A STUDY ON MALES' EXPERIENCES WITH INTIMATE PARTNER VIOLENCE

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By Nadine Jaye Mendoza-Cataño May 2014

CERTIFICATION OF APPROVAL

A STUDY OF MALES' EXPERIENCES WITH INTIMATE PARTNER VIOLENCE

By Nadine Jaye Mendoza-Cataño

Signed Certification of a on file with the Univ		
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Professor of Social Work	Date	
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DEDICATION

To my mother, Mary O. Martinez,

May you rest in peace.

Thank you for not raising a quitter.

Love,

Your Middle Child

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First and foremost, I must thank the good Lord for all of His teachings and blessings. There were times when I thought He had served too much on my plate for me to handle, but my faith kept me strong and I persevered. I must thank my husband, Frank Cataño, Jr., for being crazy enough in love with me to marry me during my last semester of graduate school, encouraging me always, and keeping me well fed. His family is now a part of my family and they have given me great love and support. I began this journey many years ago to gain a higher education in order to provide a better life for my son, Aron Nathan Aragon and myself. Thank you, son, for your understanding and belief in me. I would like to thank my sister, Nancy, for being my inspiration. To my baby brother, Jesse, for making sure I had fun at the A's games. To my niece, Maria, for visiting me during my school breaks and loving me in the special way that you do. I could not have survived this journey if it was not for the support I received from my mother's brothers and sisters and my cousins, Uncle Paul, Uncle Gabe, Uncle Rick, Uncle Don, Aunt Yolie, Aunt Cheryl, Aunt Eva, Aunt Lupe, cousins, David, Sabrina and Pauline. I have the best best-friend in the world, Elena Quintero. Thank you for being you and for our decades of friendship. I love you and your entire family so much. While in graduate school, I surrounded myself with positive and phenomenal people who inspired me to seek my full potential as a student. A huge thank you goes out to my Monday Morning Thesis Chicas, Sara Brister, Lorena Esparza, Cynthia Moua, and Pa Thor. You all will always have a

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ABSTRACT

The purpose of this study is to examine the experiences and characteristics of men as victims of intimate partner violence (IPV). This secondary analysis was conducted on preexisting quantitative data collected by Pennell and Burke (2002). Using the descriptive design, this quantitative study focused on data collected by the San Diego Association of Governments (SANDAG) and supported by the National Institute of Justice (NIJ). There were a total of 385 victims of IVP in the sample, of which 73 were male victims. The main instrument used to gather data for the study was from computerized databases, telephone interviews, and self-enumerated questionnaires, including several Likert-type scales items. A major finding was that white, middle aged (n = 34.82) males had the highest percent of being a victim of IPV by their spouses. Over a quarter of the male victims were abused by a significant other. Most suspects used physical abuse against the male victims by using their hands to hit, push or shove the men. Male victims of IPV were reluctant to seek medical attention, although nearly a third of the men sustained injuries from the abuse. Another major finding was that male victims of IPV still do not have the resources readily available to them such as counseling in comparison to female victims of IPV. Most male victims of IPV had a history of IPV. Finally, male victims reported that their children were present over half of the time when the abuse occurred. There is a real need for more awareness about male victims of IPV. Professionals who engage with male victims of IPV firsthand need to be educated about the barriers that men endure and

realize that women can be the perpetrator. Further research needs to be conducted to gain a better understanding of male victims' experiences with intimate partner violence.

CHAPTER I

INTRODUCTION

Statement of the Problem

For the past several decades Intimate Partner Violence (IPV) has begun to be viewed as a major social problem. Although statistics demonstrate that women are injured most from domestic violence, the number of men who have been victimized is on the rise. Domestic violence was an older term that was used to describe the abuse of one partner against another, including, physical, sexual, and emotional maltreatment. Other forms of domestic violence include financial manipulation, intimidation, coercion, and threats (Gelles, 1974; Douglas, Hines, & McCarthy, 2012). For this research study, the term intimate partner violence (IPV) was used instead of domestic violence. IPV is a repetition of abusive behaviors by one person against another person in an intimate relationship like marriage, living together, dating or family. Multiple studies have been published which offer different interventions to help those experiencing IPV (Gelles, et al., 1974).

Before the 1970s, IPV was not considered a crime in most states. During the 1970s grassroots efforts helped to establish several types of emergency services for battered women who were looking for a safe haven from their abusers or trying to escape from abusive partnerships. More services were provided to assist these women of IPV such as counseling and legal services, and they have access to over 2,000 domestic violence agencies throughout the nation (Hines & Douglas, 2011). Yet,

these agencies have been criticized for not providing services to other vulnerable populations who are victimized by IPV, such as males, the elderly, or the Lesbian, Bisexual, Gay, Transgender (LBGT) community. During the middle of the 1980's, social scientists examined policing interventions, specifically mandatory or pro-arrest, as a possible alternative to counseling and social services interventions (Sherman and Berk, 1984). There were new policies that required police officers to make an arrest when responding to a domestic violence incident that showed probable cause, like the victim having bruises, marks or bleeding. The profession that has come to experience the role of frontline responders to domestic violence calls is police officers (Horwitz, Mitchell, Larussa-Trott, Santiago, Pearson, Skiff, & Cerrulli, 2011).

