



A SHORT REPORT

NEED FOR PSYCHOLOGICAL ASSESSMENT OF RAPED VICTIMS: CASE REPORTS OF TWO VICTIMS WHO COMMITTED SUICIDE AFTER BEING “GANG RAPED” IN NIGERIA.

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ABSTRACT.

Rape is a global problem and seems to be on the increase despite efforts by different countries, civil and governmental organizations to stem the tide. Victims suffer social, physical, psychological effects and while, there are comprehensive services in developed countries to address these effects, such can't be said to be present in many poor resource developing countries. This paper emphasize the need for expert psychological assessment alongside with medical treatment by reporting a case of two victims (ladies age ranges 15-18years) who committed suicide after being ganged raped by men in Nigeria. It was further reported that families of the victims were too concerned with legal actions other than the wellbeing of the victims and that victims rather prefer to leave this world than to live to remember the traumatic memories of rape. Finally, this paper draws attention of all stakeholders to the physical, social and psychological complications of suicide among these victims and to further suggest provision of comprehensive services to prevent and also manage complications of such an action among the victims.

Keywords: *Rape, Physical, Social and Psychological Effects.*

INTRODUCTION.

World Health Organization (WHO) defines rape as *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.* Rape occurs worldwide affecting people of all race, tribes (Peter and Olowa 2010) with women and children being more vulnerable (Onah, 2010). Lifetime prevalence of rape and attempted rape worldwide has been reported to be a staggering 20%, while gender-based violence in general against women affects over 30%(MacDonald 2000 and United Nations Population Fund (UNFPA) 2004).

Rate per 100,000 populations are as follows (nation.com 2003-2016):

South Africa	132.4/2010
Botswana	92.9/2010
Lesotho	82.7/ 2010
Australia	28.6/2010



Belgium	27.9/ 2010
USA	27.3/ 2010
Kenya	2.1/ 2010
Nigeria (Actualitix.com)	0.5/2015

According to Peter and Olowa (2010), types of rape include:

Incestual rape: Victim and the perpetrator are related biologically or by marriage. The uncle, brothers, step brothers, grandfather and other male relatives.

Statutory rape: intercourse that is harmful between an older adult and a female under the age of consent under 14 years.

War rape: Rape in war turned countries.

Gang rape: A group of 2 or more people raping their victim.

Marital/spousal rape: any unwanted intercourse or penetration (vaginal, anal or oral) obtained by force or when the wife/husband is unable to consent (Pagelow 1992).

Prison rape: any unwanted intercourse or penetration committed against prisoners as a result of an individual's incarceration.

Acquaintance rape: date rape and hidden rape perpetuated by known person against their victim.

The physical consequences of rape involves a higher chance of having a sexually transmitted disease (STD), unwanted pregnancy, chronic pelvic pain, gastrointestinal tract disorders, pregnancy, gynecological complications and general body pains(Achunike and Kitause 2014).

The psychological impact includes shock, denial, fear, confusion, anxiety, withdrawal, guilt, distrust of others, emotional detachment, depression, post-traumatic stress disorder, eating/feeding disorders including unhealthy eating habits and suicidal behavior(Litchfield and Litchfield 2012).

The social effect can include strained relationships, less emotional support, less frequent contact with friends and family, and a lower likelihood of marriage. In some countries, complete ostracization and death can be the social impact (Peter and Olowa 2010).

The needs of rape survivors are often comprehensive in developed countries, this cannot be said to be the same in poor resource public health sector of developing countries (Sundstrom 2001).

Though, services for rape survivors do exist in most countries and settings, generally they are limited to the provision of medico-legal services (Sundstrom 2001) with little attention given to addressing the psychological and social impacts of rape(Astbury, Jewkes & Garcia-Moreno 2002).



These following 2 case reports justify the need for psychological assessment by expert alongside physical examination and treatment usually conducted by family physician or Gynecologists as the case may require.

CASE 1 (P.M Newsprint 24 10 2013)

Miss J, a native of Oduali in Abua/Odua Local Government Area of Rivers State, Nigeria who resides at a suburb of Yenagoa, the Bayelsa State capital, was said to have poisoned herself after been raped by three boys.

