

Best Practices: Service Provisions for Male Victims of Domestic Abuse
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Abstract

The Domestic Abuse Helpline for Men (DAHM) is a nonprofit that originated in 2000 as a toll free crisis line to serve domestically abused men nationwide. Since inception, DAHM has collected extensive data on all incoming crisis calls. Stop the Violence, Inc.(STV) originated in 1998 and since its inception has accumulated service provision data for all clients seeking assistance for domestic abuse nationwide. This study is the result of a collaborative project between DAHM and STV. DAHM methodology was comprised by using a standard interview protocol administered to all incoming crisis line callers having male domestic violence concerns. Data from STV included service provision information gathered on all male domestic violence clients that were given services. Data on occupational status obtained from the DAHM indicate that there is a need for service provisions nationwide for victims of various socioeconomic backgrounds. Data obtained through STV qualified the nature of the services needed for abused men. Collectively the results are consistent with current research indicating that there are substantial needs in this population that have been thus far underserved and unrepresented. In comparison to research conducted on abused women, data from the DAHM suggest that abuse patterns may differ for men. Implications are drawn for best practices concerning current service provision needs in this field.

Methods

Participants for the current study were 434 callers who called DAHM and STV between March 2004 to June 2005 for whom data was collected by seven of the ten volunteers at DAHM and STV (although jointly the two helpline's averaged 450 calls per month during that time period only complete¹ self reports e.g. men reporting intimate partner violence (IPV) by their partners were included). Others who called the helpline such as female victims, friends, family members and agencies concerned about female or male victims were not included in this study.

The following questions were addressed for this study:

1. What is the occupation of the caller?
2. Did the caller need and/or was he seeking safe housing/shelter?
3. Did the caller need and/or was he seeking some type of support group?
4. Did the caller need and/or was he seeking some type of legal aid?
5. Was the caller in need of and/or seeking financial assistance for transportation (local domestic violence shelter did not house male victims and the caller needed financial help to get to the nearest domestic violence shelter that did), food, clothing, temporary shelter in a hotel?
6. What type(s) of abuse had the caller suffered i.e. physical, emotional/psychological, female privilege², and/or economic abuse?
7. Does the caller's intimate partner abuse alcohol and/or drugs?
8. Has the caller's intimate partner ever been diagnosed with a mental illness?
9. Has the caller's intimate partner ever used a weapon to physically abuse them?
10. Do young children live in the home?

¹ Due to the "crisis" nature of self reported calls it not always possible to obtain answers to all the questions on our data sheets. Volunteers are instructed to write a summary of each call, however, volunteers are not required to ask all the questions and callers are not required to answer them. The records included in this study fit the criteria for complete because questions 1-11 of this study could be answered.

² Female privilege is defined for this study as threats made by a female partner in order to control their male partner and therefore keep them in the relationship. Threats used include but are not limited to; threats to accuse them of abuse by filing a false protective order and threats to have them falsely arrested for domestic violence and threats taking the children away from the victim. Note: Some callers left the relationship and the abusive partner followed through on the threats.

11. Has the caller ever requested the help of police, the local domestic violence shelter program and/or the court system about their situation?

In addition data sheets were reviewed to see if there were any additional behaviors that female perpetrators used on male victims that are not normally reported by female victims of male perpetrated domestic violence.

Results

Occupations of Callers

17% unemployed
13% disabled
24% "Blue collar" workers
40% "White collar" professionals
4% retired
1% in the military
1% college students

Shelter

16% of callers were in need of or seeking shelter.

Support Group

53% indicated they were in need and/or seeking some type of support group.

Legal Assistance

89% of callers indicated that they were in need and/or seeking legal assistance.

Financial Assistance

13% indicated that they were in need and/or seeking financial assistance.

Types of Abuse Reported by Caller

79% of callers indicated that they were being or have been physically abused by their intimate partners.

97% of callers indicated that they were being or have been psychologically/emotionally abused by their intimate partners.

31% of callers indicated that their intimate partners threaten to call the police and have them arrested on false domestic violence charges and/or file false protection from abuse orders as a means of keeping their intimate partners under their control and in the relationship. Also included in this statistic are callers who stated that their abusive females partners followed through on those threats once the partner left the relationship. 20% of callers indicated that their partners controlled the money in the relationship. 87% of callers indicated that they were being abused in multiple ways.

Perpetrators Substance Abuse

17% of callers reported that their partners were problem drinkers/alcohol abusers. 33% of callers reported that their partners misused legal drugs or used illegal drugs. 50% of callers reported that they didn't know or that there was no alcohol or substance abuse by their partners.

