

Partner violence against heterosexual and gay men: Prevalence and correlates

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Partner violence against heterosexual and gay men: Prevalence and correlates

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ABSTRACT

Female victims of intimate partner violence (IPV) have been the focus of a substantial amount of research. However, the subject of male victims of IPV remains a controversial topic, and one which has been comparatively neglected within the literature, despite some findings suggesting that men are victimized by intimate partners at an equivalent, or even higher rate than women. This paper reviews the literature on male victims of IPV, both within opposite and same-gender relationships, focusing on the prevalence and correlates of IPV, as well as exploring the relationship between IPV and ethnicity. According to the literature reviewed, the prevalence of female perpetrated IPV against heterosexual male victims ranges from 0.2% to 93%, homosexual male victimization ranges between 1.8% and 93.7%, and heterosexual female victimization ranges between 1.3% and 86% depending on the type of IPV included, whether the reference period includes the past 12 months, or lifetime experience, and the method used to assess IPV. These data indicate that victimization is as much an issue for men as it is for women. In addition, it appears that men of certain ethnicities may be more at risk than others. Finally, the empirical literature which examines the correlates of male victimization indicates that male victims in heterosexual and gay relationships share many correlates. Unfortunately however, methodological weaknesses in the available literature and a lack of research in some areas restrict the extent to which conclusions can be drawn, and findings generalized. Recommendations for future research are made.

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1. Introduction

Domestic violence is defined by the Home Office (n.d.) as “threatening behavior, violence or abuse between adults who are, or have been in a relationship, or between family members” and “can affect anybody, regardless of their gender or sexuality”. The Home Office also states that the abuse can be “psychological, physical, sexual or emotional”. Intimate partner violence (IPV) involves the same behavior and violence, but excludes violence between family members other than within past or current romantic relationships (Finney, 2004, p. 1). Until relatively recently, IPV has been conceptualized as an issue exclusively for women (Dobash & Dobash, 2004). However, there is now a growing body of evidence which suggests that men are not just the perpetrators, but also the victims of IPV (Archer, 2000; Goldberg & Tomlanovich, 1984; Steinmetz, 1977; Willis & Porche, 2003). It has been demonstrated that women perpetrate violence (both physical and verbal), both in a wider context, and within intimate relationships (Archer, 2000; Richardson, 2005; Steen & Hunskaar, 2004).

This view of women as aggressors, rather than nurturers, is often counter-intuitive, and contradicts prevailing societal norms (Richardson, 2005). Historically, men who have been classified as ‘victims’, particularly at the hands of women, have been publicly humiliated and chastised (George, 2002, p.125). Violence perpetrated by women is often seen as more acceptable than that perpetrated by men (Simon et al., 2001), and as reflecting self-defense. However although women’s violence towards men is generally less injurious (Archer, 2000; Dobash & Dobash, 2004) (namely due to the comparatively greater size and strength of men), women have been found to cause severe injuries to men (Ananthkrishnan, Alagappan, & Riyat, 2006; Felson & Cares, 2005), and many motivations for this violence, besides self-defense have been reported, including control and anger (Follingstad, Wright, Lloyd, & Sebastian, 1991; Weizmann-Henelius, Viemerer, & Eronen, 2003).

Despite these findings, attitudes towards male victims of IPV have been found to be far less sympathetic than those towards female victims (Seelau, Seelau, & Poorman, 2003; Sorenson & Taylor, 2005). Carlson and Worden (2005) found that participants were more likely to judge men’s violent behavior as representing IPV, and as being illegal, than women’s. Research has also suggested that participants view scenarios involving same-gender IPV as less believable, and less serious (Poorman, Seelau, & Seelau, 2003) than those involving opposite-gender couples.

The controversial topic of gender and IPV has caused a divide within the literature, between “family violence” researchers, and “feminist” researchers (Kurz, 1989, p.490); the first of whom believe that men are as likely (or even more likely) to be victims of IPV as women, and the second advocating that women are the undisputable victims of this type of abuse. Findings of family violence researchers have suggested that male victimization is approximately equivalent to that of female victimization (Hamel, 2007). For example, Straus and Gelles (1986) found that similar proportions of wives engaged

in violence as their male counterparts (12.1 and 11.3% respectively), and that more wives than husbands engaged in severe violence (4.39 and 3% respectively). Additionally, Straus (2008) found that 24.4% and 7.6% of males, and 31.6% and 10.6% of females had engaged in a minor and severe physical assault against a partner respectively. In a seminal meta-analysis of the literature, Archer (2000) also found that women were significantly more likely to use physical aggression within their relationship, although men were more likely to cause injury. Other studies have reported higher rates of physical violence perpetrated by women than men (Rouse, Breen, & Howell, 1988), or equivalent rates across genders (Halpern, Oslak, Young, Martin, & Kupper, 2001). Despite this empirical evidence, some maintain that the majority of victims of IPV are, in fact, women (Berk, Beck, Loseke, & Rauma, 1983; Dobash & Dobash, 2004; Mirrlees-Black, 1999; Schwartz, 1987; Tjaden & Thoennes, 2000a, 2000b). Indeed, Tjaden and Thoennes (2000a) found that 22.1% of women and 7.4% of men had experienced physical assault at the hands of a partner.

In terms of explaining these discrepancies, it has been suggested that methodological differences can account for the differences in findings (Johnson, 2005). Family violence researchers routinely use some form of the self-report Conflict Tactics Scale (CTS) (Straus, 1979, 1990a; Straus, Hamby, Boney-McCoy, & Sugarman, 1996), which measures perpetration and victimization in the form of physical, psychological violence and sexual coercion, the injuries caused, and negotiation behaviors used (Straus et al., 1996, pp.284–288). However, this scale has been criticized for not taking into account such issues as intention, context, and meaning (Dobash & Dobash, 2004; Kurz, 1989, pp.494–495). In contrast, Feminist researchers routinely utilize crime victimization surveys, and clinical samples from hospitals, shelters, courts and other agencies (Bowen, 2011; Johnson, 2006). However, this may be equally problematic, as crime victimization surveys frame questions about IPV in the context of a crime, which may inadvertently exclude some male victims, who do not classify or report their abuse as such (Kimmel, 2002, pp. 1337–1338). Additionally, the use of this agency data is not necessarily representative, and is likely to characterize the more severe cases of IPV, and under represent male victims (Straus, 1990b), for whom there is more limited support, coupled with societal norms which discourage men from help-seeking (Addis & Mahalik, 2003; Hines & Douglas, 2009).

It has been suggested by Johnson (2006, pp.1004–1006) that these two different methodologies identify distinct types of abuse. Johnson suggests that “intimate terrorism” (p. 1006) (characterized by violence and control on the part of one partner, and possibly violence, but not control on the part of the other), usually perpetrated by men, is measured preferentially by using crime data and agency samples. Conversely, “situational couple violence” (p.1006) (which can be reciprocal, but does not include controlling behaviors) is predominantly identified in other surveys (Johnson, 2006, p.1010). Therefore, the suggestion is that men may be equal victims of “situational couple violence” (p.1006), with women also demonstrating “violent resistance” (p.1006) (characterized by violent behavior resisting the

violence and control of the partner), but that women represent the majority of victims of “intimate terrorism” (Johnson, 2005, p.1128).

Despite the possibility that men experience less “intimate terrorism” (Johnson, 2006, p.1006) and may sustain less frequent or severe injuries (Archer, 2000), it is obvious that men are indeed victims of IPV to some extent. Data from the British Crime Survey (Roe, Coleman, & Kaiza, 2009) suggest that 27.9% of women and 16.9% of men are victims of IPV. However, although our knowledge of female victims of intimate partner violence is relatively substantial due to the majority of research in the area focusing on women, (Campbell, Kub, & Rose, 1996; Campbell & Soeken, 1999; Coker, Smith, McKeown, & King, 2000; McCauley et al., 1995; Porcerelli, West, Binienda, & Cogan, 2006), far less is known about male victims of IPV (Holtzworth-Munroe, 2005; Mines & Malley-Morrison, 2001).

Moreover, less still is known about gay male victims of IPV (Peterman & Dixon, 2003; Rohrbaugh, 2006). Within the limited attempts to understand IPV within same-gender relationships, most research had focused on female same-gender couples (Rohrbaugh, 2006). Estimates of the prevalence of IPV within gay male relationships have varied, but most have estimated that IPV takes place in between 11 and 38% of relationships (Bryant & Demian, 1994; Gardner, 1989, cited in Burke & Follingstad, 1999, p.498; Waldner-Haugrud, Gratch, & Magruder, 1997); therefore, it is clearly an issue that warrants concern.

This review considers the recent research on heterosexual male and gay male victims of IPV, in order to establish whether we are any closer to gaining an understanding of this controversial topic. In 2001, Mines and Malley-Morrison published a review of research on the physical and psychological consequences of IPV on male victims, as well as the reasons for men remaining within abusive relationships. This review (Mines & Malley-Morrison, 2001) demonstrated that IPV against men is an important issue, which results in psychological and physical harm. However, it was noted that research in the area was lacking, and that in order for knowledge in this area to progress, additional research on male victims of IPV, utilizing adequate comparison groups, as well as qualitative research, was urgently needed (Mines & Malley-Morrison, 2001, pp. 79–84). Since this time, there has been a substantial growth in research on male victims of IPV which forms the basis for this review. Additionally, this review hopes to “move beyond the argument over who perpetrates more IPV and who suffers more as a consequence” (Hines & Douglas, 2009, p.582) in order to gain a better understanding of male victims of IPV and their needs.

