

**Gender Based Violence:  
The effect of gender based violence on men in Clermont  
Township**

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A research report submitted in partial fulfilment of the requirements for the Degree of  
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## DECLARATION

Submitted in partial fulfilment / partial fulfilment of the requirements for the Degree of Masters of Population Studies, in the Graduate Programme in the school of Development Studies, University of KwaZulu Natal,

Durban, South Africa.

I declare that this dissertation is my own unaided work. All the references, citations and borrowed ideas have been acknowledged. It is being submitted for the degree of Masters in Population Studies in the faculty of Humanities, Development and Social Science, University of KwaZulu-Natal, Durban, South Africa. None of my present work has been submitted previously for any degree or examination in any other University.

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## **ABSTRACT**

Gender based violence still remains an international public health and human rights issue and a concern to many. Very few studies have been undertaken to address the impact of gender based violence on men. The aim of this dissertation is to try and fill this gap by exploring gender based violence against men in the Clermont Township using qualitative and quantitative research methods. The quantitative method used was a survey conducted with 100 men, and the qualitative method used was in-depth interviews with 20 men in Clermont Township. Consistent with previous research, this study found that abused men experience different forms of gender based violence at the hands of their intimate partners. This study found various reasons why abused men stay in abusive relationships. This study also found that abused men do not report the incidents because they feel that no one will believe them and the community will ridicule them. This under reporting of gender based violence against men makes it difficult to have accurate statistics and also to prevent further abuse of men in intimate relationships. Various reasons were given for not reporting the incidents to the relevant institutions. This study also shows that there are not any institutions that provide services for male victims of gender based violence. This is of concern as this pandemic is escalating and it puts men at risk of future violence. Communities should also embark on door-to-door campaigning about GBV against men, so that the communities will know that it is happening, and that it is a threat to many families.

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## LIST OF ACRONYMS

<b>AIDS</b>	Acquired Immunodeficiency Syndrome
<b>CEWAD</b>	Convention on Elimination of Women Against Discrimination
<b>GBV</b>	Gender-Based Violence
<b>GCIS</b>	Government Communication and Information System
<b>HIV</b>	Human Immunodeficiency Virus
<b>KZN</b>	KwaZulu-Natal
<b>LGTB</b>	Lesbian, Gay, Transgender and Bisexual
<b>MDG</b>	Millennium Development Goal
<b>NCAVP</b>	National Coalition of Anti-Violence Programs
<b>NCSW</b>	National Commission on the Status of Women
<b>NGO</b>	Non-Governmental Organisation
<b>SA</b>	South Africa
<b>SAPS</b>	South African Police Service
<b>SMS</b>	Men having sex with men
<b>SSA</b>	Statistics South Africa
<b>UNDP</b>	United Nations Development Program
<b>UNPF</b>	United Nations Population Fund
<b>USAID</b>	United States Agency for International Development
<b>WHO</b>	World Health Organisation

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## **CHAPTER ONE**

### **INTRODUCTION**

#### **1.1 Introduction**

There are various definitions of gender based violence. According to United Nations Population Fund (UNFPA 1998:p1), “gender based violence (GBV) is violence involving men and women, in which the female is usually the victim; and which derived from unequal power relationships between men and women. Violence is directed specifically against a woman because she is a woman, or affects women disproportionately. It includes but is not limited to physical, sexual and psychological harm”. The World Health Organisation (WHO 2008:1) also “defines violence against women and men as any act of gender based violence that results in physical, sexual or mental harm or suffering to women or men, including threats of such act, coercion or deprivation of liberty, whether occurring in public or in private life”. The United States Agency for International Development (USAID) further states that GBV occurs in various forms including the following: battering, intimate partner violence including marital rape and sexual violence, female infanticide, femicide, sexual abuse of female children in the household, early marriage, forced marriage, female genital cutting and other traditional practices harmful to women, sexual harassment in the work place and educational institutions, commercial sexual exploitation, trafficking of girls and women, and violence perpetrated against domestic workers (2009). The study defines gender based violence as any harm perpetrated against a person’s will that is rooted in power inequalities (e.g. physical, education background, financial background, etc.) informed by gender roles in our societies. Though GBV may take many forms, it affects women, children, and men.

It is indisputable that the vast majority of victims of intimate or domestic violence are women and children, and women are considerably more likely to experience repeated and severe violence at the hands of their intimate partners. Gender based violence also occurs in a range of relationships including heterosexual, lesbian, gay, transgender and bisexual (LGTB) people or groups. When most people think of domestic violence, images of battered women or abused children come to their mind, but there is another side to this issue that is not familiar to most people - the abuse of men. Because of society’s perceptions and gender roles

in our societies, there is a lack of adequate recognition that men are also victims of GBV. Men are often silent victims at the hands of their partners because they do not seek help or report the abuse to the relevant institutions (e.g. the police). There is evidence of a growing number of same-sex couples experiencing gender based violence at the hands of their partners (Cape Times Newspaper 25 November 2008). According to WHO (2008), intimate partner violence is one of the factors resulting in health inequalities across gender and it is also a barrier to women receiving effective and equal health care, as acknowledged by international and national documents throughout the world. Research suggest that abused men (heterosexual, homosexual and bisexual) are men and boys who are being abused physically, emotionally, financially and mentally by their partners in their intimate relationships (Whitaker et al. 2007). Seelau, Seelau and Poorman (2003) argue that, despite the high prevalence of GBV against men few studies have focused on abuse in same-sex male relationships.

This paper observes the enormity of GBV against men, irrespective of their sexual orientation, without marginalizing girls and women. In support of this, WHO (2008) makes the point that girls and women suffer greater physically than their male counterparts. Heise, Ellsberg and Gottemeller (1999) further argue that the social and economic status of girls and women always contributes to the environment that excuses, accepts and even expects violence against girls and women. The purpose of this paper is to describe patterns of intimate partner violence among men as well as the impact. This paper hopes to improve awareness of GBV against men. Men can also be the victims of GBV and they need and deserve as much assistance as women victims. Gender based violence against men has been largely neglected, let alone the gender base violence against men who have sex with men (MSM). This study will attempt to highlight violence against men in their intimate relationships as well as give evidence through a review of the literature, statistics and experiences from other countries of men that have been abused by their partners. Gender based violence against men has become a world health issue of our times. Many of the effects of the abuse are the same for women as well as for heterosexual men, homosexual men and bisexual men. There is also a need to understand that GBV is about control, where one party enforces their will upon the other. Many abused men often suffer in silence because they are afraid to be labeled “wimps” or half men (Cape Times Newspaper, 25 November 2008). All victims of gender based violence are likely to feel guilty, blame themselves, feel deeply

ashamed, frightened, experience a loss of self-worth and confidence, and feel isolated and confused about the abuse (Whitaker et al. 2007).

When lay people talk about gender based violence or hear the words ‘domestic violence’, either mental, financial, physical or emotional abuse, most immediately think about women and girls who have been slapped, hit, sexual abused, raped, punched, kicked, bullied, criticised and degraded by their partners. They tend to forget about the large number of men who are suffering abuse at the hands of their partners in silence due to societal and cultural expectations. In support of this, Whitaker et al. (2007) state that women, girlfriends and wives are not the only victims of gender based violence, and strongly urges abused men and the society to become aware of the alarming statistics about women, wives, boyfriends and girlfriends who abuse men, and encourage them to stop being in denial. Whitaker et al. (2007) further argue that men irrespective of their sexual orientation are abused physically, emotionally, financially and mentally by their partners in their intimate relationships.

Steinmetz and Lucca (1988) argue that husband battering and other forms of male abuse are ignored in reviews of domestic violence because it is assumed that the overwhelming majority of victims of violence are women. In clarifying the definition of GBV researchers and practitioners have yet to agree on a common definition of battering that will include both men and women. Even though some battered women advocates (feminist organizations) believe that sending women to violent rehabilitation programmes is a valid option for women who have abused their partners, many battered women advocates disagree (Straus 1999). However, the above statement makes the point that most women advocates see men as perpetrators of violence and women as victims while the situation is that either gender can play either role. Levinson (1989) states that some researchers and activists define battering as a pattern of intimidation, forced control and oppression, and that while batterers frequently use physical assault to consolidate a pattern of domination, they may not always rely upon actual beating. Straus (1999) agrees, arguing that battering is defined as a pattern of behaviours which result in establishing power or controlling one partner over the other in an intimate relationship. In support of this, Dasgupta (2001) makes the point that this definition of battering is broader than the narrow definition which is often used by academics and researchers. Furthermore, Straus (1999) argues that the moral agenda underlying the two

perspectives based on these definitions differences in the goals they aim to achieve. On the other hand, the narrow perspective aims to end oppression of women, whereas a broader approach is to end all physical assaults, regardless of who is the perpetrator or the victim, and both definitions have distinct social and political implications. I would concur that gender based violence should not be attached or limited to a particular gender, because anyone can be the perpetrator and anyone can also be the victim.

Gender based violence has no boundaries and is not limited to one religion, race, or social class, as anyone can be affected by violence at home. It is often difficult to understand GBV for someone who has never been a victim or perpetrator. In support of this, Lori et al. (1999) claim that gender based violence is a culture across the globe and it is a phenomenon of epic proportions prevalent in many families, communities, and societies. Lori et al. (1999) further argue that just as many women and girls are directly experiencing GBV or facing the consequences of GBV in their lifetime, men and boys are also directly experiencing GBV or facing the consequences of GBV in their lifetime. In this paper I will also share some insight regarding GBV against men, irrespective of their sexual orientation. We need to understand that men are also experiencing GBV at the hands of their intimate partners.

For the community to be able to address the issues of male abuse in our society, the community needs to understand that gender based violence against men is a reality and men who are the victims of abuse by their partners need help, encouragement, and support just as much as abused women and children. One also needs to bear in mind that men who experience GBV are in abusive relationships of all types, and that violence occurs in all racial groups, rich or poor communities and ethnic groups (Whitaker et al. 2007). The reasons men not to come forward or report such acts are complex, but fear remains the primary reason which leads abused men to stay in abusive relationships and marriages. Heise, Ellsberg and Gottemeller (1999) further argue that abused men who are beaten and battered by their partners say that there are more men being abused than women being abused by men. However, the communities should know or bear in mind that gender based violence is about control and men in abusive relationships are victimised just as much as women in abusive relationships. When it comes to dealing with domestic violence there seems to be similarities between heterosexual men and same-sex couples. The similarities are that men have more

difficulties finding appropriate support and victims seeking support have to confront a number of negative perceptions and stereotypes before accessing assistance from people who are supposed to be assisting them (Heise, Ellsberg and Gottemeller 1999).

According to the Cape Times Newspaper (2008), because of gender structures in our societies, there is a lack of acceptance that men can be the victims of gender based violence. This has led to the increasing number of heterosexual men remaining silent victims of GBV and violence at the hands of their partners, and at the same time there is a fast growing number of same-sex couples experiencing gender based violence, all the while remaining silent on the issue. When it comes to dealing with domestic violence there seems to be similarities between heterosexual men and same-sex couples. Duvvury (2009) argues that the current recession and economic downturn can trigger violence and GBV has a very close links to poverty, and overall development. According to the International Centre for Research on Women (ICRW 2009) GBV is a problem of extreme magnitude in less developed countries but at the same time is a universal problem. Moser and McIlwaine (2004) argue that, particularly with intimate partner violence, various studies find a strong statistical association between the socio-economic status of the household and the risk of gender based violence. Duvvury (2009) argues that GBV has immediate impacts and long-term consequences for the victims, which together can cause the dynamics between genders, poverty and development, and further undermine the goals of development and hinder progress towards the Millennium Development Goals (MDGs). According to ICRW (2009), GBV has an immediate cost for households and also for communities. They explains that at the household level violence results in out of pocket expenditure to access health services, the police, the courts, or other conflict resolution bodies. In Uganda, for example, the average expenditure for services due to GBV incidents was \$5 (US dollar), three quarters of the average weekly household income. Due to the incidents of violence, men and women often miss work which can have an impact on their salaries which can drain household income (ICRW 2009). This can also lead to lower productivity, absenteeism, and lower earnings by victims of violence, and that will have an impact on the Gross Domestic Product (GDP) of each country through multiplier effects (ICRW 2009).

## 1.2 Rationale for the study

*“I told my colleagues that I had scratched myself during the night due to the change in washing powder – actually it was my wife who did it, but I could not tell them that” (David) (Daily New York Newspaper, 27 February 1995 ).*

It is indisputable that most recorded cases of intimate violence are against women and girls rather than men. However, it has been established that men can also be victims of GBV at the hands of their intimate partners. The perpetrators believe they have a right to control, humiliate, and manipulate the other person, and this notion is not only held by some men but also some women. Most attention is given to abused women and children and men are often overlooked as victims of gender based violence (Henderson 2003). According to Fisher (2008) male victims of gender based violence are faced with two obstacles with the law because male victims have to prove that they are the victims of the circumstances and also to ensure that children are protected because children might be the next victims of violence. Due to these reasons mentioned above, men often decide to stay in abusive relationships (Henderson 2003).

Steinmetz and Lucca (1988) argue that GBV can affect anyone. Men, irrespective of their sexual orientation, experience GBV but the reality is that violence in their relationships is rarely discussed because society does not believe that men can be the victims. Fisher (2008) argues that men who are victims of GBV are isolated in their communities and are at risk of further abuse by their abusive intimate partners. Steinmetz and Lucca (1988) contend that for homosexual men and bisexual men it is difficult to report intimate violent abuse to the police because they do not want to disclose their sexuality. Fisher (2008) argues that homosexual and bisexual men experience domestic violence at the same rate as heterosexual women but few organisations give men survivors advice or even support. In addition, homosexual men and bisexual men experience GBV the same way as their heterosexual counterparts (Henderson 2003).

According to Steinmetz and Lucca (1988) to cope with the abuse, men have to use various tactics to diffuse the violence at home. However, men will do everything in their power to stop the abuse. When they fail most men react by staying silent because they cannot even tell

their families or friends about the situation. Heterosexual men will often make excuses about their injuries even when they end up at the hospital or when they see their family and friends. Steinmetz and Lucca (1988) further argue that the victims of gender based violence do not disclose the abuse to anyone because of fear of humiliation and stigma, even when the abuse is life-threatening. Below are the various tactics that are employed by the heterosexual victims to diffuse the violence:

- Leave the house and go to family or friends (but tell no-one the real reason)
- Cover up for their violent partner
- Go into another room or lock themselves away in a safe place
- Accept responsibility for all sorts of untrue accusations
- Promise to do whatever their partners asks or demands
- Sleep in their car, shed, garage or wherever they can find shelter. (Corry et al. 2002).

The rate of gender based violence in heterosexual relationships is almost the same as homosexual and bisexual relationships, and there is not much difference in the abuse between men and women. Men can be hit, kicked, punched, verbally and psychologically abused, have their self esteem eroded away, become more isolated from those around them, pushed, or bitten by their women abusers. Women can also go to the extremes of using weapons like knives, guns, or any blunt object that can be used to strike. Abused men are not necessarily smaller in stature or physically weaker than their abusers, but they do not use sex or physical strength to hurt or harm their partners even though they are being hurt (Lori et al. 1999). Lori et al. (1999) further argue that men will prefer to take the beating from their partners rather than hitting back to defend themselves and risk harming their attackers because they (men) are aware that they run the risk of being accused of being an abuser themselves.

WHO (2008) states that intimate violence is wide-ranging and has a great impact on the victim. For the victim the impact can be overwhelming and includes physical injuries (which for women may lead to unwanted pregnancy, pregnancy complications, or miscarriage), emotional problems which may lead to suicide, suicidal ideation and depression; additionally alcohol and drug abuse by the victim can be used as a method of coping with the violence.

According to the American Bureau of Justice Statistics, in the United States between the year 1976 and 2002, 11% of homicides were committed by women (an intimate partner) against their intimate partners (men) and in several cases injuries that were sustained from this intimate violence were fatal (Bureau of Justice Statistics 1988). As Riger, Raja and Camacho (2002) argue, there is also a social problem related to intimate partner violence and that social problem (the victim deciding to be a recluse or keep away from people because of the GBV) can have a negative effect on the victims relationships with friends, family and future intimate partners, and the problem can also affect work or school.

According to USAID (2009) after 26 years of struggling with the HIV/AIDS pandemic, there is still social discrimination and stigma that is associated with HIV/AIDS. Around the world homosexual, bisexual and transgendered men often face discrimination; poverty, stigma, human rights violations, homophobia and heterosexism, and they are unable to access health services. According to Anderson et al. (2003) GBV increases the inequalities in a relationship resulting in an inability of those affected to make and implement preventative decisions. This refers to the inability to negotiate safer sex. GBV is associated with fear and power differentials and also associated with limited ability to negotiate safer sex with your abusive partner (Anderson et al. 2003). As Anderson and colleagues state, GBV increases the risk of HIV indirectly and the victims of GBV are more likely to be HIV positive (Anderson et al. 2003).

### **1.3 Objectives of the study**

This study hopes to shed more insights into GBV against men. It explores patterns of GBV against men and its impacts. The aim of the study is to

- ascertain the extent of gender based violence against men in Clermont,
- outline the main types of GBV,
- determine the effects of gender based violence on men, and
- investigate the strategies used by men to protect themselves against GBV.

In this study I will largely use a combination of both the qualitative and quantitative research methods. A Holloway (1997) state that qualitative research is a method of social inquiry that focuses on the way people interpret their experiences and also makes sense out of their experiences and the world they live in. Quantitative data is in the form of numbers and also presents concept that may take on greater or lesser value (Lynch 1983). The main aim of using this type of method is to understand the social reality of individuals, groups, and their cultures. In this study specifically, the data will be drawn from a survey of 100 men and 20 in-depth interviews with men living in the Clermont Township.

#### **1.4 Theoretical framework**

This study will the use formulated theory of learned helplessness to investigate GBV against men in Clermont Township. This theory was the work of Martin Seligman, originally developed to explain why dogs experiencing an uncontrollable electric shock failed to learn escape or avoidance behaviour (Overmier and Seligman 1967). However after observing the dogs' behavior of learned helplessness Seligman (1975) then likened this theory to depression in humans because this theory showed motivational, cognitive and behavioral components. Walker (2000) explains that Seligman and colleagues discovered that when laboratory animals were repeatedly and non-contingently subjected to shock, the dogs became unable to escape from the painful situation, even when escape was possible and readily apparent to animals that had not been subjected to helplessness training. Walker (2000) further explains that the early experiments found that dogs learned to be completely passive when faced with an unpleasant environment that the animal could not control. In order to create such environments, dogs were exposed to a series of electric shocks that they could either avoid or control but dogs that had never had uncontrollable experiences quickly learned to avoid the shock. Walker (2000) further argues that because the dogs had no control, or influence over the situation, they learned to be helpless, passive and respond to these stressful events. Seligman labelled the theory as 'learned helplessness' because this theory explains the passive behaviour the dogs exhibited (Overmier and Seligman 1967). Abrahamson, Seligman and Teasdale (1978) explain that previous models claimed that all humans would become completely passive and totally dysfunctional in response to all uncontrollable situations. However, the theory developed by Seligman proved that not all humans respond the same way to uncontrollable situations.

According to Abrahamson et al. (1978), other theoretical frameworks came into being and were consequently taken from the original theory. Abrahamson et al. (1978) argue that looking at individual underlying attributes for negative events shows how humans make clear uncontrollable and unpleasant situations. The new framework theory on learned helplessness shows that such uncontrollable and unpleasant events were influenced by the perceived salience of situational events; that is the worse the event that occurs, the more the person will be subjected to the situation. Rotter (1966) argues that these uncontrollable and unpleasant events were thought to reflect human common beliefs about what causes the negative and uncontrollable situations. Rotter (1966) further argues that these beliefs also affect a person's ability to control or influence the final outcomes of the events. In support of this Peterson, Maier and Seligman (1993) make the point that humans were found to be subjected to their beliefs about both the uncontrollable and unpleasant event, as well as the outcomes from that situation.

Learned helplessness theory also assumes that underlying the uncontrollable and unpleasant event are three dimensions: global versus specific, stable versus unstable, and internal versus external (Abrahamson et al. 1978). According to Abrahamson et al. (1978) a global underlying attribution occurs when a person assumes that the causes of the negative events is constant across different situations, while a specific underlying attribution happens when a person assumes that the cause is inimitable to only one event. A stable underlying attribution happens when a person assumes that the cause is constant across time, while an unstable underlying attribution occurs when a person assumes that the cause is specific to one point in time. Olson (1983) argues that internal underlying attributions are associated with low self-esteem; while Abramson et al. (1978) argues that external underlying attributions are associated with the belief that the uncontrollable situation is caused by independent external forces. According to Peterson et al. (1993) to understand why people respond differently to different situations, one needs to understand the attributional explanatory style of that particular individual. Abrahamson et al. (1978) argue that a group of people may experience the same event or situation and each individual will interpret the event or situation differently from the rest of the group, with certain individuals being more likely to acquire learned helplessness and, later depression. In support of this, Peterson et al. (1983), make the point that people who see the situation or event as permanent and that they cannot do anything about the situation are more likely to suffer from learned helplessness and depression.

The learned helplessness theory explains what happens when a person comes to believe they have no control over their situation and whatever they do is ineffective. As a result of this, the person feels like they do not have control over the situation and will stay passive in the face of the unpleasant, harmful, or damaging situation even though they do have the ability to improve the situation (e.g. to leave the abusive partner) (Peterson et. al. 1993). For example, GBV is a negative health consequence, and learned helplessness theory can be used to motivate people who have never been perpetrators or victims of GBV not to engage themselves in such a situation. Research shows that victims of GBV become psychologically paralysed. The victims fail to seek help and they may even appear passive before the beating. At some stage when the victim does contact the help centre, they are very hesitant about receiving help and they are likely to return to the batterer (Gondolf 1998).

