DK/REF

D13 Have you **ever** had a job working for pay?

- 1 Yes
- 2 No
- DK/REF

D14 At any point during the **6 months** before you were incarcerated, did you have a job where you worked for pay?

- 1 Yes
- 2 No
- DK/REF

D15 How did you support yourself during the **6 months** before you were incarcerated?

	Yes	No
D15a A job?	1	2
D15b Support from your family?	1	2
D15c Support from your friends?	1	2
D15d A government program or public assistance?	1	2
D15e Illegal income?	1	2
D15f Some other type of support?	1	2

DK/REF

D16 [IF RANDOM = 5] Still thinking about the **6 months** before you were incarcerated, had anyone you were **living with** at that time ever been in jail, prison, or some other correctional institution?

[IF RANDOM = 95] Now think about the **6 months** before you were incarcerated. Had anyone you were **living with** at that time ever been in jail, prison, or some other correctional institution?

1 Yes

2 No

DK/REF

D17 **At the time you became incarcerated**, how many children under the age of 18 did you have? Please count all children that you consider yourself to be a parent of.

NUMBER OF CHILDREN: _____ [RANGE 0-25]

DK/REF

D18 [IF D17 > 0] During the **6 months** before you were incarcerated, how many of those [D17_FILL] children lived with you?

CHILDREN LIVED WITH R: _____ [RANGE 0-25]

DK/REF

D19 Have any of your parents or guardians **ever** been incarcerated in a prison or jail?

1 Yes

2 No

DK/REF

D20 [IF D19 = 1] Are any of your parents or guardians **currently** incarcerated in a prison or jail?

1 Yes

2 No

DK/REF

D21 Have any of your brothers or sisters **ever** been incarcerated in a prison or jail?

1 Yes

2 No

3 I do not have any brothers or sisters

DK/REF

D22 [IF D21 = 1] Are any of your brothers or sisters **currently** incarcerated in a prison or jail?

1 Yes

2 No

DK/REF

D23 Think about the people you considered to be your closest friends before you were incarcerated. Had any of those close friends **ever** been incarcerated in a prison or jail?

- 1 Yes
- 2 No
- DK/REF

D24 [IF D23 = 1] Are any of those close friends **currently** incarcerated in a prison or jail?

- 1 Yes
- 2 No
- DK/REF

RANDOM = 5, SKIP TO CHILDHOOD EXPERIENCES

RANDOM = 95, CONTINUE TO SEXUAL ACTIVITIES WITH INMATES

SEXUAL ACTIVITY WITH INMATES

E1 These next questions are about both wanted and unwanted sex or sexual contact you have had with other inmates in this facility **DOAFILL2**.

Touch the **NEXT** button to go to the next screen.

	Males		Females
E2	<p>[IF GENDER = 1] DOAFILL1, have you been touched on your butt, thighs, or penis in a sexual way by another inmate?</p> <p>1 Yes 2 No DK/REF</p>	E2	<p>[IF GENDER = 2] DOAFILL1, have you been touched on your butt, thighs, breasts, or vagina in a sexual way by another inmate?</p> <p>1 Yes 2 No DK/REF</p>
E6	<p>[IF GENDER = 1] DOAFILL1, have you given or received a handjob? A 'handjob' is when someone's penis is rubbed by somebody else.</p> <p>1 Yes 2 No DK/REF</p>		
E8	<p>[IF GENDER = 1] DOAFILL1, have you given or received oral sex or a blowjob? Oral sex, or a blowjob, is when one inmate puts their mouth on the penis or butt of another inmate.</p> <p>1 Yes 2 No DK/REF</p>	E8	<p>[IF GENDER = 2] DOAFILL1, have you given or received oral sex? Oral sex is when one inmate puts their mouth on the vagina or butt of another inmate.</p> <p>1 Yes 2 No DK/REF</p>
		E10	<p>[IF GENDER = 2] DOAFILL1, have you had vaginal sex? Vaginal sex is when one inmate inserts their finger or an object into another inmate's vagina.</p> <p>1 Yes 2 No DK/REF</p>
E12	<p>[IF GENDER = 1] DOAFILL1, have you had anal sex? Anal sex is when one inmate inserts their finger, penis, or an object into another inmate's butt.</p> <p>1 Yes 2 No DK/REF</p>	E12	<p>[IF GENDER = 2] DOAFILL1, have you had anal sex? Anal sex is when one inmate inserts their finger or an object into another inmate's butt.</p> <p>1 Yes 2 No DK/REF</p>

<p>E14 [IF GENDER = 1] DOAFILL1, have you had any type of sex or sexual contact with another inmate other than sexual touching, handjobs, oral sex or blowjobs, or anal sex?</p> <p>1 Yes 2 No</p> <p>DK/REF</p>	<p>E14 [IF GENDER = 2] DOAFILL1, have you had any type of sex or sexual contact with another inmate other than sexual touching, oral sex, vaginal sex, or anal sex?</p> <p>1 Yes 2 No</p> <p>DK/REF</p>
<p>E15 [IF E2 = 1 OR E6 = 1 OR E8 = 1 OR E12 = 1 OR E14 = 1] These next questions are only about unwanted sex or sexual contact.</p> <p>Touch the NEXT button to go to the next screen.</p>	<p>E15 [IF E2 = 1 OR E8 = 1 OR E10 = 1 OR E12 = 1 OR E14 = 1] These next questions are only about unwanted sex or sexual contact.</p> <p>Touch the NEXT button to go to the next screen.</p>
<p>E16 [IF E2=1] DOAFILL1, did another inmate use physical force to touch your butt, thighs, or penis in a sexual way?</p> <p>1 Yes 2 No DK/REF</p> <p>E17 [IF E2 = 1] DOAFILL1, did another inmate, without using physical force, pressure you or make you feel that you had to let them touch your butt, thighs, or penis in a sexual way?</p> <p>1 Yes 2 No DK/REF</p>	
	<p>E18 [IF E2=1] DOAFILL1, did another inmate use physical force to touch your butt, thighs, breasts, or vagina in a sexual way?</p> <p>1 Yes 2 No DK/REF</p> <p>E19 [IF E2 = 1] DOAFILL1, did another inmate, without using physical force, pressure you or make you feel that you had to let them touch your butt, thighs, breasts, or vagina in a sexual way?</p> <p>1 Yes 2 No DK/REF</p>
<p>E22 [IF E6 =1] DOAFILL1, did</p>	

<p>another inmate use physical force to make you give or receive a handjob?</p> <p>1 Yes 2 No DK/REF</p> <p>E23 [IF E6 = 1] DOAFILL1, did another inmate, without using physical force, pressure you or make you feel that you had to give or receive a handjob?</p> <p>1 Yes 2 No DK/REF</p>	
	<p>E24 [IF E8 = 1] DOAFILL1, did another inmate use physical force to make you give or receive oral sex?</p> <p>1 Yes 2 No DK/REF</p> <p>E25 [IF E8 = 1] DOAFILL1, did another inmate, without using physical force, pressure you or make you feel that you had to give or receive oral sex?</p> <p>1 Yes 2 No DK/REF</p>
<p>E26 [IF E8 = 1] DOAFILL1, did another inmate use physical force to make you give or receive oral sex or a blowjob?</p> <p>1 Yes 2 No DK/REF</p> <p>E27 [IF E8 = 1] DOAFILL1, did another inmate, without using physical force, pressure you or make you feel that you had to give or receive oral sex or a blowjob?</p> <p>1 Yes 2 No DK/REF</p>	
	<p>E28 [IF E10 = 1] DOAFILL1, did another inmate use physical force to make you have vaginal sex?</p> <p>1 Yes</p>

			<p>2 No DK/REF</p> <p>E29</p> <p>[IF E10 = 1] DOAFILL1, did another inmate, without using physical force, pressure you or make you feel that you had to have vaginal sex?</p> <p>1 Yes 2 No DK/REF</p>
E32	[IF E12 = 1] DOAFILL1 , did another inmate use physical force to make you have anal sex?	E32	[IF E12 = 1] DOAFILL1 , did another inmate use physical force to make you have anal sex?
	<p>1 Yes 2 No DK/REF</p>		<p>1 Yes 2 No DK/REF</p>
E33	[IF E12 = 1] DOAFILL1 , did another inmate, without using physical force, pressure you or make you feel that you had to have anal sex?	E33	[IF E12 = 1] DOAFILL1 , did another inmate, without using physical force, pressure you or make you feel that you had to have anal sex?
	<p>1 Yes 2 No DK/REF</p>		<p>1 Yes 2 No DK/REF</p>
E34	[IF E14 = 1] DOAFILL1 , did another inmate use physical force to make you have any type of sex or sexual contact other than sexual touching, handjobs, oral sex or blowjobs, or anal sex?	E34	[IF E14 = 1] DOAFILL1 , did another inmate use physical force to make you have any type of sex or sexual contact other than sexual touching, oral sex, vaginal sex, or anal sex?
	<p>1 Yes 2 No DK/REF</p>		<p>1 Yes 2 No DK/REF</p>
E35	[IF E14 = 1] DOAFILL1 , did another inmate, without using physical force, pressure you or make you feel that you had to have any type of sex or sexual contact other than sexual touching, handjobs, oral sex or blowjobs, or anal sex?	E35	[IF E14 = 1] DOAFILL1 , did another inmate, without using physical force, pressure you or make you feel that you had to have any type of sex or sexual contact other than sexual touching, oral sex, vaginal sex, or anal sex?
	<p>1 Yes 2 No DK/REF</p>		<p>1 Yes 2 No DK/REF</p>

DEFINE forced:

If at least one of (E16, E18, E22, E24, E26, E28, E32, E34) is YES,
 then forced = YES
 else forced = NO

DEFINE pressured:

If at least one of (E17, E19, E23, E25, E27, E29, E33, E35) is YES,
 then pressured = YES
 else pressured = NO

DEFINE ForcedOrPressuredFill2:

If forced = YES AND pressured = NO
 then forcedOrPressuredFill2 = “physically forced to”
 Else if forced = NO AND pressured = YES
 then forcedOrPressuredFill2 = “pressured or made to feel that you had to”
 Else if forced = YES AND pressured = YES
 then forcedOrPressuredFill2 = “physically forced, pressured, or made to feel that you had to”
 Else
 forcedOrPressuredFill2 = “????”

Note that if forced and pressured are both NO, the fill won't be used so it doesn't matter what it is.

E36 [IF GENDER = 1 AND (E22 = 1 OR E23 = 1 OR E26 = 1 OR E27 = 1 OR E32 = 1 OR E33 = 1)]
DOAFILL1, how many times altogether were you [ForcedOrPressuredFill2]:

- [IF E22 OR E23 = 1] Give or receive a handjob,
- [IF E26 OR E27 = 1] Give or receive oral sex or a blowjob, or
- [IF E32 OR E33 = 1] Have anal sex?

1 1 time
 2 2 times
 3 3 – 10 times
 4 11 times or more
 DK/REF

PROGRAMMER: DEPENDING ON THE NUMBER OF BEHAVIORS ENDORSED, PLEASE INCORPORATE THIS PUNCTUATION:

- 1 ITEM – END WITH ?
- 2 ITEMS – 1ST ITEM END WITH or; 2ND ITEM END WITH ?
- 3 ITEMS – 1ST ITEM END WITH , ; 2ND ITEM END WITH , or; 3RD ITEM END WITH ?

E36a [IF E36 = 3] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2]:

- [IF E22 OR E23 = 1] Give or receive a handjob,
- [IF E26 OR E27 = 1] Give or receive oral sex or a blowjob, or
- [IF E32 OR E33 = 1] Have anal sex?

- 1 3 times
- 2 4 times
- 3 5 times
- 4 6 times
- 5 7 times
- 6 8 times
- 7 9 times
- 8 10 times
- DK/REF

PROGRAMMER: DEPENDING ON THE NUMBER OF BEHAVIORS ENDORSED, PLEASE INCORPORATE THIS PUNCTUATION:

- 1 ITEM – END WITH ?
- 2 ITEMS – 1ST ITEM END WITH or; 2ND ITEM END WITH ?
- 3 ITEMS – 1ST ITEM END WITH , ; 2ND ITEM END WITH , or; 3RD ITEM END WITH ?

E36b [IF E36 = 4] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2]:

- [IF E22 OR E23 = 1] Give or receive a handjob,
- [IF E26 OR E27 = 1] Give or receive oral sex or a blowjob, or
- [IF E32 OR E33 = 1] Have anal sex?

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
DK/REF

PROGRAMMER: DEPENDING ON THE NUMBER OF BEHAVIORS ENDORSED, PLEASE INCORPORATE THIS PUNCTUATION:

- 1 ITEM – END WITH ?
- 2 ITEMS – 1ST ITEM END WITH or; 2ND ITEM END WITH ?
- 3 ITEMS – 1ST ITEM END WITH , ; 2ND ITEM END WITH , or; 3RD ITEM END WITH ?

E37 [IF GENDER = 2 AND (E24 = 1 OR E25 = 1 OR E28 = 1 OR E29 = 1 OR E32 = 1 OR E33 = 1)]
DOAFILL1, how many times altogether were you [ForcedOrPressuredFill2]:

- [IF E24 OR E25 = 1] Give or receive oral sex,
- [IF E28 OR E29 = 1] Have vaginal sex, or
- [IF E32 OR E33 = 1] Have anal sex?

- 1 1 time
- 2 2 times
- 3 3 – 10 times
- 4 11 times or more
- DK/REF

PROGRAMMER: DEPENDING ON THE NUMBER OF BEHAVIORS ENDORSED, PLEASE INCORPORATE THIS PUNCTUATION:

- 1 ITEM – END WITH ?
- 2 ITEMS – 1ST ITEM END WITH or; 2ND ITEM END WITH ?
- 3 ITEMS – 1ST ITEM END WITH , ; 2ND ITEM END WITH , or; 3RD ITEM END WITH ?

E37a [IF E37 = 3] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2]:

- [IF E24 OR E25 = 1] Give or receive oral sex,
- [IF E28 OR E29 = 1] Have vaginal sex, or
- [IF E32 OR E33 = 1] Have anal sex?

1 3 times
 2 4 times
 3 5 times
 4 6 times
 5 7 times
 6 8 times
 7 9 times
 8 10 times
 DK/REF

PROGRAMMER: DEPENDING ON THE NUMBER OF BEHAVIORS ENDORSED, PLEASE INCORPORATE THIS PUNCTUATION:

- 1 ITEM – END WITH ?
- 2 ITEMS – 1ST ITEM END WITH or; 2ND ITEM END WITH ?
- 3 ITEMS – 1ST ITEM END WITH , ; 2ND ITEM END WITH , or; 3RD ITEM END WITH ?

E37b [IF E37 = 4] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2]:

- [IF E24 OR E25 = 1] Give or receive oral sex,
- [IF E28 OR E29 = 1] Have vaginal sex, or
- [IF E32 OR E33 = 1] Have anal sex?

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
 DK/REF

PROGRAMMER: DEPENDING ON THE NUMBER OF BEHAVIORS ENDORSED, PLEASE INCORPORATE THIS PUNCTUATION:

- 1 ITEM – END WITH ?
- 2 ITEMS – 1ST ITEM END WITH or; 2ND ITEM END WITH ?
- 3 ITEMS – 1ST ITEM END WITH , ; 2ND ITEM END WITH , or; 3RD ITEM END WITH ?

E38 [IF E16 = 1 OR E17 = 1] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2] let another inmate touch your butt, thighs, or penis in a sexual way?

1 1 time
 2 2 times
 3 3 – 10 times
 4 11 times or more
 DK/REF

E38a [IF E38 = 3] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2] let another inmate touch your butt, thighs, or penis in a sexual way?

- 1 3 times
 - 2 4 times
 - 3 5 times
 - 4 6 times
 - 5 7 times
 - 6 8 times
 - 7 9 times
 - 8 10 times
- DK/REF

E38b [IF E38 = 4] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2] let another inmate touch your butt, thighs, or penis in a sexual way?

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
DK/REF

E39 [IF E18 = 1 OR E19 = 1] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2] let another inmate touch your thighs, breasts, or vagina in a sexual way?

- 1 1 time
 - 2 2 times
 - 3 3 – 10 times
 - 4 11 times or more
- DK/REF

E39a [IF E39 = 3] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2] let another inmate touch your thighs, breasts, or vagina in a sexual way?

- 1 3 times
 - 2 4 times
 - 3 5 times
 - 4 6 times
 - 5 7 times
 - 6 8 times
 - 7 9 times
 - 8 10 times
- DK/REF

E39b [IF E39 = 4] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2] let another inmate touch your thighs, breasts, or vagina in a sexual way?

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
DK/REF

E40 [IF E36 > 1 OR E37 > 1] How soon after you arrived at this facility were you [ForcedOrPressuredFill2] have sex or sexual contact with another inmate for the **first time**?

[IF E36 = 1 OR E37 = 1] How soon after you arrived at this facility were you [ForcedOrPressuredFill2] have sex or sexual contact with another inmate?

- 1 Within the first 24 hours after you arrived here
 - 2 More than 24 hours but within your first 3 days here
 - 3 More than 3 days but within your first 30 days here
 - 4 More than 30 days but within your first 6 months here
 - 5 More than 6 months but within your first 12 months here
 - 6 More than 12 months after you arrived here
- DK/REF

LCM1 DOAFILL1, did another inmate use physical force, pressure you, or make you feel that you had to have any type of sex or sexual contact?

- 1 Yes
 - 2 No
- DK/REF

LCM2a How long has it been since another inmate in this facility used physical force, pressured you, or made you feel that you had to have any type of sex or sexual contact?

- 1 Within the past 7 days
 - 2 More than 7 days ago but within the past 30 days
 - 3 More than 30 days ago but within the past 12 months
 - 4 More than 12 months ago
 - 5 This has not happened to me at this facility
- DK/REF

<p>E162 [IF E2 = 2 AND E6 = 2 AND E8 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1, did another inmate use physical force to touch your butt, thighs, or penis in a sexual way?</p> <ol style="list-style-type: none"> 1 Yes 2 No <p>DK/REF</p> <p>E172 [IF E2 = 2 AND E6 = 2 AND E8 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1, did another inmate, without using physical force, pressure you or make you feel that you had to let them touch your butt, thighs, or penis in a sexual way?</p> <ol style="list-style-type: none"> 1 Yes 2 No <p>DK/REF</p>	
	<p>E182 [IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1</p>

	<p>OR 2 OR 3)] DOAFILL1, did another inmate use physical force to touch your butt, thighs, breasts, or vagina in a sexual way?</p> <p>1 Yes 2 No DK/REF</p> <p>E192</p> <p>[IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1, did another inmate, without using physical force, pressure you or make you feel that you had to let them touch your butt, thighs, breasts, or vagina in a sexual way?</p> <p>1 Yes 2 No DK/REF</p>
<p>E222</p> <p>[IF E2 = 2 AND E6 = 2 AND E8 = 2 AND AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1, did another inmate use physical force to make you give or receive a handjob?</p> <p>1 Yes 2 No DK/REF</p> <p>E232</p> <p>[IF E2 = 2 AND E6 = 2 AND E8 = 2 AND AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1, did another inmate, without using physical force, pressure you or make you feel that you had to give or receive a handjob?</p> <p>1 Yes 2 No DK/REF</p>	
	<p>E242</p> <p>[IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1, did another inmate use physical force to make you give or receive oral sex?</p> <p>1 Yes 2 No DK/REF</p>

	<p>E252 [IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1, did another inmate, without using physical force, pressure you or make you feel that you had to give or receive oral sex?</p> <p>1 Yes 2 No DK/REF</p>
<p>E262 [IF E2 = 2 AND E6 = 2 AND E8 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1, did another inmate use physical force to make you give or receive oral sex or a blowjob?</p> <p>1 Yes 2 No DK/REF</p> <p>E272 [IF E2 = 2 AND E6 = 2 AND E8 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1, did another inmate, without using physical force, pressure you or make you feel that you had to give or receive oral sex or a blowjob?</p> <p>1 Yes 2 No DK/REF</p>	
	<p>E282 [IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1, did another inmate use physical force to make you have vaginal sex?</p> <p>1 Yes 2 No DK/REF</p> <p>E292 [IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1, did another inmate, without using physical force, pressure you or make you feel that you had to have vaginal sex?</p> <p>1 Yes</p>

			2 No DK/REF
E322	[IF E2 = 2 AND E6 = 2 AND E8 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1 , did another inmate use physical force to make you have anal sex? 1 Yes 2 No DK/REF	E322	[IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1 , did another inmate use physical force to make you have anal sex? 1 Yes 2 No DK/REF
E332	[IF E2 = 2 AND E6 = 2 AND E8 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1 , did another inmate, without using physical force, pressure you or make you feel that you had to have anal sex? 1 Yes 2 No DK/REF	E332	[IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1 , did another inmate, without using physical force, pressure you or make you feel that you had to have anal sex? 1 Yes 2 No DK/REF
E342	[IF E2 = 2 AND E6 = 2 AND E8 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1 , did another inmate use physical force to make you have any type of sex or sexual contact other than sexual touching, handjobs, oral sex or blowjobs, or anal sex? 1 Yes 2 No DK/REF	E342	[IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1 , did another inmate use physical force to make you have any type of sex or sexual contact other than sexual touching, oral sex, vaginal sex, or anal sex? 1 Yes 2 No DK/REF
E352	[IF E2 = 2 AND E6 = 2 AND E8 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1 , did another inmate, without using physical force, pressure you or make you feel that you had to have any type of sex or sexual contact other than sexual touching, handjobs, oral sex or blowjobs, or anal sex? 1 Yes 2 No DK/REF	E352	[IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] DOAFILL1 , did another inmate, without using physical force, pressure you or make you feel that you had to have any type of sex or sexual contact other than sexual touching, oral sex, vaginal sex, or anal sex? 1 Yes 2 No DK/REF

UPDATE forced:

If at least one of (E162, E182, E222, E242, E262, E282, E322, E342) is YES,
 then forced = YES
 else forced = NO

UPDATE pressured:

If at least one of (E172, E192, E232, E252, E272, E292, E332, E352) is YES,
 then pressured = YES
 else pressured = NO

UPDATE ForcedOrPressuredFill2:

If forced = YES AND pressured = NO
 then forcedOrPressuredFill2 = "physically forced to"
 Else if forced = NO AND pressured = YES
 then forcedOrPressuredFill2 = "pressured or made to feel that you had to"
 Else if forced = YES AND pressured = YES
 then forcedOrPressuredFill2 = "physically forced, pressured, or made to feel that you had to"
 Else
 forcedOrPressuredFill2 = "???"

[Note that if forced and pressured are both NO, the fill won't be used so it doesn't matter what it is.]

E353 [IF GENDER = 1 AND (E222 = 1 OR E232 = 1 OR E262 = 1 OR E272 = 1 OR E322 = 1 OR E332 = 1)]
DOAFILL1, how many times altogether were you [ForcedOrPressuredFill2]:

- [IF E222 OR E232 = 1] Give or receive a handjob,
- [IF E262 OR E272 = 1] Give or receive oral sex or a blowjob, or
- [IF E322 OR E332 = 1] Have anal sex?

1 1 time
 2 2 times
 3 3 – 10 times
 4 11 times or more
 DK/REF

PROGRAMMER: DEPENDING ON THE NUMBER OF BEHAVIORS ENDORSED, PLEASE INCORPORATE THIS PUNCTUATION:

- 1 ITEM – END WITH ?
- 2 ITEMS – 1ST ITEM END WITH or; 2ND ITEM END WITH ?
- 3 ITEMS – 1ST ITEM END WITH , ; 2ND ITEM END WITH , or; 3RD ITEM END WITH ?

E354 [IF E353 = 3] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2]:

- [IF E222 OR E232 = 1] Give or receive a handjob,
- [IF E262 OR E272 = 1] Give or receive oral sex or a blowjob, or
- [IF E322 OR E332 = 1] Have anal sex?

1 3 times
 2 4 times
 3 5 times
 4 6 times
 5 7 times
 6 8 times
 7 9 times
 8 10 times
 DK/REF

PROGRAMMER: DEPENDING ON THE NUMBER OF BEHAVIORS ENDORSED, PLEASE INCORPORATE THIS PUNCTUATION:

- 1 ITEM – END WITH ?
- 2 ITEMS – 1ST ITEM END WITH or; 2ND ITEM END WITH ?
- 3 ITEMS – 1ST ITEM END WITH , ; 2ND ITEM END WITH , or; 3RD ITEM END WITH ?

E355 [IF E353 = 4] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2]:

- [IF E222 OR E232 = 1] Give or receive a handjob,
- [IF E262 OR E272 = 1] Give or receive oral sex or a blowjob, or
- [IF E322 OR E332 = 1] Have anal sex?

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
DK/REF

PROGRAMMER: DEPENDING ON THE NUMBER OF BEHAVIORS ENDORSED, PLEASE INCORPORATE THIS PUNCTUATION:

- 1 ITEM – END WITH ?
- 2 ITEMS – 1ST ITEM END WITH or; 2ND ITEM END WITH ?
- 3 ITEMS – 1ST ITEM END WITH , ; 2ND ITEM END WITH , or; 3RD ITEM END WITH ?

E356 [IF GENDER = 2 AND (E242 = 1 OR E252 = 1 OR E282 = 1 OR E292 = 1 OR E322 = 1 OR E332 = 1)] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2]:

- [IF E242 OR E252 = 1] Give or receive oral sex,
- [IF E282 OR E292 = 1] Have vaginal sex, or
- [IF E322 OR E332 = 1] Have anal sex?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

PROGRAMMER: DEPENDING ON THE NUMBER OF BEHAVIORS ENDORSED, PLEASE INCORPORATE THIS PUNCTUATION:

- 1 ITEM – END WITH ?
- 2 ITEMS – 1ST ITEM END WITH or; 2ND ITEM END WITH ?
- 3 ITEMS – 1ST ITEM END WITH , ; 2ND ITEM END WITH , or; 3RD ITEM END WITH ?

