

# Exploring Help Seeking Experiences of Male Victims of Female Perpetrators of IPV

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**Abstract** Intimate partner violence (IPV) is a common phenomenon worldwide. However, there is a relative dearth of qualitative research exploring IPV in which men are the victims of their female partners. The present study used a qualitative approach to explore how Portuguese men experience IPV. Ten male victims (aged 35–75) who had sought help from domestic violence agencies or from the police were interviewed. Transcripts were analyzed using QSR NVivo10 and coded following thematic analysis. The results enhance our understanding of both the nature and dynamics of the violence that men experience as well as the negative impact of violence on their lives. This study revealed the difficulties that men face in the process of seeking help, namely differences in treatment of men versus women victims. It also highlights that help seeking had a negative emotional impact for most of these men. Finally, this study has important implications for practitioners and underlines macro-level social recommendations for raising awareness about this phenomenon,

including the need for changes in victims' services and advocacy for gender-inclusive campaigns and responses.

**Keywords** Men · Victims · Intimate partner violence · Experiences

Intimate partner violence (IPV) is a social and public health problem, as well as a violation of human rights (e.g., Centers for Disease Prevention and Control 2015). It is defined as “a pattern of abusive behavior in any relationship that is used by one partner [or a former partner] to gain or maintain power and control over another intimate partner. It can be physical, sexual, emotional, economic, or psychological actions or threats of actions that (...) intimidate, manipulate, humiliate, isolate, frighten, terrorize, coerce, threaten, blame, hurt, injure, or wound someone” (US Department of Justice 2015). IPV occurs on a continuum and can vary in frequency, severity and impact (Centers for Disease Prevention and Control 2015; McCarrick et al. 2015).

Worldwide, victimization against women by their intimate partners is a well-known phenomenon (e.g., WHO 2013). However, IPV against men by women has received little attention, both within the scholarly literature and the popular media (e.g., Costa et al. 2015; Hines and Douglas 2009). Published data, mainly from English speaking countries, estimates that men are victims of IPV in 25 % of the reported cases (e.g., Costa et al. 2015). A review of more than 80 studies on physical violence between heterosexual partners established that men comprised 35 % of those victims who were injured by their partner and 39 % of those individuals requiring medical treatment (Archer 2000). Studies published from 2000 to 2010 also found that approximately 1 in 5 men (19.3 %) have experienced physical violence in an intimate relationship (Desmarais et al. 2012). More recently, the US National Intimate Partner and

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Sexual Violence Survey (Breiding et al. 2014) indicated that 28.5 % of men had experienced rape, physical violence, and/or stalking by an intimate partner in their lifetime. Nonetheless, IPV against men has received little attention in the literature.

Moving beyond prevalence studies, there is an emerging body of research demonstrating that men experience significant psychological and physical symptoms as a result of IPV. In particular, associations have been found with PTSD, depression, suicidal ideation, psychosomatic symptoms, high blood pressure, and general psychological distress (e.g., Fergusson et al. 2005; Hines and Douglas 2009; Randle and Graham 2011; Reid et al. 2008). Consistent with these findings, Hines and Douglas (2014) concluded that male IPV victimization represents a risk to men's health.

However, due to a set of premises known as the gender paradigm, IPV usually is viewed as male-perpetrated abuse against female victims (Dutton and Nicholls 2005). Consequently, men are generally more reluctant to disclose their victimization and less likely than women to seek help (e.g., Archer 2000; Barber 2008; Choi et al. 2015; Hamel 2009; McCarrick et al. 2015; Tjaden and Thoennes 2000; Tsui et al. 2010). The gender paradigm, associated with both internal (e.g., denial; fear of not being believed; shame; internalized gender stereotypes; masculinity norms; emotional turmoil and ambivalence) and external barriers (e.g., dearth of support services; bias; suspicious perpetrator) are likely to prevent male victims of IPV from seeking help (e.g., Barber 2008; Cook 2009; Douglas et al. 2012; Machado et al. 2016; Tilbrook et al. 2010). In fact, when male IPV victims do seek help to address IPV (e.g., domestic violence agencies), they frequently report negative responses, such as being turned away, being ridiculed, and being accused of perpetrating the violence themselves and/or they are referred to a batterer intervention program (e.g., Cook 2009; Douglas and Hines 2011; Drijber et al. 2012; Hines et al. 2007; Machado et al. 2016; Tsui 2014). In addition, men have reported that locating specific services to meet their needs is not an easy task and that some services, such as helplines or shelters, work with female victims exclusively (Dutton and White 2013).

