



A View From Inside the Box III

‘Invisible Boys’

Meeting the Needs of Male Victims/Survivors Of
Sexual Violence and Abuse within the Bradford District.

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Introduction

‘Learning to Dance’: Awakenings

‘The opposite of love is not hate, it’s indifference. The opposite of art is not ugliness, it’s indifference. The opposite of faith is not heresy, it’s indifference. And the opposite of life is not death, it’s indifference.’ Ellie Wiesel

The most common questions I get asked are, ‘Is recovery possible?’, and, ‘Why do you do what you do?’

I find the first easier to answer. Yes it is! But it’s a complex and very personal journey, one that is filled with both insight and sadness, and in many ways the latter is the parent of the former. What I have discovered is that, whilst I was very lucky in having an amazingly highly educated therapist (who out of interest was a man), what mattered more was something I now understand was instinctively known to me - his ability to be someone ‘human’ to guide my recovery. He was certainly that - though I’m not sure he thought I was all that human initially! But we grew together, I am glad to say. He helped me understand it was OK for me to be me. I don’t think I would be here without that long and difficult dialogue. I’m very grateful for his skills and humanity in supporting that outcome - thank you.

I now deliver a presentation called ‘Learning to Dance’. It takes you through my childhood, using photos and reflection. I use a reference from the latest series of Doctor Who to communicate what it feels like, in my experience, to be a male survivor. Although it applies to female survivors as much in many ways, in my view. And many female survivors have corroborated that.

The Doctor meets the most amazing woman and she gains access to his inner mind. Once there, she is gently forced back by the Time Lord and she looks at him with great sadness and states, ‘Such a lonely little boy, who never learnt to dance’. Of course the character of the Doctor can be seen as a survivor metaphor in many different ways. But what touched me was my awakening to the ‘aloneness’ of victimisation, especially for men, reinforced by societies’ cultural ‘solitary confinement’, as I referred to it in the first ‘A View From Inside The Box’ (see resource pack) where I talked about cultural silencing in relation to sexual abuse. (You can access a copy, as well as many other reports on sexual violence/abuse, in your CD resource file if you have the CD version of this report.)

Recovery, for me, is about both learning to dance and awakening to the amazing possibilities of perfecting that dance. It’s about enabling survivors to meet their own unique needs, free of the aloneness that childhood or adult abuse so often brings. It’s scary, and relearning to trust has had its negative moments in some of the most surprising of places: not all healers are safe healers - some are damaged themselves and don’t protect others from that damage.

‘A man who as a physical being is always turned toward the outside, thinking that his happiness lies outside him, finally turns inward and discovers that the source is within him.’

‘Life can only be understood backwards; but it must be lived forwards.’ Kierkegaard

But I’m glad I’ve joined the majority of you on the equal playing field I now call ‘the dance floor’, and which most people call society. Recovery for me is all about living one’s life, as it was meant to be: free of the sense of ‘aloneness’ abuse brings for so many men and women, but now able to use those memories to understand much about other people’s negative behaviours.

So why do I do what I do? In truth, it helps my ongoing recovery, it’s a way of creating something positive from the negativity of my abuse. It’s not a path for every survivor, but it works for me. I also have a real annoyance at the lack of joined up thinking on providing real and well resourced provision for victims/survivors. The day I disclosed my childhood rape and abuse was the day the Waterhouse Inquiry’s ‘Lost in Care’ was published. Its accurate reporting of some of my childhood abuse experience was emotionally painful to me in a way only survivors can really understand. I searched for help and I had to search hard to find... nothing! You still have to search hard to find very little, nine years later.

This report is about male survivors, but I work just as hard for female victims.

Gender is important, as are class and poverty etc. However, what really matters to victims of both genders is humanity. The figures are stark: one in four females, and one in six males, will have experienced sexual violence/abuse in childhood. That's a lot of human pain for people whose needs are not currently being met appropriately! This is evidenced in the latest report compiled by the Men's Project (www.malesurvivor.on.ca) in Ottawa, 'Men & Healing', for the government of Ottawa's Cornwall Inquiry (www.cornwallinquiry.ca). As the Map of Gaps report on women-only provision starkly highlights, and of course as our own 'A View' reports (see resource pack) highlighted first, there is little difference in the issues men and women face, whichever side of the pond one lives on... Except that the Canadians are opening the box fully for all to see what needs to be done to fight sexual violence/abuse and support its victims/survivors - male and female.

Male pain is as clear and evident as female pain. That is further supported by Sarah Nelson's recent research, 'The Care Needs of Male Survivors', for Edinburgh University. Her report also highlights how many of our young soldiers fighting the so called 'War on Terror' might be victims of childhood abuse and ill equipped by their experience and the military to deal with their childhood experience, later retriggered by seeing combat (see resource pack). Personally, I've never been able to weigh emotional pain presented by any victim, man or woman, and I've spoken to thousands of them in my spare time. I've yet to find anybody who can show me how to measure human distress. If you read the latest report from the Young Foundation, 'The Receding Tide' (see resource pack), it evidences that the fallout from the 'credit crunch' will be increased social stress levels. Survivors will feel the impact of that more intensely due to their victimisation experiences (evidenced by many NHS health research reports including 'Human Rights in Health Provision'. See the resource pack that accompanies the CD version of this report).

The most amazing professional compliment I've ever received came from the most surprising of sources. One of the leaders of the UK Rape Crisis movement told me there was no better advocate for male or female survivors in the UK. There are many people who criticise the Rape Crisis model, who have never paid anybody a compliment, except themselves. I am a supporter of Rape Crisis - however, I have major concerns about how their legitimate right to a female-only model, as one option available to women and girls, has been hijacked by some male and female policy officers and some decision-makers to create a vision of a one-stop solution for all women (did they ask all women I wonder?). Further, the continual dismissal of male need as marginal and therefore of no interest is grossly offensive. The evidence does not justify that stance and is most shocking coming from public servants.

These policy officers only address the issue of male need, if at all, by minimising it, and implying or stating a link between all men and all violence in society (see Bradford's 'Domestic Violence Strategy' in your resource pack). Bradford only mirrors the minimisation of male need nationally. If you look at the training offered on female abusers by CEOP (resource file), you see clearly that the issues are not black and white. I find such discrimination grossly insulting and I think it's time it was challenged on human rights grounds. Christopher de Serres' article 'The Villain' powerfully illustrates the social culture which feeds such male victim/survivor minimisation in our communities, by those paid to ensure equality.

'You can have power over people as long as you don't take everything away from them. But when you've robbed a man of everything, he's no longer in your power.' Aleksandr Solzhenitsyn

Most men don't harm anybody. They're our brothers, sons and fathers, and most are good at not being abusive - it's actually what the research says (see Harvey Lemelin's paper for the evidence of that). Not that we hear that research message much, in society!

A View III is republishing a piece from Mike Lew's book, *Victims No Longer: The Classic Guide for Men Recovering from Sexual Abuse*. It speaks eloquently of the debt men owe the women's movement, and it's good to reinforce those values. They have empowered me as a man and a survivor. Such values have allowed me to start the journey towards understanding what being human is, without losing the positives of my masculinity.

I have benefited as much as the women who have gained insight from such an inclusive and compassionate social vision.

The real issue is fully resourced provision for all victims/survivors.

It's both a public health issue and a human rights one, and increasingly, redress to law as advised by Shami Chakrabarti, the Director of Liberty (www.liberty-human-rights.org.uk), may be the only way to ensure equality for women and men in sexual violence/abuse service resourcing - that is, resourcing that meets the real, evidenced needs of both. It may be necessary for such actions to include some aimed at the agency tasked with upholding our human rights, if it fails to do that job in line with the principles it claims to defend and empower; but also, just as importantly, at the agencies tasked with supporting our health needs, which they are supposed to do on the basis of best evidence, not based on the prejudices of policy officers and decision-makers within those agencies.

On the subject of evidence, I am pleased that The Survivors Trust has picked up a project I scoped with Claire Fraser (research consultant) in 2006. Following my strong lobbying, The Trust has taken forward the Irish research project Sexual Abuse Violence Ireland (SAVI), as an innovative research project for the UK (see SAVI and our scoping in your pack). I look forward to being invited to sit on its management board, if the project is successful in getting through its feasibility study. I have always believed that victims/survivors should be at the heart of all planning and that they should be involved proactively and transparently.

'Invisible Boy' is republished with the kind approval of the author (copyright approval is universally granted by the Canadian Government). It's strange I had to go to Canada to find such a report - but I couldn't find anything like it here. Even though it was written some time ago it speaks powerfully to me of the current situation here in the UK, regardless of its Canadian origin. It reinforces the human rights foundation of service resourcing in relation to sexual violence/abuse, and that violence and abuse is universal across the world. I would also suggest reading Dr Mathews report, 'Combining Voices', which you can also find in the resource file...

Recently, Trevor Phillips, Chair of the Equality and Human Rights Commission, stated:

'It is necessary to find ways to debate about human rights in everyday language. Ultimately, human rights are about freedom to make our own choice. Human rights are for all of us including vulnerable and marginalised people and unpopular groups.'

I asked one of the leading sexual violence umbrella organisations in the UK to write something about human rights for male and female victims for this report. They declined, stating the 'A View' reports were too 'activist'. As you can see, 'A View III' isn't a call for the mobilisation of the working class. But seriously, such fears evidence the climate of suppression of 'debate' that surrounds sexual violence/abuse issues in the UK, especially in regard to male provision.

'Silence never won rights. They are not handed down from above; they are forced by pressures from below.'

Roger Nash Baldwin

'I swore never to be silent whenever and wherever human beings endure suffering and humiliation. We must always take sides. Neutrality helps the oppressor, never the victim. Silence encourages the tormentor, never the tormented.'

Elie Wiesel

At this point I think it would be useful to have some insight from Dr Fred Mathews, not taken from 'Invisible Boy' but from his foreword to 'Men and Healing', which I believe positively focuses us all on the human rights issues. I hope it will help you understand those issues, and will do the job that some in the UK have declined to take up leadership on:

"Our echoes roll from soul to soul and grow forever and forever."

'The words above are from a poem by Alfred Lord Tennyson. In their simplicity and elegance, they provide a reminder about the responsibility we bear toward one another - especially toward our children. Our actions create echoes which, in myriad ways we cannot even imagine, affect countless lives around us.'

'During every second we are in the company of a child our actions send a ripple into our collective future. Our acts of kindness lead a child to thoughtfulness and caring concern for others. Acts of withholding love create feelings of isolation and despair. Acts that set firm but fair boundaries and limits create a foundation for respect and peaceful coexistence. Acts of neglect teach a child to feel shame. Acts that reveal warm affection inspire feelings of connection, intimacy and belonging. Acts of cruelty or abuse isolate and wither a child's sense of self.'

'It is humbling to realize that the quality of life we create in our society depends so very much on the way we treat our young. Whether it is against one child or a group of children, the consequences of harm we cause become reflected in the social fabric of the larger community. In one way or another, through the taxes we pay, our strained health care system, our child protection services, and the lasting damage done to our everyday social relationships, we all ultimately bear the cost.'

'We have an obligation to be mindful of our interdependence and the responsibility we bear for one another. This obligation is all the more important when it comes to supporting and assisting people whose lives have been touched by violence and abuse. Victims need to know they are seen, that we believe them, and that we will act in their interest to prevent further harm. And yet - despite over 30 years of advocacy - we are still uncomfortable acknowledging that children experience unimaginable levels of violence at the hands of their caregivers.'

'This is especially true for male victims. Men and boys still struggle to find true welcome when they bring forward their accounts of being harmed through abuse, violence and aggression. Despite a growing body of literature documenting the prevalence of male victimization, male survivors are still largely excluded from the national conversation on interpersonal violence. This cannot continue. It is time for us as a society to evolve past narrow interests and gender stereotypes and embrace the fact that unless all victims are welcome at the table then nothing will substantially change in our quest for real and inclusive social justice and peace.'

'The challenge of supporting male victims is not a project solely for the survivors themselves - it is a responsibility that belongs to us all. Men and boys struggling to cope with the consequences of violence and abuse do not live apart from us and on the margins of society. They number in the millions in this country and look like any men we may encounter. The way we treat male survivors, honour their stories, and support them in their healing contributes directly to the quality of life in our communities. There is no way we can ignore their plight without diminishing our own lives.'

Dr Fred Mathews

Introduction to 'Men and Healing'

October, 2008

Its not often that male survivors get the chance to speak - I find I don't often get invited to the table.

Survivors West Yorkshire gets mentioned in glossy strategy documents (see Bradford's 'Domestic Violence Strategy' in your resource pack) as if it was consulted, but isn't.

I've never committed a crime. In fact, I've served in one of the most elite regiments in the armed forces (RAF Regiment) with distinction. Policed the streets and received commendations for my work. I've spent the last fifteen years working in front-line mental health services and was recognised as being skilled in working with people who are labelled as having 'Borderline Personality Disorder', male and female. Yet recently, I was told by two different heads of university Social Work departments, that they felt social work wasn't a good choice of career for me. They had never talked to me personally. As far as I could see, I was only known by the label 'male survivor'. I was also recently interviewed (after many attempts to get such an interview), for a secondment to university to study for a Social Work degree, whilst working for an NHS/Social Services Mental Health Team. During the interview, I was asked 'if I minded working with older people?' The development opportunity was advertised as being focused on working in Child Protection. I was subsequently phoned and told I was unsuccessful (I've never received a written rejection). It was felt I lacked the confidence to be a Social Worker - yet it was the most confident and informed interview I've ever given in my life! I have ninety university CAT points in Health and Social Care, and have achieved marks which are commensurate with a First; studying is not beyond me! Facing discrimination is a bigger mountain than recovery in many ways. I believe much of it comes from myths and delusions, as 'Men and Healing' evidences and 'Why Men Don't Talk' powerfully reinforces.

Professor Liz Kelly has kindly allowed me to republish her article, 'Weasel Words'. She skilfully deconstructs the biggest delusion of them all: that all male victims/survivors become abusers. I believe many policy makers still believe, and many misuse, this delusion when advising decision-makers, driven by their own personal issues. And of course anybody can be an abuser or a victim. The true cycle might be the 'cycle of silencing' by those who benefit most from it?

'It's really a wonder that I haven't dropped all my ideals, because they seem so absurd and impossible to carry out. Yet I keep them, because in spite of everything I still believe that people are really good at heart.' Anne Frank

'Once you label me you negate me.' Soren Kierkegaard

But of course these are my personal views. Therefore, I'd like to give you the opportunity to hear other men talk about their perspectives. I hope you'll use the following links to hear and see them speak. It's not often so many male victim/survivor voices have the chance to share a virtual forum like this. You can't be bitten by film - but you might get positively enlightened if you honour the risk those men take in speaking out, by hearing what they have to say, openly.

Mankind - male survivors talking about recovery

http://www.mankindcounselling.org.uk/case_scenarios.php

Billy Connolly - talking about his recovery

<http://www.youtube.com/watch?v=nBI BTehzBI&feature=related>

Chosen - male survivors talking about institutional abuse

www.chosen.org.uk

Stories of Silence - male survivors exploring recovery

<http://www.storiesofsilence.org/trailer.htm>

Wo(Men) Speak Out - 'My name is Chris'

<http://www.youtube.com/menspeakout>

Shatterboy - reflections on abuse by male survivors

<http://video.google.co.uk/videoplay?docid=-2196033909671368181>

Male Recovery - insights from New York

www.wliw.org/productions/local/healthy-minds/video-recovering-from-abuse/172/

Boys and Men Healing - US documentary (in progress)

www.766productions.com/trailer.html

It's sobering to hear the voices of so many different men articulate their distress and hopes for recovery, so positively. Voices from across the world, very human and very real.

The most shocking male survivor issue for me, however, is how many men commit suicide (see the 2009 presentation by Professor Louis Appleby, Director of Mental Health England, in the resource pack). The latest research shows that there are around 5500 suicides in the UK each year with around 73% of them being males. If you then look at the male survivor research in this report, especially the latest research from the University of Bath ('Men Who Were Sexually Abused in Childhood and Subsequent Suicidal Ideation' - see pack), it evidences that male survivors are ten times more likely to commit suicide than non-survivors. It's not rocket science to infer that many of the men who do take their lives are survivors of abuse. Further, the research from Bath evidences that many will have never engaged with services. I am not surprised by this, as a male survivor in a culture which constantly encourages me to 'be silent', and where the few services for men are often advertised as being for abusive men. This constant reinforcement by policy makers that male survivors are few and don't really have many needs, is, I believe, a factor in many male suicides.

I don't think the mothers/wives of boys/men who kill themselves leaving diaries stating, 'I was abused, but there was no one to tell and I must be the only one', would understand such gender indifference. Or the mother whose son acts out sexually, having been raped by a gang of abusers, and who in this way later contracts HIV. Who, when first telling his mother this, says, 'Mum, I'll never have children'. Who also had his Criminal Injuries compensation drastically reduced because he took drugs when being gang-raped to escape the pain. This also being the same young man who went undercover to help convict a very dangerous gang of men, who had at one point tried to sell him on the motorway for £500. He was twelve when they groomed him, fourteen when he went undercover, nineteen when he caught HIV.

There is no one-to-one service for boys and men in Bradford. One small project offers some group therapy, but not one-to-one - it isn't funded. The evidence is that one-to-one followed by group work is the most effective model, and most men want one-to-one first before group contact. The only other service in Bradford starts by talking about abusive men - then speaks about men in need of support. I would never use this service and I suspect that most other non-violent men wouldn't either. I also suspect that most violent men don't go. I don't blame these services; they are trying to function in a vacuum of understanding for male support needs. And seemingly more of us males are dying of poor health as well - I wonder what effect all that silence has on male health overall in Bradford and the UK? (See Professor Alan White's reports on male health needs in the resource pack.)

You know, as a citizen of Bradford I would be better off going to Pakistan for my needs as a male survivor.

There are services to support men and women there which are cutting edge - see www.sahil.org - especially in their openness to engaging with men to tackle gender issues via programmes like www.menengage.org. I also like the concept of (Wo)Men Speak Out - www.womenspeakoutnow.com. It holds the possibility of women and men engaging equally and positively around sexual violence. Perhaps central government should adopt such a programme concept, like it adopted 'Stop It Now' and 'Sure Start' ('Head Start')?

I believe it's time decision makers, male and female, deeply reflected, and started looking at sexual abuse/violence as a public health and human rights issue. Focusing not on gender blindness - but on empowered gendered choices in services for all victims.

It would also be good to ask the 'community of interest' that sexual abuse victims represent what they actually want, rather than just providing services which attempt to meet their needs. I haven't seen much of that happening. The pilot victim involvement project driven by Colin Turner, the first Head of Safeguarding at the Child Exploitation and Online Protection Centre (www.ceop.gov.uk). CEOP has shown how such involvement can be achieved safely and, more importantly, effectively, in delivering useful insights to improve services delivery to victims/survivors. If the MI5 of child protection can take that leap, innovating proactively between a police model and a social model - what's stopping other agencies from doing the same?

You know, in the nine years I've volunteered for Survivors West Yorkshire I have never received a response from local NHS departments or the police service to any communications. Lots of Ministers and Directors at the Department of Health in London communicate very positively about the 'A View' reports, and Home Office and Justice Ministers also. It would seem these reports are ignored, as far as I can see, in local strategy documents, but are looked at closely in central government circles - even quoted in meetings, I am told. However, a leading national figure in the field of human rights, when talking about Bradford recently, only referred to one piece of research into the city's needs. Yet he is well aware of 'A View From Inside The Box I & II'. A senior government minister stated that 'A View I' was 'a means to audit' for service need, design and delivery. Perhaps it's because it's survivor-driven and male-managed that it's ignored locally and by the Equalities and Human Rights Commission (www.equalityhumanrights.com).

I wonder how Trevor Phillips and his professional research team justify that, in line with the laws they are meant to uphold - who polices them?

Survivor discrimination? - I'll let you decide

My personal reflections are clearly activist, and I use my own voice with the intention of challenging the silence which holds too many men imprisoned. No apologies for that; but I understand the issue challenges many of you.

It's ironic in a city with a large Islamic community that the simple wisdom on how to deal with victims/survivors of sexual abuse was written down sixteen hundred years ago. This is what the Koran tells us all, so I'm told:

1. Affirm the Client's innocence
2. Release by reliving the experience
3. Heal the whole person
4. Empower the Client to see justice done
5. Liberation through unity

If you read all the abuse research in the world, there wouldn't be much to add, I suspect? The scary thing for me is how professionals ignore such wisdom and actually cause more harm by doing so, even when it's evidenced by our own culture's academic research! Islam got it right a long time ago in my view. It's time we caught up and funded the services to follow that hard-learned wisdom. This is how I think we can start to do that:

1. The appointment of a Cabinet-level Minister for Interpersonal Violence/Abuse at the Department of Health or Ministry of Justice.
2. A national inquiry into the human rights needs of all interpersonal violence/abuse victims/survivors, led by the Equality and Human Rights Commission (www.equalityhumanrights.com) conducted in partnership with the third sector, central government and local authorities. I would suggest Lord Carlisle of Berriew would be the calibre of Chair needed for an effective inquiry.
3. Local authorities in partnership with EHRC to scope with local universities the needs of victim/survivors, aiming to feed into the EHRC inquiry to empower a clear and transparent, local, ground-up strategy that addresses both causes and outcomes, for all citizens, as we go forward into the twenty-first century. It would also be highly strategic to link to The Survivors Trust's SAVI UK project.
4. Victim/survivor advisory panels on all local Safeguarding Boards and relevant central government departments - Health, Justice, Home, and Children's, for example.
5. A National freephone helpline for sexual violence/abuse victims/survivors. The scoping for that was done by Government some years ago and has never been published. So it could be done quickly if political will was engaged with such a project. We believe NAPAC (www.napac.org.uk) would be an ideal vehicle to invest in for the delivery of such an international flagship service.
6. A National advertising campaign developing the imaginative and insightful campaigns launched by Kids Company, Dublin Rape Crisis and The State of Texas Sexual Violence Services (see resource file). If Texas can support men and women, why can't we?
7. Central government funding of a feasibility study to create a National Retreat Centre for therapeutic support and research for victims of sexual violence/abuse - I know of a perfect location for such an international flagship centre of excellence, here in Bradford.

Finally, if you watch the Billy Connolly interview segments in full on YouTube, you will see that he talks about his inner child.



Billy is proud his abusers never destroyed the eight-year-old he still feels is within him. Well, ditto to that Billy. Because in many ways the person who writes this introduction is my eight-year-old, and as with Billy's, his innocence and natural compassion has never been stolen by the damaged people who abused me in childhood and adulthood. I walk with him and look after him as I can - as I get older! I thought you might like to see who he is, as he tries to speak for all those who have been abused in childhood and are now men and women, as respectfully as he can. But we both write for all the boys and girls who are being abused today, as well. Time to break the silence and build a world where all survivors, male or female, can be 'welcomed home', as the writer Linda T. Sandford wrote in her book *Strong At The Broken Places*. Everyone interested in the 'hope' and 'possibilities' of recovery should read it.

'A View From Inside The Box III: Invisible Boys', is intended to assertively, but constructively, help to further the debate and empower victims/survivors to receive justice and compassion, regardless of gender. Society colludes with its abusers by looking the other way when asked to do that.

As the following human being said when he picked up his Nobel prize:

'This is the duty of our generation as we enter the twenty-first century - solidarity with the weak, the persecuted, the lonely, the sick, and those in despair. It is expressed by the desire to give a noble and humanizing meaning to a community in which all members will define themselves not by their own identity but by that of others.' Elie Wiesel

It would be good to see that happen. 'A View' will return as a film that looks at the real community empowerment possibilities of 'recovery' - possible, that is, if we have the vision and courage to embrace the services which can deliver that hope. Delivering such an outcome could turn all the cycles upon themselves.

Go well on your journey.
Kind regards

Bob Balfour
Founder, Survivors West Yorkshire

The Villain

Have you ever noticed how that we rarely see ourselves in the media or on TV?

I never saw male survivors anywhere as a teenager so I used to think that I didn't exist. That part of me that relates to being a victim didn't seem to have representation anywhere I looked. I subconsciously searched everywhere to find someone or something to attach all of this fear and shame to. After a while I just concluded that this part of me shouldn't exist. So I pretended as if the abuse didn't happen and that I wasn't that child who had been damaged. All the setbacks that occurred after my abuse were just my fault. I took responsibility for barely graduating from high school. I accepted the failure of relationship after relationship. I understood that if I was going to be alone for the rest of my life then it was through my own doing. I didn't even mind living a life alone because it meant that I never had to confront my inner demons. They would never affect anyone but me and I could hack it, or at least I thought I could.

I was arrogant enough to believe that I had control over the abuse in my life, even as I never identified with it or brought any attention to it. I was above it, yet always below it. It was destroying everything good that came into my life and I still refused its' existence. My abuser wasn't my abuser. He loved me and IT didn't exist. I wouldn't let it exist in me. I would feel the depression and never question the source from which it flowed. I would get angry and withdraw from the world because I felt it was always in me and always something I did.

I saw men on the TV and in the media and I found myself cheering on the heroes. The hero was what I wanted to be but I always had more in common with the villain. The villains were always the one's who were beaten and abused as children. They were always denied the right to be living, breathing individuals. In those scenes right before the villain does his or her dirty deed there were the flashbacks of them being utterly violated. It explained to us why they chose to violate others. The serial killer killed because a part of his humanity was taken from him. The prostitute injected heroin into her veins because her father violated her sexually at a young age. I neglected and isolated myself from loved ones because I was just like them.

The hero was something that I never could be because he grew up wholesome and loved. He always had control over his environment. He was unaffected by the swirling chaos around him. I was consumed by the chaos. The hero is the representation of everything that I could never be. I learned to resent the hero. It is no surprise that we survivors live with our shame much longer than we need to. We may have been victims but we are also educated, highly productive people in society. Like any thinking person we begin to wonder where are our heroes? If we have no heroes then we need to make our own. We have to support those few individuals attempting to fill our void. This society always bends to those loud voices of insistent individuals who show resolve. We can speak with our voices, write emails with our fingers, and use our intellect to push our agenda. As survivors, we must be active to create our space in this world.

A few years ago, I watched the first movie in my life where I was able to relate to the hero. It was called Antwon Fischer. He was courageous, intelligent, and determined. He was a survivor of abuse, abandoned by his biological mother. This abuse and abandonment wasn't a prelude to his sinister plan to exact revenge on the world. It was the central purpose to his mission and the film approached the courage of facing your abusers with unblinking eyes. It was a heroes purpose to face your abuse and come out the other side, as a good man. The male survivor was the hero. For once, I didn't resent the hero. I only had love for the hero. I cheered him on with the realization that he was not the person who I wanted to be but he was indeed already a part of me. The survivor who uses his or her voice to speak of personal abuse is the greatest kind of hero I could know. I just never knew that we could be THE hero. The survivor is the truth. Their truth is that our vulnerability is our greatest strength as people. We just need to communicate our vulnerability with fierce courage and determination. In the movies, it was always the hero who was unaffected by his environment. Who would have guessed that Hollywood would have had it so wrong all these decades?

Christopher de Serres

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Running To Stand Still

The Story of a Victim, a Survivor, a Wounded Healer - a Narrative of Male Sexual Abuse from the Inside

This article provides a sociological introspection pertaining to male sexual abuse from a wounded healer's (Etherington, 2000) perspective. Inspired from postmodern narrative and ethnographic works (Ellis & Bochner, 1992; Richardson, 1997), the author layers this account (Rambo-Ronai, 1995) with therapeutic writing (Etherington, 2000) and poetry and prose (Richardson, 1997). This style provides the narrator with the flexibility to move between various temporal and spatial settings and report various internal and external monologues. Also addressed are common misconceptions often associated with male survivors of sexual abuse. The final section highlights the evolution of the author from a victim to a survivor and then to a wounded healer.

Enraptured, I stand near the crib, gazing down upon the sleeping figure that is my son. I'm in complete awe of this living embodiment of innocence and serenity. I've named this chapter of my life redemption, for I have been given a chance to be the father that I never had, to protect the innocence that I lost so long ago. "I will never run away from you," I whisper. "I love you with all my heart." And I do. It's just that facing one's demons head-on is not easy, for I'm constantly reminded of my father's departure when I was 1 year old. I'm reminded of how alone I was that day when I was touched in the dark... I'm at peace now, or so I tell myself. My son will never know what happened to his dad. Yet, I know deep down that I'm fooling myself, for although the rage, the melancholy, and the bitterness are kept at bay, they often creep up, unsuspected. My wife usually bears the brunt of it.

Maybe one day the moods, just like the dark man who once haunted my dreams, will no longer be? Perhaps. But until then, how will I protect my family from these emotional swings? I will, as Blair (2002) recommended, break the silence. If I can't tell my son why Papa is so moody, then I must write it down, so that one day he may understand. There are other reasons for writing this down. While much has been written about victims and survivors of sexual abuse, very little has been researched on how survivors become parents, not just parents but good parents. This is the narrative of my struggle, the never-ending struggle from victim to survivor to wounded healer and parent. It's the story of boy, a man, an uncle, a father. It's an insight as to why so many of us choose to run, because running is better than standing still. Or so we think. Telling our story is a way of reclaiming ourselves, our history, and our experiences. It is a way of finding our voice (Etherington, 2000). For some (Lew, 1990, 1999; Pelka, 1997), the use of narratives and postmodern ethnography (Ellis & Bochner, 1992; Richardson, 1997) has

given voice to experiences that are otherwise shrouded in secrecy. Inspired by the narrative approach to male victims of sexual abuse (see Charon, 1994; Etherington, 1995, 2000; Grubman-Black, 1990), I decided to write my own narratives highlighting my struggles and experiences with sexual abuse. I also use layered accounts (Rambo-Ronai, 1995), therapeutic writing (Etherington, 2000), poetry (Richardson, 1997), and statistics on sexual abuse to convey significant ideas and themes while creating a narrative that is hopefully accessible and understandable to as many readers as possible. For me, this type of trauma writing provided great literary freedom (Etherington, 2003). Indeed, the use of narratives as healing journeys for survivors has been suggested by Crowder (1995), Etherington (2000), and Frank (1995).