However, in 2009, the Department of Justice showed that 117,210 men were physically assaulted by an intimate partner, with women being the major perpetrator, representing 18% of all IPV victims for that year (Truman & Rand, 2010). The men who are victims of IPV are in need of support and help, but are hesitant to seek assistance. The barriers that refrain male victims of IPV from reporting such abuse or seeking assistance for being a victim of IPV are numerous. For instance, one study conducted by Tsui, Cheung, and Leung (2010) found that men may not pursue help for their victimization because of the shame, embarrassment, denial, fear, and stigmatization that they feel about being victims of IPV. Also, men have a difficulty finding resources that are geared towards the male population. Men also avoid seeking assistance for their victimization out of fear of being mocked, blamed for the abuse, or sent to a batterer's program (Hines, Brown, & Dunning, 2007).

This researcher focused exclusively on the responses of male victims of IPV in Pennell and Burke's (2000) study. This researcher utilized the responses of male victims of IPV using the Case Tracking Data. This researcher utilized sex as a filter variable to focus only on men to examine the males' experiences with IPV.

According to Hines and Douglas (2011), 95.3% of male victims of IPV who sought help found that a Domestic Violence agency is biased against men: 78.3% will only help women, and 63.9% accused the males of being the perpetrator. This researcher expected to find similar data in comparison.

Statement of Purpose

This research study utilized data that were collected by the San Diego Association of Governments (SANDAG), and supported by the National Institute of Justice (NIJ) during 1998-1999. The survey covered multiple salient points falling under three categories, including:

- Surveyed field deputies to determine their level of skill pertaining to IPV calls.
- 2. Studied a sample from the case tracking system that reported cases of intimate partner violence to determine changes in procedures for IPV calls that were handled by an IPV unit compared to no specialized unit.
- Interviewed victims of IPV by phone to investigate the responsiveness of the field deputies and the unit detectives to the needs of the victims (Pennell & Burke, 2002).

The purpose of this secondary analysis research study was to further examine the experiences of male victims of intimate partner violence. Using the descriptive design, this quantitative study conducted a secondary data analysis of a study conducted by the San Diego Association of Governments (SANDAG), and supported by the National Institute of Justice (NIJ). The secondary data analysis came from the Inter-University Consortium for Political and Social Research (ICPSR). This quantitative study, using secondary data analysis, was intended to assist future research regarding men who are victims of Intimate Partner Violence (IPV). The major research question guiding this study was:

1. What were the males' experiences with intimate partner violence?

Significance of the Study

The significance of this secondary analysis study was to gain a greater understanding of the experiences of the male population who are victims of IPV. It is important as social workers to understand the experiences that male victims have had with receiving services related to being a victim of intimate partner violence. Social workers need to understand IPV from a gender perspective. Social workers may be employed in a hospital setting and perhaps encounter a male victim of IPV and provide resources and counseling. Social workers who work in Child Protection Services (CPS) can be called out on a referral to a house for domestic violence with children present. Social workers cannot automatically assume that the perpetrator is the male and the victim is the female. If we do make assumptions, the male victim

will be victimized again. But, social workers must first be able to recognize the signs of male victims of IPV since they are not the norm in our society.

According to the Code of Ethics of the National Association of Social Workers' mission statement social workers must strive to improve human welfare (National Association of Social Workers, 2008). Using the Code of Ethics as a foundation for practice, social workers need to help vulnerable populations such as victims and survivors of IPV become empowered. As social workers, we should take political action that searches to guarantee that all people affected by IPV have equal access to the resources, services, and opportunities in order to meet their basic human needs and to develop fully. As social workers, we should act to prevent and eliminate supremacy of, exploitation of and discrimination against any person, group, or class on the basis of race, ethnicity, national origin, color, sex, sexual orientation, gender identity or expression, age, marital status, political belief, religion, immigration status, or mental or physical disability (National Association of Social Workers, 2008).

CHAPTER II

LITERATURE REVIEW

Overview

Males who are victims of intimate partner violence are rarely recognized as victims by law enforcement agencies, our judicial system, and agencies that are established to assist victims of IPV. There are many barriers that refrain male victims of IPV from contacting law enforcement or seeking counseling from an agency that is designed with the model of women being the victims of IPV and men as the perpetrators. Society views intimate partner violence as a crime men commit against women. However, in 2009, the Department of Justice reported that 117,210 men were physically assaulted by an intimate partner, with women being the major perpetrator, representing 18% of all IPV victims for that year (Truman & Rand, 2010). IPV should be seen as a human problem, not as a gender problem (Hines & Douglas, 2011).

Barriers for Male Victims of IPV

A major concern for men who are being abused is that there are not enough resources for men who are victims of IPV. In October of 2000, the first ever helpline in the United States for male victims of IPV opened. The Domestic Abuse Helpline for men (DAHM) is currently the only helpline that specifically focuses on assisting male victims of IPV (Hines, Brown, & Dunning, 2007). The men who are victims of IPV are in need of support and help, but are hesitant to seek assistance. Males who

are victims of intimate partner violence by women often do not have the similar support system that is offered to women of intimate partner violence crimes by men.

