Attachment 2

Questionnaires

FORM **SSV-1** (5-17-2017)



SURVEY OF SEXUAL VICTIMIZATION, 2016 Federal Bureau of Prisons 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

	A THE SECOND		_				
		DATA SUP	PLIED B	Y			
Name			Title				
OFFICIAL ADDRESS	Number and s	street or P.O. Box/Route Number		City	State	ZIP Code	
TELEPHONE	Area code	Number		FAX NUMBER	Area Code	Number	
E-MAIL ADDRESS							

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

What facilities are included in this data collection?

All confinement facilities operated by the Federal Bureau of Prisons.

- INCLUDE prisons, penitentiaries, and correctional institutions; boot camps; community correction facilities; halfway houses; prison farms; reception, diagnostic, and classification centers; road camps; forestry and conservation camps; vocational training facilities; prison hospitals; and drug and alcohol treatment facilities for prisoners.
- EXCLUDE privately-operated facilities. (These facilities will be contacted directly for data on sexual victimization.)

What inmates and incidents are included in this data collection?

Inmates under your custody between January 1, 2016, and December 31, 2016.

- INCLUDE incidents involving inmates under the authority, custody, or care of your confinement or community-based facilities or staff.
- EXCLUDE incidents involving inmates held in local jails and facilities in other jurisdictions.

Reporting instructions:

- Please complete the entire SSV-1 Form.
- If the answer to a question is "not available" or "unknown," write "DK" (do not know) in the space provided.
- If the answer to a question is "not applicable," write "NA" in the space provided.
- If the answer to a question is "none" or "0," mark the box (☒) provided.

Substantiated incidents of sexual violence:

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

Returning forms:

- If you need assistance, please call Greta Clark at the U.S. Census Bureau toll–free at 1–800–253–2078, or e-mail govs.ssv@census.gov
- Please return your completed summary and substantiated incident forms by August 15, 2017.
- You may complete these forms online (see enclosed instructions). Or if you prefer, you may return these forms by mail or fax.
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE): 1-888-262-3974

Burden Statement

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 60 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 – INMATE-ON-INMATE SEXUAL VICTIMIZATION

DEFINITIONS

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

NONCONSENSUAL SEXUAL ACTS

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

AND

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

OR

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

OR

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

ABUSIVE SEXUAL CONTACT

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

AND

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

SEXUAL HARASSMENT

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

1.	Does the Federal Bureau of Prisons record allegations of inmate-on-inmate NONCONSENSUAL SEXUAL ACTS?
	01 ☐ Yes → a. Do you record all reported occurrences, or only substantiated ones?
	01 ☐ All
	02 Substantiated only
	b. Do you record attempted NONCONSENSUAL SEXUAL ACTS or only completed ones?
	01 Both attempted and completed
	02 Completed only
	O2 ☐ No → Please provide the definition used by the Federal Bureau of Prisons for inmate-on-inmate NONCONSENSUAL SEXUAL ACTS in the space below. Use that definition to complete Items 2 and 3.
	Between January 1, 2016, and December 31, 2016, how many allegations of inmate-on-inmate NONCONSENSUAL SEXUAL ACTS were reported?
	Number reported
	 If an allegation involved multiple victimizations, count only once.
	 Exclude any allegations that were reported as consensual.
	Of the allegations reported in Item 2, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)
	a. Substantiated
	The event was investigated and determined to have occurred, based on a preponderance of the evidence (28 C.F.R. §115.72).
	b. Unsubstantiated
	The investigation concluded that evidence was insufficient to determine whether or not the event occurred.
	c. Unfounded
	The investigation determined that the event did NOT occur.
	d. Investigation ongoing None
	 Evidence is still being gathered, processed or evaluated, and a final determination has not yet been made.
	e. TOTAL (Sum of Items 3a through 3d)
	The total should equal the number reported in Item 2.

4.	Does the Federal Bureau of Prisons record allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT? (See definitions on page 2.)	7. Does the Federal Bureau of Prisons record allegations of inmate-on-inmate SEXUAL HARASSMENT? (See definitions on page 2.)	
	01 ☐ Yes → Can these be counted separately from allegations of NONCONSENSUAL SEXUAL ACTS?	01 ☐ Yes → Do you record all reported allegations or only substantiated ones?	
	01 ☐ Yes 02 ☐ No → Skip to Item 7.	01 All 02 Substantiated only	
	02 ☐ No → Please provide an explanation in the space below and then skip to Item 7.	02 ☐ No → Please provide an explanation in the space below and then skip to Section II.	
- 1	Between January 1, 2016, and December 31, 2016, how many allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT were reported?	8. Between January 1, 2016, and December 31, 2016 how many allegations of inmate-on-inmate SEXUAL HARASSMENT were reported?	ì,
ا	Number reported None	Number reported None	
•	 If an allegation involved multiple victimizations, count only once. 	 If an allegation involved multiple victims or inmate perpetrators, count only once. 	
	 Exclude any allegations that were reported as consensual. 	 Exclude any allegations that were reported as consensual. 	
- 1	Of the allegations reported in Item 5, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)	9. Of the allegations reported in Item 8, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)	
	a. Substantiated	a. Substantiated	
	b. Unsubstantiated None	b. Unsubstantiated	
	c. Unfounded None	c. Unfounded None	
	d. Investigation ongoing	d. Investigation ongoing None	
	e. TOTAL (Sum of Items 6a through 6d)	e. TOTAL (Sum of Items 9a through 9d) None	
	 The total should equal the number reported in Item 5. 	The total should equal the number reported in Item 8.	

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SECTION II – STAFF-ON-INMATE SEXUAL ABUSE

DEFINITIONS

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

STAFF SEXUAL MISCONDUCT

Any behavior or act of 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;

OR

 Occurrences of indecent exposure, invasion of privacy, or staff voyeurism for reasons unrelated to official duties or for sexual gratification.

STAFF SEXUAL HARASSMENT

Repeated verbal statements, comments or gestures of a sexual nature to an inmate by an employee, volunteer, contractor, official visitor, or other agency representative (exclude family, friends, or other visitors). Include—

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

OR

Repeated profane or obscene language or gestures.

	record allegations of STAFF SEXUAL MISCONDUCT?					
	01 ☐ Yes → Do you record all reported occurrences, or only substantiated ones?					
		01 All 02 Substantiated	d only			
	02 □ No →	Please provide an e below and then skip	explanation to to Item 13.	in the space		
	D.1					
11.	December	anuary 1, 2016, 31, 2016, how m (UAL MISCONDL	nanv alleg	ations of reported?		
	Number re	ported		. \square None		
	If an alleg count only	ation involved multi	ple victimiza	itions,		
2.	many were	gations reported — (Please contact for investigating alled in order to fully con	t the agency gations of s	or office exual		
	a. Substar	tiated		. None		
	b. Unsubs	tantiated		None		
	c. Unfound	led		None		
	d. Investig	ation ongoing .		□ None		
	e. TOTAL (12a throu	Sum of Items gh 12d)		. □ None		
	The to Item 1	tal should equal the 1.	number rep	orted in		

10. Does the Federal Bureau of Prisons

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13.	3. Does the Federal Bureau of Prisons record allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 4.)				
	01 ☐ Yes → Can these alleg separately from SEXUAL MISCO 01 ☐ Yes	allegation	counted ons of STAFF		
	02 ☐ No → Skip to	o Item 16.			
	02 ☐ No → Please provide an e. below and then skip	xplanation i to Item 16.	n the space		
4.4	Patrusan lanuaru 1 0046	a m al			
14.	Between January 1, 2016, a December 31, 2016, how m of STAFF SEXUAL HARASS reported?	anv alleg	ations re		
	Number reported		None		
	If an allegation involved multip count only once.	le victims o	r staff,		
15.	Of the allegations reported many were — (Please contact responsible for investigating alleg victimization in order to fully compared to the contact of the c	the agency pations of se	or office exual		
	a. Substantiated		None		
	b. Unsubstantiated		□ None		
	c. Unfounded		None		
	d. Investigation ongoing		□ None		
	e. TOTAL (Sum of Items 15a through 15d)		None		
	The total should equal the Item 14.	number rep	orted in		

Section III – TOTAL SUBSTANTIATED INCIDENTS OF SEXUAL VICTIMIZATION

	INCIDENTIO OF CENTRE	VIO I IIWIL	ALIUN
16.	What is the total number of incidents reported Items 3a		
	Total substantiated incidents		None
→	Please complete a Substan Form (Adult, SSV-IA) for ea incident of sexual victimiza	ch substa	

NOTES

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FORM **SSV-2** (5-17-2017)



SURVEY OF SEXUAL VICTIMIZATION, 2016 State Prison Systems Summary Form

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

	MILITAR							
		DATA SUF	PLIED B	Y				
Name			Title					
OFFICIAL	Number and	street or P.O. Box/Route Number		City		State	ZIP Code	
ADDRESS								
TELEPHONE	Area code	Number		FAX	1	Area Code	Number	
IELEPHONE				NUMBER				
E-MAIL								
ADDRESS								

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

What facilities are included in this data collection?

All State-operated confinement facilities that are intended for adults but sometimes hold juveniles.

- INCLUDE prisons, penitentiaries, and correctional institutions; boot camps; community correction facilities; halfway houses; prison farms; reception, diagnostic, and classification centers; road camps; forestry and conservation camps; vocational training facilities; prison hospitals; and drug and alcohol treatment facilities for prisoners.
- INCLUDE State-operated local detention facilities in Alaska, Connecticut, Delaware, Hawaii, Rhode Island, and Vermont.
- EXCLUDE privately operated facilities and facilities operated and administered by local governments. (These facilities will be contacted directly for data on sexual victimization.)
- EXCLUDE facilities that hold only juveniles. (These facilities will be contacted directly for data on sexual victimization.)

What inmates and incidents are included in this data collection?

Inmates under your custody between January 1, 2016, and December 31, 2016.

- INCLUDE incidents involving inmates under the authority, custody, or care of your confinement or community-based facilities or staff.
- EXCLUDE incidents involving inmates held in local jails and facilities in other jurisdictions.

Reporting instructions:

- Please complete the entire SSV-2 Form.
- If the answer to a question is "not available" or "unknown," write "DK" (do not know) in the space provided.
- If the answer to a question is "not applicable," write "NA" in the space provided.
- If the answer to a question is "none" or "0," mark the box (☒) provided.

