A Qualitative Examination of the Lived Experiences of Men Identified as Perpetrators of

Intimate Partner Violence

Jennifer White

Lakehead University

Abstract

The purpose of this study was to explore the lived experiences of males identified as perpetrators of intimate partner violence (IPV). IPV is a complex social problem that has many damaging consequences for individuals and families (Devaney & Lazenbatt, 2016; Johnson, 2016). The intent of this research is not to emphasize the rights of men over women but to provide the opportunity for men identified as perpetrators (MIAP) to discuss their perspectives on IPV. Understanding the complexity of IPV directly from male perpetrators is one step to address violence prevention, and interventions for both men and women. Thus, the goal of this research project was to gain a more thorough understanding of men's experiences with IPV, specifically in Thunder Bay. This study was completed with qualitative methods of descriptive phenomenology through semi-structured interviews with thirteen men in the community of Thunder Bay. The results from participants highlight the complexity of relationships and challenges dominant narratives of IPV. The key themes revealed were: 1) Complexity in Intimate Relationships and IPV; 2) Precipitating Factors to IPV; 3) Disconnected Experience with the Legal System; 4) Ripple Effect of IPV on Life; 5) Impact of Support Systems; and 6) Hope for the Future & Social Change. These key themes uncovered the essence of the data which was an *Altered Sense of Self*. Exploring IPV could broaden understandings of IPV and subsequently improve the quality of life for all individuals impacted by it to better inform the systems that address IPV. Such research implies a need for more diverse methods to assist men and their families struggling with IPV. This research was supported by the Social Sciences and Humanities Research Council (SSHRC): Canada Graduate Scholarships – Master's Program.

Keywords: Intimate Partner Violence, Male Perpetrators, Lived Experience, Qualitative Methods, Descriptive Phenomenology, Masculinities

Acknowledgements

To begin I would like to thank the thirteen men who had the courage to trust me with representing their experiences. I hope that I have relayed your experiences well and that they will assist in improving the lives of other families that are impacted by IPV.

I would like to extend profound thanks towards my two supervisors, Dr. Jodie Murphy-Oikonen and Dr. Lori Chambers for their great support in advising, mentoring, and coaching me through the process of writing this thesis. I acknowledge and cannot appreciate enough the time and effort that went into guiding me. Your faith and encouragement in me motivated me to push through and succeed!

I am also incredibly thankful for my reviewers, Dr. Kathy Kortes-Miller and Dr. Gerald Walton, who provided great insight for my work. Your feedback was timely and immensely helpful.

I would also like to thank the agencies that supported my recruitment process and provided opportunities for me to present my work. Specifically, the Catholic Family Development Centre (Partner Assault Response), Faye Peterson (Caring Dads), Children's Aid Society, and the Violence Against Women Leads Group.

I want to extend a thank you to Dr. Leigh Potvin who inspired my initial interest in gender studies many years ago, and for instilling hope in me that I could achieve great things!

Finally, I express gratitude to my family and close friends (you know who you are), for providing undivided support and encouragement through my years of graduate school. I would not have been able to complete this thesis without them and their patience. Thank you so much!

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Chapter 1 – Introduction & Theoretical Framework

There have been changes in beliefs, services, and policies regarding IPV, many of which now take women's welfare more seriously and hold men accountable (Brownmiller, 2013; Paymar & Barnes, 2007). However, despite positive systematic changes, there is a severe shortage of violence prevention, intervention, and support services for male perpetrators of IPV (Canon, 2016) to ensure the best care and safety measures are provided to families impacted by IPV. Such changes or lack of support are especially relevant to the geographic area of Thunder Bay, where there are some of the highest rates of IPV across the country (Statistics Canada, 2013; tbnewswatch, 2015). In Ontario, it is estimated that a woman is killed due to IPV on an average of every thirteen days (Cross, Ham & Khan, 2018).

The research I conducted for my Masters of Social Work with a Specialization in Women's Studies examines the lived experiences of men who have been identified (by self or others) as perpetrators of violence towards their female intimate partners. The intent of this research is not to emphasize the rights of men over women but to provide the opportunity for men identified as perpetrators (MIAP) to discuss their perspectives on IPV (intimate partner violence). Understanding the complexity of IPV directly from male perpetrators is one step to address violence prevention, and interventions for both men and women. Thus, the purpose of this study was to explore the lived experiences of males identified as perpetrators of IPV. The goal of this research project was to gain a more thorough understanding of men's experiences with IPV, specifically in Thunder Bay, and how they perceive the support they receive in the community to address and prevent IPV. In doing so, this work contributes to academics, policy makers, and front-line workers understanding of the experiences of MIAP of IPV. Additionally, I highlight some of the strengths and limitations in services for this population and increases

awareness of the need for more diverse programming for violence prevention and intervention. I utilize a feminist theoretical perspective and qualitative research methods of descriptive phenomenology to explore the personal perspectives of MIAP. I focus on men who have been identified as perpetrators of intimate IPV through the legal system; however, some came to the project without intervention from legal systems and self-identified as struggling with behaviours of violence.

Understanding the experiences shared in this research may improve the quality of life for those impacted by IPV and may contribute to a decrease of harm in the rural environment of Thunder Bay (Cannon et al., 2016; Dutton & Corvo, 2006), where there are high rates of IPV (Statistics Canada, 2013; tbnewswatch, 2015) and narrow conceptions of masculinity (Tranter, 2005; Sullivan, 2009a). Such research is important given that current services are fragmented, brief, legally mandated, cost-ineffective, shame-based, and fail to acknowledge deeper reasons that may contribute to IPV (Devaney & Lazenbatt, 2016; Herman et al, 2014; Rizza, 2009; Walby, 2004). My thesis work utilizes the term *IPV* as opposed to *domestic violence* (DV) to distinguish the violence from child abuse or elder abuse (Ali, Dhingra & McGarry, 2016). Moreover, my thesis work specifically utilizes the term *males identified as perpetrators* (MIAP), as some men may not self-identify as perpetrators of IPV; however, they are identified as such by the legal system.

Theoretical Framework

Feminist Standpoint. The use of a feminist perspective assists in challenging dominant forms of knowledge through broadening understanding of how men view masculinities, as well as what underlying issues may contribute to the IPV in their lives (Hearn, 1998). Liberal feminist theories, epistemologies, and methods, challenge traditional knowledge, dominant power

structures, and binaries while focusing on empowering marginalized voices (Bell, 2014). Thus, my intention is that this research may assist in: informing violence prevention and intervention initiatives; raising awareness to challenge toxic masculinities that perpetuate patriarchal knowledge; and challenging oppressive social ideologies that perpetuate IPV and unhealthy conceptions of self.

This study carefully and mindfully works through a feminist lens, specifically with theories of masculinities, to not further privilege men or oppress marginalized individuals (Hesse-Biber, 2012). Instead, the intent is to observe the experiences of MIAP and challenge traditional aspects of patriarchal knowledge that perpetuate harmful and oppressive ideologies in regards to IPV (Bell, 2014; Tarrant & Katz, 2008), including, for example, the problematic assumption that men are inherently violent (Kimmel, 2008) due to innate biological drives (Duke et al., 2014).

My work utilizes a post-modern perspective that confronts essentialist and positivist standpoints of knowledge (Bromley, 2012), and analyzes power relations within socially created hierarchies of gender, class, race, and other intersecting factors of identities (Hillsburg, 2013). Western standpoints of knowledge are oppressive to other perspectives and promote a singular and monolithic standpoint of knowledge (Ramazanoglu & Holland, 2002). This results in the acceptance of dominant discourses as "natural" and the silencing of any who do not align with colonial expectations or perspectives in Western knowledge (Butler, 1990). Colonial standpoints of knowledge are based from power and dominations over others, which silences their viewpoint (Smith, 2012). As such, Western standpoints of knowledge are embedded in language (Culler, 1982), culture (Hesse-Biber, 2012), research, and sciences (Bazzul & Sykes, 2011) and virtually all experiences of life (Mohanty, 1988). Thus, feminism works to raise consciousness of and

deconstruct problematic structures (Collins, 1991; hooks, 2000a), shift ways of thinking,

(Sheman, 1993), and promote silenced voices (Lugones & Spelman, 1983).

The use of a feminist framework is important in my work as "feminist criticism is a

political act whose aim is not simply to interpret the world but to change it by changing the

consciousness of those who read and their relation to what they read" (Culler, 1982, p.52).

Feminist methods align with the objective of exploring and addressing problematic patriarchal

structures that facilitate complacency towards violence. Through this exploration, the

participants were given a private space that facilitated open conversation, where rapport and

discussion assisted in developing new understandings of IPV which may subsequently challenge

problematic norms that perpetuate IPV and create new pathways of violence intervention

(Fleming et al., 2016; Smith et al., 2015). The utilization of feminist theory, specifically in

relation to masculinities complements my work with MIAP of IPV (Flood, 2001). Like Ericsson

et al. (1999), I argue that conversations about or critiques of masculinity are not inherently anti-

male; rather, masculinities are an important subject for discussion because unhealthy practices of

masculinity negatively affect everyone (Katz, 2006; Tarrant & Katz, 2008).

Theories of Masculinities. Masculinities are not equivalent to men (Connell, 2000b;

Halberstam, 1998), and it is important not to view gender as an independent "sex category" or in

a binary fashion (Schrock & Padavic, 2007). Studies of masculinities focus on analyzing gender

hierarchies (Connell & Messerschmidt, 2005), and the ways in which male privilege places men

in power over one another, women, and other marginalized identities (Fleming et al., 2015).

Therefore, the purpose of this research study is not to blame men, but to recognize and critically

analyze the role of patriarchal systems that continue to perpetuate problematic power dynamics

that are oppressive and harmful to all (Earp et al., 2013; Le Francois, 2013). This work notes the

ways in which hegemonic masculinities are internalized in order to address their problematic

nature (Culler, 1982).

Feminism and Theories of Masculinities. Connections to feminist theories of gender

and power dynamics are particularly important as men's violence to women "is often not a

priority focus in much […] research on men and masculinities" (Hearn, 2012, p, 590). Gender is

not monolithic, as it intersects with other aspects of identity, such as "class, religion, race,

experience, and much more" (Fox, 2002, p.16); however, there are commonalities across genders

that warrant attention. An example of such commonalities are biochemical and physiological

processes as well as behaviours (Tobach, 2001). Gender must not be used to assume or predict

violence, but rather to analyze the ways that "violence is a means by which gender is

constructed" (Schrock & Padavic, 2007, p.627). Research about IPV often fails to address the

complex role of masculinities (Fleming et al., 2015). Such negligence is harmful as insufficient

attention towards core influencing factors of IPV neglect the well-being of perpetrators and

prevents victims and survivors from receiving appropriate care, support, and safety (Dworkin,

Fleming & Colvin, 2015).

Theories of feminism and critical masculinities work to view embedded, internal

structures that influence gendered constructions (Connell & Messerschmidt, 2005). Utilization of

feminist methods with masculinities allows a deconstruction of normative assumptions and

beliefs that surround heteronormative violence by "marking the unmarked [to see] the invisible"

(Lundström, 2010, p.72). Thus, the use of feminist perspectives and theories is beneficial in

challenging entrenched dominant power structures that perpetuate problematic ideologies about

socially constructed gendered hierarchies that facilitate violence, normalize harm, and oppress

individuals (Bell, 2014; Bromley, 2012; Hesse-Biber, 2012). A feminist intersectional approach,

which observes the overlapping and interrelated nature of factors that contribute to oppression, enables critical observation and analysis of the connection between various social determinants of health, hegemonic masculinities, and IPV (Hillsburg, 2013; Mikkonen & Raphael, 2010).

  Applicability to School of Social Work. Feminist theory complements the School of Social Work as Social Work's origins stem from early feminist movements that assisted those who were oppressed (Howe, 2009; Lugones & Spelman, 1983). Accordingly, the use of feminist theory, specifically masculinities, aligns with the need to better address violence prevention and intervention programs (Hong, 2000; Walby, 2004). This compatibility is important for researchers, educators, and practitioners who work with perpetrators and victims of IPV to provide more appropriate quality of care, safety measures, and interventions (Calton, Cattaneo & Gebhard, 2016; Fleming et al., 2015; Meyer, 2012). Social work is eclectic in nature with a broad scope of services, so this research benefits the various roles that Social Work involves (Howe, 2009). This research benefits men identified as perpetrators, as well as women and children in numerous ways. A powerful example is that homicide rates of women killing men in self defense have decreased as a result of efforts and resources to combat IPV (Kimmel, 2002; Saunders, 2002).

  My research is an important contribution that may provide opportunity for individuals impacted by IPV to have improved mental health, healthier relationships, and, overall, more positive lives (Katz, 2006). The improvement of quality of life by reducing instances of IPV has no singular solution, as IPV has no single cause and is complex with extensive and devastating impacts (Johnson, 2016; Mauricio & Gormley, 2001; Walby, 2004). However, the confrontation of hegemonic masculinities, problematic attitudes, and gendered assumptions in regards to IPV

assists in mitigating harm and better the lives of perpetrators, victims, survivors, and others who may be affected by such violence (Jewkes et al., 2015a; Reyes et al., 2016).

Social Location. One must be mindful of how theory is utilized and the personal biases one brings forth during research (Patton, 2002; Tufford, 2012); for example, how one's social location influences research participants (Bell, 2014; Berger, 2015). Despite the privileges that I embody as a cisgender, white, pansexual, able-bodied, middle-class, young female, I am affected by and interconnected with systems of hegemonic masculinities. This is due to the far-reaching nature of white heteronormativity, and how it can be harmful to all (Earp et al., 2013; Le Francois, 2013). I have been silenced and affected by such ideologies due to my identity as a woman, but I am also an outsider to patriarchal and heteronormative privileges who is forced to live within such ideologies in order to survive in a colonial, patriarchal, heteronormative setting (Culler, 1982; Lundström, 2010).

Furthermore, I am an active participant in dominant discourses despite my resistance to them (Jansen, 2015), and was continually conscious of this throughout my work. This does not mean that despite not being a cisgender man, I do not participate in masculinities, as gender is a fluid social construction that is ever changing and is influenced by interactions with others (Connell & Messerschmidt, 2005). However, the confrontation of normative assumptions and beliefs about IPV and masculinities is vital to explore avenues of harm prevention and intervention (Bromley, 2012; Reyes et al., 2016). Regardless, I am an active participant in systems of oppression that favour men, but can be harmful to everyone, and it is critical that one is conscious of their privileges when engaging in such research (Le Francois, 2013; Earp et al., 2013).

It was also important to reflect on personal emotions that were present when working with the men who participated in my research. Graphic topics of violence were discussed, which were difficult at times for me to hear as I have been in emotionally abusive relationships with men. As a result, I have been subjected to disbelief in regards to the validity of my emotions. Therefore, due to my personal experiences with the naturalization of violence and harm from dominant toxic masculinities I took deep interest in this topic. I also completed my fourth-year practicum of my Bachelor of Social Work at the Thunder Bay Counselling Centre where I worked in the Violence Against Women unit which created furthered interest in the topic of IPV. Personally, it was very important to further explore this topic and contribute to addressing it somehow in my hometown, the community of Thunder Bay. I also experienced emotional discomfort at times throughout the research process due to the sensitive nature of the topic; however, it is an important part of theoretical processes to challenge my own privileges, assumptions, biases, and negative beliefs towards men who are violent towards their intimate partners and surrounding hegemonic masculinities (Lundström, 2010). Discomfort can be necessary to create change and challenge automatic assumptions (Potvin, 2016; Reid, 2006).

Critical reflection allows me to look past my own internal biases, and work towards social change and strive for violence prevention (Scantlebury, 2005; Smith, 2012). It was difficult to combat subconscious beliefs about unilateral violence and IPV. Although this type of violence is frequent, the research I conducted challenged my embedded assumptions and I needed to be open to understand the experience of bilateral violence, as noted by many participants. I acknowledge the limitations in this work due to my identity as a female, which may have created certain barriers to open communication. Due to my identity and presentation as a cis-female, some men may not have wanted to participate in the research, disclose their entire

experiences, or felt comfortable doing so. Thus, it was vital to create a space for participants that reflected openness and safety (Smith et al., 2015; Southwarth, 2016), which was facilitated by reflection of social location. It was important to have safeguards in place when discussing potentially difficult topics. I adhered to Lakehead REB standards to ensure the research followed ethical protocols. I also remained in close contact with my thesis supervisors, debriefed when needed, and maintained self-care routines.

Strengths and Limitations

Due to the thorough nature of a phenomenological study, feminist theories of masculinities complement the research with MIAP and allow for critical analysis of rich data (Bergoffen, 2012; Dowd, 2010). With self-reflection and support from my supervisors, I remained grounded in feminist theory and praxis, which, according to Culler (1982), assists in challenging embedded norms and biases. The theoretical approach of my research supports many of the fundamentals of phenomenology which I elaborate upon in Chapter 3 - Methodology.

Despite the many strengths of feminism, there are limits to its capabilities, especially in a Western setting due to dominant problematic ideologies (Simpson, 2017). Lorde (1981) emphasizes such limits in her metaphor, the Master's Tools, where Western feminism has had many limitations in the achievement of its goals as its focus has been too narrow and because it utilizes systems created from patriarchal institutions (Ramazanoglu & Holland, 2002). Western feminism may fail to empower marginalized voices if it neglects to value true difference and continues to be entangled with problematic ideologies (Lorde, 2007; Mohanty, 1988). This can sometimes be seen as a false sense of intersectionality (Hillsburg, 2013) that fails to account for women of colour, poor women, women with disabilities, immigrant women, queer women, and other marginalized women (hooks, 2000a; Lorde, 1981). Thus, hegemonic ideologies of

feminism have, at times, prevailed despite feminism's efforts, which further assert the

importance of critical reflection and engagement with research (Anderson, & Dana, 1991).

Despite the limitations feminism has had and continues to have (Lorde, 1981; Simpson,

2017), it is important to be mindful of its restrictions; however, doing so does not render it

useless. This form of theoretical analysis is imperative to observe intersectional factors that

impact individuals, and raise awareness of problematic norms that may otherwise be invisible

(Hillsburg, 2013; Lundström, 2010). Ultimately, feminist theory and theories of masculinities are

vital to this research with men who have been identified as MIAP of IPV. To address harmful,

hegemonic systems (Fleming et al., 2015) it is imperative to seek new strategies of violence

intervention and prevention in a particular geographically and ideologically isolated area

(Tranter, 2005).

Chapter 2 – Review of Literature (Background)

Introduction to IPV

Intimate Partner Violence (IPV) is a complex social problem (Johnson, 2016; Mauricio & Gormley, 2001) with damaging impacts on individuals and families (Black, Weisz, & Bennett, 2010; Devaney & Lazenbatt, 2016; Walby, 2004). IPV encompasses "behavior within an intimate relationship that causes physical, psychological or sexual harm" carried out through physical aggression, coercion, control, non-consensual sex, and limits of basic needs (Hegarty, 2011). IPV can be detrimental to one's health in many ways, such as the development of a disorder such as depression (Ouellet-Morin et al., 2015), post-traumatic stress disorder (Trevillion et al., 2012), or other mental health issues (Prochaska & Norcross, 2013). IPV also places a heavy toll on the systems that aim to address it, costing billions to "the criminal justice system (including police), health care system (including mental health), social services, housing and refugees, […] civil legal services" as well as employment systems (Walby, 2004, p. 16).

The complexity of IPV also impacts multiple systems and results in detrimental effects on society (Gondolf, 2007; Murray et al., 2015; Niolon et al., 2015; Walby, 2004). Macro, micro and mezzo systems are all interconnected and subsequently impact each other. Globally, there are high reported rates of IPV (Krug, 2002; WHO, 2013), but specifically in Thunder Bay there are high rates compared to the rest of the country (Statistics Canada, 2013; tbnewswatch, 2015). On a micro level, there are immediate effects on an individual's physical, psychological, and sexual health, economic circumstances, intergenerational effects, and social implications (Alonzo, 2014; WHO, 2012). Such aspects of IPV may also impact mezzo systems, such as families and other individuals who are connected to the violence (Eisikovits et al., 2008; Holden, 2003; Kilpatrick & Williams, 1997).

Many negative factors from IPV can lead to permanent lifelong repercussions, and may ultimately lead to the end of one's life (WHO, 2010). It is hard to estimate the specific cost in relation to IPV due to the hidden nature of this social issue (Hegarty, 2011); however, the individual effects translate into heavy costs on macro systems such as health care, social, and legal services (Devaney & Lazenbatt, 2016; Pathak, Feder & Sohal, 2017). In 2002, it was estimated that Canada spent over a billion dollars in relation to IPV (Garcia-Moreno & Watts, 2011). The Western methods by which IPV has been treated as a criminal or medical problem, rather than a systemic public health issue, further neglects to address the intricate nature of IPV (Murray et al., 2015; WHO, 2010).

Despite the detrimental effects of IPV (Black et al., 2010), there is a lack of sufficient supports or policies in place to prevent or address it (Fairweather, 2012; Johnson, 2016). Historically, IPV by men against women and children was condoned and accepted (Devaney, 2014). An example of this was the "rule of thumb" where a man was allowed to beat his wife with a rod that was no thicker than his thumb (Davis, 2008). Although there have been changes to policies and programs, there are still not effective methods in place to mitigate harm (Devaney & Lazenbatt, 2016). Violence towards men from their female spouse was considered a form of petit treason, and was equivalent to attacking the king (Sheehy, 2014). Current understanding of IPV is predominately centred on the experiences of female victims (Herman et al., 2014), as the voices of men are lacking in the literature of IPV and subsequently there is a lack of diverse methods of intervention and prevention available to both perpetrators and victims (Devaney & Lazenbatt, 2016). This is the case due to the emergence of IPV programing that stemmed from female activists who focused on their own experiences and safety, not the experience of men who had caused harm to them (Novisky & Peralya, 2015). To prevent violence in the future,

there needs to be a shift from solely this narrow paradigm to one that encompasses a broader scope.