Moreover, social perceptions of the severity of IPV are profoundly affected by gender stereotypes and are consistent with gender norms (Dutton and White 2013). Generally speaking, male victimization is not perceived by society to be as severe and harmful – both physically and psychologically – as female victimization (Dutton and White 2013).

Qualitative methods can allow a more detailed and contextualized understanding of men's experiences (e.g., Allen-Collinson 2009; McCarrick et al. 2015). Although, men's experiences are underrepresented in the IPV literature, some qualitative studies conducted in this domain have highlighted men's experiences of severe physical violence, control and manipulation (e.g., Allen-Collinson 2009; Stitt and Macklin 1995). Other qualitative studies have highlighted the negative psychological effects of IPV on male victims – such as suicidal thoughts,

disassociation, and avoidance (e.g., Fergusson et al. 2005; Migliaccio 2002). Studies also revealed that men often find their experiences as victims severely harmful, both emotionally and physically (e.g., Gadd et al. 2002). Furthermore, Cook (2009) and Hines et al. (2014) stated that male victims pay a particularly high price, both for reporting and experiencing IPV (e.g., losing custody of their children, false accusations of child abuse).

## The Current Study

Current knowledge of the nature, dynamics and reactions to IPV among male victims is limited. Furthermore, there is a need for a better understanding of how male victims use existing resources: When do men seek help? When seeking help, which sources of help do men seek and how do they experience this process? This information is essential to comprehend the process of help-seeking from the male victims' perspective. To fill these knowledge gaps, we conducted in-depth qualitative research with Portuguese male victims of their female partner's violence. The overall aim of the present study was to explore the experience of male victims who had sought help for their victimization. The specific research questions were: a) What forms of abuse and dynamics do male victims of IPV experience? b) Which consequences do male victims report after the experience of violence? c) How do male victims cope with violence? d) How do male victims perceive the process of seeking help? and e) How do men feel about the help utilized or offered?

This qualitative study is also important because IPV against men remains largely overlooked across the European Union (UE) and absent in the national plan against domestic violence (DV) even though IPV has been considered a political and social priority area (e.g., Commission for Citizenship and Gender Equality 2014). This is in spite of the fact that the number of men seeking help in Portugal had increased significantly in the last decade (Geral Secretary of Ministry of Internal Affairs 2015; Portuguese Association for Victim Support (APAV; APAV 2015). In 2014, 1074 men sought help in APAV. In addition, to the author's knowledge, the few qualitative studies to date were conducted in the USA, United Kingdom, and Australia (e.g., Cook 2009; Hines et al. 2007; Gadd et al. 2002; Lewis and Sarantakos 2001; Migliaccio 2002; Stitt and Macklin 1995; Tilbrook et al. 2010; Tsui 2014); therefore, there is a need for more knowledge in European countries.

## Method

### Participants

The participants in the present study were ten Portuguese male victims of IPV in heterosexual relationships who had sought formal help from DV agencies (i.e., victim support agencies)

and/or the legal system (i.e., police). The men ranged in age from 35 to 75 years ( $M = 51.6, SD = 13.84$ ). Participants' levels of education varied from elementary school to a doctoral degree. Six participants were employed at the time of the study and four were retired. In terms of socio-economic background, eight participants were middle class or lower and six men lived in a rural area. Table 1 outlines additional demographics.

In terms of relationships, the majority of the participants (eight) were currently out of the violent relationship. The mean of the length of the relationships was 15.5 years ( $SD = 12.43; Min = 4, Max = 38$  years) and the average number of children was 1 ( $SD = .88; Min = 0, Max = 2$ ). The majority of the participants (nine) had reported the incident of DV to the police. All of the data from relationship characteristics are listed in Table 2.

