

Investigation of Alcohol Use in Adult Forensic Cases Exposed to Sexual Abuse

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ABSTRACT : It is known that sexual abuse applications to Forensic Medicine Institutions are common in Turkey. Although a large number of studies on sexual abuse have been conducted in the national and international literature, it is thought that the effect of alcohol use on sexual abuse has not been sufficiently focused. Therefore, in this study, it was aimed to support scientific knowledge by examining the effect of alcohol use on sexual abuse, age, time elapsed between the time elapsed after exposure to sexual abuse, physical violence findings and time elapsed after the incident and vaginal findings. The data of 40 female cases aged 18 and over who were exposed to sexual abuse who were vaginally examined at the Forensic Medicine Outpatient Clinic of Balıkesir Atatürk City Hospital between 01 November 2021 and 30 September 2022 were retrospectively analyzed. The 40 cases included in the study were in 2 groups: 20 women who were sexually abused immediately after alcohol use and 20 women who were sexually abused without alcohol use; The mean age, the time elapsed between the time between admission to the outpatient clinic, the findings of physical violence and the time elapsed after the incident, and vaginal findings were evaluated. The obtained data were analyzed with SPSS V23. The mean age of the cases included in the study was 27.67 years. It was determined that the average time elapsed between the time of sexual abuse and the time of application to the Forensic Medicine Outpatient Clinic after exposure to sexual abuse was 3.9 days. While 30% of those who were sexually abused without alcohol use had signs of physical violence, it was noted that this rate was 15% in women who were sexually abused immediately after alcohol use. In women who were exposed to sexual abuse, vaginal findings were detected in 5 people in the first 24 hours after the incident, while vaginal findings were not detected on the 21st day. Blood alcohol levels of 20 patients who were sexually abused immediately after alcohol use were found to be 2.1 and above in 3 women. It is thought that alcohol may facilitate sexual abuse and reduce some findings in individuals who are exposed to abuse due to its effect on the body. It is recommended that individuals be informed about sexual abuse and situations that may affect sexual abuse, introduce the resources they will receive help and support, and increase their awareness of the physical and psychological consequences of sexual abuse.

Keywords: Forensic Case, Alcohol Use, Sexual Abuse, Risk

1. INTRODUCTION

It is stated that the actions considered as abuse include a wide range of acts such as aggression, exploitation, perversion, ill-treatment, cruelty, violence, injury, assault, violation and rape [1]. Abuse is generally examined in four groups: physical, sexual, emotional and economic abuse [2]. Sexual abuse is any sexual intercourse with a

woman or a man that is forced and without the consent of the person [3]. Vaginal intercourse with the victim of sexual abuse and anal intercourse without gender discrimination, fellatio (stimulating the male genitalia with the mouth) and cunnilingus (stimulating the female genitalia with the mouth), vaginal or anal penetration, albeit superficial, include situations [4].

Sexual abuse is an event that can be exposed in every society and in every developmental period, regardless of culture, belief and race, and can have devastating consequences in mental, physical and interpersonal relationships [5], and is considered an important problem due to its increasing prevalence. When the literature is examined, it is seen that there has been an increase in studies on sexual abuse recently [5-12]. Studies indicate that children, women and the elderly are more exposed to abuse. For this reason, we can say that sexual abuse can be an important problem that can adversely affect all age groups [13]. In a study, it was determined that 81.3% of the judicial applications were cases of sexual abuse, and it was stated that 33.8% of the cases were removed from the environment where the abuse took place, and 81.3% were taken under protection [14]. The feeling of shame and guilt that may arise in individuals who are exposed to sexual abuse, along with fears of abandonment and punishment [15], may cause this act to be kept a secret. Therefore, the number of cases is thought to be higher than those mentioned [16,17].

