

Volume 2 Issue 2 February 2020

# Rapes in Society: An Emerging Public Health Problem of Indian Girls and Women

## Sanjeev Davey\*

Professor, Department of Community Medicine, Muzaffarnagar Medical College, Muzaffarnagar, Uttar Pradesh, India

\*Corresponding Author: Sanjeev Davey, Professor, Department of Community Medicine, Muzaffarnagar Medical College, Muzaffarnagar, Uttar Pradesh, India.

DOI: 10.31080/ASWH.2020.02.0081

Received: January 09, 2020 Published: January 21, 2020 © All rights are reserved by **Sanjeev Davey**.

## Abstract

Rape against girls and women in India is the fourth most common crime. More than 25000 have been across India and 97% were committed by someone known to the victim. Indian Girls and women suffer a lot in the form of a double edged sword at its one end many rapes are still not reported in India and on its other hand they are not treated properly by Police, Media and Health system. This not only leads to a lot of physical and mental problems to the rape victims, but also they at times commit suicide or they are murdered. For helping the Indian Girls and women our Health system and law needs to be very sensitive, so that the culprits are Convicted early and Rape victims gets rehabilitated back into their normal life as early as possible.

Keywords: Rape; Crime; Media; Police

### Definition: Rape (Indian Penal Code 375)

According to Criminal Law (Amendment) Act 2013 (section 375-IPC)- Any man above 18 years is said to have committed "rape" if he:-- (a) penetrates his penis, to any extent, into the vagina, mouth, urethra or anus of a woman or makes her to do so with him or any other person; or (b) inserts, to any extent, any object or a part of the body, not being the penis, into the vagina, the urethra or anus of a woman or makes her to do so with him or any other person; or (c) manipulates any part of the body of a woman so as to cause penetration into the vagina, urethra, anus or any part of body of such woman or makes her to do so with him or any other person; or (d) applies his mouth to the vagina, anus, urethra of a woman or makes her to do so with him or any other person; or (d) applies his mouth to the vagina, anus, urethra of a woman or makes her to do so with him or any other person; or (d) applies his mouth to the vagina, anus, urethra of a woman or makes her to do so with him or any other person; or (d) applies his mouth to the vagina, anus, urethra of a woman or makes her to do so with him or any other person; or (d) applies his mouth to the vagina, anus, urethra of a woman or makes her to do so with him or any other person; [1].

Article 376B of the 2013 IPC law also considers a category of rape as a crime when forced sexual intercourse is done by a man with his wife; if she is living separately or they are under a separation and this condition is also punishable with at least a 2-year imprisonment [2]. All such categories have been described under

Section 498(A)Protection of Women from Domestic Violence Act 2005 on issues such as forced sex by a man on his wife and this is prosecutable under above domestic violence act [3].

# Indian statistics

Rape against women in India is the fourth most common crime [4,5]. According to the National Crime Records Bureau (NCRB) 2013 annual report, nearly 25000 rape cases were reported across India in 2012 [6]. and almost all of them (97%) were committed by someone who were already known to the victim [7]. However India is still as one of the "countries with the lowest rates of rape" as compared to Global scenario [8,9]. But the problem is that many rapes are still not reported in India [10,11]. Although the willingness to report the rape has increased in recent years in India possibly due to media attention and triggered public protest but the reporting problem is still very grave [12-15].

# Rape -An emerging public health problem of Indian females: [17-23]

According to NCRB 2015 statistics, Madhya Pradesh is a state with maximum number of rapes in India [16]. The Jodhpur in Raj-

Citation: Sanjeev Davey. "Rapes in Society: An Emerging Public Health Problem of Indian Girls and Women". Acta Scientific Women's Health 2.2 (2020): 44-47.

asthan has the highest per capita rate of rape reports followed by Delhi [18]. Studies reveal that rape is a major public health problem on college campuses e.g. 3% of college women were raped during a 9-month period and 20%–25% of women experienced a completed or attempted rape in their 5-year college careers [16-18].

One study [18] reveals that nearly 35% people feel that -Most rapes are carried out by strangers. This study also reveals that strong sexual desire of guys, drunkenness, and girl's clothes can be the factors that provoke rape of victims. Easily available Porn Movies from Internet and alcohol are also emerging to be one of the factors for rapes in society.

#### Impact of rape on overall health

The rape has a devastating impact on victims such as negative consequences on physical health, mental health, academic performance, and interpersonal relationships [19-23]. Rape against women and girls therefore increases their risk of poor health status. A large number of studies exploring violence and health have reported a lot of negative effects. Although the true extent of the consequences is difficult to measure, but the health Impact is very serious [18].

