

FORM **SSV-6**
(03-17-2025)



5

SURVEY OF SEXUAL VICTIMIZATION: 2024
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

DATA SUPPLIED BY

Name Kenny Edwards		Title Administrator / PREA Manager			
OFFICIAL ADDRESS	Number and street or P.O. Box/Route Number 201 S. Pine St		City Medical Lake	State WA	ZIP Code 99022
	TELEPHONE	Area code 509	Number 565-8113	FAX NUMBER	Area Code 509
E-MAIL ADDRESS		Number 565-8627			
kedwards@cccscorp.com					

(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, 2024, and December 31, 2024.

- 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 victimization:

- 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 December 12, 2025.**
- **You may complete these forms online at: <https://respond.census.gov/ssv>**
- **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, 999 North Capitol Street NE, Washington, DC 20531. Do not send your completed form to this address.

DEFINITIONS

JUVENILES and YOUTHFUL OFFENDERS

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

FACILITIES

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

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

OR

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

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

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

OR

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

Section I - GENERAL INFORMATION

1. Is this facility owned by a

- 01 Private agency
- 02 Native American Tribal Government
- 03 State
- 04 County
- 05 Local or municipal government
- 06 Other - Specify

2. Is this facility operated by a

- 01 Private agency
- 02 Native American Tribal Government
- 03 State
- 04 County
- 05 Local or municipal government
- 06 Other - Specify

3. On December 31, 2024⁵, how many persons held in this facility were —

- a. Males 6
- b. Females 5
- c. TOTAL (Sum of Items 3a and 3b) 11

- Count persons held in the facility regardless of age or reason for placement. Include persons who were temporarily away but had assigned beds on December 31, 2024⁵.

4. On December 31, 2024⁵, how many persons held in this facility were —

- a. Age 17 or younger 11
- b. Age 18 to 20 0
- c. Age 21 or older 0
- d. TOTAL (Sum of Items 4a through 4c should equal Item 3c) 11

- Count all persons held in the facility regardless of age or reason for placement. Include persons who were temporarily away but had assigned beds on December 31, 2024⁵.

5. Between January 1, 2024⁵, and December 31, 2024, how many persons were admitted to or discharged from this facility?

- a. TOTAL number admitted ... 253
- b. TOTAL number discharged ... 242

- Include all persons admitted to this facility by a formal legal document, by the authority of the courts, or by some other official agency.
- Include all persons discharged from this facility after a period of confinement including sentence completion, pretrial releases, transfers to adult jurisdictions or to other States, and deaths.
- Exclude admissions and discharges resulting from returns from escape, administrative transfers to other juvenile facilities, or temporary release including work/school release, medical appointments, other treatment facilities, or court appearances.

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

02 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, 2024⁵ and December 31, 2024⁵, how many allegations of youth-on-youth SEXUAL ABUSE were reported?

Number reported 0

- 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 0

- The event was investigated and determined to have occurred, based on a preponderance of the evidence (28 C.F.R. §115.72).

b. Unsubstantiated 0

- The investigation concluded that evidence was insufficient to determine whether or not the event occurred.

c. Unfounded 0

- The investigation determined that the event did NOT occur.

d. Investigation ongoing 0

- 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) 0

- The total should equal the number reported in Item 7.

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.

10. Between January 1, 2024, and December 31, 2024, how many allegations of youth-on-youth SEXUAL HARASSMENT were reported?

Number reported 0

- 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.

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 0

b. Unsubstantiated 0

c. Unfounded 0

d. Investigation ongoing 0

e. TOTAL (Sum of Items 11a through 11d) 0

- 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 sex, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

12. Does your facility 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 15.*

13. Between January 1, 2024, and December 31, 2024, how many allegations of STAFF SEXUAL ABUSE were reported?

Number reported 5

- 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.

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 0
- b. Unsubstantiated 1
- c. Unfounded 0
- d. Investigation ongoing 0
- e. TOTAL (Sum of Items 14a through 14d) 0

- The total should equal the number reported in Item 13.

15. Does your facility record allegations of STAFF SEXUAL HARASSMENT? (See definitions on page 5.)

01 Yes → **Can these allegations be counted separately from allegations of STAFF SEXUAL ABUSE?**

01 Yes

02 No → Skip to Item 18.

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 18.

16. Between January 1, 2024, and December 31, 2024, how many allegations of STAFF SEXUAL HARASSMENT were reported?

Number reported 1

- 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 0

b. Unsubstantiated 1

c. Unfounded 0

d. Investigation ongoing 0

e. TOTAL (Sum of Items 17a through 17d) 1

- The total should equal the number reported in Item 16.

Section IV – TOTAL SUBSTANTIATED INCIDENTS OF SEXUAL VICTIMIZATION

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

Total substantiated incidents 0

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

NOTES