

Expert Q&A

Topic: Assisting Male Victims of Domestic Violence and Sexual Abuse

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Host: Jim Struve, LCSW

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Length: 1 hour

Briefly, please share with the audience your history of working with the issues we are discussing today and anything that might be helpful to know about your personal experience with these issues.

I would like to share some self-disclosure about my personal and professional journey becoming involved with the issues around male sexual violence.

I was 33 years old when I first acknowledged that I was a sexual trauma survivor. This was after having worked with male sexual violence victims professionally for 7 years.

At age 27, I was hired by the county child DCFS agency in Atlanta as a food stamp worker. After 6 months, I was transferred to the Emergency Protective Services Unit, where I worked for the next 4 years. My primary duties involved investigating cases of alleged physical and sexual abuse of boys.

At age 31, I was recruited to become the male social worker for a residential youth home; I was responsible for three cottages of boys, ages 6–18, almost all of whom were victims of physical and/or sexual violence.

Despite having no prior professional training to work with male survivors of sexual violence, I excelled in both of these job settings. I realized I had finally discovered the career I wanted to pursue. So, I enrolled in a Social Work program to secure a master of Social Work degree.

After receiving my M.S.W., I began to volunteer—in addition to my regular job—with an agency that provided services for adult sexual trauma survivors. All of their services were focused on female survivors. Because of my awareness that males were also victims of sexual violence, I successfully persuaded the agency to expand their services to include male survivors. I was recruited to lead a weekly male survivor group.

About 8 months after beginning to work with these men, I had a startling realization during one session: I heard a group member articulate aspects of his story that closely matched my own life!

While I had never forgotten the things that happened in my life, I had never before considered that my narrative constituted sexual violence.

I realized that I had become the victim of sexual abuse at a very young age by a neighbor boy; the abuse continued throughout much of my childhood. By the time I reached adolescence, the overt sexual abuse ended, but was replaced by relentless sexual bullying that continued throughout most of the rest of my youth.

Because I had no reference point for a childhood in which I was not the target of sexual violence, I had grown into adulthood accepting my experiences as “normal.” In addition, the abuse and bullying had

also occurred in secrecy, and it never occurred to me to disclose to anyone. I had no reference point for other males with my experience and no expectation that anyone could help me.

By the time I began working with male victims at age 26, I had completely moved my own experiences into a background frame—and even my work with male victims did not move my experience into the foreground of my awareness. That so many aspects of my life were not working well finally made sense within the context of this new awareness about the extent of sexual violence I had experienced.

I share this personal information about myself for two reasons:

(1) My narrative is not unusual for male survivors with whom I have worked; they didn't truly forget the sexual violence they experienced, but they never perceived it as abuse or assault until something jolted them into awareness. Meanwhile, they had adapted survival strategies that allowed their lives to have the appearance of functionality.

(2) It is not unusual that many of us working in the fields of sexual violence may also be survivors ourselves. If so, we must address our own healing.

At age 33, I learned that there were very few services available to help males with my experience; therefore, I devoted the rest of my life to expanding awareness and services for males who have been victimized by sexual violence as adults or during their childhood.

What are the current statistics for the estimated frequency of domestic and sexual violence involving male victims?

Male Victims of Sexual Violence

- 1 in 3 women and 1 in 4 men have been victims of physical violence by an intimate partner within their lifetime.

NCADV. (2015). Domestic violence national statistics. Retrieved from www.ncadv.org

- 16% of males (1 in 6) are sexually abused by the age of 18.

U.S. Centers for Disease Control and Prevention (CDC) (2005 study)

- Adult males constituted 38% of incidents of rape and sexual assault among a survey sample of 40,000 households.

2016 National Crime Victimization Survey

- Only 23% of rapes and sexual assaults are reported to police; frequency of reporting by males is less.

National Crime Victimization Survey (NCVS) – 2016

Sexual & Gender Diverse Male Victims of Sexual Violence

- CDC's 2010 National Intimate Partner and Sexual Violence Survey revealed:

- 26% of gay men and 37% of bisexual men experience rape, physical violence, or stalking by an intimate partner, compared to 29% of heterosexual men.
- 40% of gay men and 47% of bisexual men have experienced sexual violence other than rape, compared to 21% of heterosexual men.
- The 2015 U.S. Transgender Survey found that 47% of transgender people are sexually assaulted at some point in their lives.
- Rate of sexual assault among transgender people of color:
 - American Indian (65%)
 - Multiracial (59%)
 - Middle Eastern (58%)
 - Black (53%)

Why are the statistics about domestic violence and sexual trauma lower regarding male as compared to female victims?