Substantiated incidents of sexual violence:

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

Returning forms:

- If you need assistance, please call Greta Clark at the U.S. Census Bureau toll–free at 1–800–253–2078, or e-mail govs.ssv@census.gov
- Please return your completed summary and substantiated incident forms by August 15, 2017.
- You may complete these forms online (see enclosed instructions.) Or if you prefer, you may return these forms by mail or fax.
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE): 1-888-262-3974

Burden Statement

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 60 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 - INMATE-ON-INMATE SEXUAL VICTIMIZATION

DEFINITIONS

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

NONCONSENSUAL SEXUAL ACTS

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

AND

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

OR

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

OR

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

ABUSIVE SEXUAL CONTACT

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

AND

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

SEXUAL HARASSMENT

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

۱.	Does your State prison system record allegations of inmate-on-inmate NONCONSENSUAL SEXUAL ACTS?							
01 ☐ Yes → a. Do you record all reported occurrences, or only substantiated ones?								
	01 <mark>— All</mark>							
	02 Substantiated only							
	b. Do you record attempted NONCONSENSUAL SEXUAL ACTS or only completed ones?							
	o₁ ☐ Both attempted and completed							
	02 Completed only							
	o2 ☐ No → Please provide the definition used by your State prison system for inmate-on-inmate NONCONSENSUAL SEXUAL ACTS in the space below. Use that definition to complete Items 2 and 3.							
2.	Between January 1, 2016, and December 31, 2016, how many allegations of inmate-on-inmate NONCONSENSUAL SEXUAL ACTS were reported?							
	Number reported None If an allegation involved multiple victimizations,							
	count only once.							
	 Exclude any allegations that were reported as consensual. 							
3.	Of the allegations reported in Item 2, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)							
	a. Substantiated							
	The event was investigated and determined to have occurred, based on a preponderance of the evidence (28 C.F.R. §115.72).							
	b. Unsubstantiated None							
	The investigation concluded that evidence was insufficient to determine whether or not the event occurred.							
	c. Unfounded None							
	 The investigation determined that the event did NOT occur. 							
	d. Investigation ongoing \square None							
	 Evidence is still being gathered, processed or evaluated, and a final determination has not yet been made. 							
	e. TOTAL (Sum of Items 3a through 3d)							
	The total should equal the number reported in Item 2.							

FORM SSV-2 (5-17-2017) Page 2

Does your State prison system record allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT? (See definitions on page 2.)	7. Does your State prison system record allegations of inmate-on-inmate SEXUAL HARASSMENT? (See definitions on page 2.)			
on ☐ Yes → Can these be counted separately from allegations of NONCONSENSUAL SEXUAL ACTS?	01 ☐ Yes → Do you record all reported allegations or only substantiated ones?			
01 ☐ Yes 02 ☐ No → Skip to Item 7.	01 ☐ All 02 ☐ Substantiated only			
02 ☐ No → Please provide an explanation in the space below and then skip to Item 7.	02 ☐ No → Please provide an explanation in the space below and then skip to Section II.			
Between January 1, 2016, and December 31, 2016 how many allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT were reported?	, 8. Between January 1, 2016, and December 31, 2016, how many allegations of inmate-on-inmate SEXUAL HARASSMENT were reported?			
Number reported	Number reported			
 If an allegation involved multiple victimizations, count only once. 	 If an allegation involved multiple victims or inmate perpetrators, count only once. 			
 Exclude any allegations that were reported as consensual. 	 Exclude any allegations that were reported as consensual. 			
Of the allegations reported in Item 5, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)	9. Of the allegations reported in Item 8, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)			
a. Substantiated	a. Substantiated			
b. Unsubstantiated	b. Unsubstantiated None			
c. Unfounded None	c. Unfounded			
d. Investigation ongoing	d. Investigation ongoing None			
e. TOTAL (Sum of Items 6a through 6d)	e. TOTAL (Sum of Items 9a through 9d)			
 The total should equal the number reported in Item 5. 	 The total should equal the number reported in Item 8. 			

FORM SSV-2 (5-17-2017) Page 3

SECTION II - STAFF-ON-INMATE SEXUAL ABUSE

DEFINITIONS

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

STAFF SEXUAL MISCONDUCT

Any behavior or act of sexual nature directed toward an inmate by an employee, volunteer, contractor, official visitor or other agency representative (exclude family, friends or other visitors).

Sexual relationships of a romantic nature between staff and inmates are included in this definition. Consensual or nonconsensual sexual acts include—

 Intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks that is unrelated to official duties or with the intent to abuse, arouse, or gratify sexual desire;

OR

Completed, attempted, threatened, or requested sexual acts;

OR

 Occurrences of indecent exposure, invasion of privacy, or staff voyeurism for reasons unrelated to official duties or for sexual gratification.

STAFF SEXUAL HARASSMENT

FORM SSV-2 (5-17-2017)

Repeated verbal statements, comments or gestures of a sexual nature to an inmate by an employee, volunteer, contractor, official visitor, or other agency representative (exclude family, friends, or other visitors). Include—

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

OR

· Repeated profane or obscene language or gestures.

0.	Does your State prison system record allegations of STAFF SEXUAL MISCONDUCT?					
	01 ☐ Yes → Do you record al occurrences, or ones?	l reported only subs	l tantiated			
	01 ☐ All 02 ☐ Substantiated	only				
	02 ☐ No → Please provide an exbelow and then skip	xplanation ii to Item 13.	n the space			
1.	Between January 1, 2016, a December 31, 2016, how m STAFF SEXUAL MISCONDU	any alleg	ations of reported?			
	Number reported		None			
	If an allegation involved multip count only once.	le victimiza	tions,			
2.	Of the allegations reported many were — (Please contact responsible for investigating alleg victimization in order to fully comp	the agency ations of se	or office exual			
	a. Substantiated		☐ None			
	b. Unsubstantiated		☐ None			
	c. Unfounded		☐ None			
	d. Investigation ongoing		☐ None			
	e. TOTAL (Sum of Items 12a through 12d)		□ None			
	The total should equal the	number rep	orted in			

Page 4

Item 11.

13. Does your State prison system record allegations of STAFF SEXUAL HARASSMENT?	Section III – PRIVATE AND LOCAL ALLEGATIONS
(See definitions on page 4.) 11 Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT? 11 Yes 12 No → Skip to Item 16. 13 No → Please provide an explanation in the space below and then skip to Item 16.	 16. Did any of the allegations reported in Items 2, 5, 8, 11, or 14 occur in a privately operated facility? 1 Yes 2 No 17. Did any of the allegations reported in Items 2, 5, 8, 11, or 14 occur in a facility operated and administered by local governments? Yes No Section IV - TOTAL SUBSTANTIATED
	INCIDENTS OF SEXUAL VICTIMIZATION
	18. What is the total number of substantiated incidents reported in Items 3a, 6a, 9a, 12a, and 15a?
	Total substantiated incidents
14. Between January 1, 2016, and December 31, 2016, how many allegations of STAFF SEXUAL HARASSMENT were reported?	→ Please complete a Substantiated Incident Form (Adult, SSV-IA) for each substantiated incident of sexual victimization.
Number reported	NOTES
 If an allegation involved multiple victims or staff, count only once. 	
15. Of the allegations reported in Item 14, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)	
a. Substantiated	
b. Unsubstantiated	
c. Unfounded	
d. Investigation ongoing \square None	
e. TOTAL (Sum of Items 15a through 15d)	
The total should equal the number reported in Item 14.	

FORM SSV-2 (5-17-2017) Page 5

FORM **SSV-3** (4-26-2017)



SURVEY OF SEXUAL VICTIMIZATION, 2016 Local Jail Jurisdictions

al Jail Jurisdictions 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
U.S. CENSUS BUREAU

DATA SUPPLIED BY	
Name Title	
OFFICIAL Number and street or P.O. Box/Route Number City State ZIP Code	
ADDRESS	
TELEPHONE Area code Number FAX Area Code Number	
NUMBER	
E-MAIL	
ADDRESS	

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

What facilities are included in this data collection?

All confinement facilities usually operated by a local law enforcement agency that are intended for adults but sometimes hold juveniles.

- INCLUDE all jails and city/county correctional centers that hold inmates beyond arraignment. Report on ALL inmates, including those held in separate holding or lockup areas within your facility.
- INCLUDE multi-jurisdictional facilities (e.g., regional jails).
- INCLUDE special jail facilities (e.g., medical/treatment/ release centers, halfway houses, and work farms).
- EXCLUDE privately-operated jails. (These facilities will be contacted directly for data on sexual victimization.)

What inmates and incidents are included in this data collection?

Inmates under your custody between January 1, 2016, and December 31, 2016.

- INCLUDE incidents involving inmates under the authority, custody, or care of your confinement or community-based facilities or staff.
- **EXCLUDE** inmates held in other jurisdictions.

Reporting instructions:

- Please complete the entire SSV-3 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 (☒) the box beside each figure.
- Sections II, III, and IV: if the answer to a question is "none" or "zero," write "0" or mark the box (∑) provided.

Substantiated incidents of sexual violence:

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

Returning forms:

- If you need assistance, please call Greta Clark at the U.S. Census Bureau toll-free at 1-888-369-3613, option 2, or e-mail govs.ssv@census.gov
- Please return your completed summary and substantiated incident forms by August 1, 2017.
- You may complete these forms online (see enclosed instructions). Or if you prefer, you may return these forms by mail or fax.
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE): 1-888-262-3974

Burden Statement

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 local jail jurisdiction were—

a. CONFINED in your jail facilities on **December 31, 2016?**

- 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 persons housed in facilities operated by two or more jurisdictions or those held in privately-operated jails.
- EXCLUDE inmates on AWOL, escape, or long-term transfer to other jurisdictions.
- EXCLUDE all persons in non-residential community-based programs run by your jail (e.g., electronic monitoring, house arrest, community service, day reporting, work programs).

Male

Female

December 31, 2016				
b. ADMITTED to your jail fac	cilities du	ıring	2016?	
 INCLUDE new admissions booked into and housed in document and by the autho other official agency. 	your faciliti	es by	formal leg	
INCLUDE repeat offenders	booked on	new	charges.	
 EXCLUDE returns from esc appointments/treatment fac appearances. 				al
	Male		Female	
New admissions during 2016		. 🗆 _		
Between January 1, 2016, a December 31, 2016, what we daily population of all jail c facilities operated by your	vas the a onfineme	ent	ge	

To calculate the average daily population, add the number of persons for each day during the period January 1, 2016, through December 31, 2016, and

Male

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;

ΔND

- 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.

Average daily

divide the result by 365.

population

Inmates on

b.

