Exploring Male Students’ Lived Experiences of Intimate Partner Abuse from a Female Partner and Help-seeking

By

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Abstract

This research investigated how male university students who have experienced abuse from a female intimate partner made sense of this abuse and their help seeking experiences. Students who indicated having experienced some form of Intimate Partner Abuse (IPA) were identified through a screening questionnaire and invited to take part in this study. In-depth interviews with seven students were analysed using interpretive phenomenological analysis. This analysis identified two themes related to the men’s experiences of IPA and help seeking. The first theme of stuck in the abusive relationship comprised four subthemes, each representing a barrier the men faced which kept them in an abusive relationship and prevented them from acting to end the abuse or from seeking help. These barriers were 1) the emotional investment the men had in the relationship, 2) living in an all-encompassing controlling environment, 3) their sense of responsibility to shoulder the burdens of the relationship, and 4) their understanding of abuse in relationships. The second theme moving on from the abuse described the process of overcoming and moving past these experiences. It comprised three subthemes: 1) how the men overcame the barriers and began moving on, 2) the slow process of supported recovery and learning, and 3) the existence of ongoing impacts related to the abuse. These findings add to the growing body of literature on IPA which has found that men can be the victims of abuse which can be serious, have lasting impacts, and for which they have difficulty seeking and receiving help. The need for policies and services which can overcome the barriers men face and that address their needs are discussed. This is the first qualitative research looking at men’s IPA victimisation with a student sample and future research is needed which looks at this phenomenon with students across countries and cultural groups and in relationships in which IPA was bidirectional.
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Table of Contents

Abstract .................................................................................................................................................. III
Acknowledgements .......................................................................................................................... V
Table of Contents ............................................................................................................................... VII
List of Tables ........................................................................................................................................ IX
List of Appendices ............................................................................................................................. XI
Introduction .......................................................................................................................................... 1
   Prevalence of Male Victimisation ................................................................................................. 2
   Consequences of IPA Victimisation for Men .............................................................................. 5
   Help-seeking in Men Who Experience IPA .................................................................................. 11
Study Aim ........................................................................................................................................... 14
Method ................................................................................................................................................. 15
   Study Design ............................................................................................................................... 15
   Procedure ..................................................................................................................................... 16
   Screening Measures ..................................................................................................................... 19
   Interview Schedule ....................................................................................................................... 20
Data Analysis ........................................................................................................................................ 21
Participants .......................................................................................................................................... 26
Results .................................................................................................................................................. 29

1. Stuck in the Abusive Relationship .............................................................................................. 29
   1.1 Emotional investment in the relationship ............................................................................. 30
   1.2 An all-encompassing controlling environment .................................................................... 32
   1.3 Shouldering the burden ......................................................................................................... 36
   1.4 The men’s understanding of abuse ..................................................................................... 39

2. Moving on From the Abuse ......................................................................................................... 42
   2.1 Overcoming the barriers to moving on ............................................................................... 43
   2.2 Slow process of supported learning and recovery .............................................................. 44
   2.3 Ongoing impact of abuse ....................................................................................................... 48

Discussion .......................................................................................................................................... 50

Summary of Findings ......................................................................................................................... 51
   Stuck in the abusive relationship ............................................................................................... 51
   Moving on from the abuse ........................................................................................................... 57

Recommendations for Policy and Practice .................................................................................... 59

Limitations and Suggestions for Future Research ........................................................................... 61

Conclusion .......................................................................................................................................... 63
References........................................................................................................................................... 65
Appendices........................................................................................................................................ 75
  Appendix A .................................................................................................................................... 75
  Appendix B..................................................................................................................................... 76
  Appendix C ..................................................................................................................................... 85
  Appendix D ..................................................................................................................................... 89
  Appendix E..................................................................................................................................... 91
  Appendix F..................................................................................................................................... 92
  Appendix G.................................................................................................................................... 98
  Appendix H................................................................................................................................... 100
  Appendix I.................................................................................................................................... 104
  Appendix J.................................................................................................................................... 105
  Appendix K.................................................................................................................................... 107
  Appendix L.................................................................................................................................... 108
List of Tables

Table 1. Interview schedule outlining key questions used to explore the areas of interest ..... 22

Table 2. Participant demographic and relationship information .................................. 28

Table 3. Summary of themes and subthemes .................................................................... 30
List of Appendices

Appendix A: Research flier ..............................................................................................................75
Appendix B: Online questionnaire ..................................................................................................76
Appendix C: Online questionnaire Information and Consent sheet ...........................................85
Appendix D: Online questionnaire debriefing statement ............................................................89
Appendix E: Email invitation .........................................................................................................91
Appendix F: Interview information, consent, and request for information form ......................92
Appendix G: Interview debrief form .............................................................................................98
Appendix H: Full interview schedule ...........................................................................................100
Appendix I: Example excerpt of initial noting .............................................................................104
Appendix J: Example of an emergent theme with its constituent codes, their descriptions, and a reduced selection of quotes ..................................................................................105
Appendix K: Theme diagram for an individual participant .........................................................107
Appendix L: Final theme diagram ...............................................................................................108
Introduction

Intimate Partner Abuse (IPA) is a serious issue which can have a raft of short and long-term negative impacts across all domains of a person’s life including their physical, mental, social, and financial wellbeing (Krug, Dahlberg, Mercy, Zwi, & Lozano, 2002). It is also a widespread problem which has been estimated to cost between one and two percent of a country’s Gross Domestic Product annually (Duvvury, Carney, & Raghavendra, 2013). In New Zealand (NZ) this cost has been estimated at $2.7 to $5.4 billion annually with most of this cost born by the victims of IPA through the pain and suffering it causes (Kahu & Snively, 2014). Abuse has been identified across all types of intimate relationships and can occur regardless of whether a couple are dating, cohabiting, or married (e.g. Moffitt, Caspi, Rutter, & Silva, 2001). It can affect people both during and after a relationship and has been identified across all demographic lines including age, gender, sexual orientation, and socioeconomic status (e.g. Archer, 2000; Krug et al., 2002; Laskey, Bates & Taylor, 2019). IPA is also not limited to physical violence and can take a many different forms. While there is disagreement over how exactly to conceptualise these forms (e.g. Follingstad, 2007) IPA is usually grouped into the three broad categories of physical, sexual, and psychological abuse. This categorisation is also recognised in NZ law (Ministry of Justice, 2018). To account for the many forms IPA can take and its widespread nature a broad and inclusive definition will be adopted for this study and IPA will be defined here as “any form of aggression and/or controlling behaviours used against a current or past intimate partner of any gender or relationship status” (Dixon & Graham-Kevan, 2011, p. 1445).

The widespread and harmful nature of IPA has led to it being conceptualised as a major public health issue both internationally by organisations such as the World Health
Organisation (WHO; Krug et al., 2002) and the Centers for Disease Control and Prevention in the United States (US; Smith et al., 2018) and domestically in NZ across a range of government ministries (e.g. Fanslow & Kelly, 2016). Despite the recognition that IPA is a serious problem which can impact anyone it is often conceptualised as a largely gendered phenomenon of which women are primarily the victims and men are primarily the perpetrators (e.g. Krug et al. 2002; Fanslow & Kelly, 2016).

Researchers who take this gendered perspective view IPA as primarily a product of the wider patriarchal sociocultural context in which male dominance over women is valued and normalised (Bell & Naugle, 2008). Within this system, men are said to learn to use IPA as a means of establishing and reinforcing dominance and control over their female partners (Bell & Naugle, 2008). To support this position researchers often cite police, court, and shelter records which find that in 80-99% of cases of IPA the perpetrators are men and the victims women (Dobash, Dobash, Wilson, & Daly, 1992; Straus, 2012). However, other researchers have identified a number of reasons why these sources of data significantly underreport the prevalence of male victims of female perpetrated IPA. These reasons include the same use of IPA being more likely to result in a male perpetrator being arrested and charged (Shernock & Russell, 2012), a greater reluctance in men to seek help from official sources (Straus, 2012), and agencies, such as shelters, who either do not cater to males victims of IPA or treat male victims as perpetrators (Cheung, Leung, & Tsui, 2009; Douglas, Hines, & McCarthy, 2012).

Prevalence of Male Victimisation

In contrast, it has been argued that research which asks both men and women about their involvement in perpetration and victimisation IPA, and which uses behaviourally descriptive items that are framed in the context of conflict between partners instead of crime
or health concerns is best suited to gaining an understanding of the prevalence of IPA (Esquivel-Santoveña & Dixon, 2012). When applied to physical IPA, studies which adopt these methods consistently find higher rates of IPA victimisation in general and for men in particular (Archer, 2013; Esquivel-Santoveña & Dixon, 2012). In fact, since researchers began using this approach in the mid-70s over 200 empirical studies and more than 70 reviews have reported that men are just as likely as women to experience acts of physical IPA from their opposite-sex partners (Fiebert, 2014). Similar findings have been reported when applying this approach to acts of psychological IPA, with studies tending to find equal or in some cases higher rates of female perpetration or male victimisation (e.g. Black et al., 2011; Romans, Forte, Cohen, Du Mont, & Hyman, 2007). While most studies looking at IPA rates are conducted in the US, studies in New Zealand have also found high proportions of male victims, including two longitudinal studies (Fergusson, Horwood, & Ridder, 2005; Moffitt et al. 2001) and the New Zealand Crime and Safety Survey (NZCASS; Ministry of Justice, 2014). The NZCASS asked a representative sample of 7000 participants in New Zealand aged 15 years and above about their IPA victimisation from a current partner and found that men made up 40% of those reporting physical and 55% of those reporting psychological IPA victimisation. While men are consistently found to experience sexual IPA at lower rates than women (Carney & Barner, 2012) they still make up a substantial minority of victims, for example, the NZCASS found that men made up 20% of those who reported experiencing a sexual offence from an intimate partner (Ministry of Justice, 2014).

These studies highlight that men as a group make up a significant proportion of those experiencing IPA. Within this group, young people are consistently found to be at an increased risk of victimisation (Archer, 2000). This holds true for New Zealand, where the NZCASS found that people aged 15-29 made up 36% of those experiencing IPA (Ministry of Justice, 2014). This may explain why university students, who tend to be younger, report high
rates of IPA victimisation. In their review of 249 articles reporting on prevalence rates of physical IPA victimisation, Desmarais, Reeves, Nicholls, Telford, and Fiebert (2012) found a pooled prevalence rate of 33.2% for male students reporting physical IPA victimisation over the past year. This contrasts with the pooled prevalence rate of 18.1% for men reporting past year physical IPA victimisation in studies involving nationally representative samples (Desmarais, et al. 2012). Similarly, high prevalence rates for IPA victimisation have been found by Straus and colleagues as part of the International Dating Violence Study (IDVS) which measured self-reports of IPA perpetration and victimisation in students from 68 universities across 32 countries, including New Zealand (e.g. Straus, 2008). In one analysis of the IDVS dataset, Straus (2008) looked at responses from 4,239 students and found that 31.2% of women reported having used any form of physical IPA against their male partner in the last year. While a majority of these involved ‘minor’ acts, for example slapping or throwing something that could hurt, 10.8% of women reported having used at least one form of ‘severe’ physical act, such as being burned, kicked, or choked (Straus, 2008). The IDVS data also points to high levels of sexual IPA with male past year victimisation rates of 22% for being verbally coerced into sex and 2.8% for being physically forced to have sex with their female partner (Hines, 2007). These rates are similar to self-reported female perpetration rates 19.6% for verbally coerced sex 1.8% for physically forced sex (Gámez-Guadix, Straus, & Hershberger, 2011). Rates of reported psychological IPA victimisation are also very high in this student population with around 75% reporting having experienced some form of psychological IPA in the past year (Sabina & Straus, 2008).

Taken together, these studies suggest that men make up a significant proportion of those experiencing IPA and that of these, young men in particular experience high rates of IPA. These studies are limited however in that they give no indication as to the consequences and context surrounding these reported acts.
Consequences of IPA Victimisation for Men

Researchers who take a gendered perspective on IPA have argued that the high rates of men’s victimisation need to be considered in context, and that men’s experiences of IPA do not represent an issue which requires a large allocation of resources at a policy or service level (e.g. Johnson, 2006). The conclusions drawn by Dobash and Dobash (2004), who conducted a mixed-method study involving separate interviews with 95 heterosexual couples about their experiences with IPA, support this view. Based on their results they concluded that when women use physical violence it occurs in the context of self-defence and that men are unlikely to be affected by women’s use of violence. These conclusions may not generalise to the majority of men who report IPA from a female partner however, as Dobash and Dobash (2004) used a sample of men convicted for IPA perpetration and their partners.

In contrast to the conclusions of Dobash and Dobash (2004), research using more representative samples has found that not only do women more commonly report perpetrating acts of IPA for reasons other than self-defence (Whitaker, 2013) but that these acts can have serious consequences for the men who experience them (e.g. Coker, 2002). Several studies have been conducted which indicate a relationship between IPA victimisation in men and a range of negative mental and physical health outcomes. While these studies show that men on average are less likely to experience negative consequences they still make up a significant minority and the IPA that they do experience can have a severe impact on them. One commonly investigated consequence of IPA is that of physical injuries; for example, Archer (2000) conducted a meta-analysis using 82 studies looking at sex differences in the use of physical IPA towards a heterosexual partner and rates of injury. He found that while women were more likely to report being injured by their partners men still made up 38% of those
Injured, representing a large minority (2000). Beyond looking at the proportions of those experiencing injuries, Chan, Straus, Brownridge, Tiwari, and Leung (2008), who used a sample of the IDVS database, reported that 7.3% of men in the median sample country reported having experienced injurious assault from an intimate partner. The reported rate in the New Zealand sample of the IDVS was slightly higher, with 9.7% reporting having been injured by their partner (Chan et al., 2008).

Using a broader focus, Coker et al. (2002) analysed data from a nationally representative survey of 16,006 men and women in the US to look at negative physical and mental health outcomes after experiencing physical and/or psychological IPA. They found that compared to those who had not experienced IPA, men who experienced either physical or psychological IPA involving an abuse of power or control were generally between 50-100% more likely to report poor health, meet a cut-off for depression, and experience heavy alcohol or other drug use. They were close to two and a half times more likely to experience a debilitating injury when exposed to physical IPA, and close to three times more likely to report chronic mental illness when exposed to abuse of power and control. These chronic conditions were two and a half to three and a half times more likely to interfere with their daily function when experiencing either of these types of IPA. They found that greater frequency of either form of IPA was associated with worse outcomes. Two studies conducted in New Zealand have also reported a connection between IPA victimisation and a range of negative outcomes for young adult males (Fergusson et al., 2005; Magdol, Moffit, Caspi, Newman, Fagan, & Silva, 1997).

These findings suggest that men who experience IPA are more likely to experience a range of negative physical and mental outcomes when compared to those who have not had these experiences. It also demonstrates that the more instances of IPA men experience the
greater the impact and that although physical IPA remains a large focus in the literature, psychological abuse can also produce a number of negative outcomes. Due to the cross-sectional nature of these studies however it is difficult to draw detailed conclusions about how experiences of IPA are related with these negative outcomes.

In his influential work creating an IPA typology, Johnson (2006) has argued that while men may experience IPA which can be severe and associated with negative consequences, they rarely experience the type of abuse which is serious enough to be addressed by policies and services (Johnson, 2006). He argues that studies, such as those mentioned above, which use randomly selected, large survey data, capture a form of IPA which he terms Situational Couple Violence (SCV). SCV is said to arise from stress and conflict in a relationship, equally affects both sexes, is often bi-directional, and largely involves minor forms of violence which may escalate to more severe or even life-threatening forms of violence in rare cases. He contrasts SCV with Coercive Controlling Violence (CCV) which occurs in the context of one partner trying to gain control or power over the other, is mostly unidirectional, and involves a broader range of forms of abuse which escalate more frequently and are more frequently severe. He argues that men are rarely the victims of CCV and that therefore the continued primary focus of research on female victims of IPA is justified.

Johnson’s typology has been criticised however for using samples drawn from women’s shelters to inform his conclusions about the gendered nature of CCV (e.g. Hines & Douglas, 2010). Very few studies have been conducted which look at an equivalent group of men. A series of ground-breaking studies conducted by Hines and Douglas using a sample of 302 men seeking help for intimate partner abuse have highlighted that, regardless of the prevalence, men can nevertheless be the victims of abuse which is varied and severe enough
to require the use of support services (e.g. Hines & Douglas, 2010; Douglas & Hines, 2012). Their US-based study recruited men who had experienced some form of physical IPA, through sources including an IPA helpline specialising in male victims, as well as through online resources, newsletters and mailing lists addressing IPA and men’s issues. The men completed several measures designed to assess IPA over the past year and mental health. All the participants had experienced some form of psychological IPA and 96% had experienced severe psychological aggression, such as their partner destroying something belonging to them or threatening to hit or throw something and 93% experienced controlling behaviours. All had experienced some form of physical IPA, 90% had experienced severe physical IPA, and just over half had experienced physical IPA which was deemed very severe, such as being choked or beaten up. Three quarters had experienced an injury and 35% had experienced a severe injury, such as a broken bone or losing consciousness. 23.5% reported a mental illness diagnosis, of whom 40.8% reported the onset occurring after the abuse. These findings suggest that men can experience intimate relationships in which they are the victims of a range of different forms of abuse which can be severe in nature.

Qualitative research with men who have experienced IPA has further added to these findings by providing rich data on men’s experiences with abuse and what this is like for them. A study using phenomenological analysis by Morgan and Wells (2016) with seven men from the UK who were recruited through men’s IPA support groups found that the men they interviewed had experienced a range of different forms of abuse. These forms of abuse were not experienced as individual acts and instead formed patterns in which the men experienced isolation and control. The control they experienced extended to being controlled through their children and through the use of stereotypes and biases about male victims by their partners to make false allegations against them to external parties such as the police or school administrators. Leveraging stereotypes about men to manipulate the legal and administrative
systems is known as legal and administrative abuse and is a form of IPA which has been identified in a number of qualitative studies looking at male victims and is an example of how qualitative research can provide novel insights into ways that men experience abuse.

