

An Evaluation for Children Dragged into Crime and Children Victims of Crime

Suçta Sürüklenen Çocuklar ve Suç Mağduru Çocuklara Yönelik Bir Değerlendirme

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Abstract

The number of forensic cases for children and adolescents increases in the world and our country. Children and adolescents appear as perpetrators or victims of a crime during the judicial evaluation process. Children/adolescents who are neglected and abused are likely to be involved in crime, and children and adolescents involved in crime are also more likely to be neglected and abused. In both cases, the mental health and quality of life of the child are negatively affected. Especially health professionals who provide services in the field of mental health need more knowledge and experience. Attitudes and behaviors that harm children's physical or mental health and prevent their development can abuse children in four ways: physical abuse, sexual abuse, emotional abuse, and neglect. Healthcare professionals need to recognize the risk factors that may cause neglect and abuse and take a protective role in this process first. Psychological traumas occur in children and adolescents after the phenomenon of abuse or neglect occurs, and treatment is more complicated and difficult than taking preventive measures. Therefore, determining the risky groups in terms of neglect and abuse and taking protective measures will be the most valuable step. It will help raise awareness about the risks of abuse/neglect and ways of protection at the social level so it will enable both children to be protected from abuse and to learn how to deal with possible abuse.

Keywords: Child, adolescent, neglect, abuse, violence, crime

Öz

Dünyada ve ülkemizde çocuk ve ergenlere yönelik adli vaka sayısı artış göstermektedir. Adli değerlendirme sürecinde çocuk ve ergenler bir suçun faili veya mağduru olarak karşımıza çıkmaktadır. İhmal ve istismar edilen çocuk/ergenlerin suça karşma ihtimalleri, suça karışan çocuk-ergenlerin de ihmal ve istismara uğrama ihtimalleri oldukça yüksektir. Her iki durumda da çocuğun ruhsal sağlığının ve yaşam kalitesinin olumsuz olarak etkilendiği bilinmelidir. Bu nedenle özellikle ruh sağlığı alanında hizmet veren sağlık çalışanları daha fazla bilgi ve tecrübeye gereksinim duymaktadır. Çocukların bedensel, zihinsel ya da ruhsal sağlığına zarar veren, gelişimlerini engelleyen tutum ve davranışlar; fiziksel istismar, cinsel istismar, duygusal istismar ve ihmal olmak üzere çocukları dört şekilde örselenebilmektedir. Sağlık çalışanlarının ihmal ve istismara neden olabilecek risk faktörlerini tanıyabilmesi ve bu süreçte öncelikle koruyucu olarak rol alabilmesi oldukça önemlidir. İstismar veya ihmal olgusu gerçekleşikten sonra çocuk ve ergende ortaya çıkacak ruhsal travmaları tamir etmek koruyucu önlemler almaktan çok daha karmaşık ve zor bir hal almaktadır. Bu nedenle ihmal ve istismar açısından riskli grupların belirlenerek koruyucu önlemler alınması en değerli adımı oluşturacaktır. Toplumsal düzeyde istismar/ihmal riskleri ve korunma yolları ile ilgili farkındalığın artırılması hem çocukların istismardan korunmalarını hem de olası bir istismarla nasıl baş edebileceklerini öğrenmelerini sağlayacaktır.

Anahtar sözcükler: Çocuk, ergen, ihmal, istismar, şiddet, suç

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CHILDREN sent by administrative units with an evaluation request are not only children and adolescents who involved in crime. Children and adolescents appear as perpetrators or victims of a crime during the judicial evaluation process (Köse et al. 2011). In both cases, the mental health and quality of life of the child are negatively affected. Stressful experiences in childhood cause severe social and mental problems by damaging the child's psychology and quality of life, so it not only causes the child to commit a crime but also becomes a victim of the crime (Ayaz et al. 2012). Therefore, healthcare professionals who, especially in the field of mental health, need more knowledge and experience.

