Men’s experiences of female-perpetrated intimate partner violence:
A qualitative exploration

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Abstract

The subject of female-perpetuated intimate partner violence (IPV) against men has been one of controversy, with well-rehearsed arguments surrounding both the nature and existence of female-perpetrated abuse against men. This experiential research study explored the experiences of 23 men who self-identified as having experienced female-perpetrated IPV. Semi-structured interviews explored the men’s experiences of both physical and emotional abuse, as well as barriers to leaving their abusive relationship(s), and their experiences of seeking help. Thematic analysis of the interviews revealed that the men’s experience of being in an abusive relationship was traumatic and had a negative impact on both their physical and psychological well-being. The importance of maintaining a sense of masculinity consistently underpinned the men’s narratives. Some participants described feeling shame and embarrassment for not having met dominant cultural expectations surrounding the roles of men in heterosexual relationships. Frequently the participants reported that a fear of being judged or not being believed was a significant barrier to seeking help. The lack of recognition and understanding of male IPV within society was of concern to most of the men. Some participants outlined a desire to use their own experiences in order to help other men in abusive relationships. These findings offer important implications for understanding IPV against men and developing enhanced sources of support.
Introduction

Female-perpetuated intimate partner violence

The World Health Organization (2012) outlines intimate partner violence (IPV) as a major social and health problem, associated with severe physical and mental health difficulties (World Health Organization, 2013b). Whilst the majority of victims including fatalities are female, and the majority of perpetrators are male, the World Health Organization (2012) acknowledges that men are also victims of IPV and sexual violence, both within same-sex and heterosexual relationships. Numerous studies demonstrate the detrimental impact IPV has on the physical and mental health of female and male victims (e.g., Campbell, Sullivan, & Davison, 1995; Hines & Douglas, 2011; Merrill & Wolfe, 2000). However, the majority of research within both the medical and social sciences literature on the impact of IPV has been limited to samples of women (Kaura & Lohman, 2007). Male victims have not been researched as comprehensively as shelter populations of battered women (Hines, Brown, & Dunning, 2007). However, men’s experiences of IPV remains an important issue in need of further exploration (World Health Organization, 2005).

Following a comparison of academic and media reports on male IPV victimisation, Chaudhuri (2012) asserted that there remains a reluctance to acknowledge and comprehend victimisation beyond the traditional focus on women and children within both academia and the wider culture, thus, understanding of male victimisation remains limited. Research offers a forum for demystifying male victimisation whilst at the same time validating its importance (Chaudhuri, 2012; Randle & Graham, 2011). Further understanding of this topic is warranted, leading to the development of enhanced understanding of male victimisation, demystifying socially constructed myths surrounding masculinity and victimisation, and the development of gender-specific interventions (Gadd, Farrall, & Dallimore, 2003a). Research may lead to the development of enhanced understanding, theory and practice, which may inform practitioners’ work with male victims (Hogan, Hegarty, Ward, & Dodd, 2012; Migliaccio, 2002).

In the following review, a definition of intimate partner violence will be provided, reflecting on existing terms used to categorise and define abusive behaviour within intimate partner relationships. A review of the literature on male-perpetrated violence against women, including the prevalence and nature of such abuse will precede an exploration of violence
within male same-sex relationships. Subsequently, the topic of female-perpetrated IPV against men will be reviewed, evaluating literature on both the prevalence and severity of abuse, as well as male help-seeking behaviour following IPV victimisation. Finally, consideration of the limitations in understanding surrounding male victimisation will be offered, before outlining the aims of the current study.

**Defining intimate partner violence**

The lack of a comprehensive and encompassing definition of partner abuse has resulted in inconsistencies surrounding the way in which violence and abuse is defined, categorised, and reported (Burzawa & Buzawa, 2003; Plichta, 2004). Consequently Plichta (2004) recommended the need for definitional uniformity. Mainstream public discourses characteristically construe violence within intimate relationships as a gendered, heterosexual phenomenon that is typically physical in nature (Donovan & Hester, 2010). This leads to the commonly held assumption that men are the perpetrators of IPV and women the victims (Barber, 2008). Such dichotomous thinking may impede recognition of experiences outside of this dynamic (Ristock, 2002), as reflected in the accounts of some male victims within heterosexual relationships (George, 2003), as well as male and female victims within same-sex relationships (Donovan & Hester, 2010; Randle & Graham, 2011). Therefore, comprehensive understanding of violence within intimate relationships is of paramount importance, with potentially lifesaving consequences (Kelly & Radford, 1990).

In an attempt to accommodate the full range of abuse within intimate relationships, the British Home Office (2013) widened its definition from domestic violence to ‘domestic violence and abuse’ in order to reflect patterns of controlling, coercive, and threatening behaviour, including physical, sexual, psychological, financial and emotional maltreatment of one partner by another, regardless of gender or sexuality (Home Office, 2013). In 2015, enhanced recognition was given to controlling and coercive behaviour as a criminal offence (Home Office, 2015). The Home Office proposes that all legislation is gender neutral, and recognises that men can be victims of such crime (Home Office, 2015). Furthermore, in order to increase awareness of male victims of domestic and sexual violence, in 2011-13 the Home Office launched the ‘Male Victims of Domestic and/or Sexual Violence Fund’, to support services and increase awareness of male victims of domestic and sexual violence (Home Office, 2011).
Domestic violence and domestic abuse are two of the most commonly used terms (Donovan & Hester, 2010). However, critics argue that the term ‘domestic violence’ emphasises physical violence, precluding wider forms of abuse including financial, sexual and emotional control (e.g. Burzawa & Buzawa, 2003; Donovan & Hester, 2010). The term domestic abuse remains popular on account of encompassing physical violence as well as alternative forms of violence including financial, sexual and emotional control (Donovan & Hester, 2010). However, some critics argue that there is a need to expand definitions of this phenomenon in order to accommodate awareness that violence within intimate relationships transcends both gender and sexuality (Finneran & Stephenson, 2013; Letellier, 1994). Consequently, Burzawa and Buzawa (2003) advocate the use of gender-neutral terms including intimate partner assault and intimate partner violence. Therefore, the term intimate partner violence (IPV) will be used within this thesis to explore men’s experiences of partner abuse. The definition of ‘partner’ will include legal marriage, de facto relationships, as well as boyfriend and girlfriend relationships (Hegarty, Sheehan, & Schonfeld, 1999).

**Male perpetrated violence against women - prevalence of abuse**

Following recognition of the abuse of women by their male partners from the academic community and general public in the early 1970s, this subject gained the long overdue attention it deserved (Hines & Malley-Morrison, 2001). Most research into the prevalence and impact of IPV, and hence most of what is known about this subject comes from research undertaken by feminist researchers and academics in association with the shelter movement (Dobash, 1988; Loseke, 1992). Such research examined the experiences of battered women from clinical populations and women’s shelters, which were established in response to violence against women (Dobash & Dobash, 1992). Consequently women’s shelters aimed to empower women to live independent lives (Haj-Yahia & Cohen, 2009). Given the historical role of psychologists, sociologists, criminologists and feminist researchers, in building theories of violence which have enhanced understanding of gender-based violence and its causes (Heise, 1998), a review of the literature on male-perpetrated violence against women will precede an exploration of violence against men.

A systematic review by Alhabib, Nur, and Jones (2010) of worldwide prevalence studies on IPV revealed that violence against women has reached epidemic proportions, spanning a variety of racial, ethnic, and socio-economic groups. IPV against women typically
encompasses different forms of abuse including physical, psychological, sexual and emotional abuse and controlling behaviours, which often coexist (Vatnar & Bjørkly, 2008; World Health Organization, 2005). Evidence demonstrates that community and societal risk factors including the unequal social, legal and economic status of women continue to be related to women’s risk of experiencing IPV (World Health Organization, 2012).

Violence against woman is associated with serious physical health consequences including gynaecological, cardiovascular and musculoskeletal problems, as well as death (Campbell, 2002; Cobia, Robinson, & Edwards, 2008; Gerlock, 1999). Physical violence is characteristically coupled with psychological abuse (O'Leary, 1999), therefore, in addition to the physical consequences of IPV, many abused women experience a range of psychological health concerns including depression, anxiety, posttraumatic stress, psychosis, personality disorder, reduced self-esteem and substance misuse (Cascardi, Langhinrichsen, & Vivian, 1992; Gerlock, 1999; Gleason, 1993; Waldrop & Resick, 2004).

The psychological consequences of IPV victimisation have been reported as having long lasting effects on female victims’ well-being (Gerlock, 1999; Saunders, 2002). Feelings of shame associated with being abused (Gerlock, 1999), along with feelings of helplessness and isolation, leading to lower levels of self-esteem, may contribute to victims feeling unable to escape an abusive relationship (Chang et al., 2006; Waldrop & Resick, 2004). Empirical evidence demonstrates that acceptance of IPV, whereby a victims holds a belief that it is acceptable for a male to abuse his female partner, is higher amongst women who have experienced IPV, indicating a possible learnt acceptance of violence (World Health Organization, 2005).

**Female help-seeking behaviour and IPV victimisation**

Despite increased knowledge and understanding of both the psychological and physical health consequences of IPV (Campbell, 2002; McGarry, Simpson, & Hinchliff-Smith, 2011), underreporting of IPV victimisation remains prevalent, with sociodemographic and cultural factors associated with diminished support service utilisation (Gondolf, 1998; Hutchison & Hirschel, 1998; West, Kantor, & Jasinski, 1998). Female victims of IPV are more likely to use informal support from their social networks, including friends and family, as a means of dealing with IPV victimisation, rather than utilise formal support such as medical, legal and specialised services (Kaukinen, Meyer, & Akers, 2013).
Research demonstrates that a number of variables negatively influence help-seeking behaviours (e.g., Henning & Klesges, 2002; Hutchison & Hirschel, 1998; Vatnar & Bjørkly, 2008). Demographic factors including age, with younger victims less likely to use support services, race, with Black women less likely than White women to seek help, and socioeconomic status, with women of lower socioeconomic status less likely to seek help than more affluent women, are all associated with underutilisation of support services (Henning & Klesges, 2002). Help-seeking behaviour is further influenced by the severity, type and length of IPV (Hutchison & Hirschel, 1998; Vatnar & Bjørkly, 2008), with women who experience severe physical, sexual, or psychological abuse, have injuries, or live with children, more likely to seek help (Bonomi, Holt, Martin, & Thompson, 2006). Pregnancy rates are higher among abused women compared to women in non-abusive relationships (Kothari, Cerulli, Marcus, & Rhodes, 2009). Whilst pregnant and postpartum women are at increased risk of IPV, being pregnant is associated with increased help-seeking behaviour (Kothari et al., 2009).

Victims’ level of education remains a consistent predictor of help-seeking behaviour (Hutchison & Hirschel, 1998; Kaukinen et al., 2013). Higher levels of education are associated with increased likelihood of help-seeking behaviour due to increased awareness of how support services can aid the victim in ending an abusive relationship (Kaukinen et al., 2013). Employment status is also associated with help-seeking behaviour. Unemployed women who are financially dependent on their partner are less likely to seek help (Kaukinen et al., 2013; Keeling & Fisher, 2012). However, research suggests that higher income reduces women’s health, social and legal help-seeking behaviour, in response to IPV victimisation (Kaukinen et al., 2013). Possible reasons for this may include victims wanting to keep their victimisation quiet for fear of potential consequences to their economic and employment position (Kaukinen et al., 2013). Nonetheless, financially independent women maybe better equipped to escape an abusive relationship without the need for support services (Kaukinen et al., 2013).

**Socioeconomic status and intimate partner violence**

The intersection of socioeconomic status and gender based violence against women is well documented within literature on IPV (Dobash, 1988; Johnson, 1995). Whilst IPV victimisation encompasses all socio-economic groups (Alhabib et al., 2010), lower
socioeconomic status is significantly associated with increased risk of victimisation (Hoffman, Demo, & Edwards, 1994; Hotaling & Sugarman, 1986), with evidence linking the diminished socioeconomic status of women within traditional male dominated social structures, to increased risk of IPV (Dobash, 1988). Hence, women’s limited economic influence, underpinned by wider gender inequality within society, may enhance their vulnerability to IPV victimisation (Home Office, 2015; Riger & Krieglstein, 2000). However, such traditionally defined gender roles and associated power structures maybe less relevant in explaining IPV victimisation, due to recent increases in the number of women achieving higher levels of education and in employment, and therefore being less dependent on marriage (Kaukinen et al., 2013). Conversely, theorists propose that violence against women may increase as a direct result of these social changes, as male-perpetrated abuse is used to maintain power and control and compensate for women’s enhanced status and independence (Riger & Krieglstein, 2000).

Given the multifaceted nature of violence against women, single-factor theories of IPV, which espouse individual explanations for IPV (based on evidence that an individual’s developmental experience, alcohol use and personality may each be risk factors for IPV perpetration/victimisation), or social/political explanations (based on evidence that patriarchal/gender inequality within family and societal structures may be risk factors for IPV perpetration/victimisation), have been criticised for failing to conceptualise the complexity of gender-based violence (Heise, 1998). Consequently, one of the most widely used global models for understanding contemporary gender-based violence is the ecological framework (World Health Organization, 2012). This framework proposes that gender based violence is a multifaceted phenomenon, grounded within an interplay of individual, relationship, sociocultural and environmental factors, thus, offering a heuristic tool for exploring the complexity of IPV (Heise, 1998).

**Violence within gay male relationships - prevalence of abuse**

Despite being in its infancy, research on IPV amongst male same-sex couples has been seminal in aiding awareness and understanding of male victimisation (McClenen, Vaughan, & Summers, 2002). Consequently, a review of current research on IPV within gay male relationships will provide insight into the experiences of male victims of IPV, including areas
in need of further research, before addressing male victimisation within heterosexual relationships.
Following a systematic review of the literature on IPV amongst men who have sex with men\(^1\), Finneran and Stephenson (2013) highlighted a paucity of research on this topic. Prevalence studies present an unclear picture of male victimisation with few large-scale, longitudinal studies recruiting male only samples (Kaura & Lohman, 2007; Randle & Graham, 2011). Thus, conventional difficulties in capturing prevalence rates of IPV within heterosexual relationships maybe amplified within same-sex couple research. Letellier (1994) proposed that feminist theories of IPV are heterosexist, and fail to account for abuse within same-sex relationships; thereby contributing to the invisibility of victims within non-heterosexual relationships. Given the lack of research on IPV within same-sex relationships, there is limited agreement on what constitutes IPV within male same-sex relationships (Finneran & Stephenson, 2013). Furthermore, few IPV outcome measures have been validated with male victims (Randle & Graham, 2011). Consequently, data is insufficient to be able to draw strong conclusions about the nature of IPV within this population (Finneran & Stephenson, 2013).

**Nature and severity of abuse within gay male relationships**

Evidence suggests that gay, bisexual, and men who have sex with men, experience all forms of IPV including physical, emotional, sexual and financial abuse (Finneran & Stephenson, 2013; Merrill & Wolfe, 2000). However, variations in the methods of abusive control within heterosexual and same-sex couples make comparisons difficult. Evidence suggests that methods of controlling the victim such as ‘outing’, whereby the perpetrator threatens to disclose the victim’s sexuality to others against their wishes, deliberately infecting a partner with HIV, and subsequently withholding medication, as well as threatening to disclose the victims’ HIV status, are more commonly used within same-sex IPV (Burke & Owen, 2006). These methods of control have significant implications for victims’ help-seeking behaviour, as reporting and seeking help following abuse inevitably requires the victim to reveal their sexual orientation (Letellier, 1994).

\(^1\) The term ‘men who have sex with men’ is used as a way of identifying any man who engages in sexual activity with a man, regardless of motivation or sexual identity (UNAIDS, 2006).
Psychological violence including emotional, financial, and threats of physical violence are frequently reported among male same-sex couples (Finneran & Stephenson, 2013; Randle & Graham, 2011). This abuse may result in significant psychological symptoms including post-traumatic stress disorder, depression and suicidal ideation (Coker et al., 2002; Randle & Graham, 2011). However, few male victims perceive emotional abuse as constituting IPV, due to the mainstream discourse of IPV being directed at woman and being physical or sexual, rather than emotional, in nature (Randle & Graham, 2011). Consequently, self-recognition of gay and bisexual men’s victimisation may only be through physical injury (Letellier, 1994). Furthermore, as gay and bisexual men are more likely than their female counterparts to retaliate within an abusive relationship, they may be less likely to identify their victimisation and thus seek help (Letellier, 1994).

**Help-seeking behaviour of gay male victims of IPV**

The lack of recognition of IPV within gay male relationships has resulted in limited help-seeking behaviours by victims, and subsequent prolonged experiences of abuse (Merrill & Wolfe, 2000; Randle & Graham, 2011). McClennen et al.’s (2002) exploratory study of the dynamics and help-seeking behaviours of victims of gay male partner abuse, found that victims cited numerous reasons for staying in their abusive relationship. Most significant was not knowing they were being abused, due largely to the lack of recognition of this problem within society, in addition to a lack of professional support resources to assist male victims (McClennen et al., 2002). Furthermore, some male victims outlined a belief that IPV services are designed for female victims (Oliffe et al., 2014). These factors may have a significant impact on victims’ decision to remain in an abusive relationship (Merrill & Wolfe, 2000), and contribute to feelings of isolation among male victims (Oliffe et al., 2014). Gay male victims who do seek support are often treated with suspicion from both law enforcement and support agencies, due to a general disbelief that IPV can occur between two men (Burke & Owen, 2006), or a misconstruction that same-sex IPV is between two equals, as both partners are the same gender and therefore assumed to be approximately the same size and weight (Letellier, 1994). Therefore, violence against men may be considered less serious than violence against heterosexual women (Letellier, 1994; Pattavina, Hirschel, Buzawa, Faggiani, & Bentley, 2007; Seelau & Seelau, 2005).
Furthermore, gay male victims may be wrongly labelled as the perpetrator, since men are not typically defined as victims (Bograd, 1999).

**Masculinity and recognition of IPV within gay male relationships**

Connell (1995) identified that masculinities are not fixed entities, rather they are configurations of practice, influenced by ongoing changes in the social meaning of gender and relationships (Connell & Messerschmidt, 2005). Masculinities are differentiated on the basis of domination, as a range of masculinities establish positions of superiority in relation to other masculinities and femininities, resulting in a hegemony of masculinity within a structure of gender relations (Haywood & Mac an Ghaill, 2003). Such internal relations of masculinities and femininities serve to maintain gender inequality (Haywood & Mac an Ghaill, 2003). Within the hierarchy of masculinities, hegemonic masculinity, defined by Connell (1995) as a set of practices that maintain men’s dominant position within society, represents a position of superiority and power (Haywood & Mac an Ghaill, 2003). Gay masculinity is considered a subordinate and marginalised masculinity (Connell, 2000) and secondary to heterosexual masculinity (Kay & Jeffries, 2010), on the basis that gay men fail to conform to heterosexuality, a central norm pertaining to hegemonic masculinity within Western society (Kay & Jeffries, 2010).

Mainstream cultural discourses surrounding masculinity may contribute to gay and bisexual men’s inability and reluctance to identify themselves as victims (Dunn, 2012; Kay & Jeffries, 2010), underpinned by traditional cultural narratives of IPV as something that only happens to women (Letellier, 1994). Consequently, victims of same-sex male IPV may discount their experiences of abuse, perceiving victimisation as inconsistent with their male identity, and therefore remaining in an abusive relationship (Letellier, 1994).

Evidence suggests that some gay men value being perceived as masculine (Sánchez, Bocklandt, & Vilain, 2009), and seek to oppose their subordinate position of masculinity (Kay & Jeffries, 2010). Therefore, pressure to adhere to a traditional masculine identity maybe as salient within male same sex relationships as in heterosexual relationships (McKenry, Serovich, Mason, & Mosack, 2006). As a result, the help-seeking behaviours of gay male victims of IPV are often limited, due largely to victims’ inability to consolidate their identity as men and victims (Letellier, 1994). Accordingly, the stigma of being a male victim may influence reporting of IPV and the associated psychological symptoms (Randle & Graham,
2011). Therefore, the use of self-report measures of abuse in research have been criticised for failing to accurately capture the prevalence of IPV victimisation within male same-sex relationships, due to victims’ efforts to hide their victimisation and prevent stigmatisation by society (Hamby, 2005).

**Heterosexism and IPV victimisation**

The psychological consequences of IPV may be further compounded by victims’ negative internalised ideologies and experiences of heterosexism, as a result of not being deemed legitimate IPV victims (Kliinan, 1994). Consequently, gay men may experience difficulty in recognising themselves as IPV victims (Letellier, 1994). Internalised homophobia may limit reporting of abuse to professionals (Kay & Jeffries, 2010; Randle & Graham, 2011), whilst potentially increasing vulnerability to victimisation (McKenry et al., 2006). Gender based violence theories have received criticism for placing significant emphasis on gender, at the exclusion of broader wider demographic factors including sexuality, race, age and class, of which there is a limited body of statistics surrounding same-sex IPV victimisation (Bograd, 1999).

There remains a need for further research to enhance understanding of IPV victimisation among gay and bisexual men, leading to the development of enhanced service provision (Houston & McKirnan, 2007; Turell, 2000). The lack of available literature on IPV within same-sex relationships is detrimental to the development of IPV policies and practices, as statistical evidence is fundamental to the distribution of funds, which in turn shape the development of initiatives and the availability of services (Bograd, 1999). Accordingly, Bograd (1999) advocates the need for greater consideration of intersectionality as a means of developing theories that go beyond gender explanations of IPV, thus more meaningfully reflecting the complexity of IPV. Intersectionality theory proposes that identities be viewed as complex interactions that mutually relate to prevailing social norms (Riggs & das Nair, 2012). Thus, dimensions of identity are viewed in relation to their intersection with other forms of power and oppression (Bograd, 1999).

**Female-perpetuated IPV against men – a controversial issue**

Gender differences within IPV perpetration rates have been the subject of lengthy, animated debates (Dobash & Dobash, 2004; Hester, 2013). One of the most emotive and controversial issues since empirical research into IPV began has been the subject of female-
perpetrated abuse of men (Hines et al., 2007). This controversy is due in part to conventional theories which espouse IPV to be the result of patriarchal society (Johnson, 1995), and the use of violence to maintain men’s dominance over women within relationships (Hines & Douglas, 2010b).

Discrepancies in findings of IPV prevalence have fuelled debate as to whether female-perpetrated abuse against men actually exists, with conflicting findings appearing to reflect the methodology employed, influenced largely by the sampling method and instruments used to obtain data (Archer, 2000, 2002; Kimmel, 2002). Contradictory findings have resulted in polarised outcomes, with some research revealing limited gender differences in the perpetration of IPV, whilst other research findings have identified that men are overwhelmingly the perpetrators of IPV against their female partners (e.g., Dobash & Dobash, 2004).

**Prevalence of female-perpetuated intimate partner violence against men**

Dobash and Dobash (1992) identify two distinct approaches to IPV research which characterise these conflicting findings, namely ‘family violence’ research, which aims to investigate the prevalence of IPV for both genders (Esquivel-Santoveña & Dixon, 2012). And ‘violence against woman’ research which aims to explore the prevalence of IPV against women (Alhabib et al., 2010). Family violence researchers employ an ‘act-based’ approach to the measurement of violent within relationships; this approach measures reported acts of violence and injuries within a relationship from both the victim and perpetrator, through the use of scales to assess individuals’ use of violence (Dobash & Dobash, 2004). Findings are subsequently used to estimate men and women’s use of violence within the wider population (Dobash & Dobash, 2004). Some researchers employing this approach have found IPV to be symmetrical, with female partners as likely as their male counterparts to perpetrate IPV (Hines & Saudino, 2003). In some instances, female partners have been found to engage in acts of extensive violence against their male partners (e.g., Morse, 1995).

One of the most widely used family violence survey methods is the Conflict Tactic Scale, a questionnaire used to measure abusive behaviour between partners (Dobash & Dobash, 2004). Measures based on specific acts of aggression suggest that women are significantly more likely than men to use physical aggression against their partner, and at a more
frequent rate (Archer, 2000). Whereas, men are significantly more likely to inflict injury against a female partner (Archer, 2000).

Esquivel-Santoveña and Dixon (2012) claimed that family violence surveys provide sound methodological rigour, given that they are designed specifically to measure family violence rather than the relationship between violence and wider social problems. The authors highlight that family violence findings reflect more equal rates of victimisation across both genders, whilst measures of less quality, demonstrate higher rates of female victimisation and male perpetration (Esquivel-Santoveña & Dixon, 2012).

With evidence that some male victims experience more stigma identifying as a victim of IPV than female victims (Hamby, 2005; Kimmel, 2002), a more gender-inclusive approach to the measurement of IPV, facilitating both genders in reporting their experiences have been called for (Esquivel-Santoveña & Dixon, 2012). Mills, Avegno, and Haydel (2006) recommended computer-based surveys to help minimise stigma. The British Crime Survey, a nationally representative victimisation survey of adults in England and Wales, employs two methodologies: a face-to-face interview which asks respondents about crime experienced in a domestic household, followed by a self-completion computerised questionnaire designed to encourage wider reporting of experiencing (Walby & Allen, 2004). Findings revealed that one in ten men have been victims of IPV, with evidence that 47 per cent of men experienced one incident of IPV within a twelve month period (Walby & Allen, 2004), leading to an estimated 2.5 million incidents of IPV acts against men in England and Wales in a one year period (Walby & Allen, 2004).

Critics of the ‘act-based’ approach argue that the assumption that both parties will provide reliable accounts of their relationship as evidence for the prevalence of IPV is problematic (Dobash & Dobash, 2004). Some evidence suggests that women are more likely to report their use of violence than men (Hester, 2013). Furthermore, the emphasis on ‘acts’ without reference to the impact of context and injury, has led to difficulty in differentiating the experiences of male and female IPV victims (Dobash & Dobash, 2004).

Violence against women researchers propose that violence needs to be explored within the context and consequences in which it occurs, including ongoing violent episodes, which act-based approaches neglect to consider (Dobash & Dobash, 2001). Violence against women researchers argue that this is of particular significance given the apparent gender
differences in the reported prevalence of IPV. With evidence that nearly half of male victims experienced just one incident of IPV within the previous year, compared to one third of female victims who experienced more than three incidents of IPV (Walby & Allen, 2004). This has implications on police arrest statistics for IPV perpetration rates within the UK, as the UK criminal justice system is incident focused, with decisions about prosecution and arrest made in relation to separate reported incidents, which fails to accommodate for IPV, which is typically a pattern of abusive behaviour over time (Hester, 2013).

Measures of the consequences of IPV reveal that women are more likely to report physical injuries and psychological problems as a result of IPV victimisation (Dobash & Dobash, 2001). Furthermore, men are more likely to perpetrate violence against their female partners at both a lethal and non-lethal level (Dobash, 1988; Dobash & Dobash, 1992; Hester, 2013). Findings from the British Crime Survey reveal that men are less likely to report their experiences of IPV victimisation to the police, on account of their incidents being too trivial (Smith et al., 2010).

Gadd et al. (2003a) argued that statistics surrounding IPV rates overestimate men’s victim status, highlighting that discrepancies in gender differences surrounding IPV victimisation have been used by some ‘Men’s Rights’ activists and campaigners to undermine feminist projects and support services set up to help female IPV victims (Gadd et al., 2003a). Therefore, Dobash and Dobash (2004) concluded that priority should continue to be given to policies that address violence against women.

Although men may be less likely than their female counterparts to be victims of IPV, Dobash and Dobash (2004) recognised the need for further studies on this subject, in order to aid a holistic understanding of this form of violence (Dobash & Dobash, 2004). Whilst there is evidence that female-perpetrated abuse against men does exist (e.g., Carmo, Grams, & Magalhães, 2011; Hines et al., 2007; Hines & Douglas, 2010b), there remains uncertainty as to the prevalence of such abusive relationships (Hines & Douglas, 2010b), given the lack of a sound measure of IPV prevalence (Alhabib et al., 2010).

**Nature and severity of female-perpetrated IPV against men**

There are well rehearsed arguments surrounding the nature and severity of IPV within heterosexual relationships (Afifi et al., 2009). Some evidence suggests that male victims are more likely to retaliate with threats or use physical force than female victims (Coker et al.,
2002). Others argue that violence within intimate relationships may be mutually abusive, with both partners taking victim and perpetrator roles (Carney, Buttell, & Dutton, 2007). Consequently, Goldner (1992) proposes that in some cases, the label of ‘victim’ and ‘perpetrator’ potentially oversimplifies the dynamics of violence in intimate partner relationships. Johnson (2006) highlighted a lack of standard assessment of abusive relationships within both ‘violence against women’ and ‘family violence’ research. In an attempt to better understand the nature of violence and the dynamics of control within relationships, Johnson (2006) identified four distinct types of IPV: intimate terrorism, violent resistance, situational couple violence, and mutual violent control.

Intimate terrorism is categorised as violent and controlling behaviour by one partner against the other. Johnson (2006) claimed, some evidence suggests that victims of intimate terrorism are attacked more frequently, and are subjected to prolonged abusive behaviour. Johnson (2006) further claimed that intimate terrorism victims are more likely to be injured and experience greater psychological distress, have poorer general health, and are more likely to seek help from formal sources including police, medical and counselling services, as well as from family and friends (Johnson, 2006).

Violent resistance is used in reference to a partner who is violent but not controlling, towards a partner who is both violent and controlling. Thus, violence is used in resistance to a partner who attempts to assert general control within a relationship (Johnson, 2006). Within situational couple violence, neither partner is violent and controlling. However, violence may be used as a consequence of escalated conflict between couples (Johnson, 2006). Finally, mutual violent control refers to relationships in which both partners are violent and controlling (Johnson, 2006).

Johnson (2006) claimed that differences in the frequency, severity, escalation and mutuality of IPV, have significant implications for the interpretation of published research findings. For example, Johnson argued that couples who engage in situation couple violence are most likely to be represented by general surveys because they are more likely to take part in such surveys as a means of voicing their experiences. However, the situation specific nature of this violence mean that they are less likely to access emergency services and specialist agencies, and thus be counted as research samples focused on emergency assistance (Johnson, 2006). In contrast, victims of intimate terrorism and violent resistance are less
likely to take part in general surveys for fear of reprisal, whilst being more likely to access court and agency services, given the enhanced frequency and severity of this form of IPV (Johnson, 2006). Therefore, victims of intimate terrorism and violent resistance are more likely to be counted within specialist agency, emergency service and crime samples. Johnson concluded that variations within the nature and severity of IPV accounts for gender discrepancies within IPV perpetration rates, with fundamental differences within the causes, consequences and development of IPV. Thus, findings that fail to distinguish these differences should be treated with caution (Johnson, 2006).