The tale of wounded storyteller is told for the sake of others just as much as for oneself. The Other is a source of inspiration and purpose insofar as the wounded storyteller gains value and meaning from the expectation that the Other will learn, benefit, and be guided by the tale that is told. The ethical claim is for a dialogic relationship with a reader or a listener that requires engagement from within, not analysis from outside, the story. (Frank, cited in Bochner, 2001, p. 149)

I am a survivor of child sex abuse, although I now prefer to call myself a "wounded storyteller" (Frank, 1995) or a "wounded healer" (Etherington, 2000). I am also the youngest of 12 children, 2 from my father and 10 from my mother. After meeting all of my siblings later in life, I became convinced that I have a hybrid personality - half-youngest sibling (a.k.a., the baby) and half single child. I grew up without my siblings, in a trailer court in a small mining community in northern Canada, and for most of this time was raised by my mother. My father wasn't a big part of my life. The experiences that I did have with him were tainted by alcohol and profanities.

While I have numerous siblings and nieces and nephews, I never had the chance to meet them until I was a teenager. The day I did stands out in my memory, for I felt something that I hadn't before: acceptance and unconditional love. Every time I think of my nieces jumping into my arms, my nephews' sly grin when they see me, I feel so fortunate, so blessed. Blessed because unlike so many other survivors I did not feel "monstrous because of low self-esteem, and because we know we have experiences that other people who do not understand and do not want to hear about it" (Rambo-Ronai, 1995, p. 410). Somehow through these children, I had gained the confidence that I would never be what my abuser was.

Today, I am a father, husband, friend, uncle, & teacher.

Inspired by Blair (2002) and Rambo-Ronai's (1995) narratives, I want to take the opportunity to tell you of my story of sexual abuse. It's a story of growth and transformation from a victim to a survivor and, finally, a "wounded healer." What's the point of all this? Well, for the moment, it provides me with an acceptable method of conveying who I was, who I am, and who I would like to be. Also addressed within the narrative are common misconceptions often associated with male survivors of sexual abuse. The final section illustrates my evolution from a victim to a survivor and to a wounded healer.

I've been blessed or cursed - depending on how you view it - with an amazing memory, so I always knew what happened to me. I was abused from the time I was 7 until I was 9, then again when I was 10. I knew the perpetrator. He was my babysitter, a friend of the family. Considering that most perpetrators tend to be males who consider themselves heterosexual (Badgley, 1984; Jenny, Roesler, & Poyer, 1994) and are most likely to be known but unrelated to the victims (Holmes & Slap, 1998), this is not unusual.

I thought I was free of him when we moved northward. Yet, years later, thousands of kilometers away from where he lived, there he was, sitting at my kitchen table, laughing and talking with my relatives! What do you do? I never did go into the kitchen to see him or his wife - I just couldn't. Couldn't stand his voice, or his smell, that smell of beer, old spice, and body odor. So I sat on my bed in my room with a hammer beside me for protection and I rocked myself as I used to do so often when I was younger. My uncle came to my room to inquire what was wrong. Although I had never really discussed it with anyone apart from my mother, who dismissed it all, I explained to him who the visitor was and what he had done. My uncle left my room and asked him to leave. That was the last I heard

of it, or so I thought. I thought then that it was all over. I would never have to face the abuse and my abuser again, or so I thought.

Unqualified disclosure (i.e., without professional consultation) can result in denial by family and/or friends (Tobin, 1999) or, worse, potential homophobic responses by family and/or friends (Pelka, 1997). This, as Goodwin (2005) explains, is in part a result of the typical male socialization process, which requires that all males aspire to a certain standard of masculinity - being in control. Imposed by society, these values are reinforced by peers, family, community, and ultimately by men themselves. Whether consciously recognized or not, the power of this masculine ideal and its disparity with the real lives of males creates a "gender role strain" which leads to a myriad of issues for boys, male youth, and men and denies the potential of disclosure to emerge (Goodwin, 2005).

I'm glad my uncle asked my abuser to leave, for it validated my perspective that what had happened was wrong. It also provided me with the insight that disclosure was good. It was an important step toward my healing. Yet, this event was unusual. Throughout much of my life, I was examined by various counselors. Strangely, none ever asked me about my feelings or experiences. In fairness, none of them knew about my abuse. I guess it was easier to equate mood swings, the anger, the rage, and the fights with such superficial labels as attention deficiency syndrome, low socioeconomic status, and a single-parent family. Perhaps they were right, for I did have those three strikes against me.

Unlike the acceptance of my uncle, my first attempt at disclosure was not successful.

When I tried to tell my mother about the abuse, she told me that I was imagining things. I still remember her rationale. "Why would a happily married man be interested in such a way in a little boy? It just doesn't make any sense. It's just part of your overactive imagination and your bad dreams." I guess that my mother's inability to comprehend the abuse could be forgiven, although over three quarters of boys are most commonly abused by males (between 80% and 90%). In fact, pedophiles (adult majors [16 plus] who act out sexual behaviors toward prepubescent children [13 or under]) who molest boys are not expressing a homosexual orientation any more than pedophiles who molest girls are practicing heterosexual behaviors (Badgley, 1984).

Something tragic happened on that day when I attempted to disclose about the abuse to my mother, a lost of trust in adults. Tobin (1999) was right when he argued that unqualified disclosure is precarious, for this attempt at disclosure shattered the bond of trust between son and mother. This schism in our relationship continues until the present day. We barely speak to each other.

Jonah: Harvey, why do you always keep the door to the washroom open? That's just disgusting, close the door man!

Harvey: [after a lengthy pause] You know why I don't close the door? It's because I don't like to be in there alone in the dark. For that's where he use to take me. He would then close the door shut the lights, and then pull my pants down and touch me. I could hear the television and his wife watching it. So here I was surrounded by white noise, with this repulsive man panting in the dark, his disgusting smell permeating the air, and all I could do is stare at the light under the door, hoping it would provide salvation. It never did, so now I let in all the light.

Jonah: Sorry man, I didn't know. But I can empathize. My mother was a survivor of sexual abuse.

What the preceding conversation illustrates is that sexual abuse of children is unfortunately much too common in our society. For example, according to the Committee on Sexual Offences Against Children and Youth, estimates of child abuse are as high as one in two for females and one in three for males (Badgley, 1984). More conservative estimates put these figures at one out of six men reporting having had unwanted direct sexual contact with an older person by the age of 16 (Lisak, Hopper, & Song, 1996). Boys at greatest risk for sexual abuse are those who live with only one parent; those whose parents are separated, divorced, and/or remarried; those whose parents abuse alcohol or are involved in criminal behavior; and those who are disabled (Holmes & Slap, 1998). Worse are social stigmas which result in a smaller proportion of sexually abused boys than sexually abused girls reporting sexual abuse to authorities (Holmes & Slap, 1998). This phenomenon is attributed in part to the stereotyped gender role expectation that males cannot be victims (Health Canada, 1999; Pelka, 1997; Tobin, 1999). This may in some way explain Rambo-Ronai's (1995) observation that while there is clearly public anger toward child abuse in our society, too many victims are unfortunately forced to endure their shame in silence or, worse, to face their fears in the dark. Indeed, social interaction

flows more smoothly when a child sex abuse is not discussed because it is easier not to take action. Few want to talk about

child sex abuse, thus, a limited vocabulary exists for it. The incongruity between its common incidence and the inability of people to talk about it amounts to monstrous denial of child sex abuse, but such a denial is an entrenched norm. (Rambo-Ronai, 1995, p. 406)

These “norms” solidify the “wall of shame,” and thus create another vicious void of silence where male victims are left with little, if any, social support.

Reflecting upon my abuse, I can see how such an “unpopular topic” as child sex abuse can be influenced by the discourse of scholars and “experts” who attempt to categorize sexual abuse in terms of severity, based on levels of intrusion, duration, trauma, and the relationship between the victim and the offender (Kemp, 1984). From this “abuse degree perspective,” one can rationalize that my abuse wasn't all that bad. After all, look at how horrible other people had it compared to you. In fact, you should be thankful, for the trauma could have been a great deal worse. In the words of Rambo-Ronai (1995), I begrudge this clinical analysis and, as many of my friends and acquaintances would attest, “resent the idea that my situation was in any way fortunate.” Indeed, the problem with this quantification of abuse is that it sounds strangely like my mother's denial of these events. I wonder if any abusecrisis counselor would rationalize physical abuse by stating “It's really not all that bad, you can't see the bruise, and you can still walk, and you didn't get a broken neck. I wouldn't worry about it. It will be gone in a week.”

It was during my early 20s that I convinced myself that I was healed. I had it all: friends, family, and a girlfriend. However, a chance meeting with a family relative informed me that my abuser had been charged for indecent acts toward another boy. This other boy was his nephew. However, the case was thrown out of court for lack of evidence. I felt so guilty, for only if I had known! If only someone could have told me, then I could have called his lawyer, and walked into the courtroom as the prosecution's surprise witness. Then I would have testified against my abuser, and he would have been thrown in jail. The boy and I would have been vindicated. Or so I thought. But that's not the way things work. I never had a chance to testify, for by the time I found out, the case was over, the abuser had won. I feel a tremendous amount of sadness for this little boy, I often think about him. It is for him and for so many other victims and survivors that I refuse to sweep this under the rug. That I refuse to keep quiet.

During this time, I met leaders and elders from several First Nations (Tobique, Kitigan-Zibi, Akwasasne). These individuals provided me with essential life lessons and spiritual wellness. They showed me the value of temperance, of healing oneself. So I immersed myself in these philosophies, and I initiated the process of “healing the hurt.”

Healing the hurt is a process of dealing with one’s anger & dismay.

Throughout the process, the individual moves forward and backward through four stages: denial, anger, introspection, and action. When I finally reached the action stage, I reminded myself of an earlier vow that I would be different from my abuser. I would be better than him. One blustery winter morning several years later during my doctoral studies, I was given a chance to enact this vow.

A story about a boy who had been victimized by a scout leader had appeared in the local newspaper. I was saddened that there was yet another victim. I knew this time that I had to say something. So I wrote a letter to the Kitchener Record. I remember how scared I was when the newspaper informed me they were going to publish the letter. I was terrified that friends or colleagues would read it. But I could keep silent no longer. I had to write something and tell people that we were not all victims. The following letter was printed on January 20, 2001, in the Record, the local paper in Kitchener-Waterloo.

As I read the articles “Ex-Scout leader guilty of abusing 20 area kids” and “Years of abuse lifetime of damage,” I was once again assailed by old ghosts from my childhood. Like “Dave” in the article “Years of abuse lifetime of damage,” I used to exhibit similar traits of bed wetting, violence, and fascination with fire. Fortunately, friendship and internal conviction guided me through these difficult times of my adolescence, and provided me with the opportunity to pursue my goals and my dreams in adulthood.

Sadly, even at the dawn of a new millennium, there are simply too many Davids out there, victimized by abusers, family, friends, and society. In order to minimize these tragedies we need to recognize that we are all responsible. Some individuals acknowledge their responsibilities by addressing these issues publicly, others promote proper communication (an element essential to healing), while some of us chose to become the opposite of our abusers.

It takes a very strong person to overcome abuse. It takes time, support, and strength to neither internalize one’s rage nor project it onto others. The rewards of such an accomplishment are many. In my case, every time I hear the glee of my niece’s voice when she sees me, every time when she jumps in my arms, every time I gaze upon those marvelous eyes of wonder, every time she states that she loves me, then I know that I have become someone that my abuser could never be. I have become an adult who is loved and trusted by this child. I have become a person who has learned that innocence is to be worshiped, not desecrated. I have broken the cycle of dysfunctionality. Let us not forget that while there are many “Davids” out there, there are also many of us who have overcome abuse and now contribute positively to our families and to our society.

After I wrote the letter, I thought I was completely healed. It was shortly thereafter that I met the woman who would become my wife. She provided unconditional love and trust. At first I was elated by this bond, yet I began to find problems with the relationship, so I responded in the best way I knew. I ran away.

As Blair (2002) explains, this defense mechanism is quite popular in victims and survivors of sexual abuse. A few days after our breakup, I realized that I was very good at running, add an academic rationale and voila! You have the required justification. I’m not running, I’m just off to fight a new cause! But I wasn’t, I was just running away from commitment and unconditional love. A feeling I never experienced from a partner, a feeling that terrified me. If I’m good at running, then I should also tell you that I’m pretty good at introspection, so I talked to this wise lady, a croan if you will. After hearing my story, she told me the following words: “Your defense mechanism got you this far, and you will most likely continue to survive with this mechanism; however, I fear that without a new mechanism, you can’t grow, you can’t become the man you want to become. You will never be at peace with yourself.” She was of course right, so I did what she suggested, I changed my patterns, I stopped running. When the demons caught up it was terrifying, but I had also reached a place where they could be dispelled. I also did something I had never done before, I asked my partner for forgiveness. She gave it to me.

I noticed something else that day, pain and sadness in her eyes. Hurt that I had caused. I guess I was so caught up in my pain, I never saw the grief I had caused. It was not my abuser, my mother, or my father who were responsible for this pain. It was me! Peace of mind, standing still, call it what you will, it all sucks! It’s damn hard!

Fortunately I received counseling, and I even decided to press charges against my abuser.

I was interviewed by a detective, a humiliating process I must say. The evidence wasn't strong, so the case was dismissed even before it got to court. Not enough evidence. I'm angry about that, yet I'm also sad, definitely sad. It's an indication of our system, a system that has failed to protect innocence.

Maybe Rambo-Ronai (1995) and Blair (2002) were right when they compared society and some academic departments (e.g., sociology) to an abusive patriarch who demands the silence of his children. The groundbreaking work of the feminist movement did much to decode the complexities of violence and abuse, and new service delivery models for trauma have emerged (Goodwin, 2005); however, despite their titles, many agencies that identify themselves as sexual assault centers only serve women. This preclusion of male victimization is no doubt due to the primary mission to address the impact of male perpetration. However, through its inadvertent sole-gender mandate, these centers deny the reality of sexual victimization of men. Thus, male victims are provided with no avenue of reporting or addressing sexual abuse.

What occurs is that social stereotypes are indirectly reinforced, and male survivors of sexual abuse remain social enigmas (Goodwin, 2005; Pelka, 1997). How can men, members of the patriarchy, be violated? What is lost in this discourse is that patriarchy is not an issue of sex but also status and privilege. This begs the question: If a child's or a broken man's voice is to be heard, should it not be heard without gender filtration (Goodwin, 2005)?

Much like Frank's (1995) agenda, mine is unequivocally activist and political, for I hope to shift the dominant cultural conception of the dependent victim to one of responsibility and healing.

Being a wounded healer and a social scientist has provided me with insights into both worlds. I use these insights to clarify or critique certain misconceptions when I discuss these issues. My goal is to use these insights to empower the disadvantaged (Sjoberg, William, Vaughan, & Sjoberg, 1991).

My first priority is always to highlight the large amount of information available on the impact of sexual abuse on

males (Lew, 1990, 1999) and the numerous studies that have described its history, causes, effects, interventions, and treatments (Badgley, 1984; Crowder, 1995; Friedrich, 1995; Herman, 1992; Miller, 1990).

However, with the exception of Blair's (2002) and Rambo-Ronai's (1995) narratives on childhood sexual abuse, little literature exists on the researcher/survivor's perspective. Indeed, "there has been little written about the abuse of males - there is even less written about their recovery, and especially by the men themselves" (Etherington, 2000, p. 15). This does not mean that survivors do not investigate sex abuse. It is likely that people who have had the experience do not talk about it because of the norm of salience and the absence of a place for it given our typical writing formats in the social sciences (Etherington, 2000).

Perhaps this can be in part attributed to the methodological shortcomings of research pertaining to male victims of sexual abuse (Etherington, 2000; Tobin, 1999). Worse is the failure of some researchers to recognize their own methodological limitations, for, as Finkelhor (1986) noted some 20 years ago, researchers and clinicians need to be cautious about the assumption "that victims become offenders; not all do" (Briggs & Hawkins, 1996, p. 222). Finkelhor (1986) goes on to point out that most research relating to sex offenders has "been conducted in prisons which contain only a small minority of offenders" (Briggs & Hawkins, 1996, p. 222). Also known as the "vampire syndrome," colleagues and friends have both been surprised when I informed them that a large percentage of survivors do not become pedophiles. My hope is that this article is one small step forward in deconstructing these social constructions; my hope is to produce a narrative that:

moves away from a singular, monolithic conception of social science towards a pluralism that promotes multiple forms of representation and research; away from facts and toward meanings; away from master narratives and toward local stories; away from idolizing categorical thought and abstracted theory and toward embracing the values of irony, emotionality, and activism; away from assuming the stance of the disinterested spectator and toward assuming the posture of a feeling, embodied, and vulnerable observer; away from writing essays and toward telling stories. (Bochner, 2001, p. 35)

Conclusion

My son is born. His first act is to gaze solemnly up at his father. He doesn't cry, he just stares at me. As I hold him in my arms, I wonder, why was I so afraid of having a boy? It was most likely due to my insecurity of being an inadequate parent, being face to face with my lost innocence. Yet he is not me, he's Gabriel, he's my redemption.

By breaking their silence, Blair (2002) and Rambo-Ronai were able to encourage me to write my story. Our experiences are similar, yet they also differ. I hope that my story of healing adds to the narrative. Finding my voice has given me the opportunity to dispel numerous myths - that all survivors are doomed to a life of ignominy or worse to become pedophiles. I want to remind people that most of us do not become pedophiles; we may be screwed up, but we know how precious innocence is. If we have a fault, it's that we either fear it or worship it too much. I consider myself fortunate, for while I never received counseling pertaining to the abuse until much later in life, I had what so many others lacked - a strong social network of friends who believed in me, whom I could trust and disclosed to. Later I was reunited with my family, and this provided me with the opportunity to stop running and get some counseling. Although I'm at peace with myself, the peace is relative, and it is in a constant state of flux. I still need someone to talk to.

It was this counseling which gave me the strength to learn more about male sexual abuse, to volunteer as a mentor for male survivors of sexual abuse, to speak at conferences, to write this article.

Why? Well, in the words of Bochner (2001):

It is good to have options from which to choose. We each must decide what calls us to stories. For some of us - I know it's true for me - finding a good way to live our lives, to do the right things, to give voice to experiences that have been shrouded in silence, to bring our intellect and emotionality together, to merge the personal and the academic, and to give something back to others draws us to the poetic, moral, and political side of narrative work. But making a choice does not mean turning those who make a different choice into our enemies or rivals. Our goal should not be to dominate those who choose a different path but to figure out how to live and work in harmony with each other, regardless of our diverse desires. (p. 154)

So what is a wounded healer? Well, perhaps it is the stage when a survivor acknowledges his or her responsibility to other victims and survivors of male sexual abuse. However, my responsibility is also to be a good husband, to be a good father. To be mindful of my past, without letting it impede the present and future. That's what I meant by running to stand still. Running protected me for some time, but standing still provided me with the opportunity to reflect, to heal, to accept the unconditional love of my wife and son. Today, I will stand still beside the crib of my son. Thankful for this opportunity, I will continue to worship my son, not for what I have lost but for what he represents.

An Ode to My Son: The Eyes of Wonder

*I am life, I am love, I am goodness
The wonders of the world
Are forever new to me
I love to dance in the warm sunlight.*

*I cannot comprehend the meaning of life
But still I am intrigued by all of Mother Earth's creatures
I mean them no harm
I wish them only their heart's delight.*

*My heart is full of love
For I do not understand what is hate
To me the world is a great playground
Where I can be free as a dove.*

*I am energy, I am tranquility
I ride the carousel so wild and free
Although I am small my courage is great
For I live in a wonderful world!*

*I dance in Nature's harmony
Running from tree to tree
Chasing a dream
Which one day, might be.*

*I am serenity
I am love, I am hope
I am the spirit of life
I am innocence.*

*In my beauty
Lies humanity's salvation.*

Thank you Gabriel. Love Poppa.

References

- Badgley, R. (1984) Sexual offences against children: Report of the committee on sexual offences against children and youth (Vols. 1 and 2). Ottawa, Canada: Ministry of Supply and Services Canada.
- Blair, L. (2002) Into the light. *Journal of Loss and Trauma*, 7, 1-19.
- Bochner, A. (2001) Narrative's virtues. *Qualitative Inquiry*, 7, 131-157.
- Briggs, F. & Hawkins, R. M. F. (1996) A comparison of the childhood experiences of convicted male child molesters and men who were sexually abused in childhood and claimed to be nonoffenders. *Child Abuse and Neglect*, 20, 221-233.
- Charon, R. (1994) The narrative road to empathy. In H. Spiro, M. McCrea- Curner, E. Peschel, & D. St. Hames (Eds.), *Empathy and the practice of medicine: Beyond pills and the scalpel* (pp. 1-11). New Haven, CT: Yale University Press.
- Crowder, A. (1995) *Opening the door: A treatment model for therapy with male survivors of sexual abuse*. New York: Brunner/ Mazel.
- Ellis, C. & Bochner, A. (1992) Telling and performing personal stories: The constraints of choice in abortion. In C. Ellis & M. Flaherty (Eds.), *Investigating subjectivity: Research on lived experience* (pp. 79-101). Newbury Park, CA: Sage.
- Etherington, K. (1995) *Adult male survivors of childhood sexual abuse*. Brighton, England: Pavilion.
- Etherington, K. (2000) *Narrative approaches to working with adult male survivors of child sexual abuse*. Philadelphia: Jessica Kingsley.
- Etherington, K. (2003) *Trauma, the body & transformation: A narrative inquiry*. London: Jessica Kingsley.
- Finkelhor, D. (1986) *A sourcebook on child sexual abuse*. Thousand Oaks, CA: Sage.
- Frank, A. (1995) *The wounded storyteller: Body, illness and ethics*. Chicago: University of Chicago Press.
- Frank, A. (2000) Illness and autobiographical work. *Qualitative Sociology*, 23, 135-156.
- Friedrich, W. N. (1995) *Psychotherapy with sexually abused boys: An integrated approach*. London: Sage.
- Goodwin, R. (2005) *The paradoxical elephant: A theoretical framework for male-centred approaches to sexual trauma*. Retrieved from www.malesurvivor.on.ca/english/paradox.htm.
- Grubman-Black, S. D. (1990) *Broken boys/mending men*. Brandon, FL: Ballantine Books.
- Health Canada. (1999) *Combining voices: A directory of services for adult survivors of child sexual abuse*. Ottawa, Canada: National Clearinghouse on Family Violence, Health Canada.
- Herman, J. (1992) *Trauma and recovery*. New York: Basic Books.
- Holmes, W. & Slap, G. (1998). Sexual abuse of boys: Definition, prevalence, correlates, sequelae, and management. *Journal of the American Medical Association*, 280, 1855-1862.
- Jenny, C., Roesler, T.A., & Poyer, K. L. (1994) Are children at risk for sexual abuse by homosexuals? *Pediatrics*, 94, 41-44.
- Kemp, C. H. (1984) *The common secret: Sexual abuse of children and adolescents*. New York: Freeman.
- Lew, M. (1990) *Victims no longer*. New York: Harper Perennial.
- Lew, M. (1999) *Leaping upon the mountains*. Jamaica Plains, MA: Small Wonder Books.
- Lisak, D., Hopper, J., & Song, P. (1996) Factors in the cycle of violence: Gender rigidity and emotional constriction. *Journal of Traumatic Stress*, 9, 721-743.
- Miller, A. (1990) *Breaking down the wall of silence*. New York: Penguin Books.
- Pelka, F. (1997) *Raped: A male survivor breaks his silence*. In L. L. O'Toole & J. R. Schiffman (Eds.), *Gender violence - interdisciplinary perspectives* (pp. 210-220). New York: New York University Press.
- Rambo-Ronai, C. (1995) Multiple reflections of child sex abuse: An argument for a layered account. *Journal of Contemporary Ethnography*, 23, 395-426.
- Richardson, L. (1997) *Fields of play: Constructing an academic life*. New Brunswick, NJ: Rutgers University Press.
- Sjoberg, G., William, N., Vaughan, T. R., & Sjoberg, F. (1991) The case study approach in social research: Basic methodological issues. In J. R. Feagin, A. M. Orum, & G. Sjoberg (Eds.), *The Case for the case study* (pp. 27-29). Chapel Hill: University of North Carolina Press.
- Tobin, R. (1999) *Alone and forgotten: The sexually abused man*. Carp, Ontario, Canada: Creative Bound.
- R. Harvey Lemelin is an assistant professor in the School of Outdoor Recreation Parks and Tourism at Lakehead University. His healing journey began while working with the Akwesasne First Nation. It was at this time that Haudenosaunee elder Henry Lickers suggested that Harvey speak of his experiences as a survivor of sexual abuse. Friends, teachers, Harvey's wife, and John Harvey have reinforced Henry's sentiments. This article is the culmination of this healing journey. It is dedicated to all victims, survivors, and wounded healers.

Why Men Don't Talk

I want you to understand why I'm proud to be a survivor of child abuse and how important it is for appropriate support to be given; I was unable to talk about my experiences until now because I lived in silent trauma. But I've found my voice and I want everyone here to listen to what I have to say!

I'm 47 years old and I have only just discovered who I am, but it has been a tough journey.

I was born into a family that didn't want me, they didn't tell me this verbally they showed it through abuse and neglect. While my dad was drunk, mum would go and steal from shops to feed her drug habit, they told everyone that I was a mistake. I can't remember ever being smiled at. My early memories are of being told to shut up and feeling the sting as a belt hit my body, I tried to be good by being quiet and keeping out of the way, but my mum and dad found me and then I suffered.

I was about 4 years old when a social worker came to visit us. She was a middle-aged woman in a big flowery dress and a red face. When she came into our front room I sat on the floor next to the TV, mum and dad sat around her. The conversation was all a mumble to me, I occasionally heard my name mentioned but no one spoke to me. Mum and dad were all smiles but I could see that their faces were evil and the smile was just a mask.

As the social worker left she turned to me and patted my head saying something like "what a quiet young man". I stared at her with all my effort, I wanted this woman to look into my eyes and read my mind so she could see how hurt and frightened I was. But instead she shook hands with mum and dad and drove away in a white car. Mum and dad blamed me for this intrusive visit, I had been playing out with bruises on my arms and legs and a nosy neighbour had seen me and told social services, I had been very bad. After that I never played out again.

[So why don't men talk... you tell me](#)

When I was 8, social services noticed that I had not been attending school. I was taken to a meeting in an office that smelt of cheese and coffee.

I sat around for ages with mum as people bustled around with files of paper and serious faces. No one asked me what I wanted, mum told the baldy man in a grey suite that she couldn't cope with me because I was violent and out of control. Mum never looked at me as she told those lies about how I was vicious and rude. The man looked at me and said, "things will be OK", but he didn't matter because all I wanted was for mum to take me home.

I never went home again. I've never seen my mum and dad since then; they finally got rid of their mistake. I was now someone else's problem.

My social worker was called Margaret; she was very old and kept talking about how hard it was to be a child in her day. She never asked me nice things or spoke in a soft voice to me. Her manor was harsh and strict like a headmistress, as Margaret took me up the pathway of a big house I felt no warmth in her prickly hands. I was a problem that needed to be sorted.

[So why don't men talk... you tell me](#)

Margaret left me in the hall of a large house called St. Vincent's home for boys. There were pictures of Jesus and angels on the walls but the floor was tiled cold and dark. The noise of children's footsteps echoed through the hallway, I hoped that this place would be safe. I looked into the eyes of the painting of Jesus and prayed that things would get better.

My prayer was shattered by the silent appearance of a nun. She was dressed in black and appeared to glide across the floor. The nun looked me up and down and said, "We know how to deal with boys like you"! She took my hand and led me into a large room with loads of other boys eating in silence. I suddenly felt cold and alone. This may have been a house of God but there was no love here, the lessons were strict and my life was filled with fear and dread.

My time at St.Vincent's was miserable, I can't say that enough! The nuns took great satisfaction in administering whatever punishment they felt appropriate. But worse was to follow...

I shared a room with 4 other boys; we knew each other well because we all had the same silent fears. Above me in the bunk was a lad called Tiny, he was fat with big ears and wild eyes. Tiny and I spent time making plans to escape this living hell, but we never carried them out. The other two boys in my room were Jon and Curly; I sometimes wonder what they are doing now. I know they all suffered the same abuse as me but I just can't imagine them as adults.

We were woken up at 6am every morning. At 6.15am we had to be up, washed, dressed with our beds made and our room tidy ready for mass.

It was always cold and dark in the church, whatever the season. Every morning we had to pray to God for forgiveness for our sins and lay thanks for the salvation we had been offered at St Vincent's. This was the one time when I could escape with my own prayers; I secretly prayed for Farther Murphy to drop dead and for me and my friends to be free.

Farther Murphy was the most powerful man in the home. Even the nuns were scared of him. He was a giant of a man with greased black hair and thick eyebrows. Farther Murphy always wore a long black cassock with a large silver crucifix around his neck. During the church services he would shout and wave his hands around declaring that we were evil children who had no right to live on Gods good earth because we were all selfish and devil lovers. Farther Murphy's voice was strong, it reached into my soul as if it was a knife, and I felt shame and guilt for being a bad boy.

I was so scared of this man that I used to wet myself, and every time I wet myself I was beaten and punched by the nuns and thrown outside to live like an animal.

Night time brought with it the possibility of further abuse; I used to pretend to be asleep when I heard the footsteps. I could tell who it was by the sound of their shoes on the creaky wooden floorboards. I would pray that tonight they would pick someone else.

It was usually me who was picked. I think it was because I never went home or got any visits from family, I must have been an ideal victim to those sick men. I was firmly grabbed and taken to the priest's quarters that stank of whiskey and tobacco, there ready to be abused.

Throughout the time when Farther Murphy and the other priests were raping me I was told that this was a punishment from God and that if I told anyone I would go straight to hell. I believed every word and I did whatever they told me.

So why don't men talk... you tell me

After leaving St.Vincent's I wanted to forget everything, I was 16 years old and very angry. I left the city and went to Blackpool to work on the pier; I used to sweep up the rubbish that the tourists dropped while enjoying the fair ground and seaside. It was there that I met Kim. Kim was the first girl I ever had feelings for, she was funny and very attractive with long brown hair and deep blue eyes. Kim used to meet me after work so we would walk together on the beach hand in hand.

Kim lived with her mum and younger brother in the town, her mum thought I was just scum from the fair and not good enough for her princess, but that seemed to bring us closer together. I was with Kim for about 2 years before I decided to tell her about my past, I wanted her to understand why I was confused about sex and why I had such terrible nightmares.

