



## Original communication

## Suspicious child female deaths in Great Cairo and Giza during 2011–2012



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## ABSTRACT

Childhood mortality is a measure of a nation's health. A statistical analysis on suspicious child female deaths was done in two years period from 1st January 2011 to 31st December 2012. Its incidence was (4%) of all autopsied cases. The adolescent group (16–18 yrs) was highly involved 44 cases (27.5%). The majority of cases were known (82%) and they were from Great Cairo (60%) especially poor areas. Incidences were prevalent in March (15%), indoor (58%) and homicide was main manner in (42.5%) of cases. A relative was the main perpetrator in (50%) of homicidal cases. Wounds were observed in (43%) of cases. The head and neck regions were injured (50%) and signs of abuse were detected in (16%) of the studied cases. These results may be a guide for developing prevention policy.

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## 1. Introduction

A Child death is the death of a child or youth resulting from omission or commission acts.<sup>1</sup> It received a great deal of deserved publicity.<sup>2</sup> Although, child death is well recognized through the medical literature, its true prevalence is very difficult to assess.<sup>3</sup> Substantial misunderstandings exist among the world about its magnitude.<sup>4</sup> The most accurate statistical data of child deaths have been obtained from multi-agency death review teams presented in well developed countries.<sup>5</sup> The analysis of the this data in any civil society is the first step towards development to deal with it and to reduce its impact.<sup>6</sup> Unfortunately, child deaths victims' statistics are not vivid in the Egyptian public's mind.<sup>7</sup>

Violence against women and girls is a much more serious and widespread problem than previously suspected.<sup>8</sup> The female child violence is manifested through physical, sexual, psychological and economic abuse. The forms of female child violence vary according to their age. The most common form is intimate family-related violence, which at its most extreme ends in homicide.<sup>9</sup>

Day by day, homicidal incidence is changing due to its close relation to social and economic changes within a particular society.<sup>10</sup> Rapid rise in population, industrialization, high level of unemployment, depression in every day's life, prevalent economic,

social, political environment, insurgency, terrorism, drug addiction, and easy availability of weapons ... etc may increase the incidence of child deaths.<sup>11</sup>

In Egypt there are no true data about the incidence of child deaths including female ones. So, we aimed to ascertain the incidence, demonstrate other epidemiological and medico-legal characteristics of such cases in Great Cairo and Giza in 2011 and 2012, which in turn can help in generating a base of knowledge for monitoring and evaluating child deaths.

## 2. Material and methods

In this retrospective study 151 cases of suspicious child female deaths (SCFDs), that came for post-mortem examination to Authority of Forensic Medicine Administration, Ministry of Justice, Cairo–Egypt from 1st January 2011 to 31st December 2012, were autopsied according to attorney requests and included in the study.

SCFDs were considered if there was an evidence or suspicion of a crime, when the death was caused by external factors or if the identity of the deceased was unknown.

All female victims aged less than 18 years were selected as World Health Organization and the Egyptian laws consider the subject as a child up to 18 years.<sup>12</sup>

A retrospective archive review was performed on all selected cases. The results were analyzed in terms of number and demographic data of studied female child deaths as (age, socioeconomic status, residency, date, place of occurrence, type of injuries,

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cause, manner of death and relation to the perpetrators if homicide is suspected. Data of death reports were transferred into a basic data sheet as numbers and percentages. It is evaluated statistically using the SPSS version 15 (SPSS Inc., Chicago, IL, USA).

### 3. Results

Total numbers of 3824 medico-legal autopsies (including all age groups of both genders) were done during January 2011 to December 2012 period, Out of which 151 cases (3.9%) were SCFDs.

The percent of distribution of cases was 91 cases (60%) in Great Cairo, from whom 75 cases (82.4%) were known, and 60 cases (39.7%) in Giza, from whom 49 cases (87.5%) were known [Table 1, Fig. 1].

Maximum number of SCFDs was seen in Great Cairo and Giza especially in their south parts 56 cases (37%) [Table 2, Fig. 2]. This was during March 23 cases (15%) followed by, June and September 17 cases (11%) for each [Table 3, Fig. 3]. Age group of 16–18 yrs was the most affected group, 44 cases (29.4%) followed by 1–5 yrs, 34 cases (22.5%). The least affected age group was 11–15 yrs (14.6%) [Table 4, Fig. 4].

The low socioeconomic status was prevalent in more than one half cases 84 (56%) [Table 6, Fig. 6].

Majority of SCFDs was found at home (indoor) 88 cases (58%) followed by outdoor 42 cases (28%) [Table 5, Fig. 5].

Homicide was the main manner in the present study 64 cases (42.5%) followed by accidental deaths, 55 cases (36.4%) [Table 7, Fig. 7].

