

Investigation of foreign national forensic cases in Denizli province

Denizli ilindeki yabancı uyruklu adli olguların incelenmesi

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Abstract

Purpose: This study aimed to evaluate the data of foreign national cases who underwent forensic autopsy and applied to Forensic Medicine Units in Denizli province in the light of political, geographical, and socioeconomic aspects, to contribute to domestic and foreign studies in this field, and to determine the preventable causes of deaths.

Materials and methods: We retrospectively analyzed the medicolegal reports of foreign nationals who applied to the Directorate of Forensic Medicine Council and Pamukkale University Department of Forensic Medicine and foreign nationals who were autopsied in the Pamukkale University.

Results: It was observed that the number of autopsies performed on foreign nationals constituted 2.38% of all autopsies. The most common country of origin of foreign national death cases was Syria with 25.6%. Among the foreign national death cases, 29.1% (25) were tourists. The most common cause of death among foreign deaths was natural origin (43%).

In the case of foreign nationals, 316 reports were issued for 271 cases. The most common country of origin of the applicants was Iran with 33.2%. Of the applicants, 48.3% applied for reports on intentional injury.

Conclusions: Strict pregnancy follow-up, improving living conditions, and providing counseling services to families on child care, neglect, and education are among the measures that can be taken to reduce mortality in the 0-10 age group.

Considering that children are the future of society, it is of great importance that children who are dragged into crime are supported at the earliest possible time.

Keywords: Foreign nationals, medicolegal report, autopsy, migration, forensic medicine.

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Öz

Amaç: Bu çalışmada, Denizli ilinde Adli Tıp Birimlerine başvuran ve adli otopsi yapılan yabancı uyruklu olguların verilerinin politik, coğrafi ve sosyoekonomik açılarından değerlendirilmesi, bu alanda yurt içi ve yurt dışında yapılan çalışmalarına katkı sağlanması ve önlenabilir ölüm nedenlerinin belirlenmesi amaçlanmıştır.

Gereç ve yöntem: Denizli Adli Tıp Şube Müdürlüğü ve Pamukkale Üniversitesi Adli Tıp Anabilim Dalı'na başvuran yabancı uyruklu olguların ve Pamukkale Üniversitesi'nde otopsi yapılan yabancı uyruklu olguların adli raporlarını retrospektif olarak analiz edilmiştir.

Bulgular: Yabancı uyruklu olgulara yapılan otopsi sayısının tüm otopsilerin %2,38'ini oluşturduğu görülmüştür. Yabancı uyruklu ölüm olgularının en sık görülen menşei %25,6 ile Suriye olmuştur. Yabancı uyruklu ölüm olgularının %29,1'i (25) turistir. Yabancı ölümlerde en sık görülen ölüm nedeni doğal neden (%43) olmuştur. Yabancı uyruklularda 271 vaka için 316 rapor düzenlenmiştir. Başvuranların en sık geldiği ülke %33,2 ile İran olmuştur. Başvuranların %48,3'ü kasten yaralama raporu için başvuruda bulunmuştur.

Sonuç: 0-10 yaş grubunda ölüm oranını azaltmak için alınabilecek önlemler arasında sıkı gebelik takibi, yaşam koşullarının iyileştirilmesi ve ailelere çocuk bakımı, ihmal ve eğitim konusunda danışmanlık hizmeti verilmesi yer almaktadır. Çocukların toplumun geleceği olduğu düşünüldüğünde suça sürüklenen çocukların en erken zamanda desteklenmesi büyük önem taşımaktadır.

Anahtar kelimeler: Yabancı uyruklular, adli rapor, otopsi, göç, adli tıp.

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Introduction

Due to its geopolitical location on the route from the Middle East to Europe and the ongoing conflicts in neighboring Iraq, Iran, and Syria, Türkiye is home to one of the world's largest migrant populations [1].

The number of foreign nationals coming to Türkiye has increased in recent years, mainly due to the country's geographical location and extensive investments in the tourism sector, aside from the political instability in neighboring countries [2].

