ORIGINAL ARTICLE

Knowledge and Perceptions of Date Rape among Female **Undergraduates of a Nigerian University**

Frederick O. Oshiname*¹, Akintayo O. Ogunwale¹, and Ademola J. Ajuwon¹

¹Department of Health Promotion & Education, College of Medicine, University of Ibadan, Nigeria

*For correspondence: Email: foshiname@yahoo.com, Phone: +234-0803-500-1060

Abstract

This paper focuses on knowledge and perceptions of Date Rape (DR) among female undergraduates of the University of Ibadan. The cross-sectional survey was conducted among 651 female undergraduates selected using a four-stage random sampling technique. A semi-structured questionnaire which included a 6-point knowledge scale and a 21-points perceptions scale was used to collect data. Knowledge scores of 0-2, 3-4 and 5-6 were rated as poor, fair and good respectively. Perception scores of 0-10 and 11-21 were categorized as supportive and non-supportive perception of DR respectively. Data were analyzed using descriptive statistics and Chi-square at p < 0.05. Mean knowledge score was 2.3 ± 2.1 and 50.0% participants had poor knowledge of DR. Knowledge of DR increased significantly by level of study. Participants' had a mean perception score of 9.1 ± 2.8 and 66.9% had perceptions supportive of DR. Campus-based educational programme have potentials for addressing the phenomenon. (Afr J Reprod Health 2013; 17[3]: 137-148).

Résumé

Ce document met l'accent sur les connaissances et les perceptions du viol lors d'un rendez-vous (VLR) parmi les étudiantes du premier cycle de l'Université d'Ibadan. L'enquête transversale a été menée auprès de 651 étudiantes de premier cycle sélectionnées à l'aide d'une technique d'échantillonnage aléatoire en quatre étapes. Un questionnaire semi-structuré qui comprenait une évaluation des connaissances à 6 points et l'échelle de perception à 21 points a été utilisé pour collecter des données. Les cotations de connaissance de 0-2, 3-4 et 5-6 ont été classées comme médiocre, moyenne et bonne, respectivement. Les cotations de perception de 0-10 et 11-21 ont été classées comme perception de soutien et de non soutien du VLR respectivement. Les données ont été analysées à l'aide de statistiques descriptives et chi carré à p <0,05. La cotation moyenne de la connaissance était de 2,3 ± 2,1 et 50,0% des participants avaient une mauvaise connaissance de la VLR. La connaissance de la VLR a augmenté de façon significative selon le niveau d'étude. Les participants «avaient une cotation de perception moyenne de 9,1 ± 2,8 et 66,9% avaient une perception de soutien de la VLR. Les programmes éducatifs qui sont basés sur le campus ont un potentiel pour s'occuper du phénomène. (Afr J Reprod Health 2013; 17[3]: 137-148).

Keywords: Female undergraduate students, Date rape perception, Date rape-related knowledge.

Introduction

Violence against women is a pervasive human rights abuse worldwide^{1,2}. It is any act that results in, or may result in, physical, sexual or psychological harm or suffering to women; it includes threats, coercion or arbitrary deprivation of liberty, either in public or private life^{1,3,4}

Rape is one of the most serious forms of violent behaviour that can occur on a campus⁵. Rape is the act of forcing another person to engage in sex against his or her wish through violence, threats, verbal insistence, deception and other various manipulative means⁶. It is more common among females than males^{5,7}. In fact it is one of the most brutalizing physical and social forms of violence against women².

Date rape is a form of rape perpetrated against an individual by someone with whom he/she willingly enters into a dating or romantic relationship⁸. Date rape out-numbers other forms of rape including acquaintance rape (rape perpetrated against an individual by someone who is known to him or her, usually a friend with whom there is no dating or romantic relationship), marital rape (rape of a spouse) and stranger rape (rape perpetrated against an individual by someone who is not known to him or her) among unmarried youths^{5,8}.