Qualitative work has also provided insights into some of the patterns and dynamics of abuse that men can experience. Migliaccio (2002) reported a ‘honeymoon’ phase which precedes the onset of the cycle of abuse and involves an initial stage in which the partner is loving and during which the future victim forms a close attachment to their partner. Following a period of stress or a significant commitment, such as marriage, however, the abuse emerges and progresses (Migliaccio, 2002). Machado, Santos, Graham-Kevan, and Matos (2016) who conducted interviews with 10 Portuguese men recruited through domestic violence agencies and the legal system also highlighted how abuse can arise around particular life events or activities which require negotiation, such as housework. They also identified a cycle of abuse involving increasing tensions, periods of acute violence, often escalating from non-physical to physical and finally, attempts by the abusing partner to make up for the behaviour (Machado et al., 2016).

Qualitative research has also been important in highlighting how abuse can contribute to a range of consequences. Using a phenomenological approach Lien and Lorentzen (2019) analysed interviews from 18 men in Norway and described how living with the abuse they experienced from their partners had led to exhaustion, depression, and post-traumatic stress disorder (PTSD) and that many of the men reported a sense of loneliness after having been isolated through control. They also highlighted how the ridicule and humiliation they experienced led to feelings of worthlessness and social anxiety as well as thoughts of, and attempts at, suicide. Finally, feelings of guilt, shame, and self-blame were reported as responses to the abuse (Lien & Lorentzen, 2019). Half of the men in their sample described
using alcohol to cope and for some of the men the impacts of the abuse took years to overcome and involved extensive therapy. One finding which has been noted in a number of studies is that the psychological abuse from partners has the most salient impact on men (Lien & Lorentzen, 2019; Machado et al., 2016).

Some researchers have noted that common responses to IPA by men such as isolation, self-blame, and reduced self-confidence, may represent universal responses and have noted a number of similarities in the literature between the impacts of abuse on men and women (Laskey et al., 2019; Lien & Lorentzen, 2019). However, researchers have also considered the unique aspects of men’s narratives about the impacts of IPA victimisation, especially as they relate to hegemonic masculine norms (e.g. Brooks, Martin, Broda, & Poudrier, 2017; Corbally, 2015; Morgan & Wells, 2016). Hegemonic masculinity is the current and dominant conception of manliness and is considered to involve characteristics such as self-reliance, restricted emotions, dominance, strength, and power (Brooks et al., 2017). These ideas around masculinity provide societal norms which guide men’s identity and beliefs about how they should behave as well as how society views men and expects them to behave (Addis & Mahalik, 2003; Brooks et al., 2017). It is suggested that the idea of men as victims of abuse does not fit with norms of hegemonic masculinity and it is this incongruence which plays a role in shaping men’s experiences of IPA, for example self-blame for failing to manage the relationship or fear of ridicule from others (Brooks et al., 2017; Corbally, 2015). It is also these societal expectations around men as aggressive and powerful that are said to allow some abuse, such as legal and administrative abuse, to occur and may guide what services are available to men and how men are treated (Machado et al., 2016; Morgan & Wells, 2016).

While these studies have started to shed light on men’s experiences with abuse this topic remains an under-researched area. A systematic literature review of research published
between 2006 and 2016 by Laskey et al. (2019) looking at IPA, gender, and victimisation found that only 19% of studies included men who experienced IPA from a female partner and only 4% of studies looked at specifically men as victims. Additionally, they found that 86% of the literature was quantitative and 76% of that was cross-sectional. Taken together these findings suggest that very little research has focussed on male victims of IPA and that due to the cross-sectional nature of many of these studies the insights into their experiences is limited. Despite making up the most surveyed population when it comes to the prevalence of IPA acts, no qualitative research has yet been done with a sample of university students. This is important as most of the literature has looked at older men. Additionally, no one has done this kind of qualitative research with men in New Zealand.

**Help-seeking in Men Who Experience IPA**

Research into men’s experiences of seeking help suggest that men face a number of barriers to seeking help which result in prolonged abuse. A systematic review and subsequent qualitative synthesis conducted by Huntley et al. (2019) identified 12 studies published between 2006 and 2017 which reported qualitative data on men’s experiences with help-seeking for IPA. They identified five themes which reflected the barriers men may face to seeking support for IPA. Firstly, they identified a number of fears around disclosing abuse. These involved internal feelings of shame, self-blame, guilt, and denial and external pressures such as a fear of not being believed or ridiculed, and the creation of further problems such as breaking up their family or experiencing retaliatory violence. The second theme involved abuse as a threat to their masculinity and the stigma of being a male victim. This partly involved an assumption that IPA must involve physical abuse and that as men they would not be perceived as being physically harmed. This also involved a perception that they were less of a man for having been abused and for seeking help. A commitment to their relationship
was another theme identified in the literature and involved men placing their partner’s needs over their own out of a commitment to their partners, and for some their children. Diminished confidence and despondency was a theme which highlighted how a sense of futility in the face of prolonged exposure to abuse as well as impacts such as depression and PTSD could reduce men’s ability to seek support. The final theme was described as the invisibility and perception of services and reflected studies which found that men either did not see services aimed at helping victims of IPA as either available or appropriate for them (Huntley et al., 2019). Identifying and working to overcome these barriers is important for allowing men to receive the support they need. Similar to the research on men’s experiences of IPA however the literature on help-seeking identified by Huntley et al. largely focused on older adults (mean age ranging from 40 to 60 years old) and none had recruited a student sample.

Additionally, research shows that when men do seek help they often fail to secure it or rate their experiences negatively. Using their same sample of 302 help-seeking men Douglas and Hines (2012) asked men to identify the different sources they had sought help from, how they rated the helpfulness of each source of support, and follow-up questions relevant to each type of support. They found that 85% of men had sought help from informal sources such as family or friends. While overall less likely to seek support from formal sources, a large number had nonetheless sought help from a mental health professional (66%) on-line support (63%), police (46%), domestic violence agencies (44%) and domestic violence hotlines (23%). While informal sources of help were rated as helpful by 90% of the men, and mental health professionals and on-line support were rated as helpful by 70% of men who used these sources, the majority of men reported their interaction with police and domestic violence agencies as unhelpful. Specifically, of all the sources of help sought, domestic violence agencies were rated least helpful with roughly half of men who tried these services reporting being told they weren’t for men, 60% reporting being referred to a male batterers’
programme or 30% reported being made to feel like perpetrators. Douglas and Hines (2012) also indicated the importance of the quality of these interactions through their findings that for every positive help-seeking experience the men were 40% less likely than others to have abused alcohol in the last year and for every negative interaction the men were 1.37 times more likely to meet the clinical cut-off for PTSD. These findings highlight that men’s help-seeking needs are not currently being adequately met and that the failure to meet these needs has important consequences.

Qualitative work with male victims of IPA has gone some way towards highlighting how men’s needs could be addressed. Huntley et al. (2019) found that studies generally reported that men had a favourable view of support received from informal sources such as family. When it came to seeking out formal support they found that having a confidential space, and someone who was non-judgemental and compassionate were important considerations. Additionally, continuity of care and the development of trust with a particular professional may facilitate disclosure (Huntley et al. 2019). A preference for speaking with a female professional was also identified, however the role of male professionals was not discussed (Huntley et al.). Adding to these findings around the factors that contributed to a positive help-seeking experience, Wallace, Wallace, Kenkre, Brayford, and Borja (2019) provided useful insight into the needs of men who experience IPA in their study which involved interviewing six Welsh men who they had recruited from specialist IPA services. Wallace et al. reported that men who had experienced IPA needed to recognise the abuse through awareness and education efforts and a recognition by formal sources that men can be victims. They also reported on a need to recognise that men will be at different stages in their journey to rebuilding their lives and may vary in their ability to identify what services they need as well as a need to have their experiences believed. One final set of studies has looked again at hegemonic masculinity, how it might shape the needs of men who experience IPA
and how services could best work with them. Corbally (2015) suggested that men’s experiences as victims of abuse did not match with their masculine identities and that they would therefore struggle to speak directly about these events. It was therefore recommended that IPA be addressed indirectly when working with men (Corbally, 2015). While hegemonic gender norms may play a large role in some men’s experiences of abuse, Addis and Mahalik (2003) in their paper on masculinity and help-seeking highlight that men can vary in the extent to which they internalise these norms and the extent to which they identify with alternative conceptions of masculinity. This idea is supported by the findings of Brooks et al. (2017), who found that while the men who they interviewed did draw on hegemonic masculine ideals to preserve an image of power and control within their narratives, they also redefined certain ideas of manliness and expressed a range of different fears which arose from the abuse. They also found that the men they interviewed were able to speak about their experiences and the impacts of IPA and appreciated having a safe and non-judgemental space to do so (Brooks et al., 2017).

**Study Aim**

It is important to understand men’s actual experiences of seeking support to identify barriers and facilitators to help-seeking so that policies and services can be adapted to meet men’s needs. Given that no qualitative research exists into university student’s experiences there is a gap which needs to be filled. Many of the qualitative studies looking at both men’s experiences of IPA and their experiences with seeking help have focused on older men. It may be that areas of concern commonly identified in these studies, for example commitment to marriage and worries about children (e.g. Corbally, 2015; Morgan & Wells, 2016) may reflect men who are at a later developmental stage. It is important to investigate the specific needs of the student population. Additionally, given that no research of this kind has yet been
published on men’s experiences within the New Zealand context it will be important to assess how their experiences compare to the international literature. This study aims to explore male students’ lived experiences of abuse from a female intimate partner and their experiences of help-seeking.

**Method**

**Study Design**

Interpretive Phenomenological Analysis (IPAN) was applied to achieve the study aim as it provides rich and detailed data which is grounded in the experience of the individual (Smith, Flowers, & Larkin, 2009). In taking a phenomenological, hermeneutic, and idiographic approach IPAN draws from three philosophical fields to produce this rich and detailed data (Smith, et al. 2009). It takes a phenomenological approach in that it is primarily concerned with a person’s experience of a particular phenomenon, in this case the phenomenon of being in an abusive relationship with a female partner. IPAN involves focussing both on the direct experience of the phenomenon and the mental and affective appraisals related to that experience, e.g. regretting or remembering (Smith, et al. 2009). Beyond a focus on experience, IPAN sees individuals as sensemaking beings who interpret their experiences and the world around them (Smith, et al. 2009). IPAN is therefore hermeneutic in that it engages with this process of interpretation or sense making. This is the case both in that it is concerned with understanding how a participant has made sense of their experience but also in that it involves the researcher interpreting and making sense of how the participant has made sense of their experience (Smith, et al. 2009). Finally, IPAN takes an idiographic stance. This involves focussing on each individual and gathering data on their particular experiences (Smith, et al. 2009). IPAN most commonly involves gathering data from multiple participants and ultimately involves looking across their experiences to
produce aggregate themes and subthemes, however the idiographic perspective means that these group level results will still be grounded in data which was produced by first engaging thoroughly with the individual (Smith, et al. 2009).

Procedure

Before beginning this study, ethics approval was obtained from the Victoria University of Wellington School of Psychology Human Ethics Committee (#25770). The procedure for this research involved recruiting potential participants, screening participants for experiences of abuse with an intimate partner, co-ordinating an interview, and conducting an interview. To avoid imposing the label of abuse and to recruit participants who were experiencing aggression or control without having identified these experiences as abusive the term ‘intimate partner abuse’ was replaced with ‘harm from an intimate partner’ throughout all stages of this process.

A range of avenues were used to recruit and screen participants. One approach involved having participants enrolled in the University’s 100-level psychology courses complete the screening questionnaire in exchange for course credit as part of the Introduction to Psychology Research Programme (IPRP). Another approach involved either recruiting participants through a poster (Appendix A). This poster was physically displayed in approved areas around the University’s campuses along with a link to the online screening questionnaire. An electronic copy of the poster, along with an electronic link to the screening questionnaire, was also emailed out to all males registered with the University’s student counselling service. Finally, one participant who had directly contacted the principal investigator about their experience of abuse was invited to complete the screening questionnaire through email. Participants who were directed to the questionnaire through
poster or email were given instructions on how they could confidentially receive a $5 coffee voucher as a koha/gift for participating.

All participants were directed to a Qualtrics survey which was used as a screening tool (Appendix B). Participants were first presented with an information sheet and a list of agencies they could contact if they wanted to speak with someone about issues around harm in intimate relationships or if they experienced distress as a result of completing the questionnaire (Appendix C). They were then asked to provide consent before continuing to the screening questionnaire. The participants then completed the screening questionnaire. They were then given the opportunity to provide their email address should they wish to participate in an interview about their experiences. They then were shown a debriefing statement and again presented with a list of agencies who they could contact (Appendix D). Confidentiality at this stage of the process was ensured by generating nonidentifying random numbers to represent individual’s data and by storing data securely in a locked laboratory behind a locked device. Additionally, those participants completing the survey as a part of IPRP were not told the selection criteria for interviews, namely to have experienced harm from an intimate partner, to limit a wider understanding that those coming forward for an interview were doing so due to harmful experiences.

The participants who indicated an interest in the interview stage of the study had their responses examined. Based on their responses those participants who appeared to have experienced some form of aggression or control from an intimate partner were sent an email inviting them to take part in an interview (Appendix E). This email also contained an interview information and consent sheet (Appendix F). Importantly, participants were asked not to participate if they were in contact with, or living with, someone who might harm them as a result of taking part. They were also asked to indicate their preference of interviewer gender and were given the choice of male, female, both, or no preference. Those participants
who wished to be interviewed by both researchers or who indicated no preference were given
the earliest interview slots to give the male researcher (myself) an opportunity to observe the
female researcher who is the principal investigator and has more experience in interviewing
participants about abusive experiences.

Once participants had consented to taking part in the interview a time was organised.
Interviews took place in a private interview room within the Victoria University of
Wellington psychology clinic. Before beginning the interview, the information sheet was
discussed with the participants and they were given the opportunity to ask questions or clarify
information. At this point, the limits of confidentiality were also discussed. Participants were
also informed that either a clinical psychologist or counsellor were immediately available
should they become distressed and want to speak with someone. They were then asked again
for their consent and informed that they could end the interview at any time and that they
would receive a koha/gift regardless. Interviews lasted between one and a half to two hours
and based on the participant’s preference were either filmed and voice recorded or voice
recorded only.

After completing the interview, participants were given a debriefing statement
(Appendix G) which again listed agencies who they could contact if they wanted to speak
with someone about aggression and coercion from an intimate partner or if they were feeling
distressed. Participants were also given a $40 supermarket voucher as a koha/gift for
participating. Confidentiality considerations at this point of the study involved storing
participant’s interview recordings and transcripts, and their signed consent forms securely
and separately from each other. It also involved assuring participants that in general their data
would be presented in aggregate and that while some quotes from their interviews may be
presented to highlight specific themes and subthemes that these quotes would be
nonidentifying. They were also assured that they would be referred to under a nonidentifying pseudonym when presenting the analysis.

**Screening Measures**

An online screening tool was used to identify and recruit participants who had experienced abuse in an intimate relationship. The online screening questionnaire was composed of a demographic section, which asked for information such as age, ethnicity, gender, and sexual orientation, along with all the items from the Revised Conflict Tactics Scale (CTS2; Straus, Hamby, Boney-McCoy, & Sugarman, 1996) and the Controlling Behaviour Scales-Revised (CBS-R; Graham-Kevan & Archer, 2005). A section was also presented which asked participants to provide their email address if they were interested in being interviewed about their experiences and which gave them an opportunity to indicate how distressing they had found the experience of filling out the questionnaire and how likely they were to access support.

The CTS2 and CBS-R were used to screen broadly for experiences with a range of different forms of abuse. These measures cover a range of different aspects of intimate partner abuse by assessing the frequency of specific acts which are concrete and descriptive, gender neutral, and free from the label of abuse or restrictive contexts, such as crime or a cohabiting arrangement, which could result in under-reporting. The CTS2 was chosen as it is one of the most widely used measures of intimate partner abuse (e.g. Yun, 2011), has been found to have good psychometric properties (e.g. Sleath, Walker, & Tramontano, 2017), and has been successfully used in student populations (e.g. Straus, 2008). It consists of 78 items which ask about minor and severe physical assault, psychological aggression, negotiation, injury, and sexual coercion.
The CBS-R is a more recently developed measure which assesses nonphysical controlling behaviours. It consists of 24 items which measure across economic, threatening, intimidating, emotional, and isolating control. The CBS-R has also been found to have good psychometric properties (Sleath, et al. 2017) and assesses an important aspect of intimate partner abuse which appears to be distinct from the forms of abuse measured by the CTS2 (Jansson & Sundin, 2019).

In both measures each behaviour was presented using two items, one which asked about the participant’s use of this behaviour against their partner (e.g. I slapped my partner) and another which is asked from the perspective of the participant as the recipient of the behaviour (e.g. my partner did this to me). When used as screening tools for this study both measures asked participants to indicate how often these behaviours had occurred in the last 12 months on a five-point Likert scale ranging from 0 = never to 4 = very frequently. Participants were also asked to give a yes/no response for each item to indicate if it had ever occurred with an intimate partner. The measures therefore resulted in information about recent and lifetime experiences of abusive and controlling behaviours both as a victim and perpetrator (i.e. eight indicators in total).

