

A study on rape/ sexual assault cases received at forensic science laboratory Hyderabad, India

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Abstract

In India the number of rape /sexual assault cases is increasing every year. Such assaults direct the victim to commit suicide or attempt to commit suicide .Maximum victim rape was found at the age of 16 -- 17 years. The government has taken various steps like, bringing amendments in law to reduce the number of rape / sexual assaults. Violence like rape /sexual assault against women and female children is theoretically preventable. The parameters like victim/accused profession, education and socioeconomic status are not taken into consideration by NCRB. The above criteria play a key role in formulating preventive strategy. For this a study was under taken by selecting the alternate fifty cases received for biological fluid examination in the year 2014 and a part of 2015.This gave an insight into the frequency of a particular age group, victims/ accused profession and socioeconomic status and associated sections of crimes in rape/ sexual assault cases.

Keywords: Rape/ sexual assault, victim, offender

Introduction

In terms of health, rape/sexual assault (R /SA) is an injury, in which the victim goes into psychological depression, ending up in either suicide or attempt to suicide.

In Indian scenario on one hand there are popular articles on sexual assault cases by investigative journalists (1,2,3,4) and, on the other hand National crime record bureau's (NCRB) annual reports of each year showing the data, based on the cases that are reported to police. The NCRB data is available online in recent years.(5,6,7)

The rape / sexual assaults are increasing every year. Recent attacks like throwing acid on girls by male when they reject the love proposal are increasing considerably.

After the incident of Delhi gang rape case, of a female physiotherapist in 2012, and long protests by people, the Indian government, has passed an amendment for the victims of rape / sexual assault. This was known as CLAA (Criminal law amendment act) (8)

Population survey of rape/sexual assault /violence against women and children in India is comparatively a difficult task due to the stigma associated with it, than U S department of justice (9) .In case of sexual assault NCRB data mainly focuses on the age group of the victim at different class intervals and assailants familiarity with the

victim or whether it is an incest / group assault or other type of sexual assault (6, 7) The report of NCRB 2015 stated that most of the girl missing /kidnap occur for the purpose of marriage. But, details about the victim and assailant characteristics, required, to formulate the preventive programme or strategies to reduce /prevent sexual assault are not mentioned. However, initiative like framing “SHE TEAMS” was taken up by the Telangana government to reduce eve teasing/ stalking.

Materials and methods

To identify high risk group for sexual violence, and the assailant’s characteristics,

and the vulnerability factors affecting the sexual assault of women and children, a study was under taken based on cases that were reported to police and referred to FSL Hyderabad for body fluid examination such as semen and spermatozoa pertaining to a period of 15 months. A total of 2085 cases were reported during that period of which 1130 of the cases were of sexual assault. Alternate 50 cases of sexual assault of 15 months i.e. from Jan 2014 to March 2015 were taken into consideration bringing up the figure to 570 cases. 14% of these cases were from the districts of Andhra Pradesh and the remaining 86% from the districts of Telangana state.

Results and discussion

Table 1: Major types of cases received.

S. No.	Type of cases	No. of Cases	Percentage	No. of Cases ended in marriage	Percentage	Overall Percentage
1	Girl Missing (GM) /Kidnap/ abduct and sexual assault etc.	181	32 %	46	25%	8%
2	GM kidnap /abduct only	26	4.6 %	8	31%	1.25%
3	False promise to marry and Refuse to marry after cohabitation /physical relationship to rape / sexual assault	93	16.3%	-	-	-
4	Cheated by not marrying after Cohabitation /physical relationship	14	2.4%	-	-	-
5	Rape / sexual assault cases	224	39%	-	-	-
6	Other cases	32	5.6%	-	-	-
7	Rape /sexual assault by more than one person	19	3.3%	-	-	-