One November day I sat her down and told what my mum, dad, the nuns and priests had done to me. It was a cold and wet day Kim was wearing her favourite jumper; her hair had got blown out of shape in the wind. I spoke and Kim listened in silence.

Kim left me. She didn't understand why I had let such nasty things happen to me, she thought I was dirty and gay. Kim told me that she didn't want to be with a man who would become a child abuser. I was alone once again.

So why don't men talk... you tell me

When I get high or drunk every problem seems to be less because I don't have to feel the pain anymore. If I can't get high then I cut myself, not for suicide just for the pain because I find it comforting. I can't remember much about the next few years of my life, I just drifted in and out of hostels or I slept rough in shop doorways, I was either out of my head or begging for money to get stuff to get me out of my head. It became a lifestyle that protected me from my feelings and ruled my every thought, days-weeks-months didn't matter, friends were only good to help me get a fix or to watch out while I robbed cars, houses, shops, people.

Getting the next hit was all that mattered...

I had no time for reflection or memory I existed for the moment. I got caught and prosecuted several times before I ended up in prison. I was given a four-year sentence for being a persistent offender and a threat to the community. At the time I didn't care after all at least I would have somewhere to sleep in prison.

I continued to use drugs while inside, mostly heroin smuggled in by a bent screw. They don't test for drugs during the weekend so on Friday night I used to get completely wasted because I knew that by Monday it would be out of my system.

After a few months inside I became frustrated and angry. I wanted to get out because the prison reminded me too much of St. Vincent's. Prison life was all about regime, numbers and locked doors. Prison gave me time to think and time to remember, I wanted to sleep but I dreaded closing my eyes because images would haunt me, I thought I was going mad and I even planned my own suicide.

Inside prison I was alone with the memories of my past, I could trust no one because any sign of weakness will be seized upon by the cons and screws and used against me. If Kim thought I would become an abuser then the people inside will to, and I know what happens to nongs inside.

Gary my probation officer, a nice bloke if not a little young, told me that I had to go drug free if I wanted to improve my chances of early release, I agreed without knowing what was involved.

Mr. Young was a Throughcare worker that was responsible for my rehabilitation. Mr. Young worked for an outside agency that had got the contract to operate within the prison, I don't think he understood what it was to be a drug user or homeless I found his manor to be that of a "do gooder" so I didn't feel safe telling him about my past, but he was the key to my early release.

I was moved to a drug free wing and given a TV for being a good boy, "off the drugs for 6 months". The problem was that without the drugs to mask the pain I was starting to feel more and more, I was very unwell ... I was scared.

My room was grey; I had decorated it with pictures of naked women from FHM. I didn't like to look at them because it reminded me of sex and the rapes; I put the pictures up as a public display of masculinity and to say, "I am straight" it worked because I was seen as a tough man who shouldn't be messed with. This was an image that suited me as it meant I did not have to talk to any other prisoner about my feelings.

Mr. Young and the Throughcare team never asked me why I started to take drugs in the first place. Gary never wanted to know why I cut my arms and had difficulty sleeping and the prison officers never asked why I hated the power and authority that they represented.

No one asked me because no one cared, I was just a prisoner who needed to be taught a lesson, just as I was a naughty boy who needed to be taught a lesson all those years ago. The lessons I had been taught in St. Vincent's have led me to a life that I didn't want. Since I was born I have always been a problem that needs to be solved.

So why don't men talk... you tell me

After release I got my life together

No more sleeping rough or hard drugs this was replaced with hard work. I met and married Anne, we produced three children in four years, Tom was the first followed by Natalie and Samantha. We were a happy family. I worked hard to build up a good standard of living and to provide all that I could for my wife and children. My past was not mentioned, it wasn't important anymore I had other things to worry about.

My wife never asked me about the nightmares, or why we had to sleep with the light on, Anne never wanted to know about my childhood or who my parents were, she said that the past should stay in the past and that I should live for today, this seemed to make sense.

However when Tom was growing up I found it very difficult to get close to him, he would want to give his dad a hug but all I felt was fear. Tom grew up never being bathed by me or sitting on my knee, I don't know why but I could not get close to him. When I tried to speak to Anne she told me to cheer up, and pull myself together. Once again I was alone.

So why don't men talk... you tell me

On Thursday teatime there was a knock on the door. As I walked towards the door I noticed through the frosted glass that one of the callers was dressed in a police uniform. My heart began to race and I felt sweat building up on my forehead.

The callers introduced themselves and I invited them in they both smelt of aftershave. Joan from across the road was conveniently clipping her rose bush; I stared blankly at her for a few seconds before joining my guests in the front room. They asked me to sit down.

The person not in the police uniform said he was a social worker from a joint investigation between the Police and Social Services into historical child abuse; he was a friendly looking man who spoke with a soft voice. He told me that he wanted to talk to me about my time at St. Vincent's Home for Boys. As those words left his mouth I sank into my shoes. With my head lowered I replied with disjointed sentences and stuttered words, I was a child again remembering hell.

During my 6 years with Anne, I had never mentioned anything about my past; I had hidden away the feelings and denied the pain so much that I believed that I was over it. While giving statements to the police about the staff at St. Vincent's I was forced to remember, and deal with childhood fears with an adult head.

After giving that statement my life was turned upside-down. I stopped everything and began to withdraw into myself, my wife and kids were confused because the man they knew as the strong breadwinner was gone replaced by an emotional wreck.

I was left to dwell on my past experiences for two years; during this time I lost my job, most of my friends, and I was lucky not to lose my wife. I spent weeks at a time in the house, never daring to go out for fear of being spotted by someone who knows what happened to me. I lived day to day with constant reminders of the past flashing around my head, out of control.

For a few weeks before the trial of Father Murphy at the Crown Court Julie, a social worker with the investigations team, gave me support. She prepared me to face the man who had raped me all those years ago.

Farther Murphy was found guilty of 63 counts of abuse against boys in his care he was locked up for 18 years. My evidence had helped cage an evil man, but at what cost to me?

Understandably, the police were only interested in the acts of buggery committed by Farther Murphy; and understandably my statement was only about these acts. I was never given the chance to talk about my feelings, the feelings of being a boy in an abusive home. I was confused because while I was elated that my abuser had been punished I felt so empty and cold inside at the thought of having to return to normal life.

I found out in court that St. Vincent's Home for boys kept records and files all about me; the barristers used some of this information from large red box files to prove that I was a boy in that place. I felt so angry that someone in St. Vincent's had taken the time to write stuff about me like "wet the bed again tonight" or "had bruises on his legs and arms" but no-one wrote "WAS BEING RAPED" or "SOMEONE SAVE THIS BOY FROM MORE PAIN". I want to read those files to see what those adults thought of me, but I was told that I couldn't because of "confidential information"!

Ann had cried throughout the trial, she wanted to support me and to understand what had happened in the past so she got me in touch with a psychiatrist who specialised in treating the effects of child abuse, I was nervous but I attended.

Dr. Norman Shiraz sat behind a large wooden desk; around him were books and personal photographs. I had put on my best shirt and trousers for the therapy and this had added to my uncomfortable feelings. The Doctor asked me to sit in a soft chair, as I sank into the seat he asked me to explain about my childhood. I spoke about mum, dad, St. Vincent's, Kim and Anne for what seemed like hours. My thoughts were a bit jumbled but I managed to put them into sentences that made sense.

I stopped talking and turned my head to Dr. Shiraz. He paused for a few minutes; I was breathing heavily and could hear my heart beating. Dr Shiraz said, "Could you tell me why you told me all that?" I lost my temper, this man was meant to be a qualified specialist who understands about what I have experienced, I walked out feeling angry and betrayed.

So why don't men talk... you tell me

A few weeks later as I was driving home I turned on the radio, a phone in programme was on. The presenter was talking to a member of parliament about her work to highlight the problem of false accusations of child abuse being made against carers and teachers. She said it was easy to make up stories of abuse from the past and that police investigations in to historical child abuse were encouraging men to make up allegations just so that they can make large claims for compensation. She went on to describe how the lives of professional people have been ruined because they have been wrongly convicted.

I stopped my car and began to cry. I spent my childhood being silenced through fear and my adult life ashamed of what happened to me terrified of going to hell or becoming an abuser. It took all my energy to sit down with a police officer and document what happened to me, I then had to suffer the humiliation of being cross examined in court by a barrister who was more interested in my past drug use and criminal behaviour than on the rape and suffering that had been inflicted on me as an innocent boy. It seemed that from what the MP said that despite all I have gone through in my past I will still be treated by others with shame.

So why don't men talk... you tell me

I sat back in the car and wiped the tears from my eyes, the MP had finished talking and the presenter was encouraging people to call in with their opinion. I was about to set off when a man called Tony was introduced from a local survivors group.

Tony spoke about his experiences of child abuse and his recent dealings with the police. Tony sounded calm and sure about his emotions and the help that the group can offer. I wrote down a contact phone number on an old pay and display ticket and drove home. I must have sat by my phone for hours with that crumpled piece of paper in my hands. I wanted to dial the number but I was scared. Eventually I plucked up the courage and rang the number... an answerphone clicked so I immediately hung up, I have never liked to talk to those machines, why was no one there?

I needed help NOW!

When I eventually called back the answerphone message said that I should ring on Monday between 5pm and 9pm if I wanted to speak to a fellow child abuse survivor. I called the following Monday, bang on 5pm. I had waited a long time to talk and now I was ready, I sat in the chair next to my phone waiting for someone to pick up.

"Hello helpline, Dennis speaking". With those words the doorway had opened. I was given the space and time to talk about my past without interruption or interpretation, I felt comfortable and at ease for the first time in years.

I still get upset and angry when I think about what those adults did to me in the past, but my fellow survivors have given me enough empathy and sound advice to help me deal positively with my thoughts and as a result I sometimes sleep without nightmares.

I'm proud to be a survivor of child abuse; it probably sounds weird to hear that. The fact is I am no longer ashamed of what happened to me because I know that it wasn't my fault. I also know that because of the hurt inflicted on me in my childhood I will never hurt anyone, and that makes me a good person. In the long-term, I may go and get some professional counselling; to be honest I'm not sure. I hope to return to work soon, I am trying to be a good dad and husband.

So why don't men talk... you tell me

Fire In Ice (Liverpool) 2003 ©

Weasel Words

Paedophiles & the Cycle of Abuse, by Liz Kelly

In making child sexual abuse a political issue, feminists focussed attention on male power, challenging the idea that abusers were abnormal, sick individuals.

Recently, however, the term “paedophilia” has been creeping back even into feminist discussions. Here Liz Kelly warns of the consequences. Over the last few years I have become increasingly alarmed at the ways in which feminist perspectives on child sexual abuse are being undercut by the adoption and acceptance of extremely flawed concepts and ideas. It would be bad enough if this was confined to professional perspectives, but more and more I have encountered use of, and support for, some of these ideas in women’s organisations. The consequences of this sloppy thinking are immense, and it behoves anyone who thinks of themselves as a feminist to take the meaning and implications of using the word ‘paedophile’ and subscribing to ‘cycle of abuse’ theories extremely seriously.

What has happened over the last couple of years is an increasing awareness of not just the extensiveness of sexual abuse, but also the ways in which adults organise abuse networks, and the ways some of these are linked to child pornography and child prostitution. Whilst feminist analysis has had a profound influence on how sexual abuse in the family is understood, this has not yet been applied to these other contexts.

The return of the ‘paedophile’

The issues became particularly clear to me whilst undertaking a review of what we know about sexual exploitation of children (Kelly et al, 1996). The spark for this piece was attending two seminars at which the word paedophile was used routinely, without question, in which I was the lone dissenting voice: one feminist suggested that there was not a problem since ‘fathers who sexually abuse are also paedophiles’. The necessity of it was confirmed when I heard French, Swedish and Belgian delegates (all senior women policy makers) link the concept of paedophilia with cycle of abuse. One neatly summarised their perspective: ‘It is deplorable that one out of three children could be a paedophile in the future’.

The ease with which these terms now trip off women’s tongues disturbs me greatly; do we too - on one level - want to distance ourselves from the implications of sexual abuse in childhood, confine it to limited contexts, have a group of men who we can justify thinking and talking about as ‘other’?

Documentation of ‘organised abuse’ networks tends to preface this with the word ‘paedophile’, and indeed many in the child protection field have begun using ‘paedophile’ as either a collective term for all abusers or to refer to what is presumed to be a particular type of abuser (invariably those who abuse children outside the family contexts).

Immediately the word paedophile appears we have moved away from recognition of abusers as ‘ordinary men’ - fathers, brothers, uncles, colleagues - and are returned to the more comfortable view of them as ‘other’, a small minority who are fundamentally different from most men. The fact that they have lives, kinship links and jobs disappears from view in the desire to focus on their difference. Attention shifts immediately from the centrality of power and control to notions of sexual deviance, obsession and ‘addiction’. Paedophilia returns us to the medical and individualised explanations which we have spent so much time and energy attempting to deconstruct and challenge.

Rather than sexual abuse demanding that we look critically at the social construction of masculinity, male sexuality and the family, the safer terrain of ‘abnormality’ beckons.

Disguising and distracting

The self-serving construction of paedophilia as a specific, and minority, ‘sexual orientation’ acts as a useful distraction to both the widespread sexualisation of children, and girls in particular, in western cultures and the prevalence of sexual abuse. In one US study a significant proportion of 193 male college students reported that they could be sexually interested in children if they were guaranteed that there would be no legal consequences (Briere and Runtz, 1989).

The representation of the 'ideal' heterosexual partner for men continues to be younger, small, slim with minimal body hair. Across many cultures sexual access to girls and young women is often the prerogative of powerful men: chiefs, priests and religious leaders through customs such as 'devadasi'. The western echo of this age-old patriarchal tradition can be seen in the pre-requisite young girlfriend (occasionally 'under age') of older rich men. There is an important theme here which links male power, economic power and young women.

The separation of 'paedophiles' in much of the clinical literature on sex offenders from all men, but also other men who sexually abuse, has involved the presumption of difference.

Similarities - in the forms of abuse, in the strategies abusers use to entrap, control and silence children - are ignored. In this way fathers, grandfathers, uncles, brothers who abuse are hardly ever suspected of being interested in the consumption, or production, of child pornography, nor are they thought to be involved in child prostitution. This in turn means that investigations of 'familial sexual abuse' seldom involve either searches for or questions about these forms of abuse. This contrasts with what we know from adult survivors who tell of relatives showing them pornography, expecting them to imitate it and being required to pose for it. Some also tell of being prostituted by relatives. A significant proportion of organised networks are based in families.

Who are the clients of children and young people involved in prostitution? I suspect only a minority would fit clinical definitions of 'paedophiles' - men whose sexual interest is confined to children.

Whether intentionally or not, calling a section of abusers 'paedophiles' is accompanied by an emphasis on boys as victims, and the abuse of girls and young women outside the family becomes increasingly invisible. Unlike 'child abuser', or 'child molester' the word 'paedophile' disguises rather than names the issue and focuses our attention on a kind of person rather than kinds of behaviour.

Confused definitions

In much of the literature there are inconsistencies in how 'paedophilia' is defined, although the most common element seems to be the assumed 'fact' that it is not just a preference for, but the restriction of sexual arousal to, children. This 'fact' is however presumed, and the possibility that the 'paedophile' may have sexual contact

with adults is never explored. Julia O'Connell Davidson's (1995) work is documenting the fact that the dividing line between the men who exploit children and women in sex tourism is neither clear nor absolute. The focus on sexual arousal moves us into further difficulties, since the recent feminist (and also some child protection professionals') emphasis on individual men choosing to act or not act, and having to take responsibility for those choices is much more difficult to sustain where 'deviant' sexual arousal is represented as having a biological basis in individuals.

These confusions have, if not created, at least contributed to a context in which men who seek to justify their wish to abuse have been able to organise politically, and even seek the status of an 'oppressed sexual minority'. They also form the basis for a differential approach in terms of intervention, with responses being proposed in relation to 'paedophiles' - such as life licences, and denial of any contact with children - which would cause outrage if proposed in the case of fathers. The issue here is not whether the responses themselves are appropriate, but the way in which distinctions are being made between 'types' of abusers which are both spurious, and result in abuse by family members being regarded as less 'deviant', and therefore, less serious than by men outside the family.

The dangerous implications of a resurgence of the label 'paedophile' was evident in an article in The Guardian on 17 January 1996. It was a small piece noting a problem delaying the publication of the first British commentary on Catholic canon law due to a mistake in relation to papal infallibility. Within this document are two pages on how to respond to priests who 'are paedophiles'. The church's position is that paedophiles have diminished responsibility because their sexual urges are 'in effect beyond their control. This forms the justification for arguing that the church should not punish abusive priests except for 'perhaps only a mild penalty, a formal warning or reproof'. Anyone getting a sense of *deja vu* yet?

If we allow the term paedophile to re-enter discussions about sexual abuse, all the arguments about responsibility for action will have to be had all over again.

Cycle of abuse

Whilst 'cycle' explanations have a long and inglorious history, 'cycle of abuse' has become the dominant explanation of why sexual abuse happens in the 1990s. The origins of this 'theory' lie in nineteenth century philanthropy and early twentieth century psychiatry.

It has proved a popular explanation for all forms of physical and sexual abuse in the family (and in a slightly different guise - 'cycles of deprivation' - has been the conservative approach to explaining poverty and Black socio-economic disadvantage). Every cycle model attempts to reduce complex social realities, which have more than a little to do with structural power relations, to simplistic behavioural and individualistic models.

Cycle of abuse has become the most commonly understood explanation of sexual abuse in childhood and has been uncritically accepted as 'the truth' by many sections of the population. Virtually every speech I have heard by a politician recently about sexual abuse in childhood and violence against women, contains some reference to it, and a significant number of workers in British refuges adhere to versions of it. This alarming and widespread acceptance of a flawed model needs to be challenged, both in terms of evidence to support it and its consequences for child and adult survivors of abuse.

In its simplest and most common form, 'cycle of abuse' proposes that if you are abused as a child you will in turn abuse others. But if we begin with what we know about the gendered distribution of sexual victimisation and offending the proposition begins to fall apart. We know that girls are between three and six times more likely to experience sexual abuse, yet the vast majority of sexual abuse is perpetrated by males. If there is any kind of cycle it is a gendered one, and that in turn requires explanation. Even if arguments that there is a hidden iceberg of female abusers have some validity to them, to reverse the gendered asymmetry would require an iceberg of literally incredible proportions.

Even if we limit our focus to perpetrators, the data here is also equivocal. No study has yet demonstrated that there is an obvious 'cycle' even within samples of convicted offenders; the range of those reporting experiences of abuse in childhood varies between 30 and 80%. Few of these studies define abuse in childhood in the same way. Some limit their data to whether the individual was abused in the same way as he has subsequently abused children, whereas others include any form of child abuse in the individual's childhood whilst focusing on sexual offending in adulthood. Clearly the latter method will produce higher findings, but the psychological mechanisms involved in moving from experiences of physical abuse and neglect to sexual abuse cannot be the same as those where the same form of abuse is involved. These crucial differences are invariably ignored.

In all studies to date either a majority or significant minority cannot be fitted into the theory. Alongside

these glaring problems in evidential support for the proposition, there is seldom any exploration of the precise mechanisms involved whereby those who have been victimised become victimisers, since this is not simple repetition, as models suggest, but a reversal of roles.

Double Distortion

A rather deft sleight of theory occurs when proponents of this pernicious idea recognise that women do not proceed in great numbers to abuse. There are two ways in which mothers who have been abused are implicated: experiences of abuse are presumed to make women less able to protect their children or to choose an abuser as a partner. These propositions are frequently used in tandem, but they are different arguments. (The influence of this idea has been so strong that some social services departments consider the knowledge of a woman's abuse in childhood sufficient to place her children on the at risk register!)

The first proposition is usually supported through reported cases, although few of its supporters take seriously what prevalence research tells us: that in any group of women a substantial number will have a history of abuse. Harriet Dempster's (1989) Scottish Study provides an explanation for why there may be a higher than predicted proportion: mothers who have been abused are more likely to report the abuse of their children. The link proposed here is precisely the opposite of that which 'cycle of abuse' presumes. These mothers are so determined to protect their children, their own experience makes them more willing to seek formal intervention. Presuming a negative link prevents researchers and practitioners from countenancing an alternative 'positive' one. The tragic irony which some women encounter is that if they reveal their own abuse their report may be accorded less validity.

The second proposition is remarkable. Very few women begin relationships knowing their male partner has abused children - prospective employers have legal rights to information about Schedule 1 offenders, prospective sexual partners do not. Since no clinician has yet devised a certain way of distinguishing abusive from non-abusive men, how do women achieve this? If clinicians/researchers really believe that women have 'abuser detection antennae', why are there no studies designed to discover how they do this? If 'choice' is operating here it is made by men. We know that some experienced abusers deliberately target single mothers.

If we listened to what women have to say we would also know that some men, when trusted with information about a woman's own abuse or that of her child by another man, use that as 'permission' to act similarly.

Recognising the deliberateness of abusers' behaviour (Conte et al, 1989) is disturbing; it is much more comfortable to believe that abusers and/or their partners are merely repeating what they learnt in childhood. 'Cycle of abuse' theories rework old orthodoxies; transforming abusers into victims, and placing mothers back in the collusive frame.

Quite how the theory is supposed to explain abuse outside the family (and more children are abused by known adults than family members) has not yet appeared in print.

Psychic determinism

'Cycle of abuse' is based on a psychic determinism: experience A leads to behaviour B with minimal choice/agency in between. Apart from offering abusers carte blanche to avoid responsibility, it makes the thousands of survivors who, as result of their own experiences, choose to never treat children in similar ways invisible, logically impossible. This theory does an outrageous injustice to countless women whose courageous and passionate testimony made sexual abuse in childhood a social issue. It also makes a travesty of support for children, since the aim becomes preventing them 'repeating the cycle' rather than enabling them to cope with having been victimised. A recent twist is the shift from talking about the sexualised behaviour some children who have been abused display as 'acting out' to defining children as young as three and four as 'abusers'. By presuming the impacts and meanings of abuse we close off investigating the most important question of all: what makes the difference in how children and adults make sense of, and act in relation to, experiences of childhood victimisation.

It is the psychic determinism which connects 'cycle of abuse' to the view that the impacts of sexual abuse are in every respect, and in all cases, devastating: that survivors can only be rescued from an appalling future through intensive therapy. However, studies which use community samples, rather than adults or children in therapy, discover a wide range of impacts; from those experiencing extreme levels of distress through to many who fit within the 'normal' range.

Disputing 'cycle of abuse' does not mean there are no examples where experiences of abuse are present in generations of families, or that some individuals have decided to deal with past hurts by inflicting pain on

others. But the negative consequences of this 'idea' are being most strongly felt by child and adult survivors; these consequences are extensive and seldom referred to. It is now commonplace for adults who have been abused in childhood - women and men - to believe that they cannot be trusted around children, that there is an inevitability that they will abuse them. In my experience when women are asked to explore the issue in more depth none have felt a desire or wish to sexually abuse children. Their conviction that this will be the case comes solely from ideas in the public sphere. Some adult survivors are very clear about the pernicious consequences of this model, as these examples from a research project I am involved in will illustrate:

My mother was abused by men outside her family - she hasn't abused myself or my brother. I know many people - male and female - who were abused, some continuously and severely. They have not become abusers. I am very sceptical about this theory. The majority of abused are female, the majority of abusers are male. Where are all the female abusers.

"It confirms everything victims of abuse already believe about themselves. It offers no hope of healing... it denies the possibility of survival. It allows 'experts' to look at these distant mad, bad, sad unfortunates, sexual deviants, rather than themselves... It removes any responsibility from perpetrators"

Why, when the evidence is shaky and the implications for child and adult survivors so negative, has 'cycle of abuse' become widely accepted as an explanation? On one level it is a neat and accessible concept. In offering this 'common sense' explanation it represents abuse as learnt behaviour as if it were the same as learning a nursery rhyme. Apart from the basic fact that abusing others is a very different action to being victimised, a thinking and decision-making process is involved before we act similarly or differently to events we have been witness to or experienced.

Much of the knowledge developed on offenders over the last ten years shows that they are careful, deliberate and strategic in entrapping children. So powerful is this 'idea', though, that even academics who recognize that most people do not 'repeat the cycle' refer to this as 'breaking' it. We need to ask ourselves why this notion has taken such a hold within public and professional thinking. Most crucially it excludes more challenging explanations those which question power relations between men and women, adults and children. 'Breaking cycles' is a much easier and safer goal to discuss than changing the structure of social relations.

Some important connections

There are two contexts in which the concept of 'paedophilia' is used. One proclaims difference in order to protect 'normal' men (see previous discussion). The other asserts difference in order to justify and legitimise abusive behaviour.

The sexual freedom model is frequently presented as an alternative radical approach. It is based upon a belief that all laws on sexual conduct, except where explicit force or violence are used, are an incursion into individual freedom and privacy, and as such are a form of coercive control. This has been argued most cogently in relation to children and young people by self-defined paedophile groupings; PIE (Paedophile Information Exchange) in Britain and NAMBLA (North American Man/Boy Love Association) in the USA. The support for what has been deliberately called 'inter-generational' sex in order to disguise the power differentials involved, has extended in recent years to include some of those who have defended pornography from feminist criticism, such as Gayle Rubin and Tuppy Owens. The philosophical assumptions which are the basis of this perspective are:

- that paedophilia is a sexual orientation, and therefore that paedophiles are an oppressed minority, with whom other sexual minorities ought to have a 'natural' affinity;
- that 'inter-generational' relationships are not just about sex, but are beneficial and based on a form of love that is more honest than most familial relationships;
- that what is seen as sexually abusive varies culturally, and that in some cultures adult/child sex is acceptable;
- that children are sexual beings, but this is denied and controlled by adults;
- that consensual sexual relationships are possible between children and adults.

Critics of this position have raised a number of uncomfortable issues including: that it is overwhelmingly men who argue this position; that it is invariably adults arguing (albeit in disguised forms) for their right to be sexual with children, usually boys; that sexual activity is prioritised above other rights children lack, such as the right not to be hit, or to sex education. It is also the case that childhood (unlike gender, class, race and sexuality) is not only a product of oppressive social relations. Whilst the social construction of childhood does disadvantage children in relation to adults, early childhood involves levels of dependency on others which no amount of social change can remove. This material reality makes the notion of non-coerced consent between children and adults inherently problematic.

Whilst the most eloquent supporters of the sexual freedom position clearly locate themselves within the gay and/or paedophile movements (Sandfort, 1987) there

are some heterosexual groupings which promote similar arguments, particularly sexualized family relationships. The most well known is the Rene Guyon Society based in the US, whose slogan has been 'sex before eight or else it's too late'. In 1990 their membership was estimated as 5,000 and they have been public in promoting 'kid porn' (O'Grady, 1992). Evidence has also emerged of a number of new 'religious movement' (often referred to as 'cults') promoting adult/child sex within the group, and much of what is currently known points to this being primarily heterosexual and following the patriarchal tradition of privileging male leaders' sexual access.

Both approaches to paedophilia, and cycle of abuse explanations, function to exclude feminist understandings and approaches. They all, in different ways, serve to excuse or justify abusive behaviour and provide an extremely limited basis from which to work towards the right of children to live free from intimate intrusion. The importance of maintaining our perspective and challenging approaches which refuse to name men and male power was graphically illustrated by the hysterical response in sections of the media to the recent publication of a report on sexual exploitation of children (Kelly et al 1996). What some male radio and newspaper journalists balked at was not the need to take sexual exploitation seriously, but our temerity in questioning the distinction between 'paedophiles' and other men. Taking note of what resistance to feminist analysis turns on has always been an important guide for me in knowing that we were 'onto something' important. Talk about the 'paedophile' and the 'cycle of abuse' indicates a point of resistance to feminist analysis which needs to be challenged now.

Bibliography

John Briere and Marsha Runtz, 'University males' sexual interest in children: Predicting potential indices of "paedophilia" in a non-forensic sample' (Child Abuse and Neglect, 13, 1989)

Jon Conte et al 'What child abusers tell us about prevention' (Child Abuse and Neglect, 13, 1989)

Julia O'Connell Davidson 'British sex tourist in Thailand' in (Hetero)sexual Politics Mary Maynard and June Purvis eds. (Taylor and Francis, 1995)

Harriet Dempster The reactions and responses of women to the sexual abuse of their children: a feminist view and analysis (MSc dissertation, University of Stirling, 1989)

Liz Kelly et al Splintered Lives: Sexual Exploitation of Children in the Context of Children's Rights and Child Protection (Barnardos, 1996)

Ron O'Grady The Child and the Tourist: The Story Behind the Escalation of Child Prostitution in Asia (ECPAT, 1992)

Theo Sandfort 'Paedophilia and the Gay Movement' (Journal of Homosexuality, 13, 1987)

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Our Debt to the Women's Movement.

It is important to say a few words about feminism and the “women’s movement.” Feminists have received a great deal of criticism based on misunderstanding their aims and ideas.

I believe that men recovering from boyhood sexual abuse have no greater ally than the feminist movement. By exploding the traditional views of what it means to be a woman (or a man), feminists opened greater possibilities of realising our full potential as human beings than ever existed before. They challenged the inevitability of a patriarchal system that accepts the exploitation of smaller and physically weaker individuals. They explored ways of interrelating through cooperation and mutual respect, rather than seeing violence and competition as the only means of resolving difference. They attempted to change our attitudes and behaviour towards children. And, to an amazing extent, they succeeded.

Change is slow and difficult. Power and privilege don’t yield easily. But, more and more, our laws, social behaviour, institutions, and ways of interacting reflect new awareness of the possibilities. There is no doubt that the active work of the feminist movement forced our society to recognise the existence of childhood sexual victimization. Feminists continue to resist and contradict the forces that seek to deny the realities of abuse, sweep them under the rug, or minimising their effects.

People are skilled at ignoring what they don’t want to deal with.

To effect a change of attitude and behaviour, a climate must be created that recognises the need for change and encourages corrections of problems. Change has to occur in context.

Judith Herman, MD (author of *Trauma and Recovery*), referred to the need for ‘a movement’ to insure that information about trauma doesn’t have to be ‘rediscovered’ every hundred years. Without a movement to remind and reinforce, the best research data are ignored. Society at large (including mental health professionals) finds it less stressful to look the other way.

Proponents of feminist theory and action haven’t permitted this ostrich like denial. They continue to insist that we deal with the realities of many important life issues, including child abuse. They forced recognition of these issues in the face of resistance and misunderstanding. It is no accident that only recently has the sexual abuse of boys and girls become a topic of widespread public discussion. Years of struggle by feminists set the stage.