Johnson (2006) outlined that within heterosexual relationships, intimate terrorism is predominately perpetrated by men, whilst violent resistance is perpetrated predominately by women. Furthermore, Johnson (2006) asserts that men are more violent than woman within situational couple violence. However, research by Hines and Douglas (2010b) assert that men’s experience of IPV and intimate terrorism victimisation is chronically under researched (World Health Organization, 2013b). Following a study which investigated Johnson’s theory of intimate terrorism, in relation to male victims of female-perpetrated IPV, Hines and Douglas (2010b) identified that some men do experience intimate terrorism, which the authors propose should be taken seriously.

**Physical aggression against male victims**

Because men are likely to be physically larger and stronger than their female partners, some assume that they are able to restrain their spouse and leave an abusive situation without themselves being physically restrained (Hines & Douglas, 2010a). Consequently, violence perpetrated by women against their male partners may be considered to be less serious, trivialised or even considered humorous (Pagelow & Pagelow, 1984; Saunders, 2002). Further assumptions that men are capable of defending themselves fuel societal beliefs that ‘real men’ cannot be victims (Yarrow & Churchill, 2009). However, some evidence suggests that women are more likely to employ methods of abuse which are not strength dependent (George, 1994; George, 2003).

Evidence indicates that some women use physical objects such as knives, chairs and crockery in attacks against male partners (e.g., Drijber, Reijnders, & Ceelen, 2013; Straus & Gelles, 1986). Further findings support the idea that female-perpetrators can use very severe physical aggression including hitting, kicking, punching, stabbing, biting, choking,
stalking, scratching and pelting (e.g., Drijber et al., 2013; Hines et al., 2007; Hines & Saudino, 2003). Such attacks against male victims have resulted in serious and high rates of IPV within the relationship, including physical, psychological, and sexual abuse (Dutton, 2007; George, 1994; Hines & Douglas, 2010a; Hines & Douglas, 2010b; McNeely, Cook, & Torres, 2001; Williams, Ghandour, & Kub, 2008), with some men reporting that they lived in fear of their female partner’s violent behaviour (Hines et al., 2007).

**Psychological aggression against male victims**

Following a review of empirical studies on female-perpetrated violence within heterosexual relationships, Williams et al. (2008) identified that emotional abuse was the most common form of IPV perpetrated by women. Common forms of psychological aggression used by female-perpetrators against their male partners include wrongly labelling the victim as the perpetrator, falsely obtaining restraining orders, threatening to harm or take away their children, threatening suicide or homicide, blackmailing, and causing financial harm (Drijber et al., 2013; Hines et al., 2007; Hines & Saudino, 2003). Some men have reported that they did not retaliate due to fear of being arrested, a fear of losing custody of their children or because of moral objections to using physical force against women (Cook, 2009; Migliaccio, 2002).

Uncertainty prevails surrounding the psychological consequences for male IPV victims (Drijber et al., 2013). A US based quantitative study by Hines and Douglas (2010b), which investigated the association between posttraumatic stress disorder (PTSD) and IPV victimisation among a clinical sample of men who reported being abused by their female partners, provides initial evidence that PTSD is a major concern among men who sustain IPV and seek help. This study was the first of its kind to provide information on the mental health of men who experience IPV. However, there is not enough evidence of the psychological consequences of male victimisation to be able to make confident assertions about the psychological consequences of IPV for male victims (Hines & Saudino, 2003). Whilst there is evidence that IPV is associated with poor mental health outcomes for both male and female victims (e.g., Afifi et al., 2009), further research exploring the psychological consequences of male victimisation is warranted (Drijber et al., 2013; Hines & Saudino, 2003).

**Barriers to leaving an abusive relationship**
Whilst extensive research has investigated the reasons why some woman stay in abusive relationships (e.g., Chang et al., 2006; Hendy, Eggen, Gustitus, McLeod, & Ng, 2003; Lerner & Kennedy, 2000), there is limited understanding as to why some abused men stay with their partners (Hines & Malley-Morrison, 2001). Anecdotal accounts demonstrate that men experience conventional barriers to leaving a violent relationship including embarrassment, limited financial resources, a commitment to the relationship and concerns for the safety and welfare of their children (e.g., Cook, 2009; Flynn, 1990; Pagelow & Pagelow, 1984). However, further research exploring the reasons why abused men stay with their partners is warranted (Hines & Malley-Morrison, 2001).

**Male help-seeking behaviour**

A broad body of literature has identified that men’s ambivalence towards seeking help is strongly associated with adherence to social norms and ideologies surrounding masculinity (e.g., Addis & Mahalik, 2003; Berger, Addis, Green, Mackowiak, & Goldberg, 2013). Such norms endorse being stoic, self-reliant, emotionally inexpressive, and in control (Addis & Mahalik, 2003; Nam et al., 2010), values which are typically perceived by men as being inconsistent with help-seeking behaviour. A meta-analysis by Nam et al. (2010) identified that gender is a significant predictor of attitudes towards help-seeking behaviour, with women more likely to hold positive attitudes towards help-seeking than men. The admission of a need for help, and dependence on others (Good, Dell, & Mintz, 1989; Vogel, Heimerdinger-Edwards, Hammer, & Hubbard, 2011), and the associated stigma (Nam et al., 2010), may result in some men perceiving help-seeking as a failure to adhere to internalised standards of masculinity (Vogel et al., 2011). However, the nature, source and manner in which help is offered may influence men’s openness to seeking help (Berger et al., 2013), with some evidence suggesting that men react more positively to psychotherapy given its emphasis on maintaining a sense of autonomy and self-reliance (Berger et al., 2013).

**Help-seeking behaviour as a consequence of IPV victimisation**

Extensive research has focused on barriers surrounding female victims’ reporting of IPV and help-seeking behaviour (e.g., Gondolf, 1998; Hutchison & Hirschel, 1998; Kaukinen et al., 2013; West et al., 1998). However, limited research has focused on men’s experiences of help-seeking as a result of female-perpetrated IPV (McCart, Smith, & Sawyer, 2010). The narrative that has emerged from the literature on this topic to date reflects a picture of complexity, underpinned by internal and external barriers including shame, embarrassment
and a lack of awareness of support services (Douglas & Hines, 2011; Tsui, Cheung, & Leung, 2010). These pioneering findings indicate that underreporting of IPV victimisation may be prevalent across both genders (Walby & Allen, 2004).

Tsui et al. (2010) undertook a national US based online self-administered survey investigating whether, and how, abused men seek help. Results indicated that abused men did not seek help because of feelings of shame surrounding their inability to protect themselves, and perceived threats to their masculinity. The men feared losing dignity and respect, alongside a perception that seeking assistance for their victimisation was a sign of weakness, leading to feelings of fear and embarrassment (Tsui et al., 2010). Hines and Douglas (2010a) identified that male victims believed that support services could not help them. Drijber et al. (2013) further identified that male victims feared that their victimisation would not be taken seriously, that they would be ridiculed, humiliated or that they would be accused of being a perpetrator if they sought help. Consequently, male victims were more likely to disclose their abuse to family or friends in their immediate surroundings whom they felt confident would maintain secrecy, rather than access support services (Drijber et al., 2013).

Research on the help-seeking experiences of men who sustained IPV from their female partners suggests that these fears are not misplaced. Male victims who sought help for their victimisation experienced having limited access to sources of support for male victims, or receiving gender stereotyped treatment based on the assumption that men are abusers, resulting in some male victims being treated with suspicion, disbelief, and ridiculed when seeking support (Douglas & Hines, 2011; Hines et al., 2007; Tsui et al., 2010). The need for proof of their victimisation resulted in some men feeling isolated because their stories of victimisation were not believed (Hines et al., 2007). Furthermore, the men were rejected or ridiculed by the service providers from whom they sought help (Cook, 2009; Douglas & Hines, 2011; Hines et al., 2007). The nature of these negative help-seeking experiences has been shown to have lasting and significant implications on victims’ mental health, leading to higher rates of PTSD. Research by Hines (2007) demonstrated that the association between sustaining IPV and PTSD was stronger where there were greater levels of hostility toward male victims when voicing their experiences.
Whilst service provision for male victims within the UK has increased, information on victim’s perceptions of these services remains underreported (Tsui et al., 2010). For male victims who do seek help and utilise services, individual counselling appears to be among the most popular form of support because of its perceived helpfulness and availability (Tsui et al., 2010). However, Tsui et al. (2010) outlined the need for services to address factors including cultural and societal expectations, masculine identity, secretiveness, and shame, which may limit help-seeking behaviour in male victims.

Tsui et al. (2010) concluded that intolerance against male victims of female-perpetrated IPV remains prevalent within society. However, following recent increases in public awareness about this problem, Portuguese based researchers estimate that the number of male victims who seek help for their victimisation will rise in the near future (Carmo et al., 2011). Research on men’s help-seeking experiences as a result of female-perpetrated IPV is in its infancy, with the majority of research US based (e.g., Douglas & Hines, 2011; Hines et al., 2007), where sources of support for male victims are more common than in the UK (Tsui et al., 2010).

**IPV victimisation, masculinity, social norms and stereotypes**

As noted above, the difficulty in integrating a social narrative of hegemonic masculinity with the paradoxical experience of being a victim is a persistent theme running through the literature on male victimisation (e.g., Lisak, 1994; Rentoul & Appleboom, 1997; Stanko & Hobdell, 1993; Yarrow & Churchill, 2009). Acknowledgement of the many associated emotional consequences of IPV victimisation, including vulnerability, helplessness, sadness, depression, humiliation, fear, and shame (Follingstad, Wright, Lloyd, & Sebastian, 1991; Hines & Malley-Morrison, 2001) do not conform with ideals of hegemonic masculinity (Durfee, 2011). Rather, only subsequent feelings of anger fit with the traditional masculine ideology (Lisak, 1994). Hollander (2001) emphasised the pervasiveness of gender within the performance of victimisation, highlighting the commonly associated traits of victimisation as consistent with cultural and societal narratives of femininity. Hence many male victims struggle to acknowledge ‘feminine’ feelings, leading to reduced self-esteem and self-worth (Lisak, 1994).

Research by Durfee (2011), which analysed the narratives of male victims of IPV who filed for a protection order against their female partners in the United States, identified that
these men found ways to negotiate the paradoxical discourses of victimisation and hegemonic masculinity. These men did not see themselves as victims in the traditional sense, rather their stories reflected ‘victimised masculinity’ because they portrayed their partner as an abuser, however, they themselves did not present as a helpless victim in need of protection (Durfee, 2011). Research that has explored men’s discourses of female-perpetrated abuse demonstrates that men struggled to identify themselves as victims, and had difficulty articulating their experiences of abuse, resulting in a lack of self-acceptance (Zverina, Stam, & Babins-Wagner, 2011). Male victims described themselves as independent and were reluctant to disclose their abuse for fear of being perceived as less masculine (Drijber et al., 2013; Migliaccio, 2001; Tsui et al., 2010).

**Implications for professionals working with male IPV victims**

Zverina et al. (2011) recommended the need for therapists working with male victims to recognise the significance of resistance to victim status, highlighting that the few therapeutic services available to male victims are typically based on female-centred approaches, in which the identity of the victim is presumably less problematic. Therefore, the authors outline the need for a more gender sensitive approach to working with male victimisation (Zverina et al., 2011).

Myers (1989) highlighted that male victims anticipate enhanced empathy and acceptance of their victimisation from female therapists, as female therapists are less likely to endorse a masculine ideology, which emphasises male strength and self-determination. The gender of the therapist was reported in a study by Hogan et al. (2012) who identified that the therapist’s gender presented a salient factor in their work with male victims. Female therapists described striving to offer male victims an experience of a safe relationship with a woman, whilst some male therapist reported that they were wary about the potential impact of masculinity on their work (Hogan et al., 2012).

Gadd, Farrall, Dallimore, and Lombard (2003b) advocated that practitioners who encounter male victims of IPV suspend their assumptions surrounding victimisation and attempt to provide assistance that is sensitive to a victim’s sense of masculinity (Rentoul & Appleboom, 1997). Tsui et al. (2010) outlined the need for services to address the conflict between victimisation and masculine identity, as gender role conflict is significantly associated with reduced help-seeking behaviour in male victims. In an attempt to enhance service usage,
the authors stress the need for support services to actively address such factors as male victims’ secretiveness and shame in an attempt to encourage more men to seek help (Tsui et al., 2010). Further research on male victimisation is called for in order to enhance awareness and understanding of this topic, thereby reducing the pervasiveness of stereotypes surrounding masculinity and victimisation (Rentoul & Appleboom, 1997).

**The current study**

Pioneering studies offer preliminary understanding of the experiences of male victims of female-perpetrated IPV; however, male victimisation remains a subject of ambiguity, in need of further research (Randle & Graham, 2011; World Health Organization, 2013a). In particular, we know little about the experiences of male victims within the UK (Dempsey, 2013), therefore, the aim of this study was to explore the men’s experiences of female-perpetrated IPV, including an exploration of how the men made sense of their experiences and their accounts of the nature and severity of the abuse they have experienced.

UK based research exploring male victimisation within the field of criminology (Gadd et al., 2003a), sociology (Allen-Collinson, 2009a, 2009b, 2011) and psychology (Esquivel-Santoveña & Dixon, 2012) have enhanced understanding of this subject area. However, as noted above, much of the existing research has been conducted in the United States (e.g., Chaudhuri, 2012; Douglas & Hines, 2011; Durfee, 2011; Hines et al., 2007; Hines & Douglas, 2010a; Hines & Douglas, 2010b; Hines & Malley-Morrison, 2001; Migliaccio, 2002; Tsui et al., 2010); Holland (Drijber et al., 2013), Portugal (Carmo et al., 2011) and Canada (Zverina et al., 2011). Hence, there appears to be a gap in the literature in relation to exploring the experiences of this group of men within the UK, which this current study aims to address.

Authors of existing literature advocate the need for further research on male victimisation that increases awareness and understanding of the experiences of male victims of female-perpetrated IPV (Hines et al., 2007; Migliaccio, 2002; Randle & Graham, 2011). In particular, research that explores abused men’s support networks (Tsui et al., 2010), including experiences and perceptions of help-seeking as a result of victimisation (Hines & Douglas, 2010a; Hines & Douglas, 2010b; Tsui et al., 2010), and the impact of masculine ideologies on how men make sense of their experiences (Randle & Graham, 2011) is warranted. Such studies may increase understanding of male victims’ experiences and needs. Furthermore, Hines and Malley-Morrison (2001) propose the need for research that explores men’s
reasons for remaining in the abusive relationship is required. Exploration of male victims’
experiences of emotional abuse (Douglas & Hines, 2011; Hines & Malley-Morrison, 2001)
and the psychological consequences of IPV victimisation is also recommended (Drijber et al.,
2013; Hines & Saudino, 2003), as the consequences of male victimisation remains under

**The need for qualitative research**

Lempert (1994) advocated that analysis of victims’ experiences of IPV, may offer insight into
the dynamics of abuse, as well as victims’ self-concepts, including the social meanings of
their experiences, which in turn can facilitate understanding of male victims’ experiences.

Whilst there is growing literature on IPV against men, there is a dearth of qualitative
research exploring men’s narratives of IPV victimisation (Allen-Collinson, 2009b, 2011).
Hence, researchers have not responded to Lempert’s call for research on male IPV
victimisation as much as they might.

This study sought to address the need for further qualitative research that offers in-depth
understanding of men’s experiences of IPV victimisation with a British sample (Allen-
Collinson, 2009a, 2009b; Migliaccio, 2002). The limited research on female-perpetrated IPV
against men limits understanding of the nature and processes surrounding male
victimisation (Allen-Collinson, 2009b). Randle and Graham (2011) proposed that qualitative
research may help to generate theories and understanding of IPV from a male perspective,
and therefore alleviate the need to draw on female-centred frameworks and models.

A number of authors have outlined the need for further research on male victimisation, in
order to better understand men’s experiences of abuse (e.g., Hogan et al., 2012; Migliaccio,
2002), leading to the ultimate aim of improving services for male IPV victims. There remains
a need to increase evidence-based findings around IPV (Afifi et al., 2009; Douglas & Hines,
2011; Tsui et al., 2010), and enhance understanding of the complexity of IPV (Heise, 1998),
from a male victim’s perspective (Randle & Graham, 2011).

This research builds on my Masters dissertation research which explored counsellors’
experiences of working with male victims of female-perpetrated domestic abuse (Hogan et
al., 2012). This earlier research stemmed from my experience of working therapeutically
with a male client who had been in an abusive relationship with a female partner. My first-
hand experience of working with a male victim informed my desire to further develop my
understanding and knowledge of the experiences of male victims of female-perpetuated IPV. Blair (2010) proposed that therapeutic practice and research should continually inform each other leading to the development of evidence-based practice and practice-based evidence (Stricker, 2003).

Dissemination of empirical research on male IPV victimisation may enhance recognition of men’s experiences of IPV (Ellsberg & Heise, 2002) and further develop rudimentary understanding of male victimisation. Henton (2012) outlined the importance of research dissemination to the ongoing identity and status of counselling psychology more generally, helping the profession to mature. Therefore, a central aim of this study was to disseminate the findings to a wide audience in order to increase awareness and understanding of male victimisation and more broadly to contribute to the development of practice-based research within counselling psychology (Henton, 2012).

**The unique contribution of this study**

As noted above, the majority of research on male victimisation has been conducted in the United States, where sources of support exclusively for men are more widely available (Cheung, Leung, & Tsui, 2009). To my knowledge, no large-scale qualitative research has explored men’s experiences of IPV victimisation with a British sample, a gap within the current literature which this research study has filled. UK based research on male victimisation has explored the experiences of single sample male IPV victims (e.g., Allen-Collinson, 2009a; Gadd, 2004) and used a case study methodology (e.g., Allen-Collinson, 2009a, 2009b) or a review of published research (e.g., Gadd et al., 2003b). By recruiting and analysing data from in-depth interviews with 23 male IPV victims, this large scale qualitative study (Braun & Clarke, 2013) is distinctly different from previous research, and addresses Migliaccio’s (2002) call for qualitative research conducted with a large sample of male victims, in order to conduct in-depth analysis of men’s IPV experiences.

The methodology employed within this research offered a distinct contribution to studying the experiences of male IPV victimisation. Previous studies have recruited men who have sought Internet or telephone-based help for their IPV victimisation (e.g., Hines & Douglas, 2010a; Hines & Douglas, 2010b; Migliaccio, 2002). However, the current research study recruited men who had sought help from a range of sources of support (i.e., speaking to friends and family, accessing counselling, domestic abuse services, support groups set up for
male victims, online and telephone-based support services), as well as recruiting men who had not sought any help for their victimisation. Therefore, the sampling strategies employed within this thesis addressed a gap in the current literature by recruiting men who have sought help from a range sources, as well as recruiting men who have not sought any help for their victimisation (Hines & Douglas, 2010a; Hines & Douglas, 2010b).

Methodology

Aims
The aims of this study were to explore: (a) men’s experiences of female-perpetrated IPV, including their experiences of physical and psychological/emotional abuse; (b) men’s help-seeking experiences and/or their perceptions of utilising support services/support networks; and (c) barriers to men leaving their abusive relationship.

Research design
Rubin and Rubin (1995) proposed that a study is best suited towards qualitative inquiry if it requires rich and detailed understanding, communicated through participants’ narratives. Given the aims of this study, and the focus on men’s experiences and sense-making, a qualitative design was appropriate.

Several scholars have highlighted the importance of conceptual ‘fit’ as a feature of good qualitative research design (e.g., Braun & Clarke, 2013; Willig, 2013). Experiential qualitative research seeks to understand the experiences, perspectives and meanings of another person (Braun & Clarke, 2013). A broadly experiential qualitative research stance was adopted in order to facilitate understanding of how participants perceived, experienced, and made sense of being in an abusive relationship (Braun & Clarke, 2013), through the use of qualitative interviews and thematic analysis. Braun and Clarke (2006) outlined the importance of the researcher acknowledging their theoretical framework and the corresponding position of the research question. Consequently, I now outline the ontological and epistemological assumptions that underpinned the research methodology.

Epistemology
As this research aimed to explore the men’s experiences of female-perpetrated IPV, a contextualist perspective was adopted. This is a position that straddles the poles of essentialism and constructionism (Braun & Clarke, 2006), and assumes ‘reality’ can be (partially) accessed through the language of the research participants (Braun & Clarke,
Contextualism does not adhere to the belief that there is a single reality, rather it assumes that reality is provisional, emerging from contexts, and the positions of the researcher (Braun & Clarke, 2013). The lynchpin of contextualism is the notion that human behaviour does not occur in a social vacuum, rather it is embedded within the context of time, culture and history (Rosnow & Georgoudi, 1986). Therefore, a central aim of this study was to explore how the research participants made sense of their experiences in their particular social, cultural, and historical contexts (Forrester, 2010).

Akin to the ontological position of critical realism, contextualism acknowledges participants making sense and drawing meaning from their experiences, and the impact of broader social context on such meanings (Braun & Clarke, 2006). Within the critical realist position, there is recognition that knowledge is socially influenced, and reality can only be partially accessed (Braun & Clarke, 2013). Knowledge and truth are, to some extent, socially constructed and therefore cannot be truly objective (Forrester, 2010). The researcher and participant co-construct meaning, therefore the interviewer is required to consider their own perspectives and assumptions as a researcher (Braun & Clarke, 2013). Attempts at recognising my own assumptions are addressed in the reflexivity section below.

Nonetheless, participants’ external reality is seen as ‘authentic’ and provides a foundation of knowledge that can influence understanding of IPV against men, which in turn may serve as a catalyst for the development of change within the field of IPV (Braun & Clarke, 2013).

**Participants and recruitment**

Participation in this study was invited from men over the age of 18 who self-identified as a victim of female-perpetrated IPV. For the purpose of this study, the definition of intimate partner violence was one used by the Home Office:

> Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners regardless of gender or sexuality. This can encompass, but is not limited to, the following types of abuse: psychological, physical, sexual, financial, emotional (Home Office, 2013).

Controlling behaviour was defined as:

> A range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for
personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour (Home Office, 2013).

Coercive behaviour was defined as:

An act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim (Home Office, 2013).

These definitions were included in the participant information sheet (see appendix 2) and in advertisements for the study.

A purposive sampling strategy was used in order to generate in-depth understanding of the research topic (Braun & Clarke, 2013). Male victims of IPV may be a “hidden,” and “difficult to engage” population because participation may be risky, especially given that the participants were/had been in an abusive relationship. Furthermore, IPV is a sensitive topic which many men prefer to keep private due to stigma and shame surrounding male victimisation (Carmo et al., 2011; Randle & Graham, 2011). Therefore, participants were recruited via a range of sampling strategies.

The research was advertised at domestic abuse services throughout the UK, through which two participants were recruited. Through my own networks as the researcher, the study was also advertised at mental health support services and drug and alcohol support services throughout the UK. Nine participants were recruited via this strategy. Snowballing was used whereby I asked participants if they knew of any other men who might like to take part in the study; two participants were recruited via this strategy. Preliminary findings were presented at the British Psychological Society’s Division of Counselling Psychology annual conference 2013 and 2014, and at the Male Psychology Conference, University College London, 2014. Two participants contacted me directly to volunteer their participation following these presentations. An advertisement was placed on online support forums for male victims of domestic abuse, as well as through male victim support blogs, through which eight participants were recruited.

These sampling strategies facilitated the recruitment of men who had sought help for their IPV victimisation from a range of sources, as well as those who had not sought help at all, thus addressing the recommendations for the recruitment of male victims outlined by Hines and Douglas (2010a) and Hines and Douglas (2010b), who proposed the need to recruit men
who have sought help from sources of support other than Internet or telephone-based services, or who have not sought any help for their victimisation.

Initially I aimed to recruit 10-15 participants, however, through the sampling strategies outlined above, I managed to recruit more participants than I had initially anticipated. The final sample consisted of 23 men, a sizable sample for qualitative doctorate research (Mason, 2010). The participants were largely White British (16). Most of the men (12) identified as working class, and the majority (17) had at least one child with their abusive partner. The time period since leaving the relationship and taking part in the interview ranged from 11 months to 18 years (mean length: 4 years 9 months). Eleven participants were in a relationship at the time of taking part in the interview, four of whom were in an abusive relationship. See Table 1 below for further details of the sample.

**Table 1: Characteristics of the sample (N = 23)**

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<td>Relation status at the time of interview</td>
<td>Lost contact with one or more children (9)</td>
</tr>
<tr>
<td>----------------------------------------</td>
<td>-------------------------------------------</td>
</tr>
<tr>
<td>Single (13)</td>
<td></td>
</tr>
<tr>
<td>In a relationship (7)</td>
<td></td>
</tr>
<tr>
<td>Married (4)</td>
<td></td>
</tr>
<tr>
<td>Length of abusive relationship (range)</td>
<td>6 weeks – 31 years (mean: 12 years 5 months)</td>
</tr>
<tr>
<td>Number of abusive relationships</td>
<td>One (17)</td>
</tr>
<tr>
<td></td>
<td>Two (6)</td>
</tr>
</tbody>
</table>

**Data collection**

Braun and Clarke (2013) propose that interviews are best suited to research questions which are concerned with exploring participants’ experience. Data was collected using semi-structured interviews. Semi-structured interviews offered participants the opportunity to express any issues they deem important, allowing for unexpected issues to be raised, whilst ensuring all the main areas the researcher wished to explore were addressed (Braun & Clarke, 2013). The aim of these interviews was to offer a forum for open dialogue between the researcher and participants, allowing me to gain descriptive data on the participants’ experiences (Rubin & Rubin, 1995).

**Interview schedule**

In an attempt to enhance understanding of male victimisation and address the aims of the study, the interview schedule included questions about participants’ experiences of victimisation, including the men’s experiences of emotional abuse (Douglas & Hines, 2011; Hines & Malley-Morrison, 2001). The participants were asked about their use of support networks and experiences/perceptions of help-seeking experiences (Hines & Douglas, 2010a; Hines & Douglas, 2010b; Tsui et al., 2010), the impact of masculine ideologies on the men’s experience of IPV victimisation (Randle & Graham, 2011), as well as barriers to leaving the abusive relationship (Hines & Malley-Morrison, 2001). Demographic information was obtained from the participants in order to identify the diversity and limitations of the sample. Participants were asked to use their own words to define their age, race and ethnicity, relationship status, highest level of educational achievement, occupation and social class (see appendix 3 for a copy of the demographic form).

**Procedure**

A common assumption is that face-to-face interviews are the gold standard for interview research and virtual modes of interviewing like telephone and Skype interviews provide inferior substitutes for when the ‘real thing’ is not possible, rather than meaningful
interview modes in their own right (Braun & Clarke, 2013). However, an increasing body of empirical research shows that virtual interviews provide alternative rather than inferior modes of interviewing and indeed virtual modes can be superior to face-to-face in some contexts and with some participant groups (Braun & Clarke, 2013; Hanna, 2012; Irvine, 2011; Mealer & Jones, 2014; Sturges & Hanrahan, 2004). Braun and Clarke (2013) proposed that face-to-face interviews may be off putting for participants who are ‘hard to engage’. Thus, given the sensitive nature of the research topic, and the potential embarrassment surrounding male victimisation (Carmo et al., 2011; Randle & Graham, 2011), all participants were given the choice of face-to-face, Skype or telephone interviews. Sturges and Hanrahan (2004) identified that participants value the autonomy of choosing the type of interview they would like to participate in. Furthermore, this flexibility may have enhanced the safety of the participants by offering participants autonomy in choosing the interview location and format, and a greater (telephone) or lesser (face-to-face) degree of anonymity. This was particularly important given that some of the men were still in an abusive relationship at the time of conducting the interview, and living with their abusive partner (Ellsberg & Heise, 2002).

Hanna (2012) identified that the use of Skype as a medium for qualitative research offers a feasible alternative to face-to-face interviews. The visual element afforded to both the researcher and the participant facilitates both a visual and audio interaction. Sturges and Hanrahan (2004) outlined that telephone interviewing may reduce feelings of anxiety and embarrassment by offering participants greater anonymity, thereby enhancing the validity of the data obtained, whilst yielding good quality data that is comparable to face-to-face interviews. Telephone interviews allowed for the recruitment of geographically dispersed participants.

**Interview procedure**

As a result of this flexible approach to conducting the interviews, 13 participants chose face-to-face interviews. Seven of these interviews took place at the participant’s home, and six at a quiet and convenient venue. Seven participants chose telephone interviews; five of these telephone interviews took place at the participants’ home and two at the participants’ place of work. Three participants chose Skype interviews: each was conducted at the participants’ homes. All face-to-face and telephone interviews were audio recorded using a digital
dictaphone. Skype software allowed the Skype interviews to be audio recorded (Hanna, 2012).

Face-to-face interviews offered an opportunity to create a ‘safe space’ for the participants to talk. McLeod (2015) suggested that counsellors have the potential to be effective interviewers, on account that they are able to recognise non-verbal communication, are good at listening, and can use their own emotional response to participants’ accounts in order to facilitate understanding of participants’ experiences. Meeting participants and conducting interviews face-to-face offered an opportunity for me to utilise these skills. I also attempted to show interest and be non-judgmental through the use of active listening skills (Braun & Clarke, 2013). However, I was also cautious about not ‘responding therapeutically’, and being too non-directive, limitations which McLeod (2015) proposed can have a negative impact on the interview. Research supervision and reflexivity (discussed below) were helpful in exploring these potential pitfalls.

All three Skype interviews were conducted in the participants’ homes, thus the participants were able to remain in a private and safe space, offering a neutral and personal location for the interviews to be conducted (Braun & Clarke, 2013; Hanna, 2012). Each of the participants who choose Skype as their interview method, were geographically dispersed throughout the UK. Two of these participants lived in a different country within the UK. Participants chose this method on account that it offered a face-to-face interview experience without the need for travel, and the use of Skype was a medium of communication with which they were familiar.

Telephone interviewing was a method of participation specifically chosen by some of the men on account that they were reluctant to participate in a face-to-face interview (Sturges & Hanrahan, 2004). This method of participation allowed the men to open up about their experiences in a way that they experienced as less shaming. In line with earlier findings (Mealer & Jones, 2014), telephone interviews appeared to offer a useful method for obtaining qualitative data on sensitive topics.

The length of interviews ranged from 38 minutes and 56 seconds to 2 hours, 14 minutes and 53 seconds (mean length: 1 hour, 25 minutes and 13 seconds). Research by Irvine, Drew, and Sainsbury (2013) highlighted variations in the length of face-to-face and telephone interviews. With telephone interviews frequently of shorter duration than face-to-face, and
the interviewee speaking for less time (Irvine, 2011). However, within the current study, the seven telephone interviews ranged from 38 minutes and 56 seconds to 1 hour, 58 minutes and 57 seconds (mean telephone interview: 1 hour and 36 minutes and 42 seconds), suggesting that the men who took part in telephone interviews may have felt comfortable in discussing their experiences at length. The men’s experiences of taking part in a telephone interview are more fully addressed in the theme ‘Barriers to seeking help – “It’s the shame of it”’ discussed in the results section below.