2. B

Female

3. Does your local jail jurisdiction record allegation of inmate-on-inmate NONCONSENSUAL SEXUAL ACTS? (See definitions on page 2.)	
01 ☐ Yes → a. Do you record all reported occurrences, or only substantiated ones?	SEXUAL ACTS?
01	01 Yes 02 No → Skip to Item 9.
b. Do you record attempted NONCONSENSUAL SEXUAL ACTS	No → Please provide an explanation in the space
only completed ones?	
01 ☐ Both attempted and completed 02 ☐ Completed only	
02 ☐ No → Please provide the definition used by your local jail jurisdiction for inmate-on-inmate NONCONSENSUAL SEXUAL ACTS in the space below. Use that definition to complete Items 4 and 5.	
4. Between January 1, 2016, and December 31, 20 how many allegations of inmate-on-inmate NONCONSENSUAL SEXUAL ACTS were reported	how many allegations of inmate-on-inmate
Number reported	.
If an allegation involved multiple victimizations,	Number reported
 count only once. Exclude any allegations that were reported as consensual. 	once. Exclude any allegations that were reported as consensual.
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 in Item 7, 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
The event was investigated and determined to have occurred, based on a preponderance of the	a. Substantiated
evidence (28 C.F.R. §115.72).	b. Unsubstantiated
b. Unsubstantiated None	c. Unfounded None
 The investigation concluded that evidence was insufficient to determine whether or not the event occurred. 	
	d. Investigation ongoing None
c. Unfounded	e. TOTAL (Sum of Items
 The investigation determined that the event did NOT occur. 	8a through 8d)
d. Investigation ongoing \square None	Item 7.
Evidence is still being gathered, processed or evaluation and a final determination has not yet been made.	ated,
e. TOTAL (Sum of Items 5a through 5d)	
The total should equal the number reported in Item 4	l.

9. Does your local jail jurisdiction record	Section III - STAFF-UN-INMATE SEXUAL ABUSE
allegations of inmate-on-inmate SEXUAL HARASSMENT? (See definitions on page 2.)	<u>DEFINITIONS</u>
o1 ☐ Yes → Do you record all reported allegations or only substantiated ones? o1 ☐ All o2 ☐ Substantiated only Please provide an explanation in the space below and then skip to Section III.	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: STAFF SEXUAL MISCONDUCT
	OTALI GERGAL IIII GOORDOOT
	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—
10. Between January 1, 2016, and December 31, 2016, how many allegations of inmate-on-inmate SEXUAL HARASSMENT were reported?	 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;
Number reported None	OR
If an allegation involved multiple victims or	 Completed, attempted, threatened, or requested
inmate perpetrators, count only once.	sexual acts;
 Exclude any allegations that were reported as consensual. 	OR
11. Of the allegations reported in Item 10, how many were—	 Occurrences of indecent exposure, invasion of privacy, or staff voyeurism for reasons unrelated to official duties or for sexual gratification.
a. Substantiated	STAFF SEXUAL HARASSMENT
b. Unsubstantiated	Repeated verbal statements, comments or gestures of a sexual nature to an inmate by an employee, volunteer, contractor, official visitor, or other agency representative (exclude family, friends, or other visitors). Include—
c. Unfounded None	 Demeaning references to gender; or sexually suggestive or derogatory comments about body or clothing;
	OR
d. Investigation ongoing . — None	
e. TOTAL (Sum of Items	 Repeated profane or obscene language or gestures.
11a through 11d)	
 The total should equal the number reported in Item 10. 	
item 10.	

Section III - STAFF-ON-INMATE SEXUAL ABUSE

12.	Does your local jail jurisdiction record allegations of STAFF SEXUAL MISCONDUCT? (See definitions on page 4.)	15. Does your local jail jurisdiction record allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 4.)
	On ☐ Yes → Do you record all reported occurrences, or only substantiated ones?	O1 ☐ Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT?
	01 ☐ All 02 ☐ Substantiated only	01 ☐ Yes 02 ☐ No → Skip to Item 18.
	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 then skip to Item 18.
13.	Between January 1, 2016, and December 31, 2016, how many allegations of STAFF SEXUAL MISCONDUCT were reported?	16. Between January 1, 2016, and December 31, 2016, how many allegations of STAFF SEXUAL HARASSMENT were reported?
	Number reported	Number reported None
	 If an allegation involved multiple victimizations, or staff, count only once. 	 If an allegation involved multiple victims or staff, count only once.
14.	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.)	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
	b. Unsubstantiated	b. Unsubstantiated
	c. Unfounded None	c. Unfounded None
	d. Investigation ongoing None	d. Investigation ongoing \(\square \) None
	e. TOTAL (Sum of Items 14a through 14d)	e. TOTAL (Sum of Items 17a through 17d)

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**



SURVEY OF SEXUAL VICTIMIZATION, 2016 Other Correctional Facilities

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

er Correctional Facilities Summary Form

		DATA SUP	PLIED				
Name			Title				
OFFICIAL ADDRESS	Number and	street or P.O. Box/Route Number		City	State	ZIP Code	
TELEPHONE	Area code	Number		FAX NUMBER	Area Code	Number	
E-MAIL ADDRESS							

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

What facilities are included in this data collection?

- 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, 2016, and December 31, 2016.

- INCLUDE incidents involving inmates under the authority, custody, or care of your confinement or community-based facilities or staff.
- EXCLUDE 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 figure.
- Sections II, III, and IV: if the answer to a question is "none" or "zero." write "0" or mark the box (⋈) provided.

Substantiated incidents of sexual violence:

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

Returning forms:

- If you need assistance, please call Greta Clark at the U.S. Census Bureau toll-free at 1-888-369-3613, option 2, or e-mail govs.ssv@census.gov
- Please return your completed summary and substantiated incident forms by August 1, 2017.
- You may complete these forms online (see enclosed instructions). Or if you prefer, you may return these forms by mail or fax.
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE) 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

How many persons under the supervision of your facility were—

a. CONFINED on December 31, 2016?

- 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 community-based programs run by your facility (e.g., electronic monitoring, house arrest, community service, day reporting, work programs).

Inmates on December 31, 2016 . . Male Female

b. ADMITTED to your facility during 2016?

- 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.

- 2- Between January 1, 2016, and December 31, 2016, 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, 2016, through December 31, 2016, and divide the result by 365.

Section II - INMATE-ON-INMATE SEXUAL VICTIMIZATION

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;

ΔND

 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.

	Does your facility record allegations of inmate-on-inmate NONCONSENSUAL SEXUAL ACTS? (See definitions on page 2.)	6. Does your facility record allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT? (See definitions on page 2.)
	on ☐ Yes → a. Do you record all reported occurrences, or only substantiated ones?	01 ☐ Yes → Can these be counted separately from allegations of NONCONSENSUAL SEXUAL ACTS?
	01	01 \square Yes 02 \square No → Skip to Item 9.
	b. Do you record attempted NONCONSENSUAL SEXUAL ACTS or only completed ones?	02 No → Please provide an explanation in the space below and then skip to Item 9.
	o1 ☐ Both attempted and completed o2 ☐ Completed only	
	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.	
	Between January 1, 2016, and December 31, 2016, how many allegations of inmate-on-inmate NONCONSENSUAL SEXUAL ACTS were reported?	7. Between January 1, 2016, and December 31, 2016, how many allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT were reported?
	Number reported None	Number reported
	 If an allegation involved multiple victimizations, count only once. 	 If an allegation involved multiple victimizations, count only once.
	Exclude any allegations that were reported as consensual.	Exclude any allegations that were reported as consensual.
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 in Item 7, 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
	(28 C.F.R. §115.72).	
	b. Unsubstantiated	b. Unsubstantiated
	The investigation concluded that evidence was insufficient to determine whether or not the event occurred.	c. Unfounded
	c. Unfounded	C. Omounded Mone
	The investigation determined that the event did NOT occur.	
	d. Investigation ongoing \square None	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 5a through 5d)	 e. TOTAL (Sum of Items 8a through 8d)
	The total should equal the number reported in Item 4.	- The total enough equal the number reported in item 7.

Page 3

9. Does your facility record allegations of	Section III – STAFF-ON-INMATE SEXUAL ABUSE
inmate-on-inmate SEXUAL HARASSMENT? (See definitions on page 2.)	<u>DEFINITIONS</u>
o1 ☐ Yes → Do you record all reported allegations or only substantiated ones? o1 ☐ All o2 ☐ Substantiated only o2 ☐ No → Please provide an explanation in the space below and then skip to Section III.	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: 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
10. Between January 1, 2016, and December 31, 2016, 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.
Number reported	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 statements, comments or gestures of a sexual nature to an inmate by an employee, volunteer, contractor, official visitor, or other agency representative (exclude family, friends, or other visitors). Include—
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; OR
	Repeated profane or obscene language or gestures.
a. Substantiated	Hepeated profate of obscerie language of gestures.
b. Unsubstantiated	
c. Unfounded	
d. Investigation ongoing . — None	
e. TOTAL (Sum of Items 11a through 11d)	

Section III - STAFF-ON-INMATE SEXUAL ABUSE

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.)
o1 ☐ Yes → Do you record all reported occurrences, or only substantiated ones? o1 ☐ All o2 ☐ Substantiated only	01 ☐ Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT? 01 ☐ Yes 02 ☐ No → Skip to Item 18.
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, 2016, and December 31, 2016, how many allegations of STAFF SEXUAL MISCONDUCT were reported?	16. Between January 1, 2016, and December 31, 2016, how many allegations of STAFF SEXUAL HARASSMENT were reported?
Number reported □ None If an allegation involved multiple victimizations, count only once.	Number reported □ None 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
b. Unsubstantiated None	b. Unsubstantiated
c. Unfounded	c. Unfounded None
d. Investigation ongoing \square None	d. Investigation ongoing \square None
 e. TOTAL (Sum of Items 14a through 14d)	e. TOTAL (Sum of Items 17a through 17d)

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-5



SURVEY OF SEXUAL VICTIMIZATION, 2016

State Juvenile Systems
Summary Form

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

	USTICE	Summa	ry Form			U.S. CENSUS BUR	EAU
		DATA SUF	PPLIED B	Y			
Name			Title				
OFFICIAL ADDRESS	Number and s	street or P.O. Box/Route Number		City	State	ZIP Code	
TELEPHONE	Area code	Number		FAX NUMBER	Area Code	Number	
E-MAIL ADDRESS							

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

What facilities are included in this data collection?

All State-operated juvenile residential placement facilities used to house juveniles and youthful offenders, regardless of age or reason for placement.

- INCLUDE State-operated juvenile residential facilities such as: detention centers, training schools, long-term secure facilities; reception or diagnostic centers; group homes or halfway houses; boot camps; ranches; forestry camps, wilderness or marine programs, or farms; runaway or homeless shelters; and residential treatment centers for juveniles.
- EXCLUDE privately operated facilities and facilities operated or administered by local governments. (These facilities will be contacted directly for data on sexual victimization.)