Violence reported by the participants was unidirectional only (women's violence toward men) and there was no overlap of the victim/perpetrator roles. The majority of the cases however, included a dual allegation of DV: in six cases, female partners reported the incident to police first, and in four cases, men reported to police first. In two cases, only one of the members of the couple reported to police: a woman in one case and a man in the other case. At the time that data collection was finished, the majority of the legal processes were ongoing in the judicial system. However, in two cases, the judicial process had already concluded, resulting in female partners receiving "suspended sentences" and being ordered to pay financial compensation to their partners.

**Instruments**

**Demographic Form**

A demographic form was used to collect information about the participant's demographics and the abusive relationship characteristics.

**Semi-Structured Interview** The semi structured interview consisted in 21 open questions divided into five sections. The first section dealt with "insight of victimization – the turning point" (e.g., "Can you identify the moment when you realized that you were a victim of violence?"). The second set of questions focused on the participant's experience of IPV, in particular, the identification and description of victimization (e.g., "Throughout the intimate relationship that you maintain/maintained, were you the target of abusive behaviour(s)?"). The third part of the interview was developed to understand how and where men seek help (e.g., "How was it for you asking for help?"). In addition to describing their experiences, the participants were asked questions about the social reactions to IPV against men (e.g., "How do people [family, friends, and society in general] see men who are victims of intimate violence?"). The final set of questions dealt with the participants' needs and resources to face IPV (e.g., "Given your experience as a victim of abusive behaviour, which are the main needs of men that suffer from intimate violence?"). For the purpose of this study, we focused on the second, third and final set of questions because of the volume and richness of the data. The other set of questions ("insight of victimization – the turning point" and needs and resources to face IPV) will be a target of another publication for theoretical reasons.

**Procedures**

**Data Collection** A pilot interview was conducted with two male victims of IPV. The interview protocol was then reviewed on the basis of the participants' comprehension of the questions (this resulted in simplifying the language used). Subsequently, several organizations in Portugal specializing in IPV support (e.g., domestic violence agencies, police, social services), were contacted. The responsible members of the organizations were informed of the goals of the study and their collaboration was requested to help identify and contact potential participants. Then, appointments were made with men who volunteered to participate. Participation was free and no

**Table 1** Participants demographics

Participant	Age	Education	Professional situation	Socioeconomic status	Housing location
A	45	≥ 12 years	Employed	Upper middle class	Urban
B	35	≥ 12 years	Employed	Middle class	Urban
C	66	<12 years	Retired	Lower class	Urban
D	53	≥ 12 years	Employed	Upper middle class	Countryside
E	40	≥ 12 years	Employed	Middle class	Countryside
F	43	<12 years	Employed	Lower middle class	Countryside
G	61	<12 years	Retired	Lower class	Urban
H	62	<12 years	Retired	Lower middle class	Countryside
I	75	<12 years	Retired	Lower class	Countryside
M	36	<12 years	Employed	Lower middle class	Countryside

**Table 2** Relationship characteristics

Participant	Relationship status	Relationship Length	N of children	Current violence	Criminal complaint
A	Past	20 years	2	No	Yes
B	Past	10 years	2	No	Yes
C	Past	5 years	0	Yes	Yes
D	Past	4 years	0	No	Yes
E	Past	8 years	1	No	Yes
F	Current	16 years	1	Yes	No
G	Past	38 years	2	Yes	Yes
H	Current	36 years	2	Yes	Yes
I	Past	5 years	0	No	Yes
M	Past	13 years	1	No	Yes

incentives were offered. The first researcher, who conducted all the face-to-face interviews, visited the organizations specializing in IPV that had referred the participants and informed consents were obtained. At that point, the participants were asked to complete a short demographic form. Participants were interviewed individually in the institutions that collaborated. Data collection lasted 6 months. The interviews ranged from approximately 45 min to 2 h. All interviews were audio recorded and transcribed verbatim to respect the specificities of the discourses. Transcriptions were reviewed by the first author for accuracy and revised when necessary.

**Data Analysis** Data were coded by the first author following thematic analysis. Interview transcripts were analyzed based on the emerging themes, using an inclusive criterion, as each theme could be included in more than one category. An initial coding grid was used to guide the initial coding's (e.g., first signs of IPV, cycle of violence, and factors that intensified violence were independent codes), which were refined and added as inductive codes emerged (e.g., dynamics of violence incorporated the three codes discussed above). The final coding grid includes core categories, subdivided by secondary and more ideographic categories. Themes emerged from the data and interpretative work was necessary to identify them.

