



## Negative reactions to the sexually abused victims, withdrawing the complaint and outcomes of the litigation: the first data from Turkey

Nilüfer Koçtürk & Çilem Bilginer

To cite this article: Nilüfer Koçtürk & Çilem Bilginer (2019) Negative reactions to the sexually abused victims, withdrawing the complaint and outcomes of the litigation: the first data from Turkey, *The Journal of Forensic Psychiatry & Psychology*, 30:1, 152-166, DOI: [10.1080/14789949.2018.1523947](https://doi.org/10.1080/14789949.2018.1523947)

To link to this article: <https://doi.org/10.1080/14789949.2018.1523947>



Published online: 25 Sep 2018.



Submit your article to this journal [↗](#)



Article views: 107



View Crossmark data [↗](#)



# Negative reactions to the sexually abused victims, withdrawing the complaint and outcomes of the litigation: the first data from Turkey

Nilüfer Koçtürk<sup>a</sup> and Çilem Bilginer<sup>b</sup>

<sup>a</sup>Child Advocacy Center, SB Yıldırım Beyazıt University Yenimahalle Education and Research Hospital, Ankara, Turkey; <sup>b</sup>Child and Adolescent Psychiatry Department, Karadeniz Technical University, Trabzon, Turkey

## ABSTRACT

In order to provide psychosocial services to children with sexual abuse (SA) histories, their needs and problems should be initially identified. In this study, it is intended to determine the psychosocial problems of victims. Participants were 73 victims between aged between 16 and 21. A telephone interview form was used to collect the study data. It is found that there were several problems noted by victims, including underage marriage (15.1%), teenage pregnancy (6.9%), revictimization (13.7%), need for psychiatric support (21.9%) as well as negative social reaction (84.4%) and not being supported by family (41.1%). One-third of the victims (30.1%) had withdrawn the complaint for reasons such as SA being heard among social circle, the negative effect of court process on psychological well-being, make a new beginning and reasons related to the suspects. Finally, it was found out that 21.9% of the parents did not know the outcome of the litigation, 34.2% of them were satisfied with the case result, 43.8% of them were not satisfied with the penalty, 43.8% of the litigation process was ended in favor of the suspect and 43.9% of the suspects were punished. This study shows the need for prevention and intervention studies to solve the problems of SA victims, and it is essential to make the justice system child-friendly.

**ARTICLE HISTORY** Received 16 March 2018; Accepted 10 September 2018

**KEYWORDS** Child sexual abuse; underage marriage; revictimization; social reactions; litigation

## Introduction

Childhood sexual abuse (SA) is a long-lasting traumatic experience which can affect an individual's whole life and can result in various psychiatric disorders such as major depression and post-traumatic stress disorder (Gencer, Ozbek, Ozyurt, & Kavurma, 2016; Kilicoglu, 2010). The effects of these problems may last into adolescence (Koçtürk & Bilge, 2017) and adulthood (Roberts, O'Connor,

**CONTACT** Nilüfer Koçtürk  [nilkeser@hacettepe.edu.tr](mailto:nilkeser@hacettepe.edu.tr)

This study includes psychologic and legal contents of the study named "Career development and educational status of the sexual abuse victims".

© 2018 Informa UK Limited, trading as Taylor & Francis Group

Dunn, & Golding, 2004). For example, it was reported that SA victims could become pregnant during adolescence and could experience compliance problems with their children and that their well-being was low during their adulthood (Roberts et al., 2004).

Existing literature do not offer clear data regarding the prevalence of SA, which can be associated with low SA disclosure rates among victims. Several studies demonstrate that the non-disclosure of SA may even reach 67% (Brenner & Ben-Amitay, 2015). Among the reasons why victims do not disclose SA are potential negative reactions from family, social circle (stigmatization, disbelief, etc.) and abuser, as well as distrust in the legal system (Kisanga, Nystrom, Hogan, & Emmelin, 2011; McElvaney, Greene, & Hogan, 2014; Münzer et al., 2016; Ullman, 2007). Unfortunately, some victims who disclosed SA may encounter negative reactions from their social circle as they expected prior to disclosure (Brenner & Ben-Amitay, 2015; McElvaney et al., 2014; Ullman, 2007), which may, in addition to SA, further contribute to the new traumas and psychological problems (Brenner & Ben-Amitay, 2015; Coffey, Leitenberg, Henning, Turner, & Bennett, 1996; Ullman, 2007). For instance, a study demonstrated that victims who faced negative reactions following SA disclosure were more likely to face SA revictimization in their adulthood (Brenner & Ben-Amitay, 2015). Brenner and Ben-Amitay (2015) found that revictimization rate among SA victims was estimated as 70%. In addition, 66.67% of sexually revictimized individuals did not disclose SA, and 30.95% of those who disclosed SA encountered negative reactions while only 2.38% of them received support from their family and social circle. Similarly, participants in a hypothetical study were asked to read short stories about SA and decide who was responsible for the SA, and it was reported that participants mostly accused the victim for SA revictimization and that male and younger participants tend to accuse the victim more (Theimer & Hansen, 2017). Another study underlined the impact of stigmatization and self-accusation on the psychological stress among SA female victims during adulthood (Coffey et al., 1996). These findings underline the importance of reactions from social circle following SA disclosure for victims' well-being during childhood and adulthood.

