FORM **SSV-1** (04-10-2024)



SURVEY OF SEXUAL VICTIMIZATION, 2023

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 U.S. CENSUS BUREAU

	OSTICE	Julilla	. y . 0				
		DATA SUF	PPLIED B	Y			
Name			Title				
OFFICIAL ADDRESS	Number and s	street or P.O. Box/Route Number		City	State	ZIP Code	
ADDRESS							
TELEPHONE	Area code	Number			Area Code	Number	
				NUMBER			
E-MAIL							
ADDRESS							

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

What facilities are included in this data collection?

All confinement facilities 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, 2023, and December 31, 2023.

- 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," write "0" on the line.

Substantiated incidents of sexual victimization:

 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 November 12, 2024.
- You may complete these forms online at: https://ssv.census.gov/
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE): 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

This survey utilizes the PREA standard definitions for types of sexual victimization. These categories are:

SEXUAL ABUSE

Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

- Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus;
- (3) Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
- (4) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact 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, detainee, or resident directed toward another.

		s of inmate-on-i			
	oı ☐ Yes →	Do you record a occurrences, o ones?	all reporte r only sub:	d stantiated	
		01 All			
		02 Substant	tiated only		
	02 □ No →	Please provide an agency does not i SEXUAL ABUS below, and skip to	record inmat E allegations	e-on-inmate	
ŀ	now many	anuary 1, 2023, allegations of ir BUSE were repo	ımate-on-i	mber 31, 2023 nmate	3,
	Number re	ported			
•	If the alleg perpetrato included re	pation involved multi rs, count only once epeated abuse with trator/s involved, co	e. If an allega n the same v	ition ictim/s	
•	Exclude a consensua	ny allegations that	were reporte	d as	
I /	many were responsible t	gations reported — (Please contact for investigating all in order to fully con	ot the agency egations of s	or office exual	
	a. Substan	tiated			
	have o	rent was investigate ccurred, based on ce (28 C.F.R. §115	a preponder	mined to ance of the	
	b. Unsubst	antiated			
	The invited insuffice occurrence occurr	vestigation conclud cient to determine ved.	ed that evide whether or no	ence was ot the event	
	c. Unfound	l ed			
	The invoccur.	vestigation determine	ned that the	event did NOT	
(d. Investig	ation ongoing			
	 Eviden or eval been n 	ce is still being gat uated, and a final on ade.	hered, proce determination	essed In has not yet	
(e. TOTAL (3a throu	Sum of Items			
	The tot	tal should equal the	number rep	orted in Item 2.	

4. Does the Federal Bureau of Prisons record allegations of inmate-on-inmate SEXUAL HARASSMENT? (See definitions on page 2.) □ Yes → Do you record all reported allegations or only substantiated ones? □ □ All □ □ Substantiated only □ □ No → Please provide an explanation as to why your agency does not record inmate-on-inmate SEXUAL HARASSMENT allegations, in the space below, and skip to Section II.	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.) a. Substantiated b. Unsubstantiated c. Unfounded d. Investigation ongoing
	e. TOTAL (Sum of Items 6a through 6d) • The total should equal the number reported in Item 5.
5. Between January 1, 2023, and December 31, 2023, how many allegations of inmate-on-inmate SEXUAL HARASSMENT were reported? Number reported If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated harassment with the same victim/s and perpetrator/s involved, count only once. Exclude any allegations that were reported as consensual.	

Section II - STAFF-ON-INMATE SEXUAL VICTIMIZATION

DEFINITIONS

STAFF SEXUAL ABUSE

Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the inmate, detainee, or resident:

- (1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus:
- (3) Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (4) Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (5) Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (6) Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (1)–(5) of this section;
- (7) Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, detainee, or resident, and
- (8) Voyeurism by a staff member, contractor, or volunteer.

STAFF SEXUAL HARASSMENT

Repeated verbal comments or gestures of a sexual nature to an inmate, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

allegations of STAFF SEXUAL ABUSE?
01 ☐ Yes → Do you record all reported occurrences, or only substantiated ones?
01 ☐ All 02 ☐ Substantiated only
02 ☐ No → Please provide an explanation as to why your agency does not record STAFF SEXUAL ABUSE allegations, in the space below, and skip to Item 10.
B. Between January 1, 2023, and December 31, 2023, how many allegations of STAFF SEXUAL ABUSE were reported?
Number reported
 If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated abuse with the same victim/s and perpetrator/s involved, count only once.
a. 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
b. Unsubstantiated
c. Unfounded
d. Investigation ongoing .
e. TOTAL (Sum of Items 9a through 9d)
 The total should equal the number reported in Item 8.

7. Does the Federal Bureau of Prisons record

		Section III – TOTAL SUBSTANTIATED
	Federal Bureau of Prisons record	INCIDENTS OF SEXUAL VICTIMIZATION
	ons of STAFF SEXUAL HARASSMENT? nitions on page 4.)	13. What is the total number of substantiated incidents reported Items 3a, 6a, 9a, and 12a?
01 ☐ Yes	→ Can these allegations be counted separately from allegations of STAFF SEXUAL ABUSE?	Total substantiated incidents
	o₁ ☐ Yes	→ Please complete a Substantiated Incident
	02 ☐ No → Skip to Item 13.	Form (Adult, SSV-IA) for each substantiated incident of sexual victimization.
02 No •	→ Please provide an explanation as to why	
	your agency does not record STAFF SEXUAL HARASSMENT allegations, in	
	the space below, and skip to Item 13.	NOTES
11 Between	ı January 1, 2023, and	
Decemb	er 31, 2023, how many allegations	
of STAF	F SEXUAL HARASSMENT were	
-		
Number	reported	
perpetr include	llegation involved multiple victims and/or ators, count only once. If an allegation d repeated harassment with the same and perpetrator/s involved, count only once.	
many we responsib	llegations reported in Item 11, how ere — (Please contact the agency or office le for investigating allegations of sexual on in order to fully complete this form.)	
a. Subst	antiated	
h Ilneut	ostantiated	
Di Gilau	, stantiated	
. 114	nded	
c. Untou	naea	
d lavosi	tigation ongoing .	
a. inves	ligation ongoing	
e. TOTA 12a th	L (Sum of Items nrough 12d)	
	total should equal the number reported in 11.	

FORM **SSV-2** (04-11-2024)



SURVEY OF SEXUAL VICTIMIZATION, 2023

State Prison Systems Summary Form

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

	USTICE	Summa	ry Form				
		DATA SUF	PLIED B	Y			
Name			Title				
OFFICIAL	Number and	street or P.O. Box/Route Number		City	State	ZIP Code	
ADDRESS				-			
	Area code	Number		FAX A	rea Code	Number	
TELEPHONE				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 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, 2023, and December 31, 2023.

- 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," write "0" in the space provided.

Substantiated incidents of sexual victimization:

 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 greta.b.clark@census.gov
- Please return your completed summary and substantiated incident forms by November 12, 2024.
- You may complete these forms online at: https://ssv.census.gov/
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE): 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

This survey utilizes the PREA standard definitions for types of sexual victimization. These categories are:

SEXUAL ABUSE

Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

- Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus:
- (3) Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
- (4) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact 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, detainee, or resident directed toward another.

allegations of inmate-on-inmate SEXUAL ABUSE?
01 ☐ Yes → Do you record all reported occurrences, or only substantiated ones?
01 All
02 Substantiated only
02 ☐ No → Please provide an explanation as to why your agency does not record inmate-on-inmate SEXUAL ABUSE allegations, in the space below, and skip to Item 4.
Between January 1, 2023, and December 31, 2023,
how many allegations of inmate-on-inmate SEXUAL ABUSE were reported?
Number reported
 If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated abuse with the same victim/s and perpetrator/s involved, count only once.
 Exclude any allegations that were reported as consensual.
Of the allegations reported in Item 2, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)
a. Substantiated
 The event was investigated and determined to have occurred, based on a preponderance of the evidence (28 C.F.R. §115.72).
b. Unsubstantiated
 The investigation concluded that evidence was insufficient to determine whether or not the event occurred.
c. Unfounded
 The investigation determined that the event did NOT occur.
d. Investigation ongoing
 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.

1. Does your State prison system record

2.

3

4. Does your State prison system record allegations of inmate-on-inmate SEXUAL HARASSMENT? (See definitions on page 2.) o1 Yes → Do you record all reported allegations or only substantiated ones?	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.) a. Substantiated
02 ☐ Substantiated only 102 ☐ No → Please provide an explanation as to why your agency does not record	b. Unsubstantiated
inmate on-inmate SEXUAL HARASSMENT allegations, in the space below, and skip to Section II.	c. Unfounded
	d. Investigation ongoing
	e. TOTAL (Sum of Items 6a through 6d)
	 The total should equal the number reported in Item 5.
5. Between January 1, 2023, and December 31, 2023, how many allegations of inmate-on-inmate SEXUAL HARASSMENT were reported? Number reported	

Section II - STAFF-ON-INMATE SEXUAL VICTIMIZATION

DEFINITIONS

STAFF SEXUAL ABUSE

Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the inmate, detainee, or resident:

- (1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus:
- (3) Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (4) Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (5) Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire:
- (6) Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (1)–(5) of this section;
- (7) Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, detainee, or resident, and
- (8) Voyeurism by a staff member, contractor, or volunteer.

STAFF SEXUAL HARASSMENT

Repeated verbal comments or gestures of a sexual nature to an inmate, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

	Does your State prison system record allegations of STAFF SEXUAL ABUSE?
	01 ☐ Yes → Do you record all reported occurrences, or only substantiated ones?
	01 All 02 Substantiated only
	02 ☐ No → Please provide an explanation as to why your agency does not record STAFF SEXUAL ABUSE allegations, in the space below, and skip to Item 10.
•	Between January 1, 2023, and December 31, 2023, how many allegations of STAFF SEXUAL ABUSE were reported?
	Number reported
	If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated abuse with the same victim/s and perpetrator/s involved, count only once.
•	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
	b. Unsubstantiated
	c. Unfounded
	d. Investigation ongoing .
	e. TOTAL (Sum of Items 9a through 9d)
	 The total should equal the number reported in Item 8.

