



The scope of male rape: A selective review of research, policy and practice



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ABSTRACT

Much work has been undertaken to publicize the plight of female rape survivors, but until recent years the rape and sexual assault of adult males received little research or public attention. The aim of this paper is to selectively review the literature on male survivors of sexual violence highlighting, where relevant, timely implications for policy and practice. First, changes in UK legislation relating to male rape are discussed, with cross-national comparisons made against United States, Australian and Canadian statute to overview developing definitions and legal good practice. Second, prevalence issues relating to the under-reporting and long-term consequences of male sexual victimization are outlined. Third, the current dearth of UK service provision for male rape survivors is reported. Finally, literature on how male rape myth acceptance, victim blaming and homophobia relate to the secondary victimization of male survivors is considered. Suggestions for continued research in this developing area of work are made.

1. Introduction

Since the 1970s researchers from the radical feminist movement have publicized sexual violence as a social problem with the emphasis given to the plight of female survivors of sexual crime. Feminists have conceptualised the sexual victimization of women by men as a manifestation of power within a rape-supportive patriarchal society (e.g., [Brownmiller, 1975](#)). As a consequence many support services have been developed for women coming to terms with the negative effects of sexual victimization. Without question, feminism has made a considerable contribution to the academic and public awareness of rape ([Fisher & Pina, 2013](#)).

However, the framing of sexual violence as a feminist issue has served to distance male survivors of sexual crime from the research spotlight ([Cohen, 2014](#); [Davies, 2002](#); [Javaid, 2016a, 2016b](#); [Javaid, 2017](#); [Lowe & Balfour, 2015](#)). Historically, the sexual victimization of adult males was deemed to be, if not impossible, then certainly rare. As such, service provision for male survivors was thought unnecessary and remained under-developed relative to those for female survivors ([Javaid, 2017](#)). A flurry of research since the mid-1990s, particularly over the last 10 years, has begun to explore the prevalence, scope and consequences of male sexual victimization, with new ideas for service delivery to help male survivors now considered crucial ([Lowe & Balfour, 2015](#)). This work, coupled with changes in UK legislation to equalize the legal status of male versus female rape, together and increased knowledge about how male survivors of sexual assault are viewed in

wider society (see [Davies & Rogers, 2006](#)), makes the present review of the extant literature on male sexual assault a timely addition to the current knowledge-base.

This paper offers a selective but wide-ranging overview of the academic literature on male survivors of sexual violence highlighting, where relevant, implications for policy and practice. The primary focus of the legal aspects of this review takes a UK perspective, due to the recent and noteworthy legislative changes across England and Wales, Scotland and Northern Ireland. Issues concerning the UK's legal definition of male rape are discussed, with cross-national comparisons made against legislation in three Westernized English-speaking nations - namely the United States, Australia and Canada - to highlight developing good practice. These countries were chosen specifically because their sexual offence laws are arguably more developed than those of the UK. Second, prevalence issues relating to the under-reporting and long-term consequences of male sexual victimization are outlined. Third the current dearth of UK service provision for male rape survivors is reported. Finally, literature on how male rape myth acceptance, victim blaming and homophobia relate to the secondary victimization of male survivors is discussed. For current purposes only research on sexualized assaults conducted in community settings are included with studies that concern institutionalized sexual offences, wartime rape and/or sexual abuse on males younger than age 16 years (i.e. below the UK's legal age of consent) excluded due to space limitations.

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1.1. Male rape and the law

The UK's [Criminal Justice and Public Order Act, 1994](#) re-defined adult rape to include non-consensual anal as well as vaginal penile penetration, removing the previous term of buggery from statute ([Fisher & Pina, 2013](#)). This meant that for the first time male rape was seen through legal sentencing to be of equal status to that of female rape. The more recent [Sexual Offences Act, 2003](#) (England and Wales) went further to re-define sexual offence legislation with a series of more explicit definitions than those included in previous legislation (i.e. the 1994 Act and the older [Sexual Offences Act, 1956](#)). Specifically, the 2003 Act re-defined rape to include non-consensual penile penetration of the mouth thereby removing the rather vague, broad ranging crime of “indecent assault” from the statute books. However, as the current UK rape definition requires *penile* penetration, rape still cannot be legally committed by a female ([Fisher & Pina, 2013](#)).