According to Southwood (1986) human beings who have experienced learned helplessness or have been identified with learned helplessness tend to have motivational, cognitive, emotional, and behaviour deficits, which can lead to depression. Walker (2000) further argues that animals and human beings who were subjects in the research were found to have similarities of negative, pessimistic beliefs about the effectiveness of their success and the likelihood of being rewarded in the future. Walker (2000) further argues that both the animals and the humans showed motivational discrepancy while on trial. Both animals and humans showed signs of emotional upset with illness, phobias, sleep disorders and other symptoms similar to those of Abused Human Being Syndrome, and they were diagnosed with post traumatic stress disorder. In support of this, Klein, Fencil-Morse and Seligman (1976) make the point that depression has shown to be the results of learned helplessness. Hogben et al. (2001) also mention that the high rate of depression is attributable to physical violence. In support of this, Fishbach and Herbert (1997) contend that victims of physical violence and forced sex are more depressed than non-victims of physical violence and forced sex. Roth and Newman (1992) and Wortman and Brehm (1975) all argue that people who suffer from uncontrollable and negative events in their life experience disruptions in emotions, aggression, physiology and problem solving. They just conform to the abusive situation and perceive that there is no way out of the situation. This situation or event can be associated with passivity, poor socialisation with people, uncontrollability, and ultimately the situation becomes a threat to their physical and mental well-being.

## **1. 5 Organisation of the study**

This dissertation consists of five chapters. Chapter one comprises a definition and introduction to gender based violence, objectives of the study, and the organisation of the study. Chapter two comprises the literature review and also look at various issues regarding gender based violence against men. Chapter three comprises the research methodology that has been used in the study. Chapter four summarises the findings of the study and implications of the results, and lastly, chapter five discusses results of the study and provides recommendations and a conclusion.

## CHAPTER TWO

### LITERATURE REVIEW

#### 2.1 Introduction

In recent years, gender based violence has been subjected to a rather restricted analysis based on stereotypes of what a victim looks like and what an abuser looks like (e.g. the victim is a woman, and the perpetrator is a man). These stereotyped beliefs portray victims as small and timid, while the represented abuser is large, brutish and aggressive man. Those gender stereotypes are dangerous because they leave certain groups of people suffering and vulnerable as they do not fit into these descriptions which dominate the literature and support organizations (Whitaker et al. 2007).

A number of international declarations were adopted by different countries to fight the violence against women, children and men. These declarations are supposed to reaffirm faith in fundamental rights, in the dignity and worth of a person, and the equal rights of men and women. According to the Convention on Elimination of Women Against Discrimination (CEWAD) (1979), these declarations further affirm the principles of the inadmissibility of discrimination and also proclaim that all humans are born free and equal in dignity and rights and that everyone is entitled to all rights and freedom without distinction of any kind including distinction based on sex. By the look of things, these declarations protect particularly females and children only, and not even young boys are protected by these international declarations. Gender based violence is a human rights violation. Under the Universal Declaration of Human Rights, International Covenant on Civil and Political Rights, International Covenant on Economic, Social and Cultural Rights, Convention against Torture and Other Cruel, Inhuman Treatment or Punishment, and the Convention on the Elimination of All Forms of Discrimination against Women, women and men should enjoy the same rights, freedom and autonomy (Desarrollo 1997). Linking the issue of violence with human rights offers new possibilities in the struggle to end gender based violence against men and discrimination against the victims.

## **2.2 Historical background on GBV**

While for many years gender based violence was hidden behind closed bedroom doors, it is now more common in literature. The images that have been associated with gender based violence traditionally depict males as batterers and females as victims. The untold story is that women can be the perpetrators and men can be the victims.

A review of the literature suggest that gender based violence is a growing pandemic in current times. According to Fontes (1999) the reality of spousal abuse is not a new phenomenon but can be dated back centuries ago. Fontes (1999) further argues that ancient law instructed the abused husband to engrave the name of their verbally abusive wives on a brick that was going to be used to knock their teeth off if they repeatedly abuse them. In support of this, Sommer (1994) makes the point that according to ancient law, husbands were not allowed to use violence against their wives, and it was understandable for women to use violence against their spouses. Fontes (1999) also argues that there are historical records of husband beatings and those records show that abused husbands were beaten by their wives. These men did not only experience the shame of the beating but they also faced public humiliation and condemnation from the society for not controlling their wives. Fontes (1999) made an example citing George (1994): ‘In France, a husband who allowed his wife to beat him was made to wear an outlandish outfit, ride backwards around the village on a donkey while holding onto the tail’.

Some studies conducted in Europe and the United States in the 1970s (Gelles 1974; Langley and Levy 1977; Dobash and Dobash, 1979) show that there was a high rate of male abuse. According to Markowitz (2000) violence against men dates back to the 1970s, but it only gained significant attention in the 1990 particularly due to the men’s movements. According to Hines and Malley-Morrison (2001), Kelly Suzanne Steinmetz was the first sociologist to bring public and academic attention to the ‘phenomenon of husband battering syndrome’ back in the 1970s. Pagelow (1984) also argues that abuse against men has been not recognised for long, and the victims of GBV have to cope without any help, support or guidance from the government and NGOs. Pagelow (1984) furthermore recognizes that women can create a fearful environment for their partners and can be violent. The study

conducted by Stark and McEvoy (1970) also found equal support for 'wife hitting a husband syndrome' as for 'husband hitting a wife syndrome'. Markowitz (2000) further argues that estimates show 45 of every 1 000 males and 30 of every 1 000 females are the victims of severe violence committed by their spouses.

Hines and Malley-Morrison (2001), state that since their 1970 study of family violence, incidence reports of women abusing their husbands have been reported. In support of this, Gelles, (1974) makes the point that in his clinical samples, GBV occurs with equal frequency among both husbands and wives, and his findings were based on several different sources. During 1970s several studies of husband abuse were exposed internationally and the findings of these studies were startling. The findings of these studies showed that there were similarities in gender based violence between male and female abusers in intimate relationships (Hines and Malley-Morrison 2001). In support of this, Kelly (2003) makes the point that leading sociologists over the past 25 years have repeatedly found men and women committing gender based violence at similar rates. However, this shows that gender based violence against men is not a new phenomenon; it has been with us for decades. Kelly (2003) further argues that nationally represented studies, such as the family violence survey and other studies in 1977, confirmed that husband battering was as prevalent as wife abuse. In support of this, Dobash and Dobash (2004) make the point that researchers dealing with family violence claim that both men and women who are abusers have the same characteristics, experiences and motivations. Furthermore Migliaccio (2002) argues that the experiences of abuse between men and women will never be equal because their experiences, are not identical. These reports have caused controversy which continues even today causing husband or male abuse to continue to be denied, minimised, and defended. However, the early studies confirm that husband or male abuse has been occurring for a number of years with further confirmation by recent research.

### **2.3 What constitutes gender based violence against men?**

In the literature it is clearly indicated that there are no absolute rules for understanding the emotional differences between genders. GBV is any incident or threatening behaviour, abuse or violence (physical, sexual, financial, psychological or emotional), between adults who are or have been intimate partners or family members, regardless of gender or sexuality (Goldberg and Tomlanovich 1984). Goldberg and Tomlanovich (1984) note that research data on GBV victims that required hospital treatment has revealed that women are capable of inflicting serious physical damage to their victims. In support of this, George (1994) points out that researchers have reported that men are likely to suffer serious injuries because of the prevalence of weapons used by women against men. Katy (2009) argues that as result of domestic abuse, psychological damage can have severe implications for a person's life, and this can lead to depression, anxiety, and substance abuse which can affect all aspects of life. Katy (2009) has mentioned five major categories of GBV against men: emotional, financial, isolating, physical, and sexual abuse.

### **2.4 The role of feminism**

According to Dutton, Nicholls and Spidel (2005) feminists believe that, universally, females are more vulnerable to abuse by men, and men are less vulnerable to abuse by women. Dobash, Dobash, Wilson and Daly (1992) mention that feminist researchers argue that violence perpetrated by women against men is different than the violence perpetrated against them by men. According to Stets and Straus (1990), family violence researchers suggest that women are more likely to initiate violence against men, and violence against men by women can always be constructed as 'self defence'. In support of this, Straus and Gelles (1986) and Morse (1995) make the point that women are more likely to be the perpetrators of GBV and more likely as well to use severe violence against their male partners. MacInnes (1998) argues that gender is a concept that has been constructed by society to imagine the existence of differences between men and women, when in reality there are none. Furthermore, Lambert, Pickering and Alder (2003) contend that traditionally men were viewed as bread winners and women as the nurturers. This culture created stereotyped views instilled in society and repeatedly by the media which makes it hard for people to believe that women could be perpetrators of GBV, as men are the dominant sex.

Traditionally, men who were victims of GBV were publicly humiliated to conform to societal gender roles that they are the dominant sex. This culture had the effect of repressing male victims to keep GBV against men invisible (George 2007). Kimbrell (1995) argues that GBV is not about gender or society, and that GBV should be seen as a human issue where all victims can get help, and all need to rebuild their lives regardless of whether they are men or women. Dobash and Dobash (2004) and George (2007) argue that men who are the victims of GBV deserve help and their needs should be identical to the needs of female victims (e.g. funding should also be available for men, as well as equal services). Lambert et al. (2003) argue that the anti-man culture surrounding GBV has an effect on male victims as they are reluctant to get help because of humiliation and ridicule they may experience. Dominant notions of masculinity also play a major role in viewing men as perpetrators of GBV, but they also influence why men victims seem reluctant to seek help and support.

According to Dasgupta (2001), the recent movements against women abuse have been confronted with an extraordinary twist of circumstances because practitioners and advocates around the world have noticed an increase with women being charged for domestic violence. In support of this, Fontes (1999) makes the point that the feminists have addressed half of the problem regarding intimate violence, because their primary interest is to showcase the maltreatment of women by men, while neglecting the maltreatment of men by women. Lambert et al. (2003) argue that feminist do not believe that women have the potential to be abusers in intimate relationships. Miller (2001) further argues that feminist do not acknowledge that women are abusers because feminist research findings are deeply rooted in feminist beliefs that do not recognise women as perpetrators of violence against men. Furthermore, Kimbrell (1995) maintains that feminists are moving away from domestic violence as being a human issue and emphasising the gender issue. Conversely Lambert et al. (2003) contend that the well known feminist Erin Prizzey maintains that violence is not a gender issue because violence is due to a dysfunctional background, which both men and women can experience in their youth, and therefore concluded that domestic violence is a family and societal issue.

According to Lambert et al. (2003), culture has played a major role in the perpetration of GBV against men. Lambert et al. (2003) further argue that society throughout history has

repressed male victims of GBV, and an anti-man culture surrounding domestic violence has been created. Governments have also elevated this culture of repressing male victims of GBV with their focus on female victims in their policy and disregard for male victims, and that has also greatly impacted authorities, especially the police services, in the way they deal with male abuse. Fontes (1999) claims that GBV against men has been neglected because domestic violence workers do not see this as a social problem to be addressed, or they are not interested, or do not care or have the will to reach for male victims as they have for female and child victims. Fontes (1999) further argues that domestic violence workers neglect male victims because they want funding to be earmarked for women and children only. They do not want to spend the money on male victims of GBV. Steinmetz (1977) contends that violence against men is not uncommon but many tend to dismiss, ignore and treat it with selective inattention. Steinmetz (1977) further argues that male abuse remains hidden while female abuse is paraded before the public, as crisis lines and victim shelters are being established. Ristock (2002) believes that finding the accurate language to describe intimate partner violence can be difficult because language itself is not neutral and it reflects assumptions that are embedded within the dominant culture. Brown (2004) argues that gender role messages have created myths about intimate partner violence, regarding who can be a victim or a perpetrator. Language change in our culture can be one of the major steps to addressing the cultural challenges that we face. For example, a man cannot go to the police and report the violence and mention that he was abused by his boyfriend due to the heterosexist culture and language. There are several social and cultural reasons that cause men not to report gender based violence against them, and not many efforts have been made to encourage men to report the abuse. Most of the literature has shown that men are always perpetrators and women are the victims of gender based violence, forgetting that women now have lobby groups, NGOs, and government intervention programmes to support them and speak out about domestic abuse and violence against them.

## **2.5 Statistics on victims of GBV**

The research indicates that little is known about the actual number of men who are in abusive relationships because men do not report GBV against them. We must also bear in mind that the statistics on men abuse can be low when compared to their female counterparts due to underreporting of GBV against men by the victims, either to the authorities or institutions

that deals with the issue of GBV. In support of this, Dasgupta (2001) recognises that reliable national statistics on arrests and women violence against men are unavailable and empirical data on the type of violence perpetrated by women are not clearly delineated. Katy (2009) defends this position, noting that it is not easy to come up with accurate figures of gender based violence for either gender because it is suspected that GBV is hugely under reported and it is more uncertain when it comes to male victims of GBV. Straus (2005) also argues that the statistics on violence against men cannot be accurate, and differ depending on the wording of the survey questions, how the survey is conducted, and the definition of the abuse that was used, as well as the willingness and unwillingness of victims to admit that they are the victims of gender violence. Straus and Gelles (1986), in their review of national surveys, state that at least 28% of couples experience physical violence at some point in their relationship and 16% of couples experienced violence in the given year. Women were more likely than men to experience some form of violence in their relationships. The majority of women 25% were more likely than men (11%) to admit to perpetrating violence as well as being victimised. Furthermore women were more likely than men to admit to yelling at their partners. Half of the women 50% admitted to have been the first striker when violence occurred with their partners. Whitaker et al. (2007) further state that, where violence was more frequent, men 29% were more likely than women 19% to inflict injury. In times where violence was one sided, 25% of men were more likely to be injured in reciprocal violent relationships than women. Both parties also agreed that women were more responsible than men for intimate partner violence.

The rate of gender based violence in same-sex relationships appears to be occurring at the same rate as in heterosexual relationships, with the only difference being that in heterosexual relationships the crisis is likely to be reported to the relevant institutions. In support of this, Heintz and Melendez (2006) point out that intimate partner violence occurs in LGTB relationships at the same percentage as in heterosexual relationships, and that between 25% and 33% same-sex relationships are experiencing gender based violence. Heintz and Melendez (2006) further claim that same-sex domestic violence is the third most severe health problem facing gay men in the world today. Heintz and Melendez (2006) continue to estimate that there are approximately 500,000 gay men worldwide that are battered annually by their violent partners and that there is a high rate 39% of battering within gay intimate relationships among men. The above figures are far from the reported figures for the obvious

reason that most men (heterosexual, homosexual and bisexual) are very reluctant to report or even to admit that they are or have been the victims of abuse.

## **2.6 Why has violence against men been neglected?**

*“Men too are victims and women too are perpetrators, neither sex has a monopoly of vice or virtue” (David Thomas 1993 cited in Katy 2009).*

There are number of social factors that contribute to the stark lack awareness about male abuse by their intimate partners or their ex-partners. Society has made it a norm for men to take abuse ‘like a man’ and not to complain. Men do not report or complain about abuse because they know that there is little support if they tell other people that they were abused by their partners, and they fear that no one will ever take them seriously. Currently in our society for a woman to slap a man in the face or kick him in the groin has become the norm (Shupe et al. 1987). Rather than thinking that these women are abusing their partners, we are led to think (due to societal perceptions) that they deserve this or might have done something wrong or rude. Women are less likely to think that they are committing a crime when they abuse their partners. For years women’s movements have been at the forefront of struggles against women and children abuse, and these women’s movements have done incredible work for abused women and children, but have shown little or no support in cases of abuse against men. It is believed that in same-sex relationships, to some degree, there is an assignment of gender roles between partners and when intimate violence starts it is a result of gender related issues (Lambert et al. 2003).

Shupe et al. (1987) state that many people believe that there has been a conspiratorial silence about discussing women violence against men. Lambert et al. (2003) argues that as far as intimate violence is concerned, most of the emphasis and focus by societies and academics is that of male batterers against women studying the impact on the women victims’ lives and help that is available to help them in retreating from the violent environment. Lambert et al. (2003) contend that there is little discussion or research that has been done on male victims of female batterers and also intimate violence between gay and lesbian couples. In support of this, Dasgupta (2001) claims that women advocate of denying or minimising the existence of

women violence against men, dreading societal backlash. Shupe et al. (1987) maintain that women advocates fear that open recognition of violent behaviour of women against men would trivialize the problem of women battering. In defence of this idea, Bandura (1973) argues it is undeniable that women are capable of violence. The above evidence shows that violence against men has existed for decades, but has been denied by women advocates. A study conducted in Malawi by Pelsler et al. (2005) show that men were reluctant to respond to the question of gender based violence in one-on-one interviews, but were openly talking about other issues in general terms in focus group discussions.

Lambert et al. (2003) argue that the studies that have been done suggest that there is a lack of help available for men abused by their intimate partners. The lack of help has caused a rift amongst academics, because some academics believe that GBV is a gender issue, and some believe it is a societal issue. Lambert et al. (2003) further maintain that the lack of support and help available for male victims is due to social construction and the lack of government recognition of GBV against men. Fontes (1999) argues that feminists have helped and are helping women who are victims of GBV, but they are doing that at the expense of men victims of GBV. Fontes (1999) further makes the point that, because of feminists, domestic violence has become a political movement rather than an attempt to help all victims of domestic violence equally and with the same concern. Corry et al. (2002) argue that there has been little investment in resources to understand and address the issue removes domestic abuse and intimate violence against men. Lack of funding is the main reason for the low level of research regarding domestic abuse or intimate violence against men. International donors need to change their perception for the sake of those whose health and lives are at risk due to this growing pandemic. The extent of the issue of domestic abuse of men is not well known and well understood by the general population. Newspapers reports have contributed to a better understanding of domestic abuse of men at the hands of their partners. Previous research has shown that there is underreporting on GBV against men, and on the other hand, women are underreporting the abuse as perpetrators.

Pelsler et al. (2005) argue that even with violence against women, data has been largely based on files from criminal justice departments (e.g. police stations) and medical reports supplied by medical institutions. This is problematic because, according Frodi, Macaulay and Thome

(1977), men are abused by their intimate partners (female or male) when the partner uses emotional, physical, sexual or intimidation tactics. He or she does it to control the partner and prevent the partner from leaving the relationship. The above information shows that the husband battering pandemic is not a new phenomenon and that victims of intimate violence have been living under humiliating, and condemning environment for centuries, making it hard for them to break the silence. According to Pelsler et al. (2005) because abused men are ignored by the police when they report or plea for help, they tend not to call the police or report the abused they suffer at the hands of their partners. Gelles (1974) argues that people hit and abuse their partners because they can, and that female assaults on males always have a reason of self-defence. Gelles (1974) further states that in today's society, women are openly given permission to hit men as reflected in television, movies, and feminist doctrine. Kelly (2003) maintains that, despite the wealth and diversity of sociological research that has been done and its findings on gender based violence, female violence is not recognized within the legal literature on domestic violence. However, this might be one of the reasons why gender based violence against men has been neglected. Kelly (2003) further argues that dismissing the possibility that females are violent has led to the framework of legal programs and social norms narrowly responding only to the male abuse of women. Female batterers cannot be recognized by law, and men batterers can be treated.

Straus (2005) argues that the violence and approval of violence by male partners has decreased, while the violence and approval of violence by female partners has not. This reflects that almost all programmes to end partner violence were created by and continue to be major focus of women's movements. These are based on the assumptions that partner violence is perpetrated exclusively by men. Societal attitudes can make it harder for the male victims of gender based violence because society's inappropriate beliefs and attitudes about men have kept this kind of abuse hidden. Frodi, Macaulay and Thome (1977) argue that, in their study, they found that abusive women feel that they receive permission from the society to abuse their partners and their aggression is also justified by society. Frodi et al. (1977) further claim that there is nothing to be justified because in their study they found that there is little gender difference in the incidence of aggressive behaviour between women and men. Due to societal attitudes, men in abusive relationships may have some of these feelings: fear of telling anyone, depression and humiliation, fear that he has failed as a lover, confusion because sometimes she acts loving and kind, and also belief that he deserves to be abused.

Fontes (1999) states that, because of gender constructions by society GBV victims being viewed as ‘wimps’ they are often not believed or their experience is minimised by general society and law enforcement agencies. This is the main reason why few men report their abuse or discuss it openly. According to Fontes (1999) male socialisation has been constructed by society in a number of ways. Men are expected to be self sufficient; this means that men do not need to be helped by others, if they are real men. Men are required to be strong. They cannot express physical or emotional pain, sadness, or fear, if they are real men. Men are expected to be protectors in the society, especially of women and children, and as such should not need to be protected by others, if they are real men (Fontes 1999).

## **2. 7 Gender based violence against men in heterosexual relationships**

*“She used to regularly scream at me and hit me, but when I needed stitches in my head after she attacked me with a knife while drunk, I had to leave” (Anon, 2009 cited in Katy, 2009).*

Women’s violence towards men is a serious social problem that needs to be urgently addressed before it goes any further. In support of this, Straus (1999) makes the point that gender based violence against men has been a controversial and difficult issue caused by differences in research methodologies and in moral agendas. Minor assaults perpetrated by women are also a major problem, even though they do not result in injury, because they put women at danger of retaliation by men. Straus (2005) further argues that to end ‘wife beating’ it is important for women to realize that what they regard as a ‘harmless’ pattern of slapping, kicking, or throwing something is also abuse to their male partners. Straus (1999) states that, it is crucial to understand that research on domestic violence derives from studies that have used quantitative methodologies. Dasgupta (2001) further mentions that large scale studies on men and women on domestic violence indicated that women’s use of physical aggression is comparable to men. Vissing, Straus, Gelles and Harrop (1991) argue that even though physical assault is not the most damaging type of abuse, it can hurt a partner and even drive them to suicide. Furthermore, verbal aggression may be even more damaging than physical attack and women use verbal abuse more than men.

