

TOWARDS GENDER EQUALITY.

EXPLORATORY EVIDENCE OF
THE ATTITUDES TOWARDS AND
THE NEEDS OF MALE VICTIMS OF
DOMESTIC VIOLENCE AND ABUSE
IN NORTHERN IRELAND WITH
RECOMMENDATIONS FOR CHANGE.

Research and report by
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FOREWORD

The idea for this research was formulated when MAP was developing its five year Strategic Plan in 2006. The need for the research, in our eyes, was clear. We wanted to end the horrible experience of domestic abuse and violence and to improve how men recover their lives through the services that are available to them, both within MAP and across Northern Ireland. This research is timely and will inform and perhaps lead the discussions as we formulate our next Strategic Plan over the coming year. Towards Gender Equality is a snapshot of the experiences of male victims of domestic abuse and violence in 2010.

For me, there are three core elements to this report. The first is to listen to the harrowing stories of some of the men that MAP works with and supports on a daily basis. The second is the measurement of general attitudes within society and the services which men receive when they are in an inescapable position. Thirdly this report focuses on moving forward and eradicating domestic abuse and violence.

There are many people who need to be thanked so that we could conduct this research however; the people who need most of our gratitude are the 13 men who came forward to tell us their stories. I want to thank them and to tell them that their stories have been heard and that the Men's Advisory Project will work towards ensuring that no-one else has to experience what they have experienced.

My hope is that this research will inform not only MAP's work but that it will stimulate further discussion and research on the issue of domestic abuse and violence, including male victims, amongst a wide range of individuals and organisations; the general population, politicians, the voluntary and community sector, the criminal justice sector and government.

The Men's Advisory Project looks forward to taking the findings of this research forward in partnership with men, agencies across the voluntary and community sector, the political spectrum and government to ensure that the needs of men are recognised, valued, acted upon and that the solutions are sustained in the longer term.

It is only by continuing our work through meaningful partnerships that we can fully eradicate domestic violence and abuse from our society.



James Knox

Chairperson, MAP

1 INTRODUCTION

This study was conducted by the Men's Advisory Project (MAP) with funding from the Department of Health, Social Services and Public Safety (DHSSPS). MAP exists to provide confidential counselling, information and referral services to men experiencing domestic abuse and relationship breakdown within Northern Ireland. The organisation also provides counselling for both men and women who have identified problems managing anger as impacting on their relationships. MAP currently has 16 volunteer counsellors to carry out this work as well as a paid project co-ordinator and volunteer Board of Directors.

As one of the first pieces of research on male victims of domestic abuse in Northern Ireland, this project is an exploratory piece which aims to provide an evidence base of the experience and needs of male victims in Northern Ireland. It also explores attitudes towards and awareness of these victims within the general population of Northern Ireland. The rationale for the study came from recognition within MAP that the percentage of men in Northern Ireland who experience abuse is higher than the majority of the public are aware of. For example the Northern Ireland Crime Survey (2008) suggests 1 in 12.5 men experience domestic abuse, and Police Service Northern Ireland (PSNI) figures show that of the domestic crimes recorded in 2008-2009, 25.2% percent of the victims were male, where age and gender were recorded. Despite these numbers, agencies such as MAP have dealt with victims who report that they experience a number of barriers such as automatic bias on the

basis of gender, no appropriate refuge accommodation, as well as inadequate levels of support amongst public services, social services and the legal system. A serious challenge therefore exists whereby the tendency for males to under-report victimisation (George & Yarwood, 2004) is exacerbated by these operational issues and gaps in services. In order for these issues to be taken seriously it was recognised that a review of the extent of the problem and the needs of these male victims needed to be carried out.

This project is in line with the 2005 and 2007 'Tackling Violence at Home' action plans produced by the Northern Ireland Office, and the Department of Health, Social Services and Public Safety. These strategy documents set out a strategy for the next five years to deal with domestic abuse in Northern Ireland in the three areas of prevention, protection and support and set out the initiatives that would be put in place to meet these objectives.

Among these initiatives was the pledge to improve services for all victims of domestic abuse, which included agreeing "protocols between Victim Support Northern Ireland and the Men's Advisory Project for supporting male victims and victims in same-sex relationships" (NIO, 2005). This represents a commitment to support persons within all Section 75 equality categories of the Northern Ireland Act (1998), and therefore the funding for the current study developed from these initiatives.



2 AIMS OF CURRENT STUDY

This study had three primary aims:

1. To gain a detailed understanding of the experience of male victims of domestic abuse in Northern Ireland by giving them the opportunity to speak about their experiences.
2. To examine the societal context of the issue by looking at public attitudes and awareness of male victims and the effect that this may contribute to their hidden nature.
3. To review the current state of service provision for male victims in Northern Ireland and highlight any gaps and improvements to services that could be made.

The expected outcomes of this research were:

1. To increase our understanding of the experience of these men which could be used to inform strategies that counselling and other service provision agencies can use to improve their response to male victims.
2. To encourage more of these men to come forward, in line with the Action Plans described above.

The following research questions were therefore addressed:

Nature of Male Experience

1. What is the nature of abuse experienced by men in Northern Ireland?
2. How does domestic abuse affect men and what coping mechanisms do they use?
3. What is the nature of male reporting behaviour?

Attitudes and awareness

1. How do men define domestic abuse?
2. Is domestic abuse against men treated as less serious or unacceptable?
3. Is there an awareness that men can be victims?

Service provision

1. What services exist for men?
2. What services are men aware of and which do they make use of?
3. What services do men say they require?
4. Do men have confidence in the ability and willingness of service agencies to help them?
5. How can agencies in Northern Ireland improve their response to male victims?

6. How can men be encouraged to seek help when they are a victim of domestic abuse?

This project used the definition of domestic abuse provided by the Regional Strategic Group of the Tackling Violence at Home Strategy, which defines domestic abuse as “any incident of threatening behaviour, violence or abuse (psychological, verbal, sexual, financial or emotional) inflicted on one person by another where they are or have been intimate partners or family members, irrespective of gender or sexual orientation” (NIO, 2005).

The study aimed, where possible, to be representative of males in Northern Ireland in terms of key variables such as age, disability, ethnic origin, and sexual orientation, thus meeting the requirements of Section 75 of the Northern Ireland Act (1998) in having due regard to the need to promote equality of opportunity. The study also aimed to examine and recommend the best paths forward for the progression of first line support available to victims and the policies in place to deal with the problem, especially where issues specific to male victims were highlighted by the findings. In asking these questions the study aimed to inform government strategy and the strategies employed in the voluntary sector in addressing these needs, reflected in an approach that focused on recommendations rather than the service provision failings of the past.

3 REVIEW OF LITERATURE

The following literature review summarises the current research knowledge on a number of key areas relevant to this study: the magnitude of the problem, gender, definitions, types of domestic abuse, the nature of domestic abuse against men, effects, male coping and reporting, support services, profiling the victim, and attitudes.

3.1 MAGNITUDE OF THE PROBLEM

Domestic violence and abuse is today recognised as a global problem, and the high prevalence rate of incidents is well documented both within the UK and world-wide (Walby & Allen, 2004; Yick & Oomen-Early, 2008; Alhabib, Nur & Jones, 2009). The evidence shows that a considerable number of women face victimisation; the Women's Health Organisation has reported multi-country findings that indicate the existence of female victimisation across 10 different countries across the globe, with rates of victimisation from 15% to 71% (Garcia-Moreno, Jansen, Ellsberg, Heise, & Watts, 2006), while a review of prevalence studies by Alabib, Nur and Jones (2009) also shows that prevalence rates can be as high as 70% in some countries. In the United States, prevalence reports show that 25-28% of women experience domestic violence in some form at some point in their lives (Tjaden & Thoennes, 2000). Estimates from the UK suggest that almost 15 million incidents of domestic abuse occur per year, and that experience of some form of interpersonal violence is widespread (Walby & Allen, 2004).

Within Northern Ireland, there is also evidence to show that domestic violence and abuse is a substantial problem. The 2007-2008 Northern Ireland Crime Survey (NIO, 2008) reports that around one in ten (11%) of respondents have experienced domestic violence, and there were 24,482 reported incidents of domestic abuse in 2009/2010, according to the PSNI statistical report for this period, which equates to over 67 per day (PSNI, 2010). In the UK, the Home Office has responded by funding a number of strategies aimed at reducing domestic violence (Hester & Westmarland, 2005), and a similar policy has been followed in Northern Ireland with the implementation of Tackling Violence at Home Action Plans by the Northern Ireland Office and the Department of Health, Social Services and Public Safety.

A wealth of studies have estimated prevalence, examined the nature of domestic violence, preventative screening, and looked at the nature of perpetrators. However, the vast majority of these studies are focused on women as victims. While the majority of research suggests that female victims comprise the largest proportion of victims (Mirrless-Black, 1999; Walby & Allen, 2004), a growing list of studies show that the prevalence figures are not as different for male victims as the academic focus would seem to suggest (Cook, 2009). Fiebert (2010) for instance provides a detailed bibliography of 273 studies spanning 3 decades which show that women can be just as aggressive in relationships as men.

Prevalence figures within police reports and national crime surveys have only more recently begun to include male victims in their data. A history of domestic violence perpetrated by women is well reviewed by George (2003) and indicates that to some degree, the existence of the abused husband was recognised in the historical record. However, only more recently have reliable reports of the frequency of male victims been available. These estimates of cases of domestic abuse involving male victims employ a variety of methodologies including surveys, police statistics and data from General Practitioners and hospitals.

In the United Kingdom, the British Crime Surveys represent one of the most comprehensive and reliable estimates to date, given that they included such large and representative samples and encouraged reporting of incidents that the victim may not have seen as a crime. The 1996 British Crime Survey included a self-completion questionnaire on domestic violence and found that in England and Wales, 4.2% of women and 4.2% of men aged between 16 and 59 reported they had been physically assaulted by their current or a former partner, in the last year. Moreover, 4.9% of men and 5.9% of women had experienced physical assaults, frightening threats or both (Mirrless-Black, 1999). The 2001 British Crime Survey also included a self-completion questionnaire examining domestic violence, and asked a nationally representative sample of 22,463 women and men aged 16-59 in England and Wales. It found that there

were an estimated 12.9 million incidents of domestic violence acts against women and 2.5 million against men in the year prior to interview and estimates that 26% of women and 17% of men aged 16 to 59 have experienced at least one incident of non-sexual domestic abuse, threat or force since the age of 16 (Walby & Allen, 2004). The 2005 British Crime Survey, meanwhile, found that 18% of men and 28% of women had experienced partner abuse at least once since the age of 16, while in the last year 6% of women and 5% of men had done so (Finney, 2006).

Some indication of the prevalence of domestic abuse victimisation within Northern Ireland is provided by the Northern Ireland Crime Survey (NICS), a personal and anonymous interview survey of adults living in private households in Northern Ireland (Carmichael 2007). This survey includes a computer assisted self-interviewing module on domestic violence and has been executed in 2001, 2003/2004, 2005, 2006/2007 and 2007/2008. The data indicates that around 1 in 10 males have experienced domestic abuse. The 2001 survey was answered by 2,022 participants and found that 14% of all respondents claimed to have been victims of domestic abuse at some time in their life- 16% of all females and 11% of all males reported so (Freel & Robinson, 2004). The 2003/2004 Northern Ireland Crime Survey (Freel & Robinson, 2005) also had a module on domestic violence and reported that 15% of this sample of 1,871 claimed to have been victims of domestic violence at some

point in their lives- 19% of females and 11% of males. The 2005 Northern Ireland Crime survey (Carmichael, 2007) reported similar findings, with 13% of the 2,108 respondents claiming to have been victims at some point in their lives, 16% of females and 10% of males. According to the 2007/8 NI Crime Survey, 1 in 10 respondents (11%) aged 16-59 were identified as having been a victim of domestic violence at some stage in their lives; females 15% and males 8%. Mental and emotional problems were more frequently reported as an effect of the abuse than any single injury of a physical nature.

In 2005 the National Crime Council in Ireland produced a report on the 'Domestic Abuse of Women and Men in Ireland' (Watson & Parsons, 2005), which represented the first large scale study in Ireland to assess the nature, prevalence and impact of domestic abuse against both sexes in Ireland. The report used a survey questionnaire and focused on domestic abuse that is serious in nature (requiring intervention). The prevalence figures showed that 29% of women and 26% of men suffer domestic abuse; 15 % of women and 6% of men suffer severe domestic abuse; 13% of women and 13% of men suffer physical abuse; and yet in terms of reporting the incidents, the study found that 29% of women and only 5% of men report to the Garda.

Other studies have achieved large sample sizes by using random telephone surveys. For instance, Breiding, Black and Ryan

(2008) report the results of a random-digit-dialled telephone survey in the US of over 70,000 participants, which found that around 1 in 7 men and 1 in 7 women reported some form of lifetime interpersonal violence victimisation.

Police reports provide a useful indicator of the levels of domestic abuse incidents that are considered criminal incidents, but do rely upon the incident being reported and recorded correctly in terms of gender of victim as well as meeting the criteria to be called a crime. PSNI statistics for domestic abuse in the period 2007-2008 show that recorded domestic incidents in general have fallen by 380, from 23,456 in 2006-2007 to 23,076 in 2007-2008, representing a fall of 1.62% (PSNI, 2008). 23.97% of the victims of crimes recorded with a domestic motivation were males compared to 66.03% females. This varied by area however; for instance, in East Belfast 27% of victims were male and in Newtownards 31.85% were male. Areas such as West and North Belfast also showed an increase in domestic incidents of 9.8%, indicating that the prevalence rates are highly varied by location with some areas showing a decrease in reported incidents and others an increase. In 2008/2009 (PSNI, 2009) 23,591 domestic incidents occurred (an increase of 515 from 2007/2008), of which 9,211 were recorded as crimes (a decrease of 72). Of these 9,211 recorded crimes with a domestic abuse motivation, 8.1% of victims were children under 17, 12.7% were recorded as gender/age unknown. 25.2% of the victims aged 17

and over were male (where gender and age of victim were both recorded). Finally, figures for 2009-2010 indicate that the total number of incidents has risen to 24,482, of which 9,903 have been recorded as crimes (PSNI 2010). Of these recorded crimes with a domestic abuse motivation, 24.8% of victims were male (where gender and age of victim were recorded).

Other studies have looked at the prevalence rates within a particular population, such as those attending hospital emergency departments, general practitioners, shelters and so on. Paul, Smith and Long (2006) looked at experiences of intimate partner violence among men and women attending GPs in Dublin, and found that the prevalence of reported experience of controlling behaviour and violent incidents were both higher in men, and yet women were more likely to have reported fear of their partner and a violent incident. They conclude that domestic violence is a serious issue for both genders within the sample; however the findings in particular highlight the danger of the male victims being overlooked.

Prospective studies, in which the specific sample is identified and then followed forward in time, have also been used to examine prevalence. Mechem et al (1999) used this method to examine males of legal age presenting at an urban accident and emergency department over a 13 week period. Of the 866 male patients interviewed, 109 (12.6%) had been a victim of domestic violence committed by

a female intimate partner in the last year.

What is compelling from the examples of research above is that figures have repeatedly shown male victimisation to be sizeable, and at times roughly equal to the number of female victims of violence in intimate relationships. Further, it has been consistently reported that men tend to under-report victimisation (Cook, 1999; Watson & Parsons, 2005) for a variety of reasons that will be discussed later, which means some of the estimates above may be conservative. However, despite this evidence, relatively few studies have examined women convicted of domestic abuse (Henning, Jones, & Holdford, 2006) with the majority of research still focused on male offenders. Similarly, there is a notable lack of research that focuses on the male victims of domestic abuse, including their needs and experiences and possible differences in reporting and effects of the abuse, in comparison with that focused on female victims.

Unfortunately, the hidden nature of the male population stems from this lack of regular research throughout the previous few decades in comparison with the research focusing on female victims and means that we cannot ascertain by a precise means whether male victimisation is a growing problem or one that is receding. Even where the research exists, no consistent methodology has been established in order to allow comparison of levels and examine trends in the prevalence of the problem.

3.2 DOMESTIC ABUSE AND GENDER

The work of feminist scholars and researchers in the last 30 years on the issue of female victims has been of vast importance to the recognition of the issue of domestic violence, and led to the provision of services, public awareness of the issue and improved empowerment for female victims to get out of an abusive relationship, although much more needs to be done. As a result of the prominence of feminist ideology in this field, the primary focus of work involving men has been on men as perpetrators (Cheung, Leung & Tsui, 2009).

Thus, domestic abuse research has long been a stronghold of feminist literature and research (Lewis & Sarantakos, 2001; Dutton & Corvo, 2006) and the pervasiveness of the idea that only females could be victims is reflected in the statements by researchers such as Kurz (1993, reported in Lewis & Sarantakos, 2001) that "Only men can be perpetrators of violence". However more recently there have been serious challenges to this view and a second traditional approach can also be identified from the literature, and broadly categorised as the family conflict approach (Watson & Parsons, 2005; Brogden & Nijhar, 2004).

The feminist definition of domestic violence focuses on the idea that it is a patriarchal form of control by men over women in intimate relationships, as part of a broader social agenda (Dutton & Corvo,

2006), which represents a male attempt to maintain traditional dominance and control over women (Anderson, 1997; Dutton, 2007; Cook, 2009). However this has been challenged as heterosexist (Letellier, 1994) due to evidence of same-sex male and female abuse as well as the many studies mentioned above which highlight the existence of male victims in general. Today, in most agency and governmental work, the definition of domestic violence and abuse has widened with our increased understanding that it is a human issue rather than a patriarchal one (Prospero, 2007) and recognition of the need for gender equality and human rights for all victims (Dutton, 2007).

3.3 DEFINING DOMESTIC ABUSE

A fundamental issue in the measurement of a concept is its definition, and varying conceptualisations of terms such as "abuse" may be behind many of the differences found in reported results. Many of the studies described above examined only physical violence or the threat thereof, and it is often argued that other forms are too difficult to measure empirically (Cook, 2009). However, more recently some empirical research has been produced on other forms of abuse, such as psychological and sexual abuse, which have been shown to be worthy of inclusion in research on domestic abuse.

For instance, Brogden and Nijhar (2004) emphasise the importance of extending the definition beyond the legal straightjacket

of physical violence but point out the measurement problems that arise in attempting to account for emotional and psychological aspects of abuse. They also include the idea of “enforced social or financial deprivation” in their definition. The definition used by the National Crime Council report also included physical, emotional and sexual behaviour but emphasised more serious abuse and therefore only included within its scope that which causes or risked causing “significant negative consequences for the person affected” (Watson & Parsons, 2005). Straus and Gelles (1990) include stalking behaviour in their definition and use the concept of intention or perceived intention to cause harm.

16 The Northern Ireland Regional Steering Group on Domestic Violence (NIO, 2005), offer an encompassing definition which focuses on equality and highlights that anyone can be a victim of domestic abuse and that it is much more complex than simply violence. They define domestic abuse as “any incident of threatening behaviour, violence or abuse (psychological, verbal, sexual, financial or emotional) inflicted on one person by another where they are or have been intimate partners or family members, irrespective of gender or sexual orientation”.

Psychological Abuse

Psychological abuse is a complex form of abuse that can include controlling and manipulative behaviour, such as use of the

children (including turning them against the victim) and use of threats (Murphy & Cascardi, 1999). Psychological abuse is often reported as more disturbing to the victim in the long term than physical injury (O’Leary, 1999; Follingstad, 2007) and yet it has received much less attention in the literature, seemingly due to the difficulty arriving at a common definition that will be both useful to mental health workers and to the legal services (O’Leary, 1999). In addition it is noteworthy that psychological abuse is more likely to occur in relationships than physical violence (Follingstad, 2007) and may be experienced more often by male victims than female victims (Coker et al, 2000). Further, it often precedes physical violence in relationships and therefore prevention efforts need to address this aspect (O’Leary, 1999).

Emotional Abuse

Emotional abuse and psychological abuse are two terms which have often been used interchangeably, which can contribute to confusion in conceptualising and identifying this form of abuse (O’Hagan, 1995). However, emotional abuse can be seen as distinct from psychological abuse when defined as behaviour which causes emotional harm and lowers self esteem. It can include belittling, humiliating, cruel insults and can have distinct effects from physical abuse such as self harm and low self esteem (Loring, 1994). In addition, emotional abuse can also serve as risk factors for physical abuse (Outlaw, 2009; Rabin et al, 2009) and therefore

should be of interest to those engaged in preventive measures against intimate physical violence. While many studies do not distinguish between emotional and psychological abuse, this study will do so in order to assess potentially important differences in male victim experience.

Financial Abuse

Financial abuse, wherein one partner steals money, creates debt or uses control of money to manipulate their partner, can also be part of the dynamic within an abusive relationship (Ristock, 2005). Financial abuse can also be enacted through stealing money off the partner, omitting critical details about financial involvements and can continue beyond the breakdown of the relationship by leaving the partner in poverty (Branigan, 2004). It also tends to interact with other forms of abuse and can be a central obstacle in escaping domestic abuse (Eisenstat & Bancroft, 1999).

Sexual Abuse

Sexual abuse can refer not only to coercive sexual behaviour, but also to the use of sex to manipulate or control, and can be interwoven with psychological abuse in terms of sexual humiliation and the threat of affairs and so on (Lewis and Sarantakos, 2001). It is most often reported in female victims (Reid et al, 2008) but can also occur in male victims including those in same-sex relationships (Heintz & Melendez, 2008).

3.4 THE NATURE OF DOMESTIC VIOLENCE AND ABUSE AGAINST MEN

Traditionally, more in depth studies examining the nature of domestic abuse have focused on female victims (Watson & Parsons, 2005), and thus it is arguably an area where the nature of domestic abuse experienced by the male victim is invisible within a feminised arena (Lewis & Sarantakos, 2001). The research that does exist has suggested both important gender differences and similarities between men and women in the types of domestic abuse they are likely to suffer.