Regardless of the interview approach employed, initial contact was made with each of the participants (via email or telephone) before conducting the interview (Sturges & Hanrahan, 2004). This offered an opportunity to outline the aims of the study, agree a convenient time, date and location for the interview to take place, and presented an opportunity for me to answer any questions participants had about the study.

**Piloting**

Following the recommendation of Braun and Clarke (2013), the interview schedule was reviewed and subsequently revised after the first three interviews had been conducted and transcribed. Following a review of the transcript with my research supervisors, it was agreed that further flexibility in applying the research questions, by asking about topics in the moment rather than sticking too rigidly to the interview schedule would be beneficial, thus more freely following the research participants’ developing interview narratives. Rubin and Rubin (1995) highlighted the importance of flexibility in qualitative interviewing, encouraging the exploration of topics in different ways, and remaining open to learning from the interview process. Consequently, I learnt the interview schedule from memory, in order to avoid asking participants questions about topics that have already been addressed. Thus facilitating enhanced listening to what the participants were saying (Braun & Clarke, 2013).

Rubin and Rubin (1995) suggested that the continuous nature of qualitative interviewing involves redesigning the questioning employed. Within the early stages of interviewing, the researcher should remain open to a variety of explanations, ideas and themes portrayed by the participant (Rubin & Rubin, 1995). Following an initial review of the findings of the first three interviews, participants reported feelings of isolation. Furthermore, the men’s accounts reflected attempts to make sense of their partner’s abusive behaviour, through an
evaluation of their own understanding of the function of violence. These initial findings were incorporated into the interview schedule (see appendix 4) in order to further explore these initial themes within subsequent interviews.

Reflexivity

Braun and Clarke (2013) outline the importance of being able to step outside one’s own standpoint and cultural membership, in order to critically reflect upon common values and assumptions that shape the research process. As a single, White heterosexual male, of working class background, I shared group identify with a number of the research participants. As somebody who has not been in an abusive relationship, does not have any children and at 32, was 15 years younger than the average age (47) of the men who took part in this study, I also occupied multiple ‘outsider’ positions. Manderson, Bennett, and Andajani-Sutjahjo (2006) suggested that social factors including gender, age, socioeconomic status and ethnicity need to be acknowledged as factors that may influence the research interview, analysis and findings. Thus, following the recommendations of Ahern (1999), I maintained a reflexive journal throughout the research process, which helped me to consider the potential impact of social factors on the research process.

Example of reflexive journal keeping

Maintaining a reflexive journal facilitated my learning by providing me with a forum to record my thoughts, feelings, and assumptions surrounding the research topic, and to reflect upon my experiences of interviewing, analysing the findings, and writing up this thesis (Etherington, 2004). The following extracts from my reflexive journal provide an example of how maintaining this journal aided my reflexivity, helping me to listen to what my participants said, and develop my skills as a qualitative researcher.

Example extract 1

This reflection was recorded following the first three interviews I conducted. My experiences led me to evaluate and redesign my interviewing technique. Following transcripts of each of these interviews, I recorded the following comments in my diary:

- I was surprised by how nervous I felt when conducting my first three interviews. I hadn’t expected to begin interviewing as soon as I did. I had expected to struggle to recruit participants, so managing to conduct three interviews within four weeks was a pleasant surprise. However, there was not
much time to reflect on my experience of conducting the first interview before conducting the next two. Listening to the men’s stories was a very humbling experience. They each provided me with a vivid account of the abuse they experienced and were very obliging when answering my interview questions. However, at the time, I was aware that some of the questions I asked were rather unclear, in part due to my nervousness, but also my lack of skill in really listening to what the participants said, and following their narratives. This was further reinforced when transcribing the interviews, which vividly brought back my feelings of anxiety, but also elicited feelings of frustration at what I had failed to hear the participants say, and the awkwardness of some of my questions, for example during my interview with Shane (second interview) I asked:

Me: Sure, what about the impact of masculinity?
Shane: What about it?
Me: Err, do you think masculinity, what it means to be a man, do you think that’s had an impact on errm, the way you’ve viewed what’s happened, or, or, you’ve mentioned issues, shame, do you think that’s tied in with that in any way?

Reflecting on this experience, I am able to recognise the importance of asking clearly worded questions. Here I am asking a leading question – by assuming that masculinity had an impact on Shane’s experiences. I subsequently followed this up by asking several questions at once, none of which were terribly clear.

At the time of conducting the interview, and now, as I write my reflexive journal, I am aware of how uncomfortable and vulnerable I felt conducting interviews on a sensitive topic. I thought participants would assume I wouldn’t be able to understand what they had been through, and my questions would demonstrate my ignorance. I thought I needed to ask questions which demonstrated my knowledge of domestic abuse against men. Following a review of these transcripts with my research supervisors, I was reminded of the need to build rapport and in so doing, try to put participants at their ease, rather than demonstrate my knowledge. Consequently, I will endeavour to be extra vigilant in listening to my participants’ accounts, which in turn, I hope
with enable me to build rapport with my participants, a key skill of qualitative researchers, as proposed by Braun and Clarke (2013).

Example extract 2
This reflection was recorded following my interview with Stuart (interview 6). Here I reflected on my personal reaction to the participant and the interview process. My experience led me to record the following comments in my reflexive journal:

Jason presented himself as a ‘macho male’, he wore jeans, smart shoes, and a short sleeved shirt, unbuttoned to his mid chest, revealing a thick gold chain, and several tattoos on his chest and both of his forearms. His head was shaven, and he swaggered into the interview room shook my hand firmly and nodding his head, he introduced himself: ‘Alright mate, I’m Jason’. I noticed that I felt judged by Jason; I assumed that he was evaluating how masculine I was, which led me to think about the power dynamics of the interview, and how he may have felt. Here was a ‘macho male’ telling another man about his experiences of being abused by his female partner.

Throughout the interview Jason ‘performed masculinity’ in a way which personified what I had been reading about in the literature. He was emotionally inexpressive throughout, despite recalling some rather traumatic experiences. Prior to conducting this interview, I had spent some time reflecting upon the ways in which I ‘perform masculinity’ by adhering to traditional gender roles and expectations, including my reluctance to show emotional distress, and my preference to keep things to myself – traits which I have assumed to conform with what I consider to be masculine appropriate behaviour. During my interview with Jason, I attempted to step outside of my masculine identity and question some of the unspoken rules that Jason assumed I knew, for example:

Me: Was there anyone you used to talk to at the time?
Jason: No, no one
Me: No okay
Jason: Can’t can you
Me: Why do you think that?
Jason: Why, because you’re a man aren’t ya
This experience highlighted to me the importance of being mindful of how dominant discourses surrounding masculinity may influence the research relationship, the information provided by the participant, and my subsequent interpretation of the data, as outlined by Manderson et al. (2006). Maintaining a reflexive diary enabled me to question masculine norms which I had previously taken for granted. This provided an opportunity for introspection, which in turn I believe enhanced the quality of the data that I obtained from the participants (Etherington, 2004).

Whilst qualitative research values the subjectivity and humanness of the researcher as a key element of the research process, the role of the researcher in shaping the research needs to be carefully considered throughout (Braun & Clarke, 2013). Maintaining a research journal facilitated this process, offering a forum to record my thoughts, feelings, and assumptions surrounding the research topic. Gadd (2004) outlined the value of reflecting on the dynamics between the researcher and participants within the research interview, in order to reflect upon how participants’ narratives are constructed. Furthermore, McLeod (2015) proposed that the interviewer is the main research tool in qualitative research, and outlined the value of reflecting on one’s own responses after each interview in order to facilitate deeper understanding of the interview transcript. Therefore, following each interview, I took time to reflect on the interview process including my reactions – thoughts, feelings and fantasies - to each participant and the surrounding environment (Braun & Clarke, 2013; McLeod, 2015). Maintaining a reflexive diary facilitated exploration of my own preconceived ideas and biases surrounding the research topic, thus helping to maintain the quality of the analysis (McCormack & Joseph, 2014).

Given the persistent difficulties cited in current literature surrounding the conflicting identities of masculinity and victimisation (e.g., Corbally, 2015; Drijber et al., 2013; Oliffe et al., 2014; Rentoul & Appleboom, 1997; Yarrow & Churchill, 2009), I used my reflexive journal to help me reflect on own perceptions of masculine identity, and my own performance of masculinity within each interview. Manderson et al. (2006) identified that both interviewer and interviewee present themselves as gendered, and perform in a manner that is consistent with this gendered identity, which in turn shapes the stories that are told, as both parties contribute towards the co-creation of knowledge.
Sallee and Harris (2011) recommended that researchers be mindful that both the researcher and participant engage in gender performance during interviews, by adhering to traditional gender roles and expectations. This was particularly significant given that the interviewer and participants were both male, and discussing a topic that may be considered the antithesis of masculinity (Corbally, 2015; Migliaccio, 2002; Randle & Graham, 2011). Braun and Clarke (2013) cited researcher reflexivity as essential in reducing the discriminatory practices that are an inevitable, yet unintentional part of qualitative research. Keeping a reflexive journal helped me to recognise and ‘bracket’ both personal and collective values and assumptions surrounding masculinity and victimisation (Addis & Mahalik, 2003; Sallee & Harris, 2011).

Moore (2015) claimed that the researcher must carefully consider the potential advantages and disadvantages to disclosing personal experiences of the research topic. Citing social comparisons as a potential source of shame that may inhibit male participants from disclosing their true thoughts and feelings to a male researcher, Moore (2015) proposed that it is the ethical responsibility of the researcher to consider whether personal disclosure may result in the participant feeling negatively about themselves. Consequently, in an attempt to limit possible feelings of shame, potentially creating a barrier between myself and the participants (Moore, 2015), I decided not to disclose that I did not have personal experience of being in an abusive relationship. However, if participants asked about my experience of being in an abusive relationship, I answered their questions. At the beginning of each interview, I outlined my interest in male IPV, something which often helped to build a relationship with my research participants (Braun & Clarke, 2013). Further reflection on the interview process is provided in the discussion.

Coles, Astbury, Dartnall, and Limjerwala (2014) highlighted that researchers may be at risk of vicarious trauma through repeated exposure to distressing and traumatic text when conducting, transcribing and analysing qualitative interviews on partner violence. Therefore, I employed a number of strategies that helped me to limit my risk of vicarious trauma. Strategies that proved to be particularly helpful including receiving support from my researcher supervisors. I was in personal therapy throughout the process of conducting this research, which helped me to monitor and manage my emotional well-being. I also factored regular breaks into my research timetable, including making time for self-care and
recreational activities, thereby reducing extended exposure to the data, some of which could be disturbing (Coles et al., 2014).

**Ethical issues**

All research involving human participants has inherent risks (BPS, 2010), however, IPV research presents increased ethical and safety considerations on account of the potential dangers to participants’ safety, as well as the potential for causing distress (Ellsberg & Heise, 2002). Consequently, the inherent risks involved in IPV research can only be justified if the data is likely to enhance awareness and understanding of IPV, leading to the development of improved services and sources of support for victims (Ellsberg & Heise, 2002), a central aim of this research study.

Ethical approval for this study was granted from the University of the West of England, Faculty Research Ethics Committee (FREC). This study adhered to the British Psychological Society (BPS) (2010) Code of Human Research Ethics. Prior to participation, each participant was given a Participant information sheet (PIS), which they were asked to read. In order to meet the BPS (2010) principle of autonomy and self-determination, the PIS form included detailed information about the nature of the research study, as well as practical and ethical information surrounding participation. Following the recommendations of Ellsberg and Heise (2002), measures were put in place to maintain confidentiality, with awareness that breaches in confidentiality may put the men’s safety at risk. In accordance with the Data Protection Act (1998), participants were informed that electronic information and audio recordings of face-to-face, telephone and Skype interviews would be stored in password protected files.

Participants were informed about their right to withdraw and advised of constraints to retrospective withdrawal (Braun & Clarke, 2013). Participants were encouraged to contact the researcher within one month of participation if they wished to withdraw. The World Health Organization (2001) proposed a key ethical obligation of the researcher in order to minimise risk to research participants taking part in IPV research, is to provide participants with appropriate support service information. Therefore, all participants were provided with the contact details of support services for male victims of IPV within the PIS. The researcher also offered all participants an opportunity to receive a brief summary of the research findings (Braun & Clarke, 2013).
Informed consent was obtained from each participant before conducting the interview. Participants conducting face-to-face interviews were asked to sign the consent form (see appendix 5), or to provide a statement about consent via email if participating in a telephone or *Skype* interview. All participants were given an opportunity to ask questions about the research and their participation both before and after the interview, and they were made aware of their right to withdraw their participation.

In order to conceal participants’ identity and maintain anonymity, each participant was invited to choose their own pseudonym at the start of the interview (Braun & Clarke, 2013). I transcribed all the interviews verbatim, following the notation system outlined by Braun and Clarke (2013). During this process I anonymised identifiable information including names of people and locations (Saunders, Kitzinger, & Kitzinger, 2014). Whilst every effort was made to maximise participant anonymity, participants were made aware that complete confidentiality could not be guaranteed (Braun & Clarke, 2013).

**Data analysis**

Thematic analysis was used to analyse the data following the six-phase process set out by Braun and Clarke (2006). The six-phases of analysis included: phase one, familiarising myself with the data. This was done through transcription of each interview, followed by a process of ‘repeated reading’ of the 23 transcripts, and searching for meanings and patterns, across the entire data set (Braun & Clarke, 2006), that were relevant to the research question (Braun & Clarke, 2013). These patterns and meaning were recorded in note form on the transcripts, and within my reflexive research journal (Braun & Clarke, 2013).

Phase two, generating initial codes, involved a process of systematically working through the entire dataset, in order to identify all aspects of the data (complete coding) that were of interest or relevance the research question (Braun & Clarke, 2006, 2013). Each individual code was given a brief title which captured the essence of what I considered to be interesting about the data (Braun & Clarke, 2013). Code names were written next to the associated text which was highlighted using the comments feature in *Microsoft Word* (Braun & Clarke, 2013). Codes reflected both the content of the data (data-derived codes) and theoretical assumptions and meanings that underpinned the participants’ narratives (researcher-derived codes) (Braun & Clarke, 2013). All instances of text, across the entire
dataset, in which individual codes were identified, were subsequently collated together (Braun & Clarke, 2013).

During phase three, I began searching for candidate themes across each of the codes generated in phase two. This involved me looking for areas of similarity and overlap between codes, as well as exploring concepts, topics or issues that underpinned several codes (Braun & Clarke, 2013). Braun and Clarke (2006) proposed that a theme should capture a significant aspect of the data in relation to the research question. Therefore, this phase involved searching for larger patterns that were meaningful to the research question, across all of the transcripts (Braun & Clarke, 2013). Each theme had a central organising concept, which captured a pattern or meaningful aspect of the data, in relation to the research question (Braun & Clarke, 2013).

Phase four, reviewing themes, involved reviewing and refining the candidate themes that I identified during phase three (Braun & Clarke, 2006). Themes were reviewed with consideration as to whether they reflected the meanings in the participants’ accounts. During this phase, I created a thematic map (see thematic map 1.1 below) which provided a visual representation of meanings and patterns in the data, and relationships between them (Braun & Clarke, 2006). During this phase of analysis, I checked that individual themes were coherent, and distinct from one another, and related to the research question (Braun & Clarke, 2013). Subsequently, I re-read all of the transcripts to ensure that the themes captured participants’ narratives.

During phase five, defining and naming themes, I wrote a narrative for each theme, overarching theme and subtheme (see results section below), which captured the essence of what each theme was about (Braun & Clarke, 2006, 2013). These narratives captured the definition and story of each individual theme, and the overall story of the data i.e. how each theme was located in relation to each of the other themes. I subsequently selected extracts from the participants’ accounts which provided an illustrative example of my description and interpretation of each theme (Braun & Clarke, 2013). As well as interpreting the data in relation to my research question, I also located my findings in comparison to existing literature (Braun & Clarke, 2013). I then set about producing names for each theme, which captured the essence of what the theme was about.

Finally, phase six involved producing this thesis. Braun and Clarke (2006) outlined the importance of capturing the narrative of the data and convincing the reader of the
importance and validity of the analysis. During this phase I ensured that I had provided sufficient quotes from the participants’ accounts in order to demonstrate the prevalence and essence of each theme, and illustrate the narrative of the data (Braun & Clarke, 2006). In so doing, I ensured that my results section was not just descriptive, but outlined why my findings are important in relation to my research question (Braun & Clarke, 2006, 2013). McLeod (2015) proposed that Braun and Clarke’s (2006) guidelines offer the researcher autonomy to analyse qualitative data in a manner which is appropriate to the research aims. Thematic analysis was chosen on account that it offers a flexible approach that is accessible to novice qualitative researchers (Braun & Clarke, 2013).

An experiential approach to analysis was employed which aimed to ‘give voice’ to the men’s experiences of IPV. My analytic process began with immersion in the data, through reading and re-reading each transcript, and noticing interesting aspects about the data and anything relevant to the research question (Braun & Clarke, 2013). These ‘noticings’ were recorded on both the data transcripts using the comments option in Microsoft Word, as well as in my reflexive journal. Codes were largely data driven (semantic) and reflected the narratives of the research participants.

I subsequently set about combining codes in order to form themes. Themes were developed using a ‘bottom-up’ approach, which served to be informed by what was in the data (data-driven). Theme names were chosen which captured the essence of each theme (see thematic map 1.1 below). In some instances direct quotations from the participants were used in the theme names, thus staying close to what the participants had said (Braun & Clarke, 2013). Following the principles outlined by Yardley (2000) for quality in qualitative research, I presented quotations from the interview data in order to support the research findings.

**Results**

The analytic process generated one overarching themes (see thematic map 1.1 below). “‘I’d walked into a rose bush”: The men’s experiences of abuse,’ captures the way in which the participants made sense of their experiences of being in an abusive relationship. The theme ‘Masculine expectations – Grown men don’t cry’ captures the men’s desire to maintain a sense of masculinity and the simultaneous difficulty of adhering to stereotypical masculine gender norms in the context of victimisation. Many of the participants struggled to accept
the role of victim, which was perceived as de-masculinising. ‘Experiences of help-seeking’ captures the men’s help-seeking experiences, including barriers that prevented the men from accessing support, as well as their experiences with professional services and support networks. Each theme (and subtheme) is illustrated with relevant data extracts (see appendix 6 for a summary of themes and subthemes). The data has been edited to remove hesitation and irrelevant material.
Thematic map 1.1 Male victims of female-perpetrated intimate partner violence – candidate overarching theme, themes and subthemes

Overarching theme

1. “I'd walked into a rose bush”: The men's experiences of abuse

Theme 1: Nature of the abuse - “Being abused, verbally and physically”

Subtheme 1.1 Hunter and the hunted - “It was like living on the edge of a volcano”

Theme 2: Impact of abuse – What she left behind

Theme 3: Barriers to leaving the relationship

Theme 4: Coping strategies for dealing with the abuse

Subtheme 5: Leaving the relationship – “I just decided to walk out”

Theme 6: Reasons for the abuse – why it happened

Subtheme 7: Masculine expectations – Grown men don’t cry

Theme 7: Experiences of help seeking

Subtheme 8.1 Barriers to seeking help – “It’s the shame of it”

Subtheme 8.2 Positive and negative help-seeking experiences

Subtheme 7.1 Perceptions of violence shaped by masculine norms
For many of the participants, these were difficult stories to tell. Of the 23 men who took part, 4 participants had never spoken to anybody about their experiences prior to taking part in the interview. In many instances, the men had not spoken to anybody about what had happened to them for several years: “I never said anything to anybody, in sort of seventeen years” (Simon). For others, I was the first person they had spoken to outside of their immediate support network: “You’re the first now since my friends” (Steven). This demonstrates the men’s reluctance to disclose their experiences of abuse (Carmo et al., 2011).

The majority of participants described finding it difficult to tell their story, and expressed a sense of relief at the end of the interview, for example:

When you come to the end it’s.....makes you breathe easier... I’ve probably been tense all week and, you know....so er....I feel....like I say, it’s more important I can breathe, I feel I can breathe a little bit easier now (Jay).

As with many of the narratives, Jay’s account, which is punctuated by frequent pauses, captures the difficulty he experienced in telling his story. Silence was evident within a number of the interviews, possibly reflecting the men’s difficulty in telling their stories and the depth of their suffering (Charmaz, 1999).

**Overarching theme 1. “I’d walked into a rose bush”: The men’s experiences of abuse**

This overarching theme captures the way in which the participants described their experiences of being in an abusive relationship as a traumatic life event, which had a negative impact on both their physical and psychological well-being. The men described how their partners employed controlling, coercive and threatening behaviour through a range of different methods including physical, psychological, emotional and sexual abuse. They reported subtle changes in the format of the abuse over a period of time, that resulted in an escalation of violence and control, which they struggled to escape from. Many of them described employing a range of coping strategies to help them manage their experiences, before making a decision to leave the relationship. Almost all of the participants described reflecting on their experiences in an attempt to make sense of what happened. I now discuss in turn each of the nine themes that constitute this overarching theme.

**Theme 1 Nature of the abuse - “Being abused, verbally and physically”**

This theme provides clear evidence that female-perpetuated IPV against men does exist (Hines et al., 2007). Many participants reported that their female partner inflicted a range of
violent acts including direct physical and verbal abuse, as well as covert aggressive behaviours.

**Physical and sexual violence**

Participants reported experiencing physical violence from their female partners, included being choked, punched, bitten, scratched and kicked, for example:

- It could be walking home in which case she would just start swinging punches and kicks [...] because we’re sat down, her climbing onto me and choking me (Aaron).
- There were blows to my head, kicking it....kick....felt somebody was kicking me in (Jay).

Both Aaron and Jay’s accounts highlight the use of severe physical aggression by their female partner (Drijber et al., 2013; Hines et al., 2007; Hines & Saudino, 2003). This contradicts a common assumption that physical violence perpetrated by women against their male partner is trivial in nature (Pagelow & Pagelow, 1984; Saunders, 2002). Some participants reported that their partner used methods of abuse that were not strength dependent. This finding supports previous evidence indicating that female partners use weapons and physical objects during violent attacks in order to compensate for a lack of physical strength (Flynn, 1990). This method of physical abuse was considered by some participants to be strategic, for example:

- To negate that size and strength difference she would wait until I was asleep, until my back was turned, until I was lying down, or using a weapon or something like that (James).

These extracts illustrate the use of direct physical aggression, contradicting evidence that suggests women favour verbal/psychological acts of aggression (Dobash & Dobash, 2004; Eatough, Smith, & Shaw, 2008; Straus & Sweet, 1992; Swan, Gambone, Caldwell, Sullivan, & Snow, 2008).

In terms of where on the body physical violence was inflicted, supporting existing research (Hines, 2007), the men often spoke about attacks being targeted at their genitals, for example: “Hair dye I had splashed on my genitals” (James); “She tries to hit me between the legs” (Ron). Some participants perceived this as an attack on their masculinity: “The female-perpetrator circumvents masculinity or seeks to emasculate her target by attacking his genitals” (James). Participants also reported that their
partners preferred, and even enjoyed, this method of abuse on account of the amount of pain that it created:

Knee to the groin was always a good one she enjoyed, because she knew, you know, that would, you know, any grown man that, that puts you out (Martin).

Martin’s account suggests that any man would be floored by this form of violence and he is not particularly weak by experiencing this as painful.

Some participants described the spontaneous nature of their partners’ physical aggressive behaviour: “She comes down the stairs, you know, spitting fire, just like a, flipping I don’t know, Banshee with nails, you know, it’s almost like erm, *Edward Scissorhands* or something I could see coming towards me” (Neil). However, many participants described their partners’ abusive behaviour as premeditated and well-planned, for example:

She was all nice and ‘I’ve cooked you some food ready for you to get back’ and everything, and ‘Sit yourself down, make yourself comfortable and I’ll go and get your food’ [...] lit the candles, brought this plate of food in, started eating the food, and then I started having a funny feeling, I got up and turned the lights on, and the chicken that she had given me in the meal was just maggots, it was just riddled (David).

David’s account demonstrates the use of indirect, covert aggression, a method of abuse frequently employed by women (Bjorkqvist, Osterman, & Lagerspetz, 1994; Côté, 2007; Eatough et al., 2008).

One participant reported that his female partner used sexual aggression, including insisting on sex (Hines & Douglas, 2010a). This adds further support to the finding that men can be victims of sexual violence within heterosexual relationships (World Health Organization, 2012). Neil described being physically attacked for withdrawing sex:

It’s only 3 months after birth, sex hasn’t raised its head at all [...] she decided this was a good idea. And all I did, because I said ‘Well are you sure because, you know, it’s only 3 months and you have had stitches down there you know’ and that was it, she just completely and utterly beat the crap out of me (Neil).

Neil further described being physically abused for not being able to perform sexually:

One of the things that she used to do, right, when she was really off on one was she would er, take pleasure in inflicting sexual pain upon me [...] but if I have pain afflicted upon me during sex it doesn’t do much good for, erm, my erection,
[...] well the sexual torture would be much milder if erm, I was able to perform, and if I was able to perform, I wouldn’t get the crap beaten out of me (Neil). Forced sex, including being physically abused during sexual acts, as well as being threatened into painful and unwanted sexual acts, has been cited by female victims of IPV in heterosexual relationships (Campbell, Woods, Chouaf, & Parker, 2000). This form of abuse may result in gynaecological problems, and increased risk of HIV/STD transmission (Campbell et al., 2000). However, there has been little focus to date on the impact of sexual violence on heterosexual men. Neil reported that his experience resulted in erectile dysfunction. He described using Viagra as a means of helping himself to cope:

I actually got a Viagra prescription from my GP and I used to hide half a Viagra tablet [...] so if I could see that something was brewing, I could just go to the loo and then 20 minutes later I’d be fine. And that would last through whatever actually she was going to inflict upon me (Neil).

Extending the findings on female victims of IPV (Hearn, O’Sullivan, El-Bassel, & Gilbert, 2005; Xu et al., 2005) some participants reported that their partner was unfaithful during their relationship, in which there was an assumption of monogamy: “She’d go on dating websites” (Sean). In some instances, this extended to their female partner having sexual relationships outside of their relationship: “She brought a Black prostitute into her hotel room and started having sex with her on the bed right in front of me. I was stunned” (Lewis). The men typically ignored and did not challenge their partners’ adulterous relationships, mirroring the response of many female victims, who report a lack of authority within the relationship to insist upon monogamy (Hearn et al., 2005).

Emotional and psychological abuse

Commonly, participants described the nature of the emotional and psychological abuse they experienced as a persistent ‘whittling away’ at their sense of self: “Constant put-downs, constant questioning of everything that I did and why I did it” (David). Common forms of psychological aggression included humiliating and belittling their masculinity, implying that they were less of a man: “She was saying ‘Well you ain’t a man’” (David). In some instances, participants were criticised by their partner for not having met heterosexual masculine expectations of the domination of men and the subordination of woman (Connell, 1995). For example: “She used to say I gave
her kind of too much lead way, if that makes sense [...] I weren’t strong enough with her” (Jason). These findings are suggestive of a parallel to those of Salam, Alim, and Noguchi (2006) who identified that women were victimised by their male partner for failing to meet the stereotypical gender role of a ‘good wife’, including failing to fulfilling household duties and show obedience (Feldman & Ridley, 1995). Consequently, failure to adhere to dominant norms for gender may be a contributing factor to IPV victimisation for both men and women.

Consistent with evidence that abused women are more likely to have unintended pregnancies (Gazmararian et al., 1995; Pallitto & O’Campo, 2004), occasionally, participants reported that their partner had ‘tricked’ them into having children, by falsely claiming to be using contraception:

She did tell me she was taking the contraception and to be quite frank I wouldn’t have....erm....I would have worn some protection myself if I knew that she hadn’t been taking the pill (Sean).

Purposefully sabotaging agreed-upon methods of contraception, as a method of control, has been reported by female victims of IPV (Campbell et al., 2000; Moore, Frohwirth, & Miller, 2010). Sean’s narrative reflects widely held gendered assumptions that women are responsible for contraception (Brown, 2015; Castro-Vázquez & Kishi, 2007; Marston & King, 2006), as well as being ‘gatekeepers’ for sex within heterosexual relationships (Hayfield & Clarke, 2012).

**Threats**

The participants reported that their partners employed various different kinds of threats including threats to self-harm, make false accusations, as well as threats to take away their children, aimed at controlling them (Drijber et al., 2013; Hines et al., 2007; Hines & Saudino, 2003). Some of the men stated that their partners threatened to self-harm as a form of manipulation, using a traditional feminine script to elicit control (Hines et al., 2007): “She’d say she wanted to go and jump off a bridge and stuff, so you know I obviously tried to stop that from happening” (Aaron). Aaron’s narrative indicates that in some instances, both partners adhered to traditional gender roles, in which the female partner would exhibit traditional forms of femininity by ‘being out of control’ and ‘in need of help’, whilst the men attempted to perform masculinity through heroically rescuing them (Boyle, 2011). Despite
their efforts to prevent harm, occasionally the men reported that their partners’ threats to self-harm were acted upon:

She self-harmed suddenly really badly, I mean she was sitting in the kitchen with a knife in her hand and I walked into the room and said ‘What on earth are you doing’ and she just sliced her wrist open in front of me so that I could actually hear the wound opening, you know ‘Chlou’ like an orange (Neil).

Almost all of the participants reported that their female partner threatened to make false accusations of abuse, in an attempt to control their behaviour (George, 1994; Hines et al., 2007; Sarantakos, 2004). In some instances, false allegations were made: “The false allegations started. The first false allegation was that I’d caused all her self-harm injuries” (Neil). Frequently participants reported that their partner would use her gender and knowledge of a system set up to help women, to maintain a cycle of control (Hines, 2007):

She knew she could use the system, being a woman, single parent, single mum you know, she would wind them up. She wasn’t as daft as she made out (Martin).

Frequently participants reported that their partner threatened to take away their children. This reflects existing findings that women use children to maintain power and control over a male victim (Corbally, 2015; Drijber et al., 2013; Hines & Saudino, 2003). After leaving the relationship, some men reported that their partner used their children as a method of control, by threatening to stop them from seeing their children: “I think it is a form of abuse being threatened not to see your child” (Sean). In some instances, these threats were acted upon, resulting in a removal of access: “She’s not allowed me to see my son, for 18 months now, so it’s difficult” (Daniel).