Surviving a rape event is really a traumatic experience for females and this impacts them in a variety of ways such as physical, psychological, and sociological. The problem gets complexed by the fact that the effects and aftermath of rape are different among survivors such as short term and long term reactions.

Short term reactions may range from Killing the rapist to Suicide of Victim itself. In long term reactions there may be development of coping mechanisms which can either benefit the survivor, such as social support, or it may inhibit their recovery in the form of Rape Trauma Syndrome [20-23].

## Common effects experienced by rape survivors: [20-24]

- 1. Vaginal or anal bleeding and infection
- 2. Hypoactive sexual desire disorder
- 3. Dyspareunia
- 4. Vaginismus
- 5. Chronic pelvic pain
- 6. Urinary tract infections
- 7. Pregnancy
- 8. HIV/AIDS.

Research on rape of women in shelters has shown that women who experience both sexual and physical abuse are significantly more likely to have sexually transmitted diseases including HIV/ AIDS [20]. Any pregnancy resulting from an encounter with a stranger in the form of rape also carries a higher risk of pre-eclampsia [20].

### Analysis of impacts experienced by rape victims

Most rape survivors initially feel a strong psychological impact after their assault; however, many survivors more experience longlasting psychological harms [20-23].

#### **Immediate effect**

Survivors of rape may often have anxiety and fear directly after attack on them [20-23]. According to a study on the reactions after rape by the American Journal of Orthopsychiatry, 96 percent of women said that they were scared, shaking, or trembling a few hours after their attack [21]. After even more time passed, the previous symptoms decreased while the levels of depression, exhaustion, and restlessness increased [20].

### Anxiety

Survivors of rape have high levels of phobia-related anxiety [21] and this includes all the following (Dean G. Kilpatrick, a distinguished psychologist):

- Having panic attacks
- Feelings of dread
- Feeling nervous
- Feeling tense or uneasy

#### Post traumatic stress disorder (PTSD)

Many survivors of rape develop Post-Traumatic Stress Disorder. One study reports that 31% of women who were raped develop PTSD at some point in their lives after rape [17]. The same study also estimated that 3.8 million American women haD rape-related PTSD, and 1.3 million women had rape-induced PTSD [22].

#### Depression

One study using the Beck Depression Inventory test found that women who were raped were more depressed than women who were not. The study concluded that 45% percent of the women who were raped were moderately or severely depressed [23].

## Self-blame

Self-blame functions as an avoidance coping skill that inhibits the healing process and it is the most common entity in the from of both short- and long-term effects and. In addition, shame is also

Citation: Sanjeev Davey. "Rapes in Society: An Emerging Public Health Problem of Indian Girls and Women". Acta Scientific Women's Health 2.2 (2020): 44-47.

connected to many psychological problems – such as eating disorders etc. In one study over several years, shame-prone children were also prone to substance abuse, abnormal sexual activity [20].

#### Sociological impact and mistreatment of victims

After a sexual assault, victims face many scrutinies such as investigations and mistreatment. Victims have to undergo interviewed by police and medical examinations. During the this activity issue of loss of privacy and their credibility often arises. Moreover Sexual assault victims may also experience secondary victimization, slutshaming and cyberbullying.

## Secondary victimization

In Indian scenario, Rape is especially stigmatizing as our culture often have strong customs and taboos regarding sex and sexuality. Indian Victims often suffer isolation, disowning by friends and family, not allowed to marry, be divorced if already married, or even killed. This phenomenon is known as secondary victimization [3]. While society targets secondary victimization mainly towards women as a loss of purity. Secondary victimization is very common in cases of drug-facilitated and statutory rapes.

Secondary victimization is also very re-traumatization of the rape victim through the responses of individuals and institutions in which they work. Various types of secondary victimization can also happen such as victim blaming and inappropriate post-assault behavior or [23,24].

## Victim blaming

The term victim blaming in the context of rape, it refers to the attitude that certain victim behaviors (such as flirting or wearing sexually provocative clothing) may have encouraged the assault. This can cause the victim to believe the crime was indeed their fault. In Indian Scenario victim blaming is more common are those in which there is a significant social divide between the freedoms and status afforded to men and women [23,24].

#### Conclusion

Indian Health System needs to play a large role in supporting the victims of Rape in many ways such as medically and psychologically and our approach must be in collecting evidence to assist prosecutions of rapist [24]. The health sector therefore needs to be more effective by developing Standard Treatment protocols and guidelines for managing Rape cases in Emergency Departments of hospitals and collecting Proper evidence. For this we require welltrained Hospital staff and good collaboration with the judicial system.