Evidence from the British Crime Survey suggests that there are important differences between male and female experiences of domestic abuse that do not support a hypothesis of gender parity in domestic abuse (Robinson & Rowlands, 2004). The 2004 British Crime Survey found that women were more likely to experience repeat incidents of abuse, with 47% of male victims experiencing a single incident compared to only 28% of female victims, and male victims in the survey experienced 7 instances of abuse on average compared to 20 instances for female victims (Walby & Allen, 2004). The 2005 Northern Ireland Crime Survey also reports that females are much more likely to experience repeat victimisation, with 35% of females experiencing abuse many times compared to 7% of men, while 52% of the males experienced it only once compared to 32% of women (Carmichael, 2007).

The context of fear is an important aspect in domestic abuse (Walby & Allen, 2004), in that abuse is also a method of coercive control via intimidation, and according to some evidence men are much less likely to feel fear than women, with only 1% of men compared to 11% of women reporting frightening threats since the ages of 16 in the 2004 British Crime Survey (Walby and Allen, 2004). Carmichael (2007) reports that 2% of males compared to 8% of females felt frightened by threats to their personal safety, and Phelan et al (2005) reported that women experienced more fear and intimidation. Both Walby and Allen (2004) and Phelan et al (2005) reported that women were more likely than men to be injured by the assault and reported higher rates of injuries in all severity categories. Surveys have also found that males are much less likely to report victimisation of sexual abuse, with only 1% of Reid et al's (2008) sample doing so. This suggests that issues of physical fear and injury may be less important in cases of male victimisation and that emotional or mental issues may therefore be more relevant in the identification and treatment of male victims.

However male victims in other studies have identified fear of irrational and threatening behaviour as a major issue in their experience of domestic abuse, as well as fear of the repercussions of hitting back or defending themselves when attacked (Mulrone & Chan, 2005). Male victims do also experience a variety of forms of physical abuse. In Mechem et al's (1999) study of male patients presenting

at an urban Accident and Emergency department, the most common forms of assault experienced amongst the 109 victims identified were slapping, grabbing and shoving (60.6%), choking, kicking, biting and punching (48.6%) and objects being thrown (46.8%). 37% of the cases involved a weapon, while 7% of victims described being forced to have sex.

Although the majority of research has shown that females tend to suffer more injuries, contrasting evidence has been offered that shows that men can suffer severe and sometimes life threatening injuries as a result of a greater propensity for women to use physical violence (George, 2003). For instance, McLeod (1984) compared domestic violence against females and males in a sample of 6200 cases of spousal abuse in Detroit, 1978-1979, and found that females used weapons more than males (86% compared to 25%) and that males were injured more often and more seriously than females. McNeely & Mann (1990) reported findings that show women are more likely to carry out serious violent acts than men, while McNeely & Robinson-Simpson (1987) concluded in a review of the issue that women were as violent as men in domestic relationships. These articles suggest that framing the issue around protecting women is an erroneous stance, despite the fact that more women report being victims. It is such an ideologically framed treatment of the issue that may prevent men from reporting incidents and seeking help.

What is clear from the research above is that the nature of abuse experienced by men is not fully understood, perhaps due to a lack of in depth research that has focused upon this issue. The figures above can be misleading because small numbers of male victims are recorded in these studies and percentages are often reported in terms of the total sample, rather than looking at the percentage of victims who report each form of abuse. These surveys may not be the best way to assess the details of domestic abuse. What is needed is more qualitative research that examines the nature of abuse from the male victims' perspective, as well as the context of abuse. What we need is more information about aspects such as the work and family life of these victims, the factors that interplay with their experience of abuse and the context in which it begins: in other words, all the information that has been examined about the nature of abuse against women, needs to be examined in male victims.

3.5 THE EFFECTS OF DOMESTIC ABUSE

Just as domestic abuse against women has serious effects for the victim, so does domestic abuse against men. George & Yarwood's (2001) study found that nearly half of the male victims were excluded from their family home as a result of the abuse. They suffer poorer general health and high rates of depression, drug and alcohol abuse and mental illness, than men who do not suffer domestic abuse (Coker et al, 2000; Reid et al, 2008). The poor mental

health outcomes can be just as severe for male victims as they can for female victims (Fergusson et al, 2005; Prospero, 2007).

The children of male parents who suffer domestic violence often stay with the violent mother and so the father loses contact with his children; legal procedures involving children in many cases benefit the mother rather than the victim (George & Yarwood, 2004). A large body of evidence exists to show that the impact of exposure to domestic violence on children and young people is wide ranging and negative, both in the short term and long term, from increased risk of experiencing and perpetrating abuse to increased risk of other adversities through their lifespan (Stover, 2005; Holt, Buckley & Whelan, 2008).

The societal costs of domestic abuse are wide-ranging and synergistic with a number of other problems in society. Attempts to cost domestic violence have predominantly focused on female victims but the same consequences can be applied to males. Few studies exist in the UK which have attempted to cost domestic violence, however the Domestic Violence Bill (2003) drew upon a piece of UK research by Stanko et al (1998) on the cost within the borough of Hackney, and estimated from their figures that the total UK cost of domestic violence was £2.25 billion to the public, rising to at least £4.5 billion if emotional trauma and lost productivity costs were to be included, which was around 0.5% of the Gross Domestic

Product for that Year. Stanko et al's (1998) figures for Hackney were based upon police costs (although not costs for the wider criminal justice system) as well as housing, and health and based upon prevalence figures from previous studies as well as their own, but only for female victims.

Another UK report by Walby (2004) identified three strands of costs of domestic violence: Service support costs, including those of the criminal justice, health care, Social Services, housing and civil legal systems; Economic output losses, sustained by employers and employees; and the human and emotional costs sustained by the victim. Their methodology was based upon established frameworks for costing crime used by the Home office, and prevalence data was taken from a number of sources including the 2001 British Crime Survey.

In terms of service support costs, Walby (2004) places annual costs to the criminal justice system (police, prosecution, courts, probation, prison and legal aid) at around £1 billion per year which represented almost a quarter of their budget for violent crime at the time. Health Care costs were placed at £1.2 billion (physical injuries and mental health care making up the majority of this cost), while Social services costs were an estimated £250 million (the majority of which was for children caught up in domestic violence cases). Housing costs were £160 million, based on expenditure made on emergency housing support. Civil legal services cost

over £300 million, a cost split roughly evenly between legal aid and the individual and including injunctions, divorce and child custody costs. In terms of economic output, the lost annual figure is estimated at £2.7 billion due to time off work from injuries or emotional problems. Human and emotional costs were estimated in the same way that other Home Office Crime figures do so, in terms of the public's willingness to pay to avoid such trauma, resulting in a figure of over £17 billion.

The issue with both the studies above is that they only included female victims, so that when we add the number of male victims to these figures the total cost is likely to be higher still. This is most likely due to a lack of agreement over the prevalence figures for male victims compared to the figures for female victims, which in the latter case allow a more confident estimation of the subsequent costs. It could be argued that because there is evidence to suggest males are tending not to report victimisation that the service support costs will be very low for males, however the costs of domestic abuse in terms of male victims will still be borne out in economic output and human and emotional costs. Further, given that costs will have inflated since these two studies were produced, there are additional reasons to believe these cost analyses are conservative. Finally, these studies included physical violence and some other abuse behaviours such as stalking, but did not include any of the other aspects of domestic abuse

defined above such as psychological and emotional abuse, or financial abuse, which may have economic costs themselves.

3.6 MALE COPING AND REPORTING

Qualitative research into male victim coping has shown important distinctions between males and females in the way in which they cope with domestic abuse victimisation. Research consistently finds that men are less likely to seek help or open up about a variety of problems in their lives, such as depression and stressful life events, as illustrated in a literature review by Galdas and colleagues (2005). Males often live up to stereotypes of masculinity by finding it difficult to talk about vulnerable feelings with friends and family (Addis & Mahalik, 2003). Clearly, these issues may be relevant to the way in which male victims respond to being a victim of domestic abuse. This tendency has serious implications for accurately assessing the magnitude of male victims of domestic abuse, as well as for identifying those at risk and for treating victims. In the specific case of domestic abuse, studies have found that men will not seek help through a strong sense of masculine identity and shame at being a victim (Cheung, Leung, and Tsui, 2009) and this contributes to the perpetuation of male victims as an invisible population.

Domestic abuse can be difficult to identify when the definition is widened to include not only physical abuse but emotional, psychological, sexual and financial. It is violent abuse that is more likely to

be reported to the police (Kuehnle & Sullivan, 2004) therefore other forms tend to go unnoticed in official statistics even though they may have a significantly negative effect on the victim. Perhaps crucial when it comes to controversy over the number of male victims that exist is the issue of whether or not the victims recognise themselves as such. According to Carmichael (2007), males in Northern Ireland are less likely than females to recognise their worst incident as domestic abuse, which clearly has important implications for whether or not they go on to report the abuse.

Reporting of incidents is a key issue where gender differences have been identified and represents a critical area in terms of implications for policy and intervention schemes. In a review of gender differences in victims of domestic abuse seeking medical services, Phelan et al (2005) found that women were more likely to report incidents than men. A UK Home Office Study in 1999 showed that women were more likely to report both physical assaults and threats thereof, than men (George, 1999). The analysis found that 66% of both male chronic and male intermittent victims did not tell anyone about the abuse, and only 8% of chronic and 4% of intermittent male victims reported to the police. George (1999) also found that virtually none of the male victims considered that the assaults they experienced were a crime; therefore this may explain the underreporting. Males may also feel social pressure to stay in the abusive relationship

and not report it (Harris & Cook, 1994), and fear of the response from those in the first lines of the service support as well as general societal response to their victimisation may play an important role in discouraging reporting (Brogden & Nihjar, 2004), as discussed in detail later.

3.7 SUPPORT SERVICES

The issue of support service treatment in domestic abuse cases is controversial, because the support offered should be neutral to factors such as gender or other demographics. In today's society equality legislation is in place across all areas of employment and most major services to ensure that individuals do not receive discrimination on the basis of age, sex, religion, and disability. Within Northern Ireland and relevant to this study is the Sex Discrimination (Northern Ireland) Order 1976 as amended, which makes it unlawful to discriminate against "an individual on the grounds of his or her sex in employment, training and related matters, education, the provision of goods, facilities and services and the disposal and management of premises".

However, domestic abuse research indicates this is not the case, with a strong basis for the argument that policy responses to domestic abuse have been defined by a focus on female victims (Dutton & Corvo, 2006). There is a lack of services for both gay and heterosexual male victims reported in research across the world (Letellier, 1994; Cheung, Leung,

and Tsui, 2009). George & Yarwood (2004) found that the response of police and courts were heavily biased against males, with arrest policies aimed primarily at males to the detriment of genuine male victims and in the courts males had less success in gaining non-molestation and exclusion orders. An issue that is raised by Muelleman & Burgess's (1998) study on the history of perpetration of domestic violence amongst male victims is that of equal treatment at the first line of support when men do report domestic abuse. Clients have reported being questioned with suspicion as to the truthfulness of their story as well as to whether they have instigated the violence when they present to GPs, hospitals, and other lines of support – a suspicion that is not directed when women report these issues. This is a dangerous and pressing issue which perpetuates the hidden nature of the male population who are victims of various forms of domestic abuse and represents an issue of awareness amongst support staff.

In violent cases of domestic abuse police are more often than not the front line of response, and therefore their treatment of the incident is vital to subsequent routes of referral in service support for both the victim and perpetrator (Trujillo & Ross, 2008). Trujillo and Ross (2008) found that police tended to make the judgement that future assaults were unlikely when attending a first incident, and made risk assessments based on the level of fear they perceived in the victim. Thus there is a need for police awareness of the possibility that

the victim may not always be the female when they attend an incident and that the male victims' reported experience of fear may not be a reliable indicator of risk.

It has also been argued that cultural aspects of domestic abuse have been ignored in responses to domestic abuse, and as a consequence service support has been focused on delivering culturally neutral interventions when in reality culturally competent approaches are required (Bent-Goodley, 2005). Domestic abuse research has largely focused on white women and thus the interventions designed tend to be informed by these findings, and yet they assume the approach is suitable for all groups in society. This implies that service support will therefore be biased to white female victims, and the related issue is the argument that male injuries may be sustained as a result of a female victim acting in self-defence.

3.8 PROFILING THE MALE VICTIM

It is important to recognise the literature that shows that domestic violence occurs regardless of race, sexuality, disability, and socioeconomic status, but also that it is uneven in terms of prevalence and varies across these demographics: research on these demographics within the male population is scant but what indications we have of these victims are outlined below.

3.8.1 AGE

The issue of domestic abuse variation by age is one that is unclear; the British Crime Survey 2004/2005 found that domestic abuse decreased fairly consistently with age (Finney, 2006); however it may be that it is more difficult for older victims to report abuse or indeed they may simply be less inclined to do so. Kosberg (1998) argues that domestic abuse victimisation surveys discriminate against older people in general and in particular against older men, yet they do exist and may suffer particularly negative consequences of such abuse. Similarly, Bachman & Meloy (2008) argue that although older people are less likely than younger people to be victims of a range of violent crimes, those who are victims are more likely to be injured and their experience should be examined as distinct from other victims. A review by Wyandt (2004) highlights neglect and financial abuse as specific aspects of abuse against older people, and points out that it may be difficult to identify and therefore there needs to be awareness of the issue amongst support staff such as nurses, GPs and other health care and service providers.

3.8.2 DISABLED VICTIMS

The issue of disability through physical, sensory and mental impairments can have a profound effect on victims of domestic abuse and in particular on the decision making process over whether to report. To date little is known about male disabled victims and it is important to

include their needs in inclusive pieces of research. However, research on disabled female victims of domestic abuse has shown that they are more vulnerable to victimisation (Noseck & Howland, 1998) and find it harder to speak out and get support. The 2005 British Crime Survey found that people who were in ill health or disabled were disproportionately more likely to have experienced abuse in the last year (Finney, 2006).

Moreover, a study by Browne (2007) which primarily focused on gay, lesbian and transgender victims, also found that both male and female disabled victims were more likely to have received abuse from a family member than other victims in the study, with just over half of the disabled participants reporting this, indicating a possible vulnerability of disabled victims within family relationships that may be exploited by perpetrators. Feminist theory on disabled female victims argues that they continue to experience social oppression and domestic violence as a consequence of their disability (Mays, 2006) and it is not illogical to argue that disabled males suffer the same problems.

3.8.3 ETHNICITY, CULTURE AND RELIGION

Cultural aspects of domestic abuse are under-researched and detailed studies have focused on women. The 2004/2005 British Crime Survey found no variation by ethnic background but pointed out that this may be due to the low sample sizes within some

of these subgroups (Finney, 2006). Studies on women have highlighted that health-care professionals do not have enough cultural awareness to support black and minority ethnic victims, and indicate that language barriers may also make it difficult for them to seek support (Wellock, 2008). Prevalence studies on ethnicity and race in the female population have reported varying rates of victimisation largely as a result of methods and sample but do suggest unique socio-cultural factors that may be relevant to particular minority groups (Grossman & Lundy, 2007). For instance, Ellison et al (2007) found that African Americans had higher levels of domestic abuse than non-Hispanic whites and Latinos, and found that cultural behaviours associated with certain ethnic and religious groups, such as higher attendance in church may function as protective effects against domestic violence.

Research has also found that the immigration status of a victim can be used against them as a tool of control, in order to force them to remain in the relationship (Orloff & Kaguyatan, 2002). There are arguments within the feminist literature about the universality of risk and varying levels of prevalence amongst ethnic groups of women, as well as the effect culture has upon their experience of and reaction to domestic abuse (Sokoloff & Dupont, 2005). It is likely that culture and ethnicity also affect male victims' experiences, however detailed research of this nature has yet to be produced. It is certainly very probable that different minority groups are

less likely to report victimisation (Grossman & Lundy, 2007) and differing cultural notions of gender roles may also play an important role amongst different groups.

3.8.4 SEXUAL ORIENTATION: DOMESTIC ABUSE IN SAME SEX RELATIONSHIPS

Research suggests that domestic abuse in same-sex relationships is at least as prevalent, if not more so, than domestic abuse in heterosexual relationships (Heintz & Melendez, 2006) and within the male victim focus of this study; abuse in these relationships is highly relevant. As mentioned previously, it is suggested in some research that male victims in general are less likely to report abuse than women (Phelan et al, 2005) and the research on same-sex relationships suggests that this is even more significant an issue in this context.

Gay victims are likely to find similar obstacles to heterosexual victims in reporting their victimisation, but also face a number of additional obstacles, such as a distrust of the police in the gay community and the fear of being "outed" if their sexual orientation is not public (Kuehnle & Sullivan, 2004). Indeed, the evidence is that in both gay and lesbian communities reporting rates for crime in general are far lower than the national average (Peel, 1999).

Research by Ristock (2002, 2005) has described how many gay victims already

feel a level of isolation and vulnerability due to being in a relationship that is often not fully accepted by those around them, or sometimes completely hidden from those they know, and may be their first serious relationship. Within this context those who experience abuse in their relationship can feel particularly isolated and often feel that mainstream services will not understand their marginalised circumstances. Whether this is fact or a matter of perception, it certainly has implications for the recognition and intervention of abuse for gay male victims. Moreover, often large scale studies have omitted results for gay couples, which increases the difficulty of determining magnitude (Renzetti, 2001).

Ristock (2005) also describes how the power dynamics are different in these relationships as often the partners are similar in size and strength, so that often the victim will also use violence in retaliation, undermining the traditional idea of a passive victim and an aggressive perpetrator. The nature of abuse is often similar to that found in heterosexual relationships (Kuehnle & Sullivan, 2003), however there are some distinct aspects, such as threats to reveal the partners sexuality to those that do not know, to reveal the HIV/AIDS status of a partner (Ristock, 2005). Therefore an important aspect to note is that the conceptions and findings of abuse in heterosexual relationships cannot be assumed to generally apply to abuse in same sex relationships.

In terms of prevalence levels, as mentioned,

it is difficult to determine much like male victim levels in heterosexual relationships, however a small number of studies exist and give some suggestion that levels are as high as or even higher than levels of abuse in heterosexual relationships (although comparison is problematic). Greenwood et al (2002), for instance, conducted telephone interviews on a sample of 2881 and found prevalence rates for domestic abuse victimisation were substantially higher (at 22%) than among representative comparative studies of heterosexual men. The authors suggest that gay male victimisation may be higher than the female victimisation in the studies they looked at.

Burke, Jordan & Owen (2002) examined gay and lesbian domestic abuse in both Venezuela and the United States and found that over two-thirds of the sample had experienced some form of abuse in both countries, although a small minority of this was physical abuse.

A US comparative study by Tjaden, Thoennes and Allison (1999) found that respondents who had lived with a same-sex partner were significantly more likely to experience violence by intimate partners than those who had not. The study found that intimate partner violence was more prevalent among gay males than heterosexual couples, but not more prevalent among lesbian couples than heterosexual couples; concluding that domestic violence was perpetrated more by men whether against the same or opposite sex.

A study by Donovan, Hester, Holmes, and McCarry (2006) was the first in the UK to directly compare heterosexual and same-sex relationship domestic abuse, and the results from their UK-wide sample of 746 gay, lesbian and bisexual participants showed that 38.4% of respondents said they had been a victim of domestic abuse, 40.1% women compared to 35.2% men, although men were more likely to experience sexual abuse. The questionnaire sample was not random and not necessarily representative of the same-sex community but the results do indicate that a significant proportion of the same-sex population experience abuse. The study also found evidence that domestic abuse may not be recognised as such by a large proportion of those in same-sex relationships, and that rape may be underreported by gay men due to a difficulty in defining it as rape.

In a sample of 1391 gay men in a study conducted by Henderson (2003), 29% had experienced domestic abuse from a same-sex partner, compared to 22% of the sample of 2049 females who had experienced abuse from a same sex partner. The study found both gay and lesbian victims suffered the abuse over a similar length of time, around 18 months on average (median). Very small numbers of both gay and lesbian victims had reported the abuse to the police, however slightly more gay victims had done so (18.8% compared to 13.1%). A Puerto Rican study of 199 gay men conducted by Toro-Alfonso & Rodgriguez-Madera (2004) found that 24%

of the sample reported having been victims of a violent relationship, 40% felt they had been emotionally abused and 19% sexually abused (including 1 in 4 of which who had been coerced into unprotected sex).

Of those who do seek help to stop domestic abuse victimisation in the gay and lesbian community, Turell (1999) found that they considered most resources helpful with the exception of the police, shelter and crisis hotlines, which they felt were problematic due to a lack of recognition of their needs, as well as the existence of homophobia. 54% of the sample had reported seeking help. A study on perceptions of domestic abuse by Poorman, Seelau and Seelau (2003) found perceptions towards domestic abuse in same sex and heterosexual relationships to be similar, however respondents felt that male perpetration against females was more serious and more believable than same-sex abuse.

To summarise the demographic aspects of domestic abuse, it seems that while research such as that discussed above has emerged more recently on female victims from a wide range of backgrounds, little is known about male victims from such groups. However, if they exist in Northern Ireland they are likely to feel the compounded difficulties of being a minority gender as well as a minority demographic, and are unlikely to feel connected to lines of support; therefore there is justification for profiling the male victim more completely in order to better inform

our provision of services and support.

3.9 SOCIETAL ATTITUDES TO MALE VICTIMS

It is recognised that social norms and attitudes play a significant role in domestic violence and abuse (Falchikov, 1996). The fact that the vast majority of research on domestic abuse concentrates on women, stems in part from the dominant cultural stereotypes that have long informed popular prejudices towards the role of each gender within a heterosexual relationship (Brogden & Nijhar, 2004). Where attention to the battered husband has existed in previous centuries, it has nearly always been focused upon ridiculing the husband for allowing the abuse to occur, rather than on questioning the violent wife (George, 2003). This is in large part due to the pervasive stereotypes that have long existed about the gender roles of males and females, which are socialized to individuals throughout childhood (Adler, 1992; Serbin, Powlishta, & Gulko, 1993), reinforced by media and societal organisations (Lipsitz-Bem, 1981; Kiovula, 2004) and therefore held to be implicitly true. These gender roles place the male as the stronger, protective sex who are expected to be tougher, more competitive, assertive and aggressive (Eagly & Steffen, 1986) than females. Attitudes towards women's roles in society have been shifting constantly since the feminist movement (Loo & Thorpe, 2004), however the role of the male has remained similar at least where perceptions about aggression are concerned (George, 2003).