Other forms of control

The participants reported a range of other controlling behaviours including isolating them from others, sabotaging their employment and stalking. Participants reported that their partners kept them away from family and friends (Allen-Collinson, 2009a; Graham-Kevan & Archer, 2003; Hines et al., 2007; Hines & Douglas, 2010b): “She worked for a long time in trying to keep me away from my family” (Glenn).
Occasionally participants reported that their partner tried to stop them from going to work by attempting to sabotage their employment, with the aim of maintaining control of their behaviour:

She wouldn’t want me to go to work so she’d stop me from going to work. It’s because she…it’s a control thing, so she’d cut all of my laces in my shoes (Jerry).

This resulted in a cycle of control through which the men’s partners were able to micromanage their daily life, limiting their autonomy and social interactions. This form of abuse is frequently reported by female victims (Harne & Radford, 2008; Keeling & Fisher, 2012; Stets & Hammons, 2002; Xu et al., 2005). Allen-Collinson (2011) proposed that some female partners sabotage their partners’ employment in an attempt to undermine their masculine identity as a ‘breadwinner’.

Occasionally participants reported that their partner stalked them after leaving the relationship (Drijber et al., 2013; Hines et al., 2007): “She was stalking me down our Mum’s” (Jay). Consequently, some men described living in fear of their partner (Hines et al., 2007).

This finding parallels evidence that women often experience continued abuse after leaving a relationship, with stalking a frequently cited form of continued IPV (Davies, Ford-Gilboe, & Hammerton, 2009; Logan, Shannon, & Cole, 2007; Norris, Huss, & Palarea, 2011). The difficulties women commonly experience in freeing themselves from an abusive partner have been associated with power imbalances that privilege men over women (Davies et al., 2009). These men’s narratives highlight the need to consider the social circumstances that enable IPV to continue (Davies et al., 2009) regardless of the victim’s gender.

**IPV victimisation and disability**

Similar to the findings of Yuen and Barranti (2008), participants with disabilities reported experiencing disability-related abuse including emotional torment and humiliation:

I could be walking in a shop, because I’m disabled, I’m on crutches, she would shout out ‘Keep up spastic.’ Plus I suffer from OCD and I’m very fussy how things are put into trolleys, errm, she’d deliberately throw things in the trolley because she knows how I would react and then just leave the trolley and say ‘Stuff it, I’m not shopping here now’ and leave the trolley in the middle of the floor and I would have to go round the shop putting everything back (Stuart).
Stuart, who self-identified as having a learning difficulty, described how his disability was a barrier to recognising his relationship as abusive. This resulted in him experiencing prolonged abuse and neglect (Hewitt, 2014), for example:

I didn’t realise, I just thought we were like any other couple, you know. I didn’t realise how far it had gone and how bad it was. That was the problem. When my Social Worker got involved and started talking to me, that’s when I realised what she was doing was wrong (Stuart).

Stuart’s account highlights the importance of professional intervention in assisting in the recognition of IPV victimisation.

In the main then, echoing the findings of Drijber et al. (2013), Hines et al. (2007) and Hines and Saudino (2003), this theme highlights similarities between the men’s experiences of IPV and those frequently reported by female victims, and also between the current findings and those reported in existing research on male victims.

**Subtheme 1.1 Hunter and the hunted - “It was like living on the edge of a volcano”**

This subtheme captures participants’ descriptions of subtle changes in the format and method of abuse they experienced, from one off events, to something more routine, and the escalation from predominately verbal to physical abuse.

The majority of participants reported that the abuse began within the first 12 months of their relationship. Evidence on female victimisation also indicates that abuse usually begins within the first six months (Walker, 1980) to two years of a relationship (Jewkes, 2002).

Supporting current findings on female victimisation (Barnes, 2013; Keeling & Fisher, 2012; Messing, Mohr, & Durfee, 2015) the majority of participants described feeling shocked and confused by the first physically abusive incident:

I was more shocked when the physical started, and then she said, she used to say things like ‘Well you draw it out of me, I’ve never hit anyone else before but you’ (Stuart).

Similar to the findings of O’Campo, McDonnell, Gielen, Burke, and Chen (2002) who identified that female victims could predict episodes of abuse, participants frequently reported that they learnt to recognise triggers for their partners’ abusive behaviour. Triggers that the men frequently reported included their partner not getting her own way, jealousy, substance misuse and moodiness. These triggers resemble those cited by some female
victims of IPV (O’Campo et al., 2002). Participants’ understanding of why the abuse happened is more fully addressed in theme 6 ‘Reasons for the abuse – why it happened’ discussed below.

**Changes in partners’ response following abuse**

Most participants reported that their partners’ response following instances of abuse changed over the course of their relationship, from initially being apologetic and remorseful for what she had done: “In the morning she’d be apologetic and....saying she’s sorry she didn’t mean it” (Jay), to being less sympathetic and more blaming as the relationship progressed:

For the last sort of previous two years or so she’d, the amount of contrition after a violent episode had gone down, it was like it got less every time, so it wasn’t the sort of tears and ‘Oh I’m really sorry, I love you’ going on any more, it was the, you know, ‘Deal with it’ you know ‘I didn’t really hurt you’ that sort of thing, the attitude had changed a bit (Neil).

This cycle of abuse and reconciliation is a common feature of IPV against women (Hines & Douglas, 2010a; Keeling & Fisher, 2012). Male perpetrators often seek repentance following an incident of abuse, resulting in the female victim staying in the relationship, and the escalation of violence (Schumann & Valente, 2002). Commonly referred to as ‘traumatic bonding’, this pattern of continual punishment and reconciliation is associated with a strong psychological investment in the abusive relationship, for both perpetrator and victim, which is often difficult to break (deYoung & Lowry, 1992).

Many participants described their partners’ behaviour as unpredictable: “It was like living on the edge of a volcano, it was, you never knew when it was going to happen” (Neil). This made their experiences of abuse more confusing:

We never knew who was going to come in the door, you know, the nice one because you know at times she was fantastic, you know, she was still the person that I had fallen in love with and all the rest of it. But then sometimes she wasn’t, and errm, we didn’t know, me and the kids, you know who was going to come in the door (Neil).

Many participants commented that they recognised that the abuse ‘got progressively worse’ (Frank) over the period of their relationship, but they were still unable to leave. This finding
may imply a strong emotional attachment to the relationship (Keeling & Fisher, 2012). However, some participants reported that the escalation of the abuse was so subtle that they were unable to identify the incremental changes that took place until after they had left the relationship: “I kind of don’t remember how it slid into routine from that, but that’s kind of where it moved to next really” (Aaron).

The length of participants’ abusive relationships ranged from 6 weeks to 31 years. Over this time, the majority of participants described the nature of the abuse they experienced as progressing from verbal to physical abuse: “From the beginning it was verbal, then it was throwing things, then it was hitting me, over a period of like 1, 2, 3 years” (Sean). This finding is congruent with evidence that frequency and severity of IPV increases over time in IPV against women (Rhodes & McKenzie, 1999).

This subtheme provides insight into the men’s experiences of living with IPV, which often resulted in a cycle of abuse similar to that frequently reported by female victims (e.g. deYoung & Lowry, 1992; Keeling & Fisher, 2012; Rhodes & McKenzie, 1999; Schumann & Valente, 2002).

**Theme 2 Impact of abuse – What she left behind**

This second theme captures participants’ description of the physical and psychological impact of the abuse. Some of the men described suffering from physical health difficulties as a result of the injuries inflicted on them by their female partner. The majority of participants reported that their experiences had a lasting psychological impact on them, including negatively influencing their perceptions of women, as well as their perceptions of relationships in general.

**Physical health concerns**

IPV has been associated with severe and chronic health consequences in female victims, including life-threatening injuries, disfigurement and disability (Black, 2011; Campbell, 2002). For some men, violent attacks resulted in significant injuries that were severe enough to warrant medical attention. One participant described the near fatal consequences of his injuries following a knife attack: “I was in a coma I suppose, for about six months” (Brian). Occasionally participants reported that their experiences of physical abuse had resulted in disfigurement, which had impacted negatively on their self-esteem: “I used to hate looking at my arms cos of all the scars where she’d slashed me with a knife” (Jason). These findings highlights the serious physical health consequences for some participants, challenging the
notion that male victimisation is not a serious problem deserving of attention (Pagelow & Pagelow, 1984).

Some men reported that the nature of the abuse they experienced resulted in long-term and chronic physical health difficulties (Campbell, 2002): “I don’t think I’d have MS now if it wasn’t for her” (Craig). The association between the abuse the men experienced and long-term health difficulties is further exemplified by David:

She’d even say ‘Even when you sleep you don’t lie right in the bed’ and I’d be like ‘I’m asleep, I don’t know what I’m lying like when I’m asleep’ ((laughs)). Errm which, which then went on and probably was the starting point for a lot of like insomnia problems that I suffer now.

**Psychological consequences**

Almost all of the men reported that their psychological well-being had been negatively impacted by their experiences of victimisation. The time period since leaving the relationship and taking part in the interview ranged from 11 months to 18 years (mean length – 4 years and 9 months). Thus, mirroring the findings of Barnes (2013), psychological difficulties can remain long after the relationship has ended.

Some participants reported that their partner often claimed that acts of violence were accidental, which resulted in the men feeling confused and struggling to validate their experiences, as illustrated in the extract below:

As she was walking past and whatnot she would have a kick or deliberately knock me when I’ve got a drink in my hand or something. Errm, she would say it was an accident, she was a little bit clumsy, she had slip or had you know, which kind of always seemed like well yeah people do that do you know what I mean? (David).

David’s account evidences his partner’s use of paradoxical violence, a form of abuse in which a paradox is communicated through intentional violence, and denial of intent (accidental violent), leaving the victim feeling confused (Allen-Collinson, 2009b; Denzin, 1984). Female victims have reported psychological/emotional abuse as being especially problematic on account of it leading many victims to question their sanity, which some of the men also experienced (Jacobson & Gottman, 1998).
Aaron described the psychological consequences of IPV as long lasting: “You know your bruises will heal, you know anything that hurts will get better, but your, yeah the psychological stuff is pretty much there to stay really.” Aaron’s account reflects a narrative of ongoing turmoil similar to that reported by abused women, with the absence of a sense of hope and the possibility of recovery (Barnes, 2013).

Commonly, participants reported feeling depressed as a result of their experiences: “Work started to suffer, I started to feel depressed” (Frank). For a number of participants this resulted in suicidal thoughts: “There has been a time where I’ve felt, one of my lowest points where, erm, I wanted to call it a day” (Stuart). Some men described having taken steps towards acting on their suicidal thoughts:

I did have a pill stockpile that I used to sit and look at occasionally erm, and er, oh and yeah a couple of times I’d started making, you know, DVDs for my children, you know” (Neil).

A number of participants described having been diagnosed with mental health problems including post-traumatic stress disorder (PTSD) (Denise A. Hines & Douglas, 2010):

They diagnosed me with post-traumatic stress disorder like and give me some tablets for that, and it’s, it’s copeable, you know what I mean, I don’t er, don’t have these nightmares any more (Brian).

The above accounts demonstrate the severe psychological impact IPV had on the men. The men’s accounts support existing findings that men experience significant psychological symptoms including post-traumatic stress disorder, depression and suicidal ideation as a consequence of IPV victimisation (Coker et al., 2002; Randle & Graham, 2011).

Changes in perceptions of women and relationships

In addition to physical and mental health consequences, the men reported changes in their perceptions of women and relationships. Frequently, participants described having a mistrust of women as a consequence of their abusive relationship: “I don’t trust women at all” (Stuart). Some participants described feeling fearful of woman: “What’s happened to me has had a big impact...erm....do you know what, there was a time when I....when I feared, I had a fear of women” (Jay). These accounts mirror the findings of Barnes (2013) who highlighted that female victims of IPV frequently report
being fearful of entering into future romantic relationships. Some men reported that their experiences had an impact on their perceptions of relationships. Neil described being wary of allowing himself to get close to other women:

I can’t imagine ever having a relationship with a woman again, I really can’t. I really, really can’t at all [...] I cannot imagine, I really, really can’t ((laughs)) you know. If my eye, you know, if, I don’t know, let me think, who’s a good example, I don’t know, if erm, is it Mila Kunis came in the door covered in custard and said ‘I’m yours’, I’d go ‘Oh, oh, no I’m not entirely sure about that’, you know? (Neil).

Neil’s narrative indicates the extent of his reluctance to enter into another romantic relationship. Even a potential partner whom he perceives as having high physical attractiveness would not kindle a romantic interest. The men’s accounts demonstrate significant changes in their assumptions about women and relationships following the trauma they experienced. These accounts demonstrate the implication of their shattered worldview, and the negative schematic changes in their perceptions of the future (Linley & Joseph, 2011).

This theme demonstrates some commonality between the negative physical and psychological health consequences of IPV for both men and women, including chronic illness and long-term psychological health concerns (Black, 2011; Campbell, 2002).

**Theme 3 Barriers to leaving the relationship**

This theme captures the factors that influenced the men’s decision to remain in their abusive relationship, including a commitment to the relationship, limited financial resources and concerns for the safety and welfare of their children (Cook, 2009; Flynn, 1990; Pagelow & Pagelow, 1984).

*Love of their partner and a commitment to the relationship*

Mirroring the reasons many gay and bisexual victims report for remaining in an abusive relationship (McClennen et al., 2002; Merrill & Wolfe, 2000), a number of the men described a desire to help their partner: “I stopped there because I thought I could help her, and I seen she had problems” (Jason). Jason’s narrative reflects the findings of Rhodes and McKenzie (1999) that women often stay in abusive relationships on account of their perceived ability to change their partners’ behaviour. The majority of participants reported that a commitment to their partner and the relationship was a significant barrier to leaving:
“I made a promise, I said ‘For better for worse’” (Simon). Often participants described their love for their partner outweighing the negative experiences of the abuse, for example: “I felt trapped. I was, I just had so many feelings for her that, I was trapped into tolerating it because of how much I wanted to be with her” (Steven).

Four of the 23 participants were still in an abusive relationship at the time of taking part in the interview. These men cited the positive aspects of their relationship as a reason to remain with their partner: “I’m okay about staying in this relationship, there’s obviously this what’s happening, however there’s like a lot of healthy aspects to the relationship as well” (Shane). These findings may reflect the sense of denial reported by some female victims both during and after leaving an abusive relationship (Messing et al., 2015).

**Staying for the sake of their children**

Commonly the men reported that they remained in the relationship because of a desire to protect their children. Some participants reported fearing that if they left, the abuse would be targeted at their children instead of them: “Part of my coping strategy was to tell myself ‘Well I’m sort of protecting the kids’” (Simon). Fear of losing contact with their children was also a fundamental reason why the men chose to stay: “In 2009 I researched divorce, and when I realised that I could lose my daughter I stayed” (John). These findings support evidence that many men fear losing custody of their children after leaving an abusive relationship (Cook, 2009; Migliaccio, 2002). With evidence that women are more likely to gain custody of children following divorce (Cancian & Meyer, 1998), and ten of the men reporting that they lost access to their children after leaving the relationship, it appears these fears were not misplaced.

**Lack of understanding of IPV**

Stereotypical gender based assumptions surrounding what constitutes IPV prevented many of the participants from recognising their relationship was abusive:

> It just didn’t occur to me. Because domestic abuse is a man coming back from the pub pissed and beating his wife up, that’s domestic abuse, it didn’t occur to me that anything that had happened to me came under that heading at all (Neil).

This extract demonstrates a narrow view of partner abuse, based on the assumption that men are abusers. Potential implications of this rigid definition may result in a lack of recognition that violence within intimate relationships can affect both genders (Burzawa &
Buzawa, 2003; Donovan & Hester, 2010). James attributed a lack of public awareness that men can be victims of IPV as significant in his own difficulties in spotting IPV: “When you’re taught about abuse it’s always the man abuses a woman that’s how it works, it doesn’t work the other way round” (James). These findings lend support to research which has identified that a lack of awareness of IPV within gay male relationships has resulted in limited help-seeking behaviours by victims, and subsequent prolonged experiences of abuse (Randle & Graham, 2011).

Perceptions of domestic abuse as something that is ‘normal’ (Anderson, 2010; Migliaccio, 2002; Oliffe et al., 2014) prevented some of the men from leaving their relationship:

There’s some statistics that I didn’t realise that it’s something like twenty percent of, it’s only twenty percent of relationships that are err violent, and you know what ((laughs)) I thought it was everybody’s, I thought it was normal, because it’s been happening to me so long (Daniel).

Some participants cited the importance of educating themselves on domestic violence as a method of helping them to make sense of their experiences: “I started looking into it and, and Googling everything and looking at bits and pieces of research here and there (Sean). The need to enhance awareness of male victimisation is more fully addressed in the theme 9 ‘There is a need for change – “I am keen to spread the word” discussed below.

Whilst many of the men were able to identify barriers that prevented them from leaving their relationship, some participants described feeling confused by their decision to remain in the relationship: “Looking back now erm....even though I loved that individual, I can’t believe why I would stop in there that long, I just can’t” (Jay). Existing research on female victims suggest that some women also struggle to articulate their reasons for remaining in an abusive relationship (Hydén, Linköpings, Institutionen för, Tema, & Filosofiska, 1999).

**Other barriers**

Occasionally participants reported that a lack of self-confidence was a barrier to leaving the relationship: “I was trapped psychologically, thinking that without [ex-wife] I can’t cope anyway” (Brian). A number of participants reported that whilst they were able to identify that their relationship was abusive, they did not have the confidence to leave: “I still wouldn’t have the confidence to break away from this relationship” (Jay). In some instances, the men reported that a fear of not being able to find another partner prevented them from
leaving: “I thought if I lose her, I’d lose everything, you know, I’d be on my own, I’d be a nobody” (Andrew). Vulnerability and fear of being alone has also been reported by gay male and female victims (Keeling & Fisher, 2012; Merrill & Wolfe, 2000). Some men reported lack of finances and access to accommodation as barriers to leaving the relationship (McCart et al., 2010): “Folk often say the first time something happens you should go, errm, but it did and again the culture that, I had nowhere to go.”

Overall, similar to the experiences of many abused women and gay men, the participants outlined a complex range of reasons that influenced their decision to remain in their abusive relationship. These findings support evidence that heterosexual men experience similar barriers to leaving a violent relationship as those reported by gay men, heterosexual and lesbian women, including love of their partner, fear of being alone and a hope that things would change (Keeling & Fisher, 2012; McClennen et al., 2002; Rhodes & McKenzie, 1999). These findings offer support to Merrill and Wolfe’s (2000) assertion that barriers to leaving an abusive partner may be universal, irrespective of the victims’ gender or sexual orientation.

**Theme 4 Coping strategies for dealing with the abuse**

This theme captures the strategies and techniques that the men employed in order to help themselves cope with their experiences of IPV. Consistent with current accounts of female victims, the men described employing a range of strategies over the course of their relationship in order to help themselves cope with the abuse (see also Hydén et al., 1999; Rhodes & McKenzie, 1999; Sabina & Tindale, 2008). Mirroring the experiences of some abused women, almost all of the participants reported that they endeavoured to survive on a day-to-day basis by attempting to avoid an incident of abuse (Haeseler, 2013).

**Avoiding confrontation**

Participants endeavoured to please their partner in order to avoid conflict: “Basically if she had any demands or wanted anything doing, I’d just try and do it to avoid confrontation” (Simon). The men often described compromising their behaviour, due to a fear of their partners’ reaction, for example: “I felt like I could never look, like take my eyes off the floor ((laughs)) because I’d be accused of looking at someone” (Aaron). Similar to the coping strategies reported by female victims (Waldrop & Resick, 2004), many of the men employed strategies whereby they would attempt to avoid interacting with their partner. Some men
described working longer hours in an attempt to avoid being in the same location as their partner:

I’d gone from being paid like £20 an hour to being paid £50 a week, just so as I could work longer hours and don’t have to explain why I was getting up so early every morning and why I was so late coming home every night (David).

**Becoming more passive**

A number of participants reported that their response to their partners’ abusive behaviour changed over the course of their relationship. In some instances, the men described becoming more passive, having learnt that not responding was the best way of coping with their partners’ behaviour. For example: “There was a change in emphasis from me being probably less passive to being more passive throughout this whole process” (Sean). These findings echo evidence that abused women attempt to be as passive as they can be in order to avoid conflict (Hydén et al., 1999). These responses may also reflect learnt helplessness, on account of the men’s inability to end the abuse (Rhodes & McKenzie, 1999): “You become conditioned over time to do what’s best to keep things calm” (Glenn).

One participant described provoking his partner into an attack in order to get it over with (Allen-Collinson, 2009b):

I would provoke the argument just to get it over with really, just standing there taking it, because then at least it would pass and we could move on (Aaron).

Female victims of IPV have similarly reported that when an episode of violence is imminent, they engage in behaviours to aggravate the abusive partner, as a means of gaining some control over when the abuse happens (Rhodes & McKenzie, 1999).

**Misusing drugs/alcohol**

Frequently the men reported misusing alcohol and drugs to help themselves cope with the psychological consequences of their IPV victimisation (McClennen et al., 2002). For example: “I started to smoke cannabis, that helped me to forget stuff” (Sean). This finding parallels extensive research documenting an association between sustaining IPV and alcohol/drug abuse (e.g., Haeseler, 2013; Hines & Douglas, 2010a; Sabina & Tindale, 2008). Participants reported that the amount of alcohol they consumed increased as the frequency and severity of the abuse increased. One participant
described becoming dependant on alcohol: “I was trying to drink away the problems [...] which did affect me health badly, you know, come reliant on alcohol” (Brian).

Overall, these findings help to enhance understanding of the men’s coping strategies for dealing with IPV. These findings enhance understanding of this under researched topic (Barnes, 2013).

**Theme 5 Leaving the relationship: “I just decided to walk out”**

This theme highlights factors that were influential in the men’s decision to leave their abusive relationship. Mirroring the process reported by some gay men, the participants’ decision to leave their relationship was closely associated with recognition of their partners’ behaviour as abusive, and the need to end rather than manage their relationship (Oliffe et al., 2014). Leaving for the sake of their children was a common narrative within the men’s accounts, a discourse that is often not relevant in gay men’s narratives (Oliffe et al., 2014), but frequently cited by female victims (Messing et al., 2015; Meyer, 2011). A desire to protect their children underpinned the relationship between the men’s reasons for staying in the relationship for the sake of their children, as well as leaving.

**Recognising the relationship as abusive**

Typically, participants reported that recognising their relationship as abusive was the first step to leaving (Oliffe et al., 2014). Being able to identify patterns of abusive behaviour was described as an epiphany moment by some participants:

> I started to identify cycles, I started to identify conditions when it would happen, and then started looking back over the relationship and how it had begun (Glenn).

Almost all the participants reported that they eventually left the relationship after having reached a point where they ‘had enough’ of their partners’ behaviour, and could no longer stay: “One day she hit me once too often and I just decided to walk out” (Stuart). This was underpinned by an awareness that the patterns of abuse were detrimental to their well-being and unlikely to change (McClennen et al., 2002; Oliffe et al., 2014): “The acknowledgement that it was never going to work, that she was never going to..., that she, that the cycle would keep continuing (Sean). In some instances, a loss of feelings for their partner was influential in their decision to leave:
“I’d had seventeen years of it, any feeling I’d had for her had been eroded a long time before (Simon). Subsequently, the participants described finding ‘strength’ to leave their partner (Jay) (Messing et al., 2015; Oliffe et al., 2014).

Leaving for the sake of their children

Reflecting findings on female victims (Attala, Hudson, & McSweeney, 1994; Messing et al., 2015) almost all the participants who were fathers cited their children as a mediating factor in their decision to escape the abusive relationship. Participants typically cited fears surrounding the negative impact of witnessing the abuse on their children, including a recognition that their children had learnt to copy the behaviour of their mother. For example:

He [son] brought his plate through and then he threw the rice on his plate onto me, errm ((pause)) I sort of naturally shouted at him and told him off, which he, and the look on his face looked quite shocked, and the penny dropped, I thought ‘He’s done that because he saw his mum do it’, and it started a whole lot of thoughts in myself thinking, am I really protecting the kids by allowing them to see all this stuff (Simon).

Simon’s account suggests that his son was modelling the aggressive behaviours of his mother (Hines & Douglas, 2010a). Evidence suggest that children who witness IPV are more at risk of mental health problems (Boeckel, Wagner, & Grassi-Oliveira, 2015), and are more likely to be involved in abusive relationships as adults (Stith, Rosen, Middleton, & Busch, 2000).

Frequently the men reported that they left their relationship for the sake of their children and a desire to protect their children in the best way they saw fit. Some men who had left their partner believed that they would still be in the relationship if it was not for the impact the relationship was having on their children:

I was holding the little one at the bottom of the stairs and she was beating the crap out of me and, after trashing the kids’ bedrooms. If that hadn’t happened [...] I’d still be in the relationship if there hadn’t been that, if that hadn’t happened, or something similar. I’d still be there, I’d still be getting crap beaten out of me and trying to rationalise it (Neil).
Neil’s description of the nature of his partner’s violent behaviour supports evidence that children are often in physical danger from violence perpetrated by women against men (Hines & Douglas, 2010a).

Overall, these findings demonstrate factors that were influential in the men’s decision to leave their relationship. Recognition of IPV and a desire to protect their children were significant factors in the men’s decision to leave the relationship (Hines & Douglas, 2010a; Messing et al., 2015).

**Theme 6 Reasons for the abuse: Why it happened**

Almost all of the participants reported that they had tried to make sense of their experiences by attempting to understand why their partner was abusive. The men’s accounts demonstrate a search for meaning, which Linley and Joseph (2011) suggest is fundamental to the development of positive change following trauma. Reasons discussed included factors related to why the men believed that they ended up in an abusive relationship and why they believe that their partner was abusive.

**Why the men ended up in an abusive relationship**

Similar to earlier findings (e.g., Allen-Collinson, 2009b; Hendy et al., 2003) that self-blame prevents victims from leaving an abusive relationship, many of the participants reported that they believed that they had “done something to deserve it” (David). This belief prevented them from recognising their relationship as abusive: “Well I didn’t know it was abuse, that’s the strange thing, I just thought that I was doing something wrong” (John).

A number of participants described feeling a sense of shame for allowing the abuse to continue, and therefore perceived their inaction as deserving of abuse:

> First time it happened [I] should have walked out, but I didn’t. And when you give someone the green card to abuse you then you deserve everything that comes to you, and I gave her the green card (Stuart).

Stuart’s account demonstrates a sense of acceptance of the abuse he experienced. This finding supports evidence that acceptance of IPV is higher amongst women who have experienced IPV, indicating a possible learnt acceptance of violence (World Health Organization, 2005).

Six of the men reported that they had been in more than one abusive relationship (see also Carmo et al., 2011). Of these six men, some reported that they believed that they
have a tendency to attract abusive partners: “I’m drawn towards the wrong kind” (David). Often the men believed that their personality made them more susceptible to being abused:

Through the nature of me and the person that I am, erm...I’m very forgiving in nature and very patient, and I think that that has been abused over time (Glenn).

Many of the men commented that their partner had previously been a victim of domestic abuse. Some believed their partners’ behaviour was a consequence of having been emotionally hurt in previous relationships:

I think she’d had a bad relationship with her ex-husband like you know and this sort of thing you know, and I think she used to take it out on me (Brian).

Some of the men considered their partners’ behaviour to be a strategic method of avoiding further victimisation (see also Eatough et al., 2008; Hamilton & Goeders, 2010):

She’d been in past abusive relationships herself where she was the victim, so I don’t know if this was like her trying to think, I’m taking control, I’m not being the victim (Jason).

In line with evidence that male perpetrators frequently repeat violent behaviour with consecutive partners (Keeling & Fisher, 2012). Some men reported that their partner had been abusive “to other boyfriends” (James), indicating that IPV was not confined to just one relationship. In some instances, the men reported that their partner had a record of being violent to both men and women (Weizmann-Henelius, Putkonen, Naukkarinen, & Eronen, 2009): “She gets into violent encounters on a daily basis, with both men and women” (Daniel).

Attracted by their partners’ physical appearance

A number of participants described how they were attracted to their partner based solely on her physical appearance, which influenced their decision to enter into the relationship:

Now, in retrospect, I think ‘What the hell did a twenty two year-old woman see in a fifty year-old man’ but at the time my ego took over, I was happy to welcome her into my bed (John).
This finding supports well established evidence that men frequently select partners based on physical attractiveness (Fisman, Iyengar, Kamenica, & Simonson, 2006; Henry, Helm, & Cruz, 2013; Li et al., 2013). Evidence suggests that women also report attractiveness as a key factor influencing their decision to commit to an abusive relationship (Keeling & Fisher, 2012).

**Didn’t know partner well enough**

Some participants attributed their victimisation to not knowing their partner well enough before entering the relationship: “It was all a bit rushed, I didn’t know her maybe looking back” (Jason). One participant attributed this to having an arranged marriage: “Because it was an arranged marriage I didn’t know what she was like” (Tariq). This finding parallels evidence that women who have arranged marriages may be at greater risk of IPV victimisation (Liao, 2006).

**Why the men believed that their partner was abusive**

Reflecting existing findings on male victims of IPV (Capaldi, Knobe, Shortt, & Kim, 2012; Hines et al., 2007) almost all of the men believed that their partner was psychologically ‘damaged.’ Akin to earlier findings (Dick, 2004) that IPV perpetrators often have low self-esteem, a number of participants considered their partner to be insecure, which they believed was influential in explaining her abusive behaviour: “Her triggers I thought were around trust, were around probably her problems rather than mine” (Sean). Some believed that their partner was depressed: “I think she’s searching for happiness, but I don’t know if she can find it” (Jason). In some instances, the men reported that their partner had received a mental health diagnosis: “She suffers from, erm, oh what’s it called, schizoaffective disorder” (Ron). Others attempted to make sense of their partners’ behaviour by self-diagnosing a mental health condition: “Nothing has contradicted my thoughts on the possibility that she has got ASPD [Antisocial personality disorder] which leads me to think that I’m right” (Craig) (see also Carmo et al., 2011).

**Hormonal changes**

Some of the men attributed their partners’ behaviour to hormonal changes: “Around that time of the month. Usually a week before, and then during, that’s all I know, because after that she’s alright” (Ron). Some reported that episodes of violence increased during pregnancy: “She just seemed to erm get worse when she fell
pregnant” (Frank). In some instances, the violence was precipitated by the birth of children: “The violence, the physical started erm...after our son was born” (Sean), (see also Hamilton & Goeders, 2010).

