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

| | | ALTITUDE. | | _ | | | | | |
|---|---------------------|--------------|---------------------------------|---------|---------------|----------|-----------|----------|--|
| | | | 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 | <i>A</i> | 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 (X) provided.

Substantiated incidents of sexual violence:

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

Returning forms:

- If you need assistance, please call 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. | I. 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 | | | | | | |
| | 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. | | | | | | |
| 2. | 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. | | | | | | |
| 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 None | | | | | | |
| | Substantiated None The event was investigated and determined to have occurred, based on a preponderance of the evidence (28 C.F.R. §115.72). | | | | | | |
| | h. Unsubstantiated None | | | | | | |
| | Unsubstantiated None 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? | | O1 ☐ Yes → Do you record all reported allegations or only substantiated ones? | | | |
| | 01 \square Yes 02 \square 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 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. | | | |
| | 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 None | | | |
| | 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. | | | |
| | | | | | | |

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? | | | | | | | |
|-----|--|---|-----------------------------|---------------------|--|--|--|--|
| | o1 ☐ Yes → | Do you record al occurrences, or ones? | | | | | | |
| | | 01 All 02 Substantiated | only | | | | | |
| | 02 □ No → | Please provide an elbelow and then skip | xplanation i to Item 13. | in the space | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 11. | December | January 1, 2016, a 31, 2016, how m XUAL MISCONDU | anv alleg | ations of reported? | | | | |
| | Number re | ported | | None | | | | |
| | If an alleg count onl | gation involved multip y once. | le victimiza | tions, | | | | |
| 12. | many were responsible | gations reported — (Please contact for investigating alleg in order to fully com | the agency pations of se | or office exual | | | | |
| | a. Substar | ntiated | | ☐ 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

| 13. | 3. Does the Federal Bureau of Prisons record allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 4.) | | | | | | | |
|-----|--|-----------------------------|--------------------|--|--|--|--|--|
| | 01 ☐ Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT? | | | | | | | |
| | 01 ☐ Yes 02 ☐ No → Skip to Item 16. | | | | | | | |
| | 02 No → Please provide an exbelow and then skip | xplanation i to Item 16. | n the space | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 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 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 15a through 15d) | | ☐ None | | | | | |
| | The total should equal the r Item 14. | number rep | orted in | | | | | |
| | | | | | | | | |

Section III – TOTAL SUBSTANTIATED

| | INCIDENTS OF SEXUAL | VICTIMII2 | ZATION |
|----------|--|-----------|--------------------|
| 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 | cident antiated |
| | NOTES | | |

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

| | A THE SAME | | _ | | | | | |
|---------------------|--------------|---------------------------------|---------|---------------|---|----------|----------|--|
| | | DATA SUF | 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 | A | rea 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 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 (X) provided.

Substantiated incidents of sexual violence:

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

Returning forms:

- If you need assistance, please call 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.

| allegations of in | e prison system record nmate-on-inmate JAL SEXUAL ACTS? | | | | | | | |
|---|---|--|--|--|--|--|--|--|
| 0 | o you record all reported ccurrences, or only substantiated nes? | | | | | | | |
| | □ All | | | | | | | |
| 02 Substantiated only | | | | | | | | |
| b. | Do you record attempted NONCONSENSUAL SEXUAL ACTS or only completed ones? | | | | | | | |
| | 01 Both attempted and completed | | | | | | | |
| 02 Completed only | | | | | | | | |
| State NON space | te provide the definition used by your prison system for inmate-on-inmate CONSENSUAL SEXUAL ACTS in the below. Use that definition to complete 2 and 3. | | | | | | | |
| how many alleg | ary 1, 2016, and December 31, 2016, gations of inmate-on-inmate JAL SEXUAL ACTS were reported? | | | | | | | |
| NONCONSENS | DAL SEXUAL ACTS were reported: | | | | | | | |
| Number reporte | | | | | | | | |
| count only once | | | | | | | | |
| Exclude any alloconsensual. | egations that were reported as | | | | | | | |
| many were — (I responsible for inv | ons reported in Item 2, how Please contact the agency or office restigating allegations of sexual der to fully complete this form.) | | | | | | | |
| a. Substantiate | d □ None | | | | | | | |
| The event was | as investigated and determined to ed, based on a preponderance of the B C.F.R. §115.72). | | | | | | | |
| b. Unsubstantia | ated None | | | | | | | |
| The investigation | ation concluded that evidence was o determine whether or not the event | | | | | | | |
| c. Unfounded | | | | | | | | |
| The investigation occur. | ation determined that the event did NOT | | | | | | | |
| d. Investigation | ongoing None | | | | | | | |
| Evidence is and a final decorated to the second secon | still being gathered, processed or evaluated, etermination has not yet been made. | | | | | | | |
| e. TOTAL (Sum of 3a through 3d) | | | | | | | | |
| The total sho | ould equal the number reported in Item 2. | | | | | | | |

| 4. 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.) |
|---|---|
| 01 ☐ Yes → Can these be counted separately from allegations of NONCONSENSUAL SEXUAL ACTS? | n ○1 ☐ 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. |
| | |
| | |
| | |
| | |
| 5. Between January 1, 2016, and December 31, 201 | l 6, 8. Between January 1, 2016, and December 31, 2016, |
| how many allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT were reported? | how many allegations of inmate-on-inmate 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 inmate perpetrators, count only once. |
| Exclude any allegations that were reported as consensual. | Exclude any allegations that were reported as consensual. |
| 6. 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 None |
| b. Unsubstantiated | b. Unsubstantiated |
| c. Unfounded None | c. Unfounded None |
| d. Investigation ongoing \square None | 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. |
| | |

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

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.