How we ask questions—or even what we ask about—affects data collected.

Historically, we have assumed that females are the victims of sexual violence and males are the perpetrators...

...we have not asked males about sexual violence.

...individual providers and agencies need to be gender neutral, ask the same questions of males and females.

Males have historically been hesitant to disclose sexual victimization or they do not perceive themselves to be victims of “abuse” or “assault”...

...reframing the questions may increase disclosure by males.

...definitions of sexual violence should include “non-consensual or coercive sex,” “sex involving violence,” or “violations of boundaries involving any part of the physical body.”

Historically, state laws defined rape and sexual assault in ways that limited reporting and intervention for male sexual violence...

-e.g., rape often limited to vaginal penetration.

-e.g., statutes often made it difficult to intervene for adolescent male victims of sexual violence.

Many states have now changed statutes to be gender inclusive.

FBI data collection has historically not included male victims:

Until 2012: “The carnal knowledge of a female forcibly and against her will.”

Since January 1, 2013: “Penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the victim.”

This change in data collection will hopefully allow more accurate information about male sexual victimization.

The 2010 National Intimate Partner and Sexual Violence Survey (CDC) added a category of sexual violence called “being made to penetrate.” This definition allows identification of victims who were forced to penetrate someone else with their own body parts, either by physical force or coercion, or when the victim was otherwise unable to consent.

- Inclusion of categories of nonconsensual sexual contact resulted in gender equalization.
- Results of survey sample: 1.27 million women and 1.267 million men acknowledged sexual victimization.

Males frequently do not realize that services are available for them.

- Agencies that provide sexual violence services are perceived to be for females only; sometimes agencies deny services to males.
- Male sexual violence is largely invisible in media and movies.
- Males often fear their disclosure of sexual victimization will be heard as a disclosure of being an offender.

Presenter comments:

- Much of the lower rate of identification of male sexual violence is the result of reporting and perception that services are not available for males.
- I have worked as a manager in a number of treatment facilities. When I oriented the staff to ask questions that were gender inclusive, in each situation, the number of males who disclosed sexual victimization became almost equal to the reporting rate of females.
- I am the manager for the Weekends of Recovery program, which provides healing retreats for male survivors of sexual victimization during childhood or as adults. Anecdotal feedback from 1,500 males who attended our programs identified an average of 20 years between the time of sexual trauma and seeking help to address their trauma in our sample of male survivors.

There are a number of myths about sexual violence involving male victims. What information can you provide to help debunk the most significant of these myths?

There are a number of myths that overshadow truths about male sexual trauma survivors.

This presentation will address four TRUTHS that dispel four myths.

Truth #1: Boys AND adult males may be victims of sexual violence

There is much denial or minimization about males as victims.

- “Male” and “victim” are commonly perceived as oxymorons.

- The prevailing attitude is for a man who is victimized to “suck it up,” “just get over it,” “rise above the trauma.” Unfortunately, this attitude is a common response by adults, allies, and even some providers when a male discloses sexual victimization.
- The vulnerability of males with special needs or who are institutionalized is overlooked.

Female perpetration frequently remains invisible because gender bias masks the reality that males can be victimized by a female, and cultural norms dismiss the concept of females as offenders.

- Female offending of young boys most often occurs within the context of boundary violation during hygiene or physical care, e.g., parent, care worker, babysitter, etc.
- Boys are vulnerable to becoming surrogate partners for mothers who are without an adult partnered relationship, which might involve violations of physical boundaries.
- Adult women sometimes engage in sex with adolescent boys, e.g., teachers, mentors, friends of an older sibling, etc.
 - Prevailing social norms may frame this as a prize for an adolescent boy to “score” with an older woman.
 - Media reporting frequently describes these incidents in the language of an “inappropriate relationship” vs. sexual assault.

Truth #2: Arousal or ejaculation does not imply consent

There is a lack of awareness that physiological functions of the body may respond even in situations of fear and violence.

Male genitalia are displayed externally, so arousal is visible.

- The male victim may struggle with...
 - ...dilemma of whether arousal and/or ejaculation implies consent.
 - ...confusion and shame about betrayal from his own body.
- Manipulative offenders will communicate messages that arousal and/or ejaculation implies...
 - ...consent, or
 - ...pleasure;
- Both to intimidate the male victim or reinforce silence.

Arousal and/or ejaculation may raise fears of sexual orientation.

Truth #3: Sexual violence does not make a male survivor gay, but it does create disruptions to sexual and gender identity, particularly if the offender is also male.

