Male Sexual Victimization

Letter From The Editor
Trisha Smith – Advocacy Specialist, WCSAP

The Research & Advocacy Digest was created to help advocates stay connected to new theories, up-to-date analyses, and current research relating to sexual violence. After reviewing the content of the Digest over the past thirteen years, one topic was especially in need of an update: male sexual victimization.

In 1998 the Digest stressed the lack of information and research addressing this topic, cited concerns about men underreporting their experiences, and explained how rape myths and gender stereotypes contribute to victimization. These themes echo conversations many are having today; in fact it is difficult to tell that the original publication is 12 years old. What new information is out there? How have we grown and what have we learned in the past decade?

As research for this publication began, the lack of new information became apparent. Awareness of the alarming rates of sexual abuse among boys is one area in which the movement has strongly progressed, and many innovative support services are now available to boys and their families. Recognition of adult male sexual assault is mostly limited to projects such as the Prison Rape Elimination Act, showing that rape within institutional settings is starting to be perceived and addressed as abuse. However, the rape and assault of adult men in our communities continues to be largely neglected. From the field of research, to service provision, to an understanding of the aftereffects, adult male sexual victimization is still a “hush-hush” topic.

There are no clear-cut answers within this publication. Albeit somewhat frustrating, this uncertainty can be a positive step in pushing us to ask more questions. Included in this issue are interviews with two prominent figures in the movement to address the sexual assault of males: Rick Goodwin, Executive Director of the Men’s Project in Ottawa, Canada and Mike Lew, a psychotherapist and director of The Next Step Counseling and Training in Brookline, Massachusetts. Their views on the needs of
men specifically challenge how we provide services to male survivors. What does the facility look like to a man walking through the door? What materials are available to address men’s specific needs? What language do we use, and is our message accessible to men? Our intention in presenting these viewpoints is to start a conversation on what we are doing to meet the needs of all our potential clients.

The research articles reviewed will be thought-provoking for advocates, program managers, therapists, and researchers alike. The authors all share the desire for more information to be available on this topic, as well as more dialogue about how to respond to male survivors in a way that authentically supports their needs. We hope the articles will be helpful in guiding service provision, as they do provide recommendations that reflect a deep understanding of the many complexities of this issue.
Interview with
Rick Goodwin

Trisha Smith – Advocacy Specialist, WCSAP

Rick Goodwin, MSW, RSW, is the co-founder and Executive Director of The Men’s Project, based in Ontario, Canada. Rick has experience as a social worker, educator and program manager. He has conducted workshops on gender and violence in multiple countries, including the United States, and is the 2007 recipient of the inaugural Attorney General’s Award of Distinction for his work in “developing and implementing innovative victim service programs.” Additional information on The Men’s Project is available here.

WCSAP: It has been stated that literature, awareness, and funding for male sexual victimization work is a “generation behind.” Why do you think that is?

RG: It is always an awkward point to raise – it’s a very complex political question. In so many ways sexual assault services do and should credit the second wave of feminism in terms of getting an analysis and developing grass roots services for victims of sexual violence. We who work with men couldn’t be where we are now without that recognition, without that history, without that period of understanding and service development.

At that same time we are still going incredibly slowly in the sector because of the existing dominance of a “violence against women” framework for understanding issues of sexual violence. We’re one of the largest agencies in Canada, we have been providing direct services for 12 years, and yet we are still trying to break through certain ceilings just to get ourselves established, whether that is permanent funding or whether that is being allowed to be involved with coalitions on issues of sexual violence.

We are not finding that there is a lot of room made for us at the table from the existing network of service providers, which tends to be women serving women. And that’s a tough one, because these folks should be our allies and we do recognize that they have done a lot. Working with guys is different, but in dealing with trauma there are more similarities than differences between guys and gals.

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But it is an inherently difficult area to challenge, because of the fear that we are then seen as anti-feminist, or disrespectful, or not getting it in terms of understanding of patriarchy. So I think that is probably one of our biggest challenges, other than the fact that the economy is tanked and we are always told we shouldn’t expect any more money to do this work. We are not finding many opportunities to move the movement, but we are changing people’s minds on an individual-by-individual basis.
WCSAP: What have we learned in the past ten years about male sexual assault?

RG: I think we have a greater recognition of how widespread sexual assault issues are within the male population. For example, a recent study came out of the U.S. which discussed the preponderance of sexual assault in the military, showing a significant percentage of that being male survivors. I don’t think we were getting those stories ten years ago. I think our awareness, broadly speaking, is better.