**Interview Schedule**

The interview schedule (Appendix H) used for this research was based on a schedule from a larger project investigating community members’ experiences of enacting and receiving abuse from an intimate partner. It was developed in collaboration with the principal investigator who has experience interviewing men about their experiences of abuse. A semi-structured interview format was selected as this provided the flexibility of following the participant down any avenues of meaning that they wanted to take while still providing enough structure to address the research questions (Smith et al., 2009). At the beginning of
the interview the interviewer oriented the participant to the nature of the interview by both highlighting the participant’s role as the expert of their own experiences and the fact that while the interview was going to involve some specific questions it would be mostly conversational in structure in that they were free to speak about anything around those specific questions which they thought was important. Demographic details provided through the online questionnaire were also confirmed with the participant at the start of the interview. Additionally, participants were asked if any changes could be made to the interview process to enhance their safety or comfort, for example opening and closing the interview with karakia or prayer.

The interview schedule began with a question seeking confirmation that the participant was here to speak about harmful experiences in an intimate relationship and asking whether they had a particular partner or relationship in mind. Next, general questions about the nature of the relationship in question were asked along with a question around any positive memories that the participant had of the relationship. These questions were included to gather contextual information and to build rapport with the participant while building into potentially more emotionally heavy questions. The main sections of the interview schedule are outlined in the Table 1 and a more detailed copy including the prompts is included in Appendix H. The main body of the interview involved broad and open-ended questions around the participant’s experiences of harm, how they understood it over time, and their experiences, if any, with seeking support for their experiences. The open-ended nature of the questions meant that the participant was able to speak about their own experiences while restricting the meaning that could be imposed by the interviewer. To gain an in-depth understanding of the participant’s experiences, follow up questions were asked in addition to the planned prompts (e.g. What did you think or how did you feel about this? What was this experience like for you?).
Data Analysis

Upon the completion of each interview a copy of the audio was sent to a professional service and was transcribed. Short pauses were marked with ellipses and longer pauses were recorded within square brackets along with their timestamp on the audio recording. Nonverbal features such as laughter or sighs were also noted within square brackets. Identifying information was replaced with a broad descriptive term within square brackets, for example [big city] or [partner’s name].

Table 1

*Interview schedule outlining key questions used to explore the areas of interest*

<table>
<thead>
<tr>
<th>Research area of interest</th>
<th>Key questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Their experience of the harm</td>
<td>What did a typical instance of this harm look like? And how did it unfold?</td>
</tr>
<tr>
<td></td>
<td>When thinking about the worst instance of harm or the one which sticks out most for you, what did this look like? and how did it unfold?</td>
</tr>
<tr>
<td></td>
<td>When did you first notice the harm? And how did it develop over time?</td>
</tr>
<tr>
<td></td>
<td>Was your partner aggressive or controlling in other ways?</td>
</tr>
<tr>
<td></td>
<td>Why did you think the harm occurred?</td>
</tr>
<tr>
<td>Their understanding of it over time</td>
<td>What did you think of it at the time?</td>
</tr>
<tr>
<td></td>
<td>What do you think of it now?</td>
</tr>
<tr>
<td></td>
<td>How has this changed over time?</td>
</tr>
<tr>
<td>Speaking to others about the harm</td>
<td>Did you tell anyone about what was happening?</td>
</tr>
<tr>
<td></td>
<td>What was this experience like for you and what informed your decision to speak or not speak about it?</td>
</tr>
<tr>
<td></td>
<td>What would have prompted you to speak about the harm earlier?</td>
</tr>
</tbody>
</table>
The transcripts, along with the raw audio and video recordings were analysed using IPAN following Smith et al. (2009). Beyond a commitment to engage in a process which is phenomenological, hermeneutic, and idiographic, IPAN as a method of analysis can be conducted flexibly and in several different ways depending on the researcher’s familiarity and expertise in using this method. Because this research was conducted by a novice qualitative researcher the procedure outlined by Smith et al. (2009) was used to provide structure and guidance.

The procedure for analysing data using IPAN outlined by Smith et al. (2009) involves six steps. Steps one to four were completed with one participant at a time to maintain the idiographic focus. Applying these steps ensured the underlying principles of IPAN were upheld throughout the process as follows:

1) Reading and re-reading. This first step involved the full immersion into a chosen participant’s data. To achieve this, the transcript was read through along with the audio recording and, where available, the video recording. Any intonations or other additional pieces of information in the recordings which clarified any transcription errors or ambiguities were noted. Each participant’s transcript was then re-read a number of times through the process of noting described in the next step. As recommended by Smith et al. (2009) initial impressions were recorded at this stage to allow for them to be bracketed off and to allow the researcher to reduce the urge to hold all this information at once while moving through subsequent readings.

2) Initial noting. The transcript was next transferred into a table with a column on either side. The left-hand column was used to make initial notes. The transcript was read three times and with each reading notes were made on the descriptive, linguistic, and
conceptual features respectively. Notes were made digitally in Word, descriptive notes were typed normally, linguistic notes were typed in italics, and conceptual notes were underlined. Descriptive notes involved recording, at face value, the elements or objects of concern which made up the participant’s experiences and thoughts. Next, linguistic elements which added meaning to the participant’s description of the objects of concern were recorded. Examples of this included the use of repetition, adjectives used to describe particular experiences, intonation, or language fluency. The use of metaphor was particularly important as it provided an especially vivid insight into the participant’s internal experience and tied their descriptions to more interpretive and conceptual features. Conceptual notes were more interpretive and involved using empathy and asking questions of the participant’s descriptions of particular experiences and what each one was like for them in order to gain deeper insight into the underlying experiences and meanings that they had made. A quote from one of the participants along with the initial notes made during this step have been included in Appendix I.

3) Developing emergent themes. After the initial notes had been recorded, they, along with their corresponding quotes and a short description of the ideas behind the note, were grouped into provisional categories which appeared interrelated or shared a common idea. A process of describing and naming these categories was then undertaken. This process helped to clarify which elements did and did not belong and resulted in the categories which represented the emergent themes. An initial emergent theme with its constituent codes, their descriptions, and a reduced selection of quotes has been included in Appendix J.

4) Searching for connections across emergent themes. This stage involved identifying the connections between the different emergent themes and how they related to each
other as well as to the research question. Working through this stage involved two strategies. The first involved using the emergent themes and their descriptions to write up a one-page narrative which summarised the experiences of the individual participant, and the meanings derived from these experiences, which related to the research question. This strategy helped to identify those themes which were most related to the research questions and the narrative structure aided in identifying the interrelationships between themes. The second strategy involved creating a printout of the emergent themes, along with their descriptions and the quotes which support them, and then cutting up the printed sections describing these themes and rearranging them on a table into groups which appeared to relate to common ideas or aspects of experience. The labelling and description of these groups of themes ultimately resulted in the production of superordinate themes which were made up of subtheme clusters. This process of spatially arranging the emergent themes into groups was then recreated in meetings with a supervisor. The process of describing the theme clusters and answering the supervisor’s questions brought clarity and further coherence to these groupings. Once these preliminary superordinate and subordinate themes were identified, a document containing all of the themes along with supporting quotes and descriptions was compiled. Additionally, a diagram of boxes and lines was created which visually represented the different themes and their relationships. One of these theme diagrams has been attached in Appendix K.

5) Moving to the next case. At this point the first four steps were repeated with the next participant’s data. To maintain the idiographic focus, it was important to engage as fully as possible with the new participant while mentally bracketing off the analysis of the previous participant’s data.
6) Looking for patterns across cases. Once the process of engaging with each participant was complete a process of looking across the cases to form common superordinate themes and subthemes was conducted. This involved an iterative process of looking across both the theme diagrams and theme documents and then re-evaluating each participant’s themes in light of the others. Superordinate and subordinate themes which appeared to describe similar experiences or share similar meanings were clustered together. In some cases, two or more themes were joined under a broader unifying label. This process resulted in an overarching theme document which included the combined superordinate and subordinate themes along with supporting quotes and descriptions of each theme. A visual representation of this document, in the form of a final theme diagram, was also created (Appendix L). Finally, these combined superordinate and subordinate themes, and their relationships, were presented in the form of a narrative account.

Additionally, regular meetings with a supervisor occurred throughout this process. These meetings were important across all of the above steps in that the process of explaining and answering questions around the notes, emergent themes, and interrelationships between themes for each man facilitated clarification and increased the coherence of each concept or idea. This process was further facilitated through consultation with an academic advisor who had expertise in qualitative methods.

Participants

Conducting IPAN involves understanding people’s experiences with, and interpretations of, a particular phenomenon. The sampling method employed for this study was therefore purposive in that male students who identified as having experienced some form of aggression or control from a female intimate partner were invited to take part in an
interview after having been identified through a screening tool. Eight participants were interviewed about their experiences. All but one of the participants spoke about relationships which lasted for at least one year and involved abuse from a female partner. One participant’s interview was not included in the final analysis for this study as the abuse he spoke about occurred in the context of a number of aggressive and coercive acts from different dating partners and the main relationship he spoke about was significantly shorter than the other participants and was not with a female partner.

Two of the participants had attended lectures on, and were familiar with, the principal investigator’s work into the area of men’s experiences of abuse in intimate relationships. One of these men contacted the principal investigator directly and mentioned that he would be willing to participate in research she might be conducting. The other was recruited through the IPRP programme. The remaining five men were all recruited through the electronic poster which was sent out to the Student Counselling Service’s database.
Table 2

*Participant demographic and relationship information*

<table>
<thead>
<tr>
<th>Pseudonym</th>
<th>Age</th>
<th>Age during relationship</th>
<th>Time in relationship</th>
<th>Ethnicity</th>
<th>Sexual orientation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jason</td>
<td>18-29</td>
<td>18-29</td>
<td>1\textsuperscript{st}: 3 years</td>
<td>NZ</td>
<td>Heterosexual</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2\textsuperscript{nd}: 1 year</td>
<td>European/Pākehā</td>
<td></td>
</tr>
<tr>
<td>Paul</td>
<td>40-49</td>
<td>18-29</td>
<td>2.5 years</td>
<td>NZ</td>
<td>Heterosexual</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>European/Pākehā</td>
<td></td>
</tr>
<tr>
<td>Steven</td>
<td>50-59</td>
<td>18-29</td>
<td>10 years</td>
<td>NZ</td>
<td>Heterosexual</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>European/Pākehā</td>
<td></td>
</tr>
<tr>
<td>Oliver</td>
<td>18-29</td>
<td>18-29</td>
<td>4 years - ongoing</td>
<td>Middle Eastern</td>
<td>Heterosexual</td>
</tr>
<tr>
<td>Matthew</td>
<td>18-29</td>
<td>18-29</td>
<td>3 years</td>
<td>NZ</td>
<td>Heterosexual</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>European/Pākehā</td>
<td></td>
</tr>
<tr>
<td>Timothy</td>
<td>18-29</td>
<td>18-29</td>
<td>2 years</td>
<td>NZ</td>
<td>Heterosexual</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>European/Pākehā</td>
<td></td>
</tr>
<tr>
<td>Arthur</td>
<td>40-49</td>
<td>18-29</td>
<td>1 year</td>
<td>NZ European/</td>
<td>Heteroflexible</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Pākehā</td>
<td></td>
</tr>
</tbody>
</table>

The demographics of the participants and characteristics of their relationships are summarised in Table 2. All participants were male students who were studying at Victoria University of Wellington. They were all at different stages in their university experience with most of the participants at various stages of completing an undergraduate degree and others
studying towards a postgraduate qualification. Most identified as heterosexual and one as heteroflexible. Most were NZ European/Pākehā and one was Middle Eastern.

All participants spoke about relationships which began when they were in late adolescence to late twenties (Table 2). Two of the participants had married their partners, although one was now separated from that partner. All but one had left the relationship which they spoke about and none of the participants were experiencing abuse in their relationships at the time of the interview. The relationships that the participants spoke about varied in their length with all but one occurring over the space of one to five years. There was also variation in the amount of time that had passed since the participants had left the relationship they were speaking about or since they had last experienced abuse from their partner which ranged from around one year ago to having had these experiences twenty to thirty years ago.

Results

Two themes were found to characterise the men’s experiences. These were: 1) Stuck in the abusive relationship, 2) Moving on from the abuse. Table 3 provides a summary of the themes and the subthemes they contain, and these are outlined in detail in the following sections.

1. Stuck in the Abusive Relationship

The first theme is centred around the many ways the men described feeling stuck in the abusive relationship. This theme is composed of four subthemes, each representing a barrier that prevented the men from putting appropriate boundaries in place to prevent or stop the abuse, including reaching out for help or leaving the relationship. These barriers were 1) the emotional investment the men had in the relationship, 2) living in an all-encompassing controlling environment, 3) their sense of responsibility to shoulder the burdens of the
relationship, and 4) their understanding of abuse in relationships. All of these barriers served to work to keep the men feeling stuck in the relationship.

1.1 Emotional Investment in the Relationship

The men all spoke about the emotional investment and attachment they felt toward their partner, or the relationship in general. This resulted in them trying to explain their partner’s abusive behaviour, prolonging the length of time they tolerated the abuse. The sense of emotional investment was articulated in different ways, but all of the men reflected that they had felt a sense of belonging and commitment to their partner that motivated them to stay in the relationship. Some of the men spoke about this belonging as love or a deep sense of partnership:

“I think one thing that kept us together for as long as we did is because we do work really well together. We were partners in a lot of things” – Matthew

Table 3

<table>
<thead>
<tr>
<th>Theme</th>
<th>Subtheme</th>
<th>Defining features of each subtheme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stuck in the abusive</td>
<td>Emotional investment in the relationship</td>
<td>• Motivated by a strong sense of belonging to their partners&lt;br&gt;• Empathised with their partner’s difficulties in a way that explained or excused the abuse</td>
</tr>
<tr>
<td>relationship</td>
<td>An all-encompassing controlling environment</td>
<td>• Controlled through escalating and dynamic aggression and manipulation during arguments&lt;br&gt;• All-encompassing and inescapable nature of the abuse&lt;br&gt;• Exacerbated by situational and circumstantial factors</td>
</tr>
<tr>
<td>Shouldering the burden</td>
<td></td>
<td>• Feelings of responsibility for causing abuse&lt;br&gt;• Duty to solve the conflict&lt;br&gt;• Duty to tolerate the impacts&lt;br&gt;• Duty to handle it on their own&lt;br&gt;• Duty to leave the relationship on good terms</td>
</tr>
<tr>
<td>The men’s understanding of abuse</td>
<td>Moving on from the abuse</td>
<td>Overcoming the barriers to moving on</td>
</tr>
<tr>
<td>----------------------------------</td>
<td>--------------------------</td>
<td>-------------------------------------</td>
</tr>
<tr>
<td>• Previous relationships informed their personal definition of abuse</td>
<td>• Impacts becoming unbearable</td>
<td>• Meeting, sidestepping, or changing the barrier of their definition of abuse</td>
</tr>
<tr>
<td>• Gendered ideas of abuse from their partners</td>
<td>• Meeting, sidestepping, or changing the barrier of their definition of abuse</td>
<td>• Shifting the emotional investment</td>
</tr>
<tr>
<td>• Social norms and societal barriers impacted men’s understanding of what constituted abuse</td>
<td>• All at different stages of the slow and difficult process of moving on</td>
<td>• Shifting the emotional investment</td>
</tr>
<tr>
<td>• Lack of understanding increased men’s tolerance and prevented them from stopping the abuse or seeking help and support</td>
<td>• Impacts becoming unbearable</td>
<td>• Meeting, sidestepping, or changing the barrier of their definition of abuse</td>
</tr>
</tbody>
</table>

The emotional investment and bond that the men experienced with their partner led to them feeling sympathy and empathy when faced with the abusive behaviour. The men empathised with the life struggles their partner faced and understood these difficulties to have at least partially led to their partner’s use of aggression and manipulation, or they excused the behaviour because of these difficulties. For many of the men this involved witnessing a rapid decline in their partner’s mental and physical health or seeing them struggle to cope with a history of abuse or grief:

“She definitely needed a lot of like counselling and, um, stuff ‘cause of things that had happened to her both in terms of, er, abuse of her and to her and by her” – Timothy

Two of the men empathised with the difficulties their partner faced in adjusting to living with them and in communicating their perspectives during arguments. These issues were used to explain and understand the abusive behaviour:
“Like she--she--she couldn’t talk. She--she didn’t have the repertoire, the--the necessary word to talk to me. Her only repertoire were poking and hitting.” – Oliver

Empathising with their partner’s difficulties and wanting to be a caring partner drew the men into the relationship and kept them feeling trapped:

“I just wish that I had, um...at the time I was...that I just walked away and just, you know. But instead I--I--I think I gave a shit too much, you know. My empathy was turned up too high” – Arthur

1.2. An All-Encompassing Controlling Environment

All but one of the men described feeling controlled by their partner and discussed how this permeated every aspect of their life, making them feel surrounded by control, powerlessness, and a sense of being stuck in the relationship. The exception was Steven, for whom a sense of being trapped in a controlling environment did not play an important role. Instead, he experienced concentrated bursts of aggression which involved being yelled at by his partner for speaking with other women and then being punched in the head while he was asleep. In contrast with the other men, the aggression Steven experienced occurred less frequently, once every year or two, and his responses, such as leaving the house, were not met with an escalation or shifting in forms of aggression. Additionally, Steven strongly rejected the aggression he experienced and would usually leave the relationship for a time afterwards.