The stereotypes that society perpetrates about males and how these are relevant to the issue of domestic abuse are reflected well in a study carried out by Fiebert and Gonzales (1997), who asked female perpetrators if they agreed with certain statements about why they had been violent to their partner. The 2 leading reasons given were:

“I believe that men can readily protect themselves so I don’t worry when I become physically aggressive” (24%).

“I have found that most men have been trained not to hit a woman and therefore I am not fearful of retaliation from my partner” (19%).

These stereotypes also affect the male victims themselves in that inherent within the concept of “a man should not hit a woman” is the idea that it is acceptable for a woman to hit a man and thus men often feel as though they should just allow it to happen, and such pervasive ideas affect the male victim and his coming to terms with the abuse, as reflected in those few studies which document the experiences of male victims, such as those reported by Cook (2009). Cook’s (2009) book on the subject reports the additional dimension of shame felt by male victims as a result of these societal attitudes which could be having a skewing effect upon the prevalence data.

These forms of interpretation in society can be seen to be reflected in academic circles and in turn feed into the policies

of our institutions, where men can find themselves accused of abuse if they come forward with injuries to the police or accident and emergency departments, the assumption being that the wife has acted out of self-defence to violence by the husband (Straus & Gelles, 1990). Therefore fears that male victims may have about reporting the abuse are often grounded in fact, as demonstrated in a study by Feather (1996) who presented participants with a domestic abuse scenario in which either a husband or a wife were the perpetrator; the respondents were significantly more negative in evaluating the husband than the wife, feeling the husband deserved a harsher penalty and were more sympathetic towards the wife. Such attitudes affect the support a male victim will receive, and some research has suggested that women will use the cultural propensity to support and believe them over the man to make false allegations regarding the domestic abuse in order to gain an advantage in disputes over the children and the marital home (Gardner, 1992; Tong, 2001).

This process has been further influenced by a focus in the latter quarter of the twentieth century upon the empowerment of women against the historical subordination they have experienced at the hands of the male. A major focus in this process has been on the issue of power and this war has been fought out in the arena of domestic violence and abuse (McNeely, Cook, & Torres, 2001). There is no doubt that the feminist movement has empowered many female victims of domestic abuse and given them

the support they needed, however some writers have also argued that this has also served to marginalise the predicament of genuine male victims (George & Yarwood, 2004) who already face the societal stigma of being a victim in the first place.

4 PRESENT STUDY METHODOLOGY

Throughout the project the methodology was designed on the basis of existing literature and with the input of a research steering group, set up by the researcher to advise and peer-review the process and ensure a robust methodology. The steering group consisted of experts in research and equality, as well as a representative from Women's Aid to provide their perspective on the project. A list of steering group members can be found in Appendix 1.

From the outset it became clear that a reliable prevalence estimate would not be possible in this project, as such an objective would require greater resources and the reliability of such an estimate would be questionable given the early stage of research on male victims. Networking with voluntary agencies and service providers indicated that a lack of public and agency awareness means that many male victims are unlikely to identify as such and those who are aware they are victims are unlikely to respond that they are, due to stigma or embarrassment. There are also ethical problems involved with asking the general population if they are victims of domestic abuse in telephone or mail surveys where they may live with their abuser. It was decided therefore that given the lack of research knowledge on this topic in Northern Ireland that the focus of this research would be on an exploratory methodology that would incorporate both quantitative and qualitative methodology.

Research questions were drawn up based on the key issues highlighted

by the evidence from the literature, as well as through interaction with service provision agencies and counsellors who have dealt with male victims. The three key themes to be examined were:

1. What is the current level of awareness of male victims of domestic abuse in Northern Ireland, and what attitudes do the public hold towards male victims?
2. What is the experience and needs of men as victims of domestic abuse?
3. How can agencies in Northern Ireland improve their response to male victims?

The objective of these research questions was to present an evidence base with which to inform government and service strategy. Available prevalence estimates in Northern Ireland were also examined and discussed.

The research was ethically reviewed by the Health and Social Care Research Ethics Committee 1 and the research steering group of experts has helped design the project to high standards.

The following methods were used to examine each research question:

1. Quantitative Attitudes Questionnaire

An exploratory quantitative attitudes questionnaire was designed based upon the key issues identified by previous



literature as well as concerns raised by counsellors within the Men's Advisory Project and issues highlighted by key agencies in focus group meetings held throughout early 2009. Individual measures were created mostly without incorporation of standardised measures, as standardised measures for the issues being examined did not exist in the literature; however standardised Likert and demographic measure formats were used.

The attitudes questionnaire was tested in house with counsellors and staff as well as some service users and sent to the research steering group and some service agencies. Feedback received was used to amend and improve the questionnaire wording and format.

The questionnaire was made available both online (hosted by Survey Monkey) and in paper format, and disseminated via a number of methods. Emails with links to the online version were sent to voluntary and community groups throughout Northern Ireland

An online questionnaire was decided upon as a useful and cost effective method for accessing a region-wide sample; the research budget did not afford the use of masses of postal questionnaires. In order to access those who did not have online access, voluntary groups were encouraged to help us by taking paper questionnaires to be filled out by their service users in group settings. In addition, we also received some help in getting paper questionnaires filled

out by voluntary agencies approaching members of the public in shopping centres.

Survey monkey was chosen on the basis of research budget but also because it was adequate for the scope of the attitudes questionnaire, being private and confidential, flexible and allowing for the use of scales. In recent years it has been increasingly used in formal survey research (for example, Thomson et al, 2009).

Resources dictated that a convenience sample rather than a probability sample was used; however the process was committed to ensuring that the final sample would be as representative of the general population, and as inclusive of equality groups identified by Section 75 of the Northern Ireland Act 1998 as possible. Demographic balance of the questionnaire was monitored throughout and low response groups such as older participants and ethnic minority groups were targeted with the help of agencies in this sector.

The attitudes questionnaire can be found in Appendix 5.

2. Case Studies Of Male Victims

In view of the fact that there is a significant lack of in-depth knowledge about the male experience of domestic abuse, especially in Northern Ireland, qualitative case studies were designed to examine the male experience from their own point of view. Qualitative research of this form allows contextual data to be collected

in a level of depth which is useful to practitioners and which is especially appropriate when studying sensitive issues.

Case studies were designed as semi-structured in order to allow the participant to present their experience in their own words while having themes to follow to ensure that the key dimensions of their experience were covered: demographic data; contextual information; the nature of abuse; understanding of abuse; effects and coping; response and help seeking; experience of services; and needs and opinions. The full interview schedule can be found in Appendix 4.

The study adopted a self-recruiting method which meant that male participants had to identify themselves as victims and contact the researcher to take part. A number of different techniques were used to raise awareness of the study. Posters and information leaflets were designed which explained the study in line with ethical standards, and were sent to all key agencies who may encounter male victims, as well as GP surgeries, Accident and Emergency Departments, and more neutral environments such as libraries and bars and traditional men's locations such as sports clubs and leisure centres. Community newsletters and other sources of free advertising were also employed to raise awareness of the research.

Once a potential participant contacted they were directed to or sent participation information sheets and consent forms,

and given at least two weeks to read this information and make contact if they had any issues. Sample recruitment was a slow process with many men contacting for more information but not following up to participate in an interview. Some men were put off if they had no internet access but did not want to give their personal details so that participant information sheets could be posted or emailed.

Case study interviews took place at the Men's Advisory Project offices in a private counselling room, typically lasted between 90 and 150 minutes, and were recorded with a Dictaphone at the participant's consent. Participants were informed that the study was completely anonymous and confidential except where information was disclosed regarding terrorism or vulnerable children or adults. The structure of the interview was also explained at the outset, and participants were told they could take breaks at any time. Following the interview participants were given information on available services if required, and were also advised they could follow up in August 2010 to receive the results of the study.

Case study data was stored on a secure computer and transcribed from audio to written format in a manner which anonymised the data. The case study schedule, participant information sheet and consent form can be found in Appendices 4, 2 and 3 respectively. Audio files were held for 2 months after write up of the results to allow data checking, and then securely wiped.

3. Service Review

To assess service provision and gain the perspective of service agencies on the issue of male victims, agencies were identified on the basis of the issues with service provision identified by the experiences of case studies participants. These agencies were approached following the conclusion of case studies and asked to participate in a short recorded interview.

A representative from each of the following agencies took part: the Police Service Northern Ireland, Men's Advisory Project, Housing Executive, Women's Aid Domestic Violence Helpline, Public Prosecution Service, Criminal Justice Inspection, Age NI, Cara Friend, Disability Action, Law Commission, Northern Ireland Council for Ethnic Minorities, The Rainbow Project and Victim Support. Interviews took place at MAP offices, at the office of the agency or by telephone, at the convenience of the participant, and typically lasted 30 minutes to one hour.

Questions for each agency differed slightly but the general protocol as well as the participant information sheet and consent form can be found in appendix Appendices 8, 6 and 7 respectively .

5 KEY FINDINGS

5.1 PARTICIPANT DEMOGRAPHIC SUMMARIES

Attitudes Questionnaire

The final attitudes questionnaire sample comprised 477 participants. Table 1 below summarises the demographics of this sample. The study achieved a very low level of missing data by setting online questionnaire options to require question completion before proceeding.

Case Studies

The final case study sample comprised 13 male participants. Table 2 on the next page summarises the demographics of this sample.

The findings section is broken into themes which incorporate data from the attitudes questionnaire, case studies and the service review interviews. These themes are: the context of the abusive relationship; awareness and acceptability;

Table 1: Summary of participant demographics for attitudes questionnaire

	Number (n)	% of total		Number (n)	% of total
Gender			Ethnicity		
Male	243	50.9%	White European	419	87.8%
Female	234	49.1%	Other	58	12.2%
Age			Disability		
18-24	91	19.1%	Yes	53	11.1%
25-34	107	22.4%	No	418	87.6%
35-44	94	19.7%	Unsure	6	1.3%
45-54	109	22.9%			
55-64	59	12.4%			
65-74	11	2.3%			
75+	6	1.3%			
Sexual Orientation			Town		
Heterosexual	406	85.1%	Belfast	182	38.2%
Gay	52	10.9%	Londonderry	71	14.9%
Lesbian	13	2.7%	Other	224	47%
Bi-sexual	5	1.1%			



Table 2: Summary of participant demographics for case study interviews			
		Number (n) at perceived onset of abuse	Number (n) at interview
Age Group			
18-24		1	0
25-34		7	3
35-44		4	2
45-54		1	7
55-64		0	1
65-74		0	0
75+		0	0
Age Range at Interview	31-57	Mean Age at Interview	43.6
Sexual Orientation (n)		Town (n)	
Heterosexual	12	Belfast	8
Gay	1	Londonderry	2
		Other	3

the nature of abuse experienced; effects of the abuse; male reaction and coping behaviours; victim reporting; barriers to seeking help; and gaps in service provision for male victims. All questionnaire findings were analysed by age, disability, ethnic origin, sexual orientation, and ethnicity. However only where particular issues are identified by these characteristics, are these breakdowns presented.

5.2 CONTEXT OF ABUSIVE RELATIONSHIPS

12 of the 13 participants experienced abuse at the hands of an intimate partner, and one at the hands of his biological mother. All 13 were co habiting with the abusive individual, and of the 12 who were in intimate relationships with their abusive partner, 6 were married to them. 11 of the 13 participants had children, of which 10 had children with their abusive partner.

The 13 case studies showed no single common factor which led to the abusive relationship. The onset of abuse was a gradual process which participants had found difficult to detect at the time in most of the cases, although for three of the men the onset of the abuse was sudden and noticeable. Five primary factors were raised as issues which precipitated the abuse from the point of view of the male victims:

Financial issues

Financial problems were mentioned as contributing to the onset of abusive behaviour by 6 of the 13 participants. In four of those cases the issue was a sudden money problem caused by a loss of employment or business, which led to abuse from their partners. In two of the cases the participant felt under constant pressure to work long hours in order to provide the things their partner demanded (cars, houses, and so on), which in turn led to their partner feeling neglected because they were not at home enough.

Alcohol and drugs

Drug use was highlighted as the key issue precipitating abusive behaviour by two of the participants. Both participants mentioned that their partners had previous drug problems before they met, which resurfaced soon after their relationship started and became the central factor underlying their abusive behaviour. Alcohol was also a factor in some of the worst incidents for four of the participants.

Mental health problems

Three of the participants noticed their partners' abusive behaviour beginning after the birth of a child, and two mentioned a diagnosis of postnatal depression. One of the participants mentioned that his partner had been on anti depressants for many years and that he felt they affected her behaviour.

History of trauma and abuse

Four of the participants were aware that their partners were in previously abusive relationships or had experienced trauma such as sexual abuse at a younger age, and felt that this strongly influenced their partners' behaviour towards them. Two of the participants had themselves been victims of previous domestic abuse from their partner.

Affairs

Three of the men also felt that a factor in the abuse was that their partner was having an affair, and the abusive behaviour was an attempt to force them out of the house so that they would be left with the children and home in their possession.

Although these general themes can be drawn from the accounts of participants, for many of the participants the context of the abuse was not clear cut, and they felt that only in retrospect were they able to identify factors that may have precipitated

the abusive behaviour; at the time of the abuse they were unable to understand why it was happening. One participant gave a common response to the question of what they felt precipitated the abuse:

"I couldn't figure out what was going on, it was a shock and then from that it just went generally downhill."

5.3 AWARENESS AND ACCEPTABILITY OF MALE VICTIMS

Male Victim Awareness Of Domestic Abuse

All case study participants were asked what their awareness and understanding of domestic abuse was at the time of their abusive relationship. Four of the thirteen participants said they had no awareness of what domestic abuse was at all, when they were in the relationship, while another six of the participants said they were aware of the term concept but always understood it to mean male on female violence, and therefore did not see themselves as a victim at the time:

"Domestic abuse to me was when a guy hits a woman physically. I was totally unaware of financial abuse or psychological abuse"

"None, zero, I never considered what it really was until after I left. At the time I knew it was bad but not what it was."

"No I didn't think it as that way. I didn't

think of it as something I needed help for, or what she was doing was wrong, it was just part of the way things were".

Only three of the participants were aware of domestic abuse and that they could be victims as men. One participant said that while he was aware that it was domestic abuse and that men could be victims, he still did not think it was a serious issue for him:

"I maybe had a little understanding but I thought I could deal with or control it. I understood men could be victims definitely, from experience of friends etc. I suppose the normal outlook is that men are the abusers but men can be too. I've always been aware of it but you just don't think it can happen to you".

Another participant was aware of domestic abuse through witnessing abuse between his parents, and had later encountered male victims through his occupation, but as a result of this experience felt that only women would be believed. The final participant was also aware he was a victim, but stated that:

"Well I knew the woman was usually listened to more than the man, I didn't feel like going to the police station."

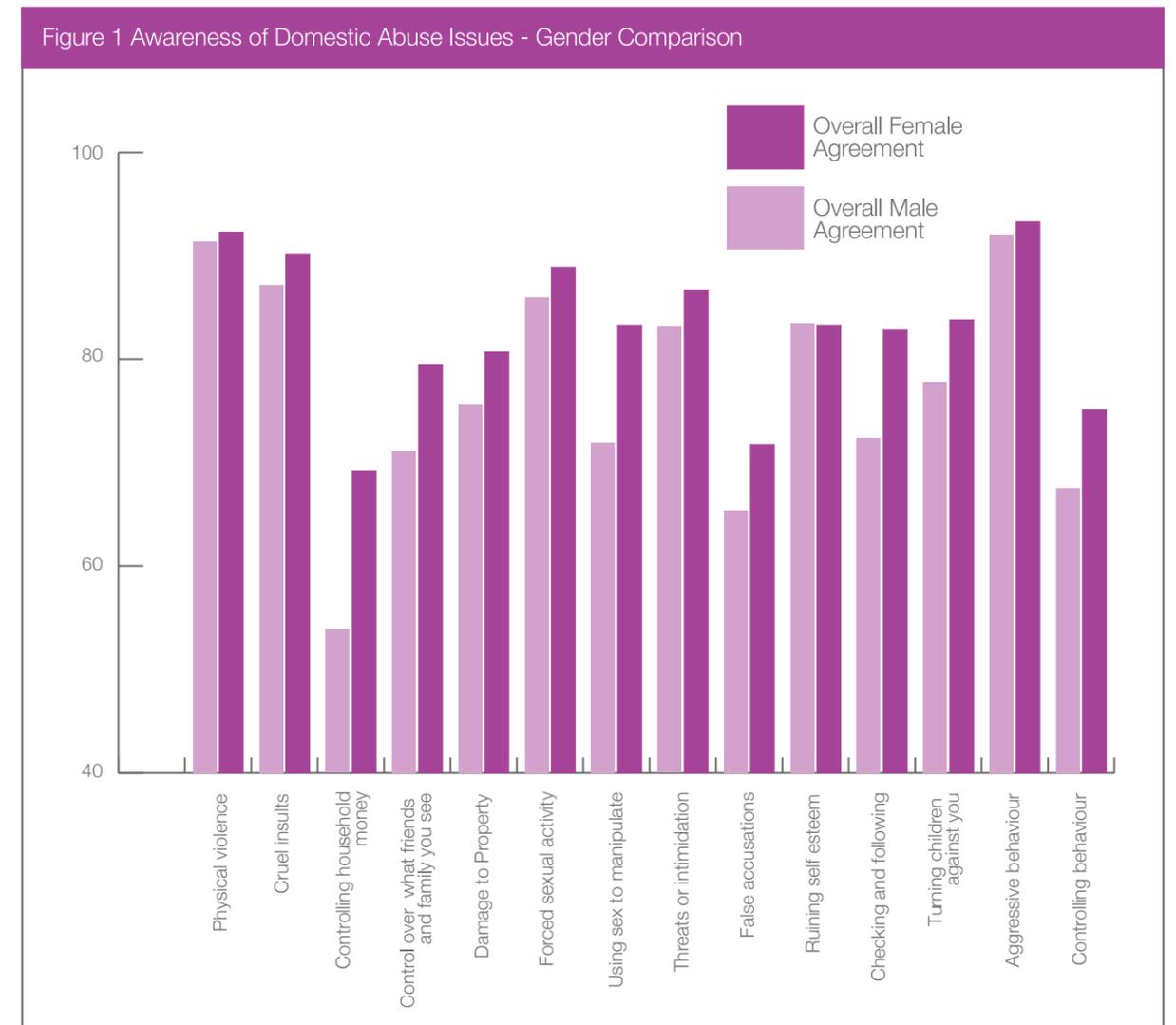
I thought it was me, that I wasn't satisfying her, and I realise now I never could have, she was after the material things, and if you haven't got it you haven't got it".

General Awareness Of Male Victims

A number of measures in the attitudes questionnaire assessed awareness of domestic abuse issues. Participants were asked the extent to which they agreed that a number of different behaviours constituted domestic abuse. Available responses were: "Strongly Disagree"; "Disagree"; "Neutral"; "Agree"; and "Strongly Agree". The table above summarises the percentages of men and women who agreed (who ticked

"Agree" or Strongly Agree") that each behaviour was domestic abuse. The majority of participants agreed that all of the behaviours constituted domestic abuse, however females showed more agreement for every behaviour with the exception of "ruining self esteem", which more males (83.5%) than females (83.3%) agreed was domestic abuse.

Figure 1 below summarises these responses, split by gender.



Awareness Of Other Domestic Abuse Issues

The attitudes questionnaire asked participants the extent to which they agreed with a number of other statements about domestic abuse which assessed awareness. Tables and summaries for the responses to each question are shown below. Male and female responses are broken down and presented for comparative means.

‘Domestic abuse can only be committed by an intimate (‘romantic’) partner’.

Domestic abuse can be perpetrated by a family member as well as an intimate partner. The majority of participants showed awareness of this by disagreeing with the above statement, with a total of 56.7% of participants disagreeing or strongly disagreeing. A higher percentage of males than females agreed, with 17.3% of males compared to 17.1% of females agreeing, and 6.6% of males strongly agreeing compared to 4.7% of females. 27.5% of the participants who identified as gay agreed and 9.8% strongly agreed, compared to 16.5% of heterosexual respondents who agreed and 4.4% who strongly agreed.

‘You must be living with your partner or family member in order for any abusive behaviour to be defined as domestic abuse’.

You do not have to be living with your partner or family member in order for

the abusive behaviour to be defined as domestic abuse. The majority of participants disagreed with the above statement, again showing awareness of this aspect of domestic abuse. 33.1% of the total sample strongly disagreed, and 35% disagreed, a total of 68.1% disagreeing. 11.7% were neutral, 14.9% agreed, and 5.2% strongly agreed.

A lower percentage of males disagreed than females – 27.2% strongly disagreed, 34.2% disagreed (a total of 61.4%) compared to 39.3% of females who strongly disagreed and 35.9% who disagreed (a total of 75.2%). 13.6% of males and 9.8% of females were neutral, 18.1% of males and 11.5% of females agreed, and 7% of males and 3.4% of females strongly agreed.

A lower percentage of gay participants disagreed than heterosexual participants. 29.4% strongly disagreed and 23.5% disagreed, a total of 52.9%, compared to 33.7% of heterosexual participants who strongly disagreed and 37.1% who disagreed a total of 70.8%.

‘If an ex-partner hits you it does not count as domestic abuse’.