There are more resources than ever before, but we are just starting to see significant attention to providing services to guys. It makes sense; we have to be aware of something before we can start to think we can intervene. But there is still a generational catch-up in terms of recognition and reliable funding.

We are more aware of the relationship, within the male population, of past victimization and how that spills over to issues of adult perpetration. I think the notion is clearer in people’s minds that boys who have been victimized (sexually or physically) grow up to have a greater predisposition for domestic violence. And yet there is a challenge there, because it defies the conventional thinking of victims being “good,” which is more of an interpretation of female victims.

I think we have a problem of how we understand and identify male victimization. One of the programs my agency would love to do, if we could ever get a funding base for it, is work with men who have been victimized and who have sexually perpetrated as adults. Victim services don’t serve these victims because they identify them as sexual offenders. There is an amazing gap in awareness of the links between past victimization and current offending behavior, resulting in a gap in services and in funding.

WCSAP: What is the most critical information we can share with advocates and therapists who are working with male survivors and their families?

RG: I think there are three elements in our work that are essential; it is what helps make our program effective. Trauma theory – we have to be informed by trauma theory and trauma therapy. We have to be very familiar with male socialization in both the theory and conceptualization of that and how it is embedded in every guy we work with. And we need to implement therapies that speak to men as men, what we would refer to as services that are “male identified.” Thirdly, the focus of the work needs to include experiential therapy. It is useful but not sufficient to rely upon psychoeducational or cognitive behavioral approaches when working with survivors. This stance is supported by trauma therapists like Dr. van der Kolk, saying that experiential therapy helps get beyond the thinking level of our clients to essentially ingest the healing component.
We have to go outside the box of most therapeutic approaches with survivors. That is the combination that works for us: male-focused, trauma-focused and experientially-based treatment.

**WCSAP: When you say “male-focused,” what does that look like?**

**RG:** It is a combination of things, but essentially it is about the approach we take. We use the term “male-focused” because we need to speak to men from their lens, from their viewpoint, whether talking about victimization or perpetration. That is critical. I think what we have to do is reformulate how we engage with guys – what reflects the female experience is not the same as what reflects the male.

Integrity is a value we see as male-centered. We define integrity in a broad way: emotional integrity is seen as loving one's life and conducting oneself in relationships by being profoundly honest with oneself, owning one's behaviors (that notion of taking responsibility), and closing the emotional space we hold with others in relationships of significance. It is not enough to just be honest with yourself and own your own behaviors if you hold yourself in distance from your kids or your partner, or anyone else in your life. That is not really living a life of integrity. This is a core organizational value, this notion of integrity. Another value guys identify with is notions of courage; when we use courage in a therapeutic way that also speaks to guys. That is what we are pushing here.

If you are interested, on our website we have information on how we define gender equality and its relationship to feminism. Again we have tried hard to articulate this because we know we get ourselves into some controversy around talking about the issues.

**WCSAP: What can community sexual assault programs do to better serve male survivors?**

**RG:** I would say it requires a complete rethinking of the whole process of engagement. It may not necessarily mean changing the whole thing, but thinking through every component. For example, our office is located at the downtown Y [YMCA]. We purposely wanted to be at the Y because we think it is a friendly institution to engage with guys. Sexual assault centers for women probably find themselves in a good place to serve women. I don't want to judge that, but it is important in terms of working with male survivors that it is in a friendly place for men.

We are the Men's Project - we are not the Men's Sexual Victimization Project, so we are not stigmatizing or labeling guys as they come here for service. We have a fathering program and other services that are more overall health promotion. No one knows if you come to the Men's Project if you are a victim of violence, an offender, or you’re just a dad wanting to be a better dad. That is part of an approach. I think we have to steer away from labels and not say it is just for victims or offenders.
There is one women’s sexual assault center in Ontario that has been doing work with guys for a number of years, which is great for them. I know that they are in a smaller town and they get some opposition from other service providers. But when I go in there it still feels like a woman’s service. The walls are purple, the staff are all women. I think everything needs to be examined, from the brochure onwards.