The first known case in the child and adolescent judicial process is that a girl is exposed to physical violence by her stepmother in the United States (USA) in 1874 (Gürhan 2015). The neighbors who realized this incident reached the judicial authorities to protect the child and so the first Child Protection Association was established by the lawyer of the same case in the USA. Although the first case was registered in 1874, some academicians talked about child abuse and neglect indirectly. Firstly, "physical and sexual abuse" had been mentioned by Tardieu in 1860; "Caffey syndrome" was defined by Caffey in 1946, and then finally, "battered child syndrome" is defined by Kempe in 1961 (Gürhan 2015). The importance of families and caregivers for child protection was underlined in the later periods of history. The importance of experts' opinions is highlighted in all kinds of damage which given or can be given to children. Lastly, the protection of children's rights has gained a legal dimension with the "Child Rights Agreement" by the United Nations in 1989 (Gürhan 2015).

In our country, the first step towards the development of children's rights was taken with the establishment of the Himaye-i Eftal Society (1921) is known as the General Directorate of Child Services nowadays. Right after this development, The Geneva Convention on the Rights of the Child was signed, and children's rights were mentioned for the first time in the Turkish Civil Code in 1926 (Gürhan 2015, Özden 2015). Although Turkey is one of the first countries to sign the Convention on the Rights of the Child in 1990, Grand National Assembly of Turkey decided to apply the decision in 1994. So five years after the signing on January 27, 1995, it was started to be implemented after it was published in the Official Gazette numbered 22184 (Resmi Gazete 1995).

The need for more considerable attention and sensitivity to judicial and legal processes for children and adolescents today is seen in UNICEF's 2017 strategy report. In the data of the report; in the world, seven out of every ten children (300 million) between the ages of 2-4 who are trying to discipline with violence at home, one out of three (130 million) children aged between 13-15 who are experiencing violence, 732 million school-age children are exposed to violence at school, about 15 million young girls aged 15-19 are forced to have sex at least once in their lives (UNICEF 2017). The rate of children exposed to different forms of violence in the family, at school, on the street, or among peer groups is considerably higher and is increasing day by day. In this review, risk factors that may cause children to be victims of crime or committed to crime, their harmful effects on the child and the society were evaluated with a mental health perspective.

Child as a perpetrator of crime (dragged/ pushed into crime)

The crime in children is explained with the term "juvenile delinquency" in the western literature, and exactly it means that "guilt of underage". A child who dragged into crime

is defined as "the child whose investigation or interrogation was initiated or the security decision was decided about with the allegation that he committed an act defined as a crime in the laws" in child protection law (Resmi Gazete 2005). As can be understood from the definitions, this expression covers a large part of both childhood and adolescence. It is correct to use the phrase "child who is pushed/ dragged into the crime" for the child who is guilty of the behavior that occurs as a result of many factors (spiritual, mental, familial, social) (Göker et al. 2006).

The criminal behavior of children and adolescents is considered a major social problem. In the study where Kandil et al. (2002) examined child-adolescent legal cases that applied to a university hospital in the last four years, found that the number of forensic cases increased compared to years (Kandil et al. 2002). According to data from the Turkish Statistical Institute (TUIK) shows the number of children who are dragged into crime between 2013 and 2017 increase over the years (TUIK 2018). It can be said that the factors play a role in dragging children into crime as separated families, having a working mother, living in large families, inappropriate family relationships, inadequate parental supervision, and discipline, not attending school, having a psychiatric finding in the child's medical history, using of substance-alcohol and being in the male sex (Uygur et al. 1994, Göker et al. 2006, Gürhan 2015, Köse et al. 2011.). Results of a study conducted in 2016, all of the participants (n=144) were children aged 11-18 who were dragged into crime; 79.9% (n=115) of the participants were male, 59.7% (n=86) did not continue their education, 65.3% (n=94) defined "negative" of family relationships, 84.7% (n=122) had chronic mental disorders as a behavioral disorder, alcohol-substance use disorder, personality disorder, mental retardation (Beşer et al. 2016). In another study (2012) conducted with 270 participants (95 girls, 175 boys); 91.6% (n=141) of the participants were male who dragged into crime (n=154), 23% (n=36) of them do not attend school, 88.4% of them live in city or district centers, 9.7% (n=15) showed repetitive criminal behavior (two adolescents were followed up in the outpatient clinic due to behavioral disorder) (Bilginer et al. 2012). In the same study, it was determined that took the first place in the distribution of crime with 46.8% (n=72) of theft, 24% (n=37) of injury, 9.7% (n=15) of damage to property and 8.4% (n=13) of child abuse (Bilginer et al. 2012).

