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Research Article

**RETROSPECTIVE EVALUATION OF SEXUAL ABUSE CASES  
APPLIED TO DICLE UNIVERSITY FORENSIC MEDICINE  
DEPARTMENT**

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**ABSTRACT**

*Sexual abuse is a global public health problem that causes many medical, legal, social and economic problems in the short and long term. In this study, it was aimed to evaluate the sociodemographic characteristics and variables of our sexual abuse cases with the literature data. We retrospectively analyzed 175 cases who applied to our department for sexual abuse between January 1, 2013 and December 31, 2018.*

*It was determined that 143 of 175 cases were found under the age of 18. 91,4% of the cases in our study were female and 8,6% were male. It has been observed that victims are frequently abused by people they know. It was found that 17 of the cases were abused by their family members. It was observed that most of those who denied the incident were victims of incest. When the education status of the victims during the incident is examined; 60 (34,3%) cases were found to be at primary school level, 19 (10,9%) cases were found to be at secondary school level, 11 (6,3%) cases were found to be at high school level; It was determined that 78 of all cases (44,6%) still continue their education and 22 cases (12,6%) quit their education. Lesions were detected in the sexual examination of 45(25,7%) of 175 cases; 39 (22,3%) of these cases had acute lesions and 6 (3,4%) of these cases had chronic lesions. Pregnancy occurred in 4 of the victims. Suicide attempts of 8 (4,6%) cases were determined.*

*As a result, sexual abuse is a problem that requires a multi-faceted approach. Common centers should be established to raise the awareness of the society, to prevent sexual abuse, and to support the victims psychologically and socially. Procedural challenges should be reduced, media support should be obtained, and primary protection activities should be organized.*

**Keywords:** Sexual Abuse, Dicle University, Education, Denial, Incest.

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## 1. INTRODUCTION

Sexual abuse is the exploitation of a person for the satisfaction of sexual desires and needs (Polat, 2007). Sexual abuse is a social problem that continues from ancient times to the present; this situation was also pointed out in the pictures and writings made in Ancient Rome (Byard, 2018). Unfortunately, the search for a solution for this problem that has existed for centuries started in this century. According to the World Health Organization (WHO) 2016 data, it was reported that 18% of women and 8% of men were exposed to sexual abuse during their lifetime (WHO, 2016). Child sexual abuse is the involuntary involvement of a child in sexual activity that violates child protection laws or community rules (WHO, 2003). Today, sexual abuse has turned into a global problem that causes many medical, legal, social and economic problems in the short and long period. Lack of realization of the long-term harms of sexual abuse has hampered prevention policy investments and programs.

A 2017 study found that the average cost of child maltreatment was £ 89,390 together with social care, health and unemployment spending. This situation also reveals the economic difficulty of child abuse (Conti, et al., 2017). According to a meta-analysis of global data on sexual abuse, there are 30 times more cases of child sexual abuse than official reports. (Stoltenborgh M, 2011). In Turkey a study conducted among high school students abuse and neglect rate was found to be 10.7% (Zoroğlu SS, 2001). Sexual abuse is often perpetrated by people who know the child (family members and relatives) (Kara, et al., 2004). In our study, it was aimed to compare the sociodemographic characteristics of sexual abuse cases and the variables of the case with the literature data.

## 2. MATERIAL AND METHODS

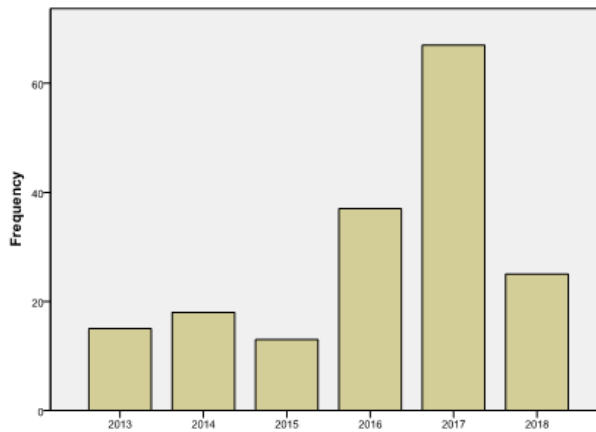
In this study, we retrospectively analyzed forensic and medical aspects of 175 cases who applied to our department due to sexual abuse between January 1, 2013 and December 31, 2018. It was analyzed the age, gender, nationality of the cases, the number of siblings, the degree of closeness of the defendant, the crime scene, the month of the event, the victim's education status, the place where the victim lived, whether the victim has a chronic illness, whether the victim used alcohol or drugs and whether the sexual abuse recurred in the cases. Additionally it was analyzed the location of the victim's first examination, the branch of the physician who performed the first examination (Obstetrics, Forensic Medicine, Emergency Physician, Other), whether there was a trauma finding as a result of our physical examination, and whether there was pregnancy.

