

# Sexual Abuse of Minors: 63 Cases at Mouila Regional Hospital in Gabon in 2022

Ulysse Pascal Minkobame Zaga Minko<sup>1,\*</sup>, Ophelia Makoyo Komba<sup>1</sup>, Pamphile Assoumou Obiang<sup>1</sup>, Jean Pierre Malanda<sup>1</sup>, Ernest Junior Minto'o<sup>1</sup>, Elsy Ntsame Mezui<sup>1</sup>, Robert Eya'ama<sup>1</sup>, Nyingone S<sup>1</sup>, Anouchka Mewie Lendzinga<sup>1</sup>, Jacques Albert Bang Ntamack<sup>1</sup>, Jean François Meyer<sup>1</sup>

<sup>1</sup>Department of Obstetrics, Gynaecology and Reproduction, University of Health Sciences, BP 4066, Libreville, Gabon

\*Correspondence should be addressed to Ulysse Minkobame Zaga Minko, [ulyseminkobame@yahoo.com](mailto:ulyseminkobame@yahoo.com)

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## Abstract

**Introduction:** Sexual abuse of minors is a topical issue in our regions.

**Objective:** To study the epidemiological and clinical aspects of sexual abuse of minors at the Mouila Regional Hospital in 2022.

**Patients and method:** This was a prospective cross-sectional descriptive study. It was conducted from 1 January to 31 December 2022 in the Gynaecology-Obstetrics Department of the Mouila Regional Hospital. The study included all victims under the age of eighteen who were seen for a gynaecological consultation with a judicial requisition addressed to a qualified person for a medical examination following a report of sexual abuse. The data was collected and reported on a pre-established data collection form. They were entered and processed using epi info software version 7.2.2.6.

**Results:** The prevalence of sexual abuse of minors was 4.23%, the average age of the victims was 12 years, with extremes of 2 and 17 years, and a sex ratio of 9.5 in favor of girls. The assaults were committed at a neighbor's house (44%) by people close to the victim (95.24%) and during the day (92.06%). Rape was the most common form of assault (69.84%), followed by hymenal tears (60.32%). Post-traumatic stress (37.5%) and infanticide were the major complications.

**Conclusion:** Sexual abuse of minors is common. It has serious consequences that can be lethal.

**Keywords:** Sexual abuse, Minors, Infanticide, Gabon

## Introduction

Sexual abuse of a minor is defined as any sexual violation or act of a sexual nature committed against a human being under the age of eighteen, by violence, coercion, threat, surprise, or deception [1]. Similarly, rape of a minor is any act of sexual penetration of any kind committed against a human being under the age of eighteen using violence, coercion, threats, or deception [1]. Sexual abuse is endemic and constitutes a major public health problem. Worldwide, children and adolescents are vulnerable and accessible targets: 150 million girls and 73 million boys are victims [1,2]. This practice, which affects

young girls the most, is a form of gender-based violence with harmful psychological, physical, and social consequences [3-5]. This scourge is also present throughout Gabon, including the commune of Mouila, where this public health problem has never received any specific attention. This is why we decided to study the epidemiological and clinical aspects of sexual abuse of minors at the Mouila Regional Hospital.

## Patients and Method

A prospective cross-sectional descriptive study was conducted from 1 January to 31 December 2022 in the

Gynaecology-Obstetrics Department of the Mouila Regional Hospital. The target population consisted of all patients seen for consultation during the study period. All patients under the age of eighteen, seen for a gynaecological consultation with a judicial requisition addressed to a qualified person for a medical examination following a report of sexual abuse, were included. The data were collected from interviews with the victims and from the initial clinical examination. We studied the frequency of sexual abuse, the characteristics of the assaults, the forms of sexual act observed, and the complications observed. Statistical analysis was performed using epi info software version 7.2.2.6.

## Results

### Frequency of sexual abuse of minors

From 1st January to 31st December 2022, 1490 gynaecological consultations were carried out, including 63 (4.23%) minors who had been sexually abused.

