

GREATER MANCHESTER'S PLAN FOR TACKLING GENDER-BASED VIOLENCE AGAINST MEN AND BOYS



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Introduction

In 2010, the Home Office launched its *Call to End Violence Against Women and Girls* (VAWG) with an ambitious strategy to tackle domestic abuse, sexual violence, so called ‘honour’ based violence and forced marriage (HM Government, 2010). In 2021, the Government refreshed this VAWG strategy, explaining that while it ‘focuses on women and girls, there is much more we all can do to support men and boys across a number of areas, including their safety’ (Home Office, 2021). In 2024, official responses to male victims of these same crimes remained tokenistic and confusing at best. Men who are victims and survivors of gender-based violence routinely have their experiences invalidated in government policy that treats them as an inconvenience within the Violence Against Women and Girls framework.

This sense of inconvenience was self-evident in the Home Office *Position Statement on Male Victims of Crimes Considered in the Cross-Government Strategy on Ending Violence Against Women and Girls* (VAWG) (Home Office, 2019) and its successor, *Supporting Male Victims*, which proclaimed that the VAWG acronym ‘should not negate the experiences of, or provisions for, male victims of these crimes’. (HM Government, 2022: 1). While professional practitioners and decision makers within criminal justice settings are now routinely reminded not to overlook male victims, in practice their actions often fall short of this standard. In 2023, the Domestic Abuse Commissioner¹ called for ‘coordinated and visible signposting for men’s support services across targeted agencies as well as ‘further research... into the specific services that male survivors want and need’. And yet, the National Police Chiefs’ Council (NPCC) 2024-2027 *Framework for Delivery* on rape and sexual assault, spoke only of the victimisation of women and girls (College of Policing, 2024). In short, the term, “*violence against women and girls’ is routinely used in criminal justice policy to cover crimes such as rape, sexual offences, domestic abuse, stalking, ‘honour’ based abuse, misgendering male victims before reincluding men and boys as an afterthought.*”

¹ <https://domesticabusecommissioner.uk/blogs/our-support-for-male-victims/>

In the absence of a coherent national strategy that tackles gender-based violence against men and boys, Greater Manchester is taking a lead in launching its own. The Greater Manchester Gender-Based Violence Strategy 2021-2031 has a core focus on responding to the detrimental impacts of the many forms of violence against women and girls and speaks squarely to the need to change the behaviours of men who are responsible for perpetrating the bulk of that violence (GMCA, 2021). It also promised an approach that would be 'more inclusive' - to recognise 'that anyone can become a victim of gender-based violence' - and to deliver a plan to address the needs of male victims and survivors.

This document delivers on that commitment. Greater Manchester's leaders are committed to ensuring that all residents who have experienced sexual violence and domestic abuse have equitable opportunity to access support and want to do everything to keep people safe.

In January 2020, 'Britain's most prolific rapist' Reynard Sinaga was sentenced to a minimum of 30 years for committing 136 rapes against 48 men, with Greater Manchester Police holding evidence that over a 30-month period Sinaga raped over 200 men – the majority of whom identified as 'straight'. The case shone a spotlight on the considerable barriers men face in reporting experiences of victimisation, alongside how problematic the media reporting of the sexual abuse of men still is. This was also evident in reporting of the case of schoolteacher Rebecca Joynes, whose sexual abuse of two male pupils was depicted as 'having sex' at parties. Such misreporting impacts on the willingness of boys and men who are victims of gender-based violence to report it and seek support. It is critical that we learn from these cases and take steps to redress the barriers to seeking support that enable offenders to committed repeat abuses with impunity.

We know that there are many barriers to reporting and seeking support faced by victims of gender-based violence. These include the fear of not being believed, the fear of estrangement and social ostracism, lack of awareness of the support available, the continuing threat posed by perpetrators, and the inaccessibility of some service providers to different groups of service users. Expectations about masculinity - or what men should 'be able to handle' - and shame about appearing vulnerable can be obstacles to seeking support for men and boys who are victims; as is the fear of homophobic reactions from friends, colleagues, family, and

professionals; and the risk of being outed for those who are gay, bisexual, trans or gender queer. Like many female victims, some male victims will also be concerned about the consequences of disclosure, for example, where they share a tenancy with an abuser, are dependent on that person's income, or, where child contact arrangements might be challenged because of revelations about abuse: especially if counter accusations are made. It is important to recognise the complex nature of the power dynamics that infuse abusive relationships. These diminish the capacity of many victims to seek safety. The priority for service providers must always be on supporting victims, whatever their circumstances, and doing whatever is possible to recognise their specific needs.

We are fortunate to have some well-established and dedicated services for male victims and survivors in the city-region. The first ever Sexual Assault Referral Centre in the UK - St Mary's SARC - was established here in Greater Manchester. Every year, 10% of those that access the forensic medical examination and support services at St Mary's SARC are male. Likewise, the largest male survivor organisation in the UK, We Are Survivors, annually supports over 2,400 male survivors in their healing from sexual abuse and rape. We are fortunate also to have dedicated refuge provision for men in Greater Manchester. But we must do more. We know our service provision specifically for male victims of domestic abuse can appear to the public to be more locally based than centrally coordinated. Our provision for victims of 'honour' based abuse is still very much evolving and relies heavily on statutory service providers learning from a small number of organisations that provide specialist training for professionals and national helpline support to members of the public. We are committed to rectifying this.

It is critical that we further develop our provision for male victims of gender-based violence so that it delivers for all men and boys in the city-region. While there are key advantages of being pioneers in serving male victims, we should not underestimate the challenges professionals working in this arena face. Core among these challenges is the tendency for male *perpetrators* of gender-based violence to adopt 'victim narratives' and to use these to pursue forms of legal systems abuse in the criminal family courts. There are also additional challenges in working with men and boys who have suffered domestic abuse and/or child sexual abuse who later go on to *offend in response to unresolved trauma* in later life, as well as complexities in

dealing with adult male victims of domestic abuse who have *physically retaliated* against partners or who are in intimate relationships *where violence is routinely bi-directional*. If we wish to reduce prevalence rates of gender-based violence, interrupt cycles of violence, and prevent fatalities, it is critical that we do not shy away from these challenges or withhold professional support from those whose experiences transcend victim-offender binaries.

This plan extends the commitments made in the 2021 Greater Manchester Gender-Based Violence strategy, by committing to strengthening our provision for men and boys across three key areas.

- Domestic violence and abuse, including familial abuse.
- Rape, sexual assault and sexual abuse, including both current and non-current forms of childhood sexual abuse and child sexual exploitation.
- So called 'honour' based abuse and violence, including forced marriage.

The core aims of this plan are to:

- Reduce the number of men and boys who are exposed to gender-based violence annually.
- Encourage more boys and men who have suffered gender-based violence to come forward to receive help.
- Monitor the impact of our actions on the prevalence rates of domestic abuse, sexual violence and 'honour' based violence against boys and men in the city-region.
- Enable professional service providers to better recognise the signs of domestic, sexual, and 'honour' based abuse with respect to male victims.
- Ensure all agencies across Greater Manchester work closely together to deliver consistently high quality and accessible services to men and boys who are at risk of gender-based violence and/or dealing with its aftermath.

This plan is inclusive all those who identify as boys or men, irrespective of the sex assigned to them at birth. It seeks to deliver a male survivor-centred, trauma-informed response to gender-based violence perpetrated against boys and men.

Critically, it commits to a programme of service improvements that are responsive to the needs of male victims and which recognises that redressing the gender-based harms suffered by men and boys is both what these victims deserve and essential to making a city-region that is safe and inclusive for everyone. The plan is also conversant of the paucity of research on minority ethnic men's experiences of domestic and sexual abuse in the UK and the importance of anticipating service need in this area. It takes the position that gender-based violence is defined by abuses of power that follow from gendered expectations. It also recognises that these gendered expectations produce unhelpful responses to the vulnerabilities men encounter when victimised. It conceives power in relationships to be a multifaceted phenomenon spliced with intersections demarked by generation, economic disadvantage, and discrimination, including racism, disablism, homophobia, transphobia, and the routine failure to design and deliver services that meet the needs of people who are neurodivergent.

Our approaches to addressing the needs of men and boys as victims of gender-based violence will take full account of this complex intersectionality. GMCA is cognisant of the uneven research base that informs practice in this area. While we have drawn on the best possible sources, the literature on domestic abuse against men focusses more on comparing men's needs relative to those of women than in identifying best practice in terms of serving men of different ethnicities, with long term illnesses or disabilities, or in different age brackets. The literature on men's experiences of sexual violence is smaller still and predominantly North American, while what we know about men's experiences of forced marriage and 'honour' based abuse derives, with a few notable exceptions, from studies that were initially focussed on women and girls of South Asian heritage. It is therefore important that we continue to appraise the reach and responsivity of our own practice relative to the needs of the many prospective service user living in Greater Manchester. This will entail listening carefully to men and boys who identify as survivors, as well as canvassing views from those who have experienced gender-based violence, but who do consider themselves to have been victimised.

