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Sexual coercion in young persons: exploring the experiences of rape victims in Ibadan, Nigeria

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Keywords

Sexual harassment, Young adults, Sexual behaviour, Nigeria

Abstract

In-depth interviews with eight female victims of rape in Ibadan, Nigeria were used to explore the context in which the coercive incident occurred, the health-seeking behaviours that followed and the consequences of this experience in victims' lives. The mean age of the women was 17 years. In all cases, perpetrators of rape were persons with whom the women were acquainted. Rape occurred mainly in familiar and private settings. Rarely do victims communicate the incident to family or friends or report the incident to the enforcement authorities. The stigma associated with rape is a primary barrier to seeking care. Interventions are proposed to address these problems.

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Introduction

Sexual coercion is the use of force or the attempt to force another individual through violence, threats, verbal insistence, deception, cultural expectations, and economic circumstances to engage in any sexual activity against his or her will. Sexual coercion is a continuum of behaviours ranging from unwanted touch, verbal intimidation, rape, to cultural expectations that require girls to marry and sexually service men against their will (Heise et al., 1995). The main criterion of coercion is that the victim lacks choice and faces severe physical, psychological and social consequences if he or she refuses sexual advances (Heise et al., 1999).

Although sexual coercion occurs in all ages, young persons are disproportionately affected (McCauley and Salters, 1995) in developed and developing countries, posing serious threats to the reproductive health of many in this population (Heise et al., 1999; Alan Guttmacher Institute, 1998). Typically, men are the perpetrators of sexual coercion and women the victims (Heise et al., 1995, 1999). The consequences of coercion are profound including chronic pelvic pain, sexually transmitted infections (STI), unwanted pregnancy and adverse pregnancy outcomes such as miscarriage, low birth weight and mental health consequences and abuse of an adolescent's human rights (Heise et al., 1995; World Health Organisation, 1997; Ellsberg et al., 2001).

Given the sensitivity surrounding sexual coercion in general, and that perpetrated on young persons in particular, available evidence on coercion remains sparse, particularly in developing country settings. In Nigeria, for example, few studies have addressed sexual coercion in young persons. Consequently,

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several gaps exist in our knowledge and understanding of the nature and extent of the problem. Some limited available data on coercion in young persons can be derived from reproductive health knowledge, attitude and practice surveys (Dada et al., 1998; Orubuloye et al., 1993; Ajuwon et al., 2002) in which investigators tagged on a few questions on coercion. The problem with this approach is that surveys designed for other purposes are more likely to underestimate the prevalence of sexual coercion than focused studies (Ellsberg et al., 2001).

This paper reports findings from one of the few studies undertaken in Nigeria that focused exclusively on sexual coercion among young persons. It determined the extent to which unwanted sexual relations are experienced by young persons in Ibadan and shed light on the context in which this behaviour occurs (Ajuwon et al., 2001b). While findings relating to young people's perceptions of sexual coercion, and the magnitude and nature of coercion experienced by them, are reported elsewhere, the objective of this paper is to focus on the context of rape, the severest manifestation of sexual coercion. The paper describes in depth the circumstances in which rape occurred, health-seeking behaviours and perceived consequences. In this sense, the study goes beyond portraying rape as a single, isolated event (see e.g. Orubuloye et al., 1993; Ajuwon et al., 2002). Enhancing our understanding of the context in which rape occurs is one of the first steps to drawing attention to the existence of the problem and recommending appropriate interventions.

The social context

Ibadan is the capital of Oyo State with a metropolitan population of approximately three million people who are mainly Yoruba, the dominant ethnic group in Western Nigeria. Many gender norms of the Yoruba make women, especially female young persons, vulnerable to rape. For example, it is considered socially acceptable for a male to force intercourse on a female if he perceives that he has spent a lot of money on her or that her clothing or demeanour are suggestive and invite his attention. Women, on the other hand, are expected to

play passive roles in sexual relationships, deferring to men the decisions regarding when, with whom and under what conditions they have sexual relationships (Adekunle and Ladipo, 1992).