E357 [IF E356 = 3] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2]:

- [IF E242 OR E252 = 1] Give or receive oral sex,
- [IF E282 OR E292 = 1] Have vaginal sex, or
- [IF E322 OR E332 = 1] Have anal sex?

- 1 3 times
- 2 4 times
- 3 5 times
- 4 6 times
- 5 7 times
- 6 8 times
- 7 9 times
- 8 10 times
- DK/REF

PROGRAMMER: DEPENDING ON THE NUMBER OF BEHAVIORS ENDORSED, PLEASE INCORPORATE THIS PUNCTUATION:

- 1 ITEM – END WITH ?
- 2 ITEMS – 1ST ITEM END WITH or; 2ND ITEM END WITH ?
- 3 ITEMS – 1ST ITEM END WITH , ; 2ND ITEM END WITH , or; 3RD ITEM END WITH ?

E358 [IF E356 = 4] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2]:

- [IF E242 OR E252 = 1] Give or receive oral sex,
- [IF E282 OR E292 = 1] Have vaginal sex, or
- [IF E322 OR E332 = 1] Have anal sex?

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
DK/REF

PROGRAMMER: DEPENDING ON THE NUMBER OF BEHAVIORS ENDORSED, PLEASE INCORPORATE THIS PUNCTUATION:

- 1 ITEM – END WITH ?
- 2 ITEMS – 1ST ITEM END WITH or; 2ND ITEM END WITH ?
- 3 ITEMS – 1ST ITEM END WITH , ; 2ND ITEM END WITH , or; 3RD ITEM END WITH ?

E359 [IF E162 = 1 OR E172 = 1] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2] let another inmate touch your butt, thighs, or penis in a sexual way?

- 1 1 time
- 2 2 times
- 3 3 – 10 times
- 4 11 times or more
- DK/REF

E360 [IF E359 = 3] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2] let another inmate touch your butt, thighs, or penis in a sexual way?

- 1 3 times
- 2 4 times
- 3 5 times
- 4 6 times
- 5 7 times
- 6 8 times
- 7 9 times
- 8 10 times

DK/REF

E361 [IF E359 = 4] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2] let another inmate touch your butt, thighs, or penis in a sexual way?

NUMBER OF TIMES: _____ [RANGE: 11 – 300]

DK/REF

E362 [IF E182 = 1 OR E192 = 1] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2] let another inmate touch your butt, thighs, breasts, or vagina in a sexual way?

- 1 1 time
- 2 2 times
- 3 3 – 10 times
- 4 11 times or more

DK/REF

E363 [IF E362 = 3] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2] let another inmate touch your butt, thighs, breasts, or vagina in a sexual way?

- 1 3 times
- 2 4 times
- 3 5 times
- 4 6 times
- 5 7 times
- 6 8 times
- 7 9 times
- 8 10 times

DK/REF

E364 [IF E362 = 4] **DOAFILL1**, how many times altogether were you [ForcedOrPressuredFill2] let another inmate touch your butt, thighs, breasts, or vagina in a sexual way?

NUMBER OF TIMES: _____ [RANGE: 11 – 300]

DK/REF

E365 [IF E353 > 1 OR E356 > 1] How soon after you arrived at this facility were you [ForcedOrPressuredFill2] have sex or sexual contact with another inmate for the **first time**?

[IF E353 = 1 OR E356 = 1] How soon after you arrived at this facility were you [ForcedOrPressuredFill2] have sex or sexual contact with another inmate?

- 1 Within the first 24 hours after you arrived here
- 2 More than 24 hours but within your first 3 days here
- 3 More than 3 days but within your first 30 days here
- 4 More than 30 days but within your first 6 months here
- 5 More than 6 months but within your first 12 months here
- 6 More than 12 months after you arrived here

DK/REF

DESCRIPTION OF NON-CONSENSUAL SEXUAL ACTS (NCSAs)**DEFINE NCSA:**

IF E16 = 1 OR E17 = 1 OR E18 = 1 OR E19 = 1 OR E22 = 1 OR E23 = 1 OR E24 = 1 OR E25 = 1
 OR E26 = 1 OR E27 = 1 OR E28 = 1 OR E29 = 1 OR E32 = 1 OR E33 = 1 OR E34 = 1 OR E35 = 1
 OR E162 = 1 OR E172 = 1 OR E182 = 1 OR E192 = 1 OR E222 = 1 OR E232 = 1 OR E242 = 1 OR
 E252 = 1 OR E262 = 1 OR E272 = 1 OR E282 = 1 OR E292 = 1 OR E322 = 1 OR E332 = 1 OR
 E342 = 1 OR E352 = 1 THEN NCSA = 1
 ELSE NCSA = 2

UPDATE forced:

If at least one of (E16, E18, E22, E24, E26, E28, E32, E34, E162, E182, E222, E242, E262, E282, E322, E342)
 is YES,
 then forced = YES
 else forced = NO

UPDATE pressured:

If at least one of (E17, E19, E23, E25, E27, E29, E33, E35, E172, E192, E232, E252, E272, E292, E332, E352)
 is YES,
 then pressured = YES
 else pressured = NO

UPDATE ForcedOrPressuredFill2:

If forced = YES AND pressured = NO
 then forcedOrPressuredFill2 = "physically forced"
 Else if forced = NO AND pressured = YES
 then forcedOrPressuredFill2 = "pressured or made to feel that you had"
 Else if forced = YES AND pressured = YES
 then forcedOrPressuredFill2 = "physically forced, pressured, or made to feel that you had"
 Else
 forcedOrPressuredFill2 = "???"

[Note that if forced and pressured are both NO, the fill won't be used so it doesn't matter what it is.]

DEFINE #NCSA1

IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 = 1 THEN #NCSA1 = did it
 IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 > 1 THEN #NCSA1 = did it **ever**
 IF ALL (E36, E37, E38, E39, E353, E356, E359, E362) = DK OR REF THEN #NCSA1 = did it **ever**

DEFINE #NCSA2

IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 = 1 THEN #NCSA2 = were you
 IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 > 1 THEN #NCSA2 = were you **ever**
 IF ALL (E36, E37, E38, E39, E353, E356, E359, E362) = DK OR REF THEN #NCSA2 = were you **ever**

DEFINE #NCSA3

IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 = 1 THEN #NCSA3 = was it
 IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 > 1 THEN #NCSA3 = was it **ever**
 IF ALL (E36, E37, E38, E39, E353, E356, E359, E362) = DK OR REF THEN #NCSA3 = was it **ever**

DEFINE #NCSA4

IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 = 1 THEN #NCSA4 = did you
 IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 > 1 THEN #NCSA4 = did you **ever**
 IF ALL (E36, E37, E38, E39, E353, E356, E359, E362) = DK OR REF THEN #NCSA4 = did you **ever**

DEFINE #NCSA5

IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 = 1 THEN #NCSA5 = why didn't you
 IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 > 1 THEN #NCSA5 = why didn't you **ever**
 IF ALL (E36, E37, E38, E39, E353, E356, E359, E362) = DK OR REF THEN #NCSA5 = why didn't you **ever**

F1 [IF NCSA = 1] **DOAFILL1**, when you were [ForcedOrPressuredFill2] have sex or sexual contact with another inmate, [#NCSA1 FILL] involve **more than one inmate**?

- 1 Yes
2 No
DK/REF

F6 [IF NCSA = 1] **DOAFILL1**, when you were [ForcedOrPressuredFill2] have sex or sexual contact with another inmate, [#NCSA2 FILL] ...

	Yes	No
F6a. Persuaded or talked into it?	1	2
F6b. Given a bribe?	1	2
F6c. Blackmailed?	1	2
F6d. Given drugs or alcohol to get you drunk or high?	1	2
F6e. Offered protection from other inmates?	1	2
F6f. Trying to pay off or settle a debt that you owed?	1	2
F6g. Threatened with harm?	1	2
F6h. Physically held down or restrained?	1	2
F6i. Physically harmed or injured?	1	2
F6j. Threatened with a weapon?	1	2

DK/REF

F8 [IF NCSA = 1] **DOAFILL1**, when you were [ForcedOrPressuredFill2] have sex or sexual contact with another inmate, [#NCSA3] initiated by a gang?

- 1 Yes
2 No
DK/REF

F9 [IF NCSA = 1] **DOAFILL1**, when you were [ForcedOrPressuredFill2] have sex or sexual contact with another inmate, [#NCSA2] injured?

- 1 Yes
2 No
DK/REF

F10 [IF F9 = 1] **DOAFILL1**, when you were [ForcedOrPressuredFill2] have sex or sexual contact with another inmate, [#NCSA4] ...

	Yes	No
F10a. Receive knife or stab wounds?	1	2
F10b. Receive broken bones?	1	2
F10c. [IF GENDER = 1] Have anal tearing? [IF GENDER = 2] Have anal or vaginal tearing?	1	2
F10d. Have your teeth chipped or knocked out?	1	2
F10e. Receive internal injuries?	1	2
F10f. Get knocked unconscious?	1	2
F10g. Receive bruises, a black eye, sprains, cuts, scratches, swelling, welts, or burns?	1	2

DK/REF

STAFF SEXUAL MISCONDUCT

G1 These next questions are about the behavior of staff at this facility **DOAFILL2**. By staff we mean the employees of this facility and anybody who works as a volunteer in this facility.

Touch the **NEXT** button to go to the next screen.

G4 **DOAFILL1**, have any facility staff pressured you or made you feel that you had to let them have sex or sexual contact with you?

1 Yes

2 No

DK/REF

G5 **DOAFILL1**, have you been physically forced by any facility staff to have sex or sexual contact?

1 Yes

2 No

DK/REF

DEFINE SEXTYPE2

IF G4 = 1 AND G5 = 1 THEN SEXTYPE2 = physically forced, pressured, or made to feel that you had to

IF G4 = 1 AND G5 NE 1 THEN SEXTYPE2 = pressured or made to feel that you had to

IF G4 NE 1 AND G5 = 1 THEN SEXTYPE2 = physically forced to

G6 [IF G4 = 1 OR G5 = 1] **DOAFILL1**, how many times were you [SEXTYPE2 FILL] have sex or sexual contact with any facility staff?

1 1 time

2 2 times

3 3 – 10 times

4 11 times or more

DK/REF

G6a. [IF G6 = 3] **DOAFILL1**, how many times were you [SEXTYPE2 FILL] have sex or sexual contact with any facility staff?

1 3 times

2 4 times

3 5 times

4 6 times

5 7 times

6 8 times

7 9 times

8 10 times

DK/REF

G6b. [IF G6 = 4] **DOAFILL1**, how many times were you [SEXTYPE2 FILL] have sex or sexual contact with any facility staff?

NUMBER OF TIMES: _____ [RANGE: 11 – 300]

DK/REF

G8 [IF (G4 = 1 OR G5 = 1) AND G6 > 1] How soon after you arrived at this facility were you [SEXTYPE2] have sex or sexual contact with facility staff for the **first time**?

[IF (G4 = 1 OR G5 = 1) AND G6 = 1] How soon after you arrived at this facility were you [SEXTYPE2] have sex or sexual contact with facility staff?

- 1 Within the first 24 hours after you arrived here
 - 2 More than 24 hours but within your first 3 days here
 - 3 More than 3 days but within your first 30 days here
 - 4 More than 30 days but within your first 6 months here
 - 5 More than 6 months but within your first 12 months here
 - 6 More than 12 months after you arrived here
- DK/REF

G7 **DOAFILL1**, have any facility staff offered you favors or special privileges in exchange for sex or sexual contact?

- 1 Yes
 - 2 No
- DK/REF

G2 **DOAFILL1**, have you **willingly** had sex or sexual contact with any facility staff?

- 1 Yes
 - 2 No
- DK/REF

G3 [IF G2 = 1] **DOAFILL1**, how many times have you **willingly** had sex or sexual contact with facility staff?

- 1 1 time
 - 2 2 times
 - 3 3 – 10 times
 - 4 11 times or more
- DK/REF

G3a [IF G3 = 3] **DOAFILL1**, how many times have you **willingly** had sex or sexual contact with any facility staff?

- 1 3 times
 - 2 4 times
 - 3 5 times
 - 4 6 times
 - 5 7 times
 - 6 8 times
 - 7 9 times
 - 8 10 times
- DK/REF

G3b [IF G3 = 4] **DOAFILL1**, how many times have you **willingly** had sex or sexual contact with any facility staff?

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
DK/REF

G9 [IF G4 = 1 OR G5 = 1] **DOAFILL1**, on any occasion when you were [SEXTYPE2 FILL] have sex or sexual contact with facility staff, did you report it to other facility staff?

- 1 Yes
2 No
DK/REF

G10 [IF G2 = 1 OR G4 = 1 OR G5 = 1] These next questions are about any sex or sexual contact you have had with facility staff **DOAFILL2**, whether you wanted to have it or not.

Touch the **NEXT** button to go to the next screen.

G11 [IF G2 = 1 OR G4 = 1 OR G5 = 1] **DOAFILL1**, which of the following types of sex or sexual contact did you have with a facility staff person?

	Yes	No
G11a. You touched a facility staff person's body or had your body touched in a sexual way?	1	2
G11b. You gave or received a handjob?	1	2
G11c. You gave or received oral sex or a blowjob?	1	2
G11d. You had vaginal sex? Vaginal sex is when one person inserts their penis, finger, or an object into another person's vagina.	1	2
G11e. You had anal sex? Anal sex is when one person inserts their penis, finger, or an object into another person's butt.	1	2

DK/REF

G12 [IF G2 = 1 OR G4 = 1 OR G5 = 1] **DOAFILL1**, when you had sex or sexual contact with facility staff, did it **ever** involve **more than one** facility staff person?

- 1 Yes
2 No
DK/REF

G17 [IF G2 = 1 OR G4 = 1 OR G5 = 1] **DOAFILL1**, when you had sex or sexual contact with facility staff were any of the following methods used to get you to participate?

	Yes	No
G17a. You were persuaded or talked into it?	1	2
G17b. You were given a bribe?	1	2
G17c. You were offered favors or special privileges?	1	2
G17d. You were blackmailed?	1	2
G17e. You were given drugs or alcohol to get you drunk or high?	1	2
G17f. You were offered protection from other inmates?	1	2
G17g. You were offered protection from another correctional officer?	1	2
G17h. You were trying to pay off or settle a debt that you owed?	1	2
G17i. You were threatened with harm?	1	2
G17j. You were physically held down or restrained?	1	2
G17k. You were physically harmed or injured?	1	2
G17l. You were threatened with a weapon?	1	2

DK/REF

G28. [IF G2 = 1 OR G4 = 1 OR G5 = 1] **DOAFILL1**, did you have sex or sexual contact with male facility staff, female facility staff, or both male and female facility staff?

- 1 Male facility staff
 - 2 Female facility staff
 - 3 Both male and female facility staff
- DK/REF

G29. [IF G28 = 1 OR 2] **DOAFILL1**, did you have sex or sexual contact with any...

	Yes	No
G29a. Correctional officers?	1	2
G29b. Other staff working in the facility?	1	2
G29c. Volunteers in the facility?	1	2

DK/REF

G31. [IF G28 = 3] **DOAFILL1**, did you have sex or sexual contact with any...

	Yes	No
G31a. Male correctional officers?	1	2
G31b. Female correctional officers?	1	2
G31c. Other male staff working in the facility?	1	2
G31d. Other female staff working in the facility?	1	2
G31e. Male volunteers in the facility?	1	2
G31f. Female volunteers in the facility?	1	2

DK/REF

G19 [IF G2 = 1 OR G4 = 1 OR G5 = 1] **DOAFILL1**, when you had sex or sexual contact with facility staff, were you **ever** injured?

- 1 Yes
 - 2 No
- DK/REF

G20 [IF G19 = 1] **DOAFILL1**, when you had sex or sexual contact with facility staff, did you **ever** ...

	Yes	No
G20a. Receive knife or stab wounds?	1	2
G20b. Receive broken bones?	1	2
G20c. [IF GENDER = 1] Have anal tearing? [IF GENDER = 2] Have anal or vaginal tearing?	1	2
G20d. Have your teeth chipped or knocked out?	1	2
G20e. Receive internal injuries?	1	2
G20f. Get knocked unconscious?	1	2
G20g. Receive bruises, a black eye, sprains, cuts, scratches, swelling, welts, or burns?	1	2

DK/REF

DEFINE RANDOMIZATION_INCIDENT

IF NCSA = 1 AND [G2 OR G5 = 1]: RANDOMIZATION_INCIDENT = 1
ELSE, RANDOMIZATION_INCIDENT = 2

IF RANDOMIZATION_INCIDENT = 1, INITIATE RANDOMIZATION TO DETERMINE WHETHER TO ADMINISTER MODULES DIR AND IIC OR MODULES DIRS AND SI

Note to Programmer: Randomization is 50/50 – half of RANDOMIZATION_INCIDENT = 1 cases should get the DIR and IIC modules and half should get DIRS and SI modules.

DETERMINATION OF SPECIFIC INCIDENT FOR INMATE INCIDENT REPORT**DEFINE NUMBER_OF_TIMES:**

IF E36=1 OR E353=1 OR E37=1 OR E356=1, NUMBER_OF_TIMES = "1 time"

IF E36=2 OR E353=2 OR E37=2 OR E356=2, NUMBER_OF_TIMES="2 times"

IF E36=3 OR E353=3 OR E37=3 OR E356 = 3, NUMBER_OF_TIMES="3 to 10 times"

IF E36=4 OR E353=4 OR E37=4 OR E356=4, NUMBER_OF_TIMES="11 times or more"

IF E36 = (DK OR REF) OR E353 = (DK OR REF) OR E37 = (DK OR REF) OR E356 = (DK OR REF),

NUMBER_OF_TIMES = NO FILL

ELSE NUMBER_OF_TIMES = MISSING

DEFINE NUMBER_OF_TIMES_TOUCH:

IF E38=1 OR E359=1 OR E39=1 OR E362=1, NUMBER_OF_TIMES_TOUCH = "1 time"

IF E38=2 OR E359=2 OR E39=2 OR E362=2, NUMBER_OF_TIMES_TOUCH="2 times"

IF E38=3 OR E359=3 OR E39=3 OR E362=3, NUMBER_OF_TIMES_TOUCH = "3 to 10 times"

IF E38=4 OR E359=4 OR E39=4 OR E362=4, NUMBER_OF_TIMES_TOUCH = "11 times or more"

IF E38 = (DK OR REF) OR E359 = (DK OR REF) OR E39 = (DK OR REF) OR E362 = (DK OR REF),

NUMBER_OF_TIMES_TOUCH = NO FILL

ELSE NUMBER_OF_TIMES_TOUCH = MISSING

DIR1 [IF NUMBER_OF_TIMES=1 time **AND** NUMBER_OF_TIMES_TOUCH IS MISSING] Earlier you reported that **DOAFILL2** you were [ForcedOrPressuredFill2] have sex or sexual contact with another inmate [NUMBER_OF_TIMES]. Please think about that experience as you answer the next questions.

Touch the **NEXT** button to go to the next screen.

DIR2 [IF NUMBER_OF_TIMES_TOUCH=1 time **AND** NUMBER_OF_TIMES IS MISSING]

[IF GENDER=1]: Earlier you reported that **DOAFILL2** you were [ForcedOrPressuredFill2] let another inmate touch your butt, thighs, or penis in a sexual way [NUMBER_OF_TIMES_TOUCH]. Please think about that experience as you answer the next questions.

Touch the **NEXT** button to go to the next screen.

[IF GENDER=2]: Earlier you reported that **DOAFILL2** you were [ForcedOrPressuredFill2] let another inmate touch your butt, thighs, breasts, or vagina in a sexual way [NUMBER_OF_TIMES_TOUCH]. Please think about that experience as you answer the next questions.

Touch the **NEXT** button to go to the next screen.

DIR3 [IF NUMBER_OF_TIMES >= 2 times **AND** NUMBER_OF_TIMES_TOUCH IS MISSING]—Earlier you reported that **DOAFILL2** you were [ForcedOrPressuredFill2] have sex or sexual contact with another inmate [NUMBER_OF_TIMES].

[IF only one of ((E22=1 OR E23=1), (E24=1 OR E25=1), (E26=1 OR E27=1), (E28=1 OR E29=1), (E32=1 OR E33=1), (E222=1 OR E232=1), (E242=1 OR E252=1), (E262=1 OR E272=1), (E282=1 OR E292=1), (E322=1 OR E332=1)) is true]: As you answer the next questions, please think about the **most recent** time you were [ForcedOrPressuredFill2] have sex or sexual contact with another inmate.

Touch the **NEXT** button to go to the next screen.

[IF at least two of ((E22=1 OR E23=1), (E24=1 OR E25=1), (E26=1 OR E27=1), (E28=1 OR E29=1), (E32=1 OR E33=1), (E222=1 OR E232=1), (E242=1 OR E252=1), (E262=1 OR E272=1), (E282=1 OR E292=1), (E322=1 OR E332=1)) are true]: Think about the **most recent** time this happened to you. What were you [ForcedOrPressuredFill2] do?

	Yes	No
DIR3a. [IF E22=1 OR E23=1 OR E222=1 OR E232=1] Give or receive a hand job?	1	2
DIR3b. [IF E26=1 OR E27=1 OR E262=1 OR E272=1] Give or receive oral sex or a blowjob?	1	2
DIR3c. [IF E24=1 OR E25=1 OR E242=1 OR E252=1] Give or receive oral sex?	1	2
DIR3d. [IF E28=1 OR E29=1 OR E282=1 OR E292=1] Have vaginal sex?	1	2
DIR3e. [IF E32=1 OR E33=1 OR E322=1 OR E332=1] Have anal sex?	1	2

DK/REF

As you answer the next questions please think about the **most recent** time you were [ForcedOrPressuredFill2] have sex or sexual contact with another inmate.

Touch the **NEXT** button to go to the next screen.

DIR4 [IF NUMBER_OF_TIMES_TOUCH >=2 times **AND** NUMBER_OF_TIMES IS MISSING

[IF GENDER = 1]: Earlier you reported that **DOAFILL2** you were [ForcedOrPressuredFill2] let another inmate touch your butt, thighs, or penis in a sexual way [NUMBER_OF_TIMES_TOUCH].

Think about the **most recent** time this happened to you as you answer the next questions.

Touch the **NEXT** button to go to the next screen.

[IF GENDER = 2]: Earlier you reported that **DOAFILL2** you were [ForcedOrPressuredFill2] let another inmate touch your butt, thighs, breasts, or vagina in a sexual way [NUMBER_OF_TIMES_TOUCH].

Think about the **most recent** time this happened to you as you answer the next questions.

Touch the **NEXT** button to go to the next screen.

DIR5 [IF (NUMBER_OF_TIMES >=1 time OR DK OR REF) **AND** (NUMBER_OF_TIMES_TOUCH >=1 time OR DK OR REF)]

[IF GENDER = 1]: Earlier you reported that **DOAFILL2** you were [ForcedOrPressuredFill2] have sex or sexual contact with another inmate **and** that you were [ForcedOrPressuredFill2] let another inmate touch your butt, thighs, or penis in a sexual way.

[IF GENDER = 2]: Earlier you reported that **DOAFILL2** you were [ForcedOrPressuredFill2] have sex or sexual contact with another inmate **and** that you were [ForcedOrPressuredFill2] let another inmate touch your butt, thighs, breasts, or vagina in a sexual way.

Think about the **most recent** time this happened to you. What were you [ForcedOrPressuredFill2] do?

	Yes	No
DIR5a. [IF E22=1 OR E23=1 OR E222=1 OR E232=1] Give or receive a hand job?	1	2
DIR5b. [IF E26=1 OR E27=1 OR E262=1 OR E272=1] Give or receive oral sex or a blowjob?	1	2
DIR5c. [IF E24=1 OR E25=1 OR E242=1 OR E252=1] Give or receive oral sex?	1	2
DIR5d. [IFE28=1 OR E29=1 OR E282=1 OR E292=1] Have vaginal sex?	1	2
DIR5e. [IF E32=1 OR E33=1 OR E322=1 OR E332=1] Have anal sex?	1	2
DIR5f. [IF E16=1 OR E17=1 OR E162=1 OR E172=1] Be touched on your butt, thighs, or penis in a sexual way?	1	2
DIR5g. [IF E18=1 OR E19=1 OR E182=1 OR E192=1] Be touched on your thighs, breasts, or vagina in a sexual way?	1	2

DK/REF

[IF GENDER = 1]: As you answer the next questions please think about the **most recent** time you were [ForcedOrPressuredFill2] have sex or sexual contact with another inmate or let another inmate touch your butt, thighs, or penis in a sexual way.

Touch the **NEXT** button to go to the next screen.

[IF GENDER = 2]: As you answer the next questions please think about the **most recent** time you were [ForcedOrPressuredFill2] have sex or sexual contact with another inmate or let another inmate touch your butt, thighs, breasts, or vagina in a sexual way.

Touch the **NEXT** button to go to the next screen.