Males also have a tendency not to report that they are being victimized by a woman. There is still a bias in our society that woman are not violent against men. The barriers that refrain male victims of IPV from reporting such abuse or seeking assistance for being a victim of IPV are numerous. One study conducted by Tsui, Cheung, and Leung (2010) found that men may not pursue help for their victimization because of the shame, embarrassment, denial, fear, and stigmatization that they feel about being victims of IPV. In addition, Cheung and Leung (2010) reported men have difficulty finding resources that are geared towards the male population. Men also avoid seeking assistance for their victimization out of fear of being laughed at, blamed for the abuse, or sent to a batterer's program (Hines, et al., 2007). Douglas, Hines, and McCarthy (2012) found that when men do seek out the resources they often turn to friends, family, online resources, mental health professionals, medical professionals, DV agencies, and law enforcement.

Another study by Busch and Rosenberg (2004) used criminal justice data to compare women and men arrested for IPV on their levels of violence, reported victimization, general criminality, and substance abuse. Although more men reportedly had a past record in regards to intimate partner violence, when women who had a record of intimate partner violence were compared to women without a record of intimate partner violence assaults, the percentages of men and women who perpetrated injury upon their partner were equally similar. Nevertheless, men were

less likely to report victimization than women were. Twenty-four percent of females in comparison to 7% of males, informed or showed proof of injury to law enforcement that abuse had occurred when the perpetrator was arrested (Busch & Rosenberg, 2004). Prior violence outside of the home was similar for both men and women. Twenty percent of men and 13% of women had performed at least one violent crime. Though there is a small percentage of difference between the two genders, the majority of women surprisingly did have a criminal record. Substance abuse problems were also a parallel factor that men and women had in common. The drug of choice for both genders was methamphetamine. Seventy-eight percent of men and 67% of women exhibited symptoms of being under the influence of drugs or alcohol. The purpose of their study was to focus on women's violence in a relationship rather than the woman being a victim of IPV. The underlying question focused on how to treat women perpetrators of IPV, since most IPV programs are set up to treat men charged with the crime of IPV against women. The number of women charged with IPV has escalated with the increasing awareness of women as perpetrators and not just the victims. There were several limitations to Busch and Rosenberg's (2004) research, such as small sample and the majority of women in the sample were Caucasian.

Our current judicial system favors women when it comes to getting temporary restraining orders (TROs). According to Muller, Desmarais, and Hamel (2009), the results of their study suggest that plaintiff sex plays a primary role in predicting whether judges grant or deny requests for restraining orders in certain cases (i.e.,

those alleging low levels of violence). Unfortunately, men are not granted the same protection of the law compared to women. The limitations of this study are that it was conducted only in Sacramento County and that men were less likely to report being the victim of IPV.

Theories and IPV

Feminist theory would explain IPV as an outgrowth of gender inequity and would predict that males would be the perpetrators. In situations where women were arrested as batterers, feminist theory would predict that the women in question were 'fighting back' rather than violence initiators (Abel, 2001). McPhail, Busch, Kulkarni, and Rice (2007) stated that the feminist model is the product of male oppression against women within a patriarchal society in which women are the primary victims and men are the perpetrators of intimate partner violence. IPV is a learned behavior that can be unlearned. Violence against women from men has become so predominant in our society that women are echoing this abusive behavior by becoming the perpetrators. The feminist model challenges the notion of male privilege and entitlement and the old-fashioned concept that intimate partner violence is a private family matter. The feminist model also contends a necessity for public solutions that include treatment for their male partners, services for women who are victims of IPV, and the requirement of law enforcement engaging in a larger role in persecuting men for their role as perpetrator of IPV towards women. Feminist theory believes in striving for goals for women such as female empowerment and selfdetermination. Feminist theory also believes that many of the problems that women

have to face, including IPV, are the fault of society, culture, and political powers entailing action at the policy level of government (McPhail et al., 2007).

One theory that should be considered in relation to intimate partner violence is Erik Erickson's psychosocial theory. There are eight stages in Erickson's psychosocial theory. Stage 6 is intimacy versus isolation. This is the stage where young adults develop intimate relations which can possibly develop into love or promiscuity. Perhaps, a victim of IPV had a horrific ordeal during this stage as a young adult that carried over into her or his adulthood and presently does not know how to escape from an unhealthy relationship. Children can be subjected to intimate partner violence in several different ways. Children can be exposed to IPV as both victims and witnesses. Puccia et al. (2012) stated that young children who are exposed to intimate partner violence in the early stages of their lives can provoke a strong sense of helplessness and fear which is offhandedly connected to the crushing of the child's trust in the parent's ability to protect them from harm.

Trauma for a child as related to bearing witness or being a victim of IPV can lead to emotional-disconnect, aggression, hyper arousal, attention problems, and psychiatric disorders that can alter them for the rest of their lives. Regrettably, these traumatized children of IPV are not receiving the psychiatric counseling, they so desperately need, but instead often find themselves in trouble with the law, involved in the criminal system, or struggling with a substance abuse problem, and repeating a pattern of learning behaviors (Harris, Lieberman, & Marans, 2007).