To ensure the validity and credibility of the results, different strategies were adopted, including constant comparative analysis of the data and a dense description of the meanings found therein, further identified in the results section by a detailed presentation and illustration of each category with excerpts of the participants' speech. Additionally, an independent coder (the second author) analyzed 50 % of the interviews, randomly assigned, to ensure data reliability. After independent review by a co-coder, the fidelity rate was calculated using Vala's (1986) formula:  $F = 2(C1, 2)/C1 + C2$ . The number of agreements between the codifiers was divided by the total categorizations performed by each:  $2(638)/638 + 662 = 0.98$ . The result was a fidelity rate of 0.98, which

represents an excellent level of agreement (Guest et al. 2006; Martins and Machado 2006), allowing confidence in the results obtained. Coding discrepancies were discussed and resolved by the coders by consensus. A senior researcher (fourth author) audited the coding process.

## Results

Analysis of the interviews yielded the following five main themes that describe the voices and experiences of men as IPV victims: 1) Types of violence; 2) Dynamics of violence; 3) Impact of IPV; 4) Coping; 5) Type and quality of help-seeking. Each main theme has a number of subordinate themes (see Table 3). Direct quotations from interview transcripts highlighting particular aspects of these themes can be found throughout the text and each is identified by an interviewer code.

**Table 3** Discourses of men victims: Main themes and sub-themes

Theme	Sub-theme
Type of violence	Direct
	Indirect
Dynamics of violence	First signs
	Cycle of violence
	Intensification factors
Impact	Most remarkable episode of violence
	Victim
	Children
Coping	Do something in isolation
	Engage with the partner in some way
	Seeking help
Nature and quality of help-seeking	Formal
	Informal

## Type of Violence

All participants described a range of minor to severe forms of violence inflicted by their female partners. From this theme emerged the following sub-themes: (a) direct violence; and (b) indirect violence.

**Direct Violence** The majority of participants reported being subject to five types of direct violence, i.e., violence perpetrated directly against them: psychological, physical, economic, stalking and legal administrative (i.e., when one partner uses the legal and administrative system to the detriment of the other partner). Each of these types of violence consisted of different types of behaviors, with minor to major consequences. Overall, men describe being victims of multiple forms of violence. Physical and psychological violence were mostly cumulative. No man reported the episodes of IPV as isolated incidents; instead, men described the violence as a continuing part of the relationship.

“... from throwing things that I liked the most. For instance, I had gone on a trip to Canada (...) I brought a footprint of a bear and (...) a statue (...). And it was on the table not even eight days before she threw it right at me, and broke it all...”; The other situation is the psychological torture (...) Many times she left me somewhere and left with the car (...); on the weekends she turned the lights off on me and cut the water (...) The torture is to feel that I am there under her control, and that she does what she wants.” (B., 35 years)

Concerning legal administrative abuse participants described the following.

“The game was: I [partner] will massacre you, you will lose your head, and I will report it to the police! It’s the use of the law that I was telling you [interviewer] about.” (C., 66 years)

“What is your idea of accusing me of having threatened you or hit you, or whatever you had accused me of... (...) when it was you, throughout our life, who sometimes lost control and hit me? And she laughed at me and said: “Ah, you didn’t report it to the police at that time, so now you cannot do it because now more than six months have passed and you can no longer do it”. And she said that to me perfectly cynically.” (A., 45 years)

As a sub-theme of legal administrative abuse, “self-partner aggression,” emerged. This was a tactic used to legitimize the violent partner’s own behavior.

“She mutilated and scratched herself and made up that I had run her over. And since that incident I was charged of DV (...) I was notified to present to the court (...) identified, and prohibited to leave the country.” (B., 35 years)

**Indirect Violence** Some men also described indirect violence, i.e., violence that was not perpetrated directly against them. More specifically, men reported that their children were also victims of IPV.

“This is always connected to the problem of children, isn’t it? It is always connected to the blackmail that is made and the violence that is done using the children and that children are exposed (...) My daughter was subjected to brainwashing about me, the most barbaric things involving intimate life scenes, where I was painted as a perfectly wicked person and a pervert.” (A., 45 years)

## Dynamics of Violence

Four sub-themes emerged and highlighted different aspects of the dynamics of violence: (a) first signs of IPV; (b) cycle of violence; (c) intensification factors; and (d) most memorable episode of violence.