10. Does your State prison system record	Section III - PRIVATE AND LOCAL ALLEGATIONS
allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 4.)	13. Did any of the allegations reported in Items 2, 5, 8, or 11 occur in a privately operated facility?
01 ☐ Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL ABUSE?	01 ☐ Yes 02 ☐ No
01 ☐ Yes 02 ☐ No → Skip to Item 13.	14. Did any of the allegations reported in Items 2, 5, 8, or 11 occur in a facility operated and administered by local governments?
02 ☐ No → Please provide an explanation as to why your agency does not record STAFF SEXUAL HARASSMENT allegations, in the space below, and skip to Item 13.	01 ☐ Yes 02 ☐ No
the space below, and skip to item 15.	Section IV – TOTAL SUBSTANTIATED INCIDENTS OF SEXUAL VICTIMIZATION
	15. What is the total number of substantiated incidents reported in Items 3a, 6a, 9a, and 12a?
	Total substantiated incidents
	→ Please complete a Substantiated Incident Form (Adult, SSV-IA) for each substantiated incident of sexual victimization.
11. Between January 1, 2023, and	incident of Sexual Victimization.
December 31, 2023, how many allegations of STAFF SEXUAL HARASSMENT were reported?	NOTES
Number reported	
If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated harassment with the same victim/s and perpetrator/s involved, count only once.	
12. Of the allegations reported in Item 11, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)	
a. Substantiated	
b. Unsubstantiated	
c. Unfounded	
d. Investigation ongoing .	
e. TOTAL (Sum of Items 12a through 12d)	
 The total should equal the number reported in Item 11. 	

FORM **SSV-3** (04-11-2024)



SURVEY OF SEXUAL VICTIMIZATION, 2023

Local Jail Jurisdictions Summary Form

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

		Marian							
	DATA SUPPLIED BY								
	Name			Title					
	OFFICIAL	Number and s	street or P.O. Box/Route Number		City	State	ZIP Code		
	ADDRESS								
		Area code	Number		FAX	Area Code	Number		
	TELEPHONE				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, 2023, and December 31, 2023.

- 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" on the line.

Substantiated incidents of sexual victimization:

 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 October 29, 2024.
- You may complete these forms online at: https://ssv.census.gov/
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE): 1-888-262-3974

Burden Statement

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

Section I - GENERAL INFORMATION

Section II - INMATE-ON-INMATE SEXUAL VICTIMIZATION

1. How many persons under the supervision of your local jail jurisdiction were —

a. CONFINED in your jail facilities on December 31, 2023?

- 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	
	nmates on ecember 31, 2023				
A	DMITTED to your jail fa	cilities du	ıring	g 2023?	
•	INCLUDE new admissions booked into and housed in				

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

	Male	Female	
New admissions during 2023			

- 2. Between January 1, 2023, and December 31, 2023, what was the average daily population of all jail confinement facilities operated by your jurisdiction?
 - To calculate the average daily population, add the number of persons for each day during the period January 1, 2023, through December 31, 2023, and divide the result by 365.

·	Male		Female	
Average daily population		□ .		. ⊏

DEFINITIONS

This survey utilizes the PREA standard definitions for types of sexual victimization. These categories are:

SEXUAL ABUSE

Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

- Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus:
- (3) Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
- (4) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact 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, detainee, or resident directed toward another.

h.

	Does your local jail jurisdiction record allegations of inmate-on-inmate SEXUAL ABUSE? (See definitions on page 2.)	6. Does your local jail jurisdiction record allegations of inmate-on-inmate SEXUAL HARASSMENT? (See definitions on page 2.)
(on ☐ Yes → Do you record all reported occurrences, or only substantiated ones?	01 ☐ Yes → Do you record all reported allegations or only substantiated ones?
	02 Substantiated only	01 ☐ All 02 ☐ Substantiated only
C	No → Please provide an explanation as to why your agency does not record inmate-on-inmate SEXUAL ABUSE allegations, in the space below, and skip to Item 6.	02 No → Please provide an explanation as to why your agency does not record inmate-on-inmate SEXUAL HARASSMENT allegations, in the space below, and skip to Section II.
	Between January 1, 2023, and December 31, 2023, how many allegations of inmate-on-inmate SEXUAL ABUSE were reported?	7. Between January 1, 2023, and December 31, 2023, how many allegations of inmate-on-inmate SEXUAL HARASSMENT were reported?
	If the allegation involved multiple victims and/or	
	perpetrators, count only once. If an allegation included repeated abuse with the same victim/s and perpetrator/s involved, count only once.	Number reported If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated harassment with the same
	 Exclude any allegations that were reported as consensual. 	victim/s and perpetrator/s involved, count only once. Exclude any allegations that were reported as
,	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.)	consensual. 8. Of the allegations reported in Item 7, how many were —
	a. Substantiated	a. Substantiated
	 The event was investigated and determined to have occurred, based on a preponderance of the evidence (28 C.F.R. §115.72). 	b. Unsubstantiated
	The investigation concluded that evidence was insufficient to determine whether or not the event	c. Unfounded
	occurred.	d. Investigation ongoing
	Unfounded	e. TOTAL (Sum of Items 8a through 8d) • The total should equal the number reported in Item 7.
	d. Investigation ongoing .	
	Evidence is still being gathered, processed or evaluated, and a final determination has not yet been made.	
	e. TOTAL (Sum of Items	
	The total should equal the number reported in Item 4.	

Section III - STAFF-ON-INMATE SEXUAL VICTIMIZATION

DEFINITIONS

STAFF SEXUAL ABUSE

Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the inmate, detainee, or resident:

- Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus:
- (3) Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (4) Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (5) Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (6) Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (1)–(5) of this section;
- (7) Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, detainee, or resident, and
- (8) Voyeurism by a staff member, contractor, or volunteer.

STAFF SEXUAL HARASSMENT

Repeated verbal comments or gestures of a sexual nature to an inmate, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

9.	9. Does your local jail jurisdiction record allegations of STAFF SEXUAL ABUSE?						
	01 ☐ Yes → Do you record all reported occurrences, or only substantiated ones?						
		01 All					
		02 Substantiated	only				
	02 □ No →	Please provide and your agency does in SEXUAL ABUSE below, and skip to	not record : allegations	STAFF			
10.	December	anuary 1, 2023, a 31, 2023, how m (UAL ABUSE we	any alleg	ations of ed?			
	Number re	ported					
	perpetrate included i	gation involved multi ors, count only once repeated abuse with or/s involved, count	. If an allega the same \	ation			
11.	many were	gations reported — (Please contaci nsible for investigatin nization in order to fu	t the agenc ng allegatio	y or ns of			
	a. Substan	tiated					
	b. Unsubst	antiated					
	c. Unfound	led					
	d. Investig	ation ongoing .					
	11a thro	Sum of Items bugh 11d)		orted in			

12.	Does your local jail jurisdiction record allegations of STAFF SEXUAL HARASSMENT?	Section IV – TOTAL SUBSTANTIATED INCIDENTS OF SEXUAL VICTIMIZATION
	(See definitions on page 4.) 101 ☐ Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL ABUSE?	15. What is the total number of substantiated incidents reported in Items 5a, 8a, 11a, and 14a?
	01 ☐ Yes 02 ☐ No → Skip to Item 15.	Total substantiated incidents
	No → Please provide an explanation as to why your agency does not record STAFF SEXUAL HARASSMENT allegations, in the space below, and skip to Item 15.	→ Please complete a Substantiated Incident Form (Adult, SSV-IA) for each substantiated incident of sexual victimization.
		NOTES
13.	Between January 1, 2023, and December 31, 2023, how many allegations of STAFF SEXUAL HARASSMENT were reported?	
	Number reported	
	 If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated harassment with the same victim/s and perpetrator/s involved, count only once. 	
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	
	b. Unsubstantiated	
	c. Unfounded	
	d. Investigation ongoing	
	e. TOTAL (Sum of Items 14a through 14d)	
	The number should equal the number reported in Item 13.	

U.S. DEPARTMENT OF JUSTICE

FORM **SSV-4** (04-10-2024)



SURVEY OF SEXUAL VICTIMIZATION, 2023 Other Correctional Facilities

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

Other Correctional Facilities Summary Form

	Williams		,					
DATA SUPPLIED BY								
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>\</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?

- 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, 2023, and December 31, 2023.

- 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" on the line.

Substantiated incidents of sexual violence:

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

Returning forms:

- If you need assistance, please call the U.S. Census Bureau toll-free at 1-888-369-3613, option 2, or e-mail govs.ssv@census.gov
- Please return your completed summary and substantiated incident forms by October 29. 2023.
- You may complete these forms online at: https://ssv.census.gov/
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE) TO: 1-888-262-3974

Burden statement

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

Section I - GENERAL INFORMATION

Section II - INMATE-ON-INMATE SEXUAL VICTIMIZATION

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

a. CONFINED on December 31, 2023?

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

Mala

Famala

	Inmates on December 31, 2023						
b.	ADMITTED to your facilit	y during	202	3?			
	 INCLUDE new admissions officially booked into and h formal legal document and courts or some other official 	oused in you	our fa	acilities by			
	INCLUDE repeat offenders booked on new charges.						
	 EXCLUDE returns from escape, work release, medical appointments/treatment facilities, and bail or court appearances. 						
		Male		Female			
	New admissions during 2023		. 🔲 .		. 🗆		
Between January 1, 2023, and December 31, 2023, 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, 2023, through December 31, 2023, and divide the result by 365.						
		Male		Female			

DEFINITIONS

This survey utilizes the PREA standard definitions for types of sexual victimization. These categories are:

SEXUAL ABUSE

Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

- (1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus;
- (3) Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
- (4) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact 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, detainée, or resident directed toward another.

Average daily population

2. B D

	Does your facility record allegations of inmate-on-inmate SEXUAL ABUSE? (See definitions on page 2.)	6. Does your facility record allegations of inmate-on-inmate SEXUAL HARASSMENT? (See definitions on page 2.)					
(on ☐ Yes → Do you record all reported occurrences, or only substantiated ones?	01 ☐ Yes → Do you record all reported allegations or only substantiated ones?					
	02 Substantiated only	01 ☐ All 02 ☐ Substantiated only					
	No → Please provide an explanation as to why your agency does not record inmate-on-inmate SEXUAL ABUSE allegations, in the space below, and skip to item 6.	02 No → Please provide an explanation as to why your agency does not record inmate-on-inmate SEXUAL HARASSMENT allegations, in the space below, and skip to Section II.					
I	Between January 1, 2023, and December 31, 2023, how many allegations of inmate-on-inmate SEXUAL ABUSE were reported?						
	Number reported						
	 If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated abuse with the same victim/s and perpetrator/s involved, count only once. 	7. Between January 1, 2023, and December 31, 2023, how many allegations of inmate-on-inmate SEXUAL HARASSMENT were reported?					
	Exclude any allegations that were reported as consensual.	Number veneral					
1	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.)	Number reported If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated harassment with the same victim/s and perpetrator/s involved, count only once.					
	a. Substantiated	 Exclude any allegations that were reported as consensual. 					
	The event was investigated and determined to have occurred, based on a preponderance of the evidence (28 C.F.R. §115.72).	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.)					
	b. Unsubstantiated						
	The investigation concluded that evidence was insufficient to determine whether or not the event occurred.	a. Substantiated					
	c. Unfounded	b. Unsubstantiated					
	The investigation determined that the event did NOT occur.	b. Unsubstantiated					
	d. Investigation ongoing .	c. Unfounded					
,	Evidence is still being gathered, processed or evaluated, and a final determination has not yet been made.						
	e. TOTAL (Sum of Items	d. Investigation ongoing					
	The total should equal the number reported in Item 4.	e. TOTAL (Sum of Items 8a through 8d)					
		 The total should equal the number reported in Item 7. 					

