Male Rape

Introduction

- About 3% of American men “a total of 2.78 million men” have experienced a rape at some point in their lifetime (Tjaden & Thoennes, 2006).
- In 2003, one in every ten rape victims was male. While there are no reliable annual surveys of sexual assaults on children, the Justice Department has estimated that one of six victims are under age 12 (National Crime Victimization Study, 2003).
- 71% of male victims were first raped before their 18th birthday; 16.6% were 18-24 years old, and 12.3% were 25 or older (Tjaden & Thoennes, 2006).
- Males are the least likely to report a sexual assault, though it is estimated that they make up 10% of all victims (RAINN, 2006).
- 22% of male inmates have been raped at least once during their incarceration; roughly 420,000 prisoners each year (Human Rights Watch, 2001).

Overview

Society is becoming increasingly aware of male rape. However, experts believe that current male rape statistics vastly under-represent the actual number of males age 12 and over who are raped each year. Rape crisis counselors estimate that while only one in 50 raped women report the crime to the police, the rates of under-reporting among men are even higher (Brochman, 1991). Until the mid-1980s, most literature discussed this violent crime in the context of women only. The lack of tracking of sexual crimes against men and the lack of research about the effects of male rape are indicative of the attitude held by society at large -- that while male rape occurs, it is not an acceptable topic for discussion.

Historically, the rape of males was more widely recognized in ancient times. Several of the legends in Greek mythology involved abductions and sexual assaults of males by other males or gods. The rape of a defeated male enemy was considered the special right of the victorious soldier in some societies and was a signal of the totality of the defeat. There was a widespread belief that a male who was sexually penetrated, even if it was by forced sexual assault, thus “lost his manhood,” and could no longer be a warrior or ruler. Gang rape of a male was considered an ultimate form of punishment and, as such, was known to the Romans as punishment for adultery and the Persians and Iranians as punishment for violation of the sanctity of the harem (Donaldson, 1990).

Nicholas Groth, a clinical psychologist and author of Men Who Rape: The Psychology of the Offender, says all sexual assault is an act of aggression, regardless of the gender or age of the victim or the assailant. Neither sexual desire nor sexual deprivation is the primary motivating force behind sexual assault. It is not about sexual gratification, but rather a sexual aggressor using somebody else as a means of expressing their own power and control.

Much has been written about the psychological trauma associated with the rape of female victims. While less research has been conducted about male rape victims, case research suggests that males also commonly experience many of the reactions that females experience. These reactions include: depression, anger, guilt, self-blame, sexual dysfunctions, flashbacks, and suicidal feelings (Isley, 1991). Other problems facing males include an increased sense of vulnerability, damaged self-image and emotional distancing (Mezey & King, 1989). Male rape victims not only have to confront unsympathetic attitudes if they choose to press charges, they also often hear unsupportive statements from their friends, family and acquaintances (Brochman, 1991). People will tend to fault the male victim instead of the rapist. Stephen Donaldson, president of Stop Prisoner Rape (a national education and advocacy group), says that the suppression of knowledge of male rape is so powerful and pervasive that criminals such as burglars and robbers sometimes rape their male victims as a sideline solely to prevent them from going to the police.

There are many reasons that male victims do not come forward and report being raped, but perhaps the biggest reason for many males is the fear of being perceived as homosexual. However, male sexual assault has nothing to do with the sexual orientation of the attacker or the victim, just as a sexual assault does not make the victim survivor gay, bisexual or heterosexual. It is a violent crime that affects heterosexual men as much as gay men. The phrase “homosexual rape,” for instance, which is often used by uninformed persons to designate male-male rape, camouflages the fact that the majority of the rapists are not generally homosexual (Donaldson, 1990).

In a well-known study of offenders and victims conducted by Nicholas Groth and Ann Burgess, one-half of the offender population described their consenting sexual encounters to be with women only, while 38 percent had consenting sexual encounters with men and women. Additionally, one-half of the victim population was strictly heterosexual. Among the offenders studied, the gender of the victim did not appear to be of specific significance to half of the offenders. Instead, they appeared to be relatively indiscriminate with regard to their choice of a victim -- that is, their victims included both males and females, as well as both adults and children (Groth & Burgess, 1980). The choice of a victim seemed to be more a matter of accessibility than of sexual orientation, gender or age.