Studies conducted in tertiary institutions in various countries such as Australia⁸, United States⁵ and Nigeria^{7,9,10} have revealed that female undergraduates are vulnerable to date rape. This problem is under-recognised due to tacit cultural normalization of sexual coercion in intimate relationships⁸. Sometimes even victims of date rape do not consider the act as rape^{8,9}. Nigeria is a patriarchal or male dominated society and there is reluctance especially among males in accepting the fact that forced sex, is an aberration in an intimate relationship. Consequently forced sex by males is tolerated within the context of dating relationship. Studies on date rape are generally rare in Africa¹¹.

Although female undergraduates in institutions of higher learning are vulnerable to date rape due to lack of guidance from parents and significant others while on campus, their knowledge and perceptions relating to the deviant practice have not been well explored. This is in spite of the fact that knowledge and perception of the phenomenon can influence female undergraduates' preventive and help-seeking behaviours. This study was therefore designed to assess the knowledge and perceptions of date rape among female undergraduate students of the University of Ibadan, Nigeria.

Methods

The descriptive cross-sectional survey took place at the University of Ibadan, Nigeria. The institution is located in Ibadan North Local Government Area, Oyo State and it is organized into 13 Faculties with four of the faculties (i.e. the faculties of Public Health, Basic Medical Sciences, Dentistry and Clinical Sciences) constituting the College of Medicine. The University offers residential and non-residential training opportunities. The 12 halls of residence in the institution include four which accommodate female undergraduate students. As at 2011 when this study was conducted, there were 3,751 female undergraduates¹⁰.

The study population constituted unmarried female students in their second, third, fourth, fifth and sixth year academic programmes who were officially accommodated in the halls of residence. Students in the first year of their programmes were purposively excluded from the study because as at the time of the study many of them were yet to complete their registration formalities ¹⁰. The halls of residence have varying populations of female students. Consequently proportionate sampling was used to determine the number of female students interviewed in each of the four halls of residence. The rooms where interviews were conducted were selected using tables of random numbers. Only one consenting participant was selected for interview per room.

The basic steps in the data gathering process included the following: entering a selected room and establishing rapport with the occupants; balloting to select one of two or more occupants who were willing to participate in the study; provision of information on the nature, scope and ethical issues relating to the study; completion of an informed consent form; and interview using a pretested semi-structured questionnaire. questionnaire had no identifiers (i.e. no registration number, mark or any other means that could be used to identify the respondents) and the questions included those that focus on sociodemographic characteristics, awareness of date rape, knowledge of health effects of date rape, perceptions relating to date rape, prevalence of date rape, experiences of ladies who were survivors of date rape as well as their help-seeking behaviour.

The interviewed study participants were 651. However it is the 610 copies of the questionnaire with valid and consistent responses that were coded and fed into the computer using the SPSS version 15 software. Participants' knowledge was measured using a 6-point knowledge scale and scores of 0-2, 3-4 and 5-6 were categorized as poor, fair and good knowledge respectively. Participants' perception was measured using a 21point perception scale and scores of 0-10 and 11-21 were categorized as supportive and nonsupportive of date rape respectively. Supportive perception of date rape within the context of this study implies a perception which promotes or tolerates date rape. Descriptive statistics and Chisquare were used to analyze the data.

The protocol for the study was reviewed and approved by the Joint University of Ibadan and University College Hospital Ethics Review Committee. All the interviews were conducted in private settings after a disclosure of the nature of the study, voluntary nature of participation and obtaining informed consent from the study participants. The results relating to the detailed socio-demographic profile, date rape experiences, prevalence and help-seeking behaviour among the participants have been published 10. This paper focuses on study participants' knowledge and perception related to the phenomenon.

Results

Overview of respondents' socio-demographic profile

The socio-demographic characteristics of the respondents published elsewhere¹¹ revealed that the respondents were predominantly young persons aged ≤ 24 years, majority (77.9%) of them had ever dated someone and 55.1% were currently in a dating relationship; of this 41.5% were dating two or more persons concurrently.

Awareness related issues and sources of information

Table 1 presents results relating to awareness of date rape. Majority (68.9%) of the participants had heard of date rape. Friends (21.4%), television (19.6%) and books (15.7%) topped the list of participants' sources of information about date rape. Parents constituted the least (0.4%) source of information. Many of the participants (55.7%) had attended any lecture or educational programme on rape. Over half of them (58.9%) were aware of the psychoactive substances used by perpetrators to facilitate date rape.