Section III - STAFF-ON-INMATE SEXUAL VICTIMIZATION

DEFINITIONS

STAFF SEXUAL ABUSE

Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the inmate, detainee, or resident:

- Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus:
- (3) Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (4) Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (5) Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (6) Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (1)–(5) of this section;
- (7) Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, detainee, or resident, and
- (8) Voyeurism by a staff member, contractor, or volunteer.

STAFF SEXUAL HARASSMENT

Repeated verbal comments or gestures of a sexual nature to an inmate, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

9. Does your facility record allegations of STAFF SEXUAL ABUSE?							
	on ☐ Yes → Do you record all reported occurrences, or only substantiated ones?						
	01 ☐ All 02 ☐ Substantiated only						
	o2 ☐ No → Please provide an explanation as to why your agency does not record STAFF SEXUAL ABUSE allegations, in the space below, and skip to Item 10.						
О.	Between January 1, 2023, and December 31, 2023, how many allegations of STAFF SEXUAL ABUSE were reported?						
	Number reported						
	 If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated abuse with the same victim/s and perpetrator/s involved, count only once. 						
1.	Of the allegations reported in Item 10, how many were — (Please contact the agency or office responsible for investigation allegations of sexual victimization in order to fully complete this form.)						
	a. Substantiated						
	b. Unsubstantiated						
	c. Unfounded						
	d. Investigation ongoing						
	e. TOTAL (Sum of Items 11a through 11d)						
	The total should equal the number reported in Item 10.						

12.	Does your facility record allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 4.)	Section IV – TOTAL SUBSTANTIATED INCIDENTS OF SEXUAL VICTIMIZATION
	01 ☐ Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL ABUSE?	15. What is the total number of substantiated incidents reported in Items 5a, 8a, 11a, and 14a?
	01 ☐ Yes 02 ☐ No → Skip to Item 15.	Total substantiated incidents
	No → Please provide an explanation as to why your agency does not record STAFF SEXUAL HARASSMENT allegations, in the space below, and skip to Item 15.	→ Please complete a Substantiated Incident Form (Adult, SSV-IA) for each substantiated incident of sexual victimization.
		NOTES
13.	Between January 1, 2023, and December 31, 2023, how many allegations of STAFF SEXUAL HARASSMENT were reported?	
	Number reported	
	 If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated harassment with the same victim/s and perpetrator/s involved, count only once. 	
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	
	b. Unsubstantiated	
	c. Unfounded	
	d. Investigation ongoing .	
	e. TOTAL (Sum of Items 14a through 14d)	
	The total should equal the number reported in Item 13.	

Section IV - TOTAL SUBSTANTIATED

FORM **SSV-5**



SURVEY OF SEXUAL VICTIMIZATION, 2023

State Juvenile Systems Summary Form

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

	Mariage		•				
		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			Area Code	Number	
TELEPHONE				NUMBER			
E-MAIL							
ADDRESS							/

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

What facilities are included in this data collection?

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

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

What persons and incidents are included in this data collection?

Juveniles and youthful offenders, regardless of age or reason for placement, under your custody between January 1, 2023, and December 31, 2023.

- 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 inside the box beside each figure.
- Sections II, III, and V: if the answer to a question is "none" or "zero." write "0" on the line.

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 the U.S. Census Bureau toll-free at 1-800-253-2078 or email greta.b.clark@census.gov
- Please return your completed summary and substantiated incident forms by November 12, 2024.
- You may complete these forms online at: https://ssv.census.gov/
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE): 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, 2023, 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 Item 1 were —						
	a. I	Males				
	b. I	Females				
	c. ;	TOTAL (Sum of Items 2a and 2b)				
	•	 Count persons held in the facilities regardless of age or reason for pla persons who were temporarily away beds on December 31, 2023. 	acement. Ir	nclude		
3.	On hel	December 31, 2023, how man d in the facilities reported in I	y person tem 1 we	s ere —		
	a. <i>I</i>	Age 17 or younger				
	b. <i>I</i>	Age 18 to 20				
	C. /	Age 21 or older				
	- 1	TOTAL (Sum of Items 3a through 3c should equal Item 2c)				
	•	 Count all persons held in the facili regardless of age or reason for pla persons who were temporarily awa beds on December 31, 2023. 	acement. Ir	nclude		
4.	hov	tween January 1, 2023, and Down many persons were admitte m the facilities reported in Ite	d to or di	31, 2023, scharged		
	а. '	TOTAL number admitted				
	b. '	TOTAL number discharged				
	•	Include all persons admitted into y juvenile residential facilities by a for by the authority of the courts, or b agency.	ormal legal	document,		
		 Include all persons discharged fro State-operated juvenile residential period of confinement including se pretrial releases, transfers to adult other States, and deaths. 	l facilities a entence cor	mpletion.		
		 Exclude admissions and discharger returns from escape, administrative juvenile facilities operated by your release including work/school release appointments, other treatment fac appearances. 	re transfers State, or t ase, medic	to other emporary al		

On December 31, 2023, how many

Section II - YOUTH-ON-YOUTH SEXUAL VICTIMIZATION 5,

DEFINITIONS

This survey utilizes the PREA standard definitions for types of sexual victimization. These categories are:

SEXUAL ABUSE

Sexual abuse of a youth, detainee, or resident by another youth, detainee, or resident includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

- (1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus;
- (3) Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
- (4) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact 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, detainee, or resident directed toward another.

5.	Does your State juvenile system record allegations of youth-on-youth SEXUAL ABUSE?				
	 O1				
	o2 No → Please provide an explanation as to why your agency does not record youth-on-youth SEXUAL ABUSE allegations, in the space below, and skip to item 8.				
	Between January 1, 2023, and December 31, 2023, how many allegations of youth-on-youth SEXUAL ABUSE were reported?				
	Number reported				
	If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated abuse with the same victim/s and perpetrator/s involved, count only once.				
	 Exclude any allegations that were reported as consensual. 				
	7. Of the allegations reported in Item 6, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)				
	a. Substantiated				
	 The event was investigated and determined to have occurred, based on a preponderance of the evidence (28 C.F.R. §115.72). 				
	b. Unsubstantiated				
	 The investigation concluded that evidence was insufficient to determine whether or not the event occured. 				
	c. Unfounded				
	 The investigation determined that the event did NOT occur. 				
	d. Investigation ongoing				
	 Evidence is still being gathered, processed or evaluated, and a final determination has not yet been made. 				
	e. TOTAL (Sum of Items 7a through 7d)				
	 The total should equal the number reported in Item 6. 				

	Does your State juvenile system record allegations of youth-on-youth SEXUAL HARASSMENT? (See definitions on page 3.)
	O1 ☐ Yes → Do you record all reported allegations or only substantiated ones? O1 ☐ AII
	02 Substantiated only
	O2 No → Please provide an explanation as to why your agency does not record youth-on-youth SEXUAL HARASSMENT allegations, in the space below, and skip to Section III.
	Between January 1, 2023, and December 31, 2023, how many allegations of youth-on-youth SEXUAL HARASSMENT were reported?
	Number reported
	 If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated harassment with the same victim/s and perpetrator/s involved, count only once.
	 Exclude any allegations that were reported as consensual.
10.	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.)
	a. Substantiated
	b. Unsubstantiated
	c. Unfounded
	d. Investigation ongoing
	e. TOTAL (Sum of Items 10a through 10d)
	The total should equal the number reported in Item 9.

Page 4

FORM SSV-5 (03-14-2024)

Section III – STAFF-ON-YOUTH SEXUAL VICTIMIZATION

DEFINITIONS

STAFF SEXUAL ABUSE

Sexual abuse of a youth, detainee, or resident by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the youth, detainee, or resident:

- (1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus:
- (3) Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (4) Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (5) Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire:
- (6) Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (1)–(5) of this section;
- (7) Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of a youth, detainee, or resident, and
- (8) Voyeurism by a staff member, contractor, or volunteer.

STAFF SEXUAL HARASSMENT

Repeated verbal comments or gestures of a sexual nature to a youth, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

	llegations of STAFF SEXUA		1		
01	O1 ☐ Yes → Do you record all reported occurrences, or only substantiated ones?				
	01 ☐ All 02 ☐ Substantiated 0	only			
02	Please provide an expour agency does no SEXUAL ABUSE a below, and skip to Ite	t record ST Ilegations, in	AFF		
D	etween January 1, 2023, an ecember 31, 2023, how mai f STAFF SEXUAL ABUSE we	ny allegati	ons d?		
		·			
N	umber reported				
•	If the allegation involved multiple perpetrators, count only once. If repeated abuse with the same vinvolved, count only once.	an allegation	n included		
of se	f the allegations reported in lany were — (Please contact the fice responsible for investigating exual victimization in order to fully rm.)	ne agency or allegations o	of		
	a. Substantiated				
	b. Unsubstantiated				
	c. Unfounded				
	d. Investigation ongoing				
	e. TOTAL (Sum of Items 13a through 13d)				
	The total should equal the Item 12.	number repo	ntea in		

Page 5

Section IV - PRIVATE AND LOCAL ALLEGATIONS

14.	Does your State juvenile system record allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 5.) O1 Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL HARASSMENT? O1 Yes O2 No → Skip to Item 17. O2 No → Please provide an explanation as to why your agency does not record STAFF SEXUAL HARASSMENT allegations, in the space below, and skip to Item 17.	17. Did any of the allegations reported in Items 6, 9, 12, or 15 occur in a privately operated facility? 11 Yes 12 No 18. Did any of the allegations reported in Items 6, 9, 12, or 15 occur in a facility operated or administered by local governments? 11 Yes 12 No Section V - TOTAL SUBSTANTIATED INCIDENTS OF SEXUAL VICTIMIZATION 19. What is the total number of substantiated incidents reported in Items 7a, 10a, 13a, and 16a? Total substantiated incidents
		-> Please complete a Substantiated Incident Four
15.	Between January 1, 2023, and December 31, 2023, how many allegations of STAFF SEXUAL HARASSMENT were reported?	→ Please complete a Substantiated Incident Form (Juvenile, SSV-IJ) for each substantiated incident of sexual victimization.
	Number reported	NOTES
	 If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated harassment with the same victim/s and perpetrator/s involved, count only once. 	
16.	Of the allegations reported in Item 15, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)	
	a. Substantiated	
	b. Unsubstantiated	
	c. Unfounded	
	d. Investigation ongoing	
	e. TOTAL (Sum of Items 16a through 16d)	
	 The total should equal the number reported in Item 15. 	