Many people believe that the majority of male rape occurs in prison; however, there is existing research which
shatters this myth. A study of incarcerated and non-incarcerated male rape victims in Tennessee concluded that the similarities between these two groups would suggest that the sexual assault of men may not be due to conditions unique to a prison and that all men are potential victims (Lipscomb et al., 1992).

Research indicates that the most common sites for male rape involving post-puberty victims are outdoors in remote areas and in automobiles (the latter usually involving hitchhikers). Boys in their early and mid-teens are more likely to be victimized than older males (studies indicate a median victim age of 17). The form of assault usually involves penetration of the victim anally and/or orally, rather than stimulation of the victim's penis. Gang rape is more common in cases involving male victims than those involving female victims. Also, multiple sexual acts are more likely to be demanded, weapons are more likely to be displayed and used, and physical injury is more likely to occur, with the injuries that do occur being more serious than with injured female rape victims (Porter, 1986).

**Definition**

Sexual assault and rape include any unwanted sexual acts. The assailant can be a stranger, an acquaintance, a family member, or someone the victim knows well and trusts. Rape and sexual assault are crimes of violence and are used to exert power and control over another person. The legal definitions of rape and sexual assault can vary from state to state (National Center for Victims of Crime, GetHep Series: Sexual Assault Legislation). However, usually a sexual assault occurs when someone touches any part of another person's body in a sexual way, even through their clothes, without that person's consent. Rape of males is any kind of sexual assault that involves forced penetration of the anus or mouth by a penis, finger or any other object. Both rape and sexual assault includes situations when the victim cannot say “no” because he is disabled, unconscious, drunk or high.

In some states, the word “rape” is used only to define a forced act of vaginal sexual intercourse, and an act of forced anal intercourse is termed “sodomy.” In some states, the crime of sodomy also includes any oral sexual act. There are some states that now use gender-neutral terms to define acts of forced anal, vaginal or oral intercourse. Also, some states no longer use the terms “rape” and “sodomy,” rather all sex crimes are described as sexual assaults or criminal sexual conduct of various degrees depending on the use and amount of force or coercion on the part of the assailant (National Center for Victims of Crime, GetHep Series: Sexual Assault Legislation).

**Victims' Response**

It is not uncommon for a male rape victim to blame himself for the rape, believing that he in some way gave permission to the rapist (Brochman, 1991). Male rape victims suffer a similar fear that female rape victims face -- that people will believe the myth that they may have enjoyed being raped. Some men may believe they were not raped or that they gave consent because they became sexually aroused, had an erection, or ejaculated during the sexual assault. These are normal, involuntary physiological reactions. It does not mean that the victim wanted to be raped or sexually assaulted, or that the survivor enjoyed the traumatic experience. Sexual arousal does not necessarily mean there was consent.

According to Groth, some assailants may try to get their victim to ejaculate because for the rapist, it symbolizes their complete sexual control over their victim's body. Since ejaculation is not always within conscious control but rather an involuntary physiological reaction, rapists frequently succeed at getting their male victims to ejaculate. As Groth and Burgess have found in their research, this aspect of the attack is extremely stressful and confusing to the victim. In misidentifying ejaculation with orgasm, the victim may be bewildered by his physiological response during the sexual assault and, therefore, may be discouraged from reporting the assault for fear his sexuality may become suspect (Groth & Burgess, 1980).

Another major concern facing male rape victims is society's belief that men should be able to protect themselves and, therefore, it is somehow their fault that they were raped. The experience of a rape may affect gay and heterosexual men differently. Most rape counselors point out that gay men have difficulties in their sexual and emotional relationships with other men and think that the assault occurred because they are gay, whereas straight men often begin to question their sexual identity and are more disturbed by the sexual aspect of the assault than the violence involved (Brochman, 1991).

**Male Rape as an Act of Anti-Gay Violence**

Unfortunately, incidents of anti-gay violence also include forcible rape, either oral or anal. Attackers frequently use verbal harassment and name-calling during such a sexual assault. Given the context of coercion, however, such technically homosexual acts seem to imply no homosexuality on the part of the offenders. The victim serves, both physically and symbolically, as a “vehicle for the sexual status needs of the offenders in the course of recreational violence” (Harry, 1992, p.115).

