

Male Victims of Domestic Violence

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Intimate partner violence (IPV) or domestic violence (DV) is often framed as a "woman's issue" or "violence against women" generating the perception of males involved in violent relationships as the aggressor and more capable of inflicting injury or causing harm to their partner. Due to this set of beliefs called the "gender paradigm", male victims are often met with disbelief or suspicion when they attempt to gain protection from a female partner, or access services. Male victims may also report difficulty in locating services specific to their needs, as help lines or shelters are targeted exclusively towards female victims. These issues and the implications for male victims will be discussed.

Key Words: domestic violence, male victims, intimate partner violence, gender paradigm

The child who I saw being hit by his mother is three times more likely to become violent in intimate relationships than a child who was not hit. The moment that he hits a woman, it is legislated that he be taken out of the context of his biography and into an automatic legal process in which he will be held absolutely accountable for any violence he committed. He will be defined as a product of patriarchy, and his masculine privilege will account for the sole source of his aggression.

Linda Mills, Insult to Injury (2003, p. 3)

The stereotype invoked when one mentions "domestic violence" is of a bullying, domineering man who is hyper-reactive to jealousy and has a drinking problem. He threatens, assaults and verbally intimidates a non-violent woman-victim. If you ask college students for examples of domestic violence perpetrators, you likely get OJ Simpson or Chris Brown as an answer. Although we may like to believe that such simplistic stereotypes are held only by the uninformed, alas, it is not true. Academics who would bristle at any stereotyping of women or minorities adhere to the "gender paradigm"; that all domestic violence is male perpetrated against hapless female victims, in order to preserve "patriarchy" -male dominance of women. For examples of such thinking see any work by Russell or Emerson Dobash (Dobash & Dobash, 1979; 1988), Walter Dekeseredy (Dekeseredy, 2011; DeKeseredy & Schwartz, 2003) or Mollie Dragiewicz (Dragiewicz, 2008; Dragiewicz & Lindgren, 2009), amongst others. The theory driving this view is a Marxist-feminism perspective developed by Catherine Mackinnon (MacKinnon, 1989) and posits that "sexuality is to feminism what work is to marxism (sic)" (p. 3), hence domestic violence in which a man hits a woman is defined as "violence against women" - plural - a political act. There is no such term for when a woman hits a man and it is rarely used when a woman hits a woman (e.g., Lie, Schilit, Bush, Montague, & Reyes, 1991). The latter examples are more likely to be seen as psychologically driven actions. When data began to surface about female intimate partner violence (IPV) from the national survey data of professor Murray Straus (Straus, 1980), it was quickly dismissed as inconsequential violence, in Michael Johnson's term, "common couple violence" (Johnson, 1995) that was bilateral and where the woman was acting in self-defence (Saunders, 1986; 1988; 2002). Now we know that women assault non-violent male partners more frequently than men assault non-violent female partners.

This "gender paradigm" was consistently reinforced by numerous studies on "male perpetrators" and "female victims", the former drawn from court-mandated treatment groups (e.g., Dutton, 1995); Gondolf, 1999; Saunders, 1992) and the latter from women's shelters (e.g., Johnson, 2008). In short, samples selected on the basis of their own perpetration or victimization and not representative of the community (Straus, 1992b). True believers operating within the gender paradigm do not question the generalizability of such samples; selected by a system that was already operating on the assumption that men were sole perpetrators and women were victims. Johnson, for example, concluded that men were the only perpetrators of what he called "intimate terrorism" (Johnson & Leone, 2005), that is, the use of intimate partner violence (IPV) for instrumental purposes. He came to that conclusion by interviewing women in shelters, taking their descriptions of violence against them as veridical and not asking them about their own use of violence. As Johnson put it "I chose one question to determine whether the husband and/or wife had been violent, as reported by the wife" (Johnson, 2008, p. 20). The implication of this research choice was that Johnson trusted only women's versions of events and based his entire analysis of IPV on this version. Johnson made no assessment of whether the reports he obtained under these conditions were veridical or self-serving