**First Signs of IPV** The first signs included what men recognized as the red flags or factors that might have alerted them to the abusive nature of their intimate relationships: evidence of control, jealousy, problems with children, pressure to disconnect from children from a previous relationship, social isolation, other family members’ reactions, and economic problems.

“I think things started at the very beginning, but we do not really notice them. For example, I used to belong to the scouts, I used to play in a group, I was involved in a lot of activities, and then I had to give up all that. Gradually the pressure was greater.” (B., 35 years)

**Cycle of Violence** Some men described a pattern similar to Walker’s cycle of violence (Walker 1985), i.e., three distinct phases, varying in time and intensity. Those phases were described as tension-building, then acute battering, followed by “loving” and apologetic behavior.

“She regrets a lot. She regrets it all the time, I have already lost count of the times she asked me for

forgiveness. But afterwards, she does it all over again.” (H., 62 years)

In addition, men reported that these patterns of violence often began with forms of violence that were psychological and economic but then extended to other forms of violence that became more physical.

“She always was very suspicious. And at the beginning, she was always inventing stories that I was involved with woman A or B, she was even jealous of men, but as time went by, she started to become furious with her jealousy and started to hit me, to rip my clothes (...).” (H., 62 years)

**Intensification Factors** Men reported the birth of a child, economic problems, housework, lack of respect, betrayals and divorce as factors that intensified violence.

“...discussions began to be more frequent, because of questions about basic needs and also cleaning the house.” (M., 36 years)

“Things get more complicated after having children, you know?” (E., 40 years)

**Most Memorable Episode of Violence** The majority of participants reported psychological violence as more significant to them than physical injuries. Men also discussed episodes that had serious effects on them. These involved the first instance of aggression, being locked up in the garage, presentation of false complaints to police, episodes of severe physical violence, attempts to trampling, threats to hurt other family members, threats of never seeing their children again, denigration of sexual performance and betrayals.

“...and at a certain point, she started to talk about locking me up in the garage (...) she went to the kitchen and got a knife in a plastic bag and then when she was about to close the door she showed me the knife that was to stab me. I remained silent out of fear.” (I., 75 years)

“I was in fact severely and barbarically injured. I was kicked in the head and in my ribs with sharp-toed boots. When I went to the hospital, I thought that I had broken my ribs...I had pain for several months, I couldn't sleep. On that day, I clearly realized that I was a victim of IPV.” (A., 45 years)

## Impact

Participants described the consequences of being victims of IPV in terms of negative effects on themselves and on their children.

**Consequences of Being a Victim** Many participants described how the experiences of IPV had negatively affected their lives and their well-being at the psychological, physical and social-relational levels.

“...this is not easy, as it makes you often think about shooting yourself in the head, to disappear. It's a lot, a lot of a pressure.” (B., 35 years)

“I was sad, very sad. I even trembled, my fingers trembled (...). It seems that I was afraid all the time.” (I., 75 years)

Additionally, negative consequences affected professional performance, daily routines, parenthood and finances.

“It's sad, because, in my work, I was never late, you know? If I started to work at eight, I would be there at least fifteen minutes beforehand. And then there was a phase when I was really tired, you know? I could not rest because she would not let me and I started to be late for work.” (E., 40 years)

A clear picture emerges from the data, suggesting that participants sustained the cumulative effects of injuries as a consequence of their violent intimate relationships.

**Consequences for Children** Men also reported that they were not the only ones affected by these experiences. Many participants reported direct and indirect consequences of this experience on their children.

“It is so sad that a child watches this, it is very sad (...) my son suffered a lot (...) And he does not like his mother, I have already picked up many papers where he wrote down what he felt.” (F., 43 years)

## Coping

Men described having developed a range of coping strategies and tactics in order to manage life with an abusive partner. The following sub-themes emerged: (a) do something in isolation; (b) engaging with the partner in some way; and (c) seeking help.

**Do Something in Isolation** Participants described using strategies such as leaving home temporarily, trying to hide, trying to calm themselves, trying to leave the relationship, sleeping in separate rooms, crying, isolating themselves, devaluing the situation, avoiding the problem, and consuming alcohol.