What persons and incidents are included in this data collection?

Juveniles and youthful offenders, regardless of age or reason for placement, under your custody between January 1, 2016, and December 31, 2016.

- INCLUDE incidents involving juveniles or youthful offenders under the authority, custody, or care of your confinement or community-based facilities or staff.
- EXCLUDE incidents involving juveniles or youthful offenders not held in facilities operated by your State juvenile system.

Reporting instructions:

- Please complete the entire SSV-5 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 figure.
- Sections II, III, and V: if the answer to a question is "none" or "zero," write "0" or mark the box (☒) provided.

Substantiated incidents of sexual violence:

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

Returning forms:

- If you need assistance, please call Greta Clark at the U.S. Census Bureau toll-free at 1-800-253-2078 or email govs.ssv@census.gov
- Please return your completed summary and substantiated incident forms by August 15, 2017.
- You may complete these forms online (see enclosed instructions). Or if you prefer, you may return these forms by mail or fax.
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE): 1-888-262-3974

Burden Statement

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 60 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.

DEFINITIONS

JUVENILES and YOUTHFUL OFFENDERS

 Any person under the jurisdiction of your State's juvenile system or youthful offender authority, regardless of age or reason for placement.

FACILITIES

INCLUDE all State-operated facilities used to house juveniles or youthful offenders charged with or court-adjudicated for:

· Any offense that is illegal for both adults and juveniles;

OR

 An offense that is ILLEGAL in your State for juveniles, but not for adults (running away, truancy, incorrigibility, curfew violations, and liquor violations).

EXCLUDE State-operated facilities used ONLY to house juveniles for:

Non-criminal purposes (neglect, abuse, abandonment, or dependency);

OR

 Being Persons in Need of Services (PINS) or Children in Need of Services (CHINS) who have assigned beds for reasons other than offenses.

Section I - GENERAL INFORMATION

1. On December 31, 2016, how many facilities operated by your State held juveniles or youthful offenders CHARGED WITH or COURT-ADJUDICATED FOR AN OFFENSE?

Number of facilities			
----------------------	--	--	--

- Count all juvenile residential facilities where young persons who have committed offenses may be housed overnight.
- Count each facility with a separate physical location only once. Do not count separate living/sleeping units, wings, floors, dorms, barracks, or cottages within a single facility.

held in the facilities reported in I	item 1 were —	
a. Males		
b. Females		
c. TOTAL (Sum of Items 2a and 2b)		
 Count persons held in the facilities regardless of age or reason for places on the persons who were temporarily away beds on December 31, 2016. 	acement. Include	
3. On December 31, 2016, how man held in the facilities reported in I	ny persons Item 1 were —	
a. Age 17 or younger		
b. Age 18 to 20		
c. Age 21 or older		
d. TOTAL (Sum of Items 3a through 3c should equal Item 2c)		
 Count all persons held in the facil regardless of age or reason for pl persons who were temporarily aw beds on December 31, 2016. 	acement. Include	1
4. Between January 1, 2016, and Don't how many persons were admitted from the facilities reported in Item.	ecember 31, 2016 ed to or discharged em 1?	, 1
a. TOTAL number admitted		
b. TOTAL number discharged .		
 Include all persons admitted into y juvenile residential facilities by a f by the authority of the courts, or b agency. 	ormal legal document	,
 Include all persons discharged fro State-operated juvenile residentia period of confinement including se pretrial releases, transfers to adul other States, and deaths. 	Il facilities after a entence completion,	
 Exclude admissions and discharg returns from escape, administrativ juvenile facilities operated by your release including work/school release including work/school release 	ve transfers to other r State, or temporary ease, medical	

appearances.

Section II - YOUTH-ON-YOUTH SEXUAL VICTIMIZATION DEFINITIONS The survey utilizes the definition of "sexual abuse" as provided by 28 C.F.R. §115.6 in the National Standards to

6

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

 Sexual 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 youth directed toward another.

allegations of SEXUAL ACTS	youth-on-you	th NONC	ONSENSUAL
01 Yes → a.	Do you record occurrences, substantiated	or only	rted
	01 All 02 Substantia	ited only	
b.	Do you record	_	ed
	NONCONSEN or only comp	SUAL SE	XUAL ACTS
	01 ☐ Both attem 02 ☐ Completed	•	ompleted
NC spa	ease provide the ate juvenile syste DNCONSENSUA ace below. Use to ms 6 and 7.	m for youth L SEXUAL .	-on-youth ACTS in the
. Between Jan how many all NONCONSEN:	egations of yo	uth-on-yo	uth
Number repor	ted		None
	n involved multip	ole victimiza	tions, count
only once.Exclude any a consensual.	allegations that w	vere reporte	ed as
Of the allegat many were — responsible for in victimization in o	(Please contact nvestigating alleg	the agency pations of se	or office exual
a. Substantia	ted		. □ None
 The event 	was investigated	l and detern onderance c	nined to have of the evidence
b. Unsubstan	tiated		. □ None
The invest	igation concluded to determine wh	d that evide ether or no	nce was t the event
 The invest occur. 	igation determine	ed that the e	event did NOT
	on ongoing .		
 Evidence i and a final 	s still being gathe determination ha	ered, proces as not yet b	ssed or evaluated, een made.
e. TOTAL (Sur 7a through 7d	m of Items d)		□ None
 The total s Item 6. 	should equal the	number rep	orted in

8.	Does your State juvenile system record allegations of youth-on-youth ABUSIVE SEXUAL CONTACT? (See definitions on page 3.)	11. Does your State juvenile system record allegations of youth-on-youth SEXUAL HARASSMENT? (See definitions on page 2.)
	O1 ☐ Yes → Can these be counted separately from allegations of NONCONSENSUAL SEXUAL ACTS? O1 ☐ Yes O2 ☐ No → Skip to Item 11. O2 ☐ No → Please provide an explanation in the space below and then skip to Item 11.	on the space of t
9.	Between January 1, 2016, and December 31, 2016, how many allegations of youth-on-youth ABUSIVE SEXUAL CONTACT were reported?	12. Between January 1, 2016, and December 31, 2016, how many allegations of youth-on-youth SEXUAL HARASSMENT were reported?
	Number reported	Number reported None
	 If an allegation involved multiple victimizations, count only once. 	 If an allegation involved multiple victims or youth perpetrators, count only once.
	Exclude any allegations that were reported as consensual.	 Exclude any allegations that were reported as consensual.
I 0.	Of the allegations reported in Item 9, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)	13. Of the allegations reported in Item 12, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)
	a. Substantiated	a. Substantiated
	b. Unsubstantiated	b. Unsubstantiated
	c. Unfounded	c. Unfounded
	d. Investigation ongoing	d. Investigation ongoing . ——— \Box None
	e. TOTAL (Sum of Items 10a through 10d)	e. TOTAL (Sum of Items 13a through 13d)
	 The total should equal the number reported in Item 9. 	 The total should equal the number reported in Item 12.

Section III - STAFF-ON-YOUTH SEXUAL ABUSE

DEFINITIONS

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

STAFF SEXUAL MISCONDUCT

Any behavior or act of a sexual nature directed toward a youth by an employee, volunteer, contractor, official visitor or other agency representative (exclude family, friend or other visitors).

Sexual relationships of a romantic nature between staff and youths are included in this definition. Consensual or nonconsensual sexual acts include—

 Intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks that is unrelated to official duties or with the intent to abuse, arouse, or gratify sexual desire;

OR

Completed, attempted, threatened, or requested sexual acts:

OR

 Occurrences of indecent exposure, invasion of privacy, or staff voyeurism for reasons unrelated to official duties or for sexual gratification.

STAFF SEXUAL HARASSMENT

Repeated verbal statements, comments or gestures of a sexual nature to a youth by an employee, volunteer, contractor, official visitor, or other agency representative (exclude family, friends, or other visitors). Include—

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

ΩR

• Repeated profane or obscene language or gestures.

14.	. Does your State juvenile system record allegations of STAFF SEXUAL MISCONDUCT?		
	01 ☐ Yes → Do you record all reported occurrences, or only substantiated ones?		
	01 All 02 Substantiated o	nly	
	02 ☐ No → Please provide an exp below and then skip to	olanation in o Item 17.	the space
15.	Between January 1, 2016, and December 31, 2016, how man of STAFF SEXUAL MISCONDUREPORTED?	d ly allegat JCT were	ions
	Number reported	Г	None
	If an allegation involved multiple only once.	victimizatio	ns, count
16.	Of the allegations reported in many were — (Please contact the office responsible for investigating a sexual victimization in order to fully form.)	e agency of allegations	r Of
	a. Substantiated		☐ None
	b. Unsubstantiated		☐ None
	c. Unfounded		☐ None
	d. Investigation ongoing		☐ None
	e. TOTAL (Sum of Items 16a through 16d) The total should equal the r Item 15.		☐ None orted in

FORM SSV-5 (5-11-2017) Page 5

17. Does your State juvenile system record allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 5.)	Section IV - PRIVATE AND LOCAL ALLEGATIONS
on	 20. Did any of the allegations reported in Items 6, 9, 12, 15, or 18 occur in a privately operated facility? 1 Yes 2 No 21. Did any of the allegations reported in Items 6, 9, 12, 15, or 18 occur in a facility operated or administered by local governments?
	01 ☐ Yes 02 ☐ No
	Section V – TOTAL SUBSTANTIATED INCIDENTS OF SEXUAL VICTIMIZATION
18. Between January 1, 2016, and	22. What is the total number of substantiated incidents reported in Items 7a, 10a, 13a, 16a, and 19a?
December 31, 2016, how many allegations of STAFF SEXUAL HARASSMENT were reported?	Total substantiated incidents
Number reported □ None If an allegation involved multiple victims or staff, count only once.	→ Please complete a Substantiated Incident Form (Juvenile, SSV-IJ) for each substantiated incident of sexual victimization.
19. Of the allegations reported in Item 18, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)	NOTES
a. Substantiated None	
b. Unsubstantiated	
c. Unfounded None	
d. Investigation ongoing \square None	
 e. TOTAL (Sum of Items 19a through 19d)	

FORM SSV-6



SURVEY OF SEXUAL VICTIMIZATION, 2016 Locally or Privately-Operated Juvenile Facilities

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

		WHITE SEC		•					
			DATA SUF	PLIED B	Y				
	Name			Title					
	OFFICIAL	Number and	street or P.O. Box/Route Number		City		State	ZIP Code	
	ADDRESS								
	TELEPHONE	Area code	Number		FAX	A	Area Code	Number	
	ILLEFIIONE				NUMBER				
	E-MAIL								
/	ADDRESS								

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

What facilities are included in this data collection?