inflations of victimization or enhanced with stories overheard from other shelter clients. He could not know. His methodology reinforced the view that women were the sole and passive victims of domestic violence. Is it any wonder then that "intimate terrorism (IT)" depicted by this sample appears to be solely male perpetrated, and that female IPV involves "violent resistance" (i.e., self defence) in women. Women in shelters are a sample that has been selected because of extreme IPV generated towards them (Straus, 1992b). If you change the sample, however, the conclusion changes. For example, a study by Graham-Kevan and Archer (2003) found that as the authors put it "...the "maleness" of intimate terrorism may well be an artifact of the sampling procedure used. Indeed, if the shelter data is omitted IT shows sexual symmetry" (p. 1261). Eighty percent of the male intimate terrorists found were reported by the shelter sample, even though it constituted only 17% of the their entire sample, (i.e., it was not found in other samples). LaRoche (2005) assessed "intimate terrorism" in the data from the 2004 Canadian National Social Survey, that assessed power dynamics as well as IPV. In those national data, 4.2% of women and 2.6% of men reported being victimized by intimate terrorism. A study of men seeking help from IPV victimization (Hines & Douglas, 2010) found IT patterns were gender reversed for this group compared with a women's shelter group (more about this below). Any study that assesses gender prevalence of IT with a non-shelter sample produces very different results from Johnson. Should it come as a surprise that if you ask only questions about victimization from a pre-selected victim group, you obtain very skewed and misleading results? As far back as 1992 Murray Straus had reported (Straus, 1992b) that shelter samples had 11 times the violence perpetrated against them as did community samples of women.

It is not only a sampling issue however, it is also an issue of not inquiring about women's violence. By way of comparison with Johnson's one sided approach, Renee McDonald and her colleagues asked about violence both toward and by women in shelters (McDonald, Jouriles, Tart, & Minze, 2009). When asked about their own use of violence 67% of these women reported using an act of severe violence themselves against their partner. The women's own violence was an important determinant of child behavior problems. As the authors put it "men's severe IPV seldom occurs in the absence of other forms of family violence" (p. 94), these other forms included both partner-child aggression and mother-child aggression. This finding runs counter to the stereotype of wife assault of a non-violent women because it was a rare study that avoided the "one sided question" issue. We will return to it below.

The mother's use of aggression (i.e., physical child abuse) contributed to the child's externalizing (i.e., acting-out) problems, especially if the child was a boy. Furthermore, in a community sample of 1,615 dual parent households, children were 2.5 times more likely to be exposed to IPV by their mother than by their father (McDonald, Jouriles, Tart, & Minze, 2009). Also, in the huge U.S. National Survey on Child Maltreatment (718, 948 investigations of child abuse), the more frequent perpetrators were biological mothers (58%: Gaudioisi, 2006). Boys are most at risk for physical violence from their mothers. To paraphrase Linda Mills opening quote, this mother-generated externalizing heightens the chance of later use of IPV, at which point, the man is now a "batterer" and a product of patriarchy.

The Reporting Issue

One reason that intimate partner violence toward men is underestimated is that men are less likely to view the IPV as a crime or to report it to police. Men have been asked in surveys if they had been assaulted and if so, had they reported it to police. In a 1985 survey, less than 1% of men who had been assaulted by their wife had called police (Stets & Straus, 1992). In that same survey men as-

saulted by their wife were less likely to hit back than were wives assaulted by their husband. Men were also far less likely to call a friend or relative for help (only 2%). As we shall see below, it is not the case that these assaults were inconsequential. Male socialization diminishes the likelihood of reaching out for help (Goldberg, 1979). Historically, men who were victims of assault by their wives were made into objects of social derision (Davidson, 1977), a practice in medieval Europe called charivari that involved riding the victim around town, seated backwards on a donkey and punching his genitals (Dutton, 1995a). Men are socialized to bury problems under a private veil (Goldberg, 1979), including being the object of abuse from female partners. It is of note that men's reports on surveys of victimization by IPV is less than female reports of perpetration (Desmarais, Reeves, Nicholls, Telford, & Fiebert, 2012a; 2012b). Either the women are bragging or the men are in denial, or both.