In another study (2017), 680 files were investigated in the Adana courthouse, which was listed after January 2004. 86% of the files are male, and the order of the crime distributions are simple theft-qualified theft-injury-terror activities-substance use and sales. In the same study, the result shows that immigrant children are involved in crime more than non-immigrant children. Compare to the children's educational level and criminal characteristics that primary school (child worker), after primary school (substance use); secondary school (injury); high school (terror) crimes were found to be more frequent (Firat et al. 2017). A study in the USA included 1216 participants aged between 13 and 17 years of age and investigated the effect of fathers' characteristic feature on children's crime rates. It was determined that the absence of the father increased the rate of committing crimes in adolescence, but especially being a father at a young age and the presence of a strict father figure showed more crime and substance use behaviors than adolescents who did not have a father (Simmons et al. 2018). In Romania (2013), depression-anxiety-aggression and maladaptive personality tendencies of 60 participants with an average age of 17 were compared by using four different scales. Depression/anxiety/aggressive behaviors were found to be significantly higher in adolescents

who were dragged into crime (Tomita 2013). One hundred forty-four files were investigated in a study conducted in Turkey and according to the results of the study; 85% of them (n=122) have chronic mental disorders and the most common of these chronic mental disorders are behavioral disorder, personality disorder, substance alcohol use disorder (Beşer et al. 2016).

In the studies, the majority of children dragged into crime are men (Bilginer et al. 2012, Beşer et al. 2016, Fırat et al. 2017). Cultural differences between genders and social expectations affect crime rates. Especially dropping out of school and spending much time with peers who show problematic behavior may also affect the crime rate. Environmental and school change decreases in lesson success, or negative friendship relationships can lead the adolescent to crime in this sensitive period, which continues to adolescence conflicts. There is a possibility of more committing a crime in the district and city centers. It can be explained by the fact that the rate of commit to crime in villages and rural areas is much less, the environment is made up of acquaintances, and therefore, in addition to the presence of more intense social control, there is a structure that solves problems in its way. Children with a previous psychiatric diagnosis also have higher rates of involvement in crime, and these psychiatric problems are mostly outward-oriented.

Children as a victim of crime

Children are evaluated not only because they are involved in crime but also because they are exposed to a crime in the judicial process. If the child is the victim of crime, the words of "neglect" and "abuse" are mentioned. World Health Organization (WHO) has defined child neglect and abuse as; "bad behaviors that result in physical-emotional-sexual abuse, neglect and other forms of exploitation that negatively affect children's health, survival, development, or a sense of trust in relationships" (WHO 2016). In DSM-5; Child abuse with child physical abuse (e.g. caregiver behaving in a way that causes bodily injury to the child), child sexual abuse (e.g. the caregiver's or child's responsibility involves the child in any sexual act to provide sexual satisfaction), child neglect (e.g. the caregiver does not show the necessary love and does not meet the needs of the child) and child psychological abuse (e.g. verbal or symbolic action that results in significant mental harm to the child) expressions are included under the heading of "Child Maltreatment and Neglect Problems" (APA 2013). Child abuse can affect children of all ages, colors, and social classes and ethnic groups. Child abuse and neglect can be seen all over the world, and its frequency is estimated to be quite high (Ayaz et al. 2012). According to data from WHO, 41,000 children who are under the age of 15 lose their lives due to child abuse every year (WHO 2016). Attitudes and behaviors that harm the physical and mental health of children and prevent their development may be divided into four groups, which are physical, sexual, emotional, and neglect, that cause abuse of children (Güner et al. 2010).