1.1. Method

Several databases were searched (PsycINFO, Scopus, Science direct, and Academic Search Complete), using the following key words, ‘male victims’, ‘men as victims’, ‘homosexual’, ‘gay’ and ‘same-sex’ combined with each of the following, ‘intimate partner violence’, ‘domestic abuse’, ‘violence’, ‘domestic violence’, ‘prevalence’ and ‘abuse’. The reference sections of relevant papers were then searched to identify potential papers that were not obtained through the database search. Research dated before 1999 was excluded, partially in an attempt to reduce overlap with Mines and Malley-Morrison’s (2001) review, but also due to the scarcity of research before this time. Research focusing solely on adolescents (under the age of 18) was disregarded, as were any studies focusing solely on female victims of IPV. This led to a total of 92 studies being identified of which 54 are included in the body of this paper. Research pertaining to both heterosexual and gay male victims is presented; therefore, when findings relate to gay victims this will be specified for ease of understanding. For the purpose of this review, men who identify as having same-gender relationships will be referred to as gay men within the body of the review. However, some of the studies reviewed refer to their participants by other means, such as “same-sex cohabiting” (Tjaden, Thoennes, &

Allison, 1999, p.418) or as “men who have sex with men” (Greenwood et al., 2002, p.1964). These descriptions are sometimes used as a result of participants being asked which description they most identify with, resulting in more than one estimate of IPV for gay participants (one associated with each description). Therefore, within the tables, researchers’ wording/definitions will be used.

2. Prevalence

A literature search of studies investigating prevalence of IPV victimization in men was conducted. Due to the vast number of studies which include a measure of prevalence as a bi-product of their actual focus, and which tend to utilize smaller or less representative samples, the studies reviewed here in relation to heterosexual men are limited to those that focused on prevalence as one of their main objectives. Similarly, studies which aimed to investigate the prevalence of IPV amongst a specific population (such as in treatment programs, e.g., El-Bassel, Gilbert, Wu, Chang, & Fontdevila, 2007) were not included, nor were studies which recruited participants on the basis of their IPV status. However, due to the dearth of research on gay male victims of IPV, studies with broader focuses had to be included. This resulted in a total of thirty-four studies (for details see Tables 1–5).

Due to the differing methodologies used by researchers to assess prevalence of IPV, and the potential effect this may have had on findings, studies were divided according to timeframe of reported IPV (e.g., lifetime and past year), and also in relation to the method used to assess IPV. However, due to the varied methods used by researchers, and the many criticisms it has faced (Dobash & Dobash, 2004; Kurz, 1989, p.494–495) studies were classified only in terms of whether or not they used the CTS (Straus, 1979, 1990a; Straus et al., 1996) in order to assess prevalence. Following this organization of the studies, there was a group which was not represented by either timeframe, and therefore has been included in a separate table (see Table 5) and will be discussed separately.

2.1. Research on the prevalence of IPV in heterosexual relationships

Estimates of the prevalence of total IPV (where type of violence was not specified, or where different types were combined) varied between 0.6% and 32% of (heterosexual) men and 1.4% and 35.2% of women (see Tables 1–4). However, when studies were split according to time-frame, some of this variance was accounted for, revealing a total lifetime prevalence of 7.3%–32% of men, and 20.3%–35.2% of women. In contrast, 12-month prevalence ranged from 0.6%–29.3% of men and 1.4%–4.8% of women. Although these ranges are still substantial, lifetime prevalence in both cases is higher than 12 month prevalence, as would be expected. Additionally, when looking at the highest of these ranges, it appears that men and women experience similar rates of IPV over the lifetime, but that men experienced significantly more in the past year. However, when considering individual studies, no single study found a higher proportion of men to be victimized than women.

When looking at the highest estimates of specific types of violence, it appears that men reported more physical IPV in both timeframes than did women. In terms of psychological violence, when looking at the highest estimates, a higher percentage of men than women reported suffering psychological IPV, however, only one estimate was available for women within the lifetime timeframe, and 6 month estimates were generally higher for women than men. Studies were unanimous in finding women to be victims of sexual IPV at a higher rate than men (Harned, 2001; Lysova & Douglas, 2008; Romans et al., 2007; Tjaden & Thoennes, 2000a, 2000b).

Estimates of prevalence (regardless of timeframe) were generally higher for heterosexual men in those studies which did not use the CTS apart from prevalence of sexual IPV, which was far higher in studies using the CTS. However, the prevalence of sexual IPV within

Table 1
Studies estimating lifetime prevalence using CTS data.

Author(s)/date	Participants	Sample	Total IPV	Physical	Psychological	Sexual
Tjaden et al. (1999)	600 opposite sex-cohabiting men and women, (mean ages 45.8 and 46), 65 male and 79 female same-sex cohabiters (mean ages 40.5 and 40.1)	National survey	23.1% of (same-sex cohabiting) men, 7.7% (opposite-sex cohabiting) men; 39.2% (same-sex cohabiting) and 20.3% of (opposite-sex cohabiting) women (it should be noted that this estimate includes rape, which was not assessed using the CTS)	-	-	-
Tjaden and Thoennes (2000a)	8000 men, 8000 women (opposite-sex cohabiting and same-sex cohabiting)	National survey	25.5% women, 7.9% men; 15.4% same-sex cohabiting men, 11.4% lesbian women (lifetime prevalence, by same-sex partner) (it should be noted that this includes the prevalence of rape and stalking within an intimate partnership, which was not assessed using the CTS)	22.1% women, 7.4% men	-	-
Tjaden and Thoennes (2000b)	6934 men and 7278 women (opposite-sex cohabiting)	National survey	7.3% men and 21.7% women (it should be noted that this includes the prevalence of rape and stalking within an intimate partnership, which was not assessed using the CTS)	7% men and 20.4% of women	-	-
Balsam et al. (2005)	1245; 796 women (340 heterosexual, 125 bisexual, 331 lesbian), 449 men (185 heterosexual, 38 bisexual, 226 gay)	Convenience sample, recruited through advertisement. Physical assault assessed using CTS (experience of any act)	-	43% and 39% (heterosexual men and women), 47.1% and 49.2% (bisexual men and women), 38.8% 47.5% (gay men and lesbian women)	-	-
Craft and Serovich (2005)	51 HIV positive men in an intimate relationship with a man (within the past year)	Convenience sample recruited at various AIDS/HIV trials and forums. IPV assessed using CTS (experience of any act and frequency reported)	-	-	72.5%	33.3%
Mills et al. (2006)	53 men (mean age 39.7)	Convenience sample, emergency department. IPV assessed using CTS (positive scores derived from normative population scores)	-	20.4% (CTS 2 scale)	38.9% (CTS 2 scale)	-
Bartholomew, Regan, White, and Oram (2008)	284 gay and bisexual men (93% gay)	Random community sample. Adapted form of CTS used (experience of any act)	-	41.2%	93.7	10.2%

studies not using the CTS was solely represented by two studies which used the same participants and survey (Tjaden & Thoennes, 2000a, 2000b), which may not adequately represent the prevalence of sexual IPV in this category.

Splitting results according to whether or not they used the CTS resulted in estimates of the percentage of participants experiencing total IPV ranging from 1.1% to 7.9% of men and 1.8%–25.5% of women when the CTS was used, and 0.6%–32% (of men) and 1.4%–35.5% (of women) when the CTS was not used. This highlights the general pattern of higher prevalence estimates when the CTS was not used, and also suggests that when the CTS is used men are significantly less often found to be the victims of total IPV than women. However, these totals were solely based on four studies (Laroche, 2005; Tjaden & Thoennes, 2000a, 2000b; Tjaden et al., 1999). Additionally, when the highest estimates of individual types of IPV are considered, men generally appear to be the most common victims of IPV (excluding sexual IPV).

Psychological IPV assessed during the past 12 months was also higher in CTS conditions, as was physical IPV, although these estimates came from only one study in both cases (Mills et al., 2006; Murty et al., 2003). This relationship was slightly less clear in prevalence estimates relating to women when looking at separate types of IPV, as ranges of sexual and psychological IPV were consistently lower in the non-CTS estimates. Again it should be noted that there were few figures relating to these categories.

2.2. Research into the prevalence of intimate partner violence within male same-gender relationships

IPV within male same-gender relationships has also revealed mixed results, with findings relating to the percentage of gay men having experienced total IPV ranging from 15.4% to 51% (see Tables 1–4), which is higher than the equivalent for heterosexual men and women. This range of prevalence related only to IPV experienced within participant's lifetimes, as there were no estimates of total IPV for gay men relating to IPV within the past 12 months. However, estimates of physical, psychological and sexual IPV were higher when participants reported lifetime IPV than when only IPV within the past 12 months was reported, as would be expected. Interestingly, looking at the highest estimates within the lifetime timeframe, it appears that gay men experienced more total and sexual IPV, slightly less physical IPV, and similar levels of psychological IPV as heterosexual men. However, in 12 month estimates, gay men experienced less physical, psychological and sexual IPV, although there were very few estimates available for homosexual men within the 12 month period, which may account for this result.

When estimates were examined after having been separated in terms of methodology, the relationship between estimates and the use of the CTS was the same as that found in heterosexual male samples. Figures relating to the percentage of gay men having experienced total IPV ranged from 15.4% to 23.1% when the CTS was used and from 29% to 51% when it was not. However, estimates of sexual and psychological IPV were found to be lower when the CTS was not used, although it should be noted that this pattern was dependant on only one figure in both cases. Unfortunately, there were no estimates available for non-CTS 12 month timeframes.

2.3. Other timeframes

Seven additional studies were classified as estimating prevalence of IPV within other timeframes (see Table 5). These timeframes included “past”, “present” (Ernst et al., 2000, p.177), and “during the past 5 years” (Greenwood et al., 2002, p.1965). All estimates from these studies were within the ranges mentioned above, except for three estimates of sexual IPV (one for heterosexual men and two for heterosexual women). Harned (2001) found that 30% of heterosexual

Table 2
Studies estimating lifetime prevalence using non-CTS data.

