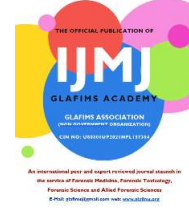


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Original Research: An Analysis of Intrafamilial Child Sexual Abuse Cases: Examination of Victim, Perpetrator, and Incident Characteristics – A One-Year Review of Judicial Files from Türkiye

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ABSTRACT:

Objective: This study aims to examine the socio-demographic characteristics of victims and perpetrators in intrafamilial child sexual abuse cases and to analyze the nature of the incidents based on judicial files. The goal is to contribute to the understanding of abuse dynamics and inform multidisciplinary approaches for prevention and intervention.

Methods: This cross-sectional and retrospective study reviewed 11 intrafamilial child sexual abuse cases processed by the xxxxx in a province in eastern Türkiye between January 2021 and January 2022. Data were collected using a researcher-developed form validated by a presiding judge. Descriptive statistics were calculated using IBM SPSS Statistics 24.0.

Results: The majority of perpetrators were first-degree relatives—biological fathers in 8 cases, uncles in 2, and a sibling in 1. The average age of the perpetrators was 33.91±10.33 years; over half were employed and married. Substance use at the time of the

offense was reported in 36.4% of cases. Most victims (72.7%) were female children or adolescents actively enrolled in school. In 8 of the 11 cases, the offense involved sexual abuse, while the remaining 3 involved physical violence or homicide. All incidents occurred within the shared household, and formal complaints initiated judicial proceedings.

Conclusion: The findings highlight the alarming prevalence of sexual abuse committed by close family members and the critical role of health and legal systems in early detection and intervention. Preventive strategies must address both individual and systemic risk factors and prioritize child-centered legal reforms. Protecting children from intrafamilial abuse requires collective societal action across healthcare, education, legal, and social service sectors.

Keywords: Child abuse, domestic violence, intrafamilial sexual abuse, perpetrator profile, victim Characteristics

INTRODUCTION: Child sexual abuse remains a serious threat to public health and child rights both globally and in Türkiye. When the perpetrator is a close family member, the consequences are far more complex and devastating, affecting the victim's physical and mental well-being in profound ways. Intrafamilial sexual abuse, often occurring within private spaces, tends to remain undetected due to the emotional or financial dependency of the child on the perpetrator, as well as the secrecy and control exerted within the family unit (1,2).

According to data from the Turkish Statistical Institute (3), 259,106 children were brought to security units in 2022 as victims. A considerable portion of these cases involved sexual abuse, with perpetrators often known to the victims and frequently being family members. Research indicates that girls are more likely to be victims of sexual abuse, while boys are often abused at a younger age. In a study by Bilginer et al. (4), among 118 reported cases of child sexual abuse, 70% involved girls and 30% boys. Age distribution revealed that girls were typically abused during adolescence, whereas boys were more frequently victimized during early school years. Similar research corroborates the results of the studies

conducted by Finkelhor et al. (5) and Karbeyaz et al. (6). Research shows that child sexual abuse victims are predominantly female and that females are much more at risk than males. For example, in a nationwide study conducted throughout the United States, Finkelhor et al. determined that the male to female victim ratio was approximately 7:1 whereas in a case study of a forensic institution, Karbeyaz et al. determined that 82% of victims in Türkiye were female.

Other studies findings were reported by Yektaş et al. (7) and Hu et al. (8), where most perpetrators were male and known to the victims, often relatives or household members. The nature of intrafamilial sexual abuse not only inflicts physical trauma but also results in the collapse of trust, severe familial disruption, and long-lasting psychological consequences.

Victims of sexual abuse often suffer from psychiatric disorders such as post-traumatic stress disorder (PTSD), major depressive disorder, anxiety, sleep disturbances, attention deficits, anger outbursts, and suicidal ideation (1,9). Repeated abuse further intensifies these effects and increases the risk of harmful behaviors during adolescence, including substance use, school dropout, and suicide attempts.