A "Satellite City" is defined as a city that is designated by the General Directorate of Migration Management as a mandatory residence location for foreigners who have applied for international protection [3]. The city of Denizli, where our study was conducted, is one of the satellite cities for Iranian nationals [4].

Denizli province is not only an urban center for international protection applicants but also is known for having one of the richest thermal water resources in the world [5].

Increased international mobility increases the likelihood of foreign nationals dying abroad. For example, a study conducted in Finland reported that cardiovascular diseases were the most common cause of death among residents of Finland when they were abroad. Deaths related to injuries accounted for 26.7% of all injuries, with the most common causes being traffic accidents and drowning [6]. In addition, foreign nationals are not always subject to forensic medicine solely due to their cause of death. Forensic reports related to injuries, age determination, assessment of disability status, evaluation of sexual assault cases, determination of criminal responsibility, and legal capacity may also be required for these individuals.

In summary, the increasing global mobility of people for migration and tourism purposes highlights the growing importance of forensic medical services for foreign nationals in all countries. However, there is a limited number of studies that examine the deaths or forensic clinic

services of foreign nationals in the literature, and no comprehensive study covering all forensic medical services has been identified. This study aimed to comprehensively evaluate forensic cases involving foreign nationals in Denizli province through medicolegal data. The primary objectives were to: (1) analyze the demographic and forensic characteristics of foreign nationals who underwent forensic autopsy, (2) examine the patterns and nature of forensic medical evaluations requested for living foreign nationals, and (3) assess these findings within the broader context of socioeconomic factors. Secondary objectives included identifying preventable causes of death among foreign nationals and developing evidence-based recommendations for mortality reduction. By conducting this analysis, we sought to address the current knowledge gap in forensic medical services for foreign nationals and contribute to the growing body of literature on migrant health and forensic medicine. The findings from this study aim to inform policy decisions and improve the delivery of forensic medical services to this vulnerable population.

Materials and methods

The study is a retrospective descriptive study. The population of the study consists of all foreign living cases applying to the Denizli Directorate of Forensic Medicine Council and the Pamukkale University Department of Forensic Medicine, as well as all foreign death cases that underwent autopsies at the Pamukkale University Hospital Autopsy Room between 2011 and 2020.

It was determined that the regular archiving of forensic reports started in 2011, and the year range to be included in the study was selected accordingly. No sample selection was made, and all cases within the population were included in the study. There are no exclusion criteria in this study.

A trained researcher independently extracted data using a standardized form. Discrepancies were resolved through discussion with a senior forensic medicine specialist. Data quality was ensured through double-entry verification.

Tourist status was determined based on the residence information, citizenship information, and accommodation information of those who came for holiday purposes, as stated in the judicial investigation documents. Natural deaths were defined as those resulting from disease processes without external causes.

The autopsy reports prepared by the Denizli Directorate of Forensic Medicine Council were examined in terms of age, gender, country of origin, tourist status, year of death, causes of death, and death origins. The forensic reports prepared for foreign nationals who applied to the Denizli Directorate of Forensic Medicine Council and Pamukkale University Forensic Medicine Department were examined to determine the number of incidents, number of reports, age at the time of the incident, gender, country of origin, number of applications by year, reasons for applying to the clinic, report results, and the courts to which they were sent.

There is no data loss because standard forms have been used for 10 years.

Approval from the Pamukkale University Faculty of Medicine Non-Interventional Clinical Research Ethics Committee (dated 28/12/2021, numbered E-60116787-020-149488) was obtained for the research. In addition, institutional permissions necessary for the research were obtained from the Denizli Directorate of Forensic Medicine Council and the Istanbul Forensic Medicine Institute Scientific Research and Education Committee.

Statistical analysis

Data belonging to the cases were recorded in a Microsoft Office Software Excel file. The SPSS 17.0 package program was used for data analysis. Descriptive statistics such as number, percentage, mean, standard deviation, and minimum and maximum values were calculated for the examined data.

