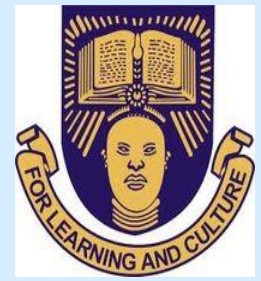


Influence of Rape Myth Acceptance on Responsibility to Rape Action, and the Degree of Rape Trauma: Student Nurses Perception



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Disclosure

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Presentation Objectives:

At the end of this presentation, participants will be able to

- a) describe how rape myth acceptance of student nurses influences their attribution of responsibility (AR) to victim and perpetrator in cases of Acquaintance, Marital, Stranger, and Date Rape scenarios
- b) describe how rape myth acceptance of student nurses influences their perception of degree of rape trauma (DRT) experienced by different categories of female victims



Disclosure

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Outline

- Presentation Objectives
- Introduction
- Study hypotheses
- Methods
- Results And Discussion
- Recommendations
- Conclusion
- References



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Introduction

- Rape is a form of sexual violence that is currently increasing worldwide
- It has become an epidemic in Nigeria (Folayan *et al*,2014; Achunike & Kitause,2014)
- Rape myths are defined as attitudes and beliefs that are generally false but are widely and persistently held and that serve to deny and justify male sexual aggression against women or place blame on the victim {Lonsway and Fitzgerald, 1994; Burt, 1980 as cited by Fox and Potocki, 2015}



Introduction (ctd...)

- Rape myth have negative effects on reporting the crime, how the trial is handled and how the public respond to the crime (Ojo, 2013)
- Rape Myth Acceptance (RMA) is prevalent among the general public including practitioners: police force, medical examiners and criminal justice professionals (Page, 2010)
- Professionals are expected to score less on Rape RMA scale to be effective
- Nurses come across rape victims and perpetrators in various clinical settings and should score less on RMA scale to give quality care
- The need for the study:



Study Hypotheses

- RMA of student nurses will significantly influence their attribution of responsibility to either victim or perpetrator of rape in cases of Acquaintance, Marital, Date and Stranger rape
- RMA of student nurses will significantly influence their perception of the degree of rape trauma experience by different categories of female victims
- Gender of the student nurses will significantly influence their RMA, attribution of responsibility and perception of degree of rape trauma.



Methods

- Design: descriptive-cross-sectional
- Setting: Department of Nursing Science, O. A. U
- Subjects: Part-time nursing students, working-class nurses
- Sampling/sample size: Simple random sampling, 130 students



Methods (ctd...)

- Instrument: Adapted questionnaire from Rape Myth Acceptance Scale developed by Butt, (1980) and four rape vignettes similar to the vignettes developed by Frese, (2004).

- Scenarios from Vignettes described

Acquaintance rape

Marital rape

Stranger rape

Date rape



Methods (ctd...)

The rape scenarios are:

- Imagine that a young woman who is drunk and dressed in a short skirt and skimpy blouse leaves a party accompanied by a man whom she does not know very much about and this man forces her to have sexual intercourse with him.
- Imagine a young woman who does not want to have sexual intercourse with her husband, who comes home drunk, is forced by him to have sex.
- Imagine that a young woman is threatened with a knife and forced to have sexual intercourse with an unknown man in the corner of a narrow path as she goes home at night.
- Imagine a young lady who went to visit her boyfriend who then drugged her and had sexual intercourse with her.



Methods (ctd...)

Each of the scenarios was followed by the same questions of attribution of responsibility which are:

- Evaluate how much responsibility can be assigned to the woman for what happened
- Evaluate how much responsibility can be assigned to the man for what happened
- The students were then instructed to indicate the degree of trauma experienced by the raped victim if she were to be a prostitute, a virgin, a married woman, a divorced woman and a widow.



Methods (ctd...)

Reliability

- Internal consistency of the instrument was determined using Cronbach's Alpha with a results of 0.70 and 0.73 for RMA scale and degree of trauma respectively.

Ethical considerations:

- Permission to conduct the study was obtained from the department of Nursing Science, O.A.U
- Informed consent of the participants was from the participants

Data analysis

- Statistical Package for Social Science (SPSS) version 16.