FORM SSV-5 (03-14-2024)

FORM **SSV-6** (04-02-2024)



SURVEY OF SEXUAL VICTIMIZATION, 2023 Locally or Privately-Operated Juvenile Facilities Summary Form

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

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

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

What facilities are included in this data collection?

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, 2023, and December 31, 2023.

- 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" on the line.

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 the U.S. Census Bureau toll-free at 1-888-369-3613, option 2, or e-mail govs.ssv@census.gov
- Please return your completed summary and substantiated incident forms by November 12, 2024.
- You may complete these forms online at: https://ssv.census.gov/
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE): 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 🔲 F	Private agency				
02 🔲 🛚	Native American Tribal Government				
03 🔲 S	State				
04 🗌 (County				
05 🔲 L	Local or municipal government				
06 🔲 🕻	Other – <i>Specify</i>				
	•				
_					
2. Is thi	is facility operated by a				
_	is facility operated by a Private agency				
01 🔲 F					
01 🔲 F	Private agency Native American Tribal Government				
01	Private agency Native American Tribal Government				
01 F 02 N 03 S 04 O	Private agency Native American Tribal Government State				
01	Private agency Native American Tribal Government State County Local or municipal government				
01	Private agency Native American Tribal Government State County				
01	Private agency Native American Tribal Government State County Local or municipal government				

3. On December 31, 2023, how man held in this facility were —	ny persons
a. Males	
b. Females	
c. TOTAL (Sum of Items 3a and 3b)	
 Count persons held in the facility reason for placement. Include per temporarily away but had assigned December 31, 2023. 	rsons who were
l. On December 31, 2023, how mar held in this facility were —	ny persons
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 facil or reason for placement. Include temporarily away but had assigned December 31, 2023. 	persons who were
Between January 1, 2023, and December 31, 2023, how many p admitted to or discharged from t	ersons were his facility?
a. TOTAL number admitted	
b. TOTAL number discharged .	
 Include all persons admitted to th legal document, by the authority of some other official agency. 	is facility by a formal of the courts, or by
 Include all persons discharged from period of confinement including sepretrial releases, transfers to adult other States, and deaths. 	entence completion,
 Exclude admissions and discharg returns from escape, administratively juvenile facilities, or temporary rework/school release, medical apportreatment facilities. 	ve transfers to other lease including ointments, other

Section II - YOUTH-ON-YOUTH SEXUAL VICTIMIZATION

DEFINITIONS

This survey utilizes the PREA standard definitions for types of sexual victimization. These categories are:

SEXUAL ABUSE

Sexual abuse of a youth, detainee, or resident by another youth, detainee, or resident includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

- (1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus;
- (3) Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
- (4) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact 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, detainee, or resident directed toward another.

6.	Does your facility record allegations of youth-on-youth SEXUAL ABUSE?
	01 ☐ Yes → Do you record all reported occurrences, or only substantiated ones? 01 ☐ All 02 ☐ Substantiated only
	O2 No → Please provide an explanation as to why your agency does not record youth-on-youth SEXUAL ABUSE allegations, in the space below, and skip to item 9.
7.	Between January 1, 2023 and December 31, 2023, how many allegations of youth-on-youth SEXUAL ABUSE were reported?
	Number reported
	 If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated abuse with the same victim/s and perpetrator/s involved, count only once.
	 Exclude any allegations that were reported as consensual.
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
	The event was investigated and determined to have occurred, based on a preponderance of the evidence (28 C.F.R. §115.72).
	b. Unsubstantiated
	 The investigation concluded that evidence was insufficient to determine whether or not the event occurred.
	c. Unfounded
	The investigation determined that the event did NOT occur.
	d. Investigation ongoing
	 Evidence is still being gathered, processed or evaluated, and a final determination has not yet been made.
	e. TOTAL (Sum of Items 8a through 8d)
	The total should equal the number reported in Item 7.
	s total side side side side side side side side

9. Does your facility record allegations of youth-on-youth SEXUAL HARASSMENT? (See definitions on page 3.) 01 Yes → Do you record all reported allegations or only substantiated ones? 01 All 02 Substantiated only 02 No → Please provide an explanation as to why your agency does not record youth-on-youth SEXUAL HARASSMENT allegations, in the space below, and skip to Section III.	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.) a. Substantiated
	11a through 11d)
10. Between January 1, 2023, and December 31, 2023, how many allegations of youth-on-youth SEXUAL HARASSMENT were reported? Number reported	The total should equal the number reported in Item 10.

Section III – STAFF-ON-YOUTH SEXUAL VICTIMIZATION

DEFINITIONS

STAFF SEXUAL ABUSE

Sexual abuse of a youth, detainee, or resident by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the youth, detainee, or resident:

- (1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus:
- (3) Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (4) Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (5) Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (6) Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (1)–(5) of this section;
- (7) Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of a youth, detainee, or resident, and
- (8) Voyeurism by a staff member, contractor, or volunteer.

STAFF SEXUAL HARASSMENT

Repeated verbal comments or gestures of a sexual nature to a youth, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

۷.	SEXUAL AB	USE?	gations o	ISIAFF
	(Do you record all occurrences, or o ones?		antiated
		01 All 02 Substantiated	only	
	y	Please provide an exour agency does no SEXUAL ABUSE a selow, and skip to Ite	nt record ST allegations, in	'AFF
3.	Retween Ja	nuary 1, 2023, ar	nd	
Ο.	December 3	1, 2023, how ma JAL ABUSE were	ny allegat	ions of
	Number rep	orted		
	perpetrators repeated ab	tion involved multiple s, count only once. If suse with the same v unt only once.	an allegation	n included
4.	many were - office responsi	ations reported in — (Please contact the ible for investigating ation in order to fully	he agency o allegations	r of
	a. Substar	ntiated		
	b. Unsubs	tantiated		
	c. Unfound	ded		
	d. Investig	jation ongoing .		
		(Sum of Items ough 14d)		
	• The to	tal should equal the r	number repor	ted in Item 13.

SEXUAL HARASSMENT? (See definitions on page 5.)	INCIDENTS OF SEXUAL VICTIMIZATION
o1 Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL ABUSE? o1 Yes o2 No → Skip to Item 18 o2 No → Please provide an explanation as to why your agency does not record STAFF SEXUAL HARASSMENT allegations, in the space below, and skip to Item 18.	 18. What is the total number of substantiated incidents reported in Items 8a, 11a, 14a, and 17a. Total substantiated incidents
	NOTES
16. Between January 1, 2023, and	
December 31, 2023, how many allegations of	
STAFF SEXUAL HARASSMENT were reported?	
Number reported	
 If the allegation involved multiple victims and/or perpetrators, count only once. If an allegation included repeated harassment with the same victim/s and perpetrator/s involved, count only once. 	
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	
b. Unsubstantiated	
c. Unfounded	
d. Investigation ongoing	
e. TOTAL (Sum of Items 17a through 17d)	
 The total should equal the number reported in Item 16. 	

Section IV – TOTAL SUBSTANTIATED

FORM **SSV-IA** (04-10-2024)

13 Location unknown

or virtual communication)

14 Location not applicable (e.g., involved written, phone,



SURVEY OF SEXUAL VICTIMIZATION, 2023

Substantiated Incident Form (Adult)

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

Incident Number ___ out of ___ Did the incident take place in an area subject to video monitoring? (Mark all that apply.) Did the incident include repeated behaviors? 01 Yes 02 No 01 Yes 03 Unknown If "Yes" → a. On approximately, how many 02 No different dates did it occur? → b. On what date did the most 5. What time did the incident occur? recent incident occur? (Mark all that apply.) Month Dav Year 01 Morning (6 a.m. to 11:59 a.m.) 02 Afternoon (noon to 5:59 p.m.) 03 Evening (6 p.m. to 11:59 p.m.) If "No" → a. On what date did the incident 04 Overnight (midnight to 5:59 a.m.) occur? 05 Time unknown Day Month Year 6. Who reported the incident? (Mark all that apply.) 01 Victim 2. In what facility did the incident occur? 02 Another inmate (non-victim) 03 Victim's family, friend, or legal guardian Name 04 Correctional officer or front-line staff 05 Administrative staff City State 06 Medical, healthcare, or mental health staff o7 Instructor, teacher, or counselor 08 Other staff (e.g., kitchen worker, maintenance staff) 3. Where did the incident occur? (Mark all that apply.) 09 Chaplain or other religion official 01 In the victim's cell or room (if the victim and perpetrator 10 Perpetrator share a cell or room, count as the victim's cell) 11 Perpetrator's family, friend, or legal guardian 02 In the perpetrator's cell or room 12 Grievance coordinator, grievance process, or ombuds 03 In a dormitory or other multiple housing unit 13 Attorney (victim's or perpetrator's) 04 In a common area (e.g., shower, dayroom, bathroom) 14 Confidential informant, anonymous tip, hotline, or 05 In a temporary holding cell or intake area within the through monitoring (e.g., camera, telephone, or mail) facility 15 ☐ Other – Specify ~ In a program service area (e.g., commissary, kitchen, storage, laundry, cafeteria, workshop, hallway) 07 In an instructional area (e.g., classroom, school, library, conference room) 7. What was the type of sexual victimization incident? 08 In a recreation area (e.g., yard, courtyard, gymnasium) (See definitions on page 9.) 09 In a medical area (e.g., infirmary, health clinic) 01 Inmate-on-inmate sexual abuse 10 In a staff area (e.g., office, break room, counselor's office) → Complete sections A and B 11 U Offsite or while in transit 02 Inmate-on-inmate sexual harassment → Complete sections A and B 12 ☐ Other - Specify → 03 L Staff-on-inmate sexual abuse → Complete sections A and C 04 Staff-on-inmate sexual harassment

Burden Statement

→ Complete sections A and C

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 A - VICTIMS OF SEXUAL VICTIMIZATION