Table 1 show that, the major types of rape /sexual assault which resulted in victim and offender marriage is only 8% of total cases of kidnap /abduction and rape/sexual assault and only 1.25% among girl missing and kidnap. This differs from the National data of 2015 (9) that 54% of all abduction of women were carried out to force them into marriage .However the offender /assailant denies physical relationship after cohabitation with a false promise to marry is 16.3% of total number of cases which are reported under rape / sexual assault cases and false promises to marry / cheating .Majority of the cases are of female rape / sexual assault by male and only two cases of sodomy i.e. Male Vs Male / sexual assault are reported. 3.3% of the cases examined of rape/ sexual assault of women were by more than one person. The cases of rape / sexual assault, when women went to open defecation /urination are reported in rural India. Cases of incest by own father /step father or adopted father are less than 1% of total reported cases.

Age of victim and accused / suspect

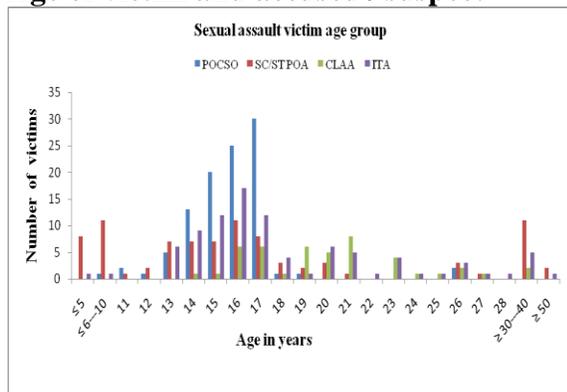


Figure 1: Age Vs number of victims of Rape/ SA.

The Figure 1 shows the age group of rape / sexual assault victim except in category II (Kidnap / abduction and rape / sexual assault by false promise to marry cheated and rape / sexual assault) starts from teens and peaks up at the age of 16 and 17 and reduces

gradually indicating that this is the most vulnerable age. For rape / sexual assault in general the age of the female included all age groups below 20 and other age groups above 25 also.

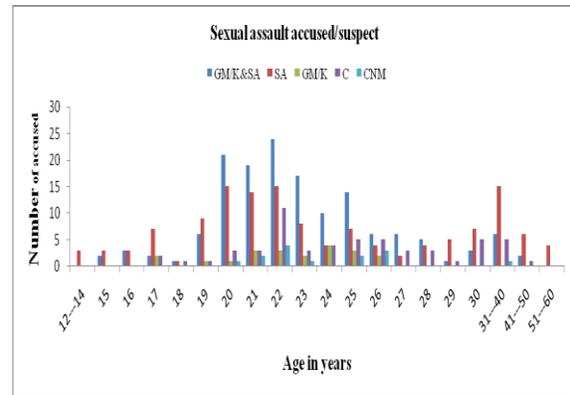


Figure 2: Age vs. Number of rape/ SA accused/suspect.

The Figure 2 shows when offender age group is examined the age of rape / sexual assault started at 12 to 14 and slight increase at age 17 and 19 and increased gradually for 20 and peaked at the age of 22. The cases of rape / sexual assault offenders of the age of 51 to 60 were also reported.

In India, the age group of offender below 18 years is considered JCL of juvenile conflict with law. This differs from developed country like Sweden where the criminal responsibility for males is from the age of 15 years and above. The Natl crime register of Sweden includes conviction data for people from age 15 years and older.(10)

The rape / SA victim’s age, if less than 18 years, then such cases are registered under POCSO act (the protection of children from sexual offences act, 2012). In India the consent given by the married female below the age of 18 years is not valid, as the statutory age for the marriage is 18 years and above. The cases where the victim and the offender get married after kidnap / abduction with their mutual consent are not considered authentic, unless registration and witness from both the families are taken into

consideration. In this context, two fake marriages, one of Muslim and the other Arab contract marriage were also reported.

laborer and private employee as shown in figure 3.