The One Sided Question Issue

We showed above how Johnson's use of a one-sided type of question (i.e., asking women in shelters only about violence done to them) led to his erroneous conclusions about "intimate terrorism". This problem has also afflicted surveys of IPV that inquire only about victimization. The National Survey of Violence Against Women (Tjaden & Thoennes, 2000) asked a representative US sample about "crime victimization." Of course, the use of that filter suppresses reporting because it assumes respondents will define the abuse as a crime. Straus (1999) has shown that removing this filter by asking about specific behaviors used in response to conflict increases reporting rates of abuse by a factor of 16, because it asks respondents to simply endorse a specific act (in terms of whether the individual did it or had it done to them) rather than define the act depicted as abuse. However, it also produces gender rates of IPV that are identical, leading to criticism of the scale by those who wish to screen out evidence contradicting the gender paradigm (Straus, 1992a). Apart from filters, there is another serious problem, with asking one-sided questions about IPV; bilateral IPV is missed.

Bilateral IPV is where both members of the couple use violence. Five large scale surveys that asked about both victimization and perpetration found that the most common form of IPV was bilateral (two way IPV), matched for level of severity (see Table 1). Of the remaining unilateral cases, 70% were perpetrated by women, only 30% by men (Stets & Straus, 1989; Whitaker, Haileyesus, Swahn, & Saltzman, 2007). This finding has the following implication for one sided victimization surveys; about 75% of the women reporting victimization were also perpetrators. This is easily derived by taking the number of women who report victimization on a survey as a denominator (i.e., those who would have reported victimization to a one-sided survey) and those who report bilateral perpetration as the numerator (i.e., those who reported perpetration as well as victimization). The actual results produced are 84% for cohabiting couples and 73% for married couples (Stets & Straus, 1989). That is the percentage of victimized women who were also perpetrators. In the Whittaker et al. survey (2007), this percentage was 77%. For men in the Stets and Straus study, the corresponding percentages were 58.5% (married) and 59.6% (co-habiting). It's less relevant for men because no surveys have ever solely focused on IPV victimization in men. This recalculation also shows how bilaterality of IPV was missed by one sided inquiries.

Table 1
Incidence of Intimate Partner Violence in Surveys

		IPV Reports ¹ (%)	Male² (%)	Female ³ (%)	Bilateral (%)
Stets & Straus, 1989 National FV Survey (N=5,242)	Married	15	15.6	35.6	38.8
	Cohabiting	35	12	32.9	45.2
Whittaker, et al. 2007 National Longitudinal Study on Adolescent (18-28) Health (N=11,370)		23.9	28.7	71.3	49.2
Williams & Frieze, 2005 National Comorbidity Study (N=3,519)		18.4	21.6	28.7	49
Caetano, et al., 2008 National Survey of Couples (N=1,635)		13	14.6	25.6	59.7
Morse, 1995 National Youth Survey 1992 (N=1,340)		32.4	16	30	47.4

¹ The percentage of IPV reports from the total population examined in the survey. Remaining data are expressed as a percentage of this initial IPV group.

Effects on Male Victims

The gender paradigm stereotype also holds that female violence is less serious, only what Johnson calls "common couple violence" (Johnson, 1995). In fact, the data again say something else. It was simply that earlier research was driven by a paradigm that avoided asking the right questions of men. When these questions are asked, the results are surprising. An emergency clinic in Philadelphia found that 12.6 percent of all male patients over a thirteen-week period (N=866) were victims of domestic violence (Mechem, Shofer, Reinhard, Horing, & Datner, 1999). These patients reported having been kicked, bitten, punched, or choked by female intimate partners in 47 percent of cases, and in

² Males engaged in more severe acts of violence (e.g., male minor, female none; male severe, female none; male severe, female minor)

³ Females engaged in more severe acts of violence (e.g., female minor, male none; female severe, male none; female severe, male minor)

37 percent of cases reported a weapon being used against them. The authors observe that the numbers would have been higher except they had to stop counting after midnight and screened out "major trauma" cases, which could have upped the proportion injured by female partners. Note that many emergency clinics ask women but not men about potential domestic violence origins for injuries. An emergency clinic study in Ohio found that 72 percent of men admitted with injuries from spousal violence had been stabbed (Vasquez & Falcone, 1997). The authors report that burns obtained in intimate violence were as frequent for male victims as for female victims.