In homicidal cases 64 cases (42.5%), the perpetrators were identified in 48 cases (75%). The majority of known perpetrators were the child's relative and neighbors in 38 cases (58%). The parents were the main child's relative assailant present in this study 19 cases (59.3%). The assailant were foreigner in 11 cases (17%) [Table 8 and Figs. 8 and 9].

In contrast, suicidal manner presented in 26 cases (17.5) of the cases [Tables 7 and 8 and Figs. 8, 9].

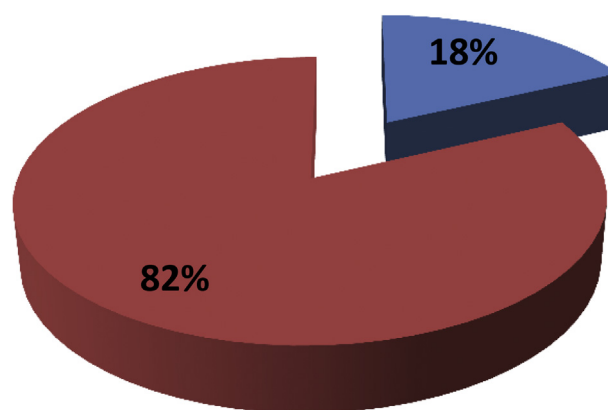
As regard the cause of death, wounds were the commonest in 65 cases (43%), followed by asphyxia in 24 cases (16%), pathological causes in 21 cases (13.5%), poisoning in 19 cases (12.5%) and Burns in 9 cases (5.5%) [Table 9]. Regarding the type of wound, lacerated wounds were the commonest type in 22 cases (33.8%) followed by firearm wounds in 19 cases (29.2%). Concerning asphyxia, smothering was the main type of asphyxia presents in 7 cases (29%), followed by hanging and strangulation each present in 5 cases (20.8%), drowning in 4 cases (16.6%) then throttling and choking present in 2 cases (8.3%), 1 cases (4.1%) respectively. Analysis of toxicological cases showed that, 8 (42%) of poisoning cases were by Organophosphorus, followed by carbon monoxide intoxication 7 cases (36.8%) and a drug of addiction was present in 4 cases (21%) [Table 10].

Analyzing the site of trauma is showed that, multiple trauma sites were the commonest form present in this study 39 cases (40%). Head was the region where maximum number of injuries were observed, 29 cases (30%) followed by the neck 19 cases (20%) [Table 11]. Signs of physical abuse were observed in only 7 cases

**Table 1**  
Distribution of suspicious female deaths according to their identity.

	Giza		Total	Cairo		Total	Total
	2011	2012		2011	2012		
Total number of the female child victims	24 (15.8%)	36 (23.8%)	60 (39.7%)	40 (26.5%)	51 (33.8%)	91 (60.3%)	151*(100%)
Known No (%)	21 (87.5%)	28 (78%)	49 (81.6%)	31 (77.5%)	44 (86%)	75 (82.4%)	124 (82%)
Unknown No (%)	3 (12.5%)	8 (22%)	11 (18.3%)	9 (22.5%)	7 (14%)	16 (17.6%)	27 (18%)

■ Unknown cases ■ Known cases



**Fig. 1.** Distribution of cases according to their identity.

**Table 2**  
Distribution of victims according to their residence.

Area	Giza		No (%)	Area	Cairo		No (%)
	2011	2012			2011	2012	
North	8	18	26 (43%)	North	4	10	14 (15%)
South	16	18	34 (57%)	South	14	8	22 (24%)
Total (No)	24	36	60	East	9	10	19 (21%)
%	40%	60%	100%	West	8	13	21 (23%)
				Middle	3	5	8 (9%)
				Different areas	2	5	7 (8%)
				Total (No)	40	51	91
				%	44%	56%	100%

(5%). While signs of sexual abuse were presented in 12 cases (8%) and signs of negligence were seen in 4 cases (3%) [Table 12].

### 4. Discussion

Childhood mortality is an important measure of a nation's health and a worldwide indicator of social well-being.<sup>13</sup>

Childhood injury is a major public health problem that requires urgent attention. It is a leading cause of child death and ill-health in low-income countries<sup>14</sup> Incidences of homicidal deaths are always increasing. The true incidence of fatal child injuries is unknown and needs multi-agency death review teams.<sup>15</sup>

An estimated 1570 children died as a result of fatal child maltreatment in the U.S. in 2011, which is equivalent to 2.10 deaths per 100,000 children.<sup>16</sup>

Egypt is considered a developing country with multiple societal unstable familial patterns of parent/female child interactions. Accumulation of the frustrations that go with unemployment,

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