This plan for men and boys should be read as supplementing GMCA's (2021) *Gender-Based Violence Strategy 2021-2031* and set of commitments that will be delivered within the same timeframe. It also complements the Greater Manchester

Greater Than Violence Strategy (2023) and the Police and Crime Plan: Standing Together 2022-2025. It is conversant that rates of gender-based violence against men are generally lower than those experienced by women but stands firm in making commitments to deliver high quality service provision to all men who are victims; to improve reporting rates amongst male victims; and in seeking to reduce the rates of victimisation and repeat victimisation men and boys suffer.

In Greater Manchester we are committed to delivering professional services that recognise the distinct needs of male victims and survivors, as well as the features of abuse - and responses to it - that are also common features of women and girls' experiences.

Male Victims of Domestic Abuse

Scale and Nature of the Problem

While there are similarities between men and women's experiences of domestic abuse, the nature of the domestic abuse experienced by men, together with the barriers to support they face and the vulnerabilities that prolong their victimisation, are not identical. This is one, but not the only, reason why male victims of domestic abuse are under-represented in police statistics (Hester, 2013).

Lifetime prevalence rates of intimate partner violence suffered by adult men in the UK are typically a third to half those suffered by women, but they are not insubstantial. According to the Crime Survey of England and Wales, 9.1% of men aged 16 and over have ever experienced non-sexual domestic abuse from a partner or ex-partner. The Crime Survey of England and Wales suggests that 1.0% of men have suffered a domestic sexual assault in their lifetime; and 3.0% report being stalked by a partner, ex-partner, or family member at some point in their lifetimes. Men who self-describe as being 'long term sick' or as 'having a disability' tend to report higher than average rates of domestic abuse victimisation.

Indeed, in Greater Manchester we know that more than 1 in 4 of the 1500+ adult men who seek help for domestic abuse in the city-region each year have a disability. In the Northwest of England, 2.6% of men have experienced domestic abuse in the last year, equating to almost 29,000 men aged 16 and over in Greater Manchester. Though this is lower than figures for men nationally – the 2023 Crime Survey of England and Wales (CSEW) suggesting that 3.2% of men aged 16 and over have experienced domestic abuse in the last year (ONS 2023a) – it also reveals that most male victims in the city-region do not seek support for domestic abuse.

One reason why victims of domestic abuse do not always seek help has to do with the nature of the harms caused. The Crime Survey of England and Wales 2023 suggests that 'mental or emotional problems' are the most common consequences of suffering domestic abuse for men aged 16 and over.

Physical effects	% of Men
Any physical injury	22.2
Minor bruising or black eye	13.8
Scratches	10.8
Severe bruising or bleeding from cuts	2.8
Any other physical injury (including poisoning)	3.3

Other effects	% of Men
Any other effects	53.0
Mental or emotional problems	48.4
Stopped trusting people/difficulty in other relationships	18.2
Tried to kill self	6.5

Source, ONS (2023b) Partner abuse in detail, England and Wales: year ending March 2023

Only a minority of male victims (31%) in the UK seek medical attention after experiencing domestic abuse, while this is much more common for women (68.6%). One of the most common reasons (43.3%) victims give for not reporting domestic abuse is that they consider it too ‘trivial’. However, it is important to recognise that the impacts of domestic abuse victimisation can accumulate rapidly – as the table above illustrates - with those routinely abused becoming isolated, mentally unwell, and at enhanced risk of suicide. Men are much more likely to disclose experiences of domestic abuse to a friend, family member, neighbour, or colleague (67.9%) than to the police (18.4%) or health professional (6.4%). This makes it imperative that we work with the public to make them aware of the risks of harm that experiencing domestic abuse poses to men and boys and what they can do to help victims access support.

Domestic Homicide

Domestic abuse is often a feature of the lives of men killed in domestic homicides by

both men and women, though there are also usually many other compounding risk factors. Between 2019 and 2021 35 men were recorded as being killed by partners or ex-partners in the UK (ONS, 2023a, March 2022 Dataset, Table 22). A further 69 men were killed by other family members over that two-year period. Over two thirds of domestic homicides against men involved being stabbed with a sharp instrument, whilst 3% of male homicide victims were strangled. The majority (62.5%) of men killed in domestic homicides are killed by male family members – most commonly fathers and stepfathers, sons, or stepsons to the victim. Most of those killed by partners or ex-partners are killed by women: 29 of the 33 domestic homicides perpetrated against men in the UK between 2019 and 2021 were perpetrated by women. Only one of these cases where the suspect a woman took place in Greater Manchester, and she was acquitted. Despite the ambiguities in the evidence contained within it, this case – as described below – underlines the importance of raising awareness among men about what domestic abuse and coercive control are and which services can be contacted to reduce the risks of harm escalating.

Case Study: Andrew²

Andrew was a 49 year old man who died 13 days after being stabbed in the heart at a 'family party' in December 2018. The exact cause of Andrew's death has not been established, Andrew claiming not to remember how he came to be stabbed when interviewed by the police, and his partner, Gemma – a woman in her mid-thirties - claiming the injury was 'self-inflicted' and that Andrew had 'struggled with mental health issues and had previously threatened to kill himself'.

Gemma was acquitted of Andrew's murder after a three-week trial. Though neither Gemma nor Andrew had any criminal history regarding domestic abuse or other forms of violence, both were cocaine users, and he had a 25-year history of cannabis use. Andrew had been referred to drug and alcohol services for the latter, after an appointment with his GP in which he disclosed 'trouble in sleeping', but the offer of support was never taken up. At the time of his death, Andrew had moved into

² <https://www.bolton.gov.uk/downloads/file/5971/domestic-homicide-review-andrew-executive-summary>

the house Gemma shared with her daughters, but there appears to be no record of concern recorded by Social Services regarding risks to the children with respect to either drug use or domestic abuse.

Gemma was to suggest that altercations between her and Andrew intensified in the context of their drug use, and evidence was retrieved from the couple's phones suggesting that their relationship was prone to 'bouts of verbal and physical abuse' as it became 'intense, volatile' and 'insecure'. Male friends of Andrew's had noted changes in his demeanour following altercations, a father and grandfather whom Gemma herself depicted as 'bubbly and very energetic and [who] would do anything for anyone' becoming 'really down'.

The couple, who were engaged at the time of Andrew's death, had a history of break-ups and reconciliations. Andrew had been injured in incidents the previous Christmas, when it seems he broke up with Gemma and 'pushed her' out of his house. Andrew had told a friend that Gemma had 'smashed up'; his house on one such occasion, and 'kicked his dog', and that on another she had 'stabbed him', though the veracity of some of this evidence was dismissed as 'hearsay' at Gemma's trial. She, nevertheless, admitted to having 'punched Andrew and kicked off because she was not happy about what she had found'. Andrew's friend, Ian, suggested that had Gemma had become more 'controlling' as their relationship resumed, and that Andrew, consequently spent less time with his friends.

There is no evidence to suggest that Gemma or Andrew perceived themselves as 'victims of domestic abuse' or 'coercive control'. The Domestic Homicide Review that further investigated what could be learnt from the case, also noted that there 'was no evidence that Andrew's friends recommended that he contact the police or an appropriate agency; nor that they contacted or looked for agencies themselves that could help Andrew'. It also noted that within Andrew's neighbourhood, the dedicated service for male victims was not 'not well promoted, with limited data regarding the scale of the problem' collated and shared between 'the police, public protection, GPs, statutory health agencies and third sector organisations.'

The Needs of Men Abused by Partners

The needs of male victims of domestic abuse are rarely redressed in systematic ways by service providers. The UK does not have a dedicated professional service sector to meet the needs of male victims of domestic abuse. It has two main telephone helplines, hosted by Respect and the Mankind Initiative respectively. It is therefore critical that any new provision pays attention to what is known about male victims and the needs and problems with which they present.

Most of the academic research on this subject focusses primarily on the abuse suffered by straight men abused by women, not always with full acknowledgment of its limits with respect to LGBTQ+ populations. Studies of men who have contacted national helplines for victims of domestic abuse, together with studies of men who disclose experiences of domestic abuse to their doctors, suggest a need for service provision that recognises the gendered dimensions of domestic abuse for men as *men*. This is because many men are reluctant to identify as victims of domestic abuse. Hine et al. (2022) explain that most male callers to domestic abuse helplines require emotional support to come to terms with what has happened to them as well as practical advice, including signposting to other services.

A recurring problem among men living with domestic abuse is a need to find somewhere else to live, and the difficulties of doing so when childcare, mortgages and tenancies are shared with abusive partners. Other problems commonly reported by male victims of abuse commonly include fears for their own and their partners' mental health; their own and their partners alcohol consumption or illicit substance use; suicidal ideation; and the fear of becoming estranged or alienated from their children. For these reasons, most men who are victims of domestic abuse require information about what will happen if they contact the police, solicitors, or their doctor, and, in the first instance, most require that information to be offered in confidence (Hine et al, 2022).

