



Factors Influencing the Disclosure of Sexual Abuse Among Minors in Morocco: A Study of 40 Cases

By

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Abstract

Background: Sexual abuse of minors is a major public health issue in Morocco, with severe consequences on children's development. This study aims to identify the factors influencing the disclosure of sexual abuse among minors in Morocco.

Materials and Methods: A prospective study was conducted on 40 children who were victims of sexual abuse, received at the Department of Forensic Medicine at Ibn Rochd University Hospital in Casablanca between December 2017 and February 2019. Data were collected using a detailed questionnaire. Statistical analysis was performed to identify factors influencing disclosure, using the Chi-square test with a significance level of $p < 0.05$.

Results: The majority of victims were girls (70%), with an average age of 12.75 years. Obstacles to disclosure included fear of retaliation (55%), shame (45%), and feelings of guilt (37.5%). Statistical analysis showed that the number of abuses ($p = 0.005$), the relationship with the abuser ($p = 0.01$), and the mode of disclosure ($p = 0.04$) were significantly associated with the likelihood of the child disclosing the abuse. Fear of negative consequences was also a significant factor ($p = 0.007$).

Conclusion: The results highlight the difficulty for children to disclose sexual abuse, influenced by various social and psychological factors. It is essential to raise awareness among families and professionals to create an environment conducive to disclosure and to improve victim care.

Keywords: sexual abuse, disclosure factors, minors, reporting, incest

Highlights

1. This study identifies key factors influencing the disclosure of sexual abuse among minors in Morocco.
2. It highlights that fear of retaliation, shame, and guilt are the main obstacles to disclosure.
3. Statistical analysis reveals that the number of abuses and the relationship with the abuser significantly impact the likelihood of disclosure.
4. Findings show that spontaneous disclosures are associated with fewer obstacles to disclosure.
5. Recommendations are proposed to improve victim detection and care by creating an environment conducive to disclosure.

I. Introduction

Sexual abuse of minors remains a persistent scourge in Morocco and worldwide, with profound consequences on the physical and psychological health of victims [1]. According to

the World Health Organization, approximately 18% of girls and 8% of boys globally are victims of sexual abuse before the age of 18 [2]. In Morocco, a study conducted in Casablanca revealed that 9.2% of women had been victims of



sexual abuse in childhood, with 33.8% involving penetration [3].

Sexual abuse of minors is defined as “any involvement of a child or adolescent in sexual activities that they are unable to understand, that are inappropriate for their psychosexual development, that they undergo under duress, through violence or seduction, or that transgress social taboos” [4].

These acts have short- and long-term repercussions on children’s psychological development, psychosocial well-being, and physical health [5]. However, abuse is often hidden, and victims encounter numerous obstacles to disclosure, such as fear, shame, and guilt [6].

Disclosure of sexual abuse by minors is a complex process influenced by multiple factors. Understanding these factors is essential to improve detection, care, and prevention of sexual abuse among minors.

This study aims to identify the factors influencing the disclosure of sexual abuse among minors in Morocco by statistically analyzing variables associated with the likelihood of children disclosing or not disclosing the abuse they have suffered.

II. Materials and Methods

This prospective study was carried out at the Department of Forensic Medicine of Ibn Rochd University Hospital in Casablanca, Morocco, from December 2017 to February 2019. It included 40 children, aged 4 to 17 years, who were identified as victims of sexual abuse based on a credible history and/or corroborated by medical findings. Children reporting consensual sexual relations or providing incoherent/insufficient accounts without supporting medical evidence were excluded.

Data were collected via a structured questionnaire capturing sociodemographic information (age, sex, socioeconomic status), details about the abuser (age, relationship to the victim), and circumstances of the abuse (location, type, means of coercion). Variables related to disclosure (delay, circumstances, obstacles), factors influencing disclosure, and medico-legal findings (including observed injuries) were also recorded.

All data were entered and analyzed using SPSS (version 20). A descriptive analysis characterized victim and abuser profiles, while a univariate analysis explored associations between the independent variables (e.g., age, sex, abuser relationship, type of abuse) and the dependent variable (abuse disclosure without obstacles). Depending on sample sizes, Chi-square or Fisher’s exact test was applied, with $p < 0.05$ considered statistically significant.

Ethical considerations included obtaining informed consent from each child’s parent or legal guardian. Confidentiality of all data was strictly maintained to protect participants’ privacy and rights.

III. Results

1. Study Population

This study included 40 pediatric cases of sexual abuse recorded at the Integrated Care Unit for Women and Children Victims of Violence in the Forensic Medicine Department from December 2017 to February 2019. The victims were predominantly female (70%, $n=28$), with a sex ratio of 0.42 (28 girls vs. 12 boys). The mean age was 12.75 ± 4.58 years (range: 4–17 years). Girls tended to be older (14.5 years) compared to boys (8.6 years). In total, 70% of the victims ($n=28$) had a low socioeconomic background, and 30% ($n=12$) had a middle-level socioeconomic background. Among 39 school-aged victims, 41% ($n=16$) were enrolled in school, 43.6% ($n=17$) were school dropouts, and 15.4% ($n=6$) had never attended school.

