FORM SSV-6 (8-27-2019)



SURVEY OF SEXUAL VICTIMIZATION, 2018 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

Name Mark Boyer

OFFICIAL ADDRESS

Number and street or P.O. Box/Route Number
P.O. Box 670

TELEPHONE Area code Number
509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

Number 509

(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, 2019, and December 31, 2019.

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

Reporting instructions:

- Please complete the entire SSV-6 Form.
- If the answer to a question is "not available" or "unknown," write "DK" (do not know) in the space provided.
- If the answer to a question is "not applicable," write "NA" in the space provided.
- Section I: when exact numeric answers are not available, provide estimates and mark (X) the box beside each figure.
- Sections II, III, and V; if the answer to a questions "none" or "zero," write "0" or mark the box (XI) provided.

Substantiated incidents of sexual violence:

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

Returning forms:

- If you need assistance, please call 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 29, 2019.
- You may complete these forms online (see enclosed instructions). Or if you prefer, you may return these forms by mail or fax.
- MAIL TO: U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- FAX (TOLL FREE): 1-888-262-3974

Burden Statement

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

***************************************		-
<u>DEFINITIONS</u>	3. On December 31, 2018, how many persons held in this facility were—	
JUVENILES and YOUTHFUL OFFENDERS	Philipin di Vill Sillin ain air aice i bice	ď.:
 Any person under the custody or care of a juvenile in residential facility owned or operated by a local government or private agency. 	a. Males 13	
FACILITIES	b. Females 7	
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:	c. TOTAL(Sum of Items 3a and 3b) . 20	
Any offense that is illegal for both adults and juveniles; OR	Count persons held in the facility regardless of age reason for placement. Include persons who were temporarily away but had assigned beds on December 31, 2019	or
 An offense that is ILLEGAL in your State for juveniles, but not for adults (running away, truancy, incorrigibility, curfew violations, and liquor violations). 	4. On December 31, 201 9 , how many persons held in this facility were —	
EXCLUDE all State-operated facilities and locally or privately-operated facilities used ONLY to house juveniles for: Non-criminal behavior (neglect, abuse, abandonment, or	a. Age 17 or younger	
dependency);	b. Age 18 to 20	
Being Persons in Need of Services (PINS) or Children in Need of Services (CHINS) who have assigned beds for reasons other than offenses.	c. Age 21 or older	
Section I GENERAL INFORMATION	d. TOTAL (Sum of Items 4a through 20	
■ Is this facility owned by a OI Private agency OP Native American Tribal Government OB State	 Count all persons held in the facility regardless of ag or reason for placement, include persons who were temporarily away but had assigned beds on December 31, 2018. 	je
04 X County 05 Local or municipal government 06 X Other Specify ∠	5. Between January 1, 2019, and December 31, 2019, how many persons were admitted to or discharged from this facility?	
Consortium of Counties	a. TOTAL number admitted 623	
Is this facility operated by a	b. TOTAL number discharged . 617	
02 Native American Tribal Government		
03 State 04 County	 Include all persons admitted to this facility by a formating legal document, by the authority of the courts, or by some other official agency. 	lr.
□ Local or municipal government □ Other Specify	 Include all persons discharged from this facility after 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	youth-on-youth NONCONSENSUAL SEXUAL ACTS?		
The survey utilizes the definition of "sexual abuse" as provided by 28 C.F.R. §115.6 in the National Standards to Prevent, Detect, and Respond to Prison Rape (under the Prison Rape Elimination Act of 2003). For purposes of SSV, sexual abuse is disaggregated into three categories of youth-on-youth sexual victimization. These categories are:	01 🄀 Yes → a. Do you record all reported occurrences, or only substantiated ones? 01 🗶 All 02 □ Substantiated only		
NONCONSENSUAL SEXUAL ACTS Sexual contact of any person without his or her consent, or of a person who is unable to consent or refuse; AND	b. Do you record attempted NONCONSENSUAL SEXUAL ACTS or only completed ones? o1 X Both attempted and completed o2 Completed only		
Contact between the penis and the vulva or the penis and the anus, including penetration, however slight; OR	02 ☐ No → Please provide the definition used by your facility for youth-on-youth NONCONSENSUAL SEXUAL ACTS in the space below. Use that definition to complete Items 7 and 8.		
 Contact between the mouth and the penis, vulva, or anus; 			
• Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument.			
ABUSIVE SEXUAL CONTACT	7. Between January 1, 2018 and December 31, 2018, how many allegations of youth-on-youth		
Sexual contact of any person without his or her consent, or of a person who is unable to consent or refuse;	NONCONSENSUAL SEXUAL ACTS were reported?		
AND	Number reported 🛇 🖾 None		
 Intentional touching, either directly or through the clothing, of the genitalla, anus, groin, breast, inner thigh, or buttocks of any person, 	If an allegation involved multiple victimizations, count only once. Evaluate any allegations that		
EXCLUDE incidents in which the contact was incidental to a physical altercation,	 Exclude any allegations that were reported as consensual. Of the allegations reported in Item 7, how many were — (Please contact the agency or office responsible) 		
SEXUAL HARASSMENT	for investigating allegations of sexual victimization in order to fully complete this form.)		
Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one youth directed toward another.	a. Substantiated		
	The event was investigated and determined to have occurred, based on a preponderance of the evidence (28 C.F.R. §115.72).		
	b. Unsubstantiated None The investigation concluded that evidence was insufficient		
	to determine whether or not the event occurred. C. Unfounded The investigation determined that the event did NOT occur.		
	d. Investigation ongoing . NA None • 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.