| | allegation MISCOND | s of STAFF SEXU JCT? | JAL | |
|----|-----------------------|--|--------------------------------|----------------------|
| | o1 ☐ Yes → | Do you record a occurrences, o ones? | all reporte r only sub | d stantiated |
| | | 01 All 02 Substantiate | d only | |
| | 02 □ No → | Please provide an below and then ski | explanation p to Item 13 | in the space |
| | | | | |
| | | | | |
| | | | | |
| 4 | Retween - | January 1, 2016, | and | |
| •• | December STAFF SE | 31, 2016, how i | nany alleg UCT were | ations of reported? |
| | | eported gation involved multy once. | iple victimiza | None None, |
| 2. | many were responsible | gations reporte — (Please contact for investigating all in order to fully con | ot the agency egations of s | y or office exual |
| | a. Substar | ntiated | | _□ None |
| | b. Unsubs | tantiated | | _□ None |
| | c. Unfound | ded | | _□ None |
| | d. Investiç | ation ongoing | | _□ None |
| | | (Sum of Items gh 12d) | | _□ None |
| | The to | tal should equal the | e number rep | ported in |

10. Does your State prison system record

| 13. Does your State prison system record | Section III – PRIVATE AND LOCAL ALLEGATIONS |
|--|--|
| allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 4.) 11 Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT? 12 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? 01 Yes 02 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? 01 Yes 02 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 None | |
| b. Unsubstantiated | |
| c. Unfounded None | |
| 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-3** (4-26-2017)



SURVEY OF SEXUAL VICTIMIZATION, 2016 Local Jail Jurisdictions

cal 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

| | 1111111 | | | | | | |
|-----------|------------|---------------------------------|---------|--------|-----------|----------|--|
| | | 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 | 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 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 (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): 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

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 v daily population of all jail c facilities operated by your j | 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;

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.

Average daily

divide the result by 365.

population

b.

2. B

Female

| 3. | Does your local jail jurisdiction record allegations of inmate-on-inmate NONCONSENSUAL SEXUAL ACTS? (See definitions on page 2.) | 6. Does your local jail jurisdiction record allegations of inmate-on-inmate ABUSIVE SEXUAL CONTACT? (See definitions on page 2.) |
|----|--|---|
| | 01 ☐ 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 🔲 All | 01 ☐ Yes |
| | 02 Substantiated only | 02□ No → Skip to Item 9. |
| | b. Do you record attempted NONCONSENSUAL SEXUAL ACTS or only completed ones? | No → Please provide an explanation in the space below and then skip to Item 9. |
| | 01 Both attempted and completed | |
| | 02 Completed only | |
| | 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, 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 | |
| | If an allegation involved multiple victimizations, | Number reported 🗆 None |
| | 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.) |
| | - Cubatantistad | |
| | a. Substantiated None | 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 |
| | | |
| | b. Unsubstantiated None | |
| | The investigation concluded that evidence was insufficient to determine whether or not the event occurred. | c. Unfounded |
| | ossan su. | d. Investigation ongoing 🗌 None |
| | c. Unfounded | |
| | The investigation determined that the event did NOT occur. | e. TOTAL (Sum of Items 8a through 8d) □ None |
| | | The total should equal the number reported in Item 7. |
| | d. Investigation ongoing . — None | icom 7. |
| | 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) | |
| | The total should equal the number reported in Item 4. | |

| 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: |
| | STATE SEXUAL MISSONDOOT |
| | 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 inmate perpetrators, count only once. Exclude any allegations that were reported as | Completed, attempted, threatened, or requested sexual acts; |
| 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 | Repeated profane or obscene language or gestures. |
| e. TOTAL (Sum of Items 11a through 11d) | |
| | |

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.) |
|-----|---|---|
| | 01 ☐ 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. |
| | 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 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 |
| | 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. | |
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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 SUF | PLIED B | Y | | | | |
|------|-----------|------------|---------------------------------|---------|--------|----------|-----------|----------|--|
| | Name | | | Title | | | | | |
| | | | | | | | | | |
| | OFFICIAL | Number and | street or P.O. Box/Route Number | | City | | State | ZIP Code | |
| | ADDRESS | | | | | | | | |
| | TELEBUONE | Area code | Number | | FAX | <i>\</i> | Area Code | Number | |
| | TELEPHONE | | | | NUMBER | | | | |
| abla | E-MAIL | | | | , | | | | |
| / | ADDRESS | 7 | | | | | | | |

(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).

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.

| 3. | 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.) |
|----|--|---|
| | o1 ☐ 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 ☐ All 02 ☐ Substantiated only | 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 Inone |
| | The investigation determined that the event did NOT occur. | d Investigation angular |
| | d. Investigation ongoing | d. Investigation ongoing . \square None |
| | Evidence is still being gathered, processed or evaluated, and a final determination has not yet been made. | TOTAL (O. m. of House C |
| | 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 chean equal the number reported in item 7. |

| 9. Does your facility record allegations of | Section III – STAFF-ON-INMATE SEXUAL ABUSE |
|---|---|
| inmate-on-inmate SEXUAL HĀRASSMENT? (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 act |
| 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 |
| Number reported None 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 |
| a. Substantiated | Repeated profane or obscene language or gestures. |
| b. Unsubstantiated | |
| c. Unfounded | |
| d. Investigation ongoing . — None | |
| e. TOTAL (Sum of Items 11a through 11d) | |
| The total should equal the number reported in Item 10. | |

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) □ None • The total should equal the number reported in Item 13. | 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. | |
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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 BUI | REAU |
|------------|------------|---------------------------------|----------|----------|-----------|-----------------|------|
| | | DATA SUF | PPLIED B | Y | | | |
| 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 | |
| ILLEFIIONE | | | | NUMBER / | | | |
| E-MAIL | | | | | | | |
| ADDRESS | 7 | | | | | | |

(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 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 discharge em 1? | i, d |
| 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 documen | t, |
| 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 surgest utilizes the definition of "sexual charge" as 01 □ Yes → a. D

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

6.