Although it was reported in the literature that SA victims faced negative reactions and behaviors from their social circle following disclosure, these reactions and behaviors are not clarified, and the findings about which victims faced most negative reactions greatly vary. For example, a study on SA victims under 14 reported that victims who were sexually abused by their relatives encountered more negative reactions compared to those sexually abused by strangers and that negative reactions to SA victims over 14 did not vary depending on their relationship with the abuser (Ullman, 2007). Another study demonstrated that 45.2% of the victims encountered positive reactions from their social circle, 64.3% of the victims were believed by their families and professionals, 61.9% of the victims were emotionally supported and 70.4% victims were helped by officials such as doctors and the police (Münzer et al.,

2016). On the other hand, no detailed study which focuses on the problems encountered by victims following their SA disclosure exists in Turkey. Only one study defines the problems experienced by 60 female victims aged between 9 and 17 in the legal process (Zengin, 2014). Zengin (2014) found that 38.3% of the victims and 15.3% of their families did not disclose SA, while 85% of the families applied to the court in Turkey. In another study on judges and prosecutors, the participants were asked to assess the most common problems encountered by participants (Yildiz, 2012). The findings indicated that the most common problems were condemnation of the society and social circle (83.5%), being shamed for losing virginity (72%), insufficiency of medical specialists (63%), excessive accusation and reactions by the family (61.5%) and negative reactions from victims' family, relatives and friends (62%; Yildiz, 2012). A study which assessed the testimonies of the victim and suspects found out that 23.3% of the litigants did not believe in and 16.7% of them did not support the victim (Gonultas, 2013). The same study reported that belief in the victim and compliance between mother and child prior to SA did not suffice to fully support the victim although all of the witnesses supported the victim.

Parents' belief in and support for the victim are important factors in the prevention of withdrawal of complaint and continuation of litigation process. However, it was demonstrated in the literature that various factors caused withdrawal of complaint (Christensen, Sharman, & Powell, 2016; Parkinson, Shrimpton, Swanston, O'Toole, & Oates, 2002). For instance, victims or parents avoided litigation or withdrew their complaints for reasons such as insufficient evidence of SA, prevention of stress for the child, protection of the child, the abuser's threats, the child's unwillingness to testify, the victim's minority or developmental problems, giving the abuser a second chance or protection of the abuser (Parkinson et al., 2002). Another study indicated that 52 of 659 SA victims withdrew their complaints, 84.3% of the victims were sexually abused by someone outside the family, 44.2% of SA included penetration and 78.8% of the victims were sexually abused only once (Christensen et al., 2016). Furthermore, it was found out that the child and suspect's age and sex, the relationship between the victim and abuser (outside the family) and SA frequency (single) were factors that led to withdrawal of complaint. In Turkey, the single study conducted on the withdrawal of complaint reported that the rates of withdrawal of complaint was 9.3% ( $n = 4$ ) among incest cases, while this rate was 2.2% ( $n = 4$ ) for all domestic and extra-familial SA cases (Gencer et al., 2016).

When the literature is analyzed in terms of suspects sentenced for SA, it can be observed that the sentences vary depending on the type of SA as well as the victim and abuser's conditions. Patrick and Marsh (2011) demonstrated that SA suspects were sentenced to 147.14 months in prison on average and that the sentence increased if the number of SA was high, the victim was fairly younger than the abuser, the number of victims in a SA was

more than one and the victim and abuser were not closely related. Similarly, another study underlined the fact that the type (e.g. including penetration), number and severity of SA and the victim's relatively young age may lead to a heavier sentence for the abuser (Coburn, Chong, & Connolly, 2017). On the other hand, the existence of medical evidence for SA and the victim's behavioral problems following SA can be considered as other variables which may influence litigation process and sentence. Contrary to expectations, a recent study found out that it was the child's behavioral problems rather than medical evidence which determined whether the suspect was convicted of SA or not (Lewis, Klettke, & Day, 2014). The same study reported that 21% of the suspects were acquitted of SA when the victim displayed behavioral problems (e.g. sleep disorder, introversion), while 32% of the suspects were acquitted when the litigants submitted medical evidence. Furthermore, it was observed that it was seven times more likely for a suspect to be convicted of SA when the victim displayed behavioral problems. However, it was found out that the victim's externalization signs predict the suspect's acquittal of SA.

In Turkey, no study focusing on the court decisions and sentences for SA cases have been so far conducted. However, it is possible to find a study which analyzes the outcomes of SA cases and demonstrates that 111 cases were brought to the High Criminal Court between 2006 and 2010 and only 67 of them resulted in conviction (Yildiz, 2012).