High likelihood that male will be sexually victimized by a male because most offenders are male.

- When females are sexually assaulted by a male, it is not a common focus of concern whether this sexual violence made her heterosexual.
- Yet males who are sexually assaulted by a male face three dilemmas—
 - If the male victim is heterosexual, there is fear that sexual violence might make him other than heterosexual.
 - If the male victim is sexually or gender diverse, there is consternation about whether...
 - ...their sexual diversity is the result of their sexual victimization.

- ...they were targeted for sexual victimization because of their diversity.

In the context of same-sex victimization, the male victim is sometimes “feminized” as part of the sexual violence. This may contribute to subsequent gender distress.

- Females generally are not “masculinized” by their male offender.

Truth #4: Males who experience sexual violence are not inherently doomed to become sexual offenders.

There is a strong cultural association between male sexual victimization and male sexual offending. That same linkage is not applied to female survivors. Therefore—

- Males may fear there is a ticking bomb inside of them.
- Male survivors are more likely to avoid physical contact with their own children, fearing such interactions will be judged.
- Partners, allies—and even providers—may assume the same.
 - Following disclosure of sexual trauma, others may have increased suspicion that contact between a male survivor and children may no longer be safe.

For information about Myths About Male Survivors:

<http://www.jimstruve.com/jimstruve/forms/Handout-MythsAboutMaleSA-Expanded%20Version.pdf>

A 3-part question: What things should providers be observant about when assessing for male sexual violence; what are some disguised clues; what are some of the ways that male sexual trauma survivors differ from female survivors?

There are a variety of features that should catch your attention when working with male clients. None of these are single indicators of sexual violence, but any of them may be clues of undisclosed sexual trauma; any of them may be predictable coping responses for either disclosed or undisclosed sexual trauma; and constellations of these features should increase alertness to the presence of disclosed or undisclosed sexual trauma.

Male survivors often have internalized overarching dynamics of isolation and shame.

- We are familiar with the “damaged goods” paradigm when applied to female survivors.
- Many males develop an armored encasement to protect themselves from the more core experience of damaged goods.
- This armor is composed of shame, denial, and/or minimization.
- It is important to be respectful of this protective armor and to develop a relationship with this part of the male survivor.

Sudden or unusual changes in behavior:

- E.g., drop in school performance, quitting youth group/sports/church, avoiding social contacts.
- Are often indicators that a male youth is exercising control to remove contact with the offender.

Male survivors usually exhibit a hyper-alertness to being in control.

Males are often on an extreme spectrum of power, either fearful of power or use power as a tool of control/intimidation.

- Important to use psychoeducational approach about compassionate/loving power.
- Power can be difficult for males whose physical stature is large.

Behaviorally pocketing at extreme of under- or over-achieving or fluctuating between those extremes.

- Difficulty regulating balance.
- Often disguised because over-achieving may be viewed as a positive trait of masculinity.

Hyper-masculinity—

- Attention to appearance to intimidate others (excessive muscle-building, tattoos and other body art, striving for an image of “bigness”—any of which may be viewed by outsiders as normative masculinity).
- Generous use of aggression—“justified” harm toward others they judge to be vulnerable (e.g., minorities).
- May be directed to harming animals, bullying perceived minorities, physical destruction/fire-setting.

Sometimes involves eating disorders to maintain physical appearance to which they ascribe image of masculinity.

Obsessive or addictive behaviors—many of these are confusing within the context of normative masculinity:

- Substance use
- Exercise (including weightlifting and endurance sports)
- Work
- Sexuality
 - May include sexually reactive or sexual re-enactment behaviors.

Risky behaviors—this symptom is often disguised/subjective because expectations for risky ventures may be viewed as normative masculinity.

- Dangerous physical activities.
- Extreme sports.
- An injury may be intentional or careless self-harm but camouflaged as normative masculine behavior.

Fear of bathrooms and locker rooms.

Males who are confused about their sexual and gender identity, behavior, expression—

- e.g., sexually or gender diverse male may question whether sexual trauma caused him to be other than heterosexual.
- e.g., a heterosexually identified man may struggle whether he is really straight if he experienced sexual violence from a male offender.

- Once his sexual trauma is disclosed, his female partner might be concerned that he is a ticking bomb to come out as other than heterosexual.
- Sexual expression may reflect learned homoerotic sexual practices.

Problems with friendships and intimacy in relationships—stoicism and avoidance of closeness are confusing within the context of normative masculinity.

