Division of Youth Corrections
Youth Survey - Sexual Contact

FACILITY: REPORTING PERIOD:

This survey asks about sexual contact IN THIS FACILITY in the last 3 months, if you are a detention youth.
This survey asks about sexual contact IN THIS FACILITY in the last 6 months, if you are a committed youth.
If you have not been here that long, please report ANY sexual contact while you have been IN THIS FACILITY.

Thank you for answering this survey. A staff member or clinician is on site if you need to discuss any issues related to your survey answers.

General information about this survey:
This survey asks about sexual contacts. Sexual contacts are when someone touches your private parts, or you touch someone else's private parts in a sexual way. Private parts are breasts, buttocks, penis, vagina, and inner thigh.

This survey is not a way for reporting an alleged incident that you want the staff or facility to investigate. This is a confidential survey about sexual contact. To make a specific claim of sexual contact, please utilize the following resources:
-- The PREA pamphlet received at Intake
-- The facility's grievance procedure
-- A staff member you trust
-- A family member
-- Client Manager or other professional
-- Youth Handbook

Basic Information:

(1) Select Your Gender ................................................................. ☐ Male ☐ Female
(2) Select Your Status ................................................................. ☐ Detention ☐ Commitment

Section A: Information provided to you as a youth at this facility...

Yes No

(3) Do you know how to report sexual contact while at this facility? .................................................. ☐ ☐
(4) Did you receive information on reporting sexual contact while at this facility? .................................. ☐ ☐

Section B: General information on sexual contact at this facility in the last 3 or 6 months...

Yes No

(5) At this facility, have you rubbed anyone's private parts with your hand or has anyone rubbed your private parts with their hand? ................................................................. ☐ ☐
(6) At this facility, have you put your mouth on anyone's private parts or has anyone put their mouth on your private parts? ................................................................. ☐ ☐
(7) At this facility, have you put any part of your body inside anyone else's private parts? ....................... ☐ ☐
(8) At this facility, has anyone put part of their body inside your private parts? .................................... ☐ ☐
(9) At this facility, have you had any other kind of sexual contact with someone at this facility? .............. ☐ ☐
   (a) What kind of sexual contact was that? (CHECK ALL THAT APPLY)
   ☐ Kissing on the lips ☐ Looking at private parts
   ☐ Kissing other parts of the body ☐ Something else that DID NOT involve touching
   ☐ Showing something sexual, like pictures or a movie ☐ Something else that DID involve touching

If you answered YES to ANY questions in Section B, please continue.
If you answered NO to ALL questions in Section B, STOP, YOU ARE DONE!

Section C: Who did the sexual contact happen with?

Yes No

(10) Did the sexual contact happen with a YOUTH at this facility? .................................................. ☐ ☐
(11) Did the sexual contact happen with a STAFF member at this facility? ........................................ ☐ ☐
Section D: For contacts that happened with another YOUTH at this facility...

(12) During your time at this facility, did the sexual contact ever happen because a youth used physical force or threat of physical force?  

Yes  No

(13) During your time at this facility, did the sexual contact ever happen because a youth forced or pressured you in some other way to do it?  

Yes  No

(a) **How** were you forced or pressured in some other way? (CHECK ALL THAT APPLY)

- A youth threatened you with harm
- A youth threatened to get you in trouble with other youth
- A youth threatened to get you in trouble with staff
- A youth kept asking you to do it
- A youth forced or pressured you in some other way

Yes  No

(14) During your time at this facility, did the sexual contact ever happen with a youth in return for money, favors, protection, drugs/meds, or other special treatment?  

Yes  No

Section E: For contacts that happened with STAFF at this facility...

(15) During your time at this facility, did the sexual contact ever happen because a staff member used physical force or threat of physical force?  

Yes  No

(16) During your time at this facility, did the sexual contact ever happen because a staff member forced or pressured you in some other way to do it?  

Yes  No

(a) **How** were you forced or pressured in some other way? (CHECK ALL THAT APPLY)

- A staff member threatened you with harm
- A staff member threatened to get you in trouble with other youth
- A staff member threatened to get you in trouble with staff
- A staff member kept asking you to do it
- A staff member forced or pressured you in some other way

Yes  No

(17) During your time at this facility, did the sexual contact ever happen with a staff member in return for money, favors, protection, drugs/meds, or other special treatment?  

Yes  No

Section F: Time and Location of sexual contact...

(18) Where did the sexual contact(s) take place at this facility? (CHECK ALL THAT APPLY)

- My Room
- Another Youth's Room (Victim)
- Another Youth's Room (Perpetrator)
- Rec Area Outside
- Bathroom/Shower
- Gym
- Other Common Areas
- Off Facility Grounds
- School/Classroom
- Living Unit

(19) What time did the sexual contact(s) take place?  

- 6:00am to 12:00pm (morning to noon)
- 12:01pm to 6:00pm (afternoon to evening)
- 6:01pm to 12:00am (evening to midnight)
- 12:01am to 5:59am (midnight to early morning)

(20) Where was the staff member(s) when the sexual contact took place?  

(21) Did the sexual contact result in an injury to you?  

Yes  No

Thank you for answering this survey. A staff member or clinician is on site if you need to discuss any issues related to your survey answers.