Other serious sexual offences have also been re-defined by the [Sexual Offences Act, 2003](#). First, the seemingly vague concept of “indecent assault” was reframed into two less ambiguous criminal acts. The first was the newly created offence of “assault by penetration” which makes the non-consensual sexual penetration *by any object* an illegal act. This is seen as having identical harm and culpability factors to those of rape and carries a maximum penalty of lifetime imprisonment ([Sentencing Council UK, 2014](#)). Thus for the first time in UK history, a female sexual offender who commits a penetrative sexual offence could receive a sentence comparable to that of a male sexual offender; this despite it still not being possible to convict UK women of legally-defined “rape”. Second, the 2003 Act also added forced, non-penetrative sexual acts to the legal definition of sexual assault accompanied by a maximum sentence of 10 years imprisonment ([Sentencing Council UK, 2014](#)).

In Scotland rape continued to be a gender-specific (male-on-female) crime until the introduction of the [Sexual Offences \(Scotland\) Act, 2009](#) where rape was reclassified as:

The intentional or reckless penetration of the penis (to any extent) into the vagina, anus or mouth of another person, without that person consenting and without any reasonable belief that consent was attained (Section 1).

In Northern Ireland rape law has changed twice this century. First, The [Criminal Justice \(Northern Ireland\) Order, 2003](#) redefined rape to include any act of non-consensual intercourse by a man with a *person* thereby introducing the concept of male, as well as female, rape into Northern Irish legislation. The [Sexual Offences \(Northern Ireland\) Order, 2008](#) then extended the 2003 definition to include oral rape, thus bringing Northern Irish law in line with that of England and Wales.

The fact these changes to the legal status of male sexual assault survivors have only been made within the last thirteen years - less so in Scotland and Northern Ireland - highlight the extent to which the UK lags behind that of other nations in this respect. Mid-way through the second decade of the twenty-first century, it remains the legal fact that, in the UK, rape can only be committed by someone possessing a penis.

Other Westernized English-speaking nations have seen more rigorous moves towards a gender-neutral definition of rape. For instance, the legal definition of rape within US law - as defined by the Federal Bureau of Investigation's Uniform Crime Report (UCR) had been unchanged since 1927. In January 2012 this was amended to:

The penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the victim ([United States Department of Justice, 2012](#)).

Thus for the first time in the United States, the definition of rape covers *any* gender of victim and offender, not just women raped by men. Additionally, US law now recognizes that rape with an object can be as serious and traumatic as non-consensual penile penetration. With

the UCR determining how crime is viewed in the US, such changes were welcomed by all rape advocacy organizations.

Even though most US states have expansive definitions of rape in their criminal codes, traditionally UCR nationally-reported statistics were inaccurate and undercounted. The widened inclusivity of this new definition, coupled with improvements to recording accuracy, means *reported* crimes of rape are likely to increase ([United States Department of Justice, 2012](#)). Although this UCR does not change criminal codes or impact on prosecution at the Federal or State levels, more accurate prevalence rates mean rape survivors of both genders will have a louder voice than was previously possible. This is especially true of men whose legal status as “rape victim” had previously been denied.

As in the US, Australia has seen legislative changes to remove the gendered definition of rape from statute, albeit over a more protracted period of time and with some variation across individual states. In Victoria for instance, The [Crimes \(Rape\) Act, 1991](#) has long defined rape as occurring when:

A person commits rape if: (a) he or she intentionally sexually penetrated another person without that person's consent while being aware that the person is not consenting or might not be consenting; or (b) after sexual penetration he or she does not withdraw from a person who is not consenting on becoming aware that the person is not consenting or might not be consenting (8A, 38, 2).