Reitsema and Grieten (2016) stated that cultural values, beliefs and family dynamics could play a role in etiology or continuation of SA and affect feedback process. For instance, in some conservative societies, it is believed that male sexual aggressiveness should be controlled by women through their behaviors and clothing. In addition, it was also underlined that SA could be associated with moral values and honor in such societies and that the victim's stigmatization by the society could be prevented when the family internalizes social values although it also prevented social support for the victim (Ozturk, 2009). Therefore, it can be inferred that social and cultural values play an important role in terms of reactions to the victims following SA, which makes Turkey suitable for analyzing problems following SA disclosure because it displays various cultural values in different regions.

In summary, in order to provide psycho-social services to children with SA histories, their needs and problems should be initially identified. Thus, it is possible to prevent and intervene in SA cases to help children and their families. However, the limited number of studies on problems encountered by SA victims requires carrying out new studies on this topic. In addition, despite numerous international studies on this topic, it is of utmost importance to deal with it in Turkey where a patriarchal culture prevails because reactions to SA victims, withdrawal of complaint and sentences in a court case are heavily influenced by cultural elements. In the light of these factors,

this study aims to identify problems encountered by SA victims, reactions to them from their social circle, withdrawal of complaint, court decisions and various related factors. The following research questions will be answered within the framework of this study:

- (a) Which problems (underage marriage, adolescent parenthood, lack of family support, SA revictimization and need for psychiatric support) do victims encounter following SA disclosure?
- (b) Which social reactions from their social circle do SA victims encounter following SA disclosure?
- (c) Does the negative reaction from social circle to the victim display significant differences in terms of various variables (domestic SA, threat or physical violence by the abuser, the number of SA and penetration) peculiar to SA?
- (d) Why do SA victims withdraw their complaints?
- (e) Do withdrawal of complaints display significant differences in terms of various variables peculiar to SA (domestic SA, the number of SA and penetration) and social circle (negative reactions from social circle following SA disclosure, disbelief in the victim, accusation and psychological pressure)?

## **Method**

### **Participants**

This is a descriptive study and uses convenience sampling as a sampling method. The participants of this study are 73 SA victims aged between 16 and 21, and their average of age is 18.88 ( $SD = 1.7$ ). While 27.4% of the participants are under 18, 72.6% of them ( $n = 53$ ) are above 18. The participants were sexually abused between the age of 9 and 17 years, and randomly selected from victims who applied Ankara Child Advocacy Center (ACMC) between 2012 and 2013. The male and female rates of the study group are 7% ( $n = 5$ ) and 93% ( $n = 68$ ), respectively. Sixty-three percent ( $n = 46$ ) of the victims were sexually harassed, while 37% ( $n = 27$ ) of them were vaginally or anally penetrated. 9.6% of the victims were sexually abused by a family member ( $n = 7$ ), 13.7% of them by a boyfriend ( $n = 10$ ), 16.4% of them by a relative ( $n = 12$ ), 46.5% of them by an acquaintance ( $n = 34$ ) and 13.7% of them by a stranger ( $n = 10$ ). While 53.4% ( $n = 39$ ) of the victims were subjected to physical violence, 46.6% of them ( $n = 34$ ) to threats and 56.2% of them ( $n = 41$ ) to SA revictimization.

75.4% ( $n = 55$ ) of the victims' mothers participating in the study are graduates of middle school or lower, while 24.6% ( $n = 18$ ) of them are graduates of high school or university. On the other hand, 74.5% ( $n = 54$ ) of

their fathers are graduates of middle school or lower, while 25.5% ( $n = 19$ ) of them are graduates of high school or university. In addition, 61.6% ( $n = 45$ ) of mothers are housewives, 4.1% ( $n = 3$ ) of them are retired and 34.3% ( $n = 25$ ) of them actively work. On the other hand, 90.5% ( $n = 66$ ) of father actively work, while 2.7% ( $n = 2$ ) of them are unemployed and 6.8% of them are retired ( $n = 5$ ).

## **Measures**

### ***Telephone interview form***

An information form developed by the authors was used to collect information about variables such as SA victims' demographic features, reactions to their SA, withdrawal of complaint and court decisions. A total of 20 questions such as 'What are the negative reactions to/problems arising out of SA?', 'Who reacted negatively against you?' and 'What was the court decision?' were asked in the form.

## **Procedure**

This study was conducted between January and March 2017 following the approval of local ethical committee. Because it aimed to monitor SA victims' experiences, the victims were assessed 4 years after they disclosed SA. For this purpose, the victims who applied Ankara Child Advocacy Center (ACMC) were included in the study. The telephone numbers of victims and their parents were collected from their legal files in order to create a working group. The criteria for victims' participation in this study were non-existence of a chronic disease and mental retardation, SA and harassment under 18, and the reliability of the victim's testimony approved by both legal and family interviewer. The last criterion was included in order to accurately assess withdrawal of complaint. Additionally, the criteria for exclusion from the study were inability to contact the victim via telephone and receive a verbal consent from the victim and his/her parents.

In the study design, the victims and their parents were asked to give verbal consent in order to take cultural elements into consideration. In this respect, the victims' parents were informed beforehand about the study and were asked whether they would allow their children to participate in the study. Afterwards, the victims were interviewed via telephone and asked to give verbal consent. Telephone Interview Form was used to ask the victims and their parents various questions, and the answers were marked in the form. The parents were only asked questions about withdrawal of complaint and court decisions. Other questions were directed at victims, and the answers were written on the form.