Adult male survivors are among the beneficiaries of the work of the feminist movement. We must ignore stereotypes we have heard about “women libbers”; these stereotypes arise out of fear - and the fear comes from ignorance of the facts. The fact is feminists have improved life for us all. By helping us realise our potential as humans, they have touched every woman, man and child.

When we can really look at what these changes mean to us, we will be well on our way to creating a world where abusive behaviour is unthinkable. That will be the ideal climate for recovery from past hurts, and safe nurturing of all children. We are still a long way from realising those goals, but we would be a lot further from them if not for the work of feminists. Indeed, it no exaggeration to say that the women’s movement is enabling us become “real men.”

Mike Lew

Victims No Longer

The Classic Guide for Men Recovering from Sexual Child Abuse. (2nd edition)

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The Invisible Boy

Revising the Victimization of Male Children & Teens

Opening the Door to Male Victims

“Since we are sometimes compelled against our will by persons of high rank to perform the operation, by compression is thus performed: children, still of a tender age, are placed in a vessel of hot water, and then when the parts are softened in the bath, the testicles are to be squeezed with the fingers until they disappear.”

Paulus Aegineta 1st Century A.D.

This opening quote from Sander Breiner’s book, *Slaughter of the Innocents: Child Abuse Through the Ages and Today*, is a stark reminder that the story of male child abuse is an old one. The passage is an instruction to those who wanted to get around a law passed by the Roman emperor Domitian prohibiting the castration of boys who were subsequently placed in brothels or sold for “buggering.” At the turn of the twentieth century, boys were routinely circumcised without anesthetic as a “treatment” for things such as hyperactivity and masturbating (De Mause, 1988). However, anyone who believes that this inexcusable treatment of male children or youth is a thing of the past should consider the following:

- An episode of a comedy television program about summer camp features the sexual abuse of a “canteen boy” by an adult camp counsellor.
- A Canadian newspaper advertises a board game, “101 Uses for a Severed Penis.”
- Another television program portrays mother/son incest in a comedy sketch about phone sex.
- A newspaper article about a mother who left her 11 year-old son tied and gagged in a closet quotes a social worker at the trial as saying, the boy had been “very prone to lying, stealing, and manipulating, was disruptive in class, and was generally an unpleasant kid.”

What these few examples illustrate are some of the themes that will be explored in the pages of this document; namely, the existence of a double standard in the care and treatment of male victims, and the invisibility and normalization of violence and abuse toward boys and young men in our society.

Despite the fact that over 300 books and articles on male victims have been published in the last 25 to 30 years, boys and teen males remain on the periphery of the discourse on child abuse. Few workshops about males can be found at most child abuse conferences and there are no specialized training programs for clinicians. Male-centred assessment is all but non-existent and treatment programs are rare. If we are talking about adult males, the problem is even greater. A sad example of this was witnessed recently in Toronto. After a broadcast of *The Boys of St. Vincent*, a film about the abuse of boys in a church-run orphanage, the Kids’ Help Phone received over 1,000 calls from distraught adult male survivors of childhood sexual abuse. It is tragic in a way no words can capture that these men had no place to turn to other than a children’s crisis line.

The language we use in the current discourse on violence and abuse masks, minimizes or renders invisible certain realities for male victims. Terms such as “family violence” have become co-terminus with “violence toward women,” particularly on the part of husbands, fathers or other adult male figures. Male teens, boys, male seniors, male victims of sibling-on-sibling violence and female abusers disappear in this term.

Canada lags far behind other Western democracies in the study of male victims and their male and female abusers. In fact, among the large and growing number of research studies on male victims only a small number are Canadian. Social policy development, public education, treatment programs and research funding, and the evolution of a more inclusive discourse on interpersonal violence that reflects the male experience are all long overdue.

Why the Need for a Male-Inclusive Perspective?

A “male-inclusive” perspective on violence and victimization must be, of necessity, dynamic and evolutionary, since male victims are only just beginning to speak out about their experiences. As they do, their stories will continue to challenge many of our long-held and status quo assumptions about abuse victims and perpetrators.

It is important to keep in mind that male victims are not a homogeneous group, and over time it is likely that a number of perspectives will evolve. Heterosexual, gay and bisexual, Native/Aboriginal, disabled/challenged, and visible and cultural minority males will all add different aspects to the story of male victimization.

There are, however, four basic components to the concept of “male-inclusive.”

First, the need to articulate a male-centred point, or points, of view, which reflect the diversity of men and boys in the Canadian population. Second, the need for male victims to search for balance as they struggle to heal the emotional, physical, mental and spiritual aspects of their lives. Third, the need to honour and protect female victims’ gains and acknowledge the contributions women have made in breaking the silence about violence and abuse. Fourth, the need to evolve a vision of combining both males’ and females’ stories into a coherent and inclusive perspective that all of us will be able to own and use in the struggle to reduce and eliminate interpersonal violence and abuse in our society. Sadly, as male victims’ stories reveal, we are still a long way from realizing any of these goals.

Male victims report great pain, frustration and some anger at not seeing their stories reflected in the public discourse on violence and abuse. Several large-scale Canadian studies about interpersonal violence conducted in the past several years have reported the findings pertaining to only female victims. Many academic papers written about victims of violence purport to be “balanced,” yet typically bring only a faint male “voice” to the analysis. From a conceptual standpoint, many also make the mistake of accepting and using, uncritically, a woman-centred-only model of victimization. Male victims also find much of this work dehumanizing and dismissive of their experiences. They feel many writers and thinkers in the field have delineated the boundaries of the discourse on violence and abuse - boundaries that leave males out.

Male victims frequently find that therapists, counsellors or other types of caregivers trained with female-centred models of victimization are unable to help them. Consequently, they are likely to simply abandon therapy, leaving unexplored many of the issues relating to their victimization experience and to their deeper healing.

Male victims, like female victims before them, have encountered their share of critics and detractors, people who refuse to believe them, ignore prevalence statistics, minimize the impact of abuse, appropriate and deny males a voice, or dismiss male victimization as a “red herring.” When prevalence statistics are given for male

victimization, it is common to hear the response that the vast majority of abusers of males are other males, a belief which is simply not true.

This comment is usually intended to frame male victimization as a “male problem.” It is also insensitive and perceived by male survivors as being victim-blaming. While challenges and criticisms to concepts and theories are valid, and an important part of the evolution and development of any field, denial, minimization and silencing is harmful, abusive and damaging to any victim.

In many respects, male victims are where female victims were 25 years ago. Most of us forget the enormous opposition the women’s movement encountered as women began to organize and claim a voice to speak against violence and name their abusers/offenders. The services and supports that exist presently for women were hard won and yet are still constantly at risk of losing their funding. By comparison, there really is no organized male victims “movement” per se. Males, generally, are not socialized to group together the way women do, to be intimate in communication or to see themselves as caregivers for other males. In short, much of what male victims need to do to organize a “movement” requires them to overcome many common elements of male socialization, all of which work against such a reality ever happening.

Why the Need to Re-Vision Male Victimization?

The subtitle of this work, “Revisiting the Victimization of Male Children and Teens,” extends an invitation to the public and professionals alike, to “look again” and “re-vise” their knowledge and understanding with respect to violence and abuse, and to make it inclusive of a male perspective. On the face of the evidence presented in the pages of this report, the invitation is compelling.

Much of the current thinking and discourse, both public and professional, about abuse and interpersonal violence is based on a woman-centred point of view. This is neither right nor wrong, good nor bad, but rather the result of who has been doing the advocacy. However, as a result of this history, victims have a female face, perpetrators a male face. Because of this image of perpetrators as having a male face, violence in our society has become “masculinized” and is blamed exclusively on “men” and “male socialization.” Although there is without question a male gender dimension to many forms of violence, especially sexual violence, simple theories of male socialization are inadequate to explain why the vast majority of males are *not* violent.

Violence is even blamed on the male hormone testosterone. The irony in this argument is not lost on male victims. While women have been struggling to get out from under the stigma that they are at the mercy of their hormones, males are being accused of being at the mercy of testosterone.

Male victims walk a fine line between wanting to be heard and validated, to be supportive of female victims and to be pro-woman, while challenging assumptions they feel are biased stereotypes. Their challenges to some of these stereotypes are often met with accusations that they are misogynists, part of a “backlash” against feminism, or have a hidden agenda to undermine women’s gains. If any of these accusations are true, they must be confronted by all of us.

But if they are based only on the fear that recognition of males as victims will threaten women’s gains, then that is the issue we should be discussing right up front, not minimizing male victims’ experiences in a competition to prove who has been harmed the most. Nonetheless, it is important for all of us to recognize that it may be difficult for many women to listen to male victims’ stories until they feel safe in this regard.

Sadly, male victims and their advocates risk a lot to challenge the status quo and experience much pressure to remain silent. It is ironic that the pressure males feel to remain silent replicates, at a social level, the same patterns of silencing, denial and minimization they experienced at the hands of their offenders. If we do not face the fact that we need to heal the “gendered wounds” of both women and men, then we will compromise the search for gender peace.

Finally, and perhaps the most important reason to revision our understanding, is because men and teen males are not, in any substantial way, joining women in the struggle to end all forms of interpersonal violence. Part of the reason for this may be because males do not see their own stories reflected in public discussions about violence and abuse. If one were to rely solely on the media to convey the male experience, few stories would be known beyond the more sensational cases involving several church-run orphanages or provincial training schools. It is not uncommon to hear male students express resentment toward high school anti-violence curricula that presumes them to be abusers, harassers, rapists and sexual assaulters in waiting. Indeed, it is difficult to feel part of a collective social movement against violence

when one’s own experiences are dismissed, excluded or minimized. It is evident from even a casual review of this material that much of it contains biased stereotypes and unchallenged assumptions about “male anger,” “male aggression” and “male sexuality.” All too often, these writers take as a starting point a caricature of the worst imaginable elements of “masculinity” and assume it applies to all male persons.

As males begin to tread upon the path broken by women, they are summoning the courage to bring their own voices to the public and professional discourse about violence and abuse. If we want males to engage in true dialogue, then we have to be open to hearing their criticisms, their experiences, their pain.

Purpose of The Invisible Boy

The Invisible Boy is intended for a wide readership. Readers may find some of the issues or research presented in the document new or surprising, maybe even a little controversial. Others may find no surprises at all, but instead a confirmation of what they have experienced, observed themselves or believed all along. In any case, it is perhaps most important to see the document, not as a definitive statement of the male experience (we are too early in the struggle for that), but rather as a “snapshot in time” of some of the controversies, challenges, knowledge gaps and unexplored issues pertaining to the male experience of victimization. If it spurs the reader to further explore the literature, encourages the therapeutic community to expand its knowledge base about victims and perpetrators, or widens public debate on abuse to make it more inclusive, then it will have achieved its purpose.

Readers would be well advised not to read into the pages of The Invisible Boy any diminishment of women’s experience with respect to violence and abuse.

Unimaginable numbers of women and girls are harmed by violence every day in Canada. Women’s stories need to be heard, believed and respected without denial or minimization. We must resist attempts to place male and female victims into a competition for resources or credibility. We can no longer afford the divisiveness along gender lines that permeates discussions about male and female victims’ experiences. If we are to advance the anti-violence movement at all in Canada, we have to move more toward “gender reconciliation” and away from the bullying of one another that passes for advocacy in many public discussions.

Ideally, male and female victims' stories should be told side by side so that we may be better able to observe and understand how inextricably intertwined their experiences are. However, such a task is beyond the scope of the present project.

Because their experiences are poorly understood, underreported, largely unacknowledged and outside much of the public and professional discourse, *The Invisible Boy* will focus primarily on males and bring together in one place many of the strands of male victims' experiences.

Many questions remain unanswered. Why is it that Canada, a country that prides itself on being a compassionate and just society, lags behind other countries in advocacy for male victims? Why has the media refused to give equal coverage to male victimization issues? Why do we consistently fail to support adult male victims? Why do we support a double standard when it comes to the care and treatment of male victims? Perhaps the simplest answer to all the above is the fact that much of what constitutes male victimization is invisible to us all, especially male victims themselves. *The Invisible Boy* will explore these and other issues in the following pages.

Chapter I

Prevalence: A Many-Sided Story

How extensive is the abuse and victimization of males? The numbers tell many different stories depending upon where you look, what theoretical framework you use for analysis, what your definition of abuse and victimization is, and what sources you consult. On this basis, there are several different ways to answer the question.

If we use only the commonly reported categories of physical abuse, sexual abuse or psychological maltreatment and neglect, then we obtain one picture.

However, if we add corporal punishment, suicide, community and school-based violence, and violence in sports and entertainment, the story becomes more complicated. Still other areas could be added if we unpacked the term "family violence" and explored in more clinical depth commonly used descriptors, such as "hard-to-manage children and youth," "parent-child conflict," "difficult children," "dysfunctional families," "problem teen behaviour," "conduct disorder," "oppositional-defiant disorder," or "attention deficit disorder," to name a few. In general population health surveys, when we use terms such as "sexual contact" or "sexual touching" instead of "sexual assault" or "sexual abuse," the prevalence numbers increase substantially.

This is because males often do not see their sexual experiences in strict clinical and legal terms such as "abuse."

Other categories could be added if we more closely examined the concept of "at-risk." For example, boys in the United States are more likely than girls to be diagnosed with behavioural and mental disorders, more likely to be admitted to psychiatric hospitals, twice as likely to suffer from autism, eight times more likely to be diagnosed with hyperactivity, more likely to become addicted to drugs and alcohol, and more likely to drop out of high school (Kimbrell, 1995).

The picture becomes complicated further when we add the everyday lived experiences of male children and youth in care of the state, living in foster homes, group homes, with legal guardians or in young offender custodial facilities. We could also add male senior abuse, male victimization in sibling-on-sibling violence, abuse of male spouses or other intimate male partners, abuse of same-sex male partners and violence toward males with disabilities, including children, teens and adults. Finally, we would need to add the stories of homeless young people, street kids and male adolescents using prostitution as a means to survive.

It quickly becomes apparent that the stories of many types of male victims have yet to be told. Although the field of child abuse has gained much credibility in public and professional discourse, it is easy to forget that it is still a new area of study. Definitions of abuse, prevalence data, theories of victimization and offending, and models for assessment and treatment continue to evolve. We are still far from possessing an exhaustive or comprehensive knowledge of the subject. We simply have not had enough time to test many of our ideas empirically, nor do we even know all the questions that need to be asked.

Although the abuse field in general has gained credibility, we must never forget that it is an emotionally and politically charged area of interest, a point victims and advocates forget at their peril. Reasoned discussion can be difficult, research evidence is frequently dismissed or ignored in the interest of politics, and many people in the public and professions alike still do not believe that something like child sexual abuse is a widespread and serious social problem. For example, as recently as the mid 1970s, the predominant view of incest in the psychiatry profession was that it was extraordinarily rare (Freedman, Kaplan and Sadock, 1975).

For male victims, the situation is even more precarious. Many cultural and other barriers must be crossed by boys, teen males, the professional community and the public even to be able to acknowledge male victimization experiences as abuse. For example, gay males have to “come out” to disclose their abuse, and so typically remain silent. Stated simply, if we do not go looking for male victims, we will not find them. If we do not explore issues of abuse with males, they will not tell us their stories. Consequently, and all too typically, the first time a teen or adult male offender obtains any help with his victimization is when he has come to the attention of the legal system because of his offences (Sepler, 1990).

Sexual Abuse of Boys and Teen Males

Virtually all of the discussion about the prevalence of male victimization in Canada and elsewhere is based on “official” statistics; that is, numbers derived from case reports to some public authority such as hospitals, police or child welfare agencies. However, it is evident from an examination of general population health surveys that male victimization is greatly underreported - far more than it is for females.

In the Ontario Incidence Study of Reported Child Abuse and Neglect, girls were the subject of 54% of investigations (25 016) and boys 46% (21 426) (Trocme, 1994).

Teenage males accounted for 14% of parental and 18% of non-parental sexual abuse allegations. However, when cases involving minor-aged children (8-11 years) were examined, it was found that boys accounted for 42% to 44% of sexual abuse allegations.

In 1984, the federal government published the now widely known two-volume study, *Sexual Offenses Against Children*, also known as the “Badgley Report.” Many aspects of male victimization detailed in this large-scale national study still have not made it to public or even professional awareness. A look at some of the prevalence data in this study reveals an astonishing fact about the prevalence of male sexual abuse.

If we take as a starting point the findings of the study pertaining to prevalence, we discover that 1 in 3 males (33%) and 1 in 2 females (50%) reported being the victims of unwanted sexual touching in their lifetimes. About 4 in 5 of these incidents happened while the person was a child or youth. Assuming we have a population of 29 million people, divided equally by gender, these percentages yield the following prevalence rates.

Table I
Child Abuse Prevalence Rates in Canada by Gender

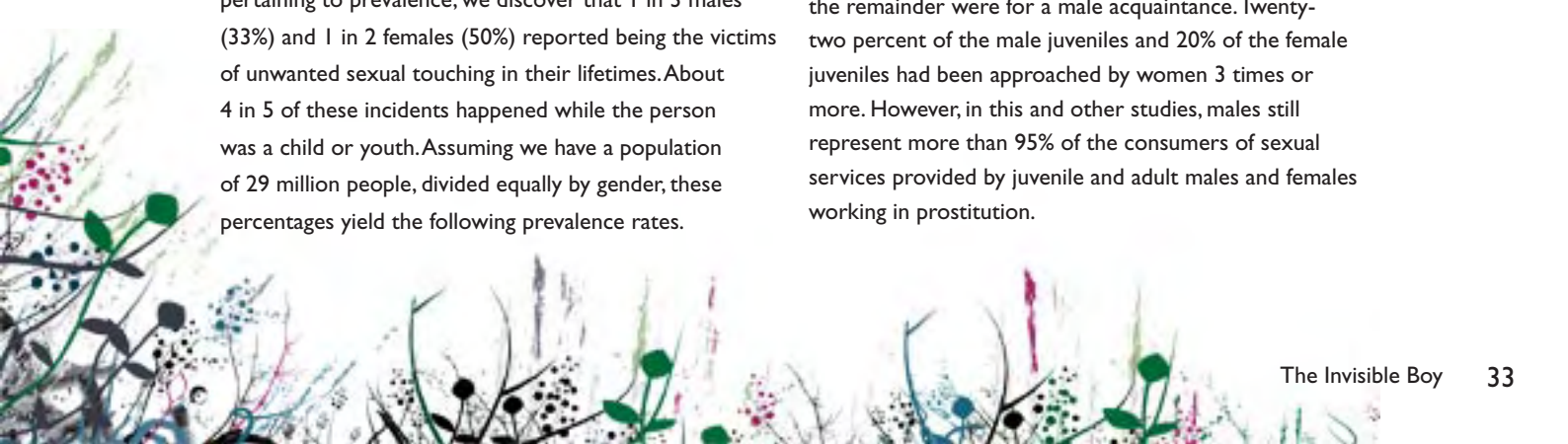
29,000 000 Canadians in total	
Males	14, 500, 000 @ 33% = 4, 785, 000
Females	14, 500, 000 @ 50% = 7, 250, 000

From these simple arithmetic calculations we can see there are close to five million male victims of some form of unwanted sexual touching in Canada. Given that male victimization is more underreported than it is for females, these numbers should be viewed as a minimum estimate.

For the category of sexual assault, about 3 in 4 victims in the study were female, 1 in 4 was a boy. The study also found that the proportion of sexually assaulted males increased with age, while the reporting dropped, dramatically so after puberty. In the National Population Health Survey, 90% of males and 75% of females did not report their abuse experience. Overall, female victims were twice as likely to report their sexual abuse experiences.

The study also reported findings about female perpetrators who have received absolutely no public or professional attention, specifically, “exposure” to males and use of juveniles working in prostitution. Both of these findings are ignored in discussions about prevalence rates pertaining to males. In the sub-study of National Police Force Survey findings (Badgley, 1984), the report reveals that males account for 99.4% of charges laid for exposure, women .06%. However, in the National Population Health Survey (Badgley, 1984), 77.6% of victims of both sexes reported being exposed to by males, while 22.4% of victims reported being exposed to by females. In these incidents, 33% of males reported unwanted exposure of a female’s genitalia. One in thirteen exposures to females were by females, 1 in 20 involved exposure of a female’s genitalia. In spite of the reported levels of female exposure in the National Population Health Survey, only a small fraction of female exposers end up being reported or charged.

In the National Juvenile Prostitution Survey, 50% of the 229 juveniles involved in prostitution reported that they were approached for sexual services by an adult female, 62% of the males and 43.4% of the females. In 75% of these incidents, the services were for the woman herself, the remainder were for a male acquaintance. Twenty-two percent of the male juveniles and 20% of the female juveniles had been approached by women 3 times or more. However, in this and other studies, males still represent more than 95% of the consumers of sexual services provided by juvenile and adult males and females working in prostitution.



In the United States, child victims of violent sex crimes were more likely to be male (Office of Juvenile Justice and Delinquency Prevention, 1995). Evidence suggests that boys are more likely than girls to be physically and sexually abused at the same time (Finkelhor, 1984). Research exploring differences in severity of sexual abuse experienced by male versus female victims suggests that males experience more invasive types of abuse, more types of sexual acts and abuse at the hands of more perpetrators than females (Baker and Duncan, 1985; Bentovim, 1987; DeJong, 1982; Dube, 1988; Ellerstein,

1980; Finkelhor et al., 1990; Gordon, 1990; Kaufman et al., 1980; Reinhart, 1987). However, it is likely that these findings fail to consider that it is the seriousness of the abuse that brought the incident involving a male victim to the attention of official agencies in the first place. Male victims tend not to report less severe types of sexual abuse, especially those involving female perpetrators.

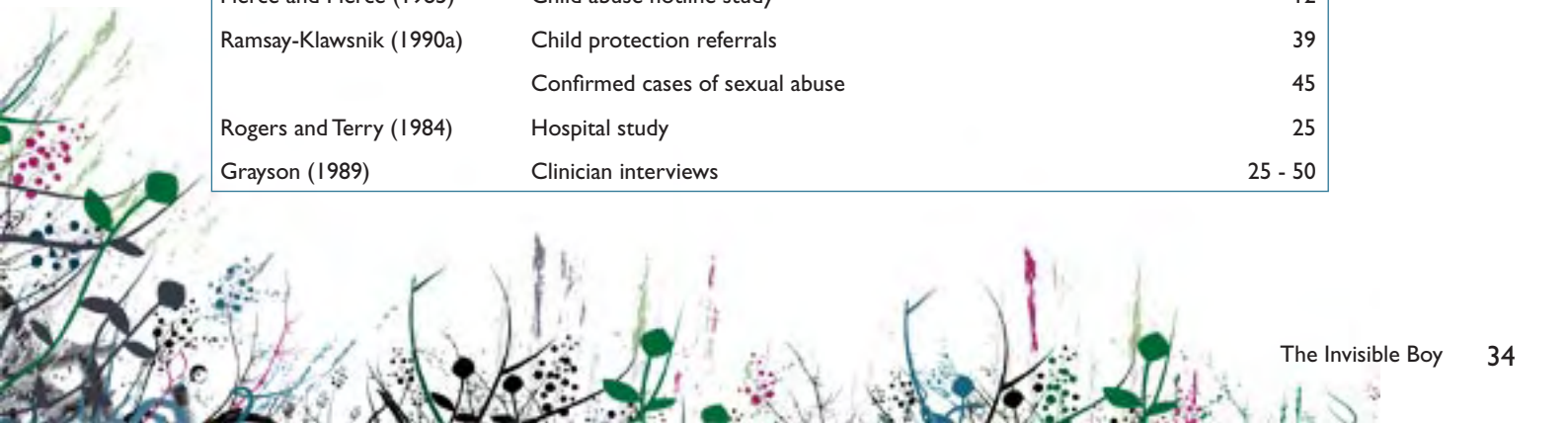
Table 2 provides a picture of the sexual abuse prevalence rates for different populations of males. The samples and the rates range widely. It is interesting to note the high abuse rates in the background of male sex offenders.

Table 2
Prevalence Rates for Sexual Abuse among Males

Authors	Sample	%
Canada		
Badgley (1984)	General Population Health Survey	14.0
Violato and Genuis (1992)	Canadian university students	14.0
United States		
Finkelhor et al. (1990)	American National Survey	16.0
Condy et al. (1987)	American college men	16.0
Fromuth and Burkhart (1987)	American undergraduate students	24.0
Stein et al. (1988)	American Community Sample	12.2
Urquiza (1988)	American undergraduate students	32.0
Cameron et al. (1986)	American National Survey	16.0
Risin and Koss (1987)	Males under 14 years of age	7.3
Condy et al. (1987)	Male prisoners (abused by female perpetrators only)	46.0
Groth (1979)	Adult male sex offenders	33.0
Petrovich and Templer (1984)	Adult male sex offenders (abused by female perpetrators only)	59.0
Johnson (1988)	Boys (4-13) who sexually abused	49.0
Britain		
Baker and Duncan (1985)	British National Survey	8.0

Table 3
Male Victims as a Percentage of All Sexual Abuse Victims

Authors	Sample	%
DeJong et al. (1982)	Hospital study	17
Ellerstein and Canavan (1980)	Hospital study	11
Finkelhor and Hotaling (1984)	Review of sexual abuse literature	10 - 33
Neilson (1983)	Treatment program estimates	25 - 35
Pierce and Pierce (1985)	Child abuse hotline study	12
Ramsay-Klawnsnik (1990a)	Child protection referrals	39
	Confirmed cases of sexual abuse	45
Rogers and Terry (1984)	Hospital study	25
Grayson (1989)	Clinician interviews	25 - 50



Sibling-on-Sibling Sexual Abuse

Sibling incest is another area that has only started to enter the discourse and has been impeded because many persons fail to label it as abuse. Obtaining a full picture of the prevalence of sexual abuse at the hands of siblings is made difficult

because many children, teens and adults see the behaviour as “sexual curiosity” or “experimentation.” Some victims may view it as “mutual exploration.” In strict legal and clinical terms, it is sometimes difficult to label these sexual acts as “offending” behaviour unless we look at the age of the children, age differences between victim and perpetrator, power related to age, intellectual functioning, size and strength, victim impact, or consider if the older sibling was in a position of authority, i.e., baby-sitting. In other cases the “offending” child may be “abuse reactive”, acting out against a smaller or weaker sibling, because they themselves are being abused. Much sibling-on-sibling sexual abuse does not show up in official statistics on crime or prevalence because the perpetrators are under 12 years of age.

Some put the figure of sexual abuse of males by siblings at 6% (Pierce and Pierce, 1985a), 13% (Finkelhor, 1980), and 33% (Thomas and Rogers, 1983). Longo and Groth (1983) found that among the family victims of juvenile offenders, 20% were either sisters, stepsisters, or adopted sisters, 16% were foster brothers, and 5% were brothers.

Sexual Harassment

Women have struggled for years to bring their experiences, concerns, and fears with respect to sexual harassment to public discussions about violence and victimization. Their advocacy efforts have succeeded in raising our consciousness about the subtleties and impact of harassment on girls, teen females, and women in many working and learning environments. Though more work still needs to be done, sexual harassment is now recognized as a serious issue for women. It is also an issue for males. However, as with any issue pertaining to victimization, males struggle against biased stereotypes and a double standard. Even raising the issue of sexual harassment of males raises eyebrows and draws stares or looks of disbelief.

Unfortunately, when trying to determine the prevalence of sexual harassment toward males, we are faced with the same problem of Canada lagging behind other western democracies. The European Community has produced a 93-page report on sexual harassment entitled, *The Guide*

to Implementing the European Code of Practice on the Dignity of Women and Men at Work. In this report, 19% of German males and 21% of young Frenchmen reported suffering unsolicited sexual advances (Globe & Mail, 1993). Though females are more likely to experience sexual harassment, virtually no research has been undertaken in Canada that documents the prevalence of sexual harassment of males. The issue of sexual harassment among gay males has not even surfaced in the discourse.

One exception is a recently published study concerning high school student-to-student sexual harassment. However, it quickly falls into the trap of biased reporting and interpretation. A brochure promoting the study contains the following paragraph:

“In a recent survey done in Ontario high schools, over 80 per cent of girls said they had been sexually harassed. Boys said their harassment was often complimentary or teasing; few of them said they felt unsafe or that the harassment interfered with their lives, unless their harasser was another male.” (Ontario Second School Teachers’ Federation (OSSTF), 1994)

Most would read this and not give it a second thought. However, what makes this kind of statement worrisome is that it supports biased and harmful stereotypes about males and reinforces a double standard. And, there are other problems.

First, the overall percentage of males reporting being sexually harassed is not given, so it is difficult to compare anything to the 80% figure reported for girls.

Second, when asked, “Are you ever afraid of being sexually harassed?”, approximately 70% of the girls and 30% of the male students said “Yes”.

Between one-quarter and one-third of the males said “Yes,” they were afraid of being sexually harassed. This is hardly a small number. But perhaps more importantly, it gives the authors no defensible position to diminish the seriousness of the issue for boys simply because prevalence of harassment toward girls may be higher.

Third, the authors also make qualitative judgments about the impact on boys without recognizing that male students are less likely to report harassment, more likely to diminish any negative impact, more likely to withhold expressions of fear, and more likely to normalize the experience since males are socialized to value, and view as being positive, “sexual overtures” from females. We need to ask ourselves if we would accept at face value comments of the young women in the study saying that they took their harassment as a compliment or teasing.

The above critique does not diminish the important contribution of the work or the hard efforts of those who are trying to protect students from harassment.

It is also not a diminishment of the fact that girls typically experience more fear, discomfort and emotional consequences from being harassed. The problem is that the authors, in their comments and interpretation of the findings, reinforce harmful stereotypes that will only perpetuate the problem of student-to-student sexual harassment, especially when it involves a male.

Because public awareness of sexual harassment is only just beginning to emerge, it is not uncommon to encounter people who believe that boys cannot be sexually harassed because, as males, they have “power.” While it is true that sexual harassment is about power, a definition of “power” using only political or economic terms is too narrow to apply to the lives of children and teens. It is also too limited if we assume that only males have power by virtue of their gender.

Physical attractiveness, age, popularity and even “personality” can be forms of “social power.” For example, how seriously is a school administrator or a youth’s peers likely to take the complaint of a pimply, skinny or “nerdy” type male who is “rated” or sexually teased and taunted by an attractive and popular female?