Results

Medicolegal autopsy services

It was found that 86 foreigners' medicolegal autopsies were performed in Pamukkale University Hospital's autopsy room in Denizli between 2011 and 2020.

Sixty-two point eight percent (54) of these cases are male, and the mean age is 35.29 ± 21.7 . Sixteen point five percent (14) of the cases are under 18 years old. In the age distribution of the cases, it has been found that 14.1% of the cases are within the first 10 years of age, and the most frequently encountered age groups are 21-30 years and 31-40 years, both with 21.2%.

Foreign national autopsy cases conducted in 2011 accounted for 1.4% of all autopsies conducted that year, 0.5% in 2012, 1.4% in 2013, 1.1% in 2014, 1.8% in 2015, 4% in 2016, 2.7% in 2017, 4.6% in 2018, 3.8% in 2019, and 0.6% in 2020.

This study shows that the total number of autopsies conducted in Denizli between 2011 and 2020 was 3599, and the number of foreign national autopsies was 86, accounting for 2.38% of all autopsies.

The most common country of origin for foreign nationals who died is Syria with 25.6% (Table 1).

Autopsy numbers were compared by age groups over the years. It was found that there were 2 cases of autopsy in the 0-10 age group between 2011-2016, while 10 cases were performed between 2017-2020. It was observed that the most common country of origin for cases in the 0-10 age group was Syria with 58.3%. The list also includes the countries of England with 16.6%, Ukraine with 8.3%, Afghanistan, and Iran with 8.3%.

The residency status of foreign nationals who passed away in Türkiye was examined, and it was determined that 70.9% (61) of them were residents in Türkiye, while 29.1% (25) were tourists.

The death origin of foreign death cases is most commonly of natural origin (43%), followed by accidental deaths (37.2%). Homicides and suicides follow these with 9.3%. The death origin of one case could not be determined.

The death origins of the cases and the nature of the incidents were examined. There were 37 cases of natural death (Table 2).

Table 1. The country of origin of foreign nationals

Countries	n	%
Syria	22	25.6
Iran	15	17.4
Afghanistan	11	12.8
Russia	7	8.1
Germany	4	4.7
England	4	4.7
Azerbaijan	2	2.3
Brazil	2	2.3
China	2	2.3
Iraq	2	2.3
Kyrgyzstan	2	2.3
South Korea	2	2.3
France	1	1.2
Georgia	1	1.2
Switzerland	1	1.2
Kazakhstan	1	1.2
Hungary	1	1.2
Nigeria	1	1.2
Uzbekistan	1	1.2
Poland	1	1.2
Portugal	1	1.2
Slovenia	1	1.2
Ukraine	1	1.2

Table 2. Nature and distribution of incidents by origin of death

Origin of the Incident	Nature of the Event	n	%
Unknown	Unknown	1	100
	Stab wound	4	50
Homicide	Gunshot Injuries	3	37.5
	Blunt trauma injuries	1	12.5
Natural	Unknown	2	5.1
	Acute Myocardial Infarction	10	25.6
	Amniotic Fluid Embolism	1	2.6
	Aortic Aneurysm Rupture	1	2.6
	Arrhythmia	1	2.6
	Disseminated Intravascular Coagulopathy	2	5.1
	Natural	6	15.4
	Intracranial Hemorrhage	1	2.6
	Coronary Artery Disease	1	2.6
	Liver-Biliary Diseases	1	2.6
	Mitral Stenosis	1	2.6
	Myocarditis	2	5.1
	Pneumonia	4	10.3
	Pneumothorax	1	2.6
	Sudden infant death syndrome (SIDS)	3	7.7
	A Case Decided Not To Prosecute	1	2.6
	Cardiac Tamponade	1	2.6
Suicide	Hanging	5	62.5
	Butane Intoxication	1	12.5
	Drug Overdose	1	12.5
	Jumping from a Height	1	12.5
Accident	Aspiration	1	3.1
	Carbon Monoxide Intoxication	2	6.3
	Falling	2	6.3
	Electrical Shock	1	3.1
	Hypothermia	1	3.1
	Occupational Accident	4	12.5
	Compartment Syndrome and Sepsis	1	3.1
	Methanol Intoxication	4	12.5
	Parachute Accident	1	3.1
	Drowning	2	6.3
	Traffic Accident	12	37.5
	Illegal Drugs	1	3.1

When the distribution of causes of death is evaluated according to age groups, it is determined that in the 0-10 age group, the most common cause of death is natural with 91.7%, followed by accidents with 8.3% (Table 3).