Hegemonic Masculinities

Masculinities are social creations that come in many different forms; however, hegemonic masculinities are the most idealized form in North American cultures (Holter 2005; Smith et al., 2015). Masculinities are socially molded and, as such, they are fluid and non-essentialist, yet regulated and enforced by social norms (Connell & Messerschmidt, 2005), but nonetheless, it is important to analyze themes in masculinities and their powerful implications (Gardiner, 2005; Wilchins, 2006). Hegemonic masculinities encompass and encourage attributes that revolve around competitiveness, honour, independence, power, wealth, strength, and stoicism while simultaneously devaluing and distrusting emotional vulnerability, passivity, homosexuality, or anything related to "traditional femininity" (Kimmel, 1992; Price-Robertson, 2012; Smith et al., 2015; Southwarth, 2016).

For example, gay or transgender men are excluded from notions of dominant masculinities. However, they may reclaim their own versions of masculinities (Calton et al., 2016; Meyer, 2012). Hegemonic masculinities are also greatly associated with whiteness, and white men tend to hold more social power than others (Connell & Messerschmidt, 2005). There are also Black masculinities, that are a response to masculinities that marginalize men of Colour (Kimmel, 2008), however, for the purpose of this thesis the primary focus will be on hegemonic masculinities. Racist ideologies within hegemonic masculinities stem from colonial epistemologies that create racial hierarchies where white individuals are viewed as the most normative and socially acceptable (McGuire et al., 2014). This asserts further importance to

incorporate intersectionality into gendered analysis, as racial hierarchies (and other hierarchies) exist within gendered ones (Hillsburg, 2013).

Analysis of dominant hegemonic structures is important when work is completed surrounding masculinities, as dominant discourses are accepted in society, which grants invisibility to their problematic nature (Carastathis, 2008). Furthermore, masculinities have a complex impact on all "individuals' [senses] of self, [experiences] and life [opportunities]" (Lundström, 2010, p.72). Hegemonic masculinities have far-reaching effects, and therefore influence laws, policies, procedures, and, most importantly, individuals' lives (Jewkes et al., 2015b). All people are influenced by hegemonic masculinities in various socially constructed manners (Tarrant & Katz, 2008), and suffer from attempts to achieve impossible ideals of masculinity (Smith, 2012). Similarly, rejection of such structures might also result in various forms of suffering or harm (Thomas, 2005). Many men do benefit from mirroring such traits, and may be accorded various social privileges above others as a result (Kimmel, 2008).

Despite many different constructions of masculinities, most men are pressured to embody hegemonic traits to have power among other men (Connell & Messerschmidt, 2005). Hegemonic masculinities may transform over time, but they will resemble whichever traits happen to be most useful for obtaining and maintaining power that oppresses others as a result (Duncanson, 2015; Hooper, 2001). Anyone who does not possess and display traits of hegemonic masculinity is at risk of harm as this form of masculinity is "restrictive to men and oppressive to all" (Tarrant & Katz, 2008). This emphasizes again that masculinities do not just revolve around men, but social constructions of gender and hierarchies (Connell & Messerschmidt, 2005). Examples of the ways in which all are influenced by hegemonic masculinities, and not just men, are the normalization of violence and degradation of others (Katz, 2013), the various forms of harm

individuals may face if they do not adhere to hegemonic norms (Holter, 2005), and the toxic nature of compliance to such norms (Dworkin, Treves-Kagan, & Lippman, 2013; Morgan, 2005).

Hegemonic masculinities do not equate to violence (Jewkes et al., 2015b), but ideologically, they legitimate the subordination of those who do not position themselves in relation to such traits (Connell, 2005a; Smith et al., 2015; Tarrant & Katz, 2008). Thus, even if one embodies other forms of masculinities or other social constructions of gender, hegemonic traits hold the most power due to social hierarchies of privilege (Connell & Messerschmidt, 2005). As such, many men strive to embody those traits to "seize agency, create space, and become men" (Kimmel, 2008, p.115), or avoid negative circumstances or other forms of harm (Holter, 2005). In *Guyland*, Kimmel (2008) explores narratives of masculinities and finds that at times "[men] use violence as a way to restore their manhood which has been challenged" (p. 90). Widely accepted and normalized violence enforces other problematic ideologies towards violence and is perpetuated "by a male-dominated society [and] can leave women [and other marginalized individuals] feeling powerless" (Prochaska & Norcross, 2013, p.358).

Other forms of violence that may be promoted or encouraged from toxic forms of masculinity are sexual, emotional, or physical violence (Dworkin et al., 2013; Hearn, 2012; Katz, 2008), degradation and oppression of others (Fleming et al., 2014), which may come in the forms of hazing (Kimmel, 2008) or other demeaning methods (Kimmel, 1995), self-harm and suicide ideation (Southwarth, 2016), and other extreme acts of violence (Tarrant & Katz, 2008). Many of these acts of violence or forms of masculinities are covertly embedded in society, which makes toxic masculinities more difficult to address (Bazzul & Sykes, 2011; Bromley, 2012; Fleming et al., 2015). Not all men inhibit hegemonic or dominant masculine traits, and men in powerful

positions may not embody such traits (McKay, Micosza, & Hutchins, 2005; Morgan, 2005). Regardless, there is immense pressure to conform to them due to the backlash or harm caused by hegemonic masculinities that non-conformers face (Connell, 2005b; Holter, 2005; Katz, 2006).

Thus, the severe harm of hegemonic masculinities that promotes unhealthy ideologies and degradation of others as a result of socially accepted behaviour cannot be ignored (Connell & Messerschmidt, 2005; Holter, 2005). Privilege is often guarded with invisibility, where those in power do not see the extent of their power and influence over other people who do not hold such privilege (Connell, 2005a; Smith et al., 2015). Essentially, hegemonic masculinities normalize power inequalities and degradation of those who are not in power (Southwarth, 2016).

Geographic Context. In Northwestern Ontario, there are high rates of IPV (Statistics Canada, 2013; tbnewswatch, 2015) and less diversity in expression of masculinities (Tranter, 2005). This area's social fabric consists of predominantly white working-class individuals who exude hegemonic masculinities (Stolar & Sacchetti, 2013). Thunder Bay has a strong history in the industrial, forestry and trade sector (CEDC, 2009), and as such has limited expansion of different masculinities. Such hegemony occurs due to the nature of power hierarchies the population in the Thunder Bay region, that promotes sexist homophobic responses, opposition of femininity, and "ritualized gender-specific social patterns (such as [masculine dominated sports] and hunting)" (Tranter, 2005, p.109). Despite the high percentage of Indigenous people and an increasing number of immigrants in Thunder Bay (Statistics Canada, 2016), oppressive hegemonic masculinities have a strong power over others in this city.

Such behaviours are typical traits of hegemonic masculinities, but the rate at which the privileging and encouragement of hegemonic traits occurs in Thunder Bay is especially high due to the isolated nature of this location and lack of cultural diversity in dominant discourses (Stolar

& Sacchetti, 2013; Sullivan, 2009b). No instances of IPV are precisely the same (McBride &

Janine, 2016) and masculinities are complex with various expressions (Connell, 2005b), but

similar themes may be present in certain regions or cultures (Connell, 2005a). As such, these

dynamics call specific attention to the population of Thunder Bay, and the homogenous forms of

masculinities (Sullivan, 2009a) that are exhibited in this geographic area with troubling high

rates of IPV (Statistics Canada, 2013; tbnewswatch, 2015).

Connection between Hegemonic Masculinities and IPV

The privilege that people who embody hegemonic traits hold over other marginalized

individuals, in the context of IPV, is entrenched in society (Connell & Messerschmidt, 2005) and

is exuded in multiple facets, both visible and invisible (Pratt, 2007). An example of visible

factors may be physical violence (Lees, 1993) and high statistical rates of IPV (Goodmark,

2013), whereas invisible factors would be covert systems that embed normalized ideologies of

violence and erasure of other non-normative traits, such as non-androcentric or non-patriarchal

contexts (Bromley, 2012; Culler, 1982). A deep analysis of hegemonic masculinity is required to

allow for deconstruction of dominant discourses that surround complacent violence, unhealthy

notions of identity, expression of emotions, and relationships with others. To further challenge

hegemonic norms would make the invisible visible, allowing for a more critical analysis of

embedded oppressive practices (Scantlebury, 2005; Pratt, 2007).

Theories of masculinities specifically relate to IPV, as systems of hegemonic

masculinities normalize violence and silence those who attempt to combat such problematic

social norms (Connell, 2005a; Duncanson, 2015; Novikova et al., 2005). Thus, hegemonic

masculinities have contributed to the acceptance of violence in regards to IPV, and to the

ongoing perpetration of barriers to establishing resources for survivors (Fleming et al., 2015). It

is important to focus on the perpetrators of violence and examine the ways in which hegemonic

masculinities may have contributed to harm in their lives, and potentially led to deeper reasons

that could contribute to IPV (Dworkin et al., 2015; Herman et al., 2014). For example, there is

ignorance towards the influence hegemonic masculinities may have in regards to "substance

abuse problems, psychological problems, violent backgrounds, or unhealthy relationship

dynamics" (Rizza, 2009, p. 4) that further contribute to IPV. This is a very complex issue that

would benefit from further analysis to address core issues of hegemonic masculinities.

Significant research has been completed to demonstrate that violence in men does not

stem from biology or testosterone, but is socially created (Duke, Balzer & Steinbeck, 2014;

Fleming et al., 2015; Karkazis et al., 2012). To believe that men are violent by nature only

further enforces a false naturalness to hegemonic masculinities (Connell, 2005b; Kimmel, 2008).

As hooks (2000a) notes:

> As long as men are brainwashed to equate violent abuse of women with privilege, they
>
> will have no understanding of the damage done to themselves or the damage they do to
>
> others, and no motivation to change (p.77).

Therefore, IPV is not a natural occurrence that men may complete to satisfy a biological

drive, but a socially accepted phenomenon that stems from patriarchal beliefs that normalize

violence and harm (Cox, 1877; Schechter, 1982; Wang, 2016). Such beliefs also harm men, and

cause damage in their lives as well (Barner & Carney, 2011). Although this fact does not justify

any violence or harm that occurs, it warrants further attention (Doul et al., 2013; Earp et al.,

2013).

Gender inequalities are entangled and interconnected in every level of society and human

experience (Connell, 2005b). Violence and degradation of women and other marginalized people

has been normalized due to patriarchy and the privatization of societal and family issues

(Schechter, 1982). Toxic masculinities have contributed to such violence or oppression, but as

stated, hegemonic masculinities do not directly equate to physical violence (Kimmel, 2008;

Smith et al., 2015). Harm towards marginalized individuals that stems from or is influenced by

hegemonic masculinities varies, is constantly changing, and is very complex (Tarrant & Katz,

2008). As such, it is important not to generalize the harm that occurs (Hillsburg, 2013),

especially as no experiences are monolithic (hooks, 2000a; Thomas, 2005). With these points in

mind, my research explores the lived experiences of MIAP in Thunder Bay, and hegemonic

masculinities are inevitably embedded within them.

Intimate Partner Violence

  Societal attitudes towards IPV. Historically, many patriarchal systems of privilege have

normalized violence towards women in North American contexts (Barner & Carney, 2011).

Women's vulnerability to violence stemmed from men's domination in family and social

systems, as well as the privatization of family affairs (Schechter, 1982). Until the 1960s,

instances of family violence were viewed as private (Fleming, 2015), and subsequently lacked

consistent legal intervention or support for victims or perpetrators (Fox, 2002; Novisky &

Peralya, 2015). In North America (Cannon, Hamel, & Buttell, 2016), it was socially and legally

acceptable for men to beat their wives (Dutton & Corvo, 2006; Fagan, 1996; Mullender, 2002).

Legal rights for husbands to beat their wives were not abolished until 1871 and assaults on wives

were considered a misdemeanor until the 1970s (Davis, 2008). Social beliefs influenced early

laws, which were based from colonial systems of English Common Law that perceived that

violence against "wives and or children was symbolic affirmations of Biblical principles"

(Fagan, 1996, Para 13) that further legitimized familial violence.

Cox's (1877) work is an example of how legal institutions upheld the blatant

mistreatment and degradation of women. Prior to social change in the middle of the 20th century,

it was legal and socially accepted that men used violence against women because it was believed

that women "tortured and taunted [men] to the verge of madness" (Cox, 1877, p. 102), and that

women fabricated stories of violence to prosecute innocent men (Barner & Carney, 2011). As a

result of such socially accepted violence, it was difficult for wives to hold their husbands legally

accountable for fear of public attention and false accusations (Sheffield, 1995). Thus, due to

influence from societal attitudes, legal systems condoned violence in intimate relationships, and

protected male perpetrators from any legal accountability and provided no interventions to

support families (Barner & Carney, 2011; Fagan, 1996; Sheffield, 1995).

Dominant gender norms influenced perceptions of women (Mullender, 2002), as

hegemonic masculinities were rampant and placed men at the forefront of gendered hierarchies,

which viewed women as subordinate beings who could be controlled (Reyes et al., 2016).

Women and children were historically perceived as the dependents of men in North American

settings (Zorza, 1992). This enabled battering to be perceived as an acceptable act of discipline,

such that a husband might do so "whenever [he] perceives that [his wife] is either stepping out of

her role, that she might be contemplating stepping out of her role, or even to ensure she would

not dare [to do] so" (Schechter, 1982, p. 46). When social change did occur, it assisted on the

introduction of new systems in legal institutions such as "legal sanctions through civil legal

remedies that carried criminal penalties if violated" (Fagan, 1996, Para 5), yet this still had many

limitations as the penalties for violations were minor (Kelly & Johnson, 2008; Robinson et al.,

2016), especially if men were not perceived to be "bad people" (Wang, 2016), and women were

still not taken seriously; For example, in 1982 when Margaret Mitchell, a member of parliament

in Canada, was speaking of the severity of IPV in Canada male Members of Parliament scoffed and laughed (Stoffman, 2017; White, 2008). Such mentalities were rampant in multiple systems that addressed IPV as well as hegemonic masculinities.

Later, during the 1990s, social changes challenged stereotypes that only "bad men" could harm their intimate partners (Wang, 2016), and acknowledged that other types of relationships, such as gay relationships, struggled with IPV (Calton et al., 2016; Kelly & Johnson, 2008). There was also a focus on the effects IPV had on children and families holistically, which previously had not been heavily considered (Eisikovits et al., 2008; Holden, 2003; Kilpatrick & Williams, 1997). Many powerful social changes led to the disruption of gendered norms that facilitated gendered violence (Dworkin et al., 2013; Johnson & Leone, 2008; Saunders, 2002), however, many problematic norms remain (Barner & Carney, 2011; Wang, 2016) due to the entrenchment of such beliefs in North American contexts (Calton et al., 2016; Cannon et al., 2016).

Feminist Influence. Grassroots feminist movements and "battered women's movements" emerged and advocated for more awareness towards violence in family systems (Barner & Carney, 2011; Fleming et al., 2015), and more specifically, "Women's Movements began challenging the state to intervene in domestic violence cases […] and confront the concept of male supremacy in the home" (Paymar & Barnes, 2007, p. 4). Early grassroots movements also worked to challenge problematic beliefs that women "chose" to remain in abusive relationships, and that is was a woman's fault when such violence occurred (Kimmel, 2002; Zorza, 1992). Social changes shifted the focus in IPV from a private family matter to a social problem worthy of a community response (Fleming et al., 2015; Fox, 2002).

Despite such movements, patriarchal structures still held much power and failed to hold perpetrators accountable, keep victims of IPV safe (Dempesey, 2007; Sheffield, 1995), or

provide support to those impacted by IPV (Corvo & Johnson, 2003). Many of the methods from activist movements were informal, but challenged Western ideologies towards family violence and violence towards women (Fagan, 1996). This previously private matter was acknowledged as a social problem due to the support from feminist movements (Barner & Carney, 2011; Fleming et al., 2015). Influences from feminist activist movements provided important support to victims of IPV, but there were many limitations to how much support could be provided as there remained "no public organization with responsibility for [IPV] policy" (Abar et al., 2002, p. 246). The movement to address IPV did not come from policy makers or police, but rather from activists who were outraged by the violence towards women and lack of support from legal institutions to intervene appropriately (Fleming et al., 2015; Novisky & Peralya, 2015).

Programs and Non-Legal Interventions. Early services faced many difficulties in funding, which prevented victims from obtaining the support they needed; this problem still remains an issue today (Barner & Carney, 2011). Many services were also entrenched with gendered norms that women deserved abuse, and men could not be abused, which facilitated victim blaming ideologies, programs, and laws (Brownmiller, 2013; Mullender, 2002; Wang, 2016). There was also a lack of appropriate supports for male survivors of IPV as it was believed men could not be abused and should suppress emotions (Douglas & Hines, 2011; Hamberger & Larson, 2015).

Many early programs and services still did not prove to be successful at times (Shrock & Padavic, 2007). Current methods, especially work by Johnson (2010; 2016), emphasize the need for a more comprehensive approach to addressing IPV, one that does not simply focus on power and control, as IPV is far more complex than that. Victims and perpetrators require approaches that include populations outside of dominant narratives of IPV, such as only "bad men" hitting

"women that deserve it" (Meyer, 2015). To accommodate the diverse needs of different

individuals, there needs to be further understanding of varying experiences within IPV, which

can lead to better approaches for empirical assessment, intervention, and prevention (Ali et al.,

2016). Thus, it is important to look at specific IPV typologies that continue to cause harm

(Tranter, 2005), my geographical context being Thunder Bay.

   Intersectionality in Programming. An intersectional approach regarding "spousal

violence" and battered women policies was lacking (Kelly & Johnson, 2008). Second-wave

feminism was a monumental influence for social change; however, it is important to note not all

supporters of action to prevent violence against women were feminists (Fleming et al., 2015;

Schechter, 1982). Many were simply women who were battered and demanded change as

second-wave feminism neglected to take a holistic approach to the diverse needs of other

marginalized individuals (Crenshaw, 2006; Hillsburg, 2013). Initially, the lack of

intersectionality was addressed during early activism for IPV, but it lacked a comprehensive

approach (Calton et al., 2016; Douglas & Hines, 2011). Other forms of relationships, such as gay

or other queer relationships, were neglected in early interventions and perspectives of IPV

(Meyer, 2015). It also took time for recognition of the impact that violence systemically holds

within families and other aspects of their lives (Eisikovits et al., 2008; Holden, 2003).

   Programs and supports for IPV became more extensive in the 21st century despite its

dismissal as a legitimate social issue (Dobash & Dobash, 2003; Meyer, 2015). Primarily, this

entails the establishment of shelters, counselling and other supports for privileged, white,

cisgender women (Cavanaugh et al., 2012; Rennison, & Planty, 2003; Sokoloff & Dupont,

2005). There was little to no focus on men or other marginalized individuals despite statistics

that revealed they were also impacted by IPV (Meyer, 2016). Furthermore, violence intervention

and the introduction of legal charges for male perpetrators were lacking prior to the 21st century, which further perpetrated more harm in intimate relationships (Hong, 2000; Powers & Kaukinen, 2012) and norms that violence was acceptable in such relationships (Zorza, 1992).

Unfortunately, regardless of changes in programming, the most marginalized individuals, such as women of colour, poor women, or queer women, remain at the highest risk for IPV as they have less access to supports (Atkinson, 2007; Calton et al., 2016; Guerin & de Oliveira Ortolan, 2017; Meyer, 2015; Wang, 2016). Lack of consistency or in legal responses to IPV fails to provide sufficient support to perpetrators of victims to end violence (Ariza, Robinson & Myhill, 2016; Johnson & Ferraro, 2000; Kelly & Johnson, 2008). Men have also been severely neglected in services to assist victims of IPV, as there are few programs they are eligible for, and even more so if they are marginalized in other aspects of their identities and do not fit hegemonic standards (Cook, 2009; Douglas & Hines, 2011). Milestones regarding IPV policies and procedures have been at the cost of many marginalized voices who were excluded from such social changes due to lack of resources or awareness (Crenshaw, 2006; Devaney & Lazenbatt, 2016; Guerin & de Oliveira Ortolan, 2017).

Legal Interventions and Policies. Despite new supports being in place due to early activist movements, a strong resistance from legal institutions to accept the legitimacy of IPV remained, as there was a lack of anecdotal evidence to support the severity of IPV (Abrar et al., 2000; Kelly & Johnson, 2008). This reflects the importance of voice, agency, and knowledge creation in Western settings (Lundström, 2010). In regards to IPV, knowledge can be used as empirical evidence; however, it is primarily the standpoint of men in power that is taken as truth (Bell, 2014; Kimmel, 2008; Smith, 2012). Many reports failed to incorporate language or definitions that were appropriate to properly represent those impacted by IPV (Ali et al., 2016).

Legal services failed to acknowledge IPV as a serious issue and did little to intervene as a result (Fox, 2002). New laws and methods of law enforcement emerged to support victims, primarily women victims, through the use of new definitions of IPV, requirements for evidence, and legal interventions (Ali et al., 2016; Barocas, Emery, & Mills, 2016). Despite such changes, women are still at high risk for harm, have little legal protection or support, and sacrifice other needs such as housing, emotional needs, financial needs and so on to obtain safety (Goodman et al., 2005; Thomas, Goodman, & Putnins, 2015). Overall, such difficulties for survivors were and continue to be exacerbated due to poor legal interventions for perpetrators of violence (Devaney & Lazenbatt, 2016).

Legal systems continue to fail to address IPV by relying on prosecution as a deterrent, yet this is not a sufficient solution as recidivism remains a problem following release after prosecution (Day et al., 2014; Devaney & Lazenbatt, 2016). Many of these interventions still do not adequately address the core issues of IPV, and fail to keep the victim safe or to hold the perpetrator accountable (Barner & Carney, 2011; Lawsky, 2000). Most programs, which are also connected to criminal justice systems, encourage separation, which fails to take in other cultural perspectives (Messing et al., 2016). This once again emphasizes the embedded notion of a singular standpoint of knowledge, which continues to facilitate harm towards others who do not conform to hegemonic norms (Kimmel, 2008; Wilchins, 2008). Most systems focus on behaviour change programs or preventing recidivism (Day et al., 2014), yet despite many changes to policies and procedures, they remain ineffective (Eiskikovits et al., 2008) and IPV remains prevalent in North American societies (Crane & Easton, 2017; WHO, 2013).