The need for confidential services for male victims is also a product of the feelings of shame, fear, and emasculation many male victims report. It is not uncommon for men who have been abused to blame themselves. It is common for male victims to report to professionals that their partner justified abusing them because of their failures as men to provide financially for them, for being emotionally 'pathetic', or for

failing to perform (hetero)sexually (Westmarland and Burrell, 2024). Some domestic abuse against men revolves around the control of finances, or the turning of children, friends, and family against the victim. Some male victims suffer other forms of coercively controlling abuse, stalking behaviour, and malicious communications from current or former partners. While there is no offence of 'rape' against men perpetrated by women defined in English criminal law, some male victims are forced to penetrate abusive partners (Weare, 2021; Weare et al, 2024), and some suffer physical attacks on their genitalia (Bates and Weare, 2020). Sometimes men who seek support as victims of domestic abuse also disclose longer histories of trauma, dating back to their childhoods or previous relationships.

Despite the risks of harm to themselves and children, male victims are often hesitant about reaching out for support. Most are unclear about which services they can turn to and fearful of being ridiculed or disbelieved (Taylor et al, 2022). Seemingly, few male victims are keen to see their partners and ex-partners prosecuted for domestic abuse, often because they fear the impact of criminal justice or social services interventions on their children. Some men with histories of being domestically abused have described how they were treated, wrongfully, as suspects when the police were called (Westmarland et al, 2020). Others will disclose abuse that has been bi-directional, presenting challenges to criminal justice and safeguarding practices that assume clear victim-offender binaries (Machado et al, 2024).

Risks of Harm Within the Families of Abused Men

Such police responses are not always without justification, however. One of the few attempts to capture the experiences of a representative (as opposed to self-selecting) sample men of who describe as victims of domestic abuse uncovered a small number of male victims who had also been serially abusive, as well as men who had retaliated against partners in relationships that could be characterised as 'mutually combative' (Gadd et al, 2003). In some circumstances where men become victims of domestic abuse, their own involvement in crime, together with failures to intervene effectively by statutory service providers, contributes to the decisions made by other family members to threaten or enact harm against them. In Greater Manchester, four men were killed in domestic homicides between March 2019 and

March 2021. Three of these four male victims of domestic homicides were killed by other men, none of whom were their partners.

Case Study: Steven³

One recent example from Greater Manchester of a domestic homicide perpetrated by a man against a man, is the case of 'Steven'. Steven was stabbed by his teenage stepson, Roland, in circumstances the family considered to be exacerbated by the precarious housing situation that Steven had entered. Unable to afford the new bedroom tax, Steven moved in with Roland's mother, Karen.

The family thought that Steven's admissions to hospital with head injuries and his later attendance to see his GP when he complained of low mood were red flags for abuse and should have been recognised' as indicators of the risks of harm he faced. There was evidence in this case that Steven – a care leaver – had become a victim of a form of criminal exploitation known as 'cuckooing' as an adult, and that drugs were being sold and used in the premises where he lived, including the home he came to share with Karen and Roland.

Before his death, Steven had become 'more aggressive verbally and this escalated into physical abuse towards Karen on multiple occasions, prompting Roland's sister to ask the police to disclose if Steven had a history of domestic abuse. Before he murdered Steven, Roland had apparently 'attempted to intervene to protect his mother during some abusive incidents'. In turn, Roland's relationship with Steven deteriorated.

Roland identified as 'bisexual' and was of English Gypsy and Irish Traveller heritage. These cultural factors were thought to have increased the barriers Roland faced in accessing support, his mother having subjected him to homophobic abuse.

Seemingly 'no one outside the household had a clear picture of what was happening' in the family home, though Roland had been referred to Child and Adolescent Mental Health Services (CAMHS) following 'angry outbursts at school and at home'. Social

³ <https://homicide-review.homeoffice.gov.uk/download/64f73a3e95276467a6af2044>

Services had assessed Roland, but they did not identify any safeguarding needs. Steven was not known to any services as a victim of domestic abuse.

It is crucial to recognise, therefore, that reducing domestic homicides against men requires a strategy that *also* tackles violence perpetrated by male family members against each other, as well as a strategy to tackle violence by former and current partners, including women. It is also important to recognise that some men who are killed by female partners have been abusive themselves. This strategy takes notice of these features of domestic homicides and thus aligns with our strategy and service provision to redresses the behaviours of the perpetrators of domestic abuse, who are predominantly men.

Domestic abuse in the histories of criminal justice-involved young men

Research conducted on a sample of 180 criminal justice-involved young men in Greater Manchester reveals that a majority (62.4%) have lived with domestic abuse at home and a disproportionate number (6.1%) have also been subject to sexual abuse (Gray et al, 2023). It is not uncommon for young men who have lived with domestic abuse as children to describe feelings of powerlessness, insecurity, and helplessness, which they seek to surmount as they get older. Some are left to live with abusive fathers when abused mothers seek refuge, and many do become angry when calls to the police or social services interventions fail to stop abuse perpetrated against them, their mothers, and their siblings. One of the complexities this produces is that young men who provide care and protection to other family members in the aftermath of violence in which they were victims, are also at risk of taking matters into their own hands, especially when adults who have endangered them return to their homes or neighbourhoods (Gadd et al, 2016).

Supporting Disclosure and Providing Support

While there are male victims who only seek help in the aftermath of death threats or near lethal violence (Westmarland et al 2020), the bulk of the service demand encountered by helpline providers derives from men who have already coped alone on an enduring basis: men who are still living with abusive partners and who are

deeply unhappy and worried (Williamson et al, 2018). These male victims typically require support with housing, finances and debt, and advice about how they can separate safely from women without diminishing their role as fathers to their children. Some men and boys do need to be provided with safe accommodation and protection from abusive partners and/or extended family, though the scale of the demand for refuge provision is generally regarded as smaller than the need for refuge among female victims of domestic abuse (Hine et al, 2022).

Early intervention in cases where domestic abuse against men is suspected is crucial. Men who are living with domestic abuse as victims, together with those that report domestic abuse between other adults, need support with safety planning at the point of disclosure, as many do not return to helpline providers after the first contact. Williamson and colleagues' (2018) study of men reporting to doctors and sexual health clinics also reveals that practitioners who treat men suffering with depression and anxiety in the aftermath of domestic abuse (sometimes along with allied digestive or sexual health problems) need to anticipate that some will disclose having harmed their partners or recall having 'lashed out' unintentionally. Others will also report risks of harm to themselves and/or substance use to cope with the long term impacts of abuse. In all such instances, it is imperative that men who are victims are guided to appropriate support.

The risks of harm male victims disclose on first report can be difficult to navigate for service providers who need to balance a commitment to confidentiality with safeguarding obligations to children and vulnerable adults in the home, as well as the presenting client. These challenges make it imperative that those working with male victims have clear protocols for making referrals to social services, drug and alcohol services, housing providers, health visitors, and those who can provide mental health support and advice. They need also to be able to refer male victims who reveal that they too are at risk of being violent – whether because they have previously been so, or because they presently feel provoked – to services that can help them contain this risk. Services that make provision for male victims needs to anticipate that some victims will be men who are also street homeless, among whom some will have limited chances of securing social housing because of histories of involvement in crime or substance use problems. Others will need specialist legal advice to counter accusations made against them and the risk this poses in terms of

criminalisation or prohibition of contact with their children. This is a particularly difficult area in which to offer confidential support, as is providing help to men whose legal right to remain in the UK is dependent on remaining married to a partner who is abusing them.

Case Study: Sophie and Derrick

Sophie self-referred onto Talk Listen Change's (TLC's) Women's Behaviour Change Programme after her children voiced that her abusive behaviour towards husband, Derrick, was negatively impacting them. Sophie would often insult Derrick, physically abuse him, coerce him into having sex, and make him leave the house when she wanted space. Before she met Derrick, Sophie was in a 15-year marriage which she stated was abusive.

The Women's Behaviour Change Programme is specifically designed for women who are worried that they are harming their partners. It comes with integrated support for the partner or ex-partner as TLC always centre those who have been harmed in their work. One-to-one sessions are delivered by a qualified practitioner for women. This practitioner helps women who have been abusive to reflect on and understand the root causes of these behaviours, challenging them to end unhealthy habits and work towards a safe non-abusive coexistence with their partners and/or ex-partners.

Sophie engaged in TLC's programme, developing skills and processes for when she needs space and conducting work on her bodily sensations. Meanwhile, Derrick accepted help from the Integrated Support Service (ISS) team at TLC. They helped him focus on safety planning and maintaining his mental health by using grounding techniques whenever he became 'triggered' by Sophie or traumatic events from his past. The support empowered Derrick to engage in sessions for as long as he wanted – which was just 10 minutes at first – until the therapeutic relationship developed sufficiently for him to hold lengthy conversations about his marriage and previous traumas.