2. Characteristics of Abusers

A single perpetrator was identified in 90% ($n=36$) of cases, while multiple perpetrators were reported in 10% ($n=4$). Among 51 perpetrators whose ages were specified, the mean age was 28.25 ± 11.96 years (range: 11–65 years). All perpetrators were male. Abuse was intrafamilial in 12.5% ($n=5$) of cases and extrafamilial in 87.5% ($n=35$). Overall, 65% ($n=26$) of victims knew the perpetrator (most commonly a neighbor, 53.8%), 22.5% ($n=9$) were abused by a stranger, and 12.5% ($n=5$) involved a family member.

3. Circumstances of Abuse

- **Location.** The perpetrator’s residence was the most frequent setting (55%, $n=22$), followed by the street (17.5%, $n=7$), and various other locations (27.5%, $n=11$) including schools, taxis, and shops.
- **Means of Coercion.** Physical violence was the most common form of coercion (62.5%, $n=25$), followed by verbal threats (25%, $n=10$), weapon threats (15%, $n=6$), and seduction with gifts or money (10%, $n=4$). Some victims experienced sequestration (1 case) or forced toxic ingestion (2 cases).
- **Types of Abuse.** Sexual touching alone was observed in 37.5% ($n=15$), whereas penetration was reported in 62.5% ($n=25$): vaginal (25%, $n=10$), anal (30%, $n=12$), or ano-vaginal (7.5%, $n=3$).

4. Disclosure of Abuse

- **Delay Before First Disclosure.** The mean delay was 68.22 days (range: 1 day–1 year).
- **Consultation Modes.** A judicial request accounted for 65% ($n=26$) of consultations, while 35% ($n=14$) were through personal/family initiative.
- **Time to Medical Consultation.** Fifteen percent ($n=6$) of victims presented within 24 hours, 20% ($n=8$) between 24–48 hours, 30% ($n=12$) between 48–72 hours, and 35% ($n=14$) after 96 hours.
- **Circumstances of Disclosure.** Overall, 57.5% ($n=23$) disclosed spontaneously, 17.5% ($n=7$) were discovered accidentally (e.g., physical findings noted by caregivers), and 25% ($n=10$) were induced or encouraged to disclose.

- **First Recipient of Disclosure.** Mothers were most frequently the first confidant (67.5%, n=27), followed by police officers (12.5%, n=5), and other close individuals (20%, n=8).
- **Obstacles to Disclosure.** In 77.5% (n=31) of cases, victims faced barriers including fear of retaliation (55%), shame/defilement (45%), guilt (37.5%), cultural taboos (10%), and ignorance of the abuse's abnormality (15%). Only 22.5% (n=9) disclosed without obstacles.

5. Factors Influencing Disclosure

A comparative analysis was conducted between the group that disclosed without obstacles (n=9) and the group that faced difficulties (n=31). No significant associations were found with age (<10 vs. ≥10 years), sex, socioeconomic status, intrafamilial vs. extrafamilial link, type of abuse (touching vs. penetration), or means of coercion (p>0.05). However:

- **Stranger Perpetrators.** Abuse by an unknown assailant was significantly associated with disclosing without obstacles (p=0.01).
- **Number of Abuses.** Single-episode abuse showed a significant association with disclosing without obstacles (p=0.005).
- **Disclosure Modality.** Spontaneous disclosure was significantly linked to disclosure without obstacles (p=0.04).
- **Victim's Post-Abuse Emotions.** Fear of negative consequences was significantly correlated with delayed or hindered disclosure (p=0.007).

6. Medico-Legal Consequences

- **Somatic Injuries.** Physical trauma was documented in 65% (n=26). Injuries ranged from bruises (peri-orbital, limb) to scrapes.
- **Sexual Injuries in Girls (n=28).** Vulvar lesions (64.2%, n=18), recent hymenal tears (53.5%, n=15), older hymenal scars (10.7%, n=3), and anal injuries (25%, n=7).
- **Sexual Injuries in Boys (n=12).** Anal lesions were noted in 66.6% (n=8), including anal fissures (75% of these cases) and anal laxity (62.5%).

7. Parents' Reaction

Negative responses, including punishment or blame directed at the victim, were observed in 60% (n=24), sometimes restricting the child's freedom or subjecting them to further violence. Supportive or comforting reactions were found in 40% (n=16).

IV. Discussion

Our study's results highlight the complexity and multifaceted nature of the disclosure process of sexual abuse among minors in Morocco. Disclosure is influenced by a combination of personal, relational, and socio-cultural factors.

1. **Victim Profile:** The predominance of adolescent girls among victims (70%) aligns with international data, where girls are generally more exposed to sexual abuse [7,8]. However, the significant proportion of male victims (30%) underscores that

sexual abuse also affects boys, often underestimated in studies [9]. The average age of 12.75 years suggests that adolescents are particularly vulnerable, which could be linked to developmental changes and school dropout situations observed in 43.6% of victims.