A number of studies in Nigeria have addressed aspects, such as young persons' sexual behaviour and knowledge about contraceptives (Amazigo et al., 1998; Speizer et al., 2000). These studies confirm that considerable proportion of young Nigerians have premarital unprotected sexual intercourse (Amazigo et al., 1998; Iwuagwu et al., 2000; Dada et al., 1998). For example, the 1999 National Demographic Health Survey reveals that only 27 per cent of men and 10 per cent of women aged 15-19 used a condom during the last episode of sex (National Population Commission, 2000). Adverse consequences in terms of STI including HIV/AIDS (Bello et al., 1997; Ekweozor et al., 1995; Brabin et al., 1995), unwanted pregnancies, abortion and their sequalae are also common in this population. Far less is known about the extent to which adolescent sexual behaviour is unwanted, non-consensual or coerced.

Rape is a criminal offence in Nigeria and the Nigerian legal system has provisions for redress. There are three rape-related offences in Nigerian laws, namely rape, attempt to rape and defilement. Rape and the attempt to rape are punishable by life imprisonment or 14 years imprisonment for convicted perpetrators, respectively. Defilement is sexual intercourse with a girl under the age of 13 years, an offence also punishable by life imprisonment.

Despite the existence of these laws, victims of rape seldom report it to police, parents or other care providers. There are four possible explanations for under-reporting rape in this environment. First, as elsewhere, rape is stigmatised in Nigeria. The society believes that the publicity resulting from the prosecution of a case of rape may have long-term adverse consequences on the victim, including difficulty in finding a suitable husband. Second, the evidence required for conviction of rape is so stringent that it is very difficult to prove.

According to the Criminal Laws of Oyo State (1978), the essential requirements for convicting a perpetrator of rape are that

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sexual intercourse was forced, that there is evidence of marks of violence on the body of the victim, that there is a sign of struggle at the scene of rape, that the victim made an outcry whereby she can be heard, that the immediate report of sexual coercion is extracted from the victim without force and that the victim submits herself for medical examination (Criminal Laws of Oyo State, 1978). Third, victims lack knowledge about their rights to redress and the exorbitant cost of legal representation may inhibit victims from pursuing legal redress. Finally, organisations that provide adequate care and support for victims are not readily available. The unfortunate consequence is that victims of rape and other coercive behaviours in Nigeria tend to suffer in silence while perpetrators go free.

Methodology

Research that took place before the study described here

Findings reported here are components of a larger research project that explored the nature and extent of sexual coercion in young persons aged 15-19 years in Ibadan. The study was approved by the Ethics Committees of the World Health Organization, Geneva and The College of Medicine, University of Ibadan, Nigeria.

Only about one-third of young people in the overall study were enrolled in secondary schools (United Nations Development Programme, 2000). About 60 per cent of the remaining two-thirds were apprentices and hawkers. An apprentice is a young person with limited formal education who learns a vocation, such as tailoring or shoe-making, under the direct supervision of an instructor operating in the informal sector of the Nigerian economy. Typically, apprenticeships are part of small businesses and are largely informal. Apprenticeships are conducted in shops, but the owners have no government recognition, registration or support. Hawkers, also part of the informal sector, are young persons who typically sell snacks and beverages on major streets, and in bus and truck stations in urban areas (Ajuwon et al., 2001a).

The overall study began by exploring the perceptions of young persons to sexual coercion

through four narrative workshops. Workshop participants identified 11 coercive behaviours that fell into three categories:

- those that referred to threatened and forced sex, including rape, unwanted touch, incest, assault, verbal abuse and unwanted kisses;
- (2) those that focused on deception and were perceived as setting the stage for nonconsensual sex, such as forced exposure to pornographic films, use of drugs for sedation and medicinal charms including rings or incantations to seduce victims; and
- (3) those that refused the partner any choice in determining the outcome of sex, for example, insistence that she have an abortion (Ajuwon et al. 2001b).

