ORIGINAL ARTICLE

# **Male Victims of Domestic Violence**

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Abstract Most studies regarding DV focused mainly on female victims. To gain more insight into the problems male victims encounter, this study investigated the characteristics of this group in the Netherlands. Adult male victims of DV filled out an online questionnaire regarding the characteristics of the abuse (N=372). When men are victims of DV, they are physically as well as psychologically abused with the female (ex)-partners often being their perpetrator. The most important reason for men not to report the abuse is the belief the police would not take any action. Our findings suggest society should be aware that men are also victims of DV and feel the need to talk about it and desire support.

Keywords  $DV \cdot Male$  victims  $\cdot$  Intimate partner violence  $\cdot$  Abused men

# Male Victims of DV

Domestic violence (DV) can be described as a pattern of abusive behaviors by one or both partners in an intimate relationship (e.g. marriage, dating, family, friends and cohabitation). DV has been increasingly identified as a public health problem because it can lead to an increased risk of poor health, depressive symptoms, substance use and development of a chronic disease such as chronic mental illness

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Department of Epidemiology, Documentation and Health Promotion, Municipal Public Health Service, Amsterdam, the Netherlands and injury (Coker et al. 2002). The impact is hard to deny when realizing that in the Netherlands 45 % of all inhabitants have been a victim of DV at least once in their lives and 11 % of this group suffers permanent physical damage (van Dijk et al. 1997).

DV can be hard to recognize because a lot of DV takes place behind closed doors. Research dealing with DV has also focused mainly on women as victims and men as perpetrators (Barber 2008; Crawford-Mechem et al. 1999; van Dijk et al. 1997). In addition, social factors support the victimization of women. When men and women were asked to rate violent male-female interactions, they perceive maleto-female aggression as more negative than female-to-male aggression (Arias and Johnson 1989). Nonetheless, there are signs that women are at least as violent as men (Straus 1999) and that men experience similar types of physical abuse as women (Du-Plat Jones 2006; George and Yarwood 2001). Some studies have shown that women would be more likely to use physical aggression than men (Archer 2000, 2002). Others have demonstrated that women tend to use weapons and forms of assault that do not need physical strength like psychological abuse (Straus 1980).

The view of men as victims of DV is not studied as much as it is for women. Also DV against men often goes unrecognised since men are probably less likely than women to report such incidents for fear of embarrassment, fear of ridicule and the lack of available support services (Barber 2008).

Because of the current lack of research regarding male victims of DV, more insight in the characteristics of DV against men is warranted. In the present study we asked adult male victims in the Netherlands to complete a questionnaire about the characteristics of the abuse they experienced (e.g. physical and/or psychological) and we solicited information on their tendency to talk about the abuse and the reasons to report the violence to the police.

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## Method

Between May 2008, and August 2009, male victims of DV  $(\geq 18$  years of age) in the Netherlands were invited to answer a questionnaire on the internet we specially developed for this study. For this purpose, we developed a website which linked to the questionnaire. Attention for the website was drawn by advertisements in national newspapers and magazines, and by a single radio- and/or television broadcast. The questionnaire consisted of 15 questions including age and ethnicity of the victim, the identity and gender of the perpetrator, frequency, duration and type of violence, and if alcohol and/or drugs had been used by either the perpetrator or the victim before or during the abuse. Furthermore, we asked if the victim discussed the abuse with anyone such as their general practitioner, relatives, social services or the police, and whether they reported the violence to the police. Finally, we investigated their need to seek anonymous information by helpline services or the internet. At the end of the questionnaire, an opportunity was provided to leave any additional comments. Also the participants had the opportunity to guit the guestionnaire prematurely and participation in the study was anonymous.