8.	How many victims were involved in the incident?	14.	Victim #1: Was the victim identified as having any of the following disabilities at the time of the incident? (Mark all that apply.)
	Number of victims		Disability is defined as (a) A physical or mental impairment
9	→ If more than two victims were involved, please complete this form online. Victim #1: What was the victim's sex assigned		that substantially limits one or more of the major life activities of [an] individual; (b) a record of such an impairment; or (c) being regarded as having such an
J .	at birth?		impairment.
	<u>Sex</u> is a multidimensional construct based on a cluster of anatomical and physiological traits that include external genitalia, secondary sex characteristics, gonads, chromosomes, and hormones.		01 A serious and persistent mental illness (e.g., bipolar disorder, major depression, obsessive compulsive disorder, post-traumatic stress disorder, schizophrenia, etc.)
	o1 Male		02 A cognitive impairment or intellectual disability (e.g.,
	02 Female		ADHD, autism spectrum disorder, dementia, a learning disability, etc.)
	O3 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 differences in sex development.]		o3 A physical impairment or disability (e.g., back or spinal injury, blindness or low vision, deafness or hearing loss, diabetes, epilepsy, heart disease, mobility impairments, etc.)
10.	Victim #1: What was the victim's gender identity?	15.	Victim #1: Did the victim sustain any physical injury during the incident?
	Gender identity is a person's core internal understanding or sense of who they are regardless of sex assigned at		01 Yes 02 No 03 Unknown
	birth.		If "Yes" → a. What injuries occurred? (Mark all that apply.)
	02 Female		o₁ ☐ Bruises, black eye, sprains, cuts,
	os Transgender [A person whose gender identity is different from the person's sex assigned at birth.]		scratches, swelling, welts 22 Bites
	o4 ☐ Gender nonconforming [A person whose gender		o3 ☐ Burns
	identity does not conform to traditional societal		04 Chipped or knocked out teeth
	gender expectations.]		05 Anal or vaginal tearing
			06 Knocked unconscious
	05 Other – Specify		07 Broken bones
	06 Unknown		08
	Window #4-Milestown Alexandratively and Alexandratively		10 ☐ Other – Specify ✓
11.	Victim #1: What was the victim's age at the time of the incident?		io <u> </u>
	years		
			→ b. Did the victim receive medical treatment for these injuries?
12.	Victim #1: What was the victim's race or ethnicity? (Mark all that apply.)		01 ☐ Yes 02 ☐ No 03 ☐ Unknown
	01 White		
	02 Black or African American	16.	Victim #1: After the incident was reported, was the victim – (Mark all that apply.)
	03 Hispanic or Latino		
	04 American Indian or Alaska Native		o1 ☐ Provided with counseling or mental health treatment o2 ☐ Given a medical examination
	06 ☐ Native Hawaiian or Pacific Islander		na Administered a sexual assault kit
	07 Middle Eastern or North African		04 ☐ Given post-exposure prophylaxis (PEP)
	08 ☐ Other racial category in your information system – Specify ∠		and/or emergency contraception os ☐ Tested for HIV/AIDS
			06 Tested for other sexually transmitted infections
			07 Offered but declined testing or treatment and/or
13.	Victim #1: What was the victim's citizenship?		counseling os Already released/discharged
	o₁ ☐ A U.S. citizen		os ☐ Already released/discharged
	02 ☐ Not a U.S. citizen		
	03 Of unknown citizenship status		

Page 2 FORM SSV-IA (04-10-2024)

Section A - VICTIMS OF SEXUAL VICTIMIZATION

17.	Victim #1: After the incident was reported, was the victim – (Mark all that apply.)	22. Victim #2: What was the victim's citizenship?
	o1 ☐ Separated from perpetrator	01 ∐ A U.S. citizen
	02 Confined to own cell or room	02 Not a U.S. citizen
	o3 Placed in or returned to restrictive housing	03 🗌 Of unknown citizenship status
	04 Placed in a medical unit, ward, or hospital	23. Victim #2: Was the victim identified as having
	05 Placed in camera room, under close surveillance, or increased supervision	any of the following disabilities at the time of the incident? (Mark all that apply.)
	 □ Transferred to another housing unit or dorm, or given a single room or cell □ Given a higher custody level or different unit within 	on A serious and persistent mental illness (e.g., bipolar disorder, major depression, obsessive compulsive disorder, post-traumatic stress disorder, schizophrenia,
	the facility os Transferred to another facility	etc.) 02 A cognitive impairment or intellectual disability (e.g.,
	09 Issued disciplinary report or loss of privileges	ADHD, autism spectrum disorder, dementia, a learning
	10 ☐ Other – Specify 🖟	disability, etc.) os A physical impairment or disability (e.g., back or spinal
		injury, blindness or low vision, deafness or hearing loss, diabetes, epilepsy, heart disease, mobility impairments, etc.)
	11 None of the above	′
	→ If there were no other victims, please skip	24. Victim #2: Did the victim sustain any physical injury during the incident?
	to Section B on pages 4-5 if the incident	01 ☐ Yes 02 ☐ No 03 ☐ Unknown
	involved an inmate perpetrator or Section C on pages 6-7 if the incident involved a staff	
	perpetrator.	If "Yes" → a. What injuries occurred? (Mark all that apply.)
18.	Victim #2: What was the victim's sex assigned	01 🗌 Bruises, black eye, sprains, cuts,
	at birth?	scratches, swelling, welts
	o1 ☐ Male o3 ☐ Intersex	03 🗌 Burns
	02 Female	04 Chipped or knocked out teeth
40	Victim #0: What was the victimis wonder	05 🗌 Anal or vaginal tearing
19.	Victim #2: What was the victim's gender identity?	06 Knocked unconscious
		07 ∐ Broken bones
	01 ☐ Male 05 ☐ Other – Specify ₹	08 ∐ Knife or stab wounds 09 □ Internal injuries
	02 Female	os ☐ Internal Injunes 10 ☐ Other – Specify ⊋
	03 Transgender 06 Unknown	10 🖂 Other – Specify 🕌
	04 Gender nonconforming	
20.	Victim #2: What was the victim's age at the time of the incident?	→ b.Did the victim receive medical treatment for these injuries?
	years	01 ☐ Yes 02 ☐ No 03 ☐ Unknown
21.	Victim #2: What was the victim's race or ethnicity? (Mark all that apply.)	25. Victim #2: After the incident was reported, was the victim – (Mark all that apply.)
	o₁ ☐ White	01 Provided with counseling or mental health treatment
	01 U White 02 Black or African American	02 Given a medical examination
	03 Hispanic or Latino	03 Administered a sexual assault kit
	04 American Indian or Alaska Native	o4 ☐ Given post-exposure prophylaxis (PEP) and/or emergency contraception
	05 ☐ Asian	os 🗆 Tested for HIV/AIDS
	06 Native Hawaiian or Pacific Islander	06 ☐ Tested for other sexually transmitted infections
	07 Middle Eastern or North African	07 Offered but declined testing or treatment and/or
	08 Other racial category in your information system –	counseling
	Specify _₹	08 Already released/discharged
		09 None of the above

FORM SSV-IA (04-10-2024) Page 3

26.	Victim #2: After the incident was reported, was the victim – (Mark all that apply.)	28.	What types of pressure, coercion, or force occurred as part of the incident? (Mark all that apply.)
	o1 ☐ Separated from perpetrator o2 ☐ Confined to own cell or room o3 ☐ Placed in or returned to restrictive housing o4 ☐ Placed in a medical unit, ward, or hospital o5 ☐ Placed in camera room, under close surveillance, or increased supervision o6 ☐ Transferred to another housing unit or dorm, or given a single room or cell o7 ☐ Given a higher custody level or different unit within the facility o8 ☐ Transferred to another facility o9 ☐ Issued disciplinary report or loss of privileges 10 ☐ Other − Specify 戻		o1 ☐ Persuasion or talked into sexual activity o2 ☐ Bribery or blackmail o3 ☐ Gave the victim drugs or alcohol o4 ☐ Offered protection from other inmates o5 ☐ Threats made (e.g., threatened harm to victim or victim's family, threatened with a weapon) o6 ☐ Unwanted touching, grabbing, or groping of the victim by surprise or while the victim was asleep or incapacitated o7 ☐ Physically held victim down or restrained in some way, including having other inmates restrain the victim o8 ☐ Physical harm or injury o9 ☐ Other – Specify 承
	11 None of the above		10 ☐ None of the above
		29.	How many inmate perpetrators were involved in the incident?
	Section B – INMATE PERPETRATORS OF SEXUAL VICTIMIZATION		Number of inmate perpetrators
27.	 → If the perpetrator was a staff member, go to Section C on pages 6-7. What was the nature of the incident? (Mark all that apply.) □ Repeated verbal comments or gestures of a derogatory or offensive sexual nature □ Repeated and unwelcome sexual advances or requests for sexual favors □ Indecent exposure, masturbation, voyeurism, or other actions of a derogatory sexual nature □ Intentional and non-consensual or coerced touching of the genitalia, anus, groin, breast, inner thigh, or the buttocks □ Nonconsensual sexual act that resulted from pressure or coercion (without force) □ Nonconsensual sexual act that resulted from physical force (or the threat of force) □ Other – Specify 		Perpetrator #1: What was the inmate perpetrator's sex assigned at birth? Sex is a multidimensional construct based on a cluster of anatomical and physiological traits that include external genitalia, secondary sex characteristics, gonads, chromosomes, and hormones. Male Female 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 differences in sex development.] Perpetrator #1: What was the inmate perpetrator's gender identity? Gender identity? Gender identity is a person's core internal understanding or sense of who they are regardless of sex assigned at birth. Male Transgender [A person whose gender identity is different from the person's sex assigned at birth.] Gender nonconforming [A person whose gender identity does not conform to traditional societal gender expectations.]

Page 4 FORM SSV-IA (04-10-2024)