The origin of death was evaluated according to tourist status. Tourists died as a result of

natural causes (48%) and accidental causes (52%), while non-tourists died as a result of natural causes (41%), accidental causes (31.1%), suicide (13.1%), and homicide (13.1%) ($p=0.037$). The origin of death could not be determined in one case (1.6%). Undetermined deaths origins of death are listed separately within their own category.

Table 3. Causes of death by age

	Unknown	Homicide	Natural	Suicide	Accident
	n (%)	n (%)	n (%)	n (%)	n (%)
0-10 age	0 (0)	0 (0)	11 (91.7)	0 (0)	1 (8.3)
11-20 age	0 (0)	1 (14.3)	1 (14.3)	0 (0)	5 (71.4)
21-30 age	0 (0)	6 (33.3)	2 (11.1)	3 (16.7)	7 (38.9)
31-40 age	1 (5.6)	0 (0)	5 (27.8)	3 (16.7)	9 (50)
41-50 age	0 (0)	1 (10)	4 (40)	2 (20)	3 (30)
51-60 age	0 (0)	0 (0)	7 (77.8)	0 (0)	2 (22.2)
61-70 age	0 (0)	0 (0)	3 (60)	0 (0)	2 (40)
71-80 age	0 (0)	0 (0)	2 (50)	0 (0)	2 (50)
81 and over age	0 (0)	0 (0)	1 (50)	0 (0)	1 (50)

The most common cause of death was natural causes with 40.7% for males and 46.9% for females. Homicide accounted for 11.1% of male deaths and 6.3% of female deaths, suicide accounted for 11.1% of male deaths and 6.3% of female deaths, and accidents accounted for 37% of male deaths and 37.5% of female deaths.

Forensic medicine clinic services

Forensic reports issued for foreign nationals who applied to the Denizli Directorate of Forensic Medicine Council and Pamukkale University Hospital Forensic Medicine Clinic between 2011-2020 in Denizli province were analyzed. A total of 316 reports were issued for 271 cases.

Sixty-eight point five percent (185) of the applicants were male. The mean age of all applicants was 23.9 ± 11.3 years. Thirty-six point three percent of the cases were younger than 18 years of age. The age distribution of the cases was analyzed. It was observed that 4.9% of the cases were within the first 10 years of age, and

the most common age group was 11-20 years with 40.8%.

The countries of origin of the applicants were analyzed. Iran ranked first with 33.2%. This was followed by Afghanistan with 22.1%, Syria with 21.4%, Azerbaijan with 4.6%, and Uzbekistan with 4.2%. The countries of origin of the 9 applicants could not be determined. Undetermined countries of origin are listed separately within their own category.

The foreign cases that applied in 2011 constitute 0.10% of all cases applied in 2011, 0.09% in 2012, 0.26% in 2013, 0.21% in 2014, 0.82% in 2015, 0.89% in 2016, 1.41% in 2017, 1.40% in 2018, 1.94% in 2019, and 2.18% in 2020. Considering the entire 10-year period, it has been observed that 0.89% of all cases applied were foreign cases.

The distribution of the applicants according to the reasons for admission was analyzed. Forty-eight point three percent of the applicants were admitted due to intentional injury (Table 4).