7.

- 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.

| | State juvenile sy s of youth-on-you CTS? | | |
|--|---|------------------------------|---------------------------------|
| 01 ☐ Yes → | a. Do you record occurrences, substantiated | or only d ones? | rted |
| | ₀₂ Substantia | - | |
| | b. Do you record NONCONSEN or only comp | SUAL SE | XUAL ACTS |
| | 01 Both attem | • | ompleted |
| 02 □ No → | Please provide the State juvenile syste NONCONSENSUAL space below. Use the Items 6 and 7. | m for youth L SEXUAL i | on-youth ACTS in the |
| | | | |
| how many | anuary 1, 2016, a allegations of yo ENSUAL SEXUAL | uth-on-yo | uth |
| Number re | ported | | None |
| If an alled | ation involved multip | ole victimiza | tions count |
| only once | ny allegations that w | | |
| many were responsible for | gations reported — (Please contact or investigating alleg in order to fully com | the agency pations of se | or office exual |
| a. Substan | tiated | | None |
| The even occurre | ent was investigated ed, based on a prepo F.R. §115.72). | and detern onderance o | nined to have |
| h Uneubet | antiated | | None |
| The inv | restigation concluded ient to determine wh | | nce was |
| c. Unfound | led | | None |
| The invocur. | estigation determine | ed that the e | event did NOT |
| d. Investig | ation ongoing . | | ☐ None |
| Evidence and a final | ce is still being gathe inal determination ha | ered, proces as not yet b | ssed or evaluated, een made. |
| | Sum of Items h 7d) | | ☐ None |
| The tot Item 6 | al 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.) 01 Yes → Can these be counted separately from allegations of NONCONSENSUAL SEXUAL ACTS? 01 Yes 02 No → Skip to Item 11. | December 31, 2016, how many allegations of youth-on-youth SEXUAL HARASSMENT were reported? Number reported | | | |
|-----------|--|---|--|--|--|
| | | | | | |
| 9. | Between January 1, 2016, and December 31, 2016, how many allegations of youth-on-youth ABUSIVE SEXUAL CONTACT were reported? | youth-on-youth SEXUAL HARASSMENT | | | |
| | Number reported None | · | | | |
| | If an allegation involved multiple victimizations, count only once. | perpetrators, count only once. | | | |
| | Exclude any allegations that were reported as consensual. | Exclude any allegations that were reported as consensual. | | | |
| 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.) | responsible for investigating allegations of sexual | | | |
| | a. Substantiated | a. Substantiated | | | |
| | b. Unsubstantiated | b. Unsubstantiated | | | |
| | c. Unfounded | c. Unfounded None | | | |
| | d. Investigation ongoing | d. Investigation ongoing \square 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:

OF

 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;

OB

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 | d only | |
| | 02 ☐ No → Please provide an e below and then skip | explanation ir to Item 17. | the space |
| | | | |
| | | | |
| | | _ | |
| 15. | Between January 1, 2016, a December 31, 2016, how mo of STAFF SEXUAL MISCONI reported? | and any allegat DUCT were | tions |
| | Number reported | | None |
| | If an allegation involved multip only once. | le victimization | ons, count |
| 16. | Of the allegations reported many were — (Please contact office responsible for investigating sexual victimization in order to fulform.) | the 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) | | . □ None |
| | The total should equal the ltem 15. | e number rep | orted in |

| 17. Does your State juvenile system record allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 5.) | Section IV – PRIVATE AND LOCAL ALLEGATIONS |
|---|--|
| on Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT? on Yes o | 20. Did any of the allegations reported in Items 6, 9, 12, 15, or 18 occur in a privately operated facility? 01 Yes 02 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 | |
| b. Unsubstantiated | |
| c. Unfounded None | |
| d. Investigation ongoing \square None | |
| e. TOTAL (Sum of Items 19a through 19d) □ None • The total should equal the number reported in Item 18. | |
| | |

FORM SSV-6



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

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

U.S. DEPARTMENT OF JUSTICE

Summary Form

| | OTTO SEE | | | | | | | |
|-------------------|------------|---------------------------------|---------|---------------|---|----------|----------|--|
| | | DATA SUF | PLIED B | Y | | | | |
| Name | | | Title | | | | | |
| | | | | | | | | |
| OFFICIAL ADDRESS | Number and | street or P.O. Box/Route Number | | City | | State | ZIP Code | |
| TELEPHONE | Area code | Number | | FAX NUMBER | A | rea 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 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 | |
| 03 ☐ State | |
| 04 County | |
| 05 ☐ Local or municipal government | |
| 06 ☐ Other – Specify 📈 | |
| ŕ | |
| | |
| | |
| | |
| 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 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, how many person held in this facility were — | IS |
|--|-----------------------|
| a. Males | |
| b. Females | |
| c. TOTAL(Sum of Items 3a and 3b) . | |
| Count persons held in the facility regardless reason for placement. Include persons who temporarily away but had assigned beds on December 31, 2016. | of age or were |
| 4. On December 31, 2016, how many person held in this facility were — | ıs |
| 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 regardle or reason for placement. Include persons wh temporarily away but had assigned beds on December 31, 2016. | ess of age no were |
| 5. Between January 1, 2016, and December 31, 2016, how many persons w admitted to or discharged from this facili | rere ty? |
| a. TOTAL number admitted | |
| b. TOTAL number discharged . | |
| Include all persons admitted to this facility by legal document, by the authority of the court some other official agency. | |
| Include all persons discharged from this faci period of confinement including sentence co pretrial releases, transfers to adult jurisdictio other States, and deaths. | mpletion, |
| Exclude admissions and discharges resulting returns from escape, administrative transfers juvenile facilities, or temporary release inclusives, and transfers inclusives or court appearances. | s to other ding |