Straus (2005) argues that it is vital to realise that the rate of injury inflicted by women to men are not as severe as injuries inflicted by men on women. In the study that was done by Hines

and Saudino (2003) found that both men and women are increasingly accepting of women being the GBV perpetrators or women hitting husbands rather than of husbands hitting wives, and Greenblat (1983) further argues that this is because female aggressors are far less likely to do physical harm. Yet Straus (2005) argues that women are responsible for an important proportion of serious injuries and death of their partners. In the study that was conducted by Hines and Saudino (2003), there was found to be mixed support of the above statement arguing that male victims were likely or significantly more likely than female victims to experience assaults involving the use of a weapon by their intimate partners. Dutton, Nicholls and Spidel (2005) argue that to interpret the data from different studies more accurately would be to say that people use violence in intimate relationships (not just men), and use whatever form or tactics they have learned will be effective. In support of this, Morse (1995) makes the point that men use direct physical violence more than women because of their greater upper body strength, and women use weapons more often than men to generate an advantage.

There are various reasons why heterosexual men stay in abusive relationships most due to social and economic factors. Pagelow (1984) argues that several qualitative studies that have been done on men abused by their partners have attempted to explain why men would choose to stay in an abusive relationship, especially when compared to their female counterparts, because many of these men have the economic and physical resources to leave an abusive relationship. Steinmetz (1977) claims that, like abused women, men may become used to a certain standard of living and if they have to leave their abusive partners, they most likely would have to move out of their homes and support their ex-partners, and also at the same time pay their own living expenses. Pagelow (1984) further argues that men and women refuse to leave their abusive relationships for the same reasons, because they are psychologically dependent on their partners and excuse the abuse as being a result of certain circumstances, such as alcohol intoxication. Pagelow (1984) maintains that these men may genuinely love their abusive partners, and that the abusive wives are apologetic after the incident. In support of this, Lupri (1990) makes the point that the main reason is economic resources, because when a couple marries, they merge their economic and living situations and they also make vows to each other of commitment and love. This commitment has been found to be the reason why men are reluctant to leave abusive partners. Steinmetz (1977) argues that men who are committed to a marriage may refuse to leave an abusive relationship

because of their children, because abuse of men is not recognised, and because it is not easy for abused men to use this as defence in court to obtain custody of their children. Gregorash (1974) and Steinmetz (1977) argue that many abused men refuse to leave for the sake of protecting their children from abusive partners.

Flynn (1990) maintains that for a man to disclose the abuse by his partner would be embarrassing, because this type of abuse is the opposite of societal stereotypes in which the man should be dominant and woman submissive. Langley and Levy (1977) support this position, noting that these men may be unwilling to endure the embarrassment, innuendos, and sarcasm that they would have to face if they filed a formal complaint. Katy (2009) states, that men have many reasons why they stay with an abusive partner, and everyone has their own combinations of reasons for not walking out of the house and leaving the relationship. According to Corry et al. (2002) abused men are often afraid of being stigmatised by others for the fear of being labeled as spineless, sissies, dependent, ‘wimp’, as having low self-esteem. Men are also too afraid to tell or admit to others that they are being mentally, physically, or financially abused and feel that telling is a loss of masculinity (manhood). Katy (2009) further argues that the victims of emotional abuse may feel there is no way out of their relationship or marriage, and they often times ignore the symptoms that an emotionally abusive relationship can quickly become physical abuse.

To summarise, some men stay in the relationship because they fear retaliation if they should leave. Men do not want to lose access to their children, and they believe the children will be left in a vulnerable situation. In addition, men do not want others to know about the abuse, shame, embarrassment and uncertainty. They love their partners and believe they may change and stop being abusive. Society leads to believe that ‘real men’ should be able to keep their wives under ‘control’. Furthermore, men believe they can or should be able to handle it, and they feel financially insecure and have nowhere to go.

## **2.8 Why do heterosexual men not report GBV?**

A study conducted by Robertson and Marachver (2009) showed that there was a greater acceptance of GBV perpetrated by women than GBV against women. In this case there were

more women disclosing the identity of the attacker than men disclosing the identity of their attackers. According to Katy (2009), anyone who has been the victim of any type of abuse will understand that it is not easy to report the abuse. Katy (2009) further argues that if the cycle of abuse takes place for a long period of time, abuse can make the victims feel powerless and fearful of change, and often experience a feeling of personal responsibility for what is happening to them. According to research, men are five times less likely than women to talk about domestic abuse to friends and family (Stets and Straus 1990). Men that are being abused do not report abuse because they have to contend with inherently sexist stereotypes. The media also plays an enormous role in the underreporting of male abuse because the media portrays the image of the abused person by his partner as a figure of fun. The media also portrays the male victim as weak, pathetic, stupid. Male victims tend not to report the abuse because they want to have this stereotype comments attached to them (Katy 2009). It can be concluded that men who are victims of GBV do not have social network support or other reporting channels where they can tell or report what is or has happened to them. In general men do not talk to each other about their feelings and relationship problems. This can have a negative impact on the lives of the victims or leave abused men vulnerable, isolated, and unsupported, feeling lonely and that there is no way of breaking the silence. This can lead to the victims committing suicide or becoming reclusive. The other concern that men have is that if he reports the abuse, his partner may counter his allegation, stating that she is the one who has been abused and she retaliated out of self-defence (Katy, 2009).

Straus (1999) argues that men are afraid to report abusive partners to the police because police may not take their allegations seriously. Straus (1999) further argues that domestic violence laws in the United States are gender neutral and the problem is that police attitude is not neutral towards the victims. Craven (1977) argues that GBV is under reported because many people are unwilling to label the physical violence they receive at the hands of their intimate partners as a crime. In support of this, Steinmetz (1977) makes the point that men are more reluctant to report the abuse because men are supposed to be the more physically dominant and aggressive partner, and consequently, admitting to being abused by a woman and labeling it a crime may be viewed as emasculating. According to Island and Letellier (1991) men do not talk about being victims of GBV because they fear that they will be feminized the society. Fontes (1999) states that culturally men are trained at a very early age to ignore or suppress fear, while on the other hand girls and women are given permission to

feel fear. Fontes (1999) further argues that the assistance and concern for male victims should not be purely based on whether or not the man is feeling afraid of his partner or not, and that this cannot determine that men are in less danger of physical assault or injury than women. In support of this, Corry et al. (2002) make the point that most of the programmes have given attention to women and very little has been paid to the issue of domestic abuse and violence against men.

According to George (2007), the reason for men not reporting their abuse is that people will not believe them and the society finds the concept of men abuse difficult to grasp, and consequently has been slow to address it as a serious issue. George (2007) further maintains that if a man is hit by a woman in front of others, he will never retaliate or hit a woman back. Island and Letellier (1991) also state that, men begin to believe that they deserve to be abused by their partners and that they are worthless human beings. Lambert et al. (2003) argue that because self esteem and confidence has deteriorated for the men victims of GBV they are reluctant to get help, and regardless of the fact that they are the victims, they still want to remain 'manly' to the outside world. Adler (1978) argues that the violence male victims experience has a feminising effect causing them to feel shameful and less manly.

George (1994) argues that prejudice and discrimination against male victims makes it easy for women perpetrators to manipulate agencies or institutions (e.g. police services) to further victimize their male partners, and abusers could claim that they were defending themselves. According to the survey conducted by National Coalition of Anti-Violence Programs (NCAVP) (2004), it was found that police are biased when it comes to GBV. They normally remove the men from the situation even though the men are the obvious victims, and further argue that in 25% of cases men have been arrested even if it was them who contacted the police. Fontes (1999) contends that because domestic violence workers are mostly women, it makes it difficult for the victims to tell of their pain and shame to the people who do not see their situation as a problem. Fontes (1999) further adds that men do not seek help from victims' institutions because three forces in particular at these institutions are against male victims getting the help or attention they need and deserve. One, men are taught to be tough and protect their partners and families; two, patriarchy – gender feminism and three, gender politics.

## **2. 9 Myths and realities about gender based violence against heterosexual men**

According to the National Coalition of Anti-Violence Programs (NCAVP) (2004), there are a number of myths and realities regarding domestic abuse against men. Several myths that have been around for quite some times about GBV against men include: only men who are ‘wimps’ allow themselves to be abused by women, the abuser is bigger and stronger and the victim is smaller and weaker, women use domestic violence in self-defence, if the abuse was that bad he would leave because a man can easily leave a relationship, all domestic violence programmes offer the same services for both females and male victims of intimate partner violence, male victims are so rare that there is no need to make shelters and services available for men. Another myth is that hardly any men call the domestic violence hot line for women.

On the other hand the reality about heterosexual abuse is that two most common reasons given by callers as to why they take abuse and do not retaliate is because as young boys or young men they were taught by their parents never to hit a girl. Men also realize that if they hit back to a women, they could cause serious injuries. The other realities is that size, weight or being muscular are not good indicators of whether a man will be a victim or battered, as many of the victims have blamed themselves for the violence and they did not want to put their partners or mother of their children in jail if they pressed charges. Most of the victims do not report the incidents and unprovoked physical attacks to the helpline or to the police. Most of the victims minimize the violence that happens to them because of guilt, self-blame, shame, and victimisation additionally, and because others do not believe them or refuse to listen, there are few resources available for men and most support services do not offer services to male victims; these services only work for women and children, out of 434 men called, 70 were in need of shelter services, proving that male victims also need shelter services for emergencies while approximately 47% of the calls came from women, 12% came from men and other 14% came from unknown gender, the majority of scholars, academics and research documents argue that there are at least half a dozen theories as to why domestic violence happens in intimate relationships (NCAVP 2004).

## **2.10 Gender based violence in homosexual and bisexual relationships**

*“I was followed around the apartment and I was harassed. If I went into the bathroom, he went into the bathroom. If I went into the bedroom and locked the door, he opened the door and came in after me. Just would not get out of my face. It progressed to being spat at, then*

*he went to kick me in the balls, but I caught his knee before he could get up that far, then I was pushed down the stairs and then he threatened to kill my cat. At that point I left. I came back the next morning and moved out the day after” (interview).* This opening quotation is from research conducted by Lehman (1997:41).

Gender based violence has for years been viewed from a heterosexual normative point of view and many people fail to see the link between GBV and homosexual and bisexual men. Most of the documents about intimate partner abuse against men do not include or deal with intimate partner abuse in same sex relationships even though there is a high rate of abuse. In support of this, Chung and Lee (1999) point out that most researchers referred to gay violence as partner violence because the term domestic violence has been strongly associated with heterosexual relationships, and assumes certain gender roles making it work against acknowledging violence that occurs in same-sex relationships. Ristock (2002) further contends that their definition of gender based violence reveals some of the challenges that need to be addressed in gay relationship violence within lesbian, gay, transgender and bisexual (LGTB) communities because the current definitions does not include GBV in LGTB relationships. Greenwood et al. (2002) argues that in homosexual and bisexual relationships, intimate violence abuse is higher than the intimate violence experienced by women in heterosexual relationships. Seelau et al. (2003), claim that despite the high prevalence of GBV against men, few studies have focused on same-sex male relationships. Cruz (2000) states that gay men define intimate violence in the same way as heterosexual women, with emphasis on control and power. Homosexual and bisexual men also have some additional factors such as internalised homophobia, jealousy, and control issues from their intimate partners. Cruz (2000) further argues that homosexual and bisexual men’s construction of masculinity also has an impact on gay intimate violence as well as being one of the reasons why homosexual men do not leave abusive relationships. Seelau et al. (2003) and Tjaden and Theonnes (2000) also agree, arguing that despite the high prevalence of intimate partners violence among homosexual men and bisexual men, few studies have focused on abuse in the same-sex relationships.

Renzetti and Miley (1996) also maintain that intimate partner abuse occurs at a similar rate as in heterosexual couples or even higher frequencies. Ristock (2002) further argues that it is also important to acknowledge that some people identify their gender outside the gender parameters of females and males. In support of this, Houston and McKirnan (2007) point out

that little is known about the types of intimate partners' abuse and patterns in same-sex couples, and very few studies have examined the psychosocial characteristics and health problems that homosexual and bisexual men experience in abusive relationships. In support of this, Letellier (1994) observes that the original conceptualization of domestic violence did not take into account violence that occurs in same-sex relationships. According to Stanley et al. (2006), in same-sex relationships (homosexual and bisexual) intimate violence is a poorly understood phenomenon, although there is growing literature on violence in female same-sex intimate relationships. In support of this, Lie et al. (1991) claim that there are very few published studies exploring violence in same sex relationships with men compared to homosexual and bisexual women. Lie et al. (1991) further argue that available studies on GBV against homosexual and bisexual men suggest that violence occurs in 21-50% of same-sex partnerships. Stanley et al. (2006) maintain that, unfortunately, despite the apparent prevalence of GBV in homosexual and bisexual relationships, there is little knowledge about patterns of intimate violence.

According to Greenwood et al. (2002) men in same-sex relationships experience abuse similar to those faced by women in heterosexual couples. In support of this, Ristock (2002) points out that even though many tactics used in homosexual and bisexual abusive relationships are the same as those used in heterosexual relationships, there are some specific behaviours that reflect on homosexual and bisexual men in the context of homophobia, biphobia, transphobia and heterosexism surrounding gay relationships. Furthermore, Brown (2004) states that in light of the similarities there are still a number of differences important to same-sex partner abuse that are not discussed or taken into consideration, which not only impact the partners of GBV only but also shape the reactions and views of society. Brown (2004) further argues that the most apparent difference in same-sex partner abuse is living as the minority in a homophobic and heterosexist society. This may include the threats made by the abusers to the victim to reveal their sexual or gender identity to their family, boss, landlord etc. Island and Letellier (1991) add that there is a lack of attention given to the growing evidence that intimate partner abuse among homosexual and bisexual men may pose a significant threat to health outcomes, including sexually transmitted diseases and HIV/AIDS.

Houston and McKirnan (2007) argue that demographic characteristics such as education and income, which are often associated with economic distress, are also related to intimate partner abuse among homosexual and bisexual men. Renzetti and Miley (1996) claim that in same-sex relationships, it is not the actual behavior that determines the nature of intimate violence, but rather the motivation underlying these behaviours. Renzetti and Miley (1996) further argue that violence used as self-defence or retaliation is qualitatively different from violence used to control or maintain power over another. In support of this position, Letellier (1994) points out that the motivation to control one's partner determines who is the perpetrator (or batterer) rather than simply who initiates the violence. According to Greenwood et al. (2002), violence in homosexual and bisexual relationships has been recognised as a major health problem of our times, and homosexual and bisexual men are just as vulnerable to domestic violence as any other member of the society (i.e heterosexual couples). Cruz (2000) and Ristock (2002) argue that violence in gay relationships can have a significant impact on the health and well-being of the victim. Cruz (2000) and Ristock (2002) further state that physical injuries may range from bruises, broken bones or even burns, and also emotional effects that include depression, anger, fear, shame, suicidal ideation and post-traumatic stress.

Due to societal restructuring and homophobic society, homosexual and bisexual victims of GBV may experience situations that are not experienced by heterosexual male victims of GBV when reporting the abuse to their families, friends, co-workers, and even to the police services. In support of this, Renzetti (1992) point out that an abusive partner may threaten to 'out' his partner's sexual preference to his family, friends, or co-workers as a tactic to get that person to stay in the relationship, or force the victim in order to get what the perpetrators wants. Allen (2009) states that homosexuals and bisexuals whose families or friends are not supportive of their sexuality have fewer sources of support, because they are isolated, making it difficult to end the abusive relationships. Allen (2009) further argues that the abusive partners may use this situation to keep their relationship going and continue to remind their abused partners how alone they will feel if they try to leave. Renzetti (1992) claims that homosexual men often feel that they cannot seek help from the agencies that offer help and advice to heterosexual couples. Renzetti (1992) further argues that homosexual men are not keen or are reluctant to expose their sexuality to health care professionals. In order to address this pandemic in our health care systems, our health care professionals need to be trained

accordingly, because currently many are not trained to deal with male abuse, many health professionals are still homophobic. Just as many communities are still homophobic as well. It is also believed that health professionals may be intolerant of homosexual and bisexual couples or individuals coming for help, let alone dealing with health issues related to intimate partner violence (Renzetti, 1992).

Cruz (2000) argues that homosexual men stay in abusive relationships because they still have the hope that their abusive partners will change, they still love their abusive partners, they fear being exposed by their abusive partners, or they lack assistance from friends, colleagues and family members because they do not know the sexual orientation of the victim or the perpetrator. Many stay out of fear of loneliness, sense of loyalty, and lack of knowledge regarding domestic violence. Cruz (2000) also found that some homosexual men and bisexual men reported that the lack of public models and widespread support for gay male relationships means that there are no visible models of gay men in successful relationships. According to USAID (2009) GBV imposes subservience onto homosexual and bisexual men and makes it difficult for them to acknowledge being in abusive relationships. Letellier (1994) supports this argument, stating that it is difficult to estimate GBV on homosexual and bisexual men because homosexual and bisexual men may not view themselves as GBV victims as this would be contradictory to their identity as 'males'. Letellier (1996) in his research, reported that homosexual and bisexual abusive partners may withhold medication from his HIV positive partner or even threaten to reveal his status to his family or friends. Letellier (1996) further argues that HIV positive partners may feel they have no support available apart from their abusive partners. The HIV positive partners perceived themselves as "nothing or damaged goods" and felt that no one else would want them. King (2004) maintains that partners who are not out of the closet (hiding their same-sex relationships) or value their gay relationship may abandon their HIV positive partners without support. Merrill and Wolfe (2000) note that in their study that 60% of HIV positive gay men have the fear of becoming sick and dying and then this was a major influence on their decision to remain with an abusive partner.

## 2.11 Why do homosexual and bisexual men not report GBV?

*“One reason I remained for that year and half was because my family and I don’t really talk. His parents were well established and they were nice to me. I think.....think that he was my family, and so were his parents. I don’t know, I thought I felt accepted.”* (Interview report on gay male domestic violence abuse from the research done by Lehman, (1997, p.40) this participants words reveal some of the challenges that need to be addressed in relationship violence within LGBT communities.

According to Merrill (1998) and Allen (2009), GBV victims who are not ‘out’ publicly may be reluctant to report or unwillingly to seek help from the police, the court, and other services because it will require them to reveal their sexuality and risk embarrassment, ridicule, or even harassment. Pattavina, Hirschel and Buzzawa (2007) argue homosexual and bisexual men who are victims of GBV are less likely to report or call the police for help than victims opposite sex relationships. The main concern for not reporting is that the responding officer would consider the accident to be ‘mutual combat’ and not take time to determine the primary aggressor, which could result in both the perpetrator and the victim being arrested (Allen 2009). In support of this, Kuehnle and Sullivan (2003) make the point that even in homosexual relationships, gay men are less likely to report GBV than lesbian women. Brown (2004) argues that because homophobia and heterosexism contribute to the added problem of gender role socialisation, creating inexperience and lack of LGTB friendly legal agencies, and limited legal protection is available to those suffering from same-sex partner abuse. It limits homosexual and bisexual victims of GBV reporting violence to the police. In support of this, Walsh (1996) points out that heterosexism and homophobia create additional confusion surrounding the logistics of LGTB relationships, such as the belief that the abuse is mutual or just a form of sadomasochism.

Balsam (2001) contends that gay men and bisexual men may leave the abusive relationship but they cannot leave a homophobic society and culture. Walsh (1996) argues that reaching out for help becomes difficult for LGTB victims of intimate partner violence since they need to gain trust that they will not be discriminated against, which is not what the past has taught them will occur. Furthermore because of gender roles, intimate partner abuse among homosexual men and bisexual men is not seen as a real problem. These victims often struggle with an abusive relationship while at the same time struggle with what it means to be

masculine in their culture (Walsh 1996). Brown (2004) acknowledges that these gender role expectations create obstacles for LGTB victims of GBV and leads society to develop false conclusions such as: intimate partner abuse in gay men and bisexual men is logical because all men are prone to violence, or same-sex abuse is not as severe as when a woman is battered by a man because partners are the same gender. Brown (2004) argues that factors contributing to the underreporting in same-sex intimate relationships are the fact that government, society, and law enforcement have ignored or avoided same-sex intimate partner abuse. Brown (2004) further makes the point that state laws in the United States are designed only for heterosexual couples, and many times LGTB victims are not able to obtain restraining orders against their same-sex intimate abusers.

Houston and McKirnan (2007) argue that GBV victims would be less likely to report the incident. Houston and McKirnan (2007) further state that homosexual and bisexual men who report intimate partner abuse would be more likely to experience physical as well as mental and behavioural health problems, including alcohol and drug abuse, smoking, depression, anxiety, heart disease, hypertension, sexually transmitted diseases, and HIV. In support of this, Ristock (2002) points out that domestic violence and HIV/AIDS may be an issue in any relationship and because of the major impact of HIV on homosexual and bisexual communities, these are issues that particular need to be addressed in homosexual and bisexual relationships. Ristock (2002) further argues that even though HIV does not cause domestic violence, it can be a major factor in the abuse that occurs in a relationship (e.g. one partner blaming the other for infecting them).