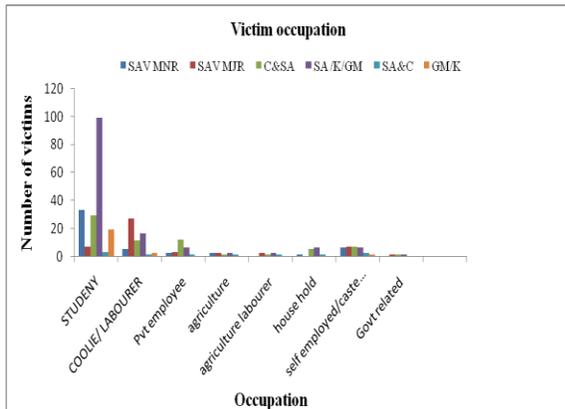


Figure 3: Occupation Vs number of victims of rape / SA.

The occupation of rape / sexual assault victims of age below 18 years and in majority of categories belonged to student and age group above 18 years were coolie /

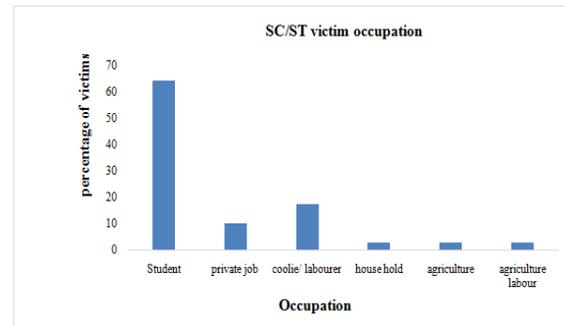


Figure 4: Occupation Vs percentage of rape /SA victims belonging to SC/ST.

The occupation of rape / sexual assault offenders by majority are drivers of auto , car, tractor, van etc , by profession next to which come laborer / coolie and self employee /business and lastly the students as shown in figure 4.

Occupation

Table 2: Rape Accused/Suspect Occupation.

Occupation	1	%	2	%	3	%	4	%
Student	12	12.76	3	6	16	21.19	1	20
Agriculture	6	6.38	1	2	9	26.02	1	20
Labourer/coolie	13	13.82	19	38	2	2.73	0	0
Pvt employee	7	7.44	4	8	12	16.43	0	0
Self employee/business	9	9.57	19	38	2	2.73	0	0
Govt. Related	1	1.06	2	4	4	5.47	0	0
construction related	6	6.38	0	0	6	8.21	0	0
Driver of auto/car/truck etc	40	42.55	2	4	22	30.13	3	60
Total	94		50		73		5	

- 1 GM/K&R WITH OR WITH OUT ILLEGAL MARRAIAGE
- 2 C & REFUSED TO MARRY AFTER USING PHYSICALLY
- 3 K & C AND REFUSED TO MARRY
- 4 GM ONLY

Table 3: n= 570.

No. Of The rape / sexual assault cases reported U/S prevention of atrocities against scheduled caste and scheduled tribe (SC /ST (POA)	Rape / sexual assault victim belonging to SC/ST	rape / sexual assault offender belonging to SC/ST
61	148	100

Table 4: Factors prevailing to the rape of sexual assault victims. (n= 570)

S. No.	Factor	Number suffered	Percentage
1	PHC /MR	24	4.21
2	Injury noted in preliminary MOL	11	1.92
3	Pregnant or UPT positive in MOL	17	2.98
4	attempted suicide	7	1.22
5	committed suicide	3	0.52
6	killed / murder	7	1.22
7	Video graphed and black mailed	6	1.52
8	Black mail other manuscript photos	3	0.52
9	Under intoxication	6	1.52

Community and religion

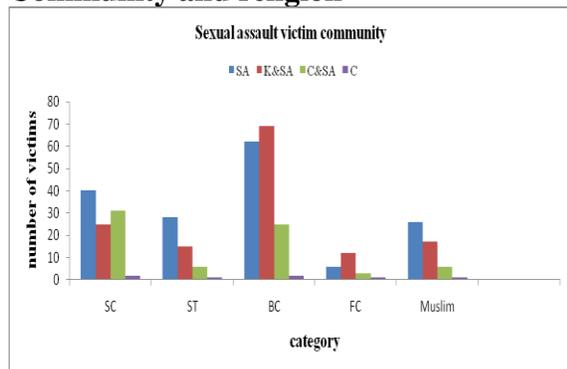


Figure 5: Category Vs Number of SA victims.