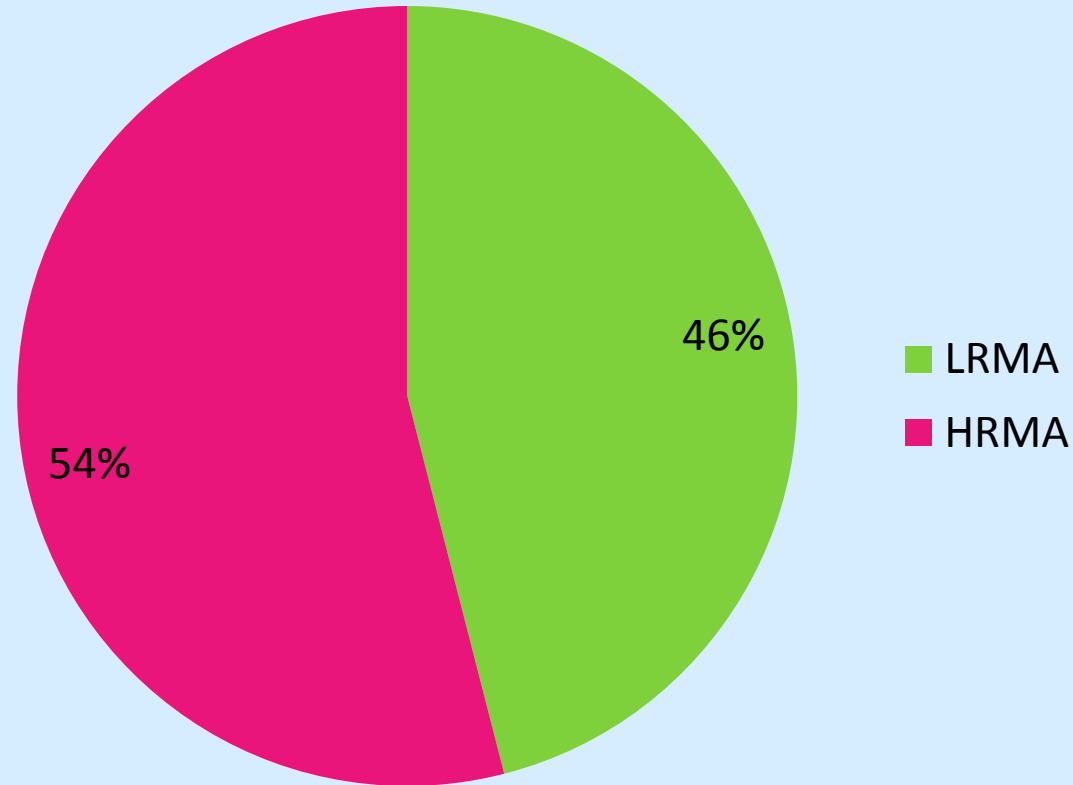


RESULTS AND DISCUSSION



Variables	f (%)
Age group (years)	
10-19	01 (09)
20-40	101 (87.1)
41-60	14 (12.1)
Gender	
Male	28 (24.1)
Female	88 (75.9)
Mean = 32± 7.2, range = 35	
Religion	
Christianity	106 (91.4)
Islam	10 (8.6)
Work Description	
Hospital setting	98 (84.5)
Community	15 (12.9)
NGO	01 (0.9)
Private business	02 (1.7)
Marital status	
Single	51 (44)
Married	64 (55.2)
Divorced	01 (0.9)
Years of experience	
1-10	88 (75.9)
11-20	21 (18.1)
21-30	06 (5.2)
31-40	01 (0.9)
Mean = 8.4±0.6, range = 30	

Demographics/RMA



LRMA -53.6% males, 43.2% females.