According to Hanson and Maroney (1999), GBV victims may not report abuse to the police if the abusive partner is HIV positive, as the victim may feel guilty about reporting to the police or feel like they would be abandoning them. Ristock (2002) argues that in cases where both partners are using drugs or alcohol, when the abusive partner becomes physically violent and then blames their actions on the substances rather than taking responsibility for their behaviour, it makes it difficult for victims to report the violence to the police. Ristock (2002) also maintains that it can be difficult for homosexual men to tell their family members, co-workers, or neighbours if they are in an abusive relationship because of the fear that the violence will be seen as evidence that their sexual orientation or gender identity is unhealthy.

Renzetti (1992) claims that an abusive partner who is a citizen in that particular country or who is a legal permanent resident may use their partner's immigrant status against the victim to have them deported, or by reporting the abuse, they could be arrested or lose custody of their children if their status is revealed. Racial discrimination also plays a major role in gay relationship abuse, as Ristock (2002) found that the abuser can use their partner's racial or cultural background to make them feel inferior. Renzetti and Miley (1996) note that several surveys show that gay men victims of violence who do access formal services are more likely to turn to counsellors for therapy or to informal therapy (friends) rather than to call the police or use the criminal justice system, access health care services or go to shelter for men abuse. Thompson (1995) reveals that historically, gay men and lesbians have low levels of reporting any type of crime to the police. Waldron (1996) states that those gay men from diverse cultural backgrounds or where there is poor history between the police and that cultural group may not report the abuse.

Ristock (2001) further argues that heterosexual domestic violence services that assist heterosexual victims use language that does not reflect an awareness of same-sex partner abuse or same-sex relationships. Furthermore there are very few places where gay men who are victims of violence can turn because most support services have been set up to address the more common problem of (biological) men committing violence against (biological) women. A community-based LGTB health and HIV/AIDS organisation in Australia maintains that it is not easy for gay men to leave their abusive relationships because they are at risk of homelessness due to limited housing and shelter support (ACON 2004). Ristock (2001) argues that there is always a fear of acknowledging same-sex partner violence due to the concern that it would fuel negative stereotypes about LGTB, and would undermine the idea of heterosexual relationships. Ristock (2001) further mentions that the other reasons for victims not reporting the abuse is that that the abuser and the victim might share the same friends, and by reporting the abuse to the police the victim might lose support from his partner, the abuser might also lose his mutual friends. Additionally the abuser might even lose his job.

## **2.12 Myths and realities about gender based violence against homosexual and bisexual men**

According to the Moore (1999), there are a number of myths and realities about same-sex domestic violence. Several myths that have been around for quite some time about GBV against men: that abuse or battering that occurs in same-sex relationships is usually mutual, that only heterosexual women get battered, that men are never victims of domestic violence, that domestic violence is less common in same-sex relationships, and that it is not really violence when same-sex couples fight, that it is a fair fight between equals, that the batterer will always be bigger, butch and stronger and the victim will always be feminine and weaker, that people who are abusive while under the influence of liquor or drugs are not responsible for their actions, and lastly that homosexual domestic violence is sexual behaviour, a version of sadomasochism and the victim usually likes it.

On the other hands the reality about homosexual and bisexual abuse is that mutual battering is rare; a consensual fight is not going on. In this case a cycle of violence that includes control and domination by one of the partners is occurring, and men can be victims and women can be batterers. Homosexual men are the victims of gender based violence at the same rate as their heterosexual counterparts, but because of gender stereotypes, gender roles, and sexual orientations no one believe that in such relationships there is violence. In homosexual and bisexual relationships, men are batterers and victims in the same rate as in heterosexual relationships. In society violence between men is a norm, and man's weight, size, masculinity and femininity or any other physical attributes are not good indicators of whether a man will be a victim or batterer. In homosexual relationships, abusers often use alcohol or drugs as one of many excuse for violence as a way of putting the responsibility for their behaviour elsewhere (Moore, 1999).

## **2.13 Research funding issues**

Research funding has also played a vital role in the research on gender based violence issues in addressing and preventing GBV as a core component of any social change effort. There is a lack of research on GBV against men because funders and researchers have their own agendas rather than addressing relevant social and economic issues. By far, the majority of the funding addresses gender based violence against women and children. Most of the

funding is also allocated to organisations that are engaged in anti-violence activities against women, and support ground breaking work on advancing a community based social justice approach to preventing child sexual abuse. Balsam (2001) argues that male victims of GBV are not supported financially but women victims are supported financially. In the United States most organisations that help women victims not male victims of GBV and this is viewed as taking advantage of this female orientated bias (that only women and children are the victims of GBV). In support of this, Lambert et al. (2003) makes the point that these organisations and institutions should promote gender based violence as a 'human issue', not as a gender issue, where all victims are entitled to help and support regardless of gender.

#### **2.14 Cycle of gender based violence**

Ristock (2002) states that, there is a pattern to the violence, with violent episodes occurring in cycles and increasing in intensity and frequency over time. Furthermore, these violent episodes can sometimes be more sporadic. Ristock (2002) further states that in gay relationships power dynamics seem confusing because same gendered partners might be relatively the same size and strength. Renzetti and Miley (1996) contend that the mainstream construction of the victim is misleading because the more "masculine" or "butch" partner will be assumed to be the abuser and the 'femme' partner, the victim. According to the National Coalition of Anti-Violence Programs (NCAVP) (2004), in the United States, the theory cycle of domestic violence, developed by Walker Lenore, explains how and why the behaviour of the perpetrator may change over time. The theory of a cycle of violence provide an understanding as to why the victims affected by domestic and family violence continue to face the violent situation, and also acknowledges that the cycle is not the same for everyone, and in some cases people may experience only certain stages of the cycle (NCAVP 2004). The cycle of violence can take a few hours to a year or even more to complete. It can also happen hundreds of times in an abusive relationship. At this stage some abusers walk away from the situation, while others shower their victims with love and affection. The cycle goes through a number of stages, namely: the build up phase, the stand over phase, the explosive phase, the remorse phase, the pursuit phase and the honeymoon phase (NCAVP 2004).

**Stage 1: The build up phase:** This phase may start with a normal relationship between two people, but involves escalating tension marked by increased verbal, financial, and emotional

abuse. However, the victim at this stage may not notice any kind of abuse and the perpetrators will be showing love.

**Stage 2: The stand over phase:** This phase can really be frightening for the victim, as the violence by the perpetrator escalates to the point that a release of tension is usual. This is when the perpetrator starts to use violence towards the victim. At this phase the victim may feel that he is 'walking on egg shells' and feel anything he does could cause the situation to worsen.

**Stage 3: The explosive phase:** This phase is the peak of the violence, where the perpetrator cannot stop himself or herself. It is the highest level of abuse by the perpetrator. The perpetrator at this phase experiences a release of tension which may become addictive.

**Stage 4: The remorse phase:** At this phase, both the perpetrator and the victim feel ashamed of their behaviour. They try and justify their actions to themselves and to others, unaware that they are addicted to the violence they have just experienced. For example, the woman or man will blame each other, saying that if you did not do that, I would not have hit you.

**Stage 5: The pursuit phase:** In this stage the perpetrator promises the victim that he or she will never use violence again; they might try to shift the blame to other causes such as work stress, drugs, or alcohol (in same-sex relationships this is the excuse in most cases).

**Stage 6: Honeymoon phase:** In this phase the victim and the perpetrator may be in denial as to how bad the violence was. They both are in the happy stage and ignore the possibility that the violence could happen again. This honeymoon stage will fade and the cycle will start again.

## **2. 15 Reasons why women or men assault their partners**

Several studies have looked at the reasons why women and men assault their partners. According to Fiebert and Gonzales (1997) who conducted a study on women in a California College, the women surveyed admitted to physical aggression against their male partners. Fiebert and Gonzales (1997) further argue that this study did not support the available data for the feminist argument that women only use violence against men to protect themselves. In support of this, Hines and Malley-Morrison (2001) state that even though they acknowledge that women use violence in self-defence, most studies on motivations for violence in gender

based violence has shown that self-defence is not the motivation for women's violence in many cases. In support of this, Follingstad, Wright and Sebastian (1991) point out that in the majority of cases they found that the reasons reported by college women for using GBV against their partners were not attempts at self-defence, but rather an effort to show anger, to retaliate, to express feelings that they had difficulty communicating verbally, and also to gain control over their partner.

Felson and Messner (2000) observe that other researchers have found the primary reason for women to use violence against their intimate partners is dominance and control. Furthermore, Mason and Blankenship (1987) maintain that a need for affiliation, when combined with life stress and low inhibition, is a strong motive for women to be violent. According to Hines and Malley-Morrison (2001), not all violence by women can be considered self-defence or retaliation. Violence against men is often dismissed by statements to the effect that husbands are more likely to initiate violence and be more violent than women and as such do not warrant important or significant attention as victims (Walker 1983). Hines and Malley-Morrison (2001) claim that most of the studies on GBV show that violence perpetrated by women does indeed exist in relationships and cannot be dismissed as merely self-defence. Hines and Malley-Morrison (2001) further argue that women are more likely than men to use violence in self-defence, but many women acknowledge that they have other motives for violence against their intimate partners. Walker (1983) contends that abusers abuse their victims because of low self-esteem, which is associated with emotional dependency, manifested as jealous behaviour and the fear that their partners will leave them. Walker (1983) further argues that because of low self-esteem, the perpetrators might have greater difficulties in dealing with frustration, control issue and insecurities which arise from outside the homes such as work pressures and economic problems. In support of this, Pence and Paymar (1993) make the point that because of these frustrations, the perpetrator then displace anger or abuse onto somebody over whom they do have control and power.

Studies suggest that women abuse their partners for many reasons because their partners were not sensitive to their needs, because they believe that if women truly are equal to men than women should be able to physically express anger at men, because they wish to get their partners attention, because their partners were not listening, because they learned when

growing up that they could be physically aggressive toward their brothers and they would not fight back, because they believe that men can readily protect themselves so they do not worry when becoming physically aggressive, because they wanted to stop their partners from bothering them, and they sometimes find when they express their anger physically they become turned on sexually (Fiebert and Gonzales 1997, Sarantakos 1998, Corry et al. 2002). However, the reasons that have been stated above do not give women the right to abuse or assault their partners. Furthermore, these do not include acting out of self-defence, which proves that some women are truly abusive to their partners. These studies also showed that the rate of victimization between men and women is nearly the same. Pizzey (1998) argues that these women provide considerable evidence that such individuals form an addiction to violence early in life. Corry et al. (2002) maintain that there are certain dangerous patterns associated with women, and if the domestic violence and abuse against men has to be controlled, these patterns should first be recognised and defined because these patterns are predictive of such behaviour.

## **2. 16 GBV against men and its impact**

Hines and Malley-Morrison (2001) argue that because men are physically stronger than women and men tend to be at low risk of physical injury at the hands of their female partners, the only way to investigate how men are abused compared to women is to research the psychological effects of abuse against men. According to Craven (1977) GBV of wives by their husbands in the early 1970s gained recognition and much deserved attention in the academic community and the public at large. This was long overdue as wives tend to be victimised by their husbands at an alarming rate. Straus and Gelles (1986) state that in the 1975 National Representation Survey based on American families, there were a large number of wives reporting violence from their husbands. In their 1985 National Representation Survey, Straus and Gelles found an apparent decline in the number of wives reporting violence from their husbands. Stauss and Gelles (1986) further argue that this apparent decline might have been the result of the increased attention that was given to GBV against wives. Hines and Malley-Morrison (2001) maintain that in women, the effect of abuse is significant, because women who are victims of either minor or severe assaults by their partners are physically injured. In support of this, Straus (1980) points out that woman who reported being severely assaulted by their partners needed to seek medical attention.

Hines and Malley-Morrison (2001) argue that although there is substantial research literature addressing violence against women and its results, GBV against men and its results is a far less researched area. Furthermore, even though there have been previous studies providing some statistics of wives physically abusing their husbands, no research has been done on the effects caused by this abuse. Stets and Straus (1990) found that abused men were more likely to experience psychosomatic symptoms than non-abused men. In support of this statement, Morse (1995) makes the point that 9.5% of younger males and 13.5% of older males report that they experience fear in their abusive relationship. Furthermore Hines and Malley-Morrison (2001) contend that abused men are at risk of emotional hurt, fear, helplessness, revenge seeking, anger, sadness, shame and humiliation, depression, psychological distress and psychosomatic symptoms. Migliaccio (2002) argues that abused men struggle with the maintenance of the masculine ideal (the ideal that expects men to be self-reliant and independent, tougher, bigger and stronger than women).

O'Leary et al. (1989) further claim that in their marriages women were more likely to be stably aggressive in their marriages, whereas husbands were more likely to be stably non-aggressive and repeated and regular psychological and emotional abuse undermined men's confidence. Gender based violence has been linked to many serious health problems, both immediate and long-term. More often than people realise, GBV can be fatal, as in the case of femicide or killing of women, usually after escalating bouts of violence. Other nonfatal problems include injury, chronic pain syndromes, and gastrointestinal disorders, and a range of mental health problems, including anxiety and depression. The often chronic nature of gender based violence also increases a variety of negative behaviours, such as smoking and alcohol and drug abuse (Goldberg and Tomlanovich 1984).

## **2. 17 South African experience on gender based violence**

According to the City Press Newspaper (23 November 2008), counselling services in South Africa reported a rise in cases of domestic violence against men, and that abuse against is no longer inconceivable on the contrary it is worrying. It was reported that men of all races are taking a hammering on the home front; they are being starved of food, used as punching bags, and subjected to psychological and emotional abuse. In South Africa it was also believed that GBV only affected homosexual couples, while South Africa is battling an epidemic of GBV

as well as societal violence. The following is a local example of gender based violence against men;

*“Contrary to popular belief, abused men suffer far worse than women because boys and men are, in fact more emotionally and psychologically sensitive than women”* (City Press Newspaper, 23 November 2008, p 3). This is an extract from a South African newspaper focusing on violence against men, and also shows that there are many similar incidences taking place in our societies.

In South Africa this trend of gender based violence against men is worrying and there is a need for government, civil societies, non-governmental organizations and political parties to intervene. The statistics on gender based violence against men in this country are not accurate because men do not report GBV to the police or their relatives due to stereotypes or perceptions regarding gender based violence against men. Even if reported statistics were available, they would not necessarily be an accurate reflection of the real situation because many male victims of gender based violence do not come forward to report the abuse, and there are no resources or assistance that is available to help male victims of gender based violence. Men abuse has been with us for a number of years, but it has remained a taboo subject in our societies. In support of this, Corry, Fiebert and Pizzey (2002) point out that the silence needs to be broken and urgent focus given to violence against men.

King (2004) argues that gender based violence is genderless and is more about positioning in a relationship where one party maintains and establishes an unequal distribution of power within the relationship. This positioning can take the form of dominating the decision-making process, failing to factor the rights and liberties of the underpowered person, and regulating other areas of a couple’s mutual personal lives. King (2004) further argues that as far as gender based violence is concerned, women are as capable as men in assuming the controlling role in a relationship, even though traditionally one expects the controlling partner to be a man due to their physical appearance and the social role of men. Hines and Malley-Morrison (2001) also argue that in GBV female are injured more frequently and severely at the hands of their partners. Hines and Malley-Morrison (2001) further argue that the fact that men can be severely and frequently injured at the hands of their intimate partners should not be ignored.

## **2.18 Related legislature on domestic violence**

Many world organisations, including the South African government, recognise that violence against women and children is a human rights issue and also a public concern, forgetting about men who are also victims of gender based violence at the hands of their (male and female) partners. In South Africa, there are several programmes that are in place to address these human rights issues including: National Crime Prevention Strategy, the Sexual Offence Guidelines, the Justice Department's Gender Policy and National Plan of Action for Children, Victim Empowerment Programme, 16 Days of Activisms against the Abuse of Women and Children (Department of Social Development 2004). However, what is noticeable about all these programmes is that, their target audiences are women and children, neglecting the other victims of GBV.

In 1988, according to the Department of Social Development (2004) a number of acts were passed by South African Parliament. However, all these acts related to women's and children's rights and were geared towards reducing domestic violence, while there were none that encompass men's and boy's rights. These acts passed in 1988, are as follows:

- The Domestic Violence Act
- The Maintenance Act
- The Recognition of the Customary Marriage Act

The study conducted by Pelsler et al. (2005) in Malawi also shows the same situation or scenario as South Africa when it comes to interventions programmes and policies because they target women and girls only, neglecting men and boys.

## **2.19 Conclusion**

Research has clearly shown that men can be the victims of GBV in their intimate relationships with their partners or ex-partners. The research also shows that women abuse their partners at a substantial rate just as men abuse their partners. According to Duvvury (2009) GBV has been recognised as a universal pandemic, and governments, donors, and civil societies all need to increase the range of responses to address the complex intersecting dynamics that fuel gender based violence. Duvvury (2009) further argues that GBV needs to remain high on the political and development agenda at all times. Straus (2005) argues that

violence is a criminal act and morally repulsive against both men and women, except in the rare cases of self-defence.

It is clear that more research is needed on gender based violence against men, as the research that has been done shows that gender based violence occurs in a large percentage of relationships. In order to improve the services for violence that occurs in same-sex intimate relationships, Renzetti and Miley (1996) argue that there should be explicit policies for addressing homophobia in staff, volunteers, and heterosexual clients, written and spoken language. Furthermore, there is a need for language that is not heterosexist, materials that are gender neutral, and LGTB friendly along with effective adverting that allows the victims to know that service providers are safe for LGTB.

## **CHAPTER THREE**

### **RESEARCH METHODOLOGY**

#### **3.1 Introduction**

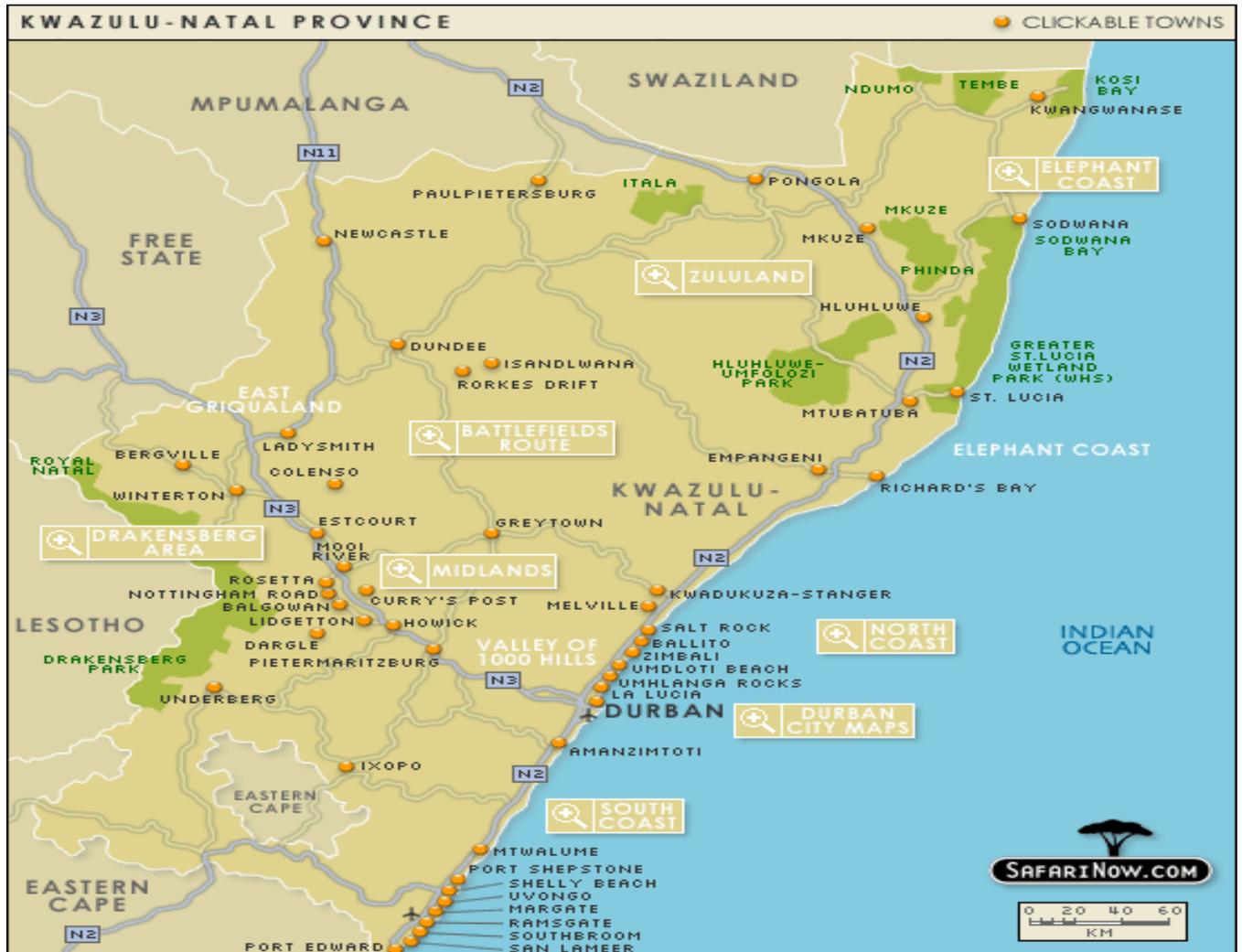
The aim of the study is to investigate patterns of gender based violence amongst men in Clermont Township. It is believed that gender based violence has major negative impacts and outcomes (e.g. psychological effect) for the victims. It is hoped that the findings of this study can be used to address this social pandemic in our societies known as gender based violence. The study was conducted with men (heterosexual, homosexual and bisexual) aged 20-50 years residing in Clermont Township. A combination of qualitative and quantitative methods is used in the study. The qualitative data comes from in-depth interviews and the quantitative data comes from a survey.