All statistical analyses were performed using SPSS software (ver, 18.0 SPSS). Approval was obtained from the Ethics Committee of Dicle University Faculty of Medicine for our study.

## 3. FINDINGS

159 of 175 cases between the ages of 2-48 are female and 16 (%8,6) of them are male. It was observed that the total average age of the cases was 13.6. We classified our cases into 3 groups according to their age: 0-10, 11-18, 19 and after. The largest group was the 0-10 age group with 74 people, and the 11-18 age group was the second largest with 70 people. There were 31 people aged 19 and over. When we examine the distribution of application years, it was seen that the most cases (67 cases) applied in 2017, followed by 37 cases in 2016 (Graphic 1).

**Graphic 1:** Distribution of the Application Years of the Cases



Classification was made in 12 groups according to the degree of closeness of the accused; father, sibling, spouse, partner, employer, close acquaintance, uncle, cousin, foreigner, school / dormitory staff, unlearned and more than one person (Table 1). It was determined that the partners of 24 (%13,7) defendants and the other 24 (%13,7) defendants were close acquaintance. Two cases were found to have been abused by more than one person. In 86 cases, it was determined that the defendant information was not included in the file.

**Table1:** Degree of Closeness of the Accused

	Number	%
Unlearned	86	49,1
Father	2	1,1
Sibling	11	6,3
Partner	24	13,7
Close acquaintance	24	13,7
Employer	1	0,6
Uncle	3	1,7
Cousin	4	2,3
Spouse	6	3,4
Foreigner	10	5,7
School / dormitory staff	2	1,1
More than one person	2	1,1
<b>Total</b>	<b>175</b>	<b>100</b>

In our study, we classified the number of victim siblings as <5 siblings, between 5-10 siblings and  $\geq 10$  siblings. It was determined that 9 cases had less than 5 siblings, 23 cases had 5-10 siblings and 5 cases had more than 10 siblings. It was observed that the sibling information of other cases was missing in the file. When the educational status of the victims was examined, it was found that 60 cases were at the primary school level, 19 cases at the secondary school level and 11 cases at the high school level. It was observed that 78 cases were still continuing their education and 22 cases dropped out (Table 2). Educational status of 74 cases could not be reached from file information. Parents of 8 cases were divorced. It was learned that the mothers of 9 cases were housewives, 2 of them were university graduates, and the fathers of 5 cases were workers, the fathers of 3 cases were shopkeepers, the father of 1 case was retired, and the father of 1 case was a farmer.

**Table 2:** Educational Status of the Victim

	Number	%
Unknown	74	42,3
Illiterate	7	4
Literate	4	2,3
Primary School	60	34,3
Middle School	19	10,9
High School	11	6,3
<b>Total</b>	<b>175</b>	<b>100</b>

In 99 cases, the scene of the incident was not specified in our reports. It was observed that the most frequently occurred at the home of the defendant in 28 cases and at the home of the victim in 23 cases. 110 of the cases were examined in our university. 108 of the cases were examined by a forensic medicine specialist, 5 cases were examined by an emergency doctor, 6 cases were examined by a gynecologist, and 1 case was examined by a pediatric surgeon. It was found that in 55 cases, it was not recorded by which branch doctor the first examination was performed. The time of the event and the first examination of the victim is known in 69 cases. 16 of the 69 cases could be examined within 72 hours after the event. 3 cases could be examined within 4-7 days. It was observed that in 31% of the cases, the event occurred in December-January-February, followed by September-October-November with 27%. (Table 3)

**Table 3:** Distribution of Our Cases by Months and Seasons

	Number	%	Percentage of Seasons
December	3	1,7	
January	5	2,9	31%
February	6	3,4	
March	1	0,6	
April	4	2,3	20%
May	4	2,3	
June	4	2,3	
July	1	0,6	22%
August	5	2,9	
September	7	4	
October	2	1,1	27%
November	3	1,7	
Unknown	130	74,3	
<b>Total</b>	<b>175</b>	<b>100</b>	100

It was determined that 73 files are in Diyarbakır, 81 files are from Mardin, 9 files are from Batman, 6 files are from Şanlıurfa, 2 files are from Şırnak, 2 files are from Siirt, 1 file is from Muş, 1 file is from Adıyaman. When the chronic diseases of the victims were questioned, it was seen that 5 out of 175 cases had mental retardation. After the event, 2 cases were treated for depression, 1 case was treated for urinary tract infection, 1 case was treated for panic attack and 1 case was treated for Post-Traumatic Stress Disorder. It was found that 8 (4,6%) of 175 patients used substances.

