INSTITUTIONAL AND SOCIETAL RESPONSE TO RAPE IN NIGERIA WITH CONCENTRATION IN UYO, AKWA IBOM STATE

BY

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ABSTRACT

The study examined institutional and societal response to rape in Nigeria with concentration in Uyo, Akwa Ibom State. Three specific objectives and three research questions were raised and three null hypotheses formulated to guide the study. Descriptive survey research design was used for the study. The population of the study comprised of all staff of Nigerian Police Force, Judiciary Staff, Lawyers, Nigerian Prison, NGO Workers, Commercial Sex Workers, Staff of University of Uyo, Students of University of Uyo, Staff of Uyo City Polytechnic and Students of *Uyo City Polytechnic. The sample size of 1200 respondents was used for the study. The sampling* technique was stratified random sampling. The researcher developed instrument entitled "Institutional and Societal Response to Rape Questionnaire (ISRRQ)" was used in collecting data for the study. The instrument was given to two research experts for face validation; my supervisor and a lecturer in test and measurement in the Faculty of social science in University of Uyo, Uyo. . Cronbach's Alpha technique was used in determining the reliability of the instrument and a reliability coefficient of .87 was obtained. Data obtained were analyzed using Pearson Product Moment Correlation Coefficient and regression analysis. Hypotheses were tested at .05 level of significance. The findings of the study revealed that rape incidence is rampant in Akwa Ibom State. There is significant relationship between advice on legal facilities and victims ability to cope with the incidence. There is significant relationship between basic law enforcement involvement and effective control of rape incidence in Akwa Ibom State. Therefore, it was recommended among others that the primary causes of rape in Uyo should be addressed on the platform of conducting routine seminars, workshop and symposiums.

KEY WORDS: Institutional Response, Societal Response, Legal Facilities, Victims, Rape Incidence.

INTRODUCTION

According to World Health Organization (2011), rape is a type of sexual assault usually involving sexual intercourse, which is initiated by one or more persons against another person without that person's consent. The act may be carried out by physical force, coercion, abuse of authority or with a person who is incapable of valid consent, such as a person who is unconscious or incapacitated. Krug (2002) defined rape as "physically forced or otherwise coerced penetration, even if it's slight, of the vulva or anus using a penis, other body parts or an object.

The incidence of rape has become very alarming and worrisome in our society today. Internationally, the incidence of rapes recorded by the police during 2008 varied between 0.1 in Egypt per 100,000 people and 91.6 per 100,000 people in Lesotho with 4.9 per 100,000 people in Lithuania as the median, (Merriam-Webster. 2011). Rape is also recognized as an element of the crime of genocide when committed with the intent to destroy, in whole or in part, a targeted ethnic group. In 2012, the FBI changed their definition from "The carnal knowledge of a female forcibly and against her will." to "The penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the victim." for their annual Uniform Crime Reports. The definition, which had remained unchanged since 1927, was considered outdated and narrow. According to U.S. Dept. of Justice (2012), the updated definition includes any gender of victim and perpetrator, not just women being raped by men, recognizes that rape with an object can be as traumatic as penile/vaginal rape, including instances in which the victim is unable to give consent because of temporary or permanent mental or physical incapacity, and recognizes that a victim can be incapacitated and thus unable to consent because of ingestion of drugs or alcohol. However, the definition does not change federal or state criminal codes or impact charging and prosecution on the federal, state or local level; it rather means that rape will be more accurately reported nationwide, (U.S. Bureau of Justice Statistics 1999).

Some countries such as Germany are now using more inclusive definitions which do not require penetration and the 1998 International Criminal Tribunal for Rwanda defines it as "a physical invasion of a sexual nature committed on a person under circumstances which are coercive". According to Smith in Merril (2004) in some jurisdictions, the term "rape" has been phased out of legal use in favor of terms such as "sexual assault" or "criminal sexual conduct". Other countries or jurisdictions continue to define rape to cover only acts involving penile penetration of the vagina, treating all other types of non-consensual sexual activity as sexual assault. Scotland, for instance, requires that a rapist commit a sexual assault with a penis, so only males can legally be rapists, (U.S. Bureau of Justice Statistics 1999).

