

**Department of Juvenile Services**  
**Youth Vulnerability Assessment Instrument: Risk of**  
**Victimization and/or Sexually Aggressive Behavior/Overall Risk**

Youth's Name: \_\_\_\_\_  
 ASSIST ID#: \_\_\_\_\_ Sex: \_\_\_ Race: \_\_\_ DOB: \_\_\_\_\_  
 Facility: \_\_\_\_\_  
 Date of Assessment: \_\_\_\_\_  
 Date of Re-Assessment \_\_\_\_\_

<b>Results:</b>		
Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Vulnerable to Victimization
<input type="checkbox"/>	<input type="checkbox"/>	Sexually Aggressive
<input type="checkbox"/>	<input type="checkbox"/>	No Roommate
	Low	Medium
	<input type="checkbox"/>	<input type="checkbox"/>
		High
		<input type="checkbox"/>

**Youth Interview: (Must be completed in a private setting)**

1. Experience in Institution	Score
Ask: <b>Have you been in a locked juvenile facility?</b>	
<b>NO</b>	<b>SCORE 2</b>
<b>YES</b>	<b>SCORE 0</b>

2. Social Skills	Score
Lead in with: <b>How do you feel being in a facility with so many other juvenile justice youth?</b>	
Then ask:	
• <b>Do you feel you get along well with other people?</b>	Yes/No (Yes score 0, No score 1)
• <b>Do you find it easy to make friends?</b>	Yes/No (Yes score 0, No score 1)
• <b>Do you feel OK about being in groups of people you don't know well?</b>	Yes/No (Yes score 0, No score 1)
Award a score of 1 for each <b>No</b> answer.	
<b>SCORE (0-3)</b>	

3. Perception of Risk	Score
Ask: <b>Do you feel at risk from attack or abuse from other youth?</b> For example, have you received threats, insults, and harassment from other youth? Prompt with options if necessary	
<b>NOT AT ALL</b>	<b>SCORE 0</b>
<b>SOMETIMES</b>	<b>SCORE 1</b>
<b>OFTEN</b>	<b>SCORE 2</b>

If sometimes or often, ask for more details and note youth's statements below:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. History of Victimization	Score
Ask: <b>Do you have concerns about your safety or concerns you will be attacked, bullied or abused by your peers?</b>	
Prompt with options if necessary.	
<b>NEVER</b>	<b>SCORE 0</b>
<b>A FEW TIMES</b>	<b>SCORE 2</b>
<b>OFTEN</b>	<b>SCORE 4</b>

Ask: **Have you ever had a sexual experience that you did not want to have?** If yes, ask what & if this information was reported to the Abuse Registry and law enforcement. If the youth reports abuse that has never been reported, a report must be made to the Abuse Registry.

<b>NO</b>	<b>SCORE 0</b>
<b>YES</b>	<b>SCORE 4</b>

5. **Offense Type**

Ask: **Have you ever been arrested on a sexual offense?** Also verify by checking the youth's file.

NO	SCORE 0	
YES	SCORE 4	

Ask: **Have you ever been arrested on a violent offense?**

NO	SCORE 0	
YES	SCORE 4	

6. Ask: **Have you ever engaged in behavior that you would consider violent or sexually aggressive?**

NO	SCORE 0	
YES	SCORE 4	

7. **Age of Youth**

19 YEARS AND UP TO 21	SCORE 0	
16, 17, 18 YEARS	SCORE 1	
13, 14, 15 YEARS	SCORE 2	
10 – 12 YEARS	SCORE 3	

8. **Intellectual Impairment:** From the file, review is there any evidence that this youth has been previously reported to have an intellectual impairment (Low IQ), learning disability or Special Education classes?