Influential Laws and Policies. There was also a lack of appropriate legal interventions or convictions for perpetrators of IPV, which put individuals at risk for further occurrences (Zorza,

1992). Victims were also blamed for their actions, which discouraged reporting to authorities (Sheffield, 1995). Although such laws varied depending on location, many were problematic and limited for women. For example, in some areas of the United States, "a woman could not obtain a restraining order against a violent husband unless she was willing to file for divorce at the same time" (Fagan, 1996, Para 6; Goldfarb, 1996). In Canadian contexts, if restraining orders were obtained, they did not provide ample security towards the safety of women and their children (Humphreys & Thiara, 2003). It was common for police officers to refuse enforcement of them, or the abusive partner would ignore them completely (Zorza, 1992). Screening methods such as the Ontario Domestic Assault Risk Assessment have been found to be successful in better obtaining reports of IPV (Rettenberger & Eher, 2013). However, such methods failed to recognize the complexity of IPV or to acknowledge that addressing violence towards males would also reduce violence and improve quality of life for others (Straus, 2014; Radcliffe & Gilchrist, 2016).

Problematic ideologies were also rampant in legal practices, as historically, police rarely responded to IPV (Kilmartin & Allison, 2007). If officers did respond, their methods did not appropriately protect the victim's safety (Robinson, Pinchevsky & Gutherie, 2016). For example, Zorza (1992) reported that police officers laughed in women's faces or would remove the woman from the home with the assumption that it would "give the man a break." The rare occurrence of police intervention would only potentially take place if there was a serious threat or occurrence of violence, and women of colour or poor women received even less attention from police than white middle-class women, even if they were seriously injured (Atkinson, 2007; Crenshaw, 2006; Sokoloff & Dupont, 2005; Zorza, 1992). However, there are records of men being released in numerous cases, even in instances of murder (Sheffield, 1995).

New legal policies, such as a mandatory arrest policy, have been introduced. Although such methods had goals of improving the process and safety for victims, it may have actually placed some victims at further risk of abuse from their perpetrators (Barner & Carney, 2011) and thus created "uncooperative or hostile relationships between law enforcement and IPV survivors" (Novisky & Peralya, 2015, p.67). This occurred because mandatory charging policies still did not address the violence that was occurring. It simply removed the man from the home and began legal action against him, resulting in more negative consequences for the victim including, but not limited to, financial barriers, employment and familial repercussions (Rajan & McCloskey, 2007). This created barriers for some women dealing with IPV; for example, women often did not want relationships to end, or might have required the economic stability of their partners (Novisky & Peralya, 2015; Thomas, Goodman, & Putnins, 2015).

The increasing awareness of the problematic nature of IPV brought attention to the issue of neglect from police and attempts to increase strategies that involved prosecutors (Dobash & Dobash, 2003; Schrock & Padavic, 2007). However, despite more legal intervention, increased prosecution was not effective as there was a strong focus on "detecting and punishing crimes" instead of a "more flexible preventative set of activities" that focused on victims' welfare (Fagan, 1996, Para 84). This meant that male survivors of IPV were also often silenced and not taken seriously due to lack of legal recourse, and male perpetrators did not receive beneficial treatment after charges (Douglas & Hines, 2011).

Types of Violence & Perpetrators. To date, much of the focus of IPV has centred on women's portrayal as battered and men's portrayal as batterers (Kelly & Johnson, 2008; Mullender, 2002). Many of the interventions are reactive and not proactive (Devaney & Lazenbatt, 2016) as they historically only focused on "bad men" who had been violent to their

partners. (Dutton & Corvo, 2006). This hindered the acknowledgement of different dynamics that can occur within relationships; for example, that women could be abusive, and men could be victims of abuse, which was reflected in the lack of services available (Barner & Carney, 2011; Devaney & Lazenbatt, 2016).

  Despite studies showing that women can also be violent towards their intimate partners (Nybergh, Enander & Jantz, 2016), albeit in different methods and with different gendered patterns (Hamberger & Larson, 2015). There remained a lack of support to assist men regarding sexual violence or IPV as it was believed men could not be victims (Edwards, 2004; Hines et al., 2016). There was also limited support to promote change by men who were perpetrators of IPV. (Barner & Carney, 2011). Such negligence reflects the normalization of masculinities being associated with violence (Fleming et al., 2015), which was evidenced in the lack of appropriate services for male perpetrators (Sheffield, 1995). There was a lack of knowledge surrounding reciprocal or bilateral violence occurring within intimate relationships (Hamberger & Larson, 2015; Hines, Douglas & Straus, 2016). However, research shows that men are statistically more likely to cause severe harm than women in IPV (Messner, 2016). Despite evidence that males were the predominant perpetrators of violence, there were no appropriate interventions to support the victim or perpetrator (Price & Rosenbaum, 2009).

  One must be careful when discussing statistics regarding gendered violence in this dichotomous fashion, as studies argue that men and women experience violence on equal grounds. However, women face more risk of serious harm opposed to men in instances of IPV (Messner, 2016). Additionally, the most extreme coercive behaviour is typically undertaken by men (Price & Rosenbaum, 2009). Hamberger and Larson (2015) outline controversies in studies that explore gendered differences in IPV, and despite some studies reporting no "gendered"

differences, women faced more severe psychological victimization, fear and intimidation from their partners, and acts of physical or sexual violence. They also highlight the limits of studies as they often observe IPV at the time of arrest, rather than at other points in the relationship, which provides a limited perspective (Hamberger & Larson, 2015). Such methods also minimize patterns of violence associated with the worst male offenders, who utilize many different types of violence, such as controlling methods. Coercive and controlling violence is embedded in notions of power and control such as "intimidation, emotional abuse, isolation, minimizing, denying, and blaming use of children, asserting male privilege, economic abuse, coercion and threats" (Johnson, 2010; Kelly & Johnson, 2008, p.481; Pence & Paymar, 1993). Others have explored sex differences in IPV, and typically women perpetuate situational couple violence, whereas men typically perpetuate ongoing coercive controlling violence (Kelly & Johnson, 2008; Nybergh et al., 2016). Coercive violence is particularly difficult to screen for, especially at the initial point of contact (from police or other interventions), thus it is important to view violence on a spectrum opposed to looking at it in definitive ways, as it is not so simplistic.

This is not to say that women do not utilize this form of abuse (Messner, 2016) or exert different forms of abuse in IPV (Hamberger & Larson, 2015). However, evidence reveals that women are more likely to be abusive in incidents of situation couple violence (Kelly & Johnson, 2008), which occurs after a high-stress situation between two partners escalates and may lead to IPV due to poor control of conflict (Johnson & Leone, 2005). Thus, women typically experience more severe consequences of physical and psychological violence in relation to IPV than men (Hamberger & Larson, 2015; Saunders, 2002). However, no experience of IPV is monolithic, and it is difficult to quantify the intensity of abuse (Fox, 2002; Nybergh et al., 2016).

Batterer Intervention Programs. In the beginning of the 1980s, legal reform began to challenge problematic ideologies in addressing men who were violent towards their intimate partners (Miller, 2010; Powers & Kaukinen, 2012). Many models for treating perpetrators of violence are mandated groups, but common methods entail feminist-based groups, cognitive-behavioural interventions, and skill building for violence prevention (Crane & Easton, 2017). Many programs that assist male perpetrators of violence do not address deeper issues, personal trauma, or hegemonic masculinities (Eisikovits et al., 2008) that males may be experiencing, and are legally mandated models (Barner & Carney, 2011; Radcliffe & Gilchrist, 2016). Contributing factors do not justify violence, but can assist in seeking further strategies to reduce violence and assist those affected by it (Cannon et al., 2016). Many behavioural groups have a narrow perspective that IPV is only unilateral, which is not appropriate for the many attendees in the program (Armenti & Babcock, 2016). More recent research and programming surrounding BIP focuses on involving both individuals in the couple, if bilateral violence is present, which is also important in both individuals learning new skills to cope in the relationship (Armenti & Babcock, 2016; Wray, Hoyt & Gerstle, 2013). Further research is required to understand different types of instances of violence and gendered differences in IPV to create more efficient and appropriate prevention and intervention programs (Barocas et al., 2016; Saunders, 2002).

The Duluth Model. A popular model that was developed for male perpetrators of IPV was the Duluth Model (Bohall, Bautista, & Musson, 2016). The Duluth Model was developed based on a focus group that consisted of six battered women who were tasked with developing a curriculum for male perpetrators of IPV (Pence & Paymar, 1993). The Duluth Model's foundations were based on the belief in men's inability to cope, which translated into controlling and dominant actions over their partners (Gondolf, 2007). The Duluth model was grounded in

feminist theories and aimed to eliminate hostile beliefs towards women and challenge the ways in which men use methods of power and control over women (Pence & Paymar, 1993; Schrock & Padavic, 2007; Zosky, 2016). The Duluth model was not viewed as simply a curriculum for convicted men, but also as an innovative approach that influenced other interventions for male perpetrators in varying levels of law enforcement systems (Pence & Paymar, 1993).

The Duluth Model has assisted in influencing and changing policies to increase accountability for men (Bierie & Davis-Siegel, 2015; Pence & Paymar, 1993). It became one of the most popular models used for interventions with male perpetrators in North America (Corvo, Dutton, & Chen, 2009), but yielded controversial results (Bohall et al., 2016). Some argue the Duluth Model yields a high success rate for participants (Herman et al., 2014; Pence & Paymar, 1993), where others argue it has a very low success rate (Dutton & Corvo, 2006; Zosky, 2016).

While it is important to acknowledge patriarchal structures, this model's narrow focus neglects personal trauma (Rosenberg, 2003) and other factors that influence men (and other perpetrators) (Rizza, 2009). The model fails to recognize that men's violence towards women is caused by more than social influences (Cannon et al., 2016; Hamberger & Larson, 2015). Such narrow focus ignores personal histories, current difficulties in life, and inner meanings (Dutton & Corvo, 2006; Rizza 2009). Moreover, such influences play a role in violence, but a more comprehensive approach is required to incorporate other factors that impact violence, to better support men who receive programming (Straus, 2014). Bohall et al. (2016) highlight some of the controversy associated with the sample and general themes in the program, such as the lack of collaboration with health care professionals, the lack of empirical data to support the model, and the lack of intersectionality reflected in the approach. The program sought to address men

convicted of domestic violence and create more legal accountability for them, but focused on the narrow perspective of power and control of IPV (Bohall et al., 2016; Eisikovits et al., 2008).

Despite new found awareness of the need for different methods of intervention, aside from criminal interventions (Rosenberg, 2003), there is limited empirical knowledge about the success or operations of batterer intervention programs (Bohall et al., 2016; Price & Rosenbaum, 2009). Batterer intervention programs are still commonly used, and despite the expansion of other models, few are preventative and most are reactive (Armenti & Babcock, 2016; Devaney & Lazenbatt, 2016; Rizza, 2009). Although IPV is complex and incorporates many different perspectives and narratives (Johnson, 2016; Mauricio & Gormley, 2001), a lack of male voices to create programs for male perpetrators neglects the unique needs of male perpetrators, which causes further harm to themselves and others (Herman et al, 2014; Rizza, 2009).

Easton and Crane (2017) review and recommend more unified services that offer substance abuse treatment, parenting skills, support for historical trauma, and couple-specific treatment. Despite the Duluth Model and other batterer intervention programs not proving to be as successful as initially perceived (Bohall et al., 2016), it is important to challenge problematic ideologies that naturalize violence and other forms of harm to others (Devaney & Lazenbatt, 2016). Dworkin et al. (2015) explore other studies that are related to masculinities and sexual violence, revealing that such methods have been successful and useful in challenging normative attitudes about gender roles and masculinities. Thus, more research needs to be done on interventions with MIAP to expand on the limited base of knowledge surrounding BIPS.

Male Experiences in Batterer Intervention Programs (BIP). Previous studies have been completed on male perspectives and experiences regarding IPV and BIPS. Some key themes in such studies are that men have been in familial or non-familial environments that normalize

violent behaviour, and have experienced previous trauma in life (Wei & Brackley, 2010). Other men feel much shame in attending such programming, especially if legally mandated, as well as frustration towards the lack of focus on bilateral violence (Smith, 2007). Such negative feelings are congruent with many studies that have identified the gaps in BIPS, and although they are useful, they are superficial in some of their approaches (Radcliffe & Gilchrist, 2016; Rizza, 2009). Many men identified as perpetrators reflect that tools are useful, but that healing their own traumas and difficulties is important (Rosenburg, 2003). Despite some studies being completed, it is important to continue to engage in new research as no man's experience is monolithic and more knowledge is required to intervene with and prevent IPV (Wei & Brackley, 2010). Many gaps still exist in understandings of male perpetrators, which makes it especially useful to complete this research in the area of Thunder Bay, due to the unique geographic region and high rates of IPV.

Conclusion

A multitude of systems in North American society influence and impact IPV, making it difficult to address. Historical social attitudes towards violence have contributed to complacency about familial violence, which creates further barriers to address IPV, as intimate partner violence has been accepted as commonplace. This is intertwined with a multitude of social, political, legal, economical, and other influences that have affected the ways in which IPV has been perpetuated and condoned. Collectively, the embedded problematic nature of such systems in every level of society facilitates an environment that presents barriers to prevention and intervention with IPV.

As a result, many programs and procedures fail to accept the severity of IPV or have limited resources to address the complex nature of this social problem. Challenging dominant

systems that perpetuate, accept, or neglect to holistically address violence is often faced with resistance, furthering the harm done to those impacted by IPV. Some measures have been implemented to address or prevent IPV; however, more comprehensive methods are required to ensure the safety and well-being of all. Current methods do not adequately address the needs of perpetrators, victims, or others who are involved in instances of IPV. There has also been a lack of diverse voices involved in the process to address IPV and assist those affected, meaning services that do exist benefit a narrow population. Thus, it is important to explore men's voices as well as establish more holistic methods to address IPV and prevent further harm.

Chapter 3 – Methodology

Qualitative Methodology

Qualitative research aligns with my research goals of enhancing understandings of various phenomena through the exploration of rich meanings that are brought to them (Creswell, 2012; Rubin & Babbie, 2014). Qualitative research breaks away from traditional essentialist methods that idealize a singular truth and neglect other worldviews (Bromley, 2012; Mayan, 2009; Ramazanoglu, & Holland, 2002). Furthermore, qualitative methods allow for opportunity to explore the multiple realities participants embody (Lincoln & Guba, 1985). Such methods allows me, as the researcher, to identify and acknowledge my own biases and perspective when engaging in the research process (Bell, 2014; Lincoln & Guba, 1985), as the researcher cannot be completely detached within a qualitative framework (Palaganas et al., 2017).

The use of qualitative methods are powerful in challenging colonialist and patriarchal assumptions that oppress voices that do not fit dominant discourses (Mayan, 2009; Lugones & Spelman, 1983). Qualitative methods were particularly useful when working with males who have been identified as perpetrators, as no experience of IPV is identical (McBride & Janine, 2016), despite often being treated as such (Rizza, 2009; Wang, 2016). The use of qualitative work stems from the post-modernist perspective (Lincoln & Guba, 1985) that rejects the notion of a singular truth, and analyzes the importance of power relations (Bell, 2014), aligning with epistemological assumptions of feminist theory (Bromley, 2012; Mayan, 2009). Feminist perspectives highly value experiential knowledge, which complements this work (Hesse-Biber, 2012; Smith, 2012), as the focus of this research is on the lived experiences of MIAP of IPV.

Qualitative research is supported by feminist theoretical paradigms (Palaganas et al., 2017), as it allows critical insight into social, political, or ideological values in the interpretation

of research findings (Rubin & Babbie, 2014). Qualitative methodology is especially helpful in challenging positivist notions of knowledge, such as knowledge being natural, objective, and without bias (Bell, 2014), as there are various forms of masculinities (Connell & Messerschmidt, 2005). The inductive nature of qualitative research allows for collection of data "in a natural setting sensitive to the people and places under study, and the data analysis that is inductive and establishes patterns and themes" (Creswell, 2012, p.37).

One must not make absolute statements that simulate cause and effect, and such definitive statements can further perpetuate positivist notions (Boyatzis,1998; Willig, 2013). Qualitative research recognizes that no knowledge is completely objective and value-free (Kosnik & Bonoma, 1986; Lincoln & Guba, 1985). Many of the experiences shared by participants in this study do reflect all male experiences outside of the study, but are still important as they contribute to the understandings of masculinities and IPV in Thunder Bay. As such, partial knowledge is very important when conducting feminist research (Willig, 2013), as there is never only one perspective (Culler, 1982; Smith, 2012).

Why employ Qualitative methods with Males Identified as Perpetrators?

Qualitative work is beneficial to working with MIAP as it aims not to essentialize their experiences (Denzin & Lincoln, 2005), which has often happened in vilifying manners (Corvo & Johnson, 2003) that neglect further important aspects of experiences within IPV (Bohall et al., 2016; Radcliffe & Gilchrist, 2016). Different perspectives of MIAP in Thunder Bay allows for different avenues of understanding to better serve this population (Fleming et al., 2015). This is not to say that quantitative work regarding IPV and MIAP can or should be dismissed, as it provides measurable attributes (Rubin & Babbie, 2014; Winter, 2000); however, qualitative research presents a unique lens of rich, valuable information (Creswell, 2012).

Qualitative methods, such as phenonemology, can assist in challenging problematic assumptions towards masculinities and exploring themes in the lives of MIAP (Boyatzis, 1998; Fleming et al., 2015). Addressing problematic norms and gender roles allows for a different perspective aside from the dominant narrative (Reyes et al., 2016), which continues to perpetuate harm of marginalized individuals by erasing non-dominant narratives (Willig, 2013). Acceptance of the dominant narrative is harmful to both perpetrators and victims of IPV (Bohall et al., 2016). Qualitative knowledge allows for deep, rich insight (Lincoln & Guba, 1985) into the lives of males identified as perpetrators. Little research exists on this unique geographic area where narrow views of masculinities are accepted (Sullivan 2009a; Tranter, 2005). Thunder Bay also presents very high crime rates in regards to IPV compared to other areas of Canada (Statistics Canada, 2013). Thus, my research gives the MIAP an opportunity to explore their experiences with such norms in the specific geographic region of Thunder Bay.

Phenomenology

Phenomenology focuses on how the social world is made meaningful (Creswell, 2012; Denzin & Lincoln, 2008). In phenomenological research, realities or truths are only perceived within the meaning of the one with direct experience (Creswell, 2007). Therefore, the research will come directly from the participants to elicit their experiences, meaning that themes will be elicited throughout the data, based on participant responses (Lincoln & Guba, 1985). Phenomenology operates by focusing on the consciousness that is central to all human experiences (Wojnar & Swanson, 2007). Phenomenology's basic philosophical assumption is that "we can only know what we experience by attending to perceptions and meanings that awaken our conscious awareness" (Patton, 2002, p. 107). This approach is beneficial to obtain rich detail from the research participants and their experiences of masculinities and IPV.

It is common for people to hold assumptions regarding various phenomena that also form their understandings of the world (Patton, 2002). Such understandings are formed from personal experiences, cultural expectations, historical backgrounds, and social contexts (Hesse-Bieber, 2012; Ramazanoglu & Holland, 2002). This is consistent with dominant views of MIAP that are often too narrow and neglect to acknowledge other standpoints of knowledge (Corvo & Johnson, 2003; Radcliffe & Gilchrist, 2016). Phenomenology is an appropriate approach for this research with MIAP, as it focuses on the perspective of the participants and aims to challenge dominant assumptions about their experiences (Groenewald, 2004; Laverty, 2003). This method seeks to answer the foundational question, "What is the meaning, structure, and essence of the lived experience of [a specific] phenomenon for this person or group of people?" (Patton, 2002, p.104). Phenomenological exploration allows for varying narratives to potentially confront dominant discourses surrounding masculinities and IPV.

Phenomenology is rooted in philosophy that explores the essence of one's experiences (Moran, 2001) and how such experiences further contribute to the "conscious" of an object, or, in other words, how knowledge is added to a topic (Creswell, 2012). As stated, all knowledge is partial (Willig, 2013). Although this study contributes knowledge on forms of masculinities and experiences with IPV given there is a lack of MIAP's voices (Corvo & Johnson, 2003; Herman et al., 2014; Soliman, 2016), my study is not the final word on the issue. Phenomenology focuses on "showing or disclosing phenomenon in consciousness" (Willis et al., 2016, p.1187) in a particular subject or topic. From this, phenomenology allows for the elicitation of a "thick description of the meaning, or essence, of the phenomenon, or lived experience" (Mayan, 2009, p.49), and is used to understand how human beings live their lives (Willis et al., 2016). Such new understandings will further increase knowledge about the experiences of MIAP in Thunder Bay.

Descriptive Phenomenology

Descriptive phenomenology is a branch that distinguishes itself by the idea of the epoché or suspension of beliefs from the researcher (Husserl, 1964; Patton, 2002). Its aim is to describe the "essence or essential structure of an experience focusing on what is essential and meaningful" (Willis et al., 2016). Phenomenology focuses on the lived experiences of the participants involved, but also acknowledges that the researcher cannot be detached from their own personal values (Groenewald, 2004). With a phenomenological study, the researcher does not seek to discover a singular truth. Rather, phenomenology seeks to understand the rich descriptions, meanings, and experiences from participants through the exploration of experience directly from those individuals with a lived reality of the phenomenon in question (Creswell, 2012).