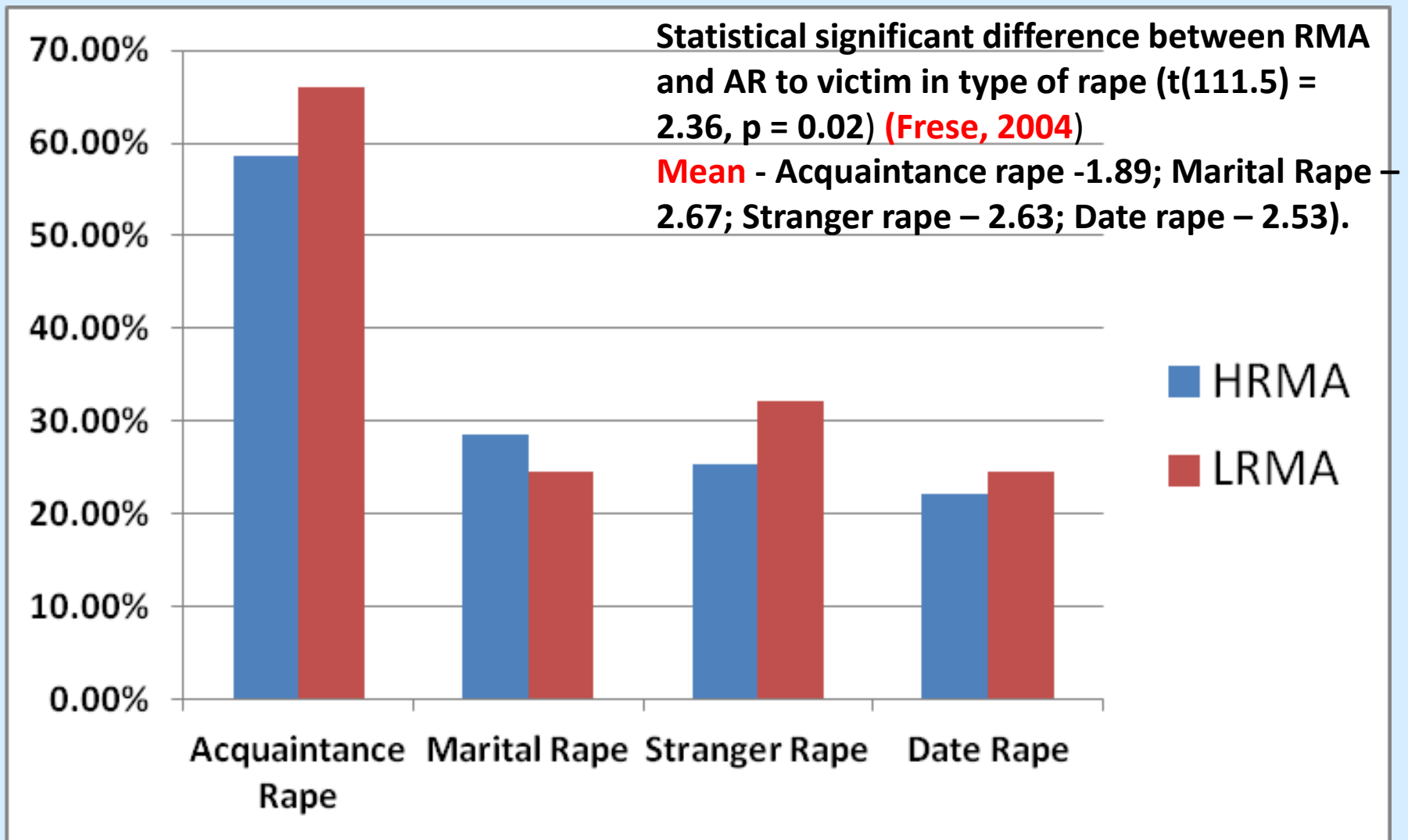


Figure 1: Attribution of 'lots of responsibility' to victim according to RMA



Statistical insignificant difference between RMA and AR to perpetrators in all types of rape ($t(103.5) = -0.31; p = 0.76$).

Mean - Acquaintance rape -2.58; Marital Rape – 2.82; Stranger rape – 3.01; Date rape – 3.16).