The undesirable consequences of alcohol use depending on the amount consumed and the speed of drinking are increasing all over the world. Depending on the amount used, alcohol can suppress the central nervous system and cause a decrease in resistance behaviors to adverse situations [18]. It is believed that alcohol use may cause individuals to be unable to resist sexual abuse because people cannot resist negative situations [19]. In addition, alcohol consumption can pose concrete risks that can be associated with the increase in alcohol-related diseases, decreased quality of life, loss of productivity, and the occurrence of various crimes and accidents [20].

In the study, the data of 40 female cases aged 18 and over who were exposed to sexual abuse who were examined vaginally at the Forensic Medicine Outpatient Clinic of Balıkesir Atatürk City Hospital between November 01, 2021 and September 30, 2022 were retrospectively analyzed. In the study, a total of 40 female cases, including 20 women who used alcohol before exposure to sexual abuse and 20 women who did not use alcohol, were discussed. The aim of this study is to examine and explain the effects of alcohol consumption on sexual abuse findings. Our suggestions are mentioned in order to raise awareness about the situations that may have an impact on sexual abuse and to make the necessary improvements.

2. MATERIALS AND METHODS

The study was planned as a retrospective descriptive in order to examine the effect of alcohol use/non-use of women who were exposed to sexual abuse on physical findings during the examination, so that they could contribute to the field by collecting data in a short time with the available information. In this regard, female individuals who applied to Balıkesir Atatürk City Hospital Forensic Medicine Polyclinic between 01 November 2021 and 30 September 2022; Our sample consisted of 2 groups of sexually abused female individuals aged 18 and over: those who were sexually abused immediately after alcohol use and those who were exposed to sexual abuse without alcohol use. The data were obtained from the records in the medical files of the cases and evaluated with SPSS V23. Necessary ethics committee and Provincial Health Directorate permission (Number: E-30041352-514.19.99-218061332 Date: 03.07.2023; Number: E-51829602-604.01.02-225441533 Date: 27.09.2023).

3. FINDINGS

The mean age of the cases included in the study was 27.67 years. The mean age of the cases who were exposed to sexual abuse without alcohol use was 29.05; The mean age of the patients who were sexually abused immediately after alcohol use was found to be 26.3 years. The mean time elapsed between the exposure of the cases to sexual abuse and the time they applied to the outpatient clinic was 3.9 days. This period was 4.1 days in the group with alcohol use at the time of abuse; In the group without alcohol use, it was found to be 3.7 days.

Physical violence was found in 40% of women who were sexually abused without alcohol use (Table 1).

Table 1. Findings of Physical Violence in Women Exposed to Sexual Abuse Without Alcohol Use

	Number	Percent
No Evidence of Physical Violence	12	60,00
There is evidence of physical violence	8	40,00
Sum	20	100,00

It is noteworthy that 15% of women who are exposed to sexual abuse after alcohol use have signs of physical violence (Table 2).

Table 2. Findings of Physical Violence in Women Exposed to Sexual Abuse After Alcohol Use

	Number	Percent
No Evidence of Physical Violence	17	85,00
There is evidence of physical violence	3	15,00
Sum	20	100,00

In women who have been exposed to sexual abuse, vaginal findings in 5 people in the first 24 hours after the incident; 7 people in 24-48 hours; It was detected in 5 people in 48-72 hours. Vaginal findings were not detected on the 4th, 6th, 7th, 10th, 15th and 21st days after sexual abuse (Table 3).

Table 3. Time Elapsed from the Event and Vaginal Findings After Exposure to Sexual Abuse

Time elapsed from the event	No vaginal findings	There is a vaginal finding
First 24 Hours	1(%16.7)	5(%83.3)
24-48 Hours	4(%36.4)	7(%63.6)
48-72 Hours	5(%50)	5(%50)
4 Days	4(%100)	0
6 Days	1(%100)	0
7 Days	3(%100)	0
10 Days	1(%100)	0
15 Days	1(%100)	0
21 Days	1(%100)	0

The blood alcohol levels of 20 patients who were sexually abused immediately after alcohol use were found to be 0-0.5 promil, 6 to 0.6-1.0 promil, 8 to 1.1-2.0 and 3 to 2.1 and above (Table 4).