Statement of the Problem

The menace of rape incidence in our society cannot be overemphasized. The stigma of rape is baffling as it has been seen as a social evil that has reached explosive proportions. Rape has ruined many lives and continues to do so at a frenetic pace. No one is immune, and age is no barrier. From infants to senior citizens to corpses, rape has become a diabolic symbol of power in an iniquitous world, including Uyo in Akwa Ibom State.

Rape incidence is not only prevalent in Nigeria. It is also common in other countries of the world. For instance, in USA, a rape occurs every two minutes; In India, every 54 minutes, and in Pakistan, every three hours. The tragedy is that 80% are perpetrated by fathers, brothers, relatives or friends. Six out of ten occur in the home or in the home of a relative or friend. The story of an Austrian father, who raped his daughter for 24 years, and sired seven children through her, is still fresh in our minds, (Bell, 2008).

It is obvious that people perception of the victims of rape is not encouraging in Nigeria. Very few groups of people try to bail the victim from the menacewhile many are yet to see the need of doing this. These actions pose the following questions: How have we arrived at a culture that so willingly, so knowingly colludes with perpetrators? How have we agreed to blame victims for their own victimization, as if they somehow had some role to play in such horror happening to their own selves? How have we consented so tamely to play along with the perpetrators, letting them escape responsibility for their own actions and decisions, when we know, as well as they do, what they are doing? The problem of this study is therefore to assess the institutional and societal response to rape incidence in Nigeria.

Objectives of the Study

The main objective of the study is to evaluate the institutional and societal response to rape in Nigeria with concentration in Uyo, Akwa Ibom State, while the specific objectives are as

- 1. To determine the extent of rape incidence in Uyo, Akwa Ibom State.
- 2. To determine the various public responses and reaction of rape incidence in Uvo. Akwa
- 3. To determine the methods adopted by the society and institutions to minimize rape incidence in Uyo, Akwa Ibom State.

Research Questions

The following research questions will be answered:

- 1. What is the extent of rape incidence in Uyo, Akwa Ibom State?
- What are the various public responses and reaction of rape incidence in Uyo, Akwa Ibom 2. State?
- 3. What are the methods adopted by the society and institutions to minimize rape incidence in Uyo, Akwa Ibom State?

Research Hypotheses

The following hypotheses will be tested:

- There is no significant relationship between rape incidence and emotional feelings of the 1. raped victims.
- 2. There is no significant relationship between advice on legal facilities and victims ability to cope with the incidence.
- 3. There is no significant relationship between basic law enforcement involvement and effective control of rape incidence in Akwa Ibom State.

Literature Review

The Prevalence of Rape Incidence in Society

Rape is a type of sexual assault usually involving sexual intercourse, which is initiated by one or more persons against another person without that person's consent. The act may be carried out by physical force, coercion, abuse of authority or with a person who is incapable of valid consent, such as a person who is unconscious or incapacitated. The term is most often defined in

criminal law. Internationally, the incidence of rapes recorded by the police during 2008 varied between 0.1 in Egypt per 100,000 people and 91.6 per 100,000 people in Lesotho with 4.9 per 100,000 people in Lithuania as the median. Sexual violence, and rape in particular, is considered the most under-reported violent crime. The rate of reporting, prosecution and convictions for rape varies considerably in different jurisdictions. The U.S. Bureau of Justice Statistics (1999) estimated that 91% of U.S. rape victims are female and 9% are male, with 99% of the offenders being male. Rape by strangers is usually less common than rape by persons the victim knows, and several studies argue that male-male and female-female prison rape are quite common and may be the least reported forms of rape.