Canadian law has gone even further to gender-neutralize sexual offence legislation. By passing Bill C-127 in 1983 Canada abolished the offence of rape, replacing it with three graded categories of sexual assault. First, the category of “basic sexual assault” made sexual touching or sexual intercourse without consent an illegal act. Second, “sexual assault with a weapon or threatened violence” differentiated between sexual victimization with versus without accompanying physical threat. Finally, “aggravated sexual assault” differentiated between victims who wounded or disfigured during their assault from those who were not ([Gall & Somerville, 2013](#)). Thus, by abolishing the term “rape” from Canadian legislation sexual assault became a crime committable by *both* sexes, with proof of sexual penetration by the penis no longer a requirement for a serious sexual offending.

In sum, it would seem that despite changes to its sexual offence legislation the UK still retains the notion of rape as a gendered crime and in this sense lags some way behind countries such as the US, Australia and Canada. The clear implication for UK law is that rape should be redefined to replace any gender-specific terms - most notably, reference to a penis - with gender-neutral terminology. Further changes seem necessary to bring UK sexual offence laws in line with those of comparable Westernized English-speaking nations.

2. The reporting of sexual offences by males

Evidence exists to suggest sexual violence against women is vastly under-reported at least in terms of the non-disclosure to relevant authorities ([Fisher, Daigle, Cullen, & Turner, 2006](#); [Ullman, 2010](#); [Zinzow & Thompson, 2011](#)) with figures indicating non-disclosure to authorities is *at least* as prevalent amongst male as it is amongst female survivors ([Abdullah-Khan, 2008](#); [Peterson, Voller, Polusny, & Murdoch, 2011](#)). In 2002, approximately 5000 sexual assaults (including 852 rapes) of men were recorded in UK Home Office statistics (see [Davies & Rutland, 2007](#)). In the last decade UK Home Office figures show that the reporting of male sexual victimization has increased considerably. In 2010–11, police-reported figures for all sexual offences reached 54,982 cases. Split across victim gender recorded rapes upon women had increased to 14,624 offences (up 5%) and upon men to 1310 offences (up 12%) over the previous year ([Osborne, 2011](#)).

More recently, a joint report by the UK's Home Office, Ministry of Justice, and Office for National Statistics ([Ministry of Justice, 2013](#)) estimated there to be between 430,000 and 517,000 adult sexual offence victims every year, of which an estimated 54,000 to 90,000

victims were men. These figures were derived from the Crime Survey for England and Wales (CSEW) where crime reporting is anonymous. As such, CSEW data are likely to be far more accurate than official police figures where victims “come forward” and are known to the authorities.

Whilst there has been increased media interest in the topic of sexual victimization against men - indeed, some male survivors have used social media to disclose and seek support for their abuse (see e.g. Kulze, 2013; Myrntinen, 2014; Rosin, 2014) - it remains the case that reported sexual crimes still only scratch the surface of actual offence rates, with some male survivors never disclosing their assault to anyone, nor receiving adequate support in the longer-term (Javaid, 2016b; Lowe & Balfour, 2015). Indeed, the gross under-reporting of sexual offences generally but against men in particular has caused several writers to suggest there is a “justice gap” in sexual victimization statistics (Kolivas & Gross, 2007; Temkim & Krahé, 2008).

Studies have investigated the reasons why men do not disclose their sexual victimization to the appropriate authorities. Reasons for men's under-reporting of their own sexual victimization are many and include a fear of being disbelieved, blamed, exposed to other forms of negative treatment and/or concern that such disclosure might interfere with one's masculine self-identity (e.g. Davies, Walker, Archer, & Pollard, 2010; Hodge & Canter, 1998; Javaid, 2016b; King & Woollett, 1997; Monk-Turner & Light, 2010; Pino & Meier, 1999; Sable, Danis, Mauzy, & Gallagher, 2006; Walker, Archer, & Davies, 2005a, 2005b). Influences of sexual assault on men's identity are considered in more detail in the next section.