32.	Perpetrator #1: What was the inmate perpetrator's age at the time of the incident?	36.	Perpetrator #2: What was the inmate perpetrator's gender identity? (See definitions on page 9.)
	years		01 ☐ Male 05 ☐ Other – Specify ⊋
22	Perpetrator #1: What was the inmate		02 ☐ Female
33.	perpetrator's race or ethnicity?		03 ☐ Transgender 06 ☐ Unknown
	(Mark all that apply.)		04 ☐ Gender nonconforming
	01 White		04 - Gender Honcomorning
	02 Black or African American	37.	Perpetrator #2: What was the inmate
	03 ☐ Hispanic or Latino 04 ☐ American Indian or Alaska Native		perpetrator's age at the time of the incident?
	04 ☐ American Indian or Alaska Native 05 ☐ Asian		years
	06 ☐ Native Hawaiian or Pacific Islander		•
	07 ☐ Middle Eastern or North African	38.	Perpetrator #2: What was the inmate perpetrator's race or ethnicity?
	08 Other racial category in your information system –		(Mark all that apply.)
	Specify 📈		o₁ ☐ White
			02 Black or African American
			03 Hispanic or Latino
			04 American Indian or Alaska Native
34.	Perpetrator #1: After the incident, was the inmate perpetrator – (Mark all that apply.)		05 Asian
	01 ☐ Confined to own cell or room		06 Native Hawaiian or Pacific Islander
	02 Placed in or returned to restrictive housing		07 ☐ Middle Eastern or North African 08 ☐ Other racial category in your information system –
	O3 Placed in higher custody level, restricted unit or program, within the same facility		Specify
	04 Transferred to other unit/cell or separated from victim		
	05 Transferred to another facility		
	oe Sent to counseling or mental health treatment	39.	Perpetrator #2: After the incident, was the inmate
	o7 ☐ Given medical treatment or testing (e.g., post-exposure prophylaxis (PEP), HIV/AIDS)		perpetrator – (Mark all that apply.) o1 □ Confined to own cell or room
	08 Loss of "good/gain" time, increase in "bad" time or		02 ☐ Placed in or returned to restrictive housing
	delayed release		03 ☐ Placed in higher custody level, restricted unit or
	10 Loss of privileges, disciplinary report or conduct		program, within the same facility
	violation, or other reprimand		04 Transferred to other unit/cell or separated from victim
	11 Arrested or referred to law enforcement agency		Transferred to another facility
	12 Referred for prosecution or indicted		o6 Sent to counseling or mental health treatment
	13 Convicted, plead guilty, given new sentence, or fined		or Given medical treatment or testing (e.g., post-exposure prophylaxis (PEP), HIV/AIDS)
	14 ☐ Awaiting a legal outcome 15 ☐ Other – Specify ✓		08 ☐ Loss of "good/gain" time, increase in "bad" time or delayed release
			09 ☐ Given extra work
			10 ☐ Loss of privileges, disciplinary report or conduct violation, or other reprimand
	→ If there were no other perpetrators, please		11 Arrested or referred to law enforcement agency
	skip to Notes on page 8 (if applicable) or		12 Referred for prosecution or indicted
	submit form.		13 \square Convicted, plead guilty, given new sentence, or fined
35	Perpetrator #2: What was the inmate		14 Awaiting a legal outcome
551	perpetrator's sex assigned at birth?		15 ☐ Other – Specify 🖟
	01 ☐ Male 03 ☐ Intersex		
	02 Female		

FORM SSV-IA (04-10-2024)

Section C – STAFF PERPETRATORS OF SEXUAL VICTIMIZATION	45. Staff #1: Was the staff perpetrator involved in the incident –
 → If the perpetrator was an inmate, go to Section B on pages 4-5. 40. What was the nature of the incident? (Mark all that apply.) 	 01 ☐ Full or part-time paid employee 02 ☐ Contract employee or vendor 03 ☐ Volunteer or intern 04 ☐ Other – Specify
on Pressure or abuse of power resulting in a sexual act Of Pressure or abuse of power resulting in a sexual act Of Physical force resulting in a sexual act Of Physical force resulting in a sexual act Of Pressire Of Precify Of Other − Specify Of A sexual acts Of Cher − Specify Of A sexual acts Of Cher − Specify Of A sexual acts Of Cher − Specify Of A sexual actary or obscene verbal comments of a sexual act Of Cher − Specify Of A sexual actary or obscene verbal comments or obscene verbal contactor, or obscene verbal case verbal contactor such a sexual phone, or through video on the phone, or through video on through video on the phone, or through video on the phone, or through video on through video	46. Staff #1: What was the primary position description of the staff perpetrator involved in the incident? 01
41. How many staff perpetrators were involved in the incident? Number of staff	os ☐ Member of the clergy or chaplaincy os ☐ Administrator, including wardens, superintendents, assistants and others in administrative positions or ☐ Clerical staff including secretaries, clerks, receptionists, and other administrative support os ☐ Other program staff op ☐ Volunteers or interns other staff — Specify Other staff — Specify
42. Staff #1: What was the staff perpetrator's gender? 11 Male 12 Female 43. Staff #1: What was the staff perpetrator's age	 47. Staff #1: At the time of the incident, how long had the staff perpetrator worked at the facility? 01 Less than 6 months 02 6 months to 1 year 03 1 to 5 years 04 6 to 10 years
at the time of the incident? years	 05 ☐ 11 or more years 48. Staff #1: After the incident, was the staff perpetrator – (Mark all that apply.)
44. Staff #1: What was the staff perpetrator's race or ethnicity? (Mark all that apply.) □ White □ □ Black or African American □ □ Hispanic or Latino □ 4 □ American Indian or Alaska Native □ 5 □ Asian □ 6 □ Native Hawaiian or Pacific Islander □ □ Middle Eastern or North African □ Other racial category in your information system – Specify ✓	O1 Sent to training or counseling O2 Reprimanded or disciplined O3 Transferred to another facility or unit O4 Demoted, diminished responsibilities, suspended temporarily, or placed on administrative leave O5 Discharged, terminated, or contract not renewed O6 Staff resigned (prior to completion of investigation) O7 Staff resigned (after investigation was completed) O8 Arrested or referred to law enforcement agency O9 Referred for prosecution or indicted

FORM SSV-IA (04-10-2024) Page 6

10 Convicted, plead guilty, sentenced, or fined

11 Awaiting a legal outcome 12 ☐ Other – Specify 🙀

13 No action taken

	→ If there were no other staff perpetrators involved, please skip to Notes on page 8 (if applicable) or submit form.	53.	Staff #2: What was the primary position description of the staff perpetrator involved in the incident?
49.	Staff #2: What was the staff perpetrator's		o1 Correctional officer, supervisory or security staff, or direct care staff
	gender?		02 Maintenance and other facility support staff, including groundskeepers, janitors, cooks, and drivers
	02 Female		03 Medical or healthcare staff, including counselors, doctors, dentists, psychologists, psychiatrists, social workers, nurses, and medical assistants
50.	Staff #2: What was the staff perpetrator's age at the time of the incident?		04 Education staff, including instructors, teachers, librarians, and education assistants
	years		05 Member of the clergy or chaplaincy
	your		Administrator, including wardens, superintendents, assistants and others in administrative positions
51.	Staff #2: What was the staff perpetrator's race or ethnicity? (Mark all that apply.)		o7 Clerical staff including secretaries, clerks, receptionists, and other administrative support
	01 White		08 U Other program staff
	02 Black or African American		09 Volunteers or interns
	03 Hispanic or Latino		10 ☐ Other staff – Specify
	04 American Indian or Alaska Native		
	05		
	or ☐ Middle Eastern or North African	54.	Staff #2: At the time of the incident, how long
	08 Other racial category in your information system –		had the staff perpetrator worked at the facility?
	Specify Z		o1 ☐ Less than 6 months
			02 6 months to 1 year
			03 1 to 5 years
			04 6 to 10 years
52.	Staff #2: Was the staff perpetrator involved in the incident –		05 11 or more years
	01 Full or part-time paid employee	55.	Staff #2: After the incident, was the staff perpetrator – (Mark all that apply.)
	02 Contract employee or vendor		o1 ☐ Sent to training or counseling
	03 Volunteer or intern		02 Reprimanded or disciplined
	04 ☐ Other – Specify ⊋		o3 Transferred to another facility or unit
			04 Demoted, diminished responsibilities, or suspended temporarily, or placed on administrative leave
			05 Discharged, terminated, or contract not renewed
			Of Staff resigned (prior to completion of investigation)
			o7 Staff resigned (after investigation was completed)
			os Arrested or referred to law enforcement agency os Referred for prosecution or indicted
			10 Convicted, plead guilty, sentenced, or fined
			11 Awaiting a legal outcome
			12 ☐ Other – Specify →
			No action taken
			13 ☐ No action taken

NOTE	s

Page 8 FORM SSV-IA (04-10-2024)

DEFINITIONS

Sexual victimization

Inmate-on-inmate sexual abuse: Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

- 1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- 2) Contact between the mouth and the penis, vulva, or anus;
- 3) Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
- 4) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.

Inmate-on-inmate 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, detainee, or resident directed toward another

Staff-on-inmate sexual abuse: Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the inmate, detainee, or resident:

- 1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- 2) Contact between the mouth and the penis, vulva, or anus;
- 3) Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- 4) Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- 5) Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- 6) Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (1) (5) of this section;
- 7) Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, detainee, or resident, and
- 8) Voyeurism by a staff member, contractor, or volunteer.

Staff-on-inmate sexual harassment: Repeated verbal comments or gestures of a sexual nature to an inmate, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

Sex and gender identity

Sex: A multidimensional construct based on a cluster of anatomical and physiological traits that include external genitalia, secondary sex characteristics, gonads, chromosomes, and hormones.

Gender identity: A person's core internal understanding or sense of who they are regardless of sex assigned 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 differences in sex development (DSD).

Gender nonconforming: A person whose appearance or manner does not conform to traditional societal gender expectations.

Transgender: A person whose gender identity is different from the person's sex assigned at birth.

Disability

Disability: A (1) physical or mental impairment that substantially limits one or more of the major life activities of [an] individual; (2) a record of such an impairment; or (3) being regarded as having such an impairment.

FORM **SSV-IJ** (04-10-2024)



SURVEY OF SEXUAL VICTIMIZATION, 2023

Substantiated Incident Form (Juvenile)

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

			Incident Number out of
1.	Did the incident include repeated behaviors? o1 Yes o2 No	4.	Did the incident take place in an area subject to video monitoring? (Mark all that apply.) 1 Yes 1 Unknown
	If "Yes" → a. On approximately, how many different dates did it occur?		02 No
	→ b. On what date did the most recent incident occur? Month Day Year		What time did the incident occur? (Mark all that apply.) o1 Morning (6 a.m. to 11:59 a.m.) o2 Afternoon (noon to 5:59 p.m.) o3 Evening (6 p.m. to 11:59 p.m.) o4 Overnight (midnight to 5:59 a.m.) o5 Time unknown
2.	In what facility did the incident occur?	6.	Who reported the incident? (Mark all that apply.)
	Name		01 Victim 02 Another youth (non-victim)
			03 Victim's family, friend, or legal guardian
	City State		04 ☐ Correctional officer or front-line staff 05 ☐ Administrative staff
			os Administrative staff of Medical, healthcare, or mental health staff
3.	Where did the incident occur? (Mark all that apply.)		or Instructor, teacher, or counselor
	on In the victim's cell or room (if the victim and perpetrator share a cell or room, count as the victim's cell)		08 Other staff (e.g., kitchen worker, maintenance staff) 09 Chaplain or other religion official
	02 In the perpetrator's cell or room		10 Perpetrator
	03 In a dormitory or other multiple housing unit		11 Perpetrator's family, friend, or legal guardian
	04 \square In a common area (e.g., shower, dayroom, bathroom)		12 Grievance coordinator, grievance process, or ombuds
	05 In a temporary holding cell or intake area within the		13 ☐ Attorney (victim's or perpetrator's) 14 ☐ Confidential informant, anonymous tip, hotline, or
	facility		through monitoring (e.g., camera, telephone, or mail)
	of In a program service area (e.g., commissary, kitchen, storage, laundry, cafeteria, workshop, hallway)		15 ☐ Other – Specify ✓
	07 ☐ In an instructional area (e.g., classroom, school, library, conference room)		
	08 In a recreation area (e.g., yard, courtyard, gymnasium)		
	09 🗌 In a medical area (e.g., infirmary, health clinic)	7.	What was the type of sexual victimization incident?
	10 ☐ In a staff area (e.g., office, break room, counselor's office)		(See definitions on page 9.) o1 ☐ Youth-on-youth sexual abuse
	11 ☐ Offsite or while in transit		→ Complete sections A and B
	12 ☐ Other – Specify ⊋		oz Youth-on-youth sexual harassment
			→ Complete sections A and B
			03 Staff-on-youth sexual abuse
	13 Location unknown		→ Complete sections A and C
	14 Location not applicable (e.g., involved written, phone,		04 Staff-on-youth sexual harassment
	or virtual communication)		→ Complete sections A and C