#### **3.2 Profile of KwaZulu-Natal**

KwaZulu-Natal is situated on the east coast of South Africa and has a land area of 92 100 km<sup>2</sup> (Statistics South Africa 2003). According to Statistics South Africa, 57% of the population during 1996 census lived in non-urban areas, and in 2002 the average population in KZN was 100 persons per square meter (1998). According to the Government Communication and information System (GCIS) (2004), KwaZulu-Natal's economic activities are centred around Durban, Pinetown, Pietermaritzburg and Richards Bay Metropolis. Durban is the economic hub of KwaZulu-Natal, having one of the largest ports in the world. KwaZulu-Natal contributed 15.5% of the country's total Gross Domestic Product (GDP) in 2001. According to Statistics South Africa, the population of KwaZulu-Natal was estimated at over 9.2 million in 2000, and the province has 20.4% of the total population of South Africa. In KwaZulu-Natal, 35% of the population are younger than 15 years and 61% are in their economically productive age group and 6% are aged 60 years or older (Statistic South Africa 2003). Poverty is widespread in the province. According to the United Nations Development Programme (UNDP) (2004), over half (50.5%) of the population lived below poverty line in 2002. According to Statistics South Africa, in KwaZulu-Natal nearly 57% of the population was accommodated in formal housing and 27.9% and 10.8% respectively were

accommodated in traditional and informal structures (2003). This study was conducted in Clermont Township, one of many townships in KZN.

**Figure 3.1 Map of KwaZulu-Natal**



Source: Marriott (2008)

### 3.3 Description of Clermont

*Brief history:* Clermont Township was established in the 1930s to 1940s and was named after a British man, Clairmant. Clermont is surrounded by industrial areas, and factories, and most people who live in Clermont are employed in surrounding factories and industries. Clermont Township is the home of prominent politicians and public figures, to mention a few: the late

Archie Gumede who was the founder of the United Demographic Front (UDF) in the 1980s and the ex-Judge President of KwaZulu-Natal Judge Vuka Shabalala.

The study area is Clermont Township which is situated in the Durban Metropolitan (known as the EThekweni Municipality Area). Clermont Township is 16 kilometers away from Durban Central Business District and a few kilometers away from Pinetown, and is bounded by Westville North, New Germany and Reservoir Hills. Clermont is also bounded by the KwaDabeka Township and the Wyebank suburb. Clermont has the second largest hostel in South Africa, Krans-Kloof Hostel. Clermont Township and KwaDabeka Township form the mass of the previously disadvantaged areas. According to Statistics South Africa, Clermont Township is divided into 6 wards, namely: Ward 10, Ward 19, Ward 20, Ward 21, Ward 22 and lastly Ward 92, and these wards are coordinated into a zone. (SSA 2003). Clermont and KwaDabeka Townships have two libraries, one police station and one Metro Policy Centre. There are also two clinics but no hospital and no fire station, five sport grounds, seven community halls, and 14 schools of which five are high schools. The population of Clermont and KwaDabeka Township is estimated at about 900 000.

The Clermont and KwaDabeka Township are faced with a number of challenges such as a high teenage pregnancy rate, crime (car hijacking and house breaking), school drop outs, HIV/AIDS, unemployment, underemployment and lastly, drug use. This area has been identified as having the highest intake of the drug *whoonga* (The Mercury newspaper, 10<sup>th</sup> August 2011).

**Figure 3.2: Map of Clermont Township**



**Source:** Google Earth (2011)

### **3.4 Methodology**

This study used both qualitative and quantitative research methods. Holloway (1997) asserts that qualitative research is a social inquiry that focuses on the way people interpret their experiences and also make sense out of their experiences and the world they live in. The main aim of using this type of method is to understand the social reality of individuals, groups and their cultures. In this study specifically, the qualitative data was drawn from 20 in-depth interviews with men living in the Clermont Township.

The quantitative research method used was a survey. According to Casebber and Verhoef quantitative research is defined as “numerical representation and manipulation of observations for the purpose of describing and explaining the phenomena that those observations reflect” (1997: 2). The quantitative method emphasizes the measurement analysis of casual relationships between variables, not processes (Denzin and Lincoln 1994). According to Lynch (1983) quantitative data is in the form of numbers and also presents concept that may take on greater or lesser value.

### **3. 5 Triangulation of methods**

The study relied on a triangulation of methods. Triangulation is the integration of both qualitative and quantitative research methods. An advantage of the triangulation of method is that it results in a stronger research design by the researcher and the findings of the research are more valid and reliable. However, triangulation of methods can be time consuming and also expensive (Denzin 1970).

### **3. 6 Methods of collecting data**

The main instrument used to collect data for this dissertation was a questionnaire survey and in-depth interviews with men. The survey questionnaire was used in order to understand the extent of GBV and types of GBV against men in Clermont Township. Questionnaires are a quantitative instrument of data collection. There are different variations of questionnaires in social science research (Babbie 1989).

#### **3.6.1 Survey**

A survey is a small sample of the entire population, but the researcher can carefully choose a sample that can be used to represent the population. The sample reflects the characteristics of the population from which it is drawn. In surveys sampling methods are categorised as either probability or non probability. According to Alexander et al. (1999), survey method is cost effective, and provides a convenient and reliable way of collecting data when done in an organised way. To enhance the accuracy of the conclusion of the survey, the researcher needs to carefully select or design a survey instrument. Surveys are powerful tools for data collection and surveys use self-reported (direct from the participants) measures as a means of data collection. In surveys data can be collected either by using oral interviews or written questionnaires. According to McLaughlin and Kaluzny (1994) to find something out especially when human factors are under investigation, conducting survey is a useful method. Surveys are relatively inexpensive and can produce a large amount of data in a short time. They can be used to study past behaviours, attitudes, beliefs, and values, as a wide range of information can be collected. In addition, there is also flexibility in deciding how the questions will be administered (e.g. by telephone, face-to face or oral or written survey) (Abramson and Abramson 1999). Surveys are inflexible because they require the same

administration tool throughout the collection of data and the data collected is likely to lack details or depth on the topic being investigated. Surveys depend on honest, subjects' motivation, memory, and ability to respond (e.g. the participants must be motivated to give accurate or correct answers). In surveys sometime it is hard for participants to tell the truth or recall information (Abramson and Abramson 1999).

The respondents were randomly sampled and selected for the study. Respondents were given information about the objectives of the study. Those who were interested in participating in the study were then recruited to the study. The survey was conducted on weekends because most of the respondents were working. When collecting the data, a structured questionnaire was used for the survey interviews. The survey was administered face to face. In total, 100 survey questionnaires were administered among men in Clermont Township. The interviews which followed were conducted on a one-on-one basis and the researcher was the only person to administer the questionnaires. A standardised questionnaire was the basic investigation tool used to obtain the necessary data. The design and the format of the questionnaires are in accordance with the aims and the objectives of the study. The survey collected information on GBV against men. Respondents were asked about their knowledge of and attitudes towards GBV against men, experiences and types of GBV and services for victims of GBV. The researcher secured several appointments with group of 5 to 10 men on weekends, and explained the objectives and the importance of the study. After the survey 20 respondents were also recruited for in-depth interviews, conducted on weekends.

After the interviews with the 100 respondents, the researcher identified those who were victims of GBV and also those who regarded themselves as not the victims of GBV and asked if they would be willing to participate in an in-depth interview. In total, 20 in-depth interviews were conducted, 10 with men who are the victims of gender based violence, and 10 with men who are not the victims of gender based violence. According to Webber and Williams (2008) in-depth interviews are good methods of collecting data in various disciplines. It is a qualitative research method that uses open-ended questions to explore uncovered information on a topic of interest and allows respondents the opportunity to articulate ideas and opinions in their own words. According to Hesse-Biber and Leavy (2006), the researcher, when using an in-depth interview, can capture exactly the ways

respondents explain and describe their actions and decisions. In-depth interviews make it possible in collecting data to examine and interpret the motivations behind actions. In-depth interviews are a good way of assessing people's perception of situations. Interviews are also one of the most powerful ways of understanding other people. In-depth interviews also provide more detailed information than is available through other data collection methods like regular interviews and surveys. They also provide a relaxed atmosphere in which respondents may feel more comfortable having a conversation with the researcher about their problems, as opposed to filling out a questionnaire (Punch 2005). In addition, in-depth interviews provide more detailed information than what is available through other data collection methods. However, in-depth interviews can be prone to bias. They are a time-intensive activity because of the time it takes to conduct interviews, transcribe and analyse the results. Because small samples are chosen and random sampling methods are not used, generalizations from the results of in-depth interviews are not possible (Webber and Williams 2008). The sample for the study included African men from Clermont between the ages of 20 to 50 from different economic and social backgrounds. The interviews were conducted in a quiet place with maximum privacy. The participants were free to withdraw from the study if they felt uncomfortable answering the questions. If they reported experiencing stress, they would be referred to a counsellor. The in-depth interviews included words such as how, when, why and what, with open ended questions giving the respondents the opportunity to express their views. Interviews are a useful way of assessing people's perceptions, meanings, and definitions of situations as well as constructions of reality. Interviews are also one of the most powerful ways of understanding other people.

The interviews were conducted by the researcher on a one-on-one basis. Briefing sessions were conducted with the interviewees about every aspect of the questionnaire and interview. The interviews were conducted mainly in the afternoon and on the weekends because most men were at work during the week. If the interviewees did not understand the questions, the researcher explained the questions simply and without bias. The confidential nature of the study was always emphasised so that respondents would not be reluctant to answer questions honestly and sincerely. Respondents were encouraged to respond truthfully and assured that their responses would remain confidential.

### **3.7 Data analysis**

The data for the analysis was obtained from both the 100 respondents who participated in the survey and the 20 informants from in-depth the interviews. All 100 questionnaires were administered by the researcher and also analysed by the researcher using Stata data analysis package. The translation was done by the researcher for those who did not understand English. For the in-depth interviews the researcher was only allowed to take notes because the informants were not comfortable being recorded. The data was organised according to research question, related to the objectives of the study. The technique that was used in analysing data from this study was in form of transcript from both surveys and in-depth interviews. The transcription of data was done and notes taken during in-depth interviews were incorporated into the transcripts. The researcher then went through the survey questionnaires to clean up the data, and correct errors, and familiarise himself with the responses so that he could decide whether they yielded the desired information. The responses were then sorted according to categories that emerged from the data, and gave complete picture of what the study sought to achieve.

### **3.8 Ethical Clearance**

The Higher Degrees Committee at the University of KwaZulu-Natal provided the researcher with ethical clearance to conduct this research. Each participant had to complete the consent form, which stated that the research was voluntary and the participants could withdraw at any given time if they wish to do so. The researcher will not disclose any information about the respondents and their names will be changed to protect their identity. The researcher assured the respondents that the information was confidential and no one will know about their participation and the results of the study. The participants were made aware that if they required counseling they would be referred to the relevant counsellors, but no-one appeared to need counseling. The purpose of the study was clearly explained to the participants and if they did not understand English the researcher translated the questionnaire into the local language. The researcher used English language to conduct the interviews, but where participants, did not understand English properly, the researchers translated the questions to Zulu language, but most participants understood English very well. The researcher also translated answers from Zulu to English for those participants who needed translation. The research data was kept strictly confidential and the participants were informed of this. The

participants were also informed that should they need a copy of the study, they could get it once it was completed. The confidentiality was maintained at all cost throughout the survey and the names of the participants do not appear in the report.

### **3.9 Limitations of the study**

The study aimed to interview men from Clermont Township. The study dealt with a sensitive topic. Men, who are victims of GBV, do not want to talk about the abuse openly and this makes it difficult to get accurate statistics of the number of abused men. It was difficult to recruit men who are victims of GBV since the researcher relied on referrals from those people who knew someone who was the victim of GBV and most of them refused to give names of those who had experienced partner violence in their relationships. Respondents who knew someone close to them who had experienced GBV were asked to give names with the hope that they would assist the researcher to recruit men for the study. The sample also consisted of a limited number of homosexual and bisexual men who directly experienced GBV in their lives. The sensitive nature of the topic was a major limitation, because GBV against men is still a taboo issue. The sample size was relatively small and the results may not be generalisable to all men who experienced GBV at the hands of their partners. Due to these limitations, the results of this study cannot generalise to the entire population of Clermont Township. The findings of this study provide a foundation and a way forward for future research on GBV against men.

## **CHAPTER FOUR**

### **RESULTS**

#### **4.1 Introduction**

This chapter analyses the data that was collected from the survey and in-depth interviews that were administered to men in Clermont Township in order to shed more insights on GBV. The literature review suggests that this is a major problem among men, but it is difficult topic on which to obtain reliable data. In addition, the review suggests that GBV against men is very common, but in South Africa most of the focus has been on women, which is understandable given the scale and intensity but there is also a need to understand this phenomenon from the perspective of men and how it impacts them. The findings that are presented in this chapter have emerged from the data obtained through survey and in-depth interviews with men from Clermont Township.

#### **4.2 Sample characteristics of the respondents**

Respondents were asked about their age, marital status, level of education, employment status, number of living children, length of relationship, and sexual orientation in the study (see Table 4.1). The survey interviews were conducted with 100 men in Clermont Township. The ages of the respondents ranged from 20 years to 50 years. The data shows that 44% of the respondents surveyed were between the ages of 30 and 40, followed by 31% between the ages of 20 and 29 lastly, 25% were between 40 and 50 years of age. In as far as the living children of the respondents are concerned, 70% of the respondents had living children. Of these 45.71% between the ages of 30-39 years had children, 32.86% men between the ages of 40-50 years had children and lastly 21.43% men between the ages of 20-29 years had children. Men between the ages of 30-39 had the most living children.

The majority of men were not married. The analysis of the data suggested that most men (51%) had never been married or were not living with their partners, while 36% were living with their partners, and 13% were married. This study also showed that the culture of marriage is not the norm (within black communities is not a norm in South Africa).

Levels of educations were fairly high. In as far as the education levels of the respondents is concerned, this study shows, that the majority of the respondents (62%) had some secondary

school education, 37 % had either a diploma or a degree as their level of education, and only 1% of the respondents had only a primary level education. The majority of men were working. This study suggests that the majority of the respondents, 50% had full-time employment, followed by 43% with part-time employment, and lastly, 7% of the respondents were not employed. This study also suggests that 38.8% of the respondents that were employed had high school level education, 34.7% had a degree, 14.3% had a post-graduate degree, and lastly 12.24% had secondary level of education. The study clearly shows that people with higher levels of education are more likely to be employed. The majority of the respondents were employed, 42.86% of the respondents between the ages of 40 and 50 years, 38.78% of the respondents between the ages of 20 and 30 years, and 18.37% of the respondents between the ages of 20 and 29 years. This study is consistent with other studies on employment in South Africa, which suggests that the majority of the unemployed or not economically active is the younger generation.

The majority of the respondents had been in a relationship for more than a year. This study suggests that of those in a relationship 81% had been with their partners for 1 year, and only 14% of those in a relationship had been with their partners for less than a year, and lastly, 5% of those in a relationship were not sure about the length of the relationship with their partners. This study suggests that the majority of the respondents, 82% were heterosexual, 15% homosexual, and 3% bisexual men. King (2004) also argues that gender based violence is genderless and it is more about positioning in a relationship, where one party maintains and establishes an unequal distribution of power within the relationship. This positioning can take the form of dictating another person's decision-making, failing to factor in the rights and liberties of the under-empowered person, and regulating other areas of a couple's mutual personal lives.

**Table 4.1 Sample characteristics**

<b>Age</b>	<b>N</b>	<b>%</b>
20- 30	31	31
31-40	44	44
41-50	25	25
<b>Marital status</b>		
Married	13	13
Living together with your partner	36	36
Never married or living together	51	51
<b>Respondents Living children</b>		
Yes	70	70
No	30	30
<b>Levels of Education</b>		
Primary school	1	1
Secondary school education	62	62
Other (diploma and degree)	37	37
<b>Employment status</b>		
Working Full-time	50	50
Working Part-time	43	43
Not employed	7	7
<b>Length of relationship</b>		
Less than a year	14	14
1 year and above	81	81
Don't remember	5	5
<b>Sexual orientation of the respondents</b>		
Heterosexual	82	82
Homosexual	15	15
Bisexual	3	3
N	100	100

### **4.3 Knowledge about gender based violence**

The respondents in this study were asked about their own perceptions of GBV against men, and also about their perception whether or not men who are victims GBV are aware that they are victims (see Table 4.2). This study suggests that 88% of the respondents perceived that men can be victims of gender based violence, while only 12% of the respondents perceived that men cannot be victims of gender based violence. Whitaker et al. (2007) suggest that the stereotyped beliefs about GBV portray victims as small and timid, and represent the abuser as large, brutish and aggressive. Those gender stereotypes are dangerous because they leave certain groups of people suffering and vulnerable as they do not fit into these descriptions which dominates gender based violence literature and support organisations. Research suggests that abused men (heterosexual, homosexual and bisexual) are men and boys who are

being abused physically, emotionally, financially and mentally by their partners in their intimate relationships (Whitaker et al. 2007). Steinmetz and Lucca (2007) further suggest that, because society sees men as strong and dominant in their intimate relationships, and the victims do not report the incident because of society's perception. According to Straus (1999) spousal abuse victims are afraid to talk about their abuse, due to gender stereotypes regarding GBV against men.

The analysis of this study suggests that a large proportion (65%) of the respondents perceive that men who are victims of GBV are not aware that they are being abused, while 35% perceive that men who are victims of GBV are aware that they are being abused. Lambert et al. (2003) argues that rather than thinking that women are abusing their partners, there is a common tendency to think (due to societal perceptions) that men who are the victims of GBV deserve this or might have done something wrong to the perpetrator. Most women and far less men are likely to think that they are committing a crime when they abuse their partners. For years, women's movements have been at the forefront of struggles against women and child abuse and these women's movements have done incredible work for abused women and children, but have shown less or no support in fighting the abuse against men. It is believed that in same-sex relationships to some degree there is an assignment of gender roles between partners and when intimate violence starts it is a result of gender related issues.

**Table 4.2 Respondents perception of GBV against men**

<b>Do you perceive men as victims of GBV?</b>	<b>N</b>	<b>%</b>
Yes	88	88
No	12	12
<b>Are men aware that they are being abused?</b>		
Yes	35	35
No	65	65

It is important to remember that all the respondents in the study suffered some form of GBV in their life time. Respondents in this study were asked the about forms or types of GBV suffered at the hands of their intimate partners, and the frequency of the experience (see Table 4.3). This study suggests that the majority of the respondents were denied access to the house, food and medication (27%), and this made up the largest group of respondents. A not significant number (23%) reported that they were denied access to their children and to the

outside world, groups or organisations by their intimate partners, 15% were being constantly put-down, insulted and humiliated, 12.9% were denied financial control and autonomy, 11.3% reported that they had things thrown at them, 6.2% were prevented from talking or seeing their friends or families, and lastly 3.9% were slapped, bitten, kicked and punched by their partners. The large numbers of the respondents were denied access to their children and that was significantly different from physical abuse most women suffered from, smaller number of respondents reported physical abuse. A study conducted by Steinmetz (1977) revealed that men, who are committed to a marriage, may refuse to leave an abusive relationship because of their children, because abuse of men is not recognised, and because it is not easy for abused men to use abuse as defence in court to obtain custody of their children. Gregorash (1974) and Steinmetz (1977) also argue that many abused men refuse to leave for the sake of protecting their children from abusive partners. Letellier (1996), in his research, reported that homosexual and bisexual abusive partners may withhold medication from their HIV positive partner or even threaten to reveal his status to his family or friends.

**Table 4.3 Forms of abuse the respondents take from their partners**

<b>Form of abuse</b>	<b>N</b>	<b>%</b>
Being constantly put-down, insulted and humiliated	72	17.8
Being stopped talking or seeing his friends or family	30	7.4
<b>Being restricted access to see his children, to the outside world/ groups or organisation</b>	<b>81</b>	<b>20</b>
Being denied financial control / autonomy	62	15.3
Having things thrown at him	55	13.4
<b>Being denied access to the house, food, medication</b>	<b>86</b>	<b>21.2</b>
Being slapped, bitten, kicked and punched	19	4.7

\*Respondents were allowed to choose more than one response

All the respondents in the study suffered some form of GBV in their life time. Respondents in this study were asked whether it was advisable to talk to both partners together about the violence in the relationship. The respondents were also asked why men stay abusive relationships. They were also asked about the time frame of abuse in their relationship before the survey (see Table 4.4). This study shows that the majority of the respondents (47%) felt that it was not advisable to talk with both the partners about the violence in their relationship, while 41% respondents said they do not know and only 12% of the respondents felt it is advisable to talk with both the partners together about the violence in their relationship. Respondents were asked whether or not they found it true that man stays in an abusive

relationship because of depression, social isolation, or lack of family support, the majority of the respondents (54%) answered that it was not true, 34% reported that they did not know if those were the reasons men stay in abusive relationships, and only 12% of the respondents felt that it is true. The study that was conducted by Pagelow (1984) argues that men and women refuse to leave their abusive relationships for the same reasons: because they are psychologically dependent on their partners and excuse the abuse as being a result of certain circumstances, such as alcohol intoxication.