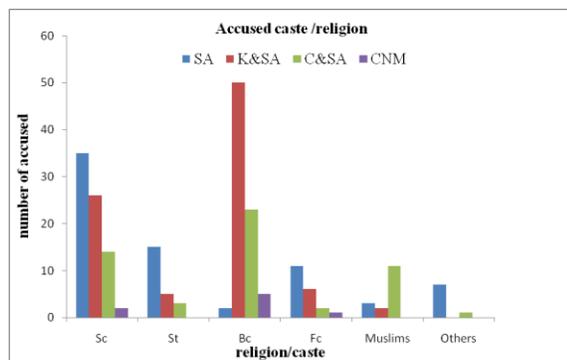


Figure 6: Castes/ religion vs. number of R/SA accused.

India has diverse population with socially and economically backward classes. The results in figure 5 show that, the reported cases of rape / sexual assault victim are more from BC followed by SC, ST and Muslim. Reported cases to police from FC were minimum compared to other category.

In FC community the no. of victims is less than the no. of offenders.

Table 3 shows the no. of cases of the rape / sexual assault victim with subsidiary sector SC/ST POA category are far less than the no. of victims and no. of offender

It was a known fact that the victim cannot resist rape / sexual assault when she is PHC/MHC being young female / under intoxicated condition and rape / sexual assault may lead to other type of injury of victim leading to the death by committing suicide, attempt to suicide and killed by offender (11). It may lead to pregnancy related health problems and complication.

The table 4 shows the factors related to victim proneness and injury /health problems. The injuries are noted in 1.92 % in prelim MOL. Rape / sexual assault victim committed suicide 0.52% of rape / sexual assault attempts to suicide 1.22% are not many. The rape / sexual assault results in victim pregnancy /UPT positive. In victim / preliminary MOL is only 2.98% .The low number of this may be due to the DNA technology use as the aborted foetus and children born after full term pregnancy in rape / sexual assault cases, cheating / rape / sexual assault cases etc are sent for DNA profiling

The number of violent crime like / murder after rape / sexual assault in also less1.22% which may be due to under reporting

The use of technology in rape / sexual assault i.e. cybercrime by videography of

rape / sexual assault and black mailing (6 cases) or sending obscene message and photos and black mailing

(3 cases) and extortion of money through black mail is increasing

Only in 6 cases the rape / sexual assault victim were under intoxication which was given by offender/offenders.

Five cases of (ITP) immoral traffic prevention raids when the rescued women were trafficked for prostitution and are case of forced prostitution was reported

Conclusion

There is a lot of difference in dealing with the cases of injury of rape/sexual assault in developed and developing countries. In developed countries there is a regular survey of different types of injuries (inclusive rape / sexual assault) by different agencies like health authority, criminal justice systems and independent non government agencies.(12,13,14,15) However in developing country like India we have only the cases that are reported to police. The causative factor of death in population is not published.

Vulnerable age group for females is teens. There is need to educate the high school and intermediate student's. The adverse effect of early marriage and related health complications Parents of lower socioeconomic groups especially mother should be educated from time to time about the security of the girl child from neighboring pedophiles.

Hence proper documentation at different points and by different institution such as justice systems and health departments and survey by NGO's of crime and related health problems and their social and financial implications is to be designed .This provides the data to formulate strategies programme to prevent crime and injury.

Acknowledgements

We would like to express our sincere gratitude to the in-charge Director, Forensic Science Laboratory, and Shri Ravi Gupta ADGP (TS) for his kind permission to publish this article. We would also like to acknowledge with much appreciation special thanks to our staff members

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