All juvenile residential placement facilities operated or administered by a local government and all privately owned or operated facilities that are used to house juveniles and youthful offenders, regardless of age or reason for placement.

- INCLUDE locally-operated juvenile residential facilities; privately owned or operated juvenile residential facilities; detention centers, training schools, long-term secure facilities; reception or diagnostic centers; group homes or halfway houses; boot camps; ranches; forestry camps, wilderness or marine programs, or farms; runaway or homeless shelters; and residential treatment centers for juveniles.
- EXCLUDE State operated juvenile residential facilities. (These facilities will be contacted directly for data on sexual victimization.)

What persons and incidents are included in this data collection?

Juveniles and youthful offenders, regardless of age or reason for placement, under your custody between January 1, 2016, and December 31, 2016.

- INCLUDE incidents involving juveniles or youthful offenders under the authority, custody, or care of your confinement or community-based facilities or staff.
- EXCLUDE incidents involving juveniles or youthful offenders held in facilities operated by your State juvenile system.

Reporting instructions:

- Please complete the entire SSV-6 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 figure.
- Sections II, III, and V: if the answer to a questions "none" or "zero," write "0" or mark the box ([X]) provided.

Substantiated incidents of sexual violence:

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

Returning forms:

- If you need assistance, please call Greta Clark at the U.S. Census Bureau toll–free at 1–888–369–3613, option 2, or e-mail govs.ssv@census.gov
- Please return your completed summary and substantiated incident forms by August 15, 2017.
- You may complete these forms online (see enclosed instructions). Or if you prefer, you may return these forms by mail or fax.
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE): 1-888-262-3974

Burden Statement

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.

DEFINITIONS

JUVENILES and YOUTHFUL OFFENDERS

 Any person under the custody or care of a juvenile residential facility owned or operated by a local government or private agency.

FACILITIES

INCLUDE all juvenile residential placement facilities operated or administered by a local government and all privately owned or operated facilities that are used to house juveniles and youthful offenders charged with or court-adjudicated for:

• Any offense that is illegal for both adults and juveniles;

OR

 An offense that is ILLEGAL in your State for juveniles, but not for adults (running away, truancy, incorrigibility, curfew violations, and liquor violations).

EXCLUDE all State-operated facilities and locally or privately-operated facilities used ONLY to house juveniles for:

Non-criminal behavior (neglect, abuse, abandonment, or dependency);

OR

 Being Persons in Need of Services (PINS) or Children in Need of Services (CHINS) who have assigned beds for reasons other than offenses.

Section I - GENERAL INFORMATION

1. Is this facility owned by a —	
01 ☐ Private agency	
02 Native American Tribal Government	
o3 ☐ State	
04 County	
05 Local or municipal government	
06 ☐ Other – Specify 🙀	
2. Is this facility operated by a —	
2. Is this facility operated by a — 01 Private agency	
01 Private agency	
01 ☐ Private agency 02 ☐ Native American Tribal Government	
o1 ☐ Private agency o2 ☐ Native American Tribal Government o3 ☐ State	
 O1 Private agency O2 Native American Tribal Government O3 State O4 County 	
 O1 Private agency O2 Native American Tribal Government O3 State O4 County O5 Local or municipal government 	
 O1 Private agency O2 Native American Tribal Government O3 State O4 County O5 Local or municipal government 	

3.	on December 31, 2016, now many per held in this facility were —	rsons
	a. Males	
	b. Females	
	c. TOTAL(Sum of Items 3a and 3b) .	
	 Count persons held in the facility regard reason for placement. Include persons temporarily away but had assigned bed December 31, 2016. 	who were
4.	On December 31, 2016, how many pended in this facility were—	rsons
	a. Age 17 or younger	
	b. Age 18 to 20	
	c. Age 21 or older	
	d. TOTAL (Sum of Items 4a through 4c should equal Item 3c)	
	 Count all persons held in the facility reg or reason for placement. Include persor temporarily away but had assigned bed December 31, 2016. 	ns who were
5.	Between January 1, 2016, and December 31, 2016, how many person admitted to or discharged from this fa	ns were acility?
	a. TOTAL number admitted	
	b. TOTAL number discharged .	
	 Include all persons admitted to this facilegal document, by the authority of the some other official agency. 	lity by a formal courts, or by
	 Include all persons discharged from this period of confinement including sentence pretrial releases, transfers to adult jurise other States, and deaths. 	ce completion,
	 Exclude admissions and discharges reserved returns from escape, administrative trar juvenile facilities, or temporary release work/school release, medical appointment reatment facilities, or court appearance 	nsfers to other including ents, other

Section II - YOUTH-ON-YOUTH SEXUAL VICTIMIZATION

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 youth-on-youth sexual victimization. These categories are:

NONCONSENSUAL SEXUAL ACTS

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

AND

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

Contact between the mouth and the penis, vulva, or

OR

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

ABUSIVE SEXUAL CONTACT

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

AND

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

SEXUAL HARASSMENT

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

6.	Does your fac youth-on-you ACTS?	cility record all th NONCONSE	legations NSUAL S	of EXUAL
	01 ☐ Yes → a.	Do you record occurrences, substantiated	or only	rted
		01 ☐ All 02 ☐ Substantia	ted only	
	b.	Do you record NONCONSEN or only comp	SUAL SE	XUAL ACTS
		01 Both atter	pted and c	
	fac SE	ease provide the cility for youth-on- EXUAL ACTS in the finition to complete	youth NON he space be	CONSENSUAL elow. Use that
7.	how many all	uary 1, 2016 a egations of yo SUAL SEXUAL	uth-on-vo	uth
	Number repo	rted		. None
	If an allegation	on involved multip	le victimiza	
	once.Exclude any	allegations that w	ere reporte	ed as consensual.
8.	Of the allega	tions reported	in Item 7	'. how many
	were — (Pleas	se contact the ago allegations of se	ency or office	ce responsible
	a. Substantia	ted		☐ None
	The even occurred,	t was investigated based on a prepo . §115.72).	l and deterr	mined to have
	b. Unsubstan	tiated		None
	The inves to determ	tigation concluded ine whether or not	that eviden the event o	ce was insufficient occurred.
	c. Unfounded	l		☐ None
	The invest	tigation determined	d that the ev	ent did NOT occur.
	d. Investigati	on ongoing .		None
	 Evidence and a final 	is still being gathe Il determination ha	ered, proces as not yet b	ssed or evaluated, een made.
	e. TOTAL (Sur 8a through 8	m of Items d)		☐ None
		should equal the		

9. Does your facility record allegations of youth-on-youth ABUSIVE SEXUAL CONTACT? (See definitions on page 3.)	12. Does your facility record allegations of youth-on-youth SEXUAL HARASSMENT? (See definitions on page 3.)
01 ☐ Yes → Can these be counted separately from allegations of NONCONSENSUAL SEXUAL ACTS?	Of ☐ Yes → Do you record all reported allegations or only substantiated ones?
01 ☐ Yes	01 ☐ All
02 ☐ No → Skip to Item 12.	02 Substantiated only
No → Please provide an explanation in the space below and then skip to Item 12.	No → Please provide an explanation in the space below and then skip to Section III.
10. Between January 1, 2016, and December 31, 2016, how many allegations of youth-on-youth ABUSIVE SEXUAL CONTACT were reported?	13. Between January 1, 2016, and December 31, 2016, how many allegations of youth-on-youth SEXUAL HARASSMENT were reported?
Number reported	Number reported None
 If an allegation involved multiple victimizations, count only once. 	 If an allegation involved multiple victims or youth perpetrators, count only once.
Exclude any allegations that were reported as consensual.	 Exclude any allegations that were reported as consensual.
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.)	14. Of the allegations reported in Item 13, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)
a. Substantiated	a. Substantiated
b. Unsubstantiated	b. Unsubstantiated
c. Unfounded None	c. Unfounded
d. Investigation ongoing	d. Investigation ongoing None
e. TOTAL (Sum of Items 11a through 11d)	e. TOTAL (Sum of Items 14a through 14d)
The total should equal the number reported in Item 10.	 The total should equal the number reported in Item 13.

Section III - STAFF-ON-YOUTH SEXUAL ABUSE

DEFINITIONS

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

STAFF SEXUAL MISCONDUCT

Any behavior or act of a sexual nature directed toward a youth 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 youths are included in this definition. Consensual or nonconsensual sexual acts include—

 Intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks that is unrelated to official duties or with the intent to abuse, arouse, or gratify sexual desire;

OR

Completed, attempted, threatened, or requested sexual acts;

OR

 Occurrences of indecent exposure, invasion of privacy, or staff voyeurism for reasons unrelated to official duties or for sexual gratification.

STAFF SEXUAL HARASSMENT

Repeated verbal statements, comments or gestures of a sexual nature to a youth by an employee, volunteer, contractor, official visitor, or other agency representative (exclude family, friends, or other visitors). Include—

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

OR

Repeated profane or obscene language or gestures.

15.	. Does your facility record allegations of STAFF SEXUAL MISCONDUCT?			
	01 ☐ Yes → Do you record all reported occurrences, or only substantiated ones?			
		01 All 02 Substantiated	only	
	02 □ No →	Please provide an ex below and then skip	rplanation in to Item 18.	the space
16.	December	anuary 1, 2016, ar 31, 2016, how ma (UAL MISCONDUC	nv allegat	ions of ported?
	Number re	ported		None
	If an allegation once.	ation involved multiple	victimization	ns, count only
17.	many were responsible f	gations reported in a — (Please contact the or investigating allegating order to fully compliant in order to fully compliant.	ne agency of tions of sex	r office ual
	a. Substa	nntiated		□ None
	b. Unsub	stantiated		□ None
	c. Unfou	nded		□ None
	d. Invest	igation ongoing		. ☐ None
	e. TOTAL 17a thro	. (Sum of Items ough 17d)		□ None
	• The t	otal should equal the r	number repo	ted in Item 16.

18.	Does your facility record allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 5.)	INCIDENTS OF SEXUAL VICTIMIZATION
	01 ☐ Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT?	21. What is the total number of substantiated incidents reported in Items 8a, 11a, 14a, 17a, and 20a.
	01 Yes 02 No → Skip to Item 21 02 No → Please provide an explanation in the space below and then skip to Item 21.	Total substantiated incidents
		(Juvenile, SSV-IJ) for each substantiated incident of sexual victimization.
		NOTES
19.	Between January 1, 2016, and December 31, 2016, how many allegations of STAFF SEXUAL HARASSMENT were reported?	
	Number reported	
	 If an allegation involved multiple victims or staff, count only once. 	
20.	Of the allegations reported in Item 19, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)	
	a. Substantiated None	
	b. Unsubstantiated	
	c. Unfounded	
	d. Investigation ongoing \square None	
	e. TOTAL (Sum of Items 20a through 20d)	
	The total should equal the number reported in Item 19.	





