

FORM **SSV-6**  
(4-17-2020)**SURVEY OF SEXUAL VICTIMIZATION, 2019**  
**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 Williamson County Juvenile Detention		Title Detention Supervisor		
<b>OFFICIAL ADDRESS</b>	Number and street or P.O. Box/Route Number 408 Century Court		City Franklin	State TN
	ZIP Code 37064			
<b>TELEPHONE</b>	Area code 615	Number 790-5817	<b>FAX NUMBER</b>	Area Code 37064
	Number			
<b>E-MAIL ADDRESS</b>	Drason.Beasley@WilliamsonCounty-tn.gov			

(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 (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 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 30, 2020.**
- **You may complete these forms online (see enclosed instructions). Or if you prefer, you may return these forms by mail or fax.**
- **MAIL TO:** U.S. Census Bureau, P.O. Box 5000, Jeffersonville, IN 47199-5000
- **FAX (TOLL FREE): 1-888-262-3974**

**Burden Statement**

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

**DEFINITIONS**

**JUVENILES and YOUTHFUL OFFENDERS**

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

**FACILITIES**

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

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

**OR**

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

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

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

**OR**

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

**Section I – GENERAL INFORMATION**

**1. Is this facility owned by a**

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

\_\_\_\_\_

**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* ↴

Type text here

\_\_\_\_\_

**3. On December 31, 2019, how many persons held in this facility were**

a. Males ..... 5

b. Females ..... 2

7

**4. On December 31, 2019, how many persons held in this facility were**

a. Age 17 or younger ..... 6

b. Age 18 to 20 ..... 1

c. Age 21 or older ..... 0

d. TOTAL (Sum of Items 4a through 4c should equal Item 3c) ..... 7

- 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, 2019.

**5. Between January 1, 2019, and December 31, 2019, how many persons were admitted to or discharged from this facility?**

a. TOTAL number admitted ..... 342

b. TOTAL number discharged ..... 340

- 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**

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). Attempted nonconsensual sexual acts are included if recorded by the facility. 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 SEXUAL ACTS?**

01  Yes → **a. Do you record all reported occurrences, or only substantiated ones?**

01  All

02  Substantiated only

**b. Do you record attempted NONCONSENSUAL SEXUAL ACTS or only completed ones?**

01  Both attempted and completed

02  Completed only

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.*

**7. Between January 1, 2019 and December 31, 2019, how many allegations of youth-on-youth NONCONSENSUAL SEXUAL ACTS were reported?**

Number reported . . . . . 0  None

- If an allegation involved multiple victimizations, 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  None

- 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** . . . . .  None

- The investigation determined that the event did NOT occur.

**d. Investigation ongoing** . . . . .  None

- Evidence is still being gathered, processed or evaluated, and a final determination has not yet been made.

**e. TOTAL** (Sum of Items 8a through 8d) . . . . .  None

- 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.

**10. Between January 1, 2019, and December 31, 2019, how many allegations of youth-on-youth ABUSIVE SEXUAL CONTACT were reported?**

**Number reported** .....   None

- If an allegation involved multiple victimizations, 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** .....   None

**b. Unsubstantiated** .....   None

**c. Unfounded** .....   None

**d. Investigation ongoing** ..   None

**e. TOTAL** (Sum of Items 11a through 11d) .....   None

- The total should equal the number reported in Item 10.

**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.

**13. Between January 1, 2019, and December 31, 2019, how many allegations of youth-on-youth SEXUAL HARASSMENT were reported?**

**Number reported** .....   None

- If an allegation involved multiple victims or youth perpetrators, count only once.
- Exclude any allegations that were reported as consensual.

**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** .....   None

**b. Unsubstantiated** .....   None

**c. Unfounded** .....   None

**d. Investigation ongoing** ..   None

**e. TOTAL** (Sum of Items 14a through 14d) .....   None

- 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 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 all reported occurrences, or only substantiated ones?**

01  All

02  Substantiated only

02  No → *Please provide an explanation in the space below and then skip to Item 18.*

**16. Between January 1, 2019, and December 31, 2019, how many allegations of STAFF SEXUAL MISCONDUCT were reported?**

Number reported . . . . .   None

- If an allegation involved multiple victimizations, 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** . . . . .   None

b. **Unsubstantiated** . . . . .   None

c. **Unfounded** . . . . .   None

d. **Investigation ongoing** . . . . .   None

e. **TOTAL** (Sum of Items 17a through 17d) . . . . .   None

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

**18. 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 MISCONDUCT?**

01  Yes

No → Skip to Item 21

02  No → Please provide an explanation in the space below and then skip to Item 21.

**19. Between January 1, 2019, and December 31, 2019, how many allegations of STAFF SEXUAL HARASSMENT were reported?**

Number reported .....   None

- If an allegation involved multiple victims or staff, count only once.

**20. Of the allegations reported in Item 19, how many were** (Please contact the agency or office responsible for investigating allegations of sexual victimization in order to fully complete this form.)

a. **Substantiated** .....   None

b. **Unsubstantiated** .....   None

c. **Unfounded** .....   None

d. **Investigation ongoing** .....   None

e. **TOTAL** (Sum of Items 20a through 20d) .....   None

- The total should equal the number reported in Item 19.

**Section IV - TOTAL SUBSTANTIATED INCIDENTS OF SEXUAL VICTIMIZATION**

**21. What is the total number of substantiated incidents reported in Items 8a, 11a, 14a, 17a, and 20a.**

**Total substantiated incidents** .....   None

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

**NOTES**