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. | 5. Does your facility record allegations of youth-on-youth NONCONSENSUAL SEXUAL ACTS? | | | |
|----|---|---|------------------------------|---------------------------------|
| | 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 illity for youth-on- XUAL ACTS in to finition to comple | youth NON he space be | CONSENSUAL elow. Use that |
| | | | | |
| | | | | |
| 7. | Between Jan how many all NONCONSEN | uary 1, 2016 a egations of yo SUAL SEXUAI | uth-on-vo | outh |
| | Number repo | rted | | . □ None |
| | If an allegation once. | on involved multip | ole victimiza | ations, count only |
| | Exclude any | allegations that w | vere reporte | ed as consensual. |
| 8. | Of the allegat were — (Pleas for investigating to fully complete | e contact the age allegations of se | ency or office | ce responsible |
| | a. Substantia | ted | | None |
| | occurred, | was investigated based on a prepo . §115.72). | d and deterr onderance (| mined to have of the evidence |
| | b. Unsubstan | tiated | | None |
| | The invest to determine | igation concluded ne whether or no | that evident the event o | nce was insufficient occurred. |
| | c. Unfounded | | | □ None |
| | The invest | igation determined | d that the ev | ent did NOT occur. |
| | d. Investigati | on ongoing . | | None |
| | Evidence i and a final | is still being gathe I determination ha | ered, proces as not yet b | ssed or evaluated, een made. |
| | e. TOTAL (Sur 8a through 8d | n of Items d) | | None |
| | The total s | should equal the | number rep | orted in Item 7. |

| 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 \square None |
| 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. | 5. 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 |
|---|---|
| on ☐ 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. |
| 02 ☐ No → Skip to Item 21 O2 ☐ No → Please provide an explanation in the space below and then skip to Item 21. | Total substantiated incidents □ None → Please complete a Substantiated Incident Form |
| | (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 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 | |
| | | | → If more than two | victims were involved, |
| 2. | In what facility did the incident occur? | | report their chara | cteristics in Notes on page 5. |
| | Name | 7. | Victim #1: What was identity? (See definited | s the victim's sex or gender tions on page 5.) |
| | City/Place | | o1 ☐ 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 | | time of the incident? | _ |
| | share a cell or room, count as the victim's cell) 102 In the perpetrator's cell or room | | 01 ☐ Under age 18 02 ☐ 18 – 24 | 05 |
| | 03 In a dormitory or other multiple housing unit | | 03 25 - 29 | 06 40 - 44 |
| | 04 \square In a common area (e.g., shower, dayroom, bathroom) | | 04 30 - 34 | 08 ☐ 55 or older |
| | 05 ☐ In a temporary holding cell or intake area within the facility | | | |
| | of In a program service area (e.g., commissary, kitchen, storage, laundry, cafeteria, workshop, hallway) | 9. | Victim #1: What was (Mark (\boxed{X}) all that app | the victim's race/ethnic origin? |
| | 07 In an instructional area (e.g., classroom, school, library, conference room) | | 01 ☐ White (not of Hisp 02 ☐ Black (not of Hisp | |
| | 08 In a recreation area (e.g., yard, courtyard, gymnasium) | | 03 Hispanic or Latino | |
| | 09 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) | | os ☐ Native Hawaiian | <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 defining | 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 | | | |
| 5. | (Mark ($\overline{\mathbb{X}}$) all that apply.) | 11 | time of the incident | |
| | 01 Morning (6 a.m. to noon) | | 01 Under age 18 | 05 35 - 39 |
| | 02 Afternoon (noon to 6 p.m.) | | 02 | 06 |
| | 03 Evening (6 p.m. to midnight) 04 Overnight (midnight to 6 a.m.) | | 04 30 - 34 | 07 |
| | os ☐ Time unknown | | U, L 00 U, | oc in 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.

| 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 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 | 06 Offered but declined testing or treatment |
| | (not of Hispanic origin) 07 Other racial category in your information system – | or ☐ Already released/discharged |
| | Specify $\overline{\mathcal{L}}$ | 08 None of the above |
| | , , , , | |
| | | 16. After the incident was reported, was the victim(s) – (Mark (☒) all that apply for all victims.) |
| 13. | Did the victim(s) sustain any physical injury during the incident? | on \square 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 |
| | 01 ☐ Yes → a. What injuries occurred? (Mark (X) all that apply for all victims.) | 03 🗌 Confined to own cell or room |
| | on ☐ Knife or stab wounds | 04 Given a higher custody level or different unit within |
| | 02 ☐ Broken bones | the facility 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 C Knocked unconscious | $_{08}$ \square Issued disciplinary report or loss of privileges |
| | 07 🗌 Bruises, black eye, sprains, cuts, | 09 🗌 Placed in camera room, under closer surveillance, |
| | scratches, swelling, welts | or increased supervision |
| | 08 ☐ Other – <i>Specify</i> | 10 ☐ Other – <i>Specify</i> |
| | | |
| | Nh Biddha istintal and it | |
| | → b. Did the victim(s) receive medical treatment for these injuries? | 11 \square 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 (X) all that apply.) | 01 \square Inmate-on-inmate nonconsensual sexual act $	o$ Complete Section A, below |
| | o1 Uictim | 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 | \rightarrow Complete Section A, below |
| | 04 Correctional officer or front line staff | 04 🗌 Staff sexual misconduct |
| | 05 Administrative staff | → Complete Section B on pages 4–5 |
| | 06 Medical, healthcare, or mental health staff | 05 $oxdot$ Staff sexual harassment → Complete Section B on pages 4–5 |
| | 07 Instructor, teacher, or counselor | , complete destion b on pages 4 o |
| | 08 Other staff (e.g., kitchen worker, maintenance staff) | Section A – INMATE-ON-INMATE SEXUAL VICTIMIZATION |
| | 09 Chaplain or other religion official | Section A - INVIATE-ON-INVIATE SEXUAL VICTORIZATION |
| | 10 Perpetrator | → If the perpetrator was a staff member, go |
| | 11 Perpetrator's family or friend | to Section B on pages 4–5. |
| | 12 Grievance coordinator, grievance process, or ombudsperson | 18. How many inmate perpetrators were involved |
| | 13 Attorney or legal guardian (e.g., other than family member) | in the incident? |
| | 14 Confidential informant, anonymous tip, hot line, or | Number of inmate perpetrators |
| | through monitoring (e.g., camera, telephone, or mail) | |
| | 15 \square Other – Specify \swarrow | → If more than two inmate perpetrators were |
| | , , | involved, report their characteristics in Notes on page 5. |
| | | |
| | | |

