FORM SSV-4 (10-11-2018)



SURVEY OF SEXUAL VICTIMIZATION, 2017) Other Correctional Facilities 2018

Summary Form

U.S. DEPARTMENT OF JUSTICE BUREAU OF JUSTICE STATISTICS AND ACTING AS COLLECTION AGENT U.S. DEPT. OF COMMERCE Economics and Statistics Administration U.S. CENSUS BUREAU

Name Kevin Arthaud			Title Administrator		
OFFICIAL ADDRESS	Number and 2001 Lee /	street or P.O. Box/Route Number Avenue	City Bismarck	State Nd	ZIP Code 58504
relephone	Area code 701	Number 222-3440	FAX NUMBER	Area Code 201	Number 222-3599

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

What facilities are included in this data collection?

- PRIVATELY OPERATED FACILITIES: All privately owned or operated confinement facilities including prisons. lails, detention centers, community-based facilities, and other correctional facilities that are intended for adults but sometimes hold luveniles. INCLUDE privately operated multi-jurisdictional facilities.
- FACILITIES OPERATED BY OR FOR:
- THE UNITED STATES MILITARY
- THE BUREAU OF IMMIGRATION AND CUSTOMS ENFORCEMENT
- TRIBAL AUTHORITIES
- THE BUREAU OF INDIAN AFFAIRS

What inmates and incidents are included in this data collection?

2018 Inmates under your custody between January 1, 2017, and

- December 31, 2017
 Qo \omega
 INCLUDE incidents involving inmates under the authority, custody, or care of your confinement or community-based facilities or staff.
- EXCLUDE inmates held in other jurisdictions.

Reporting instructions:

- Please complete the entire SSV-4 Form.
- If the answer to a question is "not available" or "unknown," write "DK" (do not know) in the space provided.
- If the answer to a question is "not applicable," write "NA" in the space provided.
- Section I: when exact numeric answers are not available, provide estimates and mark (X) the box beside each
- Sections II, III, and IV: if the answer to a question is "none" or "zero," write "0" or mark the box (X) provided.

Substantiated incidents of sexual violence:

Please complete an Incident Form (Adult, SSV-IA) for each substantiated incident of sexual victimization.

Returning forms:

- If you need assistance, please call the U.S. Census Bureau toll-free at 1-888-369-3613, option 2, or e-mail govs.ssv@census.gov
- Please return your completed summary and substantiated incident forms by January 11, 2019.
- You may complete these forms online (see enclosed instructions). Or if you prefer, you may return these forms by mail or fax.
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE) TO: 1-888-262-3974

Burden statement

Under the Paperwork Reduction Act, we cannot ask you to respond to a collection of information unless it displays a currently valid OMB control number. The burden of this collection is estimated to average 30 minutes per response, including reviewing instructions, searching existing data sources, gathering necessary data, and completing and reviewing this form. Send comments regarding this burden estimate or any aspect of this survey, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. Do not send your completed form to this address.

Section I - GENERAL INFORMATION

Section II – INMATE-ON-INMATE SEXUAL VICTIMIZATION

1. How many persons under the supervision of your facility were—

a. CONFINED on December 31, 2017?

- INCLUDE persons on transfer to treatment facilities but who remain under your jurisdiction.
- INCLUDE persons out to court while under your jurisdiction.
- INCLUDE persons held for other jurisdictions.
- EXCLUDE inmates on AWOL, escape, or longterm transfer to other jurisdictions.
- EXCLUDE all persons in non-residential community-based programs run by your facility (e.g., electronic monitoring, house arrest, community service, day reporting, work programs).

Inmates on December 31, 2017 55 24

b. ADMITTED to your facility during 2017

- INCLUDE new admissions only, i.e., persons
 officially booked into and housed in your facilities by
 formal legal document and by the authority of the
 courts or some other official agency.
- INCLUDE repeat offenders booked on new charges.
- EXCLUDE returns from escape, work release, medical appointments/treatment facilities, and ball or court appearances.

Male Female

New admissions
during 2017
2018 285 165

2. Between January 1, 2017, and December 31, 2017, what was the average daily population of your confinement facility?

 To calculate the average daily population, add the number of persons for each day during the period January 1, 2017, through December 31, 2017, and divide the result by 365.