[IF DIR1 OR DIR2 OR DIR3 OR DIR4 OR DIR5 is displayed, continue with this module. Else, skip to Determination of Specific Incident of Staff Incident Report]

INCIDENT CHARACTERISTICS FOR INMATE-ON-INMATE VICTIMIZATION

DEFINE RECENT_FILL:

IF DIR1 OR DIR2 is displayed, then RECENT_FILL = "incident"

IF DIR3 OR DIR4 OR DIR5 is displayed, then RECENT_FILL = "**most recent** incident"

DEFINE I-ON-I_FILL:

IF DIR1 OR DIR3 is displayed, then I-ON-I_FILL = "sex or sexual contact with another inmate"

IF DIR2 OR DIR4 is displayed **AND** GENDER=1, then I-ON-I_FILL = "another inmate touching your butt, thighs or penis in a sexual way"

IF DIR2 OR DIR4 is displayed **AND** GENDER=2, then I-ON-I_FILL = "another inmate touching your butt, thighs, breasts, or vagina in a sexual way"

IF DIR5 is displayed **AND** GENDER=1, then I-ON-I_FILL = "sex or sexual contact with another inmate or another inmate touching your butt, thighs, or penis in a sexual way"

IF DIR5 is displayed **AND** GENDER=2, then I-ON-I_FILL = "sex or sexual contact with another inmate or another inmate touching your butt, thighs, breasts, or vagina in a sexual way"

IIC1 Did this [RECENT_FILL] of [I-ON-I_FILL] happen in [CURRENT YEAR] or [CURRENT YEAR -1]?

- 1 CURRENT YEAR
- 2 CURRENT YEAR – 1
- DK/REF

DEFINE IIC1_FILL:

IF IIC1=1, then IIC1_FILL=CURRENT YEAR

IF IIC1=2, then, IIC1_FILL=CURRENT YEAR – 1

IIC2 [IF IIC1 NE DK OR REF] In what month in [IIC1_FILL] did this [RECENT_FILL] happen?

[IF IIC1 = DK OR REF] In what month did this [RECENT_FILL] happen?

- 1 January
- 2 February
- 3 March
- 4 April
- 5 May
- 6 June
- 7 July
- 8 August
- 9 September
- 10 October
- 11 November
- 12 December
- DK/REF

IIC3 Did the [RECENT_FILL] happen...

	Yes	No
IIC3a. Between 6:00 in the morning and noon?	1	2
IIC3b. After noon but before 6:00 in the evening?	1	2
IIC3c. After 6:00 in the evening but before midnight?	1	2
IIC3d. After midnight but before 6:00 in the morning?	1	2

DK/REF

IIC4 Where did the [RECENT_FILL] happen?

	Yes	No
IIC4a. In your own cell, room, or sleeping area?	1	2
IIC4b. In the cell, room, or housing area of another inmate?	1	2
IIC4c. Somewhere else in the facility?	1	2
IIC4d. Off facility grounds?	1	2

DK/REF

IIC5 [IF IIC4c =1] Where were you when the incident happened?

	Yes	No
IIC5a. In a shower?	1	2
IIC5b. In a bathroom?	1	2
IIC5c. In the yard or recreation area?	1	2
IIC5d. In a classroom or library?	1	2
IIC5e. In a workshop, kitchen, or other workplace?	1	2
IIC5f. In a closet?	1	2
IIC5g. In an office or other locked room?	1	2
IIC5h. On the stairs?	1	2

DK/REF

IIC6 [IF IIC4d =1] Where were you when the incident happened?

	Yes	No
IIC6a. A bus, van, or car?	1	2
IIC6b. A courthouse?	1	2
IIC6c. Some type of temporary holding facility?	1	2
IIC6d. A hospital or other type of medical facility?	1	2

DK/REF

IIC7 Just before or during this [RECENT_FILL], which, if any of these things, happened? Were you...

	Yes	No
IIC7a. Persuaded or talked into the sex or sexual contact?	1	2
IIC7b. Given a bribe?	1	2
IIC7c. Blackmailed?	1	2
IIC7d. Given drugs or alcohol to get you drunk or high?	1	2
IIC7e. Offered protection from other inmates?	1	2
IIC7f. Trying to pay off or settle a debt that you owed?	1	2
IIC7g. Threatened with harm?	1	2
IIC7h. Physically held down or restrained?	1	2
IIC7i. Physically harmed or injured?	1	2
IIC7j. Threatened with a weapon?	1	2

DK/REF

IIC8 Do you think this [RECENT_FILL] happened because of your...

	Yes	No
IIC8a. Race or ethnicity?	1	2
IIC8b. Age?	1	2
IIC8c. Religion?	1	2
IIC8f. Gang affiliation?	1	2
IIC8g. [IF TRANSID = 1 OR D3c = 1 OR (D3d = 1 AND D3e = 2 OR 3 OR 4) OR (D3d = 2 AND D3e = 1 OR 3 OR 4)] Gender identity?	1	2

DK/REF

DEFINE SexualOrientationFill:

IF D2a=1, then SexualOrientationFill = "gay"

IF D2b=1, then SexualOrientationFill = "lesbian or gay"

IF D2a=3 OR D2b=3, then SexualOrientationFill = "bisexual"

IIC33 [D2a=1 OR D2b=1 OR D2a=3 OR D2b=3] Do you think this [RECENT_FILL] happened because you are [SexualOrientationFill]?

1 Yes

2 No

DK/REF

IIC9 During this [RECENT_FILL], did one inmate or more than one inmate have sexual contact with you?

1 One inmate

2 More than one inmate

DK/REF

IIC10a [IF IIC9 = 1] Was the other inmate male, female, or transgender?

1 Male

2 Female

3 Transgender

DK/REF

IIC10b [IF IIC9 = 2] Were any of the inmates involved in this incident...

	Yes	No
IIC10b1. Male?	1	2
IIC10b2. Female?	1	2
IIC10b3. Transgender?	1	2

DK/REF

DEFINE PerpGenderFill1:

If IIC9=1 AND IIC10a=1

then PerpGenderFill1 = "he"

If IIC9=1 AND IIC10a=2

then PerpGenderFill1 = "she"

If IIC9=1 AND IIC10a=3

then PerpGenderFill1 = "they"

If IIC9=2

then PerpGenderFill1 = "they"

DEFINE PerpGenderFill2:

If IIC9=1 AND IIC10a=1
 then PerpGenderFill2= "his"
 If IIC9=1 AND IIC10a=2
 then PerpGenderFill2= "her"
 If IIC9=1 AND IIC10a=3
 then PerpGenderFill2 = "their"
 If IIC9=2
 then PerpGenderFill2 = "their"

IIC11 [IF IIC9 = 1] Was the other inmate of Hispanic, Latino, or Spanish origin?

[IF IIC9 = 2] Were any of the other inmates of Hispanic, Latino, or Spanish origin?

1 Yes
 2 No
 DK/REF

IIC12 [IF IIC9 = 1] Was the other inmate...

[IF IIC9 = 2] Were any of the other inmates...

	Yes	No
IIC12a. White?	1	2
IIC12b. Black or African American?	1	2
IIC12c. American Indian or Alaska Native?	1	2
IIC12d. Asian?	1	2
IIC12e. Native Hawaiian or other Pacific Islander?	1	2

DK/REF

IIC13a [IF IIC9 = 1] How old was this other inmate?

1 Under 25
 2 25 – 34
 3 35 – 44
 4 45 – 54
 5 55 or older
 DK/REF

IIC13b [IF IIC9 = 2] Were any of the inmates...

	Yes	No
IIC13b1. Older than you?	1	2
IIC13b2. Younger than you?	1	2
IIC13b3. About the same age as you?	1	2

DK/REF

IIC13DK [IF IIC13a = DK] Was this other inmate older than you, younger than you or about the same age as you?

1 Older than you
 2 Younger than you
 3 About the same age as you
 DK/REF

IIC14a [IF IIC9 = 1] At the time this [RECENT_FILL] occurred was this other inmate assigned to the same housing unit, pod or dormitory as you?

- 1 Yes
- 2 No
- DK/REF

IIC14b [IF IIC9 = 2] At the time this [RECENT_FILL] occurred were any of these inmates assigned to the same housing unit, pod or dormitory as you?

- 1 Yes
- 2 No
- DK/REF

IIC15a [IF IIC9 = 1] How well did you know this other inmate at the time the [RECENT_FILL] occurred?

- 1 Did not know the inmate at all
- 2 Knew the inmate only a little
- 3 Knew the inmate but not well
- 4 Knew the inmate very well
- DK/REF

IIC15b [IF IIC9 = 2] Did you know these inmates at the time the [RECENT_FILL] occurred?

- 1 You knew all the inmates who were involved
- 2 You knew some of the inmates who were involved
- 3 You did not know any of the inmates who were involved
- DK/REF

IIC16a [IF IIC9 = 1] Was this other inmate a member of a gang?

- 1 Yes
- 2 No
- DK/REF

IIC16b [IF IIC9 = 2] Were any of these inmates members of a gang?

- 1 Yes
- 2 No
- DK/REF

IIC17 [IF IIC9 = 1] **Before this incident happened**, were you worried that this inmate might be planning to have sex or sexual contact with you?

[IF IIC9 = 2] **Before this incident happened**, were you worried that any of these inmates might be planning to have sex or sexual contact with you?

- 1 Yes
- 2 No
- DK/REF

IIC18 [IF IIC9 = 1] **Before this incident happened** had you had any arguments or fights with this inmate?

[IF IIC9 = 2] **Before this incident happened** had you had any arguments or fights with any of these inmates?

- 1 Yes
2 No
DK/REF

IIC19 Were you injured during this [RECENT_FILL]?

- 1 Yes
2 No
DK/REF

IIC20 [IF IIC19 = 1] How were you injured during the incident? Did you...

	Yes	No
IIC20a. Receive knife or stab wounds?	1	2
IIC20b. Receive broken bones?	1	2
IIC20c. [IF GENDER = 1] Have anal tearing? [IF GENDER = 2] Have anal or vaginal tearing?	1	2
IIC20d. Have your teeth chipped or knocked out?	1	2
IIC20e. Receive internal injuries?	1	2
IIC20f. Get knocked unconscious?	1	2
IIC20g. Receive bruises, a black eye, sprains, cuts, scratches, swelling, welts, or burns?	1	2

DK/REF

IIC21 [IF IIC19 = 1] As a result of any of the injuries you received during this incident, did you see a doctor, nurse, or other health care provider for any of the injuries you received?

- 1 Yes
2 No
DK/REF

IIC22 [IF IIC9 = 1] Did this inmate do any of the following things **after** the incident happened?

[IF IIC9 = 2] Did these inmates do any of the following things **after** the incident happened?

	Yes	No
IIC22a. Gave you gifts or money so that you would keep it a secret?	1	2
IIC22b. Threatened to hurt you so that you would keep it a secret?	1	2
IIC22c. Said [PerpGenderFill1] would blame it on you if you told anyone?	1	2
IIC22d. Said [PerpGenderFill1] would stop spending time with you if you told anyone?	1	2
IIC22e. Had some type of sexual contact with you again?	1	2
IIC22f. Ignored you or stayed away from you?	1	2
IIC22g. Threatened to harm your family?	1	2
IIC22h. Hurt you or beat you up?	1	2

DK/REF

IIC23 Did you report this [RECENT_FILL] to anyone?

- 1 Yes
2 No
DK/REF

IIC24 [IF IIC23 = 1] Did you report the incident to...

	Yes	No
IIC24a. A correctional officer?	1	2
IIC24b. An administrative staff person?	1	2
IIC24c. A medical or healthcare staff person?	1	2
IIC24d. An instructor or teacher?	1	2
IIC24e. A counselor or other mental health care provider?	1	2
IIC24f. A chaplain or other religious official?	1	2
IIC24g. A volunteer?	1	2
IIC24h. Some other type of facility staff person?	1	2
IIC24i. A telephone hotline?	1	2
IIC24j. Another inmate?	1	2
IIC24k. A family member or friend?	1	2

DK/REF

IIC25 At the time the [RECENT_FILL] happened were any **other inmates** aware that it was happening?

1 Yes

2 No

DK/REF

IIC26 At the time the [RECENT_FILL] happened were any **staff at the facility** aware that it was happening?

1 Yes

2 No

DK/REF

IIC27 [IF IIC23 = 1] Did any of the following things happen to you as a result of the report you made?

	Yes	No
IIC27a. You were moved to administrative segregation or some other protective housing?	1	2
IIC27b. You were placed in a medical unit, ward, or hospital?	1	2
IIC27c. You were confined to your own cell, room, or housing area?	1	2
IIC27d. You were given a higher level of custody within the facility?	1	2
IIC27e. You were offered a transfer to another facility?	1	2
IIC27f. You were written up?	1	2

DK/REF

IIC28a [IF IIC9 = 1 AND IIC23 = 1] Did any of the following things happen to the inmate who had sex or sexual contact with you?

	Yes	No
IIC28a1. The inmate was moved to administrative segregation or some other protective housing?	1	2
IIC28a2. The inmate was placed in a medical unit, ward, or hospital?	1	2
IIC28a3. The inmate was confined to [PerpGenderFill2] own cell, room, or housing area?	1	2
IIC28a4. The inmate was given a higher level of custody at this facility?	1	2
IIC28a5. The inmate was transferred to another facility?	1	2
IIC28a6. The inmate was written up?	1	2
IIC28a7. The inmate lost privileges?	1	2
IIC28a8. The inmate was charged with a crime?	1	2

DK/REF

IIC28b [IF IIC9 = 2 AND IIC23 = 1] Did any of the following things happen to the inmates who had sex or sexual contact with you?

	Yes	No
IIC28b1. One or more of the inmates were moved to administrative segregation or some other protective housing?	1	2
IIC28b2. One or more of the inmates were placed in a medical unit, ward, or hospital?	1	2
IIC28b3. One or more of the inmates were confined to their own cell, room, or housing area?	1	2
IIC28b4. One or more of the inmates were given a higher level of custody at this facility?	1	2
IIC28b5. One or more of the inmates were transferred to another facility?	1	2
IIC28b6. One or more of the inmates were written up?	1	2
IIC28b7. One or more of the inmates lost privileges?	1	2
IIC28b8. One ore more of the inmates were charged with a crime?	1	2

DK/REF

IIC29 [IF IIC9 = 1] **Since this [RECENT_FILL] happened** has this inmate attempted any type of sexual contact with you?

[IF IIC9 = 2]] **Since this [RECENT_FILL] happened** have any of these inmates attempted any type of sexual contact with you?

1 Yes
2 No

DK/REF

IIC30 [IF IIC9 = 1 AND IIC29 NE 1] **Since this [RECENT_FILL] happened** have you been worried that this inmate will try to initiate sexual contact with you again?

[IF IIC9 = 2 AND IIC29 NE 1] **Since this [RECENT_FILL] happened** have you been worried that any of these inmates would try to initiate sexual contact with you again?

1 Yes
2 No

DK/REF

IIC31 Since this [RECENT_FILL] happened have you done any of the following things to reduce the chance that you would have to have sexual contact again?

	Yes	No
IIC31a. Joined a gang?	1	2
IIC31b. Carried a weapon?	1	2
IIC31c. Fought more?	1	2
IIC31d. Worked out in order to bulk up?	1	2
IIC31e. Avoided certain areas?	1	2
IIC31f. Kept to yourself more?	1	2
IIC31g. Stayed in your own cell or housing area more?	1	2
IIC31h. Joined a religious group?	1	2
IIC31i. Avoided certain inmates?	1	2
IIC31j. Requested protective custody?	1	2
IIC31k. Requested transfer to another facility?	1	2
IIC31l. Requested a different housing unit, pod, or dormitory?	1	2
IIC31m. Contacted someone on the outside for help?	1	2
IIC31n. Tried to stay near facility staff?	1	2
IIC31o. Paid another inmate for protection?	1	2

DK/REF

DETERMINATION OF SPECIFIC INCIDENT FOR STAFF INCIDENT REPORT

DIRS1 [IF G3 + G6 = GT 1 TIME] Earlier you reported that, **DOAFILL2**, you had sex or sexual contact with a facility staff person more than 1 time.

[IF only one of (G11a, G11b, G11c, G11d, G11e) is YES]: As you answer the next questions please think about the **most recent** time when you had sex or sexual contact with a facility staff person.

[IF at least two of (G11a, G11b, G11c, G11d, G11e) are YES] Please think about the **most recent** time this happened. Which of the following types of sex or sexual contact did you have with a facility staff person?

	Yes	No
DIRS1a. [IF G11a=1] You touched a facility staff person's body or had your body touched in a sexual way?	1	2
DIRS1b. [IF G11b=1] You gave or received a handjob?	1	2
DIRS1c. [IF G11c=1] You gave or received oral sex or a blowjob?	1	2
DIRS1d. [IF G11d=1] You had vaginal sex?	1	2
DIRS1e. [IF G11e=1] You had anal sex?	1	2

DK/REF

As you answer the next questions please think about this **most recent** time when you had sex or sexual contact with a facility staff person.

Touch the **NEXT** button to go to the next screen.

DIRS2 [IF G3 + G6 = 1 TIME] Earlier you reported that **DOAFILL2** you had sex or sexual contact with a facility staff person 1 time. Please think about that experience as you answer the next questions.

Touch the **NEXT** button to go to the next screen.

DIRS3 [IF G6 = DK OR REF] AND [IF G3 = DK OR REF) Earlier you reported that, **DOAFILL2**, you had sex or sexual contact with a facility staff person. Please think about that experience as you answer the next questions.

Touch the **NEXT** button to go to the next screen.

[IF DIRS1 OR DIRS2 OR DIRS3 is displayed, continue with this module. Else, skip to Other Victimization While Incarcerated]

INCIDENT CHARACTERISTICS FOR STAFF-ON-INMATE VICTIMIZATION

DEFINE RECENT_FILL2:

IF DIRS1 is displayed, then RECENT_FILL2 = “**most recent** incident”

IF DIRS2 OR DIRS3 is displayed, then RECENT_FILL2 = “incident”

SI1 Did this [RECENT_FILL2] of sex or sexual contact with a facility staff person happen in [CURRENT YEAR] or [CURRENT YEAR -1]?

- 1 CURRENT YEAR
- 2 CURRENT YEAR – 1
- DK/REF

DEFINE SI1_FILL:

IF SI1=1, then SI_FILL=CURRENT YEAR

IF SI1=2, then SI_FILL=CURRENT YEAR – 1

SI2 [IF SI1 NE DK OR REF] In what month in [SI1_FILL] did this [RECENT_FILL2] happen?

[IF SI1 = DK OR REF] In what month did this [RECENT_FILL2] happen?

- 1 January
- 2 February
- 3 March
- 4 April
- 5 May
- 6 June
- 7 July
- 8 August
- 9 September
- 10 October
- 11 November
- 12 December
- DK/REF

SI3 Did the [RECENT_FILL2] happen...

	Yes	No
SI3a. Between 6:00 in the morning and noon?	1	2
SI3b. After noon but before 6:00 in the evening?	1	2
SI3c. After 6:00 in the evening but before midnight?	1	2
SI3d. After midnight but before 6:00 in the morning?	1	2

DK/REF

SI4 Where did the [RECENT_FILL2] happen?

	Yes	No
SI4a. In your own cell, room, or sleeping area?	1	2
SI4b. In the cell, room, or housing area of another inmate?	1	2
SI4c. Somewhere else in the facility?	1	2
SI4d. Off facility grounds?	1	2

DK/REF

SI5 [IF SI4c =1] Where were you when the incident happened?

	Yes	No
SI5a. In a shower?	1	2
SI5b. In a bathroom?	1	2
SI5c. In the yard or recreation area?	1	2
SI5d. In a classroom or library?	1	2
SI5e. In a workshop, kitchen, or other workplace?	1	2
SI5f. In a closet?	1	2
SI5g. In an office or other locked room?	1	2
SI5h. On the stairs?	1	2

DK/REF

SI6 [IF SI4d =1] Where were you when the incident happened?

	Yes	No
SI6a. A bus, van, or car?	1	2
SI6b. A courthouse?	1	2
SI6c. Some type of temporary holding facility?	1	2
SI6d. A hospital or other type of medical facility?	1	2

DK/REF

SI9 Just before or during this [RECENT_FILL2], which, if any of these things happened? Were you...

	Yes	No
SI9a. Persuaded or talked into the sex or sexual contact?	1	2
SI9b. Given a bribe?	1	2
SI9c. Blackmailed?	1	2
SI9d. Given drugs or alcohol to get you drunk or high?	1	2
SI9e. Offered protection from other inmates?	1	2
SI9f. Trying to pay off or settle a debt that you owed?	1	2
SI9g. Threatened with harm?	1	2
SI9h. Physically held down or restrained?	1	2
SI9i. Physically harmed or injured?	1	2
SI9j. Threatened with a weapon?	1	2
SI9k. [IF A22 = 2] Told that you would be deported?	1	2
SI9l. Told that your family would be deported?	1	2
SI9m. Told that you would lose visitation privileges?	1	2

DK/REF

SI_NEW [IF G2 NE 2 AND (SI9g – m ALL NE 1)] Who initiated the sexual contact?

- 1 The staff person initiated it
- 2 I initiated it

DK/REF

DEFINE TOUCHING ONLY:

IF G11a=1 AND G11b=2 AND G11c=2 AND G11d=2 AND G11e=2

Then TOUCHING ONLY=1

Else TOUCHING ONLY=0

SI7 [IF TOUCHING ONLY=1] Did this incident happen as part of a **strip search**?

- 1 Yes
- 2 No
- DK/REF

SI8 [IF TOUCHING ONLY=1 AND SI7 NE 1] Did this incident happen as part of a **pat down**?

- 1 Yes
- 2 No
- DK/REF

SI10 During this [RECENT_FILL2] did one staff person or more than one staff person have sex or sexual contact with you?

- 1 One staff person
- 2 More than one staff person
- DK/REF

SI11 Do you think this [RECENT_FILL2] happened because of your...

	Yes	No
SI11a. Race or ethnicity?	1	2
SI11b. Age?	1	2
SI11c. Religion?	1	2
SI11f. Gang affiliation?	1	2
SI11g. [IF TRANSID = 1 OR D3c = 1 OR (D3d = 1 AND D3e = 2 OR 3 OR 4) OR (D3d = 2 AND D3e = 1 OR 3 OR 4)] Gender identity?	1	2
DK/REF		

DEFINE SexualOrientationFill:

IF D2a=1, then SexualOrientationFill = "gay"

IF D2b=1, then SexualOrientationFill = "lesbian or gay"

IF D2a=3 OR D2b=3, then SexualOrientationFill = "bisexual"

SI32 [IF D2a=1 OR D2b=1 OR D2a=3 OR D2b=3] Do you think this [RECENT_FILL2] happened because you are [SexualOrientationFill]?

- 1 Yes
- 2 No
- DK/REF

SI12a [IF SI10 = 1] Was the staff person male or female?

- 1 Male
- 2 Female
- DK/REF

SI12b [IF SI10 = 2 OR DK OR REF] Were any of the staff involved in this incident...

	Yes	No
SI12b1. Male?	1	2
SI12b2. Female?	1	2

DK/REF

DEFINE StaffGenderFill1:

IF SI10=1 AND SI12a=1, then StaffGenderFill1 = "he"
 IF SI10=1 AND SI12a=2, then StaffGenderFill1= "she"
 IF SI10=2 OR DK OR REF, then StaffGenderFill1= "they"

DEFINE StaffGenderFill2:

IF SI10=1 AND SI12a=1, then StaffGenderFill2 = "his"
 IF SI10=1 AND SI12a=2, then StaffGenderFill2= "her"
 IF SI10=2 OR DK OR REF, then StaffGenderFill2= "their"

DEFINE StaffGenderFill3:

IF SI10=1 AND SI12a=1, then StaffGenderFill3 = "himself"
 IF SI10=1 AND SI12a=2, then StaffGenderFill3= "herself"
 IF SI10=2 OR DK OR REF, then StaffGenderFill3= "themselves"

SI13 [IF SI10 = 1] Was the staff person of Hispanic, Latino, or Spanish origin?

[IF SI10 = 2 OR DK OR REF] Were any of the staff of Hispanic, Latino, or Spanish origin?

- 1 Yes
- 2 No
- DK/REF

SI14 [IF SI10 = 1] Was the staff person...

[IF SI10 = 2 OR DK OR REF] Were any of the staff...

	Yes	No
SI14a. White?	1	2
SI14b. Black or African American?	1	2
SI14c. American Indian or Alaska Native?	1	2
SI14d. Asian?	1	2
SI14e. Native Hawaiian or other Pacific Islander?	1	2

DK/REF

SI15a [IF SI10 = 1] How old was this staff person?

- 1 Under 25
- 2 25 – 34
- 3 35 – 44
- 4 45 – 54
- 5 55 or older
- DK/REF

SI15b [IF SI10 = 2 OR DK OR REF] Were any of the staff...

	Yes	No
SI15b1. Older than you?	1	2
SI15b2. Younger than you?	1	2
SI15b3. About the same age as you?	1	2

DK/REF

SI15DK [IF SI15a = DK] Was this staff person older than you, younger than you or about the same age as you?

- 1 Older than you
- 2 Younger than you
- 3 About the same age as you

DK/REF

SI16a [IF SI10 = 1] Was the staff person who had sexual contact with you...

	Yes	No
SI16a1. A correctional officer?	1	2
SI16a2. Another staff person working in the facility?	1	2
SI16a3. A volunteer in the facility?	1	2

DK/REF

SI16b [IF SI10 = 2 OR DK OR REF] Were any of the staff who had sexual contact with you...

	Yes	No
SI16b1. Correctional officers?	1	2
SI16b2. Other staff working in the facility?	1	2
SI16b3. Volunteers in the facility?	1	2

DK/REF

SI17a [IF SI10 = 1] Before the [RECENT_FILL2] happened, did any of these things **ever** happen?