As part of a widespread and systematic practice, rape and sexual slavery are recognized as crimes against humanity and war crimes. Rape is also recognized as an element of the crime of genocide when committed with the intent to destroy, in whole or in part, a targeted ethnic group. Contents in any allegation of rape, the absence of consent to sexual intercourse on the part of the victim is critical (the freedictionary.com, 2011). Consent need not be expressed, and may be implied from the context and from the relationship of the parties, but the absence of objection does not of itself constitute consent. Lack of consent may result from either forcible compulsion by the perpetrator or an incapacity to consent on the part of the victim (such as persons who are asleep, intoxicated or otherwise mentally helpless. The law can also invalidate consent in the case of sexual intercourse with a person below the age at which they can legally consent to such relations with older persons. Such cases are sometimes called statutory rape or "unlawful sexual intercourse", regardless of whether it was consensual or not, as people who are under a certain age in relation to the perpetrator are deemed legally incapable of consenting to sex. Consent can always be withdrawn at any time, so that any further sexual activity after the withdrawal of consent constitutes rape (Struckman and David 2006).

Public Responses and Reaction to Sexual Violence, Rape Incidence and Its Victim

According to Springer (2009), social reactions to rape are socio culturally determined and have a strong influence on the coping and recovery of the survivor. The existing knowledge on social reactions emanates from Western countries with limited research attention on non-Western populations, particularly sub-Saharan Africa. The disclosure of rape events to others creates actions or verbal responses that are collectively known as social reactions (Ullman, 2000).

Survivors of sexual assault usually disclose their experiences mainly to get support (Ahrens, Campbell, Ternier-Thames, Wasco and Sefl, 2007). The disclosure is generally regarded as beneficial for psychological and physical health (Rime, 2005), though social reactions that follow rape disclosure do not necessarily impact positively on the survivor's health. Some social reactions may have a strong negative impact on psychological adjustment and physical recovery (Ahrens et al., 2007). More than 50 specific social reactions considered to have positive or negative impact on rape survivors have been described, mostly in Western populations (Ahrens et al., 2007; Ullman, 2000), although not all social reactions are perceived the same by all rape survivors (Ahrens et al., 2007; Campbell, Ahrens, Sefl, Wasco, & Barnes, 2001).

A response often experienced by rape victims is stigmatization. This basic notion underlying stigma is that the affected person is disgraced, dishonored or otherwise trained by the event. Stigma has been well documented in the literature, mainly in the forms of narratives and general descriptions of societal responses to survivors of both stranger rapes and acquaintance rapes. Highlighted in studies from different cultural contexts was that the emphasis on patriarchy in many societies perpetuated the shame and stigma attached to women rape victims. Mollica and Son (2009) described the social, political and cultural traditions of male-dominant societies that often embrace ideas of female chastity and purity as measures of women's goodness and worth. Once the valued purity of women has been violated through rape incidents, survivors are stigmatized. A belief in sex role stereotype entails restrictions on the appropriateness of sexual partners, sexual acts, conditions, or circumstances under which sex should occur (Burt, 2001) and condemns the rape survivor and her behavior (Check and Malamuth, 2003). For instance, rape survivors who engage in selfblaming attributions are more likely to be blamed than those who make chance or casual attributions (Barnett, Quackenbush, Sinisi, Wegman, and Otney, 2010).

Methods Adopted by the Society and Institutions to Minimize Rape Incidences

The primary prevention or stopping rape before it occurs is the most strategic approach to ending raping against women and girls for the following reasons:

- It upholds the human rights of women and girls and averts a serious public health, security and justice problem.
- It is always preferable to prevent problems than to respond to them and their devastating costs and consequences.