Table 1: Awareness of Date rape

Characteristics	Number	%
Ever heard of date rape		
Yes	420	68.9
No	190	31.1
Sources of information on date rape+ (N= 420)		
Friend	295	21.4
Television	270	19.6
Book	216	15.7
Newspaper	200	14.5
Radio	133	9.6
Lecture	103	7.5
Internet	99	7.2
Church/Mosque	58	4.2
Parents	5	0.4
Frequency of hearing of date rape* (N= 420)		
Rarely	253	60.5
Often	132	31.6
Very often	33	7.9
Ever attended any lecture or educational session on rape (N=420)		
Yes	234	55.7
No	186	44.3
Heard of drugs or substances that perpetrators use to facilitate the rape of their partners* $(N=420)$		
Yes	246	58.9
No	172	41.I

N=610

^{*} No responses were excluded

^{*}Multiple responses were present

Knowledge of possible health effects of date rape

Participants had a mean knowledge score of 2.3 ± 2.1 . Overall, the proportion of participants with good, fair and poor knowledge of date rape were 17.5%, 32.5% and 50.0% respectively. Details of participants' knowledge of the health effects of date rape are shown in table 2. The table revealed that mention of sexually transmitted infections constituted the highest proportion (38.0) of the

physical effects of date rape, followed by unwanted pregnancy (27.5%) and body injuries (13.6%). Post-Traumatic Stress Disorder (PTSD) accounted for the highest proportion (30.9%) of psychological effects, followed by depression (25.6%) and low self-esteem (11.6%). Stigmatization (23.2%) topped the list of the mentioned social effects of date rape followed by isolation (20.5%) and poor social relationships (16.3%).

Table 2: Knowledge of health effects of date rape

+Health effects of date rape	Number	Frequency	
Physical effects of date rape			
STI	199	38.0	
Unwanted pregnancy	114	27.5	
Body injury like fracture	71	13.6	
Vaginal injuries	71	13.6	
Physical harms arising from abortion of unintended pregnancy	28	5.3	
Vaginal pain	13	2.5	
Loss of virginity	12	2.3	
Death	10	1.9	
Vaginal expansion	6	1.2	
Psychological health effects of date rape			
PTSD	151	29.5	
Depression	125	25.6	
Low self esteem	57	11.6	
Fear of having sex	42	8.6	
Shame	22	4.5	
Hatred for men	21	4.3	
Anger	19	3.9	
Unhappiness	15	3.1	
Self – stigma	15	3.1	
Lack of self confidence	6	1.2	
Suicidal ideation	6	1.2	
Nightmares	4	0.8	
Hallucination	3	0.6	
*Others	3	0.6	
Social health effects of date rape			
Stigmatization	86	24.2	
Isolation	73	20.5	
Poor social relationship	58	16.3	
Lack of trust for men	52	14.6	
Withdrawal from social activities	35	9.8	
Anti-social tendencies	29	8.1	
Broken relationship	9	2.5	
Rejection by friends and family	7	2.0	
**Others	7	2.0	

^{*}Others- Distress (0.4%), Mindset of vengeance (0.2)

Table 3 shows participants' knowledge of date characteristics. The distribution of participants rape by selected socio-demographic with good scores among those aged 17 – 19, 20 –

**African Journal of Reproductive Health September 2013; 17(3): 140

^{**}Others-Loneliness(4.0%),hostile behaviour towards men(0.6%),Unwillingness to marry(0.3%)

⁺Multiple responses present

24 and 25 - 30 years were 16.8%, 17.7% and 17.5% respectively. Overall there was no significant difference between knowledge of date rape and age of participants (See table 3 for details).