In phenomenology, consciousness stems from one's personal concepts, ideas, perceptions, beliefs and experiences, which are formed into meanings and understandings through direct experience with an object or topic (Husserl, 1964; Küpers, 2009; Patton, 2002). Alongside consciousness is the important notion of the intentionality of consciousness, which surrounds the idea that consciousness is always directly experienced towards an object (Crewswell, 2007). Thus, the reality of the interactions between subjects and objects is interconnected, and experiences are directed towards things in the world (Küpers, 2009). In regards to MIAP, they are considered the subject and IPV is the object. Through the exploration of MIAP's experiences, a "core essence" was discovered through exploring shared meaning in them (Dukes, 1984; Willis et al., 2016). This is elaborated in the Findings and Results chapter.

Bracketing. As briefly mentioned, epoché, otherwise known as bracketing (Creswell, 2012; Dukes, 1984), is an important tool to use to identify my internal biases when engaging

with the themes that arise in the data. This assists in exposing and bringing awareness to my own consciousness, understandings, and assumptions that arise during research (Groenewald, 2004; Tufford & Newman, 2012; Willis et al., 2016). Specifically, bracketing assists in challenging automatic assumptions regarding MIAP of IPV and allows for openness in exploring from the perspective of participants. Bracketing is described as a suspension of "the everyday natural attitude and all 'world-positing' intentional acts which assumed the existence of the world" (Moran, 2001, p.2), which stems from the researcher's experiences with that phenomenon (Gearing, 2004). This process is essential to the process of descriptive phenomenology as it ensures the researcher identifies their "natural attitudes" or any personal biases or presumptions about the topic to keep the description from the participants at the forefront (Creswell, 2012; Shosha, 2012). This means that I questioned my own influence on the research through the use of bracketing and implemented procedures to mitigate disruption of the research process and analysis based on such reflection.

Bracketing is not simply a tool used to assert the validity of research or method, but a "rich concept that can facilitate effective and needed qualitative research" (Gearing, 2004, p.1432). Bracketing goes beyond identifying my social location to also include using various tools to remain engaged in my research (Husserl, 1964). Although it is not possible to fully suspend all beliefs, bracketing is essential to acknowledge the biases that are brought into the research and to develop strategies to best address potential influence (Patton, 2002). The tool of self-reflection is key to bracketing to mitigate biased preconceptions from the researcher that may taint or negatively alter the research process (Tufford & Newman, 2012).

To bracket my work, I first reflected on preconceptions I have towards MIAP. As I have already identified, I have been in emotionally abusive relationships with men, which could have

impacted the way I respond to different aspects of the research. To mitigate any personal bias, I ensured various supports were in place. I prepared a research guide, which was approved by my supervisors. I also ensured I stayed in close contact with my supervisors, and engaged in regular self-care routines to maintain positive mental health during this process.

It is also important to reflect on how long I have studied related topics to IPV to recognize biases I may hold. I have an Honours Bachelor degree in Social Work with a Specialization in Women's Studies, which I began in 2011 and completed in 2015. During this time, I studied various systems pertaining to violence towards women and family conflict. As mentioned, I also completed a practicum in my fourth year in the Violence Against Women unit of the Thunder Bay Counselling Centre, where I worked directly with women survivors of IPV. As such, I have a substantial amount of background knowledge regarding IPV, and had to be mindful of this when I completed my work to ensure that my knowledge and beliefs did not impede the process or influence the dialogue in a particular direction. Furthermore, I have read a considerable amount of literature and news media regarding male perpetrators of violence and the unilateral nature of abuse from men to women. The interview guide utilized open-ended questions and was reviewed by my supervisors and the ethics committee. I also used active listening and prolonged engagement with the data through NVIVO to ensure I maintained an open mind during the process.

To engage in critical self-reflection, I utilized journaling during the research process. It was challenging for myself as a feminist scholar to hear some of the subjects the participants spoke of, specifically in relation to instances of bilateral violence, because I am aware that women often face more fatal methods of violence than men. It was particularly difficult to hear participants downplay the violence they had perpetrated due to the presence of bilateral violence

or wanting to return home quickly after arrest. I reflected in my journal, "This interview was difficult for me as I felt many of my views were challenged, but I recognized that I have done much research on this topic and that my role was to be a listener." This was consistently reflected upon in my journal as I completed the interview process, "I am often challenged by the interviews where men say they aren't violent but that their female partner was violent, yet they were the one charged. These men come to me very emotionally distressed and crying while they share their experiences, but I feel my personal identity as a feminist is challenged as I know women have been disproportionally disbelieved in legal settings, but I think that's another aspect that makes this research so important." This reflection allows for comparison to research scripts and notes to identify moments when I may be presenting bias. This ensured that the descriptions given by participants are their words alone and reduce any of my potential biases imposed into the presentation of the research (Creswell, 2012). I also acknowledged that my sample is not representative of all and presents their own biases. The women in the intimate relationship may have told a very different story, and some men may not relay the full truth. Thus, journaling at all parts of the research process assisted me in grounding myself and bracketing my work. It was beneficial to engage with outside sources to reveal biases that other methods may not (Tufford & Newman, 2012). This was completed through member checking, which will be elaborated on later. Alongside that, ongoing debriefing and dialogue with my supervisors assisted in self-reflection and the process of bracketing.

Social Location. It is important to reflect on one's social location through a feminist lens, as this action enhances one's understanding of self, agency, and connection while simultaneously allowing for critical engagement with material (Jansen, 2015). Critical reflection can assist researchers in seeing the macro systems (McIntyre, 2006) and personal biases that impact a

sample (Potvin, 2016; Shasha, 2012). For example, reflection allowed for recognition that men

can face negative consequences due to constructions of masculinities (Earp et al., 2013), but also

how participation in masculinities is important for their success and survival in a Western setting

(Connell & Messerschmidt, 2005; Lundström, 2010). I am mindful of the toxic forms of

masculinities that cause harm to others, and must not minimize marginalized individuals'

experiences of oppression (Hesse-Biber, 2012). As such, it was necessary that I was fully

engaged in my work to not further privilege or normalize notions of hegemonic masculinity or

perpetuate the norms I work to challenge (Ramazanoglu & Holland, 2002). I kept academic

supports nearby during my work to remain grounded, which enabled stability in research.

Sampling and Recruitment

Methods of non-probability, purposive, and self-selection sampling were used to recruit

participants between October 2017 and February 2018. Various different agencies were utilized

as recruitment sites in order to access a diverse group of individuals. I approached agencies that

worked directly with MIAP of IPV to obtain most of my sample, as well as posting a Facebook

ad that described the inclusion criteria. Some agencies I approached about the research include

Catholic Family Development Centre, Faye Peterson, Indigenous Friendship Centre, Children's

Aid Society, Dilico, and the Thunder Bay Counselling Centre. Some of these agencies provide

specific support groups for men who have been violent to their partners, such as Partner Assault

Response (PAR), Caring Dads, and Kizhaay Anishinaabe Niin (I Am a Kind Man), and others

work with MIAP in other capacities.

Upon receipt of ethics approval from LU REB, I approached the directors of these

various agencies to introduce the study and provide written information to distribute to staff who

may be working with males identified as perpetrators of IPV. Dilico declined ability to assist

with this study, and the Indigenous Friendship Centre and Thunder Bay Counselling Centre did not return my calls/emails. Staff members distributed information about this research with service recipients who may have met the inclusion criteria for the study. Information on how potential participants could contact me was included in the information letter provided to service recipients, and individuals wishing to participate in the research were asked to contact me via e-mail or telephone. Some agencies invited me to come and speak to groups that provided services for MIAP, where I presented information about the study directly to them and invited them to contact me if they wished to arrange an interview. I presented the information to several groups through the PAR program (both open groups and mandated), Caring Dads, and to a Violence Against Women team that collaborates with various agencies in the community.

Alongside my verbal dialogues with directors, staff, and clients, I put up posters in the waiting rooms at these agencies that relayed information about the study and researcher contact information. I also created a paid Facebook advertisement that was displayed to individuals in Thunder Bay between the ages of 18 and 80. This ad reached over 14,000 people (it showed up on their Facebook page), was reacted to 46 times, and shared 40 times.

Men who were interested in participation were asked to contact me directly via e-mail or telephone where they could learn more about the research, determine if they fit the inclusion criteria, and arrange interview times. I reviewed fundamental aspects of the study with potential participants in both verbal and written form; this included the purpose of the research, the voluntary nature of the study, the ability to withdraw at any time, the parameters of confidentiality and consent, the audio recording and transcription process, and any other concerns. Participants were offered an opportunity to ask any questions before signing the consent and beginning the interview process.

All participants in the research were provided with a gift card honorarium of $30 per one-hour interview as a token of appreciation for their time and input. Parking payments and bus tickets were also provided to ensure that participation did not impose financial costs. Potential participants reviewed the information and informed the researcher if they were interested in more information about the study. At this point, I discussed the research process with potential participants and scheduled a time to meet. Given that this topic may have been difficult for participants to discuss, I established protocols to mitigate risk. First, risk was explained in the consent form and reviewed in the initial part of the process before the research began. If needed, I encouraged them to speak to supports they already had established, and checked in before the end of each interview to ask how they were feeling. I also provided a list of other resources in the community such as Crisis Response, Walk-In Counselling Services such as the Thunder Bay Counselling Centre or Dilico Walk in Counselling, and any other supports for which they might be eligible (EAP, etc.). As a staff person at Crisis Response, I explained the nature of conflicts of interest and the procedures that would be taken to protect their confidentiality and comfort. In such situations, I would not have access to their files or respond to their case. If such resources were not sufficient, and the situation escalated into an emergency (immediate risk to self or others), the appropriate emergency resources would have been contacted (police or paramedics). The individual would have been brought to hospital and I would have assisted in providing information to emergency service providers and supported the participant on-site at hospital. This was not required during the research process, but protocols were established in case such problems did arise.

Limits to confidentiality were explained in the information letter, consent form, and verbally to participants. To enhance confidentiality, consent forms from participants were stored

in a separate file folder from collected data. Audio files or transcriptions were kept on secure USB sticks and the data was deleted after use. Transcriptionists signed a confidentiality agreement. This study did not include any procedures that affected physical health. This research did not use deception, and did not generate a database of potentially identifiable information that could be used in further studies.

To mitigate risk for myself, I ensured I was in a safe location that protected the privacy of the participants, but also for my own safety. This meant that locations such as the participant's residence would not have been appropriate. More suitable spaces that were utilized were the Social Work Graduate office on Lakehead University Thunder Bay campus, an agreed-upon space at Confederation College, or an office in the agency from which the participant received services. I also maintained positive self-care routines and kept in close contact with thesis supervisors, as well as personal and professional supports in the form of friends, family, and counselling supports if needed. As mentioned, I debriefed after completing my semi-structured interviews with MIAP of IPV and used a reflective journal throughout the process.

Participants

The inclusion criteria must have been met prior to the initiation of the interview. These included 1) being a man who has been identified as a perpetrator of IPV towards his partner in Thunder Bay; 2) involved in a heterosexual relationship (accepted men in different forms of relationships, whether they were dating, married, common-law, separated, etc.); 3) over the age of eighteen years old; and 4) willing to discuss their experience. Excluded from this study were 1) women who are perpetrators of violence; 2) non-binary individuals; 3) queer relationships; 4) those under the age of eighteen; and 5) those outside of Thunder Bay.

Thirteen participants were interviewed through the research process. Four people messaged my Facebook page directly expressing interest, and six people emailed me expressing interest. Three people phoned to arrange a time to complete the research. In total, two were recruited from the ad. One individual did not show and, after initial contact, their phone number was out of service. Another individual met at the wrong location, and then did not return my voicemail. After presenting to groups at PAR and Caring Dads, I had reached approximately 30 individuals who were participating in the groups. I obtained 15 names and numbers to contact people. Some did not reply to voicemails or were not interested upon contact from the researcher. Ultimately, five individuals were recruited from PAR, three from Caring Dads, one from CAS, one from John Howard Society, and one from Catholic Family Development Centre.

Demographic Information of Sample

A total of 13 MIAP of IPV were interviewed for the study. Research interviews were conducted between October 2017 and February 2018. The age ranges (in years) of the male participants was 18–24 (n=2); 25–34 (n=6); 35–44 (n=1); 45–54 (n=1); 55–64 (n=2); and 65+ (n=1). The marital status of participants included single (n=5), married (n=2), divorced (n=4), and common-law (n=2). For those currently in a relationship, the median length of their current relationship was 5 years. The number of children varied among participants, but included no children (n=1); 1–2 children (n=6); 3–4 children (n=5); and 5–6 children (n=1). The custody of the participants' children proceeded as follows: yes, in their full custody (n=2), no, not in custody (but could be shared or visitation custody) (n=7), not applicable (children aged out of care or the participant did not have children) (n=4). The participants varied in educational background, with partial high school (n=3); completed high school (n=2); partial post-secondary (n=3), and completed postsecondary (n=5). The majority of participants identified as Caucasian

(n=9) whereas the remaining participants identified as Indigenous (n=4). Participants

predominately indicated receiving 1–2 charges for violence from police (n=7), while a minority

of participants indicated 3–4 charges for violence from police (n=3); and a single participant

indicated more than 7 charges (n=1). Two participants indicated they currently do not have

police charges for violence; however, one self-identified as struggling with his violent behaviour

while the second participant indicated that charges had been dismissed. The majority of

participants (n=8) indicated there was bilateral violence present in their intimate relationship,

whereas a smaller amount of the sample (n=5) indicated they were identified as a perpetrator

despite stating they were not violent towards their partners. No men in the study identified as

being a perpetrator of unilateral violence in their relationship. No men also identified coercive

control being part of their relationship or the violence that occurred within it. This is important as

this this does not mean that coercive does not exist, as it does and it is a very serious issue,

however, no one in the sample identified with it.

Data Collection

Data was collected through the use of face-to-face semi-structured interviews. The

sample consisted of 13 men who completed 1 to 2 interviews approximately one hour in length

each. Participants were contacted for follow-up interviews but were unavailable for various

reasons. All participants were given an opportunity to ask any questions before signing a final

consent form for the study and were given a copy of the signed consent form. Participants are

protected by confidentiality in the study and chose a pseudonym that represents them throughout

the research. A research guide was followed, but due to the semi-structured nature of the study,

there was freedom to explore their individual experiences in depth within the interview.

Consistent with phenomenology, I asked open-ended overarching questions and then followed

the participants' direction through a smaller series of open-ended questions that captured the essence of the topic (Creswell, 2012; Duke, 1984). Interviews were recorded and later transcribed by a hired transcriptionist. My research notes entailing observations and reflections, and any other supportive documents, were not included as data to understand the experience of male participants, but were used in the bracketing process.

Data Analysis

Data analysis began through retrieval of participant responses to uncover their lived experiences via transcripts and using Colaizzis' method of analysis.

Colaizzis' Model of Analysis. I utilized Colaizzis' (1978) method of data analysis to complete this work. This model operates from a seven-step process to analyze qualitative data. The seven steps include (1) the reading of transcripts, (2) identifying significant statements, (3) formulation of meanings, (4) meanings sorted into categories, (5) descriptions provided for meanings, (6) fundamental phenomenon will be described, and finally the (7) findings were to be shared with the participants.

First, I re-read each transcript in order to gain a general sense of the content obtained. This occurred several times to ensure there was a thorough understanding of the information gathered (Shosha, 2012). During this stage, I also tracked the thoughts, feelings, and ideas that arose to assist in the process of bracketing this work. This helped to explore the precise phenomenon as experienced by the participants themselves, and was completed with supervision.

Secondly, I extracted significant statements and phrases (Colazissis, 1978) pertaining to experiences of IPV and masculinities from each transcript. These statements were coded in Nvivo and highlighted after being coded. My supervisors reviewed the transcripts and how they were coded to reveal any discrepancies in the significant phrases identified.

Thirdly, I uncovered meanings based on the significant statements (Sanders, 2003). This was done through careful reflection and critical insight to establish meaning (Collaizzi, 1978; Patton, 2002). This means that each theme or underlying meaning was coded into a category that reflects an exhaustive description (Shosha, 2012). To be more reflexive in this part of the approach, I reflected critically about "What is the participant trying to convey to me about their experience, and what does this mean to them?" For example, many participants spoke about masculinities and dominant gender roles without overtly using such words. Instead, they would speak of difficulty with emotional expression or feeling judged for their appearance, issues that align with dominant ideologies of masculinities. I compared the original meaning and description assigned by myself, the researcher, to ensure they still represent the voice of the participant. Afterwards, whole statements and meanings were reviewed by my supervisor to ensure that the meanings were removed from any potential biases I may have had.

Next, for the fourth stage, I arranged the meanings into groups that reflected the unique themes represented (Shosha, 2012). I explored and reflected on the similarities and differences between the themes. For example, the theme of experience with the legal system was broken down into specific categories and different types of experiences. This explored both theme clusters and emergent themes (general and more specific themes). Afterwards, my supervisors reviewed the work and provided insight.

During the fifth stage, I utilized all the themes to establish a definition that provides an exhaustive description of their experiences (Shosha, 2012). Said differently, this means that I merged all the themes together to uncover a description of the essence of the themes surrounding the MIAP experiences with masculinities and IPV. Through discussion with supervisors and

sharing data themes with them, the accuracy of this step was evaluated. Conclusively, the essence of the themes was *Altered Sense of Self*.

The sixth step, although similar to step five, was a reduction of information. I removed what was "redundant, misused or overestimated" (Shosha, 2012, p.41). This was done to emphasize the fundamental essence that was identified in step five, *Altered Sense of Self*. Alterations may be made to more clearly define relationships between themes, which may also eliminate structures that weaken the overall description.

In the final step, I returned the major themes to participants for review to ensure they were true to their perceptions and lived experiences. This was done through the preferred use of communication indicated by each participant (telephone or email). This procedure was reviewed and approved with participants before the interviews. If the participants relayed that I had portrayed their experience incorrectly, I would have explored their feelings about it, and recorded that in the final results. One individual responded and agreed with the themes. Other participants had voicemails left and emails sent if available. Four participants had numbers out of service, three voicemails were left, and five were emailed. One agreed to review the themes via email but did not respond within the timeline.

Trustworthiness

Patton (2002) and Lincoln and Guba (1986) have emphasized the need for a less objective and more subjective approach, meaning that research is self-reflective and mindful of other's realities. Doing so addresses how researchers operate from a very privileged position investigating the lived experiences of others. Such sharing of knowledge should not be a selfish endeavor on behalf of the researcher, and that my research process is honest, authentic, and keeps the participants' best interests in mind.

Qualitative research focuses on the multiple perspectives and truths that establish experiences in participants' lives, and, as such, engagement with the researcher is vital (Frank, 2005). Much of the data obtained is contextual, which places responsibility on myself, the researcher, to accurately and respectfully portray the lived experiences of participants (Jansen, 2015; Mayan, 2009). Overall, the "trustworthiness of the data is tied directly to the trustworthiness of the person who collects and analyzes the data" (Patton, 2002, p.570), which reflects the importance of the researcher being mindful and respectful in their work. I ensured my transparency and accountability were present throughout the research through constant engagement with the data and my supervisors. Doing so comes back to the basic principle of trustworthiness where a researcher asks how they can assure the audiences (participants, self, and others reading the work) that the findings from an inquiry are worthwhile. Establishing trustworthiness in the research means the researcher must reflect on what arguments can be established, what will be questioned, and what persuasive elements are involved (Lincoln & Guba, 1985)

I found myself consistently reflecting on trustworthiness when engaging with material related to this research and during all stages of research. I have responsibilities as a researcher to take research seriously and I am accountable to accurately convey the MIAP's experiences. Thus, I took many precautions in this work to ensure trustworthiness was established to uphold such responsibilities. Examples of this are how I was open with service providers who assisted in facilitating sampling and participants, as well as participants directly. I conveyed that the research would be used as part of my thesis for my Master's in Social Work, as well as used to share with community service providers in Thunder Bay with goals to enhance understandings of this often-misunderstood population. I gave time and opportunity to listen to their concerns and

inform them of the importance of this research. As such, trustworthiness was a constant theme when engaging with participants and related data.

Trustworthiness is an important tool to implement in qualitative work to solidify the quality of the study (Shenton, 2004). Four strategies that Lincoln and Guba (1986) advocate for in qualitative research to achieve trustworthiness within qualitative research are: Credibility, Transferability, Dependability, and Confirmability.

Credibility. An important aspect of qualitative research is the internal validity of a study, which ensures that the research measures what is intended to be measured (Rubin & Babbie, 2014; Shenton, 2004). Lincoln and Guba (1986) argue that this is one of the most important factors to establish trustworthiness, as it holds the researcher accountable to their work. This means that a researcher adopts a research method that is well established in qualitative investigation. Thus, my research is founded in feminist theory and phenomenological methodology, which have been utilized in other studies, and blend well to capture the lived experiences in various studies (Bergoffen, 2012; Fisher, 2000). Although there are limits to such an approach (Butler, 1988), it is still a feasible approach with many strengths, which provides an important contribution to the on literature of MIAP of IPV (Charrette, 2015; Harding, 1987).

It is also important for the researcher to develop familiarity with the culture of the participants involved in the study. Lincoln and Guba (1986) say this can form a prolonged engagement between the researcher and the participants in order for thorough understanding to be gained about the participants and organizations in which they participate before the interviews begin. This was done carefully so as not to become so immersed in the culture that judgements are influenced. As such, I followed my procedure of meeting with staff of agencies to familiarize myself with services and presented my information at various opportunities. I presented my

information multiple times at different groups, which also offered an opportunity to build rapport. I gave participants the opportunity to refuse if they did not wish to share their experience, and I also encouraged participants to share at their own pace to allow for natural flow of interviews. In the initial stages of this research, it was important to build rapport with the participants and explain that there were no right answers to questions during the interviews, and they could take their time to answer. This also meant that they could have withdrawn from the study without any explanation to the investigator. I also ensured prolonged engagement with multiple readings of the transcripts in NVIVO.