	Yes	No
SI17a1. The staff person talked to you about [StaffGenderFill2] personal life outside of work?	1	2
SI17a2. The staff person gave you pictures of [StaffGenderFill3]?	1	2
SI17a3. The staff person wrote letters to you?	1	2
SI17a4. The staff person offered you things like drugs, cigarettes, alcohol, or other things you are not allowed to have in this facility?	1	2
SI17a5. The staff person offered you money?	1	2
SI17a6. The staff person did things for you to help you get out of trouble?	1	2
SI17a7. The staff person spent time alone with you and asked that you not tell anyone else about that time?	1	2
SI17a8. The staff person told you that [StaffGenderFill1] had special feelings for you or was in love with you?	1	2
SI17a9. The staff person talked or joked with you about sex or shared sexual stories with you?	1	2

DK/REF

SI17b [IF SI10 = 2 OR DK OR REF] Before the [RECENT_FILL2] happened, did any of these things **ever** happen?

	Yes	No
SI17b1. One or more of the staff talked to you about his or her personal life outside of work?	1	2
SI17b2. One or more of the staff gave you pictures of themselves?	1	2
SI17b3. One or more of the staff wrote letters to you?	1	2
SI17b4. One or more of the staff offered you things like drugs, cigarettes, alcohol, or other things you are not allowed to have in this facility?	1	2
SI17b5. One or more of the staff offered you money?	1	2
SI17b6. One or more of the staff did things for you to help you get out of trouble?	1	2
SI17b7. One or more of the staff spent time alone with you and asked that you not tell anyone else about that time?	1	2
SI17b8. One or more of the staff told you that they had special feelings for you or were in love with you?	1	2
SI17b9. One or more of the staff talked or joked with you about sex or shared sexual stories with you?	1	2

DK/REF

SI18 During the [RECENT_FILL2] were you injured?

1 Yes

2 No

DK/REF

SI19 [IF SI18 = 1] How were you injured during the incident? Did you...

	Yes	No
SI19a. Receive knife or stab wounds?	1	2
SI19b. Receive broken bones?	1	2
SI19c. [IF GENDER=1] Have anal tearing? [IF GENDER=2] Have anal or vaginal tearing?	1	2
SI19d. Have your teeth chipped or knocked out?	1	2
SI19e. Receive internal injuries?	1	2
SI19f. Get knocked unconscious?	1	2
SI19g. Receive bruises, a black eye, sprains, cuts, scratches, swelling, welts, or burns?	1	2

DK/REF

SI20 [IF SI18 = 1] As a result of any of the injuries you received during this incident, did you see a doctor, nurse, or other health care provider for any of the injuries you received?

1 Yes

2 No

DK/REF

SI21 [IF SI10 = 1] Did this staff person do any of the following things **after** the incident happened?

[IF SI10 = 2 OR DK OR REF] Did any of the staff involved do any of the following things **after** the [RECENT_FILL2] happened?

	Yes	No
SI21a. Gave you gifts or money so that you would keep it secret?	1	2
SI21b. Threatened to hurt you so that you would keep it secret?	1	2
SI21c. Said [StaffGenderFill1] would blame it on you if you told anyone?	1	2
SI21d. Said [StaffGenderFill1] would stop spending time with you if you told anyone?	1	2
SI21e. Had sexual contact with you again?	1	2
SI21f. Ignored you or stayed away from you?	1	2

DK/REF

SI22 Did you report this [RECENT_FILL2] to anyone?

1 Yes

2 No

DK/REF

SI23 [IF SI22 = 1] Did you report the incident to...

	Yes	No
SI23a. A correctional officer?	1	2
SI23b. An administrative staff person?	1	2
SI23c. A medical or healthcare staff person?	1	2
SI23d. An instructor or teacher?	1	2
SI23e. A counselor or other mental health care provider?	1	2
SI23f. A chaplain or other religious official?	1	2
SI23g. A volunteer?	1	2
SI23h. Some other type of facility staff person?	1	2
SI23i. A telephone hotline?	1	2
SI23j. Another inmate?	1	2
SI23k. A family member or friend?	1	2

DK/REF

SI24 At the time the [RECENT_FILL2] happened were any **inmates** aware that it was happening?

1 Yes

2 No

DK/REF

SI25 At the time the [RECENT_FILL2] happened were any **other staff at the facility** aware that it was happening?

1 Yes

2 No

DK/REF

SI26 [IF SI22 = 1] Did any of the following things happen to you as a result of the report you made?

	Yes	No
SI26a. You were moved to administrative segregation or some other protective housing?	1	2
SI26b. You were placed in a medical unit, ward, or hospital?	1	2
SI26c. You were confined to your own cell, room, or housing area?	1	2
SI26d. You were given a higher level of custody within the facility?	1	2
SI26e. You were offered a transfer to another facility?	1	2
SI26f. You were written up?	1	2

DK/REF

SI27a [IF SI10 = 1 AND SI22 = 1] Did any of the following things happen to the staff person who had sex or sexual contact with you?

	Yes	No
SI27a1. The staff person was fired?	1	2
SI27a2. The staff person was transferred to another facility?	1	2
SI27a3. The staff person was transferred to a different job at this facility?	1	2
SI27a4. The staff person was charged with a crime?	1	2
SI27a5. The staff person was suspended for a period of time?	1	2
SI27a6. The staff person was punished or disciplined in some way other than those listed above?	1	2

DK/REF

SI27b [IF (SI10 = 2 OR DK OR REF) AND SI22 = 1] Did any of the following things happen to any of the staff who had sex or sexual contact with you?

	Yes	No
SI27b1. One or more of the staff were fired?	1	2
SI27b2. One or more of the staff were transferred to another facility?	1	2
SI27b3. One or more of the staff were transferred to a different job at this facility?	1	2
SI27b4. One or more of the staff were charged with a crime?	1	2
SI27b5. One or more of the staff were suspended for a period of time?	1	2
SI27b6. One or more of the staff were punished or disciplined in some way other than those listed above?	1	2

DK/REF

SI28 [IF SI10 = 1] **Since this [RECENT_FILL2] happened** has this staff person attempted any type of sexual contact with you?

[IF SI10 = 2 OR DK OR REF] **Since this [RECENT_FILL2] happened** have any of the staff involved attempted any type of sexual contact with you?

1 Yes

2 No

DK/REF

SI29

[IF SI10 = 1 AND SI28 NE 1] **Since this [RECENT_FILL2] happened** have you been worried that this staff person will try to initiate sexual contact with you again?

[IF (SI10 = 2 OR DK OR REF) AND SI28 NE 1] **Since this [RECENT_FILL2] happened** have you been worried that any of the staff involved would try to initiate sexual contact with you again?

1 Yes

2 No

DK/REF

SI30

Since this [RECENT_FILL2] happened, have you done any of the following things to reduce the chance that you would have to have sexual contact again?

	Yes	No
SI30a. Joined a gang?	1	2
SI30b. Carried a weapon?	1	2
SI30c. Fought more?	1	2
SI30d. Worked out in order to bulk up?	1	2
SI30e. Tried to make yourself look less attractive?	1	2
SI30f. Avoided certain areas?	1	2
SI30g. Kept to yourself more?	1	2
SI30h. Stayed in your own cell or housing area more?	1	2
SI30i. Joined a religious group?	1	2
SI30j. Avoided certain staff?	1	2
SI30k. Requested protective custody?	1	2
SI30l. Requested transfer to another facility?	1	2

DK/REF

OTHER VICTIMIZATION WHILE INCARCERATED

XINTRO These next questions are about other things that may have happened to you in this facility.

Touch the **NEXT** button to go to the next screen.

X6a DOAFILL1, have you been written up or charged with assaulting another inmate?

- 1 Yes
- 2 No
- DK/REF

X7a DOAFILL1, have you been written up or charged with **physically assaulting** a correctional officer or other facility staff person?

- 1 Yes
- 2 No
- DK/REF

X8a DOAFILL1, have you been written up or charged with **verbally assaulting** a correctional officer or other facility staff person?

- 1 Yes
- 2 No
- DK/REF

LCM5 DOAFILL1, have you had any sex or sexual contact with staff in this facility whether you wanted to have it or not?

- 1 Yes
- 2 No
- DK/REF

LCM6a How long has it been since you had any sex or sexual contact with staff in this facility whether you wanted to or not?

- 1 Within the past 7 days
- 2 More than 7 days ago but within the past 30 days
- 3 More than 30 days ago but within the past 12 months
- 4 More than 12 months ago
- 5 This has not happened to me at this facility
- DK/REF

PAT DOWNS AND STRIP SEARCHES

L0 These next questions are about your experiences with strip searches and pat downs at this facility.

Touch the **NEXT** button to go to the next screen.

L23 [IF G11a = 1] Earlier you reported that, **DOAFILL2**, you touched a facility staff person's body or had your body touched in a sexual way. Did this happen as part of a **strip search**?

1 Yes

2 No

DK/REF

L23a [IF L23 = 1] On any occasion **DOAFILL2** when you touched a facility staff person's body or had your body touched in a sexual way as part of a strip search, was the strip search conducted by...

	Yes	No
L23a1. Male facility staff?	1	2
L23a2. Female facility staff?	1	2

DK/REF

L24 [IF G11a = 1] **DOAFILL1**, when you touched a facility staff person's body or had your body touched in a sexual way, did this happen when it was **not** part of a strip search?

1 Yes

2 No

DK/REF

L25 [IF G11a = 1] **DOAFILL1**, when you touched a facility staff person's body or had your body touched in a sexual way, did this happen as part of a **pat down**?

1 Yes

2 No

DK/REF

L25a [IF L25 = 1] On any occasion **DOAFILL2** when you touched a facility staff person's body or had your body touched in a sexual way as part of a pat down, was the pat down conducted by...

	Yes	No
L25a1. Male facility staff?	1	2
L25a2. Female facility staff?	1	2

DK/REF

L26 [IF G11a = 1] **DOAFILL1**, when you touched a facility staff person's body or had your body touched in a sexual way, did this happen when it was **not** part of a pat down?

1 Yes

2 No

DK/REF

FACILITY CONDITIONS, SUPPORT AND SAFETY

S0 These next questions are about everyday living in this facility.

Touch the **NEXT** button to go to the next screen.

S1 Are there inmates in this facility who you think of as your friends?

- 1 Yes
- 2 No
- DK/REF

S2 Are there inmates in this facility who you can talk to about your personal problems?

- 1 Yes
- 2 No
- DK/REF

S3 Are there inmates in this facility who would protect you if another inmate was trying to hurt you?

- 1 Yes
- 2 No
- DK/REF

S4 Are there correctional officers or other staff at this facility who you can talk to about your problems?

- 1 Yes
- 2 No
- DK/REF

S5 Are there correctional officers or other staff at this facility who would protect you if another inmate was trying to hurt you?

- 1 Yes
- 2 No
- DK/REF

S6 How crowded is it in your housing unit?

- 1 Not at all crowded
- 2 Slightly crowded
- 3 Pretty crowded
- 4 Very crowded
- DK/REF

S7 How crowded is it outside of the housing units – for example, in the dining hall, classrooms, gym, or work areas?

- 1 Not at all crowded
- 2 Slightly crowded
- 3 Pretty crowded
- 4 Very crowded
- DK/REF

S8 How much privacy do you have in your housing unit?

- 1 None
- 2 A little
- 3 Some
- 4 A lot

DK/REF

S9 Please indicate whether you agree or disagree with each of the following statements.

Staff at this facility...

	Agree	Disagree
S9a. Are generally fair?	1	2
S9b. Do their best to make this facility safe and secure?	1	2
S9c. Try to meet the needs of the inmates?	1	2
S9d. Break up fights quickly?	1	2
S9e. Use physical force only when necessary?	1	2
S9f. Let inmates know what is expected of them?	1	2
S9g. Generally treat inmates with respect?	1	2
S9h. Follow facility rules when handling inmate complaints and grievances?	1	2
S9i. Often write up inmates who don't deserve it?	1	2

DK/REF

S13 **DOAFILL1**, how often have inmates at this facility been hit, punched, or assaulted by other inmates?

- 1 Frequently
- 2 Sometimes
- 3 Rarely
- 4 Never

DK/REF

S14 **DOAFILL1**, how often have **you** worried about being hit, punched, or assaulted by other inmates in this facility?

- 1 Frequently
- 2 Sometimes
- 3 Rarely
- 4 Never

DK/REF

S15 **DOAFILL1**, how often have you **seen** other inmates with some type of weapon?

- 1 Frequently
- 2 Sometimes
- 3 Rarely
- 4 Never

DK/REF

S16 **DOAFILL1**, how much gang activity has there been at this facility?

- 1 None
- 2 A little
- 3 Some
- 4 A lot

DK/REF

S17 DOAFILL1, have you been in a fight, assault, or incident in which **another inmate** tried to harm you?

- 1 Yes
- 2 No
- DK/REF

S18 [IF S17 = 1] **DOAFILL1**, how many times have you been in a fight, assault, or other incident in which **another inmate** tried to harm you?

- 1 1 time
- 2 2 times
- 3 3 – 10 times
- 4 11 times or more
- DK/REF

S36 [IF S17 = 1] **DOAFILL1**, what injuries have you received in a fight, assault, or incident in which **another inmate** hurt you?

	Yes	No
S36a. You received knife or stab wounds?	1	2
S36b. You received broken bones?	1	2
S36c. Your teeth were chipped or knocked out?	1	2
S36d. You received internal injuries?	1	2
S36e. You were knocked unconscious?	1	2
S36f. You received bruises, a black eye, sprains, cuts, scratches, swelling, welts, or burns?	1	2

DK/REF

S37 [IF S36a = 1 OR S36b = 1 OR S36c = 1 OR S36d = 1 OR S36e = 1 OR S36f = 1] Did you see a doctor, nurse, or other health care provider for your injuries?

- 1 Yes
- 2 No
- DK/REF

S21 DOAFILL1, have you been in a fight, assault, or incident in which a **correctional officer or other facility staff person** tried to harm you?

- 1 Yes
- 2 No
- DK/REF

S22 [IF S21 = 1] **DOAFILL1**, how many times have you been in a fight, assault, or incident in which a **correctional officer or other facility staff person** tried to harm you?

- 1 1 time
- 2 2 times
- 3 3 – 10 times
- 4 11 times or more
- DK/REF

S34 [IF S21 = 1] **DOAFILL1**, what injuries have you received in a fight, assault, or incident in which a **correctional officer or other facility staff person** tried to harm you?

	Yes	No
S34a. You received knife or stab wounds?	1	2
S34b. You received broken bones?	1	2
S34c. Your teeth were chipped or knocked out?	1	2
S34d. You received internal injuries?	1	2
S34e. You were knocked unconscious?	1	2
S34f. You received bruises, a black eye, sprains, cuts, scratches, swelling, welts, or burns?	1	2

DK/REF

S35 [IF S34a = 1 OR S34b = 1 OR S34c = 1 OR S34d = 1 OR S34e = 1 OR S34f = 1] Did you see a doctor, nurse, or other health care provider for your injuries?

- 1 Yes
2 No

DK/REF

S25 **DOAFILL1**, have any of your personal possessions or belongings been taken by another inmate without your permission?

- 1 Yes
2 No

DK/REF

S26 [IF S25 = 1] **DOAFILL1**, how many times have any of your personal possessions or belongings been taken by another inmate without your permission?

- 1 1 time
2 2 times
3 3 – 10 times
4 11 times or more

DK/REF

S29 **DOAFILL1**, do you think there has been enough staff at this facility to keep inmates safe?

- 1 Yes
2 No

DK/REF

S30 **DOAFILL1**, have you filed a grievance for any reason?

- 1 Yes
2 No

DK/REF

S31 [IF S30 = 1] **DOAFILL1**, how many times have you filed a grievance for any reason?

- 1 1 time
2 2 times
3 3 – 10 times
4 11 times or more

DK/REF

MENTAL HEALTH

R1 The next questions are about how you have been feeling during the past 30 days.

About how often during the past 30 days did you feel nervous?

- 1 All of the time
- 2 Most of the time
- 3 Some of the time
- 4 A little of the time
- 5 None of the time

DK/REF

R2 During the past 30 days, about how often did you feel hopeless?

- 1 All of the time
- 2 Most of the time
- 3 Some of the time
- 4 A little of the time
- 5 None of the time

DK/REF

R3 During the past 30 days, about how often did you feel restless or fidgety?

- 1 All of the time
- 2 Most of the time
- 3 Some of the time
- 4 A little of the time
- 5 None of the time

DK/REF

R4 How often in the past 30 days did you feel so depressed that nothing could cheer you up?

- 1 All of the time
- 2 Most of the time
- 3 Some of the time
- 4 A little of the time
- 5 None of the time

DK/REF

R5 About how often in the past 30 days did you feel that everything was an effort?

- 1 All of the time
- 2 Most of the time
- 3 Some of the time
- 4 A little of the time
- 5 None of the time

DK/REF

R6 About how often in the past 30 days did you feel worthless?

- 1 All of the time
- 2 Most of the time
- 3 Some of the time
- 4 A little of the time
- 5 None of the time

DK/REF

- R24** Have you **ever** been told by a mental health professional, such as a psychiatrist or psychologist, that you had...

	Yes	No
R24a. Manic depression, a bipolar disorder, or mania?	1	2
R24b. A depressive disorder?	1	2
R24c. Schizophrenia or another psychotic disorder?	1	2
R24d. Post-traumatic stress disorder or PTSD?	1	2
R24e. Another anxiety disorder, such as panic disorder or OCD?	1	2
R24f. A personality disorder, such as antisocial or borderline personality?	1	2
R24g. A mental or emotional condition other than those listed above?	1	2

DK/REF

- R25** The next questions are about any times you may have stayed overnight in any type of hospital or other facility for any problem with your emotions, nerves, or mental health. Please do **not** include any overnight hospital stays for alcohol or drug use.

Touch the **NEXT** button to go to the next screen.

- R26** Have you **ever** stayed overnight or longer in any type of hospital or other facility to receive treatment or counseling for any problem you were having with your emotions, nerves, or mental health?

1 Yes

2 No

DK/REF

- R27** [IF R26 = 1] During the 12 months before you were admitted to any facility to serve time on your **current sentence**, did you stay overnight or longer in any type of hospital or other facility to receive treatment or counseling for problems you were having with your emotions, nerves, or mental health?

1 Yes

2 No

DK/REF

- R28** The next questions are about services you may have received for any problem with your emotions, nerves, or mental health. As you answer these questions please do **not** include any services you may have received for drug or alcohol use. Some questions ask about prescription medicine. Prescription medicines are drugs that you take if a doctor authorizes them for you.

Touch the **NEXT** button to go to the next screen.

- R29** Have you **ever** taken any prescription medicine for any problem you were having with your emotions, nerves, or mental health?

1 Yes

2 No

DK/REF

R30 [IF B4 = 1 AND R29 = 1] At the time of the offense for which you are **currently** sentenced and serving time, were you taking prescription medicine for any problem you were having with your emotions, nerves, or mental health?

[IF B4 = 2 OR DK OR REF AND R29 = 1] At the time of the offense for which you are **currently** being held, were you taking prescription medicine for any problem you were having with your emotions, nerves, or mental health?

1 Yes
2 No
DK/REF

R31 [IF R29 = 1] Since you were admitted to any facility to serve time on your **current sentence**, have you taken prescription medicine for any problem you were having with your emotions, nerves, or mental health?

1 Yes
2 No
DK/REF

R33 Have you **ever** received counseling or therapy from a trained professional such as a psychiatrist, psychologist, social worker, or nurse for any problem you were having with your emotions, nerves, or mental health?

1 Yes
2 No
DK/REF

R34 [IF R33 = 1] Since you were admitted to any facility to serve time on your **current sentence**, have you received counseling or therapy from a trained professional such as a psychiatrist, psychologist, social worker, or nurse for any problem you were having with your emotions, nerves, or mental health?

1 Yes
2 No
DK/REF

R21 Did you **ever** in your life have any of the following experiences happen to you:

	Yes	No
R21a. A serious fight or physical assault?	1	2
R21b. A sexual assault?	1	2
R21c. A life-threatening accident or injury?	1	2
R21d. The murder or suicide of a loved one?	1	2
R21e. The accidental death of a loved one?	1	2
R21f. Witnessed someone being seriously injured or killed?	1	2
R21g. Any experience that put you at risk of death?	1	2

DK/REF

DISABILITY STATUS

Q0 The next questions are about difficulties that you might have due to a physical, mental, or emotional problem.

Touch the **NEXT** button to go to the next screen.

Q1 Are you deaf, or do you have serious difficulty hearing?

- 1 Yes
- 2 No
- DK/REF

Q2 Are you blind, or do you have serious difficulty seeing even when wearing glasses?

- 1 Yes
- 2 No
- DK/REF

Q3 Because of a physical, mental, or emotional problem, do you have serious difficulty concentrating, remembering, or making decisions?

- 1 Yes
- 2 No
- DK/REF

Q4 Do you have serious difficulty walking or climbing stairs?

- 1 Yes
- 2 No
- DK/REF

Q5 Do you have difficulty dressing or bathing?

- 1 Yes
- 2 No
- DK/REF

Q6 Because of a physical, mental, or emotional problem, do you have difficulty doing activities on your own, such as going to meal time, going outside, working in or outside of this facility, going to classes, or attending programs?

- 1 Yes
- 2 No
- DK/REF

Q7 [IF Q1 OR Q2 OR Q3 OR Q4 OR Q5 OR Q6 = 1] Is the difficulty you experience doing activities on your own caused by...

	Yes	No
Q7a. A physical problem?	1	2
Q7b. A mental or emotional problem?	1	2

DK/REF

Q8. Did a doctor, school counselor, or other professional **ever** tell you that you have...

	Yes	No
Q8a. ADD or ADHD?	1	2
Q8b. Dyslexia?	1	2
Q8c. A learning disability?	1	2
Q8d. Autism or Asperger's?	1	2

DK/REF

PARENTAL INVOLVEMENT

PIV1 Is your biological mother - that is, the woman who gave birth to you - still alive?

- 1 Yes
- 2 No
- DK/REF

PIV2 [IF PIV1 = 2] How old were **you** when your biological mother died?

If you were less than a year old when she died, please enter 0.

AGE: _____[RANGE: 0 – CALCAGE]

DK/REF

PIV3 [IF CALCAGE GT 17 AND (PIV1 = 1 OR PIV2 GT 17)] Thinking about your biological mother and her involvement in your life **before you turned 18**, would you say she was very involved, somewhat involved, or not at all involved?

[IF CALCAGE GT 17 AND PIV2 = 6 - 17] Thinking about your biological mother and her involvement in your life before she died, would you say she was very involved, somewhat involved, or not at all involved?

[IF CALCAGE = 16 OR 17 AND PIV1 = 1] Thinking about your biological mother and her involvement in your life, would you say she has been very involved, somewhat involved, or not at all involved?

[IF CALCAGE = 16 OR 17 AND PIV2 GT 5] Thinking about your biological mother and her involvement in your life before she died, would you say she was very involved, somewhat involved, or not at all involved?

- 1 Very involved
- 2 Somewhat involved
- 3 Not at all involved
- DK/REF

PIV4 Do you know the identity of your biological father?

- 1 Yes
- 2 No
- DK/REF

PIV5 [IF PIV4 = 1] Is your biological father still alive?

- 1 Yes
- 2 No
- DK/REF

PIV6 [IF PIV5 = 2] How old were **you** when your biological father died?

If you had not been born or were less than a year old when he died, please enter 0.

AGE: _____ [RANGE: 0 – CALCAGE]

DK/REF

PIV7 [IF CALCAGE GT 17 AND (PIV5 = 1 OR PIV6 GT 17)] Thinking about your biological father and his involvement in your life **before you turned 18**, would you say he was very involved, somewhat involved, or not at all involved?

[IF CALCAGE GT 17 AND PIV6 = 6 - 17] Thinking about your biological father and his involvement in your life before he died, would you say he was very involved, somewhat involved, or not at all involved?

[IF CALCAGE = 16 OR 17 AND PIV5 = 1] Thinking about your biological father and his involvement in your life, would you say he has been very involved, somewhat involved, or not at all involved?

[IF CALCAGE = 16 OR 17 AND PIV6 GT 5] Thinking about your biological father and his involvement in your life before he died, would you say he was very involved, somewhat involved, or not at all involved?

- 1 Very involved
- 2 Somewhat involved
- 3 Not at all involved

DK/REF

PIV8 [IF PIV4 = 1] Were your biological parents married to each other at the time you were born?

- 1 Yes
- 2 No

DK/REF

PIV9 [IF CALCAGE GT 17 AND PIV8 = 2 OR DK/REF] At any time between when you were born and when you turned 18, were your biological parents married to each other?

[IF CALCAGE = 16 OR 17 AND PIV8 = 2 OR DK/REF] At any time between when you were born and now, have your biological parents been married to each other?

- 1 Yes
- 2 No

DK/REF

PIV10 [IF CALCAGE GT 17 AND (PIV8 = 1 OR PIV9 = 1)] At any time between when you were born and when you turned 18, did your biological parents get divorced?

[IF CALCAGE = 16 OR 17 AND (PIV8 = 1 OR PIV9 = 1)] At any time between when you were born and now, did your biological parents get divorced?

- 1 Yes
- 2 No
- DK/REF

PIV11 [IF (PIV8 = 1 OR PIV9 = 1)] Between the time you were born and when you turned [min(18,CALCAGE)], about how long were your biological parents married to each other?

- 1 Less than 3 years
- 2 At least 3 years but less than 10 years
- 3 At least 10 years but less than CALCAGE years
- 4 CALCAGE years

DK/REF

PIV12 [IF CALCAGE GT 17 AND (PIV4=2 OR PIV6 < 6 OR PIV7 = 2 OR 3 OR DK/REF)] Before you turned 18 was there another man who was like a father to you?

[IF CALCAGE = 16 OR 17 AND (PIV4=2 OR PIV6 < 6 OR PIV7 = 2 OR 3 OR DK/REF)] Is there another man who has been like a father to you while you've been growing up?