WCSAP: Thank you for taking the time to speak to us.
Interview with
Mike Lew

Trisha Smith – Advocacy Specialist, WCSAP

Mike Lew, MEd, is a psychotherapist and group therapy leader, as well as the director of The Next Step Counseling and Training in Brookline, Massachusetts. Mike has become a leading expert on recovery from sexual child abuse, particularly issues of male survivors. He has authored two renowned books on the topic, Victims No Longer: The Classic Guide for Men Recovering from Sexual Child Abuse and Leaping Upon the Mountains: Men Proclaiming Victory Over Sexual Child Abuse. Additional information on The Next Step Counseling and Training is available here.

Additionally, we would like to acknowledge the valuable input from Thom Harrigan, LICSW, Clinical Director of The Next Step Counseling and Training, in thinking about these questions.

WCSAP: What have we learned in the past ten years about male sexual assault?

ML: I don’t know about an exact number of years, but we have been learning more and more over time, and we keep on learning. The best source of information is always the experts themselves. In this case, I am talking about male survivors, experts on their own lives, history, survival strategies, and recovery. I continue to learn from these experts, and am in awe of them.

We have come a long way from the days of denial of the sexual abuse of boys and men, and of the existence of female abusers. We continue to learn about the complexity of entrenched cultural stereotypes about boys and men, and attitudes about male victimization that still impede disclosure, understanding, compassion, the creation of services - thus reinforcing abuse and undermining recovery.

On the positive side, we have learned from survivors, both male and female, lessons about profound courage, strength, intelligence, creativity, and resilience. We have learned to challenge the widespread stereotype (sometimes called the “bite of the vampire” theory) that abused boys grow up to become abusers. True, some do, but (like abused girls) the vast majority do not. Indeed, many grow up to become protectors of children. Rather than repeating what was done to them, they often find the quiet courage to forge ahead despite extreme inner conflict and pain. We have learned how the above-mentioned cultural stereotype keeps male survivors silent and cements abuse in place. We also know that children who are believed and encouraged are better able to recover sooner and more completely. This is true for adult survivors as well as child victims.

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We have learned of the profound impact of boyhood sexual assault on every aspect of the survivor’s life, and that it doesn’t “just go away with time.” Abuse has a long life. Untreated, it doesn’t simply get better; it can fester like an untreated infection. We continue to learn about the different experiences and needs of boys enduring sexual abuse and men living with its consequences. We have come to understand more about the impact of the abuse on survivors’ partners, spouses, friends, family, and other allies, and are slowly beginning to create resources for them. Most importantly, we are realizing the importance of interpersonal connection during the healing process. Isolation is the enemy of recovery; healing occurs in the company of others. That is why disclosure, while difficult, is an essential first step.

WCSAP: What is the most critical information we can share with advocates and therapists who are working with male survivors and their families?

ML: This is a complex question, and there aren’t easy answers. I would tell advocates and therapists the same thing I say to male survivors who ask how long recovery will take (and most of them do ask). I say that it will take longer than they would like, but not as long as they fear. Recovery is difficult and frequently painful - longer and more difficult than anyone would wish.

Professionals who work with survivors, like partners and other allies, go through a process parallel to that of the survivor in his recovery. It requires patience, empathy, excellent boundaries, and the ability to tolerate powerful emotional expression, listen to sad, terrible stories, sit in a room filled with pain, and above all demonstrate complete respect for the survivor.

For the professional, as for the survivor, the work is difficult, but the rewards are real and enormous. Professionals must believe in the reality of recovery, and reflect this belief to the men they work with.

WCSAP: What can community sexual assault programs do to better serve male survivors?

ML: Sexual assault programs have a uniquely important position that enables them to increase public and professional awareness of the issues and advocate for resources. Many community sexual assault programs have been at the forefront of developing understanding and resources concerning male sexual victimization. Without the pioneering work done by female survivors and professionals, it is unlikely that we would have come as far this soon in dealing with men's
issues. There are many ways, large and small, that these programs can help. Among them are:
- the use of gender-neutral (or gender-inclusive) language when talking about victims, survivors, and abusers
- having visible resources available for male survivors (pamphlets, books, etc.) in offices, waiting rooms, and other public spaces
- offering male-inclusive programs - groups, workshops, classes, counseling - both for men only and for women and men together
- offering more professional training on working with male survivors
- developing programs to raise public and institutional awareness
- developing support for partners and other allies of male survivors
- learning about the needs and issues of linguistic, ethnic, racial, sexual, and other minority communities; listening to the concerns and insights of members of these communities; and employing them
- educating staff and the public about homophobia, heterosexism, and the distinction between same-sex sexual abuse and homosexuality
- learning to focus on the reality of recovery rather than only on the negative effects of abuse
- creating lots of concrete support for trauma workers - staff support groups, retreats, training, and respect for the difficulty and importance of the work they do

Clearly, there is a lot more, but this would be a huge start.