### **Bibliography**

- 1. Mehta Siddharth. "Rape law in India: problems in prosecution due to loopholes in the law". (2013).
- 2. "The Criminal Law (Amendment) Act, 2013". The Gazette of India. Government of India (2013).
- 3. Jiloha RC. "Rape: Legal issues in mental health perspective". *Indian Journal of Psychiatry* 55.3 (2013): 250-255.
- 4. Correspondent Legal. "Sex on false promise of marriage is rape: Supreme Court". *The Hindu* (2019).
- Siuli Sarkar. Gender Disparity in India: Unheard Whimpers. PHI Learning (2016): 283.
- Tamsin Bradley. Women and Violence in India: Gender, Oppression and the Politics of Neoliberalism. I.B. Tauris (2017): 105.
- 7. Correspondent Legal. "Sex on false promise of marriage is rape: Supreme Court". The Hindu (2019).
- 8. Siuli Sarkar. Gender Disparity in India: Unheard Whimpers. PHI Learning (2016): 283.
- Tamsin Bradley. Women and Violence in India: Gender, Oppression and the Politics of Neoliberalism. I.B. Tauris (2017): 105.
- Staff writer. "Perceived government inaction over rape and murder of two teenage girls sparks public anger". India'sNews. Net (2014).
- 11. "The Criminal Law (Amendment) Act, 2013" (PDF). The Gazette of India. Government of India. 2013.
- 12. Staff writer. "NCRB data shows 95% rape victims in India known to offenders; Madhya Pradesh tops the list". FirstPost. Chennai, India (2017).
- 13. Staff writer. "NCRB Report: These 6 Indian cities have the highest rate of crimes against women". The Indian Express. Chennai, India (2016).
- 14. Shahid M Shahidullah. Crime, Criminal Justice, and the Evolving Science of Criminology in South Asia: India, Pakistan, and Bangladesh. Springer. p. 96. police-recorded rape rate in India has shown a sharp increasing trend in recent years against the declining trend of all other violent and property crimes (2017).

Citation: Sanjeev Davey. "Rapes in Society: An Emerging Public Health Problem of Indian Girls and Women". Acta Scientific Women's Health 2.2 (2020): 44-47.

- 15. Kumar Radha, "The agitation against rape", in Kumar, Radha (ed.), The history of doing: an illustrated account of movements for women's rights and feminism in India 1800-1990, New Delhi: Zubaan (2003): 128.
- 16. Chapter 5: Crime against women, Crime in India 2012 Statistics (PDF), National Crime Records Bureau (NCRB), Ministry of Home Affairs, Government of India (2016): 81.
- 17. "Table 5.1", Crime in India 2012 Statistics (PDF), National Crime Records Bureau (NCRB), Ministry of Home Affairs, Government of India (2014): 385.
- Karjane H., *et al.* "Sexual Assault on Campus: What Colleges and Universities Are Doing About It. Washington, DC: US Department of Justice, Office of Justice Programs, National Institute for Justice; 2005. Research Report (2005): NCJ 205521.
- Bachar K and Koss M. "From prevalence to prevention". In: Renzetti C, Edleson J, Bergen R, editors. Sourcebook on Violence against Women. Thousand Oaks, CA: Sage Publications (2001): 117-142.
- 20. Campbell R. "The psychological impact of rape victims' experiences with the legal, medical, and mental health systems". *American Psychology* 63 (2008): 702-717.
- 21. Koss MP., *et al.* "Deleterious effects of criminal victimization on women's health and medical utilization". *Archives of International Medicine* 151 (1991): 342-347.
- 22. Waigandt A., *et al.* "The impact of sexual assault on physical health status". *Journal of Trauma Stress* 3 (1990): 93-101.
- 23. Kalra G and Bhugra D. "Sexual violence against women: Understanding cross-cultural intersections". *Indian Journal of Psychiatry* 55.3 (2013): 244-249.
- 24. WHO. "Sexual Voilence". chapter 6.

## Assets from publication with us

- Prompt Acknowledgement after receiving the article
- · Thorough Double blinded peer review
- Rapid Publication
- Issue of Publication Certificate
- High visibility of your Published work
  Website: <a href="https://www.actascientific.com/submission.php">https://www.actascientific.com/submission.php</a>
  Submit Article: <a href="https://www.actascientific.com/submission.php">https://www.actascientific.com/submission.php</a>
  Email us: <a href="mailto:editor@actascientific.com">editor@actascientific.com</a>
  Contact us: +91 9182824667