In one of the earliest studies of male rape disclosure King and Woollett (1997) found that only 17 out of 115 men (14.8%) who received help from Survivors UK - a UK-based male rape support group - had reported their rape to the police. Of these, nearly a third (29.4%; $n = 5$) found police reactions to be decidedly negative. In a more recent study of 40 UK male rape survivors, Walker et al. (2005a) found just five (12.5%) of those sampled had reported their ordeal to the police, with four of the five claiming their experience with the police was poor. In addition, Rumney (2008) found gay male survivors may experience less sensitive treatment from police officials than their heterosexual counterparts; a claim that mirrors experimental work on perceptions of male rape (discussed in detail later). Jamel, Bull, and Sheridan (2008) investigated opinions about police (welfare) service provision amongst female and male rape survivors. Both genders reported a lack of confidence in the police with, noticeably, this more pronounced amongst males. However, male survivors' lack of confidence in the police may not be completely unfounded given that some specialist police officers themselves believe male survivors get poor treatment (Javaid, 2016c). The fact that any (male) survivors brave enough to report their sexual victimization to the police feel unsupported and/or lack confidence in the criminal justice system is reason enough to suggest further improvements are needed (cf. Javaid, 2016c).

3. Service provision for male survivors suffering complex trauma

According to Scarce (1997) there is no typical response to male sexual victimization, with post-assault reactions ranging from apparent calm at one extreme to virtually complete emotional breakdown at the other. Studies have shown associations with a wide and complex array of long-term negative effects on psychological functioning (e.g., anxiety, depression, post-traumatic stress disorder, anger, hostility, generalized vulnerability, stigma, shame, guilt, embarrassment and self-blaming); behavior (e.g., self-harming, substance abuse, and employment problems); the ability to maintain close personal relationships (e.g., intimacy, trust and attachment difficulties, emotional withdrawal, parenting problems, sexual dysfunction and/or heightened promiscuity); and general self-image (e.g. low self-esteem, perceived changes to one's gender identity, sexual orientation and/or sense of masculinity) (e.g., Bullock & Beckson, 2011; Coxell & King, 2010; Peterson et al., 2011; Tewksbury, 2007; Vearnals & Campbell, 2001;

Walker et al., 2005a, 2005b). Indeed, the term “complex trauma” is now frequently used to encompass the wide range of symptoms not covered by the PTSD diagnosis alone, with the former described as both cumulative and underlying a range of post-assault symptomatology (see Wall & Quadara, 2014 for a detailed discussion).

It has long been recognized that some men will seek medical help to treat the immediate physical consequences of rape (e.g., anal fissures or bleeding; see Tewksbury, 2007) yet, as noted earlier, refrain from disclosing the sexualized and/or victimized nature of their symptoms (e.g., Frazier, 1993; Light & Monk-Turner, 2008; Walker et al., 2005a). For instance, Walker et al. (2005a) found only 14 men (35.5% of their UK sample) utilised post-rape medical services with, of these, only five (12.5% of the entire sample) disclosing the root cause of their injuries. The remainder disclosed only their physical injuries. Similar figures have been reported in both US (Light & Monk-Turner, 2008) and Australian (Wall & Quadara, 2014) samples.

Many men find it especially difficult to seek appropriate post-assault support such as counselling, psychotherapy or psychiatric care. This may be because they lack the willingness to approach service providers, because services were not deemed appropriate for their needs as men, or because services were unavailable altogether (Walker et al., 2005a, 2005b). Although 58% of men in Walker et al.'s research sought some form of psychological intervention, most of them had taken several years to do so. With psychological intervention a key factor in preventing serious mental health consequences (e.g., suicide attempts; Walker et al., 2005b), the need for men to be offered appropriate support after sexual victimization seems obvious.

The last decade has seen an increase in the number and range of support services available for male survivors in the UK. However, both the quantity and quality of such provision remains a “postcode lottery” with a clear nationwide policy on how to treat male survivors of sexual victimization still absent. Javaid (2017) reported that to get treatment from third sector services, they are often placed on waiting lists littered with ageist and socio-demographic inequality, with some men waiting a long time for support. Indeed, despite increased publicity UK-based services have, for the most part, failed to address the complex needs of male sexual assault survivors which are, by definition, varied, multi-faceted and specialist (Lowe & Balfour, 2015).