Domestic abuse includes violence from an ex-partner. The majority of participants disagreed that an ex-partner hitting you did not constitute domestic abuse. 42.1% strongly disagreed and 31.9% disagreed, a total of 74%. 8% were neutral, 13.8% agreed and 4.2% strongly agreed.

A higher percentage of males agreed with this statement than females. 16.5% of males agreed and 5.3% strongly agreed, a total of 21.8%. 11.1% of females agreed and 3% strongly agreed, a total of 14.1%.

A higher percentage of gay respondents agreed with this statement than those identifying as heterosexual. 31.4% of gay respondents agreed and 9.8% strongly agreed, 41.2% in total, while 12% of heterosexual participants agreed and 2.9% strongly agreed, a total of 14.9%.

‘Domestic abuse is less common in same sex relationships’.

The majority of participants disagreed that domestic abuse was less common in same sex relationships. 27% of participants disagreed with this statement and 19.5% strongly disagreed, a total of 46.5%. 39.2% were neutral, 11.9% agreed and 2.3% strongly agreed (a total of 14.25 agreeing).

15.6% (11.9% agreed and 3.7% strongly agreeing) of males agreed with this statement and 12.9% of females (12% agreeing and .9% strongly agreeing), while 25.5% of gay respondents (21.6% agreed and 3.9% strongly agreed) compared to 12.6% of heterosexual participants (1.6% agreed and 2% strongly agreed) responded in agreement.

‘If a family member hits you it counts as domestic abuse’.

Physical violence from a family member also constitutes domestic abuse. The sample showed awareness of this, with 29.1% of the sample agreeing and 23.5% strongly agreeing, a total of 52.6%. 18.4% were neutral, 20.8% disagreed and 8.2% strongly disagreed.

A higher percentage of women agreed with the statement, 34.2% agreeing and 27.4% strongly agreeing, a total of 61.6%, than men, of whom 24.3% agreed and 19.8% strongly agreed, a total of 44.1%.

A higher percentage of heterosexual participants agreed with the statement, 31% agreeing and 24.1% strongly agreeing, a total of 54.1%, than those identifying as gay, of whom 19.6% agreed and 13.7% strongly agreed, a total of 33.3%.

5.4 ACCEPTABILITY OF MALES AS VICTIMS OF DOMESTIC ABUSE

The Attitudes Of Male Victims

The attitudes of the men in the case studies towards the abuse were complex, not least due to their lack of awareness that they were experiencing domestic abuse. Most of the men knew something was wrong, but many of the men blamed themselves initially for the situation and tried to find solutions to improve their relationship. Seven of the men stated that they blamed themselves for long periods in the relationship.

“At the time I blamed myself, the more I couldn’t cope with it the guilt set in, I didn’t have time to distance myself from it and think logically”.

“I kept convincing myself it was me, I was doing something wrong but I never knew what it was.”

This self blame was often down to the males’ perceived role as the provider and protector for the family:

“I was blaming myself so I was, because I thought it’s up to the husband to support his wife and children, and I felt like a complete failure.”

“I blamed myself often though, because finances were hard and she was saying I was never there for the kids, but I had to work 14 hours a day.”

Three of the men said that they attributed blame towards depression and discontent their partner was suffering, which they believed they could help solve and therefore improve the relationship

“In my mind the abuse was happening because she had some sort of breakdown, I was justifying it because of the drugs her doctor was giving her. I wasn’t blaming her. I was saying it was the drugs. By this stage I’d done a lot of research”.

“At the start I thought I could handle it and it was her being silly, I knew she was fragile

emotionally, and really silly in the way she thinks, her own worst enemy, and I thought I could help her through it and wise her up”.

Two of the men said they attributed the blame to their partner, but also to themselves for putting up with it. There was also a tendency not to want to see oneself as the victim, with four of the participants mentioning that they did not want to see themselves in this way.

“I’m not a victim; I’m the idiot who let it happen to me. I’m not willing to buy in to the victim mentality. That’s the game she played in order to abuse me”.

Thus there was a tendency not to view their partner’s behaviour as unacceptable, rather in most cases it was viewed as something that was solvable or something which was a failing of their own in some way.

Attitudes Towards Men As Victims

Attitudes towards male victims of domestic abuse were also assessed in the attitudes questionnaire. The following section breaks down the findings for each of these measures.

‘Domestic abuse against men hardly ever happens’.

The majority of participants disagreed that domestic abuse against men hardly ever happens. Of the overall sample 20.1% agreed and 3.8% strongly agreed

with the above statement, a total of 23.9%. 12.4% were neutral, 36.1% disagreed and 27.7% strongly disagreed (a total of 63.8% disagreeing).

A higher percentage of males than females agreed that domestic abuse against men hardly ever happened. 19.8% of men agreed and 6.6% strongly agreed, a total of 26.4%. 20.5% of females agreed and .9% strongly agreed, a total of 21.4%.

Agreement was also higher amongst gay respondents than heterosexual participants. 31.4% of gay respondents agreed and 9.8% strongly agreed, a total of 31.2%, while 18.7% of heterosexual participants agreed and 2.5% strongly agreed, a total of 21.2%

‘I would personally be more likely to believe a woman who said they were a victim of domestic abuse, than a man who said they were’.

35.8% (29.6% agreed, 6.3% strongly agreed) of the sample agreed that they would personally be more likely to believe a woman who said they were a victim of domestic abuse than a man, 34.2% of men (28.4% agreed, 5.8% strongly) compared to 37.6% of women (30.8% agreed and 6.8% strongly) agreed.

Of those who identified as gay in the sample 39.6% (29.4 agreed and 9.8% strongly) agreed compared to 35.4% of those who identified as heterosexual.

A higher percentage of older participants agreed with this statement, with 39.5% of those aged 45-54, 44.1% of those aged 55-64, 72.7% of those aged 65-74, and 50% of those aged 75 or over agreeing or strongly agreeing. This is in contrast to 39.6% of those aged 18-24, 26.5% of those aged 25-34, and 28.7% of those aged 35-44.

‘Domestic abuse against women is more serious than domestic abuse against men’.

The majority of participants did not agree that domestic abuse against women was more serious against women than against men. 35.2% of the total sample strongly disagreed with this statement, 27.75 disagreed, 9.2% were neutral, 18.9% agreed and 9% strongly agreed.

More females than men agreed that domestic abuse against women was more serious than domestic abuse against men. 21.4% of females agreed and 7.7% strongly agreed, a total of 29.1%, while 16.5% of male agreed and 10.3% strongly agreed, a total of 26.8%.

A higher percentage of gay respondents agreed with the statement than heterosexual participants – 17.6% of gay participants agreed and 13.7% strongly agreed, a total of 31.3%, compared to 18.2% of heterosexual participants agreed and 8.4% strongly agreed, a total of 26.6%.

'Domestic abuse is sometimes justified or acceptable'.

Agreement with the above statement was measured for domestic abuse against both men and women.

15.7% of participants agreed that domestic abuse against men was sometimes justified or acceptable, while 3.6% strongly agreed – a total of 19.3%. 6.7% were neutral, 22.9% disagreed and 51.2% strongly disagreed. More females than males believed that domestic abuse against men was sometimes justified or acceptable. 17.5% of females agreed and 3% strongly agreed, a total of 20.5%, while 14% of males agreed and 4.1% strongly agreed, a total of 18.1%. More gay participants agreed than heterosexual participants – 19.6% of gay participants agreed and 3.9% strongly agreed, a total of 23.5%, while 15.2% of heterosexual participants agreed and 3.4% strongly agreed, a total of 18.6%.

7.8% of participants agreed that domestic abuse against women was sometimes justified or acceptable, while 3.1% strongly agreed – a total of 10.9%. More females than males believed that domestic abuse against females was sometimes justified or acceptable. 9.8% of females agreed and 3% strongly agreed, a total of 12.8%, while 5.8% of males agreed and 3.3% strongly agreed, a total of 9.1%. More heterosexual participants agreed than gay participants – 8.4% of heterosexual participants agreed and 2.7% strongly agreed, a total of 11.1%, while 3.9% of gay participants agreed and

3.9% strongly agreed, a total of 7.8%.

'Male victims deserve the same level of support as female victims'.

The majority of participants agreed that male victims were deserving of the same levels of support as female victims. 33.8% agreed and 47.2% strongly agreed, a total of 81%. 6.7% were neutral, 4.8% disagreed, and 7.5% strongly disagreed.

A higher percentage of females agreed with this statement than men. 34.2% of females agreed and 50.4% strongly agreed, a total of 84.6%, while 33.3% of males agreed and 44% strongly agreed, a total of 77.3%.

A higher percentage of heterosexual participants agreed than those who identified as gay. 33.4% of heterosexual participants agreed and 48.4% strongly agreed, a total of 81.8%, compared to 37.3% of gay participants who agreed and 37.3% who strongly agreed, a total of 74.6%

'Men should be able to handle being a victim of domestic abuse better than women'.

The majority of participants disagreed with the statement that male domestic abuse victims should be able to handle it better than women. 27.9% of the overall sample disagreed and 41.5%, a total of 69.4%. 10.9% were neutral, 15.3% agreed and 4.4% strongly agreed.

A higher percentage of males than females felt that men should be able to handle being a victim better, with 18.1% agreeing and 6.6% strongly agreeing, a total of 24.7%, while 12.4% of women agreed and 2.1% strongly agreed, a total of 14.5%.

A higher percentage of gay men felt that males should handle domestic abuse better, with 37.3% agreeing and 9.8% strongly agreeing, a total of 47.1%, compared to 12% of heterosexual participants who agreed and 3.4% who strongly agreed, a total of 15.4%.

'Men who experience domestic abuse are weak or effeminate'.

Most of the participants disagreed that male victims were weak or effeminate. 28.7% disagreed and 49.9% strongly disagreed with the statement, a total of 77.6%. 8.6% were neutral, 12.2% agreed and 4.6% strongly agreed.

A higher percentage of men felt that male victims were weak or effeminate, 16.5% of male participants agreeing and 7% strongly agreeing, a total of 23.5%, compared to 7.7% of females who agreed and 2.1% who strongly agreed, a total of 9.8%.

A higher percentage of gay than heterosexual participants agreed with the statement, 23.5% of gay men agreeing and 11.8% strongly agreeing, a total of 35.3%, compared to 9.8% of heterosexual participants who agreed and 3.7% who strongly agreed, a total of 13.6%.

'Women who commit domestic abuse must be punished to the same degree as men who commit it'.

The majority of participants agreed that female perpetrators should be punished to the same degree as male perpetrators. 36.3% agreed and 36.7% strongly agreed, a total of 73%. 8.6% were neutral, 11.3% disagreed and 7.1% strongly disagreed.

38.7% of males agreed with the statement, and 36.2% strongly agreed, a total of 74.9%, while 33.8% of females agreed and 37.2% strongly agreed, a total of 71%. 31.4% of gay participants agreed and 41.2% strongly agreed, a total of 72.6%, while 37.3% of heterosexual participants agreed and 36.9% strongly agreed, a total of 74.2%.

'Domestic abuse inflicted by a man on another man, is less serious than domestic abuse inflicted by a man on a woman'.

The majority of the participants disagreed that male on male domestic abuse was less serious than male on female domestic abuse. 42.1% of the sample strongly disagreed, 28.3% disagreed, 12.4% were neutral, 15.3% agreed and 1.9% strongly agreed.

A higher percentage of males (21.3%) than females (12%) agreed with the statement, while a higher percentage of gay respondents (17.6%) agreed than those identifying as heterosexual (16.5%).

'Men who commit domestic abuse in a same sex relationship are less likely to be arrested than men who commit domestic abuse in a heterosexual relationship'.

There was more agreement than disagreement that male perpetrators in same-sex relationships were less likely to be arrested than male perpetrators in a heterosexual relationship, with a total of 46.5% agreeing – 10.9% strongly agreed and 35.6% agreed. 26.8% were neutral, 17.2% disagreed and 9.4% strongly disagreed.

48.1% of males (35.8% agreed and 12.3% strongly agreed) agreed with the statement compared to 44.9% of females (of whom 35.5% agreed and 9.4% strongly).

Nearly two thirds of gay respondents agreed that this was the case, 43.1% agreeing and 23.5% strongly agreeing, a total of 66.6%. In comparison, 43.3% of heterosexual participants agreed – 3.49% agreed and 8.4% strongly agreed.

'Women who commit domestic abuse are less likely to be arrested than men who commit domestic abuse'.

The majority of the total sample believed that women perpetrators were less likely to be arrested than male perpetrators of domestic abuse. 38.4% agreed with this statement and 24.1% strongly agreed – a total of 62.5% of all participants. 17% of participants were neutral, 14.3% disagreed, and 6.3% strongly disagreed.

69.5% of males (40.3 agreed and 29.2% strongly agreed) and 55.1% of females (36.3% agreed and 18.8% strongly agreed) were in agreement with the statement.

29.4% of gay respondents agreed with this statement and 49% strongly agreed – a total of 78.4%. 40% of heterosexual participants agreed and 20.4% strongly agreed – a total of 60.4%.

5.5 THE NATURE OF ABUSE EXPERIENCED BY MALE VICTIMS

Case study participants were asked in detail to describe the types of behaviour they experienced at the hands of their abusive partner or family member. The thirteen participants reported a range of forms of abuse, which are not always easy to categorise, but the behaviours mentioned are summarised in the table below. The following section details case study accounts of the nature of abuse in more detail.

The duration of abusive behaviour ranged from a maximum 5-7 years of infrequent incidents to 6 months of frequent and severe abuse. Case study interviews asked men to describe the nature of the abuse they experienced, including examples, types, worst incidents, frequency and duration. The vast majority of the participants in the case studies experienced psychological and emotional abuse early on in their relationships, in ways which undermined their confidence or which established control was in the hands of

the abuser. All participants experienced a pattern of power and control at the hands of their abuser; however the methods used to maintain this control differed.

Physical Abuse

Ten of the thirteen participants reported experiencing physical abuse. Of those ten, six participants experienced physical abuse once or twice a month over the worst period of the relationship, three participants experienced physical abuse once or twice during the worst incidents, and one participant experienced severe and regular abuse at the hands of his female intimate partner.

The use of weapons was the form of physical abuse most often mentioned; nine participants stated that their partners had used weapons to attack them. These weapons varied from cutlery and remote controls to knives and for one participant, a gun. As illustrated by the next quote, weapons close at hand were often used during an argument:

"From early on from her frustration when we discussed anything, if she had something like a ladle in her hand, she would crack me with it. This would happen when she was sober. When you tried to talk to her about something, and the arguments heated up, she would lift a knife, there were about 5 times I had to lock myself into a room, because I know she would have stabbed me."

Six of the participants reported that their partner lifted a knife and attacked them with it, while three of these men found this was a regular occurrence.

"There were incidents where I'd be in the bathroom brushing my teeth, there was a shelf full of her perfumes and shampoo, it would all get threw at me, or in the living room the remote control threw at my head. I had a heavy clay coffee cup and she'd smash that off my head."

Other forms of physical attacks often happened in tandem, such as punching, kicking and pushing, participants reported that this would become more common as a technique of control when their partner realised they would not strike back. The men reported often being attacked in their sleep or from behind, in situations where they couldn't block the attack or defend themselves:

"There was one time in particular in 2008 we were out for the day and stopped to get food. She got a text from her sister and she realised she'd forgot her birthday. Ten or fifteen minutes later we were approaching a bridge around a corner and I said to her "what's wrong with you" in a jokey way and she didn't like that, and I saw her out of the corner of my eye reach her finger over and gouge into my eye violently. The kids started to cry and then she threw her burger all over me, and started screaming and shouting. All this because she was upset over forgetting her sister's birthday. I never reported that one."

Many of the men reported physical violence occurring when their partner was confronted about an issue in their relationship. One participant explains a harrowing case of violence occurring when he confronted his partner about her drug use after their children were born:

"We've got a wee baby and we've got two children now, I tried to tell her. She told me I was treating her like a child and I said I'm not, but you've got two children, you can't do what you want anymore, you can't sit and do drugs in front of them, or even be responsible for children if you're on drugs. Well that led to her attacking me. She knocked three of my teeth out, punched me in the face, I wouldn't even defend myself; the third punch broke my teeth. I went down to the ground and covered my head and she started kicking me in the head, and then she just stopped and left the house."

The same participant experienced a number of severe violent attacks. Another incident occurred when he threatened to phone the police after his partner let a child deliver drugs for her:

"I went to phone the police and she grabbed the phone off me and smashed it against the wall and she hit me in front of her friends again – she grabbed me by the testicles and squeezed them like mad until I was nearly sick, and then she gave me a big smack in the head. I was humiliated and I went into the bathroom."

This victim also experienced unprovoked

attacks of serious violence from his partner:

"One time in the kitchen, I don't know what came over her, she turned round and gave me a massive dig on the side of the head, we weren't rowing or anything. I fell to the ground and I must have passed out. When I woke up she was standing on my hand pulling the only finger on my right hand that works, pulling it back trying to break it. She didn't break it but it had swollen up massive. I was screaming like a child hoping the neighbours would hear me, because I wouldn't hit her back and I didn't know what else to do and she was going "Listen to the wee battered husband". Then she booted me on the side of my back and the side of my face and I went out again. I woke up in a pool of blood with my nose busted and my ear badly swollen, my hand badly swollen and I couldn't move with the pain in my back. She brought the two oldest boys in and said "Look at your dad, look at him!" You want to have seen the kids' faces, honest to God. They were just... there was hollowness in their eyes, I don't know what she was expecting but it was cruel to me what she was doing".

Another participant said that his partner lifted and threatened him with knives on many occasions, but that he was never stabbed, however the prospect of it was always in the background.

PSYCHOLOGICAL ABUSE

Every one of the participants reported experiencing a number of forms of

psychological abuse, from controlling and manipulative behaviour, verbal aggression, disruption of sleep and false allegations.

Controlling And Manipulative Behaviour

All of the participants felt that they were under the control of their abusive partner, as a result of their controlling behaviour. Several of the participants described how they felt every aspect of their lives were being controlled, from their social life, appearance, to what family or friends they were able to see:

"She was very controlling... you can't wear that, you can't cut your hair that way, she was always like that. My friends would always say to me from I got married I changed, and when I look back now, maybe I was too soft throughout the marriage. Because when I look back now I was controlled, there's a bit of give and take in all relationships, but..."

"She controlled my social life, at the time both of us were very sociable people, but she didn't like me going to see friends, it was less of a wrench to get out the door than when seeing family, but she didn't like it."

Threats And Intimidation

Six participants reported a number of forms of threats and intimidation as a form of maintaining power and control. These ranged from threats of attacks in their sleep, to threats that they would harm

the children or make false allegations to the police or social services about their behaviour. Three participants also received threatening phone calls and texts beyond the end of the relationship, threatening violence from their ex partners family members or new partners.

One participant's abusive wife was a police officer, who threatened him that if he contacted the police, they would be on her side, and actively encouraged him to ring them in a threatening manner.

Disruption Of Sleep

Four of the participants reported that their partner or family member regularly disrupted their sleep during the period of abuse.

"When I was sleeping she'd come in and jab the finger into my ribs. I moved into another bedroom and she'd come in and do it there. Or a cup of cold water over me"

Another participant recounted how this happened to him:

"She would do things like not let me sleep, turning on lights. I had moved into another bedroom downstairs. She used to come in and flick the light on, open bedside cabinets, bang drawers. It was just purely to disturb my sleep and not let me have my own space. That happened many, many times".

Table 3: Types of abuse experienced by case study participants		
Types Of Abuse	Subcategory Of Abuse	No. Of Participants
Physical Abuse		10
	Punching / Kicking	6
	Scratching / Gouging	4
	Pushing / Shoving	3
	Biting	2
	Use Of Weapons To Throw / Hit With	9
	Damage To Property	2
Psychological		13
	Control Over Behaviour	3
	Forced Isolation From Family And Friends	4
	Manipulation	5
	Threats And Intimidation	6
	Cehcking / Following	2
	Disruption Of Sleep	4
	False Allegations / False Use Of Non Molestation Orders	5
Emotional		13
	Cruel Insults	10
	Turning Children Against	8
	Testing And Humiliation	5
	Emotional Blackmail	5
Financial		4
	Control Of Finances	2
	Abuse Of Finances	3
Sexual		4
	Sexual Violence	2
	Use Of Sex To Manipulate	2

Use Of Children

The use of children as a tool of abuse was common and eight of the ten participants who had a child with their partner experienced this. Men reported being undermined in front of their children by their partner, as one participant recalls:

“When the boy started school I would try to get him ready and to bed and she would say the exact opposite, “Stay up as long as you like”, “Do what you want to do, he’s not your dad” and that would cause me a lot of pain, and I seen the child too feel a wee bit wick, you could see it in his face it was mixing him up bad.”

Another participant reported how his child was placed in the middle of arguments by his partner:

“My wife used the children too, put it to me that the boy was not mine, and that was put to me in front of my youngest boy. I’ll never forget the way he looked at me.”

Men in the case studies reported that this form of abuse also occurred towards the end of the relationship and when the relationship was over and custody issues were going on. One participant, whose children had regularly witnessed his wife’s verbal and physical abuse towards their dad, were threatened by their mother not to report her behaviour to social services:

“Prior to the first time the social worker

came out, she sat them down and said if you tell them anything bad about me, you’ve got to be careful because you might go to a boys home. The boys told me that a week later in the car. Consequently they didn’t say anything to the social worker.”

Beyond the end of the relationship participants also reported being blocked access to visitation with their children even when court ordered, and participants also reported that their children were bribed by their mother not to stay

False Allegations

Five of the participants experienced false allegations of abuse as well as of abuse towards their children, some of which they later disproved. These participants felt this was a tactic to prevent them access to children, to remove them from the home, or as retribution for their own reports of abuse to the police. The false allegations usually occurred when the relationship was nearing its end, or their abuser was suspicious that they were recording incidents with the police or considering doing so.