In this context, the healthcare system plays a crucial role in identifying victims and facilitating access to support services. Nurses and emergency department staff are the initial line of defense concerning child sexual abuse prevention, treatment, and legal reporting obligations as they are the first healthcare professionals to encounter patients and recognize abusive manifestations (10, 11). In particular, nurses engage with patients regarding assessments, documentation, emotional support, and connections to law enforcement, so the sooner they assess the situation, the sooner they'll be on the judicial/patient safety path (12, 13). Article 280 of the Turkish Criminal Procedure Code mandates that healthcare professionals report injuries resulting from violence or abuse to official authorities(14). Given this background, the present study aims to analyze intrafamilial child sexual abuse cases by examining the socio-demographic characteristics of both victims and perpetrators, as well as the nature of the incidents based on observations from healthcare professionals. The study seeks to answer the following research questions: What is the socio-demographic characteristics of the perpetrators in intrafamilial child sexual abuse cases?

What is the socio-demographic characteristics of the victims in these cases?

What are the most common forms and characteristics of abuse in these incidents?

METHOD: This study was designed as a cross-sectional and retrospective analysis. It involved the examination of judicial files related to intrafamilial child sexual abuse cases that were processed by the XXXXX in a province located in eastern Türkiye over a one-year period (January 2021 to January 2022). All cases involving children, whether ongoing, resulting in conviction, or resulting in acquittal, within the specified timeframe were included. No sampling technique was employed; instead, the entire universe of eligible cases within the 12-month period was analyzed.

Data Collection Tools: A structured data collection form was developed by the researchers to systematically extract relevant information from the case files. Prior to implementation, the form was reviewed by a presiding judge of the criminal court where the study was conducted. Based on the judge's expert feedback, necessary revisions were made, and the final version of the form was approved for use.

The form consisted of three main sections. The first section, titled "Incident Information,"

gathered details such as the type of crime, date and location of the incident, and whether a weapon was involved. The second section, "Victim Information," included variables such as the victim's age, educational level, occupation, disability status (if applicable), interrogation details, and legal standing. The third section, "Defendant Information," collected similar data for the accused party, including age, education level, profession, disability status (if any), interrogation records, and legal status.

Ethical Considerations: Prior to data collection, an introductory meeting was held with the chief judge of the XX to explain the study's aims and scope, during which verbal consent was obtained. Subsequently, formal written permission was granted by the XXXX, affiliated with the XXXXX (Approval No: 2022/3034 Muh., Date: 18.03.2022). Ethical approval was also obtained from the Scientific Research and Publication Ethics Board of Erzurum Technical University (Approval Date: 28.03.2022).

Data Collection: After receiving the required institutional permissions, the researcher accessed the case files in a secure room within the courthouse. All information was manually transcribed into the data collection form. In adherence to strict confidentiality protocols, no

photographs, photocopies, or digital reproductions of the case documents were taken or removed from the premises.

Data Analysis: Data coding and statistical analysis were performed using IBM SPSS Statistics version 24.0 (IBM Corp., Armonk, NY, USA). Descriptive statistics—including means, standard deviations, frequencies, and percentages—were used to analyze and present the findings.

FINDINGS

1. **Defendant profile:** The average age of the defendants was 33.91 ± 10.33 years (range: 19-49). Regarding educational background, 5 defendants (45.6%) were middle school graduates, 3 defendants (27.2%) were literate, and 3 defendants (27.2%) were attending or had completed high school. In terms of employment, 6 defendants (54.5%) were employed and married, and 5 defendants (45.5%) were students. Alcohol use was reported in 4 (36.4%) cases at the time of the incident (Table 1).

2. **Victim profile:** The average age of the victims was 28.36 ± 21.74 years (range: 12-64). Of the 11 victims, 5 (45.5%) were continuing or had completed middle or high school education. Only one victim (9.1%) was identified as an immigrant. Most victims (8 cases, 72.7%) were children or adolescents still in school, while 3 victims (27.3%)

were adults and married (Table 2).