NO EVIDENCE	SCORE 0	
EVIDENCE	SCORE 2	

9. **Review of Features.** This item requires a judgment by the screener that this youth's features may place the youth at higher risk of vulnerability with the peer group.  
(Place a check in applicable box)

<b>Look for features of the youth's physical appearance such as:</b>	
<input type="checkbox"/>	Small Build
<input type="checkbox"/>	Looks younger than stated age
<input type="checkbox"/>	Impaired vision (requires glasses)
<input type="checkbox"/>	Pronounced disfigurement
<input type="checkbox"/>	Physical disability
<input type="checkbox"/>	Deaf or Hard of Hearing
<input type="checkbox"/>	Limited English Proficiency
<b>Look for features of the youth's presentation and behaviors such as:</b>	
<input type="checkbox"/>	Inappropriate verbal behavior (e.g., giggling, odd remarks)
<input type="checkbox"/>	Any gender non-conforming appearance or manner
<input type="checkbox"/>	Hunched fearful posture (e.g., very fearful, very shy)
<input type="checkbox"/>	Acts of Aggression – observation
<input type="checkbox"/>	Youth's interaction with sibling(s)/youth
<input type="checkbox"/>	Youth's behavior in school
<input type="checkbox"/>	Speech impediment
<input type="checkbox"/>	Has difficulty understanding questions
<input type="checkbox"/>	Behaviors that are likely to irritate and annoy other youth (e.g., immature, silly)
<input type="checkbox"/>	Behaviors that appear related to mental illness (e.g., jittery, crying, bizarre)
<input type="checkbox"/>	Do you consider yourself lesbian, gay, bisexual, transgender, or intersex? (Youth should be informed that this question is asked of ALL youth, and that he/she is <b>not</b> compelled to answer.)
<b>Look for features of the youth which make him or her stand out</b>	
<input type="checkbox"/>	Having a lack of exposure to criminal lifestyle
<input type="checkbox"/>	Being from an ethnic minority not well represented in the offender population (e.g., Vietnamese, Indian, Middle Eastern)
<input type="checkbox"/>	Membership in a gang that is likely to be a target of attack from others.
Note other features not listed above:	
<input type="checkbox"/>	<b>NONE OR ONLY ONE FEATURE</b>
<input type="checkbox"/>	<b>TWO OR THREE FEATURES</b>
<input type="checkbox"/>	<b>MULTIPLE FEATURES (FOUR OR MORE FEATURES)</b>
ITEMS 1-9	
TOTAL SCORE	

10.

**File Review:**

Does the file indicate the youth has been charged with a sex offense?

<b>INFORMATION NOT AVAILABLE</b>	<b>SCORE 0</b>	
<b>NO</b>	<b>SCORE 0</b>	
<b>YES</b>	<b>SCORE 2</b>	

Any information suggests prior sexual aggression or sexual victimization of others?

<b>INFORMATION NOT AVAILABLE</b>	<b>SCORE 0</b>	
<b>NO</b>	<b>SCORE 0</b>	
<b>YES</b>	<b>SCORE 2</b>	

**Overall Risk Score**

**Vulnerability to Victimization:**

- 1. Experience in institution Score: \_\_\_\_\_
- 2. Social Skills Score: \_\_\_\_\_
- 3. Perception of Risk Score: \_\_\_\_\_
- 4. History of Victimization Score: \_\_\_\_\_
- 7. Age of Youth Score: \_\_\_\_\_
- 8. Intellectual Impairment Score: \_\_\_\_\_
- 9. Review of Features with juvenile justice facility culture Score: \_\_\_\_\_

Interview: \_\_\_\_\_

\_\_\_\_\_

**Overall Vulnerability To Victimization Score: \_\_\_\_\_**

Maximum Score - 20

**Sexually Aggressive Behavior:**

- 5. Offense Type Score: \_\_\_\_\_
- 6. Violent Behavior Score: \_\_\_\_\_
- 10. File Review Score: \_\_\_\_\_

**Overall Sexually Aggressive Score: \_\_\_\_\_**

Maximum Score - 16

**Risk Level:**  
Low (1-8)  
Medium (9-16)  
High (17 & above)

**Total Risk Score:** \_\_\_\_\_  
**Risk Level:** \_\_\_\_\_

**No Roommate (NR):** High overall score and/or high score in either Vulnerability to Victimization and/or Sexually Aggressive Behavior would indicate need to place on NR status.

NR Documentation:  Yes  No  Double Room  NR

In the event that you need movement to a lesser or higher risk unit or room assignment, the Shift Commander will determine movement. Proper documentation must be stated below as to the reason why youth is moved, i.e., behavior, maturity, facility count, etc. In support of an override please attempt to obtain collateral information from file review and/or parent/guardian contact.

Override Documentation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Supervisor: \_\_\_\_\_ Date/Time of Override: \_\_\_\_\_

Signature of Screener: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Adapted from the "Prison Youth Vulnerability Scale", New Zealand  
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