It was aimed to contact 100 victims who fulfilled the criteria for participation in the study. However, 26 victims could not be contacted because their telephone numbers changed, and a victim's parents did not give verbal consent due to the problems in the legal process. Therefore, 73 victims finally participated in the study. When the files belonging to 26 victims who could not be contacted via telephone were analyzed, it was found out that 26.9% ( $n = 7$ ) of abusers was a family member, 35% ( $n = 9$ ) of them was a close relative, 19.2% ( $n = 5$ ) of them was an acquaintance, 15.4% ( $n = 4$ ) of them was a sexually exploiting customer and 3.8% ( $n = 1$ ) of them was a stranger.

### **Analysis**

The data obtained from the study were statistically analyzed via SPSS 21.0. Chi-square test and descriptive statistics (percentage and frequency) were used to test sub-problems. The maximum margin of error was considered as .05 in this study.

### **Results**

As for the first sub-problem of the study, underage marriage, adolescent parenthood, lack of family support, SA revictimization and need for psychiatric support were analyzed as the victims' problems. It was found out that 26% ( $n = 19$ ) of the victims got married following SA, and 57.9% ( $n = 11$ ) of those were under 18, while 42.1% ( $n = 8$ ) were aged between 18 and 21. 2.7% ( $n = 2$ ) of the victims got married for the second time at the age of 19. In addition, 20.5% ( $n = 15$ ) of the victims gave birth to a child and 6.9% ( $n = 5$ ) of them gave birth under 18.

It is found that 41.1% of the victims stated that they were not supported by their family following SA. In addition, seven victims (9.6%) applied to the public orphanages. Seventy-one percent ( $n = 5$ ) of these victims were satisfied with the orphanage, while 28.6% ( $n = 2$ ) of them were dissatisfied. On the other hand, 42.9% ( $n = 3$ ) of these seven victims withdrew their complaints and were brought back to their families. During their interview at APMC, 13.7% ( $n = 10$ ) of the victims stated that they were revictimized by another abuser. Additionally, 65.8% ( $n = 48$ ) of the victims received psychological support following SA, while 21.9% ( $n = 16$ ) of them made it clear that they still needed psychiatric support. Ten percent ( $n = 7$ ) of the victims stated that their social circle fully knew SA, while 52.1% ( $n = 38$ ) of them stated that SA was partially known by their social circle. Fifty-six percent ( $n = 7$ ) of these 45 victims who stated that SA was fully known by their social circle stated that they did not encounter any negative reactions, while 84.4% ( $n = 38$ ) of them stated that they faced negative reactions. The negative



reactions to victims from social groups are listed in Table 1. It can be observed that mostly family members (31.5%), relatives (34.2%) and friends (21.9%) reacted negatively against victims. When the types of negative reactions to SA are analyzed, it can be noted that nearly 48% ( $n = 35$ ) of the victims were accused, 41% ( $n = 30$ ) of them were stigmatized, 33% ( $n = 24$ ) of them were excluded from social circles, 27% ( $n = 20$ ) of them were disbelieved by their social groups (e.g. family members, relatives, friends, teachers) and 22% ( $n = 16$ ) of them experienced psychological pressure (Table 2). When negative reactions are analyzed in terms of various variables peculiar to SA, 100% ( $n = 7$ ) of domestic SA encountered negative reactions. Because the numbers of pores lower than 5 exceeded 20% of total number of pores (50%) in the chi-square test, the results of significance test could not be analyzed. Regardless of negative reactions from social circle, when it comes to threats [ $\chi^2$  ( $sd = 1, n = 73$ ) = 3.80,  $p > .05$ ] and physical violence [ $\chi^2$  ( $sd = 1, n = 73$ ) = .89,  $p > .05$ ] by the abuser, revictimization [ $\chi^2$  ( $sd = 1, n = 73$ ) = 1.22,  $p > .05$ ] or penetration [ $\chi^2$  ( $sd = 1, n = 73$ ) = 1.38,  $p > .05$ ], no significant differences were observed among average values.

It was informed by the parents that 30.1% ( $n = 22$ ) of the victims withdrew their complaints for various reasons. The reasons for withdrawal of complaint are given in Table 3. It can be inferred that because nearly 41% ( $n = 9$ ) of the victims were afraid of SA being heard, 36% ( $n = 8$ ) of them tried to hide SA, and 27% ( $n = 6$ ) of them were either afraid of the suspect, tried to prevent the suspect's family from being affected by their complaint or were related to the suspect, they withdrew their complaints. In addition,

**Table 1.** The negative reactions to victims from social groups.

Social Groups	Yes $n$ (%)	No $n$ (%)	Not knowing SA $n$ (%)
Family members	23 (31.5%)	50 (68.5%)	0
Relatives	25 (34.2%)	19 (26%)	29 (39.7%)
Friends	16 (21.9%)	25 (34.2%)	32 (43.8%)
Neighbors	11 (15.1%)	32 (43.8%)	30 (41.1%)
Suspect's family	11 (15.1%)	62 (84.9%)	0
School environment (Administrators, teachers, etc.)	4 (5.5%)	38 (52.1%)	31 (42.5%)