If any discrepancies were detected in emerging themes, I drew attention to them and addressed them to ensure there was better credibility to this work. For example, although many participants elaborated on negative experiences with the legal system, not all had solely negative experiences. Therefore, work was summarized to highlight both experiences in the key themes. I also completed a negative case analysis to address my hypothesis and ensure it encompassed all cases in the data. This meant addressing any statements that might not match emerging themes; for example, although the majority expressed that gender roles should be challenged, one participant identified that he felt men should adhere to traditional gender roles. It was important to include all pieces of data in my findings to accurately represent the men's lived experiences. This was not done alone, as I stayed in close contact with my supervisors. My supervisor co-lead an interview with me to ensure openness in questions and to observe responses first hand. In the findings, I was also conscious of ensuring that the voices of multiple participants are represented.

Transferability. This refers to the ability of the information in a study to be applied to other situations (Lincoln & Guba, 1986). Although this work will focus specifically on the Thunder Bay region, I believe the work here is applicable to other men in Thunder Bay aside

from the sample, and potentially other MIAP of IPV. However, one must be careful in making such statements as my sample lacked diversity in terms of types of perpetrators. This information is very important as men's experiences are lacking from literature regarding IPV. This research highlights the non-monolithic nature of IPV, and the value of the experiences of men impacted by masculinities and IPV. Transferability is also ensured through a throughout and comprehensive description of the method used. Thus, other researchers could utilize the same method and replicate the study.

Dependability. Dependability refers to the positivist techniques that explain that if the same techniques were utilized and repeated in the same contexts, similar results would occur (Lincoln & Guba, 1986). Although this presents various barriers in qualitative work as studies and the variables are far less controlled, one can take many precautions to ensure their work is dependable. For example, I was thorough in explaining my method to participants and in my writing to address exactly what would be completed. This ensured, despite the semi-structured nature of the interviews, that all understood the process I aimed to complete and the parameters of this research. Thus, one could complete research with the same process; however, due to the unique nature of qualitative work, the results received from participants might differ.

Confirmability. Confirmability refers to a process whereby the researcher ensures that their work is as objective as possible. Although, as Patton (2002) notes, there are limits to objectivity in qualitative work, many procedures assist in minimizing the researcher's bias. As previously stated, no work can truly be objective, but I took many precautions to identify what my biases may be and how to protect the research from them. This ensures the information is the result of participant perspectives and not that of the researcher (Shenton, 2004). As discussed, I

took many steps to bracket my work, had regular supervision, and followed descriptive methods of phenomenology to ensure my work was congruent with the perspectives of the participants.

Benefits to participants and/or society

This study explores perspectives of MIAP of IPV to further understand their lived experiences. This was done with the goal to increase knowledge of this often-misunderstood population, and raise awareness of the need for more diverse programming, both in intervention and prevention of IPV. One potential benefit to this study was to provide participants with an opportunity to voice their personal experiences with intimate partner violence and related programs, and the majority of participants stated they felt it was cathartic to share their experience. It is hoped that the information gained from this study will influence critical assessment and development of current and future programming for men and violence prevention. This may enhance the services that men receive to better suit their needs.

Challenges

The establishment of a solid foundation in epistemology to guide me assisted the research process (Bell, 2014). From an ethical point of view, despite having the best interest of the men in mind, I was worried about potential re-traumatisation or re-evoking negative emotions. My hope is to mitigate the harm done and that the interviews could be used to develop new ways to contextualize and cope with violence within intimate relationships. The research was done carefully to not appropriate or misuse participants' voices, as qualitative methods "rely on voices to give meaning to their research question" (Bromley, 2012, p. 124). To address this issue, I collaborated with the participants to ensure the data represents the essence of their experience and paraphrased during interviews, as suggested by Mayan (2009).

One challenge I foresaw was my identity as a woman and the hesitation this might instill in some male participants, as I was speaking about IPV towards women. No overt comments were mentioned about my identity throughout the research process by participants and I do not know if this impacted some potential participants' willingness to meet with me. As previously mentioned, my identity as a cisgender woman may have had a specific impact as I work with the MIAP. However, I was also very mindful of the language I used as it is very powerful in research (Bromley, 2012). I utilized language as a tool by engaging the direct language that participants utilized to further understand their experiences and the meanings behind it. However, once again I was mindful of how discourse is perpetuated through multiple facets, and that I must be mindful of body language and the way my social location impacts perceptions of myself.

I needed to be adaptable to their varying needs of the participants in my study (Bell, 2014). This can be done by valuing difference and subjective knowledge (Hillsburg, 2013). It was also important to recognize that I will never, nor should I ever, feel completely comfortable, and that this experience of discomfort in research is natural (Potvin, 2016) as all research has uncontrolled outcomes (Rubin & Babbie, 2014). To listen to unexpected outcomes can lead to transformative knowledge and different avenues of healing (Jansen, 2015). It was critical that I was cautious of my own projections or expectations of what would be said, and be comfortable with research being a fluid and adaptable process (Creswell, 2012; Mayan, 2009).

Conclusion

This chapter reviewed the selected methods for this thesis work and the rationale as to why it supports the research question at hand. Descriptive phenomenology was utilized to explore the lived experiences of MIAP of IPV, which were analyzed through Colaizzi's seven-

step model. This section gave important insight to the decision-making process in this work. The next chapter will give an overview of the findings of this research.

Chapter 4 – Results and Findings

The findings from the thematic analysis of the 13 participant interviews resulted in six core themes including 1) Complexity of Intimate Relationships and IPV; 2) Precipitating Factors; 3) Disconnected Experience with the Legal System; 4) Ripple Effect of IPV on Life; 5) Impact of Support Systems; and 6) Hope for the Future and Social Change. These themes highlight the key pieces of data that consistently surfaced throughout the interviews. Many subthemes exist within these themes for further clarification about the lived experiences of MIAP. Overall, these themes uncover the essence of participants' experiences as an *Altered Sense of Self*.

Altered Sense of Self

An altered sense of self emerged as the core essence in the data as it was present in all the subthemes. Participants expressed how their sense of self was altered in different positive and negative ways throughout experiences of IPV and related events. This sense of self was altered throughout different stages of the participants' experiences surrounding their lives, and particularly IPV. For example, view of self was typically portrayed in increasingly negative ways throughout experiences related to IPV, which influenced the ways in which the participants moved forward from the violence in their lives. Altered Sense of Self was particularly expressed through judgement and stigma, as well as masculinities.

   Judgement and Stigma. Participants expressed feeling stigma and judgement in various aspects of their lives. Judgement from others brought many negative views of self, and also impeded perceived ability to express emotions or reach out for support. One participant spoke of the confusion he encountered within himself as he navigated his relationships:

  I did not know how to feel, I didn't know how to react and I wanted to hide, because that

  was one of the things I was capable of was hiding and running. – Luke

Judgement impacted their ability to move forward and support their families as well.

A feeling of inability to seek assistance due to the response received from the community and police in particular contributed to participants' negative view of self. This also led to adjusting their identities to comply with societal scripts of their gender roles. Furthermore, participants emphasized the power of multi-level stigma, and how it impacted them. For example, after his experience of trying to get support and navigate the legal system after his charges, George explained that "The stigma in this society is terrible. Like, basically 'you are a fuck up, go crawl under a rock and die.'"

Overall, stigma and judgement heavily impacted sense of self or ability to heal after their experiences of IPV. Although not all emphasized that they let this label define them, they expressed feeling judgement and having to live with negative societal perceptions of their identity. Participants felt labelled, which altered their sense of self to be seen as negative, or a bad person in society. This was challenging to many as they felt these labels were put upon them automatically and in a presumptuous manner. Given his awareness of the negative view of IPV, Josh expressed his embarrassment of being involved in the legal system, "Yeah, it's a little embarrassing. Like one of my friends is doing some contract work [where I receive services] and he sees me." Similarly, John expressed his awareness of societal judgment and its impact on his future, "It's like holy shit, you are never getting rid of this label."

Masculinities. Although participants did not overtly ascribe to masculinities/masculine gender roles as contributing to their sense of self, there was an undertone throughout all the interviews of the impacts of the societal views of men and masculinities on the participants. Masculinity was a very prominent subtheme, where many participants described instances of struggling with their ability to express emotions due to their perceived and actual identity as

men. These ingrained beliefs about masculinity had an impact on expression in their

relationships. Participants described their perception of the masculine identity:

> I think a lot of men are disconnected with their emotional sides in today's world, and
> again, maybe that's a masculinity thing. Like 'oh, men aren't supposed to cry,' or 'men
> aren't supposed to be affectionate' […] I think it's ingrained in society. The males aren't
> supposed to be open to discussing their emotions. – Brandon

> Yeah, I just get completely uncomfortable […] especially talking about that stuff (lack of
> emotional expression) gets me crying […] We're (men) not supposed to cry […] it's all
> around you growing up. You've got to be tough. – Tyrone

This impacted them at several points in their lives, and made it more difficult to open up

to others as well. Despite some participants indicating they did not ascribe to traditional forms of

masculinities, they indicated being impacted by such social norms, as many others looked at

them through that lens.

> The system seems to be biased, I mean there has to be some bias towards guys […] I feel
> it's definitely easier for a guy to get accused of this kind of thing. I feel it's definitely
> easier for police to arrest a guy." – Morty

> I feel like my voice isn't heard whenever there's domestic violence. It's more likely to be
> put on the male's shoulders for being responsible [even though I experienced abuse from
> my partner]. – Brandon

However, despite other aspects contributing to IPV, many felt that masculinity impacted

their lives.

But the biggest thing […] is what we talked about, about being a man, that whole stuff

has got to change. Because that's where the problem is. That's where the whole root of

the whole problem is. That's where it starts, you know? – John

Social norms not only impacted legal systems' views of them as men, but also their

perception of themselves as insufficient fathers. Men expressed how their violent behaviour

incited judgment about their personal character and extended to their role as a parent.

Masculinity impacted their sense of self as they tried to prove their worth as a parent despite the

negative labels associated with them. Participants also indicated that sense of self as a father was

challenged by societal expectations or negative views of masculinities. This impacted many

participants in different ways, such as their sense of self and ability to take care of their family.

Precipitating Factors

It is difficult to say that one factor inherently contributed to IPV; however, many

participants expressed numerous negative experiences that may have collectively impacted the

presence of violence in their lives. This took the form of adversity and trauma at various stages

of life.

Adversity and Trauma. Many expressed difficulties from events in childhood that

impacted their growth or their ability to cope. Although childhood adversity does not indicate

that adverse experiences equate to violence, childhood adversity may be contributing factors in

one's ability to cope and deal with stressful situations. George expresses the impact of his

childhood on his current relationship as follows:

A lot of my upbringing changed a lot of things […] like my parents argued all the time,

so arguing like, that night if I wasn't used to arguing would I have just walked away? I

could have just walked out the door and walked away. Everybody has to be right, and then trying to be right, I was wrong. – George

Furthermore, Kevin discloses the impact of childhood adversity and its impact:

My father committed suicide when I was 6, and uh, you know I never spoke about it, talked about it. Even my grandfather, my uncles, everybody, all the men…whatever, the only things they ever said about my dad was that he was a great guy. But […] they didn't want to talk about it because it fucking hurt, you know what I mean? – Kevin

Many identified trauma and adverse events occurring that impacted their well-being and worldview. These events also impact their ability to cope in various situations and what those who have experienced trauma see as normal.

I didn't really have a childhood, I got kicked out of my house when I was five, brought back, we were abused in the most fucked up ways you can think of […] I had to keep it [inside] that I was molested […] because I was told that doesn't happen to boys. – Peter

Before I went to residential school I was already experiencing [sexual abuse] from the day school where I was born. […] After I went to residential school […] I was also [sexually abused] […] by a male person, and I never talked about those things. – Luke

The existence of trauma in the lives of male perpetrators of violence was a precipitating factor in the demise of previously healthy relationships. For some, the traumatic event contributed to tension in their intimate relationships and difficulties with emotional expression. John spoke of the trauma of his son's death and its impact on his relationship,

I spent most of, almost all of my time with [my son] at sick kids because my wife had to raise the other little ones, and Toronto wasn't a place for her, so I ended up going there

and doing it all. He lived almost three years in the hospital, eventually he died in my

arms. Our relationship, of course, deteriorated with all this. – John

Complexity of IPV and Intimate Relationships

The complexity within intimate relationships and different types of violence that occur

within them emerged as a prominent theme among participants. In this study, eight men

identified bilateral violence in their relationships, and five indicated they were charged for

violence towards their partner that they did not commit, yet they were victims of violence in the

relationship. Collectively, all thirteen stated that women were violent towards them. All the

violence reported was based on the narratives of the thirteen participants.

The findings highlight the intricate nature of IPV and the dynamics and violence that

occur within relationships. Although the majority of participants were charged, they identified

the circumstances surrounding violence in consistent ways. The existence of bilateral violence

was prevalent amongst just over half of the participants. Each instance of bilateral violence was

different, but highlights that men in this sample are not the sole perpetrators of violence.

Furthermore, many participants spoke of trying to escape the situation but identified partners as

aggressive, and acting with violence in an attempt to defend themselves or fight back.

It got abusive between the two of us, and uh, it was all mutual […] even though I did not

start it, or finish it, I still felt like a piece of shit every time it happened […] I have been

hit with ashtrays, hit with phones, threatened that I was going to get stabbed while I was

sleeping. – Peter

Some men explained that they were only violent because they were acting in self-defense. Many

expressed that their violence still was not acceptable, but they did so to protect themselves.

She smashed the TV back off the wall, nearly knocked it off the mount. So I went up and used my forearm to get her away from the TV. She then punched me in the balls, so I grabbed her and pushed her up against the wall and told her to stop. That was the end of it. – George

The majority of participants indicated that instances of violence solely occurred in one relationship, and not in previous relationships. Some indicated that there were certain factors within the violent relationship in particular that triggered violence.

That abuse that I had from my mother is […] I think why I fought back, because I saw my mom, and all those years of abuse with my mom. […] She did a lot of stuff my mom used to do, and now I'm able to fight back, getting hit as a kid, I couldn't hit her back. Getting hit by my ex, I was like I can hit back now. And honestly, what was going through my mind those times was 'take this mom, take this.' Like I'm not out there, I don't want to go beat the shit out of my mom right now […] but when this shit was happening I think it triggers. – Peter

Despite incidents of bilateral violence, participants indicated that females were identified as victims (not charged) and males identified as perpetrators (received charges).

One time she threw a shoe at me, so I hit her with a fricken' paper towel roll, and I got charged with assault with a weapon. – Kevin

Although majority of the men in this sample experienced bilateral violence, others in the sample claimed they were wrongfully charged and that their partner was not charged. A number of participants expressed that although it was their partner who was violent, they were the ones charged anyway. This was a prominent theme in the sample, which also highlights the complexity of IPV and relationships.

The violence that occurred was not a pattern in the participant's life, but occurred specifically in this relationship. They also identified that some of the incidents were situational.

> I went through a bit of a rough year, I lost my father and brother and just kind of had a mental breakdown and it led to some police intervention and stuff. – James

Situations like this, and others, relayed that the participants indicated the violence was claimed to be situational after a buildup of emotions, and was not historical.

> We have got in physical fights before, but I guess it never got to the extent where we were both fighting each other. It hasn't really gotten out of control like that. You always kind of see if it's getting that bad that somebody would [leave] the situation, but it never happened that time. There were too many problems […] and then it just kind of gave us both a wakeup call […] it showed us that we both need to work on some issues, and we would rather work on them than go our separate ways. – Jamal

Some participants indicated that drugs and/or alcohol were present during the violence in the relationship, which they perceive may have been a contributing factor. Some indicated that their partners struggled with substance use, which also furthered tension in their relationships. Participants explained the connection between substances and violence. This also prevented their ability to heal individually, as well as in the relationship,

> But then there is continual issues with my wife's drug problem, the fighting that stems from that. – Kevin

> Every time that we drank, and she drank, you know it was always abusive. – Luke

Disconnected experience with legal system

The MIAP in this study described overarching feelings of disconnectedness in their varying experiences with the legal system. There were many mixed feelings about the response

of the legal system. Some participants reported that they felt the response from legal services was appropriate; however, many participants described their experiences as being intertwined with bias and lack of voice. Many identified overall gaps that they felt existed within the process. Within different stages of the legal system (Arrest, Jail, Conditions, and Court), participants identified difficulties in how long the process took, and the various boundaries that were presented in their lives. Many felt frustrated with the length of time legal processes took, and also expressed that they felt left in the dark from lack of information. Disconnected experiences within the legal system linked to feelings of judgement and stigma, specifically that they were seen as bad people with the automatic assumption that they have done wrong. Many felt that gender roles imposed by hegemonic masculinities impacted the outcome of the legal system, and that bias was present in the legal response as a result:

> I mean just because I'm a big guy really […] they look at me and go: 'he's big, let's arrest him'. – John

> I'm just surprised that there's not women in these groups. [My partner is] going through the same thing [as me] but she's saying she's not guilty. – Cameron

> No, I never had her charged. I tried to got to go to the police and even talk to a [Justice of the Peace] a couple times over the years — complicated at the best of times and really, actually only help you criminalize a person afterwards. They don't protect you at all. – Tyrone

Experience with Police and Arrest. Many of the MIAP had varying experiences with police, especially as all the participants came from unique situations. As mentioned, some felt that the police were very respectful and just completing their jobs as required by the law. "[The

police] were fine with me, they understood what was going on they go through this all the time-domestic dispute." – Cameron.

However, many felt they were treated inadequately and felt misunderstood by police. One participant indicated he would never call police to address the bilateral violence in his intimate relationship because:

> there was just no point, because of society and what's portrayed there. Women don't hit men, you know if I called the cops and said […] my girlfriend just beat the shit out of me, they are going to laugh at me. – Peter

Experience in Jail. Participants had negative experiences in jail. A lack of voice was a dominant theme and many felt they did not have an appropriate opportunity to share their side of the story, nor was it taken into consideration. "I went to jail with the imprint of the phone in the centre of my forehead, never had any say in what was going on at the time." – Tyrone

One participant explained that he had arranged to meet with police, under the belief they wanted to take his story, but they arrested him immediately upon meeting. He stated he felt he did not have an opportunity to explain himself until the next day in front of a judge on a video screen. A particularly interesting theme that arose from experiences with jail was the process of being released. Many expressed being released with no belongings, and due to the conditions that were in place, they often had few resources available. "You are sitting there with nowhere to go, and they are like 'okay, find a place to go, no way to get there […] walk.' It's -30 [degrees outside and I'm in shorts]." – George.

The experiences relayed from the participants particularly highlighted some of the difficulties in transitioning from jail to home. Many also indicated that due to conditions in place they might have been unable to return home, and had nowhere else to go. In such situations, participants

spoke of relying heavily on personal supports. "If I didn't have the option [to stay with family] if I didn't have a good job prior to that and have built up a good financial base, where would I have stayed? I don't know." – Brandon. This theme was prevalent with many individuals and strongly impacted their experience with the legal system, forging a disconnect.

      Experience with Conditions. The majority of participants identified barriers through the conditions that were placed on them following charges for IPV. The participants identified that the conditions did not facilitate healing for themselves or their families. One participant expressed his displacement from his family and his day-to-day life with no alternatives offered or provided:

> They charged you with domestic, they say: 'okay, we will let you out of jail but don't go back to your house and don't talk to your wife or kid' well, you are set up to fail. – Kevin

Many participants recognized the violence was not acceptable, and time away may have been beneficial but felt conditions placed more barriers instead of facilitating healing in the family. The participants felt conditions were processed slowly, and it was difficult for some of them to wait long periods of time before obtaining belongings from the home or seeing children:

> The court system, it kind of feels like there is just like a big drawn out process, you know […] at home we have a pretty busy house […] all of it actually fell onto my spouse's shoulders as far as taking care of the kids and with going to school and doing all the errands to survive. – Jamal

Although many participants identified the initial space apart from their partner was helpful, and that intervention was required, conditions made it difficult to facilitate family reunification afterwards.

Honestly I'm glad that the cops were called because I don't want my daughter thinking

that's ok to have violence in the household […] but I wasn't allowed in the house for 6 or

7 months. I had to pay for my house that my family was living in, and another place, and

lawyers, and a lot of our stress was due to financial stress. – George

Experience with Court Process. Almost all participants had gone through the court system; however, some underwent longer processes than others. Some participants reported pleasant and straightforward experiences, whereas others expressed frustration. Some expressed they felt the procedures they went through were typical and they were treated with respect during their time in court. However, other participants felt like the system was not fair to them.

I think that is a big stigma as well. That when these incidents occur it's just automatically

assumed that the male has done all the wrong. […] My ex has punched me in the face

before and nothing has come from it. – Brandon

Ripple effect of IPV on life

All participants identified the ways in which IPV negatively impacted their lives in multiple ways, which were interrelated and caused further difficulties in healing. The ripple effect permeated their experiences with employment, having a criminal record, the impact on their family life and ability to provide, mental health and well-being, and loss of relationships. One individual expressed that the IPV in his life affected everything,

When I was drinking, I was able to hide a lot of things, because the booze covered up,

just like covering up with a blanket all the time […] Then I sobered up […] it was like

peeling the onion. Each layer, I would find certain things, deficiency or dysfunctional

things, be it a relationship […], or family dysfunction. Where everything was affected,

the whole thing. – Luke

Despite the holistic nature that IPV has in the participants' lives, it is important to individually acknowledge the impact it had on the systems in their lives. Participants expressed that IPV and related events placed people in destitute situations, which contributes to a lack of future for these individuals and their families.

Career/Employment. Many participants expressed difficulties attending work and worries about the impact of the charges on their employment. Many feared being fired/suspended or being penalized as a result, which translated into further worries about financially supporting the family.

> I almost got fired from my job due to [these charges]. You know, nothing to do with work but someone took a picture of my charges and sent it to my director here. – John

> I had to go through my [professional] college. I had to report [the charges] to everybody. And potentially, I could have lost my job. Then I can't pay her, I can't pay the kids, I can't pay anything. – Gregory

Participants also spoke of difficulties attending mandated programing due to their work schedules, which impacted their ability to provide for the family and themselves. "I couldn't even get my tools to go to work. I was allowed one visit with the police to go back there. And even then, they gave me 15 minutes to get my stuff."– George.