What if the male in the above example was younger or a visible minority student whose first language was not English and the female student was Caucasian?

What if the male student was from a strict religious background that viewed any form of “sexual” talk or contact as inappropriate and offensive? From this perspective, sexual harassment can also be an issue of basic human dignity. It can also be about violation of another person’s religious beliefs or cultural norms and values.

Male Prison Rape and Sexual Assault

The most overlooked form of sexual assault in our society happens to males in the form of prison rape. Studies concerning the prevalence of sexual assault never mention this form of sexual violence. In fact, there is no research available that documents the sexual assault of teen and adult males in prisons or closed custody facilities, though it is thought to be a common occurrence. It is easy to dismiss the plight of these males because of their diminished status as “offenders.” It is all too easy to be without compassion for these males until you consider that many are victims and survivors of all forms of childhood abuse and maltreatment.

Physical Abuse, Neglect and Emotional Maltreatment

The sexual abuse of children and youth has dominated much of the research activity, advocacy, and many of the media stories about child abuse published in the past 10 years, despite the fact that it accounts for only about 14% of all forms of indicated or substantiated maltreatment (NCCAN, 1994). In the United States, neglect accounts for 49% of maltreatment cases, physical abuse 23% and emotional maltreatment 5%. Medical neglect 3%, other 9% and unknown 3% constitute the rest. This is particularly significant when one realizes that boys, especially in the younger age categories, tend to be the majority of victims of physical abuse and emotional maltreatment.

In the Ontario Incidence Study of Reported Child Abuse and Neglect, boys were found to be overrepresented in the area of physical abuse. Boys accounted for 59% of investigated cases in the 0 to 3 years of age category, 56% in the 4 to 7 year category, 55% in the 8 to 11 year category, and 44% in the 12 to 15 year category. In the area of emotional maltreatment, boys accounted for 54% of all investigations. The incidence rates were highest for boys 4 to 7 year of age (69%) and lowest for those 8 to 11 (33%). In the area of neglect the numbers are roughly equal, except for children 8-11 where boys represent 55% of cases. This study does not report substantiation rates for males vs. females, which have been found to be much lower for males, especially for cases involving sexual abuse (Powers and Eckenrode, 1988). Rosenthal (1988) found that boys in all age categories received significantly more serious physical injuries than girls, with the most severe occurring in male children under 12.

The Ontario study reports that physical abuse rates were slightly higher for girls in the 12 to 15 year age group (56%) and makes the claim that girls in this age category are generally at higher risk of physical abuse than boys. Similar findings have been reported elsewhere (Johnson and Showers, 1985; Russell and Trainor, 1984; Walker et al., 1988). However, what this interpretation fails to consider is boys are less likely to report, their abuse is less likely to come to the attention of authorities, and boys are more likely to fight back owing to their average greater physical size at this age (Gelles, 1978; Russell and Trainor, 1984).

However, there is evidence to suggest that physical abuse of adolescents of both sexes is underreported (Garbarino, Schellenbech and Sebes, 1986; Powers and Eckenrode, 1988; Farber and Joseph, 1985; Pelcovitz et al., 1984; Libbey and Bybee, 1979).

Sibling-on-Sibling Physical Abuse

As in the case of sexual abuse, sibling-on-sibling violence is a serious problem that is greatly underreported (Steinmetz, 1977). This type of violence is overlooked by parents and rendered invisible by expressions such as “rough-housing,” “sibling rivalry,” or “squabbling.” Boys are sometimes even encouraged to fight to “toughen them up” and get them ready for the “real world.”

Almost all American children are violent toward their brothers and sisters (Straus et al., 1980). In this research, 83% of boys and 74% of girls attacked a brother or sister. Fifty-nine percent of boys and 46% of girls attacked a brother or sister severely.

Although the most overlooked and ignored form of “family violence,” sibling-on-sibling violence is of significant consequence to boys and young men.

According to Straus, sibling violence occurs more frequently than parent-child or husband-wife violence, boys in every age group are more violent toward their siblings than are sisters, and the highest level of violence occurs when a boy has only brothers.

Corporal Punishment

The issue of corporal punishment has just begun to emerge in the child abuse discourse. We are beginning to witness challenges to the appropriateness of certain sections of the Criminal Code that sanction the use of physical force in the discipline or correction of children. The concern is that corporal punishment is part of a continuum with spanking at one end and physical abuse and homicide at the other. It can sometimes be very difficult to assess when a parent or caregiver has crossed the line. However, regardless of whether the force was intended as abuse or discipline or correction, the effect on children is harmful (Yodanis, 1992; Vissing et al., 1991).

Corporal punishment is of particular concern to males. In Canada, 70% of the victims of non-sexual assault under the age of 12 are boys (Statistics Canada, 1991). It is evident that boys are physically hit more often than girls (Bryan and Freed, 1982; Gilmartin, 1979; Knutson and Selner, 1994; Maccoby and Jacklin, 1974; Newson and Newson, 1989; Wauchope and Straus, 1990).

Studies published in the United States show that between 93% and 95% of young adults report being corporally punished during their childhood or teen years (Bryan and Freed, 1982; Graziano and Namaste, 1990). Parent surveys report that approximately 90% of adults use corporal

punishment to discipline and correct the behaviour of their children (Wauchope and Straus, 1990; Straus, 1983).

Community, School and Institution-based Violence

Community and school-based violence among children and adolescents is a topic that has gained prominence in the media and education circles. A recent newspaper story reported that researchers at the University of New Hampshire, using a random sample of children 10 to 16 years of age, found that 1 in 10 boys (10%) in the United States suffered a non-sexual genital assault, usually a kick by someone their own age (Globe & Mail, 1995). The rate for girls was 2%. The researchers in this study also reported that 40% of the perpetrators were girls.

Boys who wore glasses or had other physical limitations were three times more likely to be kicked. One year after the kicking, 1 in 4 boys still suffered depression from the incident.

In 1990, Statistics Canada conducted a study of patterns of criminal victimization. It found that the risk of personal victimization was highest for persons who are male, young, single and residents of urban areas. In a study of approximately 1 000 middle-level students in Ontario, 29% of Grade 6 boys reported being beaten up and 22% robbed while at school compared to 19% and 10% for Grade 6 girls. In this same study, overall, boys and girls were found equally likely to be victims or perpetrators of violent acts (Ryan, Mathews and Banner, 1993). This is not surprising considering that boys and girls up to the age of puberty are roughly the same size. In a Calgary study involving 962 middle and high school students, 47.5% of the males and 26.6% of the females reported being slapped, punched or kicked while in school during the past year (Smith et al., 1995). In Canada, violence toward young males in the form of gay-bashing at school or in the community is another rarely discussed problem.

In the United States, 72% of juvenile homicide victims were male. Forty percent of juvenile homicide victims were killed by family members, mostly parents. Fifty-three percent of boys were killed by their fathers and slightly more than half (51%) of the girls were murdered by their mothers (OJJDP, 1995). Also reported in this study was the fact that Caucasian males comprised 83% of suicides of persons under the age of 20, and that for every two youth aged 0 to 19 who were murdered in the United States in 1991, one youth committed suicide.

Suicide

Canada has one of the highest suicide rates in the Western world. A little under 2% of all deaths in Canada are caused by suicide, and almost four times as many males as females commit suicide annually. Suicide rates for young people have increased remarkably since the 1950s, especially for young males in their late teens and early twenties (Health Canada, 1994). Gay male teens and Native youth are at especially high risk.

Street Youth

In various developing countries, the number of street children is estimated to range between 10 and 100 million, and the vast majority are boys (World Health Organization, 1995). In Canada, males and females on the street appear to be equally at risk for physical violence, with most perpetrators being someone the youth considered a friend or someone else they knew on the street (Janus et al., 1995). In this study, physical abuse was the most frequently given reason why these youth left home. The physical abuse was most often perpetrated by a biological parent, and most often by the mother. In other studies of runaway youth, Powers and Eckenrode (1987) found that 42.3% of males (57.7% of females) were the victims of physical abuse, 37.9% of emotional abuse (62.1% for females) and 47.7% of neglect (52.3% for females). McCormack et al. (1986) found that 73% of female and 38% of male runaways were physically abused.

Prostitution

Sexual abuse is also high among teens involved in prostitution (Mathews, 1989). Thirty percent of juvenile females and 27.4% of juvenile males involved in prostitution reported an incestuous sexual experience. By the age of 13, 62.8% of the females and 77% of the males reported being sexually experienced, compared to general population samples of 1.7% and 5.4% respectively (Badgley, 1984). Of course, these numbers do not reflect the fact that 100% of males and females under the age of 16 who sell sex to adults are being sexually abused by their customers.

Children with Disabilities

Sixty-one percent of children and teens with developmental disabilities, including pervasive developmental disorders and mental retardation, experience harsh forms of physical discipline (Ammerman, 1994). Graham (1993) found that handicapped boys and girls are equally at risk for sexual abuse. Handicapped

male and female adults in institutions are also physically abused in large numbers (Roehrer Institute, 1995; Sobsey and Varnhagen, 1988).

Professional Response to Male Victims as a Factor in Determining Prevalence

One problem with trying to understand the true prevalence rate of male victimization is how the present picture has been affected by factors pertaining to professional practice. Here we have to look at the low substantiation rates of all forms of maltreatment, especially in younger children. Substantiation rates are always higher for adolescent populations, typically because teens are easier to interview and are better able to articulate to investigators what happened to them.

This is even more of an issue for male victims. When boys are victimized, they tend to be seen as less in need of care and support (Watkins and Bentovim, 1992). They are also blamed more for their abuse (Burgess, 1985; Broussard and Wagner, 1988; Whatley and Riggio, 1993) and their offenders are held less accountable (Burgess, 1985). In one of the most troubling studies, Pierce and Pierce (1985) found that male victims, despite being subjected to more invasive types of abuse and more types of sexual acts than female victims, were 5 times less likely to be removed from their homes.

Media Images of Violence Toward Boys and Young Men

Looking past the more conventional forms of research and other types of information about violence and abuse, it is easy to find media images supporting male victimization. Women have long argued for greater accountability on the part of the media to refrain from using harmful, sexist and objectifying images of females in advertising and entertainment. Males are also now beginning to raise their own concerns.

Violence toward males is so normalized in our society that it has become invisible to the average person. So too have the images reinforcing harmful stereotypes about males and masculinity. For example, we expect males to be physically strong and capable or "rough and tumble," thus we ridicule in comics and comedy films the short, skinny or sensitive male. Unfortunately, young men who try to live up to the impossible standards set by bodybuilders are starting to kill themselves through the use of steroids.

Our insensitivity to male victims can be viewed in the depiction of male abuse in popular media images, commercials, comedy films and television programs, and the “funnies” or comic sections in any Canadian newspaper (Mathews, 1994). Watch America’s Funniest Home Videos for a few weeks and you will inevitably see some male being injured in the testicles through a sports activity, boisterous animal, energetic child or some other mishap. A commercial for an American fast food company shows one of the characters from the sitcom *Seinfeld*, being hit in the testicles with a hockey puck.

Widely syndicated comic strips, such as *Fox Trot*, *For Better or Worse* and *Nancy*, portray girls or teen siblings punching, hitting with an object or breaking the glasses of male siblings or classmates. Other comic strips, such as *Beetle Bailey* and *Andy Capp*, routinely feature violent acts toward adult males. A recently released children’s film, “*Tom and Huck*,” portrays one of the boys being punched in the face by the female character *Becky*, a scene played without violence in the original movie and book. Another recent film, the “*Beverly Hillbillies*,” features a young woman named *Elly-Mae* wrestling with a high school male peer and stomping on his testicles. Prison rape, injury to a man’s testicles, sexual abuse of boys by women under the guise of “initiation” and other behaviours, easily identifiable as physical or sexual abuse and assault when they happen to girls or women, are exploited for “humour” so regularly that they have basically become a norm in comedy films and entertainment (Mathews, 1994).

Chapter 2

Perpetrators of Male Victimization

Sexual Abuse

Most of the data that have shaped our view of sexual abuse perpetration have been drawn from case report studies, official crime statistics, police reports and the records of child welfare agencies. Using case report studies, it is evident that the majority of sexual abusers of girls, boys, women and teen girls are heterosexual males (DeJong et al., 1982; Ellerstein and Canavan, 1980; Faller, 1987; Farber et al., 1984; Reinhart, 1987; Showers et al., 1983; Spencer and Dunklee, 1986). Ramsay-Klawnsnik (1990a) found that boys were abused by adult males 33% of the time and by adolescent males 12% of the time. Rates of abuse of males by natural fathers have been reported in 20% of cases by Pierce and Pierce (1985), 7% by Ellerstein and Canavan (1980), 29% by Faller (1989), 14% by Spencer and Dunklee (1986) and 48% by Friedrich et al. (1988).

Stepfathers were found to be the abuser in 28% of cases (Pierce and Pierce, 1985). Although, there are no studies of same-sex sexual assault or “date rape” among teen gay males, evidence from a study of adult gay males suggests that other gay or bisexual males may represent the majority of perpetrators (Mezey and King, 1989; Waterman, Dawson and Bologna, 1989).

Teen Perpetrators

Abuse of males by adolescent perpetrators is well documented in the literature. Rogers and Terry (1984) found that 56% of male victims were abused by teen males compared to 28% for females. Longo and Groth (1983) found that 19% of the sibling incest offenders were female. Others have also documented high rates of abuse of males by adolescents (Ellerstein and Canavan, 1980; Showers et al., 1983; Spencer and Dunklee, 1986). Longo and Groth (1983) found in their study that adolescent sex offenders (81% of whom were male, 19% female) abused brothers in 16% of cases and 5% of cases respectively. In most cases of sibling incest, the victim was younger than the perpetrator (Pierce and Pierce, 1987). Sibling incest perpetrators often have low self-esteem, deep-seated feelings of inadequacy and emptiness, and are isolated, immature loners who prefer the company of younger children (Groth and Laredo, 1981; Shoor et al., 1966).

Strangers vs. Acquaintances

Boys appear more likely than girls to be abused by multiple perpetrators (Faller, 1989; Finkelhor and Hotaling, 1984; Rogers and Terry, 1984). Some research reports that boys are more likely to be abused by strangers (Finkelhor, 1979; Rogers and Terry, 1984). Faller (1989) reports that teachers, day-care providers, boy scout leaders and camp staff accounted for 24% of abuse of males. Risin and Koss (1987) report that family members were abusers in 22% of cases, strangers in 15% of cases, babysitters in 23% of cases, neighbours, teachers or friends of the family in 25% of cases, friends of siblings in 9% of cases, and peers in just under 6% of cases. However, overall, it appears that boys, like girls, are more likely to be abused by someone they know (Faller, 1989; Farber et al., 1984; Fromuth and Burkhart, 1987, 1989; Risin and Koss, 1987; Rogers and Terry, 1984; Showers et al., 1983; Spencer and Dunklee, 1986).

Findings from research on intrafamilial abuse of boys vary, with rates ranging from 20% to a high of almost 90% (Pierce and Pierce, 1985; Finkelhor et al., 1990).

Some report that the majority of sexual abuse experiences for boys are extrafamilial (Farber et al., 1984; Risin and Koss, 1987; Showers et al., 1983). However, overall, it does appear that boys are more likely than girls to be abused outside the family and by non-family members.

Female Perpetrators

As recently as 10 years ago, it was a common assumption that females did not or could not sexually abuse children or youth. Even some professionals working in the field believed that women represented only about 1% to 3% of sexual abusers at most. However, mounting research evidence about sexual abuse perpetration at the hands of teen and adult females has begun to challenge our assumptions, though these earlier and dated views still tend to predominate.

The percentage of women and teenage girl perpetrators recorded in case report studies is small and ranges from 3% to 10% (Kendall-Tackett and Simon, 1987; McCarty, 1986; Schultz and Jones, 1983; Wasserman and Kappel, 1985). When the victim is male, female perpetrators account for 1% to 24% of abusers. When the victim is female, female perpetrators account for 6% to 17% of abusers (American Humane Association, 1981; Finkelhor and Russell, 1984; Finkelhor et al., 1990). In the Ontario Incidence Study, 10% of sexual abuse investigations involved female perpetrators (Trocme, 1994). However, in six studies reviewed by Russell and Finkelhor, female perpetrators accounted for 25% or more of abusers. Ramsay-Klawnsnik (1990) found that adult females were abusers of males 37% of the time and female adolescents 19% of the time. Both of these rates are higher than the same study reported for adult and teen male abusers.

Dynamics of Female-Perpetrated Abuse

Some research has reported that female perpetrators commit fewer and less intrusive acts of sexual abuse compared to males. While male perpetrators are more likely to engage in anal intercourse and to have the victim engage in oral-genital contact, females tend to use more foreign objects as part of the abusive act (Kaufman et al., 1995). This study also reported that differences were not found in the frequency of vaginal intercourse, fondling by the victim or abuser, genital body contact without penetration or oral contact by the abuser.

Females may be more likely to use verbal coercion than physical force. The most commonly reported types of abuse by female perpetrators include vaginal intercourse, oral sex, fondling and group sex (Faller, 1987; Hunter et al., 1993). However, women also engage in mutual masturbation, oral, anal and genital sex acts, show children pornography and play sex games (Johnson, 1989; Knopp and Lackey, 1987). The research suggests that, overall, female and male perpetrators commit many of the same acts and follow many of the same patterns of abuse against their victims. They also do not tend to differ significantly in terms of their relationship to the victim (most are relatives) or the location of the abuse (Allen, 1990; Kaufman et al., 1995).

It is interesting to note in the study by Kaufman et al. (1995) that 8% of the female perpetrators were teachers and 23% were babysitters, compared to male perpetrators who were 0% and 8% respectively. Finkelhor et al. (1988) also report significantly higher rates of sexual abuse of children by females in day-care settings. Of course, Finkelhor's findings should not surprise us given that women represent the majority of day-care employees.

Research on teen and adult female sexual abuse perpetrators has found that many suffer from low self-esteem, antisocial behaviour, poor social and anger management skills, fear of rejection, passivity, promiscuity, mental health problems, post-traumatic stress disorder and mood disorders (Hunter et al., 1993; Mathews, Matthews and Speltz, 1989). However, as in the case of male perpetrators, research does not substantiate that highly emotionally disturbed or psychotic individuals predominate among the larger population of female sexual abusers (Faller, 1987).

There is some evidence that females are more likely to be involved with co-abusers, typically a male, though studies report a range from 25% to 77% (Faller, 1987; Kaufman et al., 1995; McCarty, 1986). However, Mayer (1992), in a review of data on 17 adolescent female sex offenders, found that only 2 were involved with male co-perpetrators. She also found that the young women in this study knew their victims and that none experienced legal consequences for their actions.

Self-report studies provide a very different view of sexual abuse perpetration and substantially increase the number of female perpetrators. In a retrospective study of male victims, 60% reported being abused by females (Johnson and Shrier, 1987).

The same rate was found in a sample of college students (Fritz et al., 1981). In other studies of male university and college students, rates of female perpetration were found at levels as high as 72% to 82% (Fromuth and Burkhart, 1987, 1989; Seidner and Calhoun, 1984). Bell et al. (1981) found that 27% of males were abused by females. In some of these types of studies, females represent as much as 50% of sexual abusers (Risin and Koss, 1987). Knopp and Lackey (1987) found that 51% of victims of female sexual abusers were male. It is evident that case report and self-report studies yield very different types of data about prevalence. These extraordinary differences tell us

we need to start questioning all of our assumptions about perpetrators and victims of child maltreatment.

Finally, there is an alarmingly high rate of sexual abuse by females in the backgrounds of rapists, sex offenders and sexually aggressive men - 59% (Petrovich and Templer, 1984), 66% (Groth, 1979) and 80% (Briere and Smiljanich, 1993). A strong case for the need to identify female perpetrators can be found in Table 4, which presents the findings from a study of adolescent sex offenders by O'Brien (1989). Male adolescent sex offenders abused by "females only" chose female victims almost exclusively.

Table 4
Victim Gender Based on Who Previously Abused the Perpetrator

Gender of Perpetrators' Own Victimizer	Gender of Victim Male or Both %	Female Only %
Male only	67.5	32.5
Female only	6.7	93.3

Berkowitz (1993), in a Winnipeg-based study of sexually abused males in treatment groups, found the following rates of perpetration.

Table 5
Gender of Abusers of Male Victims in Treatment Groups

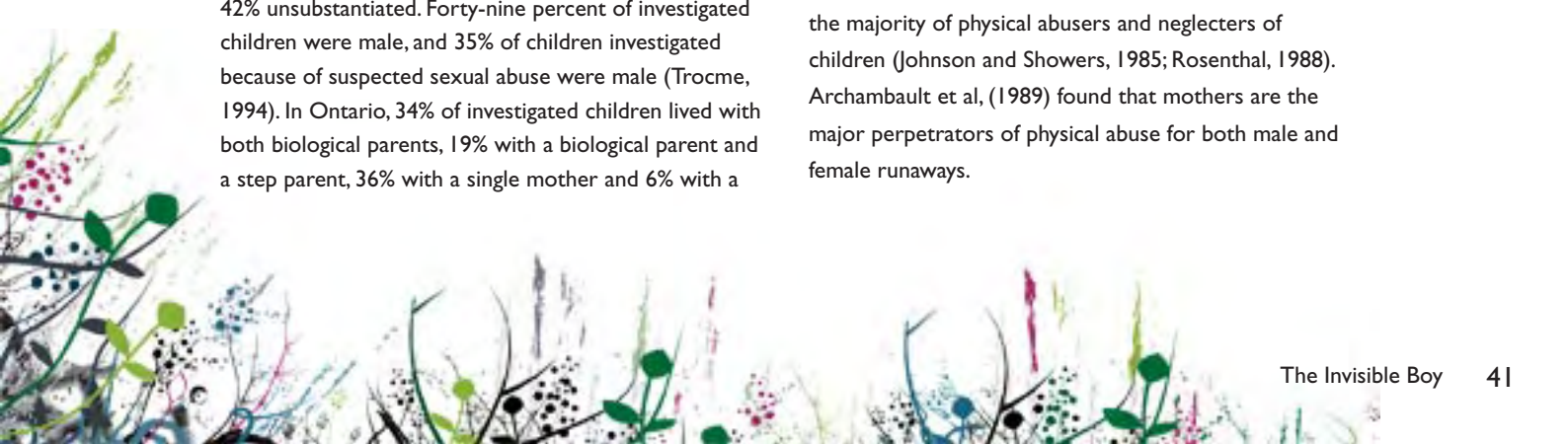
Gender of Abusers	N	%
Intrafamilial Abuse (N=54)		
Male perpetrated	54	100.0
Female perpetrated	39	72.2
Extrafamilial Abuse (N=55)		
Male adult	50	90.9
Female adult	30	54.5
Male adolescent	39	70.9
Female adolescent	24	43.6

Physical Abuse and Neglect

In the Ontario Incidence Study, 41% of investigations of child maltreatment were for physical abuse, compared to 24% for sexual abuse, 30% for neglect, 10% for emotional maltreatment and 2% for other forms of maltreatment. There were two or more forms of suspected maltreatment in 12% of investigations. In 27% of the cases, maltreatment was substantiated, 30% suspected and 42% unsubstantiated. Forty-nine percent of investigated children were male, and 35% of children investigated because of suspected sexual abuse were male (Trocmé, 1994). In Ontario, 34% of investigated children lived with both biological parents, 19% with a biological parent and a step parent, 36% with a single mother and 6% with a

single father. Social assistance was the primary source of income for 38% of children investigated. At least 17% lived in subsidized housing.

In the United States, figures provided by the American Association for the Protection of Children (1985) reveal that most physical abuse and most minor and major injuries of children are perpetrated by women. Other research evidence indicates that mothers represent the majority of physical abusers and neglecters of children (Johnson and Showers, 1985; Rosenthal, 1988). Archambault et al, (1989) found that mothers are the major perpetrators of physical abuse for both male and female runaways.



It is evident that much of the physical abuse and neglect of children occurs in single mother-led families living in high-stress environments. Stressed to the limit, these mothers take out their frustrations on their children. Some of these mothers are also victims of spousal violence, child abuse or suffer from a number of current and chronic life stressors. Because mothers typically are the primary caregivers of children and spend more time with them, it makes sense that they would show up in larger numbers in the statistics on child physical abuse and neglect.

Although females account for more of the physical abuse and neglect of children, there is some evidence that males inflict more serious injuries on their victims, particularly male victims (Rosenthal, 1988). Fathers are also 2 times more likely than mothers to be the perpetrator in cases involving child fatalities (Jason and Anderek, 1983). In other studies, no sex differences, in terms of severity of abuse or child fatalities in two-parent families, were found (Gelles, 1989; Greenland, 1987). However, because women still tend to be the primary caregivers to children, the emotional impact of mother-perpetrated abuse, regardless of the form, may be greater on children than a father's abuse. The greater physical harm caused to children by fathers is likely attributable to the greater physical strength of males generally, but also to the disinhibiting effects of alcohol and, to a lesser extent drugs, which factor prominently in parental abuse of children and youth (Cavaiola and Schiff, 1988). For all forms of child maltreatment, parent risk factors, such as alcohol abuse, drug abuse, mental health problems and inter-parental violence, show up as risk factors, but especially for physical abuse and neglect (Trocme, 1995).

When the abuse starts is likely to have some impact on its course, duration and consequences, though there is still insufficient research to map a predictable developmental path and sequelae. In general, abuse can follow one of three paths: abuse that begins in childhood and ends when the child reaches adolescence; begins in childhood and continues through adolescence; or begins in adolescence (Lourie, 1979). The duration can range from 1 month to over 15 years. The average duration is approximately 5 years (Farber and Joseph, 1985).

Corporal Punishment

Much of the use of corporal punishment by parents, teachers, day-care providers or various institution-based professionals goes unnoticed, or is not labelled as being abusive, because it is viewed as an acceptable function for an adult in the role of parent, locus parentis or caregiver. This is due, in part, to widespread cultural norms in North American society sanctioning the use of force in the correction and discipline of children and youth,

and a "just world" view that children who misbehave, are difficult to control or anger adults deserve to get a spanking. But it is also because much of this form of maltreatment does not come to the attention of authorities unless it is severe. As in the case of inter-spouse abuse, we have historically viewed incidents of violence within families as a "domestic" concern or a private family matter, though significant strides have been made to improve this situation in Canada. However, we have not yet begun to accord children the same type of compassion and concern we are beginning to give female spouses.

Almost all American parents endorse the use of corporal punishment and use it routinely on infants, older children and teens alike, though usage tends to decrease the older the child gets. However, more corporal punishment appears to be directed at boys than girls. More males report being hit by parents and more parents report hitting sons than daughters (Straus, 1994). In this same study, sons recall being equally likely to be hit by both parents, whereas adolescent daughters are a third more likely to be hit by their mothers. The most chronic pattern of hitting, in terms of frequency, is mothers hitting adolescent sons, the lowest is for fathers hitting daughters. Two thirds of mothers with toddlers hit them three or more times per week. Other studies have also found higher rates of mothers hitting adolescent children (Wauchope and Straus, 1990).

When an adolescent is hit, both parents usually do it, especially if the child is a boy. When a son is hit, fathers do it 23% of the time, mothers 23%, and both parents 53%. When a daughter is hit, fathers do it 20% of the time, mothers 39%, and both parents 41%. The highest rate of hitting teens occurs in middle-class families (Straus, 1994).

Several theories summarized by Straus (1994) offer some explanation of why boys are hit and punished more often than girls: they misbehave more; boys are encouraged to be more active which may subtly encourage misbehaviour; it is part of training boys for anticipated adult male roles of provider/protector; and it is used to toughen boys up. The gender of the parent administering corporal punishment is also likely to influence our perceptions. Because of our stereotypes of women as nurturers or "natural" caregivers, we are less likely to attribute malicious intent to mothers or other females. Instead, we tend to view women's use of physical abuse or corporal punishment as a sign of stress. We are also likely to overlook, or give only passing concern to, cases where a female caregiver uses physical force or corporal punishment toward an older male child or teen. However, theories that explain mothers' use of violence toward children and teens solely in terms of stress, fail to acknowledge and factor in these gender-specific issues of particular consequence to male victims.

It is generally believed that parental stress owing to conditions of poverty or low socioeconomic status (SES) contributes to children being “at risk.” However, the research is inconclusive. Erlanger’s review of the literature on corporal punishment reported no remarkable relationship between use of corporal punishment and socioeconomic status. Others have found higher rates for lower-income families (Bryan and Freed, 1982; Stark and McEvoy, 1970). One study found that corporal punishment rates are highest for middle-class families (Straus, 1994). This same study also found that while fewer lower-SES adolescent parents may hit their children, those that do hit do it more often.

Personal beliefs, life experience, attribution and social learning all appear to play a role in predicting the use of corporal punishment. Parents who believe hitting a child is not abuse and that it works to correct misbehaviour, attribute the child’s misbehaviour to premeditation or provocation, attribute the behaviour to internal characteristics of the child that are within their control, observe their partner administer force, or who feel powerless in the face of the misbehaviour are most likely to use corporal punishment or physically abuse their children (Bugental, et al., 1989; Dibble and Straus, 1990; Dietrich et al., 1990; Dix and Grusec, 1985; Fry, 1993; Institute for the Prevention of Child Abuse, 1990; Walters, 1991). The more parents believe in the use of corporal punishment, the more likely they are to use it, and the more likely they are to apply it harshly (Moore and Straus, 1987).

Chapter 3

Effects of Victimization on Males

Most of the literature on the impact of abuse has been written about female victims and thus tends to reflect a female-centred perspective. There has become, in Fran Sepler’s words, a “feminization of victimization” (1990). That is not to say that this literature cannot be applied to male victims. There are likely more similarities than differences between male and female victims.

Questions typically surface in discussions about victimization concerning which gender suffers the greatest impact from abuse. Watkins and Bentovim (1992) in a review of the literature were unable to find clear evidence that either males or female victims are harmed more by their victimization experiences. However, the question itself is self-defeating given the wide range of peoples’ resilience and ability to cope, personal resources, the availability of social supports and individual differences, to name only a few.

One problem that arises when trying to assess the impact of abuse of either gender is separating out which consequences are immediate or short-term reactions from those that are likely to be enduring. Another problem is the difficulty of assessing impact for children and youth who have experienced two or more types of maltreatment. Individuals, family environments, developmental and cultural contexts also differ widely, as do things such as previous levels of mental and physical health or intellectual or cognitive functioning. Further complicating the matter is that most of the recent research on impact has been conducted on sexual abuse victims and survivors. Consequently, it is difficult to make generalized statements about impact that apply to all victims, even of similar types of abuse.