Over the longer run, successful prevention efforts could improve the social, economic, and health status of women and the broader societal wellbeing around the world through: Improved quality of life; improved health status for girls and women; greater respect for and protection of human rights; a reduction in related forms of rape and, cost benefits through lower need for medical care, mental health services, criminal justice, incarceration and expensive perpetrator programmes, diminished educational performance and lost productivity of women. Prevention entails working at different levels of society to change institutions and implement targeted interventions with specific groups, and more generalized approaches for the population at large (e.g. campaigns, mass media messaging and other awareness-raising initiatives). Broad areas of intervention include:

- 1. Influencing government policy and legislation to explicitly address prevention of rape.
- 2. Changing organizational practices to be more gender aware and put in place specific and proactive policies of zero tolerance;
- 3. Fostering coalitions and networks;
- 4. Mobilizing communities, education and social marketing;
- 5. Changing individual knowledge and attitudes: reaching young people and engaging men and boys as allies; and
- 6. Empowering women socially and economically.

However, there is a limited evidence-base and expertise in how to design and implement effective primary prevention strategies in the area of ending raping against women, with some exceptions primarily from industrialized countries and in specific areas. Some experts recommend that universally-applied youth education and school-based programmes together with sustained national prevention campaigns reinforced through community mobilization interventions may provide a particularly promising strategy when combined. (Donovan and Vlais/VicHealth, 2005). There are also responses that can have a preventive effect over the longterm, though they cannot be substituted for or be considered the same as direct ways of minimizing rape incidences. These, include for example: Counseling for children who have experienced or been exposed to rape (which may prevent boys from becoming perpetrators and

girls from becoming victims); risk assessments for survivors (and children or other dependents); and consistent prosecution of cases with successful convictions (which may deter perpetrators or would-be perpetrators from committing future abuse). Prevention of rape incidence should not be implemented without adequate responses in place for survivours, who may come forward as public attention increases and stigma around the issue is reduced.

Methods

Research Design

This study adopted a descriptive survey design. This design was considered appropriate for the research as it attempted to describe the characteristics of the respondents with regard to the variables of the objectives as they are at the particular time.

Area of the Study

The study area is Uyo, in Akwa Ibom state.

Population of the Study

The population of this study comprised of all staff of Nigerian Police Force, Judiciary Staff, Lawyers, Nigerian Prison, Ngo Workers, Commercial Sex Workers, staff of University of Uvo. students of University of Uyo, staff of Uyo City Polytechnic and students of Uyo City Polytechnic.

Sample and Sampling Technique

A sample size of 1200 respondents was used for the study. A stratified random sampling technique was used in selecting 350 Police officers from the Nigerian Police Force, 150 Judiciary staff, 100 Lawyers, 300 staff of the Nigerian Prison, 100 workers of NGO involved in sexual related matters, 50 commercial sex workers, 50 staff and 100 students of the University of Uyo and as well as 60 staff and 60 students of the Uyo City Polytechnic.

Instrumentation

The main instrument of research was the researcher-developed questionnaire called institutional and societal response to rape questionnaire (ISRRQ). The research questionnaire was made up of three sections (sections A. B and C).

Validation of the Research Instruments

The instrument was designed by the researcher, vetted by my supervisors and a lecturer in test and measurement, in the Faculty of social science in University of Uyo, Uyo.

Reliability of the Instruments

The test-retest reliability study was conducted with the use of forty (40) respondents who did not form part of the main study. The instrument was subjected to test-retest reliability study. This study was carried out in order to prove the level of reliability of the research instrument. The result shows that the reliability coefficient ranged from 0.502, to 0.870. The reliability coefficient from the pilot study shows that the obtained values were substantially high enough to justify the use of the research instrument.

Method of Data Analysis

The data obtained were analysed using Pearson Product Moment Correlation Coefficient and regression analysis. Test of significance was done at 0.05 alpha level. If the calculated result is either equal to or greater than the critical value, the result was considered significant but if less, the result was considered not significant.