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

| 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 (X) all that apply.) |
|-----|--|-----|--|
| | <u> </u> | - | 01 Voluntary sexual contact between inmates |
| | 01 ☐ Male 03 ☐ Transgender | | 02 U Sexual harassment |
| | 02 🗆 Female 04 🗀 Intersex | | □ Undecent 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 | | 06 Unwanted touching for sexual gratification or |
| | 02 \bigcap 18-24 05 \bigcap 35-39 08 \bigcap 55 \text{ or older} | | abusive sexual contact |
| | 03 25–29 06 40–44 | | or Pressure or coercion (without force) resulting in a nonconsensual sexual act |
| 21 | Perpetrator #1: What was the inmate | | os ☐ Physical force (or the threat of force) resulting |
| 21. | perpetrator's race/ethnic origin? | | in a nonconsensual sexual act |
| | (Mark (☒) all that apply.) | | 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 | 26 | What type of pressure or physical force was |
| | origin) | 20. | used by the inmate perpetrator on the victim? |
| | 05 Asian (not of Hispanic origin) | | (Mark (X)) all that apply for all perpetrators.) |
| | 06 Native Hawaiian or Other Pacific Islander (not of Hispanic Origin) | | 01 Sexual harassment, sexual innuendo, or verbal |
| | or ☐ Other racial category in your information system – | | comments 02 Persuasion or talked into sexual activity |
| | 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 \square Threatened with physical harm |
| | 01 Male 03 Transgender | | 08 Physically held victim down or restrained in |
| | 02 Female 04 Intersex | | some way 9 Physically harmed or injured |
| 23. | Perpetrator #2: What was the inmate | | 10 ☐ Threatened with a weapon |
| | perpetrator's age at the time of the incident? | | 11 ☐ Other – <i>Specify</i> |
| | 01 Under age 18 04 Under age 18 04 07 45–54 | | |
| | 02 \(\begin{array}{cccccccccccccccccccccccccccccccccccc | | |
| | 03 🗌 25–29 06 🔲 40–44 | | 12 None |
| 24. | Perpetrator #2: What was the inmate | 27. | What sanction was imposed on the perpetrator(s)? |
| | perpetrator's race/ethnic origin? | | (Mark (X)) all that apply for all perpetrators.) |
| | (Mark (X) all that apply.) | | on Placed in solitary confinement or disciplinary segregation |
| | 01 White (not of Hispanic origin) | | oz ☐ Confined to own cell or room |
| | 02 | | 03 Placed in higher custody level, restricted unit or |
| | 03 ☐ Hispanic of 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) | | OF Loss of "good/gain" times increase in "bod" time or |
| | 06 | | 06 Loss of "good/gain" time, increase in "bad" time or delayed release |
| | 07 ☐ Other racial category in your information system – | | 07 Given extra work |
| | Specify Z | | 08 Loss of privileges, disciplinary report or conduct |
| | | | violation, or other reprimand on 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 – Specify ₹ |
| | | | |
| | | | |

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

| | Section B – STAFF-ON-INMATE SEXUAL ABUSE | 33. | Staf | f #2: What was the | gender of th | e staff? |
|-----|--|-----|-----------------------|---|--|-------------------------------------|
| | → If the perpetrator was an inmate, go to Section A on pages 2–3. | | | Male | 02 Female | |
| 28. | What was the nature of the incident? (Mark (X) all that apply.) | 34. | time | f #2: What was the of the incident? | _ | |
| | 01 Physical force resulting in a nonconsensual sexual act | | 02 🔲 | 24 or younger 25 – 29 | 05 \(\text{ 40} - 44 \) 06 \(\text{ 45} - 54 \) | 1 |
| | 02 Pressure or abuse of power resulting in a nonconsensual sexual act | | | 30 – 34 35 – 39 | 07 🗌 55 or 0 | older |
| | 03 Indecent exposure, invasion of privacy, or voyeurism for sexual gratification | 35. | staff | f #2: What was the involved in the inc | race/ethnic o | origin of the |
| | 04 Unwanted touching for sexual gratification | | | k (\overline{X}) all that apply.) | | |
| | 05 ☐ Sexual harassment or repeated verbal statements of a sexual nature by staff | | | White (not of Hispar Black (not of Hispan | _ | |
| | 06 | | | Hispanic or Latino | | |
| | or Sexual relationship between inmate and staff that appeared to be willing | | | American Indian/Ala origin) | | ot of Hispanic |
| | 08 ☐ Other – Specify ⊋ | | 06 🗌 | Asian (not of Hispar Native Hawaiian or (| Other Pacific Is | lander |
| | | | 07 🗌 | (not of Hispanic original Other racial category Specify ✓ | | mation system – |
| | 09 Level of coercion unknown | | | opechy / | | |
| 29. | How many staff were involved in the incident? | | | | | - |
| | Number of staff → If more than two staff were involved, report | 36. | Was of th (Mari | the staff involved in the facility, a contract (X) all that apply for | in the incider ctor, or a volu or all staff invo | nt an employee unteer? lved.) |
| | their characteristics in Notes on page 5. | | | Full- or part-time pa | | |
| | | | 02 🗌 | Contract employee | or vendor | |
| 30. | Staff #1: What was the gender of the staff? | | | 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. | Wha | t was the primary | position desc | ription of |
| | 02 25 - 29 06 45 - 54 | | (Mar | staff involved in the (X) all that apply for | e incident? or all staff invo | olved.) |
| | $03 \square 30 - 34$ $07 \square 55$ or older $04 \square 35 - 39$ | | | Administrator, inclu- assistants and other | ding wardens, | superintendents |
| | | | 02 🗌 | Correctional officer | | • |
| 32. | Staff #1: What was the race/ethnic origin of the staff involved in the incident? (Mark (X) all that apply.) | | 03 🗌 | Clerical staff including receptionists, and of | | |
| | 01 ☐ White (not of Hispanic origin) 02 ☐ Black (not of Hispanic origin) | | 04 🗌 | Maintenance and ot including groundske drivers | her facility sup | port staff, |
| | 03 ☐ Hispanic or Latino 04 ☐ American Indian/Alaska Native (not of Hispanic origin) | | | Medical or health ca doctors, dentists, ps social workers, nurs | ychologists, ps | sychiatrists, |
| | 05 ☐ Asian (not of Hispanic origin) 06 ☐ Native Hawaiian or Other Pacific Islander | | _ | Education staff, including librarians, and education | uding instructo | rs, teachers, |
| | (not of Hispanic origin) | | 07 🗌 | Other program staff | | |
| | 07 Other racial category in your information system – | | | Volunteers or Intern | | |
| | Specify _₹ | | 09 🗌 | Other staff – Specify | ' ₹ | |
| | | | | | | |