Children who have witnessed and experienced unstable relationships suffer from long term effects ranging from their fear of abandonment and not being loved. As the children grow older and start to have romantic relationships of their own, they struggle with intimacy because they learned inappropriate ways of expressing their emotions and intimacy. Adult children of divorced (ACD) parents sometimes try to satisfy their emotional needs in unhealthy committed relationships (Conway, Christensen, & Herlihy, 2003). ACD sexual activities have been associated with their struggles with intimacy. A study by Gabardi and Rosen (1992) discovered that students from divorced families had considerably more sexual partners than did their peers from unbroken families.

Research Findings and Male Victims

Seminal research about IPV abuse against men is relatively scant compared to research about women who are abused in an IPV relationship. Many researchers have noted that women are more likely to experience a serious injury related to IPV than are men. Yet women may abuse their partners more severely than do male offenders (Bell, 2009). In one study by Ansara and Hindin (2009), women were more likely than men to be injured as a result of the violence. Among women reporting force, 3.4%, hurt their husband enough for him to require medical attention, whereas 7.3% reported that their husband hurt them enough to require medical attention. Tutty (1999) published a study about husband abuse. The limitation to the study was that there were not enough male victims identified to study. This shortage of victims can be explained only by examining the *lack* of societal recognition of husband abuse as a

problem (Minaker & Snider, 2006). One study by Hines, Brown, and Dunning (2007) was to determine if intimate partner violence (IPV) is executed strictly by men against women. The researchers divided the study into two parts: violence within common couples and patriarchal terrorism. When the male victims called the Domestic Abuse Helpline for Men (DAHM), they were asked specific questions. Only 190 males who called the hotline were studied. The findings indicated that the average age of the male callers was 41 years old. Many had white collared jobs like doctors, lawyers, and engineers. The abuse being most reported by the men was that their partner was pushing or kicking them. The most brutal physical attack reported was being choked. Possible implications could be more IPV hotlines and support groups for men.

Conclusion

Intimate partner violence (IPV) has been established as a social problem for numerous decades, but the issue of women who batter has received scant attention in the literature (Abel, 2001). IPV has been falsely viewed as a male violent crime against women. IPV is experienced more by women, but the debate is that male victims are not reporting or identifying being a victim of IPV (so the numbers for men are not accurate). There are some who believe that those women who abuse men are doing so as a form of self-defense. The contention is that IPV is a crime men commit against women. Others argue that IPV is not a gender problem, but a human problem (Hines & Douglas, 2011).

Agencies dealing with victims of IPV need to expand their services to include vulnerable populations such as males, the elderly, or the Lesbian, Bisexual, Gay, Transgender (LGBT) community (Hines & Douglas, 2011). Counseling, shelters, legal services, and more hotlines designated for male victims of intimate partner violence are needed throughout the nation. Community members and helping professionals (including law enforcement officers and social workers) need to be educated about the reality that a victim of IPV is not always a woman and the perpetrator a man. Law enforcement agencies across the country should implement intimate partner violence training into their curriculum to educate police officers who are usually first responders to intimate partner violence calls. In order to gain greater insight on the perspective of IPV, police records should be combined with the offender and victim reports (Busch & Rosenberg, 2004). Finally, more research on male victims of IPV needs to be explored in order to further assist this vulnerable population.

CHAPTER III

METHODOLOGY

Overview

This quantitative study, using secondary data analysis, was intended to examine the experiences and characteristics of men as victims of Intimate Partner Violence (IPV). The study utilized the definition of domestic violence as specified in the California Penal Code, which includes, "crimes against spouses, cohabitants, individuals who have parented a child together, or persons having a dating or engagement relationship. The victims can be of the same gender as the offender and include emancipated minors" (Pennell & Burke, p. 4, 2002). The secondary data analysis was conducted from Pennell and Burke's (2002) study on the Evaluation of a Centralized Response to Domestic Violence from the San Diego County Sheriff's Department Domestic Violence Unit, 1998-1999 Survey. The study assessed the employment of a specialized intimate partner violence unit within the San Diego County Sheriff's Department to decide whether the creation of the new unit would lead to increased and improved reporting, and more filings for prosecution (Pennell & Burke, 2002). The secondary analysis focused specifically on responses from the male victims of IPV.

IPV has been recognized as a social problem for several years, but the issue of women as the perpetrator has received scant attention. IPV has been viewed by the broader society as a violent crime against women. The major question guiding this study was:

1. What were men's experiences with intimate partner violence?

Design & Data Collection

Using the descriptive design, this quantitative study conducted a secondary data analysis on data collected by the San Diego Association of Governments (SANDAG) and supported by the National Institute of Justice (NIJ). The secondary data came from the Inter-University Consortium for Political and Social Research (ICPSR). ICPSR was established in 1962 and is the world's largest collection of digital social data. There are over half a million files of social research and over 700 member institutions. Secondary analysis can be described as a second hand analysis. The original study and analysis have been conducted by another researcher for another purpose (Cnossen, 1997). This researcher focused solely on responses from male victims of IPV. There are many men who endure IPV who seek support and assistance, but there are few resources that are available to them (Douglas, Hines, & McCarthy, 2012).