The second phase involved a survey of 1,025 male and female secondary students and apprentices. Given the difficulty in enumerating and accessing hawkers, the study described here focused on young persons engaged in two leading activities - schooling and apprenticeships. Samples were drawn from lists in schools and apprentice workshops (for details, see Ajuwon et al., 2001c). Respondents were asked which of a series of coercive events, drawn up based on reports of the narrative workshops, "has ever happened to you?" The events included verbal threats ("Someone threatened or harassed you to have sex"), unwanted touch ("Someone touched your body against your will"), attempts to force sex ("Someone attempted to rape you") or non-consensual intercourse either through deception and drugging ("Someone drugged you and had sex with you", "Someone tricked you to have sex") or rape ("someone forced you to have sexual intercourse against your will"). About two-thirds of female and about two-fifths of male students and apprentices reported one or more coercive experiences broadly defined. Overall, 12 males (2 per cent) and 33 females (6 per cent) reported rape or forced sex. A profile of youth experiencing other forms of forced sex is shown in Table I. (Note each of the forms of sexually coercive behaviours is not mutually exclusive.) Of note are findings that rape victims were mainly female, and were more likely to be students than apprentices. Perpetrators were largely boyfriends (in the case

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Table I Percentage of young persons reporting severest forms of sexual coercion, Ibadan, Nigeria

	Students		Apprentices		
Coercive behaviours	Male	Female	Male	Female	Total
Number	214	265	276	270	1,025
Experience of forced sex					
Rape	3.7 (8)	7.5 (20)	1.4 (4)	4.8 (13)	4.4 (45)
Deceived or drugged into sex	7.0 (15)	5.7 (15)	5.8 (16)	17.4 (47)	9.1 (93)
Experience of attempted forced sex					
Attempted rape	3.7 (8)	6.4 (17)	2 (0.7)	8.1 (22)	4.8 (49)
Assaulted for sex	2.3 (5)	8.7 (23)	1 (0.3)	18.1 (49)	7.6 (78)
Attempted to deceive or drug into sex	5.1 (11)	12.4 (33)	0 (0.0)	4.4 (12)	5.5 (56)
Forcibly fondled vagina, penis	7.0 (15)	6.0 (16)	11	6.7 (18)	5.9 (60)
Source: Ajuwon et al., (2001c)					

of female respondents) and adults with whom the adolescent was acquainted, and were rarely strangers (for more details, see Ajuwon *et al.*, 2001c).

This study - the in-depth interviews

In the third component of the study, the findings of which are reported in this article, in-depth interviews were conducted with respondents who reported the experience of rape in the survey. The aims of the interviews were to describe context of rape, the profile of victims of rape, their perceived consequences and health-seeking behaviour. In the course of the survey, interviewers sought the consent of respondents reporting forced sex to interview them in more depth at a subsequent time and obtained contact details from consenting respondents. Approximately three months after the survey had been carried out, the study team contacted these respondents and invited them to participate in in-depth interviews. Eight (80 per cent) of the ten female and none of the ten male respondents reporting the experience of forced sex selected for in-depth interviews were successfully interviewed. Others had relocated or refused to provide informed consent when approached.

The two investigators conducted the in-depth interviews in Yoruba, the language widely spoken in Ibadan. Informed consent was obtained again from all participants. Each respondent was told that she could receive counselling from the clinical psychologist on the team or referral services if she needed any of these services. In addition, each informant was provided an assurance of

confidentiality that her real name would not be revealed to protect her privacy. Interviews were conducted in the homes of the respondents or the shops in which they worked when it was considered safe to do so. In situations where the safety of the respondents and the privacy of the interviews could not be assured, interviews took place inside the offices of the principal investigators at the College of Medicine, University of Ibadan, the institutional base of the study team. All interviews were recorded on audiotapes, transcribed and translated into English. Topics covered in the course of the in-depth interview included, aside from the personal characteristics of the woman, the experience of rape and circumstances surrounding it, help-seeking behaviour following the rape, and perceived consequences, both physical and emotional.