- 1 Yes
- 2 No
- DK/REF

PIV13 [IF PIV12 = 1 AND CALCAGE GT 17] Who was the other man who was **most** like a father to you before you turned 18?

[IF PIV12 = 1 AND CALCAGE = 16 OR 17] Who is the other man who has been **most** like a father to you while you've been growing up?

- 1 An adoptive father
- 2 A stepfather
- 3 A foster father
- 4 Your mother's boyfriend
- 5 A grandfather
- 6 An uncle
- 7 A brother, including a stepbrother or half-brother
- 8 A cousin
- 9 A minister or member of the clergy
- 10 A teacher
- 11 A neighbor
- 12 Some other man

DK/REF

PIV14 Were you living with a male parent or a male parent-figure at the time you were **14 years old**?

- 1 Yes
- 2 No

DK/REF

PIV15 [IF PIV14 = 1] Who was the male parent or male parent-figure you were living with when you were **14 years old**?

- 1 Your biological father
- 2 Your adoptive father
- 3 Your stepfather
- 4 A foster father
- 5 Your mother's boyfriend
- 6 Your grandfather
- 7 Your uncle
- 8 Some other male parent-figure

DK/REF

PIV16 Were you living with a female parent or a female parent-figure at the time you were **14 years old**?

- 1 Yes
- 2 No

DK/REF

PIV17 [IF PIV16 = 1] Who was the female parent or female parent-figure you were living with when you were **14 years old**?

- 1 Your biological mother
- 2 Your adoptive mother
- 3 Your stepmother
- 4 A foster mother
- 5 Your father's girlfriend
- 6 Your grandmother
- 7 Your aunt
- 8 Some other female parent-figure

DK/REF

RESTRICTIVE HOUSING

RH0 Next, we would like to know about your experiences with solitary confinement at this facility. Solitary confinement can include administrative or disciplinary segregation and may also be called secure housing, the hole, lockdown, the SHU, or protective custody.

Touch the NEXT button to go to the next screen.

RH1 [IF A9a = 2 OR DK OR REF] **DOAFILL1**, have you spent any time in disciplinary or administrative segregation, or solitary confinement?

- 1 Yes
- 2 No [GO TO NEXT MODULE]
- DK/REF [GO TO NEXT MODULE]

RH2 [IF A9a = 1 OR RH1 = 1] **DOAFILL1**, how many different times have you been placed in disciplinary or administrative segregation, or solitary confinement?

- 1 1 time
- 2 2 times
- 3 3 - 5 times
- 4 6 – 10 times
- 5 11 times or more
- DK/REF

RH3 [IF RH2 = 1 OR DK OR REF] **DOAFILL1**, how many days did you spend in disciplinary or administrative segregation, or solitary confinement?

[IF RH2 > 1] **DOAFILL1**, how many days altogether have you spent in disciplinary or administrative segregation, or solitary confinement?

- 1 1 day or less
- 2 More than 1 day but less than 7 days
- 3 At least 7 days but less than 14 days
- 4 At least 14 days but less than 30 days
- 5 30 days or more
- DK/REF

RH4 [IF RH1 = 1] Please think about the [IF RH2 > 1, INCLUDE “**most recent**”] time **DOAFILL2** that you were placed in disciplinary or administrative segregation, or solitary confinement. Why do you think you were placed in-disciplinary or administrative segregation, or solitary confinement? Was it...

[IF A9a = 1] Why do you think you have been assigned to disciplinary or administrative segregation, or solitary confinement? Is it...

	Yes	No
RH4a. Because you were a danger to yourself?	1	2
RH4b. For mental health reasons?	1	2
RH4c. For medical reasons?	1	2
RH4d. Because you asked to be placed there for your own protection?	1	2
RH4e. As a punishment for breaking rules?	1	2
RH4f. For a cool down period?	1	2
RH4g. For some other reason?	1	2

DK/REF

RH7 [IF RH1 = 1 AND RH2 > 1] How long did you remain in disciplinary or administrative segregation, or solitary confinement the most recent time you were placed there?

- 1 1 day or less
 - 2 More than 1 day but less than 7 days
 - 3 At least 7 days but less than 14 days
 - 4 At least 14 days but less than 30 days
 - 5 30 days or more
- DK/REF

RH10 [IF RH1 = 1] Were you able to leave your cell at least once every day the [IF RH2>1, INCLUDE “**most recent**”] time you were in disciplinary or administrative segregation, or solitary confinement?

[IF A9a = 1] Are you able to leave your cell at least once every day?

- 1 Yes
 - 2 No
- DK/REF

RH13 [IF RH1 = 1] Were you able to talk to staff every day while you were in disciplinary or administrative segregation, or solitary confinement [IF RH2>1, INCLUDE “this **most recent** time”]?

[IF A9a = 1] Are you able to talk to staff every day in disciplinary or administrative segregation or solitary confinement?

- 1 Yes
 - 2 No
- DK/REF

RH14 [IF RH1 = 1] Did a trained counselor or mental health professional check on you while you were in disciplinary or administrative segregation, or solitary confinement [IF RH2>1, INCLUDE “this **most recent** time”]?

[IF A9a = 1] Has a trained counselor or mental health professional checked on you while you have been in disciplinary or administrative segregation, or solitary confinement?

- 1 Yes
 - 2 No
- DK/REF

RANDOM = 95, SKIP TO M0

CHILDHOOD EXPERIENCES

CE1 Next, we'll ask about some experiences you may have had growing up.

Which of the following experiences did you have **before age 18**?

	Yes	No
CE1a Did your mother or father die before you were 18?	1	2
CE1b Did your parents separate or divorce before you were 18?	1	2
CE1c Did either parent attempt or commit suicide?	1	2
CE1d Was either parent in prison or jail for 6 months or longer ?	1	2
CE1e Did either parent, or person who raised you, have a mental illness?	1	2
CE1f Did either parent, or person who raised you, have an alcohol or drug problem?	1	2
CE1g Were you sent to a juvenile detention center?	1	2

DK/REF

CE2 [IF CALCAGE GT 17] At any time **before you turned 18** did you live...

[IF CALCAGE = 16 OR 17] At any time since you were born have you lived...

	Yes	No
CE2a With your biological mother?	1	2
CE2b With your biological father?	1	2
CE2c In a foster home?	1	2

DK/REF

CE3 [IF CALCAGE GT 17] How often did you do each of the following things **before age 18**?

[IF CALCAGE = 16 OR 17] How often have you done each of the following things?

	Very Often	Often	Sometimes	Rarely	Never
CE3a. Bully or threaten other kids?	1	2	3	4	5
CE3b. Start fights?	1	2	3	4	5
CE3c. Run away from home and stay away overnight?	1	2	3	4	5
CE3d. Lie, or "con" other people?	1	2	3	4	5
CE3e. Set fires?	1	2	3	4	5
CE3f. Stay out very late, long after you were supposed to be home?	1	2	3	4	5
CE3g. Skip school?	1	2	3	4	5

DK/REF

CE4 [IF CALCAGE GT 17] How often did you do each of the following things **before age 18**?

[IF CALCAGE = 16 OR 17] How often have you done each of the following things?

	Very Often	Often	Sometimes	Rarely	Never
CE4a Argue, or “talk back,” to adults?	1	2	3	4	5
CE4b Disobey rules at home, school, or work?	1	2	3	4	5
CE4c Refuse to follow directions from adults like your parents, teacher, or boss?	1	2	3	4	5
CE4d Blame others for your mistakes or bad behavior?	1	2	3	4	5
CE4e Do mean things to “pay people back” for things they did that you didn’t like?	1	2	3	4	5

DK/REF

CE5 [IF CALCAGE GT 17] How often did you have each of the following experiences **before age 18**?

[IF CALCAGE = 16 OR 17] How often have you had each of the following experiences?

	Very Often	Often	Sometimes	Rarely	Never
CE5a Your family was on welfare?	1	2	3	4	5
CE5b You were homeless?	1	2	3	4	5
CE5c You had to do chores too hard or dangerous for someone your age?	1	2	3	4	5
CE5d You didn’t have anyone who would take care of you or protect you?	1	2	3	4	5
CE5e Nobody ensured you had adequate food or clothing or medical care?	1	2	3	4	5
CE5f Someone touched you or made you touch them in a sexual way against your will?	1	2	3	4	5
CE5g You were sexually abused at home?	1	2	3	4	5
CE5h You were beaten up or terrorized by bullies at school or in the neighborhood?	1	2	3	4	5

DK/REF

CE6 [IF CALCAGE GT 17] How often did you have each of the following experiences **before age 18**?

[IF CALCAGE = 16 OR 17] How often have you had each of the following experiences?

	Very Often	Often	Sometimes	Rarely	Never
CE6a Someone in your family hit you so hard that it left bruises or marks?	1	2	3	4	5
CE6b You were physically abused at home?	1	2	3	4	5
CE6c You felt that someone in your family hated you?	1	2	3	4	5
CE6d You were emotionally abused at home?	1	2	3	4	5
CE6e People in your family said hurtful or insulting things to you?	1	2	3	4	5
CE6f Someone in your family made you feel important?	1	2	3	4	5
CE6g You felt loved and cared for?	1	2	3	4	5
CE6h Your family was a source of strength and support?	1	2	3	4	5

DK/REF

LIVING AREA AND ACTIVITIES

DEFINE A9c_FILL:

IF A9c=1, A9c_FILL= "an open dorm"

IF A9c=2, A9c_FILL= "a dorm with cubicles"

IF A9c=3, A9c_FILL= "a unit with cells"

IF A9c=4, A9c_FILL= "a unit with rooms"

IF A9c=5, A9c_FILL= "an area not originally intended as housing, such as a gym, classroom, or day room"

LA_2 These questions are about this prison and how inmates are housed here.

[IF A9c = 1 OR 2 OR 3 OR 4 OR 5]: **Earlier you said you spent last night in [A9c_FILL].**
Including you, about how many inmates are **currently** housed in this housing unit?

[IF A9c=6 OR DK OR REF]: Including you, about how many inmates are **currently** housed in the housing unit where you spent last night?

- 1 1
- 2 2 - 5
- 3 6 - 10
- 4 11 - 15
- 5 16 - 30
- 6 31 or more
- DK/REF

LA_3 Does your housing unit have any windows that allow the sun to shine in during the day?

- 1 Yes
- 2 No
- DK/REF

LA_4 How noisy is it in your housing unit during sleeping hours?

- 1 Not at all noisy
- 2 Slightly noisy
- 3 Pretty noisy
- 4 Very noisy
- DK/REF

LA_17 How crowded is it in your housing unit?

- 1 Not at all crowded
- 2 Slightly crowded
- 3 Pretty crowded
- 4 Very crowded
- DK/REF

LA_18 How much privacy do you have in your housing unit?

- 1 None
 - 2 A little
 - 3 Some
 - 4 A lot
- DK/REF

LA_5 How often is it too hot in your housing unit?

- 1 All of the time
 - 2 Most of the time
 - 3 Some of the time
 - 4 Never
- DK/REF

LA_6 How often is it too cold in your housing unit?

- 1 All of the time
 - 2 Most of the time
 - 3 Some of the time
 - 4 Never
- DK/REF

LA_7 How often do you see mice, rats, bugs, or insects in your housing unit?

- 1 All of the time
 - 2 Most of the time
 - 3 Some of the time
 - 4 Never
- DK/REF

LA_19 How crowded is it in other parts of the facility, outside of your housing unit – for example, in the dining hall, classrooms, gym, or work areas?

- 1 Not at all crowded
 - 2 Slightly crowded
 - 3 Pretty crowded
 - 4 Very crowded
- DK/REF

LA_8 **During the last 24 hours**, about how many hours did you spend in your housing unit? Please include time when you were sleeping.

NUMBER OF HOURS: _____ [RANGE: 1 – 24]
DK/REF

LA_9 **During the last 24 hours**, did you spend any time outdoors?

- 1 Yes
 - 2 No
- DK/REF

LA_10 [IF LA_9 = 1] **During the last 24 hours**, about how much time did you spend outdoors?

- 1 Less than 30 minutes
- 2 At least 30 minutes but less than 1 hour
- 3 At least 1 hour but less than 2 hours
- 4 At least 2 hours but less than 5 hours
- 5 5 hours or more

DK/REF

LA_11 **During the past 24 hours**, about how many hours did you spend sleeping?

- 1 Less than 30 minutes
- 2 At least 30 minutes but less than 1 hour
- 3 At least 1 hour but less than 2 hours
- 4 At least 2 hours but less than 5 hours
- 5 At least 5 hours but less than 7 hours
- 6 At least 7 hours but less than 9 hours
- 7 9 hours or more

DK/REF

LA_12 The next questions are about how you spend your time at this prison. Please think about how you spent the **last 24 hours**.

During the **last 24 hours**, did you...

	Yes	No
LA_12a. Attend a class or training?	1	2
LA_12b. Exercise or work out?	1	2
LA_12c. Watch television?	1	2
LA_12d. Read books, newspapers or magazines?	1	2
LA_12e. Work at a job?	1	2
LA_12f. Participate in religious meetings or activities?	1	2
LA_12g. Have in-person visits with family or friends?	1	2
LA_12h. Talk on the telephone with family or friends?	1	2
LA_12i. Play games like cards, chess, checkers, or sports with other inmates?	1	2
LA_12j. Talk with your lawyer – either in person or on the telephone?	1	2
LA_12k. Visit the library?	1	2
LA_12l. Visit the infirmary or medical ward?	1	2

DK/REF

LA_14 Now think about how you spent your time **during the past 7 days**. Did you do any of the following things during the **past 7 days**?

	Yes	No
LA_14a. [IF LA_12a = 2 OR DK OR REF] Attend a class or training?	1	2
LA_14b. [IF LA_12b = 2 OR DK OR REF] Exercise or work out?	1	2
LA_14c. [IF LA_12c = 2 OR DK OR REF] Watch television?	1	2
LA_14d. [IF LA_12d = 2 OR DK OR REF] Read books, newspapers or magazines?	1	2
LA_14e. [IF LA_12e = 2 OR DK OR REF] Work at a job?	1	2
LA_14f. [IF LA_12f = 2 OR DK OR REF] Participate in religious meetings or activities	1	2
LA_14g. [IF LA_12g = 2 OR DK OR REF] Have in-person visits with family or friends?	1	2
LA_14h. [IF LA_12h = 2 OR DK OR REF] Talk on the telephone with family or friends?	1	2
LA_14i. [IF LA_12i = 2 OR DK OR REF] Play games with other inmates such as cards, chess, checkers, or sports?	1	2
LA_14j. [IF LA_12j = 2 OR DK OR REF] Talk with your lawyer – either in person or on the telephone?	1	2
LA_14k. [IF LA_12k = 2 OR DK OR REF] Visit the library?	1	2
LA_14l. [IF LA_12l = 2 OR DK OR REF] Visit the infirmary or medical ward?	1	2

DK/REF

LA_15 How would you describe the **amount** of food you **currently** receive at this facility?

- 1 There is too much food
- 2 There is just the right amount of food
- 3 There is not enough food

DK/REF

LA_16 How would you describe the **quality** of the food you **currently** receive at this facility?

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair
- 5 Poor

DK/REF

LA_20 Are there inmates in this facility who you think of as your friends?

- 1 Yes
- 2 No

DK/REF

LA_21 Are there inmates in this facility who you can talk to about your problems?

- 1 Yes
- 2 No

DK/REF

LA_22 Are there inmates in this facility who would protect you if another inmate was trying to hurt you?

- 1 Yes
- 2 No
- DK/REF

LA_23 Are there correctional officers or other staff at this facility who you can talk to about your personal problems?

- 1 Yes
- 2 No
- DK/REF

LA_24 Are there correctional officers or other staff at this facility who would protect you if another inmate was trying to hurt you?

- 1 Yes
- 2 No
- DK/REF

ALTERCATIONS, FIGHTS AND GRIEVANCES

AFG2 These next questions are about violence in this facility.

DOAFILL1, how often have inmates at this facility been hit, punched, or assaulted by other inmates?

- 1 Frequently
- 2 Sometimes
- 3 Rarely
- 4 Never
- DK/REF

AFG3 DOAFILL1, how often have **you** worried about being hit, punched, or assaulted by other inmates in this facility?

- 1 Frequently
- 2 Sometimes
- 3 Rarely
- 4 Never
- DK/REF

AFG4 DOAFILL1, how often have you **seen** other inmates with some type of weapon?

- 1 Frequently
- 2 Sometimes
- 3 Rarely
- 4 Never
- DK/REF

AFG5 DOAFILL1, how **often has there been** gang activity at this facility?

- 1 Frequently
- 2 Sometimes
- 3 Rarely
- 4 Never
- DK/REF

AFG6 DOAFILL1, have **you** been in a fight, assault, or incident in which **another inmate** tried to harm you?

- 1 Yes
- 2 No
- DK/REF

AFG7 [IF AFG6 = 1] **DOAFILL1**, how many times have you been in a fight, assault, or other incident in which **another inmate** tried to harm you?

- 1 1 time
- 2 2 times
- 3 3 – 10 times
- 4 11 times or more
- DK/REF

AFG8 [IF AFG6 = 1 AND AFG7 = 1] **DOAFILL1**, what injuries did you receive in the fight, assault, or incident in which **another inmate** tried to harm you?

[IF AFG6 = 1 AND AFG7 = 2 OR 3 OR 4 OR DK OR REF] **DOAFILL1**, what injuries did you receive during **any** of the fights, assaults, or incidents in which **another inmate** tried to harm you?

	Yes	No
AFG8a. You received knife or stab wounds?	1	2
AFG8b. You received broken bones?	1	2
AFG8c. Your teeth were chipped or knocked out?	1	2
AFG8d. You received internal injuries?	1	2
AFG8e. You were knocked unconscious?	1	2
AFG8f. You received bruises, a black eye, sprains, cuts, scratches, swelling, welts, or burns?	1	2

DK/REF

AFG9 [IF AFG8a = 1 OR AFG8b = 1 OR AFG8c = 1 OR AFG8d = 1 OR AFG8e = 1 OR AFG8f = 1] Did you see a doctor, nurse, or other health care provider for your injuries?

- 1 Yes
2 No

DK/REF

AFG10 **DOAFILL1**, have you been in a fight, assault, or incident in which a **correctional officer or other facility staff person** tried to harm you?

- 1 Yes
2 No

DK/REF

AFG11 [IF AFG10 = 1] **DOAFILL1**, how many times have you been in a fight, assault, or incident in which a **correctional officer or other facility staff person** tried to harm you?

- 1 1 time
2 2 times
3 3 – 10 times
4 11 times or more

DK/REF

AFG12 [IF AFG10 = 1 AND AFG11 = 1] **DOAFILL1**, what injuries did you receive in the fight, assault, or incident in which a **correctional officer or other facility staff person** tried to harm you?

[IF AFG10 = 1 AND AFG11 = 2 OR 3 OR 4 OR DK OR REF] **DOAFILL1**, what injuries did you receive in **any** of the fights, assaults, or incidents in which a **correctional officer or other facility staff person** tried to harm you?

	Yes	No
AFG12a. You received knife or stab wounds?	1	2
AFG12b. You received broken bones?	1	2
AFG12c. Your teeth were chipped or knocked out?	1	2
AFG12d. You received internal injuries?	1	2
AFG12e. You were knocked unconscious?	1	2
AFG12f. You received bruises, a black eye, sprains, cuts, scratches, swelling, welts, or burns?	1	2

DK/REF

AFG13 [IF AFG12a = 1 OR AFG12b = 1 OR AFG12c = 1 OR AFG12d = 1 OR AFG12e = 1 OR AFG12f = 1] Did you see a doctor, nurse, or other health care provider for your injuries?

1 Yes

2 No

DK/REF

AFG14 **DOAFILL1**, have any of your personal possessions or belongings been taken by another inmate without your permission?

1 Yes

2 No

DK/REF

AFG15 [IF AFG14 = 1] **DOAFILL1**, how many times have any of your personal possessions or belongings been taken by another inmate without your permission?

1 1 time

2 2 times

3 3 – 10 times

4 11 times or more

DK/REF

AFG16 **DOAFILL1**, do you think there has been enough staff at this facility to keep inmates safe?

1 Yes

2 No

DK/REF

AFG17 **DOAFILL1**, have you filed a grievance for any reason?

1 Yes

2 No

DK/REF

AFG18 [IF AFG17 = 1] **DOAFILL1**, how many times have you filed a grievance for any reason?

- 1 1 time
 - 2 2 times
 - 3 3 – 10 times
 - 4 11 times or more
- DK/REF

AFG1 DOAFILL1, have you been written up or charged with...

	Yes	No
AFG1a. A drug violation, such as possession, use, or dealing in drugs?	1	2
AFG1b. Possession of a weapon?	1	2
AFG1c. Possession of stolen property?	1	2
AFG1d. Possession of any other unauthorized substance or item?	1	2
AFG1e. Verbal assault on a correctional officer or other staff member?	1	2
AFG1f. Physical assault on a correctional officer or other staff member?	1	2
AFG1g. Verbal assault on another inmate?	1	2
AFG1h. Physical assault on another inmate?	1	2
AFG1i. Escape or attempted escape?	1	2
AFG1j. Any other major violation, including work slowdowns, food strikes, setting fires, rioting, etc.?	1	2
AFG1k. Any minor violations relating to facility orderliness and operation, such as use of abusive language, horseplay, failing to follow sanitary regulations, etc.?	1	2

DK/REF

WORK ASSIGNMENTS

WA1 Now think about work assignments at this facility.

Do you **currently** have a work assignment **outside** this prison facility for which you leave the prison grounds?

- 1 Yes
- 2 No

DK/REF

WA2 [IF WA1 = 1] For how many weeks have you been working at this work assignment that requires you to leave the prison grounds?

- 1 Less than 1 week
- 2 1 – 5 weeks
- 3 6 – 12 weeks
- 4 13 weeks or longer

DK/REF

WA3 [IF WA1 = 1] In the **past 7 days**, about how many hours did you work **outside** the prison facility?

- 1 1 – 8 hours
- 2 9 – 16 hours
- 3 17 – 24 hours
- 4 25 – 32 hours
- 5 33 hours or more

DK/REF

WA4 Do you **currently** have a work assignment inside this prison or on the grounds of the prison?

- 1 Yes
- 2 No

DK/REF

WA5 [IF WA4 = 1] For how many weeks have you been working at this work assignment inside the prison or on the grounds of the prison?

- 1 Less than 1 week
- 2 1 – 5 weeks
- 3 6 – 12 weeks
- 4 13 weeks or longer

DK/REF

WA6 [IF WA4 = 1] In the **past 7 days**, about how many hours did you work inside this prison or on the grounds of the prison?

- 1 1 – 8 hours
- 2 9 – 16 hours
- 3 17 – 24 hours
- 4 25 – 32 hours
- 5 33 hours or more

DK/REF

WA7 [IF WA1 = 1 OR WA4 = 1] Are you **required** to have a work assignment while in this prison?

- 1 Yes
- 2 No

DK/REF

WA8 [IF WA1 = 1 OR WA4 = 1] Are you paid money for the work assignment you have?

- 1 Yes
- 2 No

DK/REF

WA9 [IF WA8 = 1] Other than money, do you receive anything else for the work assignment you do, such as time credits or other privileges?

[IF WA8 = 2 OR DK OR REF] Do you receive anything else for the work assignment you do, such as time credits or other privileges?

- 1 Yes
- 2 No

DK/REF

WA10 [IF WA7 = 2] Inmates choose to have a work assignment for different reasons. Do you have a work assignment...

	Yes	No
WA10a. To break up boredom or see what the work assignment is like?	1	2
WA10b. To spend time with friends or make friends?	1	2
WA10c. To try to get out of prison early?	1	2
WA10d. To learn some new job skills?	1	2
WA10e. To earn spending money?	1	2

DK/REF

WA11 [IF WA1 = 2 AND WA4 = 2] **DOAFILL1**, have you **ever** had a work assignment?

- 1 Yes
- 2 No

DK/REF

WA12 [IF WA11 = 1] When was the last time you had a work assignment at this prison?

- 1 Within the past month
- 2 1 – 3 months ago
- 3 4 – 6 months ago
- 4 7 – 12 months ago

DK/REF

WA13 [IF WA11 = 1 OR 2] Inmates do not have work assignments for a variety of reasons. For each reason listed below, please indicate whether or not it is a reason why you don't **currently** have a work assignment.

	Yes	No
WA13a. You are not healthy enough to work?	1	2
WA13b. You don't want to do the jobs that are available?	1	2
WA13c. Facility staff will not allow you to work?	1	2
WA13d. You don't have the skills needed?	1	2
WA13e. You would rather do other things with your time?	1	2

DK/REF

PROGRAM PARTICIPATION

PP_1 These next questions are about programs you have participated in at this facility.

DOAFILL1, have you participated in any job training programs, such as employment readiness or vocational training?

- 1 Yes
- 2 No

DK/REF

PP_2 [IF PP_1 = 1] **DOAFILL1**, were you **required** to participate in any job training programs?

- 1 Yes
- 2 No

DK/REF

PP_3 [IF PP_1 = 1] Are you **currently** participating in any job training programs?

- 1 Yes
- 2 No

DK/REF

PP_4 [IF PP_3 = 2] Why aren't you participating in any job training programs?

	Yes	No
PP_4a. You completed the program?	1	2
PP_4b. You quit or dropped out of the program?	1	2
PP_4c. You are no longer allowed to participate in the program?	1	2
PP_4d. The program is no longer available at this facility?	1	2
PP_4e. Some other reason?	1	2

DK/REF

PP_5 [IF PP_1 = 2] Why haven't you participated in any job training programs **DOAFILL2**?