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

| 38. | What sanction was imposed on the staff? (Mark ($ X $) all that apply for all staff involved.) |
|-----|--|
| | (Mark (☒) all that apply for all staff involved.) ○1 Sent to training or counseling ○2 Reprimanded or disciplined ○3 Demoted, diminished responsibilities, or suspended temporarily ○4 Transferred to another facility or unit ○5 Arrested or referred to law enforcement agency ○6 Referred for prosecution or indicted ○7 Convicted, plead guilty, sentenced, or fined ○8 Discharged, terminated, or contract not renewed ○9 Staff resigned (prior to completion of investigation) 10 Staff resigned (after investigation was completed) |
| | 11 ☐ Other – Specify 12 ☐ No action taken |
| 39. | At the time of the incident, how long had the staff worked at the facility? (Mark (X) all that apply for all staff involved.) 1 Less than 6 months 2 6 months to 1 year 1 to 5 years 4 5 to 10 years 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;

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;

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:

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;

Completed, attempted, threatened, or requested sexual acts;

Occurrences of indecent exposure, invasion of privacy, or staff voveurism 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)

5. What time did the incident occur?

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

(Mark (\boxtimes) all that apply.) 01 Morning (6 a.m. to noon) 02 Afternoon (noon to 6 p.m.)

05 Unknown



2. In what facility did the incident occur?

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

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

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 omics and Statistics Admin.
U.S. CENSUS BUREAU

See iter

| <u> </u> | See item 25 on page 3 Incident Number out of |
|---|---|
| On what date did the incident occur? (If more than one date, report the most recent.) Month Day Year In what facility did the incident occur? | 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. |
| Name City/Place | 7. Victim #1: What was the victim's sex or gender identity? (See definitions on page 5.) 01 Male 03 Transgender 02 Female 04 Intersex |
| Where did the incident occur? (Mark (☒) all that 11 ☐ In the victim's cell or room (e.g., if the victim perpetrator share a cell or room, count as the cell) 12 ☐ In the perpetrator's cell or room 13 ☐ In a dormitory or other multiple housing unit 14 ☐ In a common area (e.g., shower, dayroom, bath 15 ☐ In a temporary holding cell or admissions are the facility 16 ☐ In a program service area (e.g., commissary, storage, laundry, cafeteria, workshop, hallwan 17 ☐ In an instructional area (e.g., classroom, scho- conference room) 18 ☐ In a recreation area (e.g., yard, courtyard, gyr 19 ☐ In a medical area (e.g., Infirmary, health clinic 10 ☐ In a staff area (office, break room, counselor's 11 ☐ Offsite or while in transit 12 ☐ Other - Specify 13 ☐ Location unknown | and of the incident? 1 Under age 13 16–17 1 Under age 13 16–19 16 Under age 13 16 Under age 13 16 Under age 13 16 Under age 13 16 Under age 14 18–19 16 Under age 13 16 Under age 13 16 Under age 14 18–19 16 Under age 13 16 Under age 14 18–19 16 Under age 14 18 18 18 18 18 18 18 18 18 18 18 18 18 |
| Did the incident take place in an area subject video monitoring? o1 Yes o2 No o3 Don't know | 10. Victim #2: What was the victim's sex or gender identity? (See definitions on page 5.) 01 Male |
| What time did the incident occur? (Mark (☒) all that apply.) □ Morning (6 a.m. to noon) | of the incident? 01 □ Under age 13 02 □ 13–15 05 □ 20–24 |

