

## Date Rape Experiences and Help-seeking Behaviour among Female University Students in Ibadan, Nigeria

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### Abstract

**Background:** Date rape is a public health concern in Nigeria. The burden of the problem in Nigerian Universities is, however, yet to be fully investigated.

**Objectives:** The study was therefore designed to determine the prevalence of date rape, context of its occurrence and help-seeking behaviour among female undergraduates of the University of Ibadan.

**Methods:** The cross-sectional survey was conducted among 610 female undergraduates selected using a multi-stage random sampling technique. A semi-structured questionnaire was used for data collection. Data were analyzed using descriptive statistics, Chi-square and logistic regression.

**Results:** Respondents' mean age was  $21.0 \pm 2.5$  years, 50.5% were sexually experienced and prevalence of date rape was 11.8%. The forms of date rape ever experienced included forced vagina sex (80.3%), forced anal sex (10.5%), forced oral sex (15.8%) and forced insertion of fingers into the vagina (32.9%). Date rape was experienced by majority (73.6%) of the survivors when they became undergraduates. Respondents aged 17 -19 were at higher risk of date rape (OR: 4.69, 95%CI: 1.99 – 11.04, P = 0.001) than other age groups. Date rape was experienced by 73.3% in perpetrators' residence outside the campus. Most (91.5%) survivors of date rape never sought any medical help, legal redress, or counseling services. Reasons adduced for not seeking medical services included lack of serious physical injury (53.0%) and fear of stigmatization (12.1%). Many (57.3%) felt it was not necessary to seek for counseling services.

**Conclusions:** Date rape is a reality at the University and majority of the victims were adolescents. Most victims did not seek help, a development that can compound effective rehabilitation. Campus-based educational activities aimed at promoting the sexual rights of female undergraduates, social support for survivors, and provision of survivors with rape prevention skills are needed for addressing the problem.

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**Key words:** Female undergraduates, Dating experience, Rape prevalence, Help-seeking behaviour

## **Introduction**

Rape is a serious human rights violation as well as a public health problem.<sup>1-2</sup> It is a universally acknowledged deviant criminal behaviour which is often facilitated by the use of various coercive means including threats, violence, verbal insistence and deception or manipulation with a view to making a survivor to submit himself/herself to sexual intercourse.<sup>3</sup> Rape compromises survivors' physical and emotional integrity as well as autonomy.<sup>4</sup> Rape, irrespective of who perpetrates it, is a dehumanizing practice and it is thus frowned upon and condemned by various international human right treaties or conventions such as the United Nations Convention on Elimination of all forms of Discrimination Against Women, the International Covenant on Civil and Political Rights and African Charter on Human and People's Rights.<sup>1</sup>

Date rape is a form of rape which is perpetrated by someone with whom an individual (victim) has willingly entered into a dating or romantic relationship.<sup>5</sup> It could involve oral, vaginal, anal, or sometimes digital sex (insertion of a finger into the vagina or anus of a female).<sup>6-7</sup> Date rape could be just as traumatic as sexual assault by a stranger because it involves a breach of trust.<sup>6-7</sup>

It has been noted that female University students are at greater risk of date rape than females of the same age who are not in a University community.<sup>8</sup> The average prevalence rate for date rape varies from country to country. In the United States, for instance, it is about 15% among university students.<sup>9</sup> About 2.5% was documented among university students in Chile.<sup>10</sup> Rape is a source of concern among female University students in Nigeria.<sup>11-12</sup> However the prevalence of the phenomenon in the country has not been adequately explored.

Rape-related experiences adversely affect survivors' physical, psychological and social health.<sup>2,7,13-14</sup> The health-related consequences of rape include unwanted pregnancy and the associated complications, sexually transmitted infections, post-traumatic stress, depression and suicidal thoughts. The experiences could predispose rape survivors to the abuse of alcohol and other drugs.<sup>15-16</sup> A common but inappropriate health-seeking behaviour among survivors of date rape is delay in seeking treatment, a situation which can impede recovery<sup>17</sup> and holistic care which the experience demands.