Physical abuse

Physical abuse is defined as violence by an adult to a child for ensuring authority, angering, or punishing by hand or with a tool, that will be a wound or not on any part of the child's body (Taş 2017). Physical injury may also include actions that impair the child's physical integrity, such as kicking, burning, and biting the child (Taş 2017). Generally,

people who physical abuser are responsible for the child's care. The child can be abused at home, school, nurseries, and kindergartens. Violence is used as a discipline method in our society, and it is understood from various proverbs that are settled in our language (Oral et al. 2010). Where violence is used to solve problems, punish or have a status and respect, many children are also more likely to commit violence to their children and their spouses in adulthood (Oral et al. 2010). Sometimes there may be no finding in physical abuse, so the point to be considered is to be able to discriminate between the injuries in the average daily activities of the child and the injuries that result from the abuse event and to create awareness in this regard.

In a study conducted in Turkey (2010), the focus group method is used to evaluate the point of view of both maltreated children and abuser individuals to violence. Data were obtained through 30 focus group interviews with 235 individuals who are from İstanbul, Samsun, Konya, Şanlıurfa, Adana, and Erzurum provinces that assumed to represent different regions thought to contain socioeconomic and culturally heterogeneous groups (Oral et al. 2010). Some of the children who were exposed to physical violence said: "One day I was at school, there was an older boy. We were playing football, the ball hit his foot. I apologized, but he hit me, I cried" (male, 11-14 years). "The teacher shouts at us, beat us all. There is an iron ruler, he hits our hands, he slapped us randomly." (male, 7-10 years old). "My mom sometimes beats me and says bad things all the time; she says my dad left me loose. Always the exam and exam. I am studying even in the toilet." (female, 15-18 years old). "Sometimes my older sister beats me at home, I say you don't hit me but she still hit me (male, 7-10 years old). The results obtained from the same study, girls are mostly exposed to physical abuse by their mothers, fathers, teachers, friends, and older siblings; on the other hand, boys are exposed to physical abuse by their friends, teachers, fathers, older siblings and someone they do not know. It has been reported that mothers, fathers, stepmothers, older siblings, teachers, and friends are the ones who use physical abuse most frequently (Oral et al. 2010). Some of the adults expressed their feelings with the following sentences; "I had taken my son to shop, he asked me to buy something but I had no money. My husband had just gone bankrupt but he always wanted something. He started crying and I got very angry, I slapped him." (Mother), "My child was constantly crying for what he wanted but I couldn't get my child's requests so I was angry and slapped." (Father), "I had a very naughty student. One day, he made me very angry so I slapped a few and fired from class. When he was leaving the class I thought how can I bring this boy to life? I said this is not possible if that student gets out of the door. He was just about to go out, I called and apologized. Whatever the student does, it is too valuable to be lost. That student made me mature." (Teacher) (Oral et al. 2010). It has been obtained that some children who are exposed to physical violence try to use coping mechanisms with various methods as feeling someone who they love most, being alone and thinking about who got the mistake, listening to music, thinking about dying and dreaming of escaping from home (Oral et al. 2010). As can be seen from the examples given in this study, physical abuse is not an accident.

A study from Nepal (Kandel et al. 2017) included 5081 children between the ages of 3-14. The study revealed that the 3-5 age group is the most common age group in which physical punishment is applied. Hitting and slapping is the most common form of violence; 46% of children are exposed to physical punishment in the past month. In the same study, the thoughts of children towards physical violence were also asked, and 35% of them said that children could sometimes deserve physical punishment to behave well,

46% said they thought their mother deserved violence in such cases like going out without informing their husbands, neglecting their children, refusing to have sex with their husbands and burning food (Kandel et al. 2017).