Substance misuse
In line with earlier findings (e.g., Hines et al., 2007; Jewkes, 2002; World Health Organization, 2013a) a number of participants reported that their partners’ abusive behaviour was related to substance misuse. Frequently, the men reported that the severity of violence they experienced enhanced after their partner had been drinking alcohol: “She decided to have a drink, a little bit too much to drink, and that escalated her already violence” (Steven), or after taking drugs: “Typically on a come down” (Martin).

Cultural norms surrounding the use of violence
Supporting findings which suggest that the meaning of violence varies within and between cultures (Jewkes, 2002; Mann & Takyi, 2009), some men claimed that their partners’ behaviour was culturally influenced: “I just think a lot of families shout in our culture” (Tariq, British Pakistani). Some men reported that female violence is more acceptable within their partners’ culture:

I was frightened of her because she came from a violent country with violence endemic in the society [...] women fight with knives in public in [large African country] (John).

These extracts reflect the influence of cultural beliefs surrounding IPV, supporting evidence which suggest that the use of violence is more prevalent where it is considered to be socially accepted (Jewkes, 2002).

Childhood abuse
The men indicated that experiences of abuse in childhood could explain both their partner’s propensity for violence and their involvement in an abusive relationship. Some of the men described being physically abused by their mother, which they considered significant in their choice of partner:

When the violence started, for me personally er, within the marriage, I was almost like ‘I’ve picked somebody’ like the old, old saying ‘someone’s ended up picking somebody like their mother’ and I was thinking ‘Jesus, I have’ (David).
These findings offer further support to evidence that children who witness IPV are more likely to be involved in abusive relationships as adults (Stith et al., 2000; Vatnar & Bjørkly, 2008).

Extending earlier findings (e.g., Leenerts, 1999; Vatnar & Bjørkly, 2008) that women who have been subjected to childhood abuse are at increased risk of IPV victimisation, some men reported experiencing childhood sexual abuse: “I was bullied from the age of 6 to 18, seriously bullied, sexually abused and bullied” (John). Some participants considered this as influential to their victimisation: “I think a lot’s to do with my childhood, I do look for a lot of love” (Stuart).

Often participants reported that their partner had experienced a difficult childhood, and had a history of childhood trauma (Hines et al., 2007). Frequently, the men attributed their partners’ behaviour to having had a difficult relationship with their father, which was perceived by some men as symbolic of their relationship:

I think that that comes from the anger at her father, I think, which will be a factor in terms of her hatred of the male [...] she targeted the genitals, she targeted the symbol of the male. So that’s my theory (James).

This finding adds support to the argument that there is a need for interventions which address family factors associated IPV violence (Dick, 2004; Vatnar & Bjørkly, 2008). Evidence indicates that men who are violent towards women, are more likely to come from divorced families, and are less likely to have received positive male parenting (Dick, 2004). Some of the men believed that their partners’ abusive behaviour was learnt behaviour, which they picked up from their parents: “I think part of the reason she is domestically violent is because that’s what she knows, that’s what her parents taught her” (Daniel). In some instances, the men described their partners’ mother as being abusive towards her father, suggesting a possible learnt acceptance of female-perpetrated abuse against men: “Her mother’s had knives at her dad’s throat which she witnessed” (Glenn). This finding echoed the men’s concerns about their own children modelling the aggressive behaviours of their mother.

Uncertainty

Whilst the majority of participants offered potential explanations for their partners’ behaviour, some expressed uncertainty as to why they were victims of IPV.

Occasionally participants reported that they were unable to make sense of their
partners’ behaviour: “The only thing I want to do is understand why she did it” (Martin). Some participants reported that searching for answers to explain what happened to them was an important part of their ‘recovery’: “I’m still struggling for a reason, that’s still a driving point on me” (Lewis). This search for meaning may reflect the men’s unresolved cognitive processing following the adversity of being in an abusive relationship (Linley & Joseph, 2011). For some of the men, their search for meaning was a source of further distress and greater negative change (Linley & Joseph, 2011):

> I’ve thought a lot about it and you’re mentally, why are you disturbing yourself with it, well there’s some sort of comfort and I can understand it, but I have to make sense of it [...] I have researched a great deal of this and I read about it all the time. It’s taken over my life. It is my life. That’s all I do every day, right. It’s frightening (Lewis).

In some instances, participants reported that they had resigned themselves to the fact that they were unlikely to get the answers they wanted:

> No matter what answers I want, I’m never going to get them off my ex-wife.
> Every if we sat in the same room together, you know, I’m never going to get them, because she probably doesn’t know why she did it (Andrew).

Similar to the reported experiences of women in heterosexual and same-sex relationships, the process of coming to terms with IPV victimisation appears to be multifaceted, involving a process of ‘letting go’ of past experiences and hopes for the future (Barnes, 2013).

Overall, this theme highlights the men’s attempts to understand and explain their experiences of IPV victimisation, adding to the limited literature currently available on this topic (Randle & Graham, 2011). The men’s explanations mirror evidence that stressful life situations and mental health problems have been reported in women who use violence (Hines et al., 2007; Stuart, Moore, Ramsey, & Kahler, 2003). Participants’ attempts to ‘make sense of their experiences’ and search for ‘answers,’ may reflect their motivation to reappraise the meaning of the abuse they experienced (Joseph & Linley, 2005). The narratives capture the complexity of IPV victimisation (Heise, 1998), and the men’s difficulties in constructing a narrative of their experience (Berns & Schweingruber, 2007).
Theme 7 Masculine expectations: Grown men don’t cry

This theme captures the ways in which the men’s accounts were underpinned by assumptions about the importance of maintaining a sense of masculinity and adhering to stereotypical masculine stereotypes. Many of the participants struggled to accept the role of victim, which was perceived by the majority of the men as de-masculinising (Corbally, 2015): “Definitely made me feel less of a man, to be being beat up by a woman” (David). Participants’ accounts often reflected stereotypical gender assumptions surrounding the roles and expectations of men (Connell, 1987, 1995), and consequential feelings of shame and embarrassment for not having met these expectations.

Most of the men felt shame because they had not been able to ‘manage’ their partners’ behaviour. Frequently, the men were self-critical of their inability to maintain ‘authority’ within their relationship: “I think it’s the shame of it and feeling weak, how could I make….how can….how can I make a woman overpower me and do that and control my mind” (Jay). The men’s shame was often related to social perceptions of men, and a desire to adhere to hegemonic masculinity, which promotes power, authority and competence (Connell, 1987, 1995).

Shane described the engrained stereotypical perception he has of men’s roles within heterosexual relationships. His narrative reflects an unspoken rule that men should have authority within a relationship to set boundaries, which women should adhere to:

I feel as if, I’ve been disrespected as a man when, when somebody’s physically violent towards me, I have a sort of image in my head that like, you know like this, this is stereotypical, I know it is but it’s still an image that’s like engraved in my head like from childhood or from years ago, like you know whether societies like just put that in there that a man shouldn’t put up with this, the man should like have the authority to say no and like the woman should listen to the man saying no and there shouldn’t be like, just have his boundaries trampled on and there certainly shouldn’t be like physically like abused or assaulted or, have them boundaries like disrespected (Shane).

Shane’s reference to the physical violence he experienced is gendered and an attack on his masculinity (Oliffe et al., 2014).
Overall, this theme highlights the significance of masculinity and stereotypical gender norms surrounding relationships and the use of violence, which added an additional layer of pain to men’s experiences.

**Subtheme 7.1 Perceptions of violence shaped by masculine norms**

This subtheme captures the participants’ sense of confusion in knowing how to cope with IPV. Many of the men normalised violence between men as masculine appropriate behaviour (Haywood & Mac an Ghaill, 2003), but reported that they had moral objections which stopped them from using physical force against women (Cook, 2009; Migliaccio, 2002), thus upholding salient gender norms around violence (Sundaram, 2013). Messages about the ‘appropriate’ use of violence were typically understood to stem from childhood, for example:

> I was brought up by my dad in the sixties that you need to fight blar blar blar, got to defend yourself, don’t hit a woman, err but you’ve got to defend yourself and then you’re in a contradiction (Jason).

The men reported feeling confused on account that their partners’ use of violence did not conform to stereotypical gendered beliefs surrounding the use of violence (Haywood & Mac an Ghaill, 2003):

> As a man at the time I was….er....on the one hand I would...I would excuse myself because if it was a man in front of me it’d be a different thing, I’d fight back. But I felt....I felt helpless really because....I could deal with a man but I couldn’t deal with a woman so....it was confusing for me. I didn’t quite understand why I let this thing like this happen (Jay).

Many of the men expressed a sense of pride at not having retaliated, underpinned by a belief that hitting a woman is bad masculine behaviour (Allen-Collinson, 2009b; Graham-Kevan, 2007; Migliaccio, 2002; Salter, 2015): “Once that man’s hit back, I think all masculinity is lost” (Frank). Some of the men believed that their reluctance to retaliate was significant in their victimisation: “I’ve always thought to myself I would never strike a woman, that’s probably why I was such a victim because I would not defend myself” (Steven). Some of the men reported that their partner would use the men’s inaction as a means of maintaining control, for example:
She’ll stand in front of me and she knows that I won’t push her out of the way because then it’ll look bad on me if I do push her out of the way and like she falls against something, so I feel trapped, I feel powerless it doesn’t feel good at all (Shane).

This subtheme captures the participants’ sense of confusion in knowing how to cope with IPV. The men’s accounts reflect a sense of pressure to ‘perform’ masculinity, adhering to social expectations in order to avoid losing face and project a desirable self-image (Goffman, 1955; Haywood & Mac an Ghaill, 2003).

Theme 8 Experiences of help-seeking - “There’s a part of me that would welcome some understanding”

This theme captures the men’s experiences of seeking help for their IPV victimisation, including the barriers that prevented the men from seeking help, as well as their experiences with professional services and support networks. Feelings of fear and shame defined the men’s experiences of help-seeking. Their willingness to seek help was influenced by perceptions of who they could trust and a desire for their experiences to be validated. For example Shane commented: “I suppose there’s a part of me that would welcome some understanding, you know like, I feel comforted by, just somebody understanding like what it’s been like for me.”

Despite recognising the negative impact their relationship had on their physical and psychological well-being, the majority of men interviewed did not seek help from professional support services. Reflecting findings of research with gay male and heterosexual female victims (e.g., Bullock & Beckson, 2011; Kaukinen et al., 2013; McClennen et al., 2002; Oliffe et al., 2014), frequently the men were unaware of sources of support, for example: “Support wasn’t out there, not in my eyes, I didn’t, I couldn’t see any support for male domestic abuse, you know, I never saw any support out there” (Brian).

Some participants described a lack of faith in support services being able to help them, (Hines & Douglas, 2010a) on account that services are not set up to help male victims (Oliffe et al., 2014):

I’ve never tried, errm ((sigh)) be like a lack of faith that it would help anyway really, you know like so that’s why, I’m not saying it wouldn’t because I haven’t
got the experience to like be able to evaluate it but I wouldn’t expect it to, I wouldn’t expect to get much support (Shane).

Frequently, the men reported that they first attempted to speak to family and friends about their experiences, rather than utilise formal sources of support (Kaukinen et al., 2013), for example:

It was finding people I could talk to and trust to talk to errrm I think that was the first step and errrm, and that was quite, well like I say ((pause)) I took the process of, well I’ve got a good relationship with my parents, I spoke to them and I spoke to close friends (Simon).

Steven reported a lack of trust as a barrier to accessing help outside of his friends: “I didn’t trust professional bodies or nothing like that, all I trusted were the people in front of me which were my friends” (Steven).

Fear of not being believed

The men often described feeling fearful that their experiences would not be believed if they were to seek help. This resulted in the men remaining in their relationship: “It was that fear of yeah, not being believed, you know that kept me there longer than was good for me really” (Simon). Frequently the men made reference to the physical size difference between themselves and their partner which underpinned this fear: “They won’t believe me you know, I mean I’m taller than my wife, you know I’m a big built fella you know, if I call up and say this is not, you know they just wouldn’t believe that” (Simon). Physical size and strength are closely aligned with masculine identity, and are commonly cited as factors which challenge men’s narrative of victimisation (Corbally, 2015; Migliaccio, 2001).

Findings from this theme support evidence that many women do not access professional help despite increased availability of formal support services for victims (Henning & Klesges, 2002; O’Campo et al., 2002). A problem further compounded by the recent dismantling of IPV services due to austerity measures (Gadd, 2012). I now discuss the two subthemes that constituted this theme.

Subtheme 8.1 Barriers to seeking help – “It’s the shame of it”

This subtheme captures the barriers that prevented the men from seeking help. Many of the men feared that they would be ridiculed and humiliated if they did seek help (Drijber et al.,
on account that help-seeking violates traditional masculine assumptions. Therefore, many of the men did not seek help in an attempt to avoid feelings of shame:

Jason: Can’t [seek help] can you
Interviewer: Why do you think that?
Jason: Why, because you’re a man aren’t ya

The men’s accounts reflected rules around masculine expectations which were restrictive and difficult to follow. This idea is clearly articulated in Shane’s comment that:

It’s a shame like that I expect from society or because I haven’t measured up in like some way to my perception of what I should be as a [male] member of society (Shane).

Adherence to heterosexual masculine norms that endorse independence often restricted the men from accessing sources of support (Oliffe et al., 2014). Brian described maintaining a sense of ‘pride’ by not seeking help: “Pride isn’t it, male pride I suppose, don’t want to admit you, I don’t know ((pause)) I suppose it’s a weakness isn’t it, you think you’re weak because you let your wife beat you up."

Participants often described concealing their physical injuries in order to stop other people from finding out about their victimisation, avoid shame and maintain masculine stoicism (Allen-Collinson, 2009b; George, 2002; Oliffe et al., 2014): “I told people I’d walked into a rose bush to explain these two marks on my face” (Simon). Often the men’s excuses for their physical injuries embodied masculinity via reference to strength, power and physical violence:

She’d attacked me on my face and I had two black eyes and scratches on my face, and I had to go to an interview with black eyes and scratches on my face.

And they asked me ‘What happened to your face’ and I just lied, I just say ‘Oh rugby, I was playing rugby and er, you know a bad tackle and it escalated a little bit’ (James).

James’ reference to rugby, a sport underpinned by domination, aggression and competitiveness, constructs a narrative of hegemonic masculinity that allows him to ‘save face’ when directly asked about his injuries (Connell & Messerschmidt, 2005).

The men’s reluctance to accept a ‘victim status’ was often associated with a fear of being perceived as less masculine (Migliaccio, 2001, 2002), for example:
That victim thing that I’ve been trying to avoid with you or push against from whenever it’s got raised, it would be like as if that was a label that was going to get attached to me instead, and I don’t want that, I don’t want that thanks, I don’t want to be seen as a victim, I don’t want to be treated like a victim, and I’m not (Shane).

This finding may be linked to evidence which suggests that victims of both genders often discount the seriousness of their victimisation, in order to avoid a victim identity (Taylor, Wood, & Lichtman, 1983). This inevitably leads to continued exposure to IPV.

**Value of taking part in a telephone interview**

Frequently the men described feeling embarrassed about telling their stories. Occasionally, the men who took part in a telephone interview expressed a sense of relief that the interview was not face-to-face, and was therefore less shaming:

Talking to you is alright because we’re on the phone, I don’t know what you’re doing at the other side of the phone, but, if you was like, phew I don’t know, if you was looking at me, I don’t think I’d be looking at you when I’m talking to you (Stuart).

Reflecting on his decision to take part in a telephone interview, Jay described the value of being able to end the interview by hanging up the phone if he felt uncomfortable: “It was like probably back up for me if.....if I couldn’t handle it then I could....then I could always put the phone down” (Jay). This interviewing method offered participants greater anonymity in their participation, reducing feelings of shame and embarrassment (Sturges & Hanrahan, 2004).

This subtheme highlights the stigma and shame the men felt at being a male victim of IPV, which negatively influenced the men’s help-seeking (Migliaccio, 2002; Randle & Graham, 2011). The men conveyed feelings of shame associated with a sense of failure to maintain masculine appropriate norms, which had a significant impact on their sense of masculinity (Dunn, 2012; Zverina et al., 2011) and willingness to seek help (Migliaccio, 2002; Randle & Graham, 2011).

**Subtheme 8.2 Positive and negative help-seeking experiences**

The men’s accounts demonstrated both positive and negative help-seeking experiences. Negative help-seeking experiences included being treated with suspicion.
and disbelief. The men frequently described the response of other people as unreceptive and judgmental. Positive help-seeking experiences facilitated the men in recognising their relationship as abusive, which for some of the men was influential in their decision to leave. Frequently the men stressed the value of experiencing understanding, and the need for practical guidance and support.

**Negative help-seeking experiences**

Commonly, the men described being treated with suspicion and experiencing a ‘wall of silence’ from both professional support services and within their own support networks. Frank reported that he frequently tried to talk to his family about what had happened, but he was met with a ‘wall of silence’:

You try, it comes up in conversations sometimes and you know, it’s like on TV when, there’s a lot more portrayal of it now on TV dramas of abuse, domestic abuse, physical everything and it’s on TV and you look at it and, you could be in the same room as your brothers and you know, and say like you know ‘That’s what happened to me’ and they say ‘Do you want a cup of tea, do you want a cup of tea’ to try not to talk about it (Shane).

For some of the men, the silence they received from those around them, further reinforced their feeling of isolation and confusion:

I thought this is wrong, this ain’t right, it doesn’t happen, you know but, it does, I still though it never happened because you try and talk to your brothers about it or your male friends, because they never open up and said ‘Yeah, you know my uncle was like that’ or, nobody ever came across and said, ‘Yeah your right mate it does happen’, used to think to yourself, ‘Well am I the only one’ (Frank).

What Frank’s account suggests is that his ability to recognise his experiences as abusive was undermined by his friends’ and relatives’ inability to recognise and validate his experiences (Bostock, Plumpton, & Pratt, 2009).

Frequently, the men reported that their initial attempts to talk about their experiences were so negative that they subsequently made a decision not to disclose their experiences again:

I didn’t feel supported or understood from that so I just thought, well you know I’m not going to bother doing that again [...] it just wasn’t worth my disclosure, I
felt worse by doing it, because then I felt embarrassed [...] I’d rather have just kept it to myself (Shane).

Shane’s narrative demonstrates that the negative reaction he received from his social network had a detrimental impact on his willingness to engage in further help-seeking behaviour (Waldrop & Resick, 2004).

In some instances, the men reported that family members trivialised their abuse, even considering their injuries to be humorous:

Going to my in-laws for Sunday lunch with a black eye, and my father-in-law asking me, you know, ‘How did you get that’ and I sort of, you know, ‘She’ ((moves head to the side)) you know. And he laughed, and they all thought it was hilarious you know, and it’s like if that had been the other way round it wouldn’t have been funny now would it? (Neil).

Neil’s account indicates that violence perpetrated by women against their male partners is often considered to be less serious (Seelau & Seelau, 2005), trivialised or even considered humorous (Pagelow & Pagelow, 1984).

The men’s fear of being judged negatively by others was often not unfounded, reflecting the findings of research with gay victims (Burke & Owen, 2006) and female victims (Bostock et al., 2009). Describing the response of his friends following disclosure of IPV, John outlined: “The people I did tell sort of laughed and said ‘That’s women for you.’” Frequently the men reported that their friends and family did not recognise their experiences as domestic abuse: “None of my friends who I told about it really took it as domestic abuse or took it that seriously, they just saw John ((laughs)) complaining about his wife” (John). Some participants described the reaction of their male friend as particularly hostile and unhelpful: “The reaction you get off your friends, ha ha ha you woos...you’re a woos, you’ve got no bones in you, it’s only the same reaction you get off your wife” (Frank). These accounts may reflect the prevalence of gendered scripts surrounding IPV victimisation, and the association of victimisation with femininity (Hollander, 2001).

Preference to talk to a female

Occasionally the men expressed a preference to talk to women about their experiences and anticipated enhanced empathy, compassion, and acceptance of their victimisation (Bem, 1974; Myers, 1989): “I find it easier to be able to confide in females rather than males”
Craig). Some men expressed a preference to talk to women on account that they are less likely to endorse a masculine ideology which emphasises male strength and self-determination (Myers, 1989), which was therefore less shaming that talking to another male:

I might have found it harder to talk to a man about what had happened to me than a woman, erm again because of erm the whole, at that particular stage in my life the whole macho thing [...] so it might have been easier, erm to talk to a woman than a man in that situation (Simon).

However, some men expressed a preference to talk to men about their experiences, on account that opposite-gender interaction is subject to erotic transference (Celenza, 2006):

It’s much harder for a man to tell a woman ((laughs)) that his wife is beating him up, or being abusive to him. It’s much harder and it becomes restrictive, you become inhibited (John).

Negative experiences of seeking help from professional support services

Often the men who did seek help from professional support services described being treated with suspicion, which they attributed to their gender: “They automatically assume you’re the bloke, you’re the one who’s done something. And you can see it in their eyes” (Neil). Describing his experiences of calling a helpline for victims of domestic violence, Lewis reported that he received gender stereotyped treatment, based on the assumption that men are abusers (Hines et al., 2007):

I started telling the story, and she [helpline operator] said ‘And so when did he abuse you, your son’, and I went ‘She’. ‘Oh I’m sorry, I’m sorry, I’m sorry’. I said ‘That’s okay’, I said ‘Just to let you know you’re as conditioned as everybody else’ (Lewis).

In some instances, the men described being disbeliefed by the professionals from whom they sought help (Hines et al., 2007), leaving the men without any support:

To be told my somebody else ‘Actually all that stuff that you tell me you’ve been through, I think is a lie’, to be told that, knowing what I’ve been through, it was like ‘So where do I go from here, I’m asking you for help, and you’re basically telling me no (Andrew).
These negative experiences of help-seeking frequently resulted in the men giving up on their quest to find support: “I just gave up, I just think I just can’t be bothered, I don’t want to talk to anybody about it yet, I’m sick and tired of banging my head against a wall” (Sean).

Supporting the findings of Corbally (2015), frequently the men who had children reported that they received gender biased treatment from Social Services. Sean described being treated with suspicion: “When you’ve come up against the Social Services [...] you’re just viewed with suspicion.” This resulted in Sean’s experiences not being believed: “One of the biggest problems in all of this has been trying to get the Social Services to actually, you know, kind of believe my experiences” (Sean).

Frequently, the men reported that they did not receive the support they needed on account that support services were gender biased. Some men perceived this bias as endemic within IPV services: “The domestic violence errm field, it is obviously very gender biased” (Simon). The men described a lack of support at a number of levels, including from perinatal health professionals. Expressing his concerns to a health visitor following the birth of his child, Neil reflected on the need for professionals to name his experience as IPV:

> After the little one was born, I talked to the health visitors about what was going on and how worried I was about it because little one was witnessing it, you know even though she was just, you know, a few months old whatever. And they encouraged me to call the police and stuff. But maybe if they’d sort of, erm, discussed domestic abuse with me that would have helped (Neil).

One participant, who did eventually leave his abusive partner, described having to make himself homeless on account of the lack of sheltered support for male victims (Hines et al., 2007): “I had to make myself homeless in order to get away from it” (James). However, in doing so, he further experienced a lack of recognition of male victimisation, underpinned by gender-based beliefs about IPV:

> I presented myself as homeless once I’d got out of hospital for my different injuries, went to the council, started filling out this form. And the person said ‘Oh no, you can’t fill out that box for fleeing domestic violence, that’s for women only’ (James).
This finding supports evidence from Denise A. Hines et al. (2007) that some men are re-victimised by a system that is set up to help female victims of IPV.

**Negative experiences of accessing counselling**

Of the 23 participants who took part in this study, eight had received counselling for their experiences of IPV. Similar to the reported findings of Henning and Klesges (2002) that abused women often do not use counselling services, the men’s perceptions of counselling were unhelpful to their meaningful engagement with therapy. Five of the men who had counselling for their experiences of IPV described the support they received as helpful, whilst three described it as unhelpful, and in some instances detrimental to their psychological well-being. Reflecting on his experience of accessing counselling, Neil reported that the process of psychologically experiencing and relating within therapy was unhelpful:

> I went once a week for 6 weeks, and it was horrible, I absolutely hated it [...] it was ‘Well how do you feel?’ Well it was fucking obvious how I feel, you could tell how I feel, you know. ((laughs)) I’m, I’m, you know I’m sitting there choking back the tears and obviously I’m fucking, you know, it’s not the question. And it wasn’t helpful at all.

Neil’s narrative indicates the difficulty he experienced in talking about his feelings, an endeavour that may present a significant challenge to hegemonic masculinity (Gillon, 2008).

The men’s disregard for counselling often centred on a belief that accessing therapy carried a social stigma (Millar, 2003) that they were keen to avoid: “If you’d have gone for counselling [...] it would stay with you for life, and people would know, for life, he’s been for counselling he has” (Frank).

Frequently the men seemed to hold perceptions of counselling that restricted their engagement with this form of support. In some instances there was a perception that counselling was about making their relationship work:

> Should I have gone for counselling, err and if I had of done, what would they, how would it have panned out, you know, would it have put me in a different frame of mind to try and make the marriage work, I don’t know whether I’d have wanted to be put in that situation (Frank).
The men’s accounts suggest that not knowing about the aims of counselling was a barrier to accessing this service (Millar, 2003).

**Unhelpful experiences with the police**

Many participants were frustrated by the way in which their IPV victimisation was handled by the police. Some participants reported that police officers did not take their experiences seriously because they were male victims (Pattavina et al., 2007): “The police still don’t believe that men suffer domestic violence” (Martin). Commonly the men described a gender bias within the police to “believe the female” (Lewis). Lockwood and Prohaska (2015) argue that response to IPV is influenced by police officers’ individual beliefs about gender roles. Consequently, some men were fearful about seeking support from the police.

Occasionally the men reported that the police adhered to traditional gender discourses, and the endorsement of violence against women. Some men reported that they were blamed for not ‘controlling’ their female partner: “The policeman dropped me off, and he was very curt with me, very rude. He said ‘You want to sort that woman out, don’t waste my fucking time any more!’” (Martin). In some instances, the men spoke of their shock at being encouraged by the police to retaliate against their female partner: “On one occasion it was err ‘Just take her in that toilet now, I won’t say anything, go and give her a good hiding’” (Brian).

One participant described being ridiculed by the police: “You could hear them [police] sniggering in the background (Jerry).” This resulted in additional feelings of shame and embarrassment: “That’s where the embarrassment comes in I suppose, erm...especially when you get a response from the police when they’re laughing and sniggering” (Jerry). These findings mirror the experiences of gay male victims who described being treated with suspicion from law enforcement agencies, due to a general disbelief that men can be victims of IPV (Burke & Owen, 2006).

Often the men reported that the inaction of the police contributed to their psychological distress, leaving them feeling confused. For example, James described his experience of reporting his victimisation to the police:

> I went to [local area] Police Station [...] I had my phone with me with death threats on it and that kind of thing, and I made a report to a standard PC and he said ‘Okay can I see your phone’ and I showed him my phone and he scrolled
through thousands of messages because she would text me 50, 60, 70 times a day, constant flow of vitriol that just grinds you down eventually. And erm, he spent about half an hour just going through my phone reading these messages, these death threats and all the rest of it, and at the end of it he said ‘Well, she’s being a bit lairy isn’t she’. And that was the police’s response, like it was a little bit of a joke, like ‘A little bit funny this woman’. And he said ‘Well my advice to you is you probably just want to ask her to leave you alone’. That was police advice how to handle erm, an abusive situation, just ask her to leave me alone.

Some men reported that their partner used the inaction of the police, to maintain a cycle of control. In some instances, the inactions of the police endangered the men’s wellbeing and that of their children by allowing their partner to return to the family home: “That terrified the crap out of me [...] the fact she was brought back by the police” (Neil).

Occasionally the men reported that they had been wrongfully arrested by the police, resulting in the men being traumatised by both their partners’ behaviour, and the police: “It turned out with me being not only assaulted but also being accused of ((laughs)) of something which I didn’t do, she did it herself” (Sean). Some of the men who had sought help from IPV services for men, reported that they had been warned of the incompetence of the police and were given guidance on how to ‘cope with the police’, suggesting a widespread problem for male victims:

The police tend to see that the man is the instigator, the perpetrator and err, they’ll sometimes arrest the man, even though the man is not the perpetrator. And this is what I was warned of by my domestic violence unit where I went for advice, domestic violence unit for men. And they said ‘Be very careful when you call the police ((laughs)) because you could end up getting arrested’ (John).

Reflecting existing research on male victims (e.g., Hines et al., 2007; Tsui et al., 2010) some men described experiencing biased treatment within the judicial system:

When you come across it, nobody believes you. The whole system works against you. The criminal justice system is geared to let the women off or indeed try and make excuses for them (Lewis).

Participants reported that there is “definitely a problem with the [legal] system” (Jerry), which they perceived as underpinned by traditional patriarchal ideologies.
around childcare, that worked against the interests of these men (Wall, 2011). For example: “The female usually being the one that has the children, is given the big advantages because she has to look after the children. Errm that seems a very errm, chauvinistic” (Craig).

**Traumatic consequences of negative help-seeking**

The men described the unhelpful responses they received from both their support networks, and professional support services as adding to their psychological distress (Bostock et al., 2009; Hines et al., 2007): “It just added you know more hurt” (Simon). James described the lack of support available to abused men as prolonging his IPV victimisation: “The system, if you like, was complicit in what happened.” Some men described their negative help-seeking experiences as having lasting and significant implications on their mental health, in some instances this resulted in post-traumatic stress disorder (PTSD) (Hines et al., 2007). This is illustrated in James’s comment:

> By the failings of the system, by the lack of it, by the lack of understanding, by their so-called friends who, you know, who don’t believe them and side with their, the abuser, which happened to me, you know. And I have to say I did suffer from post-traumatic stress disorder (James).

The men’s accounts demonstrate the detrimental impact of their help-seeking experiences, which resulted in further feelings of isolation and distress (Barber, 2008; Drijber et al., 2013).

**Positive help-seeking experiences**

Some men described receiving helpful sources of support which assisted them to recognise their relationship as abusive and was influential in their decision to leave. The majority of participants who had undertaken personal therapy for their experiences of IPV reported that this was beneficial. In particular, being believed was of significant value to the men: “Having one other person who believes you is significant, is important, and is a source of great strength” (James). The men frequently described counselling as helpful on account that the therapist was non-judgmental: “She offered no judgement at all, which is one of the things that makes it very easy to talk to a counsellor” (Aaron). This appeared to be of particular value given that many of the men were self-critical of their experiences of IPV victimisation. Thus,
facilitating unconditional positive self-regard appears to have been of significant value in the men’s recovery from their trauma (Flanagan, Patterson, Hume, & Joseph, 2015). In line with evidence that helpful sources of support may be influential in women’s decision to leave an abusive relationship (Rhodes & McKenzie, 1999), some men reported that having counselling whilst in their relationship helped them to recognise IPV and ultimately leave the relationship:

As I going through this, you know now I see the pattern, now I see it is a pattern, and it’s not just a series of isolated events that I’m instigating, and I was only getting that from err, you know the opportunity to talk about it and put it all into perspective (Aaron).