Author(s)/ Date	Participants	Sample	Total IPV	Physical	Psychological	Sexual
Mirrlees-Black (1999)	4958 men, 5886 women (aged 16–59)	National crime survey	17% men; 26% women	15% men; 23% women	–	–
Nieves-Rosa et al. (2000)	273 Latin American men who have sex with men	Convenience sample, recruited from various social venues	51%	35%	33%	12%
Tjaden and Thoennes (2000a)	8000 men, 8000 women (opposite-sex and same-sex cohabitating)	National survey	–	–	–	7.7% women and 0.3% men
Tjaden and Thoennes (2000b)	6934 men and 7278 women (opposite-sex cohabiting)	National survey	–	–	–	0.2% of men and 4.5% women
Turell (2000)	213 gay men, 57 gay women, 193 lesbian women, 27 bisexual, 8 heterosexual (mean age 38.1)	Convenience sample, recruited from various social venues	–	55% lesbian women, 58% gay women, 44% bisexual	84% lesbian women, 77% gay women, 83% gay men, 81% bisexual (emotional abuse)	14% lesbian women, 11% gay men, 13% bisexual
L. Henderson (2003)	1911 lesbian women, and 1391 gay men	Convenience sample, recruited from various social venues	22% women, 29% men	–	–	–
Owen and Burke (2004)	33 gay men, 33 lesbian women (mean age 45.5)	Postal survey	–	45.4% men, 27.2% women	–	–
Toro-Alfonso and Rodríguez-Madera (2004)	190 Puerto-Rican gay men (mean age 29)	Convenience sample, recruited from various social venues	–	26%	48%	25%
Mills et al. (2006)	53 men (mean age 39.7)	Convenience sample, emergency department. IPV assessed using HITS (percentage of participants ever having experienced an act)	–	20% (HITS)	18.3–69.1% (HITS scale- depending on item used)	–
Paul et al. (2006)	180 women, 149 men (72% under 40 years)	Convenience sample, general practices	–	43% women, 54% men	77% women, 93% men	–
Houston and McKirnan (2007)	817 men who identified as having sex with men (mean age 33)	Convenience sample, recruited from various social venues	32.4%	19.25	20.6%	18.5%
Romito and Grassi (2007)	502 participants (321 female, 181 male), 92% 25 years or younger	Convenience sample, university students	27.1% males, 28.3% females (high levels), 35.2% women and 32% men (some IPV)	–	–	–
Breiding et al. (2009)	15,598 women, 10,191 men	Random digit telephone survey	26.7% women, 15.5% men	–	–	–
Roe et al. (2009)	10,899 men, 12,761 women, aged 16–59	British Crime Survey	12.8% men, 24.3% women (since age of 16)	–	–	–

men had experienced sexual IPV (which is therefore the highest estimates of sexual IPV for heterosexual men). The percentages of women who had experienced sexual IPV ranged from 1.7% to 39% of women (Harned, 2001; Romans et al., 2007) (which mark the highest and lowest estimates of sexual IPV for women). Additionally, these studies represented the lowest findings in relation to the percentage of men (2.5%) and women (3.5%) having experienced of psychological IPV (Ernst et al., 2000). This is likely to be due to these estimates measuring 'present' psychological IPV. However, the highest estimates of sexual IPV mentioned above are extremely alarming, as they focused on sexual IPV in students since starting university (Harned, 2001).

2.4. Summary

Research indicates that psychological abuse is generally the most prevalent form of abuse within relationships, and that it is experienced at similar rates by heterosexual and gay men. A comparison of the highest estimates suggest that this type of abuse may be slightly less often experienced by women (Paul, Smith, & Long, 2006), although an approximately equal number of studies found men and women to be most victimized. Additionally, as previously noted, only one estimate was available for women in the lifetime timeframe, and estimates in the 12 month timeframe generally found women to be more often the victims of this type of abuse than heterosexual men. In contrast,

women are at a higher risk of sexual IPV than heterosexual men (Tjaden & Thoennes, 2000a), but seemingly less than gay men. Finally, the highest prevalence of physical IPV was found in heterosexual men (Paul et al., 2006), although findings generally suggest that gay men suffer a higher level of physical IPV. Total IPV appears to be experienced at higher rates by women and gay men (see Tables 1–4).

Unfortunately, due to the large range in estimates, it is difficult to draw any further conclusions. However, these ranges were reduced somewhat by separating results in terms of timeframe and method. This revealed that lifetime prevalence was generally higher than 12 month prevalence, as would be expected.

It also revealed that generally, studies which used alternative methodology than the CTS reported higher estimates. However, when these findings are examined in more detail, it was found that often, despite the highest finding being from a non-CTS study, other estimates were similar in CTS and non-CTS studies. Additionally, in many cases, due to the small number of findings available (especially when studies were divided according to method and timeframe) one particularly low or high finding could dramatically alter conclusions drawn. Finally, it was noted that agency samples were more often used in non-CTS studies, which could partially account for non-CTS prevalence findings being higher.

However, it is unclear why sexual and psychological IPV less often followed this pattern for all three groups of participants, although it is

Table 3
Studies estimating 12 month prevalence using CTS data.

Author	Participants	sample	Total IPV	Physical	Psychological	Sexual
Tjaden and Thoennes (2000a)	8000 men, 8000 women	National survey	1.8% women, 1.1% men (it should be noted that this includes the prevalence of rape and stalking within an intimate partnership, which was not assessed using the CTS)	1.3% women, 0.9% men	–	–
Murty et al. (2003)	1310 participants (621 men and 689 women)	Prospective cohort sample of students. CTS used (any act experienced)	–	2.9% women, 4.7% men	–	–
Porcerelli et al. (2003)	679 women, 345 men, aged 18–64	Convenience sample, family practice clinics. IPV assessed using CTS (single question). Women who had experienced both physical and emotional abuse were excluded	–	7.4% women, 4.7% men (severe violent victimization by partner)	–	–
Balsam et al. (2005)	1245; 796 women (340 heterosexual, 125 bisexual, 331 lesbian), 449 men (185 heterosexual, 38 bisexual, 226 gay)	Convenience sample, recruited through advertisement. Physical assault assessed using CTS (scored positive if experienced any item)	–	37.2% and 27.4% (heterosexual men and women), 41.7% and 20% (bisexual men and women), 26.9% and 23.2% (gay men and lesbian women)	–	–
Laroche (2005)	11,607 men, 14,269 women	Large scale survey using CTS (prevalence measured by at least one positive response)	2.2% women, 1.9% men	–	–	–
Hines (2007)	3461 male students (mean age 22.88)	International survey at universities. IPV assessed using CTS (minor and severe violence dependant on responses to various items)	–	16.6% minor violence, 9.3% severe violence	–	–
Schluter et al. (2007)	893 mothers and 691 fathers	A longitudinal convenience sample. IPV assessed using CTS (any reported item; minor/severe violence assessed dependant on responses to various items)	–	28% of mothers and 8% of fathers were victims of any physical violence; 15% and 3% of mothers and fathers victims of severe physical violence	86% and 87% of mothers and fathers victims of verbal aggression	–
Bartholomew, Regan, White, and Oram (2008)	284 gay and bisexual men (93% gay)	Random community sample. Adapted form of CTS used (experience of any one act)	–	12.3%	63.7	1.8%
Leung and Cheung (2008)	687 men, 867 women (mean age 43.55)	Survey of Asian Americans. IPV assessed using CTS (experience of any one act)	–	17.6% men, 15.3% women	–	–
Lysova and Douglas (2008)	388 participants (156 male, 182 female). Mean ages 19.8 and 19.5 respectively	Data from an international survey. IPV assessed using CTS. (experience of any act)	–	28.6% men, 23.1% women	56.5% men, 66.7% women	15.4% men, 32.8% women

Table 4
Studies estimating 12 month prevalence using non-CTS data.

Author(s)/ Date	Participants	Sample	Total IPV	Physical	Psychological	Sexual
Mechem et al. (1999)	866 men (mean age 34.1)	Prospective survey at emergency department	12.6%	–	–	–
Mirrlees-Black (1999)	4958 men, 5886 women (aged 16–59)	National crime survey	4.2% of men and women	–	–	–
Harwell et al. (2003)	1006 participants (588 women, 418 men, mean ages 46 and 45.2 respectively)	National survey, American Indian participants, Montana, U.S.	1% of men and 3% of women reported IPV	–	–	–
Mills et al. (2003)	282 men, aged 18–75	Convenience sample, Emergency department	29.3%	–	–	–
Murty et al. (2003)	1310 participants (621 men and 689 women)	Prospective cohort sample of students	–	–	46.7% women, 30.2% men	–
Mills et al. (2006)	53 men (mean age 39.7)	Convenience sample, emergency department. IPV assessed using HITS (IPV defined as a positive response to 10 or more items)	–	20% (HITS), 22% physically abused (PVS Scale positive result)	–	–
Breiding et al. (2009)	15,598 women, 10,191 men	Random digit telephone survey	1.4% women, 0.6% men	–	–	–
Roe et al. (2009)	10,899 men, 12,761 women, aged 16–59	British Crime Survey	2.9% men, 4.8% women	–	–	–

Table 5
Studies using alternative time frames.

Author(s)/ date	Participants	Sample	Total IPV	Physical	Psychological	Sexual
Ernst et al. (2000)	97 participants (57 women, 40 men), mean age 37	Convenience sample recruited at emergency department	–	8% and 2.5% of men (past and present); 39% and 5.2% women (past and present)	3% and 2.5% of men (past and present); 26% and 3.5% women (past and present)	–
Harned (2001)	1139 (600 women, 539 men), mean age 21.37	Stratified random sample of postgraduate students. IPV assessed using CTS (any one item)	–	22% women, 21% men (since starting university)	82% women, 87% men (since starting university)	39% women, 30% men (since starting university)
Greenwood et al. (2002)	2881 men who have sex with men	Probability-based sample. IPV assessed using modified version of CTS (any one item)	–	22% (during the past 5 years)	34% (during the past 5 years)	5.1% (during the past 5 years)
Hines and Saudino (2003)	179 male and 302 female students (mean age 19.1)	Convenience sample of students. IPV assessed using CTS (any act experienced)	–	30.5% men, 24.5% women (within current relationship)	81% men, 80% women	24.5% men, 24% women
Laroche (2005)	11,607 men, 14,269 women	Large scale survey using CTS (prevalence measured by at least one positive response)	–	7% women, 6.1% men (past 5 years)	–	–
Romans et al. (2007)	9178 women and 7827 men	National survey. IPV assessed using a modified version of the CTS (any one item)	21.2% women, 20.7% men (during the past 5 years)	8.6% women, 7% men (during the past 5 years)	19.3% women, 18.8% men (during the past 5 years)	1.7% women, 0.2% men (during the past 5 years)
Chang et al. (2009)	1470 (707 males, 763 females), mean age 44.4	National survey sample of Latinos and Asians. IPV assessed using CTS (minor and severe violence scored according to responses to various items)	–	10.15% women, 12% men (minor violence); 1.49% women, 2.6% men (severe violence) (with current partner)	–	–

possible that this finding is an artifact of the very few results available for psychological and sexual IPV when split into CTS and non-CTS categories. However, few studies were also available for physical IPV, and studies representing gay men exhibited this pattern despite not having markedly less estimates available for psychological and sexual IPV than other categories. It is also possible that this is a result of a lack of uniformity in the definition of sexual and psychological IPV in studies not using the CTS, which may have resulted in wording that fewer participants felt applied to them. For instance, Tjaden and Thoennes (2000a, 2000b) referred to “rape” (Tjaden & Thoennes, 2000a, p5) rather than sexual IPV or coercion.