Date rape is an under-studied reproductive health problem in Nigeria especially among female students in tertiary institutions who are at high risk. This necessitated the design of this study aimed at exploring date rape experiences and help-seeking behaviour among female undergraduate students of University of Ibadan, Nigeria.

## **Methods**

This study was a cross-sectional survey of date rape experiences, context in which date rape occurs and help-seeking behaviour among female undergraduate students of the University of Ibadan. The institution, founded in 1948 as an affiliate of University of London but became an autonomous university in 1962, is located in Ibadan North Local Government Area, Oyo state, Nigeria. The institution has 13 faculties and 12 halls of residence including four halls which accommodate female undergraduate students. A review of records including students' photo album for 2009/2010 session available in each of the four halls of residence showed that 3,751

female undergraduate students were accommodated in the four halls of residence. Each of the halls of residence is made up of several separate blocks of buildings and each room in a block officially accommodates 2 – 4 students.

The study participants were unmarried female students of different socio-demographic characteristics spread across the four halls of residence which accommodate females. The participants were in various programmes and at different levels of study in the University (with each year of study referred to as a level). Students in the first year of their study programme (i.e. 100 level) were excluded from the study as many of them were yet to fully settle down in the University when the study was conducted.

A four-stage sampling technique procedure was used in selecting 651 female students. The first stage involved the purposive selection of all the four halls of residence accommodating female undergraduates in the University. The sample size was shared proportionately among the four halls of residence based on the population of female students accommodated by them. The second stage was the selection of blocks in each hall from which female students were sampled. The third stage involved the selection of rooms in each block to be visited using tables of random numbers. Recruitment of female undergraduates from selected rooms constituted the fourth stage. Due to the stigma-inducing nature of rape, only one participant was interviewed per room in order to ensure confidentiality and undue sensitization of the study population. However, where two or more eligible students were met in a selected room, balloting was used to pick the student that was interviewed.

A self-administered semi-structured questionnaire was used for data collection. The questionnaire was pre-tested at The Ibadan Polytechnic, a tertiary institution in Ibadan with students whose socio-demographic characteristics are similar to those of the University of Ibadan. Date rape was operationally defined as unwanted or coerced sex perpetrated by a dating partner. The concept of date rape in this study covers forms of sexual intercourse such as vaginal, anal and oral sexual intercourse as well as insertion of a finger into a survivor's vagina. The prevalence of date rape was measured in terms of "ever experienced", "experienced in the past one year" or "experienced within the six months" preceding the study. The questionnaire also included questions on perpetrators and context of date rape (situations relating to the occurrence of date rape and setting) and help-seeking behaviour of survivors of date rape.

Four female research assistants were trained to administer the questionnaire. The data collection exercise involved the following processes: entering a selected room to brief occupant(s) about the purpose and nature of the study; balloting to select one occupant for interview if more than one occupant were willing to participate; and requesting occupants not selected to leave the room for about 30 minutes to pave way for privacy during the interview. In a situation where any room occupants would not leave the room for any reason, an alternative setting within the hall which was free of distractions and guaranteed privacy such as office of the officials of the Medical Students' Association and students' common room were used. Most interviews were conducted in the evenings between 4.30 and 7.30 pm when most lectures would have ended.

Each questionnaire was carefully reviewed for completeness and appropriateness of responses. However it is the 610 out of 651 questionnaires without conflicting responses that were coded and

entered into a computer using SPSS version 15. The response rate was therefore 93.7%. Descriptive statistics, Chi-square and logistic regression were used for data analysis.

## **Ethical Considerations**

The protocol for the study was reviewed and approved by the Joint University of Ibadan and University College Hospital Ethics Review Committee. The nature, purpose and processes involved in the study were explained to the participants. Participants were assured of confidentiality, privacy and anonymity of information provided. Only participants who provided written informed consent were interviewed. Survivors of date rape were referred to the University Health Center for treatment and rehabilitative services.