DEFINITIONS

The survey utilizes the definition of "sexual abuse" as provided by 28 C.F.R. §115.6 in the *National Standards to Prevent, Detect, and Respond to Prison Rape* (under the Prison Rape Elimination Act of 2003). For purposes of SSV, sexual abuse is disaggregated into three categories of inmate-on-inmate sexual victimization. These categories are:

NONCONSENSUAL SEXUAL ACTS

Sexual contact of any person without his or her consent, or of a person who is unable to consent or refuse;

AND

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

OR

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

OR

 Penetration of the anal or genital opening of another person however slight, by a hand, finger, object, or other instrument.

ABUSIVE SEXUAL CONTACT

Sexual contact of any person without his or her consent, or of a person who is unable to consent or refuse;

AND

- Intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks of any person.
- EXCLUDE incidents in which the contact was incidental to a physical altercation.

SEXUAL HARASSMENT

Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one inmate directed toward another.

3. Does your facility record allegations of inmate-on- inmate NONCONSENSUAL SEXUAL ACTS? (See definitions on page 2.)	6. Does your facility record allegation inmate-on-inmate ABUSIVE SEX CONTACT? (See definitions on page	UAL
ol ☑ Yes → a. Do you record all reported occurrences, or only substantiated ones?	o1	d separately from DNSENSUAL
o1 <u>√</u> All o2 □ Substantiated only	01 ☑ Yes 02 ☐ No → Skip to Item	9.
b. Do you record attempted NONCONSENSUAL SEXUAL ACTS or only completed ones?	02□ No → Please provide an explana below and then skip to Ite.	ition in the space
01 ☑ Both attempted and completed 02 ☐ Completed only		kanan sa ayang a sangga a sangga a sangga
02 ☐ No → Please provide the definition used by your facility for inmate-on-inmate NONCONSENSUAL. SEXUAL ACTS in the space below. Use that definition to complete Items 4 and 5.		
2018	みがく 7. Between January 1, 2017, and	
4. Between January 1, 2917, and December 31, 2017, how many allegations of inmate- on-inmate NONCONSENSUAL SEXUAL ACTS were reported?	December 31, 2010, how many of inmate- on-inmate ABUSIVE CONTACT were reported?	allegations SEXUAL
Number reported None	Number reported	☑ None
If an allegation involved multiple victimizations, count	 If an allegation involved multiple vio 	timizations, count
only once. Exclude any allegations that were reported as consensual.	only once.Exclude any allegations that were rep	orted as consensual
Exclude any allegations that were reported as consensual.	Exolude any dilegalistic man note to	
 Of the allegations reported in Item 4, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.) 	8. Of the allegations reported in Ite many were — (Please contact the a responsible for investigating allegation victimization in order to fully complete	gency or office is of sexual
a. Substantiated		
The event was investigated and determined to have occurred, based on a preponderance of the evidence (28 C.F.R. §115.72).	a. Substantiated —	✓ None
	b. Unsubstantiated	☑ None
b. Unsubstantiated		
 The investigation concluded that evidence was insufficient to determine whether or not the event occurred. 		<u></u>
	c. Unfounded	
c. Unfounded		
 The investigation determined that the event did NOT occur. 	d. Investigation ongoing . ——	
d. Investigation ongoing 🗹 None		
 Evidence is still being gathered, processed or evaluated, and a final determination has not yet been made. 		
	e. TOTAL (Sum of Items 8a through 8d)	✓ None
e. TOTAL (Sum of Items 5a through 5d) None	The total should equal the number	
The total should equal the number reported in Item 4.		