Together, the Women's Behaviour Change Programme and Integrated Support Service helped Sophie and Derrick redevelop a relationship in ways that were safer, and in which Derrick was keen to support the change Sophie committed to.

The Distinct Needs of Gay, Bisexual, Trans and Gender Queer (GBTQ+) Men

The needs of gay, bisexual, and trans men have often been overlooked in the literature on male victims, partly because their number has proved too small to generalise from in survey-based studies. Henderson's (2003) study remains one of the best estimates of domestic abuse among gay men's relationships in the UK. This research found prevalence rates of around 29%, but this estimate is not strictly comparable with the findings of the CSEW primarily because the samples involved were to some degree self-selecting: as they often must be with studies of LGBTQ+ populations. More generally, the construction of domestic abuse as a problem of power imbalances wedded to heteronormativity can make it harder for LGBTQ+ people to recognise gender-based violence when it becomes a feature of their own intimate relationships (Barnes and Donovan, 2018).

As with straight people, the domestic abuse LGBTQ+ people experience is inflected by issues to do with love, loyalty, infidelity, finances, and domesticity. However, gay, bisexual, and trans male victims also face distinct barriers both in fitting their experiences into dominant domestic abuse framings and in accessing services that can meet their needs. In Greater Manchester, it is estimated that 7% of men identify as LGBTQ+. In 2022, 14% of those adult men who sought support for domestic abuse from service providers in Greater Manchester identified as LGBTQ+.

Case Study: Paul and Mark

Paul had been in a relationship with Mark for nearly five years. The couple had been living together for four years; since the time Mark was forced to 'come out' to his family and found himself at risk of becoming homeless.

Both Paul and Mark worked full-time in service industries. As Paul's job involved shiftwork the couple's relationship was often perceived by friends as being 'focused on the weekend'. Being involved in the gay scene and fully embracing the nightlife was a big part of both Paul and Mark's lives. Like many LGBTQ+ young adults, Paul and Mark's focus was on having fun.

Whilst not formally in an open relationship, both Paul and Mark were known to occasionally engage in ChemSex parties, with Paul more inclined to be the instigator in deciding whether to party in that way. Paul was often the one to get the invitations to ChemSex parties, whilst Mark would follow along. Once at the parties, Mark was usually very willing to participate in both chems and sex.

Following a heavy Chems weekend, Mark sometimes experienced brief episodes of depression on a come down. Paul found this difficult to manage. He described feeling more like Mark's 'carer' than his 'boyfriend' on some of these occasions. It was at these times that both Paul and Mark found their relationship difficult to manage. They would often get into heated arguments that could result in neither communicating with the other for days. On one such occasion, Paul threw and smashed a wine glass on the floor near Mark's foot.

Throughout the summer, both Paul's and Mark's involvement in ChemSex parties increased, as did their substance use. When Mark tested HIV+, Paul began attending ChemSex parties without him, though they also still attended some events together.

Some issues faced byGBTQ+ men are also commonly experienced among younger groups of straight people whose relationships are not usually defined by cohabitation or shared property, as is presumed in much of the literature on domestic abuse. But others barriers to reporting are more specific to LGBTQ+ populations, including: the risk of being outed and associated risks of hate crime and/or being disowned by family; institutional forms of discrimination, including from the police; a related reluctance within some parts of the LGBTQ+ community to own the problem of domestic abuse; lesser legal protections with regard to property and finances in the event of separation for unmarried couples; the misgendering and dead-naming of trans people (referring to a transgender or non-binary person by a name they used prior to transitioning); the risk of an abusive partner blocking access to health care or treatments, especially among men who are medically transitioning; sexual health concerns and the risk of sexually transmitted infections; and the 'even greater dearth of help-seeking avenues for LGB and/or T partners who use 'abusive' behaviours in their relationships (Barnes and Donovan, 2018: 73).

For these reasons LGBTQ+ male victims tend to approach trusted friends or counselling or mental health support workers in the first instance and ‘do not in the main report their experiences to statutory services’ (ibid. 76). Carlisle and Withers’ (2023) survey of over 2000 LGBTQ+ people who had experienced domestic abuse reveals that over 70% of gay, bisexual, and trans male victims of domestic abuse had never sought support from a statutory service provider. Over half of these victims were unaware that there is any bespoke support available to them. The same study highlights that the few specialist support services for LGBTQ+ victims of domestic abuse are concentrated in London. The survey, commissioned by Galop, found that victims seeking support outside the capital, from services designed to meet the needs of women abused by men, often encountered professionals with ‘limited understanding about LGBTQ+ relationships.’ These service providers were often lacking ‘the specialised skills to safely and effectively respond to LGBTQ+ domestic abuse’ and working for organisations that were ‘largely inaccessible for much of the LGBTQ+ community’ (ibid.13). Trans, non-binary and gender-diverse survivors reported the highest level of concern about being mistreated by services that were not provided by and for LGBTQ+ survivors, though high levels of concern were also expressed by bisexual men, asexual/aromantic men, and pan/queer male survivors. As with all groups of victims and survivors, poor responses from professionals further isolate LGBTQ+ victims in ways that increase their vulnerability to abuse.

Changing the Story in Greater Manchester

Regionally patchy provision is also an issue for all male victims of domestic abuse. We know from Westmarland and colleagues’ (2020) study of who calls the Respect’s Men’s Advice Line that while 8% of those who call or email live in the Northwest of England, the service’s client group is concentrated primarily in London and the Southeast. Ensuring all national provision for male victims of domestic abuse is accessible to men and boys living in Greater Manchester is a priority for GMCA, as is ensuring all national providers are kept up to date about the services on offer to male victims in the city-region.

If it is to establish Greater Manchester as a beacon of excellence in this area of support male victims of domestic abuse, GMCA will need to:

- Transcend the tokenistic responses to male victims - including trans and non-binary populations - in central government policy, on gender-based violence generally, and domestic abuse more specifically.
- Raise awareness of the problem of domestic abuse against men among the general population of Greater Manchester.
- Extend its housing reciprocal to ensure safe accommodation can be provided to men and boys who need it, wherever they live, while also giving due consideration, wherever possible, to moving perpetrators away from victims in the first instance.
- Ensure access to support services for men are proactively promoted among organisations servicing men from minority ethnic backgrounds.
- Signpost service provision in ways that help men and boys recognise when they have experienced domestic abuse.
- Ensure the full portfolio of its provision is easy to access and understand for male victims whose first search for help will typically begin online.
- Ensure all Violent Reduction Unit programmes are fully aligned with the Gender-Based Violence Strategy, and that the Greater Than Violence Strategy anticipates and identifies the specific factors that increase the risks of homicide men face at home from partners and other family members.
- Pay close attention to the findings of domestic homicide reviews as they relate to male victims, noting where earlier intervention would have made a difference.
- Work with national providers of men's helplines – RESPECT, Mankind Initiative - and specialist by and for LGBTQ+ providers, like Galop – to ensure they are best equipped to refer to service providers within GM.
- Learn from pioneering support services for male victims across the UK.⁴

⁴ Such as the Paul Lavelle Foundation, Leicester ([ADAM Project](#)), [Mankind Initiative](#).

Preparing the Sector

To ensure the needs of male victims of domestic abuse are met within Greater Manchester, GMCA will invest in independent domestic violence advisors (IDVAs) that can specialise in supporting male victims and in meeting the needs of LGBTQ+ men. These new IDVAs will play a key role in signposting those services that can best support men who disclose domestic abuse victimisation and ensuring the different support services liaise with each other to enhance the safety of men and boys at risk of revictimization. Over the next six years our IDVAs will play a key role in upskilling the sector in GMCA. They will support GMCA in:

- Ensuring that commissioned services specifically for domestically abused men⁵ serve the entire city-region.
- Maintaining an online directory of these services that signposts where male victims of gender-based violence can access support relevant to their needs.
- Raising awareness of domestic abuse among men among the city-region's many practitioner groups and equipping them to provide trauma-informed and trauma-responsive services from the first point of contact, in line with our commitment to deliver a Trauma-Responsive Greater Manchester.
- Ensuring the city-region's housing and homelessness strategy meets the needs of male victims of domestic abuse, including the provision of secure premises for those men at risk of serious forms of repeat victimisation, and protocols for requesting the relocation of perpetrators subject to Domestic Abuse Protection Orders and Stalking Protection Orders.
- Working with the sources of referral that are most trusted by male victims, primarily in the health service, including mental health services, as well as in the VSCE sector, to open up new pathways to support for men looking to disclose experiences of gender-based violence.

⁵ Currently, TDAS, Fortalice, Independent Choices and Stockport Without Abuse, Greater Manchester Law Centre, the LGBT Foundation, Manchester Women's Aid.