Sampling Plan

The San Diego County Sheriff's Department's data tracker system on domestic violence was used by Pennell and Burke (2002) to randomly choose cases entered into the database between July 26 and September 11, 1999. For the interviews, ten cases were selected for each detective for a total of 137 cases out of a total of 393 during the time frame. Seventy-one victims were contacted by the unit detectives. Of the 71 victims, 46 completed interviews with SANDAG researchers.

The rest of the 137 victims either could not be contacted because the victim declined the interview, disconnected or wrong phone number, or repeated attempts failed.

The secondary analysis data from this survey focused on male victims of IPV and their experiences with intimate partner violence. It will be beneficial to gain insight about this vulnerable population to provide proper services to male victims of IPV. The primary strength of this design was that the opinions of the victims of IPV were influential in law enforcement receiving more training. A weakness of this study was that only one county in California was funded to determine whether or not to create a unit that is thoroughly trained in IPV.

Instrumentation

The main instrument used to gather the data for the study was from computerized databases, telephone interviews, and self-enumerated questionnaires, including several Likert-type scales items. Pennell and Burke (2002) used three data sets for their research: the Deputy Survey Data, the Case Tracking Data, and the Victim Survey Data. This researcher utilized the Case Tracking Data to focus exclusively on the male's experiences with IPV. The Case Tracking Data included demographic variables such as the relationship between the victim and suspect, race and sex of the victim and suspect. Other variables included in the Case Tracking Data were whether or not a weapon (such as a gun or knife) was used during the incident. The data also consisted of the type of abuse (physical or verbal), if the victim or suspect required medical attention, and if the suspect was arrested. Data were also

collected to document if the victim was informed of resources such as shelters, transportation, and knowledge of domestic violence laws.

Prior to the researchers calling the victims for their feedback, the detectives called the victims first. When detectives called the victims, they followed a script that helped them explain the purpose of the call from the researchers to the victims.

Victims were reminded that their participation was voluntary and confidential. The researchers waited two weeks after the incident to contact the victims. When the researchers called the victim, the researchers identified themselves to the victim and reminded the voluntary participants that the survey was confidential. All 46 interviews were conducted by two female researchers. The response rate for the victim survey data was 65 percent.

Plan for Data Analysis

The researcher utilized a quantitative data analysis process to address the research study question. The researcher analyzed male victims of IPV and their responses. The researcher analyzed psychosocial variables. In order to further understand the male victim perspective of IPV, the researcher focused on male victims who had actual contact with law enforcement officers. The researcher focused on the characteristics and experiences of the male victims of IPV. The researcher utilized the Statistical Software Package for the Social Sciences (SPSS). The researcher made use of univariate and bivariate statistical tests to examine the data. Through this secondary analysis the researcher attempted to gain a broader understanding from male victims of IPV and their experiences.

Protection of Human Subjects

This research study was null and void of any disclosure of participant identity information. There was no human contact in regards to this research study. All research participants have been previously advised by the original researchers that this research study is completely voluntarily. The identities of the participants have not been disclosed within this secondary research. The participants who volunteered for this research study continue to have their identities protected within the accordance of the law. This researcher submitted the secondary data study to the Institutional Review Board (IRB) for approval and to ensure the rights and protection of the human subjects are continued.

CHAPTER IV

RESULTS

This study examined male victims' experiences with intimate partner violence. This chapter presents data analyzed using descriptive statistics. Specifically, a filter was placed on the variable gender in order to isolate the male victims of intimate partner violence. This resulted in 73 men who were classified as victims. Next, frequency distributions were generated on key variables related to the experiences of male victims of intimate partner violence. This secondary analysis is conducted to answer the underlying question in this study: What were male victims' experiences with intimate partner violence?

Overview

The dataset for this secondary analysis study came from the Inter-university Consortium for Political and Social Research (ICPSR) which is the world's largest collection of digital social data. The data from this sample were collected by Pennell and Burke (2002) using the San Diego County Sheriff's Department tracker system on domestic violence between July 26 and September, 11, 1999. The study was conducted by the San Diego Association of Governments (SANDAG) and supported by the National Institute of Justice (NIJ). There were a total of 385 victims of IVP in the sample, of which 73 were male victims.

Demographic Variables

The sample collected demographic elements on victims and suspects. The sample indicated the victims' as well as the suspects' race. Men who identified as white had the highest percentage of being a victim of intimate partner violence at 67.1% (49). Hispanic males comprise 17.8% (13) of the sample, followed by victims who identified as Black (9.6%, 7), Asian (4.1%, 3), and other (1.4%, 1). The suspects' race differed from the male victims' race on some points, but the races were in the same order. Over half of the suspects identified as being white (72.6%, n = 53). Hispanics followed suit once again (9.6%, n = 7) as the second largest group, then Black (6.8%, n = 5) and other (2.7%, n = 2). The male victims' ages on the date of the incident ranged from 18 years of age to 51 years of age. The average age of the victims on the date of the incident was 34.82. The suspects' average age on the date of the incident was similar at 33.17. The suspects' ages on the date of incident ranged from the minor age of seventeen to eighty-four.