Emotional abuse

Emotional abuse is the child's long-term exposure to words and behaviors such as rejection, humiliation, threatening, blame. Making expectations over the age, distinguishing between siblings, give a nickname, be overprotective and addictive that disrupt his mental health and development (Tıraşçı and Gören 2007). It is generally very likely to occur with other types of abuse (Şahin 2006). It is the least understood form of abuse due to difficulties in its identification and recognition, prevention, and legal proving. However, emotional abuse can be detected more in children with behavioral symptoms. In children who are emotionally abused, regression behaviors such as developmental decline, abnormal/unhealthy attachment between child and parent, acting aggressive or overly docile, to be the scapegoat in the family, dull looks especially in preschool children, low self-esteem, extreme shyness or difficulty in establishing a relationship with others, eating nails and sucking fingers are commonly observed (Beter 2010). In a study (2004) conducted with 206 students who are studying in the 4th and 5th class of the primary school, the vast majority of students are exposed to emotional abuse behaviors such as bad nicknames, kidding, threatening, humiliation, and exclusion from the group at least once throughout their education. Significant differences were found between depression symptoms of children exposed to bullying and the ones exposed to less bullying (Kapçı 2004). In another study (2002), it was found that mothers frequently applied emotional abuse types such as not revealing their love to their children, shouting-scolding, leaving their children at home, frightening, threatening (Güler et al. 2002). In the same study, the rate of emotional abuse of mothers to their children increased as the education level of the mother decreased, the number of children increased, the level of economic status decreased and the mother herself exposed to physical/emotional violence by her husband (Güler et al. 2002).

In a study (2018) with 344 students who are 9-12 years old in Greece, 223 students were exposed to emotional abuse by their teachers (Nearchou 2018). The most common forms of emotional abuse they are exposed to are; being the last person in an activity, being insulted in front of the class, and being consistently ignored. Students who are exposed to emotional abuse have lower self-confidence, peer/family, and school support scores (Nearchou 2018). In a study (2018) in which 127 obese individuals (104 women, 23 men) between the ages of 30-55 participated, it was aimed to measure the correlation between obesity and childhood emotional abuse (Amionto et al. 2018). According to the results of 45 people compared with the healthy control group, obese participants were exposed to more emotional abuse in childhood than healthy participants, and there was a significant correlation between childhood emotional abuse experience and obesity (Amionto et al. 2018).

Sexual abuse

Sexual abuse is the inclusion of the child in the sexual activity, which is not fully understood, or used for sexual purposes in the interests of adults (Gürhan 2015). Any kind of sexual abuse behavior that may be directed to the child by a person from the family is

called "incest", and sexual abuse behavior by a non-family or unknown person is called "pedophilia". Sexual abuse is a common situation that might continue for many years and can remain hidden for many years (İbiloğlu et al. 2018). Therefore, it is not possible to know the prevalence of sexual abuse cases. According to WHO's global estimates, 18% of women and 8% of men are sexually abused in childhood (WHO 2017). In many studies, thoughts on the fact that girls are exposed to more sexual abuse than boys or that the reporting is more in this direction support WHO's data.

Abuse of girls commonly occur between the ages of 11-14, and it shows a peak between the ages of 7-11 among boys. In a study conducted by Bilginer et al. (2013), 82 of 118 sexual abuse cases admitted to a hospital were found to be girls and 36 were boys, and then 50% of males between the ages of 7-11 and 56% of females over the age of 12 were found (Bilginer et al. 2013). In a study by Yektaş et al. (2018), it was determined that 83 of 106 sexual abuse cases admitted to a university hospital were 83 of the girls and 23 of them were boys, the average age was 14 for girls and 8 for boys (Yektaş et al. 2018). In both studies, all of the abusers are male, and the majority are familiar people. The case of sexual abuse is a huge problem and is not a problem that can be interpreted alone in terms of neither the child abused nor the abuser (Taş 2017). Since sexual abuse starts to occur, it also starts to affect many dynamics, so it is imperative to consider the case of sexual abuse from the moment it starts. Considering that only 15% of the victims' report, the facts that can be reached are only part of the iceberg.