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 (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 Tested for HIV/AIDS |
| | 04 American Indian/Alaska Native (not of Hispanic origin) | 04 \square Tested for other sexually transmitted diseases |
| | 05 Asian (not of Hispanic origin) | 05 Provided with counseling or mental health |
| | 06 Native Hawaiian or Other Pacific Islander | treatment |
| | (not of Hispanic origin) | 06 Offered but declined testing or treatment |
| | 07 ☐ Other racial category in your information system – Specify ☐ | 07 ☐ Already released/discharged 08 ☐ None of the above |
| | | 16. After the incident was reported was the |
| 13. | Did the victim(s) sustain any physical injury | 16. After the incident was reported, was the victim(s) – (Mark (☒) all that apply for all victims.) |
| | 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 |
| | 01 ☐ Yes → a. What injuries occurred? (Mark (X) 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 Droken 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 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</i> | 10 ☐ Other – <i>Specify</i> ✓ |
| | | is a called a speeding p |
| | → b. Did the victim(s) receive medical | |
| | treatment for these injuries? | 11 □ None of the above |
| | 01 □ Yes 02 □ No | 17. What type of sexual violence was involved in the incident? (See definitions on page 5.) |
| | | on ☐ Youth–on–youth nonconsensual sexual act |
| 14. | Who reported the incident? (Mark (\overline{X}) all that apply.) | → Complete Section A, below |
| | on ☐ Victim | 02 🗌 Youth–on–youth abusive contact |
| | 02 Another youth (non-victim) | → Complete Section A, below |
| | 03 Victim's family or friend | $_{03}$ \square Youth–on–youth sexual harassment $ ightarrow$ <i>Complete Section A, below</i> |
| | 04 Correctional officer or front line staff | 04 ☐ Staff sexual misconduct |
| | 05 Administrative staff | → Complete Section B on pages 4–5 |
| | 06 Medical, healthcare, or mental health staff | 05 Staff sexual harassment |
| | 07 🗌 Instructor, teacher, or counselor | → 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 – Specify ✓ | Number of youth perpetrators |
| | | → If more than two youth perpetrators were involved, report their characteristics in Notes on page 5. |