Findings

The profile of in-depth interview subjects is shown in Table II. As mentioned earlier, all were female and their ages ranged from 15 to 20. Five were apprentices, and three were students. Despite the limited number of subjects and lack of representativeness, a relatively common profile emerged from the interviews. The large majority of victims lived with their parents, a close family member, or, in the case of one married respondent, with her husband. The perpetrator was, for the most part, a boyfriend or an acquaintance of some kind – peer, neighbour and instructor. The rape occurred, for six of the eight

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Table II Summary of data on sexual coercion in eight victims of rape in Ibadan, Nigeria

Cases (not real names)	Brief profile of victim	Victim's relationship with perpetrator	Setting of rape	Health seeking behaviour	Consequences
1. Nimota	18-year-old apprentice living with Mum	Boyfriend	Perpetrator's home	Did not seek care or inform anyone	Quarrelled with boyfriend; currently still going out with him
2. Medina	19-year-old apprentice living with parents	Boyfriend	Perpetrator's home	Did not do anything	Lost virginity; bruises and pains in vagina; shame
3. Funke	20-year-old student in senior secondary school living with both parents	Boyfriend	Perpetrator's home	Did not inform anyone	Vagina bled; cleaned vagina with water; shame
4. Bimbola	16-year-old student in senior secondary school living with both parents	An acquaintance and his friend (gang raped)	Perpetrator's home	Parents were informed; police was informed; care was given in a health facility	Vagina bled; pains all over the body; had nightmares
5. Foluke	16-year-old student in junior secondary school	An acquaintance who had requested victim to be his girlfriend	Bush path	Told close friends but not parents	Shame; lost virginity; sad
6. Sidikat	20-year-old apprentice living with husband	Boyfriend	Perpetrator's home	Did not tell anyone; went to a patent medicine seller who prescribed some drugs	Shame, regret; fought with him; pleaded and now married to him
7. Taiwo	15-year-old apprentice living with aunt	Neighbour	Perpetrator's home	Did nothing	Information not provided
8. Monisola	17-year-old apprentice	Instructor in Koran school	Perpetrator's office	Did not tell anyone; perpetrator bought drugs	Vagina bled; pain and sadness

respondents, in the home of the perpetrator, including the one incident in which a gang rape was committed.

The context of sexual coercion

The narratives of participants suggest several common themes: first, rape is not an isolated event but in many cases follows a series of attempts to persuade or coerce a female through verbal harassment or unwanted touch to engage in sexual relations. Second, rape is perceived as a weapon whereby unwilling females can be *taught a lesson*. Third, partner rape is perceived as something inevitable. Evidence of each of these themes is presented below.

Rape follows a sequence of coercive behaviours

Several women reported that the rape was preceded by other coercive behaviours including verbal insistence and assault. This is illustrated, for example, in the story

narrated by Monisola (names of the women have been changed to protect their identities), a 17-year-old apprentice who was raped by her teacher who took advantage of his authority to perpetrate the act. Monisola dropped out of school in primary four and was a pupil in an Arabic school when the incident occurred:

I was a 15-year-old pupil of a Koran school when the incident occurred. One day, one of the male instructors told me to see him after the lesson. When I got to his office, he said he wanted to "befriend" me but I told him that I was not interested. He attempted to persuade me in this way, three times, but failed. Then on this particular day, he asked me to see him in his office as he had done in the past. He requested for friendship and I acquiesced this time because I was afraid that he might punish me if I refused again. He then asked if I could play (i.e. touch or embrace) him but I told him I could not do any such thing. He then started to say many things to persuade and sweet-talk me. For example, he said he would take good care of me if I befriend him. He held my hands and was trying to convince

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me. I told him I was having my menstruation on that day and he let me go. One week later I went to the school and after the lessons for the day; this same instructor said I should see him in his office. When I got to his office, he started to touch my body and I told him to stop it. He then went ahead to pull off my clothes by force and tried to force me to have sex with him. I shouted for help but he told me to stop shouting and I stopped. Because he was much stronger I could not free myself from his hold: eventually he forcefully pulled off my clothes and pants and had sex with me.

A similar experience was narrated by Taiwo, a 15-year-old apprentice tailor raped by an adult neighbour:

An elderly man who lives in the flat above ours had been troubling (insisting) me that I should be his girlfriend but I kept refusing, telling him I was still a small girl and not interested in being his girlfriend. One day, he called me to send me on an errand while my guardian was not at home. After delivering the message he lured me in, overpowered me, and forcefully had sex with me.

