



D32 Describing the Setup and the Functionality of a Medicojudiciary Unit for Sexually Assaulted Children in France

Arnaud Gaudin, MD, Nathalie Jousset, MD, Clotilde G. Rougé-Maillart, MD, and Michel Guilleux, MD, Centre Hospitalier Universitaire, Service De Médecine Légale, 4 rue Larrey, 49933 ANGERS Cedex 9, FRANCE; Gérard Champion, MD, Centre Hospitalier Universitaire, Service De Pédiatrie, 4 rue Larrey, 49933 ANGERS Cedex 9, FRANCE; and Damien Mauillon, MD, Centre Hospitalier Universitaire, Service De Médecine Légale, 4 rue Larrey, 49933 ANGERS Cedex 9, FRANCE*

After attending this presentation, attendees will be briefed on the characteristics of a medico-judiciary unit for sexually assaulted children. The unit gathers various competences in a same place and at the same time in order to optimize judiciary operations while protecting children's health.

This presentation will impact the forensic community by promoting and developing the concept of multidisciplinary units for sexually abused children.

The increase in sexual abuse allegations to children and the diversity of support agents involved has led to a general review of healthcare management.

It is clearly important to be able to coordinate the necessary judiciary interventions with the medical, social, and psychological support for the child. In order to protect the child and the prevention from any further trauma, the child should be cared for in a single place, where all the support agents could meet him or her. Such a unit has been created at the University Hospital of Angers. This multidisciplinary unit is called the Permanent Pediatric Centre for Children in Danger (Permanence d'Accueil Pédiatrique de l'Enfant en Danger).

This center was created in 2005. In this facility, 845 children have been seen (female: 66% and male: 34%). The average age, at which the medical examination took place, was 15 years of age, with the youngest victim at nine months of age and the eldest at 18 years of age. Sexual abuse was presumed to be suffered in 89% and for 11% of the cases physical violence was also suspected. The police are also involved in this structure. A nurse is present to receive the child/children and its family. Investigators can use a special room to interview the children and then document the conversation. After the interviews, forensic examinations are performed by a forensic medical examiner in the same department and in a special room (with colposcope). The same nurse is present during the examination. Pediatricians can be called to give some medical advice or provide medical care.

The family and the children also meet with the social worker and, sometimes, a psychiatrist. This unit seems to be an appropriate answer, facilitating various competences while respecting particularities and the field limits of each support agent.

Characteristics and the particular requirements of the care of sexually assaulted children in this medico-judiciary unit will be explained.

Sexual abuse, Child, Genital Examination