Participants were also asked about what type of relationship the men had with their perpetrators. More than half (54.8%) of the participants were victimized by their spouses. Over a quarter (28.8%) of the men were victimized by a significant other. More than half (52.1%) of the victims were responsible for making a report to law enforcement about the IPV. Analysis of the data on history of IPV indicated that within the sample of 73 men, half (50.7%) stated having a history of intimate partner violence. Of the 73 participants in this study, nearly half (45.2%) stated that their children were present during the abuse.

A temporary restraining order (TRO) was in place for a small percentage (8.2%) of the cases and only a few men intended to get a TRO (4.1%). Law enforcement advised fourteen victims to get a TRO. A restraining order was not mentioned in most (20.5%, n = 15) of the men, while the majority of men (47.9%, n = 35) did not have a TRO.

Suspects' Variables

The data included information on the suspects such as whether or not the suspect was booked, arrested, what was the suspects' highest criminal charge, and reasons as to why there was no arrest. More than half (52.1%, n = 38) of the suspects charged with IPV were booked at the scene by police officers. Close to half (43.8%, n = 32) of the suspects of IPV were not booked at the scene and fewer (4.1%, n = 3)suspects were eventually booked at a later date. The suspects, who were arrested at the scene were similar in number compared to those suspects who were booked at the scene. Out of a total of 73 suspects, 41 suspects were arrested by law enforcement, 28 of the suspects were not arrested, and 4 of the suspects were arrested at a later time. Almost a third (23.3%, n = 17) of the IPV suspects were charged with a violent felony. More than a third (39.7%, n = 29) of suspects of IPV were charged with a violent misdemeanor. Almost one third (28.8%, n = 21) of the suspects were charged with other unknown charges. In sixteen (21.6%) of the cases there was no arrest because the suspect was not there. Eight (11%) of the male victims did not want law enforcement to arrest the suspect. The majority (75.3%, n = 55) of case dispositions for suspects were missing. The number of suspects who entered a guilty plea (n = 14)

were almost five times higher than the suspects who actually got convicted (n = 3) of IPV.

Other variables analyzed in the data inquired about the suspects' gender, types of actions against the victim by the suspect that were stated in the police report, description of the weapons used by the suspect against the victim, injuries, and if medical treatment was necessary for the victim and suspect. Females were the main suspect in 98.6% (72) of the cases. Suspects' actions described in the police report stated that almost one third (30.1%) of the suspects inflicted injury onto the male victim. Some men (15.1%) were forced to move from their residence because of the suspect. The same percentage of suspects struck the victim by the use of their right hand (5.5%) or their left hand (1.4%) to cause injury onto the victim. Other physical abuse that was inflicted towards the men by the suspects consisted of pushing or shoving their victim 5.5% (4), and threats were spoken by the suspect in 4.1% (3) of the cases. Three (4.1%) suspects tried to control their victim by disabling the victim's phone. Other forms of IPV that were perpetrated by the suspects towards the male victims included the victim being stalked, used forced entry against the victim, threatened retaliation against the victim, demanded a note from the victim, and vandalized the victim's belongings.

The suspects did not use weapons against their victims in most (41.1%, n = 30) of the cases, although a large percentage (47.9%) of this specific information was missing from the data. A gun was used once by the suspect against the victim. The suspects used a knife in five of the cases and in three cases a phone was used as a

weapon. The suspect mostly (76.7%, n = 56) used their own body (physical) to cause harm onto the men. Verbal abuse by the suspects was reported in 12.3% (9) of the cases. The suspects used other weapons in 8.2% (6) of the cases and an unknown weapon was used in 1 (1.4%) of the cases.

The victim was injured over half of the time (56.2%, n = 41) while the suspect was injured 21.9% (16) of the time. Medical treatment was not needed in the majority of the cases (n = 42). Almost one third (28.8%, n = 21) of the men refused to receive medical treatment.

Other information was asked about the victims and suspects about whether alcohol or drugs were used prior or during the incident. For both the victim and the suspect, their drug and alcohol use is unknown (n = 56, n = 45) in most cases. Only ten male victims reported drinking alcohol, while even fewer (n = 2) reported using drugs. Drugs or alcohol were not a factor in five cases for victims. As for drug or alcohol use amongst suspects, sixteen cases were reported to having used alcohol prior or during the incident. Drugs were reported in a single case from suspects. In eleven of the suspects' cases, neither alcohol nor drugs were used.

Summary

It is apparent in the findings that white male victims have the highest percent of being a victim of intimate partner violence. The suspects' race having the highest percentage was also white. The average age for both the suspect and the victim were in the mid-thirties. Most male victims identified their spouse as being the perpetrator of their abuse. More than half of the male victims were responsible for reporting the

abuse to law enforcement. A little over half of the male victims revealed that there was a history of intimate partner violence. The male victims' also stated that their children were present practically half of the time when the abuse occurred. Most of the men did not have a TRO in place for protection against their abusers. Male victims were injured from the IPV over half of the time; yet, almost a third of the injured male victims refused to seek medical treatment. As to whether or not drugs and alcohol played a key role in IPV, most of that information is unknown, and very few suspects and victims reported that alcohol or drugs were used prior or during the incident.

