**Knowing the Facts** *for Military Families* 

# **Intimate Partner Violence: Strategies to Engage Male Victims**

## Definition

Intimate partner violence (IPV) can include various aspects of unhealthy and abusive behaviors. IPV is often defined as:

Physical violence (pushing, choking, hitting, etc.), sexual violence (forced sexual touching, forced penetration, etc.), stalking (unwanted attention or contact that causes fear in someone else) and psychological aggression (insults, threats of violence, coercive tactics, etc.) by a current or former intimate partner, such as a spouse, boyfriend/girlfriend, dating partner, or ongoing sexual partner.

Within the military, violence between intimate partners is defined as:

An offense under the United States Code, the Uniform Code of Military Justice, or State law involving the use, attempted use, or threatened use of force or violence against a person, or a violation of a lawful order issued for the protection of a person who is:

- 1. A current or former spouse;
- 2. A person with whom the abuser shares a child in common; or
- 3. A current or former intimate partner with whom the abuser shares or has shared a common domicile.

### Prevalence of Male IPV Victimization

#### Civilian – Lifetime prevalence of:

Physical Victimization	Heterosexual males	28.3%
	Homosexual males	25.2%
Severe Physical	Heterosexual males	13.9%
(e.g., beaten, hit with closed fist)	Homosexual males	16.4%
Psychological Aggression	Heterosexual males	47.3%
(e.g., name-calling, swearing, humiliation)	Homosexual males	59.6%
Sexual Aggression	All Males	7%
(e.g., rape, unwanted sexual contact)		

#### Military – Past year prevalence rates of:

Mild to Moderate Physical IPV Victimization	Air Force	38.0%	Army	19.6%	Navy	23.8%
Severe Physical Victimization	Air Force	3.54%	Army	10.0%	Navy	16.7%

## **Risk Factors and Outcomes**

Data on risk factors and outcomes for male IPV victims are confounded because individuals in violent interpersonal relationships may be a victim as well as a perpetrator. Further, some variables (e.g., substance abuse) may serve as risk factors as well as outcomes.

Risk Factors - Young age, low socioeconomic status, childhood abuse, childhood conduct problems

Outcomes - Substance abuse, mental and physical health problems

## Strategies to Increase Engagement

Male IPV victims may not engage in treatment and services because of concerns related to stigma and denial. They may also decide against seeking help due to not seeing themselves as a victim. For male Service members, there may also be added concerns related to perceptions by peers and potential for advancement after disclosure. For male IPV victims in same-sex relationships, disclosure of IPV may also require disclosure of sexual identity, which is another potential barrier.

Male IPV victims may be more likely to have negative experiences when using general domestic violence agencies and hotlines.

To increase engagement, consider a public health approach where prevention and intervention efforts are aimed at victims and non-victims. In particular, strategies to increase engagement could:

- Routinely screen for male IPV victimization and refer to appropriate services, if applicable.
- Coordinate community agencies and services to provide supportive and informative messages about where and how male IPV victims can seek assistance. Specifically, coordination among therapy services in a community where many military families reside may help increase the awareness of how to seek help for IPV victimization.
- Develop social marketing and awareness campaigns that de-stigmatize male IPV victimization and normalize seeking and receiving help for male IPV victims.
- Develop programming that educates military couples on male IPV victimization, including definitions, prevalence rates, and risk factors.

For more information, see the full report, Intimate Partner Violence: Strategies to Engage Male Victims, at https://reachmilitary families.umn.edu/research/docu ment/14849

Offer workshops addressing common barriers for male
IPV victims and how to overcome those barriers, including conflicted identity as a victim and stigma.







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