- Hyper-sensitivity to boundaries in same-sex friendships.
- Sexualizing interpersonal contacts (energetic, verbal, and behavioral).
- Carelessness about physical boundaries.
- Avoidance and/or sexual dysfunction when relationship gains intimacy.

Chronic health issues or medical concerns not responsive to medical interventions.

- Encopresis at older developmental age.
- Somatic physical health issues.

For more information: <http://www.jimstruve.com/jimstruve/forms/Handout-CommonSymptoms-MaleSA.pdf>

Additional At-Risk Populations for Male Sexual Trauma

Listen for at-risk features as males share life histories and narratives.

Frequent or extended placement with caregivers, assumption that males can protect themselves.

- Babysitter, childcare agency, etc.
- Special needs service providers.
- Time in a group or residential settings (youth groups, camps, boarding schools, residential placement).

Immigrant populations' risk sex trafficking—

- Some reports suggest males may constitute as many as 4% of people who are sex trafficked.
- Labor trafficking is the most common image for males, but vulnerability may create opportunities to become victims of sexual violence as well.

Homeless populations—

- Youth may turn to sex for sale as a survival response.
- Global vulnerability for exploitation.

History of being picked as “special”—

- E.g., male chosen by teacher, coach, religious leader, neighbor, boss.
- Increased risk of involvement in being filmed.

Males who are sexually and/or gender diverse—in identity, behavior, and/or expression—

- Potential target of bullying or hate—may be disguised or invisible to others beyond the victim.
- E.g., images of sissy or non-conforming gender appearance.
- May be at risk for dangerous social networking if not safe to be open about diversity.

- Transgender individuals at increased risk.

What approaches and interview techniques are helpful for building rapport with male survivors of sexual violence?

When possible, do not rush into a checklist assessment approach.

- Use conversation and relational engagement.
- Reach beyond linear and cognitive.
- Men may disclose more when they are not responding to questions.

From the earliest contact, communicate hope:

- Healing is possible and messages of resilience.

Listen for spoken and unspoken influence of myths.

- Challenge myths by sharing truths.
- This may include psychoeducational.

Use metaphors vs. analysis to expand awareness.

Help men tolerate present tense focus:

- Which means juggling male attention on goals and finish line.

Pay attention to disguised dynamics of sexual trauma for males.

- E.g., sexual violence for males often occurs in settings external to the family—sports teams, youth groups, military, etc.
- Group members and/or leaders may be like family;
 - Therefore, dynamics of incest may prevail.

Assessment needs to address developmental factors related to sexuality and gender.

- Important to gather information about the intersection of sexual violence with developmental stage regarding sexuality and gender

For more information: Struve, Jim, Fradkin, Howard, and Beckstead, Lee. *Beyond the Gay/Straight Binary: Gender and/or Sexual Diverse Male Survivors*. In: Gartner, Richard (ED.): *Understanding the Sexual Betrayal of Boys and Men*. Routledge: New York.

Outline the most important best practices to assist this population.

Trauma is trauma—need competency with fundamental trauma-informed therapy skills.

- Beyond the core experience of trauma, a major difference in working with male survivors of sexual violence is HOW males respond to sexual trauma and the coping strategies they employ.
- Reflect dynamics of male socialization and gender norms of masculinity.

- Allies and even providers may also respond through the lenses of male socialization.

Gender norms of traditional masculinity—

- Attitude of “just get over it,” “suck it up,” “it will be less distressing if you don’t talk about it.”
- Therapy is for females, not males.
- Smart men can resolve their distress without help from others.

Shift clinical paradigm—

- Posttraumatic Stress INJURY vs. Disorder.

Adhere to an important ethical standard: DO NOT ENGAGE IN TRAUMA WORK IN ISOLATION

- Essential that you have peer support and forums for ongoing consultation (whether with peers, with a clinical supervisor, or through agency staff provisions)

Engage sexual trauma survivor in the process of determining therapeutic safety

- Do not assume what is safe for the male survivor.
- Establish “safe enough” vs. promising absolute safety.
- Teach the survivor how to live in a world in which safety may constantly be tested.

Integrate mindfulness skills into the therapeutic relationship.

Focus on somatic access to emotions:

- “Feelings” are just the names and labels we ascribe to physical body responses.

For more information: www.being-in-movement.com

Become acquainted with Best Practice Interventions.

Forensic Experiential Trauma Interview protocols (or FETI)

Trauma-Informed Approach and Trauma-Specific Interventions - SAMSHA (Substance Abuse and Mental Health Services Administration)

- Check website: samhsa.gov

Clinical literature about Complex Trauma (Chris Courtois)

- Many survivors of sexual trauma have long-term and chronic violence.
- Be especially aware of the intersection of domestic and sexual violence within the context of deprivation and neglect.