The six other men described a pattern of escalating and dynamic forms of aggressive and manipulative behaviours used against them. Typically, these were enacted, at least initially, during heated arguments. Altercations usually began with verbal aggression in the form of being yelled at and receiving put-downs, which for some of the men were gendered, and for others were more general put-downs. This behaviour often escalated to
physical aggression which for all of the men meant experiencing pain and physical injuries ranging from scarring and cuts, to bruising and broken ribs. This physical aggression usually involved having their property thrown around or destroyed, or having direct physical aggression used against them which ranged from being poked and slapped to being punched and having weapons used against them:

“I’d be talking to another girl who was a friend and she would, you know, pull me aside and get--get really angry and we’d need to leave because she was so worked up, and then we’d, you know, go back to my house or her house and there’d be a lot of yelling and throwing” – Jason

Most of the men also experienced emotional and psychological manipulation during arguments in the form of threats of leaving the relationship, or threats of self-harm or suicide or actual self-harming or suicidal behaviour:

“When I sort of tried to, um, end it I guess, um, then, yeah, then the suicide kind of attempts and threats...which kept me quite trapped.” – Paul

All of the men described a point partway through the relationship when escalating arguments increased rapidly both in terms of frequency as well as the range and severity of behaviours:

“then it just got more and more consistent and they got more and more bitter and they got, you know, constantly re-brought up and stuff like this.” – 71

The triggers for these arguments became salient to the men and were described as generally revolving around the man acting in a way that their partner disapproved of, including: spending time away with friends, not replying to their partner’s messages quickly enough, or later in the relationship talking about being unhappy and wanting to leave. For
some of the men talking about and actually trying to leave the relationship were especially strong triggers that led to severe instances of harm:

“she would shout and get quite, um, uncontrollable, um, and usually would probably start drinking as well. Um, and especially when she knew that I was keen to leave.” – Paul

During arguments all the men described their attempts to give their perspective, to de-escalate the situation, or to physically leave the environment as being met with further escalation and the use of different aggressive tactics:

“she kept changing her ways of doing that and I--I think, now that I think that may have been intentional because she thought that that, the way of harming me doesn’t--doesn’t respond any more. I’m not responding. That’s not a good stimulus.” – Oliver

When it came to managing the situation, reacting non-violently was important for all of the men. However, some of them described feeling the need to restrain their partners in response to instances of severe physical aggression, such as having a knife brandished at them. For Paul this act of self-defence resulted in his partner calling the police, who subsequently arrested him:

“I kind of defended myself, um, by grabbing the... her arm. I had to grab her arm ‘cause she came at me with a knife and I wrapped her in a blanket and just kind of subdued...[ ]...she called the police. I was like, oh, oh, what, what? And then, um, oh, they were there very quickly and they had dogs and they pinned me down on the ground and... like, you know, behind the neck and everything and, um, I mean, I was completely unresisting” – Paul

Therefore even the men’s attempts at self-defence were met with negative consequences for them. Such experiences served to create a sense of hopelessness in the men in addition to feeling dominated and controlled. This ultimately kept the men stuck in a pattern of compliance to appease their partner and resolve the conflict:
“It would stop the fight. Um, like she might sit there grumpily in silence with me. I’d have to apologise like again and again over the next couple of hours.” – Timothy

The men also described the all-encompassing nature of the control, with aggression and manipulation also occurring in a range of situations outside the context of escalating arguments. For many men this involved verbal aggression through constant put-downs (made in person or sent as digital messages), passive–aggressive comments, and ‘gaslighting’:

“Do I look okay? How’s this? Do you think I should shave?” Yeah, okay, and follow her advice and cool and would get to a point where, yeah, okay, I feel confident and stuff. And then we’d go out and then she’d come back and she’d like laugh at me and like, “You looked ridiculous all night because of...”” – Arthur on experiencing gaslighting

Some men felt monitored through their partner accessing or persistently requesting to access their private accounts on their computers and phones, or via them constantly checking up on where they were and who they were with. A few of the men also experienced aggression and coercion during sex. For two of the men this involved aggression, which for one man was verbal and for the other was physical, for not meeting their partner’s expectations during sex. For another it involved his partner coercing him into having sex, with the partner insisting on having sex when he did not want to:

“I mean, a few times, um, she would, er, you know, not take... not take no” – Jason

Some of the men experienced a continuation of the abuse post-separation. Examples of this involved the destruction of their property and stalking behaviours such as continually receiving messages and having their now ex-partners following them to their new residences or turning up at the property of their new partners:
“a couple of months later when I’d kind of heard from... seen her but ‘cause she was kind of blocked on everything she, yeah, showed up at--at a girl’s house who I’d been on a drink with again and, um, got quite angry at her” – Jason

Several of the men identified contextual and environmental factors which were not directly related to their abusive partner’s behaviours, but which also served to facilitate the environment of control, trapping them in the relationship. Many of the men spoke about quickly or unexpectedly finding themselves in a position where they were living, and sharing a lease, with their partners. This functioned to keep them in close proximity with their partners and, for some, meant that they worried about the implications of breaking the lease if they left. Due to the nature of their university course or the city they were living in this also involved isolation from friends or family which meant that they were physically or circumstantially separated from support and avenues of reprieve from the pervasive and all-encompassing environment of control:

“the--the attrition rate of the courses it meant that my friend group had been narrowed down quite significantly to the point where basically the only constant in my life was her” – Matthew

1.3. Shouldering the Burden

All of the men described placing the responsibility for the arising conflict and difficulties on their own shoulders, which added to their sense of feeling stuck in the relationship. This sense of responsibility was applied to a range of different aspects of the relationship. It included a sense of responsibility for causing the abuse. Indeed, when trying to account for the cause of the abuse they were experiencing from their partners most of the men looked inwards. Due to their own beliefs about their perceived shortcomings as well as direct blame from their partners most of the men saw their own actions as having triggered
their partner’s aggression. Because this was something under their control, they saw themselves as, at least partially, responsible for whether the abuse occurred or not and blamed themselves when it did:

“I felt responsible for her trying to kill herself. I felt responsible for her self-harm. I felt responsible for her everything” – Timothy

While not all the men blamed themselves for causing the harm, they did all speak about a responsibility to resolve or deescalate the conflict or avoid it all together in a way which preserved the relationship. For some this ‘fix it’ approach involved changing their behaviours to avoid triggers: for example, by being hyper-aware of their partners mood, feeling as though they were walking on eggshells to please their partners, or by restricting their interactions with friends:

“I mean, it--it was like she couldn’t wait to get home to tell me what a fuckwit I was about it and I began to pick those. On the walk back I began to pick that in her breathing or in her mood or in her presence, um, so it... there were times when I could dissipate that anger on the way home” – Arthur

For all the men this involved a process of testing a range of different strategies to resolve the conflict and harm once it was occurring, such as walking away, explaining their perspective, or quickly apologising:

“I tried to respond to it in different ways. In earlier times I would actually stay up and try to... try to calm her down and--and address the problem and that either would or wouldn’t work” – Matthew

The men’s underlying identification with the responsibility of shouldering the burden of working to resolve the conflict without leaving the relationship also meant that they tolerated a number of accumulating negative impacts which further kept them trapped. Some
described constant exhaustion, experiencing an exacerbation of existing anxiety and low mood, and constantly feeling on edge and anxious or worrying about when their partner might hurt them. For some of the men these impacts led to a loss of their independence, confidence, or sense of identity:

“I was crumbling, falling apart I would say” – Paul

The men spoke about how these accumulating impacts made it difficult for them to stay socially connected or to confront or resist their partners, and to reflect on or identify the behaviour as abusive, which ultimately kept them stuck:

“I was definitely less... became much less social and much less, um, indepen--., um, independence. I don’t know, I didn’t... yeah, I didn’t do as much on my... on my own” – Jason

Beyond the sense of responsibility for causing and resolving the abuse, some of the men also spoke about feeling a responsibility to work through these difficulties and stop the abuse on their own, without burdening the people around them. This meant that they did not share their difficulties with the people around them and continued to try and fix the relationship on their own. For some of the men their role as someone who can handle things on their own was an explicitly gendered one:

“so it’s like well, it’s my stuff, I can deal with it. I’ll just keep it inside. I’ll just sit there and have a rant in a mirror and it’s fine because I know I can handle it and, you know, as part of being a big boy is you can handle your own shit and don’t have to put it on others and if people can’t do it and they have to put it on you you should be there to help them because, you know, it’s clearly overwhelming. Um, [sighs] it kind of led more into a situation of me not handling my own shit and not feeling okay to tell anyone” – Timothy
Because of the responsibility for causing and solving the abuse, and to handle this responsibility on their own, the men associated the continuation of the abuse and its negative impacts with a sense of failure and experienced self-blame, guilt, and shame. This was often described as the most salient or worst element of their experience in the relationship and these negative emotions were often seen as worse than the actual abuse. This made it more difficult for the men to reach out to the people around them and acted as a barrier which kept them stuck:

“I wasn’t very open with my family about it. Yeah. Um, it got to the point where I was in a whole range of emotions from embarrassed, ashamed, all sorts really. I just thought, how did I get myself into this mess?” – Paul

Some of the men also spoke about feeling trapped by a responsibility to end the relationship on good terms or in a way that did not place a burden on their partners. This resulted in waiting for an appropriate time to end the relationship on good terms, which served to increase the time spent enduring abuse:

“And I just wanted to do it in a manner that was fair and, er, I didn’t want to leave her with bills and--and or--or--or be debt from bills or whatever” – Paul

1.4. The Men’s Understanding of Abuse

Most of the men described a process of grappling with how best to make sense of the abuse they were experiencing and how it fit with their pre-existing assumptions of what relationship abuse was. These assumptions were often informed by their previous experiences, or lack thereof, with intimate and family relationships. For many of the men this was their first serious relationship. For two of the men, not having relationship norms or a template of acceptable or usual behaviour to compare against meant that they spent some
time under the assumption that this was a normal part of relationships which needed to be endured:

“I thought maybe this is normal with girls. I didn’t have any serious relationships before and I thought maybe this is something that girls do for getting my attention. I didn’t really know why she is doing it.” – Oliver

For some of the men, having experienced aggression and manipulation from and between their parents or guardians growing up provided a template for what they wanted to avoid in their own relationships. However, this standard was only applied to their own behaviours and not their partner’s:

“Didn’t have the positive male role model as a parental figure, I just knew what I didn’t wanna do, what I didn’t wanna be like.” – Arthur

In addition, two of the men spoke about incorporating and internalizing their partner’s perspectives on what constitutes intimate partner aggression. For both men this involved their partner’s disbelief that a woman could harm a man and the endorsement of intimate partner aggression as being a unidirectional concept:

“... it got to the point where I--I was... I was really thinking, trying to believe [Partner’s name] or--or starting to believe [Partner’s name] where domestic violence is only male assaults female.” – Arthur

Many of the men’s interactions with their friends, professionals, the public, and informational resources only served to promote and reinforce the idea that intimate partner aggression is gendered and unidirectional (i.e. male to female aggression), which encouraged them to ignore or normalise the harm which they were experiencing. Two of the men described experiences where their friends or other people close to them commented disapprovingly about their partner’s behaviour but in a way that did not label the behaviour as
harmful or abusive and without intervening or recommending action. While one of the men described this as comforting, in both cases it worked to normalise their partner’s behaviour and reinforced the idea that it was something the men should deal with on their own:

“I mean, around a kind of certain group or an extended group I think it was... I don’t know, it became a little bit normal, it became a little bit, you know, always angry at [Jason]” – Jason

For Arthur, his experience of interacting with the public and the police played a large role in informing his understanding of the harm while he was in the relationship. He spoke about the reactions he got after having received extensive and visible bruising from his partner which invalidated the harm he was feeling and reinforcing the gendered nature of intimate partner aggression:

“I encountered a--a couple of cops in [Big city] and they asked me how I got a bruise on my face and I said, “My girlfriend did it,” and they literally laughed at me.” – Arthur

Some of the men sought out pamphlets and online resources about harm and abuse in relationships to gain more insight into their own experiences and what to make of them. These experiences often led to increased ambiguity and uncertainty or further reinforced the gendered perspective of harm:

“They were all targeted towards women...They were still useful but it was definitely... I suppose it also factored into this--this perception in my mind that well, this is... this is a thing that happens to girls. It’s not as serious because, you know, I’m not under that same physical threat, I’m not really as scared but, you know, a lot of these things are still happening to me so what’s the deal here?” – Matthew

Partially due the experiences mentioned above, many of the men spoke about how, at the time of the relationship, they had a very specific understanding of what types of harm
count as abuse. This generally involved severe physical aggression and a sense of physical danger and fear. This understanding of abuse was also often explicitly gendered:

“I mean, you were quite aware of domestic violence in New Zealand and I certainly felt like I was aware of it but you kind of think of definitely male on female and definitely physical hitting or, you know...” - Jason

The discrepancy between their experience of abuse and their understanding of abuse resulted in the men not feeling worthy of help or as having a legitimate reason to leave the relationship:

“at the time partially I suppose as a product of not really feeling like it was as serious I didn’t want to take up a drop in session that could have... that might have been needed by someone who really, really needed it.” – Matthew

Collectively these experiences signalled a discrepancy between their own experience of abuse from their partner and how others conceptualised abusive relationships. This discrepancy increased their tolerance and reduced the opportunity that they would seek help or leave the relationship at the time.

2. Moving on From the Abuse

All but one of the men had left the abusive relationship, and none of the men were continuing to experience abuse. The men’s experience of moving on from the abuse was identified as the second theme, composed of three subthemes. Together the subthemes highlight 1) how the men overcame barriers to enable them to enter the process of moving on, but that 2) this process was slow and centred on their recovery and learning, and 3) it was peppered with ongoing negative impacts related to the abuse.
2.1. Overcoming the Barriers to Move on

Most of the men experienced a need for the barriers which were keeping them trapped to be overcome, lowered, or sidestepped before they were able to start putting appropriate boundaries in place to stop the abuse and move on. For some men it was only when the impacts associated with the abuse became intolerable to the point of overcoming their capacity to shoulder the burden, that they were prompted to act. For most, this involved leaving the relationship. For one of the men, his tolerance ultimately led to a suicide attempt and it was only then that he decided to leave the relationship and seek out support:

“it was only when I got to the point of going, “Unsalvable mess,” and admitting that to myself and going, you know, “Fuck it, I don’t care where the cards fall, nothing can be worse than... [clears throat] than this.” Um, but it was getting to that--that point.” – Arthur

For other men, their understanding of abuse as characterised by severe physical aggression and fear for physical safety meant that they remained stuck until their experience met this threshold. Meeting this threshold prompted some of the men to seek help or leave their relationships:

“I wasn’t in any immediate danger until the knife thing happened and then I was like, right, this... there could be some actual danger going on here, I’m going to go for a... go for a quick session. That--that was the one time that I did that.” – Matthew

One of the men, Timothy, described being able to sidestep the barriers of his gendered understanding of abuse and his responsibility to handle things on his own after experiencing his partner’s infidelity. This was deemed a societally acceptable reason to leave and seek help, meaning he felt able to start the process of moving on:

“it was a tragic thing that happened to me, as opposed to me being in the abusive relationship, which was me being too weak. So, when I’m trying to deal with it myself and I’m
trying to ask for help, “Hey, this tragedy has happened to me through no fault of my own,” it’s way easier to open up with someone” – Timothy

Oliver described how he was able to overcome this barrier when his understanding of what counts as abusive or harmful was shifted to fit with what he was actually experiencing. This allowed him to put boundaries in place which meant that the relationship continued without abuse. This involved an intervention in which a friend who worked in mental health spoke with both Oliver and his partner and externally validated the abusive nature of his partner’s behaviours, and the pain they were causing:

“the [friend who worked in mental health] told us that, “You have to see what your partner’s things, what they are comfortable with.” So, yeah, this was... this also helped but mostly the fact that I told her that, “This is my preference. I don’t like being physically teased,” and she kind of accepted it after--after some three/four months” - Oliver

While his dreams of an ideal relationship initially kept him stuck in his relationship, it was a shift in his understanding of what it meant to have a happy and stable life that ultimately allowed Steven to move on from the relationship:

“I can have a separate relationship with my children and my grandchildren and I don’t have to, you know, be involved in her world” – Steven

2.2. Slow Process of Supported Learning and Recovery

For many of the men, moving on involved a slow process of reflection and learning that required support from trusted others. All the men were at different stages of this process with some still drawing connections between their partner’s behaviour and the impacts it had on them or grappling with how best to account for their partner’s behaviour:
“certainly not like I was sitting there, you know, learning or, you know, hearing this stuff and all of a sudden, you know, but it was kind of in lines appearing in my head and sort of I’ve kind of been just dwelling on them a lot, or, you know, feeling them a lot since then.” – Jason

Others were further along in this process. Over time and through reflection, they experienced a reduction in the power the abuse, and its impacts, had over them and had developed a new perspective on the abuse:

“I just want to put it behind me and not think about it anymore, you know. Talk about it and then let it go, you know.” – Steven

“I can talk about it now without it being too traumatic, which is... I wouldn’t be able to do ten years ago, you know” – Arthur

For some of the men, the process of reflecting on, and speaking about, their own experiences and learning about experiences like their own had been a painful and difficult one at times. Specifically, this involved distressing emotions connected to their memories of the abuse and the pain of recognising that someone they cared about had acted in an abusive way towards them:

“I guess it’s just something that maybe I just naturally don’t want to experience, um, and I think that’s a challenge for a lot of people. Like, okay, you gonna talk about this, you’re gonna end up in tears.” – Paul

Although slow and at times difficult, the men described being able to move through this process with the help of trusted support. For all of the men, speaking to a trusted friend or family member was their main avenue of support, and for some this was their only support. For those who sought help from formal sources, this professional support also played a role in helping them move on. In both cases having someone trustworthy and non-judgemental to talk to was a crucial element when deciding whether to speak about their experiences:
“I talked to members of my family, primarily my brother but also--also my mother. And they-they were... they were basically the only people I trusted to talk to” – Matthew

“I wouldn’t share this experience with anyone else ‘cause people may judge you or your partner when you tell them that like you were physically harmed. They may think like, okay. But when--when I’m talking to you, I mean, I think that you know what I’m talking about” – Oliver

Speaking with a trusted person aided the men in the process of moving on by enhancing reflection, countering isolation, and providing validation, education, and practical help. First, the process of describing their experiences of abuse facilitated reflection both when deciding to leave the relationship and in making sense of their experience afterward:

“Say it out loud, hear it back and realise now that I’m saying it out loud that’s really dumb or that sounds really abusive, you know. If you find yourself having to re-phrase it too much, maybe it’s like maybe you said it right the first time, you know. I don’t know. I feel that’s something that’s really under-rated is just find someone so you can say it out loud so you can be self-reflective.” – Timothy

Speaking with family or friends also provided validation of the abuse the men were experiencing, reinforced their decision making, and helped shift the isolation and loneliness which had developed. This was the case both when deciding to leave and after having left the relationship:

“the trouble is is that the best advice that I could be given at the time was really what I knew already, it was just that I needed to break it off and separate it as well as I could. For various reasons that we’ve discussed before that wasn’t practicable but this is something that I understood and this helped reinforce that for me and knowing that it was something that actually could be dealt with was--was good” – Matthew
Three of the men also described having spoken with a counsellor or psychologist after having left their relationships and that this had also provided validation of their abusive experience:

“I do remember the counsellor saying that she was surprised at how rational I--I had been throughout the whole thing and that I’d been making all the right decisions which was reassuring to me at the time.” – Matthew

Hearing other perspectives or having their experiences labelled as abusive was another important component in moving on as it provided a new way for the men to evaluate their experiences. For some of the men this information came from someone close to them:

“I don’t know, it’s like I had [Friend's] eyes looking on her as well as mine and it felt... just made me see those actions a bit... a bit differently and I was able to have a dialogue with myself that wasn’t just between me and her, you know?” – Jason

Two of the men spoke about hearing a lecturer speaking about men’s experiences of domestic abuse and connecting this information with their own experiences:

“there’s--there’s things about it that I’m... you know, I’m thinking about now that I have never really thought about as--as problematic. I mean, it was the... yeah, I mean, even from... [laughs] you know, if I go into lectures there was things in there that I was thinking about, you know, it’s... you know, it sounds like [Ex-partner].” – Jason

Reaching out to others also resulted in practical support. This played a big role in helping some of the men both in leaving their relationships and later in helping them to overcome some of the lingering impacts:

“I phoned her [his step-mother] and--and said, “I’ve had enough. I’ve gotta go,” and she dropped everything - she was living in [Town] I think, so like an hour, hour-and-a-half,
depending on traffic, um, away - and she drove into [Big city] and we put my shit in the back of her car and we just went” – Arthur

One of the men also spoke about receiving practical support through the university after having a lecturer reach out to him because he was missing classes and tests, and this helped him in moving on:

“And I went to [Student Counselling] mainly on the premise of like well, at the very least it seems good to the lecturer, maybe it’s a good idea to go, and it really helped me. Er, not so much at the time initially but it helped me in terms of uni, in terms of like sorting the uni admin stuff and me coming back to uni with like going to Uni Health and stuff like this is really, really helped to me. It’s got me here.” – Timothy

2.3. Ongoing Impact of Abuse

For all of the men moving on from the abuse was not a straightforward process and for many, the negative impacts that they experienced persisted for a long time. For some these impacts are ongoing. Two of the men spoke about the physical scars that they still bear from their time in their relationships:

“I had these... they’re--they’re not as distinct any more but I had these scratches, scars all over my arms from where she’d dig her nails in, sort of really get in there” – Matthew

Two of the men described ongoing symptoms of post-traumatic stress. They spoke about situations which triggered vivid memories of especially aggressive events or feelings of anxiety and hypervigilance around threat:

“even now if someone goes out and they... and they close a door I just have to think like for seven... five or six minutes I’m not in my normal condition ‘cause I think maybe something’s wrong.” – Oliver
Some of the men experienced a continuation of the mental health difficulties which were exacerbated by, or arose from, their relationships including low mood and self-image, anxiety, addiction, and impotence:

“Oh, it took me a long time to trust myself again. Like if I fancied somebody it took me a long time to accept that I felt this way and took a long time to trust, er, that the other person was being genuine if they reciprocated. Um, yeah. Um, I was impotent for a long time afterwards, like six years maybe afterwards” – Arthur

For almost all the men, continued self-blame and an enduring sense of guilt and shame was one of the most salient, and for some, most emotionally painful ongoing impacts. For some this was the same self-blame they felt in the relationship around being at fault for the harm they experienced:

“I--I don’t think about her being unfaithful to me, I think about, um, I feel guilty. You know, I feel like I’ve done some--something bad. I feel like I’ve kind of hurt her, you know, and I have... even now, you know, I still feel this” – Jason

In contrast, some of the men spoke about how through reflection and learning they no longer blamed themselves for the harm they experienced. However, they still experienced self-blame and guilt for not having recognised and acted on the harm sooner or for having even got into the relationship in the first place:

“I feel like I failed in a different way now. I feel like I failed in communicating. I feel like I failed in my assertiveness in my relationship and my self-worth. I feel like I failed in, er, pushing her to get the help she needed as opposed to enabling her” – Timothy

A final ongoing impact was their concern at a continued lack of awareness campaigns and services targeted at men and what this might mean for others who are currently experiencing harm:
“it’s not inclusive enough, the fact that this happens to males as well as females as well as gender diverse, you know. There’s... um, just yeah, I think it would be refreshing, the effect of seeing... of, you know, Jo Citizen out there seeing a poster that says, ‘Violence against men is o--, is not okay,’ um, might spark a bulb in--in some people’s minds going, oh, you know what, that’s--that’s right and I should start thinking, I might start thinking about violence... relational violence, relationship violence, um, in more than just a one direction frame.” – Arthur

In contrast to the negative impact of their abusive relationship, the men identified several strengths which they had developed as part of the process of moving on. These involved a better sense of themselves and what they would put up with in a relationship and feeling like they were now more comfortable with reaching out for help:

“if anybody does that again then I’m... you know, [laughs] game over, you know. I’m--I’m... I know that I’m worth more now than that, you know.” – Arthur

Discussion

This study investigated the lived experiences of IPA and help-seeking in seven male university students in New Zealand. Using IPAN semi-structured interviews were conducted with each man and their accounts were interpreted, first individually to understand each man’s personal experience and then as a whole to identify common themes and subthemes. Two themes were identified. These themes along with their constituent subthemes will be summarised below and their relationship with the existing literature will be discussed. The implications for policy and practice will then be discussed. Finally, the limitations of this research will be highlighted and recommendations for future areas of research will be made.
Summary of Findings

**Stuck in the abusive relationship.** This theme is described through four subthemes, each of which represents a barrier which prolonged the abuse the men faced. In speaking about these barriers the men shed light on the forms of abuse they experienced, their responses to it, and the responses of those around them. These responses can be understood within the frameworks developed in the literature on female victims, in that the men experienced a range of internal, interpersonal, and sociocultural barriers which interacted with each other (Liang, Goodman, Tummala-Narra, & Weintraub, 2005). These barriers are also broadly in line with those identified in other research with men who have experienced IPA (e.g. Huntley, 2019) and extend these findings by highlighting how they operate within a sample of university students.

The first subtheme involved an *emotional investment in the relationship*. The men spoke about loving their partners, a commitment to the relationship, and showing care and sympathy for their partner’s difficulties in the face of abusive behaviour. This meant that they rationalised or looked past the abuse. This commitment to the relationship has been identified by several other studies (Corbally, 2015; Hines & Douglas, 2010; Lien & Lorentzen, 2019; Wallace et al. 2019) and is especially similar to the findings of Lien and Lorentzen (2019) who discussed how the men in their sample showed love and care for their partners and put their partner’s needs ahead of their own meaning that they put up with the abuse. While previous studies have identified this theme as closely related to a commitment to marriage and concern for their children (Corbally, 2015; Hines & Douglas, 2010) these findings suggest this phenomenon can also play a role in those who are in cohabiting relationships without children.

The *all-encompassing controlling environment* the men described and their experience of *shouldering the burden* were two closely related subthemes which described
how the forms of abuse the men experienced and their responses to it kept them from seeking help or putting boundaries in place to address the abuse. In describing how these elements kept them ‘stuck’ these subthemes also shed light on the forms and dynamics of the abuse men can experience. All of the men in this sample had experienced a range of different forms of abuse which produced a number of negative consequences and had a real impact on their lives. This finding is in line with the growing body of qualitative literature which has looked at men’s experiences with IPA (e.g. Lien & Lorentzen, 2019; Machado et al. 2016) and extends previous work by highlighting this issue within a student sample. Additionally, all of the men in this sample described aggression and coercion which was largely unidirectional, with the men occasionally using force to restrain their partners out of self-defence. This pattern is in line with the form of IPA termed female-only IPA by Straus (2015) and calls into question the conclusions of researchers who support a gendered explanation of IPA in which men rarely experience serious harm and in which female aggression occurs in the context of self-defence (e.g. Dobash & Dobash, 2004).

Of the different forms of abuse the men experienced, psychological abuse was reported as occurring most frequently. Men’s experiences of psychological abuse have received very little focus in the literature and researchers have suggested that the lack of rich and detailed data on this phenomenon means that it is unclear how well current conceptualisations of psychological abuse match with men’s lived experiences (McHugh, Rakowski, & Swiderski, 2013). Previous literature has highlighted that psychological abuse is a broad term which involves a range of separate forms of abuse. Common forms include social abuse which involves isolating tactics, psychological abuse or gaslighting which involves undermining a person’s sense of sanity, and emotional abuse which involves reducing a person’s self-worth through put-downs, embarrassment, and accusations (Outlaw, 2009). Gender role harassment has been identified as a form of psychological abuse which
may be especially relevant to men’s experiences and involves criticisms about various aspects of a man’s life as unmanly (McHugh et al. 2013). The men in the present study reported experiencing all of these different forms of abuse and in line with research with both men (Machado et al. 2016) and women (Strauchler et al. 2004) the psychological elements of the abuse the men experienced were reported as some of the most salient and impactful.

Previous literature has identified legal and administrative abuse as a form of harm which is especially relevant to men who are victimised (e.g. Machado et al. 2016). This form of abuse was directly experienced by one of the participants who described being arrested by police after having restrained his partner who had drawn a knife. Another participant spoke of not defending himself out of fear of the legal repercussions. However, both of these participants were older adults who had experienced the abuse more than a decade ago and in another country. The other men had not experienced legal and administrative abuse and it is unclear to what degree this is currently experienced by young men in New Zealand.

Moving beyond individual forms of abuse, all but one of the men described behaviours which served to create an all-encompassing environment of control. While this study was not intended as a test of Johnson’s typologies (Johnson, 2006) these findings suggest that men can experience relationships in which they experience abuse in the context of feeling controlled by their partners and adds to previous work which has identified CCV with men who experience IPA (e.g. Hines & Douglas, 2010). One of the men’s descriptions quite clearly matched what Johnson described as SCV and was characterised by discrete instances of rapidly escalating aggression. Given that this man described a number of barriers which kept him within a relationship in which he experienced abuse and which had serious impacts on him, these findings question the implication made by Johnson that resources should be focussed on CCV relationships. Additionally, the finding that men did not
experience this abuse as isolated acts but instead formed patterns over time has been identified in other samples of men (Machado et al. 2016; Morgan & Wells, 2016). In line with the work of Machado et al. (2016) who identified a number of ‘intensification factors’, the men in this study spoke about a range of events which triggered an escalation of the abuse they were experiencing. For most of the men, moving in with their partners was when the abuse first started to escalate and related to conflict arising from things like housework, as well as their partners being able to exercise more control over their lives. These findings also add detail to quantitative studies, including a New Zealand longitudinal study, which have found that when compared to dating or married couples, cohabiting couples experience higher rates of IPA both overall and in terms of range and severity (Brown & Roebuck Bulanda, 2008, Magdol, Moffitt, Caspi, & Silva, 1998; Stets & Straus, 1989). Additionally, events surrounding leaving the relationship were also associated with increased abuse. Increasing awareness of these events as times when IPA is more likely could inform education campaigns or prompt questioning by care providers around the role of IPA within a relationship. Beyond the particular events which intensified the abuse, all but one of the men identified patterns or cycles of abuse. These patterns involved escalating forms of abuse which culminated in an acute stage of physical abuse which was followed by periods of relative calm. This pattern has been identified in other qualitative work with men (Machado et al. 2016) and is similar to the cycles of violence identified in women who have experienced IPA from male partners (Walker, 2017). In her model of the cycle of violence, Walker (2017) highlights the cognitive and behavioural factors which maintain the cycle.

After learning to identify this cycle the victims of IPA may become hypervigilant and employ a number of strategies to avoid the escalation, for example by apologising or giving in to their partner’s demands (Walker). Successful implementation of these strategies is both negatively reinforcing for the victim and positively reinforcing for the partner meaning this pattern is
likely to continue. Additionally, when the attempt to placate their partner is unsuccessful the abuse may progress to an acute phase which again is reinforcing for the partner using IPA in that they may experience catharsis or may at this point have their demands met (Walker).

Walker (2017) also argued for the role of gender-role socialisation as contributing a barrier to women seeking help from this cycle of abuse. Similarly, it appears that hegemonic masculine norms as well as the norm of chivalry may have influenced men’s responses to the abuse in a way which acted as a barrier to them seeking help. For some of the men their responsibility to ‘shoulder the burden’ reflected masculine norms about being self-reliant and not expressing difficult emotions (Addis & Mahalik, 2003) and for one of the men his need to wait for a right time to leave the relationship in order not to upset his partner may have reflected a chivalry norm around a view of women as more fragile and a need to protect them. Chivalry has been identified as a dominant norm within Western societies (Felson, 2000). However, some of the men also endorsed what may be a more universal sense of responsibility to care for their partner.

The abuse the men experienced and their response to it elicited a range of negative impacts including anxiety, exhaustion, guilt, shame, embarrassment, isolation, and a reduced sense of independence. The abuse, the men’s responses, and the negative impacts were all interconnected and match the factors identified by Ciurria (2018) which can induce states of lowered self-efficacy and learned helplessness which ultimately lead to reduced autonomy and explain how these subthemes contributed to the men’s feeling of being stuck in the abusive relationship. These findings point to areas which could be highlighted in awareness and education campaigns and areas to be addressed in therapy with these men, for example restoring a sense of self-efficacy.
A final subtheme identified the men’s understanding of abuse. Most of the men described uncertainty around how their experiences fit with the concept of abuse and therefore the extent to which they were justified in taking action to seek help or address their partner’s behaviours. They described a range of sources which informed their understanding, and included their previous observations of relationships, the responses of those around them, educational resources, the internet and more formal sources of information. Because the men in the sample experienced the abuse as young adults and for some it was their first intimate relationship, most of them expressed uncertainty around the extent to which their experience was normal and therefore how justified they were in seeking help or taking action. This may contribute to why young adulthood is a time of particular risk for abuse and suggests that education programmes around healthy relationship norms could be beneficial. Others spoke about witnessing aggressive or controlling behaviour between their parents or guardians and their sense that this was part of a normal relationship. The men also spoke about internalising a gendered view of abuse as something carried out by men and which involves severe physical violence and a serious fear for physical safety. As they did not see their experiences as necessarily fitting this definition they did not identify it as a problem for which seeking help was justified. This helped prolong the abuse. This understanding of abuse was informed by instances in which the people around them dismissed their experiences, including one man who described being laughed at by the police, and their encounters with gendered or severe accounts of abuse from the internet or being given gendered resources about abuse. This is in line with the findings of Douglas and Hines (2012) who found high rates of negative experiences with seeking help, and that negative help-seeking experiences were linked with worse mental health outcomes.

While the men described a range of experiences which reinforced a gendered conceptualisation of abuse they also spoke about a less explicitly gendered idea of abuse as
needing to involve serious physical abuse. In their integrative literature review of 16 qualitative studies looking at barriers to help-seeking for women who had experienced IPA, Overstreet and Quinn (2013) also identified a cultural belief about abuse needing to involve severe physical injuries before seeking help is warranted. This may speak to a broader focus in society on those who experience physical IPA victimisation and how this might impact people who experience more covert or psychological forms of abuse regardless of gender. This points to a need for awareness campaigns which highlight a range of different forms of abuse.

**Overcoming the barriers to moving on.** This was the second theme and was expressed through three subthemes, each of which describe different elements of the process of moving on from the abuse. The first subtheme described the factors which led the men to overcome the barriers which were prolonging the abuse. This process of overcoming the barriers was also identified by Simmons, Bruggemann, and Swahnberg (2016) who conducted 12 interviews with men in Sweden, recruited through the general population and a health care centre, who had experienced some form of IPA. Simmons et al. described how a number of different factors were balanced against each other when deciding to seek help. They identified the men’s level of suffering, the availability of support, and a perceived need for help with unrelated difficulties as potential factors which might tip the balance and mean that a man feels ready or able to seek help (Simmons et al. 2016). A similar experience was described by the men in the present study, however for most of the men this tipping point was not met until they experienced overwhelming consequences or severe physical abuse. A counterpoint was provided by one of the men who through a friend’s intervention, was able to identify his partner’s behaviours as abusive and allowed him to shift the balance to taking action. These findings highlight just how harmful the high barriers to men seeking help are, and point to ways in which they could be overcome sooner.
Once the men had taken action to address the abuse, which for all but one of the men involved leaving the relationship, they described the support they received and how it facilitated the process of moving on. The men described support from both formal and informal sources, with the functions of this support ranging from practical support, education about abuse, and validation. This finding echoes that of Douglas and Hines (2012) who found that men seek help in a range of different places. However, none of the men in the present study had sought help from a service specialising in IPA. This may reflect the findings of Cheung, Leung, and Tsui (2009) who conducted a systematic internet search of service providers for male victims of IPA in 11 countries, including NZ. In NZ no agencies were identified which explicitly catered to male victims of IPA (Cheung et al. 2009).