The findings of this study also suggests that the majority of the respondents (90%) answered that it is true that in many cases intimate partner violence remains unreported because the victims want to keep the family together, and 10% of the respondents felt that this was not true. In support of these findings, Pagelow (1984) maintains that these men may genuinely love their abusive partners and the abusive wives are apologetic after the incidents. Furthermore, Lupri (1990) makes the point that the main reason for abused men to stay is economic, because when a couple marries, they merge their economic and living situations at the same time as making vows to each other of commitment and love. In this study, cultural beliefs were perceived by many respondents as a driving force for perpetuating GBV against men. Rates reported of that intimate violence had taken place in the respondents' home before the survey. So the respondents were asked the about the last time they had experienced GBV. This study suggests that of those who encountered GBV 77% encountered the incident less than a year before the survey, and of those who encountered GBV, 23% encountered the incident a year or more before the survey.

**Table 4.4 Attitudes about GBV**

In suspected cases of intimate violence, it is advisable to talk with both the partners together about the violence in their relationship		N	%
True		12	12
False		47	47
Don't know		41	41
Often a man stays in an abusive relationship because of depression, social isolation or lack of family support	True	12	12
	False	54	54
	Don't know	34	34
Many cases of the intimate partner violence remain unreported because of shame to keep the family together.	True	90	90
	False	10	10
	Don't know	0	0
<b>Respondents timeframe of the abuse in their relationships</b>			
Less than a year		77	77
1 year or more		23	23

The respondents were asked how they dealt with the GBV by their intimate partners (see Table 4.5). Analysis of the data suggests that the majority of the respondents 45% refused to admit that there was crisis in their relationship or they were in denial, 22% accepted that their partners would not or could not stop the violent behaviour, while 19% believed that if they stayed longer in their relationship, they would be able to remedy the situations, and 14% of the respondents went to their parents' home just to relax. The study that was conducted by Corry et al. (2002) revealed that various tactics are employed by heterosexual victims to diffuse the violence with their abusive partners.

**Table 4.5 How the abused respondent dealt with the abuse?**

	<b>N</b>	<b>%</b>
I refuse to admit – denial	45	45
I accept that my partner will not or cannot stop the violent behaviour	22	22
I believe that if I stay long enough, I will be able to rescue the situation	19	19
I went to my parents home just to relax	14	14
I decided to file for divorce	0	0
<b>N</b>	<b>100</b>	<b>100</b>

The respondents were asked about their relationship with their intimate abusive partners (see Table 4.6). The implications of GBV on men are numerous as reported by respondents in the survey. The analysis of this study suggests that more than any other category, respondents (40%) tried to please their partners to make the relationship work only to find that their effort still did not please their partners. Twenty-one percent of the respondents reported that they often felt totally alone in their relationships, 17% felt numb inside, 15% were confused about the differences in the way their partners viewed their relationship and the way they saw it, and lastly, 7% of the respondents were afraid of their partners. Steinmetz (1977) claims that, like abused women, men may become used to a certain standard of living, and if they have to leave their abusive partners, they most likely would have to move out of their homes and support their ex-partners while at the same time paying their own living expenses.

**Table 4.6 Relationship situation between the respondent and his partner**

<b>After the abusive incident</b>	<b>N</b>	<b>%</b>
I often feel totally alone	21	21
I am afraid of my partner	7	7
I sometimes feel numb inside	17	17

I am confused about the differences in the way my partner view our relationship and the way I see it	15	15
I try and try to please my partner only to find that my effort still do not please him/her	40	40
N	100	100

#### 4.4 Reporting the gender based violence

The respondents were if they reported the incident to relevant institutions that deal with GBV (see Table 4.7), and the findings of this study suggests that the majority of the respondents (99%) did not report the incident. Studies that have been conducted on gender based violence against men suggest that men do not report the incident to the relevant institutions (Straus 1999). In support of the findings, Katy (2009) argues that anyone who has been the victim of any type of abuse will understand that it is not easy to report the abuse. Katy (2009) further argues that if the cycle of the abuse takes place for a long period of time, abuse can make the victims feel powerless, fearful of change, and even experience a feeling of personal responsibility for what is happening to them. Straus (1999) argues that men are afraid to report abusive partners to the police because police would not take their allegations seriously. Lettellier (1994) supports this argument, stating that it is difficult to estimate GBV on homosexual and bisexual men because homosexual and bisexual men may not view themselves as GBV victims as this would be contradictory to their identity as ‘males’.

The respondents were also asked about the reasons of not reporting their violence to either institutions that deals with gender based violence, or people whom they might have told, or sought help from. Respondent’s reasons for not reporting the abuse (see Table 4.7). The findings of the study suggest that the majority of the respondents 51% did not report the incident because they believe that men should be able to handle their partner, 19% did not report the incident because they believe that men are supposed to protect women, 16% believe men are not supposed to hit back when a woman is hitting them, 13% believe that men do not get pushed around by women, and 1% believe that no one will believe them or they are afraid to “out” themselves.

**Table 4.7 Respondents reasons for not reporting the GBV (These are actual abused respondents).**

<b>Reasons for not reporting the abuse</b>	<b>N</b>	<b>%</b>
Men are supposed to protect women	19	19
Men don't get pushed around by women	13	13
Men are not supposed to hit back to their women when a woman is hitting them	16	16
Men should be able to handle their women	51	51
No one will believe me or I am afraid to "out" myself (gays and bisexuals)	1	1
N	100	100

The respondents were asked which person they might have told about the incident (see Table 4.8). The majority of men would prefer to tell someone who is not a family member about the incident. The findings in the study suggest that the majority of the respondents (60.9%) would prefer to report the incidence to a friend, 37.7% would prefer to report the incident to a family member and lastly 1.4% of the respondents would report the incident to a work colleague. The respondents were asked the reasons why they would not report the incident to their friends/colleagues or family members. The findings of this study are consistent with the observation by Straus (1999) that men seldom report GBV which makes it difficult to obtain reliable statistics. This study suggests that a plurality of the respondents 38% believed it was an isolated incident that would not happen again, while 33% did not report the violence to a friend or a family member because they believed that the relationship would get better when their partner stopped drinking. Twenty percent of the respondents believed that this is the way relationships are, and 9% believed that their partners would get help and change their abusive behaviour. The findings of this study also suggests that a plurality of the respondents 35% did not report the incident to their family members because they were committed to their relationship, 24% did not report the incident because they have invested in their relationship 'for better or worse', followed by 23% who did not report the incident because their partners was loving and lovable when not being abusive, and 18% of the respondents believed that it was up to their partners to make their relationship work. In support of these findings, Stets and Straus (1990) found that men are five times less likely than women to talk about domestic abuse to friends and family. Men that are being abused do not report abuse because they have to contend with inherently sexist stereotypes.

**Table 4.8 Respondents the person might have told about the incident.**

	<b>N</b>	<b>%</b>
<b>A friend</b>	<b>89</b>	<b>60.9</b>
A family member	55	37.6
A work colleague	2	1.3

\*Respondents were allowed to choose more than one response

In this study the respondents were asked if they sustained any injuries during the incident and where they went to get assistance (see Table 4.9). The analysis of the findings suggests that the majority of the respondents 78% did not sustain any injuries during the incident, while 22% of the respondents sustained injuries during the incident. Fontes (1999) argues that the assistance and concern for male victims should not be purely based on whether or not the man is feeling afraid of his partner, and that this cannot determine that men are in less danger of physical assault or injury than women. This study suggests that the majority of the respondents (68. 1%), did not go anywhere after the incident, 22.7% went to their friend's place after the incident, and lastly 9. 1% went to their parent's or family's places after the incident. The study conducted by Steinmetz and Lucca (1988) revealed that, to cope with the abuse, men have to use various tactics to diffuse the violence at home. However, men will do everything in their power to stop the abuse. When they fail, most men react by staying silent because they cannot even tell their families or friends about the situation. Heterosexual men will often make excuses about their injuries even when they end up at the hospital or seeing their family and friends. Pagelow (1984) also maintains that these men may genuinely love their abusive partners and the abusive wives are apologetic after the incident. Cruz (2000) argues that homosexual men stay in abusive relationships because they still have the hope that their abusive partners will change, they still love their abusive partners, they fear being exposed by their abusive partners, or they lack assistance from friends, colleagues and family members because they do not know the sexual orientation of the victim or the perpetrator. They often stay out of fear of loneliness, sense of loyalty and lack of knowledge regarding domestic violence

**Table 4.9 Injuries sustained by the respondents and place where the respondents went to for assistance**

<b>Did you sustain any injuries</b>	<b>N</b>	<b>%</b>
Yes	22	22
No	78	78
<b>Where did the respondents go after the incident</b>		
I did not go any where	15	68.2
I went to my friends' place	5	22.7
I went to my parent's or family member's place	2	9.1

In as far as the injuries sustained by the respondent are concerned, this study suggests that a plurality of the respondents 22% sustained injuries to their sensory organs, while 36.4% sustained black eyes during the incident, 13.6% lost their teeth or had teeth broken during the incident, and 9.1% of the respondents sustained broken ribs during the incident. Straus (2005) argues that it is vital to realise that the rate of injury inflicted by women on men is not as severe as those inflicted by men on women. In a study conducted by Hines and Malley-Morrison (2001) it was revealed that in GBV, women are injured more frequently and severely at the hands of their partners and men are injured at the hands of their intimate partners (both men and women perpetrators). Hines and Malley-Morrison (2001) further argue that the fact that men can be severely injured at the hands of their intimate partners should not be ignored. In support of these findings, the study by Lori et al. (1999) revealed that men can be hit, kicked, punched, verbally and psychologically abused, have their self-esteem eroded away, become more isolated from those around them, pushed, or bitten by their women abusers. Women can also go to the extremes of using weapons like knives, guns, or any blunt object that can be used to strike. Abused men are not necessarily small in stature or physically weaker than their abusers, but they do not use sex or strength to hurt or harm their partners even though they are being hurt. According to the American Bureau of Justice Statistics, in the United States, between the year 1976 and 2002, 11% of homicides were committed by women (an intimate partner) against their intimate partners (men) and in several cases injuries that were sustained from this intimate violence were fatal (1988).

#### **4. 5 Respondents knowing someone who is the victim of GBV**

Respondents were asked if they know someone who is the victim of GBV in order to provide an alternative method for assessing rates for gender based violence against men, aside from asking the direct question to the respondent about their own experience or history of GBV. The reason this question was asked is that it is very likely that one might know someone who has been a victim, and this may make it possible to get a somewhat reliable rate of GBV against men. In far as knowing someone who is the victim of gender based violence, the analysis suggests that the majority of the respondents (78%) knew someone who is the victim of gender based violence, while 22% of the respondents did not know anyone who was the victim of gender based violence. This study suggests that 34.7% knew a friend who was the victim of GBV, 23.1% knew a neighbour who was a victim; 15.4% knew a colleague who was a victim. Furthermore, 6.4% knew a cousin who was a victim, 3.8% knew an uncle who was a victim and lastly, 1.2% knew a church brother who was a victim.

Respondents, who know someone who was the victim of GBV, were asked about the sexual orientation or sexual preference of the victims. This study suggests that the majority of the respondents (70.5%) reported the victims to be heterosexual men, 23.1% of the victims were homosexual men, 3.8% of the victims were bisexual men, and only 2.6% of the respondents did not know the victims sexual orientation. The respondents were asked whether they reported the incident to the relevant institutions dealing with GBV issues and the respondents were also asked about the reasons for not reporting the incident to the relevant institutions (see Table 4.10). This study suggests that the majority of the respondents 97% did not report the abuse of the victim by his partner to the relevant institutions, while only 3% reported the abuse of the victims by their partners to their friends and family members. This study suggests that a plurality of the respondents 22.4 % did not report the incident of the victim to the relevant people or institutions because the victims asked them not to report it, 13.1 % because the victims still love their partners, 11.8 % because the victims were ashamed of the abuse, and another 11.8% because the victim did not want to lose their children. A further 10.5% of the respondents did not report the abuse to his family because the victims' families were going to be embarrassed, 9.2 % reported that the victims were financially dependent on their partner, 7.9 % of the respondents perceived that people would not to believe them if they report the incident, and another 7.9% of the respondents did not know where to reported the incident. In support of the findings of this study, Pelsler et al. (2005) argue that, because

abused men are ignored by the police when they report or plea for help, they tend not to call the police or report the abuse they suffer at the hands of their partners. Fontes (1999) states that culturally men are trained at a very early age to ignore or suppress fear, while on the other hand girls and women are given permission to feel fear. Fontes (1999) further argues that the concern and assistance for male victims should not be purely based on whether or not the man is feeling afraid of his partner or not, and that this cannot determine that men are in less danger of physical assault or injury than women (for example, a number of men may be less likely to feel afraid when they should, compared to their woman counterparts). The assistance should be given to all the victims of GBV.

Fisher's (2008) study also reveals that male victims of gender based violence are faced with two obstacles with the law because male victims have to prove that they are the victimising of the circumstances and also to ensure that children are protect because children might be the next victims of violence. Due to these reasons, men often decide to stay in abusive relationships (Henderson 2003). Flynn (1990) maintains that for a man to disclose the abuse by his partner would be embarrassing, because this type of abuse is opposite of societal stereotypes in which the man should be dominant and woman submissive. According to Corry et al. (2002), abused men are often afraid of being stigmatised by others, and hold a fear of being labelled as spineless, sissy, dependent, or 'wimp' men with low self-esteem. Men are also too afraid to tell or admit to others that they are being mentally, physically, or financially abused, and feel that telling is a loss of masculinity or manhood.

**Table 4.10 Did the respondent report the abuse of the victim?**

<b>Reported the incident</b>	<b>N</b>	<b>%</b>
Yes	2	3
No	76	97
<b>Reasons for not reporting the incident by the respondents</b>		
He asked not to tell anyone	17	22.4
Because he was ashamed	9	11.8
People were not going to believe me	6	7.9
I did not know where to report the matter	6	7.9
He is financially dependent on the partner	7	9.2
He did not want to lose his children	8	10.5
He still loves his wife /boyfriend	9	11.8
His family was going to be embarrassed	10	13.2
Emotionally and psychologically dependent on the partner	4	5.3

#### 4. 6 About GBV institutions and the services offered in Clermont Township

The respondents were asked whether they were aware of any institution offering services for victims of GBV in Clermont Township. The respondents were also asked if any of these institutions are providing services, to which they are being provided and what services were provided in any of those institutions (see Table 4.11). This study suggests that the majority of the respondents (68%) were not aware of any institutions, not just those for men in Clermont Township that offer services to the victims of gender based violence, while only 32% of the respondents knew of such institutions. Only those aware of any institution were asked the following questions. All these men reported that these institutions only provide services to abused women and children, and they were not aware of any services provided by these institutions. Regarding the advertising of these institutions, all the men reported that these institutions were not well advertised in the area, and none of the men knew anyone who has used any of these institutions.

**Table 4.11 GBV institution and services availability in Clermont Township**

<b>Are men aware of GBV institution in Clermont</b>	<b>Frequency</b>	<b>Percentage</b>
Yes	32	32
No	68	68
<b>Who are these institutions in Clermont catering to?</b>		
Women and children	32	100
<b>Are the respondents aware of the services offered in these institutions?</b>		
No	32	100
<b>Are these institutions well advertised?</b>		
No	32	100
<b>Do the respondents Know anyone used the institution?</b>		
No	32	100

#### 4.7 HIV/AIDS information

The respondents were asked if they regard themselves to be at risk of contracting HIV/AIDS because of GBV, and in addition, respondents were asked whether they have power to negotiate condom use in their relationships (see Table 4.12). This study suggests that the majority of respondents (71%) did not regard themselves to be at risk of contracting HIV/AIDS in their abusive relationships, while only 29% of the respondents regarded themselves at risk of contracting HIV/AIDS. In as far as sexual orientation of the respondents is concern and risk of HIV infection in their relationships, 65.52 % of heterosexual men felt

at risk of HIV in their relationships compared with 27.59% of homosexual men and 6.90% of bisexual men. The analysis suggests that half of the respondents feel they have the power to negotiate condom use in their relationships, while the other half feel they have no power to negotiate condom use in their relationships. In as far as the discussion of condom use by the respondents, 56% have never discussed condom use with their partners, while only 44% of the respondents have discussed condom use with their partners. In as far as sexual orientation and discussion of condom use is concerned, this study revealed that 82% of heterosexual men have discussed condom use with their partners, 14% of homosexual men have discussed condom use with their partners and 4% of bisexual men have discussed condom use with their partners. In far as sexual orientation and condom use is concern, 79.55% of heterosexual men have used condoms in their relationships, 18.18% of homosexual men have used condoms in their relationships and only 2.27% of bisexual men have used condoms in their relationships. This current study correlates to the study by Anderson et al. (2003) which found that GBV is associated with fear and power differentials, and also associated with limited ability to negotiate safe sex with your abusive partner.

A study conducted by Anderson et al. (2003), states that GBV increases the risk of HIV indirectly and that victims of GBV are more likely to be HIV positive than non-victims. In this study most of the respondents did not see a connection between GBV and spread of HIV. It is therefore essential to facilitate a campaign to educate people on the connection between GBV and spread of HIV/AIDS. This study also revealed that half of the respondents could not negotiate condom use with their partners, and therefore it is critical that most GBV campaigns are used as a strategy for the reduction HIV/AIDS. According to UNDP (2004), GBV has been identified as one of the driving forces of HIV/AIDS in the world, and GBV can directly and indirectly lead to an HIV infection. The respondents were then asked about condoms usage with their partners. They were also asked how often they use condom with their partners, and whether the last time they had sex with their partners, they used a condom.

The research also showed that people may become victims of GBV or experience GBV from their partners after they disclose their status (UNDP 2004). UNDP (2004) further argue that lesbian, gay, transgender and bisexual (LGTB) communities are at a growing risk of GBV because GBV against LGTB is often unacknowledged. This study suggests that the majority of the respondent (74%) use condoms occasionally when having sexual encounters with their

partners. Fourteen percent have always used condoms, and lastly, 12% of the respondents have never used condoms before with their partners. Analysis of the data suggests that the majority of the respondents (63%) did not use condoms in their last sexual encounter with their partners, so it follows that only 37% of the respondents used condoms in their last sexual encounter with their partners. In as far as sexual orientation and condom used in the last sexual encounter, majority of the respondent's (78.38%) of heterosexual men used condoms, 18.92% of homosexual men used condoms and 2.7% of bisexual men used condoms in their last sexual encounter.

**Table 4.12 Respondents knowledge of HIV/AIDS and condom use**

<b>As a victim of GBV, do you feel at risk of HIV/AIDS?</b>	<b>Frequency</b>	<b>Percentage</b>
Yes	29	29
No	71	71
<b>Power to negotiate condom use</b>		
Yes	50	50
No	50	50
<b>Did you ever discuss condom use with your partners?</b>		
Yes	44	44
No	56	56
<b>How often do you use condoms?</b>		
Always	14	14
Occasional	74	74
Never	12	12
<b>Last time you had sexual intercourse, did you use condom?</b>		
Yes	37	37
No	63	63

#### **4.8 In-depth interviews**

After conducting the survey with 100 men, the researcher then conducted 20 in-depth interviews, with 10 victims of GBV, and 10 who have never been victims of GBV. The interviews were conducted at different times and at different places. The respondents stated that men are subjected to different forms of abuse at the hands of their partners. Those forms of abuse are similar to those that have been reported by researchers such as Dobash and Dobash (1992). The findings show that the GBV against men often begins with verbal, financial, and psychological abuse, and then it escalates into physical abuse, which is often violent. Furthermore, abused men do not report the abuse because they feel that no one will believe them and they feel as though they are not man enough. Both men who were victims of GBV and those who were not victims stated that the most common forms are emotional,

verbal, and financial abuse. Some men also pointed out that there was also social abuse, because sometimes found themselves socially isolated from others.

#### **4.8.1 Does GBV affect men?**

Various respondents selected for in-depth interviews were asked to give their views and perceptions about GBV against men, and there were different responses about GBV against men. Most of the informants in this study felt that GBV does not affect men in our societies. This study has also revealed that some men hold stereotypes about GBV because they still believe that women are only victims of GBV. In interview, an informant acknowledged that GBV does affect men in our societies but on a very small scale. Some informants reported that men are also abused by their partners but it not regarded as abuse because it is less common. Some informants do not believe that men are abused by their intimate partners. They feel that this does not happen in their communities, it is merely a misunderstanding. Some informants in this study see GBV against men as a passing phase or that their partners simply experience mood swings. Some informants reported that their female partners love them dearly and that is why they behave obsessively and, as a result, they do not believe it is GBV. Some say that sometimes women are too possessive and are insecure, and this makes them lash out at their partners. On the other hand some informants believe that the victims of GBV were not taking any measures to stop the situation in which they find themselves. They accept of violence against men and do not want to raise the sensitive subject. Some men are worried about the implications of GBV on their families, especially their children if they found out that their fathers are abused by their mothers. As a result, they decide to keep quiet about the abuse. According to Steinmetz and Lucca (1988), men do not report GBV because they are perceived and are expected by society to be masculine and dominant in a sexual relationship.