Good knowledge of date rape increased

Table 3: Level of knowledge of health effects of date rape by selected demographic characteristics N= 610 *Non responses were excluded

Variables		Level of knowl	edge		Chi-square
	Good	Fair	Poor	Total	(X^2)
.	N (%)	N (%)	N (%)	N (%)	
Age (in years)					2
17- 19	31 (16.8)	55 (29.7)	99 (53.2)	185 (100.0)	$X^2 = 0.84$
20 - 24	66 (17.7)	125 (33.6)	181 (48.7)	372 (100.0)	
25 - 30	10 (17.5)	18 (34.0)	25 (47.2)	53 (100.0)	
Level of study					
200	34 (13.7)	73 (29.3)	142 (65.8)	249 (100.0)	$X^2 = < 0.01$
300	27 (18.1)	53 (35.6)	69 (46.3)	149 (100.0)	
400	28 (19.2)	53 36.3)	65 (44.5)	146 (100.0)	52
500	11 (21.2)	13 (25.0)	28 (53.8)	(100.0)	
600	7 (50.0)	6 (42.9)	1 (7.1)	14 (100.0)	
Religion*					
Christian	93 (17.7)	178 (33.8)	255 (48.5)	526 (100.0)	$X^2 = 0.25$
Islam	12 (15.0)	20 (25.0)	48 (60.0)	80 (100.0)	

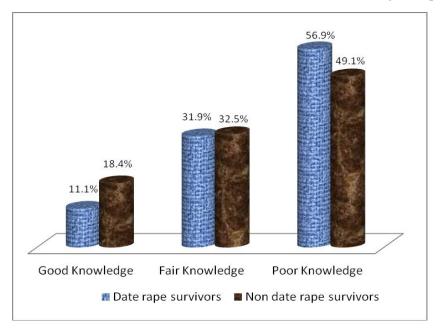
significantly by level of study. For instance, the proportion of participants with good knowledge of date rape increased from 13.7% among the 200 level students to 50.0% among those in 600 level.

A similar pattern could be observed among participants with fair knowledge of date rape. However, the proportion of participants with poor knowledge of date rape decreased from 65.8% among the 200 level students to 7.1% among the 600 level students. Overall, there was significant difference between knowledge of date rape and level of study (see table 3)

More Christians (17.7%) had good knowledge of date rape compared with adherents of Islamic

religion (15.0%). In the same vein, more Christians (33.8%) had fair knowledge of date rape compared with Muslims. There was however no significant difference between religion and level of knowledge of date rape.

More date rape survivors (56.9%) had poor knowledge of date rape than those without date rape experiences (49.1%). Fewer date rape survivors (11.1%) had good knowledge of date rape compared with those who had no date rape experiences (18.4%) (see figure 1 for details). Overall, there was no significant relationship between date rape experience and level of perception of date rape.



P > 0.05Note: Mean knowledge score = 2.3 ± 2.1

Figure 1: Participants' level of knowledge of health effects of date rape by date rape experience

Perceptions of date rape

Participants had a mean perception score of 9.1 ± 2.8. Majority (66.9%) of the participants had perceptions supportive of date rape. Table 4 presents participants' perceptions relating to date rape. More than a quarter (28.4%) of the participants opined that date rape is a risk any lady who is dating a man or boy should expect. Few participants (9.7%) were of the opinion that

"forced sex" is classified as rape only when the perpetrator is not one's boyfriend or man-friend. Similarly, few (22.0%) participants were of the perception that getting raped by a dating partner is not as serious as being raped by a stranger. The view of 65.3% of the participants was that the stigma that follows the reporting of a case of date rape is worse than the rape itself (See table 4 for details).

Table 4: Perceptions relating to Date Rape

*Date rape related perceptions	Patter	n of responses		
	Agree (%)	Undecided (%)	Disagree (%)	Total
Date rape is a risk any lady who is dating a man or boy should expect	169 (28.4.)	121 (20.3)	305(51.3)	595
Date rape is an occurrence which most ladies will experience at least once in their life time before marriage.	45 (7.5)	102(16.9)	455 (75.6)	602
One factor that promotes date rape is the belief that a man should go ahead to have sex with a lady even if she protests against it, because many ladies will say "No" to sex when requested.	246 (41.8)	136 (23.1)	206 (35.0)	588
Men's belief that ladies/girls prefer to say "No" to sexual intercourse with their boyfriends or man-friends so that they will not be seen as being promiscuous or too cheat, may be the reason why they have sex with ladies they are dating by force.	253 (43.0)	150 (25.5)	186 (31.5)	589
Being forced to have sex by one's man-friend or boyfriend is not a				
rape.	51 (8.5)	44 (7.3)	508 (84.2)	603