## **Results**

### **Socio-demographic characteristics, history of dating and sexual experience**

The socio-demographic characteristics of respondents are presented in table 1. The respondents' ages ranged from 17 – 30 years with a mean of  $21.0 \pm 2.5$  years and a median of 21 years. Respondents who were teenagers, young persons and adults were 30.3%, 91.3% and 8.7% respectively. Majority (86.8%) of respondents were Christians and many (40.8%) of them were in 200 level (i.e those in the second year of their programme). A large proportion (77.9%) of the respondents had ever dated at least one male partner and 58.5% were in dating relationship at the time of the study. The number of partners ever dated ranged from 1 - 24 with a mean of  $2.5 \pm 2.2$  and median of 2.0. Multiple dating relationship was common with 41.5% dating two or more persons at the time of the study. Overall, 50.5% of the respondents had ever had sexual intercourse. Respondents' mean age at first sexual intercourse was  $18.5 \pm 3.7$  years and 75.5% of them had their first sexual intercourse within the 14 – 21 years age range.

### **Prevalence of date rape**

Overall, 11.8% respondents had ever experienced date rape. Many (54.2%) experienced date rape within the year preceding the study. Fewer (18.1%) respondents experienced date rape six months prior to the study. The commonest form of date rape was forced vaginal sex (80.3%) (see figure 1 for details). Majority (73.6%) of the date rape survivors had the rape experience after being admitted into the University.

The prevalence rates of date rape by selected demographic characteristics are highlighted in table 2. The prevalence of date rape among respondents aged 17 – 19, 20 – 24 and 25 – 30 years were 6.5%, 12.6%, and 24.5% respectively, indicating an increasing prevalence by age. Overall, age was significantly related with date rape. Further logistic regression showed that age was a determinant of date rape with respondents within the 17 – 19 years age range at significantly higher risk of date rape (OR: 4.69, CI: 1.12– 11.04). The prevalence rates of date rape among respondents at the 200, 300, 400, 500 and 600 levels were 10.8%, 14.8%, 13.7%, 4.5% respectively, with no significant difference.

The prevalence rates of date rape among respondents with a single dating partner and among those with multiple (i.e two or more) partners were 14.7% and 21.1% respectively. There was however no significant difference between the number of dating partners and date rape experiences (see table 2). The prevalence rates of date rape among respondents who first had sex before the age of 17, and from 17 - 19, 20 - 24 and 25 - 29 years were 38.7%, 42.4%, 30.4% and 25.0% respectively.

### **Perpetrators and contexts of date rape**

Table 3 presents the contexts in which date rape occurred. Dating partners' places of residence outside the campus (73.3%) topped the list of settings where date rape took place, followed distantly by dating partners' hostel on campus (6.7%). Over half (56.6%) of date rape survivors had the experience after being beaten or manhandled. Many (60.3%) victims of date rape verbally objected to forced sexual intercourse. The proportion of respondents who used a combination of verbal objection and physical resistance to resist being raped was 13.2%.

The perpetrators of date rape were students (52.1%) and non-members of the University community (47.9%). Date rape was more common (77.6%) during the academic session. Only 22.4% cases of date rape took place while the students were on holiday. Over half (53.6%) of the survivors of date rape continued dating relationship with the persons that raped them.

### **Help-seeking behaviour of victims of date rape**

Table 4 presents the help-seeking behaviour of date rape survivors. Only 8.5% of the respondents who had experienced date rape had ever sought at least one form of help. A majority (93.1%) of date rape survivors did not seek medical assistance. Of this, 53.0% stated that they did not seek for medical care because they did not sustain any physical injuries. None of the victims of date rape sought for legal assistance and the adduced reasons included love for the perpetrators (21.4%) and the perception that seeking for legal assistance would be a futile exercise (42.9%). A majority (91.7%) of date rape survivors never sought counseling services; of this 57.3% felt such counseling services were not necessary.

## **Discussion and Conclusion**

Dating is a common practice among female students of the University and several of them were sexually experienced. Although the factors that promote dating among respondents were not specifically explored in this study, a previous study indicated that many female students indulge in dating as a result of the need for companionship, mutual assistance, quest for a future husband and desire for material benefits.<sup>12</sup> These factors may create opportunities for occurrence of date rape.