	Yes	No
PP_5a. You are not interested in the program?	1	2
PP_5b. You are not eligible to participate in the program?	1	2
PP_5c. You are too busy to attend the program?	1	2
PP_5d. You don't need job training?	1	2
PP_5e. You don't think the program would be useful?	1	2
PP_5f. Job training programs are no longer offered at this facility?	1	2
PP_5g. Some other reason?	1	2

DK/REF

PP_6 [IF PP_1 = 1] Why did you participate in job training programs **DOAFILL2**?

	Yes	No
PP_6a. To break up boredom or see what the program was like?	1	2
PP_6b. To spend time with friends or make friends?	1	2
PP_6c. To try to get out of prison early?	1	2
PP_6d. To learn some new skills?	1	2
PP_6e. Some other reason?	1	2

DK/REF

PP_7 **DOAFILL1**, have you participated in any education programs, such as high school, GED, adult basic education, college courses, or English as a Second Language?

- 1 Yes
- 2 No

DK/REF

PP_8 [IF PP_7 = 1] **DOAFILL1**, were you **required** to participate in any education programs?

- 1 Yes
- 2 No

DK/REF

PP_9 [IF PP_7 = 1] Are you **currently** participating in any education programs?

- 1 Yes
- 2 No

DK/REF

PP_10 [IF PP_9 = 2] Why aren't you participating in any education programs?

	Yes	No
PP_10a. You completed the program?	1	2
PP_10b. You quit or dropped out of the program?	1	2
PP_10c. You are no longer allowed to participate in the program?	1	2
PP_10d. The program is no longer available at this facility?	1	2
PP_10e. Some other reason?	1	2

DK/REF

PP_11 [IF PP_7 = 2] Why haven't you participated in any education programs **DOAFILL2**?

	Yes	No
PP_11a. You are not interested in the program?	1	2
PP_11b. You are not eligible to participate in the program?	1	2
PP_11c. You are too busy to attend the program?	1	2
PP_11d. You don't need education training?	1	2
PP_11e. You don't think the program would be useful?	1	2
PP_11f. Education programs are no longer offered at this facility?	1	2
PP_11g. Some other reason?	1	2

DK/REF

PP_12 [IF PP_7 = 1] Why did you participate in education programs **DOAFILL2**?

	Yes	No
PP_12a. To break up boredom or see what the program was like?	1	2
PP_12b. To spend time with friends or make friends?	1	2
PP_12c. To try to get out of prison early?	1	2
PP_12d. To learn some new skills?	1	2
PP_12e. Some other reason?	1	2

DK/REF

PP_13 [IF PP_7 = 1] What types of education programs did you participate in **DOAFILL2**?

	Yes	No
PP_13a. Basic education classes up through 8 th grade?	1	2
PP_13b. High school or GED classes?	1	2
PP_13c. College level classes?	1	2
PP_13d. English as a Second Language or ESL classes?	1	2
PP_13e. Some other education program?	1	2

DK/REF

PP_14 **DOAFILL1**, have you participated in any of the following classes or programs?

	Yes	No
PP_14a. A parenting or child rearing class?	1	2
PP_14b. An anger management or conflict resolution class?	1	2
PP_14c. A money management or financial planning class?	1	2
PP_14d. A sex offender treatment program?	1	2
PP_14e. A religious study group?	1	2
PP_14f. A prisoner assistance group such as a prisoner counseling group, advisory council, worker's council, or inmate liaison group?	1	2
PP_14g. A drug or alcohol support group such as Alcoholics Anonymous, Al-Anon, or Narcotics Anonymous?	1	2
PP_14h. An arts and crafts program?	1	2
PP_14i. A health or nutrition program?	1	2

DK/REF

PP_15 [IF ANY ITEMS IN PP_14 = 1] Are you **currently** participating in any of the following classes or programs?

	Yes	No
PP_15a. [IF PP_14a = 1] A parenting or child rearing class?	1	2
PP_15b. [IF PP_14b = 1] An anger management or conflict resolution class?	1	2
PP_15c. [IF PP_14c = 1] A money management or financial planning class?	1	2
PP_15d. [IF PP_14d = 1] A sex offender treatment program?	1	2
PP_15e. [IF PP_14e = 1] A religious study group?	1	2
PP_15f. [IF PP_14f = 1] A prisoner assistance group such as a prisoner counseling group, advisory council, worker's council, or inmate liaison group?	1	2
PP_15g. [IF PP_14g = 1] A drug or alcohol support group such as Alcoholics Anonymous, Al-Anon, or Narcotics Anonymous?	1	2
PP_15h. [IF PP_14h = 1] An arts and crafts program?	1	2
PP_15i. [IF PP_14i = 1] A health or nutrition program?	1	2

DK/REF

VISITORS AND OUTSIDE CONTACT

VOC_1 These next questions are about contact you have with people outside this facility. By contact we mean phone calls, video visits, e-mails, text messages, letters, DVDs, CDs, tape recordings, or in-person visits.

DOAFILL1, have you had **any** contact with your relatives?

- 1 Yes
- 2 No
- DK/REF

VOC_2 [IF VOC_1 = 1] **DOAFILL1**, what kinds of contact have you had with any of your **relatives**?
Have you...

	YES	NO
VOC_2a. Had in-person visits?	1	2
VOC_2b. Talked on the phone?	1	2
VOC_2c. Received letters?	1	2
VOC_2d. Had some other type of contact such as emails, text messaging, video visiting, DVDs, CDs, or tape recordings?	1	2

DK/REF

VOC_3 [IF VOC_2a = 1 OR VOC_2b = 1 OR VOC_2c = 1 OR VOC_2d = 1] When was the last time you had any kind of contact with your **relatives**?

- 1 Within the past day
- 2 More than a day ago but within the past week
- 3 More than a week ago but within the past month
- 4 More than a month ago but within the past 3 months
- 5 More than 3 months ago but within the past 6 months
- 6 More than 6 months ago

DK/REF

VOC_4 [IF VOC_1 = 2] Why do you think you have not had any kind of contact with your **relatives** **DOAFILL2?** Do you think it is because...

	YES	NO
VOC_4a. They live too far away?	1	2
VOC_4b. They cannot afford to travel to this prison?	1	2
VOC_4c. They don't want to see you while you are incarcerated?	1	2
VOC_4d. You are not allowed to have visitors?	1	2
VOC_4e. You do not want to have visitors?	1	2
VOC_4f. They are not healthy enough to travel?	1	2

DK/REF

VOC_5 **DOAFILL1**, have you had **any** contact with your **friends or acquaintances**?

- 1 Yes
- 2 No
- DK/REF

VOC_6 [IF VOC_5 = 1] **DOAFILL1**, what kinds of contact have you had with **your friends or acquaintances**? Have you...

	YES	NO
VOC_6a. Had in-person visits?	1	2
VOC_6b. Talked on the phone?	1	2
VOC_6c. Received letters?	1	2
VOC_6d. Had some other type of contact such as emails, text messaging, video visiting, DVDs, CDs, or tape recordings?	1	2

DK/REF

VOC_7 [IF VOC_6a = 1 OR VOC_6b = 1 OR VOC_6c = 1 OR VOC_6d = 1] When was the last time you had any kind of contact with your **friends or acquaintances**?

- 1 Within the past day
- 2 More than a day ago but within the past week
- 3 More than a week ago but within the past month
- 4 More than a month ago but within the past 3 months
- 5 More than 3 months ago but within the past 6 months
- 6 More than 6 months ago

DK/REF

VOC_8 [IF VOC_5 = 2] Why do you think you have not had any kind of contact with **your friends or acquaintances DOAFILL2**? Do you think it is because...

	YES	NO
VOC_8a. They live too far away?	1	2
VOC_8b. They cannot afford to travel to this prison?	1	2
VOC_8c. They don't want to see you while you are incarcerated?	1	2
VOC_8d. You are not allowed to have visitors?	1	2
VOC_8e. You do not want to have visitors?	1	2
VOC_8f. They are not healthy enough to travel?	1	2

DK/REF

POST-RELEASE PLANS

PRP1 [IF B24 NE 1] These last questions are about plans you may have for **after** you are released from this facility.

Do you have a definite date on which you expect to be released from prison?

- 1 Yes
- 2 No

DK/REF

PRP2 [IF PRP1 = 1] In what year do you think you will be released from prison?

- 1 [CURRENT YEAR]
- 2 [CURRENT YEAR + 1]
- 3 [CURRENT YEAR +2]
- 4 [CURRENT YEAR + 3]
- 5 [CURRENT YEAR + 4]
- 6 [CURRENT YEAR + 5]
- 7 [CURRENT YEAR + 6] or later

DK/REF

PRP3 [IF PRP1 = 2 OR DK OR REF] Do you expect to **ever** be released from prison?

- 1 Yes
- 2 No

DK/REF

PRP4 [IF PRP3 = 1] In what year is your **earliest possible** release date?

- 1 [CURRENT YEAR]
- 2 [CURRENT YEAR + 1]
- 3 [CURRENT YEAR +2]
- 4 [CURRENT YEAR + 3]
- 5 [CURRENT YEAR + 4]
- 6 [CURRENT YEAR + 5]
- 7 [CURRENT YEAR + 6] or later

DK/REF

PRP14 [IF B24 NE 1] How far is this prison from where you were living before you entered prison on your **current** incarceration?

- 1 Less than 5 miles
- 2 5 – 10 miles
- 3 11 – 20 miles
- 4 21 – 50 miles
- 5 51 – 100 miles
- 6 101 – 500 miles
- 7 501 miles or more

DK/REF

PRP5 [IF PRP3 NE 2 OR PRP1=1] Do you have a plan for where you will live after you are released from prison?

- 1 Yes
2 No
DK/REF

PRP6 [IF PRP5 = 1] Did any staff at this prison help you make plans for where you will live after you are released from prison?

- 1 Yes
2 No
DK/REF

PRP7 [IF PRP5 = 1] Do you think you will live alone after you are released from prison or do you think you will live with other people?

- 1 Will live alone
2 Will live with other people
DK/REF

PRP8 [IF PRP7 = 2] **Who** do you plan to live with after you are released from prison?

	Yes	No
PRP8a. [IF D1 = 1] Your husband or wife?	1	2
PRP8b. Your boyfriend or girlfriend?	1	2
PRP8c. Your parents or step-parents?	1	2
PRP8d. Your brother or sister?	1	2
PRP8e. Your children who are younger than 18?	1	2
PRP8f. Your children who are at least 18 years old?	1	2
PRP8g. Your grandparents?	1	2
PRP8h. Your grandchildren?	1	2
PRP8i. Some other relative, such as an aunt, uncle, or cousin?	1	2
PRP8j. Someone you are not related to?	1	2

DK/REF

PRP9 [IF PRP5 = 1] **Where** do you plan to live after you are released from prison?

	Yes	No
PRP9a. In your own house, apartment, condo or mobile home?	1	2
PRP9b. In someone else's house, apartment, condo or mobile home?	1	2
PRP9c. In transitional housing for former inmates such as a halfway house?	1	2
PRP9d. In a residential treatment facility?	1	2
PRP9e. In a rooming house, hotel, or motel?	1	2
PRP9f. In a car, truck, or other motor vehicle?	1	2
PRP9g. In a homeless shelter, on the street, or in some outdoor location?	1	2
PRP9h. In some other place?	1	2

DK/REF

INTERVIEW DEBRIEFING

M0 Thank you for completing the survey. Now we have a few questions about your experience with this interview.

Touch the **NEXT** button to go to the next screen.

M1 How difficult was it for you to use the computer to do this survey?

- 1 Not difficult at all
- 2 Sort of difficult
- 3 Very difficult
- DK/REF

DEFINE InterviewTypeFill:

IF RANDOM = 95, then InterviewTypeFill = “your own experiences with sex and sexual assault in this facility”

IF RANDOM = 5, then InterviewTypeFill = “your childhood and your experiences at this facility”

M2 How comfortable did you feel using the computer to answer questions about [InterviewTypeFill]?

- 1 Very comfortable
- 2 Somewhat comfortable
- 3 Somewhat uncomfortable
- 4 Very uncomfortable
- DK/REF

M3. How upsetting did you find it to answer questions about [InterviewTypeFill]?

- 1 Not upsetting at all
- 2 Somewhat upsetting
- 3 Very upsetting
- DK/REF

M4. How accurate are the answers you entered into the computer?

- 1 Not very accurate
- 2 Fairly accurate
- 3 Very accurate
- DK/REF

M5 Did anyone tell you directly that you were required to participate in this study?

- 1 Yes
- 2 No
- DK/REF

M6 [IF M5 = 1] Who told you that you were required to participate in this study?

- 1 A facility staff person
- 2 An interviewer from RTI
- 3 Another inmate
- 4 Someone else
- DK/REF

- M7 [IF M6 = 2] Were you **ever** made to feel that you were required to participate in this study?
- 1 Yes
2 No
DK/REF
- M8. Did anyone put pressure on you to answer the survey questions in a certain way?
- 1 Yes
2 No
DK/REF
- M9. [IF M8 = 1] Who pressured you to answer the survey questions in a certain way?
- 1 A facility staff person
2 An interviewer from RTI
3 Another inmate
4 Someone else
DK/REF
- M10. [IF M8 = 1 AND RANDOM = 95] Are there any types of sex or sexual contact that you didn't report in this survey because someone pressured you not to?
- 1 Yes
2 No
DK/REF
- M11. That is all the questions we have. If you found the survey questions upsetting for any reason, your interviewer can tell you how to contact a mental health counselor employed by this facility. Thank you very much for participating in this study.
- M11a. Please tell your interviewer that you have completed the survey.
- M12. THANK INMATE FOR PARTICIPATING.
- NOTIFY OFFICER THAT THE INMATE IS FINISHED AND CAN LEAVE THE INTERVIEW ROOM. AFTER THE INMATE LEAVES THE ROOM, ENTER THE PASSWORD TO CONTINUE ON TO YOUR DEBRIEFING QUESTIONS.
- ENTER PASSWORD TO CONTINUE.
- NOTE TO PROGRAMMER: WE'LL NEED A SHORT PASSWORD SO THAT RESPONDENTS CAN'T GO ANY FURTHER IN THE INTERVIEW. THE LAST SET OF DEBRIEFING QUESTIONS WILL BE FOR THE INTERVIEWER.**
- M13. Estimate the respondent's understanding of the interview
- 1 No difficulty – no language or reading problem
2 Some difficulty
3 A great deal of difficulty
- M14 Please record any comments the respondent made about the nature of the questions or the task of answering the questions during either the CAPI or ACASI portions of the interview.
-

ALLOW 150 CHARACTERS

M15 How upset did the respondent appear to be during the ACASI portion of the interview?

- 1 Not upset at all
- 2 Somewhat upset
- 3 Very upset

M16 [IF M15 = 2 OR 3] Please provide any details you can about why this inmate appeared to be somewhat or very upset during the ACASI portion of the interview.

ALLOW 150 CHARACTERS

M17 Did this inmate complete the interview while wearing shackles?

- 1 Yes
- 2 No

M18. Did this inmate complete the interview while wearing handcuffs?

- 1 Yes
- 2 No

M19. Did the inmate complain to you about how long they had to wait to be seen by an interviewer?

- 1 Yes
- 2 No

M20 How much difficulty did you have persuading this inmate to participate in the NIS?

- 1 No difficulty – the inmate was eager to participate
- 2 Just a little difficulty – the inmate was willing, but not eager, to participate
- 3 Some difficulty – the inmate wasn't willing but you were able to persuade him/her
- 4 Quite a lot of difficulty – you had to really work to counter the inmate's objections
- 5 This inmate had previously refused to participate and you were working the case as a refusal converter

M21 Indicate the degree of distractions or interruptions during the interview.

- 1 None
- 2 A few
- 3 A lot

M22 Was the privacy of the interview setting compromised at any point during the interview?

- 1 Yes
- 2 No

M23 [IF M22 = 1] In what way was the privacy of the interview setting compromised during this interview?

ALLOW 150 CHARACTERS

M24 [IF I3 = 1] Did the inmate take the incentive that was offered?

- 1 YES
- 2 NO

M26 PLEASE PROVIDE ANY OTHER COMMENTS ABOUT THE INTERVIEW THAT WOULD BE USEFUL FOR THE PROJECT TEAM TO KNOW:

ALLOW 150 CHARACTERS

REVIEW INTERVIEWER: YOU HAVE REACHED THE END OF THE INTERVIEW. ENTER 1 AND TOUCH THE FINISH BUTTON BELOW TO FINALIZE THIS CASE AND RETURN TO THE CASE MANAGEMENT SYSTEM.

Attachment D Contents

Four PAPI questionnaires are included in the attachment, as described below:

Form 1: Intended for female inmates who have been in the facility for 12 months or longer.

Form 2: Intended for male inmates who have been in the facility for 12 months or longer.

Form 3: Intended for female inmates who have been in the facility for a period less than 12 months.

Form 4: Intended for male inmates who have been in the facility for a period less than 12 months.

OMB No.: XXXX-XXXX
Exp.: XX/XX/XXXX



NATIONAL INMATE SURVEY - PRISONS

Conducted by the Bureau of Justice Statistics
and
RTI International

NOTICE: Public reporting for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is XXXX-XXXX.

SECTION A

Please answer the question in the space provided or mark your answer in the box, like this . To protect your privacy, do not put your name on this survey.

1. On what date were you admitted to this facility?

If you cannot remember the exact date, please write down whatever you can remember, such as the year and the month.

_____/_____/_____
 Month Day Year

2. How old are you?

Age: _____

3. Are you of Hispanic, Latino, or Spanish origin?

Yes..... ₁

No ₂

4. Which of these categories describes your race:

<i>Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.</i>	Yes	No
White	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Black or African American	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
American Indian or Alaska Native	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Asian	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Native Hawaiian or other Pacific Islander	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

5. What is the highest level of school you have completed?

Less than a high school graduate..... ₁

High school graduate or GED ₂

Some college ₃

College degree or more ₄

6. Are you currently being held in this facility for any of the following:

<i>Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.</i>	Yes	No
A violent offense, such as physical or sexual assault, rape, robbery, manslaughter, attempted murder, or murder?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
A drug offense, such as possessing, selling, or manufacturing drugs?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
A property offense, such as burglary, larceny, auto theft, bad checks, fraud, forgery or grand theft?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Any other offense?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

7. How long have you been in this facility?

Less than 1 week..... ₁

At least 1 week but less than 1 month ₂

At least 1 month but less than 2 months ₃

At least 2 months but less than 6 months..... ₄

At least 6 months but less than 1 year ₅

At least 1 year but less than 5 years..... ₆

At least 5 years but less than 10 years ₇

10 years or more ₈

8. Before you were admitted to this facility, had you ever spent time as an adult or juvenile in a prison, jail, or other correctional facility?

Yes ₁

No ₂

9. Which of the following best represents how you think about yourself?

Straight, that is **not** lesbian or gay ₁

Lesbian or gay..... ₂

Bisexual, that is, you are sexually attracted to both men and women..... ₃

Something else..... ₄

10. What sex was recorded on your original birth certificate?

Male.....₁
 Female.....₂

11. Do you currently think of yourself as...?

Male.....₁
 Female.....₂
 Transgender.....₃
 None of these.....₄

12. Before you entered this facility, had anyone ever physically forced, pressured, or made you feel you had to have sex or sexual contact—that is unwanted touching of the breasts, genitals or butt, or vaginal, oral, or anal sex?

Yes.....₁ *Continue to item 13*
 No.....₂ *Go to item 14*

13. Were you physically forced, pressured, or made to feel you had to have sex or sexual contact before you were 18 years old, after you turned 18, or both?

Before you were 18.....₁
 After you turned 18.....₂
 Both.....₃

14. Before you entered this facility, were you physically forced, pressured, or made to feel that you had to have sex or sexual contact while you were an adult or juvenile in a jail, prison, or other correctional facility?

Yes.....₁
 No.....₂

15. This question is about wanted or voluntary sex or sexual contact you have had with other inmates in this facility. In the past 12 months, did you do any of the following:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Touch another inmate's body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex with another inmate at this facility?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with another inmate at this facility?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with another inmate at this facility?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

These next questions ask about unwanted sex or sexual contact you have had with other inmates in this facility. By unwanted, we mean sex or sexual contact that you did not want to happen.

16. In the past 12 months, did another inmate use physical force to make you do any of the following:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Touch their body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

17. In the past 12 months, did another inmate, without using physical force, pressure you or make you feel that you had to do any of the following:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Touch their body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

18. In the past 12 months, how many times altogether were you physically forced, pressured, or made to feel like you had to have sex or sexual contact with another inmate?

- 0 times ₁ → *Go to SECTION B on page 3*
 1 time ₂ }
 2 times ₃ } → *Continue to item 19*
 3–10 times ₄ }
 11 times or more... ₅

19. In the past 12 months, when you were physically forced, pressured, or made to feel that you had to have sex or sexual contact with another inmate, were you ever:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Persuaded or talked into it?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Given a bribe or blackmailed?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Given drugs or alcohol to get you drunk or high?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Offered protection from other inmates?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Trying to pay off or settle a debt that you owed?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Threatened with harm or a weapon?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Physically held down or restrained?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Physically harmed or injured?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

20. In the past 12 months, when you were physically forced, pressured, or made to feel that you had to have sex or sexual contact with another inmate, did you ever:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Receive knife or stab wounds?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive broken bones?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive anal or vaginal tearing?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have your teeth chipped or knocked out?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive internal injuries?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Get knocked unconscious?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive bruises, a black eye, sprains, cuts, scratches, swelling, or welts?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

SECTION B

These next questions ask about sex or sexual contact you have had with **staff at this facility**. By staff, we mean the employees of this facility and anybody who works as a volunteer in this facility.

21. This question is about **willing** sex or sexual contact you have had with any staff at this facility. In the past 12 months, did you do any of the following:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Touch a facility staff person's body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give or receive a handjob from a facility staff person?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with a facility staff person?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with a facility staff person?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with a facility staff person?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

22. In the past 12 months, did a facility staff person use physical force to make you do any of the following:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Touch their body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give them a handjob or receive a handjob from them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

23. In the past 12 months, did a facility staff person without using physical force, pressure you or make you feel that you had to do any of the following:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Touch their body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give them a handjob or receive a handjob from them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

24. This question is about both wanted and unwanted sex with staff at this facility. In the past 12 months, how many times altogether have you had any type of wanted or unwanted sex or sexual contact with staff at this facility?

0 times ₁ } → *Go to SECTION C*
 1 time ₂ } *on page 5*
 2 times ₃ } → *Continue to item 25*
 3–10 times ₄ }
 11 times or more... ₅ }

25. In the past 12 months, when you had sex or sexual contact with facility staff, did any single incident ever involve more than one facility staff person?

Yes ₁
 No ₂

26. In the past 12 months, when you had sex or sexual contact with facility staff, were you ever:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Persuaded or talked into it?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Given a bribe or blackmailed?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Given drugs or alcohol to get you drunk or high?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Offered protection from other inmates?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Offered protection from another correctional officer?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Trying to pay off or settle a debt that you owed?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Threatened with harm or a weapon?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Physically held down or restrained?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Physically harmed or injured?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

27. In the past 12 months, when you had sex or sexual contact with facility staff, was it ever with:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Male facility staff?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Female facility staff?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

28. In the past 12 months, when you had sex or sexual contact with facility staff, did you ever:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Receive knife or stab wounds?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive broken bones?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive anal or vaginal tearing?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have your teeth chipped or knocked out?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive internal injuries?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Get knocked unconscious?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive bruises, a black eye, sprains, cuts, scratches, swelling, or welts?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

SECTION C

These last two questions are about your experience with this survey.

29. How upsetting did you find it to answer questions about your own experiences with sex and sexual assault in this facility?

- Not upsetting at all..... ₁
- Somewhat upsetting..... ₂
- Very upsetting ₃

30. How accurate are the answers you gave in this survey?

- Not very accurate..... ₁
- Fairly accurate ₂
- Very accurate..... ₃

After you have completed the survey, please put it in the envelope and seal it before you turn it in.

Thank You!

OMB No.: XXXX-XXXX
Exp.: XX/XX/XXXX



NATIONAL INMATE SURVEY - PRISONS

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and
RTI International

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SECTION A

Please answer the question in the space provided or mark your answer in the box, like this . To protect your privacy, do not put your name on this survey.

1. On what date were you admitted to this facility?

If you cannot remember the exact date, please write down whatever you can remember, such as the year and the month.

_____/_____/_____
 Month Day Year

2. How old are you?

Age: _____

3. Are you of Hispanic, Latino, or Spanish origin?

Yes..... ₁

No ₂

4. Which of these categories describes your race:

<i>Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.</i>	Yes	No
White	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Black or African American	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
American Indian or Alaska Native	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Asian	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Native Hawaiian or other Pacific Islander	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

5. What is the highest level of school you have completed?

Less than a high school graduate..... ₁

High school graduate or GED ₂

Some college ₃

College degree or more ₄

6. Are you currently being held in this facility for any of the following:

<i>Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.</i>	Yes	No
A violent offense, such as physical or sexual assault, rape, robbery, manslaughter, attempted murder, or murder?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
A drug offense, such as possessing, selling, or manufacturing drugs?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
A property offense, such as burglary, larceny, auto theft, bad checks, fraud, forgery or grand theft?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Any other offense?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

7. How long have you been in this facility?

Less than 1 week..... ₁

At least 1 week but less than 1 month ₂

At least 1 month but less than 2 months ₃

At least 2 months but less than 6 months..... ₄

At least 6 months but less than 1 year ₅

At least 1 year but less than 5 years..... ₆

At least 5 years but less than 10 years ₇

10 years or more ₈

8. Before you were admitted to this facility, had you ever spent time as an adult or juvenile in a prison, jail, or other correctional facility?