- Ensuring there is bespoke support available to men who are co-parenting with a partner or ex-partner who is known to be abusive.
- Establishing professional protocols for supporting male victims to enable information sharing between housing providers, the police, social services, schools and colleges, and other advice-giving services, including those specialist VCSE sector providers committed to providing services for men and boys, LGBTQ+ populations, people with disabilities, people with substance use issues, neurodiverse men and boys, and those with mental health problems.
- Working closely with Children Services across Greater Manchester to ensure that the needs of young men who have lived in families where there is domestic abuse and other risks of harm are identified as victims and supported accordingly.
- Working with Youth Services to identify young men at risk of taking matters into their own hands – including, but not exclusive to those cases where child-to-parent violence is reported - where statutory service providers have been unable to redress risks of domestic abuse to one or both of their parents or other adult carers.
- Working with the city-region's universities to underline the importance of providing accommodation to male students who are fearful of returning home to families where there is ongoing domestic abuse.
- Ensuring all emergency service providers are appraised of how national phone line operators manage risks of harm to self and others.
- Promoting understanding of the points at which disclosures are made to police and ambulance services, while underlining the importance of ensuring such calls are followed up by other support service subsequently.

Enhancing provision

To reduce repeat domestic abuse victimisation among boys and men, GMCA will enhance the provision of therapeutic, advice, and advocacy services for male victims of domestic abuse by launching a new Male Victims Service Co-ordinator. This Male

Victims Service Co-ordinator will identify key agencies in the city-region with lead responsibility for:

- Safety planning with men who disclose domestic abuse. This will include working with the police, as well as social service providers, for men who are dependent on carers who present a risk of abuse to them⁶.
- Providing bespoke support to men and boys who are physically or learning disabled, suffering poor mental health, or who identify as neurodiverse.
- Providing a clear pathway of self-referral for young men who consider themselves to be living with a risk of domestic abuse at home.
- Providing enhanced parenting guidance and support services to young men who have lived with domestic abuse.
- Providing trauma-informed care to boys and young men who are brought into custody in cases where there is evidence of gender-based violence perpetrated by adult carers, and ensuring the best interests of the child are paramount in charging decisions.
- Proactively promoting support and therapeutic services to minority ethnic men and monitoring to check equivalence of outcomes with men from the ethnic majority population.

GMCA will:

- Develop and publish a directory of reputable organisations able to offer legal advice to men who are victims of domestic abuse, including those that can offer specialist advice on child contact arrangements and immigration status.
- Scope how far its service provision is also meeting the needs of men who are disabled, suffering from long term physical poor health, and/or have mental health problems.

⁶ Such as Silverline and Hourglass.

- Build on its reputation as a city-region that welcomes LGBTQ+ people, by extending support provision for LGBTQ+ victims and work with the LGBTQ+ sector to develop third party reporting mechanisms and interventions to challenge perpetrators who abuse LGBTQ+ men.
- Extend provision for female perpetrators of domestic abuse to all areas of the city-region.
- Review whether its service provision is adequately meeting the needs of men from minoritized communities, new migrants, and those with insecure immigration status.

Male Victims of So-Called ‘Honour’ Based Abuse and Forced Marriage

Why is ‘Honour’ Based Abuse So-Called?

Often referred to as so-called ‘honour’ based abuse and violence, or with scare quotes around ‘honour’, ‘honour’ based violence and abuse ‘refers to a broad range of violent and/or abusive behaviours that are carried out to protect, defend, or restore socially constructed notions of community, family or individual honour’ (Miles and Fox, 2023: 501). The use of the word ‘so-called’ is used to flag that, while perpetrators often justify the harms they have perpetrated as directed by cultural or religious principles that require compel them to defend familial honour, the substance of such claims-making has little basis in religious scripture (Gill and Mitra-Kahn, 2010).

The problem of ‘honour’ based abuse and violence is poorly understood by many service providers in the UK, not least because of the lack of a statutory definition and the failure of government to deliver on promises to collate data on its scale. In 2008, the UK government committed to collating ‘data to identify what service needs male victims may have, as early indications suggest they are different from women’s’ (Secretary of State, 2008. 4-5). Nevertheless, research and officially collected data on this subject remains limited, and much of what we know about the risks to men and boys follows on the back of studies and interventions to safeguard women and girls.

In the continued absence of coordinated national strategy to redress ‘honour’ based violence and abuse, GMCA will deliver a strategy to tackle ‘honour’ based violence for everyone in Greater Manchester. GMCA’s position is that it is crucial that strategies to tackle the risks and impacts of so-called ‘honour’ based abuse and forced marriages on boys and men are developed in tandem with strategies to safeguard women and girls, the perpetration and organisation of these harms often emanating within family networks and across generations.

Who are the Victims and Perpetrators?

Crown Prosecution Service data suggests that around 30% of prosecutions for offences involving 'honour' based violence pertain to male victims (Bates, 2019). Likewise, the Forced Marriage Unit has consistently noted that around 20% of forced marriage victims are men (Idris, 2022). GMCA's own scoping exercise on *So-called 'honour' based abuse, forced marriage, and female genital mutilation* in Greater Manchester, conducted in 2024, revealed that our current service providers regard themselves as providing inadequate support to male victims, children and young people, and victims with no recourse to public funds (NRPF) (Khan et al, 2024). We are committed to redressing this.

While there is much evidence to suggest that the problem of 'honour' based abuse across the UK and within Greater Manchester specifically is concentrated among South Asian populations, it is certainly not exclusive to them. Recent cases investigated by the police in the UK have also included white populations, including those who identify as Christian, the children of parents with far-right affiliations, as well as European citizens and gypsy and traveller populations. In Greater Manchester, around half of the 168 male victims of so-called 'honour' based abuse identified by the police between 2019 and 2024, were Asian. 15% were white and 5% were black. Ethnicity was not recorded in 23% of cases and recorded as 'other' in 5% of cases, suggesting additional vulnerabilities among those populations who are not part of established minority ethnic groups. Because there is not a discrete crime of 'honour' based violence defined in legislation in the UK, most instances will be classified as victims of 'violence without injury' or victims of 'stalking and harassment' upon report to the police, though some male victims will also be recorded as victims of multiple crimes, including theft, criminal damage burglary, rape, and other sexual offences.

Research shows that most 'honour' based violence is perpetrated by men who consider themselves to hold authority in their communities (Idris, 2019). When men commit crimes of 'honour' base abuse they often act in collaboration with other family members, sometimes including mothers and mothers-in-laws of the victim, as well as aunts, brothers, uncles, and grandparents (Bates, 2018). Typically, this abuse takes the form of controlling behaviour and blackmail, but can yield to stalking,

physical assaults and beatings, false imprisonment and kidnappings, and sometimes lethal violence. Among young men who have contravened 'honour' based expectations - by having relationships with white women or women deemed of inappropriate class or caste, having intimate relationships with men, participating in crime, or engaging in alcohol consumption or illicit drug use - some risk being physically punished or being sent to their parents or grandparents' countries of origin to 'straighten them out' (Idriss, 2022). In Greater Manchester over a quarter of male victims of so called 'honour' based abuse known to the police are children, and a further quarter are young adults, aged 18-25.

There have been cases where young men have been duped into making such journeys, unwittingly under the influence of drugs or under false pretences, only to find themselves coerced into marriages on arrival (Dutt, 2019). Among white British nationals, there have also been cases of young men being coerced into 'doing the decent thing' (i.e., marrying women they have gotten pregnant to maintain family honour), as well as of men being forced to sexually consummate marriages they did not freely consent to (Chantler, 2019; Clawson, 2019). In these cases, it is often women who are first identified by the police or social services as the primary victims, with men who are co-victims erroneously suspected of being their abusers.

Case Study: Peros

Peros is a 36-year-old Kurdish Iraqi migrant who was forced into an arranged marriage with a close family member. After being involved in an 'extra marital affair', his wife's father and two brothers perpetrated a horrific campaign of torture and humiliation against him: setting his legs on fire, causing first degree burns to his thighs, and using instruments to manually remove his genitals causing him incontinence, difficulties walking and enduring pain. Whilst he has done his best to cut all ties and connection with his family back at home, Peros now lives in fear of further repercussions, struggles to sleep and lives with recurrent nightmares and flashbacks.

Once in the UK, and placed in a local hotel housing migrants, Peros was referred into Lingua GM who undertook an assessment in his first language with a trained and qualified practitioner. A plan of support was developed. Through therapy, Peros

was helped to build a relationship with his support worker and then disclose the acute medical issues his torture inflicted on him. The Lingua GM worker was able to get Peros' immediate medical needs attended to, also securing him access to ongoing specialist support to address his trauma.