It is also not clear why total IPV prevalence is higher for women than for men when the CTS is used, whilst the prevalence of the individual types of IPV are generally lower (excluding sexual IPV). Although again, there are very few estimates relating to this CTS category in comparison to the non-CTS category. Specifically, the CTS totals were based on only four studies (Laroche, 2005; Tjaden & Thoennes, 2000a, 2000b; Tjaden et al., 1999), three of which used the same participants and survey. Further to this, it is unclear why men and women appear to experience similar rates of total IPV over their lifetime, but that men experience significantly more over the past 12 months. However, this is likely to be due to methodological differences between studies, as no single study found a higher percentage of men to experience total IPV in the past 12 month time-frame.

Estimates for gay men appear to be similar or higher than heterosexual men for lifetime prevalence (excluding one finding in relation to physical IPV), but lower when past 12 month prevalence is assessed. However, there were very few studies assessing 6 month prevalence in gay men, which may account for this result. Further, when the CTS was used, gay men reported higher rates of all types of IPV (within lifetime estimates) than heterosexual men; however, when other methodologies were employed, their experience of physical and psychological IPV was lower than that of heterosexual men. Yet, when looking at individual studies, only one study relating to heterosexual men (in the non-CTS studies) found a higher percentage of physical IPV than the studies relating to gay men (Paul et al., 2006). Therefore, on the basis of the findings of the other studies in this group, it is likely that gay men experience a similar or higher level of physical IPV than heterosexual men, regardless of whether or not

the CTS is used. The data regarding psychological IPV is more limited and, therefore, difficult to summarize; however, it seems that estimates are generally similar in gay male and heterosexual male samples. Finally, gay men appear to experience more total and sexual IPV regardless of whether or not the CTS is used.

2.5. Methodological factors relevant to the interpretation of prevalence data

The CTS (Straus, 1979) has been criticized for neglecting the intention of perpetrators, as well as the context, and meaning of violent acts, and, therefore, wrongly suggesting that men and women suffer equivalent rates of IPV (Dobash & Dobash, 2004; Kurz, 1989). The data described above do not support this suggestion, as both heterosexual and gay men generally reported similar or higher levels of IPV than heterosexual women in both CTS and non-CTS studies (excluding total and sexual IPV for heterosexual males). Additionally, the highest rates of IPV in heterosexual men were found by studies not using the CTS. This pattern also existed to some extent for women and gay men.

Similarly, survey samples have been suggested to be more representative of “situational couple violence” (Johnson, 2006, p.1006), which may overestimate the prevalence of male victims of IPV. It is acknowledged that this may have had an effect on this data, as the vast majority of studies used survey-type methodologies, while very few used agency data (Ernst et al., 2000; Mechem et al., 1999; Mills et al., 2003; 2006; Paul et al., 2006; Porcerelli et al., 2003). This agency data has been suggested to be more representative of female victims of IPV (Johnson, 2006), due to representing higher levels of “intimate terrorism” (Johnson, 2006, p. 1006), which is thought to be more often perpetrated by men against women (Johnson, 2006).

2.5.1. Limitations

Caution should be exercised in the interpretation of those studies which focused on the prevalence of IPV within male same-gender relationships. First, not all studies specified whether lifetime experience of IPV could include a previous heterosexual relationship (Houston & McKirnan, 2007; Nieves-Rosa, Carballo-Diéguez, & Dolezal, 2000; Toro-Alfonso & Rodríguez-Madera, 2004). This may be misleading, as Tjaden and Thoennes (2000a) found that although 23.1% of gay men

Table 6
Studies reporting correlates of IPV victimization.

Author(s)/dates	Sample/location	Participants	Correlates measured	Findings
Mirrlees-Black (1999)	National crime survey, U.K.	4958 men, 5886 women (aged 16–59)	IPV, demographic correlates	The peak age for IPV was younger for women than men, substance abuse was also found to be related to victimization
Nieves-Rosa et al. (2000)	Latin American men who have sex with men, recruited through various gay and non-gay venues, New York, U.S.	273 male participants (mean age 31)	Interview and questionnaire focused on experience of IPV, help sought, involvement of substances and response to IPV	IPV was associated with substance use and childhood sexual abuse
Tjaden and Thoennes (2000a)	National Survey, U.S.	4896 women and 5056 men aged 18 and above	Living situation, education level (in comparison to partner), experience of child abuse, disability, partner characteristics	Child maltreatment was associated with men having experienced IPV
Turell (2000)	Survey sample of lesbian and gay women and men, Texas, U.S.	499 participants, mean age 38.1 (of these 227 were male, 265 female, and 7 identified as transgendered).	IPV, demographic information	Higher income was related to higher rates of IPV
Zierler et al. (2000)	National survey (probability sample) of HIV positive men who have sex with men, and women, U.S.	2864 HIV positive adults	IPV since HIV diagnosis	11.5% of men who have sex with men and 7.5% of heterosexual men reported sustaining IPV since their diagnosis, 45% of those reporting IPV or violence by another person reported that their HIV diagnosis was the reason
Cruz and Peralta (2001)	Convenience sample, recruited through social service agencies, Dallas, U.S.	25 gay males (mean age 32)	Interviews explored the relationship between alcohol use and IPV	Interviews revealed three ways in which participants conceptualized the relationship between alcohol use and IPV
Coker et al. (2002)	National survey, U.S.	6790 women and 7122 men, aged 18–65	Demographic factors, IPV, mental and physical health, injuries, childhood abuse	Childhood physical assault, and substance abuse were associated with IPV victimization of men
Greenwood et al. (2002)	Large scale probability-based sample, U.S.	2881 men who have sex with men (including bisexual men)	IPV and demographic information	Young age, HIV positive status, employment and education were associated with IPV
Klitzman et al. (2002)	Data from a stratified-probability health survey of men who have sex with men, U.S.	733 men who identified as having sex with men (mean age 40.5)	IPV, demographic information, MDMA use, HIV status, sexual behaviors, identification with the gay community, and depression	MDMA use was related to IPV victimization
Rosen et al. (2002)	Convenience sample, recruited at an Army post, Alaska, U.S.	358 White male enlisted soldiers, 130 Black male enlisted soldiers (mean age 27.5 and 28.3 respectively).	IPV, demographic information, childhood abuse, martial adjustment and psychological variables	The receipt of severe and minor physical aggression and psychological abuse was associated with depression, lower marital adjustment, childhood abuse and alcohol problems
Harwell et al. (2003)	National survey, American Indian participants, Montana, U. S.	1006 participants (588 women, mean age 46; 418 men, mean age 45.2)	IPV, demographics, physical and mental health, disease status and risk factors for disease	Age, physical/mental health problems, and living with a partner were related to the likelihood of experiencing IPV
Chen and White (2004)	Data from longitudinal study, from 1979 to 1981, New Jersey, U.S.	725 participants (325 male, 400 female).	IPV, problem drinking, negative affect, gender role ideology and negative childhood experiences	Early problem drinking, negative affectivity and parental fighting were found to correlate with later IPV victimization in men. However, in a multivariate analysis none of the variables measured were found to be significantly predictive of male victimization
Fitzpatrick et al. (2004)	Convenience sample, Urban University, U.S.	250 undergraduate students (175 women, 75 men), mean age 22.65	IPV, relationship quality, gender-role ideology, and attitudes towards aggression	Men with more egalitarian views were less likely to be victims of IPV
Toro-Alfonso and Rodríguez-Madera (2004)	Convenience sample of gay men, recruited from various services, Puerto Rico	199 Puerto Rican gay men (mean age 29)	IPV, intergenerational abuse, and conflict resolution	Of the 48% who had experienced IPV, 44% of participants had experienced or witnessed violence within their family during childhood and between 36 and 47% of participants reported addiction to various substances and behaviors