The 11.8% prevalence of date rape and the 39.1% cases of attempted date rape revealed in this study could be constituting a tip of an iceberg. This conclusion is based on the under-reporting that usually characterizes the reporting of rape cases<sup>2,5</sup> The figures obtained in this study are however indicative of the public health importance of the problem. Fear of the associated stigmatization and social discrimination might have prevented some respondents in this study from sharing their date rape experiences. Previous studies conducted in USA on date rape

revealed that the problem is prevalent among female undergraduate students with an average prevalence of 15%.<sup>17,18</sup>

Majority of the respondents experienced date rape after being admitted into the University. This may not be unconnected with their inexperience relating to safe sexual relationship. The University environment unlike what obtains in a secondary school is characterized by freedom to conduct ones personal affairs, including sexual relationships, provided the interests of others and the institutions' regulations are not compromised. For many students, admission into the University is their first experience of not having direct parental supervision<sup>19</sup> which could serve as a protective factor against sexual abuse including rape. The freedom in a University environment could thus create opportunity for some female students to engage in practices that can put them at risk of being date raped.

Age was an important factor in the occurrence of date rape in this study. Respondents who were teenagers aged 17 – 19 years and young persons aged 20 –24 years were significantly at higher risk of date rape compared with older females aged 25 – 30 years. Age as a factor in the occurrence of rape has similarly been noted in a previous study conducted in Jamaica which revealed that many female adolescents were vulnerable to sexual assault including rape. The first sexual intercourse experienced by Jamaican female adolescents aged <16 years was reported to be more likely to occur through coercion.<sup>20</sup> The observations are not radically different from what has been previously noted that adolescents and young women are at greater risk of rape than older women.<sup>14,21</sup> The findings of this study strengthen the view that inexperience could be the factor which promotes the vulnerability of female undergraduates in the institution to date rape. Adolescents' sexual inexperience, inadequate knowledge of their sexual rights and lack of awareness of the social contexts that favour vulnerability to rape may be possible reasons why female adolescents are at higher risk of date rape than older women.

Most survivors of date rape in this study used verbal persuasion to communicate their objection to forced sexual intercourse. This finding confirms what other researchers have reported.<sup>15,21</sup> As this and previous studies have shown, many perpetrators of rape are hardly deterred by emotional appeals or verbal persuasion by victims.<sup>15,21</sup>; rather they respond by using violent means to subdue their survivors.

This study reveals that various forms of violence were used to facilitate date rape. These included physical force such as manhandling, beating, and threat. These forms of violence also characterized the context in which respondents in previous studies were raped.<sup>15,22</sup> Prevention of rape among females should, in addition to providing general education on rape, entail equipping them with some defensive psychomotive skills.

The use of alcohol for facilitating date rape as noted in this study has been documented by previous investigators.<sup>23-24</sup> Alcohol can adversely affect women's ability to give informed sexual consent. Intoxicated women are liable to losing their sense of judgment.<sup>23</sup> Women in this state are therefore less likely and able to resist forced sexual intercourse.<sup>24</sup> Female students in dating relationships need to be aware of the possibility of their being influenced to ingest alcohol with a view to facilitating their being raped.

Many of the survivors of date rape were raped by co-students of the university. Intervention strategies aimed at preventing the practice among undergraduates should therefore focus on both male and female students. Elements of anti-sexual violence education need to be adequately integrated into the mandatory general studies programme for all undergraduates of the University of Ibadan. Campus-based co-curricular activities in the forms of seminars, conferences, workshops and various public enlightenment programmes could be used as complimentary educational activities for preventing and/or controlling the problem.

Majority of the survivors of date rape had the experience in settings outside the campus where there were inadequate opportunities for them to get help. Previous studies have revealed this trend.<sup>2,25</sup> Investigators have reported that date rape often occurs in familiar places.<sup>2,25</sup> Date rape is more likely to take place in a setting where a survivor may not be able to get help easily such as the home of the rapist.<sup>24</sup> With two or more students sharing a room at the University coupled with the presence of hall porters, security officers and other students in the adjoining rooms, the campus environment is thus not conducive for date rape to occur.

We are surprised that many survivors of date rape in this study continued dating relationship with their rapists. This could be so because some females who financially depend on their partners may find it difficult to leave a violent relationship, thus suffering in silence.