Forced Marriage as a form of 'Honour' Based Violence

Forced marriage was outlawed in the UK over a decade ago under the Anti-Social Behaviour, Crime and Policing Act 2014. It is a form of 'honour' based violence in which one or both parties are coerced – sometimes with the threat of assault, estrangement, or public shaming. Victims can be forced into marriage to prevent them from marrying partners deemed unsuitable, or to cement family ties abroad. Perpetrators who are parents sometimes force their adult children into marriages in the expectation that it will prevent sons or daughters identifying as LGBTQ+, or to secure carers for adult children who are physically or learning disabled, or to provide care to the older family members who are the perpetrators of 'honour' based violence themselves (Idris, 2022). Some men are subjected to 'honour' based violence for refusing to enter marriages that have been 'arranged' for them. Refugee and asylum seeker couples who have fled places where their marriages were disapproved of can find themselves subject to 'honour' based violence in the UK, as well as when they return their countries of origin, whether for social events, or because they are required by the British government to do so (Mosawi,2019).

The Harms of 'Honour' Based Violence

In turn, victims of 'honour' violence and forced marriage can feel trapped and socially isolated – male victims often renouncing their faith (Karma Nirvana 2023). Many suffer severe harms akin to post-traumatic stress disorders and become at increased risk of suicide and self-harm. Typically, victims of 'honour' based violence are at higher risks of repeat victimisation, high harm, and homicide than other victims of gender-based violence, not least because they endure abuse from multiple perpetrators and have fewer people to turn to for support within their own families (SafeLives, 2018).

Male victims of 'honour' based violence often struggle to see themselves as victims, even though there is some evidence to suggest that they are at greater risk of physical assault than female victims. Among heterosexual male victims this can be because assaults are targeted to send a message to female intimate partners who are regarded as bringing the family's honour into disrepute.

'Honour' based violence is also used to punish gay, bisexual, and trans men whose sexualities and gender identities are regarded by perpetrators as dishonouring the family. In turn, some abusive family members may offer to 'forgive' gay, bisexual, or trans men for transgressing their heterosexist expectations if they agree to 'arranged' marriages. Such abuse, which is often presented as care, has parallels with the pressures to marry some men with learning disabilities are subjected to. In these cases, parents might coerce or cajole their son into marriage to ensure he is cared for after their death, or to secure carers for themselves. People from overseas who are forced into marriages with UK citizens can find themselves living in domestic servitude, with very limited recourse to law given the risks of deportation they face if they report to the police (Idris, 2019).

Key Actions

To improve the criminal justice response to 'honour' based violence and abuse, GMCA will:

- Establish a working definition of so-called 'honour' based violence for use across all Greater Manchester service providers and join the calls for the government to establish a statutory definition that includes male victims.
- Require statutory service providers to systematically collect data on occurrences of forced marriage and 'honour' based violence consistent with our new definition, and analyse referrals and outcomes data according to gender, age, sexual orientation, disability, ethnicity, and faith.
- Establish a 'by and for' 'honour' based violence advisory group that can help upskill existing service providers in the statutory and VCSE sector. This will include making sure all Independent Domestic Abuse Advisers understand the specific safety needs of male victims of 'honour' based' violence and forced marriage.

- Commission the development of a detailed 'journey map' that documents male victims' experiences of so-called 'honour' based violence and forced marriage, from pre-police contact through the justice system to post release of the offenders.

GMCA will also work conjointly with Greater Manchester Police and Social Services to:

- Develop a programme of training and learning from best practice that helps frontline officers, teachers and social workers identify 'honour' based abuse, understand how it can be compounded by racial trauma and discrimination, and develop confidence and competence in responding effectively to its various forms. This will include in-person and refresher elements, with mentoring made available for professionals dealing with cases of so-called 'honour' based abuse.
- Raise awareness of how civil remedies and provisions in domestic abuse, forced marriage and modern slavery legislation can be used in tandem to combat 'honour' based violence.⁷
- Ensure risk assessment tools relating to Gender-Based Violence, anticipate the risks of harm faced by male victims of 'honour' based violence.
- Promote a firewall between immigration services and law enforcement, so that those with insecure immigration status are not deterred from seeking protection.
- Review the protocols used by all statutory and VCSE service providers, including those in educational and health settings, for reporting concerns to the police when persons considered at risk of 'honour' based violence fail to attend or go missing.
- Establish common risk assessment protocols for victims at risk of 'honour' based abuse. It is critical that these extend investigations triggered by

⁷ See, for example, <https://www.nottingham.ac.uk/research/groups/mymarriagemychoice/>)

revelations of risks of harm to female victims to partners, cousins, and siblings, including similarly vulnerable male relatives.

To improve the quality of responses to victims of forced marriage and so called 'honour' based violence across the city-region, GMCA will:

- Publicise the support services of specialist national service providers, Karma Nirvana and the Elm, and actively promote them in campaign materials addressed to minoritized communities and asylum seeking and refugee populations. This will include the provision of targeted awareness raising in schools and healthcare settings.
- Develop online resources to help boys and young men to identify the risks of 'honour' based violence, abuse and forced marriage to themselves and to their siblings with clear instructions as to how and where safe disclosures can be made to professionals with safeguarding skills.
- Support the Proud Trust to develop awareness among parents of the needs of teenagers and young adults coming out as LGBTQ+.
- Engage providers of services for physically and learning-disabled people to ensure they are aware of the risks of 'honour based' abuse and forced marriage among men and boys from minoritized communities.
- Raise awareness among doctors and those providing sexual and mental health services specifically for men and boys that they are often the only professional point of contact for victims of 'honour' based abuse.
- Ensure all suppliers of translation services in criminal justice and safeguarding contexts understand what so-called 'honour' based abuse is and are alert to barriers to disclosure.
- Support the provision of awareness raising materials within schools, colleges, and universities to signpost services for young people at risk of 'honour' based abuse.
- Ensure our schools, colleges and universities are aware of the need to protect the confidences of boys and young men at risk of honour based violence and

forced marriage and offer to support them in securing accommodation when returning to their families involves a risk of harm.

- Re-assess its safe accommodation provision to ensure there are sufficient places of sanctuary for male victims of 'honour' based abuse. We will ensure this housing provision is fit for purpose to deliver the emotional, legal, and practical support that male victims of 'honour' based violence and abuse require.
- Provide translators with linguistic and cultural competency to work alongside professionals supporting victims of 'honour' based violence, together with training and guidance on managing disclosures among those at risk of 'honour' based abuse and/or unfamiliar with UK criminal justice and safeguarding processes.
- Ensure our provision for victims of so-called 'honour' based violence and other forms of gender-based violence are properly signposted online and by service providers working with minority ethnic groups, new arrivals to Greater Manchester, those with insecure immigration status and people with no recourse to public funds.
- Work with the clergy, border force and the police stationed at Manchester Airport to support safe disclosure processes for passengers at imminent risk of being forced into marriage.

Male Victims of Rape and Sexual Assault

Scale of Sexual Abuse Against Men

The sexual abuse of men is one of the most under reported crimes worldwide, attributed to the overwhelming challenges victims face in coming forward to report. This under reporting translates into a lack of societal awareness and knowledge of the physical and psychological impact of sexual assaults on male victims, otherwise known as the 'legacy of abuse' (Lew, 2004). The lack of research in this field further compounds the silence that renders many male victims hesitant to seek support following experiences of sexual trauma (Sorsoli et al, 2008).

Statistics show that in the year ending June 2024, Greater Manchester Police (GMP) recorded 9,904 offences of rape and sexual assault, of which 1,836 (one in five) related to male victims.

In Greater Manchester, the average time taken by male victims to report sexual assault to police is four years and less than 4% of reports result in a charge.

According to the Crime Survey of England and Wales, in the year ending 2022, 275,000 men aged 16 years and over had suffered an actual or attempted sexual assault in the previous twelve months (ONS, 2023c). Over one in a hundred adult men experience a sexual assault each year in England and Wales. One in four adults sexually assaulted in the UK each year identify as men. Over the adult life course, currently around 5.7% of men in England and Wales become victims of sexual assault, most of whom are aged 16-24 at the time (ONS, 2021). 86% of perpetrators are male. Over 40% of sexual assaults suffered by adult men are perpetrated by strangers. Around a third of sexual assaults on adult men are perpetrated by friends and acquaintances. Around a quarter of sexual assaults on adult men are perpetrated by partners and ex-partners. Around one in ten rapes reported to the police and one in seven sexual assaults are against male victims (ONS, 2023c).

Some men are also sexually abused as children. 3.5% of boys become victims of child sexual abuse before they turn 16 (ONS, 2020), though a larger proportion of

teenage boys – 5% - report having been sexually violated (Popham and Teager, 2023). One in four victims of child sexual abuse are men. Male victims of child sexual abuse routinely experience other forms of physical and emotional abuse at home, including exposure to domestic abuse between their parents or other adult family members. Over 70% of child sex abusers are people known to their victims, and over 80% are men. Boys are generally more likely to be abused by people in occupational positions of trust or authority, compounding the challenges of getting men to seek professional help and support at all stages of the life course.