Result Presentation

Hypothesis One

The null hypothesis states that there is no significant relationship between rape incidence and emotional feelings of the raped victims. In order to test the hypothesis, two variables were identified as follows:-

- Rape incidence as the independent variable 1
- Emotional feelings as the dependent variable

The two variables were subjected to regression analysis in order to generate the predicted value (see table 1).

TABLE 1 Model Summary of the relationship between rape incidence and emotional feelings of the raped victims.

	R	R Square	Adjusted	Std. Error of	Change Statistics
			R Square	the Estimate	
Model					R Square Change
1	0.84	0.69	0.690	0.79749	0.697

^{*}Significant at 0.05 level; df =1198; N =1200; critical r-value = 0.096

The table shows that calculated R-value (0.84) was greater than the critical R-value of 0.096 at 0.05 alpha level with 1198 degree of freedom. The R-square value of 0.69 predicts 69% of the relationship between rape incidence and emotional feelings of the raped victims. This rate of percentage is highly positive and therefore implies that there is significant relationship between rape incidence and emotional feelings of the raped victims.

Hypothesis Two

The null hypothesis states that there is no significant relationship between advice on legal facilities and victims ability to cope with the incidence.

In order to test the hypothesis, two variables were identified as follows:-

- 1. Advice on legal facilities as the independent variable
- 2. Victims ability to cope with the incidence as the dependent variable

Pearson Product Moment Correlation analysis was then used to analyze the data in order to determine the relationship between the two variables (see table 2)

TABLE 2 Pearson Product Moment Correlation Analysis of the relationship between advice on legal facilities and victims ability to cope with the incidence.

Variable	$\sum \mathbf{x}$	∑ x 2	∑xy	r	
Variable	$\sum \! {f y}$	\sum y2			1
Advice on legal facilities (X)	20525	353209			
. ,			305070	0.84*	
Victims ability to cope					
with the incidence (Y)	17738	264038			

^{*}Significant at 0.05 level; df =1198; N =1200; critical r-value = 0.096

Table 2 presents the obtained r-value as (0.84). This value was tested for significance by comparing it with the critical r-value (0.096) at 0.05 levels with 1198 degree of freedom. The obtained r-value (0.84) was greater than the critical r-value (0.096). Hence, the result was significant. The result therefore means that there is significant relationship between advice on legal facilities and victims ability to cope with the incidence.

Hypothesis Three

The null hypothesis states that there is no significant relationship between basic law enforcement involvement and effective control of rape incidence in Akwa Ibom state. In order to test the hypothesis, two variables were identified as follows:-

- 1. Basic law enforcement involvement as the independent variable
- 2. Effective control of rape incidence as the dependent variable

Pearson Product Moment Correlation analysis was then used to analyze the data in order to determine the relationship between the two variables (see table 3)

TABLE 3 Pearson Product Moment Correlation Analysis of the relationship between basic law enforcement involvement and effective control of rape incidence in Akwa Ibom state.

Variable	$\sum X$	$\sum x2$	∇_{vv}	r
v arrable	\sum y	\sum y2	∑xy	1
Basic law enforcement				_
involvement (X)	17314	253262		
			274182	0.76*
Effective control of				
rape incidence (Y)	18863	298569		

^{*}Significant at 0.05 level; df =1198; N =1200; critical r-value = 0.096

Table 3 presents the obtained r-value as (0.76). This value was tested for significance by comparing it with the critical r-value (0.096) at 0.05 levels with 1198 degree of freedom. The obtained r-value (0.76) was greater than the critical r-value (0.096). Hence, the result was significant. The result therefore means that there is significant relationship between basic law enforcement involvement and effective control of rape incidence in Akwa Ibom state.

Discussion of the Findings

The result of the data analysis in table 1 was significant due to the fact that the obtained rvalue (0.84) was greater than the critical r-value (0.096) at 0.05 level with 1198 degree of freedom. This implies that there is significant relationship between rape incidence and emotional feelings of the raped victims. The significance of the result was in agreement with the study of American Medical Association (1995), which asserted that sexual violence, and rape in particular, is considered the most under-reported violent crime. The significance of the result caused the null hypothesis to be rejected while the alternative one was accepted.