Partner rape perceived to be inevitable

Several narratives suggested that young rape victims may perceive partner rape as inevitable, if not justifiable, acceding to community norms that condone sexual behaviour and prowess of males. The narrative of Nimota, an 18-year-old apprentice, highlights this:

I was 18 years old when the incident happened. Taju and I have been befriending each other for some months. One day I went to his house and found him washing his clothes outside and we began to gist. After sometime he held my hands and tried to lure me into his room, he said he wanted to have sex. I refused to follow him because I was not interested in having sex. Before that time, I had not had sex with anyone and I did not know what to expect. However, because he was stronger I was unable to resist his pull. Although he was not drunk on that day but he behaved as if the urge for sex was so high that he could not control himself. Inside his room, he pushed me on the bed and forcefully removed my clothes; I used all my strength to free myself but he was more powerful and stronger. Eventually he raped me.

The narrative by Medina, a 19-year-old apprentice, also illustrates the perceived inevitability of partner rape:

My current boyfriend sometime ago attempted to rape me. This happened in his house. I was 17 years old then. It happened last year. That day I went to his house. He said he wanted to have sex with me and I said I was not interested in sex. He locked the door, pulled off my clothes and pushed me to the bed. I kept telling him "No" that he should leave me. However, I did not shout for help from people outside because I was afraid that people would blame me for what happened. I do not know exactly what was wrong with him. I asked him why he had to force me and he said if he did not at that time he could have gone mad.

Rape as a weapon with which to teach unwilling females a lesson

Two victims described being raped following their refusal to accede to the perpetrator's request to be a girlfriend. In the two cases, friends assisted the perpetrator in committing the rape. The friend assisted by forcefully holding the victim to enable his friend to perpetrate the act, and ensured that outsiders did not see the rape. Friends not only abetted the rape, but also raped the victim. Narratives are as follows:

The incident occurred on the bush path to my house around 6.00 p.m. I was returning from school one day when I realised that two boys were following me. I also realised that one of the boys had earlier tried unsuccessfully to make me be his girlfriend. After sometime they overtook and stopped me. The boy who had wanted to befriend me earlier said, "What about the matter we discussed earlier". I said I did not know what he was talking about. He then said "today na today" meaning today is a day of reckoning. I sensed what he was up to and said: "I'm still a small girl". He did not hear my plea. He got hold of me and tore off my clothes, threw me to the ground and forcefully had sex with me. Meanwhile, his friend forcibly held me down and kept watch for passers by. I tried to free myself but could not because the boys were much stronger than I. Some people heard my call for help and tried to catch him but they escaped. (Foluke, a 16-year-old junior secondary school student, raped in the bush path.)

The story narrated by Bimbola provides additional evidence of the theme of rape as a means of teaching a lesson:

The incident occurred when I was 14 years old in junior secondary school. One day during school hours, I checked on Sarah, one of my friends who was absent from school for some days. I met three boys in front of Sarah's house and asked if that was Sarah's house. One of them confirmed it and offered to check if she was in. He requested me to enter the house and offered me a chair to sit; when I got into the room, I did not see her. Before I realised what was happening one of the boys

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locked the door to the room. One of the boys said, "now that we have caught you, you will know what you have done". Suddenly, I saw one boy who had "toasted" me earlier (i.e. attempted to befriend her in the past). He had apparently seen me and had been hiding. He said if I had agreed to befriend him, this would not have happened to me. So I began to shout for help and they pushed me to the bed. I found it difficult to breathe. Two of them forcefully had sex with me before I could muster enough strength to push them off.

Efforts to prevent the rape

The narratives suggest that the women attempted a variety of strategies to prevent the rape but were unsuccessful. Many reported attempting to communicate their unwillingness to engage in sex, for example, I told him I could not do any such thing; I told him to stop it; I kept telling him "No", shouted for help or struggled. Some reported such attempts at negotiation as appealing to the perpetrator that "I was still a small girl" or putting off the perpetrator by indicating that "I was having my menstruation". The narratives uniformly suggest the unwillingness of perpetrators to heed these attempts to negotiate sex, and the ability of the perpetrator (sometimes with the help of his peers) to overpower the victim.

Health-seeking behaviour

In-depth interviews explored the extent to which raped persons sought help, and if so, the type of help sought and to whom the incident was communicated. Findings again suggest some common trends. Fears of being stigmatised or blamed inhibited the victims from revealing the incident. Six of the eight victims did not communicate the incident to anyone. The main reasons reported were shame associated with the incident and fears of disclosure of their secret. As one girl put it:

I did not tell anybody about the incident because I fear that people I tell may tell other people and thus spread the news. I felt too ashamed to tell my parents or elder siblings.