Sexual abuse is a form of abuse that is extremely difficult to evaluate, such as physical and emotional abuse. The most robust diagnostic method in sexual abuse is the physical examination, but unfortunately, it is not possible to obtain findings in every case of sexual abuse. Because the abuse may have occurred only in the form of oral contact or caressing action, and it may not be possible to detect by physical examination. In such cases, the best source of data is the statement given by the victim. It is essential to listen carefully to the stories told by children in cases of sexual abuse. It should be remembered that children do not have the intellectual capacity and sexual experience necessary to make up such a story. Another critical issue is whether the child has the consent for such an action or not, but it is not the right way to assess the child's consent in abuse. It is incredibly wrong to explain the reason for sexual abuse with the concept of "consent" because children are not cognitively and developmentally immature for such an action.

Many psychological and social problems inevitably arise after the child is abused. In a study conducted by Ayaz et al. (2012), 71% of 100 children who were sexually abused were diagnosed with mental disorders such as posttraumatic stress disorder, major depressive disorder, attention-deficit/hyperactivity disorder, substance disorder, tic disorder, sleep disorders (Ayaz et al. 2012). In another study conducted in 2018, risky behaviors of children and adolescents were evaluated after repeated and once sexual abuse, and it was found that smoking-alcohol use, anti-social behavior, suicide, and dropout were high in recurrent sexual abuse cases, and adolescents who were exposed to sexual abuse once had high rates of smoking and suicidal tendency (Koçtürk and Bilge 2018). When the findings obtained from the studies are evaluated, exposure to sexual abuse increases the rate of many mental problems and risky behaviors in children and adolescents. Even among children/adolescents who have been subjected to sexual abuse once, and children/adolescents who have been subjected to repeated sexual abuse, the incidence of these risk behaviors varies. In a study (2018) conducted in Taiwan, 101 cases (3 boys, 88 girls) who applied to the child emergency room for sexual abuse were subjected to sexual

abuse by 52% of their friends, 23% of family members, 25% of whom they did not know. (Hu et al. 2018). It was found that 42% of children had an acute psychotic disorder, and 15% had attempted suicide intervention. Besides, 15 of 75 children who had a consultation with gynecology had sexually transmitted diseases and various gynecological problems (Hu et al. 2018). Psychological effects such as damaged sexuality, insecurity, the feeling of helplessness and weakness, self-responsibility, and stigmatization can be observed in children who are sexually abused. In addition to individual therapies, group and family therapies can be applied for the treatment of children who are victims of sexual abuse. The primary purpose of each application is to study the processes related to traumatic memories. Mainly younger children should be directed to social therapy and skill activities that can improve play therapies, defense mechanisms, and increase ego capacity. The most important thing is; it should be early detection of abuse and thus less harm to the psychological system (Gürhan 2015).

Neglect

Child neglect is the prevention of the physical, emotional, educational, or social development of the child due to neglecting the basic needs of the child by the dependent adults, especially the parents. (İbiloğlu et al. 2018). As can be understood from the definition, neglect behavior can also be defined as not providing the developmental needs of the child. The essential point that separates neglect and abuse; abuse occurs actively, and neglect occurs passively (Kaplan et al. 1999). A child can be neglected physically, emotionally, and socially. Neglect behavior negatively affects the psychosocial development of the child as well as abuse. Neglect can range from mild (maybe once) to severe levels (continuous neglect). Although it is a more frequent case than abuse, abuse is not as much emphasized. If it did not result in death or severe injury, it could be ignored (Taş 2017). However, in more detailed investigations, it is observed that child neglect has an important place in the leading causes of child deaths and has increased over the years. In the report, "A deadly journey for children: The migration route from North Africa to Europe", published in 2017 by UNICEF, it is highlighted that children and women on the migration path who have to migrate because they cannot find shelter and food are frequently exposed to sexual violence, abuse, and neglect (UNICEF 2017). It was determined that 23 thousand 102 of the immigrants were children, and one-third of these children were unaccompanied. As a result of the interviews conducted within the scope of the study, three-quarters of the refugee children said that they were subjected to violence, harassment, or assault by adults during migration. It is stated in the same report that 4 thousand 579 immigrants (one of 40 people) died, and at least 700 of those who died were children (UNICEF 2017). In August 2018, UNICEF published a report presenting the difficulties experienced by individuals who had to emigrate from Mexico to America. In this report, it is stated that especially women and vulnerable children are at risk for abuse and hunting for organized gangs (UNICEF 2018). It is not possible to say that the living conditions of individuals who are forced to migrate by being neglected in their countries are also very bright in the countries where they migrate. The number of children who have to work in countries where they migrate and who have been neglected and abused economically is quite high. Child worker is defined as "a person who has completed the age of 14, has not completed the age of 15 and has completed his primary education". if it is a young worker; It is defined as "a person who completed 15 years of