Sexual Abuse

Numerous factors have been cited as contributing to an enduring or harmful outcome: duration and frequency of abuse, penetration, use of force, abuse by family members or other closely related person, lack of support following disclosure, pressure to recant, multiple other problems in the family, and younger age (Browne and Finkelhor, 1986; Conte and Schuerman, 1987; Finkelhor, 1979; Friedrich et al., 1986; Russell and Finkelhor, 1984; Tsai et al., 1979). For males, the added dimension of not being able to disclose their abuse for fear of being labelled “gay,” a weakling or a liar may amplify the effects of these other factors. Even when males do disclose, few supports and services are available and few professionals possess the skills and knowledge necessary to work effectively with male victims.

It is widely assumed that males are more likely than females to “act out” in response to their abuse. They develop social problem behaviours such as sex offending, assault, conduct disorder or delinquency, and appear to be more inclined to engage in health-damaging behaviours such as smoking, drug abuse, running away or school problems leading to suspension (Bolton, 1989; Friedrich et al., 1988; Kohan et al., 1987; Rogers and Terry, 1984).

Females are thought, generally, to internalize their response and “act in” or develop more emotional problems, mood and somatic disorders, resort to self-harming behaviours and become vulnerable to further victimization. Although there is some merit to this perspective, it does apply gender role stereotypes, and is not consistent with current research on the impact of abuse on males. Males, generally, may be just as likely to experience depression as females, they just are not given much permission to express it. Males are expected to be stoic and to just “snap out of it.”

Males generally do not discuss their feelings or go to therapists for help so they are not likely to show up in the statistics on depression. Because boys have little permission to discuss their feelings, depression in males may be masked as bravado, aggression or a need to “act out” in order to overcompensate for feelings of powerlessness. Depressed male victims are also likely to be hiding in the statistics on suicide, addictions and unexplained motor vehicle fatalities. If males are indeed more likely to engage in acting out behaviours, it may simply be the result of us not allowing them to be vulnerable or to be victims.

However, the literature does provide overwhelming evidence of emotional disturbance in male victims. Anxiety, low self-esteem, guilt and shame, strong fear reactions, depression, post-traumatic stress disorder, withdrawal and isolation, flashbacks, multiple personality disorder, emotional numbing, anger and aggressiveness, hyper-vigilance, passivity and an anxious need to please others have all been documented (Adams-Tucker, 1981; Blanchard, 1986; Briere, 1989; Briere et al., 1988; Burgess et al., 1981; Conte and Schuerman, 1987; Rogers and Terry, 1984; Sebold, 1987; Summit, 1983; Vander Mey, 1988). Compared to non-abused men, adult male survivors of sexual abuse experience a greater degree of psychiatric problems, such as depression, anxiety, dissociation, suicidality and sleep disturbance (Briere et al., 1988).

Childhood sexual abuse has been found in the backgrounds of large numbers of men incarcerated in federal prisons (Diamond and Phelps, 1990; Spatz-Widom, 1989; Condy et al., 1987). Because males are more likely to be physically and sexually abused concurrently, they may be more conditioned to see sex, violence and aggression as inseparable. This may provide us with clues to explain why male victims appear to sexually abuse or assault others more often than females, why their anger and frustration may be more other-directed than girls, why boys appear to develop a stronger external locus of control, and why they appear to possess a diminished sensitivity to the impact of the abuse on their victims.

However, sexual offending is just one possible consequence for male victims. Most do not become sex offenders (Becker, 1988; Condy et al., 1987; Freeman-Longo, 1986; Friedrich et al., 1987; Friedrich and Luecke, 1988; Groth, 1977; Kohan et al., 1987; Petrovich and Templer, 1984). Some males become “sexualized” resulting in increased masturbation or preoccupation with sexual thoughts or use of sexual language. Others develop fetishes (Friedrich et al., 1987; Kohan et al., 1987).

Male victims experience a number of physical symptoms similar to females. Common problems are sleep disturbances, eating disorders, self-mutilation, engaging in unsafe sexual practices, nightmares, agoraphobia, enuresis and encopresis, elevated anxiety and phobias (Adams-Tucker, 1981; Burgess et al., 1981; Dixon et al., 1978; Hunter, 1990; Langsley et al., 1968; Spencer and Dunklee, 1986). Male victims also experience psychosomatic health problems normally associated with experiencing high levels of chronic long-term stress, receive sexually transmitted diseases, and become injured through rough touching, penetration or object insertion or, in extreme cases, are killed. In preschool boys and male infants, failure to thrive, early and compulsive masturbation, hyperactivity, sexual behaviour with pets, sexual touching of other children that re-enacts the abuse and regression in speech or language skills have been found (Hewitt, 1990).

Being sexually abused can leave a young male with an inability to set personal boundaries, a sense of hopelessness and a proclivity to engage in many types of careless or self-destructive behaviours, such as unprotected sex with high-risk partners. It is thus no surprise to find that sexual abuse was also found in 42% of persons with HIV infection (Allers and Benjack, 1991; Allers et al., 1993).

Johnson and Shrier (1987) found that males molested by males were more likely than those molested by females to view themselves as being “gay,” a devalued status in North American society. In this same study, female-victimized males reported the impact of the abuse to be more severe, possibly as a consequence of experiencing a reversal of stereotyped gender roles which placed the female in the more powerful role.

One of the reasons why a male might be more affected by sexual abuse is that it calls into question his whole sexual and personal identity “as a man.” When a male is victimized, he is more likely to experience confusion about sexual identity (Johnson and Shrier, 1987; Rogers and Terry, 1984; Sebold, 1987). Male anatomy may play a key role in forming this perception. Because male genitalia is external, arousal to direct stimulation is more obvious. Obtaining an erection, experiencing pleasurable sensations or having an orgasm is, to the male victim, physical “evidence” that he is homosexual. It also reinforces the male victim’s mistaken belief that he was responsible in some way because he “obviously” enjoyed it. Contrary to popular belief, a male can have an erection and achieve orgasm even when fearful.

Many male victims experience difficulties in intimate relationships as a result of being abused. They have few, if any, close friends, are promiscuous, have difficulty maintaining fidelity with partners, form few secure attachments and often become involved in short-term, abusive and dysfunctional relationships. Many experience few emotionally or physically satisfying sexual relationships and sometimes avoid sex altogether. Others become sexual compulsives, develop sexual dysfunctions or engage in prostitution (Coombs, 1974; Dimock, 1988; Fromuth and Burkhart, 1989; Johnson and Shrier, 1987; Krug, 1989; Lew, 1986; Sarrel and Masters, 1982; Steele and Alexander, 1981; Urquiza, 1993).

Physical Abuse, Corporal Punishment and Neglect

There appears to be some truth to the notion that violence begets violence. Children with a history of physical abuse and corporal punishment are more aggressive, possess fewer internal controls for their behaviour, have higher rates of involvement in crime and violence as adults, and are more likely to abuse siblings or attack parents (Bandura and Walters, 1959; Bryan and Freed, 1982; Eron, 1982; Hirschi, 1969; Sears et al., 1957; Straus et al., 1980; Welsh, 1978; Widom, 1989). Men and women who were physically punished are also more likely to abuse their partners or spouses (Straus, 1991). The highest predictors of involvement in crime and delinquency are: being hit once per week or more at 11 years of age and having a mother, at that age, with strong beliefs in, and a commitment to, corporal punishment (Newson and Newson, 1990).

There is some evidence to suggest that adults hit as adolescents are more likely to develop depression or engage in suicidal ideation than those who are not hit, regardless of sex, socioeconomic status, drinking problems, marital violence or whether children witnessed violence between their parents. In fact, the more one is hit the greater the likelihood that depression will be a consequence (Straus, 1994).

Straus suggests four consequences of corporal punishment. At the immediate level, it leads to escalation, where a resistant child forces the parent to use increasing amounts of force which could cause serious injury. At the developmental level, the more corporal punishment

is used, the more it will have to be used because the child will be less likely to develop internalized controls for behaviour. At the macro-cultural level, corporal punishment creates a society that approves of violence to correct wrongdoing. At the inter-generational level, it increases the chance that when the child is an adult he or she will approve of interpersonal violence, be in a violent marriage and be depressed.

Assessing the impact of neglect is difficult, since its effects are likely to be inseparable from problems related to living in a dangerous or high-stress home environment, living in an unsafe neighbourhood or community, living in poverty, poor parental skills, parental mental health problems, parental criminality or substance abuse or addiction, and inter-parental violence. Here, the effects are likely similar for male and female victims. Health problems related to non-organic failure to thrive, dental caries, malnutrition, anemia and low levels of immunity protection could also be expected.

The Consequences of “Male Sexual Licence”

Males, generally, have more permission to be sexual persons in our society. A double standard of morality has been applied to males and female for centuries. The fact that there are no “positive” or flattering terms such as “sowing his wild oats,” “boys will be boys” or “ladies man” for females gives vivid illustration to this point. It is generally assumed that having “licence” to be a sexual person is an advantage. Males are seen to get power from obtaining or taking sex, women from withholding sex.

However, sexual licence has serious consequences for male victims. It increases a boy’s susceptibility to sexual abuse by promoting or encouraging participation in sexual activities. It promotes secrecy because boys are afraid to report sexual experiences that go wrong for fear they are responsible and blameworthy. It affects our perceptions as professional caregivers, encourages victim blaming and supports minimization of the impact on victims of male-on-male sexual assault or female-perpetrated sexual assault. It causes males to expect female sexual contact. It promotes risk-taking sexual behaviour and creates expectations for males that they must be the initiators of sex and have sexual knowledge and experience.

Chapter 4

Implications

Implications for Research

As one might expect from any new field, the literature regarding male victimization lacks cohesion, particularly in the area of sexual abuse. Samples are wide ranging. Some studies provide no definition of sexual abuse. Some include only hands-on offences. Some apply a definition of abuse only when the age difference between the victim and the perpetrator is five or more years. Some count perpetrators only if they are adults or at least 16 years of age. This would exclude, for example, the sexual abuse of a 10 or 11-year-old boy by a 15-year-old male or female teen. Some subjects were excluded if the male victim admitted to “wanting” or agreed to the sexual activity.

There are still many definitional/conceptual problems in the discourse with respect to what constitutes sexual abuse toward boys and young men. Although definitions of abuse may be spelled out clearly in the law, many of us struggle to see sexual abuse when there is pressured sex between teen male peers; teen girls or adult females expose themselves to boys; adult females use the services of teen males working in prostitution; when women engage in sexualized talk with boys or teen males; or when an adult male or female shows pornography to a boy or teen male. Even if there is agreement about some of these categories when young boys are involved, once a male reaches his teen years, our perceptions readily begin to reflect a double standard.

Imprecision and bias in the selection of research questions greatly affects the findings of studies. For example, terms such as sexual “contact” and sexual “abuse” mean very different things to males who are socialized to expect and enjoy all sexual interactions with females. That is why studies that broaden their definition of sexual abuse and ask males about “sexual experiences” with older teen and adult females yield higher prevalence rates for female offenders. Lower-prevalence-yielding case-report types of studies have shaped most of the professional discourse on child abuse and created an impression of male victimization in the public mind that is largely false and misleading. Applying a double standard when interpreting findings has also affected our perceptions about impact on male victims. It is not uncommon in studies of males abused by females to find claims that they did not see the sexual contact as “abuse” and viewed it as a neutral or positive experience. Anyone reading these studies who accepted these accounts at

face value could be led to the erroneous assumption that there was, in reality, no actual negative or harmful impact. When making this assumption, we forget that males are socialized to minimize the impact of being victimized, especially if the abuser was a female, and often hide their fear or discomfort behind “macho posturing.”

Accepting these self-assessments at face value reinforces stereotypes about males that have unintended consequences for males and females. They maintain a harmful double standard prevalent in the child abuse field. They give a message that male victims can “take it.” They suggest females are not sex offenders but instead “gentle seducers.” They encourage some female sex abusers to deny by supporting a view of themselves as teachers/initiators of sex for their male victims. They support the stereotype that boys are “seduced,” while girls are “raped” or sexually assaulted. They can affect the attitudes, beliefs and behaviours of police officers, physicians, hospital staff, child welfare authorities or anyone else who examines victims for impact or conducts investigations of incidents involving female abusers and male victims. They can cause these same persons to look only at physical injuries to male victims and overlook or minimize their emotional responses. They suggest that, but for our socialization of males and females, girls would be giving the same kinds of “positive” or “neutral” responses. This is most definitely a message we do not want to be sending to anyone about children or youth.

We owe it to ourselves and to male victims to ask more probing research questions. For example, if we reframed the experience for these male victims and invited them to consider the differences in power between themselves as children and their adult or teen abusers, to search for feelings of confusion or anxiety before, during or after the sexual contact, and to examine in their adult life the quality or quantity of their intimate and sexual relationships, would they be more likely to respond differently? Would we accept without question from a female victim her assessment that her “sexual contact” with a teen or adult male was not sexual abuse or was just part of her learning about sex? Unlikely. We have to ask ourselves why we simply accept this response from males.

The double standard prevalent in the field of child abuse has created a most unfortunate situation for boys and young men. Female abusers must do something severe and obvious before they will be held accountable as perpetrators. Males must be abused in more severe and obvious ways before we will take them seriously as victims.

Serious gaps also exist in the literature. There has been an extraordinary focus on sexual abuse that, relative to the prevalence of other forms of abuse, is out of proportion. It is time for us to focus more time, attention and resources on the study of physical abuse, including corporal punishment, neglect and emotional maltreatment of children. Male victims represent a majority of the victims in these other types of abuse cases.

We also need to investigate the particular needs of visible, cultural and sexual minority male victims. The impact of victimization on a boy or young man, along with our response to his needs and issues, can be greatly affected by his membership in one or more of these categories.

Finally, we have to restore some equity in the allocation of resources spent on research and public education in the area of child abuse and interpersonal violence. Single-gender studies focusing on women's concerns predominate. While this has been an important and worthwhile investment of our resources, a single-gender focus on public education and advocacy is impeding the development of a more inclusive and comprehensive picture of interpersonal violence in Canada. Until we possess a better understanding of male victims' issues, we will continue to fall far behind other Western democracies and compromise the vision of achieving real gender equality.

Implications For Assessment, Treatment, & Program Development

It is generally assumed that approaches to working with female victims will also work with males. Although there is merit in this belief, our current and predominantly female-centred models of victimization fall short in several important areas and may actually be harmful if carelessly applied to male victims.

The silence, denial and resistance that surrounds the issue of child abuse is particularly problematic for males. Because knowledge about male victimization is very limited in the public mind, featured rarely in media stories and under-researched, victims need to know from the outset that they are not the first or only male who has been abused or harmed. Making sure a male victim understands the prevalence of male victimization can be of significant help in ending the sense of isolation and self-loathing that accompanies a common perception that "I am the only one" or "I do not measure up."

Learning to trust a therapist and even one's own thoughts, feelings and perceptions after having been victimized is a major issue for all survivors. Opening up to a therapist

can be an extraordinary challenge for male victims who must also cross a barrier with respect to gender-role socialization that instructs males to be stoic and silent, prevents them from wanting to appear vulnerable and encourages them to be self-reliant. The skill and knowledge of the therapist, and experience working with male victims, is of paramount importance in facilitating the development of trust in male victims and getting them past these obstacles. Being able to identify for male victims our gender "blindspots" that end up causing or exacerbating many of their problems will help them build confidence and ultimately greater trust in us.

Therapists working with male victims need to have a thorough knowledge of human development across the lifespan. For example, many of the effects of being abused as a boy do not surface until later years. Understanding how abuse can affect childhood development and what the potential sequelae might be, therapists can be more effective guides for a male victim and an important resource for his caregivers, intimate partners or other persons who are supporting him in his healing work.

Conducting a thorough and comprehensive assessment is imperative when working with male victims. Older boys, and teen and young adult males, often find recollections of sexual abuse experiences fragmented or dream-like. Some of this may be related to the age at which the abuse occurred, the fact that the abuse was well "disguised" in otherwise typical child/adult interactions, or seamlessly blended into everyday interactions in a home "environment" that was sexualized. The permission given to males in their socialization to be sexual persons can also confuse memories and distort interpretations of the experience. Sexual abuse often leaves male victims with a traumatized sexuality that can be internalized or interpreted as being a normal "male" sexual response pattern.

Because males are socialized to take charge, be responsible and take care of themselves, physical abuse and corporal punishment can be interpreted as "deserved" and internalized in a negative self-concept that supports self-blame. It can also support the internalization of anger in the form of drug and alcohol abuse, excessive risk taking, suicide and reckless attempts to reassert a distorted sense of one's own masculinity. All these gender-role-related issues need to be unpacked for male victims.

Another area of special significance to males is in the use of language-intensive and insight-based types of interventions. Boys tend to lag girls in the acquisition and use of language skills (Maccoby and Jacklin, 1974).

Some of this may be related to different patterns of brain development or maturation in males and females. The literature on high-risk violent and aggressive male youth, many of whom are victims, is rich with documentation concerning the predominance of language deficits and other learning difficulties. This lag in language development may be one more reason why boys are less likely than girls to disclose their abuse.

However, rarely discussed is the fact that a lag in language development, or even language deficits, may also be based on differential socialization, family and environmental factors, or abuse and neglect issues. Males, generally, are not encouraged to talk about their feelings or personal thoughts. Consequently, few boys and teen males have much experience exploring or expressing inner states of mind and emotion. They are generally more “action” oriented and thus inclined to dismiss a long process of searching for insight in the interest of just “getting on with life.” Using exclusively language-intensive and insight-based types of interventions can push a male victim into a process of therapeutic or healing work that will make him uncomfortable because he is neither able nor prepared to deal with it.

The language of therapy is typically a language about feelings which creates problems for some male victims. Male victims typically struggle with expressions of feeling. This should not be interpreted as a confirmation of biased stereotypes about males as having no feelings or lower levels of “emotional literacy” than females. Males experience the same emotions as females, they are just less likely to be differentiated and articulated. For example, feelings of shame, guilt, humiliation, anxiety, sadness and rage can become bundled together in the form of anger. Since anger is the only “legitimate” feeling they can express, they, and we, often mistake what we are seeing when a male victim expresses anger. Some males are afraid to express any anger at all because of the potential tempest of uncontrollable and jumbled feelings they fear will be unleashed. Some are afraid to express anger because they associate it with violence. Therapists, unaware of these complexities, may invite a male victim to express his anger and end up scaring him off counselling. Conversely, suggestions to a male that he needs to learn techniques to “control” or “manage” his anger can convey a message that it is a “pathology” in need of correction and that his underlying pain and confusion are not legitimate.

That is why it is so important to identify toxic versus righteous anger for male victims. Toxic anger is a maladaptive, unacknowledged, repressed or misdirected

rage reaction that can harm male victims and their relationships with others. Righteous anger has the potential to be empowering once it is understood as a normal and healthy response to the harmful restrictions of male gender roles, to being abused and to a biased, unwelcoming and silencing social environment males face when they attempt to disclose their victimization.

“We need to counsel boys and young men that “masculinity” is a social construction that is malleable.”

Some male victims become intensely “homophobic,” their anger emerging from self-perceptions and doubts about their “masculinity” or about possibly being “gay.” It is important to help male victims understand that being abused does not “cause” someone to become gay or bisexual. Helping males to understand that this anger stems from a perceived threat to personal beliefs about their “masculinity” and a cultural context that supports anti-gay prejudice is also important. If we were a gay-positive society, it would be less likely for these homophobic feelings and perceptions to arise. We need to counsel boys and young men that “masculinity” is a social construction that is malleable. Many male victims suffer under the tyranny of a narrowly defined sense of what it means to be a “man.” They need help, support, and encouragement to learn to be themselves, outside of rigid gender-role proscriptions.

Some male victims express no emotions like anger at all but become withdrawn, isolated and depressed. Many males hide their emotions in work-a-holism, perfectionism and over-achieving. All these behaviours can be highly resistant to change, considering that they have the effect of deflecting painful feelings and bring monetary rewards, prestige or social status.

Although abuse of power is the fundamental dynamic behind all forms of victimization, many male victims do not report feeling powerless and do not see themselves as “victims.” While it is important to respect these victims’ points of view, we cannot appear to condone the perpetrator’s behaviour or fail to communicate the legal, moral and ethical issues involved in the abuse of boys or young men by older persons. Being older, larger in physical size, more attractive, wealthier, popular, smarter or in a position of authority are all forms of “social power” that can be used by offenders to trap, seduce, harass, harm or abuse victims.

A Repeating Cycle of Violence?

Is there a repeating cycle of violence for male victims? Perspectives vary, and the question defies a simple answer because there are likely many factors that act together to influence a victim's subsequent behaviour.

Many people believe that males who are victimized automatically become offenders. Some critics argue that if a "repeating cycle" model was true, there would be more female than male sex offenders, since more females are sexually abused than males. However, this argument neglects to consider several facts. First, female sex offending is much higher than the case-based research reveals. Second, far more male children are sexually abused than case-based research documents show. In fact, male and female children may be equally likely to be sexually abused, especially within the family. Also forgotten is the fact that, though sexual abuse of males continues into adolescence, reporting drops off dramatically after puberty. Third, many forms of female sex offending are hard to detect because they have the appearance of being "nurturing" behaviour or do not resemble behaviours perpetrated by males. Compulsive genital washing, inappropriate sleeping arrangements, walking in on children when they are using the bathroom or undressing for bed, sexualized talk, or teasing a child about his sexual organs or development are some of the less obvious types of behaviours committed by female sex offenders (Mathews, 1989). Fourth, because we socialize girls to not be sexual persons, female offenders may be more likely to express their anger and frustration in the form of passive neglect of children, corporal punishment or physical abuse, or psychological maltreatment.

Other critics worry about the message we send to male victims through this repeating cycle model. Although some male victims, like abused females, do hurt others, the majority do not. Carelessly asking a male victim if he is offending can establish a self-fulfilling prophecy in the young person. It can create or reinforce feelings about being "no good" or "damaged goods." Critics also worry that male victims exposed to political rhetoric about men being "oppressors" of women may become convinced that offending is their inevitable destiny. We also run the risk of fostering low self-esteem or self-worth by giving a male victim the message that his victimization is less important than the victimization of others.

The arguments of still other critics are puzzling. For example, when women or teen girls offend they consider their abuse background or stressful life situations as the "cause" of the offending behaviour, but not for males. These critics do not acknowledge that trauma experienced by males as a result of previous victimization,

stress from being unemployed, gender role expectations that they be the primary providers for their families, or mental or physical health problems might also be part of why some fathers lash out at their children or other family members. Basically, this latter view is a representation of the essentialist position of women as victims, males as perpetrators.

However, these above concerns aside, it is evident that many abused persons, male and female, do harm others. And, while it may be possible to speak in general terms about "gendered" responses to previous victimization, violence and aggression, regardless of their form, are not a single gender "problem." Patterns of intergenerational transmission of violence and aggression from grandparents, to parents, to children have been documented in the literature. Previous victimization has been found in high numbers in the backgrounds of men and women in prisons. A repeating cycle model, while being far from comprehensive, is a valuable conceptual tool that can help us in the search to better understand all forms of abuse and their personal, social and developmental consequences.

Implications for Staff Development and Program Supervision

It is likely that a significant proportion of young offenders, particularly those with a record of crimes involving physical and sexual assault, are victims of abuse in one form or another. Perhaps one of the reasons why we have had such poor success with many of these young people is precisely because we have failed to recognize the abuse and neglect issues that underlie their antisocial behaviour.

Specialized training for professionals in the area of male victimization is woefully inadequate or non-existent. Front-line and supervisory staff of child, youth and family-serving organizations need to become more aware of the large and growing literature on male victimization. Regular and routine staff training in this area must become a standard of practice if we are to better serve male clients and their families.

Because abused boys and young men often struggle with self-concepts about "being a man," all caregivers must be vigilant to how their own behaviour and expectations of male victims reinforce narrow or stereotyped notions of "masculinity." Male workers especially need to understand that they are modelling "masculinity" every moment they are with a male child or teen. And, because boys spend so much of their early formative years in the care of mothers and female teachers, women also need to be vigilant with respect to how their behaviour or comments reinforce these narrow stereotypes.

Professionals and other support workers or caregivers to male victims must have a clear understanding of the salient effects of homophobia and one's own personal view of homosexuality. Personal beliefs of caregivers can and do have a great impact on those whose abuse experiences have left them hypervigilant to the facial cues, body language or affect of others. We all too easily betray our discomfort with same-sex sexual assault or abuse. For a male child or teen victim with a fragile or damaged self-concept, any indication on our part of judgment, revulsion or hypocrisy will only create more woundedness.

“All of us, regardless of our professional role, must stop minimizing the impact of abuse on male victims or assuming they can ‘take it.’”

The symptoms of abuse are often invisible for boys. By continuing to apply a double standard to male victims, we are reinforcing and supporting violence toward boys and young men in our schools, communities, homes and institutions.

As provincial governments cut back on expenditures, pressure is falling on child welfare agencies to rationalize their services. Some are choosing to discontinue service in cases of extrafamilial child sexual abuse and turn this responsibility over to the police. One immediate problem with this move is that more of these types of cases typically involve male victims. If police investigators do not possess the training needed to recognize male-specific symptomatology, they may fail to make appropriate referrals or miss important evidence. In intrafamilial cases, child welfare investigators must ask more probing questions so that subtleties such as “sexualized environments” or other less immediately visible factors that impact on a male child's healthy development can be gathered in assessments. The research evidence suggests cases of abuse involving boys are less likely to be founded, male victims are more likely to be blamed for their abuse and sexual abusers of boys are held less responsible for their actions. All of this points to the need for more awareness on the part of police, child welfare investigators and health care professionals.

In cases of child abuse involving male and female co-perpetrators, we can no longer continue making assumptions that it is the male alone who is responsible or the initiator. Failing to hold the female perpetrator fully accountable harms male victims by denying their experience. It also infantilizes women or teen girls, and reinforces stereotypes that only males abuse.

Teachers and education administrators need to become more vigilant with respect to the level of violence toward male children and youth in schools. Anti-violence curriculum in any form that excludes the reality of violence and victimization for males, that minimizes sexual harassment toward them or that singles them out as the perpetrators will only push boys and young men away. Curriculum materials need to apply an equal focus to teaching boys how to avoid becoming victims. We need to teach girls how to avoid becoming perpetrators, given that female students report being most at peril from other girls in schools (Mathews, 1995). And, any curriculum that problematizes only “male gender” without an equal consideration of how female and male gender roles and expectations are interdependent and mutually limiting is biased and alienating for male students. We can no longer tolerate literature about child abuse and neglect that details the stories of female victims and then parenthetically dismisses the experience of males by simply adding that, “It happens to males too.” Violence and victimization from a male perspective is not always the same as it is for females and needs to be acknowledged separately.

Many violent and aggressive students bring extraordinary personal and family problems to the school environment. Boisterousness, attention deficits, hyperactivity and learning difficulties can mask underlying abuse issues in male students. Education administrators should ensure that all staff receive regular training in the recognition of signs and symptoms of abuse and neglect as they pertain to males. In cases where boys are exhibiting signs of oppositional defiant disorder, conduct disorder or attention deficit disorder (with or without hyperactivity), we should now be ruling in or out the possibility of current and ongoing victimization or an abuse history.

School sports programs present a special challenge. Many “at-risk” youth feel that organized community and school sports programs are a good way to help them “blow off steam” and keep them out of trouble. While it is important to recognize the beneficial effects of sports, in terms of fitness, learning teamwork and building self-discipline, it is essential for coaches or other supervising personnel to convey in no uncertain terms that violence and unnecessary roughness is unacceptable. School sports program staff also need to understand that many male survivors skip gym class and avoid sports altogether. Their fear is having to undress in locker rooms where, by changing into athletic attire or showering, they have to “expose” themselves.

The Search for a More Inclusive Framework for Analysis

It is important to remember that child abuse is a relatively new field of study and cannot and should not remain static. If the field is to maintain its integrity and develop as an increasingly more disciplined area within the social sciences, it must remain open to new ideas, challenges to status quo assumptions and new voices.

One of the traps we have fallen into in our study of violence and abuse is that we tend to see things from an “essentialist” perspective. When one takes an essentialist position, one assumes all members of a group, gender, class, culture, etc., are alike; what is characteristic of one individual is characteristic of the whole group, regardless of how individual members may see themselves or interpret their behaviour.

Essentialist ways of thinking lead us to use expressions such as “male violence,” in spite of the fact that most males are not violent. If one used the expression “minority youth crime,” one would see immediately the racism inherent in the statement, since all minority youth would be type cast as a result of the actions of a few. We see the racism in this phrase but the bias in the term “male violence” is invisible. The use of the term “male violence” in the discourse is leading us away from a more comprehensive understanding of interpersonal violence and abuse. Males do appear to be the majority of sexual abuse perpetrators, but women are the primary physical abusers and neglecters of children. Mothers and fathers appear to be equally likely to use corporal punishment. Mothers and fathers can inflict serious and lethal harm on a child. Since more neglect and physical types of violence are perpetrated against children than sexual abuse, we need to take a serious look at how our terms and concepts are blinding us to a large and neglected part of the abuse problem.

What gets missed in an essentialist perspective is the complexity of social problems and interpersonal relationships and dynamics. Essentialist thinking eventually compromises the integrity of any field because its narrow focus on group characteristics fails to account for individual differences and the impact of situational and other variables on behaviour. We are running into this problem in the child abuse field.

Because women were the early advocates in the abuse field, much of the writing in this area reflects a women’s

point of view and a predominantly gender-based feminist framework for analysis known in general terms as “patriarchy theory” typified in the work of Herman (1981). In this theoretical view, abuse, particularly sexual abuse, is the result of a “patriarchal culture of male power, male prerogative and male inclination to sexualize all relationships” (Hyde, 1990).

Patriarchy theory is compelling at a first glance because it is based on women’s lived experience and the very real political, social and economic inequities women encounter every day. It also has the potential to shed light on many aspects of women’s lives, including how social inequities can and do affect mental and emotional health. As a general theory based on women’s experience “as a group” it has merit. But it also makes some assumptions about men as a group that, upon close scrutiny, are biased. Male victims are beginning to challenge a strictly gender-based view of violence, victimization, and power relations, because their own lived experiences teach them something very different.