In 41 (23,4%) cases, it was determined that the victim revealed the incident. In 13(7,4%) cases, the victim's teacher, in 9 cases the victim's family, in 3 cases the victim's friend, in 2 cases the incident was revealed by the police.

We detected lesions in 45(25,7%) of 175 cases we examined. Acute lesions were detected in 39 (22.3%) and chronic lesions in 6 (3.4%) of the cases. Pregnancy occurred in 4 of the victim women. It was observed that 8 (4.6%) cases attempted suicide. When the social media connection was examined, it was seen that 5 (2,9%) victims met the defendant on social media.

We grouped the hymen tears found in our examination according to the clock face. It was found that 10 cases had tears at the 5 o'clock level, 11 cases had tears at the 7 o'clock level and 12 cases had tears at the 9 o'clock level. It was observed that the tears detected were mostly posterior (Table 4). We also grouped the anal tears found in our sexual examination according to the clock dial. The most common 10 cases with tears at 1 o'clock and 7 cases with tears at 6 o'clock were detected (Table 5).

**Table 4:** Location of the tear in the hymen

Clock Face	1	2	3	4	5	6	7	8	9	10	11	12
No	155	156	153	155	149	152	148	156	147	158	159	159
There is	4	3	6	4	10	7	11	3	12	1	0	0
<b>Total</b>	159	159	159	159	159	159	159	159	159	159	159	159

**Table 5:** Location of anal tear

Clock Face	1	2	3	4	5	6	7	8	9	10	11	12
No	165	175	174	175	173	168	173	174	174	174	173	171
There is	10	0	1	0	2	7	2	1	1	1	2	4
<b>Total</b>	175	175	175	175	175	175	175	175	175	175	175	175

#### 4. DISCUSSION

Diyarbakır in southeast Turkey, is one of the oldest and most populous province with 17 districts. According to the statistics agency data Turkey in 2018; Diyarbakır population is 1,732,396. Approximately 41% of this population is children. Due to the lack of a nationwide study on sexual abuse in our country, there is no clear information about the frequency of sexual abuse. However, according to various evaluations made on samples, the frequency of sexual abuse is thought to be between 6.4-25.2% (Öncü *et al.*, 2013; Yildirim, *et al.*, 2013). According to UNICEF Turkey on Child Abuse and Domestic Violence the report; It was found that 3% of 1886 children between the ages of 7-18 were exposed to sexual abuse (UNICEF, 2017). In a study conducted in Diyarbakır in 2011, it was stated that 82.8% of the victims of sexual abuse were under the age of 18 (Yılmaz *et al.*, 2011). In our study, 143 of 175 cases, that is approximately 82%, were detected under the age of 18 and a compatible result was obtained.

Women are exposed to sexual abuse more frequently than men. In a study in Muğla between 2012-2014; 85.4% of 387 sexual abuse cases are women and 14.6% of 387 sexual abuse cases are men (Topal *et al.*, 2018). In a study conducted in Taiwan, 3.3% of 91 cases were male and 96.7% of 91 cases were female; It was stated that the average age of the cases was 13.31 and 10 cases were less than 10 years old (Hu *et al.*, 2018 The compilation conducted in 2015 in our country showed that among the victims of sexual abuse between 2001-2013, 2469 cases were female and 669 cases were male (Beyazıt and Bütün-Ayhan, 2015). 91.4% of the cases in our study were female, and 8.6% of the cases were male. The average age of our cases is 13.6 years. It was observed that the number of cases under the age of 10 was 74.