Table 4. The distribution of the applicants according to the reasons for admission

Reasons For Admission	n	%
Intentional Injury	131	48.3
Turkish Penal Code 31 (Criminal responsibility due to age/mental health)	53	19.6
Accidental Injury	50	18.5
Determination of Bone Age	17	6.3
Sexual Abuse	8	3
Other Accidents	4	1.5
Turkish Penal Code 32 (Criminal responsibility due to age/mental health)	3	1.1
Declaration of Maturity	1	0.4
Suicide Attempts	1	0.4
Others	3	1.1

The reports of the patients who applied for evaluation of criminal capacity due to minority status were examined. It was observed that there were 53 applications, and some of these applications were recurrent applications related to different incidents. It was determined that the most common crime requested to be evaluated was wounding with 32.4%, followed by theft at 23.9%. The results of the reports issued within the scope of evaluation of criminal capacity due to minorities were examined. Out of 53 cases, 20 (37.7%) had no criminal responsibility, 23 (43.4%) had criminal responsibility, and 7 (13.2%) needed to be evaluated by psychiatry.

Three cases had repeated visits for different incidents. One of these 3 cases had 2, one had 3, and one had 19 admissions. It was stated in the report that the patient, who was admitted due to nineteen incidents, was referred to a psychiatrist and needed psychiatric and social support. Eight cases were requested to be evaluated based on multiple crimes.

The reports of the patients who applied for age determination were analyzed. It was observed that 17 patients applied for this purpose, and 11 of them (64.7%) were female. Eleven of the cases were Syrian, 3 were from Afghanistan, 2 from Iran, and 1 was from Georgian.

Eight sexual abuse/assault reports were analyzed. It was determined that 75% (6) of the cases were female, and 75% of all cases were under the age of 18.

The nature of the events leading to intentional injury cases was analyzed. Of the intentional wounding offenses, 75.2% were blunt trauma injuries, 22.5% were stab wounds, and 2.3% were gunshot injuries.

The nature of the event was examined in cases admitted due to incidental events. It was observed that 98% of the cases were traffic accidents and 2% were occupational accidents.

The nature of the incidents in 4 reports issued within the scope of other accidents was examined. It was seen that final reports were issued for 3 cases, one of which was a fall from a parachute and 1 case due to aspiration of a foreign body. It was understood that the foreign body aspiration case was a 1-year-old girl who aspirated garlic.

Discussion

Türkiye has an important position in the migration tradition due to its geographical location [7].

Changes in the number of foreign nationals in Türkiye lead to some changes in the number of foreign national cases receiving forensic medical services.

Autopsy reports of foreign autopsy cases performed in Denizli between 2011 and 2020 were analyzed. It was seen that foreign autopsies constituted 2.38% of all autopsies. It was observed that different rates were reported in the literature.

In a study covering the years 2010-2015 in Ankara, this rate was 2.3%, while in another study conducted between 1999-2008, this rate was found to be lower at 0.47% [8, 9]. In a study covering the years 2006-2010 in Antalya, one of the cities active in terms of tourism and located on the coastline, this rate was reported to be 15.4% [2].

In the world literature, in a 17-month study conducted in Thailand in 2010-2011, 102 (7.9%) of 1295 deaths were reported to be non-Thai citizens, and in a study conducted in Iceland, 6% of all autopsies were reported to be foreign nationals [10, 11].

Although the ratio of the number of foreign autopsies to the total number of autopsies varies by year, it is understood that the centers where these studies are conducted should be evaluated in terms of tourism and migration policies.

In our study, the countries of origin of foreign death cases were examined. Syria ranked first. This is followed by Iran, Afghanistan, and Russia, respectively. In a study conducted in Ankara, it was reported that Syria ranked first, followed by Iraq and Afghanistan [8]. In a study conducted in Muğla, it was observed that the United Kingdom ranked first, followed by Iraq and Syria [12]. This is different in each country and city, and there are many reasons for these differences. For countries, neighboring countries, visa status, and localization of countries can be counted among the reasons that may be important, while for cities, we think that foreign nationals visiting for tourism purposes mostly visit coastal areas, and the satellite city status of some cities are some of these reasons. Because Denizli, where our study was conducted, is a satellite city and is not located on the coastline, the most common countries of citizens are neighboring countries under temporary and international protection due to internal unrest.

