

Analysis of 268 child and adolescent victims of sexual assault and the legal outcome

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Children- and adolescent-oriented sexual crime has been a progressively increasing public health problem in Turkey. The aim of this study was to define the sociodemographic features of the sexual assault victims and the assailants in the crimes against children and adolescents.

In 221 (82.4%) of the cases, perineal findings were detected. In addition to perineal trauma, 76 (28.4%) of the victims had general body trauma and 35 (13.1%) declared fire-arm or knife threat. Ninety-nine (36.9%) assaults happened at the victim's home while 74 (27.6%) events took place in the assailant's home. Eighty-nine (33.2%) of the cases were examined by a general practitioner, 179 (66.8%) by a gynecologist or by a general surgeon (for male subjects), and 40 (14.9%) by forensic medicine specialists and committee, in case of objection to insufficient examination or investigation. In 156 (58.2%) of all cases, the accused were sentenced. In 6 (12.5%) cases, no penalty was inflicted due to lack of evidence.

In deciding on an appropriate and deterrent punishment in children- and adolescent-oriented sexual crimes, we discuss in this study the importance of research and rehabilitation centers, which perform collection of evidence, on judicial decisions and the importance of the conduct of medical examinations by specialists.

Key words: sexual assault, medico-legal examination, child and adolescent victims, criminal court.

According to the studies conducted throughout the world, children- and adolescent-oriented sexual crimes are increasing, and both females and males are subject to sexual assault in high percentages in any period of their lives¹⁻⁶. It has been accepted that the victims of sexual assaults keep the matter to themselves for a variety of reasons and do not consult judicial authorities; therefore, many cases are not judicially processed or are done so late^{4,7-9}. Because of late consults and medical examinations, evidence related with the sexual assault disappears, and no penalty can be inflicted. There may be various reasons for keeping the assault a secret in different countries. The most important, in Turkey, are the moral factors. Moreover, one sometimes hears news about the victims of sexual assaults who are killed because of the mores. Hence, it is not really possible to obtain reliable statistical data on sexual assaults.

The aim of this study was to evaluate the importance of the factors that are effective on the judicial course and outcomes of sexual assault cases, even though it is clear that the number of cases submitted to the courts of justice represent only the tip of the iceberg.

Material and Methods

In this study, we reviewed the files of all sexual assault cases that occurred within the five-year period between 1999 and 2003 and were adjudged in the 1st and 2nd Zonguldak High Criminal Courts. All the victims of 268 cases in total were 18 years of age or younger. The victims studied were evaluated by dividing into three groups in accordance with the classification of relevant Turkish laws. Subjects (assailants and victims) were grouped according to their age, marital status, time of the assault,

accompanying trauma, medical examination results, and features of its presentation to judicial authorities and other features during the judgement period.

Data were expressed as mean \pm standard deviation. Chi-square test was used to analyze the data. $P < 0.05$ was considered as statistically significant.

Results

Age of the victims ranged from 7 to 18 years (mean age: 13.8 ± 2.3 years; median: 14 years). Of the victims, 82.1% (220/268) were female and 17.9% (48/268) were male. Approximately three-fourths of the victims (78.3%, $n=211$) were younger than 15 years of age (Table I).

which was the least-encountered crime scene.

It was found that 166 (61.9%) victims did not previously know the assailant, 39 (14.5%) victims had domestic violence or close relative assault and 18 (8.1%) females became pregnant after the sexual assaults.

All of the assailants were male and 48.1% of them were between 21-30 years of age. Among those, 167 (62.3%) were single, 90 (33.6%) were married and 11 (4.1%) were widowers. There was more than one assailant in 18 (8.1%) cases. Moreover, in 34 (13.1%) of the cases, one or more female accomplices were present. Among these cases, 25 resulted in marriage. These accomplices were family members or friends who tried to convince the victims to marry the perpetrators after the assaults. It was

Table I. Age and Gender Distribution According to Victim Groups

	Aged 7-11 n %	Aged 12-15 n %	Aged 16-18 n %	Total n %
Male	15 31.3	29 60.4	4 8.3	48 100
Female	25 11.4	142 64.5	53 24.1	36 100
Total	40 14.9	171 63.8	57 21.3	268 100

$P < 0.001$, chi-square test.

Two hundred (74.6%) of the cases consulted judicial authorities within the first 72 hours after the event. Thirty-six (13.4%) of them had a medical examination within 4-10 days and 32 (11.9%) within 11 days. In 221 (82.4%) of the cases, perineal and anal findings (hymenal rupture, erythema of labia minora, perineal bruising-abrasion, and anal bruising-abrasion or mucosal tears) were detected. Among those, 163 (74%) female subjects had only vaginal, 12 (5.4%) female subjects had only anal and 15 (6.8%) female subjects had both vaginal and anal lesions. Anal lesions were detected in 31 (77.5%) male subjects. In addition to perineal trauma, 76 (28.4%) of the victims had general body trauma and 35 (13.1%) subjects declared fire-arm or knife threat. Moreover, spermatozoa were found in vaginal smears of 32 (11.9%) females and DNA fingerprinting was performed.