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 A - VICTIMS OF SEXUAL VICTIMIZATION

8.	How many victims were involved in the incident?	14.	Victim #1: Was the victim identified as having any of the following disabilities at the time of the incident? (Mark all that apply.)
	Number of victims		Disability is defined as (a) A physical or mental impairment
	→ If more than two victims were involved, please complete this form online.		that substantially limits one or more of the major life activities of [an] individual; (b) a record of such an impairment; or (c) being regarded as having such an
9.	Victim #1: What was the victim's sex assigned at birth?		impairment.
	<u>Sex</u> is a multidimensional construct based on a cluster of anatomical and physiological traits that include external genitalia, secondary sex characteristics, gonads, chromosomes, and hormones.		01 A serious and persistent mental illness (e.g., bipolar disorder, major depression, obsessive compulsive disorder, post-traumatic stress disorder, schizophrenia, etc.)
	01 Male		o2 A cognitive impairment or intellectual disability (e.g., ADHD, autism spectrum disorder, dementia, a learning
	02 Female		disability, etc.)
	os 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 differences in sex development.]		03 A physical impairment or disability (e.g., back or spinal injury, blindness or low vision, deafness or hearing loss, diabetes, epilepsy, heart disease, mobility impairments, etc.)
10.	Victim #1: What was the victim's gender identity?	15.	Victim #1: Did the victim sustain any physical injury during the incident?
	Gender identity is a person's core internal understanding or sense of who they are regardless of sex assigned at		01 Yes 02 No 03 Unknown
	birth. o1 □ Male		If "Yes" → a. What injuries occurred? (Mark all that apply.)
	02 Female		o₁ ☐ Bruises, black eye, sprains, cuts,
	□ Transgender [A person whose gender identity is		scratches, swelling, welts
	different from the person's sex assigned at birth.]		03 🗆 Burns
	04 Gender nonconforming [A person whose gender identity does not conform to traditional societal		04 Chipped or knocked out teeth
	gender expectations.]		05 Anal or vaginal tearing
			06 Knocked unconscious
	05 Other – Specify		07 Broken bones
	06 Unknown		08 ∐ Knife or stab wounds 09 ☐ Internal injuries
	Minking #4-14ff-1-1 Alexandra Alexandra		10 ☐ Other – Specify ⊋
11.	Victim #1: What was the victim's age at the time of the incident?		<u></u>
	veare		
	years		→ b. Did the victim receive medical
12.	Victim #1: What was the victim's race or ethnicity? (Mark all that apply.)		treatment for these injuries? o1 ☐ Yes o2 ☐ No o3 ☐ Unknown
	01 White		
	02 Black or African American	16.	Victim #1: After the incident was reported,
	03 Hispanic or Latino		was the victim - (Mark all that apply.)
	04 American Indian or Alaska Native		01 Provided with counseling or mental health treatment
	05 Asian		02 Given a medical examination
	06 Native Hawaiian or Pacific Islander		03 Administered a sexual assault kit
	07 Middle Eastern or North African		04 Given post-exposure prophylaxis (PEP)
	Osther racial category in your information system – Specify √		and/or emergency contraception os ☐ Tested for HIV/AIDS
	,		06 ☐ Tested for other sexually transmitted infections
			07 Offered but declined testing or treatment and/or
13.	Victim #1: What was the victim's citizenship?		counseling
	o₁ ☐ A U.S. citizen		08 ☐ Already released/discharged 09 ☐ None of the above
	02 ☐ Not a U.S. citizen		US IN INCIDE OF THE ADOVE
	03 Of unknown citizenship status		

Page 2 FORM SSV-IJ (04-10-2024)

Section A - VICTIMS OF SEXUAL VICTIMIZATION

17.	Victim #1: After the incident was reported, was the victim – (Mark all that apply.)	22. Victim #2: What was the victim's citizenship?
	o1 ☐ Separated from perpetrator	01 A U.S. citizen
	02 Confined to own cell or room	02 Not a U.S. citizen
	os Placed in or returned to restrictive housing	03 Of unknown citizenship status
	04 Placed in a medical unit, ward, or hospital	23. Victim #2: Was the victim identified as having
	of Delaced in a model and, ward, or mospital of Delaced in camera room, under close surveillance, or increased supervision	any of the following disabilities at the time of the incident? (Mark all that apply.)
	of ☐ Transferred to another housing unit or dorm, or given a single room or cell or ☐ Given a higher custody level or different unit within	on A serious and persistent mental illness (e.g., bipolar disorder, major depression, obsessive compulsive disorder, post-traumatic stress disorder, schizophrenia, etc.)
	the facility 08 Transferred to another facility	o2 A cognitive impairment or intellectual disability (e.g., ADHD, autism spectrum disorder, dementia, a learning
	09 Issued disciplinary report or loss of privileges	disability, etc.)
	10 Other – Specify 7	03 A physical impairment or disability (e.g., back or spinal injury, blindness or low vision, deafness or hearing loss, diabetes, epilepsy, heart disease, mobility impairments, etc.)
	11 None of the above	0.0.1,
		24. Victim #2: Did the victim sustain any physical injury during the incident?
	→ If there were no other victims, please skip to Section B on pages 4-5 if the incident	
	involved a youth perpetrator or Section C on	01 🗌 Yes 02 🗌 No 03 🗍 Unknown
	pages 6-7 if the incident involved a staff perpetrator.	If "Yes" → a. What injuries occurred? (Mark all that apply.)
ι Ω	Victim #2: What was the victim's sex assigned	o₁ ☐ Bruises, black eye, sprains, cuts,
	at birth?	scratches, swelling, welts
	01 ☐ Male 03 ☐ Intersex	02 ∐ Bites 03 □ Burns
		03 ☐ Buffis 04 ☐ Chipped or knocked out teeth
	02 Female	05 ☐ Anal or vaginal tearing
19.	Victim #2: What was the victim's gender	06 Knocked unconscious
	identity?	07 🗌 Broken bones
	01 ☐ Male 05 ☐ Other – Specify ₹	08 🗌 Knife or stab wounds
	02 Female	09 🔲 Internal injuries
	03 Transgender 06 Unknown	10 ☐ Other – Specify 📈
	04 Gender nonconforming	
20	Victim #2: What was the victim's age at the	
20.	time of the incident?	→ b.Did the victim receive medical treatment for these injuries?
	Voore	01 ☐ Yes 02 ☐ No 03 ☐ Unknown
	years	OF Victim 40. After the incident was reported
21.	Victim #2: What was the victim's race or ethnicity? (Mark all that apply.)	25. Victim #2: After the incident was reported, was the victim – (Mark all that apply.)
	o1 White	01 Provided with counseling or mental health treatment
	02 Black or African American	02 ☐ Given a medical examination 03 ☐ Administered a sexual assault kit
	03 Hispanic or Latino	
	04 American Indian or Alaska Native	04 Given post-exposure prophylaxis (PEP) and/or emergency contraception
	05 🗌 Asian	05 Tested for HIV/AIDS
	06 Native Hawaiian or Pacific Islander	06 Tested for other sexually transmitted infections
	07 Middle Eastern or North African	07 Offered but declined testing or treatment and/or
	Other racial category in your information system –	counseling
	Specify Z	08 Already released/discharged
		09 None of the above

26.	Victim #2: After the incident was reported, was the victim – (Mark all that apply.)	28.	What types of pressure, coercion, or force occurred as part of the incident? (Mark all that apply.)
	o1 ☐ Separated from perpetrator o2 ☐ Confined to own cell or room o3 ☐ Placed in or returned to restrictive housing o4 ☐ Placed in a medical unit, ward, or hospital o5 ☐ Placed in camera room, under close surveillance, or increased supervision o6 ☐ Transferred to another housing unit or dorm, or given a single room or cell		o1 ☐ Persuasion or talked into sexual activity o2 ☐ Bribery or blackmail o3 ☐ Gave the victim drugs or alcohol o4 ☐ Offered protection from other youth o5 ☐ Threats made (e.g., threatened harm to victim or victim's family, threatened with a weapon) o6 ☐ Unwanted touching, grabbing, or groping of the victim by
	 O7 ☐ Given a higher custody level or different unit within the facility O8 ☐ Transferred to another facility O9 ☐ Issued disciplinary report or loss of privileges Other - Specify ✓ 		surprise or while the victim was asleep or incapacitated or ☐ Physically held victim down or restrained in some way, including having other youth restrain the victim os ☐ Physical harm or injury op ☐ Other − Specify ✓
	11 None of the above		10 ☐ None of the above
	Section B – YOUTH PERPETRATORS OF SEXUAL VICTIMIZATION	29.	How many youth perpetrators were involved in the incident? Number of youth perpetrators
	→ If the perpetrator was a staff member, go to Section C on pages 6-7.		→ If more than two youth perpetrators were involved, please complete this form online.
27.	What was the nature of the incident? (Mark all that apply.) 1 □ Repeated verbal comments or gestures of a derogatory or offensive sexual nature 2 □ Repeated and unwelcome sexual advances or requests for sexual favors 3 □ Indecent exposure, masturbation, voyeurism, or other actions of a derogatory sexual nature 4 □ Intentional and non-consensual or coerced touching of the genitalia, anus, groin, breast, inner thigh, or the buttocks 5 □ Nonconsensual sexual act that resulted from pressure or coercion (without force) Nonconsensual sexual act that resulted from physical force (or the threat of force) Other – Specify Other – Specify		Perpetrator #1: What was the youth perpetrator's sex assigned at birth? Sex is a multidimensional construct based on a cluster of anatomical and physiological traits that include external genitalia, secondary sex characteristics, gonads, chromosomes, and hormones. 11 Male 12 Female 13 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 differences in sex development.] Perpetrator #1: What was the youth perpetrator's gender identity? Gender identity? Gender identity is a person's core internal understanding or sense of who they are regardless of sex assigned at birth. 11 Male 12 Female 13 Transgender [A person whose gender identity is different from the person's sex assigned at birth.] 14 Gender nonconforming [A person whose gender identity does not conform to traditional societal gender expectations.]