Yes ₁

No ₂

9. Which of the following best represents how you think of yourself?

Straight, that is **not** gay..... ₁

Gay..... ₂

Bisexual, that is, you are sexually attracted to both men and women..... ₃

Something else..... ₄

10. What sex was recorded on your original birth certificate?

Male.....₁
 Female.....₂

11. Do you currently think of yourself as...?

Male.....₁
 Female.....₂
 Transgender.....₃
 None of these.....₄

12. Before you entered this facility, had anyone ever physically forced, pressured, or made you feel you had to have sex or sexual contact—that is unwanted touching of the genitals or butt, or vaginal, oral, or anal sex?

Yes.....₁ *Continue to item 13*
 No.....₂ *Go to item 14*

13. Were you physically forced, pressured, or made to feel you had to have sex or sexual contact before you were 18 years old, after you turned 18, or both?

Before you were 18.....₁
 After you turned 18.....₂
 Both.....₃

14. Before you entered this facility, were you physically forced, pressured, or made to feel that you had to have sex or sexual contact while you were an adult or juvenile in a jail, prison, or other correctional facility?

Yes.....₁
 No.....₂

15. This question is about wanted or voluntary sex or sexual contact you have had with other inmates in this facility. In the past 12 months, did you do any of the following:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Touch another inmate's body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give or receive a handjob from another inmate at this facility?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with another inmate at this facility?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with another inmate at this facility?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

These next questions ask about unwanted sex or sexual contact you have had with other inmates in this facility. By unwanted, we mean sex or sexual contact that you did not want to happen.

16. In the past 12 months, did another inmate use physical force to make you do any of the following:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Touch their body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give them a handjob or receive a handjob from them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

17. In the past 12 months, did another inmate, without using physical force, pressure you or make you feel that you had to do any of the following:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Touch their body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give them a handjob or receive a handjob from them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

18. In the past 12 months, how many times altogether were you physically forced, pressured, or made to feel like you had to have sex or sexual contact with another inmate?

- 0 times ₁ → *Go to SECTION B on page 3*
 1 time ₂ }
 2 times ₃ } → *Continue to item 19*
 3–10 times ₄ }
 11 times or more... ₅

19. In the past 12 months, when you were physically forced, pressured, or made to feel that you had to have sex or sexual contact with another inmate, were you ever:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Persuaded or talked into it?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Given a bribe or blackmailed?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Given drugs or alcohol to get you drunk or high?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Offered protection from other inmates?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Trying to pay off or settle a debt that you owed?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Threatened with harm or a weapon?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Physically held down or restrained?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Physically harmed or injured?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

20. In the past 12 months, when you were physically forced, pressured, or made to feel that you had to have sex or sexual contact with another inmate, did you ever:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Receive knife or stab wounds?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive broken bones?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive anal tearing?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have your teeth chipped or knocked out?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive internal injuries?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Get knocked unconscious?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive bruises, a black eye, sprains, cuts, scratches, swelling, or welts?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

SECTION B

These next questions ask about sex or sexual contact you have had with **staff at this facility**. By staff, we mean the employees of this facility and anybody who works as a volunteer in this facility.

21. This question is about **willing** sex or sexual contact you have had with any staff at this facility. In the past 12 months, did you do any of the following:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Touch a facility staff person's body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give or receive a handjob from a facility staff person?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with a facility staff person?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with a facility staff person?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with a facility staff person?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

22. In the past 12 months, did a facility staff person use physical force to make you do any of the following:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Touch their body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give them a handjob or receive a handjob from them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

23. In the past 12 months, did a facility staff person without using physical force, pressure you or make you feel that you had to do any of the following:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Touch their body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give them a handjob or receive a handjob from them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

24. This question is about both wanted and unwanted sex with staff at this facility. In the past 12 months, how many times altogether have you had any type of wanted or unwanted sex or sexual contact with staff at this facility?

- 0 times ₁ → Go to SECTION C on page 5
 - 1 time ₂
 - 2 times ₃
 - 3–10 times ₄
 - 11 times or more... ₅
- } → Continue to item 25

25. In the past 12 months, when you had sex or sexual contact with facility staff, did any single incident ever involve more than one facility staff person?

- Yes ₁
- No ₂

26. In the past 12 months, when you had sex or sexual contact with facility staff, were you ever:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Persuaded or talked into it?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Given a bribe or blackmailed?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Given drugs or alcohol to get you drunk or high?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Offered protection from other inmates?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Offered protection from another correctional officer?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Trying to pay off or settle a debt that you owed?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Threatened with harm or a weapon?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Physically held down or restrained?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Physically harmed or injured?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

27. In the past 12 months, when you had sex or sexual contact with facility staff, was it ever with:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Male facility staff?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Female facility staff?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

28. In the past 12 months, when you had sex or sexual contact with facility staff, did you ever:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Receive knife or stab wounds?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive broken bones?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive anal tearing?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have your teeth chipped or knocked out?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive internal injuries?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Get knocked unconscious?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive bruises, a black eye, sprains, cuts, scratches, swelling, or welts?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

SECTION C

These last two questions are about your experience with this survey.

29. How upsetting did you find it to answer questions about your own experiences with sex and sexual assault in this facility?

- Not upsetting at all..... ₁
- Somewhat upsetting..... ₂
- Very upsetting ₃

30. How accurate are the answers you gave in this survey?

- Not very accurate..... ₁
- Fairly accurate ₂
- Very accurate..... ₃

After you have completed the survey, please put it in the envelope and seal it before you turn it in.

Thank You!

OMB No.: XXXX-XXXX
Exp.: XX/XX/XXXX



NATIONAL INMATE SURVEY - PRISONS

Conducted by the Bureau of Justice Statistics
and
RTI International

NOTICE: Public reporting for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is XXXX-XXXX.

SECTION A

Please answer the question in the space provided or mark your answer in the box, like this . To protect your privacy, do not put your name on this survey.

1. On what date were you admitted to this facility?

If you cannot remember the exact date, please write down whatever you can remember, such as the year and the month.

_____/_____/_____
 Month Day Year

2. How old are you?

Age: _____

3. Are you of Hispanic, Latino, or Spanish origin?

Yes..... ₁

No ₂

4. Which of these categories describes your race:

<i>Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.</i>	Yes	No
White	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Black or African American	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
American Indian or Alaska Native	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Asian	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Native Hawaiian or other Pacific Islander	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

5. What is the highest level of school you have completed?

Less than a high school graduate..... ₁

High school graduate or GED ₂

Some college ₃

College degree or more ₄

6. Are you currently being held in this facility for any of the following:

<i>Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.</i>	Yes	No
A violent offense, such as physical or sexual assault, rape, robbery, manslaughter, attempted murder, or murder?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
A drug offense, such as possessing, selling, or manufacturing drugs?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
A property offense, such as burglary, larceny, auto theft, bad checks, fraud, forgery or grand theft?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Any other offense?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

7. How long have you been in this facility?

Less than 1 week..... ₁

At least 1 week but less than 1 month ₂

At least 1 month but less than 2 months ₃

At least 2 months but less than 6 months..... ₄

At least 6 months but less than 1 year ₅

At least 1 year but less than 5 years..... ₆

At least 5 years but less than 10 years ₇

10 years or more ₈

8. Before you were admitted to this facility, had you ever spent time as an adult or juvenile in a prison, jail, or other correctional facility?

Yes ₁

No ₂

9. Which of the following best represents how you think about yourself?

Straight, that is **not** lesbian or gay ₁

Lesbian or gay..... ₂

Bisexual, that is, you are sexually attracted to both men and women..... ₃

Something else..... ₄

10. What sex was recorded on your original birth certificate?

- Male.....₁
- Female.....₂

11. Do you currently think of yourself as...?

- Male.....₁
- Female.....₂
- Transgender.....₃
- None of these.....₄

12. **Before you entered this facility, had anyone ever physically forced, pressured, or made you feel you had to have sex or sexual contact—that is unwanted touching of the breasts, genitals or butt, or vaginal, oral, or anal sex?**

- Yes.....₁ *Continue to item 13*
- No.....₂ *Go to item 14*

13. Were you physically forced, pressured, or made to feel you had to have sex or sexual contact before you were 18 years old, after you turned 18, or both?

- Before you were 18.....₁
- After you turned 18.....₂
- Both.....₃

14. **Before you entered this facility, were you physically forced, pressured, or made to feel that you had to have sex or sexual contact while you were an adult or juvenile in a jail, prison, or other correctional facility?**

- Yes.....₁
- No.....₂

15. This question is about **wanted or voluntary** sex or sexual contact you have had with other inmates in this facility. Since you arrived at this facility, did you do any of the following:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Touch another inmate's body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex with another inmate at this facility?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with another inmate at this facility?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with another inmate at this facility?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

These next questions ask about **unwanted** sex or sexual contact you have had with other inmates in this facility. By unwanted, we mean sex or sexual contact that you **did not want to happen**.

16. Since you arrived at this facility, did another inmate use physical force to make you do any of the following:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Touch their body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

17. Since you arrived at this facility, did another inmate, without using physical force, pressure you or make you feel that you had to do any of the following:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Touch their body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

18. Since you arrived at this facility, how many times altogether were you physically forced, pressured, or made to feel like you had to have sex or sexual contact with another inmate?

- 0 times ₁ → *Go to SECTION B on page 3*
 1 time ₂ }
 2 times ₃ } → *Continue to item 19*
 3–10 times ₄ }
 11 times or more... ₅

19. Since you arrived at this facility, when you were physically forced, pressured, or made to feel that you had to have sex or sexual contact with another inmate, were you ever:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Persuaded or talked into it?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Given a bribe or blackmailed?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Given drugs or alcohol to get you drunk or high?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Offered protection from other inmates?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Trying to pay off or settle a debt that you owed?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Threatened with harm or a weapon?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Physically held down or restrained?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Physically harmed or injured?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

20. Since you arrived at this facility, when you were physically forced, pressured, or made to feel that you had to have sex or sexual contact with another inmate, did you ever:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Receive knife or stab wounds?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive broken bones?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive anal or vaginal tearing?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have your teeth chipped or knocked out?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive internal injuries?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Get knocked unconscious?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive bruises, a black eye, sprains, cuts, scratches, swelling, or welts?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

SECTION B

These next questions ask about sex or sexual contact you have had with **staff at this facility**. By staff, we mean the employees of this facility and anybody who works as a volunteer in this facility.

21. This question is about **willing** sex or sexual contact you have had with any staff at this facility. Since you arrived at this facility, did you do any of the following:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Touch a facility staff person's body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give or receive a handjob from a facility staff person?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with a facility staff person?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with a facility staff person?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with a facility staff person?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

22. Since you arrived at this facility, did a facility staff person use physical force to make you do any of the following:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Touch their body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give them a handjob or receive a handjob from them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

23. Since you arrived at this facility, did a facility staff person without using physical force, pressure you or make you feel that you had to do any of the following:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Touch their body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give them a handjob or receive a handjob from them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

24. This question is about both wanted and unwanted sex with staff at this facility. Since you arrived at this facility, how many times altogether have you had any type of wanted or unwanted sex or sexual contact with staff at this facility?

- 0 times ₁ } → *Go to SECTION C on page 5*
 1 time ₂ }
 2 times ₃ } → *Continue to item 25*
 3–10 times ₄ }
 11 times or more... ₅ }

25. Since you arrived at this facility, when you had sex or sexual contact with facility staff, did any single incident ever involve more than one facility staff person?

- Yes..... ₁
 No ₂

26. Since you arrived at this facility, when you had sex or sexual contact with facility staff, were you ever:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Persuaded or talked into it?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Given a bribe or blackmailed?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Given drugs or alcohol to get you drunk or high?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Offered protection from other inmates?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Offered protection from another correctional officer?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Trying to pay off or settle a debt that you owed?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Threatened with harm or a weapon?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Physically held down or restrained?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Physically harmed or injured?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

27. Since you arrived at this facility, when you had sex or sexual contact with facility staff, was it ever with:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Male facility staff?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Female facility staff?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

28. Since you arrived at this facility, when you had sex or sexual contact with facility staff, did you ever:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Receive knife or stab wounds?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive broken bones?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive anal or vaginal tearing?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have your teeth chipped or knocked out?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive internal injuries?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Get knocked unconscious?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive bruises, a black eye, sprains, cuts, scratches, swelling, or welts?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

SECTION C

These last two questions are about your experience with this survey.

29. How upsetting did you find it to answer questions about your own experiences with sex and sexual assault in this facility?

- Not upsetting at all..... ₁
- Somewhat upsetting..... ₂
- Very upsetting ₃

30. How accurate are the answers you gave in this survey?

- Not very accurate..... ₁
- Fairly accurate ₂
- Very accurate..... ₃

After you have completed the survey, please put it in the envelope and seal it before you turn it in.

Thank You!

OMB No.: XXXX-XXXX
Exp.: XX/XX/XXXX



NATIONAL INMATE SURVEY - PRISONS

Conducted by the Bureau of Justice Statistics
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SECTION A

Please answer the question in the space provided or mark your answer in the box, like this . To protect your privacy, do not put your name on this survey.

1. On what date were you admitted to this facility?

If you cannot remember the exact date, please write down whatever you can remember, such as the year and the month.

_____/_____/_____
 Month Day Year

2. How old are you?

Age: _____

3. Are you of Hispanic, Latino, or Spanish origin?

Yes..... ₁

No ₂

4. Which of these categories describes your race:

<i>Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.</i>	Yes	No
White	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Black or African American	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
American Indian or Alaska Native	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Asian	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Native Hawaiian or other Pacific Islander	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

5. What is the highest level of school you have completed?

Less than a high school graduate..... ₁

High school graduate or GED ₂

Some college ₃

College degree or more ₄

6. Are you currently being held in this facility for any of the following:

<i>Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.</i>	Yes	No
A violent offense, such as physical or sexual assault, rape, robbery, manslaughter, attempted murder, or murder?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
A drug offense, such as possessing, selling, or manufacturing drugs?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
A property offense, such as burglary, larceny, auto theft, bad checks, fraud, forgery or grand theft?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Any other offense?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

7. How long have you been in this facility?

Less than 1 week..... ₁

At least 1 week but less than 1 month ₂

At least 1 month but less than 2 months ₃

At least 2 months but less than 6 months..... ₄

At least 6 months but less than 1 year ₅

At least 1 year but less than 5 years..... ₆

At least 5 years but less than 10 years ₇

10 years or more ₈

8. Before you were admitted to this facility, had you ever spent time as an adult or juvenile in a prison, jail, or other correctional facility?

Yes ₁

No ₂

9. Which of the following best represents how you think about yourself?

Straight, that is **not** gay..... ₁

Gay..... ₂

Bisexual, that is, you are sexually attracted to both men and women..... ₃

Something else..... ₄

10. What sex was recorded on your original birth certificate?

Male.....₁
 Female.....₂

11. Do you currently think of yourself as...?

Male.....₁
 Female.....₂
 Transgender.....₃
 None of these.....₄

12. Before you entered this facility, had anyone ever physically forced, pressured, or made you feel you had to have sex or sexual contact—that is unwanted touching of the genitals or butt, or vaginal, oral, or anal sex?

Yes.....₁ *Continue to item 13*
 No.....₂ *Go to item 14*

13. Were you physically forced, pressured, or made to feel you had to have sex or sexual contact before you were 18 years old, after you turned 18, or both?

Before you were 18.....₁
 After you turned 18.....₂
 Both.....₃

14. Before you entered this facility, were you physically forced, pressured, or made to feel that you had to have sex or sexual contact while you were an adult or juvenile in a jail, prison, or other correctional facility?

Yes.....₁
 No.....₂

15. This question is about wanted or voluntary sex or sexual contact you have had with other inmates in this facility. Since you arrived at this facility, did you do any of the following:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Touch another inmate's body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give or receive a handjob from another inmate at this facility?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with another inmate at this facility?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with another inmate at this facility?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

These next questions ask about unwanted sex or sexual contact you have had with other inmates in this facility. By unwanted, we mean sex or sexual contact that you did not want to happen.

16. Since you arrived at this facility, did another inmate use physical force to make you do any of the following:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Touch their body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give them a handjob or receive a handjob from them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

17. Since you arrived at this facility, did another inmate, without using physical force, pressure you or make you feel that you had to do any of the following:

Mark <input checked="" type="checkbox"/> “Yes” or “No” for each item.	Yes	No
Touch their body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give them a handjob or receive a handjob from them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

18. Since you arrived at this facility, how many times altogether were you physically forced, pressured, or made to feel like you had to have sex or sexual contact with another inmate?

- 0 times ₁ → *Go to SECTION B on page 3*
 1 time ₂ }
 2 times ₃ } → *Continue to item 19*
 3–10 times ₄ }
 11 times or more... ₅

19. Since you arrived at this facility, when you were physically forced, pressured, or made to feel that you had to have sex or sexual contact with another inmate, were you ever:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Persuaded or talked into it?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Given a bribe or blackmailed?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Given drugs or alcohol to get you drunk or high?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Offered protection from other inmates?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Trying to pay off or settle a debt that you owed?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Threatened with harm or a weapon?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Physically held down or restrained?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Physically harmed or injured?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

20. Since you arrived at this facility, when you were physically forced, pressured, or made to feel that you had to have sex or sexual contact with another inmate, did you ever:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Receive knife or stab wounds?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive broken bones?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive anal tearing?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have your teeth chipped or knocked out?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive internal injuries?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Get knocked unconscious?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive bruises, a black eye, sprains, cuts, scratches, swelling, or welts?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

SECTION B

These next questions ask about sex or sexual contact you have had with **staff at this facility**. By staff, we mean the employees of this facility and anybody who works as a volunteer in this facility.

21. This question is about **willing** sex or sexual contact you have had with any staff at this facility. Since you arrived at this facility, did you do any of the following:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Touch a facility staff person's body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give or receive a handjob from a facility staff person?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with a facility staff person?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with a facility staff person?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with a facility staff person?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

22. Since you arrived at this facility, did a facility staff person use physical force to make you do any of the following:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Touch their body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give them a handjob or receive a handjob from them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

23. Since you arrived at this facility, did a facility staff person without using physical force, pressure you or make you feel that you had to do any of the following:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Touch their body in a sexual way or have your body touched in a sexual way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Give them a handjob or receive a handjob from them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have oral sex (blowjob) with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have vaginal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have anal sex with them?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

24. This question is about both wanted and unwanted sex with staff at this facility. Since you arrived at this facility, how many times altogether have you had any type of wanted or unwanted sex or sexual contact with staff at this facility?

- 0 times ₁ } → *Go to SECTION C on page 5*
 1 time ₂ }
 2 times ₃ } → *Continue to item 25*
 3–10 times ₄ }
 11 times or more... ₅ }

25. Since you arrived at this facility, when you had sex or sexual contact with facility staff, did any single incident ever involve more than one facility staff person?

- Yes..... ₁
 No ₂

26. Since you arrived at this facility, when you had sex or sexual contact with facility staff, were you ever:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Persuaded or talked into it?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Given a bribe or blackmailed?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Given drugs or alcohol to get you drunk or high?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Offered protection from other inmates?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Offered protection from another correctional officer?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Trying to pay off or settle a debt that you owed?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Threatened with harm or a weapon?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Physically held down or restrained?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Physically harmed or injured?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

27. Since you arrived at this facility, when you had sex or sexual contact with facility staff, was it ever with:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Male facility staff?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Female facility staff?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

28. Since you arrived at this facility, when you had sex or sexual contact with facility staff, did you ever:

Mark <input checked="" type="checkbox"/> "Yes" or "No" for each item.	Yes	No
Receive knife or stab wounds?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive broken bones?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive anal tearing?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Have your teeth chipped or knocked out?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive internal injuries?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Get knocked unconscious?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Receive bruises, a black eye, sprains, cuts, scratches, swelling, or welts?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

SECTION C

These last two questions are about your experience with this survey.

29. How upsetting did you find it to answer questions about your own experiences with sex and sexual assault in this facility?

- Not upsetting at all..... ₁
- Somewhat upsetting..... ₂
- Very upsetting ₃

30. How accurate are the answers you gave in this survey?

- Not very accurate..... ₁
- Fairly accurate ₂
- Very accurate..... ₃

After you have completed the survey, please put it in the envelope and seal it before you turn it in.

Thank You!



Bureau of Justice
Statistics



National Inmate Survey

Consent to Participate in Research

Introduction

The National Inmate Survey is a research study being done by the Bureau of Justice Statistics and RTI International, a not-for-profit research organization. [You are one of about (175/275/375) inmates at this facility who have been randomly selected to participate. /All eligible inmates at this facility will be asked to participate.] Inmates will be interviewed at about 238 facilities across the United States. The purpose of this research study is to estimate the number of inmates who are sexually assaulted in prisons each year. Your participation in this study is voluntary.

Description of the Study

This interview will take about 35 minutes. To start, the interviewer will ask you some questions about your background and education and enter them into the computer. Next, the interviewer will show you how to use the computer and you can complete the rest of the survey on your own. You will be able to see the questions on the computer screen and listen to them through headphones. You will enter your answers directly into the computer by touching the screen. The interviewer will be nearby in case you have questions but won't be able to see your answers.

You will be randomly assigned to receive either detailed questions about your own experiences with sex and sexual assault in this facility (such as the types of sexual acts and where they occurred) or questions about your childhood and your experiences in this facility. In addition, you will be asked about your criminal history and military service. You will never be asked to identify anyone by name. You are the only one who will know which questions you are asked. Not even the interviewer will know unless you discuss the questions with him or her. To thank you for participating in the study, we will provide you with [a snack that you must eat before you leave the interview location/ a stamped envelope].

Possible Risks or Discomforts

Some of the questions in this interview are personal and they could make you feel uncomfortable or upset. You can skip any questions you do not want to answer and you can stop the interview at any time. Please tell the interviewer if you want to stop or take a break during the interview. If you find the questions upsetting for any reason, the interviewer can also provide you with instructions for contacting a mental health counselor employed by this facility or retained by this study.

Benefits

You will not receive any direct benefits for participating in this study. However, the results of this study may help improve the well-being of inmates in correctional facilities across the United States. If you choose not to participate you will not lose any benefits or services that you now receive or might receive in the future. Whether you participate or not will not affect your legal status or any decisions regarding your release from this facility in any way.

Confidentiality

Your name will never be connected with the information you provide in this interview. We will treat everything you say as private and confidential and we will not share any information you provide with anyone at the facility or anyone on the outside who is not working on the study. There is, however, an exception to our promise of confidentiality. If you tell the interviewer that you intend to seriously harm yourself or a specific person, he or she may need to inform correctional staff here or authorities outside

the facility who are responsible for protecting prison inmates.

Further Questions

You may keep a copy of this form. If you have any questions about the project, you may write to the National Inmate Survey (Project 0216099) at RTI International, P.O. Box 12194, Research Triangle Park, NC 27709-2194. If you have questions about your rights as a project participant, you can write to RTI's Office of Research Protection at the same address.



Bureau of Justice
Statistics



National Inmate Survey

Consent to Participate in Research

Introduction

The National Inmate Survey is a research study being done by the Bureau of Justice Statistics and RTI International, a not-for-profit research organization. [You are one of about (175/275/375) inmates at this facility who have been randomly selected to participate. /All eligible inmates at this facility will be asked to participate.] Inmates will be interviewed at about 238 facilities across the United States. The purpose of this research study is to estimate the number of inmates who are sexually assaulted in prisons each year. Your participation in this study is voluntary.

Description of the Study

This interview will take about 15 minutes. The interviewer will provide you with the questionnaire which you will complete by yourself. The questionnaire includes detailed questions about your own experiences with sex and sexual assault in this facility (such as the types of sexual acts and where they occurred). You will never be asked to identify anyone by name. Once you have completed the questionnaire you will seal it in an envelope and give it back to the interviewer. Neither the interviewer nor anyone at this facility will ever see your completed questionnaire. To thank you for participating in the study, we will provide you with [a snack that you must eat before you leave the interview location/ a stamped envelope].

Possible Risks or Discomforts

Some of the questions in this interview are personal and they could make you feel uncomfortable or upset. You can skip any questions you do not want to answer and you can stop the interview at any time. If you find the questions upsetting for any reason, the interviewer can provide you with instructions for contacting a mental health counselor employed by this facility or retained by this study.

Benefits

You will not receive any direct benefits for participating in this study. However, the results of this study may help improve the well-being of inmates in correctional facilities across the United States. If you choose not to participate you will not lose any benefits or services that you now receive or might receive in the future. Whether you participate or not will not affect your legal status or any decisions regarding your release from this facility in any way.

Confidentiality

Your name will never be connected with the information you provide in this interview. We will treat everything you say as private and confidential and we will not share any information you provide with anyone at the facility or anyone on the outside who is not working on the study. There is, however, an exception to our promise of confidentiality. If you tell the interviewer that you intend to seriously harm yourself or a specific person, the interviewer may need to inform correctional staff here or authorities outside the facility who are responsible for protecting prison inmates.

Further Questions

You may keep a copy of this form. If you have any questions about the project, you may write to the National Inmate Survey (Project 0216099) at RTI International, P.O. Box 12194, Research Triangle Park, NC 27709-2194. If you have questions about your rights as a project participant, you can write to RTI's Office of Research Protection at the same address.

Interviewer Script to be Read After ACASI Consent Form

Instructions for Interviewer: You must read the following script out loud to the inmate and confirm that he/she understands the information before concluding the informed consent process.

I want to go over the main points covered in this form to make sure everything is clear:

- This interview is voluntary. You can say yes or no. It is totally up to you. Nothing about your legal situation, such as when you will be released or what treatment you might receive, will be changed by whether or not you participate in the interview.
- If you start the interview and then want to quit, that's okay.
- If you want to skip any questions, that's okay also.