5.6 EFFECTS OF THE ABUSE ON MALE VICTIMS

Men reported a range of serious effects of the abusive relationship upon their health, work life, emotional well being, relationships with other family members and friends, and on their children.

Effects On Health And Physical Injuries

The majority of participants who experienced physical abuse had relatively minor injuries such as bruising, small cuts and some scarring from injuries which required stitches.

One participant who experienced regular physical violence aimed directly at his back, with which he had recurring problems, has permanent physical damage as a result of the abuse. His mobility is now permanently limited:

"I'm constantly in pain with my back, I can't get anything to ease it, I'm on morphine medication."

Other participants experienced declines in physical health as a result of the stress induced by emotional and psychological abuse. One participant was diagnosed with fibromyalgia and believes it was a result of the abuse he received from his mother, as well as the stress caused by financial problems to which she had contributed. Three other participants went to their GP for stress and health issues such as weight loss while they were in the relationship.

Effects On Emotional And Mental Well Being

All participants reported negative emotional and mental effects of the abuse. Most participants mentioned feeling permanently mentally and physically drained, depressed and unable to think of anything else

other than the situation they were in.

"Emotionally and physically I was drained, I was crying a lot, I kept breaking into tears, drinking and eating more. Through the last year I started smoking again, not eating and then eating crap. I was getting headaches, having to go home from work".

Suicide ideation was mentioned by three participants, two of whom said that only the thought of their children kept them going. A loss of self esteem was very common:

"My self esteem was so low, my mind was always occupied, I couldn't make clear decisions because everything was clouded around me. It wasn't until the relationship ended that a big cloud lifted off me."

Men reported a strong sense of self blame and failure, that they had somehow allowed their relationship to reach an abusive stage, and could no longer be the "fixer":

"Totally annihilated is the only way I can put it. The man I was is gone."

For the participant who experienced domestic abuse at the hands of his mother, a very specific set of effects applied due to the relationship between a parent and child and the sense of duty he felt:

"At this time I was 29, I was always undermined by her but I was brought up to help my parents, but this was taken to a place where it wasn't meant to go..."

not a bit of wonder that the self blame and guilt kicked in. It sounds crazy but I still have this guilt and I came close to committing suicide twice. I was brought up to respect my parents and look after them".

Another participant explained the long term emotional effects the abuse, as well as lack of access to his children had on him:

"Emotionally and mentally it has had a terrible effect on me. I still feel like I'm being treated like I was the perpetrator not the victim. I constantly have nightmares, and I go 3 days without sleep then just conk out wherever I am. I'm constantly worried sick about the welfare of my children in her house, and I still have nightmares about the things she's done to me. A lot of it is too horrible to talk about. I used to say to her when she was beating me "you know you're going to paralyse me completely and she'd say "duh..." she knew this was a possibility."

Most of the participants were reticent about starting another relationship as a result of the abuse and said they had serious trust issues as a result of their experience. One participant, who had been out of his violent relationship for five years at the time of the case study interview, explained the effect it had had on him:

"I haven't been in a relationship since, in the early days it was because I was worried it would be the same. I'd go into a relationship more eyes wide open and know that if the same

things happen get out right away."

Another participant explained that this was also a barrier for them in terms of moving on:

"At the minute, I'd think I wish I had somebody at times, but I think there'd be a thing about trust. Even the smallest lie, I think I'd just sack it, and it would probably end up ruining the relationship. I don't think I'd be as quick to let someone in."

Control, Intimidation And Fear

Most of the men felt under the control of their abuser for fear of the repercussions of not obeying them, however they did not usually recognise physical danger in spite of attacks with knives and weapons, and attacks in their sleep. Most participants lived in dread of the next incident, but their main sources of fear were of harm coming to their children, or false allegations of abuse.

"I felt intimidated and scared, of her, and the police taking her side, it was a case of me saying you won't force me away from the children. If you bring a child into the world, you look after it."

"I was scared that she would take it out on the kids, I was worried that they were going to get lashed on. My own safety didn't bother me, it was more the kids I was worried about."

Effects On Relationships

Many of the participants reported negative effects on their relationships with family and friends as a result of the abuse, particularly when their abuser kept them away from other people.

As one victim explained:

"I was isolated and it wasn't until a month or so after the relationship ended that my friends started coming back, they stayed away for a period of a month or so to make sure he was gone."

However several of the participants lost friends or family members permanently as a result of the abuse, which they believe was due to an inability to accept what had happened to them.

"I've lost my whole family apart from my mum and dad – the rest of them are sitting saying "if that was happening why didn't he hit her?" And this kind of thing, and they just don't believe this kind of thing goes on, they had no understanding of what I felt like and why I put up with it."

Effects On Work Life

Living with the abuse had negative effects on most of the participants work lives. Most participants mentioned an inability to concentrate or a lack of sleep creating problems in work. One participant who was job hunting at the time, recounted

how his lack of confidence as a result of psychological and emotional abuse affected his ability to get a job:

"It knocked my confidence for 6, and going into a room to sell myself to employers in interviews, I'd no confidence, I'd sit and shake and couldn't answer."

Effects On Children

All participants who had children reported that the abuse had a negative effect on them, despite their best efforts to protect the children. This was often exacerbated by the fact that their partner tended to win custody of the children, and the fathers were left with severe worry about their children's welfare.

As one participant explained:

"It had a negative effect on the children, it knocked their confidence. They were around the abuse and it upset them very much, I had to get them out of the house at times. There was a time she kicked off when I was out the back playing with the children, she came out and went ballistic, effing and blinding, the kids cowered in the corner, and I stood in front of them to protect them as best I could. She says "get away they're my effing children, not yours".

Another participant recounted the negative impact of the abuse on his children:

"It had a major effect on our son. He wanted to live with me from he was 3 or 4, he's 13 now and stays with me all the time I'm home. He has seen her in full flight, he would be very apprehensive about staying with her, his elder brother [adopted son] ran away from home as a result of her behaviour, and he had a period of depression as a result of it".

The effect of the domestic abuse on the children was one of the primary concerns of men of the men in the case studies:

"I don't know if I've even looked at the emotional damage to myself yet, I'm more focused on the children and removing them from that situation. The kids are completely devastated, my daughter is frightened and scared, she is 6 now and tries to talk to mummy to stop her doing it, but of course she can't, and she shouldn't have to. She's manipulated on a daily basis; "daddy doesn't love you", she's had 3 months to do this. My son, he is bullied and put on the side, he doesn't want to be there, he would be with me in a second if the courts allowed it".

5.7 MEN'S RESPONSE TO DOMESTIC ABUSE AND COPING BEHAVIOURS

Avoidance

A consistent form of reaction to domestic abuse in the 13 case studies was avoidance. Men found that confronting

the situation always made it worse, and so quickly the male victim learns to find ways to avoid situations where abusive behaviour will occur.

"9 times out of 10 when there was an argument I'd be the one who left to get out of the situation. I wouldn't argue with her, if she tried I just walked out of the room".

"I tried to get out of the way as fast as possible, I tried to make sure the kids didn't see it, but often they did."

"I was always aware of where she was in the house and would try to be as far away from her as possible."

Going off for a drive or locking themselves in a safe room was commonly reported. It was also important to the men to keep the children out of it. As one participant explained:

"It became for a couple of years me just trying to patch holes, avoid confrontation and keep the children out of it, on a daily and sometimes hourly basis, there was not a bigger relief than when you got them out the door to go swimming or to the beach for an hour, so that they were removed from that. That's how I coped, by getting the kids and myself out of the way."

Problem Solving And Appeasement

Another very common male reaction was to problem solve in order to stem

the abuse. Men tended to feel if they did everything their partner asked, solved any problems in the household or tried to improve things for them, that the abuse would cease. One participant explained how due to his partners discontent and subsequent aggression, he supported her through two degrees, and then left his job to become a stay at home husband so his partner could go to work, but the abuse continued. Other participants attempted to persuade their partner to enter couple counselling or seek help for their anger or depression. Another participant recounts what it was like to try and fix everything throughout the relationship:

"I was running around trying to make it okay from the get go. I would get emotional blackmail all the time to do things for her or face the consequences, an excuse for a row and a big crisis, and her threatening to phone Women's Aid and the police, I'm the biggest bastard ever if I don't go and get her a carton of milk."

Many of the participants reported falling into a pattern of appeasing their partner as much as they could, to avoid abusive confrontations, and felt that they spent most of their time walking on egg shells. One participant explained how eventually he gave in to everything:

"Because it was easier just to agree to stop a row, to stop the sulkiness and manipulating."

Not Hitting Back

Most participants stressed that they did not believe in violence in general and especially hitting females, therefore they did not strike back. Although four of the men admitted that at times they would lose temper and shout back when verbally abused, aggressive behaviour as a reaction was very rare. Most men would say that during physical attacks they would try to minimise injury and leave the situation:

"I covered my head or got up and walked out of the room. I got used to it."

One participant explained his feelings on reacting to the abuse in the following way:

"If I hit a woman I'm not much of a man. If I don't hit a woman who is abusing me more than any man would be allowed away with, I'm also not much of a man. The minute you don't react you're on a downward spiral where they keep adding to it."

Many of the men said they would not hit back because they believed they would be the ones getting in trouble for defending themselves, and some of the believed this was something their partner wanted, so that they could phone the police on them, and reported regular goading from their partner to strike back:

"I would sometimes put my hands up to block her, not to hit her because I knew if I did I'd be done"

"I was always brought up never to hit a woman, you just don't do it"

"Plenty of times she would spur me on to hit her, she'd be in my face saying "do it do it" and prodding and poking me. I never did, I knew what would happen if I did".

Mutual Abuse

Although the majority of the men did not retaliate, 3 of the 13 participants did react to what they felt was provocation over the course of months and years. These three men stated that these incidents were a response to attacks or serious strain from their partner:

"Over the course of the 32 years I reckon I hit her 3 times and that was to defend myself from her."

Coping Behaviours

Three of the participants mentioned exercise as a coping behaviour. The majority of the participants did not talk the situation through with anyone around them and therefore had to find alternative ways to release their tension. Two of the men mentioned using alcohol to self medicate but in general this was not a major issue. Self harm was a coping method used by three men, who burned or cut themselves in order to release some of their anxiety over the abuse.

"I started to burn myself. When things were

really bad and she'd really humiliated or undermined me, or attacked me, burning myself focused me on something else. I didn't know what else to do. The pain gave me a couple of minutes taking me away from what was going on in my life, the worry about my kids and trying to work out why she was doing it."

5.8 MALE REPORTING OF DOMESTIC ABUSE AND RESPONSE

Case study participants were asked about their reporting behaviour. Most of the men did not talk to anyone about the abuse and only reported it when they had no other choice due to being questioned on physical injuries, or until it had become so serious that they broke down to someone about it.

Hiding Incidents

Hiding behaviour was common amongst most of the men.

"Anything I couldn't hide...black eyes and bruised face and black ears, my back was black and blue but nobody seen that. I kept saying I had fell but I don't think they believed me."

One participant explained how his partner forced him into hiding the abuse and how she benefitted from the injuries he sustained:

"I didn't know what to tell anybody because I couldn't hide the teeth missing and my

eyes were really bad. So she came up with the idea of what to say to the police – I said what am I going to say to my mummy and daddy and everybody, because they're going to ask. She said just say you got jumped, and I said well they're going to say why didn't you phone the police? So she phoned the police and they came out, and I am ashamed to say I went along with it, but I didn't know what else to do. I said I was attacked by a crowd of guys.

But then she goes and phones the solicitor, and comes up with the idea of putting in for compensation for criminal injuries, and that stage I still didn't know what to do, I went along with it, I was afraid of anybody knowing the truth. The claim was successful and we got two and a half thousand pounds. It went into her bank account and I didn't see a penny of it, I don't know what happened to it, she didn't buy any furniture or anything."

Telling Family And Friends

Those closest to the victim were often the first to find out about the domestic abuse, and reactions from family and friends varied greatly. Some family and friends encouraged them to seek help, but not all were sympathetic. One victim reports how his own and his abusive partners family knew about the physical abuse, and how their reactions were split:

"Her whole family knew, and some laughed and joked and embarrassed me about it, and some were disgusted. When we

broke up her family were split. I've lost my own family apart from my mum and dad – the rest of them are sitting saying "if that was happening why didn't he hit her?" And this kind of thing, and they just don't believe this kind of thing goes on"

Failure of those closest to the victim to accept what was happening had a very inhibiting effect on the future reporting behaviour of the victims in question. Some men reported that friends would at first laugh in response to their disclosure of the abuse, which put them off disclosing further information. However once friends knew the full story they tended to be sympathetic and suggest that they get help.

Reporting The Domestic Abuse

Only five of the participants reported the domestic abuse to the police. One participant only did so after being threatened with a gun, and two of the other participants only reported to the police once the abuse had reached a very serious stage. Three of the participants told their GP, when they visited for stress and depression. One other participant explained his problems to the GP who suggested that domestic abuse was the issue.

The other participants did not report the abuse and only encountered service agencies as a result of false allegations against them, or when dealing with child custody in the courts.

General Attitudes To Reporting Domestic Abuse

Attitudes questionnaire participants were also asked if they were a victim of domestic abuse, did they think they would seek help. A number of options were offered, and participants could tick as many as applied. Table 4 (on page 61) summarises the percentages of participants who selected each option. 21.8% of men said they would not seek help if they were a victim, compared to only 7.3% of women. A higher percentage of women said they would contact every

agency with the exception of the Men's Advisory Project and social services.

22.6% of those who considered themselves to have a mental or physical disability would not seek help compared to 13.6% of those who did not. A higher percentage of those identifying as gay, bi-sexual or lesbian said they would not seek help than those who identified as heterosexual – 17.4% compared to 14.3%

Females were also more likely than men to say they would tell a friend (33.3% compared to 29.6%), a family member

Table 4: If you were a victim of domestic abuse, do you think you would seek help?

	Overall (%)	Males (%)	Females (%)	Gay Men(%)	Heterosexual (%)
No	14.8	21.8	7.3	17.6	14.3
I'd Tell A Friend	31.4	29.6	33.3	41.2	30.7
I'd Tell A Family Member	26.4	18.9	34.2	15.7	28.5
I'd Contact The Police	19.9	15.2	24.8	17.6	20.6
I'd Tell My GP ¹	11.5	9.1	14.1	3.9	12.8
I'd Contact Women's Aid	15.3	3.3	27.8	3.9	17
I'd Contact My Church	5.9	3.7	8.1	0	6.6
I'd Contact A Counsellor Or Psychological Service	9.2	8.6	9.8	13.7	8.6
I'd Contact Social Services	2.9	3.3	2.6	0	2.9
I'd Contact MAP ²	4.4	7.8	.9	13.7	3.4
I'd Contact A LGBT ³ Organisation	2.5	4.5	.4	19.6	.5
I'm Not Sure What I Would Do	34.2	40.7	27.4	19.6	36.6
I'd Tell A Youth Worker	.8	.4	1.3	0	1

1 General Practitioner (GP) 2 Men's Advisory Project (MAP) 3 Lesbian, Gay, Bisexual and Transgender (LGBT)

(34.2% compared to 18.9%), the police (24.8% compared to 15.2%), their GP (14.1% compared to 9.1%), contact their church (8.1% compared to 3.7%), a counsellor or psychological service (9.8% compared to 8.6%), a youth worker (1.3% compared to .4%)

Men were slightly more likely to tell the social services (3.3% compared to 2.6%) or an LGBT (Lesbian, Gay, Bi-sexual and Transgender) organisation (4.5% compared to .4%) than women. 40.7% of men said they were not sure what they would do if they were a victim of domestic abuse, compared to 27.4% of females.

5.9 BARRIERS FOR MEN REPORTING ABUSE

Male victims reported a number of barriers to reporting the domestic abuse, which they gave as reasons for not reporting or for taking as long as they did to seek help.

Lack Of Recognition Of Abuse

Most participants stated that at the time of the domestic abuse, they were not aware that it was a serious problem. Many of the participants underplayed the seriousness of the abuse and felt that it would sort itself, or that they were strong enough to deal with it themselves. They also underplayed their own physical risk, even those who had been threatened or attacked with knives, or attacked in their sleep.

As one participant explained, he had considered seeking help;

“But you get a problem resolved and you move on. You accept something, it’s hard to change people.”

Embarrassment And Stigma

The majority of participants reported embarrassment and stigma as being a barrier to reporting domestic abuse:

“There was a huge resilience from me to call the police, I’m not sure why now. I think I was embarrassed, felt humiliated that this was going on and I felt quite alone with the responsibility”

Some participants even felt isolated from their family and friends due to embarrassment and stigma:

“It’s not something you talked about, you didn’t go to your friends and say she hit me ten times today.”

Lack Of Awareness Of Services

For some of the participants the key issue was a lack of awareness of where to go for help. As one participant stated:

“If I was more aware and educated about domestic violence I would have been to counselling sooner”.

Most participants said that they were

aware of Women’s Aid but did not know of any similar services for male victims.

Perceived Lack Of Support

Several men did not report the abuse because they did not feel that services would believe them, or recognise the seriousness of the situation they were in.

Some men experienced hostile reactions early on, and were reluctant to seek further help as the abuse heightened.

Children

Children were a major issue in terms of barriers to reporting for all the men who had children with their partner. Some felt that due to a perceived balance in favour of women in family law, they might be denied contact to their children if they reported the abuse. Others felt that they should not break up the family home at all costs, and other men felt that they needed to protect the children and could not be sure of this if they reported the abuse and were denied contact with them.

“It was down to the kids, I love the two of them to bits, and would she stop me from seeing them? Would they get the backlash instead of me? I’d rather put up with it and at least I get to see them. I had to just take it on the chin”.

“I’d never been in an abusive relationship before. This relationship was different

because [my child] was involved. I thought, see if I leave this now, I’ll never get to see him again, she’ll have me over a barrel.”

Perceived Obstacles To Seeking Help In General Population

Participants in the attitudes questionnaire were also asked if any issues would present an obstacle to them reporting the abuse. Table 5 summarises their responses.

As shown in Table 5, a higher percentage of men in the general population felt that embarrassment, fear of not being believed, a desire to protect the perpetrator, being unclear of where to go for help, a concern over confidentiality, a fear of losing their children or home, and a fear of prejudice, would present barriers to them reporting the domestic abuse.

A higher percentage of the sample who identified as gay also responded that each of these issues would present a barrier to seeking help, with the exception of a desire to protect the perpetrator and a fear of losing children or their home, compared to heterosexual participants.

5.10 SERVICE PROVISION FOR MALE VICTIMS OF DOMESTIC ABUSE

This section reviews current service provision in Northern Ireland based on interviews with representatives from key agencies as well as accounts from male

victims in case studies of their experience of services and their needs and opinions. The review is broken into eight sections: police response, legal services, housing, The Men's Advisory Project, specialist floating support, Social Services, Victim Support, and the Domestic Violence helpline.

5.10.1 POLICE RESPONSE

Male Experience

Often the first service male victims encountered was the police when they responded to domestic incident call outs, or when a victim rang the police exchange

and asked for someone to speak with. Male case study participants reported a mixed response from police. While often responses were sympathetic, a common perception was that they were dependent on the attitude of the officer who arrived at the scene. Some participants reported very sympathetic and positive responses from the police with three of the participants reporting that the police did as much as they could for them.

However five participants reported contemptuous or disbelieving responses from the police which often reinforced fears they had about reporting to them. One participant explained that

his perception of the police reaction the first time they were called out was one of disrespect and lack of belief:

"I remember the policeman said to me full of contempt, "What age are you? That's your mother in there". And I thought, "The police don't even believe me". And so I knew just to shut up. Yet again I was on my own".

The same participant reported that when the police were called out for a second time they were much more sympathetic after he broke down in tears in front of them, however he was very reluctant to contact them again after the first experience.

Other participants described hostility from the response officer they dealt with who they felt automatically treated their partner as the victim, and were reluctant to take note of their injuries.

Another participant said that he tried to make statements as a victim at various different police stations several times, but that the police would not take any off him. He felt that his domestic violence officer had not followed proper protocol and therefore was trying to cover his mistakes by delaying action. The participant eventually got a solicitor to contact the domestic violence officer and went to the ombudsman over the case. He reported being verbally abused by police officers at specific stations when he went to make statements, and as a result he was afraid of the police and did not trust them. Negative interactions with the police

tended to make the male victims distrust legal services and dissuaded them from taking reporting of the abuse further.

According to the Police Service Northern Ireland (PSNI) the process for dealing with domestic incidents is exactly the same of regardless of gender. However domestic abuse officers are not always the officers who are first at the scene, because on average the PSNI get called to incidents every 22 minutes, the majority of the time it is a response officer who is first at the scene, therefore there may be a varying level of response. In order to ensure consistency police training on domestic abuse is provided for new recruits involving training on response, legislation, signposting and correct paper work. This training is offered in house by PSNI trainers, while Women's Aid have in the past offered their perspective.

Training is updated based on local needs and issues identified in a police district, and updates to police are sent through to all districts and partner agencies. The PSNI recognise that consistency can be difficult to ensure, but state that all officers are trained to the same standards and individuals then implement them. Their media campaigns take a gender neutral approach and their policy focuses on offering an equal service for all victims.

The PSNI now use DASH (Domestic Abuse, Stalking and Harassment) forms at every domestic incident which can be useful where the abuse is emotional

Table 5: Perceived barriers to seeking help if a victim of domestic abuse amongst attitudes questionnaire sample

	Overall (%)	Males (%)	Females (%)	Gay (%)	Heterosexual (%)
Embarrassment	57.2	63.4	50.9	64.7	57.2
Fear Of Not Being Believed	46.8	53.9	39.3	64.7	45
Desire To Protect Perpetrator	31.4	33.3	29.5	31.4	31.7
Unclear Where To Go	25.4	37.4	12.8	43.1	23.3
Concern Over Confidentiality	25.8	30.9	20.5	47.1	23.1
Fear Of Losing Children Or Home	26.8	27.2	27.8	17	3.9
Fear Of Prejudice	26.4	39.5	12.8	58.8	21.9
No Issues	12.6	9.5	15.8	7.8	13.5

or psychological and thus where there is no physical evidence. The PSNI recognise that not all victims will want to pursue a prosecution and where possible they will refer to agencies who can help the individual resolve or leave the abusive situation.

