FORM SSV-4 (6-7-2022)



SURVEY OF SEXUAL VICTIMIZATION, 2021 **Other Correctional Facilities Summary Form**

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

Name Rick Barman		Title Administrator/PREA Manager			
OFFICIAL ADDRESS		street or P.O. Box/Route Number	City Lewistown	State MT	ZIP Code 59457
TELEPHONE	Area code 406	Number 535-6660	FAX NUMBER	Area Code 406	Number 535-6665

(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, jails, detention centers, community-based facilities, and other correctional facilities that are intended for adults but sometimes hold juveniles. 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?

Inmates under your custody between January 1, 2021, and December 31, 2021.

- INCLUDE incidents involving inmates under the authority, custody, or care of your confinement or community-based facilities or staff.
- EXCLUDE 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 November 12, 2022.
- You may complete these forms online at: https://ssv.census.gov/

MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000

FAX (TOLL FREE) 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, 2021?

- 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 long-term transfer to other jurisdictions.
- EXCLUDE all persons in non-residential communitybased programs run by your facility (e.g., electronic monitoring, house arrest, community service, day reporting, work programs).

		Male	Female	
Inmates on	2	85	v	

b. ADMITTED to your facility during 2021?

- 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 bail or court appearances.

Male Female **New admissions** 129 v during 2021

- 2. Between January 1, 2021, and December 31, 2021, 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, 2021, through December 31, 2021, and divide the result by 365.

Male Female

Average daily 70 population

DEFINITIONS

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

NONCONSENSUAL SEXUAL ACTS

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

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

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

- 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 alleginmate-on-inmate ABUSIVE S CONTACT? (See definitions on p	age 2.)	
	01 ✓ Yes → a. Do you record all reported occurrences, or only substantiated ones?	01 Yes -> Can these be cou allegations of NO SEXUAL ACTS?	nted se NCONS	parately from ENSUAL
	01 <u>*</u> All	o₁ ☑ Yes		
	02 ☐ Substantiated only			
		02 □ No → Skip to I	em 9.	
	b. Do you record attempted NONCONSENSUAL SEXUAL ACTS or only completed ones?	02 No → Please provide an exp below and then skip to	lanation i tem 9.	in the space
	01 ☑ Both attempted and completed			
	02 Completed only			
	o2 ☐ 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.			
4.	2. Between January 1, 2021, and December 31, 2024, how many allegations of inmate-on-inmate NONCONSENSUAL SEXUAL ACTS were reported?	7. Between January 1, 2021, a December 31, 2021, how may of inmate- on-inmate ABUSI CONTACT were reported?	nd any alle VE SEX	gations VAL
			4	
	Number reported	Number reported		_ None
	If an allegation involved multiple victimizations, count	 If an allegation involved multip 	le victimiz	zations, count
	only once.	only once.	ro roporto	d se consensual
	 Exclude any allegations that were reported as consensual. 	 Exclude any allegations that we 	e reporte	d as consensual.
5	5. 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 i many were — (Please contact responsible for investigating alleg victimization in order to fully com	tne ageni nations of	sexual
	O V None	Parallel State of the State of	ሽ	_
	Substantiated None The event was investigated and determined to have occurred, based on a preponderance of the evidence	a. Substantiated		_ ☑ None
	(28 C.F.R. §115.72).	recognition	4	
	λ	b. Unsubstantiated	1	
	b. Unsubstantiated None	No. of the control of		
and the state of	 The investigation concluded that evidence was insufficien to determine whether or not the event occurred. 		~	
inter-happed on	to determine whether or not the event occurred.	c. Unfounded	0'	V None
A STATE OF SALES	C Unfounded O V None			
encipaesa.	Ci Olliodildod	T Company	0	
(problement)	 The investigation determined that the event did NOT occur 	d. Investigation ongoing		V None
(Introduction)	d Investigation engains	MI IIII GOVIZULIANI ANIZAMIZ.		
STATE OF THE PERSON	d. Haceriderion ondoa	1		
el segment de la	 Evidence is still being gathered, processed or evaluated and a final determination has not yet been made. 	PATAL (Our of Home 90		
and order to the last		e. TOTAL (Sum of Items 8a through 8d)	1	None
Spinor House	e. TOTAL (Sum of Items 5a through 5d)	The total should equal the	number	reported in Item 7
None and	The total should equal the number reported in Item 4.			
1	- THE total should equal the hornber reported in them		and the second second second	Constitution of the Consti