“I tried to calm myself (...) be alone, away from confusion and people (...) and I waited for time to pass. For this passes too.” (B., 35 years)

“I never talked much with my friends about this. I always, I always hid it. I remember one time that she scratched me in the face, and I put facial foundation or something like that (...) that thing that you [women] use for trying to hide such things; even with that, the scratches were visible, so I didn’t go to work on those days.” (B., 35 years)

**Engage with the Partner in some Way** After an episode of violence, victims’ strategies included talking to the partner, trying to calm the partner and acting in self-defence. Participants reported having attempted talking to or trying to calm the partner more than acting in self-defence.

“Typically, I tried to calm her down.” (A., 45 years)

Regarding self-defence, participants indicated that they reacted to violence only by restraining their partners from hurting them.

“I never attacked her; instead, I always tried to defend myself from her attacks.” (B., 35 years)

**Seeking Help** Seeking help was divided into informal help (including family, friends and colleagues at work) and formal help (including police, domestic violence agencies, the legal system, health care and social services). The first sources of support that most men sought were informal, and sometimes these sources informed men about the existence of formal resources.

“The times that she broke everything, totally euphoric, and she looked like a werewolf, I called my mother, and she came running to try to calm her down.” (B., 35 years)

“The other day, my neighbor saw me, and I was really down; she made me an appointment and took me to the doctor.” (F., 43 years)

Regarding formal help, men looked for help from different sources and sometimes from more than one source at a time. The majority of men had looked more for formal than informal help.

### Nature and Quality of Help-Seeking

Men described how the help-seeking process occurred from the victim’s perspective. As discussed above, men looked more for formal than informal help. However, the overwhelming majority of participants rated formal sources as unhelpful, especially the services of the judicial system. Conversely, men reported that they had received valuable support from friends, family and colleagues at work.

Regarding formal sources of help, the voices of these men were affected by their contact with the police and the legal system. Men also reported differences in treatment of men versus women, as well as the constraints of the system, mainly in terms of the help provided by the legal system and police. More specifically, most participants who had contact with the police were not satisfied with the outcome, describing how they were further victimized by such contact. Some men reported that when they called the police during an incident in which their female partners were violent, the police typically failed to respond.

“A man calls the police (...) and do you know how many times I reported the incidents to the police? At least 6 or 7! And nothing (...) they didn’t respond to it as domestic violence! My partner scratched me, called me names, and hit me (...) I called the police (...) and in the end, the prosecution doesn’t consider it violence nor an offense.” (G., 61 years)

Men also reported being ridiculed by the police.

“The officers made fun of men. I was scamed by the system. The officer told me: your wife scratched you, but the only thing that I have to say to you is: you are worthless. You push her against the wall, give her two punches and the problem will be solved.” (G., 61 years)

Within the judicial system, some male victims of IPV also reported experiencing gender-stereotyped treatment.

“The mother of my daughter was there and talked maybe almost 2 hours (...) and I was heard for 10 minutes, you see? (...) The judge heard only her version, and chose a side.” (E., 40 years)

Regarding social services, men also reported experiencing bias and double standards, as they were always treated as the aggressor:

“The professional [from social services] always treated me as if I was an offender.” (M., 36 years)

Health care services were characterized by men as doing nothing except prescribing medication. Nevertheless, a minority of participants mentioned helpful interventions from formal services.

“They heard me, they didn’t judge me, they gave me support. Sometimes, only hearing what we have to say and having friendly words makes the difference.” (M., 36 years)

It is also notable that men cited improvements after seeking help from DV agencies. They described the psychological benefits of this help.

“...I consulted a psychologist and it was good (...) It changed the way that I think and understand what was happening to me.” (B., 35 years)

Informal help was viewed by men as successful. Men explained that relatives and colleagues at work were very helpful.

“They [colleagues at work] support me all the time. They told me to go to see a psychologist, they told me to go to social services.” (E., 40 years)

## Discussion

IPV inflicted on male victims by their female partners is an under-researched area that, at an international level, is only now coming to the forefront of debates. In Portugal, to the authors’ knowledge, this is the first qualitative study to explore men’s experiences as victims of IPV and their help-seeking process.