At present, most therapeutic programmes involve the isolated treatment of particular post-assault symptomatology and do not appear to resolve the deep-seated difficulties caused by male sexual violation (Wall & Quadara, 2014). Worryingly some survivors spend many years, not to mention thousands of pounds, undergoing intensive psychotherapy to work on issues relating to the complex trauma associated with sexual assault without ever reaching satisfactory resolution (see Lowe & Balfour, 2015 for further discussion). With appropriate psychological intervention in many cases literally the difference between life and death (Walker et al., 2005b) it cannot be stressed enough how much this situation needs to improve.

4. Male rape myths, blame and homophobia as forms of secondary victimization

Despite positive legislative changes, media interest and increased academic research in the scope of male sexual victimization public and to some extent and police perceptions of this topic remain shrouded in misconceptions and ignorance (see e.g., Javaid, 2016c; Rumney, 2008). For example, societal expectations about male gender role and the concept of male (hetero)sexuality impacts significantly on men's understanding of their own sexual victimization (Javaid, 2016b; Lowe & Balfour, 2015). As a consequence many male survivors start to question their gender and/or sexual identity following sexual assault (e.g., Davies et al., 2010; Walker et al., 2005a). Additionally, many men will blame themselves first for not stopping the attack and then for struggling with its aftermath often under the misguided assumption that as men they should be able to cope with such adversity. Indeed, the

sense of not living up to the masculine ideal of being “tough enough” to protect oneself, and the fear of ridicule or blame that ensues, leaves men who have been sexually assaulted less likely to seek help from others (Javaid, 2016b; Lowe & Balfour, 2015).

The collective voice of male survivors has started to be heard albeit slowly (Lowe & Balfour, 2015). Davies (2004) analysed qualitative data from the sample of 40 UK male rape survivors who were asked to give, in writing, any advice they could offer police and therapists about male rape. The most common responses were first that men should be afforded the same type of generalized support as given to women (e.g. being listened to and believed by the professionals to whom they disclose) and second, that formal support services should publicize the notion that men can also become victims of rape. As one respondent stated:

When male rape victims read rape literature in general it has not been written for them primarily. It rarely refers to men as victims, only perpetrators. Literature should be written specifically to inform and help the male rape victim (p.17).

When asked which types of support they would like to see made available to male survivors, the same respondents listed services such as male rape crisis centres, 24-h helplines, specially trained police officers, easier access to available therapies and the expansion of male rape support groups to all major towns. Worryingly, in this study, a sizeable proportion of respondents commented on the homophobic views held by many rape support professions (Davies, 2004; see also Walker et al., 2005a). Despite the recent increase in appropriate welfare provision the number of male survivors approaching specialist UK services each year remains small (in their hundreds), with those attaining help dispersed across general mental health else substance abuse services (Balfour, personal communication, June 2014). The report produced by *Survivors West Yorkshire (2006)* entitled “A View from Inside the Box” highlighted this issue a decade ago; it is a key issue that remains today.

Given that most male survivors fail to report their assault to authorities else face barriers to service provision, issues concerning the nature of social beliefs about male sexual victimization warrant consideration as a possible factor in shaping survivor's post-assault reactions. Findings from the female rape literature suggest other peoples' negative reactions tend to reinforce the survivor's own negative attributions, increase the likelihood of self-blame, lower self-esteem and ultimately, generate secondary victimization (see e.g. Ullman, 2010).

Negative stereotypes about male sexual victimization are also prevalent. Associated male rape myths - prejudicial and false beliefs about the victims and perpetrators of sexual crime against men (Struckman-Johnson & Struckman-Johnson, 1992) - stem from traditional views of masculinity within which men are automatically assumed to be strong, assertive, sexually dominant and heterosexual (Herek, 1986). Whilst research on this topic is still in its infancy (for a review see Turchik & Edwards, 2012) it is known that male rape myths correlate with both traditional gender role stereotypes and homophobia (e.g., Davies, Gilston, & Rogers, 2012; Kassing, Beesley, & Frey, 2005) as well as more pronounced victim blaming (e.g., Davies & McCartney, 2003; Sleath & Bull, 2010). Such negative perceptions also form the basis of male victim's self-blaming which is further compounded by secondary victimization from others (Davies, 2002; Sleath & Bull, 2010, see also Graham, 2006). As for women, experiencing secondary victimization is yet another barrier that prevents male sexual assault survivors reporting and/or seeking vital support following their ordeal (cf. Williams, 1984).