Table 4. Blood Alcohol Level of Sexually Abused Cases

Blood Alcohol Levels	Number
0-0.5 Promil	3
0.6-1.0 Promil	6
1.1-2.0 Promil	8
2.1 Promil and Above	3

4. DISCUSSION AND INTERPRETATION

It is thought that alcohol may increase the risk of sexual abuse, especially as a result of changing and deteriorating in a person's behavior, decreased ability to respond and make decisions, loss of questioning and control, decreased perception and awareness, deterioration in visual and auditory discrimination, and loss of memory and consciousness [21]. Therefore, in the evaluation of sexual abuse cases, it is important to obtain information about the use of alcohol during or just before the incident [22].

4.1. Average Age of Cases Exposed to Sexual Abuse

We can say that this situation can be seen in all age ranges, as there are studies in which the average age of women exposed to sexual abuse differs [22-26].

The mean age of the cases was 27.67 years. The mean age of the group exposed to sexual abuse without alcohol use was 29.05; The mean age of the group exposed to sexual abuse immediately after alcohol use was found to be 26.3 years. Although the sample of the study consisted of female cases aged 18 and over who were exposed to sexual abuse, the fact that the average age of the group exposed to sexual abuse immediately after alcohol use was 26.3 can be explained as the physiological effects of alcohol weakening the mechanism of resistance to the act of sexual abuse. It can also be said that with increasing age, people can express themselves better. It is thought that organizing awareness trainings on sexual abuse risk factors and ways to protect the society from sexual abuse may have an effect on reducing the cases related to the subject.

4.2. Time Between Applying to the Outpatient Clinic After Exposure to Sexual Abuse

The first 72 hours after sexual abuse are very valuable in the collection of acute traumatic findings [27]. In addition, a traumatic finding that can be detected during vaginal examination is an important factor in terms of the functioning of the legal process [28]. Therefore, it should be ensured that patients apply to health institutions as soon as possible after the incident [27].

In one study, 275 cases were examined and it was found that only 5 (1.8%) of those who were subjected to sexual abuse could be examined on the same day [25]. In another study, it was found that 33.7% of the cases could be examined within the first 72 hours after the event [26]. Arslan et al. (2008) reported that the defendants were mostly acquitted due to lack of evidence in the research conducted by examining the case file data [27].

In the study, the average time between the time of exposure to sexual abuse and the time of application to the outpatient clinic of 40 cases evaluated in the Forensic Medicine Outpatient Clinic of Balıkesir Atatürk City Hospital was 3.9 days; 4.1 days in cases exposed to sexual abuse immediately after alcohol use; In cases exposed to sexual abuse without alcohol use, it was found to be 3.7 days. This situation can be explained as the reactivation of the decision-making mechanism hours after the event due to the metabolization of alcohol from the body in 12 hours, changes in people's actions, deterioration in decision-making skills, loss of control, decrease in perception and awareness.

4.3. Findings of Physical Violence After Exposure to Sexual Abuse

In the past, it has been claimed that MDMA or amphetamines contributed to cases of facilitated sexual abuse [28]. The basis of this claim is that although individuals willingly participated in sexual activity during or immediately after using these substances, they would not have wanted to participate in sexual activity if they had not used these substances. Because in some studies, it has been reported that people who use MDMA or amphetamines show passive personality traits [29]. Due to these characteristics, it is stated that individuals cannot resist being touched by familiar/unfamiliar person(s) [30].

It is also stated that those who were subjected to sexual abuse experienced physical violence during the incident [31]. In the study, it is seen that 30% of those who were exposed to sexual abuse without alcohol use had signs of physical violence, while this rate was 15% in those who were exposed to sexual abuse without alcohol use. This situation can be explained as the possibility of the physiological effects of alcohol weakening the mechanism of resistance to the act of sexual abuse, or the late application to institutions due to fear of stigmatization, shame and guilt in individuals who are exposed to sexual abuse.