Barriers to Reporting

For the 12 months ending June 2023, Greater Manchester Police recorded 11,805 offences of rape and sexual assault, of which 1965 – 1 in 6 – related to male victims. St Mary's Sexual Assault Referral Centre (SARC) receives over 1000 referrals each year. Between April 2019 and March 2021 8.4% of adult referrals were male whilst 15.4% of child clients were male (Majeed-Ariss et al, 2023). This suggests that the male victims of sexual assault that attend SARC are disproportionately boys and that adult men are much more reluctant than adult women to engage with a SARC following sexual assault.

Before they disclose sexual abuse, boys and men must overcome many barriers. Research has long revealed the role of shame, stigma, institutional and societal homophobia, and a sense of emasculation in keeping men silent about sexual abuse (Etherington, 1995, King et al, 1992; West et al, 1992), though it is important to recognise that what masculinity means to individual men varies considerably. For male victims who are being abused by a partner or ex-partner there can be a reluctance to name abuse *as abuse*, together with concomitant dangers entailed in making disclosures. For straight men, hesitancy to disclose can also be compounded by the belief that they should be physically stronger than women and hence should have been able to stop the assault (Bates and Weare, 2020). Victims of sexual abuse who have been forced to penetrate by a partner often struggle to name and label their experiences as abuse, especially if it has caused them to be aroused, and can encounter confusing responses from professionals unfamiliar with the vagaries of law in this area (Weare et al, 2024).

For gay men, there can be a fear of being outed as well as the anticipation of being blamed by those to whom they have come out for having invited the abuse on themselves. For straight and LGBTQ+ populations engaged in ChemSex, there can be distinct challenges in evidencing that they were made to have sex without their consent, difficulties with coming to terms with partial memory loss or not knowing what happened when consciousness was lost, and the risk of HIV and other sexual transmitted diseases to contend with (Atkins, 2023)

Research on minority ethnic men's access to therapy suggests that across the UK men from 'Bangladeshi', 'Pakistani' 'Mixed White' and 'Black Caribbean' ethnic groups, and 'Other' 'catch-all' minority ethnic groups, have worse outcomes than 'White British' populations and tend also to have to wait longer for access to services, despite presenting with greater symptom severity (NCCMH, 2023). Men from racially minoritized populations will often discover that mainstream health services, specialist sexual health services and LGBTQ+ services have not been conceived with them in mind (Meyer, 2022). Men who have suffered racist forms of discrimination that cast them as sexually predatory are often particularly reluctant to disclose to law enforcement through fear of becoming criminalised (Gill and Begum, 2023; Gil and Khan, 2023). Black, South Asian, and Muslim men in the UK have long been subject to this form of stereotyping, as increasingly, are the trans population (Flores et al, 2021; Javaid, 2018). Where victims remain in continuing contact with perpetrators, either because they are dependent on them, or they are former or current intimate partners, or colleagues and acquaintances, sexual abuse can form part of a pattern of coercive control that is accompanied by the threat of re-victimization, physical violence, harassment, and malicious accusation.

ONS (2021) data suggests that less than a third of male victims of sexual assault have ever told anyone about what happened to them. Only one in five male victims report to the police. In Greater Manchester we know that the average time taken by male victims to report to the police following a sexual assault is 9.5 years - and that only 5.9% of reports result in a suspect being charged. International research suggests that men who are abused as children by professionals in positions of trust can take considerably longer to disclose (Easton et al, 2014). In the UK, male sexual assault survivors are generally three times more likely to tell a family member, friend, or colleague than they are to report to the police (ONS, 2021).

Reporting rates to doctors are also very low among boys and men who have been sexually assaulted in England and Wales. Only 21% of male victims of sexual assault have ever disclosed to a health professional. More commonly, male victims of unwanted sexual experiences seek support for trauma, depression, anxiety and drug misuse without disclosing their victimisation (Male Survivors Partnership, 2023; O'Leary et al, 2017). Younger groups of men who are victims will sometimes be known to service providers as children who have had undefined 'adverse childhood experiences.'

Impacts of Abuse and Non-Disclosure

One consequence of these low levels of reporting is that the trauma of sexual assault is compounded by secrecy. Most male victims will contend alone with the long term impacts of sexual assault. These impacts include fear, anger, terror and self-blame, self-loathing, physical injury, sexual dysfunction, sexually transmitted infections and diseases, and difficulties with building close relationships. Survivors of sexual violence are vulnerable to a range of mental health problems, including common but nonetheless distressing mental health difficulties like anxiety and depression, as well as more acute conditions typically diagnosed as disordered eating, psychosis, and personality disorders (Hartill and Green, 2023; Varese et al, 2012). When sexual abuse is shrouded in secrecy, some men struggle to sustain positive relationships with their families, drop out of their studies, or struggle to deliver on work commitments. Some survivors become overly reliant on substance use to cope with emotional problems. The very high proportion of men in the prison population with experiences of sexual abuse is a partially derivative of this tendency to self-medicate. The rage survivors who have had limited support sometimes exhibit also contributes to their high levels of criminalisation. Rates of sexual abuse victimisation are also known to be very high among the convicted sex offender population, though it is important to note that most boys and men who are sexually abused never commit sexual offences and many male victims are acutely concerned about the dangers of perpetuating a cycle of abuse (Drury et al, 2019).

Case Study: Christian

I4YPC was contacted by the Assistant Headteacher of a school, seeking advice and engagement of extra support for Christian, a Year 10 pupil who had displayed inappropriate behaviour in Year 7. Concern in the school was growing for Christian's wellbeing and those of other pupils he was in regular contact with.

The school had put Christian into isolation and informed his mother of potential further removal from the classroom and all responses were punitive. No formal assessment of his psychological or emotional needs appeared to take place whilst his behaviour continued to escalate to an incident of physical and inappropriate touching with a peer; then later displays of harmful sexual behaviour.

I4YPC met with Christian in the school and later in the organisation's creative hub at MediaCityUK. The work undertaken to support Christian to express himself in a safe way identified the incidences of harmful sexual behaviour were not isolated and so I4YPC carried out safeguarding process which also included safeguarding Christian from further harms.

It was discovered Christian spent a lot of time gaming online. He disclosed having had 'virtual sex' with girls in online forums. This was of concern to the I4YPC team.

Through engaging Christian in creative activities, I4YPC were able to get Christian to think more about his behaviour and to consider undertaking a mechanics course one day a week to supplement his education. Christian then began to 'safely' share his own experiences of trauma with I4YPC workers. Their informal and targeted mentoring service gave Christian a solid foundation to build trust with adults and to reduce the dangers he presented to other pupils.

A Pioneering Response

In Greater Manchester we are fortunate to be home to We Are Survivors (formally Survivors Manchester) which is one of only five male specific sexual violence organisations in the UK. This pioneering charity founded in 2009 to support male victims of sexual abuse, rape and sexual exploitation has grown to supporting over 2,500 men every year, both in the community and across the region's prison estate.

The services We Are Survivors currently provide are based on a trauma informed and responsive framework (Herman, 1992). These include:

- Online, digital and telephone support.
- In-person drop-In support.
- Community Building support
- 1:1 Trauma Informed Therapy that is NHS IAPT/Talking Therapies compliant.
- Group and Facilitated Peer-Support activities.
- Access to Independent Sexual Violence Advisors.
- Prison based therapy and groupwork.

We Are Survivors also provides training - including to Greater Manchester Police and three Greater Manchester Universities - and consultancy to the GMCA, the Ministry of Justice, the Home Office, and NHS England, as well as evidence to the government's End-to-End Rape Review. In collaboration with the NHS and HMPPS, We Are Survivors has developed the first ever service for prisoner-survivors in UK prisons, providing trauma responsive talking therapy to those serving custodial sentences in the North-West of England.

GMCA are committed to supporting the work of We Are Survivors, ensuring the continuation of bespoke services for male victims of sexual abuse and enabling the VSCE sector in Greater Manchester to play a leading role in reshaping the national agenda. Over the next ten years, GMCA will seek to further develop the provision for male victims of sexual abuse in five key areas: supporting survivors, raising public awareness; reducing barriers to disclosure; improving the criminal justice response and early intervention.

Supporting Survivors

While Greater Manchester has a distinctive history of advocating for the rights of LGBTQ+ people, few of its VCSE organisations are focussed on addressing the needs of male victims of sexual assault. Likewise, children and young people can find it particularly difficult to reach out to services that deal with the kinds of complex problems often only disclosed by adults (Durham, 2003). And we know that there are

many hard-to-reach contexts in which young men become vulnerable to sexual abuse and grooming behaviours. Young men are particularly vulnerable to sexual abuse and exploitation within criminal enterprises and paramilitary groups that service illicit drug markets (Bringedal Houge, 2014; Montgomery-Devlin, 2020); within institutional care and among children who have a parent in prison (Fox, 2016) and within young offenders' institutes (YOI) prisons and remand centres (Howard League of Penal Reform. 2014; McKie et al, 2021).