In line with the findings of Huntley et al.’s review (2019), trustworthiness of the source of support was a highly important aspect for these men. Many of them spoke about a process of learning to identify their partner’s behaviour as abusive. This process involved time spent reflecting and was often facilitated by speaking with others and having others suggest the label of abuse. These findings are in line with other studies which have found that men may have difficulty identifying IPA behaviours as abuse and face a number of barriers to disclosing their experiences. However, contrary to the findings of Corbally (2015) and in line with those of Brooks et al. (2017) the men in the present study were able to speak directly about the aggressive and coercive behaviours directed at them and they appreciated having these experiences validated and labelled as abuse. Similar to the subtheme of ‘belief and recognition’ identified by Wallace et al. (2019) it was this opportunity to reflect and have their experiences labelled and validated that assisted the men in recognising the abuse and allowed them to go through the process of moving.

Finally, the men spoke about a range of ongoing impacts. These included some continuing PTSD-like symptoms along with other mental health difficulties, a diminished
sense of self-confidence and difficulty trusting others. An especially persistent impact was a continued sense of self-blame for the abuse or their response to it. These responses are again similar to those identified in the literature (e.g. Machado et al. 2016; Wallace et al. 2019) and highlight the serious impact these experiences can have on these men. These findings also indicate some of the needs of men who seek help for abuse from an intimate partner and emphasise that they experience ongoing needs even after having left an abusive relationship.

**Recommendations for policy and practice**

This study along with the broader literature has identified that men can experience a wide range of different forms of IPA which can be severe and carry significant detrimental consequences. It is therefore important that policies and services be available which address the needs of these men. The findings of the present study highlight several points on how these policies and services could be informed and implemented.

Firstly, the men all identified different factors, such as a lack of prior long-term relationships, dismissal from those around them, or gendered resources, which contributed to an uncertainty about how their experiences fit with the concept of abuse and whether they were justified in seeking support. These factors highlight the potential benefit that educational programmes or awareness campaigns could have. Dating violence programmes are a commonly studied example of this approach. One meta-analysis which looked at 13 dating violence prevention studies in middle and high school students found that intervention programmes significantly increased knowledge of dating violence and decreased approval of it (Ting, 2009). However, the extent to which these programmes address men’s experiences of IPA and whether these results carry through to university age is unclear. Given that none of the men identified experiences with any such programmes it is difficult to evaluate the extent to which they may have found these programmes useful. A university-based
programme may be more relevant to these men’s needs. One promising set of findings were reported by Palm Reed, Hines, Armstrong, and Cameron (2015) who investigated an intervention programme for sexual assault and dating violence which was administered with a group of first year university students. They found that this programme significantly increased participant’s knowledge of dating violence and reduced their approval of female-to-male dating violence (Palm Reed et al., 2015). The broader adoption of such a programme may benefit men not only by increasing their own understanding but also by enhancing the responses of those around them.

Many of the men in the present study also spoke about their use of media such as the internet or pamphlets to gain insight into their experiences. Concerningly, they identified most of these forms of media as gendered or ambiguous in nature and that this was unhelpful. Additionally, an ongoing lack of representation was identified as a concern for some of the men. Previous work has evaluated several different media campaigns targeting male perpetrators and female victims and has identified a range of different components which may effectively increase awareness and change norms around responses to this phenomenon (Donovan & Vlais, 2005). Given the findings of the present study, the development of similar campaigns which highlight men as victims may be helpful. Additionally, resources which highlight examples of a range of different forms of abuse beyond physical aggression may aid in targeting the perception identified by the men that abuse involves severe physical violence.

The men’s comments around the impacts of the abuse and the support that helped them move on from it point to a number of different factors which could be considered by those supporting someone in this situation either in a formal or informal capacity. Demonstrating trustworthiness and a non-judgemental attitude were factors considered important by all the men. Additionally, the men identified being given the space to speak
about their experiences and having their experiences validated and labelled as being helpful across both formal and informal sources of support. Given that many of the men had first sought help with a family member or friend and that the literature suggests that men more commonly seek help from informal sources (Douglas et al. 2012) education programmes or resources could be developed to assist those who are concerned that someone close to them is experiencing IPA.

In describing the impacts of the abuse they experienced the men identified a number of needs which may best be met with more formal health care providers. These included mental health difficulties such as anxiety, alcohol and drug use as a coping mechanism, and lowered self-worth and self-efficacy along with intense feelings of guilt, shame, and self-blame. Additionally, for some of the men these difficulties were connected to hegemonic masculine norms. Qualitative research with counsellors who have worked with male victims of IPA has also identified addressing guilt and shame and the role of hegemonic masculinity as especially relevant needs when working with these men (Hogan, Hegarty, Ward, & Dodd, 2012). Therefore, making sure that education, resources, and training relevant to these needs are provided to university health care providers would be beneficial. Finally, the men in the present study described an extended period of time in which they were aware of their partner’s use of coercive and aggressive behaviour without necessarily having identified it as abusive or harmful. Therefore, support providers may benefit from advertising their services in a way which demonstrates or describes concrete examples of behaviours and initially avoids labels such as abuse.

Limitations and Suggestions for Future Research

IPAN is concerned with collecting rich and detailed data from a select group of participants and then engaging in a subjective interpretation of that data (Smith et al. 2009). Therefore, traditional quantitative criteria for evaluating research validity and reliability are
not applicable here (Yardley, 2000). However, due to the centrality of the researcher’s interpretation there is the potential for bias to impact the research process and subsequent conclusions (Brocki & Wearden, 2006) and it is important to evaluate the measures taken to enhance data quality and limit bias. Yardley (2000) proposed a sensitivity to context, commitment and rigour, transparency and coherence, and impact and importance as important steps to take in promoting valid results which reflect the experiences of the participants. While these specific criteria did not directly inform the research process several steps were taken to enhance the quality of the data and analysis in a way which is in line with these criteria. During the interview phase these steps included offering men a choice of interviewer gender, a focus on the use of non-leading and open questions and summaries throughout the interviews and taking time to ensure the men knew that their own understanding of their experiences was central to the research. During the analysis phase this involved a thorough interpretation of each man’s experiences grounded in the transcripts and recordings of their interviews, before moving to a broad interpretation, as well as the consultation with a supervisor and an academic advisor with qualitative expertise. Finally, the men’s quotes and examples of how different stages of the analysis process were conducted have been provided to demonstrate transparency.

This research and the conclusions drawn do have some limitations relating to the characteristics of the sample. Several of the men had sought help through student counselling, all but one had left their partner, and all of the men identified as having experienced harm. This may have contributed to their willingness or ability to take part. Although we did not explicitly recruit help-seeking males this limitation is similar to one identified by Hines and Douglas (2010) who noted that in their sample of help-seeking men a number of societal and internal barriers may prevent men from speaking up about their experiences of IPA, meaning
that many men may not feel comfortable participating in research. Future research could explore ways of accessing this group of men to explore how their experiences differ.

The men in this study all experienced abuse which was largely unidirectional, with the men occasionally using force to restrain their partners out of self-defence. Quantitative research with university students has found that the majority of relationships in which abuse occurs could be characterised by the use of bidirectional IPA (Straus, 2014). Men who experience abuse in the context of a bidirectionally abusive relationship are especially under-represented in the qualitative literature and future research could explore the particular experiences and needs of men in this group.

All but one of the men in this sample identified as New Zealand European/Pākehā. Caution therefore needs to be exercised in any extrapolation to how male university students from other ethnicities experience IPA. Research suggests that those who identify as Māori and Pasifika also experience IPA (Ministry of Justice, 2014) and it will be important to more directly investigate their experiences in subsequent research. While efforts were made to provide a culturally sensitive process future research could explore specific changes to the recruitment and interview process to best meet the potential needs of Māori and Pasifika men.

Finally, future qualitative research could be done which explores the perspectives of those who have provided support to students who have experienced IPA, such as family or university counsellors.

**Conclusion**

By exploring the lived experiences of seven male university students this study demonstrated that men can be the victims of abuse which can be serious, have lasting impacts, and for which they have difficulty seeking and receiving help. In speaking about their experiences, the men in this study identified a number of complex internal, interpersonal, and sociocultural barriers which prolonged their exposure to abuse. Their
descriptions of this abuse and their own responses to it provided insight into how abuse can form cycles which are autonomy reducing and can make it difficult for men to leave.

Additionally, these findings highlight how some of the elements of this experience may be common across victims of abuse while other elements may be more gender specific. The men also identified a number of experiences which either worked to hinder or facilitate their ability to recognise the abuse and their perceptions of themselves as worthy of seeking support. This study adds to the growing body of qualitative work by providing a deeper understanding of how partner abuse can impact men, and the kinds of needs that men who have been through these situations might have. This growing understanding will need to be incorporated at a number of different levels of policy and practice.
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Appendices

Appendix A: Research flier

Are you a male student who has experienced harm and/or control in your intimate relationship?
If so, we would really like to make contact with you

What is the aim of the project?
We know little about men’s experiences of harm and control in intimate relationships. We would like to change this by talking to men on campus about their experiences.
To be eligible, you must be a male student enrolled at VUW and have been in a dating or intimate relationship for at least one month at some point in your adolescent/adult life.

What is involved?
You fill out an online questionnaire about your aggressive or controlling experiences in a past intimate relationship. It will take about 20 - 30 minutes to complete. You can claim a $5 Vic Books voucher for completing the survey.
We would also like to interview you about your experiences and will ask you provide your email address at the end of the questionnaire. Depending on how many people respond to the ad we may not be able to offer an interview to everyone. The interview will last around 90 minutes in exchange for a $40 supermarket voucher as a koha.

Who is the research team?
Dr Louise Dixon is a VUW Associate Professor specialising in family violence prevention. Jakob Scotts-Bahle is a Forensic MSc and Clinical Psychology student. Jonathan Langton Burnell is a Psychology honours degree student. Please contact us if you have any questions:

Dr Louise Dixon
Jakob Scotts-Bahle
Jonothan Langton Burnell

<table>
<thead>
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<th>Personal details redacted</th>
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Appendix B: Online questionnaire

SECTION 1

Please provide the following information. Where you have a choice of responses please circle or tick the appropriate response.

<table>
<thead>
<tr>
<th></th>
<th>Your sex</th>
<th>Male</th>
<th>Female</th>
<th>Genderqueer</th>
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</thead>
<tbody>
<tr>
<td>1</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Your nationality</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Your age in years</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>4</td>
<td>Your sexual orientation</td>
<td>Heterosexual</td>
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<td></td>
<td></td>
<td>Gay</td>
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<td></td>
<td>Lesbian</td>
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<td></td>
<td></td>
<td>Bi-sexual</td>
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<td></td>
<td></td>
<td>Other</td>
<td></td>
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<tr>
<td>5</td>
<td>Your current relationship status</td>
<td>Single</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Dating (but not living together)</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Stable relationship lasting a month or longer (but not living together)</td>
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<td></td>
<td></td>
<td>Cohabiting</td>
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<td></td>
<td>Divorced</td>
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<td></td>
<td></td>
<td>Married (spouse present)</td>
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<td></td>
<td></td>
<td>Married (separated)</td>
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<td></td>
<td></td>
<td>Widow/er</td>
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</table>

How many intimate relationships have you had in the past 12 months that have lasted longer than one month?

<table>
<thead>
<tr>
<th>7</th>
<th>Which degree are you currently undertaking (if any)</th>
<th>None</th>
</tr>
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</table>
Please state what major(s) you are taking

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<tr>
<th></th>
<th>Bachelors</th>
<th>Masters</th>
<th>Doctorate</th>
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11. Please choose from the list below which best describes your ethnic group. Tick up to three relevant boxes below.

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<tr>
<td>A</td>
<td>NZ European/ Pākehā</td>
</tr>
<tr>
<td>B</td>
<td>New Zealand Māori</td>
</tr>
<tr>
<td></td>
<td>Specify up to three iwi/ hapū</td>
</tr>
<tr>
<td>C</td>
<td>African</td>
</tr>
<tr>
<td>D</td>
<td>Australian</td>
</tr>
<tr>
<td>E</td>
<td>British</td>
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<td>F</td>
<td>Irish</td>
</tr>
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<td>G</td>
<td>Cambodian</td>
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<td>H</td>
<td>Chinese</td>
</tr>
<tr>
<td>I</td>
<td>Cook Island Māori</td>
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<tr>
<td>J</td>
<td>Dutch</td>
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<td>Korean</td>
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<td>Latin American</td>
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<td>T</td>
<td>Middle Eastern</td>
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</table>
### U

Niuean

### V

Polish

### W

Samoan

### X

South Slav

### Y

Sri Lankan

### Z

Tokelauan

### AA

Tongan

### BB

Vietnamese

### CC

Other Asian

### DD

Other European

### EE

Other Pacifika

### FF

Other Southeast Asian

### GG

Other

### HH

Not known

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**SECTION 2**

Here is a list of things you and your intimate partner may or may not have done during your relationship. First we want to know if any of these things have happened in the last 12 months with an intimate partner. If you have had more than one relationship that has lasted longer than a month in the last 12 months, answer the questions thinking about the most volatile relationship you have had. You are also asked to consider life before the last 12 months - if any of the listed items have ever happened at some point in the past with an intimate partner answer 'Yes' in the 'Ever' column. Use the codes below to indicate how many times these things have happened in the last 12 months and Ever.

<table>
<thead>
<tr>
<th>0 = never</th>
<th>1 = rarely</th>
<th>2 = sometimes</th>
<th>3 = often</th>
<th>4 = very frequent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ever</td>
<td>this has happened before but not in the last 12 months (yes or no).</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Third party content redacted
MALE STUDENTS' EXPERIENCES OF IPA AND HELP-SEEKING

In the last 12 months

1. I showed my partner I cared even though we disagreed

2. My partner showed care for me even though we disagreed

3. I explained my side of a disagreement to my partner

4. My partner explained his or her side of a disagreement to me

5. I insulted or swore at my partner

6. My partner did this to me

7. I threw something at my partner that could hurt

8. My partner did this to me

9. I twisted my partner's arm or hair

10. My partner did this to me

11. I had a sprain, bruise, or small cut because of a fight with my partner

12. My partner had a sprain, bruise or small cut because of a fight with me

13. I showed respect for my partner's feelings about an issue

14. My partner showed respect for my feelings about an issue

15. I made my partner have sex without a condom

16. My partner did this to me

17. I pushed or shoved my partner

18. My partner did this to me

19. I used force (like hitting, holding down or using a weapon) to make my partner have oral or anal sex

20. My partner did this to me

21. I used a knife or gun on my partner

22. My partner did this to me

Third party content redacted
MALE STUDENTS’ EXPERIENCES OF IPA AND HELP-SEEKING

[Table with questions and responses]

24. My partner passed out from being hit on the head in a fight with me.  Yes  No
25. I called my partner fat or ugly.  Yes  No
26. My partner called me fat or ugly.  Yes  No
27. I punched or hit my partner with something that could hurt.  Yes  No
28. My partner did this to me.  Yes  No
29. I destroyed something belonging to my partner.  Yes  No
30. My partner did this to me.  Yes  No
31. I went to the doctor because of a fight with my partner.  Yes  No
32. My partner went to the doctor because of fight with me.  Yes  No
33. I choked my partner.  Yes  No
34. My partner did this to me.  Yes  No
35. I shouted or yelled at my partner.  Yes  No
36. My partner did this to me.  Yes  No
37. I slammed my partner against a wall.  Yes  No
38. My partner did this to me.  Yes  No
39. I said I was sure we could work out a problem.  Yes  No
40. My partner was sure we could work it out.  Yes  No
41. I needed to see a doctor because of a fight with my partner but did not.  Yes  No
42. My partner needed to see a doctor because of a fight with me but did not.  Yes  No
43. I beat up my partner.  Yes  No
44. My partner did this to me.  Yes  No
45. I grabbed my partner.  Yes  No
46. My partner did this to me.  Yes  No
47. I used force (like hitting, holding down, or using a weapon) to make my partner have sex.  Yes  No
48. My partner did this to me.  Yes  No

Third party content redacted
I stomped out of the room, or house, or yard during a disagreement.

My partner did this to me.

I insisted on sex when my partner did not want to (but did not use physical force).

My partner did this to me.

I slapped my partner.

My partner did this to me.

I had a broken bone from a fight with my partner.

My partner had a broken bone from a fight with me.

I used threats to make my partner have oral or anal sex.

My partner did this to me.

I suggested a compromise to a disagreement.

My partner did this to me.

I burned or scalded my partner on purpose.

My partner did this to me.

I insisted my partner have oral or anal sex (but did not use physical force).

My partner did this to me.

I accused my partner of being a lousy lover.

My partner accused me of this.

I did something to spite my partner.

My partner did this to me.

I threatened to hit or throw something at my partner.

My partner did this to me.

I felt physical pain that still hurt the next day because of a fight with my partner.

My partner still felt pain the next day because of a fight we had.

I kicked my partner.

My partner did this to me.

I used threats to make my partner have sex.

Third party content redacted.
PARTNER WORKSHEET

Here is a further list of things you and your intimate partner may or may not have done during your relationship. As with the last set of questions we want to know if any of these things have happened in the last 12 months with an intimate partner. If you have had more than one relationship that has lasted longer than a month in the last 12 months, answer the questions thinking about the most volatile relationship you have had. You are also asked to consider life before the last 12 months— if any of the listed items have ever happened at some point in the past with an intimate partner answer 'Yes' in the 'Ever' column.

Use the codes below to indicate how many times these things have happened in the last 12 months and Ever.

0 = never, 1 = rarely, 2 = sometimes, 3 = often, 4 = very frequently

Ever = this has happened before but not in the last 12 months (yes or no).