Frequently the men described counselling as beneficial on account that it was confidential, which facilitated their willingness to talk about their experiences. The importance of confidentiality extended to taking part in their interview. James described finding it easier to talk to somebody who he will not see again:

It’s easy to talk to someone who don’t know you, and I can walk away from here knowing I’ll probably never see you again so I’m okay with that, if it’s more local, then it’s probably harder (James).

These findings support those of Tsui et al. (2010) who identified that male victims who do seek help value anonymity.

The value of talking to other abused men

Some participants reported that they had received help from services that work with male victims of IPV. Frequently, these men reported that they valued sharing their experiences with somebody who had been through a similar experience. Fear of being the only male victim was a common theme in the majority of the interviews. Meeting other men who had similar experiences proved to be significant in reducing this fear, and helped to ‘normalise’ the men’s experiences:

It’s realising that you’re not alone. That was the best thing about it I’m not alone for God’s sake, you know there are other guys that are suffering, I’m not the only weirdo here and that was the best part of it, there are other people (John).

Participants reported that it was easier to talk to men who had experienced IPV on account that they would be more understanding:
I did talk about it with some people, but it’s not, like I say it’s not the sort of thing that you feel able to talk about, with your friends and relations, it’s better to talk about it with somebody who actually understands, erm, because they’ve got some experience of it themselves maybe (Neil).

Belonging to a support service for male victims provided the men with a ‘safe’ place to share their experiences and break down some of the challenges presented by rigid gender roles:

There was a lot of crying went on, a lot of revelations and a lot of crying. And in our recovery programme we all cried together. And I think that’s good because men rarely cry do they? ((laughs)) (John).

Connell (2000) argued that hegemonic masculinity is a fluid concept, and that commitment to the norms and expectations of masculinity can be superseded by distancing and rejecting of social practices. John’s account demonstrates his rejecting of masculine norms through his willingness to share his vulnerability within the group. However, his defensive laughter when talking about crying suggests he still feels some shame in talking about this to another man, thus not entirely letting go of hegemonic masculinity.

*Helpful experiences with the police*

Not all of the men described the police as unhelpful. Occasionally, the participants reported that the police were instrumental in helping them to recognise their relationship as abusive: “They said ‘She’s been abusing you’, and then I suddenly realised” (John). In addition to labelling the relationship as abusive, some men reported that the police were helpful on account that they encouraged the men to seek help:

They said to me ‘You need to do something, you need to….you need to get help’. And er...they gave me a list of erm...units, and one of them was erm...the unit that I went to. And I was there within a week or two of her leaving the house, I was there and er...getting help. And I’ve learned a tremendous amount (John).

This validation of the men’s experiences by police offices, empowered the men to leave their relationship or seek help (Pajak, Ahmad, Jenney, Fisher, & Chan, 2014). However, these support services were not always able to address the men’s needs: “The police they would send me, they would give you this advice line thing and then
you’d ring it up and they say ‘Oh we only deal with gay on gay’, male on male or whatever” (Sean).

Some men reported that the police took action against their female partner, including giving verbal warning: “They told her not to do it anymore, to behave herself, told her to calm down and not do it again” (Tariq). These findings add credence to Carmo et al’s. (2011) assertion that IPV against men is sometimes recognised as a serious problem. In some instances, the police continued to press charges, despite the men’s initial reluctance:

On that occasion she got done for attempted murder like, but er, I dropped the charges, but the police wouldn’t drop them like, they still went ahead but like you know for a lesser charge like, and so she had to, she had to do community service and go to anger management courses (Brian).

The varied response of the police to the men’s victimisation appears to reflect recent findings that police forces are inconsistent in their approach to domestic violence (HMIC, 2014).

Overall, this subtheme highlights the men’s experiences of seeking and receiving help for their IPV victimisation. The findings demonstrate the unique challenges faced by some male victims. The men reported being re-victimised by a system that is set up to help female victims (Hines et al., 2007). These findings suggest the need for enhanced recognition of male IPV victimisation within medical, governmental, legal, and judicial organisations (Alhabib et al., 2010; Barber, 2008; Wall, 2011).

**Theme 9 There is a need for change - “I am keen to spread the word”**

This final theme captures the men’s perceptions of changes that need to be made in order to enhance recognition and understanding of male IPV. The men’s willingness to take part in this research was frequently underpinned by a desire to bring about change. The men’s narratives often centred on a desire to use their own experiences to help other male victims.

Peel, Parry, Douglas, and Lawton (2006) found that participants often chose to take part in qualitative research out of a desire to help other people. This was reflected in the current study, with many of the participants citing a desire to help other male victims as a central motivation for taking part in this research. The men perceived
research as an important first step towards enhancing awareness of male victimisation: “I’m thankful I can take part in something that will, you know, one day help everyone” (Steven). Supporting evidence that reporting of IPV against men offers a forum for demystifying male victimisation, whilst at the same time validating its importance (Chaudhuri, 2012; Randle & Graham, 2011), frequently the men cited their desire to enhance understanding of male victimisation by sharing their personal experiences: “I am keen to spread the word” (James).

Some participants reported that they experienced adversarial growth and improved psychological wellbeing following their traumatic experiences (Linley & Joseph, 2004). For some of the men, taking part in this research was a significant step towards recognising their personal resilience and strength (Flanagan et al., 2015). For example, Jay described feeling more comfortable in sharing his vulnerability (Joseph, 2015): “I wouldn’t even have entertained this years ago, I wouldn’t even….I wouldn’t even like if somebody says ‘Do you want to speak to somebody’ I would say ‘No thanks’” (Jay).

Occasionally, participants reported that they had chosen a career in the domestic abuse field, which enabled them to make use of their own experiences and wisdom to help others: “It’s obviously a subject that I’ve become more interested in, purely from personal experience really, and it is interesting” (Aaron).

Supporting the assertion of Chaudhuri (2012) that there remains a reluctance to acknowledge and comprehend victimisation beyond the traditional focus on women and children, some participants reported that there is a need to increase societal awareness of male victimisation (Barber, 2008). The men’s accounts often focused on the importance of media representations in raising awareness of IPV against men and making the subject more ‘mainstream’ (Aaron). Occasionally, the men made reference to the coverage of male IPV within the British soap opera Coronation Street, as a positive step towards enhancing awareness that IPV against men is a serious issue: 

Coronation Street, I think it’s probably the most watched programme in the country and it’s raised awareness, I think that’s been useful, because [partner] watched it I think it’s made her probably realise that it’s not acceptable to do that type of thing, I hope so, I hope so (Shane).

Often the men’s accounts reflected a sense of frustration that pervasive perceptions of IPV as something that ‘happens to women’ (Sean) are reinforced by the media.
Some men expressed concern that media reports focused on violence against women are reinforcing the belief that IPV is a gender specific problem, which negatively impacts on men’s willingness to seek help:

There was a report on the television, 100,000 women at risk of violence, two or three days ago. Where’s the men in this? You know, okay so there’s 100,000 women at risk, what about the men that are at risk, they don’t mention them. So they imprint on the whole of society’s mind that it’s women. It’s an indoctrination, it’s brainwashing. And it’s unjust. And it makes men who are abused scared of coming forward ((laughs)) because they know they’re going to get ridiculed or not believed (John).

Some men stressed the importance of enhancing awareness of IPV through educational campaigns that are non-gendered: “I would like to see domestic violence as non-gender specific” (John). In particular, the men’s accounts focused on a need to enhance awareness and understanding of male IPV within frontline services (Barber, 2008; Hines & Douglas, 2010a):

There’s no training for the police in being able to spot this kind of thing. There’s no training in the NHS, doctors aren’t trained on being able to spot male victims of violence (James).

Frequently the men highlighted the importance of education in reducing stigma surrounding male victimisation: “I think if men were educated about what they were in they would start to realise that, that it isn’t actually a reflection on their masculinity” (James). These findings echo those of Gadd et al. (2003a) who recommended that wider coverage on the topic of male victimisation is needed, in order to demystify socially constructed myths.

**A need to tailor services for male victims**

Supporting earlier findings (e.g., Tsui et al., 2010; Zverina et al., 2011), some men outlined the need to tailor IPV services to accommodate the unique needs of male victims. For example: “Asking for a different type of domestic abuse centre for guys, I don’t think that’s a problem, it shouldn’t be the same, we think differently, we do things differently” (Lewis). The need for gender specific interventions related to the need for facts over feelings, values which are more in line with traditional values of hegemonic masculinity (Gillon, 2008):
For men to kind of go I don’t necessarily need to talk to you from an emotional point of view because, you’ve given me the facts and they pretty much make up the same, you know pattern in almost every case errm, that, I don’t have to sit down and try and explain to you how I feel, I already think you know how I feel because you have all the facts, we deal in facts, so yeah it would normalise it from the point of view of the male (Aaron).

These recommendations support those proposed by Zverina et al. (2011) who outlined the need for services which are sensitive to working with male victimisation, in which the identity of victim may be more problematic than for some female victims, on account of dominant gender scripts. These findings further evidence the need to address the conflict between victimisation and masculine identity (Tsui et al., 2010). This theme captures the men’s perceptions of changes that need to be made in order to enhance understanding of IPV and improve service provision for male victims of IPV. These changes typically centred on the need to enhance awareness of male victimisation, and tailor support services in order to meet the unique needs of male victims (Barber, 2008; Hogan et al., 2012).

**Discussion**

I now provide a brief overview of the research findings, discussing the contribution of this research to IPV literature, exploring similarities in the experiences of IPV across both genders, which Migliaccio (2002) proposed may enhance overall understanding of IPV victimisation. I also consider the implications for counselling psychology. Subsequently, I discuss the limitations of this research, before considering areas for future research.

The findings of the current study offer insight into the nature of abuse the men experienced, including their perceptions of triggers to their partners’ abuse behaviour (Carmo et al., 2011). The findings support current literature on violence against women which has identified the coexistence of physical and psychological abuse (e.g., O’Leary, 1999; Vatnar & Bjørkly, 2008; World Health Organization, 2005), with verbal aggression often a precursor to physical violence (Eisikovits & Buchbinder, 1999). The men reported that they experienced prolonged and sustained abuse from their female partners, including emotional, psychological and physical violence. The men’s accounts demonstrate that their partners
sought to achieve and maintain coercive control through systematically controlling their behaviours, restricting accessing to family and friends, and threatening violence (Allen-Collinson, 2009a; Home Office, 2015). Such forms of abuse have been defined as constituting intimate terrorism (Hines & Douglas, 2010a; Johnson, 2006).

Frequently the men’s narratives reflected commonalities between the reported experiences of female IPV victims (Allen-Collinson, 2009b). Congruent with some female victims’ accounts (Jewkes, 2002), the men described feeling isolated by their experiences, on account of their partners restricting their access to family and friends. Additionally, internal and external barriers to accessing support (discussed below) served to further isolate the men. Some men reported that their female partners used forms of psychological aggression unique to male victims of female-perpetrated IPV, including mocking and ridiculing them for failing to meet dominant notions of masculine identity (Allen-Collinson, 2011).

Similar to Merrill and Wolfe’s (2000) finding that gay men frequently report a lack of awareness and understanding of IPV as a significant barrier to leaving an abusive relationship, the men’s narratives reflected their difficulty in recognising that they were being abused. Campaigners have worked tirelessly to encourage abused women to recognise abuse and to seek help. The absence of equivalent campaigns for male victims may mean that men in abusive relationships do not recognise behaviours as abusive in the same way as women (Merrill & Wolfe, 2000). This may also reflect a wider lack of recognition of IPV against men within society (McClennen et al., 2002).

Echoing the findings of many female victims, frequently the men reported that they stayed in the relationship in the hope that things would change for the better (Hendy et al., 2003). Supporting earlier findings (Hines & Douglas, 2010a) the men cited a commitment to their relationship, love of their partner and concern about their children as significant barriers to leaving their abusive partner. Having children appeared to put the men at increased risk of continued coercive control, even after leaving the abusive relationship (Davies et al., 2009), echoing previous research on female victimisation (e.g., McCloskey, 1996; Wuest, Merritt-Gray, & Ford-Gilboe, 2004). Some men reported that their partners made threats to stop the men from seeing their children in order to maintain control (McCloskey, 1996).
Similar to research findings which highlight that women are more reluctant to leave a violent relationship when they have children with their partner (Hendy et al., 2003), many of the men who had children reported that they remained in the relationship for the sake of their children. The men were fearful that the abuse they experienced would be targeted at their children if they left, or that they would lose access to their children. Conversely, the men often cited their children, in particular fears surrounding the psychological well-being of the children witnessing abuse, as influential in their decision to leave the relationship. These findings support evidence which has identified that women who live with children are more likely to seek help (Bonomi et al., 2006), with concerns for children’s well-being often a catalyst for leaving an abusive relationship (Attala et al., 1994). The detrimental effect of IPV on children’s wellbeing has been shown to be evident regardless of the gender of the adult who is inflicting the abuse (Moretti, Obsuth, & Odgers, 2006). Consequently, these findings further highlight the seriousness of female-perpetrated IPV, with the social and psychological consequences of IPV victimisation extending beyond the men at whom it is targeted (Hines & Douglas, 2010a).

Participants’ accounts reflected attempts to understand why their partner was abusive. In line with the well-established association between alcohol consumption and IPV perpetration (Bangdiwala, Taylor, & Shankar, 2010), some men attributed their partners’ use of violence to drug and alcohol misuse (Capaldi et al., 2012). Other explanations offered by the men included IPV being a learnt behaviour, with some men citing their partners’ parents being abusive towards one another (Dick, 2004; Rhodes & McKenzie, 1999).

Difficulty in integrating a social narrative of hegemonic masculinity (Connell, 1995) with the paradoxical experience of being a victim is a persistent theme running through the literature on male victimisation (Rentoul & Appleboom, 1997; Yarrow & Churchill, 2009). Masculinity was a salient feature in almost all of the men’s accounts. Participants often discounted their experiences of abuse, perceiving victimisation as inconsistent with their male identity, and therefore remained in their abusive relationship (Letellier, 1994; Merrill & Wolfe, 2000). This finding supports evidence that mainstream narratives of IPV portray IPV as something that
only happens to women (Letellier, 1994) which may negatively impact upon men’s recognition of IPV and willingness to seek help.

Participants’ accounts reflected a reluctant to disclose their experiences of abuse, for fear of being perceived as less masculine (Drijber et al., 2013; Migliaccio, 2002; Tsui et al., 2010), on account of dominant social constructions of victimisation as a female experience (Allen-Collinson, 2009b; Wall, 2011). Mirroring earlier findings, the label of ‘victim’ was undesirable for the men (Allen-Collinson, 2009b; Dunn, 2012). Fear of emasculation limited participants’ help-seeking behaviour (Migliaccio, 2002), this was a significant barrier to some men leaving their abusive relationship (Hines & Douglas, 2010a). These findings support evidence that men in general often feel pressure to maintenance socially appropriate masculine standards of behaviour (White, 2009), reflecting the men’s internal and external sense of masculinity (Migliaccio, 2001).

The findings support evidence that IPV is associated with poor, long-term mental health outcomes for both male and female victims (Afifi et al., 2009; Waldrop & Resick, 2004), including having a detrimental effect on victims’ self-esteem, (Rhodes & McKenzie, 1999), and in some instances resulting in PTSD (Douglas & Hines, 2011). In addition, some of the men’s narratives support evidence from female victims that IPV can result in potentially fatal and incapacitating injuries (Alhabib et al., 2010; Black, 2011). Understanding of the long-term implications of IPV victimisation is limited, with preliminary evidence suggesting that ‘recovery’ from partner abuse is a non-linear process, which is not dependant on time, given the often enduring and unpredictable repercussions of IPV victimisation (Barnes, 2013).

Many of the men described negative changes in their worldview (Linley & Joseph, 2011) including their perceptions of women and romantic relationships. However, some of the men reported improved psychological growth and enhanced personal resilience and strength, following their traumatic experiences (Flanagan et al., 2015; Linley & Joseph, 2004). These findings add to the limited understanding of the consequences of IPV for male victims (Drijber et al., 2013; Hines & Saudino, 2003), suggesting similarities in the long term impact of IPV experienced by both men and women, which has been linked to severe physical and mental health problems (World Health Organization, 2013a).

**Implications for support services**
The findings from this research have important implications for professional support services. The men’s narratives demonstrate that their experience of being in an abusive relationship was traumatic and had a negative impact on both their physical and psychological well-being. Supporting earlier findings (Randle & Graham, 2011), the men reported that they experienced depression, suicidal ideation and PTSD as a consequence of their victimisation. Professionals working with male IPV victims should be aware of the adverse consequences of IPV victimisation (Barber, 2008; Campbell, 2002).

Reflecting existing research on male victimisation (e.g., Drijber et al., 2013; Hines & Douglas, 2010a), the men frequently did not seek professional support on the basis that they believed professional support services could not or would not help them, and in some instances, these fears were not unfounded, as noted above. Some men feared that their victimisation would not be taken seriously by professional support services (Bullock & Beckson, 2011; Drijber et al., 2013). Many participants were unaware of sources of support for male victims. These findings highlight the importance of increasing understanding amongst male victims of how services can offer support. Evidence suggests that levels of education are a consistent predictor of help-seeking behaviour in women (Hutchison & Hirschel, 1998; Kaukinen et al., 2013), with enhanced knowledge of support services significantly associated with support utilisation, due to increased awareness of how support services can aid the victim in ending an abusive relationship (Kaukinen et al., 2013).

The men’s accounts also demonstrate the need for services to be aware that men can be victims of female-perpetrated IPV (Barber, 2008; Hines & Douglas, 2010a), and the nature of IPV against men. Some participants’ reported forms of abuse that were gender specific, including their partners’ attempted to discredit their masculine identity as a form of psychological abuse (Allen-Collinson, 2009a, 2009b). Professionals should be aware of how abuse tactics are used by perpetrators, thereby supporting victims in recognising and escaping methods of control (Keeling & Fisher, 2012; Rhodes & McKenzie, 1999). Some participants reported a lack of recognition and understanding of male victimisation within support services (Douglas & Hines, 2011; Hines et al., 2007; Tsui et al., 2010).

A lack of awareness of male victimisation amongst professionals who work with victims of IPV may result in insensitive practice, including treating victims with suspicion and disbelief. Negative help-seeking experiences resulted in the men experiencing further feelings of
isolation and psychological distress (Allen-Collinson, 2009b; Barber, 2008; Drijber et al., 2013; Migliaccio, 2002).

Treatment models for male victims may need to consider the role of masculinity and gender identity (Barber, 2008; Wall, 2011). The men who received help from services that work specifically with male victims of IPV, reported that sharing their experiences with other men who had been through a similar experience provided a ‘safe’ place to challenge gender norms and reduced feelings of shame and embarrassment surrounding masculinity and victimisation (Carmo et al., 2011; Randle & Graham, 2011). Therefore, support services should be aware of dominant cultural expectations surrounding the roles of men, and associated feelings of shame and embarrassment for a perceived failure to meet masculine expectations, which was a significant barrier to seeking help (Tsui et al., 2010). Training for service providers should address potential resistance to ‘victim status’ (Migliaccio, 2001, 2002; Zverina et al., 2011).

Some of the men who identified as having a disability reported experiencing disability-related abuse. Risk of IPV victimisation is higher amongst men and women with mental health difficulties (Hahn, McCormick, Silverman, Robinson, & Koenen, 2014). Therefore, enhanced screening of IPV victimisation among individuals with disabilities is recommended, in order to aid the prevention of abuse (Hahn et al., 2014). These findings offer important insights into men’s experiences of female-perpetrated IPV, which have the potential to enhance understanding of how to support male victims (Randle & Graham, 2011).

It is hoped that these findings will aid awareness and understanding of male victims of IPV (Douglas & Hines, 2011; Hines & Malley-Morrison, 2001), providing empirical evidence to support professional interventions (McClennen et al., 2002; Randle & Graham, 2011).

Future research plans

The findings of this study have been submitted for publication in the Counselling Psychology Quarterly journal. I chose to target this journal on account of its commitment to publishing research which may enhance therapeutic practice. The findings of this study have important implications for practitioners, in particular the need for counsellors to be aware of male IPV victimisation and to challenge
practitioners’ assumptions and misconceptions surrounding male victimisation (Rentoul & Appleboom, 1997).

Social norms and constructions of masculinity underpinned many of the men’s accounts, a finding which may have relevance and transferability to other male victims of IPV. Therefore, I also aim to publish a paper on the role of masculine ideology, which often had an impact on the participants’ perceptions of themselves as men, as well as their willingness to seek help. I intend to submit these findings to the Psychology of Men and Masculinity journal, given its focus on disseminating research on the social construction of gender.

Male IPV victimisation is a subject that I am very interested in and would like to continue researching. In light of the ambiguity surrounding male victimisation (Randle & Graham, 2011) and the need for greater awareness of the experiences of male victims of female-perpetrated IPV (Hines et al., 2007), I intend to expand my review of the literature on this subject into a publishable systematic review. A systematic review of the literature would enhance understanding of both the prevalence and nature of male IPV victimisation (Bundock et al., 2013).

Furthermore, given that many of the men’s accounts demonstrated similarity between the reported experiences of female IPV victims (e.g., Barnes, 2013; Henning & Klesges, 2002; Rhodes & McKenzie, 1999), I aim to further investigate this similarity through the use of survey data or questionnaires, which would facilitate the recruitment of larger samples and offer a more detailed analysis of the experiences of male IPV victims (Gadd et al., 2003a). Thereby answering Migliaccio’s (2002) call for quantitative research which employs validated questionnaires; thus obtaining data which can be used to directly compare the experiences of IPV victimisation across both genders (Migliaccio, 2002).

**Implications for counselling psychology**

Often the men perceived counselling as a ‘last resort’ because of a belief that accessing therapy represented a weakness and presented a challenge to hegemonic masculinity (Gillon, 2008). The men’s perceptions of counselling often restricted their engagement with this form of support. These findings highlight the need to raise awareness amongst men of what counselling is about (Millar, 2003), and to tackle the notion that attending counselling is shaming for a man. Some participants described
counselling as beneficial on account that it was confidential. These findings further support those of Millar, who identified that men’s fears of appearing weak for accessing therapy were reduced following assurances of confidentiality (Millar, 2003). Given the negative psychological impact of the abuse the men in this study experienced, and the significant barriers to accessing sources of support, counselling psychologists should be sensitive to the impact of assumptions and values surrounding masculinity and masculine appropriate behaviour, which may negatively impact the use of therapy (Hogan et al., 2012). The men’s difficulties in identifying and seeking help for their victimisation appeared to centre on their investment in notions of hegemonic masculinity (Hogan et al., 2012).

Zverina, Stam and Babins-Wagner (2011) recommended that therapists working with male victims should be aware of men’s resistance to victim status. Therefore, counselling psychologists should be mindful of the potential difficulty in integrating hegemonic masculinity (Connell, 1995) with the paradoxical experience of being a victim (Rentoul & Appleboom, 1997; Yarrow & Churchill, 2009). Gillon (2008) recommended the need for counsellors to creatively consider ways in which masculinity can be integrated within their work, thereby helping male victims to establish an acceptable masculine identity on both a social and personal level (Allen-Collinson, 2009b).

Numerous studies highlight that men benefit from a patriarchal culture which normalises and encourages male power and aggression, particularly within the context of heterosexual relationships (e.g., Tolman, Spencer, Rosen-Reynoso, & Porche, 2003). However, these findings add credence to notion that men can also be victims of patriarchy (Bhuiyan et al., 2008), on account of their inability to perform and maintain social perceptions of masculinity, which may negatively impact upon their confidence and self-esteem (Bhuiyan et al., 2008). These findings have particular relevance for counselling psychology’s commitment to social justice, which emphasises working with individuals who have experienced social marginalisation (Woolfe, Dryden, & Strawbridge, 2010). Such findings highlight the psychosocial consequences of male victimisation, which remains under researched (Hines & Malley-Morrison, 2001).
The men’s accounts of receiving therapy suggest that they benefitted from talking to a counsellor who was non-judgemental and understand of IPV and its affects (Roddy, 2013). These findings highlight the need for counselling psychologists to be aware of male victimisation and the unique difficulties experienced by some male victims (Barber, 2008; Hogan et al., 2012). A non-judgemental therapeutic approach was of particular value given that many of the men were self-critical of their perceived failure to meet internal and social masculine expectations. Counselling psychologists should be aware of the importance of facilitating unconditional positive self-regard in the men’s recovery from the trauma of being in an abusive relationship (Flanagan et al., 2015). Many of the participants stressed the value of being believed when talking about their experiences of IPV victimisation, thus reinforcing the importance of valuing clients’ subjective experiences and constructions of reality, a central aim of counselling psychology (Woolfe et al., 2010).

Counselling Psychologists who work with male victims may benefit from understanding male victims’ narratives (Corbally, 2015). Listening to survivors’ stories may enhance knowledge and understanding surrounding IPV (Merrill & Wolfe, 2000) leading to the development of competent therapeutic practice (Buford, Seaman-DeJohn, Mobley, & Murray, 2007).

**Limitations of this research**

These findings offer tentative understanding of male IPV victimisation. Whilst this research does highlight unique challenges that may be useful in developing interventions to support male victims of IPV (Oliffe et al., 2014); these findings need to be considered in relation to the limitations of this study. Participants’ demographic information demonstrate the limits of the claims that can be made about the findings, and the potential transferability of these findings to other male IPV victims (Braun & Clarke, 2013).

Randle and Graham (2011) highlighted the need to explore the experiences of male victims from ethnic minority groups. Whilst the majority of participants identified as White, some non-White participants (n=2) did speak about the role of their ethnicity/culture in their experiences of IPV, supporting earlier findings which suggest that the meaning of violence varies within and between cultures (e.g., Jewkes, 2002; Mann & Takyi, 2009), However, this finding needs further exploration.
The men who took part in this research, self-identified as victims of female-perpetrated IPV. Given that some of the men were reluctant to identify as victims of IPV (Drijber et al., 2013; Migliaccio, 2002; Tsui et al., 2010), consideration should be given to the language used in the recruitment materials and the phrasing of questions within the interview schedule. Researchers should be mindful of participants being avoidance of a victim identity (Taylor et al., 1983) for fear of being perceived as less masculine (Migliaccio, 2001, 2002). Future research may consider using the phrase ‘survivor’ rather than victim (Donovan & Hester, 2010).

**Future research**

The need for enhanced understanding of male victims’ experiences has been frequently outlined (e.g., Hines et al., 2007; Migliaccio, 2002; Randle & Graham, 2011). Findings from the current study highlight the complexity of the men’s experiences of being in an abusive relationship. Research on male IPV victimisation is in its infancy (Douglas & Hines, 2011; Hines et al., 2007); consequently further research, particularly within the UK (Dempsey, 2013), is required to enhance understanding of the experiences of male victims of IPV, leading to the development of understanding, theory and practice. In particular, there remains a need to enhance practitioners’ ability to offer the best possible support to male victims (Hogan et al., 2012; McClennen et al., 2002). Further research may offer important implications for understanding male IPV, leading to the potential development of enhanced sources of support (Merrill & Wolfe, 2000).

Masculinity was a pervasive theme within many of the men’s narratives. Given that this was so strongly linked to wider social norms surrounding masculine norms and expectations, this finding may have relevance and possible transferability to other male victims of IPV. In light of evidence which suggests that masculine identity varies within and between transgendered persons (Gardiner, 2013), future research should aim to recruit trans men in order to further explore the role of masculinity within the accounts of male victims and further develop interventions to support transgendered victims of IPV (Shaw et al., 2012).

**Reflexivity: the interview process**

Levinson (1998) proposed that male researchers are often afforded insider status when researching topics concerning gender with male participants. This may serve to
enhance the establishment of trust and rapport with male participants (Sallee & Harris, 2011). Whilst participants were not directly asked about their perceptions of me as a researcher, and whether my gender enhanced their experience of participating in this study; on the whole, there appeared to be a strong rapport between myself and the participants. The men often reported that they felt comfortable disclosing personal information (Moore, 2015).

Some participants stated at the end of the interview that they found the experience ‘beneficial’ (Brian) or ‘therapeutic’ (Glenn), and reported that taking part had helped them to ‘make sense’ (Shane) of their experiences. McLeod (2015) identified that such responses may suggest that participants have offered a genuine reflection of how they feel. This sense of trust and engagement with the research process may have been as a consequence of the researcher being perceived as an ‘insider’ on account of my gender, or because I was genuinely interested and engaged with what the participants were saying (Moore, 2015). This finding further reinforces the importance of valuing clients’ subjective experiences, and seeking to understand their constructions of reality (Woolfe et al., 2010).

Sallee and Harris (2011) claimed that participants may share different types of information depending on the gender of the researcher. Manderson et al. (2006) identified that interviews between men are often characterised by a reluctance to recognise emotional distress. Whilst many of the interviews were characterised by experiences of pain, loss, discrimination and fear, overall there was a lack of emotional experiencing within the men’s narratives. Expressing emotions presents a challenge to hegemonic masculinity which values thinking and doing over feeling (Gillon, 2008).

Sallee and Harris (2011) proposed that being interviewed by a female researcher may facilitate deeper reflection on men’s gender roles and notions of masculinities. Indeed, Corbally (2015) stated that the male victims she interviewed indicated a preference for a female interviewer. Future research is needed to explore the impact of insider/outsider status, particularly with regard to gender, on interview research with men (Moore, 2015), this may be achieved through the comparison of research conducted by male and female researchers (Moore, 2015).

These considerations highlight the importance of acknowledging and reflecting upon my role in the research process and my contribution to the construction of knowledge
(Braun & Clarke, 2013). Yardley (2000) claimed that reflexivity forms a key element of the analysis, therefore, there is a need to consider ways in which my characteristics (as a male researcher) may have impacted upon the research process and findings (Yardley, 2000), given that some of the men outlined that sharing their experiences with a female was less shaming than talking to another male.

**Conclusion**

In conclusion, the men described their experience of being in an abusive relationship as a traumatic life event, which had a negative impact on both their physical and psychological well-being. Frequently participants made reference to masculinity, and described associated feelings of shame and embarrassment for not having met cultural expectations surrounding the roles and expectations of heterosexual men. The men reported that they feared being judged negatively by others, which was a significant barrier to accessing help.