In Greater Manchester we are committed to providing trauma informed services to support all men and boys who have suffered rape, sexual assault and sexual exploitation. This includes some of the most socially excluded groups of men and boys living in the region. Given the risks of sexual assault within prison, it is a source of concern to us in Greater Manchester that young male asylum seekers in the UK have been detained in British prisons whose primary function is to house incarcerated sex offenders. Refugee and asylum seeker populations will often include men and boys who have been subject to sexual abuse in the context of war and torture, or who have been forced to witness rapes perpetrated against their mothers, sisters, and partners (Sadler et al, 2021). Men from faith based communities will face barriers to disclosure, particularly where abuse has been perpetrated in clandestine contexts, as will men who have sex with men who are not publicly out as 'gay'.

In Greater Manchester we are committed to delivering a trauma-informed response to male victims of sexual assault, as well as those who are subject to the widening range of image based forms of sexual abuse (McClynn et al, 2021). Over the next two years, we will:

- Review the extent to which our current support services are meeting the needs of the various populations of men and boys in Greater Manchester, ensuring the services we provide accessible to as wide a range of demographic groups as possible. We will examine the respective profiles of the male victim populations reporting to the police, St Mary's SARC and We Are Survivors to identify gaps in our service provision.

- Consult with communities that are not accessing our current services and work with men and boys from those communities to ensure our current provision adjusts to meet their needs.
- Explore with Greater Manchester Probation Service and Youth Offending Teams how best to extend the reach of the OUT Spoken programme for prisoners who are also sexual assault survivors to men who are serving community sentences or released on license.
- Guarantee men and boys who report a sexual assault to the police be offered an assessment for trauma informed support within 10 working days of making that report.
- Work with the VCSE sector to establish a portfolio of services for the different groups of men who face barriers to seeking support. These include: men who have sex with men; victims of child sexual abuse; men in coercive relationships with women; men who identify as gay, bisexual, gender queer and/or trans; men who are victims of drink-spiking; men who have been abused in institutional settings, such as care homes, schools, sports clubs and places of worship; and men with criminal histories, including those in custody or implicated in drug-dealing; men who use illicit substances and/or who live with partners who are substance dependent; and men and boys who are under investigation for or convicted of committing sexual offences.

Raising Public Awareness

Supporting survivors will not in and of itself reduce the incidence of sexual assaults suffered by men and boys in Greater Manchester. Academic research suggests that myths about male rape and misunderstandings about how it is defined in law proliferate in the general population, particularly among students (Javaid, 2017a). Given how important the initial reactions of those to whom survivors disclose are, it is imperative that we raise awareness in Greater Manchester about the nature of sexual abuse experienced by men and boys, the importance of believing survivors when they disclose, and the different forms of support victims and survivors can access.

To increase understanding of the needs of men and boys who have been sexually assaulted we will:

- Launch a new public awareness campaign, signposting the support services available to men and boys, and raising awareness among friends and family members about how they too can support male victims and survivors.
- Develop materials to draw attention to the risks of online harms facing boys and young men, including through gaming, dating applications, and pornography websites.
- Undertake a programme of engagement in our secondary schools, further education colleges and five higher education institutions utilising the *Ripped* drama and film and associated learning programme to bolster understanding of the needs of male survivors and the challenges they face in breaking their silence.
- Work in partnership with the business sector, especially the night-time economy, to draw attention to how best to safeguard male survivors and report concerns about those who present a risk of harm to others.

Reducing Barriers to Disclosure

In all our materials we will seek to educate men and boys about reporting to Sexual Assault Referrals Centres, where emergency medical care can be offered alongside the forensic medical examinations needed to capture evidence that can be used to prosecute perpetrators. We will also promote the range of confidential and specialist support services available to men and boys offered by We Are Survivors. We will do all we can to reduce the barriers to disclosing sexual assaults and abuse suffered by men and boys. This will entail:

- Making sure the implementation of the 'Right Care, Right Person' strategy embodies a gendered lens that is sensitive to the needs of men who have experienced gender-based violence and/or who are living with the trauma of its aftermath.
- Ensuring the services available to all victims at SARC are specifically promoted to men and boys in all healthcare settings including GP surgeries,

community pharmacies, accident and emergency wards, and sexual health clinics.

- Raising awareness among professionals of the high prevalence of sexual assault and abuse among men who present with substance use, mental health issues, adverse childhood experiences, or problems with attention, anger, or violence
- Promoting a culture of professional curiosity that encourages all city-region professionals to ask men and boys if they have experienced 'unwanted sexual experiences' that amount to sexual assaults and abuse.
- Providing training and support materials to NHS and VSCE organisations regarding the needs of male survivors and support services for them.
- Ensuring those providing services for substance users, men and boys with mental and/or sexual health problems, and men and boys at risk of suicide and self-harm are upskilled in anticipating disclosures from male victims.
- Targeting awareness raising activities towards populations at high risk of sexual exploitation, i.e. male care leavers, young men entering or leaving the prison estate, men with learning difficulties and mental health problems, boys and men with physical and/or learning disabilities, those at risk of 'cuckooing', being harassed by criminal gangs, or implicated in county lines drug dealing.
- Developing screening tools in sexual health clinics across Greater Manchester to identify and clarify the support needs of male victims of sexual abuse.
- Clarifying service pathways within health contexts that are non-judgemental with respect to so-called 'risky' behaviours, such as ChemSex, and conducive to providing a culture of care and education to men and boys.

Improving the Criminal Justice Response

Research with both police and prison officers in the UK reveals limited understandings of the law on sexual assaults against men in the UK, as well a reluctance to offer support to victims (Brown et al, 2022; Javid, 2017b). There is an urgent need to enhance professional understandings of the needs of male victims of

sexual abuse in criminal justice contexts. This includes the need to develop trauma informed responses that recognise the challenges survivors face in making disclosures and which redress the long term support needs that can follow from breaking their silence.

To improve the criminal justice response to male survivors of sexual assault, GMCA will:

- Source trauma informed training that is informed by the voices of male survivors in responding to male victims of sexual assaults for Greater Manchester Police.
- Open this training to other criminal justice and social care professionals in the city-region.
- Ensure all IDVAs and ISVAs are routinely appraised of the diversity of needs of male victims in the city-region.
- Ask the Crown Prosecution Service to report annually on how it is delivering on the public statement it made in 2017 on male victims with respect to cases brought in Greater Manchester.
- Work with Greater Manchester Probation and Youth Offending Services to develop effective interventions to manage men and women who have been convicted of sexual offences.
- Ensure our domestic abuse interventions address sexually abusive behaviours when focussed on perpetrators who have abused men.
- Develop an early warning system that will alert stakeholders in the Rape and Serious Sexual Offence sector to emerging issues and threats to create a quicker response to them.
- Provide support to victims of 'non-current' forms of sexual abuse who are having to meet or deal with those who previously abused them. This will include supporting survivors having to contend with former abusers who have returned to the locality, or who have been released from custody, or who have embarked on restorative justice interventions.

- Develop a new pathway of support for victims of sexual abuse considered to be at risk of committing sexual crimes, including the downloading and share of online child sexual abuse materials.

Early Intervention

We know that rape and sexual assault are rarely ‘one-off’ crimes: that victims will often be assaulted on multiple occasions, that young people are often groomed to tolerate sexual abuse in silence, and that when left unchallenged, perpetrators will violate multiple people. It is therefore critical that interventions to safeguard victims do not wait for criminal investigations to conclude or for convictions to be secured. It is critical that when men and boys disclose sexual abuse that measures are put in place to protect them, and others known to the suspect. It is also important to provide interventions that redress signs of inappropriately sexualised behaviour and aggression, especially among boys and young men, much of which can be a response to trauma. To best prevent the sexual abuse of men and boys, GMCA will:

- Provide pathways of support through the Violence Reduction Unit in all our community safety partnerships for young people at risk of causing harm following childhood experiences of domestic and sexual abuse.
- Work with social services to identify young people at risk of victimisation.
- Work with GMP to clarify and strengthen the conditions that can be placed on suspects released under investigation.
- Support safeguarding leads in all schools, colleges, and pupil referral units to provide safe spaces for boys and young men who have been sexually abused or exploited to make disclosures as soon as possible and to support them over the long term, following such disclosures and in ways consistent with our Serious Violence Duty.
- Support schools to educate young people about the risks involved in downloading and sharing sexually explicit material, including the production and consumption of AI generated pornography.
- Actively monitor outcomes to check we are delivering comparably high-quality services to all young men in the city-region, including those from minority

ethnic backgrounds, boys and men with disabilities, those that identify as gay, bisexual and/or trans, and those who are neurodivergent.

- Ensuring schools provide high quality education to boys and young men about sexual consent, how it can be complicated by power differentials, age differences, and professional obligations where there is a duty of care.
- Deploying our press and communications team to ensure responsible reporting of cases involving the sexual abuse of boys and men in the media.

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