Date rape survivors in this study exhibited poor help-seeking behaviour as only few of them sought either medical or counseling assistance. Previous studies similarly noted such a practice.<sup>2,11,14</sup> Rape-induced social stigma exists in many Nigerian communities. Fear of being stigmatized, self-blame and perceived non-susceptibility to any adverse health effects were the major factors which served as barriers against the search for medical help and other forms of care among respondents in this study. Survivors of rape do not bargain for what happens to them; their experience is often an unanticipated ordeal. Therefore, they should not be blamed, stigmatized and discriminated against in the community; instead this should be supported. The destigmatization of rape should be an integral part of rape control and prevention because it has potentials for motivating survivors to seek for help.

### **Implications for prevention and control interventions**

Findings from this study have several implications for health promotion and education interventions. Awareness of the reality, magnitude and context of date rape must be raised among the study population. This is needed to enable females adopt necessary prevention measures. Various opportunities and channels of information dissemination including print and electronic media which are readily accessible to students should be used in this regard.

Peer education could be used to address the problem of date rape. Positive outcomes are more likely to result from school-based programmes which utilize peer education.<sup>26,27</sup> Peers can help provide education on the adverse health effects of rape, promote the adoption of cognitive skills for appraising and avoiding situations that can lead to rape, facilitate the acquisition of psychomotor skills for resisting unwanted or forced sex and share coping strategies with survivors.

The fear of being stigmatized and self-blame which often prevent date rape victims from seeking appropriate help need to be addressed. The University health care and security systems as well as other organs that address the welfare needs of the students should be appropriately re-oriented to be sensitive to the peculiar needs and concerns of rape survivors. Health workers in the health care system should be acquainted with appropriate medical care and counselling skills needed for identifying and helping rape victims. Staff in halls of residence including hall wardens, supervisors and porters should be trained and well-informed about date rape including their expected control, prevention and social support roles. Furthermore, these university officers should be aware of specific resources on campus and in the local community to which rape survivors can be referred if the need arises.

Policy intervention is an effective strategy for addressing sexual violence including date rape.<sup>28</sup> A sexual rights policy for the university community which aims at changing the norms, attitudes and beliefs that support date rape is necessary. Such a policy should provide information on available support services including health and counseling services. The policy would have a pivotal role to play in serving as a framework for the design, implementation and evaluation of university-based anti-violence educational interventions.

## **Conclusion**

Date rape is a serious health and social challenge which some female university students endure in silence. Psychosocial constraints exist which militate against rape survivors' adoption of rehabilitative services. Multiple interventions targetted at potential survivors and perpetrators are needed to control and/or prevent the phenomenon.

**Competing interest:** The authors declare that they have no competing interest

**Authors' contributions:** All the authors contributed to this study in ways consistent with ICJME authorship criteria. All the authors read and approved the final version of this manuscript.

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**Conflict of Interest:** None to declare

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Table 1: Socio- demographic profile of respondents

Characteristics	N= 610	
	Number	%
<b>*Age in years</b>		
17 – 19	185	30.3
20 – 24	372	61.0
25 – 30	53	8.7
<b>Religion (n = 608)</b>		
Christian	526	86.8
Islam	80	13.2
<b>Level of study<sup>+</sup></b>		
200	249	40.8
300	149	24.4
400	146	23.9
500	52	8.5
600	14	2.3
<b>Ever dated</b>		
Yes	475	77.9
No	135	22.1
<b>Number of persons ever dated<sup>++</sup> (n= 471)**</b>		
One person	165	35.0
Two or more persons	306	65.0
<b>Current dating experiences (as at the time of the study)<sup>+++</sup></b>		
None	286	46.9
One person	71	11.6
Two or more persons	253	41.5
<b>Sexual experience (Ever had sex) (n = 322) **</b>		
Yes	163	50.5
No	159	49.4