Note. SA = Sexual abuse

**Table 2.** The types of negative reactions to SA.

	Yes $n$ (%)	No $n$ (%)
Being accused	35 (47.9%)	38 (52.1%)
Being stigmatized	30 (41.1%)	43 (58.9%)
Being excluded from social circles	24 (32.9%)	49 (67.1%)
Being were disbelieved	20 (27.4%)	53 (72.6%)
Psychological pressure	16 (21.9%)	57 (78.1%)

Note. SA = Sexual abuse

**Table 3.** The victims' reasons for withdrawal of complaint.

	Yes <i>n</i> (%)	No <i>n</i> (%)
Being afraid of SA being heard	9 (40.9%)	13 (59.1%)
Hiding SA via saying false statement	8 (36.4%)	14 (63.6%)
Fearing of the SA's psychological effect on victim	6 (27.3%)	16 (72.7%)
Reasons related to the suspect (fear, not wanting to hurt, etc.)	6 (27.3%)	16 (72.7%)

Note. SA = Sexual abuse; N = 22

it was found out that 85.7% ( $n = 6$ ) of domestic SA victims and 68.8% ( $n = 11$ ) of physical violence victims withdrew their complaints. As the number of pores lower than 5 exceeded 20% of total number of pores in the chi-square test, the results of significance test could not be analyzed. On the other hand, significant differences were found between the withdrawal of complaint and revictimization [ $\chi^2$  ( $sd = 1$ ,  $n = 73$ ) = 7.58,  $p < .05$ ], family members [ $\chi^2$  ( $sd = 1$ ,  $n = 73$ ) = 7.75,  $p < .01$ ] or relatives' [ $\chi^2$  ( $sd = 2$ ,  $n = 73$ ) = 6.18,  $p < .05$ ] negative reaction to SA and disbelief in the victim [ $\chi^2$  ( $sd = 1$ ,  $n = 73$ ) = 11.67,  $p < .01$ ]. However, no significant difference was found in terms of penetration [ $\chi^2$  ( $sd = 1$ ,  $n = 73$ ) = 1.275,  $p > .05$ ] and accusation of the victim  $\chi^2$  ( $sd = 1$ ,  $n = 73$ ) = .55,  $p > .05$ ]. These results suggest that among victims who withdrew their complaints, 68.2% ( $n = 15$ ) of them were subjected to SA revictimization by the same abuser, 72.7% ( $n = 16$ ) of them were sexually harassed, 54.5% ( $n = 12$ ) of them faced negative reactions from their family members, 81.3% ( $n = 13$ ) of them from relatives, and 54.5% ( $n = 12$ ) of them were disbelieved.

Telephone interviews were used to gather information from the parents regarding the court decisions. 43.8% ( $n = 32$ ) of the victims' parents stated that the case was closed, 21.9% ( $n = 16$ ) of them was not informed about the court decision, 9.6% ( $n = 7$ ) of them stated that the abuser benefited from supervised release thanks to his age, 2.7% ( $n = 2$ ) of them stated that litigation process had continued for 4 years following SA, 4.1% ( $n = 3$ ) of them stated that the abuser was sentenced to 2 years in prison, 4.1% ( $n = 3$ ) of them to 2–5 years in prison, 5.5% ( $n = 4$ ) of them to 5–10 years in prison, 6.8% ( $n = 5$ ) of them to 10–20 years in prison and 1.4% ( $n = 1$ ) of them to 25 years in prison. As a result, 43.9% ( $n = 25$ ) of the suspects were sentenced, while 43.8% ( $n = 32$ ) of the litigation process was ended in favor of the suspect. In addition, while 34.2% ( $n = 25$ ) of the victims' parents were satisfied with the court decision, 43.8% ( $n = 32$ ) of them were dissatisfied with the penalty and 21.9% ( $n = 16$ ) of them did not state an opinion because they were not informed about the court decision.

## Discussion

This study aims to analyze individual, social and legal problems that SA victims faced after legally disclosing SA. The initial findings demonstrate that one-fourth of the victims got married and 57.9% of them got married under 18, while 6.9% of them gave birth to a child under 18. 9.6% of them applied to a public orphanage, 13.7% of them were revictimized by another SA and 21.9% of them still needed psychiatric support. No similar study has so far been conducted in Turkey. The international studies, on the other hand, underline the fact that SA victims may become pregnant and their well-being is not at a high level during adulthood (Roberts et al., 2004), and that SA revictimization rate may vary between 15% and 79% (Brenner & Ben-Amitay, 2015; Roodman & Clum, 2001). Although the oldest participant in this study is 21-years old, the high rate of marriage among study groups may be attributed to sociocultural differences as well as SA which might have accelerated the process. Studies stress the role of sociocultural and familial elements such as socioeconomic level, social support, lack of education, patriarchal system and traditions leading to underage marriage (e.g. Burcu, Yildirim, Sirma, & Saniyaman, 2015; Koçtürk, Bilge, & Yüksel, 2018). However, further causal studies focusing on more samples are needed in order to assess the relationship between SA and underage marriage.