The result of the data analysis in table 2 was significant due to the fact that the obtained rvalue (0.84) was greater than the critical r-value (0.096) at 0.05 level with 1198 degree of freedom. This implies that there is significant relationship between advice on legal facilities and victims ability to cope with the incidence. The finding agrees with the opinion of Burt & Estep (1981), who cautioned that the rights of victims to "calm assistance, sympathy, temporary relief from other roles responsibilities, legal recourse, and other similar advantages" cannot be exercised if survivors do not identify their experiences as rape. Therefore, rape victims' perceptions of sexual violence have implications for their subsequent responses to victimization experiences. The significance of the result caused the null hypothesis to be rejected while the alternative one was accepted.

The result of the data analysis in table 3 was significant due to the fact that the obtained rvalue (0.76) was greater than the critical r-value (0.096) at 0.05 level with 1198 degree of freedom. This implies that there is significant relationship between basic law enforcement involvement and effective control of rape incidence in Akwa Ibom state. The significance of the result caused the null hypothesis to be rejected while the alternative one was accepted.

Conclusion

Based on the findings of the research, it is concluded that rape incidence is rampant in Akwa Ibom State. There is significant relationship between advice on legal facilities and victims ability to cope with the incidence. There is significant relationship between basic law enforcement involvement and effective control of rape incidence in Akwa Ibom State.

Recommendations

Based on the findings of the study the researcher wishes to recommend that:-

- 1. The gap between rape incidence and curbing of the menace should be bridged in Nigeria.
- 2. Youths Nigeria should be educated on the different types of rape incidence.
- 3. The primary causes of rape in Uyo should be addressed on the platform of conducting routine seminars, workshop and symposiums.

REFERENCES

- Barnes J. (2001). The Effects of sexual Assault on Rape and Attempted Rape Victims. Victimology: An International Journal, 7, 106–113.
- Barnett L. (2010). Rape: Sexual Disruption and Recovery. American Journal of Orthopsychiatry, 49, 648-657.
- Burt R. (1981). Coping Appraisals and Adjustment to Nonstranger Sexual Assault. Violence against Women, 4, 224–239.
- Campbell, R., Sefl, T., Wasco, S. M., & Ahrens, C. E. (2007) (in press). Doing Community Research without a Community: Creating Safe Space for Rape survivors. American Journal of Community Psychology.
- Donovan W. (2005). Health Effects of Experiences of Sexual Violence for women with abusive partners. Health Care for Women International, 16, 563–576.
- Krug, J. (2002). Towards an Ecological Conception of Preventive Interventions. In J. W. Carter Jr. (Ed.), Research Contributions from Psychology To Whom It May Concern: Community Mental Health (pp. 75–99). New York: **Behavioral Publications**
- Madigan, L., & Merriam-Webster (2011). The Second Rape: Society's Continued betrayal of the victim. New York: Lexington Books.
- Springer M. (2009). Development of a crime-related post-traumatic stress disorder scale for women within the Symptom Checklist 90 Revised. Journal of Traumatic Stress, 3, 439–448.
- Struckman S. and David G. (2006). Determinant of sexual risk-taking among young HIV-negative gay and bisexual men. Journal of Acquired Immune Deficiency Syndromes and Human Retrovirology, 19, 61–66.
- Ullman, S. E., & Filipas, H. H. (2001). Correlates of formal and informal support seeking in sexual assault victims. Journal of Interpersonal Violence, 16, 1028–1047.
- The U.S. Bureau of Justice Statistics (1999). Sex Offenses and Offenders: An Analysis of Dataon Rape and Sexual Assault 3, available at http://bjs.ojp.usdoj.gov/content/pub/pdf/SOO