The PSNI stated the need for an agency on par with Women's Aid with offices across Northern Ireland, to which they could refer male victims. They feel this might improve male reporting and reduce withdrawal if they have an agency they can access regionally who can offer advocacy. They also stated that because domestic abuse officers are increasingly taking an investigative role they have less time to provide follow up support for victims, and thus they rely on partner agencies to provide the encouragement and motivation for people to continue through the criminal justice process.

5.10.2 LEGAL SERVICES

Male victims in the case studies said that they had a lack of confidence in legal services before they reported incidents, in terms of how seriously they would take their case and whether or not their outcome would be favourable. Unfortunately in some cases, men reported that these fears were justified by the experiences they did have with legal services once the case went this far.

Solicitors

Many men in case studies went to see a solicitor as a first port of call around the domestic abuse. They reported that they did so to see where they stood legally and to find out their options, but they were often dissuaded from taking further action. As one participant recalled:

"A solicitor had advised me not to apply for a non-molestation order, because I'd be asking for a judge to make a judgement that I was at threat from a woman and to remove her from her home and children, and that no judge is going to make that decision"

Legal Orders

Many of the participants complained about the ease with which their partner took legal orders such as non-molestation orders and occupation orders out against them. Some of these participants reported that the non molestation orders were later removed due to the evidence that they were the victim, however they were fearful of the ease at which their partner took them out.

Most of these men felt that the legal orders were not explained properly to them, and therefore they breached them on a number of occasions by sending birthday cards to their children or being in a shop at the same time as their partner. Subsequently they reported having the police or their partners' solicitors contact them about breaches they did not know they were making.

The Public Prosecution Service

The Public Prosecution (PPS) service deal with criminal cases sent by the police and other departmental organisations. Domestic violence and abuse cases are identified where this is marked as the motivation by the police officer through a tick box on the case files. They apply an evidential test which involves consideration of information can that be used in court sufficient to provide a reasonable prospect of prosecution. A public interest test is then applied, only once the evidential test is passed.

The evidence test includes consideration of whether or not there is

1. An identifiable offender
2. Credible and admissible evidence which can be adduced
3. A reasonable chance of convictions

The standard of proof is very high, and must be beyond reasonable doubt, whereas in a civil court the decision is based on a balance of probabilities.

The PPS recognise that domestic violence and abuse cases mostly happen in private and often there is one person's word against another, and therefore they try to consider corroborating evidence such as a history of incidents, evidence of injuries and so on. As a

result they are reliant on the evidence collected by the police at the scene.

They have ethical guidelines which state that the PPS must not discriminate in decisions on the basis of gender or other demographics, and have a domestic violence specialist in each region to ensure consistency in decisions and to help with training and queries.

The PPS state that a key challenge for them in dealing with domestic violence and abuse cases is the high rate of withdrawal of the witness, which is around 60% of cases, and means that it is more difficult to take a prosecution forward. These withdrawals can be contributed towards by delays in cases due to insufficient evidence, as well as a lack of information for the victim on the stage their case is in. The PPS offer a community liaison to update victims but cannot update them as regularly as required due to the volume of cases they deal with.

Where withdrawal of the witness occurs, public interest is taken into account. Once a withdrawal statement is received, the PPS must reassess the case and consider if they can proceed without the victim, on the basis of the following criteria: whether or not there is sufficient evidence; whether or not it is in the public interest to proceed; the seriousness of the offence; risk of reoccurrence; state of the relationship; vulnerability of the victim; and the victim support network. The PPS state that they do not consider one party more vulnerable than the other on the basis of gender.

Figures on domestic abuse cases are kept by the PPS but these are not broken down by gender as it is their policy not to discriminate on such details therefore it is something they do not need to know. However through cases notes written by the police, and statements from the victim gender of the victim and perpetrator will often become obvious from statements such as “He/she attacked me”. The PPS also keep figures on the cases they have had to withdraw at court, but not figures on withdrawal statements themselves.

The issues men may face in getting a case to court through the PPS may include the attitude of police officers and their willingness to record injuries and other evidence which the PPS will later rely on for the case to proceed. Several men in case studies reported reluctance on the part of police officers to record statements or injuries. Men may also be likely to withdraw cases if they do not have the sort of support, information and advocacy through the process which is provided for women through Women’s Aid. Indeed, the PPS feel that their job would be made easier if victims in general had more support through the system so that they may be less likely to withdraw.

The PSS provide training to staff around domestic abuse issues and would be open to an agency providing training on issues around male victims on an ongoing basis to balance the input they have received from Women’s Aid. They also believe that when men attend agencies such as

Victim Support and the Men’s Advisory Project, if they are given information on the PPS (as well as this information being given to staff and volunteers), this may help improve confidence that the PPS will take their case seriously.

Family Courts

None of the men in the case studies had favourable experiences with family courts, which they felt discriminated against them on the basis of their gender and found in favour of their partners over child custody and non-molestation orders, even where they had evidence that they were a victim of domestic abuse.

In civil proceedings women have advocacy and accompaniment from Women’s Aid, men do not have any source of accompaniment or advocacy. As a result, several of the male victims reported appearing in family court being treated as the perpetrator and being unsure of the process, and receiving unfavourable decisions which they believe was largely due to this lack of advocacy as well as a bias in the courts towards the female and the mother.

The outcome of this perceived bias is that the majority of the male victims in case studies have restricted or no access to their children, even where they have evidence of a history of police reports they have made as well as recorded injuries, or where social services have previously been involved to monitor their partners’ behaviour.

5.10.3 HOUSING

One of the areas of immediate concern in a case of domestic violence is safe and appropriate temporary accommodation. Through the housing executive male and female victims can access emergency housing if they present as homeless due to family or relationship breakdown, as well as domestic violence and abuse.

Housing Executive

Domestic violence and abuse manifests itself with the Housing Executive primarily through presentations of homelessness, and therefore the agency deals with victims through their homelessness legislation. To satisfy this legislation, an individual does not have to prove they are a victim of domestic violence, but that there is a family or relationship breakdown. They also have to prove that they are a priority need, and custody of dependent children will automatically satisfy the priority need requirement.

The Housing Executive states that they do not ask if domestic violence or abuse is involved, and will only record this as the reason for homelessness if it is presented as such by the individual. Their figures show that for 2009 to 2010 800 households were accepted as homeless were domestic violence was the given reason, an increase of 165 on the previous year. This figure is not broken down by gender and represents a small proportion of those presenting through relationship breakdown. As the

Housing Executive does not ask about domestic violence they feel that there is likely to be considerable underreporting.

Emergency housing can also be allocated if a victim is referred through the Multi Agency Risk Assessment Conference or MARAC process (described later), through an after hours emergency accommodation service run by the Social Services on behalf of the Housing Executive, and if a victim presents to a Housing Executive office during office hours. Therefore the agency is reliant on victims presenting themselves as suffering domestic violence and abuse, or the issue being identified to them through referral from another agency. In such circumstances their policy is to treat a male and female victim in exactly the same way, with the exception of referral to Women’s Aid refuges.

No Specialist Refuge

Women’s Aid offer specialist refuges for female victims of domestic abuse who require safe temporary housing for themselves and their children. The Housing Executive can make use of this service however they state that more and more it is not being seen as the best option; independent self contained accommodation is increasingly seen as preferable to a shared refuge space.

A service of this nature does not exist for male victims. Of the males in case studies, only three participants specifically mentioned that they would like to have had a refuge for male victims, however

these were the three participants who experienced the most severe cases of domestic abuse. As one of the two participants explained, his isolation and lack of escape route would have been lessened if he had known about a hostel for male victims where he could be assured of a sympathetic response:

“If there was a male refuge I would have used it in a second, because there would have been other people going through it to talk to.”

Another participant explained how a male refuge would have helped:

“I had to sleep in my car a lot; I’d have used an emergency hostel service if there was one. There needs to be somewhere we can go as men. We need that facility, the exact mirror reflection of what’s there for Women’s Aid.”

Male Issues With Housing

Some men reported problems proving that they required emergency housing and the requirement that they have an advocate supply proof that they were experiencing relationship breakdown or abuse in order to be placed on housing lists. The Housing Executive explained that their staff are expected to be sure that relationship breakdown has taken place and can ask for evidence in that regard only. Male victims encounter problems in this area because they do not have an agency such as Women’s Aid to provide such evidence

for them. The Men’s Advisory Project is primarily a counselling organisation and therefore providing this form of information is currently beyond its scope.

One participant reported being placed into a nursing home for two weeks as no other suitable housing was available, an experience he found harrowing as he had no one to talk to and the staff did not have the resources to deal with him. Issues of inappropriate housing were put to the Housing Executive during the service review, which stated that this can happen to both men and women where there is an emergency situation, as the first port of call is to supply the person with shelter, and then deal with the appropriateness of the accommodation as soon as possible.

The Housing Executive state that the main challenge they face is that they are often dealing with domestic violence and abuse victims when they do not know they are and therefore determining the best course of action in terms of appropriateness of services is difficult. Due to their reliance on domestic violence and abuse issues being presented by the victim or identified by other agencies, the Housing Executive stress the importance of good practice in networking with other agencies where domestic violence and abuse is an issue. They feel that as the MARAC process continues, housing responses to victims of both genders will improve as a result of a proper inter agency working agreement to plan and manage services for a victim. They are unable to plan fully for male

victims as they are not being presented with them through agencies or directly from men themselves, therefore evidence to justify the same services in terms of refuges for men does not exist. The Housing Executive also stated that where perception of a lack of support for men exists or where staff attitudes towards men may be inconsistent, they could reinforce the message that males can also be victims of domestic abuse and should be dealt with in the same sensitive manner.

5.10.4 THE MEN’S ADVISORY PROJECT

The Men’s Advisory Project (MAP) is the only specialist service for male victims of domestic abuse in Northern Ireland. Located in Belfast, MAP provide 3 main services; a counselling and signposting service to male victims of domestic violence, for men experiencing relationship breakdown, and for both men and women who seek to deal with anger management problems more effectively.

Appropriate services for men are identified when clients call and MAP assess if they can provide a service or if they need to signpost elsewhere. MAP finds that sometimes men will explicitly mention domestic abuse as the reason for their call, but often relationship breakdown is the presenting issue. In the latter case MAP will ask the following questions: what the relationship difficulties are; has there been physical violence or abuse; whether the caller is the perpetrator or

victim; what other agencies are involved; whether legal orders have been granted; and if children are involved. This builds a picture of risk and how urgently they need to be seen. Map has a policy of offering an appointment to a victim within 72 hours.

However MAP find males do not have the same level of awareness of Domestic Abuse as others, they use different terminology to describe the same scenarios. Those men in the case studies who did access MAP for counselling all reported that counselling was a very positive experience, which helped them come to terms with and understand the abuse, to be able to talk about it and to begin to move on from the experience.

However, the remit of the agency is focused on counselling and while they recognise that practical support is a need that men ask for, they do not have the resources currently to offer it. Their telephone signposting can be useful for men unsure what services are available, but counselling is not what many of them feel they will need. Where advocacy and support with legal issues, the police, housing and financial issues and accompaniment to family court is required, MAP cannot currently offer these services. This form of advocacy and support is something offered by Women’s Aid for female victims but is not a service that men can currently access, and is a need highlight by many of the victims:

“I was told about MAP, but they said they only do counselling and I needed

more urgent support at the time. It turns out there was no one that could offer me the practical help I needed”.

MAP has figures for the last quarter of 2009 which show 11% of their 100 referrals were male victims. These figures are presented with the caveats that MAP is a small agency based in Belfast and will only reflect the number of people who can use the service; who can travel to Belfast, who are aware of MAP, and the amount of clients MAP can see based on availability of their volunteer counsellors and appointments. A further 21% presented with relationship breakdown, some of which will later be identified as victims of DV through counselling. At this stage figures are not kept for numbers of victims identified down the line; the importance of confidentiality in a counselling organisation makes such figures difficult to keep but it is something MAP are working on.

MAP is a limited service for men in terms of its resources, its location in Belfast, its lack of regional outreach and the limited access for disabled clients. They recognise that these limitations can affect some of the most vulnerable victims and those in rural areas who cannot travel for financial or other reasons.

5.10.5 GENERAL PRACTITIONERS

Many of the victims went to their doctors for some practical support and signposting and again mixed responses were reported. Some of the men feel that having a

supportive General Practitioner (GP) who signposted them on to other agencies or advised them to keep a journal, was a vital piece of support in helping them find help. One participant said that he felt without his supportive GP who was able to identify the problem and encourage him to get help, he may not be alive today. However, others reported that their doctor did not want to get involved and did not signpost them to any other agencies.

5.10.6 SPECIALIST FLOATING SUPPORT

Some of the advocacy and support roles for female victims is offered by floating support workers, who are provided to women and children at risk as a result of domestic abuse, through Women's Aid, and provide support around safety, accompaniment to court and solicitors, and signposting to other DV services. They provide housing advice, money management advice, advocacy, crisis management and monitoring of causes for concern. These services can be of vital importance to an individual in a vulnerable situation as a result of DV. This service has been developed by Women's Aid in Belfast, Lisburn, Ballymena, Causeway, Cookstown, Dungannon, Fermanagh, Foyle, Newry, North Down, Newtownards and Omagh. Currently no such service is offered to male victims of domestic abuse.

5.10.7 SOCIAL SERVICES

Social Services primarily get involved with domestic abuse case to assess and monitor the welfare of the children involved, and to take action to protect them where necessary. Several men reported that the Social Services were monitoring the situation due to the involvement of children, but felt they did not act as quickly to protect the children from their mother as they would have done if the father was the abuser:

“In my opinion social services knew for years, they were telling me that I had to take on board what affect it was having on the children. My middle boy was very withdrawn but also misbehaving, the oldest became very quiet. Social services were putting this responsibility on me to leave the home, and I believe if it was a woman victim they would have had her partner out”

5.10.8 VICTIM SUPPORT

Victim Support Northern Ireland offer services to both male and female victims of domestic abuse, in the form of both practical and emotional support. They receive primarily referrals from the police as well as self referrals, and can offer advocacy and advice for victims through the legal process. However, while their service includes accompaniment to criminal court at the consent of the victim, they cannot accompany victims to civil court. Where a case goes to civil court they can refer female victims to Women's Aid who can accompany them, but for male victims there

is no agency who offer a mirror service.

Victim Support reports that a challenge in helping victims is often getting them to report that they are a victim, and that this can be a particular issue for male victims. In their experience of supporting male victims they find that men can often find it difficult to be believed due to the tendency for most victims to be female, and feel that more research and training is required to improve agency response to male victims. They also highlighted that where a male needs counselling they can refer to the Men's Advisory Project, but if they cannot access the service in Belfast the only other option for the male is to seek out a private counsellor at a financial cost they often cannot afford, or to seeking counselling through their General Practitioner and face a long waiting list.

5.10.9 DOMESTIC VIOLENCE HELPLINE

The domestic violence helpline in Northern Ireland is run by the Women's Aid federation Northern Ireland. The helpline signed up to a service level agreement through which provides a signposting service to males and a listening ear, information, advice for female victims as well as referral to other services.

Last year the service managed 32,349 calls; 1% of those answered were from male callers. There is a large discrepancy between the proportion

of male victims the police deal with, and the amount the helpline deals with. None of the male victims in the case studies had used the helpline and none of them said they were aware of the service at the time of the abuse.

The helpline would be open to more training on the issue of male victims and states that its job would be made easier if more services were available to signpost male victims towards. The service does not conduct specific advertising for male victims, and there is no section on this issue or on same sex domestic abuse on their website. In addition, a Google search for 'Domestic Violence Helpline Northern Ireland' currently brings up the Women's Aid Federation website. The helpline stated that they would be willing to set up a domestic violence helpline website, which is separate from the Women's Aid website.

5.11 SECTION 75 ISSUES

This section covers service provision issues relating to groups within section 75 of the 1998 Northern Ireland Act. Not all groups within the legislation are covered, only those for whom data was collected. Religious background, political opinion and persons with dependents were three categories without specific relevance to the case studies contained in the report. Marital status is a category which is covered within the body of the report itself, while a breakdown by gender is necessary for the focus of the study. The data presented here is drawn from

interviews with Section 75 agencies as well as accounts from male victims from these demographics in the case study interviews.

5.11.1 AGE

This study did not access any male victims over the age of 60. The service review included an interview with a representative from Age Northern Ireland, a charity which works to improve the lives of older people in Northern Ireland, who are currently running a project on elder abuse which offers advocacy and support for older victims of domestic abuse

Since its inception the Elder Abuse campaign has dealt with over 100 victims, despite limited resources which mean the service is not advertised. According to the agency, the service involves listening to victims' wishes, helping them explore avenues of action, and representing them at their request at tribunals, family conferences, and meetings with social services.

The Elder Abuse campaign has found that older victims experience high levels of financial abuse, psychological and emotional abuse, but that within the group they have dealt with, physical abuse is quite low. With the consent of the victim, the service will refer victims to appropriate agencies, but often the victims do not want that referral as there is hesitancy, especially amongst male victims, to advertise the fact that they have been victims.

Reaching older male victims, according to Age Northern Ireland, is particularly difficult because it takes time to gain their confidence, they are reluctant to admit abuse, and are very suspicious of any agencies, whether voluntary or statutory. They do not want someone to come in and take over, and are often worried that they will be put in a home or have their control taken away from them.

Age Northern Ireland also reported a lack of awareness amongst older male victims about where to get help and a lack of confidence to go out and seek it. They believe that to improve response to older victims, larger agencies in Northern Ireland need to improve their understanding of older victims, to ensure they are given empathy and not dismissed because of their age. They suggested a training program specific to elder abuse to help agencies improve their response.

5.11.2 DISABILITY

Case study evidence indicates that those participants who had disabilities had their disability used against them. Participants reported being physically attacked by partners who took advantage of their disability, and who ridiculed them over the disability in front of others, and who financially abused their benefits.

Disability also becomes an issue for victims of domestic abuse through access to services. This can present difficulties for male victims, as the Men's Advisory

Project does not have disabled access to its counselling building. It does have partnerships with other agencies to provide accessible counselling locations, however this puts pressure on the available appointments a counsellor can offer due to the time it takes to travel to and from alternative destinations. In addition, finding accessible refuges and accommodation is one of the main challenges facing disabled victims of domestic abuse, according to Disability Action Northern Ireland.

Despite these issues facing disabled male victims of domestic abuse, there is little awareness of or policy in place for such victims. There is no disability agency in Northern Ireland whose remit it is to deal with such issues. Disability Action Northern Ireland offer a signposting service for victims of domestic violence and abuse, to police and refuges, but report that they have had a small number of females but no male victims. Due to the lack of reporting the issue is not flagged as one which requires attention.

5.11.3 ETHNIC MINORITY ISSUES

With victims from minority ethnic groups in Northern Ireland, a number of specific issues around culture and language can make an already difficult experience even more challenging. The Asian male victim interviewed in the cases studies highlighted the importance of cultural issues around family roles and how this created increased stigma for him as a male victim in terms of the reactions from family and friends.

No specific service for ethnic minority victims exists, however the Northern Ireland Council for Ethnic Minorities (NICEM) was interviewed because they offer signposting services and general advice around issues such as housing to individuals from minority ethnic groups who present with a range of issues. They report that presentation of domestic abuse is very rare, and their policy is to signpost to agencies whose remit is to deal with it and offer what advice they can in terms of housing eligibility. They tend to get women victims and report only one case where a known male victim contacted them.

NICEM do not have a specific referral policy or relationship with the Men's Advisory Project as they have not had the cases to deal with to date. They highlighted a number of key challenges that victims from minority ethnic groups would face, including a lack of a network of support, issues around language and accessibility to services and support groups, and a lack of awareness of what exists.

NICEM also highlighted the issue of culture and stated that the image around males in certain cultures is that they are the strong one in the relationship and if therefore an issue such as being a victim of domestic abuse may be shameful for them. They pointed to the many smaller men's and women's groups for different minority ethnic populations in Northern Ireland as the key groups through which to disseminate information on domestic abuse services and awareness of what domestic

abuse is. These groups often have access to more marginalised people and can therefore help improve engagement from these sections of the population.

Similarly, they highlighted the importance of the larger agencies making sure they are aware of these smaller groups who can offer a source of support to victims of that ethnicity. However it must also be remembered that these groups are often very small and lack the resources to offer in depth support to those signposted to them.

5.11.4 SEXUAL ORIENTATION ISSUES

This study interviewed one male victim from a same sex relationship during the case studies, who highlighted that while he had no problem contacting the police and found them to be helpful, he felt that there was a general lack of awareness on the gay community about domestic violence and abuse. He also highlighted the issue of the gay community in Northern Ireland being so small which impinged upon his ability to seek support and to move on. Seeking support in this context is made more difficult due to the possibility of someone at one of the LGBT agencies recognising a gay male victim, and the case study participant in question mentioned this as a potential issue.

During service review interviews, both the Rainbow Project and Cara Friend stated that these issues of anonymity were

common amongst male victims of same-sex relationship domestic abuse. They also highlighted that while reporting the abuse may not be an issue for the very small minority of gay men who are 'out' in Northern Ireland, this would be a serious barrier for those whose family and friends do not know and who want to protect their privacy in relation to sexual orientation.

The Rainbow Project in Belfast and Londonderry provide one to one counselling and advocacy services for gay male victims of domestic violence, as well as listening services via telephone or email. They find that men tend to present for reasons other than domestic abuse due to a lack of understanding of the issue within the gay community in Northern Ireland and only later through counselling is the issue unearthed. Further barriers faced by gay men include a reluctance to play into a stereotype that gay men are weak if they ask for help, and therefore they often avoid doing so and attempt to deal with the abuse on their own.