She was gang-raped at gunpoint by the boys, who forced her into an uncompleted building last week, while she was running an errand for her elder sister.

“The girl was sad and devastated after the incident. After she narrated her experience, her sister’s husband, asked her to describe any of her attackers. She described one of them.

“The boy was traced to his house, but he had absconded. The sister’s husband promised to pursue the matter to a logical conclusion.

The psychological trauma that comes with rape was apparently too much for the victim to bear, and she decided to take her own life.

According to the report, the rape victim left behind a suicide note, after which she took a poisonous substance known as Sniper.

She died at Gloryland Hospital, after those who discovered her groaning in pain had rushed her to the hospital.

Confirming the incident, the state Police Public Relations Officer, Mr. A A, said the Police has launched investigation into the alleged rape charges filed by the girl’s family.

CASE 2(Chukwus O. Sun newspaper 12 07 2015)

Fourteen-year-old virgin, Miss C C hanged herself on a guava tree two days after she was gruesomely gang-raped by three men at Iyenyi Village, near Okwoyi Community, in Isieke, Ibeku, in Umuahia North LGA of Abia State, Nigeria.

Victim’s mother said that her daughter did not like having any affair with boys as she swore that she would keep her virginity for her husband. She was said to have told her mother that she would complete her studies and start working before considering marrying. The deceased mother alleged that one of the perpetrators had been disturbing her daughter since they moved to the area in 2013, and had in her presence threatened to deal with her if she refused his amorous overtures.



She hardly collects gifts from boys nor accepts free rides when coming back from school.”

The victim was said to have gone to see her sister in a nearby village. On her way from the visit, the three boys allegedly abducted and took her into a nearby forest, where they have a cult house and shrine. She was shouting, but nobody could come to her rescue. The boy that had been disturbing her for relationship brought out a dagger and threatened to kill her if she refused to submit herself to them. Eventually, they over-powered her, tore off her skirt, blouse, pants, brassier and forcefully raped her in turns. She passed out during the process, only to wake and see herself in the pool of her own blood.

It became difficult for her to stand up and walk out of the forest, as her head was turning and every area of her abdomen and private region was paining her. She said that she looked at herself to discover that blood filled the whole place like where a goat was slaughtered for sacrifice.”

Mr U, victim’s father said that early in the morning that Tuesday, her mother called her to find out how she was raped and she complained that she was having pains all over her body. The mother told her to endure till they come back from the police station that morning, but unknown to them, the deceased had another plan.

A family member disclosed that she had told her mother earlier that she would not be able to stay alive to behold the faces of those who defiled her, but the mother did not understand what she meant.

It was her deafening cry while struggling between life and death on top of the tree that drew people’s attention to the bush. They then rushed to the scene to discover that her tongue had already protruded out of her mouth showing that she had given up the ghost.

DISCUSSION

Globally, rape is an immoral act which is not peculiar to any nation, race, creed or gender (Peter and Olowa 2010). However, women and young ladies are more victims of the act than their male counterparts (Onah 2010). The two presented cases were 2 young ladies (15 and 18years of age) gang raped by some males. Bourgeois (2006) reported that gang rape is predominantly committed by men.

He further stated that sexual aggressiveness is often a defining characteristic of manhood in the group and is significantly related to the wish of being held in high esteem. The two victims suffered physical and psychological effects after the incidences; the families seemed to be more concerned about the legal aspect rather than the health of the victims. In the second case, it was reported that the victim complained of having generalized body pains. The mother however told her to endure till they come back from the police station. She subsequently committed suicide. The physical effect of bleeding, sexually transmitted disease (STD), unwanted pregnancy, chronic pelvic pain, gastrointestinal tract disorders, gynecological complications, general body pains should be promptly addressed to save the life of the victim. Even when some of the above symptoms are not present immediately after the incidences, it is the responsibility of care givers or law enforcement agencies to take the victims to the hospital for proper assessment. The act of Rape is said to challenge a survivor’s “world of meaning” as well