## Statistical Analysis

Descriptive statistics like frequency distributions were used to summarize the data. Furthermore, differences in characteristics between male victims who talked with the police about the violence and those who did not were tested using chi-square test and logistic regression analyses. Results of the regression analyses were shown as odds ratio (OR) and corresponding 95 % confidence interval (CI). The calculated OR's reflect the chance that distinct subgroups of victims more often talk to the police about the violence (for instance victims of physical abuse). In the case that an OR is >1 and the corresponding p-value is <0.05, the chance is significantly increased. If an OR is <1 and the corresponding p-value is <0.05, the chance is significantly decreased. Similar logistic regression analyses were performed to compare male victims who reported the violence to the police and those who did not. Statistical analysis was performed with SPSS for Windows version 17.0 (SPSS Inc, Chicago, Illinois).

# Results

# Characteristics of the Study Population

A total of 380 men participated in the study and filled out the questionnaire. Eight forms were incomplete and were excluded from the analysis. The characteristics of the study population are listed in Table 1. In 96 % of the cases the perpetrator was the (ex)-partner. Nearly half, or 46 %, of the victims were abused in the previous year and 46 % of the victims were abused more than 10 times a year. More than three quarters of the victims (79 %) were abused for longer than 1 year, and half of this group for more than 5 years. Most victims were both emotionally and physically abused (67 %).

# Types of Violence

The most common forms of physical violence the male victims encountered were hitting, pelting or stabbing with

Table 1	Characteristics	of the	study	population
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	N=372	
Age		
18–24 year	16	(4 %)
25–34 year	63	(17 %)
35–44 year	108	(29 %)
45–54 year	107	(29 %)
55–64 year	56	(15 %)
≥65 year	21	(6 %)
Origin		
Domestic	279	(75 %)
Western allochtonous	63	(17 %)
Non-western allochtonous	29	(8 %)
Perpetrator*		
Female (ex)-partner	335	(90 %)
Male (ex)-partner	23	(6 %)
Family member	41	(11 %)
Other	6	(2 %)
Period of violence		
<1 year ago	170	(46 %)
1–5 year ago	109	(30 %)
>5 year ago	88	(24 %)
Frequency of violence		
<5x/year	109	(30 %)
5–10x/year	88	(24 %)
>10x/year	172	(46 %)
Duration of violence		
<½ year	40	(11 %)
<sup>1</sup> / <sub>2</sub> -1 year	36	(10 %)
1–5 year	145	(40 %)
>5 year	141	(39 %)
Type of violence		
Solely emotional violence	92	(25 %)
Solely physical violence	32	(9 %)
Emotional and physical violence	248	(67 %)

\*Multiple options could be selected

an object, kicking, biting, seizing the throat and scratching. In 54 % of the cases involving physical violence, the offender used an object, predominantly household items such as chairs, knives, vases and tableware. Psychological abuse was defined as exposing a person to behavior that may result in psychological trauma, including anxiety, chronic depression, or post-traumatic stress disorder. The most common forms of psychological violence were bullying, ignoring, threatening, blackmailing and financial harm. Children were often used as means of power, and those victims felt powerless out of fear of losing contact. Approximately 23 % of the respondents (n=85) indicated that shortly before or during the violence, alcohol and/or drugs were involved. In these cases, alcohol and/or drugs were mainly used by the offender (60 %) but also by the victim (5 %) and by both the victim and the offender (35 %).

# Contact with the Police About the Violence

Less than 32 % of the victims spoke to the police about the violence and only 15 % of the victims officially reported it. Table 2 shows some characteristics of the victims who did talk or report to the police, compared with those who did not. There were differences between the groups in terms of type of violence and use of an object by the perpetrator. Exposure to physical violence appeared to be an independent factor, which determined whether male victims talk to

the police about the violence (OR=2.2, 95 % CI: 1.1–4.2, P=0.021). In cases where the offender used an object, victims more frequently reported to have talked to the police (OR=2.0, 95 % CI: 1.3–3.3, P=0.004, respectively) or reported the abuse to the police (OR=2.9, 95 % CI: 1.6–5.4, P=0.001) in comparison with victims who were not abused with an object. Ethnicity, duration and frequency of the abuse as well as exposure to psychological violence were not independently associated with police contact.