Perpetrators Mental Illness

4% of callers reported that their partners were diagnosed with Borderline Personality Disorder.

6% of callers reported that their partners were diagnosed with Bi-Polar Disorder.

2% of callers reported that their partners were diagnosed with Post Traumatic Stress Disorder.

10% of callers reported that their partners were diagnosed with depression.

1% of callers reported that their partners were diagnosed with Schizophrenia.

77% of callers reported one of three things about their partners, either that their partner refused to go to a mental health professional for evaluation and treatment although they had various symptoms that may be helped by therapeutic treatment; or that their partners were diagnosed with a mental illness however they did not know what it was; or that their partners did not to their knowledge have a mental illness.

Use of Weapons by Perpetrator

19% of callers indicated that along with physical and emotional abuse their intimate partners had used a weapon such as a knife, gun, and/or motor vehicle etc. against them.

Children Living in the Home

59% of callers indicated that there were young children living in the household.

Access to Currently Available Domestic Violence Victims Resources

22% of callers indicated that they had requested services and support from police/domestic violence programs/family courts and services were denied them.

22% of callers indicated that they requested and received services from police/domestic violence programs/family courts.

55% of callers indicated that they didn't know where to go for help or were too embarrassed to ask for assistance from police/domestic violence programs/family courts.

1% of callers indicated that they had attempted to access multiple services and the availability of services was not uniform.

Additional Behaviors That Women Use Against Their Male Partners

3% of callers reported kicks to their male intimate partners groin area.

5.5% of callers reported that their intimate partners bit them on various parts of their bodies.

Further Information Obtained from the Study

88% of callers reported that they were calling regarding a girlfriend or wife.

4% of callers reported that they were immigrants and that their partners had threatened to have them deported in order to control them.³

Conclusion

Many of the male IPV victims who were employed are employed in stereotypical masculine occupations e.g. police, medical personnel, lawyers, firefighters, manual labor, construction and factory workers etc.

³ Although no calculation was made as to the percentage of different ethnic groups represented for this study a number of callers were of African American and Spanish decent.

Given the fact that a significant proportion of intimate partner violence against men goes unreported it's difficult to ascertain the need for shelter and transitional housing for male victims. We hypothesize that male victims (much like their female counterparts) who have supportive friends and family, are employed and not being economically abused are less likely to need such services. However, thirty percent (30%) of callers in this study were unemployed or disabled and living on a limited income and twenty percent (20%) reported that their partners controlled the finances in the relationship. Combining those two scenarios and adding "imminent danger" to the equation e.g. being physically abused and/or having death threats made against them make the chances of these men needing safe housing or transitional housing services more likely.

Over half the callers had need of a support group. In Maine 1600 women attended support groups at domestic violence shelter programs throughout the state. (2003) No such groups were offered to men through these shelter programs.

Women's domestic violence shelter programs and sexual assault crisis programs across the country train their new volunteer advocates to "believe the [hotline] caller" when female victims call their respective hotlines. DAHM and STV train our volunteer advocates in like fashion. Yet, nearly one-quarter of the callers to DAHM and STV reported that when they sought services as male victims of IPV by women they were either denied the same services available to females, not believed, referred to batterer's intervention programs and/or ridiculed for allowing a woman to "beat them up." And over half of the callers in this study didn't know where to seek help (believing that women's shelter programs were only for women and children) or were too embarrassed to ask. Some believed that they were the only ones suffering abuse at the hands of their female intimate partners.

Thousands of studies have been published on IPV against women over the last two decades and other than the decisive work of Dr. Murray Straus at University of New Hampshire's Family Violence Research Laboratory, few include statistics or in depth information of IPV against men by women. Research as well as acceptance of men as victims and women as perpetrators of IPV is an area ripe for exploration.

Using self reports from helpline callers is not the most controlled means of obtaining data regarding male victimization and female perpetration but at present there

are few places to acquire this information. According to Hines, Brown and Dunning, taking information from victims about their abusive partners is not new, "Admittedly, obtaining information on the characteristics of female perpetrators of abuse from reports of their male victims is not ideal; however, studies of battered women have used this methodology repeatedly to understand male batterers ..." ⁴ (Hines, Brown & Dunning 2004, citing Walker 2000)

Overall our data indicates that male victims have similar needs to their female counterparts. Much more research needs to be done in this area but we believe this study is a stepping stone to understanding the service provision needs of male victims.

Contact Information:

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⁴ Hines, D. Brown, J. Dunning, E. (2004) *Characteristics of Callers to the Domestic Abuse Helpline for Men*, in press. *Journal of Family Violence*.
Walker, L.E.A. (2000), *The Battered Women's Syndrome*, 2nd Edition. New York: Springer