9.	Does your facility record allegations of inmate-on- inmate SEXUAL HARASSMENT? (See definitions on			
	page 2.)	DEFINITIONS		
	oı ☑ Yes → Do you record all reported allegations or only substantiated ones? oı ☑ All o₂ ☐ Substantiated 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 National Standards to Prevent, Detect, and Respond to Prison Rape (under the Prison Rape Elimination Act of 2003). For purposes of SSV, sexual abuse is disaggregated into two categories of staff-on-inmate sexual abuse. These categories are:		
	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		
		 Completed, attempted, threatened, or requested sexual acts; 		
40	Between January 1, 2021, and	OR		
10	December 31, 2024% how many allegations of 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. 		
	1 🗖	STAFF SEXUAL HARASSMENT		
	 If an allegation involved multiple victims or inmate perpetrators, count only once. 	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		
	 Exclude any allegations that were reported as consensual 	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; 		
	, and a second s	OR		
	Ò	Repeated profane or obscene language or gestures.		
	a. Substantiated	Age of the state o		
become of the	0 -			
	b. Unsubstantiated Vone			
egicowania na				
and and a second	1 📥			
ownership of	c. Unfounded			
o de rejustigación de				
SAMPLE PRINCIPLE	Ø 61 Mars			
Secondon second	d. Investigation ongoing None			
on a second section				
de parcecanies.				
tentiforethick@pointsireat	e. TOTAL (Sum of Items 11a through 11d)			
14 Colonial	 The total should equal the number reported in Item 10 			

The state of the s	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
12. Does your facility record allegations of STAFF SEXUAL MISCONDUCT? (See definitions on page 4.)	15. Does your facility record allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 4.)
of Yes → Do you record all reported occurrences, or only substantiated ones?	of ☑ Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT?
01 All	01 ✓ Yes
02 Substantiated only	02 No → Skip to Item 18.
	02 No → Please provide an explanation in the space
o2 ☐ No → Please provide an explanation in the space below and then skip to Item 15.	below and skip to Item 18.
13. Between January 1, 2021, and December 31, 2024, how many allegations of STAFF SEXUAL MISCONDUCT were reported?	16. Between January 1, 2021, and December 31, 2021, how many allegations of STAFF SEXUAL HARASSMENT were reported?
STAFF SEXUAL INICOCUSCO.	
Number reported None	Number reported O None
 If an allegation involved multiple victimizations, count only once. 	 If an allegation involved multiple victims or staff, count only once.
14. Of the allegations reported in Item 13, how many were — (Please contact the agency or office responsible for investigation allegations of sexual victimization in order to fully complete this form.)	17. Of the allegations reported in Item 16, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)
a. Substantiated	a. Substantiated None
â	
b. Unsubstantiated	b. Unsubstantiated O V None
c. Unfounded 6	c. Unfounded None
C. Onlounded	Section 1
	O [7] No
d. Investigation ongoing . O None	d. Investigation ongoing None
e. TOTAL (Sum of Items 14a through 14d)	e. TOTAL (Sum of Items 17a None
 The total should equal the number reported in Item 13 	The total should equal the number reported in Item

		THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.
The state of the s	VANDER of a to of a little of a	BSTANTIATED
間に「一」「一」「「「」」「」「」		
The same beautiful transfer and a second second	A AF CEVILLE	VICTIMIZATION
id. Tradial 28 Cha	COM B 1 200-74 200 . 4 8 9 1 4 20	現「具と中間 田 1 () 1 F 中土 祖 田 L D A L 田

NOTES

18. What is the total number of substantiated incidents reported in Items 5a, 8a, 11a, 14a, and 17a?

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