This holistically rippled into other aspects of life, such as ability to support family, which caused further tensions, impacting mental health and so on.

Family Life. All participants expressed the strong impact this had on their familial ties. Not just between them and their partner, but between them and their children, and other immediate family members. Many experienced difficulties in the loss of relationship with their partner, or damage to the relationship.

It is hard, very hard actually. Because you are really close to someone, and then all of a sudden you aren't even allowed to talk to the person […] but I understand the importance of not talking to her. – Morty

We put [the relationship] on hold, we are just, it's hard, I have a lot of anger built up from it. Like I had left that night, and come back maybe things would be working out a little better. Right now, we are talking about separating, we are just, and it's just not the same. – George

IPV also impacted the families heavily, causing tension or strain between other immediate family members. Children were also adversely impacted.

Family Therapy might have been helpful] as my kids were living in absolute chaos at times when they were going to school. If there had been a comfort zone where they could go to someone […]. – Tyrone

Many also indicated the legal proceedings and other events related to IPV placed more strain on their spouse.

No, she [wasn't ever charged] but I wouldn't want to make her do that though, just because she takes care of my son and he needs her. And if she goes to jail. You know, like who is going to look after my kid. – Josh

Financially. Finances were severely impacted by IPV. Many identified difficulties in paying for a place in which they were no longer allowed to live, as well as paying for a new place to stay. Some participants also mentioned that the costs of programming (PAR) or legal fees made it difficult to complete the legal process and move forward.

[I was basically] couch surfing a bit. I lost all the things needed to help my physical conditions, lost everything I use to function from day to day […] I was directly onto

Ontario Works, however, it takes a month and a half before you see any money,

minimum, and I had to reapply for ODSP, which is now a nightmare again. – Tyrone.

Housing. IPV and the subsequent criminal charges heavily impacted men's ability to

attain secure housing. Lack of housing contributed to the ripple effect of violence given that

temporary residence further contributed to adversity in the lives of participants. Many expressed

that safe and affordable housing would have improved the outcomes of the situations. Jamal

spoke of his participant a social agency and how that influenced substance use:

I guess I was homeless […] and [staying at the John Howard Society] put me in an

atmosphere where I was around bad people. […] I started doing drugs and hanging out

with them, and you know it just took me out of my element, which was at home and

taking care of my kids and working, and I almost kind of went on a big downwards spiral

from there. – Jamal

Mental Health. Participants noted the negative effects on their mental health following

IPV and related events. Overall, there was difficulty coping, and a decrease in their overall well-

being due to IPV and the aftermath. Many expressed heightened anxiety and depressive

symptoms: "I've lived with serious anxiety now for at least fifteen years where it will just

overwhelm me at times, and I turned into a completely non-functional [person]." – Tyrone

IPV and the related events created many struggles for the participants in this study, yet

they perceived a lack of resources to address their mental health concerns. Some participants

spoke of turning to substance use as a means of coping with their emerging mental health

concerns.

[I would] lock myself in my room and smoke a bigger [joint]. – Tyrone

I have been in a deep depression or been in my room for days at times and that's how I

dealt with it, is to have some drinks of alcohol. – Gregory

I went back to drinking, I haven't drank in a long time, but I went drinking. They didn't

give me a stipulation about drinking, so I just started drinking heavily. I just drank my

sorrows away. When I drink I make bad decisions, so I was lucky I didn't [do anything].

– George

Furthermore, although not a predominant theme, some participants discussed suicidal

ideation, which reflects the severe impact IPV had on their mental health and well-being.

Interviewer: And if you didn't have EAP (Employee Assistance Plan) what would you

have done? Gregory: I was going to kill myself.

I came close to committing suicide in [prison] [and was placed in protective custody as a

result]. – Tyrone

Although there were no attempts to complete suicide, the participants explained the

heavy impact this had on them, which also rippled into other aspects of their lives. This also

reveals the strong negative influence that IPV held over the well-being of the participants.

Socially. A further ripple effect was observed in social circles, and many found it

difficult to reach out to social networks they had established.

It's hard to explain, it is, it's a touchy subject, right? I mean it's really hard to explain to

someone else what it's kind of like. Because I never thought in one million years I would

ever be arrested alone, never mind for something like this. It's crazy, but sometimes I

wish I didn't tell my friends. – Morty

Impact of Support Systems

Participants identified the power of support systems, informal or formal, to recover from IPV, and charges related to it. MIAP also spoke of support from within themselves and the power of their own accountability and willingness for change when receiving support. The existence of positive support contributed to healing; however, the existence of negative response or lack of support from previously established support systems impeded experiences of healing. "Yes, so those services got me through, as well as my family and my friends. I have a huge support group, so I was lucky, from that perspective to have people." – Gregory. The existence of support contributed to healing and rehabilitation; however, the existence of negative response from informal or formal support systems overpowered the benefits of positive supports. Such negative experiences impeded healing and other positive strides forward from IPV.

Healing Within. Participants shared important aspects or key moments that contributed to inner healing for themselves. This often took the form of accountability for their actions and willingness to access or receive help.

> You know I think by recognizing and accepting that we are powerless and surrendering to it, the doors are open and you know, we have to accept ourselves in getting help […] If we want to listen to ourselves, we have to listen to ourselves from within. You know the answers from within. – Luke

> It was kind of devastating at first, but I gained a little perspective once I got through it all. – James

Personal Accountability. The majority of men spoke of their own process of holding themselves accountable for the events that had occurred.

> It's something you never really wish would happen, but I take responsibility for […] my behaviour and attitudes and actions and choices that I've made throughout the course of

my relationship are definitely the reason why I think I need this type of counselling. […]

I need to reflect on the choices I've made and take more responsibility and ownership for

those things. – Brandon

Reflection of accountability assisted in the healing process of moving forward and taking

responsibility for what had happened. "I want to just be happy […] I owned up to what I did, I

told the court what I did was wrong, and I don't want it to happen again." – Cameron

Willingness or Readiness for Help. Men indicated that it was much more helpful if they

were willing to get support, and reflected on what helped them feel ready to access help.

Well, I just want to get some help with like how me and my girlfriend can deal with our

situations better. How it would be better for our son so he won't have to see that violence,

and fighting and stuff like that. […] If I can learn some stuff and take it with me once I

get out of here. – Jamal

Well I think that the first thing is that, you have to admit that there is an issue first. You

have to be honest with yourself and say this isn't fucking working for me, this ain't

working for my family, my kids, the extending circle that it just grows, the people who

are affected by [the violence]. – Kevin

Many identified that it was difficult to perceive there was help out there and reach for it,

especially if they had little positive support in their lives. "It's not the absence of support that is

the most difficult, it's the feeling that there is no one there to help you." – Tyrone

Personal Support. Personal supports entail anything from family, friends, and other

individuals who are not professionals who assisted in the process. The presence of personal

supports was important in facilitating healing. "But if I didn't have [my personal supports] with

me, it would have put in me a different path, I'll tell you right now." – George Those who had personal supports reported more stability through experiences during and after IPV.

> I was really distraught and really emotional and stuff like that, so [my parents] just kind of helped talk me through it, gave me a place to stay, fed me, and yeah I don't know. They just helped me man, they just helped me through it. – Jamal

Many relied on personal supports, and aside from those friends and family, had few resources in place to support them through the process. The absence of personal supports or negative reactions from supports made recovery from IPV more difficult.

> The only person I could talk to at the time was my older brother that lives [across Canada], but that was all on the phone. And he's been through a bunch of [breakups/unhealthy relationships] too and his take of life is a little different, so it was more or less: 'fuck them it's their fault, move on.' Alright, I understand, but I did have a part in too […] It's not the kind of advice I wanted to hear. It's not helpful at all. It was just stuck in me, because I didn't know who I could talk to at the time. […] It caused a lot of anger, even depression, because I got stressed out that I didn't know what I could do, so I would just break down and be upset, and then I'm stuck with that too, and how do I get out of this. – Peter

Professional Supports. Participants identified numerous different professional supports that were present in their lives. Professional supports came from a multitude of disciplines and had varying roles; for example, counsellors, doctors, psychiatrists, mandated programming, case managers, child protection staff, parenting education groups, groups for families, probation officers, and so on. Professional supports were identified as crucial to MIAP moving on. "I have enjoyed [Caring Dads]. It seems to focus on what I need." – James

It was also identified that the therapeutic relationship between staff and the MIAP was crucial to assist in the healing process. "He's not looking for me to fail. He'll steer you in the right direction as long as you're willing to go in that direction." – Brandon

Many accessed supports on their own; however, not all participants identified having easy accessibility to professional supports.

Well I had to do it myself, I mean there are services there, [I accessed counselling, but] I mean I had to pay for it […] but there's not much help no, and to top it off my wife at the time, she worked at [a social services agency]." – John

I have a really good supervisor. She told me I should take a week off [and I saw my EAP right away]. – Cameron

However, an absence of support made it more difficult for participants to cope and move forward from IPV and related events.

I felt like a child that no one wanted to help. There was nowhere that I could go to call […] I mean the only place would be the cop shop, and I'm not going to go there, and the other option is […] the mental hospital. I'm like 'that's not the issue, I'm not mentally handicapped or psycho or something, I'm just depressed and stressed and I need some help. But, a lot of times back then that's what people tell me, I need to go on pills or I need to see a doctor, I'm like no, I can deal with it, it's just sometimes all it takes is someone to listen. – Peter

Participants spoke of feeling as if there should be more support to unify the family holistically, especially in cases of bilateral violence.

I think there has to be work done on both sides because how do you get guys to stop beating their wives up or whatever if these girls are all doing the same thing. There has to

be some middle ground or something to work towards something that makes both sides

work. – Kevin

[I think it would be helpful if my wife was learning the same things I've learned in PAR

and Caring Dads]. She's not the best at parenting, or other things, it's just that there are

other underlying factors. Like my wife has a couple mental disorders that makes it really

hard, and when I'm tired I just can't deal with it. – George

The participants identified that there was more complexity to the violence and felt that it

was difficult that their partner did not learn the same educational material as they did at

mandated groups or other supports. As such, participants felt holistic familial supports would

have been more beneficial.

Professional Groups for MIAP. A significant number of the men in this sample were

recruited from mandated programs or programs that provide services for MIAP. The participants

highlighted their experiences in the groups, and what they found helpful and not helpful. Many

participants found the information in the group helpful. However, some participants relayed they

may not have been ready to learn the material, and recognized in hindsight they were not in a

proper mindset to absorb the information presented in the group. "I wasn't objectively looking at

where I was participating, […] I was already wrapped up in all the name-calling and to some

degree, all the head games and nastiness" – Tyrone

However, many found the information helpful from the group, as it taught them about

relationships, healthy boundaries, coping skills, and so on. Others emphasized that although it

was helpful, it is not a catch-all approach, and other systems are needed in place to facilitate

healing and growth.

Just doing the PAR Program isn't enough […] You're sitting with all these fucking guys in there that get pissed off, right? They're fucking angry, and they are pissed off about shit they can't control […] and you learn [to deal with that] in anger management, right? […] So it's like one is useless without the other one. – Kevin

[I feel one-on-one counselling should be offered at the same time as the group]. You'll never be able to gain as much in a group as you would be able to discuss with just your counsellor [I feel personally when I'm there a little bit anxious, I'm quite introverted and don't really like engaging with other people when I'm there. I'm shy. – Brandon

Despite finding the group helpful, many expressed that it was difficult to be in a group with men who had been identified as very violent, especially if they stated they did not commit any violence:

You are there with people who have committed bad assaults, and to be thrown in with those kind of people [when I was not violent] is not a good feeling. Not saying that those people are bad, because I don't know their story, but at the same time there are some people taking their second time in the program where you know have multiple charges against them. Being exposed to that is not ideal. – Morty

Some identified the stigma in attending the group, which again ties into sense of self.

[Stigma] is half the problem of the situation […] I pushed [my partner back to stop her from hitting me] and this other guy [in the group spoke of violently assaulting his wife by pushing her down the stairs because she drank some of his alcohol], so I'm grouped with him? – George

Despite some negative experiences, participants identified many positive things from the group, such as relating to other individuals experiencing similar things. One key theme that arose

from attending the group was a sense of connectedness to other men. This assisted in dissipating

feelings of being alone, and many men felt comfort in knowing that their situation was more

common than they had believed.

> I didn't think there were other guys in the same boat as me, right? And kind of the same
>
> stories too. – Cameron
>
> There are a lot of people in the same situation as you I guess, stuck in relationships like
>
> that. So you aren't alone I guess you could say […] and when you [attend the group]
>
> everyone understands." – Morty

Alongside this sense of connectedness, it was identified that positive rapport and

therapeutic relationship with the facilitator promoted better experiences in group. However,

participants found the group difficult to access between many different variables and boundaries.

Some found it difficult to initially get connected with the group, whereas some found it difficult

to access due to employment, and had to coordinate time off work to attend the group. Others

found it difficult to pay the cost of attending the group, but appreciated the sliding-scale

approach where the price was geared to the income of the participant.

Hope for Future and Social Change

Overall, participants acknowledged violence is unacceptable, and spoke of the many

negative aspects IPV brought into their lives, but hoped for change in the future of their lives, the

lives of their children, and society in general. This was elaborated through formal education,

more supports for men, and challenging of social norms that perpetuate problematic notions of

masculinities. Hope for a better future was prominent amongst the majority of the interviews,

and participants strongly reflected they believed no one else should have to experience IPV.

Children. Specifically, MIAP hoped for better for their children, and did not want their children to believe that violence is ever acceptable. "And I don't blame [CAS] for coming to take the kids out of the house and bringing them to my mother's house, because what was going on in the house, [...] was unacceptable." – Kevin

Participants felt strongly about their children, and did not want them to experience the same negative experiences and outcomes they had: "I don't want to show him anger, and I don't want him to be like me — or how I was." – Cameron

Participants expressed wanting their children to know better methods of coping and emotional expression, as well as to not perpetuate problematic masculinities as they had earlier in life:

> But I try to tell my [son], because my kid thinks sometimes he can't cry, and I always tell
> him you need to cry. Let it out [...] Because that messed up my life a lot with
> relationships I have had, even now there are times where I get emotional and I don't
> know what's wrong. – Peter

Formal Education. Education became a particularly prevalent theme as many identified they believed education for violence prevention and intervention was important to address this social issue. This entailed learning about healthy relationships and surrounding elements. "I just want some help with like how me and my girlfriend can deal with our situations better. How it would be better for our son so he won't have to see that violence, and fighting." – Josh

The majority agreed education is an essential piece to prevent further violence in the future and should be done so formally in younger years of education, as well as in public settings.

Why aren't they teaching this […] when these young men are entering adolescence, so

they learn these social skills, they learn the right way to deal with these emotions,

because this is a society where men don't talk about their feelings. – Kevin

Many reflected they wish they had learned the skills from counselling, PAR, or other

professional supports earlier in life, and hoped their children would have a better opportunity to

gain these skills at a young age. "Sex-ed should have been more about, you know, relationship

advice?" – Cameron

Others also elaborated on the importance of learning about boundaries, uncontrollable

factors in relationships, coping, communication, healthy relationships, and other topics that were

covered in groups for MIAP of IPV.

Future support for men. Participants felt there was specifically a lack of support for

men, and such gaps impacted their ability to heal from IPV.

I felt like there could have been more services […] everything was 'figure it out on your

own,' and that can be extremely stressful for someone. Especially if they do not have the

resources […] what about people who have no extended family, or you know, maybe

don't have friends or social support systems, and they don't have finances, where are they

going to stay? What are they going to do? And it's so scary. You're backed into a corner

and that's a scary place to be. – Brandon

They also expressed hope for men being able to surpass negative stigma in society to

move forward and heal.

I would like to see is men to recognize their strength, as opposed to physical strength, as

opposed to be able to stand from crying, their strength is not necessarily to be physically

strong or stubborn in their mind, or resistance of everything, you know I think the

strength in each and every one of us is to recognize that we are powerless and that

powerlessness we can surrender to a better place than we are in. – Luke

It's very disheartening when you look at the support for domestic abuse and it's just the

way it is […] and [those] are meant for the cases that are typical of what was domestic

violence, right now it's both sides of the coin right. – George

Others also spoke of the potential benefits of offering an inpatient centre or shelter for

MIAP of IPV who were unable to return home. This could provide time for the man to have a

safe place to stay, and also obtain education about IPV and coping skills, while waiting to be

connected to related services.

I'm going back to that service like I said; it would be a men's shelter. Not because we

want to beat up our women or want to separate from women, that's not the idea. The idea

is to unify our relationship with our wives or girlfriend or children or whatever it is. –

Luke

It was also emphasized that such new supports for men would not only be a shelter but a

place for men to get other forms of emotional support and information, as such resources were

identified as a missing need. Many felt, specifically that there are less resources for fathers

opposed to mothers. Participants elaborated about how this lack of support hindered their ability

to learn parenting skills. If there were parenting services they could access, they reported being

one of the few dads there and felt out of place as a result.

I just feel like there should be more programs for dads. It doesn't even have to be around

specifically abuse, or anything negative. There needs to be more of that stuff where

people can get the resources and the help. – Peter

Social Change. Participants spoke of the importance of addressing IPV as a social issue, as a strictly criminalized approach does not facilitate healing. This does not mean MIAP do not take accountability for their actions, but there need to be more prevention methods in place to address the holistic nature of IPV.

> In society, […] everything is a wait until a problem happens, just like the legal system
>
> […] the police are reactive; they aren't preventative. – George
>
> I don't think domestic violence is much of [criminal] issue [in all aspects], but it's more
>
> of social justice issue. It is a social justice issue […] because it's preventable with the
>
> right education. – Kevin

Other participants identified the need for changes in approach from the legal system's perspective, as well as in programs to support fathers and families. MIAP also identified they hoped that at a societal level, there would be changes to social norms, so men felt more able to speak about their feelings.

Conclusion

This chapter summarized the key themes and findings expressed by the thirteen participants. An overarching Altered Sense of Self was prominent in the other six themes, consisting of: 1) Complexity of Intimate Relationships and IPV; 2) Precipitating Factors; 3) Disconnected Experience with the Legal System; 4) Ripple Effect of IPV on Life; 5) Impact of Support Systems; and 6) Hope for the Future and Social Changes to capture the lived experiences of the MIAP. The next chapter discusses these results in relation to other literature surrounding MIAP.

Chapter 5 – Discussion and Conclusion

My research explores the lived experiences among MIAP of IPV within Thunder Bay. Descriptive phenomenology was used to reveal rich insights from thirteen participants on the question that guided the research design and analysis, which is: What are the lived experiences of men identified in the legal system as perpetrators of intimate partner violence against women? The data obtained from first-hand accounts revealed the complexity of IPV. The themes that stem from the participants' narratives reveal an "Altered Sense of Self" due to the experiences of IPV and related events. Specifically, my research challenges dominant narratives that only 'bad' men perpetrate unilateral violence in instances of IPV (Wang, 2016) and aligns with other research that highlights varying narratives in IPV (Armenti & Babcock, 2016; Cannon et al., 2016; Johnson, 2016; Meyer, 2015).

This research is intended to address men's experiences with IPV in Thunder Bay. Given the voluntary and qualitative nature of this study, the participants who shared their stories do not reflect the experience of all male perpetrators of violence, either in Thunder Bay or elsewhere. Despite this research highlighting different narratives surrounding IPV, the voices of other perpetrators are absent from this research. The men from this sample consistently identified either bilateral violence indicative of men's perception of toxic relationships or wrongful charges indicative of men's perception of not being responsible for violence. However, no one in the sample identified as being a one-sided perpetrator of violence towards their female partner. There were also rare accounts of recurrent violence. While the voices of these men cannot be discredited, one can assume those who self-select to share their stories of IPV may not reflect individuals who lack insight into the seriousness of their violent behaviour and responsibility for their actions. Such types of perpetrators require further research as they are at higher risk for

recidivism (Willams & Stansfield, 2017). Despite literature arguing that bilateral violence is more common than dominant narratives suggest (Hamberger & Larson, 2015; Hines, Douglas & Straus, 2016; Johnson, 2010), there is still a plethora of evidence about unilateral violence perpetrated by men onto women. It is undisputed that women face more fatal forms of violence than men (Barner & Carney, 2011; Fagan, 1996; Fleming, 2015, Kelly & Johnson, 2008; Robinson et al., 2016, Wang, 2016, Zorza, 1992). My research suggests that those interested and willing to discuss violence in their lives may not be representative of the majority of IPV cases. Although this sample was limited, it is still very valuable in highlighting different forms of violent relationships in Thunder Bay, as this area struggles with some of the highest rates of IPV in the country (Statistics Canada, 2013). This is not to say that these findings are not important or relatable to other men in the community, as the findings highlight important systematic issues within cases of IPV, but there are other types of perpetrators that are not present in this sample.

Key Findings

The essence of the thematic analysis revealed participants had an altered sense of self through their experiences with IPV. Overall, the participants in this sample perceived themselves very negatively, which may be indicative of their personal accountability for their violent behaviour. It was noteworthy that their perception of self was altered in both positive and negative ways throughout the process, but the negative self-concept impeded their ability to heal and rehabilitate from the violence. A shift in view of self is rarely addressed in IPV programs, and support programs have also been known to negatively impact sense of self due to shame-based, non-holistic methods (Devaney & Lazenbatt, 2016). This is consistent with literature which argues most programs do not holistically focus on men's experiences that impact self-concept, for example, the presence of historical trauma/adversity or substance abuse (Easton &

Crane, 2017; Herman et al., 2014; Rizza, 2009). Given that negative self-concept was an impediment to healing, the addition of activities in programs to address issues of shame and negative self-concept warrants further exploration.