It was observed in this study that victims whose SA victimization was discovered by their social circle mostly encountered negative reactions (84.4%) as 41.1% of them did not receive family support, and they faced negative reactions such as accusation, stigmatization, exclusion and disbelief from their family members, relatives and friends. Similarly, other studies in the literature report that victims encountered negative reactions from their social circle following SA disclosure (Brenner & Ben-Amitay, 2015; Gonultas, 2013; McElvaney et al., 2014; Münzer et al., 2016; Ullman, 2007). The high rates reported in this study may result from various factors such as samples' age, sex and educational level as well as social and cultural values/beliefs (Ozturk, 2009; Reitsema & Grietens, 2016; Theimer & Hansen, 2017). On the other hand, contrary to expectations, no significant differences were found in terms of negative reactions to the victim such as threat or physical violence by the abuser, revictimization and penetration. In other words, despite the variables such as threat and physical violence which imply a use of force in SA, the victim's social circle may still display negative reactions such as accusation, stigmatization, exclusion or disbelief. In the literature, it was stated that the victim's social circle does not necessarily support her even when they believe her SA disclosure and that SA victimization may lead to further accusations towards the victim, which may be attributed to factors such as age and sex of the social circle (Theimer & Hansen, 2017). When all of these factors are taken into account, it can be

suggested that negative reactions to the victims following SA disclosure can be associated with the nature of social circle (e.g. their view on SA, internalized gender roles) rather than the victim herself and SA conditions. Thus, further causal studies are needed to reach a more accurate conclusion on this topic.

Another finding in this study is that nearly one-third of SA victims withdrew their complaints and that among most common reasons for this are being afraid of SA discovered by social circle, the prevention of any psychological trauma for the victim, hiding and covering SA, and other factors related to the suspect (being afraid of the suspect, domestic SA, etc.). A significant relationship was observed between the withdrawal of complaint and SA revictimization, negative reactions to SA from family members and friends and disbelief in the victim. However, no significant differences were found in terms of penetration and accusation of the victim following SA. The fact that most of the victims who withdrew their complaints were sexually harassed (72.7%) may be associated with the underestimation of SA by the victim or her social circle. On the other hand, most of the victims who withdrew their complaints were revictimized by the same abuser (68.2%), and it was demonstrated that these victims were disbelieved (54.5%) and faced negative reactions from their family members (54.5%) and relatives (81.3%). These results may indicate that SA revictimization is a factor which influences the belief of social circle in the victim's SA disclosure. Additionally, it also indicates the importance of social support from friends and family on the withdrawal of complaint. Similarly, the first and foremost reasons why the victims' parents withdrew their complaint was that 'they were afraid of SA being discovered by their social circle', demonstrating the importance attached to the social reactions. Previous studies also report that SA revictimization may cause the victim and her parents to be accused (Theimer & Hansen, 2017), and decrease their family and social support (Koçtürk & Bilge, 2018). Another important finding is the fact that 85.7% of SA victims withdrew their complaints, which may result from the tendency to protect the abuser if he is a family member or avoid any exhausting litigation process due to the sensitive conditions of SA. Various studies in the literature report that the victims who withdrew their complaints were subjected to extrafamilial SA once (Christensen et al., 2016). Furthermore, it was also clearly stated that the parents withdrew their complaints to prevent the victim from experience any further stress, give the abuser a second chance or protect the abuser from being sentenced (Christensen et al., 2016; Parkinson et al., 2002).

Finally, the court decisions were analyzed within the framework of this study. While 34.2% of the victims' parents were satisfied with the court decision, 43.8% of them were dissatisfied the penalty and 21.9% of them was not informed know the court decision. In addition, while 43.9% of the

suspects were sentenced, 43.8% of the litigation process was ended in favor of the suspect. It was found out that 22 out of 32 victims whose cases were closed actually withdrew their complaints. As a result, 10 victims whose testimonies were reliable and cases were closed were found in ACMC. When the victims who withdrew their complaints are not included, it can be considered that the prison sentences given to the suspects whose court decisions are known generally overlap those reported in the literature (Lewis et al., 2014; Yildiz, 2012). However, given the significant relationship between the prison sentences and SA (Coburn et al., 2017; Patrick & Marsh, 2011), it can be argued that new studies are needed to compare alleged SA and prison sentences even though the findings of this study overlap those in the literature. On the other hand, it is a striking finding that one out of five victims' parents was not informed about the court decision, which can be considered as the parents' negligence and an obstacle for the protection of children's rights. The representatives of Ministry of Family and Social Policies in ACMC are not responsible for monitoring the legal process (Yüksel et al., 2013). However, considering the parents who were dissatisfied with the legal process and thus withdrew their complaints to prevent their children from being harmed by this process, it is evident that a child-centered legal system which guides and advises victims and their parents are necessary in order to protect children's rights. Erzurumluoğlu, also, underlined the fact that Turkey is underdeveloped in terms of victims' rights compared to European countries and stressed the need for transition to a 'victim-centred' legal system rather than a 'suspect-centred' legal system (Erzurumluoglu, 2013). In addition, it was reported that the number of legal specialists which can interview children victimized by abusers is relatively low and that the police, prosecutors and judges should be trained on this topic (Yildiz, 2012). It is evident that regulations on this topic will eliminate withdrawal of complaints, protect the victims' rights and increase the satisfaction with the legal system.

