

NAME: ADELEKE BLESSING OLUWAKEMI

COLLEGE: MEDICINE AND HEALTH SCIENCES

DEPT: MEDICINE AND SURGERY

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RAPE AND STIGMATIZATION OF VICTIMS.

Historically, women have always been subjugated and oppressed by men in most cultures in Nigeria. This situation is due to the inequality in gender relations between men and women. Rape has always been with mankind throughout the world. However, in recent times, the incidence of rape has increased in Nigeria. The hegemonic patriarchal values and practices make it difficult for women who are raped to obtain justice. Perpetrators often go unpunished even if the victims have the courage to report the incident. The court acquits most of the rape offenders on account of the lack of evidence or because the victim has a 'questionable' character. Owing to this, rape victims suffer in silence due to the stigma and humiliation attached to the public acknowledgement of rape. Feminist theory is used to explain rape, the societal reaction to it and the health outcomes for the victims. Rape has always been condemned by most societies around the world. It is usually associated with primitiveness and brutality and it is not seen as something that would be found among refined people. Most societies define rape as a criminal offence and those found guilty of rape are severely punished. Rape can be perpetrated by a man or a woman but in this paper I focus on the woman as the victim. Rape can be by a stranger or by someone who is very familiar such as a husband, brother, in-law or other relations. Before I proceed, I will define the concept of rape. Rape is used interchangeably with sexual assault and sexual violence (Kilonzo et al., 2009). The World Health Organization defined sexual violence as any sexual act, attempt to obtain a sexual act, unwanted sexual comments and advances or acts to traffic or

otherwise directed against a person's sexuality using coercion by any person regardless of their relationship to the victim. In recent times, there has been an upsurge in cases of rape in Nigeria. In a study of causes and incidence of rape among middle aged and young adults found that between 2001 and 2005, 10,079 rape cases were reported. The same study also indicated that only 18 per cent of rape cases in Nigeria are reported. A figure of 10,079 (which is assumed to be 18 %) within these few years, is an indication that rape is very rampant in Nigeria and constitutes a serious public health problem. In the same vein, Kilonzo et al., (2009) indicated that in the WHO multi-country study on women's health and violence against women, 15-59 per cent had at some time experienced sexual violence from intimate partners in Nigeria, Kenya, South Africa and other sub-Saharan African countries. According to Amnesty International (2007), rape by police and security forces is endemic in Nigeria as is the abject failure of the Nigerian authorities to bring perpetrators to justice. Rape has serious health consequences for the victims, including unwanted pregnancy, abortion due to unwanted pregnancy which can result in death, sexually transmitted infections including HIV, and psychological trauma which can extend to the rest of the person's life. Often victims are stigmatized and are considered a public disgrace to their families and significant others which may have serious implications for future relationships such as marriage. There are other explanations of rape which include sociological or psychological theories. Some psychological theorists have maintained that stagnation of the Oedipal stage of development in males makes them prone to having sexual problems later in life, such as the failure to handle competitive relationships, thereby contributing to acts of rape (Peters and Olowa 2010). The sociological theory of rape posits that rape is an evolutionary strategy for certain males who lack the skill to obtain sex from females through non-violent means (Peters and Olowa 2010). A sexual assault survivor's decision to accept a drink from

someone can influence the reaction they receive from society. Women who accepted a drink, alcoholic or non-alcoholic, from a person who later sexually assaults them are blamed more for the assault than the perpetrator and women who did not accept a drink before being assaulted (Romero-Sánchez, Krahé, Moya, & Megías, 2018; Romero-Sánchez, Megías, & Krahé, 2012). According to Relyea and Ullman (2015), these women were met with a distinct reaction that is specific to alcohol use, and although the reaction was not associated with depression or posttraumatic stress disorder, it did increase self-blame and alcohol problems in survivors. Due to this increase in self-blame, survivors who were assaulted after they had been drinking or had feelings of being intoxicated were less likely to report the assault than survivors who did not consume alcohol (Flowe & Maltby, 2018). Another factor contributing to differences in blame is race. Survivors of interracial rapes were blamed more and seen as more promiscuous than survivors of intraracial rapes (George & Martínez, 2002). According to Donovan (2007), black women were also seen as more promiscuous than white women. Additional research found that white women also report less intent and personal responsibility to intervene in a situation that involves a potential victim who is black (Katz, Merrilees, Hoxmeier, & Motisi, 2017). Previous research has investigated the way people view traditional gender roles, negative beliefs about sexual assault survivors in the form of social stigmas, and how these views relate to the negative beliefs (Deitz, Williams, Rife, & Cantrell, 2016; Murray, Crowe, & Overstreet, 2018; Rossetto & Tollison, 2016). Victims of rape should not be stigmatized but embraced by the society.