Please circle the appropriate response:

1. I did this to my partner
2. My partner did this to me
3. In the last 12 months
   Ever
3. In the last 12 months
   Ever

Made it difficult to work or study

Controlled the other’s money

Kept own money matters secret

Refused to pay money/pay fair share

Third party content redacted
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Threatened to harm the other one</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Threatened to leave the relationship</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Threatened to harm self</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Threatened to disclose damaging or embarrassing information</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tried to make the other do things they didn’t want to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Used nasty looks or gestures to make the other feel bad or silly</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Smashed the other’s property when annoyed/angry</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Was nasty or rude to the other’s friends and family</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ventured anger on pets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tried to put the other down when getting ‘too big for their boots’</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Showed the other up in public</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Told the other they were going mad</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Told the other they were lying or confused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Called the other unpleasant names</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tried to restrict time the other spent with family or friends</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wanted to know where the other went and who they spoke to when not together</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tried to limit the amount of activities outside the relationship the other was involved with</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acted suspicious or jealous of the other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Checked up on the other’s movements</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tried to make the other feel jealous</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Third party content redacted</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Thank you for answering our questions. We would be very interested in hearing more about some people’s experiences. If you would be happy to consider taking part in a confidential interview about your experiences in your relationships then please enter your email address below. We won’t be able to select everyone who is happy to talk to us and so we will choose people who match our criteria at random. Participants will have the choice of receiving 2 hours of IPRP credits or a $40 supermarket voucher as a koha for their participation.

If you would like to find out more about the interview phase of our study and to consider taking part please enter your email address in the box provided, otherwise please leave this box blank.

<table>
<thead>
<tr>
<th>Your Email Address</th>
</tr>
</thead>
</table>

Thank you for completing the questions asked

Have you experienced any distress from taking part in this survey? None Some A lot

How likely is it that you will access some of the free services listed at the beginning of the questionnaire? Not at all Maybe Very
Appendix C: Online questionnaire Information and Consent sheet

Research project: INVESTIGATING MALE STUDENTS’ EXPERIENCE OF HARM AND HELPSEEKING IN INTIMATE RELATIONSHIPS (#25770)

ONLINE INFORMATION AND CONSENT SHEET

Dr Louise Dixon                    Jakob Scotts-Bahle                    Jonothan Langton Burnell

Thank you for your interest in this project. Please read this information before deciding whether or not to take part. If you decide to participate, thank you. If you decide not to take part, thank you for considering our request.

Who are we?

We are a New Zealand based research team. Dr Louise Dixon is leading this research. She is an Associate Professor of Forensic Psychology from Victoria University of Wellington who specialises in the prevention of family violence. Her collaborators from Victoria are Jakob Scotts-Bahle, a Masters student studying Forensic Psychology while training to become a clinical psychologist, and Jonothan Langton Burnell who is studying for his honours degree in Psychology.

What is the aim of the project?

This study sets out to explore men’s experiences of aggression and control in intimate relationships and how they may have sought help for this issue, if they did. To be eligible to take part in this study, you must be male, attending VUW as a student, and have been in a dating/intimate relationship that has lasted for at least one month at some point in your adolescent/adult life.

This research has been approved by the School of Psychology Human Ethics Committee under delegated authority of Victoria University of Wellington’s Human Ethics Committee [project # 25770].

What is involved if I agree to participate?

If you agree to take part, you will complete a questionnaire online. You will be asked to answer questions about how you solve conflict and whether you have experienced aggression or control in your past and current relationships.
It will take you approximately 20-30 minutes to complete. It is important that any information received is accurate. We therefore ask you to complete the questionnaire in a private, quiet space, consider each question carefully, and answer each question honestly.

There are three sections to the questionnaire. The first asks for general demographic information. The second asks you to consider ways in which you may have solved conflict in your relationships. For example, questions will ask if you have ever done any of the following to a partner or if a partner has done this to you: showed them care; showed respect; punched or kicked; used a knife or gun; used force to have sex. The third section asks you about how you may have acted towards your partner in certain situations.

[For IPRP Participants] You will receive 0.5 research credit for taking part in this study. You will receive credit upon completion of the survey.

[For Non-IPRP Participants] You will receive a code at the end of the survey. You can exchange this code for a $5 Vic Books voucher. To do this please visit Jakob Scotts-Bahle at room xx on a Wednesday or Thursday at between 10am-11am or 1pm-2pm. This will be a private room and Jakob will be the only one there.

You must complete all three sections in one sitting, as you cannot resume from where you left off at another point in time. While you are participating, your responses will be stored in a temporary holding area as you move through the sections, but they will not be permanently saved until you complete all sections and you are given a chance to review your responses. You can stop participating in this study at any time, without giving a reason, up until you submit your completed questionnaire. If you chose to withdraw from the study before submitting your responses your data will not be saved. You will only receive the credits if you chose to complete the study and submit your responses.

Privacy and Confidentiality

To protect your privacy, a randomly generated number that does not identify you will automatically represent all the information you provide. Your names or other identifying information will not be stored alongside your responses. This means that individual feedback on your responses will not be provided, however, if you desire you can request a summary of aggregate results, after 01 March 2019 by contacting Louise Dixon using the details stated above.

Your de-identified data will be kept indefinitely by the research lead. It will definitely be kept for at least 10 years by the lead researcher after this research is published.

We would like to randomly select some participants who have successfully completed the questionnaire to come forward for an interview with the research team. At the end of the survey we will therefore ask you if you would like to consider taking part in an interview. If you do not want to take part you do not have to, simply do not provide your email address as requested at this point. If you would like further information about the interview phase of the study we will ask you to provide an email address for the research team to contact you at. If you choose to do this we will know your contact information but this will be kept confidential and will be stored in a spreadsheet separate to
your answers, located on a secure University server that only the research team have access to. We will then send you an information and consent sheet for you to consider and if at that point you decide you do want to take part we will arrange a suitable time and date for interview with you.

What happens to the information that you provide in the questionnaire?

The responses you provide will be collected and combined with other participants’ responses. We will then analyse the data and look at overall patterns of responses. The results will be written up in the form of scholarly articles or presentations where we will talk about the general pattern of results. The lead researcher may also use your data in other related projects and share it with competent professionals. When any of these things occur—data is shared, results are described, articles are written, or scientific presentations are given—it will be impossible for anyone to identify you.

If you have any questions or problems, whom can you contact?

- If you have any questions about this study, either now or in the future, please feel free to contact Louise Dixon or Jakob Scotts-Bahle using the details stated at the top of this information document.

If you do wish to discuss any issues around aggression in relationships with someone, or are experiencing distress, there are many avenues of free support, such as:

- VICTORIA STUDENT COUNSELLING SERVICES (APPOINTMENTS AND GENERAL ENQUIRIES): KELBURN AND TE ARO CAMPUS’: 04-463 5310; PIPITEA CAMPUS: 04-463 7474
- MALE ROOM: TEL: +64 3 548 0403
- KIDZNEEDDADZ: TEL 0800563123
- THE SAMARITANS: TEL: 0800 726 666
- THE FAMILY VIOLENCE INFORMATION LINE: TEL: 0800 456 450
- LIFELINE AOTEAROA: TEL: 0800 54 33 54
- SUICIDE CRISIS HELPLINE: TEL: 0508 828 865

Human Ethics Committee information: If you have any concerns about the ethical conduct of the research you may contact the Victoria University HEC Convenor: Dr Judith Loveridge. Email hec@vuw.ac.nz or telephone +64-4-463 6028.

Thank you for considering participating in this research.

CONSENT TO PARTICIPATE

I have read and understood the information about this research project. I understand the purpose of this research, what will happen if I participate, and what will happen to the information I provide. I
understand the measures that have been put in place to protect my privacy and confidentiality. For example, I understand that a randomly generated number, that does not identify me, will represent the information I provide. I understand that I can withdraw my consent at any time prior to submitting the questionnaire online without providing a reason.

I agree to participate in this research, and I understand that checking (ticking) the box below indicates my consent.

[Box] Yes, I agree to participate in this research.

If you do not agree to participate in this research, please exit this browser window now.
Appendix D: Online questionnaire debriefing statement

Research project: INVESTIGATING MALE STUDENTS' EXPERIENCE OF HARM AND HELPSEEKING IN INTIMATE RELATIONSHIPS (#25770)

Debriefing Statement

Dr Louise Dixon                    Jakob Scotts-Bahle                   Jonothan Langton Burnell

Thank you for participating in this research study.

Intimate Partner Violence (IPV) is an international public health problem. It can take many forms including physical, emotional, financial, and sexual abuse. Its impact is wide ranging and can, according to national statistics from many countries, affect anyone regardless of gender, class, ethnicity, sexuality, marital status, or age. Despite this, a large bulk of research has focused on the perpetration of physical violence against women and little is known about men's experiences. This is despite recent NZ surveys that found men made up 40% of those reporting some form of abuse from an intimate partner. Furthermore, previous research with university students has shown that men report similar rates of harm in relationships to women, although little follow up work has been completed to find out the details of this harm or what services men approached for help, if any.

This survey aimed to address the gap in the literature by examining men’s experiences of partner aggression and any actions they took to seek help. Research shows that there are high rates of dating violence in student and younger populations and so professionals can learn a lot about how to prevent and respond to this social problem from research with you and your peers. Understanding aggressive and non-aggressive behavior can help professionals to design tools to identify and prevent aggression in relationships. It therefore has great practical value and your contribution is very important to preventing family violence.

If you do wish to discuss any issues around aggression in relationships with someone, or are experiencing distress, there are many avenues of free support, such as:

- VICTORIA STUDENT COUNSELLING SERVICES (APPOINTMENTS AND GENERAL ENQUIRIES): KELBURN AND TE ARO CAMPUS: 04-463 5310; PIPITEA CAMPUS: 04-463 7474
- MALE ROOM: TEL: +64 3 548 0403
- KIDZNEEDDADZ: TEL 0800563123
- THE SAMARITANS: TEL: 0800 726 666
THE FAMILY VIOLENCE INFORMATION LINE: TEL: 0800 456 450
LIFELINE AOTEAROA: TEL: 0800 54 33 54
SUICIDE CRISIS HELPLINE: TEL: 0508 828 865

If you would like to keep a copy of this debrief information for your future records please take a screen shot and save it somewhere accessible to you now, and/or print a copy of this window now.

Should you have any further questions about the study, please feel welcome to contact us using the above contact details.

Thank you once again for your help.

Sincerely,

Dr. Louise Dixon, Jakob Scotts-Bahle, and Jonothan Langton Burnell
Appendix E: Email invitation

Contact Email to invite participants to take part in the interview phase of the study

Kia ora,

We are contacting you because you indicated an interest in talking with the research team about your experiences with an intimate partner. We are really interested in hearing more about your experiences and would like to organise an interview with you. We have attached an information and consent form so you can read more about the project before you decide to take part. Please read these carefully as they contain important information about whether the interview will be a good fit for you.

Of course, your safety is of paramount importance to us. We advise you not to take part in the interview if you believe that taking part may increase your risk of harm from someone (e.g., from a partner, ex-partner, or family member).

After considering the information, if you are interested in taking part in an interview then simply email us back to let us know. Please fill in the consent form, sign it and send it back to us – either scan the form or take a photo and email it back to us.

If you are no longer able or do not wish to take part in the interview that is absolutely fine. We would really appreciate it if you could let us know that as soon as possible so that we can we approach someone else to take part.

We strongly appreciate your interest in this research project and thank you again for your time and contribution.

Please remember, if you do wish to discuss any issues around aggression in relationships with someone, or are experiencing distress, there are many avenues of free support, such as:

- VICTORIA STUDENT COUNSELLING SERVICES (APPOINTMENTS AND GENERAL ENQUIRIES): KELBURN AND TE ARO CAMPUS’: 04-463 5310; PIPITEA CAMPUS: 04-463 7474
- MALE ROOM: TEL: +64 3 548 0403
- KIDZNEEDDADZ: TEL 0800563123
- THE SAMARITANS: TEL: 0800 726 666
- THE FAMILY VIOLENCE INFORMATION LINE: TEL: 0800 456 450
- LIFELINE AOTEAROA: TEL: 0800 54 33 54
- SUICIDE CRISIS HELPLINE: TEL: 0508 828 865

Best wishes,

Signature redacted

Dr Louise Dixon, on behalf of the research team
Appendix F: Interview information, consent, and request for information form

Research project: INVESTIGATING MALE STUDENTS’ EXPERIENCE OF HARM AND HELPSEEKING IN INTIMATE RELATIONSHIPS (#25770)

INFORMATION FORM FOR INTERESTED PARTICIPANTS

Dr Louise Dixon                    Jakob Scotts-Bahle                    Jonothan Langton Burnell

Kia Ora,

Recently you completed a questionnaire which looked at different types of behaviours you may have experienced from an intimate partner and you indicated that you would be interested in us contacting you about a follow up interview. Thank you for your willingness to get involved in the next part of the study. We are getting in touch because you indicated having experienced some form of harm from an intimate partner and we would like to learn more about those experiences and how you feel about them.

Before we go any further, please note that if you are in contact with, or living with, someone who may harm you as a result of finding out you are taking part in this research study we advise that you do not take part in this study.

We would like to provide you with some more detailed information about the interview phase of our study so that you can decide whether you would like to participate. Please read the below information before deciding whether or not to take part. Whether or not you decide to take part, thank you for considering this information.

Who are we? We are a New Zealand based research team. Dr Louise Dixon is leading this research. She is an Associate Professor of Forensic Psychology from Victoria University of Wellington who specialises in the prevention of family violence. Her collaborators from Victoria are Jakob Scotts-Bahle, a Masters student studying Forensic Psychology while training to become a clinical psychologist, and Jonothan Langton Burnell who is studying for his honours degree in Psychology.

Why are we doing this research? We know that some men experience harm from their intimate partners, but we know very little about these experiences or how men attempt to seek help, if at all. This makes it difficult to understand the causes and circumstances in which these experiences take place and to design prevention and support services for people who have had these experiences. We want to change this by talking to men who have had these types of experiences, including you.

What will you be asked to do? If you choose to take part in this study you will be interviewed by a member of our research team for approximately 90 minutes, depending on how much you want to say. You will be asked some questions to prompt you to talk about your experiences of harm from your partner in your own words and tell us your story of what happened. This will include sharing...
some examples of what happened. We will ask you to tell us about if and how you sought help or advice from anyone.

We would therefore like to know if you have any preference of being interviewed by a male MSc and Clinical Psychology student (Jakob), female academic (Louise), or for both being involved and present in the interview, to help us arrange the interviews.

We will require you to consider and sign the attached consent statement if you decide to take part in the project. Please scan or take a photo of the consent form and email this back to us. The interviewer will bring a paper copy of these forms with them on the day of the interview to remind you of the main points of the study to make sure you are fully informed about the study and are still happy to participate.

**Will your information be kept confidential?** No one outside of the research team will know what you have said or know your identity. The consent statement will be scanned and stored electronically on a password protected device at Victoria University of Wellington and then the paper copy will be destroyed. The electronic copy will be stored separately to your interview transcript so that no one except the lead researchers will be able to identify your interview as belonging to you. We will ask you to choose a made-up name to use during the interview so that the people who listen to the recording or read the transcript will not be able to identify you. We will also ask you not to refer to other people in your life by their real names during the interview so that no one can identify them either.

**How will your information be recorded?** Due to the length of the interview we need to record it as the researcher will not be able to take accurate notes about what you say for that length of time. You will be asked if you are willing for the researcher to audio record the interview. The audio recording ensures that we can accurately transcribe what you tell us.

Your recorded interview will be transcribed and coded by our research team or a professional service. Transcribers will sign a legally binding confidentiality agreement that will state they will not disclose the contents of the recording to anyone outside of the research team. However, because we do not ask you to disclose your full name in the recording they will not be able to identify you from the audio recording anyway.

We will also ask if you agree to be videoed. This can help with the transcribing process. If you agree to be videoed, the transcriber will not be sent the video footage – just the audio recording of that video. Only the research team will have access to the video recording.

**What are your rights as a participant?** You do not have to accept the invitation to take part in this study. However, if you do decide to participate, you have the right to:

- choose not to answer any question;
- end the interview at any point in time up to the close of the interview without giving a reason and can ask for your existing data to be destroyed with no consequence to yourself or others;
- ask any questions about the study at any time;
- agree on another name for us to use rather than your real name;
- access a summary of the overall research findings at the conclusion of the research once completed.
However, if during the interview we become concerned about an imminent risk of harm to yourself or someone else we will pass that on to a relevant person at the Psychology Clinic and Student Health Services. They will then follow the procedures put in place by their service to ensure your/other’s safety is maintained.

**Will you get to read a transcript of your interview?** Due to the sensitive nature of the study we will not provide you with a copy of your interview transcript. This is in case other people manage to read the transcript by mistake – we want to ensure your interviews remain confidential. However, once completed, a summary of the study findings will be provided on Louise Dixon’s lab webpage (https://aggressionlab.com).

**What happens if you become distressed by the interview?** The interview may touch on material that you find sensitive and it is possible that you may become distressed during the interview. We are experienced with interviewing people on sensitive topics and happy to talk to you about any concerns raised, but we will have someone available at the Victoria Psychology Clinic and Student Health Services to speak with you about how you are feeling, and any issues that may have arisen for you during the research, if you wish to do so. We will also provide a list of free organisations that you may wish to speak to about your experiences.

**What costs will the research team cover?** We are prepared to cover reasonable public transport and childcare costs where receipts can be provided, and we will also offer you a koha in the form of a $40 supermarket voucher.

**Has the project been approved by an ethics committee?** Yes, this project has been approved by the School of Psychology Human Ethics Committee under delegated authority of the Victoria University of Wellington Human Ethics Committee.

**What do we need from you next?** Simply email us back to indicate your consent, please fill out and attach the signed consent form if you can. We will then organise an interview time that works for you via email, or telephone if you prefer. We will remind you of the study information on the day before the interview takes place. If you change your mind on the day that is fine, you don’t have to participate.

**Thank you:** We appreciate your support very much and look forward to talking with you. If you have any questions about the study please contact Louise Dixon, the Principal Investigator, or Jakob Scotts-Bahle – contact details are listed below.