Reasons Whether or Not to Talk and Report to Police

Table 3 shows the motivations of victims to talk and/or report the DV to the police. The reasons reported to be most important were wishing the police could stop the violence (42 %), the fact there are children involved (42 %), and a need for help (40 %). The reason reported for failing to talk to the police or report the DV were fear of not being taken seriously (49 %), shame (31 %), or the belief the police cannot do anything (35 %). An important motive to report the DV was wanting the abuse to stop (58 %). Other reasons to report the DV were advice of the police or judicial reasons such as divorce. Motives not to report the DV were the belief the police (17 %), or fear of revenge (19 %). At the end of the questionnaire, there was an opportunity for open-ended responses. It is noteworthy that 33 men pointed

 Table 2 Ethnicity and type of violence in relation to contact with the police

	Talked to police $(n=117)$	Did not talk to police $(n=251)$	P-value	Report to police $(n=55)$	No report to police $(n=306)$	P-value
Ethnicity						
Allochtonous	28 (24 %)	64 (26 %)	0.7	43 (78 %)	76 (75 %)	0.6
Domestic	89 (76 %)	186 (74 %)		12 (22 %)	230 (25 %)	
Frequency of vio	lence					
≤10x/year	60 (51 %)	135 (54 %)	0.6	31 (56 %)	161 (53 %)	0.7
>10x/year	57 (49 %)	113 (46 %)		24 (44 %)	142 (47 %)	
Duration of viole	nce					
≤5 year	77 (68 %)	141 (58 %)	0.056	37 (71 %)	176 (59 %)	0.09
>5 year	36 (32 %)	104 (42 %)		15 (29 %)	123 (41 %)	
Physical violence	•					
No	15 (13 %)	75 (30 %)	< 0.001	6 (11 %)	82 (27 %)	0.012
Yes	102 (87 %)	176 (70 %)		49 (89 %)	224 (73 %)	
Psychological vic	olence					
No	8 (7 %)	24 (10 %)	0.4	3 (6 %)	27 (9 %)	0.4
Yes	109 (93 %)	227 (90 %)		52 (94 %)	279 (91 %)	
Use of objects						
No	49 (42 %)	158 (63 %)	< 0.001	20 (36 %)	185 (61 %)	0.001
Yes	68 (58 %)	92 (37 %)		35 (64 %)	120 (39 %)	

Four men did not report whether they discussed the violence with the police and 11 men did not answer whether they reported the violence to the police; these cases were excluded from the analysis

Table 3	Reasons	to	talk	and	report	to	police, or no	t
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		No. of subjects		
Total no. of subjects who talked to police	117			
Reasons to talk				
Hoping police stops the violence	49	(42 %)		
Further help	47	(40 %)		
Children	49	(42 %)		
Other	24	(21 %)		
Total no. of subjects who did not talk to police	251			
Reasons not to talk				
Police cannot do anything	87	(35 %)		
Shame	79	(31 %)		
Fear violence aggravates	46	(18 %)		
Fear not taken serious	122	(49 %)		
Other	47	(19 %)		
Total no. of subjects who reported to police	55			
Reasons to report				
Hope violence stops	32	(58 %)		
Better in case of divorce	15	(27 %)		
Advice of police	19	(35 %)		
Other	13	(24 %)		
Total no. of subjects who did not report to police				
Reasons not to report				
Fear violence aggravates	53	(17 %)		
Police does nothing	125	(41 %)		
Fear of revenge	58	(19 %)		
Other	61	(20 %)		

out that when trying to report the DV to the police, they refused to do anything.

#### Environment

We also asked the victims if they had discussed the violence with other people in their surroundings. Sixty-two percent of the men said they shared their experiences with a relative, colleague, family member or doctor. The most important reasons for sharing this information were good confidence (31 %), in order to be referred to aid agencies (22 %), oath of secrecy (12 %), hoping the violence would stop (24 %) or other reasons (9 %). Forty-two percent of the victims anonymously sought information about DV on the internet.

This study demonstrated that male victims of DV are often

# Discussion

physically. The majority of the male victims reported feeling they could not talk about the DV to the police, and those who did report the abuse reported not being taken seriously or were accused themselves. According to some male victims, the police even refused to cooperate when the victim wanted to report the violence. Although the male victims did not talk about the DV to the police, 62 % of the victims shared their experiences with people in their surroundings.