According to current studies, most of the abusers are from the family or close relatives who are known by the child (Demirci *et al.*, 2008; Karbeyaz *et al.*, 2009). In a study between 2005-2007 in Konya; It has been reported that 97 (35.3%) of the victims were abused by their boyfriend, 44 (16.0%) of the victims were abused by someone they knew and 20 (7.3%) of the victims were abused by their relatives (Demirci *et al.*, 2008). In a study conducted in Eskişehir; In 75.9% of the sexual assault cases, it was observed that the attacker was a close, acquaintance or family member (Karbeyaz *et al.*, 2009). In our study, in 87.6% of the cases, the defendant is a person known by the victim such as father, sibling, lover, spouse, uncle, cousin. It was determined that the defendant was a foreigner in 12.4%.

Incest is the abuse of a child by someone who is biologically related or caring for a child. (İbiloğlu *et al.*, 2018; İMDAT, 2016). Incest is one of the most difficult abuses that a victim can suffer, often hidden. In a study conducted in the United States, it was stated that 12-15 million women were exposed to incest in the past (Browning DH, 1977). In a study conducted in Konya, it was reported that 4% of the cases detected were exposed to incest (Demirci *et al.*, 2008). It was found that 17 of 175 cases (9.7%) in our study were abused by family members such as father, sibling and uncle. In the file reviews, it was seen that 5 victims first admitted the abuse and then denied it. In 3 cases who denied it, the defendant was the victim's brother, in 1 case the defendant was the victim's uncle and in 1 case the defendant was school staff. This situation suggests that the victim of incest can be persuaded within the family and deny the incident. According to Bozbeyoğlu, the attacker's sharing the same house with the victim causes the incident to be covered and the pressure on the victim to increase. The fact that punishing the aggressor creates financial or moral difficulties for other family members increases the feeling of guilt in the victim (Çavlin-Bozbeyoğlu, 2009;).

Unless sexual abuse is exposed, abuse can be repeated (Polat, 2007). In a study conducted in Taiwan, it was reported that the attack was repeated in 32 (35.2%) of 91 cases (Hu *et al.*, 2018). It was found that the abuse recurred in 49 (28%) of the cases in our unit. In 20 of our cases, it was found that the victim was previously abused by others.

In our study, it was determined that 68.4% of the incidents took place in the home environment, including the defendant's home, the victim's home or the friend's home. In the study of Aydın *et al.* consisting of 1002 cases in 2014, it was stated that almost half of the cases (47.9%) were abused in the home environment (Aydın B, 2015). In a study covering the years 2013-2016 in Sivas province; It was reported that 52.7% of the incident took place in the home environment (Butun *et al.*, 2017). Thus, it is seen that most of the abuses take place in areas known as safe areas.

In cases of sexual abuse, it is very important to examine the victim early so that the evidence is not lost. In the study conducted with 275 cases, the rate of applicants within the first 10 days was 26.9%; In another study conducted with 387 cases, it was stated that 23.8% of the cases applied to a health institution within the first 72 hours. (Aydın B, 2015; Topal *et al.*, 2018). In our study, it was found that 23% of our cases whose event time and first examination date were known were examined within 72 hours after the event. Late application of the victim, long procedures, environmental pressure cause the health examination to be delayed (Karbeyaz *et al.*, 2009).

In the study of Demirci *et al.*, old / new tears in the hymen were found in 42.7% of 136 cases; Signs of acute or chronic penetration were detected in 8.7% of 115 patients who had anus examination (Demirci *et al.*, 2008). In our study, 39 (22.3%) of our patients had acute lesions and 6 (3.4%) of our patients had chronic lesions. In a study, although vaginal, anal or oral penetration was described in 41.1% of the cases, the presence of penetration could be shown in 24.7% (Aydın B, 2015). Although 34.9% of our cases in our study described penetration in the

event history; Positive examination findings were observed in 25.7% of our cases. This shows us that the absence of positive findings during the examination does not indicate that the act of sexual abuse did not occur. However, positive findings in the examination may not always be related to the alleged event. Physical findings, biological specimens, and the story of the event should be enlightened with the forensic investigation.

## **5. RESULT**

As a result, sexual abuse is a problem that requires well rounded approach and requires many institutions to carry out the process together and quickly. In order to prevent abuse, centers should be established where these problems can be solved and the victims can be supported psychologically and socially. The events should be thoroughly examined by the experts in these centers. Support should be obtained from the media in order to raise the awareness of the public about abuse (Kaytez *et al.*, 2018). In addition, psychological counselors should be informed about sexual life education, child rights and abuse in educational institutions so that the abuse is not kept confidential. Deterrent regulations should be made in laws on sexual abuse. Primary protection activities are also needed to prevent abuse. Therefore, effective screening should be done on risk groups.

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