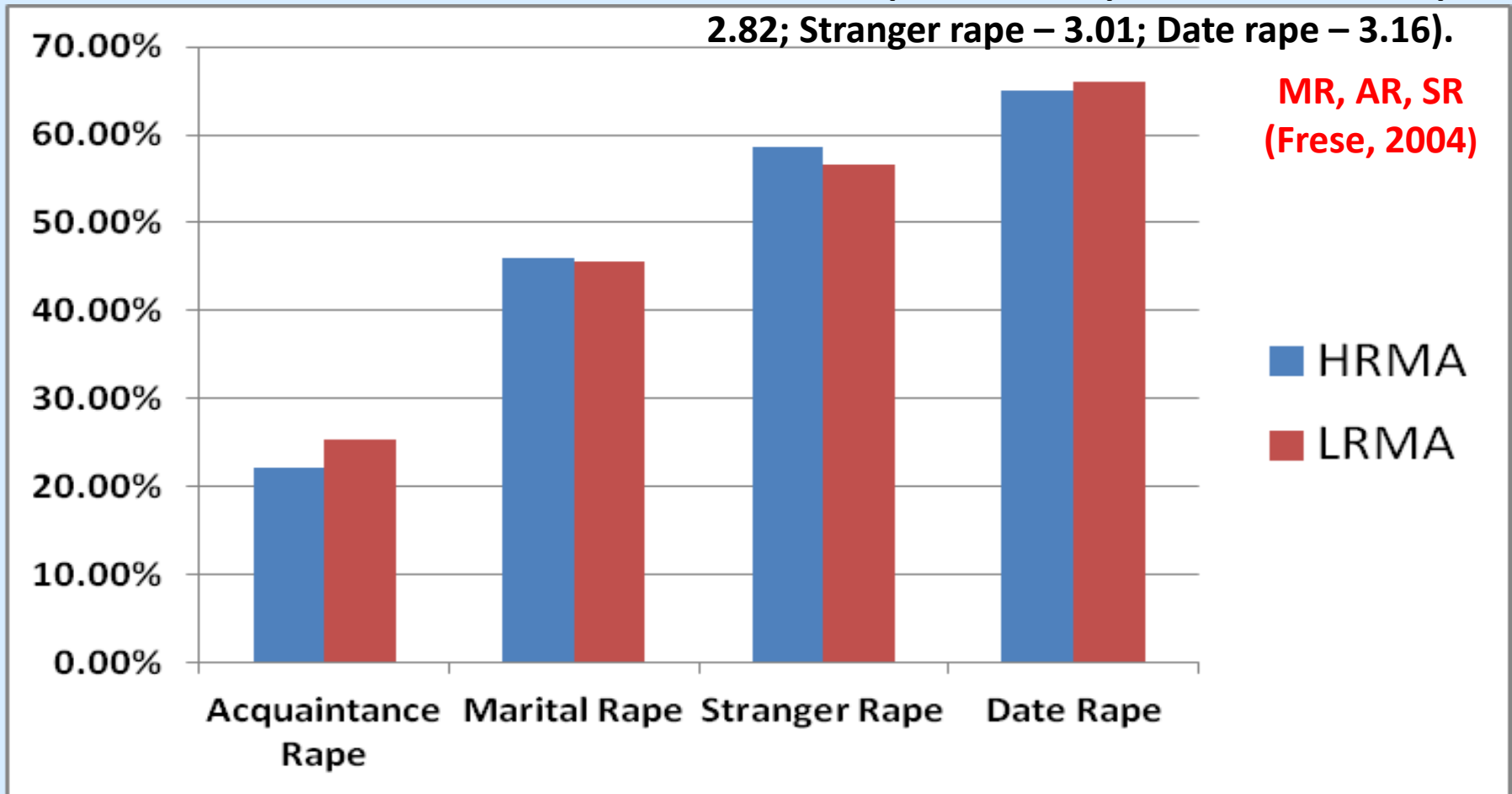


Fig 2: Attribution of 'lots of responsibility' to perpetrator according to RMA



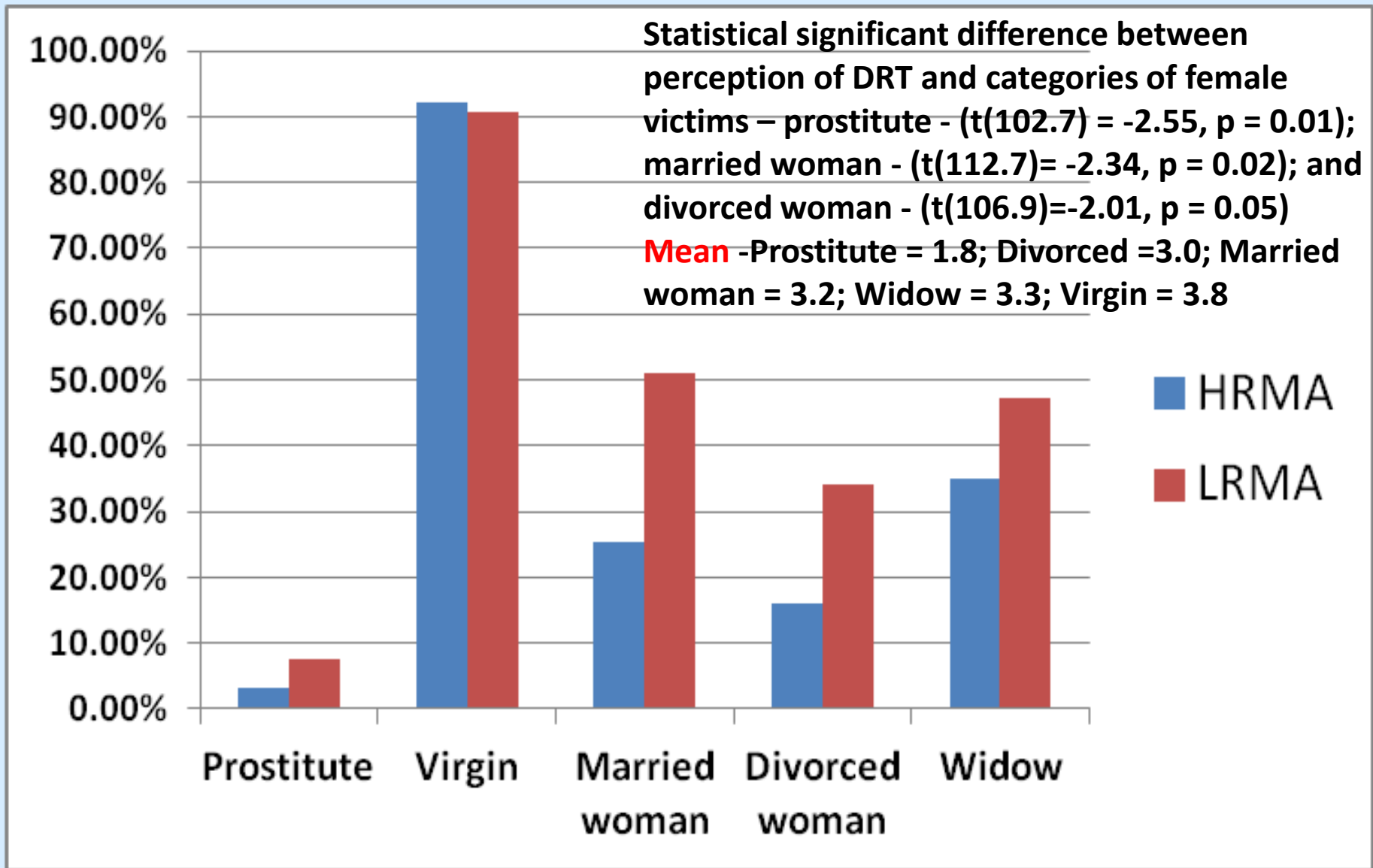


Figure 3: Attribution of ‘definitely traumatic’ experiences to categories of female victims according to RMA



Gender Results

Gender	RMA	Fisher's Exact test= 0.39
Gender	attribution of responsibility to victims	Fisher's Exact test = 0.37
Gender	attribution of responsibility to perpetrator	Fisher's Exact Test = 0.67
Gender	Perception to degree of rape trauma	$t(45.8) = -1.29; p = 0.20$

- Men have higher rape myth acceptance than women (Marbach, 2012).
- Men are more likely than women to endorse rape myths and hold victims responsible for rape (Lee *et al*, 2010 – South Korean students)
- No significance between gender and RMA (Whatley, 1996 & McKay, 2001, Frese, 2004)
- RMA and type of prior relationship affected the verdicts of law students (Sussenbach et al, 2013 - law students)



Recommendations

- In-service training on sexual violence prevention to incorporate correction of myths about rape among practicing nurses
- Revision of BNSc, Basic and Post-basic Nursing curricula to incorporate violence study including sexual violence
- Establishment of a compulsory special electives on violence (sexual violence) for undergraduate students



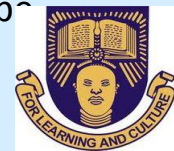
Conclusion

Effective intervention in rape cases by nurses requires that these set of professionals are not favourably disposed to rape myth hence, the need for improving their attitude to rape through education.



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