2. **Obstacles to Disclosure:** Fear of retaliation (55%), shame (45%), and feelings of guilt (37.5%) were identified as the main obstacles to disclosure. These factors are frequently cited in the literature as hindering the disclosure of sexual abuse [6,8,16]. Fear is often associated with direct threats from the abuser or fear of not being believed by close ones [20]. Shame and guilt are exacerbated by cultural taboos surrounding sexuality and sexual abuse in Morocco [10,21]. These feelings can be particularly strong in contexts where family honor is valued, leading to prolonged silence from victims [22].
3. **Relationship with the Abuser:** Our study showed that 65% of abusers were known to the victims, which corresponds to international trends where abusers are often people from the close environment [11,23]. This relational proximity complicates the disclosure process, as victims may experience ambivalent feelings toward the abuser, mixing attachment and betrayal [24]. Statistical analysis revealed that when the abuser was unknown, children were more likely to disclose the abuse without obstacles (p = 0.01). This may be explained by a lesser fear of social and family consequences when the abuser does not belong to the close circle.
4. **Number and Frequency of Abuses:** Children who experienced a single abuse were more likely to disclose without obstacles (p = 0.005). Repeated abuses can reinforce the abuser's control over the victim, establish normalization of the abuse, and increase the difficulty of breaking the silence [12,25]. Multiple abuses are also associated with increased feelings of guilt and shame, making disclosure even more complex [26].
5. **Modes of Disclosure:** Spontaneous disclosure is an important indicator of the child's ability to overcome emotional and psychological obstacles [13]. Our study showed that spontaneous disclosures were significantly associated with disclosure without obstacles (p = 0.04). However, a significant proportion of disclosures was accidental or induced, highlighting the crucial role of adults in detecting signs of abuse and encouraging communication [27].
6. **Comparison with Other Studies:** Our results are consistent with other research conducted in different cultural contexts. For example, a study by Orbach et al. in Israel also highlighted that fear of negative consequences and feelings of guilt were major factors hindering disclosure [12]. Similarly, a study in Cameroon emphasized the impact of cultural taboos on victims' silence [10]. These similarities

suggest a universality of certain obstacles to disclosure, despite cultural differences.

7. **Practical Implications:** The practical implications of this study are significant, especially in enhancing clinical interventions, strengthening professional training, and influencing public policy. Firstly, the results underscore the need to develop specific training programs for healthcare professionals, educators, and social workers to raise awareness of the signs of child sexual abuse and equip them to respond in an appropriate and secure manner [18,28]. These training programs should include trauma assessment methods and compassionate communication techniques that facilitate the victims' ability to express themselves.

Furthermore, family awareness plays a fundamental role in prevention and post-traumatic support. By educating parents and caregivers about signs of distress in children, a more secure family environment is created. This support fosters trust and encourages children to speak out if they experience abuse [29]. Finally, these findings could contribute to the development of public policies aimed at strengthening child protection by incorporating preventive measures and resources for victim support within educational and social systems, thereby creating an integrated and sustainable response to sexual abuse.

8. **Cultural and Educational Interventions:** Given the weight of cultural taboos, it is crucial to conduct awareness campaigns tailored to the Moroccan context to break the silence surrounding child sexual abuse [21]. Age-appropriate sexual education can help children understand their rights, recognize abusive situations, and know who to approach for help if needed [30]. Media, community leaders, and religious figures can play a key role in disseminating positive and protective messages [31].

9. **Strengthening the Legal Framework:** Although Morocco has laws to protect children from sexual abuse, their effective implementation remains a challenge. Strengthening legal mechanisms and providing training for legal professionals is essential to ensure adequate handling of abuse cases and to deter offenders [32].

- V. **Limitations of the Study:** Certain limitations should be acknowledged. The relatively small sample size may limit the generalizability of the results. Additionally, the selection bias related to the studied population, drawn from a forensic medicine department, may not reflect all situations experienced by victims of sexual abuse in Morocco. A multicenter study with a larger sample would be desirable to confirm these findings.

- VI. **Research Perspectives:** Future research could explore the coping and resilience strategies developed by victims, as well as the impact of

therapeutic interventions on the healing process. It would also be pertinent to study the role of social networks and new technologies in the disclosure of sexual abuse among youths.

VII. Conclusion

This study underscores the importance of understanding the factors influencing the disclosure of sexual abuse among minors in Morocco. The results show that several factors, such as the number of abuses, the relationship with the abuser, and the victim's feelings, significantly influence the likelihood of disclosing the abuse.

Raising awareness among families, health professionals, and institutions is crucial to create an environment conducive to disclosure. Prevention and education programs must be implemented to break cultural taboos and promote open communication around these sensitive issues.

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Conflicts of Interest

The authors declare no conflicts of interest related to this article.

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