Half of the suspects were booked at the scene by law enforcement and more than half of the suspects were arrested. More than a third of the suspects were charged with a violent misdemeanor. Suspects rarely got convicted of the IPV charges. Most suspects did not use a weapon against their victim, but the majority of the suspects did use their own bodies to inflict injury upon their male victims.

CHAPTER V

DISCUSSION

Overview

This quantitative study, using secondary data analysis, examined the males' experiences with intimate partner violence. The data for this study came from the Inter-university Consortium for Political and Social Research (ICPSR). This chapter summarizes the results of the study and highlights major findings by comparing and contrasting critical issues to the existing literature. Furthermore, this chapter examines implications for social work practice and policy, limitations of the research, and recommendations for future research.

Major Findings

The first major research finding was the ability to offer a demographic composition of male victims of IVP. White, middle aged males had the highest percent of being a victim of IPV by their spouses (female partner). Over a quarter of the male victims were abused by a significant other. The male victims' ages on the date of incident ranged from 18 years of age to 51 years of age with the average age being 34.82 years old. The male victims were mostly subjected to physical abuse by the suspects. Male victims were physically abused by the suspects who used their own body to inflict injury on them by hitting the male victims with their hands. Male victims were also pushed or shoved by the victims. Although the male victims were injured over most of the time from IPV, almost a third of the men refused to receive

medical treatment. In most of the male victims' cases, it was unknown whether or not drugs and alcohol were used. This demographic composition is consistent with Busch and Rosenberg's (2004) study who reported the number of women charged with IPV has heightened with the increasing awareness of women as perpetrators and not solely as the victims This major finding is also similar to the Department of Justice's 2009 report that 117,210 men were physically assaulted by an intimate partner, with women being the major perpetrator, representing 18% of all IPV victims for that year (Truman & Rand, 2010).

The second major finding of this study relates to the types of resources that are being offered to male victims of IPV. Police officers responding to IPV calls did not offer male victims resources for IPV counseling or IPV hotlines. The majority of male victims did not have a temporary restraining order (TRO). Police officers did not even mention getting a restraining order to most of the male victims of IPV. This suggests that law enforcement agencies and society as a whole are still not equipped to establish assistance to male victims of IPV. This coincides with the study by Tsui, Cheung, and Leung (2010) who reported men have difficulty finding resources that are geared towards the male population in relation to being an IPV victim. Males who are victims of IPV by women often turn to family, friends, online resources, mental health professionals, DV agencies and law enforcement (Douglas et al., 2012). Men avoid seeking assistance for their victimization out of fear of being laughed at, blamed for the abuse, or sent to a batter's program (Hines et al., 2007). Hines and Douglas (2011) found that 95.3% of male victims of IPV who sought help found that

a DV agency is biased against men: 78.3% will only help women, and 63.9% accused the males of being the perpetrator. In addition, the current judicial system favors women when it comes to receiving a TRO. This major research finding is similar to the results of Muller, Desmarais, and Hamel's (2009) study, suggesting that plaintiff sex plays a primary role in predicting whether judges grant or deny requests for restraining orders in certain cases. Male victims of IPV are still not granted the same protection of the law compared to women.

The third major research finding addressed whether or not the male victims had a history of IPV. Men have a tendency not to report to law enforcement agencies that they are being victimized by a woman. Yet, in Pennell and Burke's (2002) study, more than half of the men reported having a history of intimate partner violence. Men may not pursue help for their victimization because of shame, embarrassment, denial, fear, and stigmatization that they feel about being victims of IPV (Cheung & Leung, 2010). In the 1970's, grassroots efforts helped to establish several types of emergency services for battered women who were looking for a safe haven from their abusers or trying to escape from abusive partnerships. They now have access to over 2,000 DV agencies across the United States (Hines & Douglas). Yet, these agencies have been criticized for not providing services to other vulnerable populations such as male victims (Sherman & Berk, 1984).

The last major research finding examined the presence of children during the IPV. The male victims stated that their children were present practically half of the time when the abuse occurred. This is of particular importance because Puccia et al.

(2012) stated that young children who are exposed to intimate partner violence in the early stages of their lives can provoke a strong sense of helplessness and fear which is offhandedly connected to the crushing of the children's trust in the parents' ability to protect them from harm. Trauma for children as related to bearing witness or being a victim of IPV can lead to emotional-disconnect, aggression, hyper arousal, attention problems, and psychotic disorders that can alter them for the rest of their lives (Harris, et al., 2007).

Limitations

This study had a fair response rate for victims of intimate partner violence, but there were also limitations. There were only 73 male victims of intimate partner violence in this study. This study only includes responses from male victims of IPV from one county in California and therefore is not able to reflect all California counties.