For example, one area where this theory begins to weaken is in its interaction with a class and race analysis. In economic and political terms, a wealthy woman has more social power than a poor or homeless man. A female professional person, such as a physician, judge or lawyer, has more power than an unskilled male worker by virtue of her education, earning power and social influence. A Caucasian female has more social power than a visible minority male. The theory also fails to acknowledge the power that women, as adults and in the role of mother, teacher or child care provider, have over male children.

And there are other problems. The embellishment of patriarchy theory evident in the quotation from Hyde is biased in the way it generalizes a negative stereotype of “male sexuality” to all men. Most men are kind, decent, caring husbands, lovers, partners, colleagues, fathers and friends of women. Men’s sexuality varies as much as women’s.

It is evident from the research highlighted in this report that interpersonal violence is a complex phenomenon that cannot be reduced to any one single theory. Models based solely on a patriarchal model of gender relations, though useful, are limited in their ability to explain the many facets of the violence and abuse story. They have also failed to bring males and females together in a common purpose to end violence.

A strictly applied gender-based model also does not fully account for female sex-offending, most notably the abuse of boys by mothers, adult or older teen women, the seduction of minor-aged males by older female teens and women, mother/daughter incest and the sexual abuse of children by teachers, day care providers, institutional caregivers and other women in positions of power or authority (Mathews, 1995). It is also heterosexist and does not account for sexual abuse, sexual exploitation and battering in lesbian relationships (Renzetti, 1992) or male same-sex relationships. In addition, it does not fully account for female use of corporal punishment, neglect and emotional maltreatment of children. Its greatest weakness is that it is not comprehensive. Its greatest strength lies in the fact that it identifies a “power dynamic” that has wider application to all types of social relations.

There are a number of considerations can be applied to a more comprehensive framework to account for abuse. Most would fit under the categories of behaviour, relationship and power. Crowder (1993) provides a useful starting point, particularly in the area of sexual abuse. She defines sexual abuse as “an overt or covert sexual behaviour between two individuals when the following conditions exist: the nature of the sexual act(s) is developmentally inappropriate for at least one of the participants; the balance of power and authority (meaning psychological power, economic power, role status power, etc.) between the two individuals is unequal; and the two individuals have an established emotional connection (such as between a child and a caregiver, or a child and authority figure).”

A model of abuse that is predicated on power imbalances or the misuse of power is a good starting point in our search for a more comprehensive framework because it encourages us to: hold both male and female abusers accountable for their behaviour; empower victims to take control of their healing process and their lives; recognize and validate the victim’s experience; affirm that a victim’s self-knowledge is paramount; link the victim’s individual struggle to a collective one to transform power relations in our society; and focus on power dynamics in the therapeutic relationship (Mathews, 1995).

What is emerging is that different types of abuse may require different explanatory and theoretical models, alone or in combination. For example, a feminist theory of patriarchal gender relations may provide part of the explanation for father/daughter incest, step-father/step

daughter sexual abuse and a father’s use of corporal punishment. A power model may more fully explain women’s use of physical violence against boys and teen males, women’s sexual use of male children and teens, maternal use of corporal punishment, or sibling-on-sibling violence.

A more inclusive theoretical framework is necessary not only for understanding etiology so that better assessment and treatment programs can be developed, but also to eliminate the double standard that tends to be applied to cases involving male victims of abuse. An “abuse of sexuality” model, a variation of the power abuse perspective, applies to both genders, and gives us a more inclusive conceptual framework to apply to cases such as female exposure to males, and the sexual use of male children and teens by older females (Bolton, 1989). Bolton, reflecting the opinion of Finkelhor (1986), Russell (1983) and Brandt and Tisza (1977), advocates for applying multiple levels of conceptualizing abuse to capture things such as “sexualized environments” in families, sexual misuse of a child or any abusive experience that interferes with a child’s healthy development. Bolton’s “abuse of sexuality” model describes a continuum of environments that range from the promotion of normalized sexual development in males and females to those that eliminate the possibility of normal development.

The evidence suggests that a comprehensive theoretical framework based on an abuse of power model may be more promising. However, we are still far from having all the answers nor have we even asked all the necessary questions. A more complete and comprehensive understanding of child maltreatment and interpersonal violence will likely be found at the intersection points between a number of theoretical or conceptual models. We will need to take a developmental perspective on the impact of abuse. We will need to grapple with the effects or influence of socioeconomic status, ethno-racial background, gender relations, family systems, parenting skills and knowledge, parental mental and physical health, attachment, cultural norms supporting violence and abuse, drug and alcohol abuse and addictions, stress, intellectual functioning, structural inequities, anti-gay/lesbian prejudice and situational factors. We will also need to examine carefully our schools, institutions, therapeutic practices and the preparation and training of youth-serving professionals for the contribution all make to the problem of encouraging or supporting interpersonal violence and abuse.

The Messages We Give to Male Victims

Our minimization and denial of male victimization so permeates our culture that it is in evidence everywhere from nursery rhymes, comic strips, comedy films, television programs and newspaper stories to academic research. We give male victims a message every day of their lives that they risk much by complaining.

Stated succinctly, if a male is victimized he deserved it, asked for it, or is lying. If he is injured, it is his own fault. If he cries or complains, we will not take him seriously or condone his “whining” because he is supposed to “take it like a man.” We will laugh at him. We will support him in the minimization of its impact. We will encourage him to accept responsibility for being victimized and teach him to ignore any feelings associated with his abuse. We will guilt and shame him to keep a stiff upper lip so he can “get on with it.” When we give a message to boys and young men in any shape or form that their experience of violence and victimization is less important than that of girls and young women, we are teaching them a lesson about their value as persons. We also teach them that the use of violence toward males is legitimate. When we dismiss their pain, we do little to encourage boys and young men to listen to, and take seriously, women’s concerns about violence and victimization. When we diminish their experience or fail to hold their male and female abusers fully accountable, we support their continued victimization.

How Would Things Be Different if We Acknowledged Male Victims?

How would our society be different if we recognized and supported male victims?

We would have to acknowledge how gender role conditioning denies boys a rich emotional life and cuts them off from whole parts of their essential selves. We would begin to understand how child-rearing practices in the form of emotional and physical withdrawal from sons “to toughen them up” early in their lives compromises their ability to form secure and nurturing attachments. We would begin to see how male gender itself is a risk factor that can magnify the effects of all forms of abuse and channel it in violent, aggressive and reckless acts directed toward the self or others. We would finally acknowledge the overwhelming research

evidence concerning the amount of physical abuse, sexual abuse, psychological maltreatment, neglect and corporal punishment of male children and teens by females, without minimization.

We would have to recognize that if there is a male gender dimension to many forms of overtly expressed violence, its causes need to be linked to the routine and normalized violence toward males prevalent in our society, violence in the form of child abuse and neglect, psychological maltreatment, corporal punishment and male-gender role socialization. We would finally realize that all the forms of violence toward boys and teen males discussed in this document are the common everyday lived experience of most males rather than the exception. We would no longer tolerate humorous or entertaining media images of males or females as victims of violence or biased journalism that fails to report the whole picture of child abuse and neglect and interpersonal, family and community violence.

We would recognize that regardless of our own theoretical starting points, male victims have their own voice, their own meanings for their experiences. If we remain ignorant of, overlook or fail to explore their stories, we will miss much of what we need to engage them in therapy and healing. We will construct for them the origins and courses of their difficulties. We will shape and mold them to the limitations of our own personal and professional world views. We will, through the use of our professional practices, reproduce the same dysfunctional and disempowering patterns of communication and relationship many of these males found in their families of origin or the environments in which they grew up.

We would recognize that solving the complex problem of violence in our society will never be achieved until all the stories and voices of victims of violence are heard, until men and women of good will begin to work side by side, and until the means of our collective struggle toward peace reflect respect, compassion and inclusion as our minimum standard. We will recognize, finally, that means are ends. It is in the selection of our means where we are most conscious and able to make inclusive decisions about our future direction. From a postmodernist perspective, in any inclusive process of consensus building toward some goal, one cannot see the end from the starting point. Thus, if the means we choose toward the creation of a more just society are anything but, we can only arrive back where we started.

Beginning with Ourselves as Adults

Perhaps, the greatest responsibility for the plight of boys and young men lies with adults. We are the ones who conduct single-gender and biased research. We are the ones who present to the media more political opinions about male victimization than provide objective, empirically-based information. We are the ones who help maintain biased stereotypes about boys and young men that keep them trapped in their silence. We are the ones who help reinforce in the public mind an image of strong and resilient male victims who are, in truth, human beings suffering in much pain, isolation and loneliness.

Adults, especially those who work in the child abuse field, are the eyes of Canadian society in this area of human suffering. It is up to us to speak against abuse and injustice, and for compassion and inclusion. If we do not open ourselves to self-criticism, conscientiously and continually reflect on our assumptions, methods and standards of practice, or allow ourselves to become trapped in rhetoric, then it is we who will become the ones who will pose the greatest threat to the credibility of the field.

Finally, we all need to reflect on the simple wisdom that we cannot take others - children, teens, the public or other professionals - past where we are in terms of our own self-awareness and understanding because we do not possess a map for the journey. We cannot pretend to be a community in search of justice while tolerating a double standard, allowing a divisive discourse around violence and abuse, and leaving male victims outside our compassion and caring concern.

Eventually, all victims, male and female, and all Canadians will see our hypocrisy. If we do not speak for all children, all victims, male or female, then we ultimately speak for none.

Resources and Bibliography

Adams-Tucker, C.A. (1981) Sociological overview of 28 abused children, *Child Abuse and Neglect*, 5, 361-367.

Allen, C.M. (1990) Women as perpetrators of child sexual abuse: Recognition barriers. In A. Horton, B. Johnson, L. Roundy and D. Williams, (Eds.), *The Incest Perpetrator: A Family Member No One Wants to Treat*. Newbury Park, CA: Sage.

Allers, C.T. and Benjack, K.J. (1991) Connections between child abuse and HIV infection. *Journal of Counseling and Development*, 70, 309-313.

Allers, C.T., Benjack, K.J., White, J. and Rousey, J.T. (1993) HIV vulnerability and the adult survivor of childhood sexual abuse. *Child Abuse and Neglect*, 17(2) Mar.-Apr., 291-298.

American Association for Protecting Children. (1985) Highlights of official child neglect and abuse reporting 1983. Denver, CO: American Humane Association.

Ammerman, R.T., Hersen, M., Van Hasselt, V.B., Lubetsky, M.J. and Sieck, W.R. (1994) Maltreatment in Psychiatrically Hospitalized Children and Adolescents with Developmental Disabilities: Prevalence and Correlates. *Journal of the American Academy of Child and Adolescent Psychiatry*, 33(4) May, 567-576.

Anderson, L.S. (1981) Notes on the linkage between the sexually abused child and the suicidal adolescent. *Journal of Adolescence*, 4(2), 157-162.

Arroyo, Wm., Eth, S. and Pynoos, R. (1984) Sexual assault of a mother by her pre-adolescent son. *American Journal of Psychiatry*, 141(9), 1107-1108.

Awad, G.A. (1976) Father-son incest: A case report. *The Journal of Nervous and Mental Disease*, 162(2), 135-139.

Badgley, R. (1984) *Sexual Offenses Against Children and Youth*. Ottawa: Minister of Supply and Services Canada.

Bagley, C. (1969) Incest behavior and incest taboo. *Social Problems*, 16(4), 505-579.

Baker, A.W. and Duncan, S.P. (1985) Child sexual abuse: A study of prevalence in Great Britain. *Child Abuse and Neglect*, 9(4), 457-467.

Bandura, A. and Walters, R.H. (1959) *Adolescent Aggression: A Study of the Influence of Child Training Practices and Family Interrelationships*. New York: Ronald Press.

Banning, A. (1989) Mother-son incest: Confronting a prejudice. *Child Abuse and Neglect*, 13, 563-570.

Barton, B.R. and Marshall, A.S. (1986) Pivotal partings: Forced termination with a sexually abused boy. *Clinical Social Work Journal*, 14(2), 139-149.

Becker, J.V. (1988) The effects of child abuse on adolescent sexual offenders. In G.E. Wyatt and G.J. Powell (Eds.), *Lasting effects of child abuse*. Newbury Park, CA: Sage, 193-207.

Bell, A.P., Weinburg, M.S. and Hammersmith, S.K. (1981) *Sexual preference: Its development in men and women*. Bloomington: Indiana University Press.

Bender, L. and Blau, A. (1937) The reaction of children to sexual relations with adults. *American Journal of Orthopsychiatry*, 7 (Oct.), 500-518.

Bender, L. and Grugett, A.E. (1952) A follow-up report on children who had atypical sexual experience. *American Journal of Orthopsychiatry*, 22 (Oct.), 825-837.

Bentovim, A. (1987) Physical and Sexual Abuse of Children: The Role of the Family Therapist. *Journal of Family Therapy*, 9(4), 383-388.

Bixler, R.H. (1981) The incest controversy. *Psychological Reports*, 49(1), 267-283.

- Blanchard, G. (1986) Male victims of child sexual abuse: A portent of things to come. *Journal of Independent Social Work*, 1(1), 19-27.
- Blount, H.R. and Chandler, T.A. (1979) Relationship between childhood abuse and assaultive behavior in adolescent male psychiatric patients. *Psychological Reports*, 44(3), 1126.
- Bolton, F.G. (1989) *Males at Risk: The Other Side of Child Sexual Abuse*. London, England: Sage.
- Brandt, R.S.T. and Tisza, V.B. (1977) The sexually misused child. *American Journal of Orthopsychiatry*, 47(1), 80-90.
- Brassard, M.R., Germain, R., and Hart, S.N. (1987) *Psychological Maltreatment of Children and Youth*. New York: Pergamon Press.
- Breiner, S.J. (1990) *Slaughter of the Innocents: Child Abuse through the Ages and Today*. New York: Plenum Press.
- Brière, J. (1989) *Therapy for Adults Molested as Children: Beyond Survival*. New York: Springer Publishing.
- Brière, J. and Runtz, M. (1986) Suicidal thoughts and behaviours in former sexual abuse victims. *Canadian Journal of Behavioural Sciences*, 18(4), 413-423.
- Brière, J. and Smiljanich, K. (1993) Childhood Sexual Abuse and Subsequent Sexual Aggression Against Adult Women. Paper presented at the 101st annual convention of the American Psychological Association, Toronto, Ontario.
- Brière, J., Evans, D., Runtz, M. and Wall, T. (1988) Symptomatology in men who were molested as children: A comparison study. *American Journal of Orthopsychiatry*, 58, 457-461.
- Broussard, S.D. and Wagner, W.G. (1988) Child sexual abuse: Who is to blame? *Child Abuse and Neglect*, 12(4), 563-569.
- Brown, A. and Finkelhor, D. (1986) Impact of child sexual abuse: A review of the research. *Psychological Bulletin*, 99, 66-77.
- Bruckner, D.F. and Johnson, P.E. (1987) Treatment for adult male victims of childhood sexual abuse. *Social Casework*, 68(2), 81-87.
- Bryan, J.W. and Freed, F.W. (1982) Corporal punishment: Normative data and sociological and psychological correlates in a community population. *Journal of Youth and Adolescence*, 11, 77-87.
- Bugental, D.B., Mantyla, S.M. and Lewis, J. (1989) Parental attributions as moderators of affective communication to children at risk for physical abuse. In D. Cicchetti and V. Carlson (Eds.), *Child Maltreatment: Theory and Research on the Causes and Consequences of Child Abuse and Neglect*. Cambridge: Cambridge University Press, 254-279.
- Burgess, A.W. (1985) Dangerous sexual offenders: Commentary. *Medical Aspects of Human Sexuality*, 19, 119-123.
- Burgess, A.W., Groth, A.N. and McCausland, M.P. (1981) Child sex initiation rings. *American Journal of Orthopsychiatry*, 51, 110-118.
- Burgess, A.W., Hartman, C.R., McCausland, M.P. and Powers, P. (1984) Response patterns in children and adolescents exploited through sex rings and pornography. *American Journal of Psychiatry*, 141(5), 656-662.
- Cameron, P., Proctor, K., Coburn, W.J., Forde, N., Larson, H. and Cameron, K. (1986) Child molestation and homosexuality. *Psychological Reports*, 58, 327-337.
- Carmen, E.H., Rieker, P.P. and Mills, T. (1984) Victims of violence and psychiatric illness. *American Journal of Psychiatry*, 141(3), 378-383.
- Cavaiola, A. and Schiff, M. (1988) Behavioral sequelae of physical and/or sexual abuse in adolescents. *Child Abuse and Neglect*, 12(2), 181-188.
- Chasnoff, I.J., Burns, W.J., Schnoll, S.H., Burns, K., Chisum, G. and Jyle-Spore, L. (1986) Maternal-neonatal incest. *American Journal of Orthopsychiatry*, 56(4), 577-580.
- Condy, S.R., Templer, D.I., Brown, R. and Veaco, L. (1987) Parameters of sexual contact of boys with women. *Archives of Sexual Behavior*, 16(5), 379-394.
- Conte, J.R. and Schuerman, J.R. (1987) Factors associated with an increased impact of child sexual abuse. *Child Abuse and Neglect*, 11, 201-211.
- Coombs, N.R. (1974) Male prostitution: A psychosocial view of behaviour. *American Journal of Orthopsychiatry*, 44, 782-789.
- Cotton, D.J. and Groth, A.N. (1982) Inmate rape: Prevention and intervention. *Journal of Prison and Jail Health*, 2(1), 47-57.
- Crowder, A. (1993) *Opening the Door: A Treatment Model for Therapy with Males Survivors of Sexual Abuse*. Kitchener, ON: Family and Children's Services of the Waterloo Region; Distributed by National Clearinghouse on Family Violence, 9.
- De Jong, A.R. (1985) Response to the article "The sexually abused child: A comparison of male and female victims," by Pierce, R. and Pierce, L. *Child Abuse and Neglect*, 9(4), 575-576.
- De Jong, A.R., Emmett, G.A. and Hervada, A.R. (1982) Sexual abuse of children: Sex-, race-, and age-dependent variations. *American Journal of Diseases of Children*, 136(2), 129-134.
- De Jong, A.R., Hervada, A.R. and Emmett, M.D. (1983) Epidemiologic variations in childhood sexual abuse. *Child Abuse and Neglect*, 7(2), 155-162.
- De Mause, L. (1988). *The History of Childhood: The Untold Story of Child Abuse*. New York: Peter Bedrick Books.
- Deisher, R.W., Eisner, V. and Sulzbacher, S.I. (1969) The young male prostitute. *Pediatrics*, 43(6), 936-941.
- Dibble, U. and Straus, M.A. (1990) Some social structure determinants of inconsistency between attitudes and behaviour: The case of family violence. In M. Straus and R.J. Gelles (Eds.), *Physical Violence in American Families: Risk Factors and Adaptations to Violence in 8,145 Families*. New Brunswick, NJ: Transaction. 167-180.
- Dietrich, D., Berkowitz, L., Kadushin, A. and McGloin, J. (1990) Some factors influencing abusers' justification of their child abuse. *Child Abuse and Neglect*, 14, 337-345.

- Dietz, C.A. and Craft, J.L. (1980) Family dynamics of incest: A new perspective. *Social Casework*, 61(10), 602-609.
- Dimmock, P.T. (1988) Adult males sexually abused as children. *Journal of Interpersonal Violence*, 3, 203-221.
- Dix, T.H. and Grusec, J.E. (1985) Parent attribution processes in the socialization of children. In I.E. Siegel (Ed.), *Parental Belief Systems: The Psychological Consequences for Children*. Hillsdale, NJ: Erlbaum. 201-233.
- Dixon, K.E., Arnold, E. and Calestro, K. (1978) Father-son incest: Underreported psychiatric problem? *American Journal of Orthopsychiatry*, 137(7), 835-838.
- Drake, D., Gilroy-Nelson, A. and Roane, T. (1986) *Working Together*. Gainesville, Florida: Child Care Publications. (Booklet for Sexually Abused Boys).
- Dube, R. and Hebert, M. (1988) Sexual Abuse of Children under 12 Years of Age: A Review of 511 Cases. *Child Abuse and Neglect*, 12(3), 321-330.
- Egelund, B., Jacobitz, D. and Sroufe, L.A. (1988) Breaking the cycle of abuse. *Child Development*, 59, 1080-1088.
- Ellerstein, N.S. and Canavan, J.W. (1980) Sexual abuse of boys. *American Journal of Diseases of Children*, 134 (March), 255-257.
- Elliott, M. (Ed.) (1994) *Female Sexual Abuse of Children*. New York: Guilford Press.
- Eron, L. (1982) Parent-child interaction, television violence, and aggression of children. *American Psychologist*, 37, 197-211.
- Faller, K.C. (1989) Characteristics of a clinical sample of sexually abused children: How boy and girl victims differ. *Child Abuse and Neglect*, 13, 281-291.
- Faller, K. (1987) Women who sexually abuse children. *Violence and Victims*, 2, 263-276.
- Farber, E.D. and Joseph, J.A. (1985) The maltreated adolescent: Patterns of physical abuse. *Child Abuse and Neglect*, 9(2), 201-206.
- Farber, E.D., Showers, J., Johnson, C.F., Joseph, J.A. and Oshins, L. (1984) The sexual abuse of children: A comparison of male and female victims. *Journal of Clinical Child Psychology*, 13(3), 294-297.
- Finch, S.M. (1973) Sexual abuse by mothers. *Medical Aspects of Human Sexuality*, 7(1), 191.
- Finkelhor, D. (1990) Early and long-term effects of child sexual abuse: An update. *Professional Psychology: Research and Practice*, 21(5), 325-330.
- Finkelhor, D. (Ed.) (1984) *Child Sexual Abuse: New Theory and Research* (pp. 150-170). New York: Free Press.
- Finkelhor, D. (1986) Designing new studies. A Sourcebook on Child Sexual Abuse, edited by D. Finkelhor. Beverly Hills, CA: Sage, p. 199-223.
- Finkelhor, D. (1980) Sex among siblings: A survey of the prevalence, variety, and effects. *Archives of Sexual Behaviour*, 9, 171-194.
- Finkelhor, D. (1979) *Sexually victimized children*. New York: Free Press.
- Finkelhor, D. and Hotaling, G.T. (1984) Sexual abuse in the national incidence study of child abuse and neglect: An appraisal. *Child Abuse and Neglect*, 8(1), 23-33.
- Finkelhor, D., Hotaling, G., Lewis, I.A. and Smith, C. (1990) Sexual abuse in a national survey of adult men and women: Prevalence, characteristics, and risk factors. *Child Abuse and Neglect*, 14(1), 19-28.
- Finkelhor, D., Williams, L.M., Burns, N. and Kalinowski, M. (1988) Sexual abuse in day care: A national study. Durham, NH: University of New Hampshire, Family Research Laboratory.
- Forman, B.D. (1982) Reported male rape. *Victimology: An International Journal*, 7(1-4), 235-236.
- Freedman, A.M., Kaplan, H.I. and Sodock, B. (Eds.) (1975) *Comprehensive textbook of psychiatry* (2nd ed.). Baltimore: Williams and Wilkins.
- Freeman-Longo, R.E. (1986) The impact of sexual victimization on males. *Child Abuse and Neglect*, 10, 411-414.
- Friedrich, W.N. and Reams, R.A. (1987) Course of psychological symptoms in sexually abused young children. *Psychotherapy*, 24(Summer), 160-170.
- Friedrich, W.N., Beilke, R.L. and Urquiza, A.J. (1988) Behavior Problems in Young Sexually Abused Boys. *Journal of Interpersonal Violence*, 3(1), 21-28.
- Friedrich, W.N., Beilke, R.L., and Urquiza, A.J. (1988) Behavior problems in young sexually abused boys: A comparison study. *Journal of Interpersonal Violence*, 3, 21-28.
- Friedrich, W.N., Einbender, A.J. and Luecke, W.J. (1983) Cognitive and behavioral characteristics of physically abused children. *Journal of Consulting and Clinical Psychology*, 51(2), 313-314.
- Friedrich, W.N., Urquiza, A.J. and Beilke, R.L. (1986) Behavior problems in sexually abused young children. *Journal of Pediatric Psychology*, 11(1), 47-57.
- Fritz, G.S., Stoll, K. and Wagner, N.N. (1981) A comparison of males and females who were sexually molested as children. *Journal of Sex and Marital Therapy*, 7(1), 54-59.
- Fromuth, M.E. and Burkhart, B.R. (1989) Long-term psychological correlates of childhood sexual abuse in two samples of college men. *Child Abuse and Neglect*, 13(4), 533-542.
- Fromuth, M.E. and Burkhart, B.R. (1987) Childhood sexual victimization among college men: Definitional and methodological issues. *Violence and Victims*, 2, 241-253.

- Fry, D.P. (1993) The intergenerational transmission of disciplinary practices and approaches to conflict. *Human Organization*, 52, 176-735.
- Galdston, R. (1965) Observations on children who have been physically abused and their parents. *American Journal of Psychiatry*, 22(4), 440-443.
- Garbarino, J., Guttman, E. and Seeley, J.W. (1986) *The Psychologically Battered Child*. San Francisco: Jossey-Bass.
- Garbarino, J., Schellenbach, C.J. and Sebes, J.M. (1986) *Troubled Youths, Troubled Families*. Hawthorne, NY: Adine de Gruyter.
- Gelles, R.J. (1989) Child abuse and violence in single-parent families: Parent absence and economic deprivation. *American Journal of Orthopsychiatry*, 59, 492-501.
- Gelles, R.J. (1978) Violence toward children in the United States. *American Journal of Orthopsychiatry*, 43, 611-621.
- Gil, D.G. (1971) Violence against children. *Journal of Marriage and the Family*, 33(4), 637-648. Gil, D.G. (1970). *Violence against children: Physical child abuse in the United States*. Cambridge, MA: Harvard University Press.
- Gilmartin, B.G. (1979) The case against spanking. *Human Behaviour*, February. 18-23.
- Globe & Mail. (1995) 10% of boys victims of genital assault. December 6, 1995.
- Globe & Mail. (1993) *Social studies*. October 4, 1993.
- Gordon, M. (1990) Males and females as victims of childhood sexual abuse: An examination of the gender effect. *Journal of Family Violence*, 5(4), 321-333.
- Graham, L. (1993) *Sexual Abuse and Young People with Disabilities Project: Results and Recommendations*. Vancouver, BC: The McCreary Centre Society.
- Grayson, J. (Ed.) (1989) *Sexually victimized boys*. Virginia Child Protection Newsletter, (31) Fall. Harrisonburg, VA: James Madison University.
- Graziano, A.M. and Namaste, K.A. (1990) Parental use of physical force in child discipline: A survey of 679 college students. *Journal of Interpersonal Violence*, 5(4), 449-463.
- Green, A.H. (1983) Child abuse: Dimension of psychological trauma in abused children. *Journal of the American Academy of Child Psychiatry*, 22(3), 231-237.
- Greenland, C. (1987) *Preventing child abuse and neglect deaths: An international study of deaths due to child abuse and neglect*. London: Tavistock.
- Groth, A.N. (1979) Sexual trauma in the life histories of rapists and child molesters. *Victimology: An International Journal*, 4(1), 10-16.
- Groth, A.N. and Burgess, A.W. (1980) Male rape: Offenders and victims. *American Journal of Psychiatry*, 137(7), 806-810.
- Groth, A.N., and Lored, C. (1981) *Juvenile sex offenders: Guidelines for assessment*. *International Journal of Offender Therapy and Comparative Criminology*, 25, 265-272.
- Grubman-Black, S.D. (1990) *Broken Boys/Mending Men: Recovery from Childhood Sexual Abuse*. New York: Ivy Books.
- Health Canada. (1994) *Suicide in Canada: Update of the Report of the Task Force on Suicide in Canada*. Ottawa: Health Canada.
- Herman, J.L. (1981) *Father-Daughter Incest*. Cambridge, MA: Harvard University Press.
- Herrenkohl, E.C., Herrenkohl, R.C. and Toedter, L.J. (1983) Perspectives on the intergeneration transmission of violence. In D. Finkelhor, R.J. Gelles, G.T. Hotaling and M. Straus (Eds.), *The Dark Side of Families: Current Family Violence Research*. Beverly Hills, CA: Sage. 305-316.
- Hewitt, S. (1990) The treatment of sexually abused preschool boys. In M. Hunter (Ed.), *The Sexually Abused Male, Volume 2: Application of Treatment Strategies*. Lexington, MA: Lexington Books.
- Hirschi, T. (1969) *The Causes of Delinquency*. Berkeley, CA: University of California Press.
- Howard, J.A. (1984) Societal influences on attribution: Blaming some victims more than others. *Journal of Personality and Social Psychology*, 47(3), 494-505.
- Hunter, M. (1990) *Abused Boys: The Neglected Victims of Sexual Abuse*. New York: Fawcett.
- Hunter, J.A., Lexier, L.J., Goodwin, D.W., Browne, P.A. and Dennis, C. (1993) Psychosexual, attitudinal, and developmental characteristics of juvenile female sexual perpetrators in a residential treatment setting. *Journal of Child and Family Studies*, 2(4), 317-326.
- Hunter, R.S., Kilstrom, N. and Loda, F. (1985) Sexually abused children: Identifying masked presentations in a medical setting. *Child Abuse and Neglect*, 9(1), 17-25.
- Hyde, C.A. Feminist model for macro-practice: promises and problems. *Administration in Social Work*, 13(3-4), 145-181.
- Jaffee, P.G., Wolfe, D.A. and Wilson, S.K. (1990) *Children of Battered Women*. Newbury Park, CA: Sage.
- Jameson, P.A. and Schellenbach, C.J. (1977) Sociological and psychological factors in the backgrounds of male and female perpetrators of child abuse. *Child Abuse and Neglect*, 1(1), 77-83.
- Janus, M.D., Archambault, F.X. and Brown, S.W. (1995) Physical abuse in Canadian runaway adolescents. *Child Abuse and Neglect*, 19(4), 433-447.
- Janus, M.D., Burgess, A.W. and McCormack, A. (1987) Histories of sexual abuse in adolescent male runaways. *Adolescence*, 22(86), 405-417.
- Jason, J. and Andereck, N. (1983) Fatal child abuse in Georgia: The epidemiology of severe physical child abuse. *Child Abuse and Neglect*, 7(1), 1-10.