3. Classification of Defendants by Kinship Relation in Domestic Sexual Violence Cases: Table 3 illustrates the relative categorization of defendants in domestic sexual violence incidents. Therefore, 10 of the defendants were first-degree relatives, and 1 was a second-degree relative or unknown. Among the first-degree relatives, there were three biological fathers, five biological offspring, and two brothers. Among the second-degree relative, there was one nephew. The overall relative frequency of these findings indicates that the first-degree relative is the most likely offender (Table 3).

4. Type and Nature of Violence: A total of 11 case files were reviewed, all of which were brought before the 4th High Criminal Court within the past year. Among these, 8 cases involved sexual harassment or abuse, while 3 involved intentional injury and homicide. All incidents occurred within the shared residence of the victim and defendant and were reported to the judicial authorities following a formal complaint.

Weapons were mentioned in 2 files: one involving a knife and the other a shotgun. Analysis of the relationships between the defendants and victims revealed

that in 8 cases the abuse was committed by the victim's father, in 2 by an uncle, and in 1 by a sibling. Additionally, 4 defendants had a known history of alcohol or substance use, and 2 had documented psychiatric diagnoses.

In all 11 cases, complaint was the first act that triggered the justice process. 81.8% (n=9) of the complaints were lodged by the mother of the victim and 18.2% (n=2) were lodged by the brother/sister of the victim.

DISCUSSION: This study provides important insights into the dynamics of intrafamilial child sexual abuse by examining the socio-demographic profiles of victims and perpetrators, as well as the characteristics of the incidents. The findings clearly demonstrate that children are vulnerable to physical, psychological, and particularly sexual violence, often inflicted by those they trust the most. This underscores the reality that domestic violence is not merely the result of individual psychopathology but rather a deeply rooted structural issue shaped by cultural norms, gender dynamics, and social inequalities (15).

The average age of the defendants was 33.91 years, with nearly half having only secondary-level education and more than half being employed. Notably, over one-third of the

perpetrators were reported to be under the influence of alcohol at the time of the incident. These findings are consistent with broader evidence indicating that low education, substance use, and psychiatric disorders are significant risk factors for violent behavior (16,17). However, these factors should not be viewed as direct causes of violence but rather as contributors that may increase the risk or intensity of violent acts. As such, preventive efforts must extend beyond individual-level interventions to address the cultural and systemic conditions that normalize or conceal abuse (16,18).

The victim profile further supports global trends in gender-based vulnerability. Most of the victims in this study (72.7%) were female students continuing their education. While only one case involved an immigrant child, this may not reflect a lower incidence but rather potential underreporting due to language barriers, cultural stigma, or lack of access to formal reporting channels. Furthermore, the underrepresentation of male victims should be noted. Research highlights that boys are often less likely to report abuse due to stigma, fear of disbelief, or cultural notions of masculinity (19,20). This invisibility limits their access

to protective services and emphasizes the importance of child protection systems that are inclusive of all genders. That all cases were brought to judicial authorities via formal complaints is a promising sign of increasing societal awareness. Nonetheless, substantial evidence shows that many cases of child sexual abuse remain hidden due to fear, shame, or family pressure (21,22). Strengthening mandatory reporting systems, improving training for professionals, and increasing public awareness are essential strategies to uncover and address these hidden cases. The fact that three of the eleven cases included physical violence and homicide further illustrates the potential for escalation in intrafamilial abuse scenarios. Consistent with earlier findings (23,24,25), this study affirms that the home, presumed to be a space of safety and nurture, can become the most dangerous environment for vulnerable children. These events often occur in secrecy, further complicating detection and intervention.

Long-term consequences of childhood abuse are well documented. Exposure to early trauma is linked with chronic mental health conditions, substance dependency, impaired social functioning, and even future criminal behavior (26). Accordingly, protective

interventions must not only provide immediate physical safety but also deliver sustained psychological support to facilitate long-term recovery. Moreover, a meta-analysis of risk and protective factors for child sexual abuse shows that contextual factors - caregiver substance use, lack of educational and developmental opportunities and stable, reinforced gendered hierarchies - explain the tendency to underreport and seek to avoid such incidents (27).