In conclusion, it was demonstrated in this study that children as victims of SA may face various individual, family, social and legal problems and that some of these problems may even persist during their adulthood. It is of utmost importance to intervene and prevent problems that children face such as underage marriage, adolescent parenthood, lack of family support, SA revictimization, psychiatric symptoms, negative reactions from social circle and withdrawal of complaint due to various reasons, thus creating a child-friendly legal system. For this purpose, the victims and their parents must receive psycho-social and legal support following SA disclosure. The number of specialists working at Ministry of Justice Victims' Rights Unit must be increased. In addition, all children should be compulsorily provided with psychological and psychiatric consultations. Furthermore, Ministry of Family and Social Policies, which is legally responsible for the protection of the

children from SA, must monitor sexually abused children and thus prevent any loss of rights during the legal process. Additionally, various institutions and foundations (e.g. schools, public training centers) must inform every segment of the society about the ways in which victims should be positively approached. Similarly, schools may organize peer counseling in order to prevent negative reactions to the victims from their friends and discourage underage marriage.

### **Limitations**

This study has some limitations. First limitation is the fact that the victims and their parents participating in the study are people who have not changed their telephone numbers. It is also reported in the literature that SA victims are sometimes difficult to monitor for research purposes. For instance, in a study conducted on 118 victims who participated in the study following the legal interview and were monitored after 9 months, 51.7% of the victims' parents and friends could not be contacted although their numbers were available and financial incentives were provided (Zajac, Ralston, & Smith, 2015). In addition, the same study reports that 15.5% of the victims refused to participate in the study. Some parents who refused to participate in the study found it stressing. On the other hand, the percentage of parents refusing to participate was 1% in this study, while 26% of the parents could not be contacted. The reason underlying this may be attributed to the fact that the abuser is a family member or a close relative. The only mother who refused to participate in the study was dissatisfied with the result, felt anger against the abusers and stated that the abusers should be investigated. Second, the long time span between SA disclosure and participation in the study may have caused the victims to forget the problems that they faced following SA or they may have decided to hide their problems not to upset their parents. Therefore, it may be more fruitful for future studies on SA to monitor victims for a shorter period (e.g. once a year), more than once and face-to-face. Finally, another limitation of this study is that male victims were outnumbered by female victims in the working group. Because Turkey represents a patriarchal society, reactions to SA from social circles, the rate of withdrawal of complaint and court decisions may vary from gender-to-gender. In this respect, further studies are needed to analyze the impact of gender on these variables.

### **Acknowledgments**

Special acknowledgment is due Özlem Ulaş Kılıç for assistance in the study design.

## Disclosure statement

No potential conflict of interest was reported by the authors.

## ORCID

Nilüfer Koçtürk  <http://orcid.org/0000-0001-6124-1842>

## References

- Brenner, I., & Ben-Amitay, G. (2015). Sexual revictimization: The impact of attachment anxiety, accumulated trauma, and response to childhood sexual abuse disclosure. *Violence and Victims*, 30(1), 49–65.
- Burcu, E., Yildirim, F., Sirma, Ç. S., & Saniyaman, S. (2015). Çiçeklerin kaderi: Türkiye’de kadınların erken evliliği üzerine nitel bir araştırma [Fate of the flowers: A qualitative research on early marriage of Turkish women]. *Bilig*, 73, 63–98.
- Christensen, L. S., Sharman, S. J., & Powell, M. B. (2016). Identifying the characteristics of child sexual abuse cases associated with the child or child’s parents withdrawing the complaint. *Child Abuse & Neglect*, 57, 53–60.
- Coburn, P. I., Chong, K., & Connolly, D. A. (2017). The effect of case severity on sentence length in cases of child sexual assault in Canada. *Journal of Child Sexual Abuse*, 26(3), 319–333.
- Coffey, P., Leitenberg, H., Henning, K., Turner, T., & Bennett, R. T. (1996). Mediators of the long-term impact of child sexual abuse: Perceived stigma, betrayal, powerlessness, and self-blame. *Child Abuse & Neglect*, 20(5), 447–455.
- Erzurumluoglu, B. (2013). Türkiye ve Avrupa Birliğinde suç mağdurlarının haklarının korunması: Türkiye ‘sanık merkezli’ adalet sisteminden ‘mağdur merkezli’ adalet sistemine geçiş sürecinin neresinde bulunmaktadır? [Protecting the rights of victims of crime in Turkey and the European Union: Where is Turkey in the transition period from a ‘perpetrator based’ justice system to a ‘victim based’ justice system?]. *Adıyaman Üniversitesi Sosyal Bilimler Enstitüsü Dergisi*, 13(6), 77–98.
- Gencer, O., Ozbek, A., Ozyurt, G., & Kavurma, C. (2016). A comparison of extra and intra-familial sexual abuse of children and adolescents. *Anatolian Journal of Psychiatry*, 17(1), 56–64.
- Gonultas, M. B. (2013). *The examination of common features of suspects’ expressions and the construction of sexual violence cases against children* [Unpublished doctoral dissertation, University of Istanbul]. Retrieved from <https://tez.yok.gov.tr>
- Kilicoglu, A. G. (2010). *Comparative investigation of the reaction to trauma in sexually abused children and adolescents and their parents* (Unpublished specialization thesis, University of Uludağ). Retrieved from <https://tez.yok.gov.tr>
- Kisanga, F., Nystrom, L., Hogan, N., & Emmelin, M. (2011). Child sexual abuse: Community concerns in urban Tanzania. *Journal of Child Sexual Abuse*, 20(2), 196–217.
- Koçtürk, N., & Bilge, F. (2017). The irrational beliefs and the psychological symptoms of the sexual abuse victims. *Dusunen Adam: Journal of Psychiatry & Neurological Sciences*, 39(3), 113–123.
- Koçtürk, N., & Bilge, F. (2018). Social support of adolescent survivors of child sexual abuse and sexual revictimization in Turkey. *Journal of Child Sexual Abuse*, 27(1), 38–52.