Page 4 FORM SSV-IJ (04-10-2024)

32.	Perpetrator #1: What was the youth perpetrator's age at the time of the incident?	36.	Perpetrator #2: What was the youth perpetrator's gender identity? (See definitions on page 9.)
	years		01 ☐ Male 05 ☐ Other – Specify
33.	Perpetrator #1: What was the youth		02 Female
	perpetrator's race or ethnicity?		03 Transgender 06 Unknown
	(Mark all that apply.)		04 ☐ Gender nonconforming
	01 White		or in dollars notice many
	02 Black or African American	37.	Perpetrator #2: What was the youth
	03 ☐ Hispanic or Latino 04 ☐ American Indian or Alaska Native		perpetrator's age at the time of the incident?
	05 ☐ Asian		
	06 Native Hawaiian or Pacific Islander		years
	07 Middle Eastern or North African	38.	Perpetrator #2: What was the youth
	os ☐ Other racial category in your information system – Specify ∠		perpetrator's race or ethnicity? (Mark all that apply.)
	epoon, g		01 ☐ White
			02 Black or African American
			03 Hispanic or Latino
34.	Perpetrator #1: After the incident, was the		04 American Indian or Alaska Native
	youth perpetrator – (Mark all that apply.)		05 Asian
	01 Confined to own cell or room		06 ☐ Native Hawaiian or Pacific Islander 07 ☐ Middle Eastern or North African
	02 Placed in or returned to restrictive housing		08 ☐ Other racial category in your information system –
	O3 Placed in higher custody level, restricted unit or program, within the same facility		Specify
	04 Transferred to other unit/cell or separated from victim		
	os ☐ Transferred to another facility os ☐ Sent to counseling or mental health treatment		
	or Given medical treatment or testing	39	Perpetrator #2: After the incident, was the youth
	(e.g., post-exposure prophylaxis (PEP), HIV/AIDS)	03.	perpetrator - (Mark all that apply.)
	08 Loss of "good/gain" time, increase in "bad" time or		01 Confined to own cell or room
	delayed release		02 Placed in or returned to restrictive housing
	□ Given extra work□ Loss of privileges, disciplinary report or conduct		O3 Placed in higher custody level, restricted unit or program, within the same facility
	violation, or other reprimand		04 Transferred to other unit/cell or separated from victim
	11 Arrested or referred to law enforcement agency		Transferred to another facility
	12 Referred for prosecution or indicted 13 Convicted, plead guilty, given new sentence, or fined		of Sent to counseling or mental health treatment
	14 Awaiting a legal outcome		or ☐ Given medical treatment or testing (e.g., post-exposure prophylaxis (PEP), HIV/AIDS)
	15 ☐ Other – Specify ✓		08 ☐ Loss of "good/gain" time, increase in "bad" time or delayed release
			09 ☐ Given extra work
			10 ☐ Loss of privileges, disciplinary report or conduct violation, or other reprimand
	→ If there were no other perpetrators, please		11 Arrested or referred to law enforcement agency
	skip to Notes on page 8 (if applicable) or submit form.		12 Referred for prosecution or indicted
			13 Convicted, plead guilty, given new sentence, or fined
35.	Perpetrator #2: What was the youth		14 Awaiting a legal outcome
	perpetrator's sex assigned at birth?		15 ☐ Other – Specify ⊋
	01 Male 03 Intersex		
	02 Female		

Section C – STAFF PERPETRATORS OF SEXUAL VICTIMIZATION	45. Staff #1: Was the staff perpetrator involved in the incident –
 → If the perpetrator was a youth, go to Section B on pages 4-5. 40. What was the nature of the incident? (Mark all that apply.) 	 o1 ☐ Full or part-time paid employee o2 ☐ Contract employee or vendor o3 ☐ Volunteer or intern o4 ☐ Other – Specify
 Repeated suggestive, derogatory, or obscene verbal comments or gestures of a sexual nature Wrote letters, showed pictures, talked on the phone, or through video conferencing Exhibited grooming or manipulative behaviors such as providing gifts, special privileges, or favors to youth Indecent exposure, invasion of privacy, or voyeurism Any attempt, threat, or request related to abusive sexual contact or sexual acts Any touching or kissing for sexual gratification Pressure or abuse of power resulting in a sexual act Physical force resulting in a sexual act 	46. Staff #1: What was the primary position description of the staff perpetrator involved in the incident? 01 Correctional officer, supervisory or security staff, or direct care staff 02 Maintenance and other facility support staff, including groundskeepers, janitors, cooks, and drivers 03 Medical or healthcare staff, including counselors, doctors, dentists, psychologists, psychiatrists, social workers, nurses, and medical assistants 04 Education staff, including instructors, teachers, librarians, and education assistants
41. How many staff perpetrators were involved in the incident? Number of staff	 Member of the clergy or chaplaincy Administrator, including wardens, superintendents, assistants and others in administrative positions Clerical staff including secretaries, clerks, receptionists, and other administrative support Other program staff Volunteers or interns Other staff – Specify
42. Staff #1: What was the staff perpetrator's gender? o1 Male o2 Female	47. Staff #1: At the time of the incident, how long had the staff perpetrator worked at the facility? o1 Less than 6 months o2 6 months to 1 year
43. Staff #1: What was the staff perpetrator's age at the time of the incident? years	03 1 to 5 years 04 6 to 10 years 05 11 or more years 48. Staff #1: After the incident, was the staff
44. Staff #1: What was the staff perpetrator's race or ethnicity? (Mark all that apply.) 01 White 02 Black or African American 03 Hispanic or Latino 04 American Indian or Alaska Native 05 Asian 06 Native Hawaiian or Pacific Islander 07 Middle Eastern or North African 08 Other racial category in your information system – Specify	perpetrator – (Mark all that apply.) 01 ☐ Sent to training or counseling 02 ☐ Reprimanded or disciplined 03 ☐ Transferred to another facility or unit 04 ☐ Demoted, diminished responsibilities, suspended temporarily, or placed on administrative leave 05 ☐ Discharged, terminated, or contract not renewed 06 ☐ Staff resigned (prior to completion of investigation) 07 ☐ Staff resigned (after investigation was completed) 08 ☐ Arrested or referred to law enforcement agency 09 ☐ Referred for prosecution or indicted 10 ☐ Convicted, plead guilty, sentenced, or fined 11 ☐ Awaiting a legal outcome 12 ☐ Other – Specify □ Other – Specify □ Converted to the sentence of the sente

Page 6 FORM SSV-IJ (04-10-2024)

13 No action taken

/	→ If there were no other staff perpetrators involved, please skip to Notes on page 8 (if applicable) or submit form.	53. Staff #2: What was the primary position description of the staff perpetrator involved in the incident?
49.	Staff #2: What was the staff perpetrator's gender?	 ○1 ☐ Correctional officer, supervisory or security staff, or direct care staff ○2 ☐ Maintenance and other facility support staff,
	01 Male	including groundskeepers, janitors, cooks, and drivers
	02 Female	 Medical or healthcare staff, including counselors, doctors, dentists, psychologists, psychiatrists, social workers, nurses, and medical assistants
50.	Staff #2: What was the staff perpetrator's age at the time of the incident?	04 Education staff, including instructors, teachers, librarians, and education assistants
	years	 05 ☐ Member of the clergy or chaplaincy 06 ☐ Administrator, including wardens, superintendents,
51.	Staff #2: What was the race/ethnic origin of the	assistants and others in administrative positions or Clerical staff including secretaries, clerks,
	staff perpetrator involved in the incident? (Mark all that apply.)	receptionists, and other administrative support OB Other program staff
	01 White	09 Volunteers or interns
	02 🗌 Black or African American	10 \square Other staff – Specify \not
	03 Hispanic or Latino 04 American Indian or Alaska Native	
	05 Asian	
	06 Native Hawaiian or Pacific Islander	54. Staff #2: At the time of the incident, how long had the staff perpetrator worked at the
	07 Middle Eastern or North African	facility?
	08 Other racial category in your information system –	01 Less than 6 months
	Specify 📈	$_{02}$ \square 6 months to 1 year
		оз \square 1 to 5 years
		04 🗌 6 to 10 years
		05 🗌 11 or more years
52.	Staff #2: Was the staff perpetrator involved in the incident –	
	01 ☐ Full or part-time paid employee	55. Staff #2: After the incident, was the staff perpetrator – (Mark all that apply.)
	02 Contract employee or vendor	01 Sent to training or counseling
	03 Volunteer or intern	02 Reprimanded or disciplined
	04 ☐ Other – <i>Specify</i> ✓	03 Transferred to another facility or unit
		04 Demoted, diminished responsibilities, or suspended temporarily, or placed on administrative leave
		₀₅ Discharged, terminated, or contract not renewed
		06 Staff resigned (prior to completion of investigation)
		07 Staff resigned (after investigation was completed)
		08 Arrested or referred to law enforcement agency
		09 Referred for prosecution or indicted
		10 Convicted, plead guilty, sentenced, or fined
		11 \square Awaiting a legal outcome
		12 ☐ Other – Specify 📈

NOTES

Page 8 FORM SSV-IJ (04-10-2024)

Definitions

Sexual victimization

Youth-on-youth sexual abuse: Sexual abuse of a youth, detainee, or resident by another youth, detainee, or resident includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

- 1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- 2) Contact between the mouth and the penis, vulva, or anus;
- 3) Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
- 4) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.

Youth-on-youth 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, detainee, or resident directed toward another.

Staff-on-youth sexual abuse: Sexual abuse of a youth, detainee, or resident by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the youth, detainee, or resident:

- 1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- 2) Contact between the mouth and the penis, vulva, or anus;
- 3) Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- 4) Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- 5) Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- 6) Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (1) (5) of this section;
- 7) Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of a youth, detainee, or resident, and
- 8) Voyeurism by a staff member, contractor, or volunteer.

Staff-on-youth sexual harassment: Repeated verbal comments or gestures of a sexual nature to a youth, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

Sex and gender identity

Sex: A multidimensional construct based on a cluster of anatomical and physiological traits that include external genitalia, secondary sex characteristics, gonads, chromosomes, and hormones.

Gender identity: A person's core internal understanding or sense of who they are regardless of sex assigned 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 differences in sex development (DSD).

Gender nonconforming: A person whose appearance or manner does not conform to traditional societal gender expectations.

Transgender: A person whose gender identity is different from the person's sex assigned at birth.

Disability

Disability: A (1) physical or mental impairment that substantially limits one or more of the major life activities of [an] individual; (2) a record of such an impairment; or (3) being regarded as having such an impairment.