ACE’s Research (CDC: Acute Childhood Experiences)

- Check more recent results from Philadelphia ACE’s Study (2015) that addresses issues of inner city urban populations.

How do cultural issues—race, ethnicity, religion, ideology, etc.—influence working with male survivors?

An overarching problem in the field of trauma therapy and in our work with sexual trauma survivors:

- Most of the Best Practice and Evidence-Based interventions are rooted in a medical model paradigm and have emerged from work with predominantly white populations.
- Therefore, clinicians and trauma responders must exercise caution to scrutinize research through the lens of cultural bias or absence of application for culturally diverse sample populations.

As providers, we need to exercise cultural humility—listening to the client in the process of working with the client.

It is important for male survivors to explore what cultural features are the most significant influences in their life.

- White male survivors may be unfamiliar with this aspect of personal reflection about their lives.

A primary concern is the intersection of how masculinity is viewed differently based on racial/ethnic/religious influences.

- Important to talk with male clients about their perceptions of how norms within their cultures of race, ethnicity, religion, and ideology influence norms of masculinity

How these norms might impact...

- ...expectations of how a male should respond to adversity and victimization.
- ...the views of allies or providers within their support system.

Greater sensitivity should be given to engaging male survivors in descriptive narratives of CONTEXT in which...

- ...their sexual violence occurred.
- ...they have developed coping and survival strategies.
- ...their efforts for healing will occur.

Maintain frequent and ongoing feedback from a male survivor about how the therapeutic relationship and clinical work is being absorbed and filtered through the context of his cultural realities.

What are some useful resources for male survivors of sexual violence?

Organizational Resource

Men Healing

Weekends of Recovery/Days of Recovery

3-day healing retreats/single-day healing retreats

For more information and to sign up and stay informed: MenHealing.org.

Organizational Resources

Check websites for these organizations that have information and services for male survivors of sexual violence:

1-in-6

- 1-in-6.org

RAINN (Rape, Abuse & Incest National Network)

- RAINN.org

SNAP (Survivors Network for Those Abused By Priests)

- SNAP.org

MaleSurvivor

- MaleSurvivor.org

Book Resources

Fradkin, Howard. (2012). *Joining Forces: Empowering Male Survivors to Thrive*. New York: Harcourt.

Gartner, R. B. (2005). *Beyond Betrayal: Taking Charge of Your Life after Boyhood Sexual Abuse*. Hoboken, NJ: John Wiley and Sons.

Gartner, Richard. (2017). *Healing Sexually Betrayed Men and Boys: Treatment for Sexual Abuse, Assault, and Trauma*. New York, NY: Routledge.

Struve, Jim & Fradkin, Howard. *Empowering Male Survivors to Heal Through Community and Peer Connections*.

Gartner, Richard. (2017). *Understanding the Sexual betrayal of Boys and Men: the Trauma of Sexual Abuse*. New York, NY: Routledge.

Struve, Jim; Fradkin, Howard; and Beckstead, Lee. *Beyond the Gay/Straight Binary: Gender &/or Sexually Diverse Male Survivors*.

Hunter, Mic (1989). *Abused Boys: The Neglected Victims of Sexual Abuse*. New York, NY: Lexington Books.

Male survivors seem to access help at a lesser frequency than women. What are some ways that providers and agencies can improve outreach to male survivors?

Invest time and energy into how you or your agency can contribute to expanding visibility that males are also victims of sexual violence.

Include mention of services for male survivors in your literature and on your website.

Add volunteers to your intake and outreach services who are available to male survivors when they reach out for your services.

Contact media providers when they overlook or misrepresent news stories about male sexual trauma. Educate reporters or submit feedback to challenge distorted reporting.

What about working with male survivors in group modalities?

Whenever possible, it is very valuable to involve male survivors in group modalities.

Individual contact with male survivors is helpful, but less powerful for the important task of overcoming deep feelings of isolation and aloneness that most male survivors experience. It is important that male survivors have contact with other male survivors—it is the experience of meeting other men that is so healing.

Our Weekends and Days of Recovery bring together 28 male survivors; perhaps the most powerful moment of the retreat is when we first begin and the men look around the room to see so many others who share their own experience.

Create opportunities for group involvement for male survivors whenever possible; or encourage men to access online networking; or alert men to resources like the Weekends and Days of Recovery (menhealing.org).