Others expressed fears that parents would misunderstand and blame them for provoking the rape. Hence, one woman informed her close friends but not her parents.

Only one victim shared the experience with her parents, and it was in this case that the respondent obtained support to seek care from a health facility and was also able to report the incident to the authorities:

I was taken to the hospital where I was given injections and tablets; my bruised vagina was also dressed for a few minutes.

Concerning legal redress, the girl said that her parents reported the matter to the police who arrested the perpetrator but later released him (Bimbola).

Possible reasons for the release of the perpetrator may be lack of evidence to get a conviction or reluctance by parents to permit the case to be prosecuted in court because of fear of undesirable consequences associated with rape namely that a victim would have difficulty in finding a suitable husband.

Given the silence surrounding rape, it is no surprise that inaction or self-treatment were the leading responses to the rape: "I just cleaned my genitals with water and waited for it to heal up" (Funke). Those who did seek treatment clearly selected modes and providers perceived to be most likely to guarantee confidentiality – a patent medicine shop or pharmacy for example. In one case, the perpetrator provided the drugs to treat the victim (Monisola).

Perceived consequences

Consequences for the women's lives are indeed severe and diverse. Almost all victims reported injury, bleeding and pain. One victim reported: "Sex was so painful; I bled and could not walk straight" (Bimbola). Another stated: "My vagina was bruised, it bled and I felt serious pain on it. I had pains all over my body and lost appetite thereafter" (Foluke). Fortunately, not a single respondent reported such consequences as an STI or a pregnancy.

Aside from physical consequences, almost all the respondents reported reactions of sadness, shame and fear. Victims used the following words to describe their feelings: "bad" "ashamed" and "unhappy". "I cried". Bimbola, a victim, raped by a gang of two boys described her feelings in the following ways:

After the incident, sometimes I have nightmares that the rape is happening to me again. I told my mum about this and she took me to a Pastor (a Christian religious leader) who advised me to pray whenever it happens. Sometimes I am so afraid that my Mum asked me to sleep beside her and the

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dreams stopped. I felt ashamed and still do especially when I see the boy who did it to me. Sometimes I feel like killing them. If I had a gun, I could shoot him.

For Foluke and Medina, the incident of rape was their first sexual experience.

Finally, perhaps reflecting the view that force and violence are expressions of love, two victims who were raped by their boyfriends reported continuing the relationship. One woman said: "after the incident I quarrelled with him but he pleaded that I should forgive him and I have done so" (Nimota). The second young woman also reported quarrelling with the perpetrator, but subsequently married him (Sidikat).

Discussion

Results consistently corroborate the findings of the survey that took place earlier (see Ajuwon et al., 2001c). Despite its lack of generalisability, findings from in-depth interviews reported in this paper have yielded considerable insight into the context of forced sexual experiences of young women in Ibadan. As other studies have found (Heise et al., 1999; World Health Organization, 1997), coercive behaviours experienced by the women in this study were perpetrated entirely by persons with whom they were acquainted. In not a single case was the rape perpetrated by a stranger but rather by boyfriends, peers and known adults including authority figures. Rape also occured mainly in familiar and private settings - the home of the perpetrator, the office of an authority figure. Rarely did the young rape victims communicate the incident to family or friends, and rarely did they seek care from health facilities or report the incident to the enforcement authorities. Consequences for the women's lives were profound - a deep sense of sadness and shame on the one hand and injury, bleeding and pain on the other.

The findings show the extent to which gender norms and power imbalances have perpetuated the vulnerability of young females to forced sexual encounters. For example, boyfriends, by virtue of their status, were perceived to be entitled to sex with a girlfriend at will, and rape was perceived as a justifiable way of resolving resistance from the female partner. Because these young people lacked skills to negotiate conflict, rape is often a strategy employed by boys to resolve conflict (Ajuwon et al., 2001c). At the same time, rape was seen by some young persons as a way by which a boyfriend shows love to his girlfriend. Finally, in some cases, rape was perceived as a way of teaching an unwilling female a lesson or punishing her for spurning the advances of her pursuer.