Coker et al. (2002) reanalyzed data from the NVAW survey (N=6,790 women and 7,122 men) to assess associations between physical, sexual, and psychological abuse and current and long-term physical and psychological effects in men and women. Results indicated that psychological and physical abuse were associated with much the same outcomes and had similar effects for men and women. The authors cautioned that it is possible that male victims were also perpetrators and their mental health status resulted from inflicting abuse rather than from being victimized. Interestingly, they did not present this hypothesis for women.

The reanalysis of the Canadian General Social Survey data by Laroche (2005), based on a sample of 25,876, also strongly refutes the idea that males do not suffer ill effects from intimate partner violence. It is of interest that, though not all "victim" data in that survey were available for men, what was available indicated great similarity in male and female victimization. Laroche (2005) reported that 83% of men who "feared for their life" did so because they were unilaterally terrorized by their female partner compared to the 77% of women who were unilaterally terrorized. Of the terrorized men, 80% reported having their everyday activities disrupted (compared to 74% for terrorized women), 84% received medical care (the same rate as for terrorized women), and 62% sought psychological counseling (63% for women: see Table 8, p. 16). Hence, in an immense nationally representative sample, victim reactions for abused men were virtually identical to those of abused women. It was simply that earlier research was driven by a paradigm that avoided asking the right questions of men.

Men who are victims of IPV exhibit negative psychological symptoms, in addition to possible physical injury (although, on average men are less likely to sustain injury compared to women: Archer, 2000). In a multi-site study of 3,461 male university students, IPV victimization was associated with Posttraumatic Stress (PTS) symptoms. With more severe IPV victimization associated with a greater severity of PTS symptoms (Hines, 2007). Additional support of this finding was reported in a clinical sample of men. Men who had sustained common couple violence were more likely to meet the clinical cut-off for PTSD compared to men who had not sustained IPV (8.2%; 2.1%), but the group with the highest rates of PTSD were men who sustained intimate terrorism (57.9%: Hines & Douglas, 2011)

After years of studies of battered women drawn from transition houses for women, a set of studies were finally done on men seeking help for IPV victimization. Using a sample of men contacting the New Hampshire domestic violence hotline, the only one in North American for men, Denise Hines (Hines, Brown, & Dunning, 2007) finally provided a view of male victims of IPV. Hines and Douglas (2010) reported that in this male victim sample, 20% had experienced extreme violence (e.g., choking, using a knife, burning with scalding water, targeting of their genitals) during attacks, and that 95% of the female perpetrators used controlling acts consistent with Intimate Terrorism

(e.g., death threats, threats to the family pet, display of weapons, smashing things, threats of using the criminal justice system—calling the police and lodging a domestic violence complaint, using the court system to obtain sole custody, etc.). Seventy eight percent of the men were injured (Hines), 2007 sustaining on average eleven injuries. Hines and Douglas (2011) used a community sample as controls. In the community sample they found that CCV was the most common form of IPV. However, with the sample of help-seeking men, "a very different picture emerged" (p. 51). Female partners of these men used 5-6 times the frequency of physical and severe psychological aggression of the men themselves (by the men's reports) and 5-6 times the controlling behaviors. Rates of their own use of IPV by the help seeking men were similar to those reported by shelter women in the few studies that reported these data (e.g., McDonald et al., 2009; Hines & Douglas, 2010,). They constituted a virtual mirror image (i.e., gender reversal) of the female victim samples reported by Johnson. When they sought help from a local DV program, 64% of these abused men were told that they were the "real batterer." The gender paradigm never acknowledges the existence of male victims, in part, because shelters for men (and therefore, samples of male victims) have never existed.