Due to a lack of confidence in the gay community in terms of confidentiality, Rainbow feel that more work needs to be done to instil this confidence in them, as well as improved networking with partner agencies to ensure that they understand the specific barriers facing gay male victims. Rainbow highlighted the importance of agencies showing gay friendliness through having posters in waiting rooms or other prominent areas with gay related content, as a gay man entering an agency for the

first time will be hyper vigilant for signs that it is safe to disclose their sexual orientation.

Rainbow have strong partnerships with agencies such as the PSNI and hear good reports about the way in which they deal with gay male victims, however there remains a reluctance for most gay men to engage with services, as most of the gay population in Northern Ireland are invisible and are not part of the visible gay community who access and are engaged with services.

Services for gay male victims are focused in Belfast, rurally there is difficulty accessing services and issues of confidentiality mentioned above are even more prominent for gay male victims in rural areas. Rainbow report that from April 2009 to March 2010, they had 8 direct requests for counselling directly relating to domestic abuse, while monitoring has shown that approximately 34 further clients presenting with completely different issues could be seen to be in an abusive/controlling relationship, for the same period.

Cara Friend are another Belfast based service for Lesbian, Gay, Bi-sexual and Transgender individuals who run a helpline which provides a listening ear to callers with a range of issues including isolation, coming out, and relationship breakdown. They also have a youth service which offers counselling for young people from age 14 to 25, and it is through this service that they most commonly encounter domestic abuse. They report that as

well as men experiencing abuse in same sex relationships, they deal with young men who encounter emotional blackmail and financial control as well as negative behaviour and abuse from family members, as a result of their sexual orientations.

They also highlighted that younger gay and bisexual men often have internalised homophobia as a result of experiencing discrimination, and are still in the process of coming out, therefore they are vulnerable to abuse. Another common issue they find is alcohol use as a precursor to the violence, and many younger gay men become victims of domestic abuse to an older partner who uses the secrecy of the relationship and their partner's lack of acceptance of their own sexual orientation to control them and keep them in the relationship.

Cara Friend also highlighted the issue that in the LGBT sector victims rarely report crime and the need for anonymity means that many gay men from Northern Ireland contact the UK helpline Broken Rainbow. However they feel that a telephone helpline is limited and often counselling, practical help, support and signposting are what is required.

Cara Friend also highlighted the importance of advertising services for male victims to the invisible population of gay men who are the hardest to reach, through mainstream agencies and locations as well as the internet. Cara Friend have found that small but constant advertising

presences are more effective than one off large campaigns, and cited the success of a small personal advertisement signposting to their service which they have had permanently in the Belfast Telegraph.

They feel that the major gaps are the lack of a specialised helpline and counselling service for gay victims of domestic abuse in Northern Ireland, as well as services that do not extend beyond Belfast. One potential way which Cara Friend have suggested carrying this out is through a centralised paid counsellor who manages a group of regional volunteers.

6 DISCUSSION

The findings presented evidence from three sources: male victim case study accounts of their experience and needs; attitudes and awareness of domestic abuse from a quantitative questionnaire; and an examination of service provision which included interviews with key agencies. These findings are of an exploratory nature however the evidence shows that men can be victims of domestic abuse, that there is evidence of a lack of male awareness around domestic abuse issues, and differences in attitudes towards male and female victims. The findings also highlight a number of challenges and gaps in service provision for male victims, which need to be addressed to provide equality for men who experience domestic violence and abuse. This chapter will discuss these findings and their implications for practice.

6.1 THE EXPERIENCE OF MALE VICTIMS OF DOMESTIC ABUSE

The case studies presented in this report highlight that abuse can happen to men of all backgrounds, regardless of sexual orientation, ethnicity, disability, religion or age. As the case studies show, men can experience abuse from family members as well as intimate partners and spouses, and the abuse can begin immediately or after years of the two being together.

The case study data would suggest that it is difficult to predict those men at risk of domestic abuse due to the range of contextual and precipitating factors found in this study in addition to the scarcity of

other in-depth studies on male victims, however factors identified by men such as alcohol and drug problems, mental illness and a history of abuse and trauma were also found to be risk factors by Hines, Brown & Dunning (2007). Moreover, the themes of financial issues have been found in research on female victims (Rocca et al, 2009) as a form of maintaining control and power over an individual.

One aspect which seems to be unique contextually is the demand some of the male victims felt was placed upon them in terms of providing an appropriate lifestyle for their partner, and the abusive consequences of not doing so. Some evidence of this has also been found in the case studies conducted by Cook (2009).

The nature of abuse experienced by male victims in this study was primarily emotional and psychological abuse, which is of concern given the research which shows the long term negative consequences of these forms of abuse (O'Leary, 1999; Follingstad, 2007). However reports of physical violence were also very common and the use of weapons and other serious physical incidents mirror the experiences reported in other pieces of research on male victims (Cook, 2009).

The various examples of controlling behaviour the men reported, from control of money to control over their behaviour and which friends they could see, highlight the fact that relationship dynamics vary between relationships in the modern world

and contradict feminist interpretations of domestic abuse as an issue of male patriarchal control over females, a finding increasingly being presented in research of this nature (Prospero, 2007; Dutton, 2007). Some of the men in the case studies were stay-at-home fathers and experienced financial control of the sort described by studies on female victims (Branigan, 2004).

Men reported a number of serious consequences of the abuse including negative health effects, impact on work performance, mental health problems such as stress and depression, and loss of contact with children, all of which are outcomes and effects reported by previous research on male victims (Coker et al, 2000; George & Yarwood, 2001; Reid et al, 2008). Psychological abuse and prevention of access to children were reported as the results of the abuse with the most negative aspects, and the emotional effects of such experiences highlight the importance of access to counselling services for men who are often not accustomed to dealing with emotional issues. The case studies also highlight that physical injury and long term physical damage are not issues confined to female victims, with one male victim in particular suffering long term physical problems.

However one issue which was not reported was fear of personal safety, which is surprising given some of the physical incidents and threats experienced by participants, and supports findings that male are less likely to report fear than

female victims (Walby & Allen, 2004; Carmichael, 2007). The implication of this finding is that risk assessment conducted by agencies should take into account that male victims may not recognize and report risk and fear for their personal safety in the same way in which female victims may do so.

Men also showed a reluctance to seek help and stated a number of barriers which may be unique to male victims including a perception that family law will favour their partner and that therefore they will lose contact with their children, as well as a perception that they should be the protector of the family and therefore leaving the relationship would represent a failure. These findings as well as the findings from the attitudes questionnaire, that men in general are less likely to seek help and reported more of the barriers presented in the questionnaire than women, support previous reviews on the issue of masculinity and help-seeking (George, 1999; Galdas et al, 2005) and suggest that a large number of men may experience abuse but never seek help.

6.2 ATTITUDES TOWARDS AND AWARENESS OF MALE VICTIMS

Some evidence in the findings suggests that attitudes exist which treat male victims less seriously than female victims, however most of this evidence came from male reports of their experience rather than the attitudes questionnaire.

Strong evidence of a lack of male awareness of domestic abuse issues, services and a perception that the police and other services will favour women was also presented here. The findings highlight the importance of attitudes and awareness in the issue of domestic abuse, as male victims reported their own attitudes and lack of awareness as a serious barrier to seeking appropriate help and felt that the attitudes they experienced from some of the agencies they accessed affected the way in which they were dealt with.

Reasons men gave for a lack of awareness of domestic abuse was a focus of media campaigns on female victims, a lack of education on the subject, and the attitude that it was not something men talked about. Issues of masculinity, a sense of stigma and embarrassment and a perception that they would not be believed, were all raised as attitudinal barriers by men as reported in previous studies (George, 2003; Cook, 2009).

Men in the case studies showed a reluctance to report domestic abuse for a number of reasons, including protecting children, fear of disbelief and a lack of awareness of services. Similar findings were found in the attitudes questionnaire, both of which support findings in previous research which highlight a reduced likelihood of male help seeking in general (Galdas et al, 2005), and for domestic abuse incidents in particular (Carmichael, 2007).

6.3 SECTION 75 ISSUES

Research on male victims in general is at a very early stage, but research on older male victims, disabled male victims, those from minority ethnic groups and male victims from same sex relationships, is at an even less advanced point. There is a clear need for work on these areas and the limited data presented here suggests that each of these groups may have specific issues and barriers which should be addressed to ensure equality of support.

Given the reticence of older victims to partake in pieces of research such as this, and their reported distrust of many mainstream services, it seems that they need a more personal and tailored approach that a general agency for domestic abuse may not be able to offer. However, the numbers reported by AGE Northern Ireland, who are not advertising the elder abuse campaign widely, suggest that elder abuse may be a considerable problem in Northern Ireland, and one which requires a permanent tailored service. AGE Northern Ireland also highlighted the prevalence of financial abuse against older people which has been reported in a review by Wyandt (2004).

Disability was a prominent issue in the case studies given the reports from men on how their disability was used as part of the abuse, and yet there is a dearth of research on this particular issue. The particular vulnerabilities of disabled men who experience domestic abuse are

highlighted in other studies (Finney, 2006) and the issues of access to services for these victims as well as an increased difficulty in reporting the abuse in the first place, especially where they are dependent on their abuser, suggests the issue requires further attention.

The data suggests that cultural issues may be important in domestic abuse and present further barriers for a victim leaving the relationship. In addition, the Northern Ireland Council for Ethnic Minorities highlighted that a victim from a minority ethnic group can find it more difficult to access services due to language barriers and a lack of awareness about what is available, while the fact that their abuser may be the only person in the country they know can increase their sense of isolation. Providing equality of service to victims means that agencies must reach out to these victims in a way which is accessible and which takes into account cultural differences.

The research also highlighted a number of issues for gay male victims who, as shown in the attitudes results, report barriers to reporting even more so than heterosexual male victims and show even less awareness of many domestic abuse issues than heterosexual male victims. The data also suggests gay men were even less likely to report being a victim of domestic abuse which reflects recent findings by O'Docherty (2009) who found that 56% of all incidents against Lesbian, Gay and Bi-sexual people in Northern Ireland in the last three years

were never reported to the police. Given that research shows that domestic abuse is as prevalent in same-sex relationships as in heterosexual relationships (Heintz & Melendez, 2006), these issues are very serious and highlight the importance of agencies tailoring services carefully for these men. Agencies must assure gay male victims that they are aware of the sources through which they can seek help, have confidence that these agencies will provide anonymity, a sympathetic and accepting service and help gay male victims identify the issues of domestic abuse when they experience them.

6.4 GAPS IN SERVICE PROVISION FOR MALE VICTIMS

The research has highlighted a number of gaps for male victims of domestic violence and abuse in Northern Ireland. Firstly, males do not have the same ability to access services due to a lack of awareness about domestic abuse issues and what support they can access. Similarly, agencies are not fully trained on how to identify and support such victims, their training often only containing lip service mention of male victims due to the lack of available resources to inform such training.

Some men were signposted to the police and to the Men's Advisory Project by agencies or General Practitioners, while others were not, indicating a lack of consistency in response. Their own lack of awareness of how to access help highlights the importance of agencies

consistently giving men the correct information about their options as a victim of domestic violence and abuse.

It is clear from case study data that front line solicitors have a massive responsibility to their clients to ensure they provide their client with the right information and advice to help them make a decision on legal matters which is in their best interests. Men in particular seem to access solicitors over domestic abuse issues. It is therefore vital they are up to speed in family law and the options of their client. Their attitudes can heavily influence the actions of their clients as evidenced by case study reports of men whose solicitors suggested to them that family law was heavily in favour of the female and therefore they should not contest unfair non molestation orders or press charges against their abusive partner.

A major gap in services for male victims is advocacy and support. While some of the participants found counselling useful, most of the participants said they required some practical advice which they were not able to access. They felt that a lack of advocacy and support through the legal system resulted in poor outcomes for them and some of the men faced financial and housing difficulties as a result. Lack of understanding and support also led to withdrawal of cases, failure to act on issues or access support, and resulted in a strong sense of inequality and discrimination for many of the men.

Accompaniment in civil court, to housing executive, social services and other agency meetings, as well as help with relevant forms and other practical guidance, is something which is offered for Women's Aid, for older men and women by the Elder Abuse campaign currently run by Age NI, and by Rainbow Project for gay male victims. For the general male population who may experience domestic abuse, this service is not available.

There is a discrepancy between the fact that around 25% of domestic crimes recorded by the Police Service in Northern Ireland involve a male victim, and the figure for the percentage of male callers to the Domestic Violence Helpline, which is only 1%. Given that male victims stated a need for information services to help them understand the issues, the helpline could be of great use to male victims. By being accessible to both men and women in this way at an early stage, and having a helpline which people feel open to contacting, this can serve as a preventative measure against later, more serious abuse.

The findings suggest that counselling was a very important source of help to those men who accessed it in coming to terms with the abuse and moving on from the relationship, as well as in being emotionally and mentally able to deal with the issues they face as a result.

7 CONCLUSIONS & RECOMMENDATIONS

CONCLUSIONS

This research set out to explore the issue of male victims of domestic abuse in Northern Ireland against a backdrop of a dearth of local research on the subject and a complex range of issues to examine. The data presented provides a starting point to the evidence base on male victims in general and commences work on the topic in Northern Ireland, in the hope that it will help move services towards equality for all victims of domestic violence and abuse.

The 13 case studies presented here highlight the fact that men can experience a wide range of domestic violence and abuse as can women, and that this abuse has a wide ranging negative effect on their lives, just as it has with women. It also highlights a number of gaps in provision of and access to services for male victims in Northern Ireland.

This was a small scale study with a number of limitations, due to the difficulty in getting men to come forward and tell their story. Until awareness of domestic abuse issues is raised amongst the male population, and available services are advertised directly towards men, they will continue to constitute an invisible population. As an exploratory piece on a small number of case studies and a questionnaire sample based on convenience sampling, it is difficult to make broad generalisations, but it is hoped that this study can serve as a starting point upon which our understanding of male victims can be improved.

RECOMMENDATIONS

1 AWARENESS RAISING

- 1.1 Improving male awareness and understanding of abuse is a priority issue.
- 1.2 A public awareness campaign aimed at male victims should be conducted and advertising materials should be more inclusive of all male victims on a permanent basis.
- 1.3 This awareness raising should focus on improving male awareness of what domestic abuse is, that they can be victims, where they can go for help, and that agencies will provide a supportive response. Attitudes that domestic abuse against men is less serious should be challenged by such awareness raising.

2 AGENCY TRAINING

- 2.1 Training for agencies involved with domestic abuse require improved training in the form of a proper module on the experience of and issues facing male victims, including those from Section 75 equality categories, in order to help them improve their ability to identify, support and signpost these victims using an evidence based response.
- 2.2 Training needs to be available on an ongoing basis, either through a permanent trainer or a training pack available to agencies.

2.3 Training of issues specific to male victims should be included where possible in the Courts Service Judicial Studies Board and to solicitors.

2.4 Agencies such as the Men's Advisory Project should be trained on the Police and legal process, and information should be provided to clients on this process to improve their understanding of and confidence in the legal system.

3 PRACTICAL SUPPORT AND ADVOCACY

Male victims require the same forms of practical support and advocacy that female victims can access, including accompaniment to family court and support through the criminal justice system to reduce withdrawal from the legal process.

4 FLOATING SUPPORT

A more inclusive Floating Support system is required which can fulfil the needs and support requirements of male victims. This floating support is required for housing issues as well as for practical help with filling in forms, accessing financial support, dealing with agencies such as social services and the police.

5 REGIONAL SUPPORT

5.1 Regional support and outreach in the form of counselling of the sort offered by the Men's Advisory Project, as well as practical support and advocacy described above, is required to

improve equality of access for male victims across Northern Ireland.

5.2 A trial of such services in conjunction with effective and focused advertising would be an effective way to assess the need for such a service.

6 POLICE SERVICE NORTHERN IRELAND

6.1 The police should monitor and ensure consistency of policy response more closely, to ensure evidence is recorded correctly and in detail to improve the prospect of conviction.

6.2 The police should improve male confidence that they will be supportive of male victims through their advertising.

6.3 More detailed recording of incidents should be put in place and should include monitoring of false allegations, the relationship between perpetrator and victim for domestic incidents as well as crimes, and repeat incidents. All of this data should contain information gender. Other contextual information such as the duration of abuse prior to reporting would be very useful.

7 DOMESTIC VIOLENCE HELPLINE

The helpline should improve its outreach to male victims by providing more in depth training on male victims to staff and volunteers and advertising the service more directly to men through

the use of its website and promotional campaigns. The use of terminology and examples of abuse which will be understood by males, including gay men, as well as females, is also important.

8 OLDER VICTIMS

It is recommended that the continuation of a service such as the Elder Abuse campaign is the most effective way to offer the specialised service that is required for both older male and female victims of domestic violence and abuse.

9 DISABLED VICTIMS

To improve identification of and support for disabled victims, disability groups such as Disability Action should be provided with appropriate training on the issues and agencies dealing with domestic abuse should ensure that their services are advertised to and accessible by these victims.

10 ETHNIC MINORITY VICTIMS

10.1 Services for male victims should be accessible to victims from ethnic minority groups.

10.2 Minority ethnic agencies should be engaged in discussions about the appropriateness of advertising material produced to acknowledge issues of cultural and language needs amongst these victims.

11 EDUCATION

Education through schools and Youth agencies and groups would be a beneficial preventive measure in helping young people understand domestic abuse issues and would benefit those who experience abuse later in life as a victim.

12 VICTIMS OF SAME SEX DOMESTIC ABUSE

12.1 Training and awareness of domestic abuse issues specific to gay and bisexual men needs to be improved for agencies who provide services to victims.

12.2 Agencies need to reach out to gay and bisexual victims more effectively by advertising that they are supportive to these victims, presenting their service so that gay and bisexual victims feel safe in using them.

12.3 LGBT agencies in Northern Ireland should be engaged in discussions to improve how agencies improve their services for victims of same sex domestic abuse.

13 FURTHER RESEARCH

The findings presented here are exploratory and serve as a starting point for further work. To increase knowledge and answer some of the questions raised by the findings, research momentum is required and further studies would help increase our understanding of the issues facing male victims in Northern Ireland.

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APPENDICES

1 STEERING GROUP MEMBERS

1. Dr Colin Cooper, Senior Lecturer, School of Psychology, Queen's University Belfast.
2. Anne McGlade, Equality Manager, Business Services Organisation Northern Ireland.
3. Maxine McFarland, Coordinator, Men's Advisory Project.
4. Dr David Roberts, Senior Lecturer in International Politics, University of Ulster.
5. Gerry Skelton, Social Work Lecturer, Belfast Metropolitan College.
6. Tony Steed, Equality Manager, Housing Executive
7. Deirdre Teague, Domestic Violence Helpline Manager.

2 PARTICIPANT INFORMATION SHEET FOR VICTIM CASE STUDIES

You are invited to take part in a research study. Before you decide if you want to take part, it is important that you understand what participation involves and why the research is being carried out. Please read the following information carefully and discuss it with others if you wish. Part 1 tells you about the purpose of the study and what your participation

involves. Part 2 gives you more detailed information about the study. Take time to decide whether or not you wish to take part and please contact us if you would like more information.

PART 1

Why Is The Study Being Carried Out?

This research is examining the experience of male victims of domestic abuse for the Men's Advisory Project in Belfast (MAP). The purpose of the research is to help us better understand the experience of male victims so that we can help improve services and support for these men. This will be one of the first pieces of research on male victims to be carried out in Northern Ireland and we hope the findings will help health professionals better react to and help male victims in the future.

Am I Eligible?

Our case studies are focused on adult male victims. Domestic abuse can be physical but it can also be verbal, psychological, emotional, financial and sexual. It can be inflicted on you by a current or previous intimate partner (even if you have never lived together before) or family member, and can happen to you regardless of your sexual orientation, race, ethnicity, age, disability or gender. If you are unsure if you have been a victim you can ring MAP on 028 90 241929 for a confidential conversation or visit www.mapni.co.uk.

mapni.co.uk for more information.

What Will Be Involved If I Participate?

Our case studies are focused on adult male victims. If you agree to take part you will be asked to come to the Men's Advisory Project office in Belfast to take part in a case study interview that will last 1-2 hours. We will try to arrange this within a couple of weeks of your agreement to participate, and following the interview your participation will be complete. During the case study interview you will be asked questions about your experience of domestic abuse and of service support (if relevant). The interview will be audio-taped and then stored securely. It will be written onto a secure computer a week of the interview and all of your personal details will be removed from the data. The audio tape will then be securely destroyed.

Participation is completely voluntary and can be freely withdrawn at any time without giving a reason. It is up to you to decide after reading this information sheet. You will be asked to sign a consent form to show you have agreed to take part. Any travel expenses you incur in getting to and from the interview can be claimed back.

Are There Any Risks In Participating?

There are not many risks involved in participating; however you may find discussing your experience of abuse emotionally distressing. If this is the

case you can be offered counselling at the Men's Advisory Project, separately from the research project, and if you wish you will be given contacts for other support services you may need. In addition, some participants may feel benefits from being able to talk about their experience and contributing towards a project aimed at helping other victims.

Your safety as a participant may also be a risk if you are still in contact with the person who has abused you. You must therefore make sure it is safe for you to be involved before participating. Any complaint about the way you have been dealt with during the study or any possible harm you might suffer will be addressed. The detailed information on this is given in Part 2.

What Is The Deadline For Taking Part In Case Studies?

The case studies will run up until the end of May 2010, so the deadline for contacting us to get involved will be Monday 17th May 2010.

Will My Involvement Be Kept Confidential?

Yes, we will follow best legal and ethical practices and all information about you will be handled in confidence. The details of this are included in Part 2.

If the information in Part 1 has interested you and you are considering participation, please read the additional information

in Part 2 before making any decision.