### Circumstances in which the attack occurred

**Characteristics of the attack:** The victims had been attacked in a neighbor's home in 44.44% of cases. The attack took place during the day (92.06%), as shown in **Table 1**.

**Characteristics of the perpetrator:** The victim or parent recognized the assailant in 95.24% of cases. The aggressor was a neighbor (44.44%) and a family member (31.75%); he acted alone (90.48%), using verbal threats as a form of coercion (65.08%) (**Table 2**).

### Forms of sexual act observed

Two main forms of sexual acts were observed (**Table 3**):

- 44 (69.84%) cases of rape, including 38 (86.36%) cases of vaginal penetration and 6 (13.64%) cases of anal penetration involving boys;
- 19 (30.16%) cases of sexual touching.

Table 1. Different characteristics of aggression.		
Features	N=63	
	n	%
<b>Location of the attack</b>		
- Neighbor's house	28	44.44
- Family home	20	31.75
- At school	9	14.29
- In a house under construction	6	9.52
<b>Schedule of the attack</b>		
- [6 hours -18hours]	58	92.06
- [18hours - 6hours]	5	7.94

Table 2. Different characteristics of the aggressor.		
Features	N=63	
	n	%
<b>Known assailant</b>		
- No	60	95.24
- Yes	3	4.76
<b>Identity of the assailant</b>		
- Neighbor	28	44.44
- Family member	20	31.75
- Family friend	7	11.11
- Friend	5	7.94
- Unknown	3	4.76

Number of aggressors		
- One	57	90.48
- ≥ Two	6	9.52
Forms of coercion		
- Verbal threat	41	65.08
- Verbal Conviction	14	22.22
- Physical threats	8	12.70

**Table 3.** Different forms of sexual acts observed.

Forms of sexual act	N=63	
	n	%
<b>Rape</b>	<b>44</b>	<b>69.84</b>
- Vaginal sex	38	86.36
- Anal sex	6	13.64
<b>Sexual touching</b>	19	30.16

### Serious consequences observed

The clinical examination revealed (**Table 4**): 20 cases of post-traumatic stress (31.75%), including 50% of cases of excessive fear, 35% of cases of anxiety and 15% of cases of insomnia; 3 unwanted pregnancies (4.76%), 1 infanticide (1.59%).

## Discussion

### Frequency of sexual abuse

Sexual abuse of minors is a disturbing reality in our environment.

Our series reported a frequency of 4.23%. This frequency is higher than the 3.12% reported by Traoré et al. in Bamako [6]; it is similar to those reported in studies carried out in Lomé (4.37%) [7] and Yaoundé (4.7%) [8]. The frequency of sexual

abuse of minors in our context is justified by their immaturity, which makes them more vulnerable: children and adolescents are characterized by their naivety and physical weakness, which means that they are unable to defend themselves against an imposed sexual act.

### Characteristics of the attack

The victims were mainly attacked at a neighbor's house (44.44%), most often during the day (92.06%). Our observation is similar to that made by Cissé et al. [12] who found that the assault took place at the neighbor's house (72.6%), during the day (31.7%). In their series, Diallo et al. [9] observed that victims were mainly attacked in the family home (29.3%) and during the day (73.6%). On the other hand, other authors such as Amah et al. [7] in Togo and Foumane et al. [13] in Cameroon found that victims were mainly assaulted outside the family home at night, in 51.8% and 59.9% of cases respectively. In our

**Table 4.** Distribution of victims according to the consequences observed.

Consequences	N=63	
	n	%
<b>Post-traumatic stress</b>	<b>20</b>	<b>31.75</b>
- Excessive fear	10	50
- Anxiety	7	35
- Insomnia	3	15
<b>Unwanted pregnancy</b>	<b>3</b>	<b>4.76</b>
<b>Infanticide</b>	<b>1</b>	<b>1.59</b>
<b>None</b>	<b>39</b>	<b>61.90</b>

context, the daily assaults were planned by the perpetrators to escape the vigilance and control of the victims' direct relatives, who are usually preoccupied with their daily activities.