4.4. Time Elapsed from the Event and Vaginal Finding Status After Exposure to Sexual Abuse

Being able to collect appropriate and sufficient findings from individuals who have been subjected to sexual abuse provides important evidence about the incident [32]. In order to be able to evaluate with the collected evidence, each finding should be delivered to the laboratories as soon as possible, paying attention to the sample transport rules [33, 34].

In a study in which cases between the ages of 0-18 who were victims of sexual abuse were examined, it was stated that the highest number of notifications was attempted sexual abuse with a rate of 45.7%, and vaginal or anal penetration was in the second place with a rate of 43.3% [35]. In another study on sexual abuse, it was determined that there were vaginal penetration findings in 63% of the cases and penis penetration in 86% of the cases [36]. In different studies, it has been stated that there are findings of anal or vaginal penetration in those who have been subjected to sexual abuse [37, 38]. In the study of Erbaş et al. (2019), 30.8% of the cases occurred within the first 72 hours after sexual abuse; 14.3% reported that they applied to the institution one year after the incident and were examined [39].

Of the 40 cases exposed to sexual abuse included in the study, when the time elapsed after the incident and the vaginal finding status were evaluated, 5 people in the first 24 hours; 7 people in 24-48 hours; Vaginal findings were detected in 5 people in 48-72 hours. No vaginal findings were detected on the 4th, 6th, 7th, 10th, 15th and 21st days after sexual abuse. Although the small number of our sample and the physiological effects of alcohol on the body began to decrease after sexual abuse, the late application to the relevant institutions as a result of retrograde amnesia due to confusion may have played a role in this situation. In addition, due to negative changes in mental well-being after sexual abuse, the person's late application to the relevant institutions may have caused this result.

4.5. Blood Alcohol Levels of Sexually Abused Cases

In some studies, it has been claimed that there is a relationship between alcohol use and physical and sexual violence [40,41]. Alcohol use can be the main factor that causes violence or can be a factor that intensifies violence [42,43]. In the research conducted by Keskin (2023), it was found that the rate of women exposed to sexual violence increased with the increase in the frequency of alcohol use [44].

In the study, the blood alcohol levels of 20 patients who were exposed to sexual abuse immediately after alcohol use were determined as 0-0.5 promil in 3 people, 0.6-1.0 promil in 6, 1.1-2.0 promil in 8 and 2.1 and above in 3 patients. From a mental health point of view, this may be thought that alcohol use creates a sense of self-confidence and emotional emptiness on individuals.

5. CONCLUSION

Alcohol use may delay people's applications to the relevant institutions for days or weeks due to reasons such as adversely affecting the decision-making mechanism, not being able to accept the situation of being exposed to sexual abuse, feeling of guilt and shame [45]. It is stated that the majority of cases exposed to sexual abuse voluntarily use alcohol [46]. We can say that it is more difficult to detect physical findings in alcohol-facilitated sexual abuse today, as confusion/loss of consciousness that may occur as a result of alcohol use can cause an inability to resist the act of abuse. We think that it is necessary to collect the findings of the individual who is exposed to abuse as soon as possible and accurately, to convey and interpret them in appropriate ways in order to reveal the situations that may affect the sexual abuse incident. Therefore;

- The mean age of the cases exposed to sexual abuse after alcohol use was found to be relatively low. This study can be considered as a reference for the studies planned to be carried out on the subject using a large sample. Therefore, within the scope of preventive activities, providing the necessary psychosocial support for individuals who are exposed to sexual abuse to use appropriate coping skills and to ensure their integration into society,
- Organizing information programs about the multifactorial effects of alcohol, such as the inability to remember/recall events due to loss of consciousness or confusion, the inability to resist the perpetrator, the possibility of weakening the ability to think and make appropriate decisions, and the possibility of increasing exposure to sexual abuse,
- Planning training for law enforcement officers and health professionals on the psychological and neurophysiological effects of alcohol, factors that may affect sexual abuse and approach to sexual abuse cases with a multidisciplinary approach at the primary prevention level,