Do you understand?

IF THE INMATE ANSWERS, "NO," ANSWER ANY QUESTIONS THE INMATE HAS AND THEN RETURN TO THE CONSENT FORM AND RE-READ THE TEXT IN THE SECTIONS LABELED, "POSSIBLE RISKS OR DISCOMFORTS" AND "BENEFITS". POINT TO THE TEXT ON THE INMATE'S COPY OF THE CONSENT FORM.

It is possible that some of the questions you answer using the computer may make you feel nervous or upset. If that happens and you want to take a break or you want to talk to someone about how the questions made you feel, you can tell me you want to take a break or want to speak with someone.

The form I just read aloud to you also talks about privacy. By private, we mean that the answers you enter into the computer, even those about being abused or harmed, will always be kept secret. No one will ever know your answers, not even me.

READ FOR 16 AND 17 YEAR OLDS ONLY:

However, if you tell me **out loud** that you are being abused at this facility I, or my supervisors, may need to report that information to the agency in this state that investigates abuse. Once we make a report, we have no control over what will be done with the information.

Do you understand that what you enter into the computer, even if it is about abuse will always be kept private?

IF THE INMATE ANSWERS 'NO', ANSWER ANY QUESTIONS THE INMATE HAS AND THEN RETURN TO THE CONSENT FORM AND RE-READ THE TEXT ENTITLED CONFIDENTIALITY AND POINT TO THIS TEXT ON THE INMATE'S COPY OF THE CONSENT FORM.

Do you understand that if you say something out loud about being abused, that information is not secret and may be reported to a state agency?

IF THE INMATE ANSWERS 'NO', ANSWER ANY QUESTIONS THE INMATE HAS AND THEN RETURN TO THE CONSENT FORM AND RE-READ THE TEXT ENTITLED CONFIDENTIALITY AND POINT TO THIS TEXT ON THE INMATE'S COPY OF THE CONSENT FORM.

So, please do not say anything out loud to me about being abused unless you want me to pass that information on to the agency in this state that investigates abuse. Do you have any questions?

If you think of any questions or comments about the survey later, you can write us at the address provided. If you would like to participate in the interview, please tell me now and we will begin.

INMATE CAN KEEP A COPY OF THE CONSENT FORM IF HE/SHE WANTS ONE.

Interviewer Script to be Read After PAPI Consent Form

Instructions for Interviewer: You must read the following script out loud to the inmate and confirm that he/she understands the information before concluding the informed consent process.

I want to go over the main points covered in this form to make sure everything is clear:

- This interview is voluntary. You can say yes or no. It is totally up to you. Nothing about your legal situation, such as when you will be released or what treatment you might receive, will be changed by whether or not you participate in the interview.
- If you start the interview and then want to quit, that's okay.
- If you want to skip any questions, that's okay also.

Do you understand?

IF THE INMATE ANSWERS, "NO," ANSWER ANY QUESTIONS THE INMATE HAS AND THEN RETURN TO THE CONSENT FORM AND RE-READ THE TEXT IN THE SECTIONS LABELED, "POSSIBLE RISKS OR DISCOMFORTS" AND "BENEFITS". POINT TO THE TEXT ON THE INMATE'S COPY OF THE CONSENT FORM.

It is possible that some of the questions you answer may make you feel nervous or upset. If that happens and you want to take a break or you want to talk to someone about how the questions made you feel, you can tell me you want to take a break or want to speak with someone.

The form I just read aloud to you also talks about privacy. By private, we mean that the answers you mark on the questionnaire, even those about being abused or harmed, will always be kept secret. No one will ever know your answers, not even me.

READ FOR 16 AND 17 YEAR OLDS ONLY:

However, if you tell me **out loud** that you are being abused at this facility I, or my supervisors, may need to report that information to the agency in this state that investigates abuse. Once we make a report, we have no control over what will be done with the information.

Do you understand that what you mark on the questionnaire, even if it is about abuse will always be kept private?

IF THE INMATE ANSWERS 'NO', ANSWER ANY QUESTIONS THE INMATE HAS AND THEN RETURN TO THE CONSENT FORM AND RE-READ THE TEXT ENTITLED CONFIDENTIALITY AND POINT TO THIS TEXT ON THE INMATE'S COPY OF THE CONSENT FORM.

Do you understand that if you say something out loud about being abused, that information is not secret and may be reported to a state agency?

IF THE INMATE ANSWERS 'NO', ANSWER ANY QUESTIONS THE INMATE HAS AND THEN RETURN TO THE CONSENT FORM AND RE-READ THE TEXT ENTITLED CONFIDENTIALITY AND POINT TO THIS TEXT ON THE INMATE'S COPY OF THE CONSENT FORM.

So, please do not say anything out loud to me about being abused unless you want me to pass that information on to the agency in this state that investigates abuse. Do you have any questions?

If you think of any questions or comments about the survey later, you can write us at the address provided. If you would like to participate in the interview, please tell me now and we will begin.

INMATE CAN KEEP A COPY OF THE CONSENT FORM IF HE/SHE WANTS ONE.



2021 NATIONAL INMATE SURVEY—PRISONS

U.S. DEPARTMENT OF JUSTICE
BUREAU OF JUSTICE STATISTICS
AND ACTING AS COLLECTION AGENT
RTI INTERNATIONAL

[STATE NAME] FACILITY QUESTIONNAIRE

General Information

The National Inmate Survey (NIS) is a study designed to help Congress and the Department of Justice understand more about sexual victimization in U.S. jails and prisons. This study is mandated by Congress under the Prison Rape Elimination Act of 2003. The 2021 NIS is also seeking to gain valuable information on the facility through the NIS Facility Questionnaire. The purpose of the Facility Questionnaire is to gather administrative data about the facilities sampled for the National Inmate Survey that will allow the Bureau of Justice Assistance to better understand facility characteristics associated with sexual victimization in prisons.

Reporting instructions

- Click on the blue tab at the bottom of this Instructions worksheet for the **Facility Questionnaire** worksheet.
- On the **Facility Questionnaire** worksheet, each sampled facility appears in a column; questions appear on the rows. Please **complete all questions for each facility**.
- If the answer to a question is “not available” or “unknown,” enter “DK” in the space provided.
- If the answer to a question is “not applicable,” enter “NA” in the space provided.
- If the answer to a question is “none” or “zero,” enter “0” in the space provided.
- When exact numeric answers are not available, please provide estimates.

Submission instructions

Please email the completed file to: LM-EMAIL@rti.org.

Help is available

If you have any questions, need help completing the form, or prefer an alternate submission option, please contact your NIS-4 Logistics Manager, **LM NAME**, at **LM PHONE** or LM-EMAIL@rti.org.

BURDEN STATEMENT

Under the Paperwork Reduction Act, we cannot ask you to respond to a collection of information unless it displays a currently valid OMB control number. The burden of this collection is estimated to average 30 minutes per facility, including reviewing instructions, searching existing data sources, gathering necessary data, and completing and reviewing this form. Send comments regarding this burden estimate or any aspect of this survey, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. Do not send your completed form to this address.

OMB No. #####-#### Approval Expires MM/YYYY

Question	Facility A NAME	Facility B NAME	Facility C NAME
<p>1. What are the functions of the facility? Please answer Yes or No for each function.</p> <p>1A. General adult population confinement</p> <p>1B. Alcohol / Drug treatment confinement</p> <p>1C. Reception / Diagnosis / Classification</p> <p>1D. Mental health treatment</p> <p>1E. Medical treatment / Hospitalization confinement</p> <p>1F. Primarily for persons returned to custody (e.g. parole violators)</p> <p>1G. Geriatric care</p> <p>1H. Youthful offenders</p> <p>1I. Close management / Administrative segregation / Disciplinary segregation / Solitary confinement</p> <p>1J. Faith and character-based</p> <p>1K. Re-entry</p> <p>1L. Some other function</p> <p style="text-align: right;">If you answered 'Yes' to Question 1L above, PLEASE DESCRIBE THIS OTHER FUNCTION:</p>			
	<input type="radio"/> Yes <input type="radio"/> No		
	<input type="radio"/> Yes <input type="radio"/> No		
	<input type="radio"/> Yes <input type="radio"/> No		
	<input type="radio"/> Yes <input type="radio"/> No		
	<input type="radio"/> Yes <input type="radio"/> No		
	<input type="radio"/> Yes <input type="radio"/> No		
	<input type="radio"/> Yes <input type="radio"/> No		
	<input type="radio"/> Yes <input type="radio"/> No		
	<input type="radio"/> Yes <input type="radio"/> No		
	<input type="radio"/> Yes <input type="radio"/> No		
	<input type="radio"/> Yes <input type="radio"/> No		
	<input type="radio"/> Yes <input type="radio"/> No		
<p>2. What is the rated operational bed capacity of the facility? By rated operational bed capacity, we mean the number of beds or inmates assigned by a rating official.</p> <p style="text-align: right;">ENTER RATED OPERATIONAL BED CAPACITY:</p>			

<p>3. Please provide the current number of inmates held by custody security level. If this facility houses no inmates for a specific custody security level, enter 0. Please include any inmates who are temporarily absent from the facility (e.g., for court appearances, brief furloughs, and medical leave). Do not include inmates who are on escape or absent without leave (AWOL).</p> <p>3A. Super maximum / Intensive Management Unit custody inmates / Restrictive housing</p> <p>3B. Maximum / Close / High custody inmates</p> <p>3C. Medium custody inmates</p> <p>3D. Minimum custody inmates</p> <p>3E. Administrative custody inmates (e.g., Federal medical facilities)</p> <p>3F. Not classified / Other (e.g., unsentenced or sentenced and awaiting classification)</p> <p>TOTAL NUMBER OF INMATES HELD (CALCULATED)</p>			
	0	0	0
<p>4. Of the total number of inmates held at the facility, approximately how many...</p> <p>4A. have been identified as currently having a serious and persistent mental illness? Please include inmates whether or not they are currently receiving medication for their mental illness.</p> <p>4B. have been identified as having a cognitive impairment or intellectual disability?</p> <p>4C. are currently assigned to disciplinary restrictive housing such as administrative segregation or disciplinary segregation?</p> <p>4D. are currently affiliated with a gang or Security Threat Group?</p> <p>4E. speak a language other than English as their primary language?</p> <p>4F. self-identify as LGBTQ?</p>			
	0		
	0		
	0		
	0		
	0		
	0		
<p>5. If an inmate self-identifies as LGBTQ, is that self-identification taken into account when making housing assignments at this facility?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p>		
<p>6. Do inmates at the facility have access to a language line that provides on-demand language interpretation or translation services?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p>		
<p>7. During the past 12 months, that is since this date last year, was this facility operating under a court-ordered corrective action plan or consent decree?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p>		
<p>For Questions 8 – 14, please think only about <u>paid</u> staff who are <u>not</u> contractors.</p>			

<p>8. Regardless of the source of the funding used to cover the positions, how many Full-Time Equivalency (FTE) positions for state employees does the facility currently have? Please include both uniformed and non-uniformed staff.</p> <p style="text-align: right;">ENTER NUMBER OF FTES:</p>						
<p>9. How many of the FTE state positions allocated to this facility are currently vacant? Please do not include positions that are temporarily vacant because the staff person is on medical leave, military leave, maternity leave, etc.</p> <p style="text-align: right;">ENTER NUMBER OF VACANT FTE POSITIONS:</p>						
<p>10. Is a hiring freeze currently in place at the facility?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p>					
<p>11. Please provide the number of male and female staff at the facility who are in each job classification below. If a staff person works in more than one job class, please include them in the job class where they work the largest portion of their time.</p> <p>11A. Administrators, including wardens, superintendents, and others in administrative positions</p> <p>11B. Staff with custody responsibilities, such as correctional officers, classification officers, classification counselors, case managers, line staff, and their supervisors who are not administrators</p> <p>11C. Clerical and maintenance staff, including typists, secretaries, records clerks, janitors, cooks, groundskeepers, etc.</p> <p>11D. Educational staff, including academic and vocational staff, programming staff, etc.</p> <p>11E. Professional and technical staff, including counselors, psychiatrists, psychologists, social workers, doctors, dentists, nurses, chaplains, etc.</p> <p>11F. Staff assigned to the facility but who work at another location on a permanent basis</p> <p>11G. Other staff</p>	MALES	FEMALES	MALES	FEMALES	MALES	FEMALES
<p>12. During the past 12 months, that is since this date last year, how many staff were new to their current position at the facility? That is, how many staff were either new hires to the facility or had moved into positions they had not worked in before?</p> <p style="text-align: right;">ENTER NUMBER OF STAFF IN NEW POSITIONS:</p>						

<p>13. During the past 12 months, that is since this date last year, how many staff with custody responsibilities, including entry level Correctional Officers as well as more senior staff, left, for whatever reason, and no longer work at the facility? Please include staff who resigned, retired, or transferred as well as those who were discharged or fired.</p> <p style="text-align: center;">ENTER NUMBER OF STAFF WITH CUSTODY RESPONSIBILITIES WHO LEFT:</p>			
<p>14. How many of the staff with custody responsibilities have:</p> <p>14A. Less than 1 year of service with the DOC</p> <p>14B. 1 – 2 years of service with the DOC</p> <p>14C. 3 – 4 years of service with the DOC</p> <p>14D. 5 – 9 years of service with the DOC</p> <p>14E. 10 or more years of service with the DOC</p> <p style="text-align: center;">TOTAL NUMBER OF STAFF WITH CUSTODY RESPONSIBILITIES (CALCULATED)</p>	0	0	0
<p>15. What is the total number of PREA-related training hours that entry level Correctional Officers are required to complete? Please include both hours that must be completed pre-service as well as those that must be completed during the first year of employment at the facility.</p> <p style="text-align: center;">ENTER NUMBER OF HOURS:</p>			
<p>16. When does a new Correctional Officer who begins employment at the facility have to complete all required PREA-related trainings?</p> <p>1 = Pre-service (prior to starting position)</p> <p>2 = Within first 24 hours of starting position</p> <p>3 = After first 24 hours but within first week (7 days) of starting position</p> <p>4 = After first week but within first month (30 days) of starting position</p> <p>5 = After first month but within first six months (180 days) of starting position</p> <p>6 = After first six months but within first year (365 days) of starting position</p> <p>7 = Some other timeframe</p> <p style="text-align: center;">ENTER RESPONSE BY NUMBER:</p> <p style="text-align: center;">If you selected response #7 to Question 16 above, PLEASE DESCRIBE THE OTHER TIMEFRAME:</p>			
<p>17. Which of the following methods are used at the facility to educate inmates about the fact that sexual activity is not allowed at the facility? Please select a Yes or No response for each method.</p> <p>17A. Facility staff</p>	<input type="radio"/> Yes		

17B. Posters / Signs 17C. Brochures / Flyers / Pamphlets 17D. Handbook that describes facility rules and policies 17E. Video 17F. Peer Educator 17G. New Inmate Orientation 17H. Some other way <p style="text-align: center;">If you answered 'Yes' to Question 17H above, PLEASE DESCRIBE THE OTHER METHOD USED TO EDUCATE INMATES:</p>	<input type="radio"/> No		
	<input type="radio"/> Yes		
	<input type="radio"/> No		
	<input type="radio"/> Yes		
	<input type="radio"/> No		
	<input type="radio"/> Yes		
	<input type="radio"/> No		
	<input type="radio"/> Yes		
<input type="radio"/> No			
<input type="radio"/> Yes			
<input type="radio"/> No			
18. Is there a Sexual Assault Nurse Examiner (SANE) onsite at the facility if an inmate needs to be seen?	<input type="radio"/> Yes <input type="radio"/> No		
<p>If you answered 'No' in Question 18, 19. If there is a need for an inmate at the facility to be seen by a SANE, how does that visit happen?</p> <p style="text-align: center;">PLEASE PROVIDE TEXT RESPONSE:</p>			
20. During the past 12 months, that is since this date last year, about how many violations of facility rules were reported and resulted in a guilty finding? Please include less serious violations such as use of abusive language or failure to attend class, as well as more significant violations such as possession of contraband and physical assaults.			
ENTER NUMBER OF GUILTY FINDINGS:			

<p>21. During what part of the day do most violations that result in a guilty finding occur in the facility?</p> <p>1 = After midnight but before 6:00 AM 2 = Between 6:00 AM and noon 3 = After noon but before 6:00 PM 4 = Between 6:00 PM and midnight</p> <p style="text-align: right;">ENTER RESPONSE BY NUMBER:</p>			
<p>22. During the past 12 months, that is since this date last year, how many allegations of sexual abuse or sexual harassment were made by inmates at the facility? Please only include allegations that were made against other inmates or staff at the facility.</p> <p style="text-align: right;">ENTER RESPONSE BY ALLEGATIONS:</p>			
<p>Please answer this question if your answer in Question 22 was "1" or more:</p> <p>23. During the past 12 months, that is since this date last year, were allegations of sexual abuse or sexual harassment at the facility investigated by staff at the facility, referred to an organization outside the facility to investigate, or both?</p> <p>1 = Staff at the facility investigated 2 = Referred to an organization outside the facility 3 = Both</p> <p style="text-align: right;">ENTER RESPONSE BY NUMBER:</p>			
<p>24. Does the facility have a policy that an inmate who makes an allegation of sexual abuse or sexual harassment must be notified of the outcome of the investigation?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p>		

Thank you for providing this important information!



Office of Research Protection

3040 Cornwallis Road ■ PO Box 12194 ■ Research Triangle Park, NC 27709-2194 ■ USA
 Telephone 919-316-3358 ■ Toll Free 1-866-214-2043 ■ Fax 919-316-3897 ■ www.rti.org

APPROVAL

January 14, 2019

Rachel Caspar
 919-541-6376, x26376
 caspar@rti.org

Dear Rachel Caspar:

On 12/11/2018, the IRB Committee reviewed the following submission below and approved it with required modifications. On 01/11/19, the required modifications you submitted were reviewed and accepted.

Type of Review:	Initial Study
Title:	National Inmate Survey (NIS-4) 2018-19
Investigator:	Rachel Caspar
IRB ID:	STUDY00020413
Funding Source:	Dept of Justice BJS
Customer/Client Name:	Dept of Justice BJS
Project/Proposal Number:	0216099
Contract/Grant Number:	2017-RP-BX-K053
IND, IDE, or HDE:	None

At a convened meeting, the IRB Committee approved the protocol from 12/11/2018 to 12/10/2019. Before 12/10/2019 or within 30 days of study close, whichever is earlier, you are to submit a completed continuing review and required attachments to request continuing approval or closure. You can submit a continuing review by navigating to the active study and clicking Create Modification / CR.

If continuing review approval is not granted before the expiration date of 12/10/2019, approval of this study expires on that date.

In conducting this protocol, you are required to follow the requirements listed in the Investigator Manual (HRP-103), which can be found by navigating to the IRB Library within the IRB system.

Sincerely,
 The RTI Office of Research Protection



Office of Research Protection

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APPROVAL

February 4, 2019

Rachel Caspar
 919-541-6376, x26376
 caspar@rti.org

Dear Rachel Caspar:

On 2/4/2019, the IRB reviewed the following submission:

Type of Review:	Modification
Title:	National Inmate Survey (NIS-4) 2018-19
Investigator:	Rachel Caspar
IRB ID:	MOD00000512 for 20413
Funding Source:	Dept of Justice BJS
Customer/Client Name:	Dept of Justice BJS
Project/Proposal Number:	0216099
Contract/Grant Number:	2017-RP-BX-K053
IND, IDE, or HDE:	None

The IRB approved the modification under 28 CFR 46 from 2/4/2019 to 12/10/2019. Before 12/10/2019 or within 30 days of study close, whichever is earlier, you are to submit a completed continuing review and required attachments to request continuing approval or closure. You can submit a continuing review by navigating to the active study and clicking Create Modification / CR.

If continuing review approval is not granted before the expiration date of 12/10/2019, approval of this study expires on that date.

In conducting this protocol, you are required to follow the requirements listed in the Investigator Manual (HRP-103), which can be found by navigating to the IRB Library within the IRB system.

Sincerely,
 The RTI Office of Research Protection



Office of Research Protection

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APPROVAL

December 4, 2019

Rachel Caspar

919-541-6376, x26376

caspar@rti.org

Dear Rachel Caspar:

On 12/3/2019, the IRB Committee reviewed the following submission:

Type of Review:	Continuing Review
Title:	National Inmate Survey (NIS-4) 2018-19
Investigator:	Rachel Caspar
IRB ID:	CR00000506
Funding Source:	Dept of Justice BJS
Customer/Client Name:	Dept of Justice BJS
Project/Proposal Number:	0216099
IND, IDE, or HDE:	None

At a convened meeting, the IRB Committee approved the protocol under 28 CFR 46 from 12/3/2019 to 12/2/2020. Before 12/2/2020 or within 30 days of study close, whichever is earlier, you are to submit a completed continuing review and required attachments to request continuing approval or closure. You can submit a continuing review by navigating to the active study and clicking Create Modification / CR.

If continuing review approval is not granted before the expiration date of 12/2/2020, approval of this study expires on that date.

In conducting this protocol, you are required to follow the requirements listed in the Investigator Manual (HRP-103), which can be found by navigating to the IRB Library within the IRB system.

Sincerely,
 The RTI Office of Research Protection



Office of Research Protection

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APPROVAL

April 8, 2020

Rachel Caspar

919-541-6376, x26376

caspar@rti.org

Dear Rachel Caspar:

On 3/17/2020, the IRB Committee reviewed the submission below and approved it with a required modification. On 4/8/2020, the required modification you submitted was reviewed and accepted.

Type of Review:	Modification
Title:	National Inmate Survey (NIS-4) 2018-19
Investigator:	Rachel Caspar
IRB ID:	MOD00000810
Funding Source:	Dept of Justice BJS
Customer/Client Name:	Dept of Justice BJS
Project/Proposal Number:	0216099
IND, IDE, or HDE:	None

At a convened meeting, the IRB Committee approved the modification under 28 CFR 46 from 3/17/2020 to 12/2/2020. Before 12/2/2020 or within 30 days of study close, whichever is earlier, you are to submit a completed continuing review and required attachments to request continuing approval or closure. You can submit a continuing review by navigating to the active study and clicking Create Modification / CR.

If continuing review approval is not granted before the expiration date of 12/2/2020, approval of this study expires on that date.

In conducting this protocol, you are required to follow the requirements listed in the Investigator Manual (HRP-103), which can be found by navigating to the IRB Library within the IRB system.

Sincerely,
 The RTI Office of Research Protection

For Additional Information about the National Inmate Survey - Prisons	
Questions About the Project	Questions About Your Rights as A Research Participant
NIS - Prisons Study PI RTI International P.O. Box 12194 Research Triangle Park, NC 27709-2194	Office of Research Protection RTI International P.O. Box 12194 Research Triangle Park, NC 27709-2194

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U.S. Department of Justice

Office of Justice Programs

Bureau of Justice Statistics

Washington, DC 20531

[DATE]

[NAME OF COMMISSIONER/SECRETARY]

[TITLE]

[STREET ADDRESS 1]

[STREET ADDRESS 2]

[CITY, STATE, AND ZIP CODE]

Dear [COMMISSIONER/SECRETARY NAME]:

Thank you for your recent participation in the Bureau of Justice Statistics' Fourth National Inmate Survey (NIS) of prisons. The commitment you and others in the STATE DOC have shown to helping us understand more about sexual victimization in US prisons is commendable. We appreciate the consideration our interviewers were shown during data collection at XX facilities in your state.

The Bureau of Justice Statistics and RTI International worked with many practitioners and researchers in developing the instrument and protocols for the survey. We hope your staff found the process to be well organized and efficient. Data collection will be followed by a period of data cleaning, weighting, and analysis. We anticipate beginning to release findings from the study starting in 2022.

Thank you again for your assistance. We welcome any feedback you might have about the experience. Please feel free to contact Amy Lauger, BJS PREA Program Manager, at Amy.Lauger@usdoj.gov or (202) 307-0711. She can also be contacted for more information about future NIS reports.

Sincerely,

INSERT ELECTRONIC SIGNATURE

Jeffrey H. Anderson
Director, Bureau of Justice Statistics



U.S. Department of Justice

Office of Justice Programs

Bureau of Justice Statistics

Washington, DC 20531

[DATE]

[FACILITY ADMINISTRATOR NAME]

[TITLE]

[STREET ADDRESS 1]

[STREET ADDRESS 2]

[CITY, STATE, AND ZIP CODE]

Dear [FACILITY ADMINISTRATOR NAME]:

Thank you for allowing the Bureau of Justice Statistics (BJS) and RTI International (RTI) to interview inmates in your facility as part of the Fourth National Inmate Survey (NIS) of prisons. Your facility's help was crucial to ensuring the success of NIS and generating national statistics of the characteristics of the U.S. prison population.

In particular, I would like to express my appreciation to [INSERT NAMES OF KEY STAFF WHO WORKED DIRECTLY WITH RTI] for their help with the study. They facilitated our work in an efficient and friendly manner. Please convey my thanks to them and all the other facility staff who assisted in this effort.

Thank you again for your cooperation and assistance. We hope you found the process to be well organized and efficient. After a period of data cleaning, weighting, and analysis, we anticipate beginning to release findings from the study in 2022.

We welcome any feedback you would like to share about the experience. Please feel free to contact Amy Lauger, BJS PREA Program Manager, at Amy.Lauger@usdoj.gov or (202) 307-0711 with comments or questions.

Sincerely,

[INSERT ELECTRONIC SIGNATURE]

Jeffrey H. Anderson
Director, Bureau of Justice Statistics