Impact of Support. Findings from this study indicate that with the right support, self-concept can be improved. Such positive support may facilitate positive growth and change in self, which can have a ripple effect into other avenues of life, such as healthy relationships and effective coping. Findings reveal support has substantial impact on being able to identify personal needs and improve outcomes of intimate relationships. Such findings are consistent with McConnell, Barnard, and Taylor, (2017), who found that joint interventions with couples who are violent towards one another can improve outcomes for the family post-programming. Increased, accessible support is especially relevant in couples for whom bilateral violence is present (Babcock, Armenti & Warford, 2017; Kahn, Epstein, & Kivlighan, 2015), opposed to the dominant discourse of solely male-to-female violence (Antunes-Alves & de Stefano, 2014; Barocas et al., 2016; Hamel, 2014). Such support should be available to both individuals in the relationship if appropriate (Wray, Hoyt & Gerstle, 2013). Support needs to be done with more collaboration between service providers and other institutions, as well as through programs that are more comprehensive, easy to access, multi-level, educational, and preventative (Bohall et al., 2016; Hamby et al., 2015; WHO, 2012). Such collaboration ensures comprehensive and systematic treatment of a family, to prevent further risk and harm. Anti-violence and more comprehensive programming would be more helpful for the outcomes of women, (Kimmel, 2002; Saunders, 2002). Especially in instances of bilateral violence there should also be services offered to the female partner, which men from this sample identified as a gap.

Family Reunification. The findings from this research suggest men prefer family reunification, family therapy, and holistic family treatment in healing from IPV while maintaining a family structure. While research suggests family therapy or support may be an effective strategy to promote healing (Armenti & Babcock, 2016; Hamby et al., 2015), considerable caution is warranted due to the concerns for the safety of women and children (Thomas et al., 2015, Wilson, Fauci & Goodman, 2015). Internationally, 40-70% of female murder victims are killed by their male intimate partner (WHO, 2012). More specifically, in Canada, a woman is killed every six days as the result of IPV, and in Ontario a woman is killed is every thirteen days (Cross et al., 2018). It is estimated that in Canada, 362 000 children are exposed to IPV annually (Canadian Women's Foundation, 2018). The harmful effects of IPV on children include trauma, and a variety of negative health outcomes (Finkelhor, Turner, Shattuck, & Hamby, 2015; WHO, 2017). Furthermore, separation within the intimate relationship increases the risks for women and children (McConnell et al., 2017) which warrants high caution from practitioners, and compressive and effective safety plans.

Thus, while participant's identified family structures as an important healing component for men, considerable efforts from various systems are required to safely support families. I also note that, as Nybergh et al. (2016) indicate, careful screening needs to take place to see if there is coercive control, especially as men are more likely to exude such forms of violence. Such risk factors put women's and children's needs in the forefront. To achieve safety, intervention may include close collaboration with systems involved with the family case such as child services, IPV services, family courts, and criminal justice systems (McConnell et al., 2017). There must be reliable safety planning (Armenti & Babcock, 2016), and specific interventions created for the violent perpetrator to provide appropriate rehabilitation (Aaron & Beaulaurier, 2017). More

compressive supports and services may allow a safe environment while utilizing therapies to work through triggers, trauma, and violent behaviour. Goodman and Smyth (2011) explore informal support networks for survivors of IPV, and found them to be beneficial in supporting perpetrators. Thus, informal supports may be an additional resource that can be provided to male perpetrators. However, it is essential informal support networks are overseen by professionals to ensure violent or aggressive behaviours are sufficiently addressed. McConnell et al., (2017) also emphasize the importance of professionals being in contact with the partner (if applicable) to gather information about family dynamics and secure safety and monitor risk. Strong support from professionals aligns with participants in the study who identified strong social supports having a beneficial impact on their lives. Many gave input about the value of informal support groups and how they believe more support groups are needed for men.

While it is important to acknowledge that sending men home after release from incarceration contributes to further potential risk, these men require resources to move forward from violence. As mentioned, relying on prosecution alone as a deterrent is not effective as recidivism is a prominent issue (Day et al., 2014; Devaney & Lazenbatt, 2016). While there is an unquestionably an immediate need for separation of the two parties involved in the violence to ensure safety of women and children, providing direct support to both men and women in family reunification may help to heal the family, and prevent recidivism or further violence (McConnell, Barnard, & Taylor, 2017; Wray, Hoyt & Gerstle, 2013). Men also should not be forced into homelessness which will only harm them further and therefore create increased problems for their families. For example, as participants identified, mirroring the findings of Rajan and McCloskey (2007), there are may be many financial and employment repercussions for the female partner, as well as difficulties completing all child responsibilities on her own.

While the men expressed a need for reunification as a part of their healing process, considerable caution is required to maintain safety and ensure that the rights and needs of the women and children are also attended to. Thus, reunification is only appropriate in cases where safety is confirmed and the female partner is willing to continue the relationship. As such, access to children is a separate matter from reconciliation. Reunification needs to be closely monitored, especially in instances where men who engage in coercive control, as these instances can be particularly dangerous to children as well (Johnson, 2010; Kelly & Johnson, 2008). Such safety concerns again assert the need to look at violence in a spectrum opposed to in monolithic manners. There must be caution about the suggestions given by men from this sample, especially as they did not display coercion and control. Men need to be accountable for their violent behaviour; however, the right support is needed to assist men and families move forward free from violence. The goal of the woman in the relationship should be acknowledged, as family reunification may not be consistent with her wishes or the need for a safe environment.

Police and Legal Interventions. The participants suggest police intervention is key to the outcome of their family's situation. Hamby et al., (2015) also emphasize the importance of positive police interactions with families with IPV to ensure best outcomes for those families. Examples of positive interactions with police are: transparency during the intervention, referrals to legal advocacy, no excessive use of force, assistance in providing a safety plan, and connection to appropriate resources. Participants who identified positive interactions with police and other legal institutions reported having an improved experience moving forward and healing. Such experiences with legal systems are consistent with research that advocates for positive responses in legal services to best support families with struggling with IPV (Westera & Powell, 2017). Although the police have a responsibility to protect, and this includes removal of a violent

offender from the victim's presence, a firm but supportive stance from police and legal systems may assist in men taking responsibility for their actions and seeking support to address their violent behaviour (Williams & Stansfield, 2017). The participants in this research highlighted their experience of feeling disconnect with the legal system, and how negative experiences, such as not feeling heard or supported, impacted their ability to move forward, thus contributing to a negative self-concept. Such research calls for legal institutions to improve response to IPV cases and assist in facilitate readiness of men to engage in additional supports and outcomes for families that are experiencing IPV (Brickell, 2017). However, as mentioned, doing so much be done in consort with the family's safety in the forefront, and requires specific planning to meets the needs of that family.

  Precipitating Factors. Another important theme that arouse from the data was the precipitating factors of IPV in the relationship. It is difficult to identify one sole factor that contributed to the violence, as is not so simple, and everyone is impacted by factors differently. For example, many participants indicated there was no historical IPV in their relationships and that the violence that occurred was due to a build-up of emotions and poor conflict resolution. In such situations, they identified that it was solely this experience that violence occurred in. All instances of IPV are different, exist on a spectrum, and require specific treatments and responses to meet the unique needs of all couples and families (Johnson & Leone, 2005). Some participants did identify traumatic precipitating factors; however, many also identified situational factors. Research by Dutton and Corvo (2006) and Rizza (2009) identifies the impact of trauma and adversity on perpetration of violence; however, this does not insinuate correlation. However, it is crucial for clinicians to be aware of previous trauma to assist in healing and prevention of

violence. Further research is required to explore precipitating factors and appropriate therapy to address historical trauma.

Impact of IPV. The presence of IPV in the participants' lives presented a ripple effect into all aspects of their lives. Although each participant was impacted differently, IPV became entrenched in every part of their lives. IPV impacted the participants as well as their families at all levels, which reveals the need for more comprehensive services to better support families (Rizza, 2009). Participants identified that they felt a combination of shelter, support groups, individual counselling, legal support, and educational supports would have been helpful to holistically address the problem. Interventions, once again, must be done with the family's safety in the forefront and ensure that individuals are accountable for violence; however, addressing only one aspect of an individual's life will not holistically treat the problem.

Participants disclosed the ways in which they struggled with emotional regulation which impeded their ability to cope and forge healthy relationships. Evidence suggests societal views of men are that they should not express emotion, are tough, aggressive, and dominant (Kimmel, 1992; Price-Robertson, 2012; Smith et al., 2015). Although a direct correlation cannot be established, one can question whether the dominant discourse of masculinity has an impact on emotional regulation in men. Previous programs designed for male perpetrators of violence have focused solely on the socialization of men in relation to violence (Pence & Paymar, 1993; Schrock & Padavic, 2007). However, with participants disclosing difficulties in emotional expression, further research should explore emotional regulation and coping strategies as an addition to existing programming.

Masculinities. Participants identified, problematic notions of masculinities presented many difficulties in their lives, in terms of their own sense of self, forging of relationships,

expression of emotions, and how they felt others perceived them. Although such masculinities do not directly lead to violence (Jewkes et al., 2015b), these normalized masculinities were internalized (Culler, 1982) which negatively impacted men's sense of self and their ability to express emotions, reflected through the elaboration of childhood experiences, influence from peers, and adherence to social norms. Such concepts align with research that speaks of how entrenched instill ideas are harmful to those who attempt to ascribe to them (Smith, 2012; Southwarth, 2016; Tarrant & Katz, 2008). Many men identified there should be social change to avoid further harm in future generations, as they felt problematic masculinities had monumental negative impacts on their children. As indicated, the addition of positive parenting such as Triple P or Caring Dads be a benefice addition to support programs. Thus, the addition of positive parenting such as Triple P or Caring Dads be a benefice addition to support programs. Many men were able to identify accountability and reflected they strongly hoped their children would experience better outcomes in life.

Strengths and Limitations

The descriptive phenomenological methods that were utilized gave the male participants an opportunity to share their experiences. The voices of MIAP are often lacking (Herman et al., 2014) in existing IPV literature. Therefore, research highlighting the experiences of men is an important addition to understand IPV more holistically. A strength of this research is a rich description of experience from 13 men exploring a very sensitive and often silenced topic. This research also highlights themes that challenge dominant concepts surrounding IPV, for example, it is not only 'bad men' that consistently and unilaterally harm women (Johnson & Leone, 2005; Kelly & Johnson, 2008). My research allows for deep and rich insight in an under researched demographic area where rates of IPV are very high in comparison to the rest of the country

(Statistics Canada, 2013). Given that some current models, such as the Duluth Model, that support male perpetrators of IPV are based on the voices of five battered women and four male subjects (Pence & Paymar, 1993), the further exploration of various voices in violence may serve to target the unique needs of different individuals. Such models have established many effective foundations for violence prevention and intervention, but expanding on these paradigms is required to provide the best support to those impacted by IPV.

Despite the strengths of this study, there are also some limitations. One such limitation is the lack of cultural diversity in the sample. The majority of the participants were Caucasian, with a small number of participants identifying as Indigenous. This lack of representation suggests that there should be further research with these specific populations. Given the participation was voluntary and a more diverse sample was not attained, further research should focus on more diverse populations, to establish appropriate interventions for all individuals impacted by IPV, opposed to just cisgender, straight, middle-class individuals who fit the dominant discourse (Cavanaugh et al., 2012; Collins, 2015; Rennison & Planty, 2003).

My research represents men who identify primarily with bilateral violence or unwarranted charges. The generalizability of the findings is limited to a particular group of men; however, others may share their experiences. In addition, the sample was attained from a geographical location which may represent unique attributes and thus, further research should address men across geographical boundaries. Finally, this research represents the author's initial research endeavor. As a first-time researcher, I learned a lot about the process and doing qualitative, face-to-face interviews. It was often difficult for me to embrace the role of a researcher opposed to a front-line worker. I had support from my supervisors and methods to assist in the process.

Importance to current and future research

My study is important as it informs local clinicians and policy makers about men's experience of IPV which is important to providing informed care. The findings that I discussed in Chapter 4 may assist in evaluating current strengths and weaknesses in practices and programs available for male perpetrators of violence. Understanding the needs of men may influence more comprehensive programming in the community to address IPV while keeping victims safe. This is especially important in cities such as Thunder Bay where there are alarmingly high rates of violence and many barriers to services.

The current study reflects the complexity of IPV and argues for a need for a multi-level response within various systems to address IPV. While decades of feminism have resulted in changes in gender norms and expectations, challenge of hegemonic masculinities needs to continue if rates of IPV are to drop (Fleming et al., 2015). Challenging dominant discourses of masculinities is especially important in a geographic location where conceptions of masculinities are narrow (Sullivan, 2009b). Also, increased formal supports are required, such as more training for helping professionals, re-examination within police departments of how they address instances of IPV, critical reflection on gendered assumptions surrounding IPV, and further research to continue understanding of IPV (Barner & Carney, 2011; Douglas & Hines, 2011). In addition, the inclusion of more accessible information and educational initiatives that focus on preventative measures (McConnell et al., 2017; Wray, Hoyt & Gerstle, 2013) are needed to ensure that violence is mitigated among younger generations.

Future research should address the needs of additional populations to expand programming to meet the needs of all perpetrators of violence (Armenti & Babcock, 2016). Furthermore, an exploration of the population and types of violence in Thunder Bay may assist

in the establishment of more appropriate programs for an area with such a high rate of IPV. Given the uniqueness of the sample, future research should explore the experiences of men from more diverse types of relationships and from those at different points on their healing journey. An exploration of the narratives of all family members involved in intimate partner relationships may assist in establishing programming that meets the needs of the family unit and promotes the safety of all involved. In addition, given the disconnect between the experience of men and the legal system, further research is needed with the legal system regarding their response to IPV.

Conclusion

This research was completed as part of my thesis for my Master's in Social Work at Lakehead University and offers much insight into the needs of male perpetrators of violence in the city of Thunder Bay. Particularly, the core themes in the research are 1) Complexity in Intimate Relationships and IPV; 2) Precipitating Factors to IPV; 3) Disconnected Experience with the Legal System; 4) Ripple Effect of IPV on Life; 5) Impact of Support Systems; and 6) Hope for the Future and Social Change. These themes reveal an Altered Sense of Self and collectively emphasize the need for more diverse approaches to assist families struggling with IPV. The findings from this research may be useful in addressing the unique needs of men in violent relationships and in preventing instances of IPV. Doing so is particularly useful in different schools of social work, and other disciplines that may work with MIAP or families impacted by IPV, providing insight into an often misunderstood population. My research highlights many gaps identified from the participants, which otherwise are often unheard of. Such reflection from their findings was possible due to the thematic analysis that stemmed from thirteen men who were brave enough to share their stories. I was very privileged to be a part of

this process and be trusted listen to their experiences and to highlight their stories as part of this research.

References

Aaron, S. M., & Beaulaurier, R. L. (2017). The need for new emphasis on batterers intervention programs. *Trauma, Violence & Abuse, 18*(4), 425 – 432. DOI: 10.1177/1524838015622440

Abrar, S., Lovenduski, J., & Margetts, H. (2000). Feminist ideas and domestic violence policy change. *Political Studies*, *48*(2), 239 – 262. DOI:10.1111/1467-9248.00258

Ali, P. A., Dhingra, K., & McGarry, J. (2016). A literature review of intimate partner violence and its classifications. *Aggression and violent behavior*, *31(1),* 16 – 25. DOI:10.1016/j.avb.2016.06.008

Alonzo, E. (2014). Women between Agency and Coercion. In Marway H. &Widdows, H.(2015). G*enders and Sexualities in the Social Science* (pp. 34 – 55). New York, BY: Palgrave Macmillon. DOI: 10.1057/9781137015129

Anderson, K., & Jack, D. (1991). Learning to Listen: Interview Techniques and Analyses. In Gluck, S. B., & Patai, D. (Eds.). *Women's words: The feminist practice of oral history*. New York, NY: Routledge.

Antunes-Alves, S., & de Stefano, J. (2014). Intimate partner violence: Making the case for joint couple treatment. *The Family Journal, 22*(1), 62 – 68. DOI: 10.1177/1066480713505056

Armenti, N. A., & Babcock, J. C. (2016). Conjoint treatment for intimate partner violence: A systematic review and implications. *Couple And Family Psychology: Research And Practice*, *5*(2), 109 – 123. DOI:10.1037/cfp0000060

Atkinson, J. (2007). Violence against Aboriginal women: reconstitution of community law-the way forward. *Indigenous Law Bulletin*, *6*(27), 13 – 17. Retrieved from: http://www.austlii.edu.au/au/journals/IndigLawB/2001/62.html

Babcock, J. C., Armenti, N. A., & Warford, P. (2017). The trials and tribulations of testing couples-based interventions for intimate partner violence. *Partner Abuse, 8*(1), 110 – 122. DOI: 10.1891/1946-6560.8.1.110

Babcock, J. C., Green, C. E., & Robie, C. (2004). Does batterers' treatment work? A meta-analytic review of domestic violence treatment. *Clinical psychology review*, *23*(8), 1023 – 1053. DOI: 10.1016/j.cpr.2002.07.001

Barner, J. R., & Carney, M. M. (2011). Interventions for intimate partner violence: A historical review. *Journal of Family Violence*, *26*(3), 235 – 244. DOI:10.1007/s10896-011-9359-3

Barocas, B., Emery, D., & Mills, L. G. (2016). Changing the Domestic Violence Narrative: Aligning Definitions and Standards. *Journal of Family Violence*, *31*(8) 1 – 7. DOI:10.1007/s10896-016-9885-0

Bartky, S. (1988). Foucault, Femininity, and the Modernization of Patriarchal Power. In Kourany A., Sterba J., Tong, R. (Eds). (1992). (2nd Ed), *Feminist Philosophies* (pp. 119 – 143). New Jersey: Prentice-Hall.

Bazzul, J., & Sykes, H. (2011). The secret identity of a biology textbook: Straight and naturally sexed. *Cultural Studies of Science Education*, *6*(2), 265 – 286. DOI:10.1007/s11422-010-9297-z

Bell, L. (2014). Ethics and Feminist Research. In Hesse-Biber, S. N. (Ed.). (2014). *Feminist Research Practice: A Primer* (pp.73 – 106). (2nd Ed). Thousand Oaks, CA: Sage Publications.

Berger, R. (2015). Now I see it, now I don't: Researcher's position and reflexivity in qualitative research. *Qualitative Research*, *15*(2), 219 – 234. DOI: 10.1177/1468794112468475

Bergoffen, D. (2012). The Society for Phenomenology and Existential Philosophy, Feminism, and the Epoché. *The Journal of Speculative Philosophy*, *26*(2), 278 – 290. Retrieved from: https://muse.jhu.edu/article/486385/pdf

Black, B. M., Weisz, A. N., & Bennett, L. W. (2010). Graduating social work students' perspectives on domestic violence. *Affilia*, *25*(2), 173 – 184. DOI: 10.1177/0886109910364824

Bierie, D. M., & Davis-Siegel, J. C. (2015). Measurement matters: Comparing Old and New Definitions of Rape in Federal Statistical Reporting. *Sexual abuse: a journal of research and treatment*, *27*(5), 443 – 459. DOI:10.1177/1079063214521470

Brickell, K. (2017). Clouding the Judgement of domestic law: Victim blaming by institutional stakeholders in Cambodia. *Journal of Interpersonal Violence, 32*(9), 1358 – 1378. DOI: 10.1177/0886260515588919

Briere, J. N., & Scott, C. (2014). (2nded). *Principles of trauma therapy: A guide to symptoms, evaluation, and treatment*. London: Sage Publications.

Brownmiller, S. (2013). *Against our will: Men, women and rape*. New York, NY: Open Road Media.

Bohall, G., Bautista, M., & Musson, S. (2016). Intimate Partner Violence and the Duluth Model: An Examination of the Model and Recommendations for Future Research and Practice. *Journal Of Family Violence*, *31*(8), 1029 – 1033. DOI:10.1007/s10896-016-9888-x

Bosson, J. K., Vandello, J. A., Burnaford, R. M., Weaver, J. R., &ArzuWasti, S. (2009). Precarious manhood and displays of physical aggression. *Personality and Social Psychology Bulletin*, *35*(5), 623 – 634. DOI: 10.1177/0146167208331161

Boyatzis, R. E. (1998). *Transforming qualitative information: Thematic analysis and code development*. Thousand Oaks, CA: Sage.

Butler, J. (1988). Performative acts and gender constitution: An essay in phenomenology and feminist theory. *Theatre journal*, *40*(4), 519 – 531. Retrieved from: http://www.jstor.org/stable/3207893

Butler, J. (1990). Subjects of Sex/Gender/Desire. In Kemp, S. & Judith, S. (1997). *Feminisms* (pp. 278 – 285). New York, NY: Oxford Presss

Calton, J. M., Cattaneo, L. B., & Gebhard, K. T. (2016). Barriers to help seeking for lesbian, gay, bisexual, transgender, and queer survivors of intimate partner violence. *Trauma, Violence, &Abuse*, *17*(5), 585 – 600. DOI: 10.1177/1524838015585318

Canadian Women's Foundation. (2017). The Facts About Gender Based Violence. Retrieved from: https://www.canadianwomen.org/the-facts/gender-based-violence/

Cannon, C., Hamel, J., & Buttell., F. (2016). A survey of domestic violence perpetrator programs in the United States and Canada: findings and implications for policy and intervention. *Partner abuse*, *7*(3), 226 –276. DOI: /10.1891/1946-6560.7.3.226

Carastathis, A. (2008). The invisibility of privilege: a critique of intersectional models of identity. *Les Ateliers De L'Ethique, 3 (2)*, 23 – 38. Retrieved from: https://papyrus.bib.umontreal.ca/xmlui/bitstream/handle/1866/3095/pdf_03_Anna_Carast athis.pdf?sequence=1

Cattaneo, L. B., & Goodman, L. A. (2015). What is empowerment anyway? A model for domestic violence practice, research, and evaluation. *Psychology of Violence*, *5*(1), 84 – 94. DOI: 10.1037/a0035137

Cavanaugh, C. E., Messing, J. T., Petras, H., Fowler, B., La Flair, L., Kub, J., . . . Campbell, J. C. (2012). Patterns of violence against women: A latent class analysis. *Psychological Trauma: Theory, Research, Practice, and Policy, 4*(2), 169 – 176. DOI:1037/a0023314

CEDC (2009). Supporting and Enhancing Business in Thunder Bay. *Community Economic Development Commission*. Retrieved from: http://www.thunderbay.ca/CEDC/Reports_and_Publications/Community_Profile_Facts_and_Statistics.htm

Chamarette, J. (2015). Embodied worlds and situated bodies: feminism, phenomenology, film theory. *Signs: Journal of Women in Culture and Society*, *40*(2), 289 – 295. DOI: 10.1086/678144

Cho, J., & Trent, A. (2006). Validity in qualitative research revisited. *Qualitative research*, *6*(3), 319 – 340. DOI: 10.1177/1468794106065006

Colaizzi, P. F. (1978). Psychological research as the phenomenologist views it. *Existential-phenomenological alternatives for psychology* (pp. 48-71). New York: Oxford University Press.