SURVEY OF SEXUAL VICTIMIZATION, 2016

Substantiated Incident Form (Adult)

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

Incident Number ___ out of ___

See item 25 on page 3

1.	On what date did the incident occur? (If more than one date, report the most recent.)	6.	How many victims v	vere involved in the incident?
	Month Day Year		Number of victims	
2.	In what facility did the incident occur?		→ If more than two report their chara	victims were involved, cteristics in Notes on page 5.
	·			
	Name	7.	Victim #1: What was identity? (See definite	s the victim's sex or gender tions on page 5.)
	City/Place		01 Male	03 🗌 Transgender
			02 🗌 Female	04 🗌 Intersex
3.	Where did the incident occur? (Mark (X) all that apply.)	8.	Victim #1: What was	the victim's age at the
	on In the victim's cell or room (e.g., if the victim and perpetrator share a cell or room, count as the victim's cell)		time of the incident?	_
	o2 ☐ In the perpetrator's cell or room		01 Under age 18	05 \(\sum 35 - 39 \)
	02 ☐ In the perpetrator's cent of room 03 ☐ In a dormitory or other multiple housing unit		02	06 40 - 44 07 45 - 54
			04 30 - 34	07
	04 In a common area (e.g., shower, dayroom, bathroom)		04 🖂 30 – 34	08 🖂 55 Of Older
	□ In a temporary holding cell or intake area within the facility	9.	Victim <u>#</u> 1: What was	the victim's race/ethnic origin?
	of \square In a program service area (e.g., commissary, kitchen, storage, laundry, cafeteria, workshop, hallway)		(Mark (X)) all that app	
	$_{\rm 07}$ \square In an instructional area (e.g., classroom, school, library, conference room)		01 White (not of Hisp 02 Black (not of Hisp	panic origin)
	08 In a recreation area (e.g., yard, courtyard, gymnasium)		03 Hispanic or Latino	
	09 \square In a medical area (e.g., infirmary, health clinic)			Alaska Native (not of Hispanic origin)
	10 \square In a staff area (e.g., office, break room, counselor's office)		05 Asian (not of Hisp	<i>panic origin)</i> or Other Pacific Islander
	11 Offsite or while in transit		(not of Hispanic of	
	12 ☐ Other – Specify ⊋		07 ☐ Other racial categ Specify ✓	ory in your information system –
	13 Location unknown			
4.	Did the incident take place in an area subject to video monitoring?	10	D. Victim #2: What wa identity? (See defination)	s the victim's sex or gender itions on page 5.)
	01 Yes		01 Male	03 🗌 Transgender
	02 No		02 Female	04 🗌 Intersex
	03 Don't know		oz 🖂 i omalo	
5.	(Mark ($\overline{\mathbb{X}}$) all that apply.)	11	. Victim #2: What wa time of the incident	s the victim's age at the ?
	01 Morning (6 a.m. to noon)		01 Under age 18	05 🔲 35 – 39
	02 Afternoon (noon to 6 p.m.)		02 🔲 18 – 24	06 🔲 40 – 44
	03 Evening (6 p.m. to midnight)		03 🔲 25 – 29	07 🔲 45 – 54
	04 Overnight (midnight to 6 a.m.)		04 🗌 30 – 34	08 🗌 55 or older
	05 Time unknown			

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.

12.	Victim #2: What was the victim's race/ethnic origin? (Mark (X)) all that apply.)	15. After the incident was reported, was the victim(s) – (Mark (X) all that apply for all victims.)
	01 ☐ White (not of Hispanic origin)	01 🔲 Given a medical examination
	₀₂ Black (not of Hispanic origin)	02 🔲 Administered a rape kit
	03 🗌 Hispanic or Latino	03 L Tested for HIV/AIDS
	04 \square American Indian/Alaska Native (not of Hispanic origin)	04 Tested for other sexually transmitted diseases
	05 🔲 Asian (not of Hispanic origin)	05 Provided with counseling or mental health treatment
	06 Native Hawaiian or Other Pacific Islander	06 Offered but declined testing or treatment
	(not of Hispanic origin)	07 Already released/discharged
	07 ☐ Other racial category in your information system – Specify ✓	08 None of the above
12	Did the victim(s) sustain any physical injury	16. After the incident was reported, was the victim(s) – (Mark (X) all that apply for all victims.)
13.	during the incident?	01 Placed in or returned to administrative segregation,
	02 No (No injury sustained)	protective custody, or disciplinary segregation oz Placed in a medical unit, ward, or hospital
	01 ☐ Yes → a. What injuries occurred?	03 Confined to own cell or room
	(Mark ($oxtimes$) all that apply for all victims.)	04 Given a higher custody level or different unit within
	01 🗌 Knife or stab wounds	the facility
	₀₂ Broken bones	05 🗌 Transferred to another facility
	03 Anal or vaginal tearing	06 Transferred to another housing unit or dorm, or
	04 Chipped or knocked out teeth	given a single room or cell
	05 Internal injuries	07 Separated from perpetrator
	06 Knocked unconscious	08 L Issued disciplinary report or loss of privileges
	07	09 Placed in camera room, under closer surveillance, or increased supervision
	08 ☐ Other – <i>Specify</i> _₹	10 □ Other – <i>Specify</i> →
	→ b. Did the victim(s) receive medical treatment for these injuries?	\Box None of the above
	01 ☐ Yes	
	02 No	17. What type of sexual violence was involved in the incident? (See definitions on page 5.)
14.	Who reported the incident? (Mark (⊠) all that apply.)	01 \square Inmate-on-inmate nonconsensual sexual act \longrightarrow Complete Section A, below
	01 🗌 Victim	02 Inmate-on-inmate abusive sexual contact
	02 Another inmate (non-victim)	→ Complete Section A, below □ Inmate-on-inmate sexual harassment
	03 🗌 Victim's family or friend	→ Complete Section A, below
	04 🔲 Correctional officer or front line staff	04 🗌 Staff sexual misconduct
	05 Administrative staff	$ ightarrow$ Complete Section B on pages 4–5 \square Staff sexual harassment
	06 Medical, healthcare, or mental health staff	\rightarrow Complete Section B on pages 4–5
	07 Instructor, teacher, or counselor	, ·
	08 Other staff (e.g., kitchen worker, maintenance staff) 09 Chaplain or other religion official	Section A - INMATE-ON-INMATE SEXUAL VICTIMIZATION
	10 Perpetrator	
	11 Perpetrator's family or friend	→ If the perpetrator was a staff member, go
	12 Grievance coordinator, grievance process, or	to Section B on pages 4–5.
	ombudsperson	18. How many inmate perpetrators were involved in the incident?
	13 Attorney or legal guardian (e.g., other than family member)	
	14 Confidential informant, anonymous tip, hot line, or	Number of inmate perpetrators
	through monitoring (e.g., camera, telephone, or mail)	. 16
	15 ☐ Other – <i>Specify</i>	→ If more than two inmate perpetrators were involved, report their characteristics in Notes on page 5.

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19.	Perpetrator #1: What was the inmate perpetrator's sex or gender identity? (See definitions on page 5.)	25. What was the nature of the incident? (Mark (☒) all that apply.)
		01 Voluntary sexual contact between inmates
	01 Male 03 Transgender	02 🔲 Sexual harassment
	02 L Female 04 Intersex	03 L Indecent exposure, masturbation, or voyeurism
20.	Perpetrator #1: What was the inmate	₀₄ Horseplay
	perpetrator's age at the time of the incident?	₀₅ Repeated and unwelcome sexual advances or requests for sexual favors
	01 Under age 18 04 30-34 07 45-54 02 18-24 05 35-39 08 55 or older	06 Unwanted touching for sexual gratification or
	03 ☐ 25–29 06 ☐ 40–44	abusive sexual contact 07 Pressure or coercion (without force) resulting in a
	30 20 20 10 11	nonconsensual sexual act
21.	Perpetrator #1: What was the inmate	$_{ extsf{08}}$ \square Physical force (or the threat of force) resulting
	perpetrator's race/ethnic origin? (Mark (X) all that apply.)	in a nonconsensual sexual act 09 □ Other – <i>Specify</i>
	01 ☐ White (not of Hispanic origin)	
	02 Black (not of Hispanic origin)	
	03 Hispanic or Latino	
	04 American Indian/Alaska Native (not of Hispanic origin)	26. What type of pressure or physical force was used by the inmate perpetrator on the victim? (Mark (X) all that apply for all perpetrators.)
	05 Asian (not of Hispanic origin)	on ☐ Sexual harassment, sexual innuendo, or verbal
	06 Native Hawaiian or Other Pacific Islander (not of Hispanic Origin)	comments
	07 Other racial category in your information system -	
	Specify Z	03 Surprised the victim with unwanted touching, grabbing or groping, or victim was asleep
		04 Bribery or blackmail
22	Perpetrator #2: What was the inmate	₀₅ Gave victim drugs or alcohol
	perpetrator's sex or gender identity?	06 Offered protection from other inmates
	(See definitions on page 5.)	07 Threatened with physical harm
	01 Male 03 Transgender	08 Physically held victim down or restrained in
	02 Female 04 Intersex	some way
22	Downstants #2: Wilest was the immedia	09 Physically harmed or injured 10 Threatened with a weapon
23.	Perpetrator #2: What was the inmate perpetrator's age at the time of the incident?	11 ☐ Other – <i>Specify</i> ⊋
	01 ☐ Under age 18 04 ☐ 30–34 07 ☐ 45–54	
	02	
	03 🗆 25–29 06 🗀 40–44	12 None
24	Perpetrator #2: What was the inmate	27. What sanction was imposed on the perpetrator(s)?
27.	perpetrator's race/ethnic origin?	(Mark (X) all that apply for all perpetrators.)
	(Mark (X) all that apply.)	01 Placed in solitary confinement or disciplinary
	01 White (not of Hispanic origin)	segregation 02 Confined to own cell or room
	02 ☐ Black (not of Hispanic origin)	03 Placed in higher custody level, restricted unit or
	03 ☐ Hispanic or Latino 04 ☐ American Indian/Alaska Native (not of Hispanic	program, within the same facility
	origin)	04 Transferred to other unit/cell or separated from victim
	05 Asian (not of Hispanic origin)	₀₅ Transferred to another facility
	06 Native Hawaiian or Other Pacific Islander (not of Hispanic Origin)	06 ☐ Loss of "good/gain" time, increase in "bad" time or delayed release
	07 Other racial category in your information system –	
	Specify _⊋	08 Loss of privileges, disciplinary report or conduct violation, or other reprimand
		09 Sent to counseling or treatment team
		10 ☐ Arrested or referred to law enforcement agency 11 ☐ Referred for prosecution or indicted
		12 Convicted, given new sentence, or fined
		13 ☐ Other – <i>Specify</i> ✓
		,