*“She loves me too much, so she is jealous and always accuses me that other women want me. She always accuses me of things that I have never done, like having affairs and wasting my money on women”. [ID#2, Male]*

*“I can say that many of these guys who are victims of gender based violence are sissies your woman should listen to you and respect you. My mother respected my father so this is a new thing for us Black people. Still I believe this is not violence it is just a misunderstanding between two people who love each other”. [ID#10, Male]*

*“Men do not believe or accept that women are abusing us, it is not easy to talk about these issues in our communities because they involve families and children, so that is why people decide to keep quiet about these issues”. [ID#11, Male]*

#### **4.8.2 Types of GBV against men**

This study revealed that not only women can be the victims of GBV; men are also the victims at the hands of their intimate partners. Some of the informant believed that GBV against men can take many forms. Some highlighted financial abuse, which occurs because they are denied access to financial resources. Some even mentioned that they are denied access to their homes, and even denied access to their own children. This study also show respondents’ experience of abuse includes being blamed them for things that are not their fault, and also being stopped from seeing or talking to his friends or family. Other informants also reported that men experience emotional and psychological abuse perpetrated by their partners. Physical abuse may not be as common because men are often stronger than women, but this does not mean it does not happen. Sometimes men who are physically assaulted are caught by surprise and often do not retaliate. They hope that their partner will change but find that the abuse escalates over time and is not confined to physical abuse but also includes verbal abuse. The abuse may also occur in the presence of other people. However, it is quite common for abused men to find themselves socially isolated from their community. Their partners tend to monitor and control their movements so they end up spending more time at home. They find themselves increasingly alone without family or friends.

*”I thought she was joking when she said she will show me who I am. The day she hit me for the first time I thought she would say sorry but she did not. I did not want to retaliate because I was taught not to hit a woman. I love her and thought her behaviour will change but she is worse than before. She will even shout at me and call me names in front of my friends, she has no respect for me anymore but I am still around for the sake of the children”. [ID#1, Male]*

*“Because a woman cannot defeat you because of your physical strength she will always do things that will make you angry. On weekend she will take your wallet and give you little money to buy cigarettes and few drinks. Sometimes she will buy you those things and force you to stay indoors and drink all alone”. [ID#3, Male]*

*“I used to have a good life with my friends. Since my girlfriend started behaving in this manner, things have changed from bad to worse. I hardly have friends visiting me or me going out to see them and this has left me in everlasting misery”.* [ID#4, Male]

*“I have been through it all; it was financial abuse at the highest degree because now I am broke. Then it was followed by psychological abuse and I also thought that I was sexually abused while I was not aware, so I have been through that”.* [ID#6, Male]

Some men who experience abuse in their relationships stated that they suffer in silence because their friends refuse to believe them or take them seriously when they broach the subject. This study also suggests that some victims of GBV who try to get help find that they are mocked. This also discourages them from seeking assistance because they fear that they will not be taken seriously. Men are expected to take on the dominant role in the relationship and they are afraid of being seen as weak. Some men remain silent about the abuse because they are afraid of further conflict in the relationship. They are also worried about jeopardising their relationships and if they have children, they are worried about how it will impact their lives. Such remarks and attitudes suggests that the fight against this pandemic (GBV against men) is difficult, and this situation is likely to escalate.

*“I told my friends that my woman is abusing me and they told me to be a man about it and don’t let myself be controlled by the woman. When it’s Friday she will take my wallet and give me only R50 to spend and worse she doesn’t love my children that I got before marriage. That kills me and there’s nothing I can do about it”.* [ID#5, Male]

*“I thought she was in love with me but things changed. She started not approving of my family and it went on to my friends. Then I found myself listening to everything that she was telling me to do. I felt that it was the only way to keep peace in our family”.* [ID#7, Male]

*“I cannot call it abuse because it is different from what men do to women. This is just a misunderstanding between two people. We know that in relationships these things are happening now and then”.* [ID#13, Male]

*“Men are just complaining for nothing man; women need love and control so they must just love us and control us that is that. Women need love whatever they do it is just to draw attention”. [ID#20, Male]*

Some respondents did not believe that men are abused because the type of GBV is different. They point out that it is difficult for women to abuse men. They chastise men for raising the issue because they feel that a woman has the right to fight with her boyfriend or husband, specifically if she suspects that her lover is cheating on her. Some informants also believe that victims of GBV are not aware of the abuse, because they continue to remain in the relationship.

#### **4.8.3 Services for GBV against men**

In this study, it has been noted that there are no GBV services available for abused men in Clermont Township. Although some of the respondents in this study reported the availability of these services in their areas, they were not aware of the type of services on offer. Other informants mentioned that there was only one services centre available in Clermont but it catered only to abused women and children. Some informants also mentioned that they have never heard about a GBV service centre that caters to abused men anywhere in South Africa. Most informants in the study argue that in Clermont, there is no institution or service centre that deals with the male victims of GBV. Another informant in this study argues that even if there is domestic violence it has to be dealt with privately because there are no proper institutions to report the matter. Some feel that there is no need for these services as it is a private issue

*“No, not that I know of in Black communities, we do not have these services. Even if there are these services you cannot go there because at the end of the day everyone will know that you are having problems with your wife. So I will never use those services”. [ID#14, Male]*

*“No, there are no services for men because men cannot be abused by women. No, I do not believe that we need these services because a man can fight for himself. I feel that it will be waste of time and money to do that. All relationships have ups and down, why there should be these kinds of services?” [ID#15, Male]*

*“In Clermont the only service that is there is for women and children only, they provide services for them only. [ID#16, Male]*

Furthermore, respondents did not know or had never heard of anyone who has used GBV services in the area. Most of the informants were not aware of any GBV service available in their communities, even for women and children. Other informants also mentioned that these services are not advertised to the community of Clermont Township, which makes it difficult for people to access the information. There was general concern among informants that most of the GBV services are for women and children, and men in general are not catered to in these services. In case of GBV victims, they argue that the few services that are available to men are not advertised well, and if they are advertised, activities that are conducted in those services are not known. Another informant argues that the only service that assist men are HIV/AIDS centres. In such a situation most of the GBV victims do not access the services being offered in these areas. In view of these factors, GBV victims argue that there is a need to scale up these services to reach victims in the communities. One way of improving or increasing access to these services, one informant suggested, is that the government should extend these services to communities and also they should be made available at the local clinics. Heise et al. (1999) revealed similar findings in their study; they found that men have difficulty finding appropriate support, and that victims seeking support have to confront a number of negative perceptions and stereotypes before accessing assistance from people who are supposed to be assisting them. Lambert et al. (2003) also argue that other studies suggest that there is a lack of help available for men abused by their intimate partners.

*“I doubt that there are any services for abused men. I have never heard of them, but I know there are a lot of shelters for abused women and children. They even have toll free numbers to report their abuse, but for men, there is nothing” [ID#17, Male]*

*“There are no services available for abused men in Clermont. I know many people who are having difficulties in their relationships but I cannot refer them anywhere because there are no services. The only services that I know of are for women and children” [ID#19, Male]*

*“Yah, men are being abused but it’s not severe as that of what women and children go through. So to me I cannot call it abuse just two people who do not see eye to eye. When we*

*talk about abuse we talk about bruises, black eyes, stab wounds, and sexually abuse and no women can do those things to a man because men are stronger than women” [ID# 11, Male].*

*“There are no services for abused men in South Africa that I know of; services that are available are for abused women and children” [ID#10, Male]*

#### **4.8.4 Why do men stay in the relationships?**

The study found that men stay in abusive relationships for a number of reasons, ranging from being seen as failures, and also being unable to talk about their family problems. Informants also mentioned that victims stay in the abusive relationships to protect their families, and because they are also ashamed about what will their families, friends, and colleagues think when they leave their relationships. In another interview, an informant argues that people in generally believe that a man can be abused by his partner. Most informants reported that GBV victims decide to stay in the abusive relationships because they fear that if they leave the perpetrator with their children, then the perpetrator might also abuse their children. Other informants also reported that the societal belief that men should not hit back at women is contributing to violence against men in intimate relationships. Another informant also mentioned that for them, it is not easy to report GBV to anyone because nobody will believe him that his partner is abusive. Many people in the community continue to believe that abuse of men cannot happen. Some feel that it does not happen in their culture. Some men reported that the community is not aware of their sexual preferences and, as a result, it is impossible for them to come out and confess to being abused. They are worried about the implications of revealing their sexual orientation as well as the abuse. As a result, they have little option but to remain silent about the abuse.

*“No one will ever believe a man that he has been abused by his partner. It is a very painful moment or situation because you cannot share the pain with anyone even with your friends and family. They can call you names or a sissy that you cannot stand or control your wife. It is a difficult situation”. [ID#19, Male]*

*“In the Zulu culture a man should protect his family and his children. It is a White man’s phenomenon. In our communities these things are not happening but we know that men abuse*

*their women. Men are stronger and tough so it's not easy for a woman to abuse her partner". [ID#20, Male]*

*"As a young gay man still in the closet, it is not easy to report that my partner is abusing me because they only know him as my cousin. I cannot even tell my friends because they will hate him and spread my business all over, so I keep things to myself. There is no way that I can tell anyone about the abuse or what is going on in this house". [ID#8, Male]*

*"I am afraid that if I leave then I will never see my children again because my girlfriend always threatens me about my children. I am also worried that if I leave my children, this woman will abuse them as well. I am staying for my children in this relationship, nothing else". [ID#9, Male]*

#### **4.8.5 Why men do not report abuse?**

In the in-depth interviews, informants argue that people in general do not believe that men can be the victims of GBV. These informants believe that this has made it difficult to talk about GBV against men even to family because they will laugh at them and give them labels. For instance, one informant reported that it is better to keep silent about the abuse because it might result in the person becoming the subject of ridicule and mockery. Other informants made a point that they are not reporting these incidents because no one will believe or listen to them as the victims of GBV. In addition, there is a sense of shame and embarrassment associated with GBV against men. There are some informants who believe that reporting the abuse will cause more pain and suffering in the family. They also do not want to jeopardise their relationships as they still have a strong emotional attachment to their partner. However, there are some informants who are adamant that there is no chance that women can be the abusive in a relationship. In another interview, an informant argues that whenever a woman hits a man in public, people in close vicinity tend to blame the victim rather than the perpetrator. According to Fontes (1999) male socialisation has been constructed by society in a number of ways. Men are expected to be self sufficient, strong, and are expected to be protectors, especially of women and children, and as such should not need to be protected by others, if they are real men. Jealousy does play a huge role in the perpetration of GBV in intimate relationship. Men reported instances where they were beaten up because they were seen with another woman. This is associated with the perpetrator's fear of losing their

partners and lack of self-confidence. Some men remain in the relationship because they have the hope that their partners will change. They argue that their partners have not always abused. Men reported that their relationships were generally happy, but sometimes there were events that triggered a violent episode.

*“How can you tell your mother or even your friends that your girlfriend is taking your money? No way can you tell anyone about that because the next time they will fight her and you end up splitting with her. You cannot even tell your brother or your close friend about the situation”. [ID#8, Male]*

*“.....You know every time when I see my wife I love her everyday and she is a loving wife. But when she is angry she is somebody that I do not know, she will throw things at me and shout at me without no apparent reason. I am always blamed for the things I do not know or never done. I cannot leave now, may be if I stay longer she will change” [ID#10, Male]*

*“I was beaten by my ex-girlfriend. I had my fingers jammed in a door and I still suffer today, she tried to push me out of the house, thumped me many times in the face or stomach and even in the back of my neck. I stayed with her for four years hoping that one day she will change for the better and be a new person, and I was fooling myself. She is a lovely person and I still see her every now and then and we still talk socially when we get a chance but now she is with someone else now and I have moved on as well with my life. For men GBV is a sense of shame and embarrassment, in such an extent that they cannot tell anyone what has happened” [ID#6, Male]*

*“She was screaming and yelling at me in full view of the public and my children. She was waving her hands around right in front of my face but I kept quiet and did nothing, because I respect and love her” [ID#7, Male]*

In another interview, an informant argues that men who are beaten by their partners are not man enough, and he called them names. This informant further argues that a man should be the one who control his partners, not the other way around. Another informant argues that he does not believe that in this life time there is something like GBV against men, he only heard of violence against women and children. This informant further argues that men who are the

victims of GBV are sissies, and he will never be the victim of GBV because he is a man. Another reason for informants not to report GBV against them was the belief that they will be denied the right to see their children as a punishment for reporting the abuse. This study also revealed that there are number of social factors that contribute to the lack of awareness about male abuse by their intimate partners or their ex-partners. Some men are socialised to believe that they should take the abuse 'like a man' and not complain. Men do not report or complain about abuse because they know that there is little support if they tell other people that they were abused by their partners, and they fear that no one will ever take them seriously.

*"I have seen men who are denied the right to see their children; women do that often when they still love the fathers of their children or when they have a misunderstanding with their partners. It is a painful experience but I doubt that it will ever happen to me" [ID#13, Male]*

*"I do not believe that men can be the victims of gender based violence, where on earth can a man be overpowered by a woman. A woman will never raise her hand to me or even insult me. That day will be her last day in my life and in my house" [ID#16, Male]*

*"Men who are the victims of GBV are sissies, how on earth can you be beaten by a woman. Men were given power by God to control and rule over women. I do not believe in this phenomenon of GBV against men. A woman will never hit or do anything that can hurt me" [ID#18, Male]*

#### **4.8.6 HIV/AIDS information**

Research has shown that there is correlation between GBV and HIV/AIDS. Some respondents mentioned that there are people that they know who are HIV positive but their partners' deny them medication and food. Some respondents argue that trust is the best medicine in relationships. Some of the informants did not regard themselves to be at risk of contracting HIV/AIDS because of GBV. Some informants also argue that HIV/AIDS can be cured by Izangoma or Izinyanga. These informants further argue that HIV/AIDS is not new, it has been there for years and *Izangoma* or *Izinyanga* used to cure this disease. Some respondents still have the mentality that their partners will be the one who can infect them with the virus, because they are loyal to their partners. Most of the respondents did not know their HIV status or their partners and they are afraid to go and take the test. This study also reveals that men still do not believe that abused people are at risk of contracting HIV/AIDS.

This study also reveals that condom use was low among homosexual and bisexual men as compared to heterosexual men. Some informants want to use condom consistently in their relationships, but their partners complain about rash and other infections. A study conducted by Anderson (2006) states that GBV increases the risk of HIV indirectly, and those victims of GBV are more likely to be HIV positive. Half of the informants feel they have the power to negotiate condom use in their relationship, while the others they have no power to negotiate condom use in their relationship.

*“I have never thought that I can be the one of the victims of HIV/AIDS because I really trust my partner so much”. [ID#15, Male]*

*“As we speak now, I do not know my HIV status and I am afraid to do the test”. [ID# 13, Male]*

*“With my partner we have never discussed condom use or HIV/AIDS in our relationship. I would love to discuss this topic but my partner will think that I am cheating with other girls”. [ID#10, Male]*

*“For us not to use condom with my partner it is because we are trying to have a baby. We have never done HIV/AIDS test with my current partner. I have done HIV test before in my previous relationship and I do not know the status of my current partner”. [ID#3, Male]*

#### **4.9 Conclusion**

This chapter outlines attitudes towards gender based violence against men in Clermont Township. It is clear that GBV against men is a serious societal issue that need to be fully addressed by doing away with societal perceptions and gender biased legislation. This chapter also concludes that more attention should be given to gender based violence experienced by men. There is a need for more services that address GBV against men. Social and cultural beliefs that perpetuate gender based violence against men should also be dealt with in our society, and the government should also have policies that punish the perpetrators of GBV. It has further been suggested that many men and women suffer in silence from emotional abuse. Unfortunately, emotional abuse is often minimised or overlooked even by the person being abused and also the abuser.

This study has also shown that men who are abused by women often suffer alone because they cannot share their feelings, stories or experiences with their friends, colleagues or even

their own families. In addition to overcoming the shame associated with GBV against men, there is a need to challenge gender stereotypes, which portray men as dominant and women as subservient. The study found that men sometimes decide to remain silent in order to maintain their relationships. They do not retaliate because they want to avoid confrontation and protect their families. There is an increasing need to understand the dynamics of GBV against men in order to find solutions to the escalating problem, which is increasingly becoming the norm. Hence, more attention should be given to men who are victims of GBV, and more research should be conducted in this area. There should also be awareness campaigns and road shows to modify the strongly held social and cultural belief that men cannot be victims of GBV. The government should also pass domestic violence legislation that protects both men and women. A number of recommendations were raised in the survey and in-depth interviews for addressing GBV against men. It is clear from the study that any intervention for addressing the issue of GBV against men needs to start within families and communities, in order to encourage male victims to speak out about their abuse.

## CHAPTER FIVE

### DISCUSSION, RECOMMENDATIONS AND CONCLUSION

#### 5.1 Introduction

This study aimed to examine gender based violence against men in Clermont Township. The data for this study came from a survey and in-depth interviews with men. Several studies have been done on GBV in an attempt to find the main causes and consequences of GBV but most of them have covered abuse against women and children and also intimate partner violence against women. Most of the studies that have been conducted on men abuse have focused on men's and boys' sexual abuse in times of war, or young boys being sexually abused by their relatives (e.g. fathers, uncles, male family friends, or female family friends or church members). Very little research has been done on GBV against men at the hands of their intimate partners. This study was interested in exploring GBV against men at the hands of their intimate partners in Clermont Township. The aim of this study was to document the experiences of men of gender based violence and its impact on their lives. Nevertheless, like any other research, this study also has its limitations.

The findings of this study suggest that there are a growing number of men in society that are being abused by their intimate partners or who have been the silent victims of GBV at the hands of their intimate partners. There is also another challenge with regards to the huge number of men who are still in denial that men can be the victims of gender based violence at the hands of their intimate partners. These men believe that men will never be the victims of GBV. This study also found that even the men who experience some form of GBV do not regard themselves as victims. They tend to think that the abuse is a passing phase and is not a form of abuse. Most of the informants believed that GBV is only applicable to women and children, so it follows that it is not abuse because men do not suffer physical injuries or sustain serious injuries. Though many regards it as true that men can inflict more harm on women than women can on men, the effect on men is sometimes long-term, leaving internal scars that are not easily healed. However, the sample size of the study was not big enough to represent the entire population of Clermont Township, therefore the conclusions of the study may not be generalised to the entire population. Nevertheless, it is vital to note that the

findings of the study are mostly consistent with the existing literature on gender based violence against men.

The findings of this study concerning the question whether or not men perceive that GBV affects men is consistent with the literature, and the evidence shows that some of the respondents still believe that men can never be victims of GBV at the hands of their intimate partners. The findings of this study suggest that the majority of the respondent's perceive GBV as affecting men in our society. However, a few respondents perceived that GBV affects women and children only. They argue men are in control of the relationship, not women, and they completely disagreed that GBV is affecting men on a larger scale. The respondents in this study also indicated that for victims of GBV it is not easy to report the incident or tell anyone about it because most people will never believe them. The findings of this study also suggests that GBV against men is in fact a serious social issue that requires serious attention before it is escalates and gets out of hand, and that does not mean ignoring violence against women and children. Statistics indicate that GBV against men is growing in our societies. The findings of this study are consistent with evidence that some men do not perceive GBV as affecting men. However, in this study some informants believe that a woman has a right to fight with her partner when she suspects that her lover is cheating on her or he is not being sufficiently responsible.

The studies on GBV against men suggest that society assumes that men are never victims of GBV and that violence is associated with women. Steinmetz and Lucca (1988) argue that when people talk about GBV, in their minds they have image of a husband or a boyfriend as a perpetrator, not the image of a woman. This notion that men are only perpetrators of GBV makes it difficult for the public to accept that GBV against men is a serious problem. King (2009) argues that GBV is genderless, meaning that men and women can be equal victims of gender based violence regardless of their sex, and it is more about positioning in a relationship where one party maintains and establishes an unequal distribution of power within the relationship. In support of this, Pearson (1997) makes the point that accepting the reality that women have the same capacity for violence as their male counterparts would discard the long held perception and stereotype that men alone are perpetrators. Pearson (1997) (not in the ref) further argues that not addressing GBV against men would have

serious consequences in society as a whole, not just to the victims of GBV alone. According to Straus (1980) society assumes that women are the only victims of GBV and men are almost never victims of GBV and this perception has been minimised, ignored, and justified for long a time. According to Steinmetz and Lucca (1988), men do not report the GBV because men perceive that society expect them to be macho and dominant in a relationship.

The findings of this study concerning the forms of GBV male abuse are consistent with the existing literature that men suffer injuries at the hands of their intimate partners. The findings of this study suggest that the men were denied access to their children by their intimate partners, and they were constantly put-down, insulted, and humiliated by their intimate partners. This study also suggests that some respondents have been denied food, medication, or a place to sleep, while some respondents have been denied access to their house by their partners. Furthermore some respondents have been denied financial control and autonomy by their partners. Some respondents have had things thrown at them and some have had to stop talking to or seeing their friends or family by instruction from their partners. This study further suggests that some respondents have been restricted from interacting with the outside world, and others have even been slapped, bitten, kicked and punched by their partners. A large number of men were denied access to their children, and that is significantly different from the physical abuse that women experience.

The respondents also indicated that GBV against men takes many forms, including financial abuse where women controlled them financially. Some respondents even mentioned that they were not allowed to enter their homes. Some men also experienced physical violence, including being blamed for things that were not their fault, and being stopped from seeing or talking to their friends or family. Men reported that they also experienced emotional and psychological abuse perpetrated by their partners. They pointed out that women have scars to show in their bodies but men have nothing to show.