Another limitation to this study was that the data were collected from a secondary analysis. In other words, the original study and analysis have been conducted by another researcher for another purpose (Cnossen, 1997). As such, the researcher of the current study was not able to ask targeted questions that might have provided even greater insight regarding the experiences of males as victims of intimate partner violence.

Literature on male victims of intimate partner violence and women as perpetrators were also a limitation of this study. More research needs to be conducted

to gain a better understanding of male victims' experiences with intimate partner violence.

Implications for Practice, Policy and Future Research

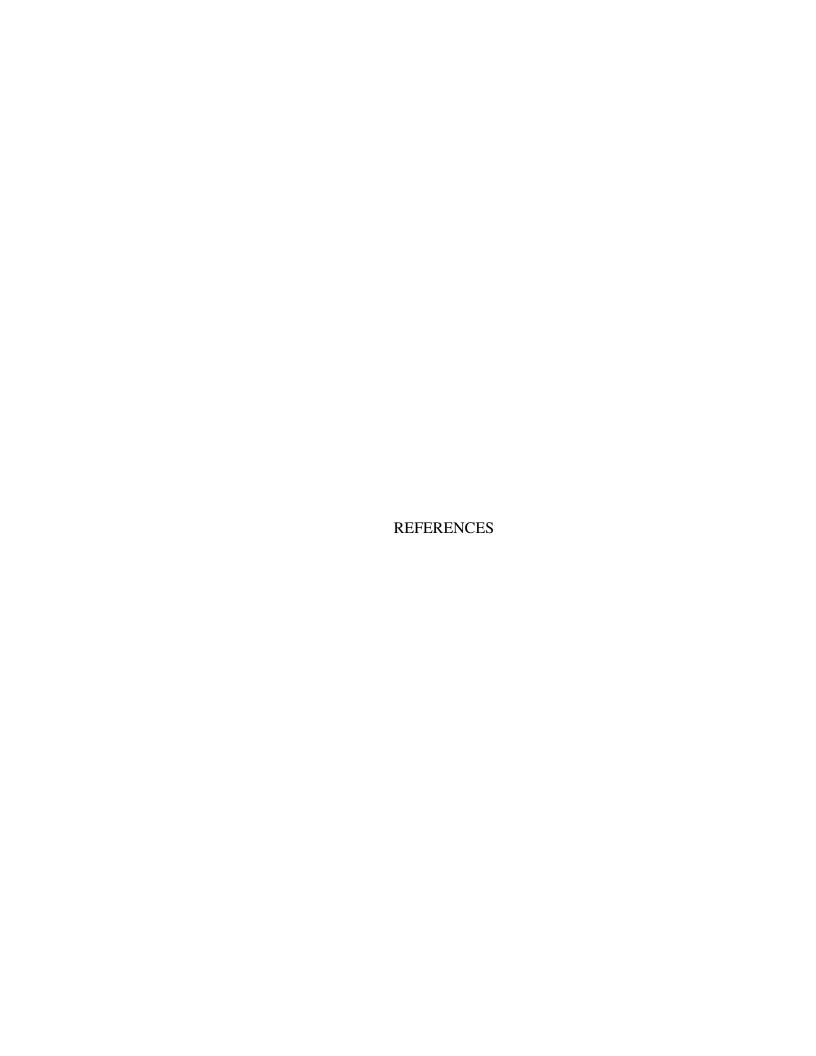
The research findings offer several implications for social work practice and policy. First, intimate partner violence against men needs to be addressed as a social issue. More awareness of this social problem has brought scant attention to this issue over the decade. Just like the grassroots efforts from the 1970s that shed light on domestic violence against women, effort needs to progress in order to shed light that males can be and have been victims of intimate partner violence. Gender should not be an issue as it pertains to being a victim of IPV. Intimate partner violence is not a gender issue, but a human issue (Hines & Douglas, 2011). Literature and counseling for perpetrators and victims of IPV should be changed in order to address both genders. Douglas and Hines (2011) stated that agencies dealing with victims of IPV need to develop services to include vulnerable populations such as males, the elderly, and the Lesbian, Bisexual, Gay, Transgender (LGBT) community. Efforts need to be made in the school curriculum to bring awareness that males can be a victim of IPV and women as the perpetrators of their abuse.

Secondly, professionals such as law enforcement, social workers, and counselors who are first responders to victims of intimate partner violence need to be educated that women can be the abusers and men can be the victims of IPV.

Professionals dealing with this vulnerable population should dismiss their own biases and assumptions of who a victim of IPV standardly is. Our current judicial and

legislative systems need to implement policies that protect the victim of IPV regardless of gender.

Therefore, social workers need to advocate for male victims of IPV in order for the male victims to receive similar resources that are readily established for women victims of IPV. Social change is long overdue to bring awareness to the plight of male victims of intimate partner violence. More research is needed across the country in order to gain accurate numbers on this social epidemic that male victims of IPV are facing. Law enforcement agencies throughout the country should collaborate with IPV agencies in their community to document the number of male victims of IPV and make changes within their agencies to address the needs of male victims of IPV as well as the women who abuse them.



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