None.

J. Does your facility record allegy youth-on-youth ABUSIVE SEX (See definitions on page 3.)		12. Does your facility record youth-on-youth SEXUAL (See definitions on page 3.)	allegations of HARASSMENT?
01 Yes → Can these be counted separately from allegations of NONCONSENSUAL SEXUAL ACTS? 01 Yes 02 No → Skip to Item 12.		01 🕅 Yes → Do you recor allegations o ones? 01 📆 All 02 🗍 Substantia	r only substantiated
02 ☐ No → Please provide an exp below and then skip to	lanation in the space o Item 12.	02 ☐ No → Please provide a below and then	n explanation in the spac skip to Section III.
Between January 1, 2019, and December 31, 2019 how man youth-on-youth ABUSIVE SEX were reported?	d y allegations of UAL CONTACT	13. Between January 1, 201 December 31, 201 how youth-on-youth SEXUAL reported?	many allegations of
Number reported	□ None	Number reported	None
If an allegation involved multiple only once,	victimizations, count	If an allegation involved management of the perpetrators, count only on the perpetrators.	
 Exclude any allegations that were 	reported as consensual		
Of the allegations reported in many were (Please contact the responsible for investigating allegat victimization in order to fully complete. 3. Substantiated	agency or office	14. Of the allegations report many were (Please contact responsible for investigating a victimization in order to fully contact a. Substantiated	of the agency or office allegations of sexual omplete this form.)
. Unsubstantiated	□ None	b. Unsubstantiated	
			8
. Unfounded	L None	c. Unfounded	, X None
. Investigation ongoing	None	d. Investigation ongoing	X None
. TOTAL (Sum of Items 11a through 11d)	None	e. TOTAL (Sum of Items 14a through 14d)	None
The total should equal the number	er reported in Item 10.	The total should equal the	number reported in Item 1

	the state of market was been proportioned by the base of the second	The same and the s	
Property of the state of the st	MARSON BASISTA	27 - 1 - 1 7 4 V E 3 3233	2 . 1 2

DEFINITIONS

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

STAFF SEXUAL MISCONDUCT

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

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

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

OR

· Completed, attempted, threatened, or requested sexual acts;

OR :

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

STAFF SEXUAL HARASSMENT

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

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

OR

Repeated profane or obscene language or gestures.

15. Does your facility record SEXUAL MISCONDUCT? 01 Yes → Do you record occurrences, ones? 01 All 02 Substantiat	all reporte or only sub	ed.
02 □ No → Please provide at below and then s	n explanation kip to Item 1	in the space 8.
6. Between January 1, 2015 December 31, 2016 how i STAFF SEXUAL MISCOND	and	
STAFF SEXUAL MISCOND	UCT were	ations of reported?
STAFF SEXUAL MISCOND Number reported	UCT were	ations of reported?
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	☐ None
Number reported If an allegation involved multi	ple victimizat d in Item 1 the agency	☐ None ions, count on 6, how
Number reported If an allegation involved multionce. 7. Of the allegations reportemany were. (Please contact	ple victimizat d in Item 1 the agency	☐ None ions, count or 6, how
Number reported If an allegation involved multionce. 7. Of the allegations reportemany were (Please contact responsible for investigating allegations in order to fully contact responsible for investigating allegations.	ple victimizat d in Item 1 the agency	□ None lons, count or 6, how or office exual orm.)
Number reported If an allegation involved multionce. 7. Of the allegations reportemany were (Please contact responsible for investigating all victimization in order to fully contact a. Substantiated	ple victimizat d in Item 1 the agency	□ None ions, count on 6, how or office exual orm.) □ X None

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

The total should equal the number reported in Item 16.

☐ None

18	Does your facility record all SEXUAL HARASSMENT? (S	egation	s of STAFF tions on page 5.)	Section IV TOTAL SUBSTANTIATED INCIDENTS OF SEXUAL VICTIMIZATION
	01 X Yes → Can these alleg separately from STAFF SEXUAL	allegat	ions of	21. What is the total number of substantiated incidents reported in Items 8a, 11a, 14a, 17a, and 20a.
	01 X Yes 02 ∐ No → Skip to	Item 21		Total substantiated 1
	c2 □ No → Please provide an e below and then skip	to Item	in the space 21	incidents
			:	NOTES
	An espaint of the Sant			Vonessynchesterapy
19	. Between January 1, 2018 a December 31, 2018 how ma STAFF SEXUAL HARASSME	nd any alle NT wer	gations of e reported?	
	Number reported	2	_ □ None	Assistantes
	 If an allegation involved multiple only once. 	e victims		ONNERS REPORT OF THE PROPERTY
20	. Of the allegations reported many were (Please contact the responsible for investigating alleg victimization in order to fully comp	e agency ations of	y or office sexual	NET THE PROPERTY OF THE PROPER
	a. Substantiated	<u> D</u>	Щ None	
	b. Unsubstantiated	8	🔀 None	
	c. Unfounded	2.	_ □ None —	OR SERVICE AND THE PROPERTY OF
	d. Investigation ongoing	Ø	[X] None	THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPER
	e. TOTAL (Sum of Items 20a through 20d)	2	_ ፟X None	
	 The total should equal the n 	umber re	ported in Item 19.	THE PROPERTY OF THE PROPERTY O
				The state of the s