- Appropriate toxicological examinations can provide important evidence in cases of sexual abuse. Efforts to raise awareness of health professionals, law enforcement officers and the public, especially on the importance of the time of collection of all kinds of physical and laboratory findings to be analyzed after exposure to sexual abuse in order not to eliminate them after detection, and the necessity of delivering them to the laboratories as soon as possible with the appropriate transport chain,
- When the time elapsed from the incident and the vaginal finding status were evaluated among the 40 cases exposed to sexual abuse included in the study, it was determined that delays may cause loss of evidence. Therefore, we foresee that it may be beneficial to organize and evaluate multidisciplinary training programs in order to raise awareness about the effect of late applications to health institutions on sexual abuse findings.

6. REFERENCES

- [1] Bharat A, Jain N, Gupta BK, Bharat V. To determine the pattern and effects of verbal, emotional and physical abuse in both sexes. *International Journal of Community Medicine and Public Health* 2016; 3(4):818-25.
- [2] Doğanlı B, Karaörs G. Child abuse and measures taken against child abuse within the scope of the social state. *The Journal of International Scientific Researches* 2017; 2(7): 82-92.
- [3] Erdoğan G, Öztuna Ş. Harassment/mobbing. In: Gurhan N, editor *Violence*. *Turkiye Klinikleri*, 2021; p.14-8.
- [4] Lacey KK, West CM, Matusko N, Jackson JC. Prevalence and factors associated with severe physical intimate partner violence among U.S. black women: A comparison of African American and Caribbean blacks. *Violence Against Women* 2016;22:651-670.
- [5] Sen S, Bolsoy N. Violence against women: prevalence and risk factors in Turkish sample. *BMC Womens Health* 2017;17:100.
- [6] İbiloğlu AO, Atlı A, Oto R, et al. A multifaceted view of childhood sexual abuse and incest. *Current Approaches in Psychiatry* 2018; 10(1):84-98.
- [7] Morais HB, Alexander AA, Fix RL, et al. Childhood sexual abuse in adolescents adjudicated for sexual offenses: Mental health consequences and sexual offending behaviors. *Sexual Abuse* 2018; 30(1):23-42.
- [8] Öngün E, Ünsal G. Close relationships and abuse in university life. *Journal of Nursing Academic Research* 2018; 4(1):52-58.
- [9] Zerubavel N, Messman-Moore TL, DiLilloD, et al. Childhood sexual abuse and fear of abandonment moderate the relation of intimate partner violence to severity of dissociation. *Journal of Trauma & Dissociation* 2018; 19(1):9-24.
- [10] Lahav Y, Talmon A, Ginzburg K, Spiegel D. Reenacting past abuse Identification with the aggressor and sexual revictimization. *Journal of Trauma & Dissociation* 2020; 25(1):96-105
- [11] Author M, Boz B. Evaluation of sexual abuse and sexual assault cases admitted to Pamukkale University Faculty of Medicine between 2010-2016. *Forensic Bulletin* 2019; 24(1):43-50.
- [12] Firat S, Erk MA. An insidious crime: Substance-facilitated sexual assaults and the typology of perpetrators. *Forensic Bulletin* 2017; 24(2):141-147.
- [13] Göker Z, Aktepe E, Hesapcioğlu ST, et al. Clinical and sociodemographic characteristics of children who are victims of sexual abuse. *SDU Faculty of Medicine Journal* 2010; 17(4):15-21.
- [14] Soylu N, Şentürk-Pılan B, Ayaz M, et al. Investigation of the factors affecting mental health in children and adolescents who are victims of sexual abuse. *Anatolian Journal of Psychiatry* 2012; 13(4): 292-298.
- [15] Nelson JP. "Binge Drinking, Alcohol Prices, and Alcohol Taxes: A Systematic Review of Results for Youth, Young Adults, and Adults from Economic Studies, Natural Experiments, and Field Studies", SSR; 2013.
- [16] Öztuna Ş, Büyük B, Gürhan N. Substance/violence. In: Gurhan N, editor *Violence*. *Turkiye Klinikleri*, 2021; p.19-23.
- [17] PHE. "The Public Health Burden of Alcohol and the Effectiveness and Cost Effectiveness of Alcohol Control Policies an Evidence Review", London; 2016.
- [18] Jones AW, Holmgren A, Ahlner J. Toxicological analysis of blood and urine samples from female victims of alleged sexual assault. *Clinic Toxicol* 2012;50(7):555-61.