Nevertheless, although the participants in the current study are heterogeneous and differentiated in terms of their demographics, all had been victims of different types of violence, i.e., psychological, physical, financial, stalking and legal administrative abuse. The first four types of violence are similar to those reported by other victims of IPV (see, e.g., Costa et al. 2015; Finney 2006; Hellemans et al. 2014; WHO 2013). However, legal administrative abuse seems to be a “contemporary” phenomenon that remains absent from general definitions of IPV (see introduction). This term has been used in a few studies (Hines et al. 2014; Tilbrook et al. 2010; Tsui 2014), and in the present investigation, many participants described experiences that qualify as legal administrative abuse (Tilbrook et al. 2010). In addition, even though (by the men’s accounts) they were nonviolent victims, six of the men described their female partners making false allegations of abuse to police. This could lead to the question of whether legal administrative abuse is specific to male victimization. This subject requires further investigation as for the men in this study, this type of abuse was particularly destructive and typically resulted in negative consequences for the victim.

As documented in other victimization phenomena (e.g., Matos et al. 2014), men also appear to be subject to multiple forms of violence, and physical and psychological violence were cumulative in the majority of the cases. Participants remained in the abusive relationship, on average, for 15 years, indicating an on-going pattern of violence with multiple

occurrences over time. Although eight participants were currently out of their relationships, in four cases, the violence continued. Finally, although stalking was infrequently reported as a type of violence used against them, for some men in this study violence did not necessarily end with the end of the relationship (e.g., Ferreira and Matos 2013).

The literature on IPV dynamics indicates that violent intimate relationships with male victims and female perpetrators display similar characteristics in their initiation and growth as those found for male to female IPV (e.g., institution of abuse; normalization of violence; social isolation; Migliaccio 2002; Walker 1985). In our study, there was a consistent pattern: progressive introduction of abuse, with early signs being ignored, such as control, jealousy and social isolation, but which led to an escalation of abuse, similar to what is called by Walker (1985) as the “cycle of violence”. It is also worth noting that the men were able to identify factors that intensified the violence, such as the presence of children, economic problems, housework, betrayals and divorce. Delineating the dynamics of violence against male victims is one of the key contributions of the present work, which sheds light on the similarities of victims of IPV, regardless of the sex of either the victims or perpetrators. In addition, as shown in the work of Hines and Douglas (2010), men can be considered victims of intimate terrorism (a type of violence that in Johnson’s [1995] typology only was attributed to women). The data seem to indicate that some descriptions of male victims also match this type of violence. Therefore, as discussed above, some typical conceptions and frameworks of IPV are challenged. In addition, according to male victims, IPV appears to not be limited to them alone, as some participants also described effects on their children. This vicarious victimization is consistent with the existing literature about IPV (see e.g., Martinez-Torteya et al. 2009).

Furthermore, it is generally acknowledged that experiences with IPV undermine the individual well-being of victims (e.g., Hellemans et al. 2014). Men also experience this negative impact as a result of their victimization, whether at physical, emotional, or economic levels (e.g., Brogden and Nijhar 2004; Coker et al. 2002; Reid et al. 2008). Participants described suffering from physical injuries, suicidal ideation, social isolation, sleep deprivation and loss of self-worth, joy in living, and weight, as has been assessed in prior research (e.g., Breiding et al. 2014; Coker et al. 2002; Finney 2006; Randle and Graham 2011). In addition to impacts on themselves, men also reported indirect consequences for their children, again consistent with the literature on female IPV victims (e.g., Evans et al. 2008; Kitzmann et al. 2003). Moreover, extensive research has also indicated that IPV has consequences and implications for the future of those children who witness abuse between their parents, such as higher risks of future victimization and perpetration (e.g., Bowlus and Seitz 2006), for males, this risk may be even higher than woman’s (Coker et al. 2002).



Another important result of this study is that men were active in coping with violence. Men attempted to cope with their victimization in a variety of ways. Regarding coping, we found only a small number of studies reporting on how men managed violence (e.g., Cook 2009; Gadd et al. 2002). For instance, Gadd et al. (2002) found that participants activated different strategies, like self-isolation, physical exercise, and asking for support from third parties. Cook (2009) found that strategies such as not hitting back, hiding, masking the violence and calling the police to be common. Thus, in our study, men seemed to have used numerous strategies to cope with their partner's aggression, which probably made them more effective at handling violence because at the time of the interview, the majority of the participants were no longer exposed to violence.