Some men who forcefully have sex with their girlfriends do so to	122 (22.2)	120 (20 0)	247(57.0)	
confirm their girlfriends' virginity.	133 (22.2)	120 (20.0)	347(57.8)	600
Being forced to have sex by the person one is dating is a common				
phenomenon which any lady should not worry herself too much about	31 (5.3)	88 (15.0)	468 (79.7)	587
Forced sex" is classified as rape only when the perpetrator is not one's				
boyfriend or man-friend.	58 (9.7)	41 (6.9)	496 (83.4)	595
Getting raped by the man or boy one is dating is not as serious as	131 (22.0)	76 (12.8)	388 (65.2)	595
being raped by a stranger.				
Most cases of date rape take place outside the campus.	135 (22.8)	219 (36.9)	239 (40.3)	593
The stigma that follows the reporting of a case of date rape is worse	387 (65.3)	124 (20.9)	82 (13.8)	593
than the rape itself.				

^{*}No responses were excluded

Table 5: Perceptions about the categories of girls/ladies who readily get raped

Categories of girls/ladies who readily get raped	Number*	%
Ladies/girls who wear seductive dresses	535	87.7
Ladies/girls who love to demand material things from men and yet do not want		
to have sex in return	484	79.3
Ladies/girls who love parties	408	66.9
Ladies who are too trusting	278	45.6
Ladies/girls who are too free with their boyfriends/ man-friends	220	36.1
Ladies/girls who cheat on their boyfriends/ man-friends	171	28.0
Ladies who had had sex before	5	0.8
Ladies who stay with their boyfriends in isolated or secluded places	4	0.7
Ladies who take alcohol	3	0.5
Other categories of ladies/girls that are often raped by their boyfriends**	6	0.1

N = 610

*Multiple responses

These ladies include those who:

force themselves on guys who really don't love them;

have more than one boyfriends;

are not well informed;

have foreplay with their boyfriends and later try to stop them.

Table 5 highlights participants' perceived categories of ladies/girls who readily get raped. Ladies/girls who wear seductive dresses (87.7%) topped the list, followed by ladies/girls who love to demand material things from men and yet do not want to have sex in return (79.3%) and ladies who love to attend parties (66.9%). Male strangers (29.5%), followed by boyfriends (24.8%) were perceived as common perpetrators of rape (see figure 2 for details).

^{**} The numbers vary depending on the number of persons that responded to each of the statements on perception

^{**} sleep in their boyfriends' house;

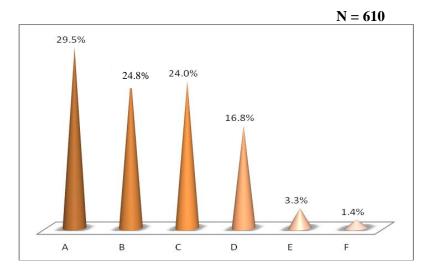


Figure 2: Perceived kinds of persons that usually rape girls/ladies

Key:

- **A-** Male stranger
- Male acquaintance
- C-Boyfriend
- D-Man-friend
- Е-Lesbians
- Other people Father (0.9%), Relative (0.3%), Sibling (0.1%), Person with unstable mind (0.1%)

Sedatives (39.5%) and alcohol (36.8%) were perceived as major substances that perpetrators of rape use to facilitate the execution of their plan (see figure 3 for details).

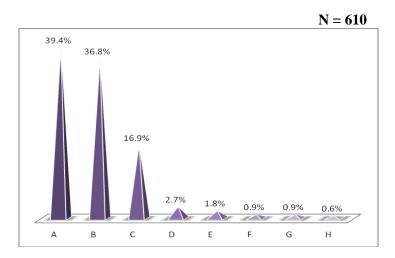


Figure 3: Perceived kinds of substances used by perpetrators to facilitate date rape

Key:

- **A-** Sleeping drugs/sedatives
- **B-** Alcohol
- C- Hard drugs
- **D-** Aphrodisiacs
- E- Chemical/aerosols sprayed into the air
- F- Gun

- G- Others- Subjected to Pornographic movies, Charms, Anaesthetic injections
- H- Knife or sharp objects

Table 6 shows perceptions of date rape by selected participants' characteristics. The selected characteristics were age, religion and level of knowledge relating to date rape. Supportive perceptions of date rape increased considerably by age. The distribution of participants with

supportive perception among those aged 17 - 19, 20 - 24 and 25 - 30 years were 29.7%, 34.4% and 37.7% respectively. There was however no significant relationship between level of perception of date rape and age of participants.