Craft and Serovich (2005)	Convenience sample of HIV positive men who had intimate relationships with other men (within the past year), recruited from a medical trial, U.S.	51 homosexual men (mean age 40.47)	IPV, violence within the family of origin	Witnessing the mother perpetrating violence against the father was correlated with sexual coercion and injury in later relationships, and being the victim of abuse within the family was correlated with being the victim of sexual coercion
A. J. Z. Henderson et al. (2005)	Telephone survey, Vancouver, Canada	128 participants (68 women, 60 men), mean age 37.4	IPV, attachment style	Preoccupied attachment was associated with psychological and physical abuse for both men and women
Seow and Foo (2006)	Convenience sample, emergency department, Singapore	14 male victims of IPV (aged 29–63)	Demographic information	Most participants were married, had been assaulted previously, had a higher level of education than the responsible partner, and were aware of relevant services
Houston and McKirnan (2007)	Convenience sample, recruited from gay/bisexual services and venues, Chicago, U.S.	817 men who have sex with men (mean age 33)	IPV, demographic information, sexual behavior, health care, drug/alcohol use, outness, help-seeking and psychological factors	Age was not found to be related to IPV, however, IPV was less likely in those in the higher socioeconomic status, those who reported substance abuse, and unprotected sex
Pournaghash-Tehrani and Feizabadi (2007)	Convenience recruited from a divorce court, Tehran, Iran	120 men (mean age 35.8)	Demographic variables	Age, level of education, and income were associated with experiencing various forms of IPV
Robertson and Murachver (2007a)	Convenience sample, recruited from prison and rehabilitation facilities, as well as a student and community sample, New Zealand	172 participants; 39 incarcerated participants (24 male, 15 female), 67 students (36 female, 31 male), 66 community participants (36 female, 30 male)	IPV, anger management, attitudes and beliefs	Communication problems, hostility towards women, dominance, negative attribution, and lacking an alternative to violence were associated with suffering IPV for both men and women
Robertson and Murachver (2007b)	As above	Sample as above	Correlates measured as above	Victims (and perpetrators) of IPV had hostile beliefs, non-egalitarian beliefs, fewer communication skills and were more dominating of their partner
Bartholomew, Regan, Oram, and White (2008)	Randomly selected sample, Vancouver, Canada	186 men (mean age 38.53) 94% gay, 6% bisexual	Demographics, IPV, violence in family of origin, substance abuse, attachment, HIV status, outness, internalized homophobia	Violence in family of origin and substance abuse were found to be related to IPV, and insecure attachment, income/education and HIV status were found to be related to bi-directional abuse. Age was not related to IPV
Flinck et al. (2008)	Convenience sample of male victims of IPV, Finland	10 men, age range 36–56 years	Open-ended interview focused on experience of IPV	Emotional neglect, and childhood abuse were found to be connected to the experienced of IPV
Hellmuth et al. (2008)	Single case study, U.S.	1 male gay couple (aged 45 and 59)	IPV, demographic information, marital adjustment, and alcohol abuse	Physical IPV was eliminated after alcohol treatment, and psychological IPV decreased
Affi et al. (2009)	Nationally representative survey sample, U.S.	5692 (of whom 190 females and 216 males were victims of IPV)	Sexual orientation, IPV, child abuse and witnessing of IPV, psychiatric disorders, suicidal ideation and attempts, sociodemographic variables	IPV victimization in men was associated with child sexual abuse, substance abuse, and mental disorder
Cunradi et al. (2009)	Convenience sample of construction workers and their partners, California, U.S.	848 male construction workers (and their spouse/partners)	IPV, unemployment, problem drinking, interpersonal conflict, impulsivity, childhood experiences, and sociodemographic variables	Problem drinking, relationship length, younger age, impulsivity and experience of adverse childhood events were related to the likelihood of being a male victim
Daigneault et al. (2009)	Data from victimization survey, Canada	9170 women (average age 45.4) and 7823 men (average age 47.2)	Childhood sexual abuse, childhood physical assault, sociodemographic variables, current partner characteristics, IPV	Men who had experienced childhood sexual or physical abuse, were unmarried, and had physical/mental limitations were more likely to have experienced IPV

reported abuse at the hands of a partner, when the sex of the partner was considered, it appeared that only 15.4% were victimized by a male partner. Therefore, when lifetime measures are used, it may be that participants, who now identify themselves as gay, were once a member of a heterosexual partnership. Furthermore, it must be noted that due to the specificity of the participants needed, and the lack of large-scale recruitment channels, many studies focusing on IPV within male same-gender relationships included small sample sizes (Craft & Serovich, 2005; Owen & Burke, 2004; Toro-Alfonso & Rodríguez-Madera, 2004), and were formed by convenience sampling (Balsam et al., 2005; Craft & Serovich, 2005; Henderson, 2003; Houston & McKirnan, 2007; Nieves-Rosa et al., 2000; Toro-Alfonso & Rodríguez-Madera, 2004; Turell, 2000), and, therefore, may be less representative. It is essential that larger random samples are used in order to advance our knowledge of IPV within same-gender relationships.

Further, many of the studies which have been included in heterosexual estimates do not state the sexuality of their participants; therefore, it is very likely that some of these samples include some gay participants (Breiding et al., 2009; Ernst et al., 2000; Harwell et al., 2003; Hines, 2007; Hines & Saudino, 2003; Laroche, 2005; Leung & Cheung, 2008; Lysova & Douglas, 2008; Mechem et al., 1999; Mills et al., 2006, 2003; Mirrlees-Black, 1999; Murty et al., 2003; Paul et al., 2006; Porcerelli et al., 2003; Roe et al., 2009; Romans et al., 2007; Romito & Grassi, 2007). Additionally, due to the small number of studies available when results were split according to method and timeframe, any conclusions drawn from these findings are at best tentative, and should be considered cautiously.

Despite results being examined according to method and timeframe, it is likely that different samples and methods represent and measure different types of IPV (Johnson, 2006) which are impossible to assess retrospectively. Therefore, the estimates of the prevalence of IPV remain extremely varied, and no consistent picture emerges from these data. In order to remedy this, researchers are encouraged to focus on specific types of IPV (Johnson, 2006) in order to make estimates of prevalence more meaningful.

3. Correlates of intimate partner violence against men

This section reviews research on factors which appear to correlate with the experience of IPV in men. Recent research has identified several demographic, attitudinal and childhood factors that correlate with male IPV victimization. For details of the studies reviewed, please refer to Table 6.

3.1. Sociodemographic correlates

Thirteen studies were identified as being relevant to sociodemographic correlates (see Table 6). These are reviewed below.

3.1.1. Age

Mirrlees-Black (1999) found that males aged between 20 and 24 years were most at risk of IPV, based on those who had experienced IPV within the last year. Additionally, Harwell et al. (2003) found that American Indian male victims of physical and emotional abuse were likely to be between the ages of 18 and 44. Cunradi et al. (2009) also found male victims of IPV to be younger than non-victims. However, Chen and White (2004) found that age was not significantly related to IPV victimization in men. Contrary to this, Pournaghash-Tehrani and Feizabadi (2007, p.1933) found that male victims of IPV were more likely to have experienced physical violence if between the ages of 35 and 50 years, although, victims of psychological violence were older (60 years or above). However, it should be noted that due to the specificity of the sample used in this study (Pournaghash-Tehrani & Feizabadi, 2007), that these results are unlikely to be representative of male victims of IPV in general.

In a sample of gay men, Greenwood et al. (2002) found that men who were 40 years old or younger were more likely to experience IPV; however, other research has suggested that age is not related to the likelihood of IPV within male same-gender relationships (Bartholomew, Regan, Oram, & White, 2008; Houston & McKirnan, 2007; Nieves-Rosa et al., 2000). This lack of association has been suggested to be due to differences in lifestyle, with IPV in heterosexual relationships decreasing with age, due to life events, such as marriage and having children; therefore, this pattern may begin to emerge in male same-gender relationships as these life events become more frequent (Bartholomew, Regan, Oram et al., 2008).

3.1.2. Education

Chen and White (2004) did not find education to be significantly related to IPV victimization in men, however, Seow and Foo (2006) found that male victims of IPV had a fairly high level of education, and tended to be equally or more educated than their partners, although it must be recognized that these findings are based on a sample of only 14 men. Pournaghash-Tehrani and Feizabadi (2007) found that male victims of physical IPV were likely to be in the highest paid category and to have a Masters level education. However, victims of psychological violence tended to have a slightly lower level of education (Pournaghash-Tehrani & Feizabadi, 2007). Pournaghash-Tehrani and Feizabadi also found that there was a relationship between various factors and certain specific acts experienced, for example, "cessation of marital intercourse" (p.1932) was most likely to be experienced by men with least education, whilst certain physical acts, such as "throwing objects" (p. 1932) were mostly experienced by those with a Bachelors degree.

3.1.3. Socio-economic factors

A relationship between socio-economic variables and the experience of IPV have also been found within male same-gender partnerships (Houston & McKirnan, 2007; Turell, 2000), although the direction of this association is less obvious. Turell (2000) found that higher income was related to higher rates of IPV. However, Houston and McKirnan (2007) found that those with higher socio-economic-status reported less IPV. Similarly, Bartholomew, Regan, Oram et al. (2008) found lower income and education were associated with a higher degree of IPV, although only for bi-directional IPV. Greenwood et al. (2002) also found that those with a higher level of education were less likely to be victimized within a partnership, and bizarrely, that gay men who were employed part-time in comparison to full-time were 35% less likely to experience IPV.

3.1.4. Summary

In summary, it would appear that socio-demographic correlates of IPV are largely similar for gay and heterosexual male victims, who tend to be well educated and have well paid jobs (Houston & McKirnan, 2007; Pournaghash-Tehrani & Feizabadi, 2007; Seow & Foo, 2006). In addition, some correlates, such as age have been consistently found in heterosexual male samples (Cunradi et al., 2009; Mirrlees-Black, 1999; Pournaghash-Tehrani & Feizabadi, 2007) but not in gay male samples (Bartholomew, Regan, White et al., 2008; Houston & McKirnan, 2007; Nieves-Rosa et al., 2000). However, this may be an artifact of the generally smaller and less representative samples used in research on gay male victims (Bartholomew, Regan, Oram et al., 2008; Nieves-Rosa et al., 2000).

3.2. Attitudinal correlates

Four studies relating to attitudinal correlates of IPV victimization in men were identified (Chen & White, 2004; Fitzpatrick et al., 2004; Robertson & Murachver, 2007a, 2007b). Fitzpatrick et al. (2004) found that men with less traditional gender-role beliefs were less likely to be psychologically or physically victimized, whereas women

holding these views were more likely to both psychologically victimize and be victimized. Robertson and Murachver (2007b), found that male victims (and perpetrators) were more likely to hold traditional beliefs about gender, hostile attitudes, were dominating, and had limited communication skills. Robertson and Murachver (2007a) similarly found that “hostility to women”, “negative attribution”, “communication problems”, “dominance”, as well as lacking an “alternative to violence” (p. 648) were associated with being a victim, and a perpetrator of IPV. However, Chen and White (2004) did not find gender role ideology to be significantly predictive of IPV victimization in men.

3.2.1. Summary

The severely limited research in this area generally suggests that male and female victims and perpetrators may hold similar attitudes, that these differ from those without a history of IPV (Robertson & Murachver, 2007a, 2007b), and that traditional beliefs may be associated with men's victimization (Fitzpatrick et al., 2004). However, it should be noted that two of these studies (Robertson & Murachver, 2007a, 2007b) utilized the same sample, which further restricts the applicability of the results. Unfortunately, no studies relating to the attitudinal correlates of IPV in gay men were identified, revealing a totally neglected area of research.