One issue that seems especially problematic for male survivors is homophobia. Men who are sexually attracted to the male gender sometimes feel rape is a punishment for being homosexual (Walker et al., 2005a). Such internalised homophobia may cause some gay men previously comfortable with their homosexuality to become distressed following sexual victimization because they (erroneously) believe their sexuality somehow caused the assault against them. This is likely to be

equally, if not more, distressing for gay and bisexual men who have yet to come to terms with their sexual orientation (Davies, 2002; Davies & Rutland, 2007). As already highlighted, a loss of masculine identity and/or change in one's subjective sexual orientation can lead to a range of long-term psycho-sexual and relationship difficulties (e.g., Walker et al., 2005a).

Internalised homophobia, guilt and self-blame following sexual assault can be compounded by secondary victimization through the homophobic reactions of those to whom the survivor discloses. This is true regardless of whether disclosure is to officials, family or friends (Walker et al., 2005a). Moreover, numerous studies employing a range of hypothetical scenarios reveal that, in general, a male victim portrayed as gay is blamed more for his own sexual assault than one portrayed as heterosexual (e.g., Burt & DeMello, 2002; Davies, Pollard, & Archer, 2001; Davies, Pollard, & Archer, 2006; Davies & Rogers, 2006; Davies, Rogers, & Bates, 2008; Wakelin & Long, 2003; White & Yamawaki, 2009). It would seem homophobic reactions are a key reason why third party observers make negative attributions about male victims of sexual assault.

More understanding of the nature and triggers of negative perceptions towards male sexual assault victims should be a key aim of academics working in sexual aggression research. Experimental investigations help inform the police, support services and survivors about the particular “hot spots” of when, where and why negative attributions might arise, the various myths male victims are subject to (e.g., the homophobic notion that gay and bisexual victims of male-perpetrated sexual assault are more blameworthy), and the nature and likelihood of secondary victimization. Support services also need to remember that male victims of female-perpetrated sex crimes are likely to minimize the seriousness of, and their feelings about, this particular type of assault (Struckman-Johnson & Struckman-Johnson, 1992; Davies et al., 2006). By similar reasoning, understanding the nature and extent of negative male rape stereotypes can be used to train both police officers and therapists about their own implicit prejudices against the very men they are seeking to help.

5. Conclusions

In recent years, positive changes have been made to reduce inequalities in UK law and to challenge the deeply held negative stereotypes about male sexual victimization. But clearly much work remains. Many important obstacles must be overcome if male survivors are to be treated without prejudice or (implicit) discrimination. In UK law equality with female survivors could be advanced by changing the current definition of rape to incorporate only gender-neutral terminology as is the case in American, Australian and Canadian legislation.

In welfare and therapeutic service provision more could be done to ensure adequate training and implementation of appropriate support to male survivors, regardless of where in the UK they reside (Javaid, 2017). Equipping service providers with the necessary tools to provide the specialist support that best serves male survivors should be a key objective of all sexual violence services in the UK. Drawing on information based on best practice for female survivors of sexual violence is not adequate to treat men, who oftentimes have different issues requiring of support service expertise than do women (Javaid, 2017). The impact of nearly a decade of austerity in the UK has resulted in lack of funding for third sector organizations means that staff training and availability is a continual concern.

In academia, further research is needed to more fully understand the negative attitudes, attributions, stereotypes and reactions many individuals - in both public and professional domains - have for men who undergo the complex trauma of rape or sexual assault. Finally, within society at large current prejudices - particularly against minority groups such as gay men - need transforming into greater understanding and compassion for those who, through no fault of their own, suffer sexual violation. Generating positive media attention and initiating re-

educational campaigns (in, say, schools, colleges and universities) are just two of the ways this might be started. It is hoped the current discussion stimulates further interest in this important topic so that existing challenges can be overcome at a faster pace than presently occurring.

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