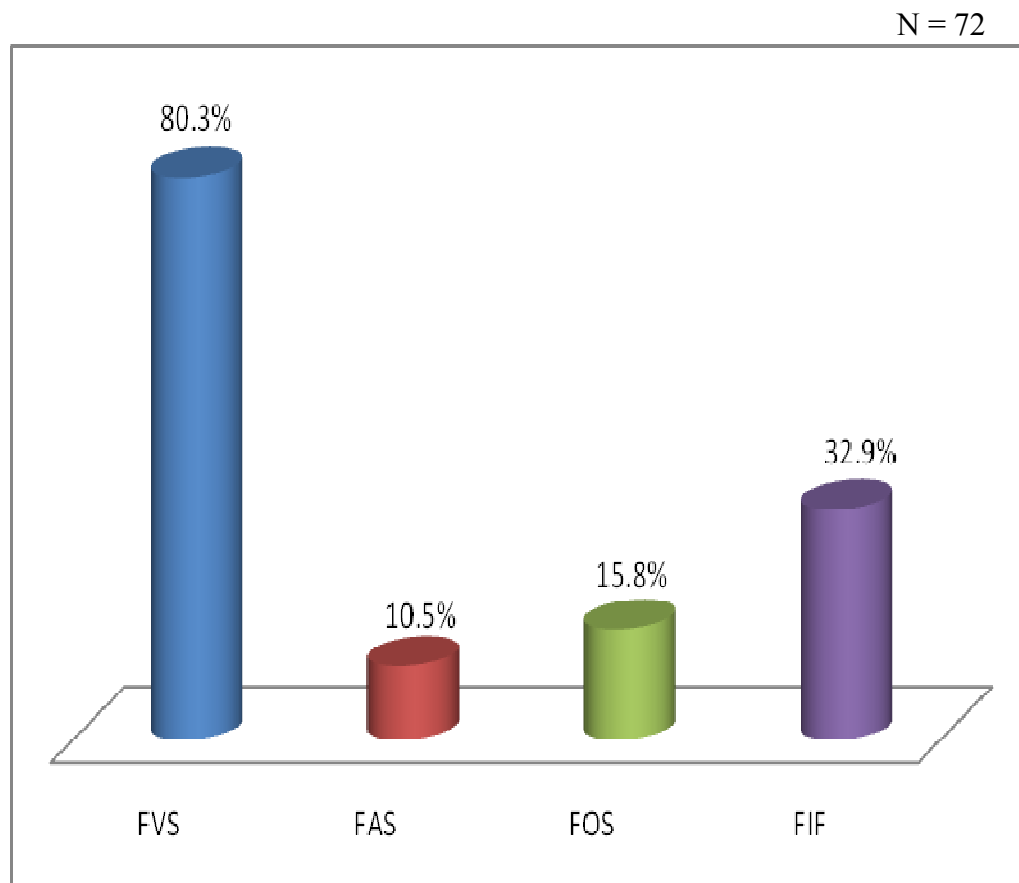
\*Mean age of respondents was  $21 \pm 2.5$ . Adolescents ( $\leq 19$  years), young persons ( $\leq 24$  years) and adults ( $\geq 25$  years) were 30.3%, 91.3% and 8.7% respectively.

<sup>+</sup> 100 level (i.e first year) students were excluded from the study

<sup>++</sup> Mean number of persons ever dated =  $2.5 \pm 2.2$ ; Range= 1 – 24

<sup>+++</sup> Mean number of persons being dated as at the time of the study =  $1.3 \pm 2.2$ , Range= 1 – 8

\*\*No responses were excluded. Mean age at first sex =  $18.5 \pm 3.7$



\*Multiple responses

**Key:** FVS- Forced vaginal sex  
FAS- Forced Anal sex  
FOS- Forced Oral sex  
FIF- Forced Insertion of fingers into the vagina