Table 6: Level of perception of date rape by selected participants' characteristics

Variables	Level of Perception			P value	
	Non supportive+ N (%)	Supportive++ N (%)	Total N (%)		
Age (in years)					
17- 19	131 (70.8)	54 (29.7)	185 (100.0)	$X^2 = 0.35$	
20 - 24	244 (65.6)	128 (34.4)	372 (100.0)	P>0.05	
25 - 30	33 (62.3)	20 (37.7)	53 (100.0)		
Religion* (n= 606)					
Christian	340 (64.6)	186 (35.4)	526 (100.0)	$X^2 = < 0.01$	
Islam	65 (81.3)	15(18.8.)	80 (100.0)	P<0.05	
Level of knowledge					
Good knowledge	56 (52.3)	51 (47.7)	107 (100.0)	$X^2 = < 0.01$	
Fair Knowledge	116 (58.6)	82 (41.4)	198 (100.0)	P<0.05	
Poor Knowledge	236 (77.4)	69 (22.6)	305 (100.0)		
Date rape experience	• •	. ,	` ,		
Survivors	24 (33.3)	48 (66.7)	72 (100.0)	$X^2 = 0.53$	
Non survivors	178 (33.1)	360 (66.9)	538 (100.0)	P>0.05	

N = 610

*Non responses were excluded

Supportive++ - Perceptions supportive of date rape

Non supportive+ - Perceptions not supportive of date rape

More Christians (35.4%) had supportive perception of date rape compared with adherents of Islamic religion (18.8%). Overall there was significant relationship between religion and level of perception of date rape (See table 6 for details). 47.7% among those with good knowledge. Overall, there was significant relationship between perception of date rape and knowledge of date rape. The proportion of date rape survivors and non-survivors with supportive ++- perceptions of supportive date rape were 66.7% and 66.9% respectively. There was no significant relationship between date rape experience and level of perception of date rape.

Discussion

Friends constituted participants' major source of information on date rape. Several studies have shown that peers or friends are more common Supportive perception of date rape increased significantly by level of knowledge. For instance, proportion of participants with supportive perception for date rape increased from 22.6% among the participants with poor knowledge to sources of information about reproductive health related issues among young people^{12,13}. Parents were the least source of information on date rape. This may be indicative of the limited exchange of information or communication between young persons and their parents on sexual matters. The result of this study suggests that rape prevention programmes are more likely to be successful if channeled through young peers because young persons are most likely to open up to their peers.

The study participants mentioned the use of psychoactive substances including alcohol and sleep-inducing drugs as substances that perpetrators of rape use for facilitating the act.

Previous studies^{7,14,15} have similarly noted that alcohol is a common substance used in carrying out the act of rape. Alcohol is widely believed to increase sexual desire and capacity, and also increase aggressive behaviour, especially in men¹⁶.

Studies have noted that many rape cases are committed by men who have been drinking alcohol^{7,14,17}. Many perpetrators of date rape have reported deliberately getting a woman drunk in order to have sexual intercourse with her¹⁷. Studies^{18,19} have revealed that Valium (diazepam), and other benzodiazepines are commonly used in facilitating rape. Females who are dating need to be aware of the use of alcohol and other psychoactive substances used by rapists to actualize their plans and so be vigilant or careful in terms of what they eat or drink while in social settings with potential opportunities for rape to occur.

It was noted that many participants had poor knowledge of the health effects of date rape. For instance, 50.3% of them could not mention any physical health effect that could be associated with date rape. A previous research carried out in Malta¹⁸ similarly showed that undergraduates had poor knowledge of the health consequences of date rape. Participants' level of knowledge of date rape increased significantly by level of study (i.e. year of study). The increasing length of stay in the University and the exposure to various curricular and co-curricular learning opportunities over the years may have accounted for the knowledge differential among participants.