This study is also consistent with the existing literature that abused men are not aware that they are being abused by their partners or they do not perceive it as abuse. This study suggests that the majority of the respondents believe that men in abusive relationships are not aware that they are being abused. The respondents also indicated that they were not taking measures to stop the abuse and protect themselves. With the perception that most men have

about GBV against men, our communities do not realise that there are men that are crying out for help. In this study, the respondents who were victims of GBV described their experiences of humiliation, shame, and embarrassment. Some also experienced fear of their partners. In support of this study's findings, Lambert et al. (2003) argues that as far as intimate violence is concerned, most of the emphasis and focus by societies and academics is on violence against women, studying the impact on the female victims and help that is available to help them in retreating from the violent environment. Lambert et al. (2003) further contend that there is little discussion or research on male victims of female batterers, and also intimate violence between gay and lesbian couples. A study conducted in Malawi by Pelsler et al. (2005) showed that men were reluctant to respond to the question of gender based violence in one-on-one interviews, but were openly talking about other issues in general terms in focus group discussions.

The study findings are consistent with existing literature that abused men are not aware of GBV services available, or if there are any services available for GBV victims in their communities. Furthermore, it is consistent with the existing evidence that men who are victims of GBV do not receive much support, and also that GBV services are specifically designed for abused women and children. Furthermore, in this study, was conducted in Clermont, the majority of the respondents were not aware of any GBV services available in the area, let alone services for men. Very few respondents indicated awareness of GBV services but reported that it caters only for abused women and children. Moreover, they further indicated that they did not know what kind of services are offered at these service centres and were not aware of anyone who had used this service centre. Fontes (1999) argues that GBV shelters were designed for and recognise abused against women, and that their programmes were designed to help women and at a later stage receive assistance for their children. Fontes (1999) argue that these facts clearly show that there is no support available for male victims of GBV. Fontes (1999) further suggest that male GBV victims are discouraged from contacting domestic violence crisis lines because of the commonly held belief that these services are only for women. This is because many support groups that are available and recognised in the area of GBV are mostly for women and there are hardly any support groups for men.

The study showed that many respondents stay in abusive relationships for a number of reasons. Some were concerned about being seen as failures by the community. Many remain in the relationship because they are afraid of the consequences for their children. They are also worried that they may be denied access to their children. Others reported that they were not able to talk about their family problems. Informants also mentioned that victims stay in the abusive relationships to protect their families, and they are also ashamed of what their families, friends, and colleagues will think when they leave their relationships. In the interviews, some men expressed the worry that people in general do not believe that a normal man can be victimised by his partner. In support of these findings, Katy (2009) indicated that the media also plays an enormous role in the underreporting of male abuse because the media often portrays the popular image of the abused person by his partner as a figure of fun, portraying him as weak, pathetic, stupid, and wanting to have this stereotype attached to him. Pagelow (1984) argues that men and women refuse to leave their abusive relationships for the same reasons, because they are psychologically dependent on their partners and excuse the abuse as being a result of certain circumstances, such as alcohol intoxication. Ristock (2002) claims that in cases where both partners are using drugs or alcohol, when the abusive partner becomes physically violent and then blames their actions on the substances rather than taking responsibility for their behaviour, it makes it difficult for victims to report the violence to the police services. Steinmetz (1978) revealed that men, who are committed to a marriage, may refuse to leave an abusive relationship because of their children, because abuse of men is not recognised, and because it is not easy for abused men to use this as defence in court to obtain custody of their children.

The findings of this study are consistent with the existing literature that men do not report the abuse they suffer at the hands of their intimate partners. The findings of this study suggest that the majority of the heterosexual respondents did not report the incidents because they believe that men should be able to handle their women. Some respondents did not report the incidents because they believe that men are supposed to protect their women; some believe men are not supposed to hit back when a woman is hitting them. This study further suggests that some respondents believe that men do not get pushed around by women, and some believe that no one will believe them or they are afraid to 'out' themselves. Lori et al. (1999) argue that men will prefer to take the beating from their partners rather than hitting back to defend themselves and risk harming their attackers, because they are aware that they then risk

being accused of being an abuser themselves. Fontes (1999) further adds that men do not seek help from victims' institutions because three forces at these institutions are against male victims getting the help or attention they need and deserve namely, men are taught to be men and protect their partners and families (patriarchy), gender feminism, and gender politics. In support of the above, Straus (2005) argues that, even if men are the victims of GBV, they unlikely to disclose family violence, since the police adhere to gender role expectations. According to Katy (2009), anyone who has been the victim of any type of abuse will understand that it is not easy to report the abuse. Men in homosexual or bisexual relationships did not report the incidents because they may not have openly revealed their sexual orientation and were afraid of coming out.

Based on the findings of this study alone, it is suggested that men might have become used to the situation of being abused, but they do not regard themselves as GBV victims. The findings of this study clearly show that men only regard physical abuse as actual abuse. Most men reported that when they are denied custody of their children, it is because their partners want to get back at them, not because they abuse them. The findings of this study also show that most of the respondents knew someone who was the victim of gender based violence, but still did not perceive GBV as affecting men. Most of the victims of GBV viewed the abuse as a passing phase, and they blamed themselves for the situation. However, many of the respondents were very reluctant to talk about their experiences of GBV because they feared that no one would believe them and they would be ridiculed by their communities (especially their families and friends). Most of the respondents in this study perceived that GBV only affects women and children, not men

Given these perceptions, it is imperative that stereotyped gender roles in society be challenged. There is a need to acknowledge that men can and are being abused by their intimate sexual partners. Moreover, there is a need for more support for male victims of GBV. There should be more help lines, offices that deal specifically with abused men, and shelters that specifically deal with the abuse of men, because men currently have nowhere to turn for help. In order to encourage the male victims of GBV to break the silence and be visible, the government and other related authorities should take a firm stand on this issue. The government and related authorities or institutions should officially recognise that men are

also victims of GBV and suffer from intimate violence at the hands of their partners, and the government should help the victims with support, shelter and funding. As our constitution states that all people are equal, there should be equality between men and women victims in terms of equal support. If the government could take a firm stand against men abuse, this would encourage a change in societal perceptions. Abused men should also come forward and put pressure on government and other related authorities and institutions to acknowledge and address this issue. Future research is also required to further explore the subject of gender based violence against men because there is very little research available.

## **5.2 Recommendations**

The importance of research in understanding the factors directly related to GBV against men is increasing being recognized, because this subject has been ignored for a very long time, especially in South Africa. It is of importance to note that research is designed to solve existing problems, and also serves as a basis for debate. It is, therefore important to know how research influences decision making and problem solving in particular. It is therefore, recommended that more research be conducted in South Africa on GBV against men, and also that the legislation on GBV be revised to cater to male victims. The training of health workers and other institutions that deal with GBV is also vital if we want to fight this growing problem in our society. Furthermore, if the problem of GBV against men is to be addressed, this needs to be supported by evidence and thus issues need to be documented. I also recommend that there be more investigation into GBV against men in different types of sexual relationships in KwaZulu–Natal. This can be critical, as this may help health care providers and also safety and security systems to respond effectively. More investigations or research on GBV against men will also increase awareness of the patterns of GBV against men. Further ongoing research and more funding of GBV against men will give a clearer picture and more accurate statistics of what is happening.

There is a need for greater awareness about GBV against men. Communities should also embark on door-to-door campaigning about GBV against men, so that there would be greater awareness of the extent of the problem. There is a need for awareness campaigns to change the mindset of communities, making them realize that men are also victims of GBV. The country should have specific legislation dealing with family, domestic, or sexual violence,

and these should include abuse against men as well. Legal aid and other services should be provided to male victims of GBV. Ongoing training should also be provided to the police to sensitise them about the issue. The medical and legal system should also improve forensic evidence collection and preservation to accommodate male victims of GBV. The health system should develop policies and protocol for treatment of male victims of GBV. The health system should ensure privacy and confidentiality for men. They should strengthen referral networks in order to make services more accessible. Health systems should provide educational material on GBV against men creating greater awareness of abused men. The health system should provide monitoring and evaluation of GBV services for men, as well as emergency supplies for men victims of GBV.

### **5.3 Conclusion**

This study was conducted in Clermont with men between the ages of 20 and 50 years. The study found that men are suffering in silence, and GBV against men in Clermont is real. It has also been shown that many men are still in denial that they are the victims GBV, and most men still perceive that GBV does not affecting them. This study also showed that men only regard physical injuries as abuse, and that most of the abused men believe that abuse is a passing phase. Men who are abused are treated differently by their communities and different communities react differently to the abuse. We should also bear in mind that men are less likely to report the abuse because of the culture of silence that surrounds this issue. Due to the negative connotations attached to these issues, abused men have resorted to taking the abuse without complaining, or denying that they are being abused. We must also understand that homosexuality is still a taboo topic in many communities, so it will not be easy for homosexual and bisexual men to come forward and report the abuse. Gender based violence against men is in fact a serious social and economic issue that needs to be addressed by the public and this can be done by overcoming public stereotypes about gender differences and roles in our communities, by conducting extensive and accurate studies and also having proper legislation in place. For our society to fight this pandemic, we need to adopt a gender-neutral approach, and this is a great challenge to our government and society at large. The international literature give us necessary statistical data to provide an accurate picture of this occurrence in South Africa constitutes an obstacle to a fuller understanding of the issues associated with gender based violence against men. The media has played a huge role in

increasing attention to GBV against men in different communities, but more needs to be done to fight this growing pandemic.

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## APPENDIX

### *Gender Based Violence On Men in Clermont Township Questionnaire*

I am conducting a research study on gender based violence against men (heterosexual, homosexual and bisexual) in Clermont within the EThekweni Municipality area. I would be grateful if you could spend some time assisting me to fill this questionnaire as accurate as possible. I must stress that the questionnaire is completely confidential so nobody you know will ever see the answers you give. All the information you provide will go towards helping other people who are the victims of gender based violence. It is very important that you answer honestly. Please I would request you to respond to all the questions.

#### **SECTION 1: Demographics of the respondent**

This section asks about the demographics of the respondent

- 1) What is your age? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
20 - 29	1	
30 – 39	2	
40 -50	3	

- 2) Are you? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Married	1	
Living together with your partner	2	
Neither	3	

3) If neither married or cohabiting what is your marital status? [Please tick one]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Never married	4	
Engaged	5	
Widowed	6	
Divorced	7	
Separated	8	

4) Do you have any living children? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Yes	1	
no	2	

5) Highest education level passed? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
No education	1	
Primary level education	2	
Secondary education level	3	
High level education	4	
Degree level	5	
Post graduate level	6	
Other	7	

6) Which of these best describes your working situation? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Working Full-Time	1	
Working Part-Time	2	
Not Employed	3	

7) Are you currently in a relationship?

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Yes	1	
no	2	

8) How long had you been in this relationship? [Tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Length o f the relationship		
Period less than six months	1	
Period of six months	2	
1 year into the relationship	3	
2 years into the relationship	4	
3 years into the relationship	5	
4 years into the relationship	6	
5 years into the relationship	7	
6 to 10 years into the relationship	9	
More than 10 years into the relationship	10	
Don't remember	11	

## SECTION 2: Information about gender based violence knowledge

This section asks about gender based violence information. Please try to think and answer as honest as you can. I am going to begin asking you some questions on gender based violence behaviour in relationship. Remember there are no wrong and right answers, just what you think.

2.1 Did a partner ever? [Please tick what happened to you]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Broken anything in the house out of anger or rage	1	
Throw anything in the room when she/he is angry	2	
Threatened your life or made verbal threats or “out” you to other people	3	
Constantly insult you or frequently yell at you	4	
Made you afraid of her/him or make you fear of her / him hurting you	5	
Constantly put you down, insult and humiliate you	6	
Blame you for the things that are not your fault	7	
Deny you financial control or autonomy	8	
Stop you from seeing or talking to your friends or your family	9	
Restrict your access to the outside world/groups or organisations	10	
Exploit you in a sexual way i.e. harassment , unsolicited and inappropriate sexual comments to you	11	
Force (physical, by threats or force) you to participate in a sexual act you did not want to participate in it	12	
Beaten or slapped you	13	
Deliberately embarrass you in front of other people	14	
Threaten to harm himself/herself if you leave	12	

2.2) When was the last time a partner [did this, refer to 2.1]? [Tick the first box that applies]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>	<i>Response</i>	<i>Codes</i>	<i>Answer</i>
The last week	1		The last 2 years	6	
The last month	2		The last 3 years	7	
The last 3 months	3		The last 4 years	8	
The last 6 months	4		The last 5 years	9	
The last year	5		More than 6 years	10	

2.3) How did you do to deal with the abuse? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
I refuse to admit – denial	1	
Accepting that my partner will not or cannot stop the violent behaviour	2	
I believe that if I stay long enough, I will be able to rescue the situation	3	
I went to my parent 's home just to relax	4	
I decide to file for a divorce	5	
Other (specify)	6	

2.4) How is your relationship with your partner? [Please tick one box only] (The interviewer should read this out loud)

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
I often feel totally alone	1	
I am afraid of my partner	2	
I sometimes feel numb inside	3	
I am confused about the differences in the way my partner view our relationship and the way I see it	4	
I try and try to please my partner only to find that my efforts still do not please her/him	5	
Other (specify)	6	

### SECTION 3: Reporting the gender based violence

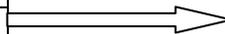
This section asks whether the victim of gender based violence have reported the accidents to the relevant institution.

3.1) Did you report the incident to the police? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Yes	1	
No	2	

If yes, go to 3.3 & 3. 4

If no, go 3.5



3.2) How many times did you report? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Once time	1	
Twice times	2	
Three times	3	
More than four times	4	

3.3) How did you report the incident?

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
I phoned the police station	1	
I visited the police station	2	

3.4) If yes, did you get the help you require? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Yes	1	
No	2	

3.5) If no, why you did not report the incident to the police? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Men are supposed to protect women	1	
Men don't get pushed by women	2	
Men are not supposed to hit back even when a woman is hitting them	3	
Men should be able to handle their women	4	
Other(specify)	5	

3.6) I would like to read a list of people whom you might have told, or sought help from. Perhaps you could tell me whether or not you told any of these people about your partner's behaviour towards you.

<i>Response</i>	<i>Codes</i>	<i>Answer</i>	<i>Codes</i>	<i>Answer</i>
<i>Did you tell.....?</i>	Yes		No	
A friend	1		1	
A family member	2		2	
A work colleague	3		3	
A nurse	4		4	
A General Practitioner	5		5	
A Doctor Hospital	6		6	

3.7) Why you did not report the incident to your friends/colleagues? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Believe that things that will get better when my partner stops drinking	1	
Convinced that my partner will get help and can change	2	
Believe that this is the way relationships are	3	
Believe that it is the only isolated accident and that will not happened again	4	
Other (specify)	5	

3.8) Why did you not report the incident to your family members? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
My partner is loving and lovable when not being abusive	1	
I am Committed to the relationship	2	
I have invested in the relationship “for better or worse”	3	
I believe that it is up to my partner (him/her) to make the relationship work	4	
Other (specify)	5	

3.9) Did you sustain any injuries during the incident? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Yes	1	
No	2	

↓

→ If yes, go to 3.20

→ If no, go to section 4

3.10) What kind of injuries did you sustain? [Please tick those injuries you sustained]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Broken rib	1	
Blue eye	2	
Broken teeth	3	
Injuries to the sensory organ	4	
Broken arm/s	5	
Broken leg/s	6	
Other	7	

3.11) Where did you go for help? [Please tick the one that you did]

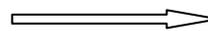
<i>Response</i>	<i>Codes</i>	<i>Answer</i>
I did not go anywhere	1	
I went to the hospital	2	
I went to my friends' place	3	
I went to my parents/ or family members place	4	
I went to my colleagues place	5	
Other	6	

#### **SECTION 4: Knowing someone who is the victim of gender based violence**

This section asks the respondent that does he know anyone who is the victim of gender based violence.

4.1) Do you know of anyone (man) who has been a victim of GBV or who is a victim of GBV? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Yes	1	
No	2	

 If yes, go to 4.2

4.2) What is your relationship to him? [Please tick one box]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
My brother	1	
My uncle	2	
My friend	3	
My cousin	4	
My colleague	5	
My church brother	6	
Other	7	

4.3) What is his sexual preference? [Please tick one box]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Heterosexual	1	
Homosexual	2	
Bisexual	3	
I don't know	4	

4.4) How did you see that He was being abused? [I would like to begin reading a list of things you may have experienced. For each one, perhaps you could tell me whether a partner ever did it]

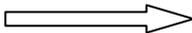
<i>Response</i>	<i>Codes</i>	<i>Answer</i>
She / He was yelling at him	1	
She/ He slapping him	2	
She/ He constantly insulted him	3	
She/ He threatened your life or made verbal treats	4	
She/ He throw anything in the room when they angry	5	
She/H e broken anything in the house out of anger or rage	6	
She/ He verbal abuse him	7	
She/ He financial abuse him	8	
Other (specify)	9	

4.5) What did you do to help the victim? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Spoke to him to go for counselling	1	
Told him to speak to his wife	2	
Laugh at him	3	
Advice him to fight for himself	4	
Told him to report the matter to the police	5	
Encourage him to be the men about it	6	
Told him to tell his family	7	
Gossip about him	8	
Told him to leave his wife/ his boyfriend	9	
Other (specific)	10	

4.6) Did you report the abuse of your friend or relative or to the relevant institution?  
[Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Yes	1	
No	2	

If yes, go to 4.07

If no, go to 4.09

4.7) Why you did not report the abuse to the relevant institution? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answers</i>
He asked me not to tell anyone	1	
Because he was ashamed	2	
People were not going to believe me	3	
I did not know where to report the matter	4	
He didn't want to lose him/her	5	
He is financial dependent to the partner	6	
He didn't want to lose his children	7	
He still love his wife	8	
His family was going to be embarrassed	9	
Emotional and psychological depending to the partner	10	
Police were going to mock him	11	
Because he feels powerless and fearful	12	
He didn't want to be out of the closet	13	
Other (specify)	14	

4.8) Where did you report the incident? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answers</i>
To his family	1	
To the police	2	
To the church	3	
To the shelter for abused women	4	
To the abuse women hotline (call centre)	5	
Other (Specify)	6	

4.9) How was the attitude of the family, police and consultant at call centre, priest and the assistant at the shelter for the abused women when you reported the accident? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answers</i>
They were shocked	1	
They convinced me to tell him to drop the charges and go back home	2	
They laugh at me and do not believe me	3	
They were very homophobic and were very angry	4	
They told me to go and come back with him	5	
Other (specify)	6	

## **SECTION 5: Knowledge about gender based violence**

This section asks about availability of institutions and services in Clermont Township

5.1) Do you perceive GBV as affecting men? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answers</i>
Yes	1	
No	2	

5.2) What form does male abuse take? [Please tick the ones you know of]

<i>Response</i>	<i>Codes</i>	<i>Answers</i>
Being constantly put-down and insulted and humiliated	1	
Being stopped from seeing or talking to his friends & family	2	
Being restricted access to the outside world/groups or organisations	3	
Being denied financial control / autonomy	4	
Having things thrown at him	5	
Being denied food, medication, sleep	6	

Having weapons used at him	7	
Being slapped, bitten, kicked, punched	8	
Denied access his house	9	
Denied access to see his children	10	

5.3) Do you think abused men are (heterosexual, homosexual and bisexual) aware that they are being abused, using your own view? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answers</i>
Yes	1	
No	2	
I am not sure	3	

5.4) Is the following question true or false: In a suspected case of intimate partner violence, it is advisable to talk with both the partners together about the violence in their relationship. [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answers</i>
True	1	
False	2	
Don't know	3	

5.5) Which of the statements are true: [Please circle one box only]

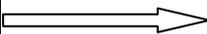
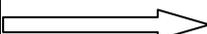
<i>Response</i>	<i>Codes</i>	<i>Answers</i>
1. Often a man stays in an abusive relationship because of depression, social isolation or lack of family support.	True	1
	False	2
	Don't Know	3
2. Many cases of intimate partner violence remain unreported because of shame to keep the family	True	1
	False	2
	Don't Know	3

**SECTION 6: Knowledge about gender based violence institutions and services offered in Clermont Township**

This section asks about availability of institutions and services in Clermont Township

6.1) Are you aware of any institution in your area that offers GBV services? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answers</i>
Yes	1	
No	2	

 If yes, go to 6.2  
 Skip to section 7

6.2) Is the institution for? [Tick the appropriate boxes only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Women & Children	1	
Men	2	
For all	3	

6.3) Are you aware of GBV services offered by these institutions? [Please tick one box only]

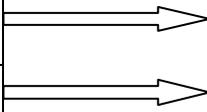
<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Yes	1	
No	2	

6.4) Are these institutions well advertised? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Yes	1	
No	2	

6.5) Do you know anyone who have used these services? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Yes	1	
No	2	



6.6) If yes did they get the services they required? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Yes	1	
No	2	

## **SECTION 7: HIV/ AIDS information**

This section asks about HIV/AIDS information and condom use in relationships. This section is only for the victims of Gender Based Violence.

7.1) As a victim of GBV, do you feel at risk of HIV/AIDS? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Yes	1	
No	2	

7.2) Do you have power in your relationship to negotiate safe sex? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Yes	1	
No	2	

7.3) With you partner did you ever discuss using a condom? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Yes	1	
No	2	

7.4) How often do use condoms with your partner? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Always	1	
Occasionally	2	
Never	3	

7.5) The last time you had sexual intercourse, did you use condoms? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Yes	1	
No	2	

7.6) Which of the following best describes your sexual orientation? [Please tick one box only]

<i>Response</i>	<i>Codes</i>	<i>Answer</i>
Heterosexual	1	
Homosexual	2	
Bisexual	3	
Trans -gendered	4	

Thank you for your participation.