3.3. Childhood experiences

Childhood correlates of IPV have been investigated in women, and several consistent factors have been identified. Most notably, observing parental violence as a child (Bensley, Van Eenwyk, & Simmons, 2003; Ehrensaft et al., 2003; Gelles, 1977) and the experience of sexual and physical abuse as children (Bensley et al., 2003; Cohen et al., 2000; DiLillo, Giuffre, Tremblay, & Peterson, 2001; Ehrensaft et al., 2003) have been found to be related to the later experience of IPV. Other factors, such as attachment security (Henderson, Bartholomew, & Dutton, 1997) and conduct disorder (Ehrensaft et al., 2003) have also been suggested to be related to IPV victimization in women. However, it is necessary to investigate whether these findings are relevant to male victims of IPV. Thirteen studies were identified as being related to childhood experiences (see Table 6). These are reviewed below.

3.3.1. Child abuse and maltreatment

Research has consistently demonstrated that childhood physical and sexual abuse is associated with men's later victimization within an intimate partnership (Affi et al., 2009; Coker et al., 2002; Daigneault et al., 2009; Flinck et al., 2008; Rosen et al., 2002; Tjaden & Thoennes, 2000a), as is emotional abuse (Rosen et al., 2002) and neglect (Flinck et al., 2008). Additionally, adverse childhood experiences (including witnessing parental violence, alcoholism and poor mental health of a caregiver) were found to be more common in those who later experienced IPV (Cunradi et al., 2009). Chen and White (2004) also found parental fighting to correlate with IPV victimization in men (although in a multivariate analysis, it was not found to be a significant predictor). However, other studies found witnessing violence (Affi et al., 2009) and being beaten as a child (Chen & White, 2004) not to be related to later experience of IPV. However, in gay male victims of IPV, both the experience and witnessing of abuse during childhood has been found to be associated with IPV (Bartholomew, Regan, Oram et al., 2008; Craft & Serovich, 2005; Nieves-Rosa et al., 2000; Toro-Alfonso & Rodríguez-Madera, 2004). Interestingly, Nieves-Rosa et al. (2000) found a relationship between experiencing childhood sexual abuse, “and feeling hurt by it” (p.86), and the later experience of sexual and physical IPV within a relationship. Further, Craft and Serovich (2005) found that HIV positive gay males who had witnessed their mother abusing their father during

childhood, or had suffered abuse at the hands of a parent were at increased risk of IPV in adult life.

3.3.2. Attachment style

In addition to these childhood correlates, it has also been demonstrated that heterosexual male and gay male (as well as female) victims of IPV are more likely to have an insecure (Bartholomew, Regan, Oram et al., 2008), or preoccupied attachment style (Henderson et al., 2005), which is characterized by the desire to be loved, and the opposing fear of not being loved (Henderson et al., 2005). Henderson et al. (2005) suggests that in terms of being a victim of IPV, this attachment style may relate to a willingness to endure abuse, due to the fear of losing a partner, and to the perception of even negative attention (in the form of abuse) as satisfying. However, this association was only found in reciprocally abusive relationships (Henderson et al., 2005), and, therefore, may not apply to men who are only victims and not joint perpetrators. Additionally, this study employed a small sample of only 60 men (Henderson et al., 2005), which is likely to limit the extent to which findings can be generalized.

3.3.3. Summary

It appears that male victims of IPV are more likely than non-victims to have had a history of childhood abuse (Daigneault et al., 2009; Nieves-Rosa et al., 2000; Rosen et al., 2002), and of witnessing parental violence (Craft & Serovich, 2005), despite the evidence pertaining to the link between witnessing violence and maltreatment and IPV in heterosexual male victims being more mixed (Affi et al., 2009; Chen & White, 2004; Cunradi et al., 2009).

It is plausible that this relationship exists due to the normalization of violence in childhood, which may encourage acceptance, or perpetration of abuse within an adult relationship (Affi et al., 2009), or may be an artifact of an increased likelihood of reporting IPV, having experienced childhood abuse (Rosen et al., 2002). Additionally, attachment style may be an avenue worthy of exploration, in terms of victim support. Unfortunately, once again, more research is needed on the topic in order to draw any firm conclusions, and in order to explore whether this relationship exists within male same-gender relationships.

3.4. Other correlates

A further group of 13 studies discussed HIV status, and/or addiction in relation to IPV victimization (see Table 6). These studies are included below.

3.4.1. HIV status

A positive HIV status has been found to be related to IPV with gay (Bartholomew, Regan, Oram et al., 2008; Greenwood et al., 2002) and heterosexual relationships (Zierler et al., 2000), which may be due to the stress provoked by this type of diagnosis (Zierler et al., 2000). Zierler et al. (2000) found that almost half of those experiencing IPV or violence by a partner, or “someone else of importance” (p.212) after being diagnosed as HIV positive believed that it was due to their diagnosis.

3.4.2. Addiction

A relationship between substance abuse and IPV within male same-gender relationships has also been repeatedly identified (Bartholomew, Regan, Oram et al., 2008; Cruz & Peralta, 2001; Hellmuth et al., 2008; Klitzman et al., 2002; Nieves-Rosa et al., 2000; Toro-Alfonso & Rodríguez-Madera, 2004). Toro-Alfonso and Rodríguez-Madera (2004) found that 46% of their sample (just under half of whom had experienced IPV) reported “addictive behaviours” (p.647) involving alcohol (46%), drugs (43%), food (36%) and sex (47%). Interestingly, in interviewing 25 gay men, Cruz and Peralta (2001) found that 13 men felt alcohol was a “precipitating factor” (p. 166), and 3 felt they used alcohol or drugs because of IPV. Substance abuse has also been found to be related

to victimization in heterosexual men (Afifi et al., 2009; Coker et al., 2002; Mirrlees-Black, 1999; Rosen et al., 2002), however, Chen and White (2004) found no such relationship.

3.4.3. Summary

Although these studies demonstrate some interesting findings, their limited number prevents any firm conclusions from being drawn. Again, further research is needed, especially in areas which may be of use in terms of victim support, such as attachment style, addictive behaviors, and sexual coercion and abuse.

3.5. Conclusion

In conclusion, it seems that male victims of IPV tend to be well educated, and well paid (Houston & McKirnan, 2007; Pournaghash-Tehrani & Feizabadi, 2007; Seow & Foo, 2006), hold traditional gender views and hostile attitudes (Fitzpatrick et al., 2004; Robertson & Murachver, 2007b), and are likely to have suffered or witnessed violence or abuse, or have been maltreated during childhood (Craft & Serovich, 2005; Cunradi et al., 2009; Daigneault et al., 2009). However, findings relating to the relationship of IPV victimization to other correlates, such as age (Bartholomew, Regan, White et al., 2008; Chen & White, 2004; Pournaghash-Tehrani & Feizabadi, 2007) are less consistent. Research is also lacking in the areas of attachment style, and attitudinal correlates, especially in relation to gay male victims, as well as requiring further investigation of the relationship of HIV status and addiction to IPV in both heterosexual and gay samples.

Additionally, as can be seen in Table 6, some of the samples used in research on gay male victims are small and less representative, leading to less generalisable results (Bartholomew, Regan, White et al., 2008; Craft & Serovich, 2005; Cruz & Peralta, 2001; Hellmuth et al., 2008; Toro-Alfonso & Rodríguez-Madera, 2004). It also relevant that without exception, the studies reviewed on this topic relied on self-report measures to some extent, therefore estimates of association may not be entirely accurate. Further, only one study considered both partners' reports of IPV (Cunradi et al., 2009), the remainder of the studies relied on one partners' perception of the conflict within their relationship, which may lack reliability. Finally, all but three studies regarding heterosexual victims of IPV reviewed above (Harwell et al., 2003; Pournaghash-Tehrani & Feizabadi, 2007; Seow & Foo, 2006) used some form of the Conflict Tactics Scale (Straus et al., 1996), consequently, criticisms regarding the lack of information pertaining to meaning and context apply (Dobash & Dobash, 2004).

4. Ethnicity

Whilst research on IPV is beginning to acknowledge the existence of male victims (Archer, 2000), the vast majority of work on IPV has used North American participants. This is illustrated by the dearth of research on the prevalence of IPV (see Section 2) in any other countries; approximately two thirds of which were conducted in the U.S., using American participants. However, in a multicultural society where people are increasingly mobile, it is important to investigate whether rates of IPV vary by ethnicity, and if so, the reasons for these differences. Cultural factors are likely to have an impact on the rate of IPV, be it by the way IPV is conceptualized, or the degree to which it is accepted (Johnson & Ferraro, 2000; Rosen et al., 2002).

The definition of ethnicity involves cultural heritage, language and traditions, and need not be defined by current nationality (Bhopal, 2004; Oxford English Dictionary, 2006, p.490). The word ethnicity is often used in conjunction with, or confused with the word 'race'. Consequently, although 'race' tends to denote more physical and biological, than cultural characteristics (Bhopal, 2004) some of the studies reviewed use definitions which are derived from race as opposed to ethnicity. In light of these issues, a decision was taken to examine those studies in which participant ethnicity was described, to

determine whether there are any associations between ethnicity and IPV. Consequently, studies which state the geographical location in which they were conducted but do not include details of their participants' ethnicities have been excluded from the main discussion, as geographical location does not necessarily bear any relation to participants' ethnicity. However, as there are so few studies conducted outside of the U.S., a small number of non-U.S. studies which do not specify ethnicity will be discussed in a separate section.

This section includes studies related to prevalence and correlates; however, the majority are studies which have been reviewed in other sections of this review. Finally, only total IPV (IPV including more than one type of violence) is discussed (or physical when only physical is recorded), as estimates of specific types of IPV were too few to be meaningful. Additionally, there were too few studies to separate estimates in terms of participant's sexuality.

4.1. Prevalence

The research which addressed ethnicity in regards to prevalence was extremely limited and comprised of only 18 studies (for details please refer to Table 7). This makes it difficult to draw any conclusions from the research, but it does appear that certain trends exist.

In reference to total IPV experienced (looking at the highest estimates), it appears that of all ethnicities included, Hispanic or Latin American men appear to suffer the most IPV (although it should be noted that this is based on only five studies). Following this are Native American (based on only three estimates), Black, African-American, White, Pacific Islanders, Asian Americans and finally Indian (including Bangladeshi/Pakistani) men.