age but not 18 years of age" in the 4th article of the labor law (Resmi Gazete 2004). The number of child workers in Turkey is very high as in other countries around the world. According to the International Labor Organization (ILO) data, the number of child workers in the world, which was 246 million in 2000, decreased to 168 million (ILO 2015).

The limits of who will be accepted as "child," who is "worker" and what is "working" should be well defined so there will be no doubt that there would be a positive result. The most recent information on the number of child workers was obtained with a child labor survey conducted in 2012 in Turkey (TUIK 2013). According to the data of this report, 49.8% of children who are workers attend a school, but 50.2% do not attend school. It is a known fact that children are neglected and abused both terms of economically and educationally. TUIK did not carry out any studies to update this data after 2012. It is necessary to investigate labor and employment data for access to current data on the number of child workers. According to these data, the number of child workers between the ages of 15-17 has reached 709,000 since 2016 (Taşbaşı 2018). Although there is no current study conducted by TUIK, according to research and statements made by trade unions, this number has exceeded 2 million since 2018 (Taşbaşı 2018).

Conclusion

The probability of neglect and abuse of children/adolescents to get involved in crime is very high, and that of children/adolescents involved in crime are likely to be neglected and abused. It is necessary to raise awareness at the social level in cases of abuse and neglect for children/adolescents, which are known to increase day by day in our country and the world. WHO has classified the factors that will cause neglect and abuse of children / adolescents under three different headings, these are; risk factors for parents or caregivers (psychiatric problems, solid-insensitive personality traits, suffered abused and neglected in childhood, emotionally immature, misuse drug or alcohol, being a parent at a young age, having children frequently, low education level, being the single caregiver), risk factors related to the social structure of the family (low socioeconomic level, unemployment, homelessness, untimely unwanted and extramarital pregnancy, family with many children, stressful work environment or failures in business life, social isolation and poor social support, cultural incompatibility, inadequate access to health care and social services) and community risk factors (social inequalities, normalization of early marriages, inadequate protection and malfunctions in the law, low value given to the child, civil-external wars, armaments and terrorism, increased social acceptability of violence, poor school education, poor social relations and neighborhood relations) (Gürhan 2015, WHO 2017). Considering the risk factors specified by WHO, it is not difficult to estimate that the number of children and adolescents at risk in our country can be quite high. The most crucial step is to identify risky groups in terms of neglect and abuse and take protective measures. Healthcare professionals need to recognize the risk factors that can cause neglect and abuse and play a protective role in this process. To treat mental traumas in the child and adolescent after abuse or neglect cases is much more complicated and difficult than taking preventive measures.

For this reason, children should be taught from an early age, which behaviors are appropriate for neglect and abuse, to say no when necessary, people with whom they can get help. Guidance programs for all ages should be implemented, and families should be

included in this process. In this process, especially psychiatric nurses should take an active role in guiding families to develop a positive parental attitude and to establish healthy communication with children/adolescents. They should also inform the society that every child we cannot protect against neglect and abuse poses a threat to the social future. Increasing social awareness about abuse/neglect risks and ways of protection will help children and families to learn how to protect themselves from abuse and how to deal with possible abuse.

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