This study offers rudimentary understanding of male IPV victimisation, a chronically under-researched topic (World Health Organization, 2013a). The men’s accounts offered insight into the experiences of male victims of female-perpetrated IPV, thus enhancing knowledge and understanding of the complexity of IPV (Heise, 1998) from a male victim’s perspective (Randle & Graham, 2011).

These findings highlight the need for male victimisation to be considered as a valid and serious form of IPV (Hines et al., 2007). It is hoped that the publication of these findings may help to reduce the stigma surrounding male victimisation, by enhancing understand of how men who have experienced female-perpetrated IPV view themselves. This understanding may contribute to counsellors/psychotherapists/counselling psychologists’ understanding of how to work effectively with men who have experienced or are currently experiencing IPV.


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Appendices

Appendix 1: Journal article
Appendix 2: Participant information sheet
Appendix 3: Demographic information sheet
Appendix 4: Interview schedule
Appendix 5: Participant consent form
Appendix 6: Table 2 - Overview of themes and subthemes
Appendix 1: Journal article

The following research article has been prepared for submission to the journal: Counselling Psychology Quarterly. Counselling Psychology Quarterly is an international interdisciplinary journal, which encourages submissions based on practice, research and theory. The intention of the journal is to publish global research which is of practical relevance to counselling psychologists. I have chosen to target this journal given its focus on publishing research which will reach a wide audience of practitioners, and therefore allow me to increase awareness and understanding of male victimisation.

Manuscript guidelines from:
http://www.tandfonline.com/action/authorSubmission?journalCode=ccpq20&page=instructions#.VpL0IxWLTIU

General guidelines
- Manuscripts are accepted in English. Any consistent spelling and punctuation styles may be used. Please use double quotation marks, except where “a quotation is ‘within’ a quotation”. Long quotations of 40 words or more should be indented without quotation marks.
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- Manuscripts should be compiled in the following order: title page; abstract; keywords; main text; acknowledgements; references; appendices (as appropriate); table(s) with caption(s) (on individual pages); figure caption(s) (as a list).
- Abstracts of 200 words are required for all manuscripts submitted.
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- All persons who have a reasonable claim to authorship must be named in the manuscript as co-authors; the corresponding author must be authorized by all co-authors to act as
an agent on their behalf in all matters pertaining to publication of the manuscript, and the order of names should be agreed by all authors.

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- When using a word which is or is asserted to be a proprietary term or trade mark, authors must use the symbol ® or TM.
Men’s experiences of female-perpetrated intimate partner violence: A qualitative exploration

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Men’s experiences of female-perpetrated intimate partner violence: A qualitative exploration

Abstract

The subject of female-perpetuated intimate partner violence (IPV) against men has been one of controversy. This experiential research study explored the experiences of 23 men who self-identified as having experienced female-perpetrated IPV. Semi-structured interviews explored the men’s experiences of both physical and emotional abuse, as well as barriers to leaving their abusive relationship(s), and their experiences of seeking help. Thematic analysis of the interviews revealed that the men’s experience of being in an abusive relationship was traumatic and had a negative impact on both their physical and psychological well-being. The importance of maintaining a sense of masculinity consistently underpinned the men’s narratives. Some participants described feeling shame and embarrassment for not having met dominant cultural expectations surrounding the roles of men in heterosexual relationships. Frequently the participants reported that a fear of being judged or not being believed was a significant barrier to seeking help. The lack of recognition and understanding of male IPV within society was of concern to most of the men. Some participants outlined a desire to use their own experiences in order to help other men in abusive relationships. These findings offer important implications for understanding IPV against men and developing enhanced sources of support.

Keywords: domestic abuse; domestic violence; male victimisation; abused men; female-perpetrators; counselling; help-seeking.

Female-perpetuated IPV against men – a controversial issue

Gender differences within IPV perpetration rates have been the subject of lengthy, animated debates, underpinned by research discrepancies surrounding the use and consequences of IPV within heterosexual relationships (Dobash & Dobash, 2004; Hester, 2013). One of the most emotive and controversial issues since empirical research into IPV began has been the subject of female-perpetrated abuse of men (Hines, Brown, & Dunning, 2007). This controversy is due in part to conventional theories which espouse IPV to be the result of patriarchal society (Johnson, 1995), and the use of violence to maintain men’s dominance over women within relationships (Hines & Douglas, 2010b). Discrepancies in findings of IPV prevalence have fuelled debate as to whether female-perpetrated abuse against men actually exists, with conflicting findings appearing to reflect
the methodology employed, influenced largely by the sampling method and instruments used to obtain data (Archer, 2000, 2002; Kimmel, 2002). Contradictory findings have resulted in polarised outcomes, with some research revealing limited gender differences in the perpetration of IPV, whilst other research findings have identified that men are overwhelmingly the perpetrators of IPV against their female partners (e.g., Dobash & Dobash, 2004).

**Physical aggression against male victims**

Because men are on average physically larger and stronger than their female partner, some assume that they are able to restrain their spouse and leave an abusive situation without themselves being physically restrained (Hines & Douglas, 2010a). Consequently, violence perpetrated by women against their male partners may be considered to be less serious, trivialised or even considered humorous (Pagelow & Pagelow, 1984; Saunders, 2002). Further assumptions that men are capable of defending themselves fuel societal beliefs that ‘real men’ cannot be victims (Yarrow & Churchill, 2009).

Evidence indicates that some women use physical objects such as knives, chairs and crockery in attacks against male partners (Drijber, Reijnders, & Ceelen, 2013; Straus & Gelles, 1986). Further findings support the idea that female-perpetrators can use very severe physical aggression including hitting, kicking, punching, stabbing, biting, choking, stalking, scratching and pelting (e.g., Drijber et al., 2013; Hines et al., 2007; Hines & Saudino, 2003). Such attacks against male victims have resulted in serious and high rates of IPV including physical, psychological, and sexual abuse (Dutton, 2007; George, 1994; Hines & Douglas, 2010a; Hines & Douglas, 2010b; McNeely, Cook, & Torres, 2001; Williams, Ghandour, & Kub, 2008), with some men reporting that they lived in fear of their female partner’s violent behaviour (Hines et al., 2007).

**Psychological aggression against male victims**

Following a review of empirical studies on female-perpetrated violence within heterosexual relationships, Williams et al. (2008) identified that emotional abuse was the most common form of IPV perpetrated by women. Common forms of psychological aggression used by female-perpetrators against their male partners include wrongly labelling the victim as the perpetrator, falsely obtaining restraining orders, threatening to harm or take away their
children, threatening suicide or homicide, blackmailing, and causing financial harm (Drijber et al., 2013; Hines et al., 2007; Hines & Saudino, 2003).

Uncertainty prevails surrounding the psychological consequences for male IPV victims (Drijber et al., 2013). A US based, quantitative study by Hines and Douglas (2010b) which investigated the association between posttraumatic stress disorder (PTSD) and IPV victimisation among a clinical sample of men who reported being abused by their female partners, provides initial evidence that PTSD is a major concern among men who sustain IPV and seek help. This study was the first of its kind to provide information on the mental health of men who experience IPV. However, the psychological consequences of male victimisation remains under-researched to be adequately able to make assertions about the psychological consequences of IPV for male victims (Hines & Saudino, 2003). Whilst there is evidence that IPV is associated with poor mental health outcomes for both male and female victims (Afifi et al., 2009), further research exploring the psychological consequences of male victimisation is warranted (Drijber et al., 2013; Hines & Saudino, 2003).

**Barriers to leaving an abusive relationship**

Whilst extensive research has investigated the reasons why some woman stay in abusive relationships (Chang et al., 2006; Hendy, Eggen, Gustitus, McLeod, & Ng, 2003; Lerner & Kennedy, 2000), there is limited understanding as to why some abused men stay with their partners (Hines & Malley-Morrison, 2001). Anecdotal accounts demonstrate that men experience conventional barriers to leaving a violent relationship including embarrassment, limited financial resources, a commitment to the relationship and concerns for the safety and welfare of their children (e.g., Cook, 2009; Flynn, 1990; Pagelow & Pagelow, 1984). However, further research exploring the reasons why abused men stay with their partners is warranted (Hines & Malley-Morrison, 2001).

**Help-seeking behaviour as a consequence of IPV victimisation**

Extensive research has focused on barriers surrounding female victims’ reporting of IPV and help-seeking behaviour (e.g., Gondolf, 1998; Hutchison & Hirschel, 1998; Kaukinen, Meyer, & Akers, 2013; West, Kantor, & Jasinski, 1998). However, limited research has focused on men’s experiences of help-seeking as a result of female-perpetrated IPV (McCart, Smith, & Sawyer, 2010). The narrative that has emerged from the literature on this topic to date reflects a picture of complexity, underpinned by internal and external barriers including
shame, embarrassment and a lack of awareness of support services (Douglas & Hines, 2011; Tsui, Cheung, & Leung, 2010). These findings indicate that underreporting of IPV victimisation may be prevalent across both genders (Walby & Allen, 2004).

**IPV victimisation, masculinity, social norms and stereotypes**

The difficulty in integrating a social narrative of hegemonic masculinity, defined by Connell (1995) as a set of practices that maintain men’s dominant position within society, with the paradoxical experience of being a victim is a persistent theme running through the literature on male victimisation (see also Lisak, 1994; Rentoul & Appleboom, 1997; Stanko & Hobdell, 1993; Yarrow & Churchill, 2009). Acknowledgement of the many associated emotional consequences of IPV victimisation, including vulnerability, helplessness, sadness, depression, humiliation, fear, and shame (Follingstad, Wright, Lloyd, & Sebastian, 1991; Hines & Malley-Morrison, 2001) do not conform with ideals of hegemonic masculinity (Durfee, 2011). Rather, only subsequent feelings of anger fit with the traditional masculine ideology (Lisak, 1994). Hollander (2001) emphasised the pervasiveness of gender within the performance of victimisation, highlighting the commonly associated traits of victimisation as consistent with cultural and societal narratives of femininity. Hence many male victims struggle to acknowledge ‘feminine’ feelings, leading to reduced self-esteem and self-worth (Lisak, 1994).

**The current study**

Pioneering studies offer preliminary understanding of the experiences of male victims of female-perpetrated IPV; however, male victimisation remains a subject of ambiguity, in need of further research (Randle & Graham, 2011; World Health Organization, 2013). In particular, we know little about the experiences of male victims within the UK (Dempsey, 2013), therefore, the aim of this study was to explore the men’s experiences of female-perpetrated IPV, including their accounts of the nature and severity of the abuse they have experienced.

Authors of existing literature advocate the need for further research on male victimisation which increases awareness and understanding of the experiences of male victims of female-perpetrated IPV (Hines et al., 2007; Migliaccio, 2002; Randle & Graham, 2011). In particular, research which explores abused men’s support networks (Tsui et al., 2010), including experiences and perceptions of help-seeking as a result of victimisation (Hines & Douglas,
2010a; Hines & Douglas, 2010b; Tsui et al., 2010), and the impact of masculine ideologies (Randle & Graham, 2011) is warranted. Such studies may increase understanding of male victims’ experiences and needs. Furthermore, research which explores men’s reasons for remaining in the abusive relationship is required, to order to increase the validity of current research findings (Hines & Malley-Morrison, 2001). Exploration of male victims’ experiences of emotional abuse (Douglas & Hines, 2011; Hines & Malley-Morrison, 2001) is also recommended, as the psychosocial consequences of male victimisation remains under researched (Hines & Malley-Morrison, 2001).

**Methodology**

**Aims**
The aims of this study were to explore: (a) men’s experiences of female-perpetrated IPV, including their experiences of physical and psychological/emotional abuse; (b) men’s help-seeking experiences and/or their perceptions of utilising support services/support networks; and (c) barriers to men leaving their abusive relationship.

**Participants and recruitment**
Participation in this study was invited from men over the age of 18 who self-identified as a victim of female-perpetrated IPV. For the purpose of this study, the definition of intimate partner violence, controlling and coercive behaviour was the definition used by the Home Office (2013).

A purposive sampling strategy was used in order to generate in-depth understanding of the research topic (Braun & Clarke, 2013). The research was advertised at domestic abuse services, mental health support services and drug and alcohol support services throughout the UK. Snowballing was used whereby the researcher asked participants if they knew of any other men who might like to take part in the study.

The final sample consisted of 23 men: the participants were largely White British (16). Most of the men (12) identified as working class, and the majority (17) had at least one child with their abusive partner. The time period since leaving the relationship and taking part in the interview ranged from 11 months to 18 years (mean length: 4 years 9 months). Eleven participants were in a relationship at the time of taking part in the interview, four of whom were in an abusive relationship. See table 1 below for further details of the sample.

**Insert table 1 Characteristics of the sample here**
Interview method

Participants were given the choice as to what type of interview they would like to participate in: face-to-face, Skype or telephone. Sturges and Hanrahan (2004) identified that participants value the autonomy of choosing the type of interview they would like to participate in. Furthermore, this flexibility may have enhanced the safety of the participants by offering participants autonomy in choosing the interview location and format. This was particularly important given that some of the men were still in an abusive relationship at the time of conducting the interview, and living with their abusive partner (Ellsberg & Heise, 2002).

Semi-structured interviews offered participants the opportunity to express any issues they deem important, allowing for unexpected issues to be raised, whilst ensuring all of the main areas the researchers wished to explore were addressed (Braun & Clarke, 2013). The aim of the interviews was to offer a forum for open dialogue between the researcher and participants, allowing the researcher to gain descriptive data on the participants’ experiences (Rubin & Rubin, 1995).

Data analysis

Thematic analysis was used to analyse the data following the six-phase process set out by Braun and Clarke (2006). An experiential approach to analysis was employed which aimed to ‘give voice’ to the men’s experiences of IPV. Themes were developed using a ‘bottom-up’ approach, which served to be informed by what was in the data (data-driven). Theme names were chosen which captured the essence of each theme. In some instances direct quotations from the participants were used in the theme names, thus staying close to what the participants had said (Braun & Clarke, 2013).

Results

The analytic process generated one overarching themes (see thematic map 1.1 below). “‘I’d walked into a rose bush”: The men’s experiences of abuse,’ captures the way in which the participants made sense of their experiences of being in an abusive relationship. Each theme (and subtheme) is illustrated with relevant data extracts, see Table 2 for a summary. The data has been edited to remove hesitation and irrelevant material.

Insert thematic map 1.1 here

Overarching theme 1. “‘I’d walked into a rose bush”: The men’s experiences of abuse
This overarching theme captures the way in which the participants described their experiences of being in an abusive relationship as a traumatic life event, which had a negative impact on both their physical and psychological well-being. The men described how their partners employed controlling, coercive and threatening behaviour through a range of different methods including physical, psychological, emotional and sexual abuse. They reported subtle changes in the format of the abuse over a period of time, that resulted in an escalation of violence and control, which they struggled to escape from. Many of them described employing a range of coping strategies to help them manage their experiences, before making a decision to leave the relationship. Almost all of the participants described reflecting on their experiences in an attempt to make sense of what happened. I now discuss in turn each of the nine themes that constitute this overarching theme.

**Theme 1 Nature of the abuse - “Being abused, verbally and physically”**

This theme provides clear evidence that female-perpetuated IPV against men does exist (Hines et al., 2007). Many participants reported that their female partner inflicted a range of violent acts including direct physical and verbal abuse, as well as covert aggressive behaviours: “I being abused, verbally and physically” (Frank).

Participants reported experiencing physical violence from their female partners, included being choked, punched, bitten, scratched and kicked, for example: “It could be walking home in which case she would just start swinging punches and kicks [...] because we’re sat down, her climbing onto me and choking me” (Aaron). The men’s accounts highlight the use of severe physical aggression by their female partner (Drijber et al., 2013; Hines et al., 2007; Hines & Saudino, 2003).

In terms of where on the body physical violence was inflicted, supporting existing research (Hines, 2007), the men often spoke about attacks being targeted at their genitals, for example: “Hair dye I had splashed on my genitals” (James).

Commonly, participants described the nature of the emotional and psychological abuse they experienced as a constant ‘whittling away’ at them: “Constant put-downs, constant questioning of everything that I did and why I did it” (David). Common forms of psychological aggression included humiliating and belittling the men’s masculinity, implying that they were less of a man: “She was saying ‘Well you ain’t a man’” (David). In some instances, participants were criticised by their partner for not having met heterosexual masculine expectations of the domination of men and the subordination of woman
(Connell, 1995). For example: “She used to say I gave her kind of too much lead way, if that makes sense […] I weren’t strong enough with her” (Jason). This findings may relate to those of Salam, Alim, and Noguchi (2006) who identified that women were victimised by their male partner for failing to meet the stereotypical gender role of a ‘good wife’, including failing to fulfilling household duties and show obedience to their husband (Feldman & Ridley, 1995). Consequently, failure to adhere to dominant norms for gender may be a contributing factor to IPV victimisation for both men and women.

The participants reported that their partners employed a range of other controlling behaviours including isolating them from others, sabotaging their employment and stalking. Participants reported that their partners kept them away from family and friends (Allen-Collinson, 2009a; Graham-Kevan & Archer, 2003; Hines et al., 2007; Hines & Douglas, 2010b): “She worked for a long time in trying to keep me away from my family” (Glenn).

Occasionally participants reported that their partner stalked them after leaving the relationship (Drijber et al., 2013; Hines et al., 2007): “She was stalking me down our Mum’s” (Jay). Consequently, some men described living in fear of their partner (Hines et al., 2007). This finding parallels evidence that women often experience continued abuse after leaving a relationship, with stalking a frequently cited form of continued IPV (Davies, Ford-Gilboe, & Hammerton, 2009; Logan, Shannon, & Cole, 2007; Norris, Huss, & Palarea, 2011). The difficulties women commonly experience in freeing themselves from an abusive partner have been associated with power imbalances that privilege men over women (Davies et al., 2009). These men’s narratives may highlight the need to consider the social circumstances that enable IPV to continue (Davies et al., 2009) regardless of the victim’s gender.

In the main then, echoing the findings of Drijber et al. (2013), Hines et al. (2007) and Hines and Saudino (2003), this theme highlights similarities between the men’s experiences of IPV and those frequently reported by female victims, and also between the current findings and those reported in existing research on male victims.

**Subtheme 1.1 Hunter and the hunted - “It was like living on the edge of a volcano”**

This subtheme captures participants’ descriptions of subtle changes in the format and method of abuse they experienced, from one off events, to something more routine, and the escalation from predominately verbal to physical abuse.
The length of participants’ abusive relationships ranged from 6 weeks to 31 years. Over this time, the majority of participants described the nature of the abuse they experienced as progressing from verbal to physical abuse: “From the beginning it was verbal, then it was throwing things, then it was hitting me, over a period of like 1, 2, 3 years” (Sean). This finding is congruent with evidence that frequency and severity of IPV increases over time in IPV against women (Rhodes & McKenzie, 1999).

Similar to the findings of O’Campo, McDonnell, Gielen, Burke, and Chen (2002) who identified that female victims could predict episodes of abuse, participants frequently reported that they learnt to recognise triggers for their partners’ abusive behaviour. Triggers that the men frequently reported included their partner not getting her own way, jealousy, substance misuse and moodiness. These triggers resemble those cited by some female victims of IPV (O’Campo et al., 2002).

Many participants commented that they recognised that the abuse ‘got progressively worse’ (Frank) over the period of their relationship, but they were still unable to leave. This finding may imply a strong emotional attachment to the relationship (Keeling & Fisher, 2012). However, some participants reported that the escalation of the abuse was so subtle that they were unable to identify the incremental changes that took place until after they had left the relationship: “I kind of don’t remember how it slid into routine from that, but that’s kind of where it moved to next really” (Aaron).

This subtheme provides insight into the men’s experiences of living with IPV, which often resulted in a cycle of abuse similar to that frequently reported by female victims (e.g. deYoung & Lowry, 1992; Keeling & Fisher, 2012; Rhodes & McKenzie, 1999; Schumann & Valente, 2002).

**Theme 2 Impact of abuse – What she left behind**

This theme captures participants’ description of the physical and psychological impact of the abuse. Some of the men described suffering from physical health difficulties as a result of the injuries inflicted on them by their female partner. The majority of participants reported that their experiences had a lasting psychological impact on them, including negatively influencing their perceptions of women, as well as their perceptions of relationships in general.
IPV has been associated with severe and chronic health consequences in female victims, including life-threatening injuries, disfigurement and disability (Black, 2011; Campbell, 2002). For some men, violent attacks resulted in significant injuries that were severe enough to warrant medical attention. One participant described the near fatal consequences of his injuries following a knife attack: “I was in a coma I suppose, for about six month” (Brian). Occasionally participants reported that their experiences of physical abuse had resulted in disfigurement, which had impacted negatively on their self-esteem: “I used to hate looking at my arms cos of all the scars where she’d slashed me with a knife” (Jason). These findings highlights the serious physical health consequences for some participants, challenging the notion that male victimisation is not a serious problem deserving of attention (Pagelow & Pagelow, 1984).

Almost all of the men reported that their psychological well-being had been negatively impacted by their experiences of victimisation. The time period since leaving the relationship and taking part in the interview ranged from 11 months to 18 years (mean length – 4 years and 9 months). Thus, mirroring the findings of Barnes (2013), the time period since leaving the relationship appears to be unrelated to recovery, with almost all participants citing ongoing psychological difficulties. Some participants reported that their partner often claimed that acts of violence were accidental, which resulted in the men feeling confused and struggling to validate their experiences, as illustrated in the extract below:

As she was walking past and whatnot she would have a kick or deliberately knock me when I’ve got a drink in my hand or something. Errm, she would say it was an accident, she was a little bit clumsy, she had slip or had you know, which kind of always seemed like well yeah people do that do you know what I mean? (David).

Commonly, participants reported feeling depressed as a result of their experiences: “Work started to suffer, I started to feel depressed” (Frank). For a number of participants this resulted in suicidal thoughts: “There has been a time where I’ve felt, one of my lowest points where, erm, I wanted to call it a day” (Stuart). Some men described having taken steps towards acting on their suicidal thoughts: “I did have a pill stockpile that I used to sit and look at occasionally erm, and er, oh and yeah a couple of times I’d started making, you know, DVDs for my children, you know” (Neil).
A number of participants described having been diagnosed with mental health problems including post-traumatic stress disorder (PTSD), following their experiences of being in an abusive relationship (Denise A. Hines & Douglas, 2010): “They diagnosed me with post-traumatic stress disorder like and give me some tablets for that, and it’s, it’s copeable, you know what I mean, I don’t er, don’t have these nightmares any more” (Brian).

The above accounts demonstrate the severe psychological impact IPV had on the men. The men’s accounts support existing findings that men experience significant psychological symptoms including post-traumatic stress disorder, depression and suicidal ideation as a consequence of IPV victimisation (Coker et al., 2002; Randle & Graham, 2011). This theme demonstrates some commonality between the negative physical and psychological health consequences of IPV for both men and women, including chronic illness and long-term psychological health concerns (Black, 2011; Campbell, 2002).

**Theme 3 Barriers to leaving the relationship**

This theme captures the factors that influenced the men’s decision to remain in their abusive relationship, including a commitment to the relationship, limited financial resources and concerns for the safety and welfare of their children (Cook, 2009; Flynn, 1990; Pagelow & Pagelow, 1984).

Mirroring the reasons many gay and bisexual victims report for remaining in an abusive relationship (McClennen, Vaughan, & Summers, 2002; Merrill & Wolfe, 2000), a number of the men described a desire to help their partner: “I stopped there because I thought I could help her, and I seen she had problems” (Jason). Jason’s narrative reflects the findings of Rhodes and McKenzie (1999) that women often stay in abusive relationships on account of their perceived ability to change their partners’ behaviour. The majority of participants reported that a commitment to their partner and the relationship was a significant barrier to leaving: “I made a promise, I said ‘For better for worse’” (Simon). Often participants described their love for their partner outweighing the negative experiences of the abuse, for example: “I felt trapped. I was, I just had so many feelings for her that, I was trapped into tolerating it because of how much I wanted to be with her” (Steven).

Commonly the men reported that they remained in the relationship for the sake of their children. Some participants reported fearing that if they left, the abuse would be targeted at their children instead of them: “Part of my coping strategy was to tell myself ‘Well I’m sort
of protecting the kids”’” (Simon). This finding supports existing evidence that men often remain in abusive relationships because of a desire to protect their children (Cook, 2009; Hines & Douglas, 2010a). Fear of losing contact with their children was a fundamental reason why the men chose to stay: “In 2009 I researched divorce, and when I realised that I could lose my daughter I stayed” (John). These findings support evidence that many men fear losing custody of their children after leaving an abusive relationship (Cook, 2009; Migliaccio, 2002). With evidence that women are more likely to gain custody of children following divorce (Cancian & Meyer, 1998), and ten of the men reporting that they lost access to their children after leaving the relationship, it appears these fears were not misplaced.

Overall, similar to the experiences of many abused women and gay men, the participants outlined a complex range of reasons that influenced their decision to remain in an abusive relationship. These findings support evidence that heterosexual men experience similar barriers to leaving a violent relationship as those reported by gay men, heterosexual and lesbian women, including love of their partner, fear of being alone and a hope that things would change (Keeling & Fisher, 2012; McClennen et al., 2002; Rhodes & McKenzie, 1999). These findings offer support to Merrill and Wolfe’s (2000) assertion that barriers to leaving an abusive partner may be universal, irrespective of the victims’ gender or sexual orientation.

**Theme 4 Coping strategies for dealing with the abuse**

This theme captures the strategies and techniques that the men employed in order to help themselves cope with their experiences of IPV. Consistent with current accounts of female victims, the men described employing a range of strategies over the course of their relationship in order to help themselves cope with the abuse (Hydén, Linköpings, Institutionen för, Tema, & Filosofiska, 1999; Rhodes & McKenzie, 1999; Sabina & Tindale, 2008). Mirroring the experiences of some abused women, almost all of the participants reported that they endeavoured to survive on a day-to-day basis by attempting to avoid an incident of abuse (Haeseler, 2013).

Frequently the men reported misusing alcohol and drugs to help themselves cope with the psychological consequences of their IPV victimisation (McClenen et al., 2002). For example: “I started to smoke cannabis, that helped me to forget stuff” (Sean). This
finding parallels extensive research documenting an association between sustaining IPV and alcohol/drug abuse (Haeseler, 2013; Hines & Douglas, 2010a; Sabina & Tindale, 2008). Participants reported that the amount of alcohol they consumed increased as the frequency and severity of the abuse increased. One participant described becoming dependant on alcohol: “I was trying to drink away the problems [...] which did affect me health badly, you know, come reliant on alcohol” (Brian).

Overall, these findings help to enhance understanding of the men’s coping strategies for dealing with IPV. These findings enhance understanding of this under researched topic (Barnes, 2013).

**Theme 5 Leaving the relationship: “I just decided to walk out”**

This theme highlights factors that were influential in the men’s decision to leave their abusive relationship. Mirroring the process reported by some gay men, the participants’ decision to leave their relationship was closely associated with recognition of their partners’ behaviour as abusive, and the need to end rather than manage their relationship (Oliffe et al., 2014). Leaving for the sake of their children was a common narrative within the men’s accounts. A discourse that is often missing from gay men’s narratives (Oliffe et al., 2014), but frequently cited by female victims (Messing, Mohr, & Durfee, 2015; Meyer, 2011). A desire to protect their children underpinned the relationship between the men’s reasons for staying in the relationship for the sake of their children, as well as leaving.

Typically, participants reported that recognising their relationship as abusive was the first step to leaving. Being able to identify patterns of abusive behaviour was influential in recognising IPV: “I started to identify cycles, I started to identify conditions when it would happen, and then started looking back over the relationship and how it had begun” (Glenn). This finding reflects those of Oliffe et al. (2014) who reported that gay men cited awareness of patterns of IPV as paramount to them identifying abuse and leaving the relationship.

Realising that their relationship was toxic and things were not going to change was described as an epiphany moment by some participants: “I started to identify cycles, I started to identify conditions when it would happen, and then started looking back over the relationship and how it had begun” (Glenn).

Overall, these findings demonstrate factors that were influential in the men’s decision to leave their relationship. Recognition of IPV and a desire to protect their children
were significant factors in the men’s decision to leave the relationship (Hines & Douglas, 2010a; Messing et al., 2015).

**Theme 6 Reasons for the abuse: Why it happened**

Almost all of the participants reported that they had tried to make sense of their experiences by attempting to understand why their partner was abusive. This theme captures participants’ attempts at understanding why the abuse happened. Reasons discussed included factors related to why the men believed that they ended up in an abusive relationship and why they believe that their partner was abusive. Similar to earlier findings (e.g., Allen-Collinson, 2009b; Hendy et al., 2003) that self-blame prevents victims from leaving an abusive relationship, many of the participants reported that they believed that they had “done something to deserve it” (David). This belief prevented them from recognizing their relationship as abusive: “Well I didn’t know it was abuse, that’s the strange thing, I just thought that I was doing something wrong” (John).

A number of participants described feeling a sense of shame for allowing the abuse to continue, and therefore perceived their inaction as deserving of abuse: “First time it happened [I] should have walked out, but I didn’t. And when you give someone the green card to abuse you then you deserve everything that comes to you, and I gave her the green card” (Stuart). Stuart’s account demonstrates a sense of acceptance of the abuse he experienced. This finding supports evidence that acceptance of IPV is higher amongst women who have experienced IPV, indicating a possible learnt acceptance of violence (World Health Organization, 2005).

Participants’ attempts to ‘make sense of their experiences’ and search for ‘answers,’ may reflect their motivation to reappraise the meaning of the abuse they experienced (Joseph & Linley, 2005). The narratives capture the complexity of IPV victimisation, and the men’s difficulties in constructing a narrative of their experience (Berns & Schweingruber, 2007). Whilst the majority of participants offered potential explanations for their partners’ behaviour, some expressed uncertainty as to why they were victims of IPV. Occasionally participants reported that they were unable to make sense of their partners’ behaviour: “The only thing I want to do is understand why she did it” (Martin). Some participants reported that searching for answers to explain what happened to them was an important part of their ‘recovery’: “I’m still struggling for a
reason, that’s still a driving point on me” (Lewis). This search for meaning may reflect the men’s unresolved cognitive processing following the adversity of being in an abusive relationship (Linley & Joseph, 2011). However, for some of the men, their search for meaning was a source of further distress and greater negative change (Linley & Joseph, 2011):

I’ve thought a lot about it and you’re mentally, why are you disturbing yourself with it, well there’s some sort of comfort and I can understand it, but I have to make sense of it [...] I have researched a great deal of this and I read about it all the time. It’s taken over my life. It is my life. That’s all I do every day, right. It’s frightening (Lewis).

