				OMB N	o. 1121-0292	2: Approval Expires 6/30/2017
FORM SSV-6 (4-21-2016)	UNITED TO AND A STATES	SURVEY OF SEXUAL V Locally or Privately-Oper Summar	ated Juvenile Fa		BUF AN	DEPARTMENT OF JUSTICE REAU OF JUSTICE STATISTICS ND ACTING AS COLLECTION AGENT U.S. DEPT. OF COMMERCE conomics and Statistics Administration U.S. CENSUS BUREAU
DATA SUPPLIED BY						
Name			Title			
OFFICIAL ADDRESS	Number and s	treet or P.O. Box/Route Number	City		State	ZIP Code
TELEPHONE	Area code	Number	FAX NUMBEF		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, 2015, and December 31, 2015.

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

Reporting instructions:

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

Substantiated incidents of sexual violence:

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

Returning forms:

- If you need assistance, please call Greta Clark at the U.S. Census Bureau toll–free at 1–888–369–3613, option 2, or e-mail govs.ssv@census.gov
- Please return your completed summary and substantiated incident forms by September 15, 2016.
- 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.

3. On December 31, 2015, how many persons held in this facility were — DEFINITIONS **JUVENILES and YOUTHFUL OFFENDERS** • Any person under the custody or care of a juvenile a. Males residential facility owned or operated by a local government or private agency. **FACILITIES** b. Females 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 c. TOTAL(Sum of Items 3a and 3b) . youthful offenders charged with or court-adjudicated for: • Any offense that is illegal for both adults and juveniles; • Count persons held in the facility regardless of age or reason for placement. Include persons who were temporarily away but had assigned beds on **OR** December 31, 2015. An offense that is ILLEGAL in your State for juveniles, 4. On December 31, 2015, how many persons but not for adults (running away, truancy, incorrigibility, curfew violations, and liquor violations). held in this facility were — EXCLUDE all State-operated facilities and locally or privately-operated facilities used ONLY to house juveniles for: a. Age 17 or younger Non-criminal behavior (neglect, abuse, abandonment, or dependency); OR 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 4c should equal Item 3c) 1. Is this facility owned by a -· Count all persons held in the facility regardless of age 01 Private agency or reason for placement. Include persons who were temporarily away but had assigned beds on December 31, 2015. 02 Native American Tribal Government 03 State 5. Between January 1, 2015, and December 31, 2015, how many persons were admitted to or discharged from this facility? 04 County 05 Local or municipal government 06 Other – Specify _₹ a. TOTAL number admitted 2. Is this facility operated by a b. TOTAL number discharged 01 Private agency 02 Native American Tribal Government Include all persons admitted to this facility by a formal legal document, by the authority of the courts, or by 03 State some other official agency. 04 County • Include all persons discharged from this facility after a 05 Local or municipal government period of confinement including sentence completion, 06 Other – Specify $\overline{\nabla}$ 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

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

NONCONSENSUAL SEXUAL ACTS

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

AND

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

OR

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

OR

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

ABUSIVE SEXUAL CONTACT

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

AND

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

SEXUAL HARASSMENT

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

6. Does your facility record allegations of youth-on-youth NONCONSENSUAL SE ACTS?	of XUAL
01 ☐ Yes → a. Do you record all report occurrences, or only substantiated ones?	ed
01 🗖 All	
02 Substantiated only	
b. Do you record attempte NONCONSENSUAL SEX or only completed ones	UAL ACTS
01 Both attempted and co 02 Completed only	mpleted
02 No → Please provide the definition use facility for youth-on-youth NONC SEXUAL ACTS in the space bel definition to complete Items 7 an	ONSENSUAL ow. Use that
7. Between January 1, 2015 and Decem how many allegations of youth-on-you NONCONSENSUAL SEXUAL ACTS we	ith
Number reported	None
 If an allegation involved multiple victimization. 	ons, count only
Exclude any allegations that were reported	as consensual.
8. Of the allegations reported in Item 7, were — (Please contact the agency or office for investigating allegations of sexual victimiz	
to fully complete this form.)	e responsible
a. Substantiated	e responsible
to fully complete this form.)	e responsible ation in order
 to fully complete this form.) a. Substantiated	e responsible ation in order
 to fully complete this form.) a. Substantiated	 responsible ation in order None ined to have the evidence None evidence
 to fully complete this form.) a. Substantiated	 responsible ation in order None ined to have the evidence None evidence
 to fully complete this form.) a. Substantiated	 responsible ation in order None ined to have the evidence None ewas insufficient curred. 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.