In our study, the origin of death was analyzed according to age groups. It was observed that the 0-10 age group died from natural causes at a high rate, with accidents being the second leading cause of death. Preventable accidents are at the forefront in tourism-active coastal cities such as Antalya and in cities such as Ankara and Denizli, natural causes come to

the fore in addition to accidents [2, 8]. We think that factors such as the low socioeconomic status of child migrants under temporary and international protection, inadequate care, poor living conditions, inadequate utilization of health services, and related infections are effective in this situation.

In this study, forensic reports issued by the Forensic Medicine Clinic of Pamukkale University Hospital and the Denizli Directorate of Forensic Medicine Council between 2011 and 2020 in Denizli were examined, and it was observed that Iran was the first country of origin of the applicants. This is followed by Afghanistan and Syria, respectively. Denizli is one of the satellite cities for Iranian nationals [4]. Therefore, the fact that the most frequently admitted cases were Iranian nationals may be associated with the relatively high number of Iranian nationals in society.

The most common reason for the presentation of the cases to us was intentional injury. Similarly, in a study conducted in Bolu province, the most common reason for the application of the cases applied for the preparation of a final report was reported as intentional injury [13]. In a study in which all cases admitted in Denizli in 2006-2007 and for whom a report was requested within the scope of evaluation of criminal capacity due to minority were examined, it was reported that the most common crime for which an evaluation was requested was theft, followed by injury, and injury was the most common crime in Ordu [14, 15].

It was determined that almost half of the reports evaluating criminal capacity due to minorities were reports of repeat crimes. The fact that a child between the ages of 12 and 15 is involved in 19 different crimes is a clear call for help. Although psychiatric and social support was recommended for this case, the visits for the report continued. This situation suggests that either the measures implemented were insufficient or the precautionary decisions and recommendations written by forensic medicine experts in the reports were not implemented.

Age determination for forensic purposes is carried out by judicial authorities or with individual applications of individuals in many cases, such as the evaluation of legal capacity and criminal

responsibility of individuals, employment of underage individuals, marriage under the age of 18, participation in sports competitions, and military recruitment [16]. The reports of the cases who applied for age determination were examined, and it was observed that more than half of the cases were female, and 11 cases were asked for age determination due to sexual abuse. Of these 11 cases, 4 (36.3%) applied as victims and 7 (63.6%) as perpetrators. It was determined that 3 of the cases who applied as victims applied due to the birth of their children from informal marriages, and 3 of them applied due to the notification of their pregnancies. In another study in which age was determined in refugees, it was reported that 91.4% of the cases were female, all of the female cases and 85.7% of the male cases presented due to sexual abuse, and 95.9% of the women were informally married (religious marriage) [16]. In most of the foreign national cases sent to us by the judicial authorities, a report on the age determination of the cases is requested due to public lawsuits filed due to child marriage or childbirth [17].

In our study, the increase in the number of foreign-born child deaths over the years is thought to be caused by the increase in the number of immigrants with low socioeconomic status coming from Türkiye's neighboring countries due to various problems in their countries. Strict pregnancy follow-up, improving living conditions, and providing counseling services to families on child care, neglect, and education are among the measures that can be taken to reduce mortality in the 0-10 age group.

It is noteworthy that the number of reports issued within the scope of the evaluation of criminal capacity is high in cases where forensic reports are issued due to minorities. Considering that children are the future of society, it is of great importance that children who are dragged into crime are supported at the earliest possible time and that cautionary decisions are proposed and implemented by the competent authorities if deemed necessary.

Child marriages and pregnancies were noteworthy in foreign national applicants. Education should be provided in this direction, attention should be drawn to the fact that this is a form of abuse, and measures should be taken to prevent it. Particular importance should be

given to the education and training of foreign child cases. We think that the realization of effective education and training will increase the adaptation of the young immigrant community to the country and reduce the negative effects of migration.

The limitations of the study are that the findings cannot be generalized to other regions or populations due to the use of data from a single center and that some information cannot be obtained due to the use of retrospective data. However, it provides valuable data in terms of reflecting the characteristics of the foreign national case population in the study area.

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