Additionally, participants classified as African-American or Black generally experienced more IPV than White men. Interestingly, only one study, from the United Kingdom, found White men to be more victimized than Black men (Mirrlees-Black, 1999). Studies which did not offer rates of prevalence, but instead noted the percentage of various ethnicities within the victimized group also suggested that victims of IPV tended to be Black, and that violent victimization was more likely to originate from a partner in the case of Black victims (Mechem et al., 1999; Porcerelli et al., 2003), with the exception of one study (Afifi et al., 2009).

Despite these findings, it is impossible to draw conclusions on the basis of so little research, or to adequately explore the reason for these possible differences. More research is needed in order to illuminate any differences in rates of IPV, and to discern whether these are due to cultural differences such as the extent to which violence is accepted as a means of resolving conflict (Rosen et al., 2002), or perhaps differences in the willingness to report such victimization (Tjaden & Thoennes, 2000a). For example, it is highly likely that differences in cultural beliefs and the concept of masculinity may make men from some ethnic backgrounds less likely to admit to suffering IPV (Chang et al., 2009).

Table 8 includes 12 studies which were conducted in countries other than the U.S., but did not specify participant's ethnicity. Five of these studies were conducted in Canada, and would suggest that the prevalence of IPV in men is similar to that of Black participants (findings relating to the percentage of men having experienced total IPV ranging from 1.9% to 44%), however, as previously noted, country of residence may not have any relation to ethnicity. Additionally, the highest prevalence of IPV, excluding Hines (2007) multisite study, was found by a U.K. study (Paul et al., 2006). Studies conducted in other countries were too few to make any meaningful comments on, however, for information on the prevalence of IPV victimization of men in 60 international university sites, see Hines (2007).

4.2. Correlates

Research which addressed ethnicity with regard to correlates was especially restricted, and comprised of only four studies (Table 9).

Table 7
Studies relevant to ethnicity and prevalence of IPV.

Author (s)	Participants/ethnicity	Sample	Findings
Mechem et al. (1999)	866 men (61.2% African American, 34.3% White, 4.4% other ethnic origin)	Prospective survey at emergency department, Pennsylvania, U.S.	Compared with non-victims victims tended to be African American (58.7% vs. 78.7%). Of victims, 78.7% were African American, 18.5% were White (36.6% of non-victims were White), and 2.8% were of another ethnic origin.
Mirrlees-Black (1999)	4958 men, 5886 women (aged 16–59)	National crime survey, U.K.	4.3%, 2.8%, 2.3% and 1.9% of White, Black, Indian and Bangladeshi/Pakistani men were victims of any IPV (in the previous year)
Coker et al. (2000)	556 participants (313 women, 243 men)	Random digit survey, South Carolina, U.S.	19.8% and 24.2% of Black men and women in comparison to 10.2% and 25.3% of White men and women reported experiencing any IPV (lifetime estimate)
Nieves-Rosa et al. (2000)	273 Latin American men who have sex with men (74 Colombian, 68 Dominican, 59 Mexican, 72 Puerto Rican)	Convenience sample, recruited from various social venues, New York, U.S.	51% experienced any type of abuse, 12% sexual abuse, 33% psychological abuse and 35% physical abuse. Levels of abuse did not differ significantly by origin, although Puerto Rican men experienced slightly more abuse of all kinds, and were more likely to consider themselves to be abused (lifetime estimate)
Tjaden and Thoennes (2000a)	8000 men, 8000 women	National survey, U.S.	7.5% of White men reported IPV, in comparison to 10% of non-White men. More specifically, 12% of African-American, 3% of Asian Pacific Islander, 12.4% of American Indian/Alaska Native, and 9.1% of mixed race men experienced any IPV (including all types). Of African American men, 0.9 experienced rape, 10.8% physical assault, and 1.1% stalking (in comparison to 0.2%, 7.2%, 0.6% of White men). 11.4% of American Indian/Alaska Native men experienced physical assault, and 8.6% and 1.2% of Mixed Race men experienced physical assault and stalking (lifetime prevalence)
Zierler et al. (2000)	2864 HIV positive adults	National survey (probability sample) of HIV positive men and women, U.S.	Among men who slept with men at the time of their HIV diagnosis, risk of IPV (physical) was higher in Hispanic men (amongst other risk factors such as being 40 years or younger, having a female partner, being homeless, being addicted to drugs, and self-identifying as gay).
Greenwood et al. (2002)	2881 men who have sex with men (123 African American, 2266 White, 120 Asian/Pacific Islander, 273 Latino, 77 Native American)	Probability-based sample. IPV assessed using modified version of CTS (any one item), San Francisco, Los Angeles, New York and Chicago, U.S.	Ethnicity was not associated with IPV. 41% of African American, 39.1% of White, 31.1% Asian/Pacific Islander, 41.3% Latino, and 46.2% of Native American participants experienced (physical or psychological) IPV (within the past 5 years)
Rosen et al. (2002)	358 White male enlisted soldiers, 130 Black male enlisted soldiers (mean age 27.5 and 28.3)	Convenience sample, recruited at an Army post, Alaska, U.S.	22.7% of White and 25% of Black men reported suffering minor aggression at the hands of a partner. 12.6% of White and 25% of Black men reported suffering severe aggression from a partner. (Timeframe unknown)
Harwell et al. (2003)	1006 participants (588 women, mean age 46; 418 men, mean age 45.2) American Indian	National survey, Montana, U.S.	1% of men and 3% of women reported physical or sexual IPV (within the past 12 months)
Porcerelli et al. (2003)	679 women, 345 men, aged 18–64	Convenience sample, family practice clinics. Women who had experienced both physical and emotional abuse were excluded, Detroit, U.S.	Of violently victimized White men and women 22.2% and 58.8% of men and women were violently victimized by their partners. Of violently victimized Black men and women, 77.8% and 32.4% were victimized by their partners (within the past 12 months)
Toro-Alfonso and Rodríguez-Madera (2004)	190 Puerto-Rican gay men (mean age 29)	Convenience sample, recruited from various social venues, Puerto Rico	26% suffered physical IPV, 48% psychological, and 25% sexual (lifetime estimate)
Mills et al. (2006)	53 men (mean age 39.7). 74.5% African American, 21.8% White and 3.6% other	Convenience sample, emergency department. IPV assessed using CTS (positive scores derived from normative population scores) and HITS (IPV defined as a positive response to 10 or more items), Louisiana, U.S.	43.9% and 16.7% of African American and White participants experienced psychological IPV, 19.5% and 16.7% of African American and White participants experienced physical IPV (during lifetime)
Houston and McKirnan (2007)	817 men who identified as having sex with men (mean age 33). 51.3% African American, 22.4% White, 16.3% Latino, and 10% Asian/Pacific Islander, other ethnic groups or unknown	Convenience sample, recruited from various social venues, Chicago, U.S.	33% of African American, 33% White, 35% Latino, 27% Asian/Pacific Islander/other ethnicity men reported any IPV (with a past or current relationship). There was no significant difference found between the levels of IPV experienced in these ethnic groups
Afi et al. (2009)	5692 participants (of whom 190 females and 216 males were victims of IPV)	Nationally representative survey sample, U.S. 5692 (of whom 190 females and 216 males were victims of IPV), U.S.	Of male victims (of IPV in the course of their current relationship), 6.3% were Hispanic, 6.7% were Black, 1.5% were of other ethnicity, and 85.5% were White. Of non-victims, 8.6% were Hispanic, 7.7% were Black, 3.8% were classified as other ethnicity, and 79.9% were White. Therefore, compared to non-victims, victims were slightly more likely to be White
Cunradi et al. (2009)	848 male construction workers (and their spouse/partners)	Convenience sample of construction workers and their partners, California, U.S.	21.9% of White, 20.9% of Hispanic, and 44.7% of Black (25.3% of other) men experienced physical IPV from their female partner (within the past 12 months)
Schluter et al. (2007)	893 mothers and 691 fathers (Pacific Islander ethnicity)	A longitudinal convenience sample. IPV assessed using CTS (any reported item; minor/severe violence assessed dependant on responses to various items), New Zealand	28% of mothers and 8% of fathers were victims of any physical violence; 15% and 3% of mothers and fathers victims of severe physical violence (during the past 12 months). 86% and 87% of mothers and fathers victims of verbal aggression (during the past 12 months)
Leung and Cheung (2008)	687 men, 867 women (mean age 43.55) (610 Chinese, 517 Vietnamese, 154 Indian, 123 Korean, 101 Filipino and 72 Japanese)	Survey of Asian Americans. IPV assessed using CTS (experience of any one act), U.S.	17.6% men and 15.3% women experienced physical IPV (during the past 12 months)
Chang et al. (2009)	1470 (707 males, 763 females), mean age 44.4. 13.97% Vietnamese, 21.09% Filipino, 28.83% Chinese and 36.11 other Asian ethnicity	National survey sample of Latinos and Asians. IPV assessed using CTS (minor and severe violence scored according to responses to various items), U.S.	10.15% women, 12% men (minor violence); 1.49% women, 2.6% men (severe violence) (with current partner)

Table 8
Studies relevant to ethnicity and correlates of IPV.