The study has revealed that many participants had perceptions supportive of date rape. Previous studies^{9,11} have observed similar findings. This may not be unconnected with several social norms relating to masculinity which often facilitate date rape. Previous researches^{9,15,20} have documented such social norms which facilitate rape.

Male dominance in sexual matters in most Nigerian societies finds its expression in different cultural norms, perceptions and attitudes which promote women's deference to men in decisions relating to sexual matters⁹. Men are socialized to believe that they are superior to women and so should dominate their partners¹¹. Furthermore, males' involvement in pre-marital and extramarital affairs is tacitly tolerated in many

cultures¹¹. These same sexual acts are however viewed as aberrations or deviant acts when women indulge in them¹¹. The perception of sex as a reward which a man is undeniably entitled to after some financial or material investment in a woman is also pervasive in Nigerian communities^{9,21}.

Consequently, a man is not blamed for using force to sexually abuse a girl or woman in whom he has invested in if she refuses a sexual request¹⁵. A cultural re-orientation is necessary in order to effect changes in these highly entrenched genderbased socio-cultural perceptions which compromise the health, dignity and integrity of women. The re-orientation programme could be facilitated by use of health promotion strategies such as public enlightenment, advocacy, policy intervention and legal reforms.

The observation that most participants did not perceive date rape to be as serious as stranger rape may be due to the fact that rape perpetrated by a stranger unlike a dating partner usually attracts more stigmatization. Previous studies^{8,9} have noted that young women are inclined to perceive sexual coercion in dating situations as tolerable behaviour. In contemporary Nigeria, date rape is not perceived to be criminal or even unacceptable behaviour⁹. A study carried out in Nigeria¹⁵ observed that many young women perceive rape by boyfriends as inevitable and socially tolerable. This perception has the potential for making rape victims not to acknowledge their experience as rape; it might also prevent them from seeking appropriate health care and social support care services if they experience date rape.

Implications for Health Promotion and Education

Findings from this study have implications for health promotion and education. Multiple strategies such as peer education, policy intervention as well as different channels of information dissemination including the print and electronic media which are readily accessible to students should be used to tackle the phenomenon. General education on sexual violence including date rape has the potentials for creating awareness and influencing knowledge and perception of students relating to date rape. Such education can

be provided through the General Education Studies (a compulsory course for all first-year students of the University). Awareness of the reality, magnitude and consequences of date rape need to be raised among the study population using campus-based interventions with the active involvement of students. Positive outcomes are more likely to result from such programmess²². Peer education, for instance, can help provide education on the adverse health effects of rape, coping strategies and cognitive skills for appraising and avoiding situations that can lead to rape. A sexual rights policy for the University community which aims at changing the norms, attitudes and beliefs that support date rape is an effective strategy for addressing date rape and other related sexual violent acts²³. The policy would have a pivotal role to play in serving as framework for the design, implementation and evaluation of University-based anti-violence educational interventions in general.

Conclusion

The knowledge of date rape was generally low among female undergraduate students. Many female students had perceptions supportive of date rape, a situation which can adversely affect health seeking behaviour. Campus-based educational activities should be used to upgrade students' knowledge about the phenomenon and modify perceptions which tend to support date rape.

Contribution of Authors

- 1. Akintayo O. **Ogunwale**: Conceived the study and was involved the design of the work; he also participated in data collection and analysis as well as the drafting of the manuscript
- 2. Frederick O. **Oshiname**: Was involved in the design, data collection, analysis and drafting of the manuscript..
- 3. Ademola J. **Ajuwon**: Participated in the design of the study and preparation of the manuscript.