Ninety-nine (36.9%) assaults happened at the victim's home while 74 (27.6%) events took place in the assailant's home. The place of sexual assault was a car in 21 (7.8%) of the cases,

determined from the records that there were repeated assaults in 73 (85.8%) of 85 cases in which the assault was followed by a marriage. Forty-four (20%) repeated assault cases, on the other hand, did not result in marriage.

Eighty-nine (33.2%) of the cases were examined by a general practitioner and 179 (66.8%) by a gynecologist or by a general surgeon (for male subjects). For 40 (14.9%) cases, in which the examination was insufficient, examinations were done by a forensic medicine specialist and committee.

In 156 (58.2%) of all cases, the accused were sentenced. Among those, 150 (96.2%) represented cases in which the victim had consulted judicial authorities within the first 72 hours and had a medical examination. Regarding the assaults to female victims, assailants were sentenced in 114 (51.8%) cases. Sentencing was adjourned in 85 (38.6%) cases because of subsequent marriage between victim and assailant, and in 21 (9.6%) cases, no penalty was inflicted due to lack of evidence (Table II).

Table II. Comparison of the Timing of the Medical Examination of Victims and Percentage of Convictions

Court decision time of medical exam	Sentencing n %	Adjournment n %	Dismissal n %	Total n %
First 3 days	150 75.0	38 19.0	12 6.0	200 74.6
4-10 days	4 11.1	21 58.3	11 30.6	36 13.4
11 th day and later	2 6.3	26 81.3	4 12.4	32 12.0
Total	156 58.2	85 31.7	27 10.1	268 100

$P < 0.001$, chi-square test.

Regarding the assaults to male victims, 42 (87.5%) assailants were sentenced, while in 6 (12.5%) cases no penalty was inflicted because of lack of evidence.

Discussion

In this study, victims were divided into three groups according to their age. The majority of victims were in the 12–15 years of age group (63.8%), followed by the 16–18 years of age group (21.3%) (Table I). This finding is close to that of other studies^{6,9-17}.

The ratio of female to male victims was approximately 4.5 ($N=220/48$). In a similar study by Çekin et al.¹³, this ratio was found as approximately 9, whereas in the study of Barutçu et al.¹⁴, the ratio was 2. These results reveal that the region in which the study was conducted and sociocultural differences are effective on the gender of the victim and that women always suffer more from sexual assaults.

Tintinalli¹⁸ stated that the percentage of arrests of the accused was 69% in those sites with sexual assault research centers, where it is possible to collect the evidence shortly after the event, while this ratio decreased to 3.5% in areas without such centers.

In this study, having the medical examination within the first 72 hours (74.6%) led to sentencing in 96.2% of the cases. This result shows the importance of conducting the medical examination and investigation at the proper time. However, questions arise about the reliability of the medical examinations and the collection of evidence because of the performance of medical examinations by a general practitioner rather than a specialist in approximately one-third ($n=89$, 33.2%) of the cases. Forty (44.9%) of such cases were re-examined by a forensic medicine specialist and committee, in cases of objection to insufficient examination or for an investigation

to strengthen the suspicion. This also shows the reality that the insufficiency of forensic medicine and sexual assault research centers in Turkey negatively impacts the judicial decisions¹⁹.

Studies in our country and others^{14,20,21} report that most of the victims know the assailants, and the crime often occurs in the region where the victim lives. In this study, in agreement with the previous studies^{16,22-24}, half of the victims knew their assailants.

In addition to genital trauma, 28.4% of the victims had physical trauma signs in certain parts of their body. This ratio is too small compared with the results of studies of Riggs⁵ (64.4%), Bowyer²² (52.7%) and others (52-65.2%)²⁵⁻²⁷. This may be due to the voluntary intercourse of the victim under the age of 18. According to Turkish law, no intercourse with a person under 18 is approved, so that in such cases, the family of the victim may consult judicial authorities and the situation is accepted as sexual assault without the need for any signs of physical trauma. The proof of this thought is that 85 (38.6%) victims accepted to marry the so-called assailants during the trial, leading to the adjournment of the sentencing. In order to prevent unnecessary court cases, it is essential to have a revision in the criminal laws. The ratio of conviction in sexual assault cases with additional general body trauma was found to be 94%. This high ratio can be attributed to the fact that presence of general body trauma in addition to genital trauma positively impacts the judges in interpreting the claim as sexual assault^{24,28,29}.

Overall, sexual assault research and rehabilitation centers are necessary in Turkey in terms of medical, legal and social needs. Well-equipped centers will facilitate quick and appropriate court decisions and will be effective in decreasing the number of sexual assaults.

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