WCSAP: Is there anything you would like to add, for example, any outstanding resources, promising practices, or must-know information?

ML: I have been encouraged by the ways that male survivors are supporting each other in shared healing. Increasingly, around the world, I see men actively and effectively engaged in providing support and encouragement to their brothers-in-struggle. It has led me to working on strength- and respect-based models of recovery. They utilize the traditional strengths of male socialization (which have long been criticized): cooperation, teamwork, irreverence, and the vernacular to forge connections that promote healing. This is, I believe, the necessary direction of male recovery.

WCSAP: Thank you for taking the time to speak to us.
Research Reviews

Sexual Molestation of Males: Associations with Psychological Disturbance


The purpose of this study was “to investigate whether sexual molestation in males is a significant predictor of psychological disturbance” (p. 154). The study took place in England, where 2698 men from two primary medical care settings agreed to complete a computerized interview about sexual abuse or assault throughout their lives. “Men who reported child sexual abuse were 2.4 times more likely to report any type of psychological disturbance and 3.7 times more likely to report deliberately harming themselves” (p. 155). Those men who had been sexually victimized in adulthood only or who believed they had engaged in “consensual” sex before age 16 had a slight increase in psychological disturbance, but a strikingly high rate of deliberate self-harm.

This study is notable for its large population size and the inclusion not only of child sexual abuse but also adult sexual victimization and experiences perceived to be consensual during childhood. While this study method revealed correlations rather than determining causes, the authors can confidently state that “sexual abuse of male children is a significant predictor of psychiatric disorder in adulthood” and that “‘consensual’ experiences in childhood and sexual molestation in adulthood are significant predictors of self-harm” (p. 156). Health care professionals should be alert to a possible history of sexual victimization in male patients who harm themselves.

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Male Child Sexual Abuse:  
A Phenomenology of Betrayal


Ramona Alaggia and Graeme Millington, both members of the Faculty of Social Work at the University of Toronto, believe that understanding the experience of child sexual abuse through the eyes of adult male survivors is critical to providing enlightened therapeutic responses. Their qualitative study of the narratives of 14 men focuses on themes and deep understanding rather than on statistics and correlations. While the article is intended for therapists, advocates will also benefit from enhanced knowledge of the issues facing adult male survivors.

The themes that were uncovered in the men's childhood experiences were denial (including substance abuse), early sexualization, confusion around their role and responsibility in the abuse, and a sense of “specialness” or being set apart from other children. The researchers also asked about how these men had perceived the effect of the abuse on their lives as adults. The themes expressed were anger and rage, sexual disturbance and ambivalence, and feelings of loss and hope. Because the authors often quote the survivors’ own words, the men's concerns are poignantly and vividly portrayed. The authors make note of the “striking similarities across the interviews,” including the struggles of male survivors to reconcile their experiences with the expectations of men in our society. All had male perpetrators and had concerns about how others would perceive their masculinity.

This study provides a clear explanation of how the survivors' perceptions of themselves as “special” influenced their reactions to the abuse. As children, most experienced social and emotional deprivation, and thus were highly attracted to the illusion of intimacy offered by the perpetrator. Because of this attraction and the physical arousal they often experienced, they saw themselves as active participants, “a perception that caused considerable ambivalence and often tremendous pain” (p. 272). Alaggia and Millington provide clear guidance for therapists in their “implications for practice” section, and advocates will find these recommendations applicable to their interactions with male survivors as well.


This 15-page report by Healthy Teen Network is written in easy-to-understand language aimed at practitioners, policymakers, advocates, and educators. While it is broadly focused on the aftereffects of all forms of child maltreatment, it includes information specific to sexual victimization. A brief review of the research on child abuse includes a clearly-written description of concerns about appropriate research methods. The report links male survivors’ reluctance to report abuse with societal prescriptions for “masculinity,” especially with regard to sexual abuse.