- [19] Mutlu E, Aşıcıoğlu F. Uyuşturucu madde etkisi altındaki mağdurların uğradığı cinsel saldırılar: Olgu serisi, Osmangazi Tıp Dergisi 2019;41(1):95-101.
- [20] Koç ÖE, Koç N. Alkol tüketimi ile alkol üzerinden alınan özel tüketim vergisi ilişkisinin incelenmesi. Yönetim ve Ekonomi Araştırmaları Dergisi 2020;18(3):212-226.
- [21] Çam O, Dağlı DA. Alkol bağımlılarında içselleştirilmiş damgalama, suçluluk ve utanç duyguları. Bağımlılık Dergisi 2017;18(4):145-151.
- [22] Şimşek Ş, Gençoğlu S. Cinsel istismar mağdurlarında istismar süresi ve sıklığı ile travma belirtileri arasındaki ilişkinin incelenmesi. Dicle Tıp Dergisi 2014;41(1):166-171.
- [23] Gölge ZB, Yavuz MF, Korkut S, vd. Yetişkin kadın mağdurlarda cinsel saldırı sonrası görülen ruhsal ve sosyal sorunlar. Adli Tıp Bülteni 2013;18(3):73-82.
- [24] McCann J, Miyamoto S, Boyle C, vd. Healing of Hymenal Injuries in Prepubertal and Adolescent Girls: A Descriptive Study. Pediatrics 2007;119(5):1094-1106.
- [25] Kokmaz B. Anal yoldan cinsel istismar/saldırı iddiası olan olgularda bulguların zamana karşı değerlendirilmesi (Tıpta Uzmanlık Tezi). Aydın: Adnan Menderes Üniversitesi; 2015.
- [26] Demirci Ş, Doğan KH, Erkol Z, vd. Konya'da cinsel istismar yönünden muayenesi yapılan çocuk olguların değerlendirilmesi. Türkiye Klinikleri Journal of Forensic Medicine 2008;5:43-49.
- [27] Arslan M, Kar H, Akcan R, vd. Analysis of sexual crimes prosecuted in Hatay criminal justice court. Adli Bilimler Dergisi 2008;7(2):35-39.
- [28] Aşkın Kara E, İşeri E. Çocuk cinsel istismarında psikiyatrik yaklaşım. Türkiye Klinikleri Journal of Child Psychiatry-Special Topics 2017;3(3):204-208.
- [29] McBrierty D, Wilkinson A, Tormey WA. Review of Drug- Facilitated Sexual Assault Evidence: An Irish Perspective. Journal of Forensic and Legal Medicine 2013;20(4): 189-197.
- [30] Tutanç M, Arıca V, Arıca SG, vd. Cinsel şiddete maruz kaldığı iddia edilen çocuk olguların analizi. Journal of Clinical and Analytical Medicine 2014;5(1):42-45.
- [31] Şenol E, Meral O, Sertöz ÖÖ, vd. Cinsel saldırı olguları için düzenlenen adli psikiyatrik raporların incelenmesi. Adli Tıp Bülteni 2016;21(3):159-166.
- [32] Hall JA, Moore CBT. Drug facilitated sexual assault-A review. Journal of Forensic and Legal Medicine 2008;15:291-7.
- [33] Acikkol M, Mercan S, Ziyalar N. A forensic and social approach to drug facilitated crimes. Journal of Current Issues Crime, Law Law Enforc 2011;4(4):371-401.
- [34] De Castro A, Lendoiro E, Quintela Ó, vd. Hair analysis interpretation of an unusual case of alleged scopolamine-facilitated sexual assault. Forensic Toxicol 2012;30:193-8.
- [35] Öztıp DB, Özcan ÖÖ. Cinsel istismar vakalarının sosyodemografik ve klinik özelliklerinin değerlendirilmesi. Yeni Symposium Dergisi 2010;48(4):270-276.
- [36] Boykins AD, Mynatt S. Assault history and follow-up contact of women survivors of recent sexual assault. Issues Ment Health Nursing 2007;28(8):867-881.
- [37] Bahalı K, Akçan R, Tahiroğlu AY, vd. Child sexual abuse: seven years in Practice. Journal of Forensic Sciences 2010;55(3):633-636.
- [38] Karbeyaz K. Cinsel suç mağdurlarında beden veya ruh sağlığında bozulma kavramı, bu hususta düzenlenen adli raporların yargı kararı üzerindeki etkinliği (Tıpta Uzmanlık Tezi). Eskişehir: Osmangazi Üniversitesi;2009.
- [39] Erbaş M, Kadı G, Balcı Y, vd. Muğla Adli Tıp Şube Müdürlüğü'ne başvuran gençlik yaş grubuna ait cinsel saldırı olgularının değerlendirilmesi. Adli Tıp Bülteni 2019;24(1): 9-16.
- [40] Pierobon, M., Barak, M., Hazrati, S. & Jacobsen, K. H. (2013). Alcohol consumption and violence among Argentine adolescents. Jornal de Pediatria (Versão Em Português), 89(1), 100-107. <https://doi.org/10.1016/j.jpdp.2012.08.011>.
- [41] Devries, K. M., Child, J. C., Bacchus, L. J., Mak, J., Falder, G., Graham, K., ... Heise, L. (2014, March 1). Intimate partner violence victimization and alcohol consumption in women: A systematic review and meta-analysis. Addiction. John Wiley & Sons, Ltd. <https://doi.org/10.1111/add.12393>.