Sexual violence was mostly perpetrated by men known and close to the victim in 95.24% of cases, particularly a neighbor (44.44%) and a family member (31.75%). Our results are similar to those of Amah et al. [7] and Mamadou et al. [11], who found that the victim knew the attacker in 66% and 84.4% of cases respectively. Foumane et al. [13] reported that the assailant was unknown to the victim in 67.2% of cases. In our context, the assailant acted mainly alone in 90.48% of cases. Other authors have made the same observation. Indeed, Diallo et al. [9] in Dakar and Meka et al. [10] in Yaoundé reported the notion of a single aggressor in 84.3% and 93.6% of cases respectively. Verbal threats were the main form of coercion used by the aggressor in 65.08% of cases. This result is similar to that reported by Meka et al. [10] who found 57.4% of cases. On the other hand, Diallo et al. [9] in Dakar observed that the main form of coercion was physical threat in 70% of cases.

#### Different forms of sexual act observed

Among the forms of sexual act observed among the victims, 69.84% of rape cases were reported. This is lower than the 86.27% reported by Dembélé et al. [14] in Kayes. However, it is higher than the 60.70% observed by Rasoafaranirina Marie [15] in Antananarivo. On the other hand, Rim Ben et al. [16] in Monastir noted a predominance of sexual touching with 47.3% of cases. These observations show that rape is the main form of sexual act observed in cases of sexual abuse. Vaginal penetration was observed in 97.73% of cases and anal penetration in 2.27%. Our results are similar to those observed by Dembélé et al. [14] who reported 97.74% of cases of vaginal penetration. Vaginal penetration is the main form of rape perpetrated by the aggressor.

#### The psychological repercussions of rape

Our study observed 31.75% of cases of post-traumatic stress disorder in the following clinical forms: excessive fear (50%), anxiety (35%) and insomnia (15%); excessive fear (50%), anxiety (35%) and insomnia (15%); 4.76% of cases of unwanted pregnancy; 1.59% of cases of infanticide (a 4-year-old girl in whom the post-mortem examination revealed signs of physical violence such as strangulation with fracture of the larynx, a serious wound with significant perineo-vulvo-vaginal damage extending as far as the Douglas). These observations have been made to varying degrees by other authors. Cissé et al. [12] observed 56.9% of cases of post-traumatic shock, 31.1% of which were silent, followed by 2% of unwanted pregnancies. On the other hand, Dembélé et al. [14] found post-traumatic stress in all victims (100%), the main symptoms of which were insomnia (39.29%), anxiety disorders (33.32%), feelings of worthlessness (17.65%), and one case of intentional homicide. We recognize that sexual abuse has serious and

sometimes irreparable vital, psychological, and physiological consequences for victims.

#### Limitations of the study

During our study, it was noted that all the victims of sexual abuse consulted a doctor following legal proceedings. According to the Gabonese Penal Code [17], anyone guilty of raping a minor is liable to 5 to 10 years' imprisonment. If the rape is directed at a minor under the age of 15, or a vulnerable person (pregnant woman, mentally deficient, ill), the guilty party will be punished by life imprisonment. These aspects were not studied in our study.

The Mouila Regional Hospital does not have a service of psychology, which limited the psycho-medical follow-up of patients who were evacuated to a facility with clinical psychologists.

#### Conclusion

Sexual abuse of minors is a real social problem in Mouila. It is a social tragedy that affects immature people, especially women, and has physical and psychological consequences, including infanticide. It is a form of gender-based violence. If we are to combat this scourge effectively, we need to constantly raise public awareness, set up an appropriate psycho-medical service to provide adequate care, and report the perpetrators of sexual abuse to the judicial authorities so that they can be properly dealt with.

#### Declaration of Interest

The authors declare no conflict of interest.

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