**Figure 1: Forms of date rape ever experienced by respondents\***

**Table 2. Prevalence of date rape (ever experienced) among respondents by socio-demographic variables**

Variables	Prevalence of date rape			Chi-square	Logistic regression
	Yes** (%)	No (%)	Total		
N = 610					
<b>Age (in years)</b>					
17- 19	12 (6.5)	173 (93.5)	185	X <sup>2</sup> = 0.01 P<0.05	OR=4.69, P= 0.00 OR=3.90, P=0.00 -----
20 – 24	47 (12.6)	325 (87.4)	372		
25 – 30 <sup>+</sup>	13 (24.5)	40 (75.5)	53		
<b>Level of study</b>					
200	27 (10.8)	222 (89.2)	249	X <sup>2</sup> = 0.23 P>0.05	NA
300	22 (14.8)	127 (85.2)	149		
400	20 (13.7)	126 (86.3)	146		
500 and 600	3 (4.5)	63 (95.5)	66		
<b>Number of dating partners (at the time of the study)* (n=357)</b>					
One dating partner	42(14.7)	244 (85.3)	286	X <sup>2</sup> = 0.21 P>0.05	NA
Two or more dating partners	15 (21.1)	56 (78.9)	71		
<b>Age at first sex* (n=163)</b>					
≤ 16 years	12 (38.7.)	19 (61.3)	31	X <sup>2</sup> = 0.52 P>0.05	NA
17 – 19 years	25 (42.4)	34 (57.6)	59		
20 – 24 years	21 (30.4)	48 (69.6)	69		
≥25 years	1 (25.0)	3 (75.0)	4		

\*No responses were excluded

\*\*Total number of students who had experienced date rape = 72

NA – Not applicable

+ Reference group

Table 3: Context of occurrence of date rape (ever experienced)

Variables relating to context in which date rape occurred	Yes (%)	No (%)
<b>Setting of date rape* (n= 72)</b>		
Dating partner's place of residence outside the campus	66	73.3
Dating partner's hostel on campus	6	6.7
Victim's place of residence outside the campus	4	4.4
Victim's hostel on campus	3	3.3
Guest house/ hotel room outside the campus	3	3.3
Guest house/ hotel room on campus	2	2.2
Classroom on campus	2	2.2
Playground or relaxation spots on campus	2	2.2
Dating partner's office outside the campus	2	2.2
<b>Whether threat preceded Rape (i.e Raped after being threatened) (n=72)</b>		
Yes	17	23.6
No	55	76.4
<b>Raped after violence (Raped after being beaten or manhandled) ** (n = 53)</b>		
Yes		
No	30	56.6
	23	43.4
<b>Raped under influence of Alcohol (Given lots of alcohol and became intoxicated before being raped) (n = 72)</b>		
Yes	6	8.3
No	66	91.7
<b>Pattern of Communicating objection to forced sex during last occurrence of date rape** (n = 68)</b>		
Only verbally saying "No" to sex	41	60.3
Only physical resistance or force (Beating, biting)	18	26.5
Combination of verbal and physical resistance/force	9	13.2

\*No response was excluded

\*\*Multiple responses were present

Table 4: Help seeking behaviours of victims of date rape

Help seeking behaviour following experience of date rape	N= 72	
	Number	%
<b><i>Sought medical assistance following date rape</i></b>		
Yes	5	6.9
No	67	93.1
<b><i>Reasons for not seeking medical assistance+ (n= 67)</i></b>		
Did not sustain any injuries	35	53.0
Did not know the implication/ignorance of implication	13	19.7
Because perpetrator used condom	10	15.2
Afraid of being stigmatized	8	12.1
<b><i>Sought legal assistance following date rape</i></b>		
Yes	0	0
No	72	100
<b><i>Reasons for not seeking legal redress* (n = 72)</i></b>		
It is futile doing so	36	42.9
Because still love perpetrator	18	21.4
Afraid of making the experience public	16	19.0
Don't know that forced sex by one's partner could be regarded as rape	6	7.1
That was not my first time of having sex with perpetrator	4	4.8
Fear of being blamed for visiting perpetrator	3	3.6
Didn't know where to seek legal services	1	1.2
<b><i>Sought counseling services following date rape (n= 72)</i></b>		
Yes	6	8.3
No	66	91.7
<b><i>Reasons for not seeking counseling services* (n = 66)</i></b>		
It was not necessary	43	57.3
Did not know where to seek counseling services	11	14.6
Because still love perpetrator	8	10.7.
That was not my first time of having sex with perpetrator	5	6.7
Afraid of being Stigmatized	5	6.7
Don't know that forced sex by one's partner could be regarded as rape	3	4.0

\*Multiple responses were present

+ No response was excluded