PART 2

What Happens If I Don't Want To Carry On With The Study?

If you decide at any point that you do not wish to continue participating, you can freely withdraw from the study and any data collected on you will be destroyed.

What If There Is A Problem?

If you have any concerns or issues you can contact the lead researcher Daryl Sweet on 02890 241929 or daryl@mapni.co.uk, who will do his best to answer your questions. However, if you remain unhappy or if the complaint is about the researcher, you can contact: MAP Management Committee, Cathedral Buildings, 64 Donegall Street, Belfast. BT1 2GT

Will My Taking Part In This Study Be Kept Confidential?

Yes. Your data will be collected using an audio recording device, which will then be stored securely in a locked filing cabinet, in a locked office, only accessible by the researcher. It will not have your name on it. It will then be transcribed onto written format within a month of collection, and any names or other identifying information mentioned will be removed. The tape itself will be securely disposed of. An exception to confidentiality could occur if you disclose

any information relating to criminal acts that require the researcher to take further action.

What Will Happen To The Results Of The Study?

The results will be published in a paper on male victims of domestic abuse in Northern Ireland, in the summer of 2010. The victim case studies will be used as part of a section on the nature of abuse experienced by men. No identifying information will be reported in this section.

Who Is Organising And Funding The Research?

The research is being carried out on by the Men's Advisory Project in Belfast, and is funded by the Department of Health, Social Services and Public Safety (DHSSPS).

Who Has Reviewed The Research?

This research has been reviewed by the Health and Social Care Research Ethics Committee 1. In addition, a steering group of experts has helped design the project to high standards.

Please make sure you understand the above information before you agree to take part in this study. If you have any further questions, please contact Daryl Sweet at 02890 241929 or daryl@mapni.co.uk . If you decide you do want to take part, please contact me to arrange receiving a consent form and a date for the case study interview.

3 CASE STUDY PARTICIPANT CONSENT FORM

Name of Researcher: Daryl Sweet

Title of Project: Male Victims of Domestic Abuse	Please Tick
I confirm that I have read and understand the participant information sheet dated for the above study.	
I have had an opportunity to consider the information, ask questions and had any questions answered satisfactorily	
I understand that my participation is voluntary, and I can freely withdraw at any time without giving a reason.	
I agree to take part in case study interviews for the above research study	
I consent to this interview being audio-recorded	

Name of Client Researcher

Date Date

Signature Signature

Anonymous Research Code

4 CASE STUDY INTERVIEW SCHEDULE

Pre Interview Information

- Interview can stop at any time you need to.
- Summary of themes which will be covered
- Confidentiality agreement and exceptions

Interview Format

- Start Recording

Biographical Details

- Current Age and Age at onset of abuse - and age of abuser
- Ethnicity, country of birth, religion, first language
- Mental/ Physical Disability
- Sexual orientation
- Town you live in
- Marital Status (at time of abuse and now)
- Occupation
- Accommodation status

- Annual household income
- Children

Context Of Abuse

- Relationship history – length and status of relationship, living arrangement
- Life history aspect –what happened leading up to the abuse
- Participant awareness and understanding of domestic abuse
- Events or behaviours triggered the abuse

Nature Of Abuse

- Examples of abuse experience
- Frequency and duration
- Key details of the abuse
- Worst incidents

Effects And Coping

- Effects the abuse had on you - emotional, health, work life, relationship, children etc
- Participant coping behaviours - reaction, avoidance, justification, hiding

- Did you feel any stigma or embarrassment
- Acceptability of abusers behaviour, attribution of blame

- Why did you stay in the situation

Reporting Behaviour

- Barriers you felt to reporting or acting - attitudes/practical etc – impingement of LGBT/disability/age etc
- Who did you tell and in what order?
- What were the responses of those who you told
- What services were you aware of for men like you
- What services for victims did you approach or use
- Reaction of services they accessed
- Outcome of involvement with service support
- Do you think services adequately met your needs?

Any Other Relevant Information

- Other views and opinions based on your experience?

- How could services be improved?
- How could your experience have been made easier?

End of interview

- Explanation of when report ready and how to follow up on any questions
- Signposting where necessary

5 ATTITUDES QUESTIONNAIRE

Men's Advisory Project: Domestic Abuse Attitudes Questionnaire

1. Information Page: please read before continuing

Thank you for taking part in this questionnaire.

The aim of this questionnaire is to examine attitudes towards domestic violence or abuse. Everyone has different opinions of these issues, and everyone's opinion is valid, so please answer each question honestly. The questionnaire will also briefly ask about your experience of domestic abuse.

This questionnaire is for all adult men and women, and our analysis will break the answers down by sexual orientation, age, gender, disability and ethnicity, to examine issues specific to each group.

The research is being conducted on behalf of the Men's Advisory Project (MAP) in Belfast, a counselling organisation for male victims of domestic abuse who also offer anger management courses for both men and women. The study is funded by the Department of Health, Social Services and Public Safety.

Please read each question carefully and answer by ticking the appropriate box or writing in the space provided.

This questionnaire is completely anonymous and there is no way in which you can be identified as an individual from the answers you give. Your responses are confidential and will be kept securely, to be viewed only by the researcher and will be used only for the purpose of this research project.

The questionnaire should take no more than 15 minutes to complete. Please tick one box only unless the question asks otherwise. If you feel uncomfortable answering a particular question you can leave it blank or withdraw from the survey at any point, however your answers are valuable and will help us to understand current attitudes in Northern Ireland towards domestic violence and abuse, in order to improve awareness and services.

For paper copies of this questionnaire, or to find out more about the research, please contact Daryl Sweet at 02890 241929 or daryl@mapni.co.uk

Men's Advisory Project: Domestic Abuse Attitudes Questionnaire

2. Background details

This section asks you for some background information.

*** 1. Where did you hear about this questionnaire?**

2. What gender are you?
 Female Male Transgender
 Other (please specify)

*** 3. To what age group do you belong?**
 18-24 55-64
 25-34 65-74
 35-44 75+
 45-54

4. To what ethnic group do you belong?
 White Pakistani Black African
 Irish Traveller Bangladeshi Other Black
 Mixed Race Other Asian Chinese
 Indian Black Caribbean Don't Know
 Other (please specify)

5. In which country where you BORN?
 Northern Ireland Republic of Ireland
 England Scotland
 Wales Don't Know
 Other (please specify)

Page 2

Men's Advisory Project: Domestic Abuse Attitudes Questionnaire

6. What is your religious affiliation?
 Protestant None
 Catholic Not Sure
 Other (please specify)

7. How well do you speak and understand English?
 Not fluent
 Fluent but it is not my first language
 It is my first language
 Other (please specify)

*** 8. Do you consider yourself to have a mental or physical disability?**
 Yes No Not Sure

9. If yes to Q8, what condition?

10. What is your sexual orientation?
 Heterosexual Bi-Sexual
 Gay Lesbian
 Other (please specify)

*** 11. What town or area do you live in? (If Belfast please indicate whether North/South/East/West)**

*** 12. What is you partner status?**
 In a relationship Cohabiting
 Single Married
 Divorced Civil Partnership
 Widowed Separated

Page 3

Men's Advisory Project: Domestic Abuse Attitudes Questionnaire

13. What is your current employment status? (Tick more than one box if applicable)

Unemployed Full Time Employed (35 Hours or More)

Part time Work (less than 35 hours) Student

Other (please specify)

14. What is your occupation?

*** 15. What is your annual household income?**

Less than £10,000 Between £50,000 and £60,000

Between £10,000 and £20,000 Between £60,000 and £70,000

Between £20,000 and £30,000 Between £70,00 and £80,000

Between £30,000 and £40,000 Over £80,000

Between £40,000 and £50,000 Don't Know

*** 16. Do you have any children?**

No 3

1 4 or more

2

17. If you have children, do you have contact with them?

Not applicable

Yes, they live with me

They do not live with me, we have regular contact

They do not live with me, we have occasional contact

They do not live with me, I rarely see them

Other (please specify)

Men's Advisory Project: Domestic Abuse Attitudes Questionnaire

3. Attitudes towards domestic abuse

This section asks some general questions about domestic abuse.

*** 1. Please indicate the EXTENT to which you AGREE that the following behaviours are domestic abuse (i.e. that these behaviours constitute domestic abuse)**

	Strongly DISAGREE	Disagree	Neutral	Agree	Strongly AGREE
Physical violence	<input type="radio"/>				
Cruel Insults	<input type="radio"/>				
Controlling household money	<input type="radio"/>				
Control over what friends or family you see	<input type="radio"/>				
Damage to your property	<input type="radio"/>				
Forced sexual activity	<input type="radio"/>				
Using sex to manipulate	<input type="radio"/>				
Threats or intimidation	<input type="radio"/>				
False accusations	<input type="radio"/>				
Ruining your self esteem (belittling and humiliating)	<input type="radio"/>				
Checking up on and following (stalking)	<input type="radio"/>				
Turning your children against you	<input type="radio"/>				
Aggressive behaviours	<input type="radio"/>				
Controlling behaviours	<input type="radio"/>				

Men's Advisory Project: Domestic Abuse Attitudes Questionnaire

*** 2. Please indicate the extent to which you agree with the following statements about domestic abuse (tick one box per statement)**

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Domestic abuse against women is more serious than domestic abuse against men.	<input type="radio"/>				
I would personally be more likely to believe a woman who said they were a victim of domestic abuse, than a man who said they were.	<input type="radio"/>				
Men should be able to handle being a victim of domestic abuse better than women.	<input type="radio"/>				
Men who experience domestic abuse are weak or effeminate.	<input type="radio"/>				
Women who commit domestic abuse must be punished to the same degree as men who commit it.	<input type="radio"/>				
Domestic Abuse can only be committed by an intimate ('romantic') partner.	<input type="radio"/>				
Male victims deserve the same level of support as female victims.	<input type="radio"/>				
Domestic abuse is less common in same sex relationships	<input type="radio"/>				
If an ex-partner hits you it does not count as domestic abuse.	<input type="radio"/>				
Domestic abuse against men is sometimes justified or acceptable.	<input type="radio"/>				
You must be living with your partner or family member in order for any abusive behaviour to be defined as "domestic abuse".	<input type="radio"/>				
Domestic abuse against men hardly ever happens.	<input type="radio"/>				

Men's Advisory Project: Domestic Abuse Attitudes Questionnaire

Women who commit domestic abuse are less likely to be arrested than men who commit domestic abuse	<input type="radio"/>				
Domestic abuse against women is sometimes justified or acceptable.	<input type="radio"/>				
Domestic abuse inflicted by a man on another man, is less serious than domestic abuse inflicted by a man on a woman	<input type="radio"/>				
Men who commit domestic abuse in a same sex relationship are less likely to be arrested than men who commit domestic abuse in a heterosexual relationship	<input type="radio"/>				
If a family member hits you it counts as domestic abuse.	<input type="radio"/>				

Men's Advisory Project: Domestic Abuse Attitudes Questionnaire

4. Use of Services

This section asks some questions about service provision for victims of domestic abuse.

1. If you were a victim of domestic abuse, do you think you would seek help? (Tick as many as apply)

No
 I'd contact a counsellor/psychological service
 I'd tell a friend
 I'd tell my GP
 I'd contact a LGBT organisation (Lesbian Gay Bisexual Transgender)
 I'd contact my church
 I'm not sure what I would do
 I'd contact social services
 I'd tell a family member
 I'd tell a Youth Worker
 I'd contact Women's Aid
 I'd contact the police
 I'd contact the Men's Advisory Project

Other (please specify)

2. Do you think any of the following issues would present an obstacle to you reporting the abuse? (Please tick as many as apply)

Fear of Prejudice
 Unclear of where to go for help
 Embarrassment
 Concern about confidentiality
 Fear of not being believed
 Fear of losing children/home
 Desire to protect the partner/family member who abused you
 No issues would affect my reporting

Any other issues (please list as many as appropriate below)

3. Had you heard of the Men's Advisory Project before participating in this study?

Yes
 No
 Not sure

Men's Advisory Project: Domestic Abuse Attitudes Questionnaire

4. If ringing a helpline as a victim of domestic abuse, would you want the person answering to be any of the following? (tick as many as apply)

No preference
 The same gender as you
 To understand your disability issues
 The same sexual orientation as you
 Around the same age as you
 The same ethnicity as you

Other (please specify)

5. If going for counselling as a victim of domestic abuse, would you want your counsellor to be any of the following? (tick as many as apply)

Around the same age as you
 To understand your disability issues
 No preference
 The same sexual orientation as you
 The same gender as you
 The same ethnicity as you

Other (please specify)

Men's Advisory Project: Domestic Abuse Attitudes Questionnaire

*** 6. Please indicate the extent to which you agree with the following statements:**

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
I am confident that service provision would be tailored to my specific needs if I sought help as a victim of domestic abuse.	<input type="radio"/>				
Service provision should address the specific needs of ethnic minority, disabled, older, and Gay or Lesbian victims of domestic abuse.	<input type="radio"/>				
Male victims have different needs than female victims which should be addressed by service provision.	<input type="radio"/>				
I am aware of all the services available to me if I was a victim of abuse.	<input type="radio"/>				
More education about domestic abuse is required for the general public.	<input type="radio"/>				
Males are less likely to be believed than females when they seek support for domestic abuse victimisation.	<input type="radio"/>				
Male victims should have access to the same range of services as female victims.	<input type="radio"/>				

Men's Advisory Project: Domestic Abuse Attitudes Questionnaire

5. Experience of domestic abuse

The following section asks some brief questions about your experience of domestic abuse.

Domestic Abuse is a pattern of abusive behaviour by one person on another, where they are or have been intimate partners or family members, to gain or maintain power and control over them. It can happen to anyone, regardless of your gender, age, race, sexual orientation or gender. It can take many forms, including physical abuse, sexual abuse, emotional, financial and psychological abuse. You do not have to be living with the partner or family member in order for it to be called domestic abuse.

1. Have you ever had any personal experience of domestic abuse? (tick more than one answer if applicable)

Yes, I have been a victim of domestic abuse

Yes, I have been a perpetrator (i.e. I have committed domestic abuse on someone)

Yes, I have been both a perpetrator and a victim of domestic abuse.

Yes, I grew up with a mother/father who was a victim of domestic abuse.

Yes, I work in a setting where I have dealt with cases of domestic abuse

No

Not sure

I would rather not answer

2. Have you ever received any training to deal with domestic abuse, or about domestic abuse issues?

No

Yes

Not Sure

3. If you answered yes to the question above, please give brief details of this training (including where you received it).

Men's Advisory Project: Domestic Abuse Attitudes Questionnaire

4. Has anyone you know been a VICTIM of domestic abuse? (Tick as many as apply)

A male friend A female colleague No one I know
 A female friend A male family member I would rather not answer
 A current or previous romantic partner A female family member
 A male colleague Not Sure

Other (please specify)

5. Has anyone you know been a PERPETRATOR of (i.e. committed) domestic abuse? (Tick as many as apply)

A male friend A female colleague No one I know
 A female friend A male family member I would rather not answer
 A current or previous romantic partner A female family member
 A male colleague Not Sure

Other (please specify)

Men's Advisory Project: Domestic Abuse Attitudes Questionnaire

6. End of questionnaire: Please read the following information.

Thank you for taking the time to complete this questionnaire and contribute to our research. If you have any comments or questions about the survey please contact Daryl Sweet at daryl@mapni.co.uk or 02890 241929

This questionnaire is part of a larger project which also involves case studies of male victims of domestic abuse. If you are a male who had been a victim of domestic abuse and would like to get involved, please contact Daryl Sweet at daryl@mapni.co.uk, or 02890 241929. You can get a full explanation of what participation involves before agreeing, and can withdraw your participation at any time.

For more information on domestic abuse, you can visit www.mapni.co.uk (for male victims in particular) or www.womensaid.org.

If you or someone you know has been affected by domestic abuse you can contact the Men's Advisory Project at 02890 241929 and info@mapni.co.uk. MAP offers confidential counselling for males experiencing domestic abuse and relationship breakdown as well as anger management for both men and women.

The 24 Hour Domestic Violence Helpline is available to anyone affected by domestic violence throughout the year, and can be contacted at 0800 917 1414.

The PSNI have a number of domestic abuse officers (DAOs) who deal with cases of abuse. Call 0845 600 8000 and ask to speak to your local DAO. Anyone who feels in immediate danger should ring 999. DAO's can point you in the direction minority liaison officers if necessary

The Cara-Friend Gay Helpline number is 02890 322023 (Mon-Wed 7.30-10pm) and the Cara-Friend Lesbian Line is 02890238668 (7.30-10pm)

You can also contact the Samaritans on 08457 909090, or Lifeline on 0808 808 8000, for confidential counselling over the telephone.

6 PARTICIPANT INFORMATION SHEET FOR SERVICE SUPPORT REVIEW

You are invited to take part in a research study. Before you decide if you want to take part, it is important that you understand what participation involves and why the research is being carried out. Please read the following information carefully and discuss it with others if you wish. Part 1 tells you about the purpose of the study and what your participation involves. Part 2 gives you more detailed information about the study. Take time to decide whether or not you wish to take part and please contact us if you would like more information.

PART 1

Why Is The Study Being Carried Out?

This research is examining the experience of male victims of domestic abuse for the Men's Advisory Project in Belfast (MAP). The purpose of the research is to help us better understand the experience of male victims so that we can help improve services and support. Our study will conduct case study interviews with male victims of domestic abuse. One of the themes of this case study will be their experience of any services they have accessed as a victim. Following these case studies we will give each line of service support relevant to domestic abuse an opportunity to respond to these accounts

and to give a statement on their policy and practice in dealing with male victims.

What Will Be Involved If I Participate?

If you agree to take part, a short interview will take place between you and the researcher Daryl Sweet. These can be carried out at the Men's Advisory Project office in Belfast, or over the telephone, and should last no longer than 30 minutes. We will try to arrange this within a couple of weeks of your agreement to participate, and following the interview process your participation will be complete.

During the interview you will be asked a small number of questions about service provision to male victims of domestic abuse. We will inform you in advance if the answers to these questions require any documents (such as policy related documents) so that you are prepared. Once the interview is complete the researcher will briefly go over the data with you to ensure it is accurate before it is reported. The interview notes will be typed onto a computer by the researcher and stored securely. Your name will not be used in the report if you do not wish it to be used; rather you will be referred to as a representative of your organisation.

Participation is completely voluntary and can be freely withdrawn at any time without giving a reason. It is up to you to decide after reading this information sheet. You will be asked to sign a consent form to show you have agreed to take part. Any

travel expenses you incur in getting to and from the interview can be claimed back.

Are There Any Risks In Participating?

There are no known risks involved in participation; the intention of this part of the study is to allow organisations who offer services to give their own accounts rather than relying solely on that of male victims. We will ask you about general issues rather than any personal subjects and will not cover any issues which are likely to be emotionally distressing.

What Is The Deadline For Taking Part In The Study?

We aim to have our service support review completed by the end of June 2010.

Will My Involvement Be Kept Confidential?

Yes, we will follow best legal and ethical practices and all information about you will be handled in confidence. The details of this are included in Part 2.

If the information in Part 1 has interested you and you are considering participation, please read the additional information in Part 2 before making any decision.

PART 2

What Happens If I Don't Want To Carry On With The Study?

If you decide at any point that you do not wish to continue participating, you can freely withdraw from the study and any data collected on you will be destroyed.

What If There Is A Problem?

If you have any concerns or issues you can contact the lead researcher Daryl Sweet on 02890 241929 or daryl@mapni.co.uk, who will do his best to answer your questions. However, if you remain unhappy or if the complaint is about the researcher, you can contact: MAP Management Committee, Cathedral Buildings, 64 Donegall Street, Belfast. BT1 2GT

Will My Taking Part In This Study Be Kept Confidential?

Your organisation or agency will be named in the report, and their policy towards domestic abuse will be mentioned, as this is a necessary part of the review, however it is up to you whether or not you wish to be named as the representative. Your data will be written down during the interview, and once typed onto a computer the written account will be shredded. The computerised account will be held securely on a password protected computer within a locked office and will only be accessible by the researcher.

What Will Happen To The Results Of The Study?

The results will be published in a paper on male victims of domestic abuse in Northern Ireland, in the summer of 2010. Your data will be used as part of a section on the state of service support provision to male victims of domestic abuse.

Who Is Organising And Funding The Research?

The research is being carried out on by the Men’s Advisory Project in Belfast, and is funded by the Department of Health, Social Services, and Public Safety (DHSSPS).

Who Has Reviewed The Research?

This researcher has been reviewed by the Health and Social Care Research Ethics Committee 1. In addition, a steering group of experts has helped design the project to high standards.

Please make sure you understand the above information before you agree to take part in this study. If you have any further questions, please contact Daryl Sweet at 02890 241929 or daryl@mapni.co.uk. If you decide you do want to take part, please contact me to arrange receiving a consent form and a date for the case study interview.

7 SERVICE REVIEW INTERVIEW SCHEDULE (SPECIFIC QUESTIONS VARIED DEPENDING ON AGENCY)

1. Role of agency
2. Policy for identifying, processing and referring male victims of domestic violence
3. Issues raised in case studies which relate to agency –request for response
4. Main challenges facing male victims of domestic abuse from the perspective of the agency
5. How agency response could be improved for male victims
6. How agencies job could be made easier to improve response
7. Other views and opinions

8 SERVICE SUPPORT REVIEW PARTICIPANT CONSENT FORM

Name of Researcher: Daryl Sweet

Title of Project: Male Victims of Domestic Abuse	Please Tick
I confirm that I have read and understand the participant information sheet dated for the above study.	
I have had an opportunity to consider the information, ask questions and had any questions answered satisfactorily	
I understand that my participation is voluntary, and I can freely withdraw at any time without giving a reason.	
I agree to take part in case study interviews for the above research study	
I consent to this interview being audio-recorded	

Name of Participant and Organisation

..... Researcher

Date Date

Signature Signature

Anonymous Research Code.....

