

E13 Penetration Injury From Child Sexual Abuse: A Systematic Literature Review

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Learning Overview: The goal of this presentation is to present a systematic literature review about full vaginal penetration of prepubertal children in published literature, exposing gaps in research. This presentation will impact the forensic science community by disentangling “it’s Normal to be Normal” (NtbN) categorization in Child Sexual Abuse (CSA) from “Full Penetration (FP).” At the end of this presentation, learners will: (1) identify two distinct care specialties for prepubertal children following sexual abuse—pediatric specialists and surgical specialists; (2) disentangle the legal and medical definitions of “penetration of the labia, however slight” from “full penetration,” respectively; and (3) distinguish disentanglement resulting in more questions about injury and long-term sequelae for prepubertal children experiencing full penetration.

Impact on the Forensic Science Community: This presentation will impact the forensic science community by an analytical literature review about prepubertal child sexual abuse that was 3-fold: (1) provide a platform for pre-licensure students to learn one aspect of the research process; (2) distinguish clinical skills necessary for providers in the evaluation of FP of a prepubertal child; and (3) create a foundation for future study about the unique population characteristics in different settings

Legislation, describing penetration as “separation of labia, however slight” guides definitions in CSA research and prosecution. Consequently, scholars using the legal definition argue it is Normal to be Normal (NtbN).¹⁻³ However, children experience significant injury with FP (defined medically as piercing into a cavity), challenging the NtbN notion.⁴⁻⁷ Literature reports injury classifications as normal/non-specific (NtbN) to definitive injury (FP), mixing “separation of the labia, however slight” from those experiencing FP past the hymen into vagina cavity and elsewhere.⁸ Stud-designed selection bias currently prevents injury incidence disentanglement, resulting in the NtbN notion.

A systematic literature review of CSA injury articles was conducted. PubMed, CINAHL®, Scopus®, and Google® Scholar discovered 35 articles responsive to CSA injury. Non-responsive to FP, a reference list search for articles sufficient to analyze rare FP injuries found 4 articles.^{3,4,6,9-13} Analysis revealed that CSA, defined as “separation of the labia, however slight,” rarely results in injury detection (1%-6%), but FP injuries require surgical evaluation (11%-18%) and repair (4%-12%) with significant pelvic-floor outcomes.^{2,4,6,14}

The systematic literature analysis disentangled two distinct populations and outcomes. The CSA specialty clinic studies seldom identify FP injury in prepubertal children. When compared, emergency pediatric hospitals and surgical specialty practices experienced significantly more FP injury cases. Therefore, this systematic review rejects the notion that it is NtbN with FP. Future studies distinguishing normal findings and non-penetrating vulvar trauma from vaginal FP are necessary to fully disentangle data and measure long-term physical impacts of prepubertal FP.

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