“Among male survivors, sexual initiation at a young age, whether recognized as abuse or not, has been shown to increase the risk of subsequent adverse and/or health compromising sexual and reproductive outcomes, as well as abusive behaviors within intimate or family relationships” (p. 7). Men who have been abused are more likely to have multiple sex partners and higher rates of prostitution. Men who have been subjected to any form of child abuse or family violence have higher rates of victimizing others, including dating and other sexual violence. Teen boys who have been abused are more likely to have contracted a sexually transmitted infection as well as having a higher HIV/AIDS rate. They are also more likely to become teen fathers than their nonabused peers. In fact, male survivors are more likely to be involved in a teen pregnancy than female survivors.

The report calls for reframing the issue of violence against young men by recognizing the very serious consequences related to sexual and reproductive health. The authors decry the paucity of research and documentation relating to the abuse of boys, and address the need for treatment interventions specific to the needs of male survivors. They also identify the need for a social ecological approach to the development of policies aimed at eliminating barriers to recovery. This report would be helpful to share with funders and community stakeholders when proposing prevention and intervention services for boys and men.
Male Sexual Victims: A Selective Review of the Literature and Implications for Support Services


Davies reviews a well-rounded collection of literature and research that explores the dynamics, prevalence, and effects of male sexual victimization. Thoughtful recommendations to service providers are included, along with a call to action for more research and education on the topic to facilitate a greater understanding of the issue. Differences in societal and service program responses are compared with regard to the sexual orientation of the victim and the gender of the perpetrator. This information is particularly useful because it focuses solely on adult male survivors within the community, whereas most research and literature on male sexual assault focuses on child sexual abuse and sexual assault within institutions such as prisons.

The article does an admirable job of examining how the perpetuation of rape myths, society’s view of gender and masculinity, and the current system’s responses (including those of community sexual assault programs) negatively impact male survivors. The effects of those factors, such as victim blaming and denial of the issue, have contributed to the estimation that “research, help, and support for male victims is more than 20 years behind that for female victims” (p. 204). Additionally, Davies shares concern that transgendered people have received virtually “no publicity or research in relation to sexual assault” (p. 209) and are highly likely to be marginalized and victimized by society.

While the author is based in the United Kingdom, the information in the article is applicable to the current American culture and responses to male sexual victimization.

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- Michelle Davies
Non-Consensual Sex
Experienced by Men who Have Sex with Men


The purpose of this study is to explore the mental health effects of sexual assault on gay men, a topic the authors identify as being largely neglected in prior research. Three hundred and fifty-eight men, ranging in age from 19 to 35, were recruited via community outreach in British Columbia. The study revealed significant rates of sexual victimization within this population and connected the trauma to substance abuse issues, suicidal feelings, mood disorders, and negative self-esteem.

Interestingly, this study found that exposure to nonconsensual sex as an adult male was correlated with the highest number of psychological consequences, while exposure to childhood sexual assault had the least. The researchers attributed this dynamic to the fact that the adult male participants may have had more time to recover from the trauma of childhood sexual assault. Another consideration is the fact that there is increasing societal support for victims of child sexual abuse, while adult male survivors “may feel particularly isolated and ashamed, and may perceive that they do not have support to help cope with the trauma” (p. 73). This can be read as a strong testament to the need for appropriate support services for men who have been victimized as adults.

The recommendations of the study are geared towards health care professionals, but also apply to community sexual assault programs. The researchers identified the need for programs and policies to “explicitly address the needs of homosexual or bisexual males with respect to clinical approaches to sexual assault, counseling, or other interventions” (p. 73).
References and Resources

Trainings:

Male Survivor Conference - March 2010

Online Resources:

Male Survivor

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The Men’s Project

Sexual Abuse of Males

Pandora’s Project

Men & Healing: Theory, Research, and Practice in Working with Male Survivors of Childhood Sexual Abuse by Andy Fisher, PhD and Rick Goodwin, MSW, RSW with Mark Patton, MSW, RSW

From the WCSAP Library:

If He Is Raped: A Guidebook for Parents, Spouses, and Friends by McEvoy, Rollo, and Brookings

 Stranger and Acquaintance Sexual Assault of Adult Males by Lana Stermac

Victims No Longer: The Classic Guide for Men Recovering from Sexual Child Abuse by Mike Lew

Leaping upon the Mountains: Men Proclaiming Victory Over Sexual Child Abuse by Mike Lew
What topics would you like to see covered in upcoming issues of Research & Advocacy Digest?

Send your ideas to: jeanne@wcsap.org

Did you read or author an article you’d like to contribute for review in the Research & Advocacy Digest?

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