Best wishes,

Dr Louise Dixon, on behalf of the research team

The Principal Investigator of this study is:

Dr Louise Dixon

Reader/Associate Professor
School of Psychology, Victoria University

**Human Ethics Committee information:** If you have any concerns about the ethical conduct of the research you may contact the Victoria University HEC Convenor: Dr Judith Loveridge. Email [hec@vuw.ac.nz](mailto:hec@vuw.ac.nz) or telephone +64-4-463 6028.

Other researchers’ contact details involved with the project:

Jakob Scotts-Bahle, Masters student Victoria University of Wellington, [jakob.scottsbahle@vuw.ac.nz](mailto:jakob.scottsbahle@vuw.ac.nz)

Jonathan Langton Burnell, Honours student Victoria University of Wellington, [langtojono@myvuw.ac.nz](mailto:langtojono@myvuw.ac.nz)

**HERE IS A LIST OF ORGANISATIONS THAT YOU CAN CONTACT FOR HELP WITH ISSUES RELATED TO PARTNER ABUSE AND FAMILY VIOLENCE:**

- **VICTORIA STUDENT COUNSELLING SERVICES (APPOINTMENTS AND GENERAL ENQUIRIES):**
  KELBURN AND TE ARO CAMPUS: 04-463 5310; PIPITEA CAMPUS: 04-463 7474
- **MALE ROOM:** TEL: +64 3 548 0403
- **KIDZNEEDDADZ:** TEL 0800 726 666
- **THE SAMARITANS:** TEL: 0800 726 666
- **THE FAMILY VIOLENCE INFORMATION LINE:** TEL: 0800 456 450
- **LIFELINE AOTEAROA:** TEL: 0800 54 33 54
- **SUICIDE CRISIS HELPLINE:** TEL: 0508 828 865

**CONSENT STATEMENT**

I confirm that I have read and understand the above study information and agree with the following summary points and consent to taking part in the study:

- I confirm that I have been advised not take part in the study if I believe that it may increase my risk of harm from someone (e.g., from a partner, ex-partner, or family member).

- I understand that this research will ask me to talk about my experiences of partner abuse in my own words.

- I understand that I will sign a consent statement and so the researchers will know my name. However, they will not reveal my identity to anyone outside of the research team.

- My consent statement will be scanned and stored electronically on a password protected device at Victoria University of Wellington, and will be stored separately to my interview data, which will not contain my name or identifying information.
• I understand that I will have the option of using a made-up name for the purpose of the interview so that people cannot identify me from my interview transcript. I should not refer to other people I discuss using their full names to protect their identity also.

• I understand that my interview will be recorded using either video or only audio recording. I understand that if I agree to my interview being videotaped then the professional transcribers will never see the video, just the audio tape and will therefore not be able to identify me.

Please tick your preference for how your interview is recorded below:

- I agree to my interview being video taped
- OR
- I agree to my interview being audio recorded only

• I understand that I am free to end the interview at any point in time up to the close of the interview without giving a reason and I can ask for my existing data to be destroyed.

• I understand that I have the option of choosing a preferred interviewer. Please tick the options that apply to you:

- I prefer to be interviewed by a male MSc and Clinical Psychology student only
- I prefer to be interviewed by a female VUW academic only
- I prefer to be interviewed by both the male student and female academic
- I have no preference as to who interviews me

• I understand that if I have been recruited via the IPRP scheme then I have the choice of receiving 2 IPRP credits or one $40 supermarket voucher. If I was recruited via an advert then I will receive one $40 supermarket voucher.

• I understand that if during the course of the interview the researcher becomes concerned about my, or another person’s, safety they will let the relevant people know about what I have said that has led to that concern. They will then follow the procedures put in place by their service to ensure my and other’s safety.

• I understand that I can check in with a contact person at the Psychology Clinic Student and Health Services after the interview if I want to, who will make sure I am not distressed as a result of the study. The contact person is aware that I may choose to do this.
• I understand that I do not have to take part in this study and, if for any reason I am unhappy about participating, I can withdraw from the study at any point without explaining my decision and at no consequence to me or others.

• I understand that the participant video and audio recordings, and transcripts, will be stored securely and kept confidential throughout this project. The videos will be destroyed after 10 years as they contain identifiable information. The audio recordings and transcripts, that do not contain identifiable information, will be kept securely for an indefinite period of time to ensure analysis of these transcripts can be maximised.

• I understand that the video, audio and transcript material will be analysed to progress research into the area of intimate partner relationship aggression. It will only be shared with members of the immediate research team and suitably trained research associates.

• I have had an opportunity to ask questions. I understand that future questions I may have about the research will be answered by the Principal Investigator, Louise Dixon or Jakob Scotts-Bahle.

I confirm that I voluntarily consent to participate in this research project:

Name:
Signature:
Date:
Appendix G: Interview debrief form

Research project: INVESTIGATING MALE STUDENTS’ EXPERIENCE OF HARM AND HELPSEEKING IN INTIMATE RELATIONSHIPS (#25770)

DEBRIEF SHEET FOR PARTICIPANTS

Thank you for taking part in our study. Your interview will help us to understand men’s experiences of partner abuse. By listening to different people’s experiences, we will be able to build a picture about what is happening to different people, this will help us understand what we as professionals can do to respond to the issue properly.

As the interview may have touched on sensitive issues for you, you may want to speak with either Cathy Stephenson or Dr. Dougal Sutherland who will be available to talk to you about how you found the interview and how you are feeling now. They are happy to talk to you. Alternatively, the details of different counselling services, helplines, and organisations are provided at the bottom of this form.

Your recorded interview may be transcribed and coded by our research team or a professional service. They will sign a legally binding confidentiality agreement that will state they will not disclose the contents of the recording to anyone outside of the research team. However, because we do not ask you to disclose your full name in the recording they will not be able to identify you from the audio recording anyway. If you agree to be videoed, the transcriber will not be sent the video footage – just the audio recording of that video.

Due to the sensitive nature of the study and our process of maintaining your confidentiality, we cannot provide you with a copy of your individual interview transcript. However, once completed, a summary of the study findings will be provided on Louise Dixon’s webpage (https://aggressionlab.com). We will use research tools to identify the general patterns that are shared across people’s interviews, we will not focus on any one person’s results but rather report a summary of combined results.

Finally, as a reminder, here are some organisations that you can contact for help with any issues related to partner abuse and family violence.

- VICTORIA STUDENT COUNSELLING SERVICES (APPOINTMENTS AND GENERAL ENQUIRIES):
  KELBURN AND TE ARO CAMPUS’: 04-463 5310; PIPITEA CAMPUS: 04-463 7474
- MALE ROOM: TEL: +64 3 548 0403
- KIDZNEEDDADZ: TEL 0800563123
- THE SAMARITANS: TEL: 0800 726 666
- THE FAMILY VIOLENCE INFORMATION LINE: TEL: 0800 456 450
- LIFELINE AOTEAROA: TEL: 0800 54 33 54
- SUICIDE CRISIS HELPLINE: TEL: 0508 828 865
We appreciate your support very much and look forward to sharing the findings with you. If you have any questions about the study please contact Louise Dixon, the Principal Investigator, or Jakob Scotts-Bahle via the details listed below.

Best wishes,

Louise Dixon, on behalf of the Victoria based research team

The Principal Investigator of this study is:

Dr Louise Dixon

Reader/Associate Professor

School of Psychology, Victoria University

Other researchers’ contact details involved with the project:

Jakob Scotts-Bahle, Masters student Victoria University of Wellington,
Appendix H: Full interview schedule

INTERVIEW SCHEDULE

Participant Demographic details

Interview #..........................

Interview Pseudonym used.................................

- Age
- Gender
- Sexuality
- Ethnicity
- Occupation
- Education level achieved

INTERVIEW SCHEDULE FOR PEOPLE WHO ARE RECRUITED FOR THEIR VICTIMISATION FROM AN INTIMATE PARTNER

Example Introduction

- (After introducing self) I am really interested in talking to you today so that I can learn about your experiences with your partner, as I understand it, that you have experienced some form of harm in a relationship in the past. Is that correct? Are you happy to talk to me about this?

- So I would like to start by getting to understand a little bit about your relationship with a partner from whom you have experienced some kind of harm. Some people have experiences like this with more than one partner. Is there a particular partner you would you be willing to discuss with me?

- Without telling me their real name, can you tell me a little bit about them?
  o Partner gender/age/sexuality/ethnicity/occupation/education

- Can you describe what that relationship with this person was like to me?
o How long were you with your partner? Are you still together?
o What were/are your living arrangement with them?
o What was good about it / anything not so good about it?
o What did you do together? What did you do separately?

- When there was harm in the relationship, what kinds of things would your partner do to you?

Exploring a typical event

- I know you have said you have experienced some issues around harm with your partner. I want you to think about a typical event that would happen

- Can you think of one of these instances and talk me through what this would look like? What happened and what led to this happening?
o Can you think about the moments when there was harm between you and your partner What did they do? What did you do?
o What was happening during the incident?
o What would happen in the week leading up to this behaviour – does anything stand out as important to you?
o What about the hour or half hour before?
o What about immediately before the behaviour took place?
o How or why did it come to an end?
o What happened directly after the incident took place?
o How often would this kind of thing happen?

Explanation

- Why do you think this kind of event happened?

Understanding their own experiences over time

- When these things first happened, how did you feel about them?
  o Did you think it was ok – or not ok?
  o What did you call them?
    ▪ for example, did you label them abuse or did you refer it in some other way?
  o Did you justify it in any way? If so, how?

- How do you feel about it now?
  o What do you think about it now?
  o How did your thoughts and feelings about it change over time?
  o What do you call those behaviours now?
    ▪ How did you get to the point of understanding this behaviour as abusive?
  o How would you explain it to someone now?
Most serious and memorable event

- I want you to think about an incident that took place that really sticks in your mind as the worst or more serious event

- What happened?
  
  o What did your partner do? What did you do?
  o What was happening during the incident?
  o How were you getting on with your partner around that time?
    ▪ The week before / the day before / the day the incident happened?
  o What happened in the week leading up to this event – does anything stand out as important to you?
    ▪ Did anything happen at work/at home/with friends etc?
  o Can you talk me through what happened that day?
    ▪ What about the hour before and half hour before?
    ▪ What about immediately before the behaviour took place?
    ▪ How or why did it come to an end?
    ▪ What happened directly after the incident took place?
    ▪ How often did this kind of thing happen?

Explanation

- Why do you think this event happened?

Other forms of abuse

- Was your partner aggressive towards you in any other ways? (prompts about the different forms that abuse can take)
- How do you think these different types of behaviour were related?
- How did these different types of harm develop over time?

Helpseeking

- Did you tell any of your friends or family or work colleagues about what was going on with you and your partner? Can you tell me about that
  o who and why, what prompted you to tell them, what reaction did you get
  o or why not?

- Did you ever seek any kind of professional help or assistance? For example, calling the police, a domestic violence hotline or agency, or a mental health worker? Can you tell me about that
  o who and why, what prompted you to tell them, what reaction did you get
  o or why not?
- What might have encouraged you to confide in a friend or family member earlier?
- What might have encouraged you to call, contact, or approach a professional service earlier?
### Appendix I: Example excerpt of initial noting

<table>
<thead>
<tr>
<th>Initial notes</th>
<th>Transcript</th>
</tr>
</thead>
</table>
| *Repetition of words, multiple pauses, and use of ‘kind of’ and ‘a bit’ appear to reflect uncertainty or a difficulty articulating his experience – Possibly because talking about these experiences is new to him, or it is something he is still in the early stages of coming to terms with or because these experiences are intense and emotionally difficult to talk about*  
Talking to a friend shifted his perspective in a way which helped him leave his partner  
Not immediate but stuck with him over time  
His friend’s perspective gave him access to new scripts or norms around relationships and made him feel less alone  
What was his experience before having his friend’s eyes or before having his perspective as part of his internal dialogue? Isolated both externally and within himself and his inner dialogue?  
Sense of self in context with others                                                                                                                                  | *I--I… I think it definitely gave me, um, don’t know, it--it shifted her in my eyes and nothing happened immediately at that point but I think that when it did, when I kind of… when I’ve, um, told her I didn’t want to see her any more at kind of the end of it, I think that that other… I don’t know, it’s like I had [Friend’s] eyes looking on her as well as mine and it felt… just made me see those actions a bit… a bit differently and I was able to have a dialogue with myself that wasn’t just between me and her, you know?*  

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Appendix J: Example of an emergent theme with its constituent codes, their descriptions, and a reduced selection of quotes

<table>
<thead>
<tr>
<th>Initial note</th>
<th>Quotes</th>
<th>Description of note</th>
</tr>
</thead>
<tbody>
<tr>
<td>Growing up with a harmful father figure</td>
<td>“Didn’t have the positive male role model as a parental figure, I just knew what I didn’t wanna do, what I didn’t wanna be like.”</td>
<td>He experienced both physical and psychological aggression from father figures growing up both towards his mother and towards himself. He saw this as a template for how he did not want to be in a relationship.</td>
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<tr>
<td>His own nonviolent identity</td>
<td>“in my life if somebody’s hit me, um, I’ve--I’ve never… you know, people go, “Oh, they hit me and the red mist came over me,” and, you know, and get all physical and stuff. I’ve never had that reaction. I’ve always had the, um, incredulous, “What the fuck did you do that for?” sort of reaction. Um, or, um… and/or, um, “You’re right, I’m sorry,” you know”</td>
<td>He hated the use of violence and saw himself as someone who would not resort to violence. He would have been ashamed and disgusted with himself for using violence so when his partner was being aggressive towards him he responded passively.</td>
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<tr>
<td></td>
<td>“if I didn’t walk out then I would do something similar to her and I couldn’t live with myself if I did anything like that, you know”</td>
<td></td>
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<tr>
<td></td>
<td>“I’m not gonna retaliate, I’m not gonna defend myself. I’m gonna passively defend myself, not actively defend myself.”</td>
<td></td>
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<tr>
<td>Knowing it’s not okay but turning blame inwards</td>
<td>“five months I suppose before we… before I walked away ‘cause I spent five months going fuck, how do I extricate myself from this and make sure that she’s okay with herself, with the situation of me leaving”</td>
<td>He knew that his partner’s aggression was not okay but he placed responsibility on himself to fix it.</td>
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<td></td>
<td>“cause somehow I should have known that the difference between these words which are gentle ribbing that somebody can take and these words, [laughs] you know, um, is--is--is huge to her and I should have perceived that. Must try better, you know.”</td>
<td></td>
</tr>
<tr>
<td></td>
<td>“I when these little staccato punches came through I can remember thinking this is not good. But it was all on me. I wanted to make it better, you know, and</td>
<td></td>
</tr>
</tbody>
</table>
I was convincing myself… benefit of hindsight, well, [laughs] I was convincing myself that I could live up to her expectations, be the man she wanted me to be.”

“and externally I’m frantically scrabbling to make things right, you know. But I know that, okay, I’m-- I’ve just got to get to the top of this scree hill”

“if I got it right, um, I would have picked the situation that she may be annoyed at correctly, um, and I would have successfully got across to her that, “You know I didn’t mean it like this? You know it wasn’t character assassination? You know it was just me going blah because of this, that and the other?””

“I started to pick up walking back whether or not she was likely to do that”

In response to his partner’s aggression he would try to de-escalate it by acquiescing. This might take the form of always letting her have her way or apologising for and explaining comments which she had misinterpreted.
Appendix K: Theme diagram for an individual participant

**Trapped/stuck**
- Off to a good start
- Seeing his partner’s health difficulties

**Environment of harm**
- Pattern of disinhibited and violent arguments
- Punished for leaving
- Harm denied
- Sexual coercion
- Coercive isolation tactics

**Gendered understandings of IPV**
- Female aggression normalised growing up
- No relationship norms to fall back on
- Gendered view of aggression
- Not worth seeking help
- Feeling like he was taking away from women’s experiences by speaking up

**Shouldering the burden**
- Responsibility to care for partner
- Blaming self for not doing the right thing
- Closing up during arguments
- Temporarily removing himself from the situation

**Leaving the relationship**
- Realising he needed to end things
- Fear for physical safety as a trigger for leaving
- Post-break up harm

**Moving on**

**Shifting perspective on harm**
- Social support which validates and provides a new perspective to evaluate harm
- Talking to a sibling
- Slow process of learning post-relationship

**Lasting impact**
- Lingering impact tied to guilt
Appendix L: Final theme diagram

**Stuck in the abusive relationship (1)**

- Emotional investment in the relationship (1.1)
  - Motivated by strong sense of belonging to partner
  - Empathised with partner’s difficulties which explained or excused abuse

- An all-encompassing controlling environment (1.2)
  - Controlled through escalating and dynamic aggression and manipulation in arguments
  - All-encompassing, inescapable nature of abuse
  - Exacerbated by situational and circumstantial factors

- Not seeing themselves within their own understanding of abuse (1.4)
  - Previous relationships informed personal definition of abuse
  - Gendered ideas of abuse from partners
  - Social norms, societal barriers impacted understanding of what constituted abuse
  - Lack of understanding increased tolerance, prevented stopping the abuse or seeking help and support

- Shouldering the burden (1.3)
  - Feeling responsible for causing abuse
  - Duty to solve the conflict
  - Duty to tolerate the impacts
  - Duty to handle it on their own
  - Duty to leave the relationship on good terms

- Slow process of supported learning and recovery (2.2)
  - All at different stages of the slow and difficult process of moving on
  - Moving on facilitated through social support

- Overcoming the barriers to moving on (2.1)
  - Impacts unbearable
  - Meeting, sidestepping, changing definition of abuse
  - Shifting emotional investment

- Ongoing impact of abuse (2.3)
  - Lingering self-blame and regret
  - Continuation of mental health difficulties
  - Continued lack of representation
  - Growth as silver lining