We found that men are significantly more likely to talk to the police when they have been physically attacked and when they have been assaulted with an object. Psychological violence is not visible and therefore more difficult to prove. This difficulty might be a reason why victims do not report psychological abuse to the police. Our finding that women often use an object in their forms of attack corresponds with other studies (Roberts et al. 1996; Straus and Gelles 1986). Although it is known that violence in couples can be bi-directional with both individuals alternating between victim and perpetrator (Carney et al. 2007; Straus et al. 1980) and that there might be a gender symmetry and asymmetry in DV (Johnson 2006) with a broad spectrum of abusive behaviours, we only focused on unilateral violence against men. Unfortunately we did not ask for reciprocal violence.

Other conditions known to predispose victims towards DV are alcoholism, depression, physical disability, past history of abusive relationships, rigid partner roles, childhood abuse of the perpetrator and external stressors like poverty and loss of work (Bland and Orn 1986; Coleman and Straus 1983; Nosek et al. 1997; Straus and Gelles 1986; Swan and Snow 2003). In male homosexual relationships a diagnosis of HIV can also be an extra stress (Relf 2001; Roberts et al. 1993). We did not focus on homosexual relationships but 6 % of the victims said to be abused by a male (ex)-partner. Given the prevalence of homosexuality among men in the Netherlands (61 %) (Kuyper 2006) it appears this population is well represented. More research could be done to get more insight in interpartner violence between men.

### Future Research

Although former studies already showed that men are also victims of DV (Crawford-Mechem et al. 1999; Goldberg and Tomlanovich 1984; Henning and Feder 2004; Hines et al. 2007; Muelleman and Burgess 1998; Reijnders et al. 2005; Straus 2004) it is remarkable that society is still not adapted to offer men the same services as women. In the Netherlands, a recent pilot has started to offer shelter to male victims of DV to get more insight in this issue. It is assumed that social services and professionals in health care should be more aware of male victims of DV. Although health care professionals are now being trained to screen victims of DV,

the training is mainly focused on children and female victims (Lo Fo Wong et al. 2006) Education to recognize male victims of DV and having possibilities to refer them to services have not been brought to a point of attention. Most screening tools are developed for women and children (Feldhaus et al. 1997; Lo Fo Wong et al. 2006; Straus 1979; Straus et al. 1996) and although some think that these methods can be used for adults of both sexes (Shakil et al. 2005) it might be interesting to develop a valid, brief screening tool specifically for men. More research should be done in the future to investigate how a screening tool for men should differ from screening tools for women.

One must realize that a system that has been set up to help female victims of DV is probably unavailable to a substantial part of the population. Social agencies dealing with family violence might not meet male victims because they focus primarily on female victims. Based on the number of male victims in our sample who reported the police did not take them seriously, it is understandable how the male victims may easily feel isolated and do not know where to go for information or support.

### Limitations

There are several limitations in this study. Because male victims of DV were expected to be hard to reach and persuaded to participate, the internet was considered to be a good medium to ensure anonymity. Unfortunately, this method of assessment restricted the sample to those victims whose attention was drawn by an advertisement in the newspaper or the television and/or radio broadcast. In addition, it was necessary for the victims to connect to the internet to complete the questionnaire. Likewise, 2 % of the respondents (n=8) did not complete the questionnaire. Also it cannot be supposed that the victims who participated in the present study have the same characteristics as the victims that did not participate. Furthermore, it is hard to be sure that the 380 men who completed the questionnaire were actually victims of DV. Nevertheless, most men reported a lot of additional information in the questionnaire about the violence which indicated the truthfulness of the respondents and gave a better view of the impact of the problems they encounter.

In conclusion, men can be victims of DV and when women are physically violent they are prone to use objects to threaten or attack their male partners. Men do not report the violence to the police out of fear of not being taken seriously although they do talk to people in their surroundings about it. It is important to make social services (especially the police) aware that men are also victims of DV, and a lot of work has to be done to provide male victims the same support as female victims.

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