Finally, as with the findings of Douglas et al. (2012), the participants looked for help in somewhat patterned ways. On one hand, it seems that when men looked for formal help (e.g., police, health services) the violence was more severe. Men were less likely to seek help through more active means when the violence did not involve physical incidents and injuries. In contrast when the violence was less damaging, it seems that informal help was sought. It is vital that service providers and professionals are aware of this, so that when they receive a male victim they take it seriously at once, that they understand the men are really in need when seeking help and, that organization should simultaneously screen for all types of violence.

Most of the men who had sustained IPV reported experiencing gender-stereotyped treatment and dual criteria behavior from professionals and services. Consistent with other research (e.g., Cook 2009; Gadd et al. 2002; Hines et al. 2007; Douglas and Hines 2011; Tsui 2014), this study found that when men sought formal help for their IPV victimization, it frequently resulted in secondary victimization (i.e., statements/actions that could be distressing to victims; Campbell 2005). In fact, seeking formal help was associated with negative effects on the participant's well-being and life, aggravating the impact of his victimization.

Thus, men seem to become further (re)victimised by the system, and this seems to be an integrative part of their experience in seeking help. Being a victim seems to be coded as a female experience in Western society. Men experience serious difficulties when victimized in intimate relationships, both because of internal barriers they may have to address (men may perceive the help-seeking process as a threat to their masculine identity and have a fear of losing face; e.g., Choi et al. 2015; Oringer and Samuelson 2011) and because of the treatment received from professionals. These difficulties appear to be intrinsically linked to dominant gender stereotypes and double standards that affect society as a whole, and professionals in particular (McCarrick et al. 2015).

Although the present study constitutes an analysis of men's experiences and yields innovative and valuable information that may be profitable for victims, policy makers and social service practitioners alike, it is not without its limitations, which future research should address. By using a qualitative approach, we were able to respond to some critics concerning the design of quantitative studies and to the lack of meaningful results about the experiences of men as victims. However, one potential limitation of the current study is its small sample size. Conversely, the richness and in-depth nature of the findings may balance out the limits of the small research population (Brogden and Nijhar 2004). A further limitation is the retrospective nature of the research, given that the majority of the men were longer in their abusive relationships at the time of their interviews and were asked to recall their past experiences. It is also acknowledged that when using a clinical-forensic sample, we get to know the experiences of those who sought help; however, the experiences of these men may not reflect the experience of all male victims, including the experiences of those who never sought help. Another point worth mentioning is that we used face-to-face interviews and the researcher was a female; however, there are other variables that also seem to play a role in self-disclosure (e.g., Chan 2011).

## Conclusion and Recommendations

Qualitative studies are essential to give voice to overlooked populations, such as male victims of IPV. This study suggests that violence in intimacy against male victims who seek help is quite severe on both mental and physical levels. There seems to be an endemic response to victimization that is perpetuated by the negative outcome of seeking help from formal sources. Although under researched, there appears to be a consistent pattern emerging that professionals and society are still configured to offer stereotyped services and so cannot properly serve other victims, in particular, men (e.g., Hines et al. 2007).

Thus, one of the major contributions of this study is to establish that there are many more similarities between male victims and other victims (e.g., dynamics of violence, coping) than may be expected from current conceptualization. In addition, it was found that men looked for help in somewhat patterned ways.

Following the argument of McCarrick et al. (2015), it is our understanding that there is a need to adopt a gender informed approach, i.e., "a movement away from the traditional feminist perspective of domestic violence and towards a societal view that addresses the potential for both men and women to be victims and perpetrators of domestic violence". Developing awareness and prevention measures aimed at both sexes is critical. Men must be a target of inclusive public campaigns of prevention. For instance in Portugal, as far as we know, there is no victim-support network or media campaign targeting

men. In addition, it is essential to encourage men victims who need services to request such support. Only by adopting this approach will professionals become sensitized to the difficulties faced by men and develop services for them, if such services are needed. More research into male victimization is necessary, particularly regarding the process of change that allows some men to recognize themselves as victims and to overcome their victimized positions.

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