9.	Does your facility record allegations of inmate-on- inmate SEXUAL HARASSMENT? (See definitions on	Section III - 31 AFF-ON-INMATE SEAUAL ABOSE
	page 2.)	<u>DEFINITIONS</u>
	01 Yes → Do you record all reported allegations or only substantiated ones? 01 All 02 Substantlated only	The survey utilizes the definition of "sexual abuse" by a staff member, contractor or volunteer as provided by 28 C.F.R. §115.6 in the <i>National Standards to Prevent, Detect, and Respond to Prison Rape</i> (under the Prison Rape Elimination Act of 2003). For purposes of SSV, sexual abuse is disaggregated into two categories of staff-on-inmate sexual abuse. These categories are:
	02 ☐ No → Please provide an explanation in the space below and then skip to Section III.	STAFF SEXUAL MISCONDUCT
		Any behavior or act of a sexual nature directed toward an inmate by an employee, volunteer, contractor, official visitor or other agency representative (exclude family, friends or other visitors).
		Sexual relationships of a romantic nature between staff and inmates are included in this definition. Consensual or nonconsensual sexual acts include—
		 Intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks that is unrelated to official duties or with the Intent to abuse, arouse, or gratify sexual desire;
		OR
	2018	 Completed, attempted, threatened, or requested sexual acts;
10	. Between January 1, 2017, and December 31, 2017, how many allegations of	OR
	inmate-on-inmate SEXUAL HARASSMENT were reported?	 Occurrences of indecent exposure, invasion of privacy, or staff voyeurism for reason unrelated to official duties or for sexual gratification.
	Number reported 1 None	STAFF SEXUAL HARASSMENT
	If an allegation involved multiple victims or inmate perpetrators, count only once. Exclude any allegations that were reported as consensual.	Repeated verbal comments or gestures of a sexual nature to an inmate by an employee, volunteer, contractor, official visitor, or other agency representative (exclude family, friends, or other visitors). Include—
11.	Of the allegations reported in Item 10, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)	 Demeaning references to gender; or sexually suggestive or derogatory comments about body or clothing;
	Vicinfiization in order to runy complete uns form.)	OR
		 Repeated profane or obscene language or gestures.
	a. Substantiated	
	b. Unsubstantiated 🔃 📿 None	
	c. Unfounded 1 None	
	d. Investigation ongoing None	
	e. TOTAL (Sum of Items 11a through 11d)	
1	- The total enough equal the number reported in item 10.	

12. Does your facility record allegations of SEXUAL MISCONDUCT? (See definitions	of STAFF on page 4.)	15. Does your facility record alle SEXUAL HARASSMENT? (See	gations of STAFF definitions on page 4.)
01 Yes → Do you record all reported occurrences, or only subsones?	tantiated	01 ✓ Yes → Can these allegat separately from a STAFF SEXUAL M	llegations of
01 ☑ All 02 ∐ Substantiated only		01 ☑ Yes 02 ∐ No → Skip to It	em 18.
02 No → Please provide an explanation in below and then skip to Item 15.	n the space	02 □ No → Please provide an exp below and skip to Item	olanation in the space n 18.
20(8 13. Between January 1, 2017, and December 31, 2017, how many allega STAFF SEXUAL MISCONDUCT were re	itions of eported?	16. Between January 1, 2017, ar December 31, 2019, how man STAFF SEXUAL HARASSMEN	id ny allegations of IT were reported?
Number reported 2	∐ None	Number reported	1
 If an allegation involved multiple victimizat only once. 	ions, count	 If an allegation involved multiple only once. 	victims or staff, count
14. Of the allegations reported in Item 13 many were — (Please contact the agency office responsible for investigation allegation sexual victimization in order to fully complete form.)	or s of	17. Of the allegations reported in many were — (Please contact the office responsible for investigating sexual victimization in order to fully form.)	ne agency or allegations of
a. Substantiated	☑ None	a. Substantiated	I None
b. Unsubstantiated	□ None	b. Unsubstantiated	☑ None
c. Unfounded	☑ None	c. Unfounded	1 □ None
d. Investigation ongoing1	☑ None	d. Investigation ongoing	□ None
e. TOTAL (Sum of Items 14a 2 through 14d)	☐ None orted in Item 13.	e. TOTAL (Sum of Items 17a through 17d)	1 None umber reported in Item 16

Section IV – TOTAL SUBSTANTIATED INCIDENTS OF SEXUAL VICTIMIZATION	NOTES
18. What is the total number of substantiated incidents reported in Items 5a, 8a, 11a, 14a, and 17a?	
Total substantiated incidents ✓ None	
Please complete a Substantiated Incident Form (Adult, SSV-IA) for each substantiated incident of sexual victimization.	

FORM SSV-4 (10-11-2018)

Clear Fields

Page 6

Print Form