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| 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 (X) all that apply.) |
|-----|---|--|
| | 01 Male 03 Transgender | Voluntary sexual contact between youths |
| | 02 Female 04 Intersex | 02 Sexual harassment |
| 20. | Perpetrator #1: What was the youth perpetrator's | 03 Indecent exposure, masturbation, or voyeurism |
| | age at the time of the incident? | ₀₄ Horseplay |
| | 01 ☐ Under age 13 04 ☐ 18–19 | 05 Repeated and unwelcome sexual advances or |
| | 02 13–15 05 20–24 | 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 | 07 Pressure or coercion (without force) resulting in a nonconsensual sexual act |
| | race/ethnic origin? (Mark (\boxed{X}) all that apply.) | $_{08}$ \square Physical force (or the threat of force) resulting |
| | 01 White (not of Hispanic origin) | in a nonconsensual sexual act |
| | 02 Black (not of Hispanic origin) | 09 ☐ Other – <i>Specify_¥</i> |
| | 03 Hispanic or Latino | |
| | 04 American Indian/Alaska Native (not of Hispanic origin) | |
| | 05 ☐ Asian (not of Hispanic origin) | |
| | 06 Native Hawaiian or Other Pacific Islander | 26. What type of pressure or physical force was |
| | (not of Hispanic Origin) | 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 |
| | Оровну | verbal comments |
| | | 02 Persuasion or talked into sexual activity |
| 22 | Downstant w #2. Will at any the second by a second by | 03 \square Surprised the victim with unwanted touching, |
| 22. | Perpetrator #2: What was the youth perpetrator's sex or gender identity? (See definitions on page 5.) | grabbing or groping, or victim was asleep |
| | | ⁰⁴ ☐ Bribery or blackmail |
| | 01 Male 03 Transgender | 05 Gave victim drugs or alcohol |
| | 02 Female 04 Intersex | 06 Offered protection from other youth |
| | December 110 What are the contract of | |
| 23. | Perpetrator #2: What was the youth perpetrator's | ⁰⁷ Threatened with physical harm |
| 23. | age at the time of the incident? | 08 Physically held victim down or restrained in |
| 23. | age at the time of the incident? o1 Under age 13 o4 18-19 | 08 Physically held victim down or restrained in some way |
| 23. | age at the time of the incident? 01 ☐ Under age 13 04 ☐ 18–19 02 ☐ 13–15 05 ☐ 20–24 | Physically held victim down or restrained in some way Physically harmed or injured |
| 23. | age at the time of the incident? o1 Under age 13 o4 18-19 | 08 ☐ Physically held victim down or restrained in some way 09 ☐ Physically harmed or injured 10 ☐ Threatened with a weapon |
| | 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 Perpetrator #2: What was the youth perpetrator's | Physically held victim down or restrained in some way Physically harmed or injured |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon Other - Specify |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 01 White (not of Hispanic origin) | 08 ☐ Physically held victim down or restrained in some way 09 ☐ Physically harmed or injured 10 ☐ Threatened with a weapon |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 01 White (not of Hispanic origin) 02 Black (not of Hispanic origin) | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon Other − Specify None |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 01 White (not of Hispanic origin) 02 Black (not of Hispanic origin) 03 Hispanic or Latino | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon Other - Specify |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 01 White (not of Hispanic origin) 02 Black (not of Hispanic origin) | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon Other − Specify None Physically harmed or injured None |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 01 White (not of Hispanic origin) 02 Black (not of Hispanic origin) 03 Hispanic or Latino 04 American Indian/Alaska Native (not of Hispanic | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon Other − Specify None Physically harmed or injured None Threatened with a weapon Il Other − Specify None Placed in solitary confinement or disciplinary segregation |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 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) 05 Asian (not of Hispanic origin) 06 Native Hawaiian or Other Pacific Islander | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon None None None Mark (X) all that apply for all perpetrators.) Placed in solitary confinement or disciplinary segregation Confined to own cell or room |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 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) 05 Asian (not of Hispanic origin) 06 Native Hawaiian or Other Pacific Islander (not of Hispanic Origin) | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon Other − Specify None Physically harmed or injured None Threatened with a weapon Il Other − Specify None Placed in solitary confinement or disciplinary segregation |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 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) 05 Asian (not of Hispanic origin) 06 Native Hawaiian or Other Pacific Islander | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon Other − Specify None Placed in solitary confinement or disciplinary segregation Confined to own cell or room Placed in higher custody level, restricted unit or |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 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) 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 - | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon None Physically harmed or injured Physically harmed or disciplinary segregation Placed in solitary confinement or disciplinary segregation Physically harmed or all perpetrators.) Placed in solitary confinement or disciplinary segregation Placed in higher custody level, restricted unit or program, within the same facility Transferred to other unit/cell or separated from |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 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) 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 - | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon None The sanction was imposed on the perpetrator(s)? Mark (X) all that apply for all perpetrators.) Placed in solitary confinement or disciplinary segregation Confined to own cell or room Placed in higher custody level, restricted unit or program, within the same facility Transferred to other unit/cell or separated from victim Transferred to another facility Loss of "good/gain" time or increase in "bad" |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 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) 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 - | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon None None None That sanction was imposed on the perpetrator(s)? (Mark (X) all that apply for all perpetrators.) Placed in solitary confinement or disciplinary segregation Confined to own cell or room Placed in higher custody level, restricted unit or program, within the same facility Transferred to other unit/cell or separated from victim Transferred to another facility Loss of "good/gain" time or increase in "bad" time/delayed release |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 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) 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 - | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon None None None None That sanction was imposed on the perpetrator(s)? (Mark (X) all that apply for all perpetrators.) Placed in solitary confinement or disciplinary segregation Confined to own cell or room Placed in higher custody level, restricted unit or program, within the same facility Transferred to other unit/cell or separated from victim Transferred to another facility Loss of "good/gain" time or increase in "bad" time/delayed release Given extra work |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 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) 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 - | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon Noher – Specify None 27. What sanction was imposed on the perpetrator(s)? (Mark (X) all that apply for all perpetrators.) Placed in solitary confinement or disciplinary segregation Confined to own cell or room Placed in higher custody level, restricted unit or program, within the same facility Transferred to other unit/cell or separated from victim Transferred to another facility Loss of "good/gain" time or increase in "bad" time/delayed release Given extra work Solution, or other reprimand |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 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) 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 - | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon Threatened with a weapon None Physically harmed or injured None None Threatened with a weapon Physically harmed or injured None Physically harmed or injured None Physically harmed or injured Physically harmed or disciplinary segregation Placed in solitary confinement or disciplinary segregation Placed in higher custody level, restricted unit or program, within the same facility Transferred to other unit/cell or separated from victim Transferred to another facility Loss of "good/gain" time or increase in "bad" time/delayed release Given extra work Sent to counseling or treatment team |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 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) 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 - | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon Threatened with a weapon None Physically harmed or injured None None Threatened with a weapon Physically harmed or injured None Physically harmed or injured None Physically harmed or injured Physically harmed or disciplinary segregation Placed in solitary confinement or disciplinary segregation Placed in higher custody level, restricted unit or program, within the same facility Transferred to other unit/cell or separated from victim Transferred to another facility Loss of "good/gain" time or increase in "bad" time/delayed release Given extra work Sent to counseling or treatment team Arrested or referred to law enforcement agency |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 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) 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 - | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon Threatened with a weapon None 7. What sanction was imposed on the perpetrator(s)? Mark (X) all that apply for all perpetrators.) Placed in solitary confinement or disciplinary segregation Confined to own cell or room Placed in higher custody level, restricted unit or program, within the same facility Transferred to other unit/cell or separated from victim Transferred to another facility Loss of "good/gain" time or increase in "bad" time/delayed release Given extra work Coss of privileges, disciplinary report or conduct violation, or other reprimand Sent to counseling or treatment team Arrested or referred to law enforcement agency Referred for prosecution or indicted |
| | 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 Perpetrator #2: What was the youth perpetrator's race/ethnic origin? (Mark (X) all that apply.) 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) 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 - | Physically held victim down or restrained in some way Physically harmed or injured Threatened with a weapon Threatened with a weapon None Physically harmed or injured None None Threatened with a weapon Physically harmed or injured None Physically harmed or injured None Physically harmed or injured Physically harmed or disciplinary segregation Placed in solitary confinement or disciplinary segregation Placed in higher custody level, restricted unit or program, within the same facility Transferred to other unit/cell or separated from victim Transferred to another facility Loss of "good/gain" time or increase in "bad" time/delayed release Given extra work Sent to counseling or treatment team Arrested or referred to law enforcement agency |

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| | 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 \(\text{ 30 - 34} \) 07 \(\text{ 55 or older} \) |
| | 02 Pressure or abuse of power resulting in a nonconsensual sexual act | | 04 🗌 35 – 39 |
| | os ☐ Indecent exposure, invasion of privacy, orvoyeurism 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 (X) 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> | | 05 Asian (not of Hispanic origin) |
| | or = care. Open, | | 06 Native Hawaiian or Other Pacific Islander (not of Hispanic origin) |
| | | | 07 ☐ Other racial category in your information system Specify → |
| | 09 ∐ Level of coercion unknown | | Ореспур |
| 29. | How many staff were involved in the incident? | | |
| | Number of staff | 36. | . Was the staff involved in the incident an employe of the facility, a contractor, or a volunteer? |
| | → 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? | | 03 ☐ 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 03 30 - 34 07 55 or older | | the staff involved in the incident? (Mark (X) all that apply for all staff involved.) |
| | 03 ☐ 30 – 34 | | 01 ☐ 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 ($\overline{\mathbb{X}}$) 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 | | social workers, nurses, and medical assistants of Education staff, including instructors, teachers, |
| | (not of Hispanic origin) □ Other racial category in your information system – | | librarians, and education assistants or □ Other program staff |
| | Specify Z | | 08 ☐ Volunteers or Interns |
| | | | 09 ☐ Other staff – Specify → |

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| 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

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 a youth 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.