Family is allegedly the greatest recognize of abuse, and literature suggests that many child sexual abuse victims are abused by someone with which they are extremely familiar therefore family is the greatest determiner for recognizing these events (6,11). But it also suggests that many family members remain silent due to shame, trauma, fear or societal stigma and this diminishes the actual abuse numbers which are recorded (5,7). Therefore, it is assumed that the number of complaints are merely what's been reported by those who have come forward and that higher rates of child sexual abuse exist. These findings support the understanding that family members often act as the first line of diagnosis and reporting of child sexual abuse, especially in intrafamilial contexts. However, qualitative

research in Ghana highlights that cultural norms such as taboos on disclosure, male-gendered socialization, and imperatives to "save face" significantly inhibit victims from reporting domestic abuse (28).

Conclusion: In conclusion, this study emphasizes that intrafamilial child sexual abuse reflects broader societal and systemic failures, not merely individual deviance. Effective prevention and intervention efforts must adopt a multifaceted approach:

Integrating violence prevention and gender equality education into school curricula,

Offering early intervention and monitoring services for at-risk families,

Strengthening the juvenile justice and child protection systems,

And prioritizing legal reforms that uphold the best interests of the child.

Ultimately, protecting children from violence within their own homes requires:

A global sociomedical interdisciplinary evaluation of child's needs, meaning everything from hospitals to legal institutions to socioeconomic needs will all be involved in a sociomedical society.

Preventative measures that consider the full extent of violence from personal

motivation to social/sociocultural means that aim to prevent senseless violence in the first place.

Interdependency within institutions to report child domestic violence, have sufficient resources/help to get through it and even support after a case has been closed.

Sociological awareness and education to destigmatize familial violence so children understand it's not right and can seek help.

A moral/sociological expectation for all children, it's not just a legal issue but a societal one.

Limitations of The Study: The study was conducted based upon the high criminal files of the specifically studied high criminal court in question for representative access assignment; therefore, results are not generalizable beyond the population. In addition, as many incidents were from subsequent findings of judicial legality, any abusive incidents that did not make it to police in the first place, or were too intimate to enter into the legal system are excluded from this study. Also, socio-psychological elements noted by researchers were based upon court findings so we could only note them to a certain extent without any overstated claims. Finally, in having high criminal files with no chance of accelerated acquisition - save a naturally

long appeals process - means that the results of the study are what are most thorough and best studied given the circumstances. Thus, although it may be a limited population sample, it is a definitive body of qualitative data that any presiding judge can apply to intrafamilial child sexual abuse cases

Declarations

Conflict of interest: The authors declare no conflict of interest related to this article. This study was presented as an oral presentation at the 6th International Forensic Nursing Congress in Erzurum in May 2022. Funding Statement: The authors declare no use of financial support related to this article. Ethical Approval: Ethical approval was also obtained from the Scientific Research and Publication Ethics Board of Erzurum Technical University (Approval Date: 28.03.2022). This study was prepared in accordance with the Declaration of Helsinki and in accordance with the principles of publication ethics.

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Table 1. Demographic Characteristics of Defendants

Demographic Characteristic	n (%)
Occupation	
Student	5 (45.5)
Worker	6 (54.5)
Educational Level	
Literate	3 (27.2)
Primary School	5 (45.6)
High School	3 (27.2)
Alcohol Usage	
Yes	4 (36.4)
No	7 (63.6)

Table 2. Demographic Characteristics of Victims

Demographic Characteristic	n (%)
Occupation	
Student	8 (72.7)
Retired	3 (27.3)
Educational Level	
Literate	1 (9.1)
Primary School	4 (36.4)
High School	5 (45.5)
University	1 (9.1)
Marital Status	
Single	8 (72.7)
Married	3 (27.3)
Special Status	
Immigrant (Syrian)	1 (9.1)
None	10 (90.9)

Table 3. Classification of Defendants by Kinship Relation in Domestic Sexual Violence Cases

Type of Kinship	First Degree Relatives	Second Degree or Other Relatives
Biological Father	3	
Biological Child	5	
Brother	2	
Nephew	-	1
Total	10	1

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