Author(s)/dates	Participants	Sample	Findings
Tjaden and Thoennes (2000a)	National survey, U.S.	4896 women and 5056 men aged 18 and above	Ethnicity (in comparison to partner) was related to IPV victimization
Rosen et al. (2002)	358 White, and 130 Black male enlisted soldiers (mean age 27.5 and 28.3)	Convenience sample, recruited at an Army post, Alaska, U.S.	Junior pay grade was associated with psychological abuse among Black men. Depression, marital adjustment and alcohol problems were more strongly correlated with IPV in Black men. IPV victimization was particularly associated with marital adjustment and depression. Finally, Black men who had suffered child abuse were more likely to suffer severe IPV.
Toro-Alfonso and Rodríguez-Madera (2004)	190 Puerto-Rican homosexual men (mean age 29)	Convenience sample, recruited from various social venues, Puerto Rico	There was a relationship between childhood violent abuse and the experience of IPV during adulthood.
Seow and Foo (2006)	14 male victims of IPV (aged 29–63). Of these participants, 12 were Chinese, 1 Indian, and 1 other	Convenience sample, emergency department, Singapore	Most participants were married, had been assaulted previously, had a higher level of education than the responsible partner, and were aware of relevant services

The findings suggested a relationship between childhood abuse and IPV in Black and Puerto-Rican men, which seems to be a robust finding in relation to IPV in men (Afifi et al., 2009; Coker et al., 2002; Cunradi et al., 2009; Daigneault et al., 2009; Flinck et al., 2008; Rosen et al., 2002; Tjaden & Thoennes, 2000a). Interestingly, Rosen et al. (2002) found that some factors were more strongly associated with IPV for Black men (marital adjustment, depression and alcohol problems), which may be partially due to cultural differences in accepted behaviors used in resolving conflict (Rosen et al., 2002), and in coping with victimization. Interestingly, Tjaden and Thoennes (2000a) found that men whose partners were of a different ethnicity to themselves were more likely to be victimized.

Finally, Seow and Foo (2006) found their sample of Chinese and Indian male victims to be likely to be married, and to be more educated than their partners. However, this sample was extremely limited.

A collection of studies were relevant to correlates of IPV, but did not specify ethnicity (Table 10). The studies (conducted in Canada, Iran, and New Zealand) suggest a link between several correlates and IPV. The most robust findings suggested a link between childhood abuse/violence in the home, attachment, education and IPV. However, the lack of information on participant's ethnicity and the limited number of studies prevents any conclusions from being drawn.

Table 9
Studies of prevalence outside of U.S. (not specifying ethnicity).

Author(s)	Participants	Sample/geographical location	Findings
Niaz et al. (2002)	70 men and 70 women (age range 21–50), including 32 male and 57 female victims of IPV	Participants recruited from a psychiatry department of a hospital, Karachi, Pakistan	Of victims, 36% were male, and 64% were female
L. Henderson (2003)	1911 lesbian women, and 1391 gay men	Convenience sample, recruited from gay services and events, U.K.	22% women, 29% men experienced any IPV
Laroche (2005)	11,607 men, 14,269	Large scale survey using CTS (prevalence measured by at least one positive response), Canada	2.2% women, 1.9% men (12-month prevalence). 7% women, 6.1% men (past 5 years) experienced any IPV
Paul et al. (2006)	180 women, 149 men (72% under 40 years)	Convenience sample, general practices, Dublin, Ireland	43% women, 54% men physical IPV, 77% women, 93% men psychological IPV
Hines (2007)	3461 male students (mean age 22.88)	International survey at university sites. IPV assessed using CTS (minor and severe violence dependant on responses to various items)	The highest level of minor violence was 77.3% in Iran and the lowest was 0% in Taiwan. The highest level of severe violence was 28.6% in New York and the lowest was 0% in Calcutta.
Romans et al. (2007)	9178 women and 7827 men (80% of women and 77.6% of men born in Canada, 2.2% women and 1.7% of men Aboriginal)	National survey. IPV assessed using a modified version of the CTS (any one item), Canada	21.2% women, 20.7% men (total IPV during the past 5 years). 8.6% women, 7% men (physical IPV during the past 5 years). 19.3% women, 18.8% men (psychological IPV during the past 5 years). 1.7% women, 0.2% men (sexual IPV during the past 5 years)
Romito and Grassi (2007)	502 (321 female, 181 male), 92% 25 years or younger	Convenience sample, university students, Italy	27.1% males, 28.3% females (high levels), 35.2% women and 32% men (some IPV)
Bartholomew, Regan, Oram, and White (2008)	186 men (mean age 38.53)	Randomly selected sample, Vancouver, Canada	44% of men had been a victim of violence, 95% the victim of psychological abuse
Bartholomew, Regan, White, and Oram (2008)	284 gay and bisexual men (93% gay)	Random community sample, Canada	41.2% (ever), 12.3% (during the past year) physical IPV, 93.7 (ever), 63.7 (during the past year) psychological IPV, 10.2% (ever), 1.8% (during the past year) sexual IPV
Lysova and Douglas (2008)	388 participants (156 male, 182 female), mean ages 19.8 and 19.5 respectively	Data from an international survey. IPV assessed using CTS. (experience of any act), Russia	28.6% men, 23.1% women (physical IPV during the past 12 months). 56.5% men, 66.7% women (psychological IPV during the past 12 months). 15.4% men, 32.8% women (psychological IPV during the past 12 months)
Daigneault et al. (2009)	9170 women (average age 45.4) and 7823 men (average age 47.2)	Data from victimization survey, Canada	18.8% of men and 19.2% of women experienced psychological IPV, 7% of men and 8.5% of women experienced physical IPV, and 0.2% of men and 1.7% of women experienced sexual IPV with a current or former partner.
Roe et al. (2009)	10,899 men, 12,761 women, aged 16–59	British Crime Survey, U.K.	2.9% men, 4.8% women (in the last year) and 12.8% men, 24.3% women (since age of 16) experienced total IPV

Table 10
Studies of correlates outside of U.S. (not specifying ethnicity).

Author(s)/dates	Participants	Sample/geographical location	Findings
A. J. Z. Henderson et al. (2005)	128 participants (68 women, 60 men), mean age 37.4	Telephone survey, Vancouver, Canada	Preoccupied attachment was associated with psychological and physical abuse for both men and women
Pournaghash-Tehrani and Feizabadi (2007)	120 men (mean age 35.8)	Convenience recruited from a divorce court, Tehran, Iran, seeking divorce due to IPV	Age and level of education were associated with experiencing various forms of IPV. Income also formed an interaction with the above two variables and had an effect in the experience of physical IPV. Men aged 35–50 with an MSc and a high income were most likely to experience physical IPV. Men who were slightly older and with a BSc/BA were more likely to experience psychological IPV
Robertson and Murachver (2007a)	172 participants; 39 incarcerated participants (24 male, 15 female), 67 students (36 female, 31 male), 66 community participants (36 female, 30 male)	Convenience sample, recruited from prison and rehabilitation facilities, as well as a student and community sample, New Zealand. (sample comprised of Caucasian, Maori, Pacific Island, East Asian, Indian, and 'other' participants)	Communication problems, hostility towards women, dominance, negative attribution, and lacking an alternative to violence were associated with suffering IPV for both men and women
Robertson and Murachver (2007b)	Sample as above	As above	Victims (and perpetrators) of IPV had hostile beliefs, non-egalitarian beliefs, fewer communication skills and were more dominating of their partner
Bartholomew, Regan, Oram, and White (2008)	186 men (mean age 38.53) 94% gay, 6% bisexual	Randomly selected sample, Vancouver, Canada	Violence in family of origin and substance abuse were found to be related to IPV, and insecure attachment, income/education and HIV status were found to be related to bi-directional abuse. Age was not related to IPV
Daigneault et al. (2009)	9170 women (average age 45.4) and 7823 men (average age 47.2)	Data from victimization survey, Canada	Men who had experienced childhood sexual or physical abuse, were unmarried, and had physical/mental limitations were more likely to have experienced IPV

4.3. Summary

The research reviewed above highlights the possibility of potential differences between the prevalence and correlates of IPV in men of various ethnicities. However, despite research suggesting that Hispanic and Native American men may suffer more IPV than other ethnicities, it is impossible to make any valid assumption based on such a limited amount of research. It is also necessary that researchers utilize uniform language in terms of ethnicity, and explain their intended meaning so that results can be meaningfully collated and compared. This research is fundamental in order to help inform the support available to victims, so that victims from specific ethnicities can be recognized and supported in the best way possible.

4.4. Implications for future research

Although the expansion in research on the topic of male victims of IPV is encouraging, methodological issues limit the generalization and usefulness of findings. As there are fewer services available to men, and men are generally less likely to report their victimization, or to be assisted by the police (Brown, 2004; Cheung, Leung, & Tsui, 2009; Laroche, 2005), it is likely that samples do not accurately represent the prevalence or severity of IPV in male victims. The samples used in research on IPV within male same-gender relationships are even more problematic, as they are often small and unrepresentative, due to a reliance on convenience sampling methods. However, a number of studies did utilize more representative sampling methods (Bartholomew, Regan, White et al., 2008; Bartholomew, Regan, White, & Oram, 2008; Greenwood et al., 2002; Tjaden et al., 1999; Turell, 2000).

Future research should aim to improve on this situation, by using larger, representative samples and relevant comparison groups (Mines & Malley-Morrison, 2001). In addition, researchers should be mindful of the various types of IPV, how this relates to sampling, and the implications this may have in terms of estimates of prevalence (Johnson, 2006). In view of these differences, it may be pertinent to assess the level of controlling behaviors and reciprocation of violence within relationships (Johnson, 2006), in order to determine the type of IPV in question, and thus provide more useful contributions.

In addition, there are several areas which have demonstrated promise, but which are severely lacking in research. To date, little

research has been conducted on attitudinal correlates, however, the research which does exist, suggests that attitudes of victims may differ from non-victims (Robertson & Murachver, 2007a, 2007b), which may have important implications for victims support and treatment. Similarly, research has suggested a relationship between HIV status and IPV (Greenwood et al., 2002), although the nature of this relationship remains elusive (Relf, Huang, Campbell, & Catania, 2004). One of the most worrying findings is the prevalence of severe sexual coercion and abuse in male same-gender relationships (Craft & Sero-vich, 2005); further research into this behavior is necessary in order to provide victims with the support they need, and to prevent this extremely dangerous type of abuse.

5. Conclusion

Despite debate within the literature over the prevalence of IPV towards men, and the methodological difficulties leading to differing estimates (Johnson, 2006), it is clear that men are victims of IPV, and regardless of the possibility that male-to-female violence may be slightly more common (Roe et al., 2009), this represents a problem in need of addressing. Applying knowledge gained from research on female victims will not suffice. Furthermore, comparisons between male and female victims in order to assert one's importance over the other is a useless and wasteful endeavor, when resources should be focused on the support of all victims of IPV as equally important (Hines & Douglas, 2009, p.582).

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