- Jayarante, S. (1977) Child abusers and children: A review. *Social Work*, 22, 5-9.
- Johnson, C. and Showers, J. (1985) Injury variables in child abuse. *Child Abuse and Neglect*, 9(2), 207-216.
- Johnson, R.L. and Shrier, D. (1987) Past sexual victimization by females of male patients in an adolescent medicine clinic population. *American Journal of Psychiatry*, 144(5), 650-652.
- Johnson, R.L. and Shrier, D. (1985) Sexual victimization of boys: Experience at an adolescent medicine clinic. *Journal of Adolescent Health Care*, 6(5), 372-376.
- Johnson, T.C. (1989) Female child perpetrators: Children who molest other children. *Child Abuse and Neglect*, 13, 571-585.
- Johnson, T.C. (1988) Child perpetrators - Children who molest other children: Preliminary findings. *Child Abuse and Neglect*, 12, 219-229.
- Kaufman, A., Divasto, P., Jackson, R., Voorhees, D. and Christy, J. (1980) Male rape victims: Noninstitutional assault. *American Journal of Psychiatry*, 137(2), 221-223.
- Kaufman, K.L., Wallace, A.M., Johnson, C.F. and Reeder, M.L. (1995) Comparing female and male perpetrators' modus operandi: Victims' reports of sexual abuse. *Journal of Interpersonal Violence*, 10(3), 322-333.
- Kendall-Tackett, K.A. and Simon, A.F. (1987) Perpetrators and their acts: Data from 365 adults molested as children. *Child Abuse and Neglect*, 11(2), 237-245.
- Khan, M. and Sexton, M. (1983) Sexual abuse of young children. *Clinical Pediatrics*, 22(5), 369-372.
- Kimbrell, A. (1995) *The Masculine Mystique: The Politics of Masculinity*. New York: Ballantine Books.
- Knopp, F.F. and Lackey, L.B. (1987) Female sexual abusers: A summary of data from 44 treatment providers. Orwell, VT: Safer Society Press.
- Knutson, J.F. and Selner, M.B. (1994) Punitive childhood experiences reported by young adults over a 10 year period. *Child Abuse and Neglect*, 18, 155-166.
- Kohan, M.J., Pothier, P. and Norbeck, J.S. (1987) Hospitalized children with history of sexual abuse: Incidence and care issues. *American Journal of Orthopsychiatry*, 57, 258-264.
- Krentz Johnston, M.S. (1979) The sexually mistreated child: Diagnostic evaluation. *Child Abuse and Neglect*, 3(3/4), 943-951.
- Krieger, M.J., Rosenfeld, A.A., Gordon, A. and Bennett, M. (1980) Problems in the psychotherapy of children with histories of incest. *American Journal of Psychotherapy*, 34(1), 81-88.
- Krug, R.S. (1989) Adult male report of childhood sexual abuse by mothers: Case descriptions, motivations and long-term consequences. *Child Abuse and Neglect*, 13(1), 111-119.
- Landis, J.T. (1956) Experiences of 500 children with adult sexual deviation. *Psychiatric Quarterly Supplement*, 30(1), 90-109.
- Langsley, D.G., Schwartz, M.N. and Fairbairn, R.H. (1968) Father-son incest. *Comprehensive Psychiatry*, 9(3), 218-226.
- Lew, M. (1986) *Victims No Longer: Men Recovering from Incest and Other Sexual Child Abuse*. New York: Harper and Row.
- Lewis, M. and Sarrel, P.M. (1969) Some psychological aspects of seduction, incest, and rape in childhood. *American Academy of Child Psychiatry*, 8, 606-619.
- Libbey, P. and Bybee, R. (1979) The physical abuse of adolescents: A case for a developmental specific model of child abuse. *Child Abuse and Neglect*, 3, 967-974.
- Longo, R.E. (1982) Sexual learning and experience among adolescent sexual offenders. *International Journal of Offender Therapy and Comparative Criminology*, 26(3), 235-241.
- Longo, R. and Groth, N. (1983) Juvenile sexual offenses in the histories of adult rapists and child molesters. *International Journal of Offender Therapy and Comparative Criminology*, 27, 155-157.
- Lourie, I. (1979) Family dynamics and the abuse of adolescents: A case for a developmental specific model of child abuse. *Child Abuse and Neglect*, 3, 967-974.
- Lukianowicz, N. (1972) Incest I: Paternal incest; Incest II: Other types of incest. *British Journal of Psychiatry*, 120, 301-313.
- Maccoby, E.E. and Jacklin, C.N. (1974) *The psychology of sex differences*. Stanford, CA: Stanford University Press.
- Margolis, M. (1984) A case of mother-adolescent son incest: A follow-up study. *Psychoanalytic Quarterly*, 53(3), 355-385.
- Martin, H.L. (1970). Antecedents of burns and scalds in children. *British Journal of Medical Psychology*, 43, 39-47.
- Mathews, F. (1995) *Combining Voices: Supporting Paths of Healing in Adult Female and Male Survivors of Child Sexual Abuse*. Ottawa: National Clearinghouse on Family Violence.
- Mathews, F. (1995) *The Badge and the Book: Building More Effective Police/School Partnerships to Combat Youth Violence*. Ottawa: Solicitor General Canada.
- Mathews, F. (1994) What's So Funny about the Abuse of Boys and Young Men? *Journal of Emotional and Behavioural Problems*. (3) 1. Spring.
- Mathews, F. (1989) *Familiar Strangers: A Study of Adolescent Prostitution*. Toronto: Central Toronto Youth Services.
- Mathews, R., Matthews, J.K. and Speltz, K. (1989) Female sexual offenders: An exploratory study. Orwell, VT: Safer Society Press.
- Mayer, A. (1992) *Women Sex Offenders: Treatment and Dynamics*. Holmes Beach, FL: Learning Publications, Inc.
- McCarty, L.M. (1986) Mother-child incest: Characteristics of the offender. *Child Welfare*, 65(5), 447-458.
- McCreary Centre Society. (1993) *Sexual Abuse and Young People with Disabilities*. Vancouver, BC: McCreary Centre Society.

- McCormack, A., Janus, M.D. and Burgess, A.W. (1986) Runaway youths and sexual victimization: Gender differences in an adolescent runaway population. *Child Abuse and Neglect*, 10(3), 387-395.
- Metcalfe, M., Oppenheimer, R., Dignon, A. and Palmer, R.L. (1990) Childhood sexual experiences reported by male psychiatric patients. *Psychological Medicine*, 20, 925-929.
- Moore, D.W. and Straus, M.A. (1987) Violence of parents toward their children: New Hampshire. Durham, NH: Family Research Laboratory, University of New Hampshire.
- Morgan, P.K. and Gaier, E.L. (1956) The direction of aggression in the mother-child punishment situation. *Child Development*, 27(4), 447-457.
- Napier-Hemy, J. (1991) When Teenage Boys Have Been Sexually Abused. Vancouver, BC: Family Services of Greater Vancouver.
- Napier-Hemy, J. (1990) When Boys Have Been Sexually Abused. Vancouver, BC: Family Services of Greater Vancouver.
- Nasjleti, M. (1980) Suffering in silence: The male incest victim. *Child Welfare*, 59(5), 269-275.
- NCCAN, National Centre on Child Abuse and Neglect. (1994) Child Maltreatment 1992: Reports from the States to the National Centre on Child Abuse and Neglect. Washington, DC: U.S. Department of Health and Human Services.
- Neilsen, T. (1983) Sexual abuse of boys: Current perspectives. *The Personnel and Guidance Journal*, 62, 139-142.
- Newson, J. and Newson, E. (1990) The extent of physical punishment in the U.K. London: Approach.
- Newton, D.E. (1978) Homosexual behavior and child molestation: A review of the evidence. *Adolescence*, 13(49), 29-43.
- O'Brien, M.J. (1989) Characteristics of Male Adolescent Sibling Incest Offenders. Orwell, VT: Safer Society Press.
- O'Connor, A.A. (1987) Female sex offenders. *British Journal of Psychiatry*, 150, 615-620.
- Office of Juvenile Justice and Delinquency Prevention, OJJDP (1995) Juvenile Offenders and Victims: A National Report. Washington, DC: U.S. Department of Justice.
- Pelcovitz, D., Kaplan, S., Samit, C., Krieger, R. and Cornelius, P. (1984) Adolescent abuse: Family structure and implications for treatment. *Journal of Child Psychiatry*, 23, 85-90.
- Peters, J.J. (1976) Children who are victims of sexual assault and the psychology of offenders. *American Journal of Psychotherapy*, 30(3), 398-421.
- Petrovich, M. and Templar, D.I. (1984) Heterosexual molestation of children who later become rapists. *Psychological Reports*, 54(3), 810.
- Pettis, K.W. and Hughes, R.D. (1985) Sexual victimization of children: A current perspective. *Behavioral Disorders*, 10(2), 136-143.
- Pierce, R. and Pierce, L.H. (1985) The sexually abused child: A comparison of male and female victims. *Child Abuse and Neglect*, 9(2), 191-199.
- Pierce, R. and Pierce, L.H. (1985a) Analysis of sexual abuse hotline reports. *Child Abuse and Neglect*, 9, 37-45.
- Porter, E. (1986) Treating the Young Male Victim of Sexual Assault. Syracuse, NY: Safer Society Press.
- Powers, J. and Eckenrode, J. (1988) The maltreatment of adolescents. *Child Abuse and Neglect*, 12(2), 189-200.
- Powers, J. and Eckenrode, J. (1987) The Maltreatment of Runaway and Homeless Youth. Paper presented at the Third National Family Violence Research Conference, Durham, New Hampshire.
- Ramsay-Klawnsnik, H. (1990a) Sexually abused boys: Indicators, abusers, and impact of trauma. Paper presented at the Third National Conference on the Male Survivor, Tuscon, Arizona.
- Raybin, J.B. (1969) Homosexual incest. *The Journal of Nervous and Mental Disease*, 148(2), 105-110.
- Reinhart, M.A. (1987) Sexually abused boys. *Child Abuse and Neglect*, 11(2), 229-235.
- Renzetti, C.M. (1992) Violent betrayal: partner abuse in lesbian relationships, Newbury Park, California: Sage, 202.
- Risin, L.I. and Koss, M.P. (1987) The sexual abuse of boys: Prevalence and descriptive characteristics of childhood victimizations. *Journal of Interpersonal Violence*, 2(3), 309-323.
- Roeher Institute. (1995) Harm's way: The many faces of violence and abuse against persons with disabilities. North York, ON: Roeher Institute
- Rogers, C.M. and Terry, T. (1984) Clinical interventions with boy victims of sexual abuse. In I. Stewart and J. Greer (Eds.), *Victims of Sexual Aggression* (pp. 91-104). New York: Van Nostrand Reinhold.
- Rosenthal, J.A. (1988) Patterns of reported child abuse and neglect. *Child Abuse and Neglect*, 12(2), 263-271.
- Russell, D.E.H. (Ed.) (1983) The incidence and prevalence of intrafamilial and extrafamilial sexual abuse of female children. *Child Abuse and Neglect*, 7, 133-146.
- Russell, D.H. and Finkelhor, D. (1984) The gender gap among perpetrators of sexual abuse. In D.H. Russell (Ed.), *Sexual Exploitation: Rape, Child Sexual Abuse, and Workplace Harassment*. Beverly Hills, CA: Sage, 215-231.
- Ryan, C., Mathews, F. and Banner, J. (1993) Student Perceptions of Violence: Summary of Preliminary Findings. Toronto: Central Toronto Youth Services.
- Sandfort, T.G.M. (1984) Sex in pedophilic relationships: An empirical investigation among a nonrepresentative group of boys. *The Journal of Sex Research*, 20(2), 123-142.
- Sarrel, P.M. and Masters, W.H. (1982) Sexual molestation of men by women. *Archives of Sexual Behaviour*, 11, 117-131.

- Satullo, J., Russell, R. and Bradway, P. (1987) *It Happens to Boys Too*. Pittsfield, MA: Rape Crisis Center of the Berkshires Press.
- Scherzer, L.N. and Lala, P. (1980) Sexual offenses committed against children: Analysis of 73 cases of child sexual abuse. *Clinical Pediatrics*, 19(10), 679-685.
- Schiff, A.F. (1980) Examination and treatment of the male rape victim. *Southern Medical Journal*, 73(11), 1498-1502.
- Schultz, L.G. and Jones, P. (1983) Sexual Abuse of Children: Issues for Social Service and Health Professionals. *Child Welfare*, 62(2), 99-108.
- Sears, R.R., Maccoby, E.C. and Levin, H. (1957) *Patterns of Child Rearing*. Evanston, IL: Row Peterson and Co.
- Sebold, J. (1987) Indicators of child sexual abuse in males. *Social Casework*, 68(2), 75-80.
- Seidner, A.L. and Calhoun, K.S. (1984) Childhood sexual abuse: Factors related to differential adult adjustment. Paper presented at the Second National Conference for Family Violence Researchers, Durham, New Hampshire.
- Sepler, F. (1990) Victim advocacy and young male victims of sexual abuse: An evolutionary model. In M. Hunter (Ed.), *The Sexually Abused Male: Vol. I. Prevalence, Impact, and Treatment* (pp. 73-85). Lexington, MA: Lexington.
- Shengold, L. (1980) Some reflections on a case of mother/adolescent son incest. *International Journal of Psychoanalysis*, 61, 461-476.
- Shoor, M., Speed, M. and Bartlet, C. (1966) Syndrome of the adolescent child molester. *American Journal of Psychiatry*, 122, 783-789.
- Showers, J., Farber, E.D., Joseph, J.A., Oshins, L. and Johnson, C.F. (1983) The sexual victimization of boys: A three-year survey. *Health Values: Achieving High Level Wellness*, 7(4), 15-18.
- Simari, C.G. and Baskin, D. (1982) Incestuous experiences within homosexual populations: A preliminary study. *Archives of Sexual Behavior*, 11(4), 329-344.
- Smith, R.B., Bertrand, L.D., Arnold, B.L. and Hornick, J.P. (1995) *A Study of the Level and Nature of Youth Crime and Violence in Calgary*. Calgary: Calgary Police Service.
- Sobsey, D. and Varnhagen, C. (1988) *Sexual Abuse and Exploitation of People with Disabilities: A Study of Victims*. Ottawa: Health and Welfare Canada.
- Spencer, M.J. and Dunklee, P. (1986) Sexual abuse of boys. *Pediatrics*, 78, 133-137.
- Sroufe, L.A. and Ward, M.J. (1980) Seductive behavior of mothers of toddlers: Occurrence, correlates, and family origins. *Child Development*, 51, 1222-1229.
- Stark, R. and McEvoy, J. (1970) Middle Class Violence. *Psychology Today*, 4 November, 52-54, 110-112.
- Statistics Canada. (1991) *Children as Victims of Violent Crime*. Ottawa: Supply and Services Canada.
- Steele, B. and Alexander, H. (1981) Long-term effects of sexual abuse in childhood. In P.B. Mrazek and C.K. Kempe (Eds.), *Sexually Abused Children and Their Families*. Oxford: Pergamon Press. 223-234.
- Stein, S.M., De Miranda, S. and Stein A. (1988) Birth Order, Substance Abuse and Criminality. *Individual Psychology*, 44(4) Dec., 500-506.
- Steinmetz, S.K. (1977-78) The battered husband syndrome. *Victimology: An International Journal*, 2(3/4), 499-509.
- Straus, M.A. (1994) *Beating the Devil Out of Them: Corporal Punishment in American Families*, New York: Lexington Books.
- Straus, M.A. (1983) Ordinary violence, child abuse, and wife-beating: What do they have in common? In D. Finkelhor, R.J. Gelles, G.T. Hotaling and M.A. Straus (Eds.), *The Dark Side of Families*. Beverly Hills, CA: Sage.
- Straus, M.A. (1991) Discipline and deviance: Physical punishment of children and violence and other crime in adulthood. *Social Problems*, 38, 133-154.
- Straus, M.A., Gelles, R.J. and Steinmetz, S.K. (1980) *Behind Closed Doors: Violence in the American Family*. Garden City, NJ: Anchor Books.
- Summit, R. (1983) The child sexual abuse accommodation syndrome. *Child Abuse and Neglect*, 7, 177-193.
- Swift, C. (1979) The prevention of sexual child abuse: Focus on the perpetrator. *Journal of Clinical Child Psychology*, 8(1), 133-136.
- Thomas, J. and Rogers, C. (1983) A treatment program for intrafamily juvenile sexual offenders. In J. Greer and I. Stuart (Eds.), *The Sexual Aggressor: Current Perspectives on Treatment*, 127-143. New York: Van Nostrand Reinhold.
- Trocme, N. (1994) *Ontario Incidence Study of Reported Child Abuse and Neglect*. Toronto: Institute for the Prevention of Child Abuse.
- Tong, L., Oates, K. and McDowell, M. (1987) Personality development following sexual abuse. *Child Abuse and Neglect*, 11(3), 371-383.
- Tsai, M., Feldman-Summers, S. and Edgar, M. (1979) Childhood molestation: Variables related to differential functioning in adult women. *Journal of Abnormal Psychology*, 88, 407-417.
- Urquiza, A.J. (1993) *Adult Male Survivors of Child Sexual Abuse: Issues in Intimacy*. Paper presented at the 101st annual convention of the American Psychological Association, Toronto, ON.
- Urquiza, A.J. (1988) *The Effects of Childhood Sexual Abuse in an Adult Male Population*. Unpublished doctoral dissertation, Washington University, Seattle.

- Vander Mey, B.J. (1988) The sexual victimization of male children: A review of previous research. *Child Abuse and Neglect*, 12(1), 61-72.
- Vissing, Y.M., Straus, M.A., Gelles, R.J. and Harrop, J.W. (1991) Verbal aggression by parents and psychosocial problems of children. *Child Abuse and Neglect*, 15, 223-238.
- Wahl, C.W. (1960) The psychodynamics of consummated maternal incest. *Archives of General Psychiatry*, 3(August), 188-193.
- Wald, E.R., Woodward, C.L., Marston, G. and Gilbert, L.M. (1980) Gonorrheal disease among children in a university hospital. *Sexually Transmitted Diseases*, 7(2), 41-43.
- Walker, C.E., Bonner, B. and Kautman, K. (1988) *The Physically and Sexually Abused Child: Evaluation and Treatment*. New York: Pergamon Press.
- Walters, G. (1991) Psychological Determinants of Corporal Punishment. Paper presented at the Annual Conference of the Institute for the Prevention of Child Abuse, Toronto, ON.
- Wasserman, J. and Kappel, S. (1985) *Adolescent Sex Offenders in Vermont*. Burlington, VT: Vermont Department of Health.
- Waterman, C.K., Dawson, L.J. and Bologna, M.J. (1989) Sexual Coercion in Gay Male and Lesbian Relationships: Predictors and Implications for Support Services. *Journal of Sex Research*, 26(1), Feb., 118-124.
- Watkins, B. and Bentovim, A. (1992) The sexual abuse of male children and adolescents: A review of current research. *Journal of Child Psychology and Psychiatry*, 33, 197-248.
- Wauchope, B. and Straus, M.A. (1990) Physical punishment and physical abuse of American children: Incidence rates by age, gender, and occupational class. In M.A. Straus and R.J. Gelles (Eds.), *Physical Violence in American Families: Risk Factors and Adaptations to Violence in 8,145 Families*. New Brunswick, NJ: Transaction Books.
- Welsh, R.S. (1978) Delinquency, corporal punishment, and the schools. *Crime and Delinquency*, 24, 336-354.
- Whatley, M.A. and Riggio, R.E. (1993) Gender differences in attributions of blame for male rape victims. *Journal of Interpersonal Violence*, 8(4), 502-511.
- Widom, C.S. (1989) Child abuse, neglect, and adult behavior: Research design and findings on criminality, violence, and child abuse. *American Journal of Orthopsychiatry*, 59(3), July, 363.
- Widom, C.S. (1989) The cycle of violence. *Science*, 244, 160-166.
- World Health Organization. (1995) *Street Children, Substance Abuse and Health: Training for Street Educators* (draft curriculum). Geneva, Switzerland: WHO.
- Yates, A. (1982) Children eroticized by incest. *American Journal of Psychiatry*, 139(4), 482-485.

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14. 'The Receding Tide': Understanding Unmet Needs in a Harsher Economic Climate The Young Foundation 2009
15. Presentation: All Party Parliamentary Group on Men's Health, Jan 2009 Professor Louis Appleby National Director for Mental Health England
16. Men Who Were Sexually Abused in Childhood and Subsequent Suicidal Ideation: Community Comparison, Explanations & Practice Implications Patrick O'Leary and Nick Gould: Bath University 2008.
17. Men & Healing: Theory, Research, and Practice in Working with Male Survivors of Childhood Sexual Abuse: The Cornwall Inquiry The Men's Project Ottawa 2009.
18. Care and Support Needs of Men Who Survived Childhood Sexual Abuse: Report of a qualitative research project, Sarah Nelson CRFR The University of Edinburgh 2009.
19. See No Evil, Hear No Evil, Speak No Evil: Why Do Relatively Few Male Victims Of Childhood Sexual Abuse Receive Help For Abuse - Related Issues In Adulthood? Guy Walker, Liz Offen, Glenn Waller: University of Birmingham and University Of London 1997
20. Men and Mental Wellbeing - Encouraging Gender Sensitivity Alan White Centre for Men's Health Leeds Metropolitan University Chair, The Men's Health Forum 2006
21. Men's Health in Bradford - Developing the Evidence Base for Practice Dr Alan White & Professor Keith Cash School of Health & Community Care Leeds Metropolitan University 2008
22. Why Is Men's Health Important? Community Health UK 2002.
23. The Bradford & Airedale Health of Men Initiative: A study of its effectiveness in engaging with men: Centre for Men's Health Faculty of Health Leeds Metropolitan University January 2008
24. Gender, Equality & Human Rights: Access to Health & Social Services in Northern Ireland 2008
25. The Gender & Access to Health Services Study Final Report Department Of Health 2008

26. Gender and Health: The case for gender-sensitive health policy and health care delivery Oonagh O'Brien and Alan White Kings Fund 2003.
27. The Gender Equality Duty and You: Department Of Health and Men's Health Forum 2008.
28. Human Rights in Healthcare: A Framework for Local Action Department Of Health 2008
29. Human Rights in Healthcare Learning Event 'Report' Department of Health 2008
30. Human Rights and Commissioning 'Report' Department Of Health 2008
31. Human Rights in Healthcare A Short Introduction Department Of Health & British Institute of Human Rights 2008.
32. The NHS Constitution 'The NHS Belongs To Us All' Department of Health 2009.
33. The Commission for Equality and Human Rights: An Integrated Approach to Human Rights Liberty 2006.
34. Fairness and Freedom: The Final Report of the Equalities Review Panel Chair Trevor Phillips 2007
35. SAVI & SAVI Revisited: Sexual Abuse In Ireland 'A Study' of experiences, beliefs and attitudes concerning sexual violence in Ireland: The Dublin Rape Crisis Centre & The Royal College of Surgeons Ireland.
36. Research Proposal for Survivors West Yorkshire SAVVY - Sexual Abuse and Violence in Bradford/ West Yorkshire (a local study of experiences, beliefs and attitudes concerning sexual violence) 2007.
37. Services for Victim/Survivors of Sexual Assault: Identifying Needs, Interventions and Provision of Services In Australia: Jill Astbury Victoria University 2006.
38. The Crisis in Rape Crisis: Women's Resource Centre and Rape Crisis (England and Wales) 2008.
39. Map Of Gaps: The Post Code Lottery Violence Against Women Support Services In Britain. End Violence Against Women and Equality and Human Rights Commission 2009.
40. Combining Voices: Supporting Paths of Healing In Adult Female & Male Survivors Of Sexual Abuse: Dr Fred Mathews: National Clearinghouse on Family Violence Health Canada 1995.
41. The Invisible Boy: Revisioning the Victimization of Male Children and Teens Dr Fred Mathews National Clearinghouse on Family Violence Health Canada 1996.
42. Yes You Can! Working with Survivors of Childhood Sexual Abuse Second Edition by Sarah Nelson & Sue Hampson The Scottish Government, Edinburgh 2008
43. Information and Help After Rape and Sexual Assault: The Scottish Government, Edinburgh 2008
44. CEOP Annual Review 2007 - 2008
45. Child Sexual Abuse: 'The Female Offender', CEOP Seminar programme 2009.
46. Kids Company: Advertising Campaign 2008/9
47. 'I was Raped' Texas State Sexual Violence/Abuse Advert 2008
48. Dublin Rape Crisis Advertising Campaign 2008.
49. (Wo)Men Speak Out - Newsletter including The Villain article.
50. Shatterboy documentary.

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The Grassroots Grants scheme kindly funded us to take the 'A View' project forward - we thank them for their professionalism and vision.

We would like to single out Janet Ford at CNet (www.cnet.org.uk) for special thanks. Over a period of six years Janet has consistently demonstrated how professional community development and empowerment should be practised. These reports would have been much harder to bring into being without her support and advocacy. That support has helped to enable sexual violence issues to be aired creatively and professionally, and has thereby proactively supported the large 'community of interest' that survivors of sexual crime represent, bearing in mind that 21% of females and 11% of males will have experienced sexual crime according to the latest agreed prevalence research as highlighted by The Survivors Trust (www.thesurvivorstrust.org).

It has also been very empowering to receive such openness and sharing from our allies in North America. Many thanks to Rick Goodwin, Dr Harvey Lemelin, Mike Lew, Dr Fred Mathews and Christopher de Serres. 'A View From Inside The Box III' could not have happened without your generosity, gentlemen - way to go.

The men at the first Fire in Ice project in Liverpool, who wrote 'Why Don't Men Talk?', have left us a powerful message evidencing how society constructs 'prisons of cultural silence' for males who have been abused. We hope that republishing their courageous writings will allow us to reflect on the harm silencing does to male victims/survivors and to us all in society.

We would especially like to thank Professor Liz Kelly for agreeing to support 'A View From Inside The Box III'. We hope her contribution will emphasise that leading members of the women's movement in the UK are not against the support and empowerment of male victims/survivors of sexual crime.

It's our hope to create even more local and international sharing for the next in the 'A View' series. 'A View IV' will be a film documentary exploring the positive possibilities of recovery. It will look at 'hope' and 'empowerment' for women and men - what supports these and what hinders them? It would be our wish to see many more individuals and agencies helping us make that a really positive opportunity to look inside the box and gather evidence of the amazing outcomes we might collectively create as a community if we deal with male and female survivors positively.

To anybody we've forgotten - thank you as well, these projects are true collaborations.

Survivors West Yorkshire

March 2009

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Grass Roots Grants administered in Bradford by the Community Empowerment Network (CNet)

grassroots
grants



Research Links

Database on Male Abuse

Dr Jim Hopper is a lecturer at Harvard Medical School. His database on male abuse research is the worlds most authoritative and academically robust to our knowledge.

www.jimhopper.com/male-ab

Ministry of Women's Affairs

The New Zealand Governments national research project to understand victim/survivor needs - male and female.

www.mwa.govt.nz/our-work/svrproject



Sexual Violence Research Initiative

A new international research forum and database project.

www.svri.org



Male Survivor

The worlds leading male survivor support organisation (research page).

www.malesurvivor.org/library.html



The Men's Coalition

The Men's Coalition is a new organisation that aims to put issues of concern to men and boys such as health, parenting and caring, relationships, education, employment, crime and violence firmly on the public policy agenda

This new agency is about to publish its latest research into how men can be engaged with in tackling interpersonal violence. Their mission is to educate policy makers on the needs of men.

www.themenscoalition.org.uk



United Kingdom Specialist Male Support and Advice Links

Mankind

Support for men who have been sexually abused.

Since 2000, we have been delivering specialist support services to men (18+) who have experienced childhood sexual abuse and/or adult sexual assault at any time in their lives. Mankind developed from the need for an agency in Sussex that could provide appropriate services to men. Funded by the Big Lottery, we are the only service of its kind in the South East

www.mankindcounselling.org.uk



Survivors UK

Offers a national helpline and London based counselling.

www.survivorsuk.org



Swindon Survivors

Offers a national helpline and Swindon based counselling.
www.survivorsswindon.com

Internet Support Services for Males

www.malesurvivor.org
www.aest.org.uk

Directory & Book Services (DABS)

Specialist Sexual Violence/ Abuse book supplier - Male and Female Victim/Survivors
www.dabsbooks.co.uk

National Support and Signposting Services**The National Association for People Abused in Childhood**

This service has the most comprehensive database on services in the UK. They also offer a national support and signposting service as resources allow.

www.napac.org.uk

**Rape Crisis**

Our vision is of a world free from all forms of sexual violence.

Rape Crisis (England and Wales) provides co-ordination for the national network of Rape Crisis Centres across England and Wales. Rape Crisis Centres provide a range of specialist services for women and girls that have been raped or experienced another form of sexual violence - whether as adults or as children. Some Rape Crisis services offer support to men - all offer signposting

www.rapecrisis.org.uk

**The Scottish Governments Victim/Survivor Information Hub.**

www.survivorscotland.org.uk

**The Survivors Trust**

The largest association of Specialist Sexual/Violence services in Europe.

www.thesurvivorstrust.org



West Yorkshire Specialist Sexual Violence/Abuse Services For Men

Kirklees Rape & Sexual Abuse Counselling Centre

Offers counselling to males in the Kirkless area only.

www.krasacc.co.uk



Relate Keighley & Craven

Relate run a small group therapy service for men called 'The Shed'

www.relate-keighley.co.uk



STAR: Surviving Trauma After Rape

A free Support Service for Females and Males aged 14 and over, Offering Counselling, Emotional and Practical Support Throughout West Yorkshire

The project is not designed to support young people or adults who were abused as children.

www.starproject.co.uk



Survivors West Yorkshire

Signposting/advice and general telephone support service for males and females across West Yorkshire.

www.survivorswestyorkshire.org.uk

survivorswy@mac.com



International & UK contributors

The Men's Project

www.malesurvivor.on.ca



Dr Harvey Lemelin

<http://outdoorrec.lakeheadu.ca/index.php/?display=page&pageid=2>

Mike Lew

<http://nextstepcounselling.org/>



Dr Fred Mathews

www.ctys.org



Christopher & Ophelia de Serres

www.womenspeakoutnow.com



London Metropolitan University

Professor Liz Kelly

www.cwasu.org



Many thanks to the Canadian Government for allowing the republication of 'Invisible Boy'