FORM SSV-IA (4-27-2017) Page 3

	Section B – STAFF-ON-INMATE SEXUAL ABUSE	33.	3. Staff #2: What was the gender of the staff?
	→ If the perpetrator was an inmate, go to Section A on pages 2–3.	0.5	01 Male 02 Female
28.	. What was the nature of the incident? (Mark (X) all that apply.)	34.	4. Staff #2: What was the age of the staff at the time of the incident?
	01 Physical force resulting in a nonconsensual sexual act		01
	02 Pressure or abuse of power resulting in a nonconsensual sexual act		$03 \bigsqcup 30 - 34$ $07 \bigsqcup 55$ or older $04 \bigsqcup 35 - 39$
	os Indecent exposure, invasion of privacy, or voyeurism for sexual gratification	35.	5. Staff #2: What was the race/ethnic origin of the staff involved in the incident? (Mark (X) all that apply.)
	04 Unwanted touching for sexual gratification		on ☐ White (not of Hispanic origin)
	of a sexual nature by staff OS ☐ Wests Letters aboved mixtures are		02 🔲 Black (not of Hispanic origin)
	06 Wrote letters, showed pictures, or offered gifts or special privileges to inmate		03 ☐ Hispanic or Latino 04 ☐ American Indian/Alaska Native (not of Hispanic
	₀₇ Sexual relationship between inmate and staff that appeared to be willing		origin) origin (not of Hispanic origin)
	08 ☐ Other – Specify ⊋		06 ☐ Native Hawaiian or Other Pacific Islander (not of Hispanic origin)
	Level of coercion unknown		07 ☐ Other racial category in your information system - Specify ✓
	09 Level of coercion unknown		
29.	How many staff were involved in the incident?		
	Number of staff → If more than two staff were involved, report	36.	6. Was the staff involved in the incident an employed of the facility, a contractor, or a volunteer? (Mark (X) all that apply for all staff involved.)
	their characteristics in Notes on page 5.		01 🗌 Full– or part–time paid employee
20	Staff #1: What was the gender of the staff?		02 Contract employee or vendor
SU.			03 Volunteer or intern
	01 ☐ Male 02 ☐ Female		04 ☐ Other – Specify Z
31.	Staff #1: What was the age of the staff at the time of the incident?		
	01 ☐ 24 or younger 05 ☐ 40 – 44	37.	7. What was the primary position description of the staff involved in the incident?
	02		(Mark (X)) all that apply for all staff involved.)
	$03 \square 30 - 34$ $07 \square 55$ or older $04 \square 35 - 39$		01 Administrator, including wardens, superintendent assistants and others in administrative positions
	Chaff #4. What was the wass/otheric again of the		02 Correctional officer or supervisory staff
5Z.	Staff #1: What was the race/ethnic origin of the staff involved in the incident? (Mark (X) all that apply.)		03 Clerical staff including secretaries, clerks, receptionists, and other administrative support
	01 ☐ White (not of Hispanic origin) 02 ☐ Black (not of Hispanic origin)		04 Maintenance and other facility support staff, including groundskeepers, janitors, cooks, and drivers
	03 ☐ Hispanic or Latino 04 ☐ American Indian/Alaska Native (not of Hispanic origin)		05 Medical or health care staff, including counselors, doctors, dentists, psychologists, psychiatrists, social workers, nurses, and medical assistants
	05 ☐ Asian (not of Hispanic origin) 06 ☐ Native Hawaiian or Other Pacific Islander		06 Education staff, including instructors, teachers, librarians, and education assistants
	(not of Hispanic origin)		07 🔲 Other program staff
	or ☐ Other racial category in your information system – Specify ✓		08 Volunteers or Interns
			09 ☐ Other staff – Specify ⊋

Page 4 FORM SSV-IA (4-27-2017)

What sanction was imposed on the staff? (Mark (X) all that apply for all staff involved.)
(Mark (X) all that apply for all staff involved.) 01 Sent to training or counseling 02 Reprimanded or disciplined 03 Demoted, diminished responsibilities, or suspended temporarily 04 Transferred to another facility or unit 05 Arrested or referred to law enforcement agency 06 Referred for prosecution or indicted 07 Convicted, plead guilty, sentenced, or fined 08 Discharged, terminated, or contract not renewed 09 Staff resigned (prior to completion of investigation) 10 Staff resigned (after investigation was completed)
Other – Specify No action taken At the time of the incident, how long had the staff worked at the facility? (Mark (X) all that apply for all staff involved.) Less than 6 months and 1 to 5 years by 1 to 5 years mark of the incident, how long had the staff worked at the facility? (Mark (X) all that apply for all staff involved.) More than 10 years mark of the incident, how long had the staff worked.)
NOTES

Definitions

Sexual victimization

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; 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 (less severe): 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 BY ANOTHER INMATE: 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.

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;

ΩR

Completed, attempted, threatened, or requested sexual acts;

K

Occurrences of indecent exposure, invasion of privacy, or staff voyeurism for reasons unrelated to official duties or for sexual gratification.

STAFF SEXUAL HARASSMENT: Repeated verbal comments or gestures of a sexual nature to an inmate by an employee, volunteer, contractor, official visitor, or other agency representative (excludes family, friends, or other visitors). Include demeaning references to gender; or sexually suggestive or derogatory comments about body or clothing;

OR

Repeated profane or obscene language or gestures.

Gender categories

TRANSGENDER: A person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth.

INTERSEX: A person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.

FORM **SSV-IJ** (4-27-2017)

Month Day

Name

City/Place

cell)

the facility

conference room)

11 Offsite or while in transit

5. What time did the incident occur?

01 Morning (6 a.m. to noon)

02 Afternoon (noon to 6 p.m.)

03 Evening (6 p.m. to midnight) 04 Overnight (midnight to 6 a.m.)

12 ☐ Other – Specify →

13 Location unknown

(Mark (\boxtimes) all that apply.)

video monitoring?

03 Don't know

05 Unknown

01 Yes

02 No



On what date did the incident occur?

Year

2. In what facility did the incident occur?

02 In the perpetrator's cell or room

(If more than one date, report the most recent.)

3. Where did the incident occur? (Mark (|X|) all that apply.)

on In the victim's cell or room (e.g., if the victim and

06 In a program service area (e.g., commissary, kitchen,

storage, laundry, cafeteria, workshop, hallway)

10 In a staff area (office, break room, counselor's office)

09 In a medical area (e.g., Infirmary, health clinic)

4. Did the incident take place in an area subject to

03 In a dormitory or other multiple housing unit 04 In a common area (e.g., shower, dayroom, bathroom)

perpetrator share a cell or room, count as the victim's

SURVEY OF SEXUAL VICTIMIZATION, 2016

Substantiated Incident Form (Juvenile)

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

See item 25 on page 3

Incident Number out of 6. How many victims were involved in the incident? Number of victims → If more than two victims were involved, report their characteristics in Notes on page 5. 7. Victim #1: What was the victim's sex or gender identity? (See definitions on page 5.) 01 Male 03 Transgender 04 Intersex 02 Female 8. Victim #1: What was the victim's age at the time of the incident? 01 Under age 13 04 🗌 18–19 02 🗌 13–15 05 20–24 03 16–17 06 25 or older 05 In a temporary holding cell or admissions area within 9. Victim #1: What was the victim's race/ethnic origin? (Mark (\boxtimes) all that apply.) 01 White (not of Hispanic origin) ₀₂ Black (not of Hispanic origin) of In an instructional area (e.g., classroom, school, library, 03 Hispanic or Latino 04 American Indian/Alaska Native (not of Hispanic origin) 08 In a recreation area (e.g., yard, courtyard, gymnasium) 05 ☐ Asian (not of Hispanic origin) 06 Native Hawaiian or Other Pacific Islander (not of Hispanic origin) 07 Other racial category in your information system – 10. Victim #2: What was the victim's sex or gender identity? (See definitions on page 5.) 03 Transgender 01 Male 02 Female 04 Intersex 11. Victim #2: What was the victim's age at the time of the incident? 01 Under age 13 04 18–19 05 20–24 02 4 13-15

06 25 or older

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.

03 16–17

12.	Victim #2: What was the victim's race/ethnic origin? (Mark (\boxtimes)) all that apply.)	15. After the incident was reported, was the victim(s) – (Mark (☒) all that apply for all victims.)
	01 White (not of Hispanic origin)	01 Given a medical examination
	02 Black (not of Hispanic origin)	02 Administered a rape kit
	03 Hispanic or Latino	03 Tested for HIV/AIDS
	04 American Indian/Alaska Native (not of Hispanic origin)	04 Tested for other sexually transmitted diseases
	05 Asian (not of Hispanic origin)	05 Provided with counseling or mental health treatment
	06 Native Hawaiian or Other Pacific Islander (not of Hispanic origin)	06 Offered but declined testing or treatment
	07 ☐ Other racial category in your information system –	or ☐ Already released/discharged
	Specify	08 None of the above
		16. After the incident was reported, was the victim(s) – ($Mark(X)$) all that apply for all victims.)
13.	Did the victim(s) sustain any physical injury during the incident?	01 Placed in or returned to administrative segregation, protective custody, or disciplinary segregation
	02 No (No injury sustained)	02 🗌 Placed in a medical unit, ward, or hospital
	on \square Yes \rightarrow a. What injuries occurred? (Mark (\square) all that apply for all victims.)	03 🗌 Confined to own cell or room
	01 ☐ Knife or stab wounds	04 🗌 Given a higher custody level/different unit within
	02 Broken bones	the facility
	03 Anal or vaginal tearing	05 Transferred to another facility
	04 Chipped or knocked out teeth	06 Transferred to another housing unit or dorm, or given a single room or cell
	₀₅ Internal injuries	07 ☐ Separated from perpetrator
	06 C Knocked unconscious	08 🗌 Issued disciplinary report or loss of privileges
	07 Bruises, black eye, sprains, cuts, scratches, swelling, welts	09 Placed in camera room, under closer surveillance, or increased supervision
	08 ☐ Other – <i>Specify_K</i>	10 □ Other – <i>Specify</i> ~
		- = out, <u>k</u>
	→ b. Did the victim(s) receive medical	
	treatment for these injuries?	11 \square None of the above
	02 No	17. What type of sexual violence was involved in the incident? (See definitions on page 5.)
14.	Who reported the incident? (Mark (X)) all that apply.)	on ☐ Youth–on–youth nonconsensual sexual act → Complete Section A, below
	01 Uictim	02 ☐ Youth–on–youth abusive contact → Complete Section A, below
	02 Another youth (non-victim) 03 Victim's family or friend	03 \square Youth–on–youth sexual harassment $→$ Complete Section A, below
	04 Correctional officer or front line staff 05 Administrative staff	04 \square Staff sexual misconduct → Complete Section B on pages 4–5
	06 Medical, healthcare, or mental health staff	05 🗌 Staff sexual harassment
	07 Instructor, teacher, or counselor	ightarrow Complete Section B on pages 4–5
	08 Other staff (e.g., kitchen worker, maintenance staff)	
	09 Chaplain or other religious official	
	10 Perpetrator	
	11 Perpetrator's family or friend	
	12 Grievance coordinator, grievance process, or ombudsperson	Section A – YOUTH-ON-YOUTH SEXUAL VICTIMIZATION
	13 Attorney or legal guardian (e.g., other than family member)	→ If the perpetrator was a staff member, go to Section B on pages 4–5.
	14 Confidential informant, anonymous tip, hot line, or through monitoring (e.g., camera, telephone, or mail)	18. How many youth perpetrators were involved in the incident?
	15 ☐ Other – <i>Specify</i>	Number of youth perpetrators
		→ If more than two youth perpetrators were involved, report their characteristics in Notes on page 5.