- Koçtürk, N., Bilge, F., & Yüksel, F. (2018). The individual and familial characteristics of girls who have underage marriage, their reasons for dropping out, and marital problems. *Turkish Psychological Counseling and Guidance Journal*, 8(50), 1–28.
- Lewis, T. E., Klettke, B., & Day, A. (2014). The influence of medical and behavioral evidence on conviction rates in cases of child sexual abuse. *Journal of Child Sexual Abuse*, 23(4), 431–441.
- McElvaney, R., Greene, S., & Hogan, D. (2014). To tell or not to tell? Factors influencing young people's informal disclosures of child sexual abuse. *Journal of Interpersonal Violence*, 29(5), 928–947.
- Münzer, A., Fegert, J. M., Ganser, H. G., Loos, S., Witt, A., & Goldbeck, L. (2016). Please tell! Barriers to disclosing sexual victimization and subsequent social support perceived by children and adolescents. *Journal of Interpersonal Violence*, 31(2), 355–377.
- Ozturk, A. B. (2009). Çocuğun cinsel istismarı ve aileyle çalışma [Child sexual abuse and working with the family]. *Toplum ve Sosyal Hizmet Dergisi*, 20(2), 89–98.
- Parkinson, P. N., Shrimpton, S., Swanston, H. Y., O'Toole, B. I., & Oates, R. K. (2002). The process of attrition in child sexual assault cases: A case flow analysis of criminal investigations and prosecutions. *Australian & New Zealand Journal of Criminology*, 35(3), 347–362.
- Patrick, S., & Marsh, R. (2011). Sentencing outcomes of convicted child sex offenders. *Journal of Child Sexual Abuse*, 20(1), 94–108.
- Reitsemä, A. M., & Grietens, H. (2016). Is anybody listening? The literature on the dialogical process of child sexual abuse disclosure reviewed. *Trauma, Violence, & Abuse*, 17(3), 330–340.
- Roberts, R., O'Connor, T., Dunn, J., & Golding, J.; ALSPAC Study Team. (2004). The effects of child sexual abuse in later family life; mental health, parenting and adjustment of offspring. *Child Abuse & Neglect*, 28(5), 525–545.
- Roodman, A. A., & Clum, G. A. (2001). Revictimization rates and method variance: A meta-analysis. *Clinical Psychology Review*, 21(2), 183–204.
- Theimer, K., & Hansen, D. J. (2017). Attributions of blame in a hypothetical child sexual abuse case: Roles of behavior problems and frequency of abuse. *Journal of Interpersonal Violence*. doi:10.1177/886260517716943
- Ullman, S. E. (2007). Relationship to perpetrator, disclosure, social reactions, and PTSD symptoms in child sexual abuse survivors. *Journal of Child Sexual Abuse*, 16(1), 19–36.
- Yildiz, Y. (2012). *Crime of sexual abuse of children and the problem of secondary victimization* (Doctoral dissertation, University of Istanbul). Retrieved from <https://tez.yok.gov.tr>
- Yüksel, F., Keser, N., Odabaş, E., Kars, G. B., Yurtkulu, F., Daşkafa, F., ... Cayrat, E. (2013). Çocuk İstismarı ve Çocuk İzlem Merkezleri [Child abuse and Child Advocacy Centers]. *Tıbbi Sosyal Hizmet Dergisi*, 2, 18–23.
- Zajac, K., Ralston, M. E., & Smith, D. W. (2015). Maternal support following childhood sexual abuse: Associations with children's adjustment post-disclosure and at 9-month follow-up. *Child Abuse & Neglect*, 44, 66–75.
- Zengin, B. Y. (2014). Evaluation and proposed solutions for the sexual abuse cases among 9–17 age group during the forensic period [Unpublished specialization thesis, University of Istanbul]. Retrieved from <https://tez.yok.gov.tr>