References

 United Nations General Assembly. Declaration on the elimination of violence against women. Proceedings

- of the 85th Plenary Meeting, Geneva, Dec. 20, 1993. United Nations General Assembly.
- Heise L, Ellsberg M and Gottemoeller M Ending violence against women, *Population Reports*, Series L, No. 1, 1999
- Ellsberg, M.C., R. Pena, A. Herrera, J. Liljestrand and A. Winkvist. 'Wife Abuse Among Women of Childbearing Age in Nicaragua', American Journal of Public Health, 1999; 89(2): 241–44.
- Sarnavka S. Using the Master's Tools: Feminism, Media, and Ending Violence against Women', Gender & Development, 2003; 11(1): 91–93.
- Lohmann KJ. The contentious nature of addressing rape, 2008. Retrieved 12th April, 2010 from www.allacademic.com
- Heise L, Moore K and Toubia N.. Sexual Coercion and Reproductive Health: A Focus on Research, New York: Population Council 1995, 59p
- Olaleye O S and Ajuwon, A J. Experience of Nonconsensual Sex among Students in a Tertiary Institution in Ibadan, Nigeria. Sierra Leone Journal of Biomedical Research 2011; 3(3) 175-183.
- Russo, L. Date Rape: A hidden Crime. Trend and Issues in Crime and Justice 2000, Retrieved 23rd June, 2010 from http://www.aic.gov.au/publications.pdf.
- Elegbeleye OS. Is Rape in the eye or in the mind of the offender? A survey of Rape Perceptions among Nigerian University stakeholders. *Education*, *Research and Review*. 2006; 1(2):40-51
- 10. Ogunwale AO, Oshiname FO and Ajuwon AJ. Date rape Experiences and Help-seeking Behaviour among Female University Students in Ibadan. *International Journal of Collaborative Research on Internal Medicine and Public Health*, 2012, 4 (8).
- Izugbara OC, Duru EJC and Dania PO. Women and Male Partner-dating Violence in Nigeria. *Indian Journal of Gender Studies*, 2008; 15: 461
- Obare F, Agwanda A, Magadi MA. Gender-role attitudes and reproductive health communication among female adolescents in South Nyanza, Kenya. *African Population Studies*, 2006; 21(3).
- Zhang L, Shah I. and Baldwin W. Communication with parents and peers on sexual matters: the experience of adolescents in Northeastern of China." *Journal of Reproduction and Contraception*, 2006. 17(4):249-59
- Abbey, A., McAuslan, P., Zawacki, T. Clinton, A.M. and Buck, P. O. Attitudinal, experiential, and situational predictors of sexual assault perpetration. *Journal of Interpersonal Violence*, 2001; 16(8), 784-807.
- Ajuwon, A.J., Olley, B.O., Akinola, O. and Akin-Jimoh I. Sexual coercion in adolescent: exploring the experiences of rape victims in Ibadan, Nigeria. *Health Education*, 2004; 104 (1): 8-17.
- 16. Warkentin JB. Dating Violence and Sexual Assault Among College Men: Co-occurrence, Predictors and Differentiating factors. PhD, Thesis, 2008. Department of Psychology, University of Ohio. Xiii + 173 pp.

Oshiname et al.

- 17. Abbey, A., Clinton, A.M. McAuslan, P., Zawacki, T. and Buck, P.O. Alcohol-involved rapes: are they more violent? *Psychology of Women Quarterly*, 2002; 26(2): 99–109
- Kronz CS. A 30 year old woman with possible unknown ingestion of date rape drugs. *Journal of Emergency Nursing*. 2000.; 25 (6): 544-548
- Schwartz R, Milteer R and LeBeau M. Drug-facilitated sexual assault (date rape), Southern Medical Journal, 93(6), 2000; 558-561.
- 20. Mediterranean Institute of Gender Studies. Date Rape Cases Among Young Women and the Development of Good Practices for Support and Prevention, 2008.

Knowledge and perception of date rape

- Retrieved 15th September, 2011 from www. medinstgenderstudies. org.
- 21. Ajuwon, A. Research on sexual coercion among young persons: The experiences and lessons learned from Ibadan, Nigeria, New Delhi meeting, sponsored by Population Council; September 22- 23, 2003. Retrieved 26th January, 2013 from www. Etcgraz.at/.../05_manual_health...
- 22. Smith P and Welchans S. Peer education: does focusing on male responsibility change sexual assault attitudes? Violence Against Women, 2000; 6:1255-1268.
- USAID. Addressing Gender-based Violence through USAID's Health Programs: A Guide for Health Sector Program Officers, 2006. Washington, D.C.