Orsak: Våldtäkt
Om våldtagna män i medicinsk praktik

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Akademisk avhandling

som med vederbörligt tillstånd av Rektor vid Umeå universitet för avläggande av filosofie doktorsexamen framläggs till offentligt förvar i Hörsal F, Humanisthuset, fredagen den 18 december, kl. 10:00. Avhandlingen kommer att försvaras på svenska.

Abstract
Within the Swedish healthcare system, the care of raped men varies and many hospitals lack specific programmes. The aim of the thesis is to describe and analyse how meanings about rape and raped men are produced within Swedish healthcare. The central question is how different patient positions and conceptions about the phenomenon of male rape are created through care practices and how, in turn, that affects the care of raped men.

The empirical material consists of interviews with healthcare professionals who have worked with raped men, field notes from participant observations and materials such as legislation, care protocols and medical records. In order to analyse how rape and raped men are articulated in practice and to highlight the norms that govern health- and rape care, the material has been analysed from a poststructuralist 'logics' perspective.

The analysis departs from a number of healthcare settings – two emergency departments, one gynaecological department, one rape clinic, one health crisis recovery unit and a regional healthcare project developing new procedures for the care of raped women, children and men – and their work with predominantly male rape.

One of the central aspects of the thesis is that it demonstrates that the care of raped men in many places lack clear procedures and that, consequently, health professionals either draw on ill-suited general care practices or make up new ones as they go. Norms about gender, sexuality, masculinity, rape and patienthood, but also organizational aspects and aspects of professional identity, greatly influence how raped men are treated.

In the thesis it is also suggested that rape care is governed by a 'logic of need'. The logic of need is a logic that care professionals and settings need to follow to produce good healthcare, and which emphasizes and recreates differences between how the rape of women and the rape of men are understood. At the same time there are care practices that seek to create equivalences between the rape of men and the rape of women. These alternative articulations of rape care are both in line with, and in some ways challenging, dominant rape care. In doing so they have an impact on what is considered good care for raped men.

Above all, the logic of need enables the articulation of established notions of raped men and healthcare's long-standing preoccupation with good corporeal healthcare. The logic constructs male rape as a specific phenomenon and organises healthcare in such ways that create sometimes unequal health conditions for male victims. The logic limits raped men's access to certain care practices and in many cases fails to offer raped men an established patient position. This in turn seems to limit the emergence of specially adapted care for that group of patients.

Keywords
Rape, male rape, sexual victimization, sexual violence, victimhood, patient, treatment, healthcare, medicine, medical practice, care practices, logics, poststructuralism, discourse theory, ethnography, gender, masculinity, body, gender equality, heteronormativity.