Page 2 FORM SSV-IJ (4-27-2017)

19.	Perpetrator #1: What was the youth perpetrator's sex or gender identity? (See definitions on page 5.)	25. What was the nature of the incident? (Mark (汉) all that apply.)
	01 Male 03 Transgender	
	02 Female 04 Intersex	02 ☐ Sexual harassment
20.	Perpetrator #1: What was the youth perpetrator's age at the time of the incident?	03 ☐ Indecent exposure, masturbation, or voyeurism 04 ☐ Horseplay
	01 ☐ Under age 13 04 ☐ 18–19	05 Repeated and unwelcome sexual advances or
	02 🗌 13–15	requests for sexual favors
	03 ☐ 16–17 06 ☐ 25 or older	06 ☐ Unwanted touching for sexual gratification or abusive sexual contact
21.	Perpetrator #1: What was the youth perpetrator's race/ethnic origin? ($Mark$ (\boxtimes) all that apply.)	07 Pressure or coercion (without force) resulting in a nonconsensual sexual act
	01 ☐ White (not of Hispanic origin)	₀₈ Physical force (or the threat of force) resulting in a nonconsensual sexual act
	02 Black (not of Hispanic origin)	09 ☐ Other – <i>Specify</i>
	03 Hispanic or Latino	· · · *
	O4 American Indian/Alaska Native (not of Hispanic origin)	
	05 Asian (not of Hispanic origin)	00 1411 44 6 1 1 1 1 6
	06 Native Hawaiian or Other Pacific Islander (not of Hispanic Origin)	26. What type of pressure or physical force was used by the youth perpetrator on the victim? (Mark (X) all that apply for all perpetrators.)
	07 ☐ Other racial category in your information system – Specify →	01 Sexual harassment, sexual innuendo, or
	-,,	verbal comments
		02 🗌 Persuasion or talked into sexual activity
22.	Perpetrator #2: What was the youth perpetrator's	03 🗌 Surprised the victim with unwanted touching,
	sex or gender identity? (See definitions on page 5.)	grabbing or groping, or victim was asleep
	01 ☐ Male 03 ☐ Transgender	04 🗌 Bribery or blackmail
	02 ☐ Female 04 ☐ Intersex	05 ☐ Gave victim drugs or alcohol
		06 Offered protection from other youth
23.	Perpetrator #2: What was the youth perpetrator's age at the time of the incident?	 O7 Threatened with physical harm Physically held victim down or restrained in some way
	01 Under age 13 04 18–19	09 ☐ Physically harmed or injured
	02 \[13-15 \] 05 \[20-24 \] 03 \[16-17 \] 06 \[25 \text{ or older} \]	10 Threatened with a weapon
	03 🔲 10-17 06 🗀 25 or older	11 ☐ Other – <i>Specify</i>
24.	Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark ($\boxed{\times}$) all that apply.)	
	01 ☐ White (not of Hispanic origin)	12 None
	02 Black (not of Hispanic origin)	
	03 Hispanic or Latino	27. What sanction was imposed on the perpetrator(s)? (Mark (X) all that apply for all perpetrators.)
	04 American Indian/Alaska Native (not of Hispanic origin)	01 Placed in solitary confinement or disciplinary
	05 Asian (not of Hispanic origin)	segregation 02 Confined to own cell or room
	06 Native Hawaiian or Other Pacific Islander (not of Hispanic Origin)	03 Placed in higher custody level, restricted unit or
	or ☐ Other racial category in your information system – Specify →	program, within the same facility 14 Transferred to other unit/cell or separated from
	oposity _k	victim
		05 Transferred to another facility
		06 Loss of "good/gain" time or increase in "bad" time/delayed release
		07 🔲 Given extra work
		08 Loss of privileges, disciplinary report or conduct
		violation, or other reprimand 9 Sent to counseling or treatment team
		10 ☐ Arrested or referred to law enforcement agency
		11 Referred for prosecution or indicted
		12 Convicted, given new sentence, or fined
		13 ☐ Other – <i>Specify</i>

FORM SSV-IJ (4-27-2017) Page 3

	and the second s		
	Section B - STAFF-ON-YOUTH SEXUAL ABUSE	33.	. Staff #2: What was the gender of the staff?
	→ If the perpetrator was a youth, go		01 Male 02 Female
28.	to Section A on pages 2–3. What was the nature of the incident? (Mark (X) all that apply.)	34.	. Staff #2: What was the age of the staff at the time of the incident?
	on ☐ Physical force resulting in a nonconsensual		01 \square 24 or younger 05 \square 40 – 44 02 \square 25 – 29 06 \square 45 – 54
	sexual act		03 \(\sum 30 - 34 \) 07 \(\sum 55 \) or older
	02 Pressure or abuse of power resulting in a nonconsensual sexual act		04 🗌 35 – 39
	03 ☐ Indecent exposure, invasion of privacy, or voyeurism for sexual gratification	35.	. Staff #2: What was the race/ethnic origin of the staff involved in the incident?
	04 Unwanted touching for sexual gratification		(Mark ($\overline{\boxtimes}$) all that apply.)
	of □ Sexual harassment or repeated verbal statements of a sexual nature by staff		01 ☐ White (not of Hispanic origin) 02 ☐ Black (not of Hispanic origin)
	of Wrote letters, showed pictures, or offered gifts or special privileges to youth		03 Hispanic or Latino
	07 Sexual relationship between youth and staff		04 American Indian/Alaska Native (not of Hispanic origin)
	that appeared to be willing 08 □ Other – <i>Specify</i> 08 □ Other – <i>Specify</i>		origin) 05 ☐ Asian (not of Hispanic origin)
	oo - Other Opening		06 Native Hawaiian or Other Pacific Islander (not of Hispanic origin)
			07 Other racial category in your information system
	09 Level of coercion unknown		Specify
29.	How many staff were involved in the incident?		
	N. 1. 6. 6	36.	. Was the staff involved in the incident an employe of the facility, a contractor, or a volunteer?
	Number of staff → If more than two staff were involved, report		(Mark (\boxtimes) all that apply for all staff involved.)
	their characteristics in Notes on page 5.		on ☐ Full– or part–time paid employee □ Contract employee or vendor
30.	Staff #1: What was the gender of the staff?		os Volunteer or intern
	01 ☐ Male 02 ☐ Female		04 ☐ Other – Specify →
31.	Staff #1: What was the age of the staff at the time of the incident?		
	01 ☐ 24 or younger 05 ☐ 40 – 44	37.	. What was the primary position description of
	02 25 - 29 06 45 - 54		the staff involved in the incident? (Mark (X) all that apply for all staff involved.)
	03 □ 30 – 34 07 □ 55 or older 04 □ 35 – 39		on ☐ Administrator, including wardens,
32.	Staff #1: What was the race/ethnic origin of the		superintendents, assistants and others in administrative positions
	staff involved in the incident? (Mark (\overline{X}) all that apply.)		02 Correctional officer or supervisory staff
	01 ☐ White (not of Hispanic origin)		03 Clerical staff including secretaries, clerks, receptionists, and other administrative support
	02 Black (not of Hispanic origin)		04 Maintenance and other facility support staff, including groundskeepers, janitors, cooks, and
	03 ☐ Hispanic or Latino 04 ☐ American Indian/Alaska Native (not of Hispanic		drivers
	origin) 05 ☐ Asian (not of Hispanic origin)		05 Medical or health care staff, including counselors doctors, dentists, psychologists, psychiatrists,
	06 Native Hawaiian or Other Pacific Islander (not of Hispanic origin)		social workers, nurses, and medical assistants of Education staff, including instructors, teachers,
	07 Other racial category in your information system –		librarians, and education assistants or □ Other program staff
	Specify _		08 Volunteers or Interns
			09 ☐ Other staff – <i>Specify</i> →

Page 4 FORM SSV-IJ (4-27-2017)

38.	What (Mari	t sanction was imposed on the staff? $k(X)$ all that apply for all staff involved.)
	01 🗌	Sent to training or counseling
	02 🗌	Reprimanded or disciplined
	03 🗌	Demoted, diminished responsibilities, or suspended temporarily
	04 🗌	Transferred to another facility or unit
	05 🗆	Arrested or referred to law enforcement agency
	06 🗌	Referred for prosecution or indicted
	07 🗌	Convicted, plead guilty, sentenced, or fined
	08 🗌	Discharged, terminated, or contract not renewed
	09 🗌	Staff resigned (prior to completion of investigation
	10 🗌	Staff resigned (after investigation was completed)
	11 🗌	Other – Specify _▼
	12 🗌	No action taken
39.	staff	e time of the incident, how long had the worked at the facility? (X) all that apply for all staff involved.)
	01 🗌	Less than 6 months
	02 🔲	6 months to 1 year
	_	1 to 5 years
		5 to 10 years
	05 📙	More than 10 years

NOTES

Definitions

Sexual victimization

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 (less severe): 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 BY ANOTHER YOUTH: Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one youth directed toward another.

STAFF SEXUAL MISCONDUCT: Any behavior or act of a sexual nature directed toward a youth 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 youths 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 intent to abuse, arouse, or gratify sexual desire;

OR

Completed, attempted, threatened, or requested sexual acts;

OR

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OR

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INTERSEX: A person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.