The Criminal Justice Solution

Criminal justice practice requires a perpetrator and a victim, that's how the world is divided, so it is no surprise that bilaterally violent couples will be divided in this manner by police intervention. Deborah Capaldi and her colleagues performed the essential study on this matter (Capaldi et al., 2009). As part of the ongoing Oregon Youth Survey, Capaldi et al. assessed 150 couples in late adolescence and early adulthood. Bilaterally violent couples whose level of IPV rose during one event, called the police who then arrested the man (in 85% of cases). It should be pointed out that the man's level of aggression was higher on that incident, but the IPV pattern preceding that event had been mutual and matched for severity. Brown (2004) found that men were more likely than women to be arrested and prosecuted for IPV. For example, in cases where neither partner sustained injury, men were over 15 times more likely than females to be charged (61% vs. 3.8%). Henning and Renauer (2005) found that men were more likely to be arrest compared to women, even when other factors were controlled (e.g., prior arrests). Men also faced harsher legal ramifications post-arrest, in this sample 85% of men, but only 53.5% of women who were arrested were prosecuted (Henning & Renauer, 2005).

Men that were suspected of being perpetrators of violence are treated more harshly by the criminal justice system, but so are men who reach out for protection. In reviewing current research, Russell (2012) found that men were less likely to receive a protection order from their female partner. This supports the claim that male victimization is not taken as seriously in courts, as these men were not seen as requiring protection at the same rate as women. Police and criminal justice professionals are steeped in the gender paradigm, it is part of police training. When these biases are added to the male reluctance to report IPV, it is easy to see why any research based on criminal justice statistics is misleading; it underestimates both bilaterality and female perpetration.

Perceptions of Domestic Violence

Studies of lay persons (Sorenson & Taylor, 2005) and psychologists (Follingstad, DeHart, & Green,

2004) reveal that the stereotype created by the gender paradigm is pervasive; both groups view an identical action when committed by a man as more abusive and more likely to require police intervention. Male victimization is not viewed to be as serious as female victimization. Regardless of injuries sustained, or other negative outcomes, society views IPV perpetrated by a women towards a man as less dangerous and less potentially harmful to the victim (see, White & Dutton, 2013).

Gender stereotypes profoundly affect our perceptions of the seriousness and preferred outcomes of domestic violence. A random-digit dialed survey of 3, 679 residents of Los Angeles (Sorenson & Taylor, 2005) found that actions are more likely to be considered abusive by the general public if performed by males. This was true across all sociodemographic groups and includes what we normally would call "psychological abuse", not just physical abuse. Furthermore, respondents deemed the same action when performed by a man as actionable (i.e., "should be illegal"). This included acts such as "punch" and "pressure for sex."

Of perhaps greater concern is that Follingstad et al. (2004) found that this gender bias was also true of psychologists. Two scenarios describing the context and psychologically abusive behaviors with the genders reversed were given to 449 clinicians (56% male), with a median age of 52. Psychologists rated male perpetrated behaviors as more abusive and severe than a female's use of the same actions. Contextual factors (e.g., frequency/intent/perception of recipient) did not affect this tendency. The items rated as significantly more abusive if performed by a man included "made to account for whereabouts at all times", "would not allow to look at members of same sex", "threatened to have committed to an institution" and "made derogatory comments." The significance on these items was independent of the sex of the psychologist. In both the Sorenson and Follingstad studies, identical behaviors were more likely to be judged as abusive when done by a male to a female.

As Follingstad et al. concluded, "the stereotypical association between physical aggression and males appears to extend to an association of psychological abuse and males" (p. 447). Unfortunately this sometimes leads to serious problems. Coontz, Lidz and Mulvey (1994) found that clinical predictions of dangerousness made in psychiatric emergency rooms consistently underestimated female dangerousness. Predictions that a male would not be violent were correct 70% of the time, but for females, they were correct only 55% of the time. Skeem and his colleagues (2005) had 147 clinicians assess 680 patients in a psychiatric emergency room for risk of future violence. Mental health professionals of both genders were "particularly limited in their ability to assess female patients' risk of future violence" (p. 173). In fact the false negative rate for female patients (i.e., the rate at which one was judged to be low risk but subsequently re-offended) was double that of male patients. The criterion for violence was physical violence: the patient had to have been reported to have "laid hands on another person with the intent to harm him or her, or had threatened someone with a weapon in hand" (p. 178). This finding was true across all professional groups and was unrelated to type of violence. That is, the finding occurred for general violence and for severe violence. In the MacArthur Risk Assessment study of psychiatric patients released into the public, Robins et al. (1987) found that women were just as likely as men to be violent during the first year after discharge. Robins and her colleagues attributed the underestimation of women's violence to it being less visible "since it occurs disproportionately in the home with family members" (p. 182).