Perceived community gender norms tend to hold female victims responsible for "provoking" the rape; while female victims are stigmatised rather than supported, their perpetrators, for the most part, escape censure, as observed also in other studies (World Health Organisation, 1997). These norms pose a severe obstacle to help seeking. Shame and fear of disclosing the incident, attenuated by the deep-seated stigma associated with rape in this environment were the main factors inhibiting the young victims from revealing the incident or seeking care. Other contributing factors may be lack of organisations that cater to the needs of victims of coercion. In addition, victims may perceive that it is their lot to endure such violent act (Odujirin, 1993). The origin of these norms may be traced to the generally low social and economic status of women in Nigeria, where poverty is a major problem (Adekunle and Ladipo, 1993). For example, the percentage of Nigerians living in absolute poverty rose from 28 per cent at independence in 1960 to 49 per cent in 1998 (United Nations Development Programme, 2000).

The role of parents in supporting victims and enabling them to seek help has also been highlighted in these in-depth interviews. Young persons are clearly reluctant to confide in parents, perceiving them to hold the same judgmental attitudes that are apparent in the community. Yet, findings suggest that it was the only victim who communicated the incident to her parents who was able to access help. These findings suggest the need for improved communication, trust between young persons, and trusted adults on the one hand, as well as greater efforts to change community attitudes victimising the victim on the other.

Programme implications

Findings from this study have several implications for programmes and suggest the

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need for multiple interventions directed at multiple populations. The stigma and the culture of silence associated with rape pose a major challenge to addressing the problem in Nigeria. Gender norms and power imbalances have not only perpetuated the acceptability of the practice but have also reinforced the culture of silence whereby victims themselves are inhibited from seeking care or bringing their perpetrators to justice. Findings reiterate the need to change these community norms and gender stereotypes in adults and young people, and strengthen programmes to prevent rape. Young persons themselves, community and government leaders, parents, health service providers, teachers, instructors and employers must be targeted with appropriate interventions. The media can play an important role in educating the public about the consequences of coercion on victims and reducing the stigma associated with it.

Interventions must begin with young persons themselves. Young men require educational programs that would sensitise them to gender inequities and inequalities in Nigeria. They also need to learn that coercion in whatever form is unacceptable, and learn communication and conflict resolution skills that would enable them have healthy relationship with their female counterparts. Young women need programmes that would equip them with ability to recognise potentially risky situations and how to avoid them. Sexuality education is also needed for young women to learn about sources of adult support that might assist in a potentially threatening situation.

A revision is needed in the current laws on sexual-related offences in Nigeria which are too stringent in terms of the proof they demand. The revision should make it less humiliating for victims of rape and other sexual-related offences to report incident to appropriate authorities including the police. Measures must also be taken to empower and support victims to seek care, to report cases of rape and receive sympathetic hearings from those in authority, be they health providers or police and courts. Findings call for training of adults, including parents, teachers, health providers and employers if possible into conveying prevention messages, as well as sensitive counselling and probing. There is a need for specialised agencies

(at government and NGO levels) to address the multiple needs of victims, for example for appropriate care and support, for counselling and for legal services. They also have a role in carrying out activities that educate and sensitise communities, policy-makers and concerned organisations about the injustice of rape and a greater community understanding of rape victims (Watts et al., 1998). Health service providers need to be sensitised to recognise and provide appropriate counselling and services to young people in need.

Finally, the study also presents several methodological lessons that have implications for future research on sexual coercion in this environment. Given the sensitivity of the subject, many study participants who reported the experience of forced sex were unwilling to discuss the experience in depth, although many expressed a new recognition of the injustice of rape. For those who did agree to be interviewed in depth, assuring privacy was a prime concern of both the respondents and the research team. The research team made sure that no in-depth interview was conducted when there was any chance of violation of the respondents' confidentiality, particularly by instructors or parents; special efforts were made to conduct the interview in an environment that ensured the safety and confidentiality of the respondent.

The findings from this study have deepened our understanding of the context in which rape occurs in young people and the consequences of this behaviour among victims in this environment.

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