- [42] Fenton, B. & Rathus, J. H. (2010). Men's self-reported descriptions and precipitants of domestic violence perpetration as reported in intake evaluations. *Journal of Family Violence*, 25, 149-158.
- [43] de Campos Moreira, T., Ferigolo, M., Fernandes, S., Barros, X., Mazoni, C. G., Noto, A. R., ... Barros, H. M. T. (2011). Alcohol and domestic violence: a cross-over study in residences of individuals in Brazil. *Journal of Family Violence*, 26(6), 465-471.
- [44] Keskin, A. (2023). Türkiye'de Kadına Yönelik Cinsel Şiddeti Etkileyen Sosyoekonomik ve Demografik Faktörler Abdurrahman Keskin. *İstanbul İktisat Dergisi*, 73 (1), 587-613. DOI: 10.26650/ISTJECON2022-1267250
- [45] Anderson LJ, Flynn A, Pilgrim JL. A global epidemiological perspective on the toxicology of drug-facilitated sexual assault: A Systematic Review. *Journal of Forensic and Legal Medicine* 2017;47:46-54.
- [46] Fırat S, Erk, MA. Sinsice işlenen bir suç: madde ile kolaylaştırılmış cinsel saldırılar ve fail tipolojisi. *Adli Tıp Bülteni* 2019;24(2):141-147.

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