FORM SSV-4 (3-5-2021)



SURVEY OF SEXUAL VICTIMIZATION, 2020 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

THE RESERVE OF THE PARTY OF THE	DATA SUF	PPLIED BY		
Name PV	i Trask	Title PREA	Manage	THE RESERVE OF THE PROPERTY OF
OFFICIAL ADDRESS	Number and street or P.O. Box/Route Number	Warm	Springs MT	ZIP Code 59 756 Number
TELEPHONE	Area code Number 2272	FAX NUMBI	Area Code 406	693 2276
E-MAIL ADDRESS	+trask@cccscon	p. com		

(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, 2020, and December 31, 2020.

- 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 October 29, 2021.
- 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.

How many persons under the supervision of your facility were—

a. CONFINED on December 31, 2020?

- 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 2021 December 31, 2020 120 0

20*21* b. ADMITTED to your facility during 2920?

- 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.

New admissions during 2020

Male Yefef

0 0

Female

- 2. Between January 1, 2020, and December 31, 2020, 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, 2020, through December 31, 2020, and divide the result by 365.

Male

Female

Average daily population

134 0 0

DEFINITIONS

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

NONCONSENSUAL SEXUAL ACTS

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

AND

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

OR

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

OR

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

ABUSIVE SEXUAL CONTACT

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

AND

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

SEXUAL HARASSMENT

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

3. Does your facility record allegations of inmate- inmate NONCONSENSUAL SEXUAL ACTS? (See definitions on page 2.)	CONTACT? (See definitions on page 2.)
01 ☐Yes → a. Do you record all reported occurred or only substantiated ones?	nces, O1 Yes -> Can these be counted separately from allegations of NONCONSENSUAL SEXUAL ACTS?
01 VAII	o₁ → Yes
02 Substantiated only	02 □ No → Skip to Item 9.
to a second attenuated	02 LINO - Skip to item 9.
b. Do you record attempted NONCONSENSUAL SEXUAL ACTS or only completed ones?	No → Please provide an explanation in the space below and then skip to Item 9.
01 Both attempted and completed	
02 Completed only	
	6 - 1/4 · ·
№ Please provide the definition used by your for inmate-on-inmate NONCONSENSUAL SEXUAL ACTS in the space below. Use the definition to complete Items 4 and 5.	
4. Between January 1, 2020, and December 31, 2020, how many allegations of inmate-on-inmate NONCONSENSUAL	7. Between January 1, 2020, and December 31, 2020, Row many allegations of inmate- on-inmate ABUSIVE SEXUAL CONTACT were reported?
SEXUAL ACTS were reported?	CONTACT Were reported
0 -	Number reported O Phone
Number reported None	Multiple reported
 If an allegation involved multiple victimizations, count 	only once.
only once.Exclude any allegations that were reported as consensu	I II I
Exclude any anegations that were reported as sense in	
5. Of the allegations reported in Item 4, how ma were — (Please contact the agency or office respons for investigating allegations of sexual victimization in or to fully complete this form.)	IDIE
	6
a. Substantiated None	a. Substantiated None
 The event was investigated and determined to hat occurred, based on a preponderance of the evided (28 C.F.R. §115.72). 	ence
^ -	b. Unsubstantiated
b. Unsubstantiated None	
 The investigation concluded that evidence was ins to determine whether or not the event occurred. 	c. Unfounded 9 19 None
↑ □	
c. Unfounded	
 The investigation determined that the event did NC 	d. Investigation ongoing Alone
0	d. investigation ongoing
d. Investigation ongoing None	
 Evidence is still being gathered, processed or evand a final determination has not yet been made 	
and a linal determination has not yet been made	e. TOTAL (Sum of Items 8a through 8d)
e. TOTAL (Sum of Items 5a through 5d)	The total should equal the number reported in Item 7.
 The total should equal the number reported in Ite 	5HL 4.

9. Does your facility record allegations of inmate-on-	Section III - STAFF-ON-INMATE SERVED ASSET
inmate SEXUAL HARASSMENT? (See definitions on page 2.)	DEFINITIONS
of	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:
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
	 Completed, attempted, threatened, or requested sexual acts;
2021	OR
10. Between January 1, 2020, and December 31, 2020, from 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.
2	STAFF SEXUAL HARASSMENT
Number reported	
 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	 Demeaning references to gender; or sexually suggestive or derogatory comments about body or clothing;
victimization in order to fully complete this form.)	OR
	 Repeated profane or obscene language or gestures.
a. Substantiated	1 repeated protate of our or
b. Unsubstantiated	
c. Unfounded	
d. Investigation ongoing . O None	
e. TOTAL (Sum of Items 11a through 11d)	

2. 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.)		
on √es → Do you record all reported occurrences, or only substantiated ones?	01		
01 All 02 Substantiated only	01		
02 No → Please provide an explanation in the space below and then skip to Item 15.	02 No → Please provide an explanation in the space below and skip to Item 18.		
13. Between January 1, 2029, and December 31, 2020, how many allegations of STAFF SEXUAL MISCONDUCT were reported?	16. Between January 1, 2020, and December 31, 2020, how many allegations of STAFF SEXUAL HARASSMENT were reported?		
	Number reported O I None		
If an allegation involved multiple victimizations, count	If an allegation involved multiple victims or staff, count only once.		
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 None	a. Substantiated O None		
b. Unsubstantiated O None	b. Unsubstantiated None		
c. Unfounded	c. Unfounded None		
d. Investigation ongoingNone	d. Investigation ongoing None		
e. TOTAL (Sum of Items 14a None	e. TOTAL (Sum of Items 17a hone		
 The total should equal the number reported in Item 	 The total should equal the number reported in Item 		

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		