as concepts of safety and trust in one's environment (Koss, Figueredo and Prince 2002) thereby leading to the development of psychological symptoms. Alhassan (2013) reported that nearly one third of raped victims have thoughts of suicide and approximately 17% actually attempted suicide months after the incidence. The assessment should therefore include impact psychological symptoms like denial, fear, confusion, anxiety, withdrawal, guilt, distrust of others, emotional detachment, depression, post-traumatic stress disorder and suicidal behavior. It can't be said whether the 2 presented cases were taken to the hospitals immediately after the incidences, but it is clear that the psychological effects were so much that the victims couldn't bear and hence they both committed suicide. Both victims were healthy prior to the rape incidences. The first case left suicide note stating she killed herself and the second victim told the mother she couldn't be alive to see those who committed atrocity against her. Psychological autopsy is used for evaluation of death by suicide with the aim to retrospectively assess risk factors available at the time of the event and using this principle, the 2 victims committed suicide by poisoning and hanging. It is thus suggested that comprehensive assessment of rape victims to prevent and manage physical, social and psychological consequences of rape be made part of the management strategies. Adequate social support is also desirable for victims of such crime. The perpetrators of the crime against other persons should also be punished accordingly.

CONCLUSION

Rape occurs universally and despite measures being taken to prevent it and also punishing the perpetrators, the incidences have been on the increase. The physical, psychological and social consequences to the victims need to be comprehensively assessed to prevent untoward effect like suicide.



REFERENCES

- Achunike H C, & Kitause R H (2014) Rape epidemic in Nigeria: Causes, consequences and responses to the pandemic. *International Journal of Research in Applied, Natural and Social Sciences*, 2(1), 31-44.
- Alhassan, (2013) Child Rape, who speak for the victim. www.hopeformnigeriaonline.com.
- Astbury, J. & Jewkes, R. (in press) Violence: A Priority Research Area for Women's Mental Health.
- Bourgeois. P.(2006) *In search of Respect*. New York: Free press
- Chukwus O. (2015) . Raped virgin teenager commits suicide *Sun Newsprint Nigeria* 12 7 2015
- Jewkes R., Sen, P., & Garcia-Moreno C. (2002)“Sexual violence”. In: E.G. Krug et al. (Eds.) *World Report on Violence and Health*. Pg149. Geneva. World Health Organisation
- Koss M.P., Figueredo A.J. & Prince R.J. (2002).*Journal of Consulting and Clinical Psychology*. 70(4): 926-94
- Litchfield, B & Litchfield N (2012): *How to talk to your child about sex*, Benin city: Religious broadcasting publishing company.
- MacDonald, R. (2000) Time to Talk about Rape, *British Medical Journal*, 321, 1034-1035.
<http://dx.doi.org/10.1136/bmj.321.7268.1034>
- Onah, N G (2010) Human trafficking in Nigeria: A Christian Response in Nsukka. *Journal of Religion and Cultural Studies*. 3(1), 141-160.
- Pagelow M. D (1992). Adult victims of Domestic violence. *Journal of Interpersonal Violence* 7: 87-120
- Peter, T O, & Olowa, W. O (2010) : Causes and Incidence of Rape among Middle Age and Young Adult in Lagos State, *Nigeria Research journal of Biological Sciences* 5 (10), 670-677
- P.M Newsprint Nigeria (2013) : 18 year old Gang Rape victim commits suicide in Bayelsa. **Independent Communications Network Limited** 24 10
- Russal D.E.H (1994) *Against Pornography: The evidence of harm*. Berkeley: .Russell publication,
- Sundstrom, K. (2001) Reproductive health from an individual and a global perspective. In: Ostlin P et al., eds., *Gender Inequalities in Health*, Cambridge, MA, Harvard Center for Population and Development Studies: 67-98
- United Nations Population Fund (UNFPA) (2004) *State of World Population* UNFPA, New York, 31
- World Health Organization (2011). *Violence against women – Intimate partner and sexual violence against women* Geneva, World Health Organization,
- [www. nationmaster.com](http://www.nationmaster.com) countries compared by crime Rape rate. (2003-2016)
- [www. Actualitix.com](http://www.Actualitix.com) Nigeria rape rate per 100000 population (2015) 15 07