**If You Are a Victim**

Rape and sexual assault include any unwanted sexual acts. Even if you agree to have sex with someone, you have the right to say “no” at any time, and to say “no” to any sexual acts. If you are sexually assaulted or raped, it is **never** your fault -- you are not responsible for the actions of others.
Richie J. McMullen, author of Male Rape: Breaking the Silence on the Last Taboo, encourages seeking immediate medical attention whether or not the incident is reported to police. Even if you do not seem injured, it is important to get medical attention. Sometimes injuries that seem minor at first can get worse. Survivors can sometimes contract a sexually transmitted disease during the sexual assault, but not suffer immediate symptoms. Even if the symptoms of that disease take weeks or months to appear, it might be easily treated with an early diagnosis. *(If you are concerned about HIV exposure, it is important to talk to a counselor about the possibility of exposure and the need for testing. For more information about HIV transmission and testing, contact the Centers for Disease Control National HIV/AIDS Hotline. Check the contact list at the end of this bulletin for the phone number and address information.)*

Medical considerations making immediate medical attention imperative include:

- Rectal and anal tearing and abrasions which may require attention and put you at risk for bacterial infections;
- Potential HIV exposure; and
- Exposure to other sexually transmitted diseases.

If you plan to report the rape to the police, an immediate medical examination is necessary to collect potential evidence for the investigation and prosecution.

Some of the physical reactions a survivor may experience in response to the trauma of a sexual assault or rape include:

- Loss of appetite;
- Nausea and/or stomachaches;
- Headaches;
- Loss of memory and/or concentration; and/or
- Changes in sleep patterns.

Some of the psychological and emotional reactions a sexual assault survivor may experience include:

- Denial and/or guilt;
- Shame or humiliation;
- Fear and a feeling of loss of control;
- Loss of self-respect;
- Flashbacks to the attack;
- Anger and anxiety;
- Retaliation fantasies (sometimes shocking the survivor with their graphic violence);
- Nervous or compulsive behavior;
- Depression and mood swings;
- Withdrawal from relationships; and
- Changes in sexual activity.

Survivors of rape, and often of attempted rape, usually manifest some elements of what has come to be called Rape-Related Posttraumatic Stress Disorder (RR-PTSD), a form of Posttraumatic Stress Disorder (PTSD). Apart from a small number of therapists and counselors specializing in sexual assault cases, few psychotherapists are familiar with the symptoms and treatment of RR-PTSD. For this reason, a rape survivor is usually well-advised to consult with a rape crisis center or someone knowledgeable in this area rather than relying on general counseling resources. The same applies to those close to a rape victim, such as a partner, spouse or parent; these persons become secondary victims of the sexual assault and have special issues and concerns that they may need assistance in dealing with effectively.

Local rape crisis centers offer male sexual assault victims direct services or referrals for services, including: counseling, crisis services and support services. Victims may contact their local rape crisis center, no matter how long it has been since the rape occurred. Counselors on staff can either provide support, or help direct the victim to trained professionals who can provide support. Most rape programs are staffed by women; however, some programs have male and female counselors. If you prefer one or the other, make that preference known when you initially contact the program. Whether or not they have male staff on call, almost all rape crisis centers can make referrals to male counselors sensitive to the needs of male sexual assault survivors. In addition, many communities across the country have support groups for victims of anti-gay violence.

Counseling can help you cope with the physical and emotional reactions to the sexual assault or rape, as well as provide you with necessary information about medical and criminal justice system procedures. Seeking counseling is an important way to regain a sense of control over your life after surviving a sexual assault. Contact your local rape crisis program even if services are not expressly advertised for male rape survivors. The number can be found in your local phone book listed under "Community Services Numbers," "Emergency Assistance Numbers," "Survival Numbers" or "Rape."

Sexual assault and rape are serious crimes. As a sexual assault survivor, you have the right to report the crime to the police. This decision is one only you can make. But because authorities are not always sensitive to male sexual assault victims, it is important to have a friend or advocate go with you to report the crime for support and assistance.
References

Bibliography