In some instances, participants reported that they had resigned themselves to the fact that they were unlikely to get the answers they wanted:

No matter what answers I want, I’m never going to get them off my ex-wife.
Even if we sat in the same room together, you know, I’m never going to get them, because she probably doesn’t know why she did it (Andrew).

Similar to the reported experiences of women in heterosexual and same-sex relationships, the process of coming to terms with IPV victimisation appears to be multifaceted, involving a process of ‘letting go’ of past experiences and hopes for the future (Barnes, 2013).

Overall, this theme highlights the men’s attempts to understand and explain their experiences of IPV victimisation, adding to the limited literature currently available on this topic (Randle & Graham, 2011). Participants’ attempts to ‘make sense of their experiences’ and search for ‘answers,’ may reflect their motivation to reappraise the meaning of the abuse they experienced (Joseph & Linley, 2005). The narratives capture the complexity of IPV victimisation (Heise, 1998), and the men’s difficulties in constructing a narrative of their experience (Berns & Schweingruber, 2007).

**Theme 7 Masculine expectations: Grown men don’t cry**

This theme captures the ways in which the men’s accounts were underpinned by assumptions about the importance of maintaining a sense of masculinity and adhering to stereotypical masculine stereotypes. Many of the participants struggled to accept the role of victim, which was perceived by some of the men as de-masculinising (Corbally, 2015):
“Definitely made me feel less of a man, to being beat up by a woman” (David).

Participants’ accounts often reflected stereotypical gender assumptions surrounding the roles and expectations of men (Connell, 1987, 1995), and consequential feelings of shame and embarrassment for not having met these expectations.

Most of the men felt shame because they had not been able to ‘manage’ their partners’ behaviour. Frequently, the men were self-critical of their inability to maintain ‘authority’ within their relationship: “I think it’s the shame of it and feeling weak, how could I make....how can....how can I make a woman overpower me and do that and control my mind” (Jay). The men’s shame was often related to social perceptions of men, and a desire to adhere to hegemonic masculinity, which promotes power, authority and competence (Connell, 1987, 1995).

The stigma of being a male victim negatively influenced the men’s reporting of IPV (Migliaccio, 2002; Randle & Graham, 2011). The men conveyed feelings of shame associated with a sense of failure to maintain masculine appropriate norms, which had a significant impact on their self-acceptance (Dunn, 2012; Zverina, Stam, & Babins-Wagner, 2011). For example: “It took me, until probably 4 years ago before I started thinking of myself as a proper man again” (Andrew). Participants often described concealing their physical injuries in order to stop other people from finding out about their victimisation, avoid shame and maintain masculine stoicism (Allen-Collinson, 2009b; George, 2002; Oliffe et al., 2014): “I told people I’d walked into a rose bush to explain these two marks on my face” (Simon).

Overall, this theme highlights the significance of masculinity and stereotypical gender norms surrounding relationships and the use of violence, which added an additional layer of pain to men’s experiences.

**Subtheme 7.1 Perceptions of violence shaped by masculine norms**

This subtheme captures the participants’ sense of confusion in knowing how to cope with IPV. Many of the men normalised violence between men as masculine appropriate behaviour (Haywood & Mac an Ghaill, 2003), but reported that they had moral objections which stopped them from using physical force against women (Cook, 2009; Migliaccio, 2002), thus upholding salient gender norms around violence (Sundaram, 2013). Messages about the ‘appropriate’ use of violence were typically understood to stem from childhood, for example:
I was brought up by my dad in the sixties that you need to fight blar blar blar, got to defend yourself, don’t hit a woman, err but you’ve got to defend yourself and then you’re in a contradiction (Jason).

The men reported feeling confused on account that their partners’ use of violence did not conform to stereotypical gendered beliefs surrounding the use of violence (Haywood & Mac an Ghaill, 2003):

As a man at the time I was....er....on the one hand I would....I would excuse myself because if it was a man in front of me it’d be a different thing, I’d fight back. But I felt....I felt helpless really because....I could deal with a man but I couldn’t deal with a woman so....it was confusing for me. I didn’t quite understand why I let this thing like this happen (Jay).

Many of the men expressed a sense of pride at not having retaliated, underpinned by a belief that hitting a woman is bad masculine behaviour (Allen-Collinson, 2009b; Graham-Kevan, 2007; Migliaccio, 2002; Salter, 2015): “Once that man’s hit back, I think all masculinity is lost” (Frank). Some of the men believed that their reluctance to retaliate was significant in their victimisation: “I’ve always thought to myself I would never strike a woman, that’s probably why I was such a victim because I would not defend myself” (Steven). Some of the men reported that their partner would use the men’s inaction as a means of maintaining control, for example:

She’ll stand in front of me and she knows that I won’t push her out of the way because then it’ll look bad on me if I do push her out of the way and like she falls against something, so I feel trapped, I feel powerless it doesn’t feel good at all (Shane).

Overall, this subtheme highlights the significance of masculinity and stereotypical gender norms surrounding relationships and the use of violence, which added an additional layer of pain to men’s experiences. The men’s accounts reflect a sense of pressure to ‘perform’ masculinity, adhering to social expectations in order to avoid losing face and project a desirable self-image (Goffman, 1955).

Theme 8 Experiences of help-seeking - “There’s a part of me that would welcome some understanding”
This theme captures the men’s experiences of seeking help for their IPV victimisation, including the barriers that prevented the men from seeking help, as well as their experiences with professional services and support networks. Feelings of fear and shame defined the men’s experiences of help-seeking, and their willingness to seek help was influenced by perceptions of who they could trust, and a desire for their experiences to be validated.

Some participants described a lack of faith in support services being able to help them, (Hines & Douglas, 2010a) on account that services are not set up to help male victims:

I’ve never tried, errm ((sigh)) be like a lack of faith that it would help anyway really, you know like so that’s why, I’m not saying it wouldn’t because I haven’t got the experience to like be able to evaluate it but I wouldn’t expect it to, I wouldn’t expect to get much support (Shane).

The men often described feeling fearful that their experiences would not be believed if they were to seek help. This resulted in the men remaining in their relationship: “It was that fear of yeah, not being believed, you know that kept me there longer than was good for me really” (Simon). Frequently the men made reference to the physical size difference between themselves and their partner which underpinned this fear: “They won’t believe me you know, I mean I’m taller than my wife, you know I’m a big built fella you know, if I call up and say this is not, you know they just wouldn’t believe that” (Simon). Physical size and strength are closely aligned with masculine identity, and are commonly cited as factors which challenge men’s narrative of victimisation (Corbally, 2015; Migliaccio, 2001).

Findings from this theme support evidence that many women do not access professional help despite increased availability of formal support services for victims (Henning & Klesges, 2002; O’Campo et al., 2002). A problem further compounded by the recent dismantling of IPV services due to austerity measures (Gadd, 2012). I now discuss the two subthemes that constituted this theme.

**Subtheme 8.1 Barriers to seeking help – “It’s the shame of it”**

This subtheme captures the barriers that prevented the men from seeking help. Many of the men feared that they would be ridiculed and humiliated if they did seek help (Drijber et al., 2013) on account that help-seeking violated traditional masculine assumptions.
Adherence to heterosexual masculine norms that endorse independence often restricted the men from accessing sources of support (Oliffe et al., 2014). Brian described maintaining a sense of ‘pride’ by not seeking help: “Pride isn’t it, male pride I suppose, don’t want to admit you, I don’t know ((pause)) I suppose it’s a weakness isn’t it, you think you’re weak because you let your wife beat you up.”

The men’s reluctance to accept a ‘victim status’ was often associated with a fear of being perceived as less masculine (Migliaccio, 2001, 2002), for example:

That victim thing that I’ve been trying to avoid with you or push against from whenever it’s got raised, it would be like as if that was a label that was going to get attached to me instead, and I don’t want that, I don’t want that thanks, I don’t want to be seen as a victim, I don’t want to be treated like a victim, and I’m not (Shane).

This finding may be linked to evidence which suggests that victims of both genders often discount the seriousness of their victimisation, in order to avoid a victim identity (Taylor, Wood, & Lichtman, 1983). This inevitably leads to continued exposure to IPV.

This subtheme highlights the stigma and shame the men felt at being a male victim of IPV, which negatively influenced the men’s help-seeking (Migliaccio, 2002; Randle & Graham, 2011). The men conveyed feelings of shame associated with a sense of failure to maintain masculine appropriate norms, which had a significant impact on their sense of masculinity (Dunn, 2012; Zverina et al., 2011) and willingness to seek help (Migliaccio, 2002; Randle & Graham, 2011).

**Subtheme 8.2 Positive and negative help-seeking experiences**

The men’s accounts demonstrated both positive and negative help-seeking experiences. Negative help-seeking experiences included being treated with suspicion and disbelief. The men frequently described the response of other people as unreceptive and judgmental. Positive help-seeking experiences facilitated the men in recognising their relationship as abusive, which for some of the men was influential in their decision to leave. Frequently the men stressed the value of experiencing understanding, and the need for practical guidance and support.

The men’s fear of being judged negatively by others was often not unfounded, reflecting the findings of research with gay victims (Burke & Owen, 2006) and female victims (Bostock,
Plumpton, & Pratt, 2009). Describing the response of his friends following disclosure of IPV, John outlined: “The people I did tell sort of laughed and said ‘That’s women for you.’” Frequently the men reported that their friends and family did not recognise their experiences as domestic abuse: “None of my friends who I told about it really took it as domestic abuse or took it that seriously, they just saw John ((laughs)) complaining about his wife” (John). Some participants described the reaction of their male friend as particularly hostile and unhelpful: “The reaction you get off your friends, ha ha ha you woos...you’re a woos, you’ve got no bones in you, it’s only the same reaction you get off your wife” (Frank). These accounts may reflect the prevalence of gendered scripts surrounding IPV victimisation, and the association of victimisation with femininity (Hollander, 2001)

Of the twenty-three participants who took part in this study, eight had received counselling for their experiences of IPV. Similar to the reported findings of Henning and Klesges (2002) that abused women often do not use counselling services, the men’s perceptions of counselling were unhelpful to their meaningful engagement with therapy. Five of the men who had counselling for their experiences of IPV described the support they received as helpful, whilst three described it as unhelpful, and in some instances detrimental to their psychological well-being. Reflecting on his experience of accessing counselling, Neil reported that the process of psychologically experiencing and relating within therapy was unhelpful:

I went once a week for 6 weeks, and it was horrible, I absolutely hated it [...] it was ‘Well how do you feel?’ ‘Well it was fucking obvious how I feel, you could tell how I feel, you know. ((laughs)) I’m, I’m, you know I’m sitting there choking back the tears and obviously I’m fucking, you know, it’s not the question. And it wasn’t helpful at all.

Neil’s narrative indicates the difficulty he experienced in talking about his feelings, an endeavour that may present a significant challenge to hegemonic masculinity (Gillon, 2008).

The majority of participants who had undertaken personal therapy for their experiences of IPV reported that this was beneficial. In particular, being believed was of significant value to the men: “Having one other person who believes you is significant, is important, and is a source of great strength” (James). The men frequently described counselling as helpful on account that the therapist was non-
judgmental: “She offered no judgement at all, which is one of the things that makes it very easy to talk to a counsellor” (Aaron). This appeared to be of particular value given that many of the men were self-critical of their experiences of IPV victimisation. Thus, facilitating unconditional positive self-regard appears to have been of significant value in the men’s recovery from their trauma (Flanagan, Patterson, Hume, & Joseph, 2015). Overall, this subtheme highlights the men’s experiences of seeking and receiving help for their IPV victimisation. The findings demonstrate the unique challenges faced by some male victims. The men reported being re-victimised by a system that is set up to help female victims (Hines et al., 2007). These findings suggest the need for enhanced recognition male IPV victimisation within medical governmental, legal, and judicial organisations (Alhabib, Nur, & Jones, 2010; Barber, 2008; Wall, 2011).

**Theme 9 There is a need for change - “I am keen to spread the word”**

This final theme captures the men’s perceptions of changes that need to be made in order to enhance recognition and understanding of male IPV. The men’s willingness to take part in this research was frequently underpinned by a desire to bring about change. The men’s narratives often centred on a desire to use their own experiences to help other male victims.

Some participants reported that they experienced adversarial growth and improved psychological wellbeing following their traumatic experiences (Linley & Joseph, 2004). For some of the men, taking part in this research was a significant step towards recognising their personal resilience and strength (Flanagan et al., 2015). For example, Jay described feeling more comfortable in sharing his vulnerability (Joseph, 2015): “I wouldn’t even have entertained this years ago, I wouldn’t even….I wouldn’t even like if somebody says ‘Do you want to speak to somebody’ I would say ‘No thanks’” (Jay). Occasionally, participants reported that they had chosen a career in the domestic abuse field, which enabled them to make use of their own experiences and wisdom to help others: “It’s obviously a subject that I’ve become more interested in, purely from personal experience really, and it is interesting” (Aaron).

Supporting earlier findings (Tsui et al., 2010; Zverina et al., 2011), some men outlined the need to tailor IPV services to accommodate the unique needs of male victims. For example: “Asking for a different type of domestic abuse centre for guys, I don’t think
that’s a problem, it shouldn’t be the same, we think differently, we do things differently” (Lewis). The need for gender specific interventions related to the need for facts over feelings, values which are more in line with traditional values of hegemonic masculinity (Gillon, 2008):

For men to kind of go I don’t necessarily need to talk to you from an emotional point of view because, you’ve given me the facts and they pretty much make up the same, you know pattern in almost every case errm, that, I don’t have to sit down and try and explain to you how I feel, I already think you know how I feel because you have all the facts, we deal in facts, so yeah it would normalise it from the point of view of the male (Aaron).

These recommendations support those proposed by Zverina et al. (2011) who outlined the need for services which are sensitive to working with male victimisation, in which the identity of victim may be more problematic than for some female victims, on account of dominant gender scripts. These findings further evidence the need to address the conflict between victimisation and masculine identity (Tsui et al., 2010).

Overall, this theme captures the men’s perceptions of changes that need to be made in order to enhance understanding of IPV and improve service provision for male victims of IPV. These changes typically centred on the need to enhance awareness of male victimisation, and tailor support services in order to meet the unique needs of male victims (Barber, 2008; Hogan, Hegarty, Ward, & Dodd, 2012).

Discussion

The findings of the current study offer insight into the nature of abuse the men experienced, including their perceptions of triggers to their partners’ abuse behaviour (Carmo, Grams, & Magalhães, 2011). The findings support current literature on violence against women which has identified the coexistence of physical and psychological abuse (e.g., O’Leary, 1999; Vatnar & Bjørkly, 2008; World Health Organization, 2005), with verbal aggression often a precursor to physical violence (Eisikovits & Buchbinder, 1999). The men reported that they experienced prolonged and sustained abuse from their female partners, including emotional, psychological and physical violence. The men’s accounts demonstrate that their partners sought to achieve and maintain coercive control through systematically controlling their behaviours, restricting accessing to family and friends, and threatening violence.
(Allen-Collinson, 2009a; Home Office, 2015). Such forms of abuse have been defined as constituting intimate terrorism (Hines & Douglas, 2010a; Johnson, 2006).

**Implications for support services**

The men’s accounts demonstrate the need for services to be aware that men can be victims of female-perpetrated IPV (Barber, 2008; Hines & Douglas, 2010a). Some participants reported a lack of recognition and understanding of male victimisation within support services (Tsui et al., 2010). Congruent with previous findings, some men reported being ridiculed, and outlined that their experiences were not taken seriously by the professionals from whom they sought help. In some instances, the men were accused of being a perpetrator, and subsequently arrested (Douglas & Hines, 2011; Hines et al., 2007; Tsui et al., 2010). Disbelief among professionals that men can experience IPV often resulted in further feelings of isolation and distress (Allen-Collinson, 2009b; Barber, 2008; Drijber et al., 2013; Migliaccio, 2002).

**Implications for Counselling Psychology**

The men’s accounts of receiving therapy suggest that they benefitted from talking to a counsellor who was non-judgemental and understand of IPV and its affects (Roddy, 2013). These findings highlight the need for counselling psychologists to be aware of male victimisation and the unique difficulties experienced by some male victims (Barber, 2008; Hogan et al., 2012). A non-judgemental therapeutic approach was of particular value given that many of the men were self-critical of their perceived failure to meet internal and social masculine expectations. Counselling psychologists should be aware of the importance of facilitating unconditional positive self-regard in the men’s recovery from the trauma of being in an abusive relationship (Flanagan et al., 2015). Many of the participants stressed the value of being believed when talking about their experiences of IPV victimisation, thus reinforcing the importance of valuing clients’ subjective experiences and constructions of reality, a central aim of counselling psychology (Woolfe, Dryden, & Strawbridge, 2010).

**Limitations of this research**

These findings offer tentative understanding of male IPV victimisation. Whilst this research does highlight unique challenges that may be useful in developing interventions to support male victims of IPV (Oliffe et al., 2014); these findings need to be considered in relation to the limitations of this study. Participants’ demographic
information demonstrate the limits of the claims that can be made about the findings, and the potential transferability of these findings to other male IPV victims (Braun & Clarke, 2013).

Randle and Graham (2011) highlighted the need to explore the experiences of male victims from ethnic minority groups. Whilst the majority of participants identified as White, some non-White participants (n=2) did speak about the role of their ethnicity/culture in their experiences of IPV, supporting earlier findings which suggest that the meaning of violence varies within and between cultures (e.g., Jewkes, 2002; Mann & Takyi, 2009). However, this finding needs further exploration.

The men who took part in this research, self-identified as victims of female-perpetrated IPV. Given that some of the men were reluctant to identify as victims of IPV (Drijber et al., 2013; Migliaccio, 2002; Tsui et al., 2010), consideration should be given to the language used in the recruitment materials and the phrasing of questions within the interview schedule. Researchers should be mindful of participants being avoidance of a victim identity (Taylor et al., 1983) for fear of being perceived as less masculine (Migliaccio, 2001, 2002). Future research may consider using the phrase ‘survivor’ rather than victim.

**Future research**

The need for enhanced understanding of male victims’ experiences of IPV has been frequently outlined (e.g., Hines et al., 2007; Migliaccio, 2002; Randle & Graham, 2011). Findings from the current study highlight the complexity of the men’s experiences of being in an abusive relationship. Research on male IPV victimisation is in its infancy (Douglas & Hines, 2011; Hines et al., 2007); consequently further research, particularly within the UK (Dempsey, 2013), is required to enhance understanding of the experiences of male victims of IPV, leading to the development of understanding, theory and practice. In particular, there remains a need to enhance practitioners’ ability to offer the best possible support to male victims (Hogan et al., 2012; McClennen et al., 2002). Further research may offer important implications for understanding male IPV, leading to the potential development of enhanced sources of support (Merrill & Wolfe, 2000).

**Conclusion**
In conclusion, the men described their experience of being in an abusive relationship as a traumatic life event, which had a negative impact on both their physical and psychological well-being. Frequently participants made reference to masculinity, and described associated feelings of shame and embarrassment for not having met cultural expectations surrounding the roles and expectations of heterosexual men. The men reported that they feared being judged negatively by others, which was a significant barrier to accessing help.

Acknowledgements
The authors wish to thank the participants who took part in this study, and everybody who helped to recruit them.
References


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### Table 1 Characteristics of the sample

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<td>City and Guilds (2)</td>
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<td></td>
<td>Two (6)</td>
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Thematic map 1.1 Male victims of female-perpetrated intimate partner violence – candidate overarching theme, themes and subthemes

**Theme**
1. Nature of the abuse - “Being abused, verbally and physically”

**Subtheme**
1.1 Hunter and the hunted - “It was like living on the edge of a volcano”

**Theme**
2. Impact of abuse - What she left behind

**Theme**
3. Barriers to leaving the relationship

**Theme**
4. Coping strategies for dealing with the abuse

**Theme**
5. Leaving the relationship - “I just decided to walk out”

**Theme**
6. Reasons for the abuse - why it happened

**Theme**
8. Experiences of help seeking
   “There’s a part of me that would welcome some understanding”

**Subtheme**
8.1 Barriers to seeking help - “It’s the shame of it”

**Subtheme**
8.2 Positive and negative help-seeking experiences

**Theme**
7. Masculine expectations – Grown men don’t cry

**Subtheme**
7.1 Perceptions of violence shaped by masculine norms

Overarching theme
1. “I’d walked into a rose bush”: The men's experiences of abuse
Appendix 2: Participant Information Sheet

The experiences of male victims of female-perpetrated intimate partner violence: A qualitative exploration

Please take time to read the following information carefully; if there is anything that is not clear or that you would like more information about then please do ask the researcher.

Who is the researcher and what is the research about?
I am Kevin Hogan, a part-time student on the Professional Doctorate research in Counselling Psychology at UWE Bristol. I am conducting interviews on the experiences of male victims of female-perpetrated domestic abuse. My research is supervised by Dr. Tony Ward, who is the director of studies for this research, in the Department of Psychology at UWE Bristol, and Dr. Victoria Clarke who is an Associate Professor in Sexuality Studies in the Department of Psychology at UWE Bristol.

What does participation involve?
You are invited to take part in an interview which aims to explore the experiences of male victims of female-perpetrated domestic abuse. Questions that you will be asked in this study will centre on your experiences of being in a violent/abusive relationship, and your experiences of seeking help. There will also be an opportunity for you to add anything to the interview that is not covered by the interview questions.

There are some demographic questions for you to answer before taking part in the interview. You will need to complete a consent form to confirm that you agree to participate.

Who can participate?
Participation in this study is invited from men over the age of 18 who self identifies as a victim of female-perpetrated domestic abuse. For the purpose of this study, the definition of domestic abuse will be the definition used by the Home Office as:
“Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners regardless of gender or sexuality. This can encompass, but is not limited to, the following types of abuse: psychological, physical, sexual, financial, emotional.

“Controlling behaviour is: a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour”

Coercive behaviour is: an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim (Home Office, 2013).

Participation in this research is entirely voluntary.

**How will the data be used?**

Interviews will be audio recorded, and the researcher will type up the interviews for analysis. The transcribed interviews will be anonymised (i.e., any information that can identify you will be removed) and used for research purposes. Extracts from the interview may be quoted in any publications and conference presentations arising from the research. The demographic data for all participants will be compiled into a table and reported in any publications or presentations arising from this research.

In accordance with the Data Protection Act (1998) transcripts will be stored in password protected files. Tape recordings of face-to-face and telephone interviews will be stored in locked filing cabinets and destroyed at the end of the research.

**Confidentiality**

The information you provide will be treated confidentially and personally identifiable information will be removed.

**How do I withdraw from the research?**

If you decide you want to withdraw from this research after taking part in the interview, please contact the researcher Kevin Hogan on kevin2.hogan@live.uwe.ac.uk quoting your participant code (given at the top of the page). Please note that there are certain points beyond which it will not be possible to withdraw your participation from this study (for instance when the researcher has published the findings from this study). Therefore, it is a good idea to contact the
researcher within one month of participation if you wish to withdraw your data. Please keep hold of this sheet so that you have a copy of your participant code.

**Is there any risk in taking part?**

It is acknowledged that the subject matter is one that could be distressing for some participants. Below is a list of information and contact details about resources that are available to you:

- **ManKind Initiative** - Support for male victims of domestic abuse and domestic violence [http://www.mankind.org.uk/](http://www.mankind.org.uk/) National Helpline no. 01823 334244. This line is manned from Monday to Friday 10am - 4pm and 7pm - 9pm.
- **AbusedMen.org**. online forum for men who have been abused [http://abusedmen.org/](http://abusedmen.org/)
- If you are in immediate danger call 999.

**If you have any questions about this research or if you decide you want to withdraw** from this research, please contact the researcher Kevin Hogan on kevin2.hogan@live.uwe.ac.uk quoting your participant code (given at the top of the page).

You can also contact:

Dr. Tony Ward, who is the director of studies for this research
Dr. Tony Ward, Faculty of Health and Life Sciences, University of the West of England, Frenchay Campus, Coldharbour Lane, Bristol. BS16 1QY email: tony.ward@uwe.ac.uk

Or

Dr. Victoria Clarke, Associate Professor in Sexuality Studies in the Department of Psychology.
Dr. Victoria Clarke, Faculty of Health and Life Sciences, University of the West of England, Frenchay Campus, Coldharbour Lane, Bristol. BS16 1QY email: Victoria.clarke@uwe.ac.uk

Thank you for your participation in this study.

Male victimisation remains a subject of ambiguity, in need of further research, particularly within the UK. Such research is vital in acknowledging the experiences of abused men and improving support services. If you would like to receive a summary of the findings when this research is completed, please let the researcher know.
Appendix 3 Demographic information sheet:

The experiences of male victims of female-perpetrated intimate partner violence: A qualitative exploration.

Some questions about you

In order to learn about the range of people taking part in this research, I would be grateful if you could answer the following questions. All information provided is anonymous.

Please either write your answer in the space provided, or circle the answer, or answers, that best apply to you.

1. How old are you? ____________________________________________________________

2. How would you describe your race and ethnicity? ____________________________

3. How would you describe your relationship status?
   Single
   Partnered
   Married/Civil Partnership
   Separated
   Divorced/Civil Partnership Dissolved
   Other: ______________________

4. Do you have any children? Yes No
   a. If yes, how many children do you have? ______

5. What is your highest level of educational achievement? ______________________

6. If you work, what is your current occupation? ________________________________

7. How would you describe your social class? (e.g., working class; middle class; no class category) ____________________________________________________________
Appendix 4: Interview schedule

1) To start with, can you tell me about your experiences of being in a violent/abusive relationship?
Prompts:
i. When did it start?
ii. How did it start?
iii. What was the nature of the abuse?
iv. Could you tell me about a typical incident?
v. What was the worst event?
vi. Has the abuse now stopped or is it ongoing?
vii. Did this happen in more than one relationship?
viii. Can you tell me about your coping strategies?

2) What are your experiences of seeking help?
Prompts:
i. Did you tell friends?
ii. Did you tell family?
iii. Did you contact support groups/Online groups?
iv. Did you ever call the police?
v. If so, can you tell me about an incident? Can you tell me what they said? How did you feel? Was it helpful or not?
vi. What were the most helpful sources of support and why?
vii. What were the least helpful sources of support and why?
viii. Have you ever sought counselling/psychotherapy?
ix. Do you consider counselling was/would be helpful?

3) Some men experience difficulties when accessing support. Has/did anything stop you from seeking help?
i. Did this impact on your psychological well-being?

4) Did you feel isolated?

5) What influenced your decision to remain in the violent/abusive relationship?
i. Where there any barriers to leaving the relationship?

6) We don’t typically think about men as victims of violence. How did other people react?
i. Do you think that society had an impact on your ability to recognise your relationship as abusive?

ii. How do you think violence functions? Could you give an example?

7) How did/do you feel about yourself as a man?

i. Did this have an impact on your help-seeking experience? If so how?

8) Some people disbelieve this can happen to a man, some question whether this exists. How do you feel about that?

i. A quote from The Guardian Newspaper (Carter & Dodd, 6th January 1999) makes reference to “the myth that only ‘wimps’ are attacked by women.” How do you feel about that?

9) Is there anything else you would like to add?
Appendix 5: Participant Consent Form

Participant Consent Form

Title of research project: The experiences of male victims of female-perpetrated intimate partner violence: A qualitative exploration.

I have read the Participant Information Sheet and agree to take part in this study. I consent that:

- The purpose and details of this study have been explained to me
- I understand that my participation in the study is entirely voluntary
- I understand that I have the right to withdraw from the study within the limits specified on the Participant information sheet without the need to give a reason
- The use of information that I provide has been explained to me
- I am aware that my anonymity will be maintained and no personal details will be included in any write-up of the study
- I understand that information I provide will be treated confidentially
- I agree to the study procedures
- I understand that I can contact the researcher at any time if I have any queries about the study
- I have had an opportunity to ask questions about my participation

Name of participant (Please print) ________________________________________________

Signature of participant _______________________________________________________

Date ______________________________________________________________________
### Table 2 Overview of Themes and Subthemes

<table>
<thead>
<tr>
<th>Overarching theme</th>
<th>Main themes</th>
<th>Examples of data</th>
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<tr>
<td>1. “I’d walked into a rose bush”: The men’s experiences of abuse</td>
<td>1. Nature of the abuse - “Being abused, verbally and physically”</td>
<td>It could be walking home in which case she would just start swinging punches and kicks [...] because we’re sat down, her climbing onto me and choking me (Aaron)</td>
<td>I don’t trust women at all (Stuart)</td>
<td>I felt trapped. I was, I just had so many feelings for her that, I was trapped into tolerating it because of how much I wanted to be with her (Steven)</td>
<td>Basically if she had any demands or wanted anything doing, I’d just try and do it to avoid confrontation (Simon)</td>
<td>One day she hit me once too often and I just decided to walk out (Stuart).</td>
<td>I’m still struggling for a reason, that’s still a driving point on me (Lewis)</td>
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<td>2 Impact of abuse – What she left behind</td>
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<td>3 Barriers to leaving the relationship</td>
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<td>4 Coping strategies for dealing with the abuse</td>
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<td>5 Leaving the relationship – “I just decided to walk out”</td>
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<td>6 Reasons for the abuse – why it happened</td>
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<td>1.1 Hunter and the hunted - “It was like living on the edge of a volcano”</td>
<td>It was like living on the edge of a volcano, it was, you never knew when it was going to happen (Neil)</td>
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<td>Theme</td>
<td>7. Masculine expectations – Grown men don’t cry</td>
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<td>Examples of data</td>
<td>Definitely made me feel less of a man, to be being beat up by a woman (David)</td>
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<td>Subtheme</td>
<td>7.1 Perceptions of violence shaped by masculine norms</td>
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<td>Examples of data</td>
<td>I was brought up by my dad in the sixties that you need to fight blar blar blar, got to defend yourself, don’t hit a woman, err but you’ve got to defend yourself and then you’re in a contradiction (Jason)</td>
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<td>Theme</td>
<td>8. Experiences of help-seeking – “There’s a part of me that would welcome some understanding”</td>
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<td>Examples of data</td>
<td>The people I did tell sort of laughed and said ‘That’s women for you’ (John)</td>
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<td>Main themes</td>
<td>8.1 Barriers to seeking help “It’s the shame of it”</td>
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<td>8.2 Positive and negative experiences of seeking help</td>
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<td><strong>Examples of data</strong></td>
<td>It was that fear of yeah, not being believed, you know that kept me there longer than was good for me really (Simon)</td>
<td>I would like to see domestic violence as non-gender specific (John)</td>
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<td><strong>Theme</strong></td>
<td>9. There is a need for change - “I am keen to spread the word”</td>
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<td><strong>Examples of data</strong></td>
<td>I’m thankful I can take part in something that will, you know, one day help everyone (Steven)</td>
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