Changes towards societal acceptance of male- and female-perpetrated IPV have moved at a discrepant rate. Over a 26-year period (from 1968 to 1994) the approval of male-perpetrated violence towards a female partner decreases significantly, from 20% to 10%, whereas rates of approval of female-perpetrated IPV remained consistent (at 22%) over this same period of time (Straus, Kaufman Kantor & Moore, 1997). The authors state that efforts condemning female-perpetrated violence did not exist to a similar degree as efforts to reduce male-perpetrated violence.

The Custody Issue

The gender paradigm has simply played havoc with fairness in custody decisions. In books designed for custody assessors, men have been portrayed as the only parent requiring assessment for violence potential to their children, that abusers (who are only men) will lie during these assessments and that abusive men will be especially litigious in court (Bancroft & Silverman, 2002; Jaffe, Johnston, Crooks, & Bala, 2008; Jaffe, Lemon, & Poisson, 2003). Jaffe et al. (2003) claim "30-60% of children whose mothers had experienced abuse were themselves likely to be abuse" (p. 30). The actual overlap is about 4-6% and that is only when spanking is counted as physical child abuse (Appel & Holden, 1998). Jaffe et al. generalized his conclusions from a women's shelter sample, Bancroft from a court mandated group of male perpetrators. Evaluators reading these books will be primed to suspect only the male and to expect that male to lie. It's a blueprint for a witch hunt and is not supported by the data. The present senior author has strongly critiqued these specific papers (Dutton, 2005; 2006; Dutton, Hamel, & Aaronson, 2010; Dutton & Nicholls, 2005). It is appalling that such a wrongheaded view should impact on custody decisions. In view of the fact that there is not a shred of scientific evidence to support the gender paradigm misinformation, these writers should be exhorted to recant and set the record straight.

A study of 135,573 child maltreatment investigations conducted by Health Canada, and published by the National Clearing House on Family Violence (Trocme et al., 2001) examined physical abuse, sexual abuse, neglect, emotional maltreatment and "multiple categories" within the general population. Cases of alleged abuse were further divided into substantiated, suspected, and unsubstantiated categories. Substantiation rates did not, in general, vary by gender of perpetrator and ranged from 52 to 58%. Compared to biological fathers, biological mothers were found more likely to perpetrate child physical abuse (47% vs. 42%), neglect their children (86% vs. 33%), engage in emotional maltreatment (61% vs. 55%), and contribute to multiple categories (66% vs. 36%). Biological fathers are more likely perpetrators of child sexual abuse (15% vs. 5%).

A second study, using an even larger sample of 718,948 reported cases of child abuse, was conducted by the United States Administration for Children and Families (Gaudioisi, 2006) and reported that, in 2005, women (58% of the child abuse perpetrators) were upwards of 1.3 times more likely to abuse their children than were men. When acting alone, biological mothers were twice as likely to abuse their children as were biological fathers, and biological mothers were the main perpetrators of child homicide. Also, as described above, McDonald et al. (2006) found that risks of child exposure to violence were 2.5 times higher for female- (mother-)perpetrated violence than male- (father-)perpetrated violence. Thus, again, the best research data, from the largest and most rigorous studies tell a very different story from that related by Jaffe et al. and Bancroft.

Conclusion

Both male victims and male perpetrators have a more difficult experience in the aftermath of IPV. Male perpetrators receive harsher legal penalties, and are judged as more capable of inflicting injury or instilling fear in their female partner. This is true even when they have been part of a bilateral IPV pattern. Male victims also fare worse when attempting to access services, as males are more likely to

be labelled the aggressor and to be treated with suspicion and injuries they have sustained are likely to be minimized. Custody assessments are misdirected, focusing on the male as the sole source of threat to children for physical abuse. A major revision of our thinking is required, one that is empirically based and can to alter an emotionally tinged stereotype.

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