 9. Does your facility record allegations of youth-on-youth ABUSIVE SEXUAL CONTACT? (See definitions on page 3.) 01 Yes → Can these be counted separately from allegations of NONCONSENSUAL SEXUAL ACTS? 01 Yes 02 No → Skip to Item 12. 02 No → Please provide an explanation in the space below and then skip to Item 12. 	 12. 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 in the space below and then skip to Section III.
10. Between January 1, 2015, and December 31, 2015, how many allegations of youth-on-youth ABUSIVE SEXUAL CONTACT were reported?	13. Between January 1, 2015, and December 31, 2015, how many allegations of youth-on-youth SEXUAL HARASSMENT were reported?
Number reported	Number reported
	-
 If an allegation involved multiple victimizations, count only once. 	 If an allegation involved multiple victims or youth perpetrators, count only once.
 Exclude any allegations that were reported as consensual. 	Exclude any allegations that were reported as consensual.
11. Of the allegations reported in Item 10, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)	14. Of the allegations reported in Item 13, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)
a. Substantiated	a. Substantiated
b. Unsubstantiated	b. Unsubstantiated
c. Unfounded	c. Unfounded
d. Investigation ongoing None	d. Investigation ongoing None
e. TOTAL (Sum of Items 11a through 11d)	e. TOTAL (Sum of Items 14a through 14d)
• The total should equal the number reported in Item 10.	• The total should equal the number reported in Item 13.

Section III – STAFF-ON-YOUTH SEXUAL ABUSE

DEFINITIONS

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

STAFF SEXUAL MISCONDUCT

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

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

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

OR

Completed, attempted, threatened, or requested sexual acts;

OR

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

STAFF SEXUAL HARASSMENT

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

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

OR

• Repeated profane or obscene language or gestures.

15.	. Does your facility record allegations of STAFF SEXUAL MISCONDUCT?			
	01 □ Yes →	Do you record al occurrences, or ones?		
		01 All 02 Substantiated	only	
	02 □ No →	Please provide an ex below and then skip	planation in to Item 18.	the space
16.	Between .l:	anuary 1, 2015, ai	bd	
	December	31, 2015, how ma UAL MISCONDUC	ny allegat	ions of ported?
	Number rep	oorted	[None
	 If an allegation once. 	tion involved multiple	victimization	ns, count only
17.	many were responsible for	ations reported i — (Please contact ti pr investigating allega n order to fully comp	he agency o ations of sex	r office ual
	a. Substa	ntiated		. 🗆 None
	b. Unsubs	stantiated		. 🗌 None
	c. Unfour	ded		. 🗌 None
	d. Investi	gation ongoing		. 🗌 None
	e. TOTAL 17a thro	(Sum of Items ugh 17d)		None
	The to	otal should equal the r	number repo	rted in Item 16.

18.	Does your facility record allegations of STAFF SEXUAL HARASSMENT ? (See definitions on page 5.)	Section IV – TOTAL SUBSTANTIATED INCIDENTS OF SEXUAL VICTIMIZATION
	 O1 Yes → Can these allegations be counted separately from allegations of STAFF SEXUAL MISCONDUCT? O1 Yes O2 No → Skip to Item 21 O2 No → Please provide an explanation in the space below and then skip to Item 21. 	 21. What is the total number of substantiated incidents reported in Items 8a, 11a, 14a, 17a, and 20a. Total substantiated incidents Incident Form (Incidents
19.	Between January 1, 2015, and December 31, 2015, how many allegations of STAFF SEXUAL HARASSMENT were reported? Number reported	
20.	 If an allegation involved multiple victims or staff, count only once. Of the allegations reported in Item 19, how many were — (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.) 	
	a. Substantiated None b. Unsubstantiated None	
	c. Unfounded None	
	d. Investigation ongoing None	
	 e. TOTAL (Sum of Items 20a through 20d) The total should equal the number reported in Item 19. 	