Collins, P. H. (1991). Mammies, Matriarchs and Other Controlling Images. In Kournay, J., Sterba, J. & Tong, R. (1999). (2nded). *Feminist Philosophies* (pp.142 – 153). Upper Saddle River, NJ: Prentice Hall.

Collins, P. H. (2015). Intersectionality's definitional dilemmas. *Annual Review of Sociology, 41*(1), 1 – 20. DOI:10.1146/annurev-soc-073014-112142

Connell, R. W.& Messerschmidt, J. (2005). Hegemonic Masculinity: Rethinking the Concept. *Gender Society, 19*(6), 829 – 859. DOI: 10.1177/0891243205278639.

Connell, R. W. (2005a). Change among the gatekeepers: Men, masculinities, and gender equality

    in the global arena. *Signs: Journal of Women in Culture and Society*, *30*(3), 1801 –

    1825.DOI: 10.1086/427525

Connell, R. W. (2005b). *Masculinities*. (2nd Ed). Los Angeles, CA: University of California

    Press.

Cook-Craig, P., Lane, K., & Siebold, W. (2010). Building the capacity of states to ensure

    inclusion of rural communities in state and local primary violence prevention planning.

    Journal Of Family Social Work, *13*(4), 326 – 342. DOI:10.1080/10522158.2010.492498

Cook, P. W. (2009). *Abused men: The hidden side of domestic violence*. (2nd Ed). Westport, CT:

    Greenwood Publishing Group, Inc.

Corvo, K., & Johnson, P. J. (2003). Vilification of the "batterer". How blame shapes domestic

    violence policy and interventions. *Aggression And Violent Behavior*, *8*(30), 259 – 281.

    DOI:10.1016/S1359-1789(01)00060-X

Corvo, K., Dutton, D., & Chen, W. Y. (2009). Do Duluth Model interventions with perpetrators

    of domestic violence violate mental health professional ethics?.*Ethics& Behavior*, *19*(4),

    323 – 340. DOI: 10.1080/10508420903035323.

Cox, E. W. (1877). *The Principles of Punishment: As Applied in the Administration of the

    Criminal Law, by Judges and Magistrates*. London: Law Times Office.

Crane, C. A., & Easton, C. J. (2017). Integrated treatment options for male perpetrators of

    intimate partner violence. *Drug and alcohol review*, *36*(1), 24 – 33. DOI:

    10.1111/dar.12496

Crenshaw, K. (2006). Mapping the Margins: Intersectionality, Identity Politics and Violence

    against Women of Color. In Grewal, I., & Kaplan, C. (2006). *An introduction to women's*

    studies: Gender in a transnational world. (2nd Ed.). New York, NY: McGraw-Hill.

Creswell, J. W. (2012). *Qualitative inquiry and research design: Choosing among five*

    approaches. Thousand Oaks, CA: Sage publications.

Creswell, J. W. (2009). *Research design: Qualitative, quantitative, and mixed methods*

    approaches. Thousand Oaks, CA: Sage publications.

Cross, P. Ham, M., Khan, F. (2018). Enough Morning. We need action to end the killing of

    women. *TheStar.Com*. Retrieved from:

    https://www.thestar.com/opinion/contributors/2018/03/18/enough-mourning-we-need-

    action-to-end-the-killing-of-women.html

Culler, J. (1982). Reading as a Woman. *On Deconstruction: Theory and Criticism after*

    Structuralism. New York, NY: Cornell University Press.

Cunradi, C. B., Bersamin, M., & Ames, G. (2009). Agreement on Intimate Partner Violence

    Among a Sample of Blue-Collar Couples. *Journal Of Interpersonal Violence*, *24*(4), 551

    – 568. DOI:10.1177/0886260508317189

Day, A., Richardson, T., Bowen, E., & Bernardi, J. (2014). Intimate partner violence in

    prisoners: Toward effective assessment and intervention. *Aggression and Violent*

    Behavior,19(5), 579 – 583. DOI: 10.1016/j.avb.2014.08.002

Davis, J. W. (2008). Domestic violence: the "rule of thumb": 2008 Western Trauma Association

    presidential address. *Journal of Trauma and Acute Care Surgery*, *65*(5), 969-974. DOI:

    10.1097/TA.0b013e31817f9e6f

Delaney, R., & Brownlee, K. (Eds.). (2009). *Northern & Rural Social Work Practice: A Canadian Perspective*. Centre for Northern Studies, Lakehead University. Winnipeg, MB: Hignell Book Printing.

Dempsey, M. M. (2007). Toward a feminist state: What does 'effective' prosecution of domestic violence mean?.*The Modern Law Review*, *70*(6), 908 – 935. DOI: 10.1111/j.1468-2230.2007.00670.x

Denzin, N. K., & Lincoln, Y. S. (Eds). (2008). *Strategies of qualitative inquiry* (3rd Ed). Thousand Oaks, CA: Sage.

Department of Justice Canada (2002). Spousal Abuse Policies and Legislation: Final Report of the Ad Hoc Federal-Provincial-Territorial Working Group Reviewing. Retrieved from: http://www.justice.gc.ca/eng/rp-pr/cj-jp/fv-vf/pol/spo_e-con_a.pdf

Devaney, J., & Lazenbatt, A. (2016). *Domestic Violence Perpetrators: Evidence-Informed Responses*. London: Routledge.

Devaney, J. (2014). Male Perpetrators of Domestic Violence: How Should We Hold Them to Account?.*The Political Quarterly*, *85*(4), 480 – 486. DOI: 10.1111/1467-923X.12111

Dobash, R. E., & Dobash, R. P. (2003). *Women, violence and social change*. New York, NY: Routledge.

Douglas, E. M., & Hines, D. A. (2011). The helpseeking experiences of men who sustain intimate partner violence: An overlooked population and implications for practice. *Journal of family violence*, *26*(6), 473 – 485. DOI : 10.1007/s10896-011-9382-4

Doull, M., Oliffe, J., Knight, R., & Shoveller, J. A. (2013). Sex and straight young men: Challenging and endorsing hegemonic masculinities and gender regimes. *Men and Masculinities*, *16*(3), 329 – 346. DOI: 10.1177/1097184X13494837

Dowd, N. E. (2010). Asking the man question: masculinities analysis and feminist theory.

Harvard journal of law & gender, *33,* 415 – 430. Retrieved from:

http://scholarship.law.ufl.edu/cgi/viewcontent.cgi?article=1072&context=facultypub

Duff, A. (2001). Punishment, communication, and community. In Matravers, D. & Pike, J.

(2001). *Debates in Contemporary Political Philosophy: An Anthology* (pp. 388 – 407).

New York, NY: Routledge.

Duncanson. (2015). Hegemonic Masculinity and the Possibility of Change in Gender Relations.

Men and Masculinities, *18* (2), 231 – 248. DOI: 10.1177/1097184X15584912

Duke, S. A., Balzer, B. W., & Steinbeck, K. S. (2014). Testosterone and its effects on human

male adolescent mood and behavior: a systematic review. *Journal of Adolescent Health*,

55(3), 315 – 322. DOI: 10.1016/j.jadohealth.2014.05.007

Dukes, S. (1984). Phenomenological methodology in the human sciences. *Journal of Religion*

and Health, 23(3), 197-203. DOI: 10.1007/BF00990785

Dutton, D. G. (2006). *Rethinking Domestic Violence*. Vancouver, BC: UBC Press.

Dutton, D. G., & Corvo, K. (2006). Transforming a flawed policy: A call to revive psychology

and science in domestic violence research and practice. *Aggression and Violent Behavior*,

11(5), 457 – 483. DOI:10.1016/j.avb.2006.01.007

Dworkin, S. L., Fleming, P. J., & Colvin, C. J. (2015). The promises and limitations of gender-

transformative health programming with men: critical reflections from the field. *Culture,*

health & sexuality, *17*(2), 128 – 143. DOI: 10.1080/13691058.2015.1035751

Dworkin, S. L., Treves-Kagan, S., & Lippman, S. A. (2013). Gender-transformative

interventions to reduce HIV risks and violence with heterosexually-active men: a review

of the global evidence. *AIDS and Behavior*, *17*(9), 2845 – 2863. DOI: 10.1007/s10461-013-0565-2

Earp, J., Katz, J., Young, J. T., Jhally, S., Rabinovitz, D., & Media Education Foundation. (2013). *Tough Guise 2: Violence, Manhood & American Culture*. Northampton, MA: Media Education Foundation.

Edwards, T. (2004). *Cultures of masculinity*. New York, NY: Routledge.

Eisikovits, Z., Winstok, Z., Grauwiler, P., & Mills, L. G. (2008). Recent trends in intimate violence: Theory and intervention. *Children and Youth Services Review, 30*(3), 249 – 251. DOI: 10.1016/j.childyouth.2007.10.001

Evans, M. (1982). In Praise of Theory: The Case for Women's Studies. In Kemp, S. & Judith, S. (1997). *Feminisms* (pp.17 – 22). New York, NY: Oxford Press.

Fagan, J. (1996). *The criminalization of domestic violence: Promises and limits*. US Department of Justice, Office of Justice Programs, National Institute of Justice. Retrieved from: https://www.ncjrs.gov/txtfiles/crimdom.txt?iframe=true&width=95%&height=95%

Fairweather, L. (2012). *Stop Signs: Recognizing, Avoiding, and Escaping Abusive Relationships*. Berkeley, CA: Seal Press.

Finkelhor, D., Turner, H. A., Shattuck, A., & Hamby, S. L. (2015). Prevalence of childhood exposure to violence, crime, and abuse: Results from the national survey of children's exposure to violence. *Journal of American Medical Association, Pediatrics*, *169*(8), 746 – 754. DOI: 10.1001/jamapediatrics.2015.0676

Fisher, B. S. (2010). *Encyclopedia of victimology and crime prevention*. London: Sage.

Fisher, L. (2000). Phenomenology and feminism: Perspectives on their relation. In Fisher L., Embree L. (eds). (2000). *Feminist phenomenology. Contributions to Phenomenology* (pp. 17 – 38). Springer: Netherlands.

Fleming, P. J., Gruskin, S., Rojo, F., & Dworkin, S. L. (2015). Men's violence against women and men are inter-related: Recommendations for simultaneous intervention. *Social Science &Medicine*, *146*(1), 249 – 256. DOI: 0.1016/j.socscimed.2015.10.021

Fleming, P. J., Lee, J. G., & Dworkin, S. L. (2014). "Real Men Don't": constructions of masculinity and inadvertent harm in public health interventions. *Journal Information*, *104*(6). 1020 – 1035. DOI: 10.2105/AJPH.2013.301820

Flood, M. (2001). Men's collective anti-violence activism and the struggle for gender justice. *Development*, *44*(3), 42 – 47. DOI: 10.1057/palgrave.development.1110260

Frank, A. W. (2005). What is dialogical research, and why should we do it?. *Qualitative health research*, *15*(7), 964 – 974. DOI: 0.1177/1049732305279078

Fox, V. C. (2002). Historical perspectives on violence against women. *Journal of International Women's Studies*, *4*(1), 15 – 34. Retrieved from: http://vc.bridgew.edu/jiws/vol4/iss1/2

Gardiner, J. K. (2005) Men, Masculinities, and Feminist Theory. In Kimmel, M., Hearn, J., & Connell, R. W. (2005) *Handbook of Studies on Men & Masculinities* (pp. 35 – 50). Thousand Oaks, CA: Sage Publishing.

Gearing, R. E. (2004). Bracketing in research: A typology. *Qualitative health research*, *14*(10), 1429 –1452. DOI: 10.1177/1049732304270394

Goldfarb, S. (1996). The violence against women act of 1994: A promise waiting to be fulfilled: the civil rights remedy of the violence against women act: legislative history, policy implications & litigation strategy, a panel discussion sponsored by the association of the

bar of the city of New York, September 14, 1995. *Journal of Law and Policy*, *4*, 391 –

759.Retrieved from:

http://brooklynworks.brooklaw.edu/cgi/viewcontent.cgi?article=1344&context=faculty

Gondolf, E. W. (2007). Theoretical and research support for the Duluth Model: A reply to

Dutton and Corvo. *Aggression and Violent Behavior*, *12*(6), 644 – 657. DOI:

10.1016/j.avb.2007.03.001

Goodman, L., Dutton, M. A., Vankos, N., &Weinfurt, K. (2005). Women's resources and use of

strategies as risk and protective factors for reabuse over time. *Violence Against Women*,

11(3), 311 – 336. DOI: 10.1177/1077801204273297

Goodman, L. A., & Smyth, K. F. (2011). A call for a social network-oriented approach to

services for survivors of intimate partner violence. *Psychology of Violence, 1*(2), 79 – 92.

DOI:10.1037/a0022977

Goodmark, L. (2013). *A troubled marriage: Domestic violence and the legal system*. New York,

NY: New York University Press.

Groenewald, T. (2004). A phenomenological research design illustrated. *International journal of

qualitative methods*, *3*(1), 42 – 55. DOI: 10.1177/160940690400300104

Guerin, B., & de Oliveira Ortolan, M. (2017). Analyzing Domestic Violence Behaviors in their

Contexts: Violence as a Continuation of Social Strategies by other Means. *Behavior and

Social Issues*, *26*(1), 5 – 26. DOI: 10.5210/bsi.v26i0.6804

Gustafson, D. L. (2000). Best laid plans: Examining contradictions between intent and outcome

in a feminist, collaborative research project. *Qualitative Health Research*, *10*(6), 717 –

733. DOI: 10.1177/104973200129118787

Halberstam, J. (1998). *Female masculinity*. Durham: Duke University Press.

Hamberger, L., & Larsen, S. (2015). Men's and Women's Experience of Intimate Partner Violence: A Review of Ten Years of Comparative Studies in Clinical Samples; Part I. *Journal Of Family Violence*, *30*(6), 699 – 717. DOI:10.1007/s10896-015-9732-8

Hamby, S., Finkelhor, D., & Turner, H. (2015). Intervention following family violence: Best Practices and helpseeking obstacles in a nationally representative sample of families with children. *Psychology of violence, 5*(3), 325 – 336. DOI: 10.1037/a0036224

Hamel, J. (2014). *Gender-inclusive treatment of intimate partner abuse: Evidence-based approaches* (2nd ed.) Springer Publishing Co, New York, NY.

Harding, S. (1987). Introduction. Is there a feminist method? In. Harding, S. (ed). *Feminism and methodology. Social Science Issues* (pp. 1-14). Indiana University Press, Bloomington.

Hearn, J. (1998). *The violences of men: How men talk about and how agencies respond to men's violence to women*. Trobrige, Wilshire: Sage.

Hegarty, K. (2011). Domestic violence: the hidden epidemic associated with mental illness. *The British Journal of Psychiatry*, *198*(3), 169 – 170. DOI: 10.1192/bjp.bp.110.083758

Herman, K., Rotunda, R., Williamson, G., & Vodanovich, S. (2014). Outcomes from a Duluth model batterer intervention program at completion and long term follow-up. *Journal of Offender Rehabilitation*, *53*(1), 1 – 18. DOI:10.1080/10509674.2013.861316

Hesse-Biber, S, N. (2012). Feminist Research. Exploring, Interrogating, and Transforming the Interconnections of Epistemology, Methodology, and Method. *The Handbook of Feminist Research: Theory and Praxis* (2nd Ed) (p.2 – 26). Thunder Oaks, CA: London Sage.

Hillsburg, H. (2013). Towards a methodology of intersectionality: An axiom-based approach. *Atlantis: Critical Studies in Gender, Culture & Social Justice*, *36*(1), 3 – 11. Retrieved from: http://journals.msvu.ca/index.php/atlantis/article/viewFile/3054/2447

Hines, D. A., Douglas, E. M., & Straus, M. A. (2016). Controversies in Partner Violence. In

    Cuevas C. & Rennison (2016). *The Wiley Handbook on the Psychology of Violence* (pp.

    411 – 438). Malden, MA: John Wiley & Sons, LTD. DOI: 10.1002/9781118303092

Holden, G. W. (2003). Children exposed to domestic violence and child abuse: Terminology and

    taxonomy. *Clinical child and family psychology review*, *6*(3), 151 – 160. DOI:

    10.1023/A:1024906315255

Hong, L. (2000). Toward a transformed approach to prevention: Breaking the link between

    masculinity and violence. *Journal of American College Health*, 48(6), 269 – 279. DOI:

    10.1080/07448480009596268

hooks, b. (2000a). *Feminist Theory: From Margin to Center*. (2nd Ed). Cambridge, MA: South

    End Press Classics

hooks, b. (2000b). Theory as a Liberatory Practice. In Kolmar, W. & Bartkowski, F (2000).

    Feminist Theory: A Reader (pp.28 – 33). CA, California: Mayfield Publishing.

Hooper, C. (2012). *Manly states: Masculinities, international relations, and gender politics*.

    New York, NY: Columbia University Press.

Holter, Ø, G. (2005). Social Theories for Researching Men and Masculinities: Direct Gender

    Hierarchy and Structural Inequality. In Kimmel, M., Hearn, J., & Connell, R. W. (2005)

    Handbook of Studies on Men & Masculinities (pp. 15 – 34). Thousand Oaks, CA: Sage

    Publishing.

Howe, D. (2009). *A brief introduction to social work theory*. NY, New York: Palgrave

    Macmillan.

Humphreys, C., & Thiara, R. K. (2003). Neither justice nor protection: women's experiences of

    post-separation violence. *Journal of Social Welfare and Family Law*, *25*(3), 195 – 214.

    DOI: 10.1080/0964906032000145948

Husserl, E. (1964). The idea of phenemenology. The Hague, The Netherlands: Nijhoff.

Küpers, W. M. (2009). The Status and Relevance of Phenomenology for Integral Research: Or

    Why Phenomenology is More and Different than an" Upper Left" or" Zone# 1" Affair.

    Integral Review: A Transdisciplinary & Transcultural Journal for New Thought,

    Research, &Praxis, *5*(1), 51 – 95. DOI: 10.1.1.527.2322

Jansen, A. (2015). Positioning and subjectivation in research interviews: why bother talking to a

    researcher? *International Journal of Social Research Methodology*, *18*(1), 27 – 39. DOI:

    10.1080/13645579.2013.845711

Jewkes, R., Flood, M., & Lang, J. (2015a). From work with men and boys to changes of social

    norms and reduction of inequities in gender relations: a conceptual shift in prevention of

    violence against women and girls. *The Lancet*, *385* (9977), 1580 – 1589. Retrieved from:

    http://ro.uow.edu.au/cgi/viewcontent.cgi?article=3070&context=lhapapers

Jewkes, R., Morrell, R., Hearn, J., Lundqvist, E., Blackbeard, D., Lindegger, G., Quayle M..,

    Sikweyiya, Y. & Gottzén, L. (2015b). Hegemonic masculinity: combining theory and

    practice in gender interventions. *Culture, Health & Sexuality*, *17(sup2)*, 112 – 127.

    DOI:10.1080/13691058.2015.1085094

Jansen, A. (2015). Positioning and subjectivation in research interviews: why bother talking to a

    researcher?. *International Journal of Social Research Methodology*, *18*(1), 27 – 39. DOI:

    10.1080/13645579.2013.845711

Johnson, M. P. (2010). *A typology of domestic violence: Intimate terrorism, violent resistance, and situational couple violence*. Boston, NY: University Press of New England.

Johnson, M. P. (2016). Conflict and control. In Booth, A., Crouter, C., Clements M., Boone-Holladay, T (Eds). *Couples in Conflict: Classic Edition*, 95. New York, NY: Routledge.

Johnson, M. P., & Ferraro, K. J. (2000). Research on domestic violence in the 1990s: Making distinctions. *Journal of Marriage and Family*, *62*(4), 948 – 963. DOI: 10.1111/j.1741-3737.2000.00948.x

Johnson, M. P., & Leone, J. M. (2005). The differential effects of intimate terrorism and situational couple violence findings from the national violence against women survey. *Journal of family issues*, *26*(3), 322 – 349. DOI: 10.1177/0192513X04270345

Kahn, S. V., Epstein, N. B., & Kivlighan, D. M., Jr. (2015). Couple therapy for partner aggression: Effects on individual and relational well-being. *Journal of Couple & Relationship Therapy, 14*(2), 95 – 115. DOI: 10.1080/15332691.2014.966879

Katz, J. (2006). *The Macho Paradox: Why Some Men Hurt Women and How All Men Can Help*. Naperville, IL: Sourcebooks.

Katz, J. (2013). *Violence against women -it's a men's issue: Jackson Katz at TEDxFiDiWomen*. [Video File]. Retrieved from: https://www.youtube.com/watch?v=KTvSfeCRxe8

Karkazis, K., Jordan-Young, R., Davis, G., &Camporesi, S. (2012). Out of bounds? A critique of the new policies on hyperandrogenism in elite female athletes. *The American Journal of Bioethics*, *12*(7), 3 –16. DOI: 10.1080/15265161.2012.680533

Kelli, Z. (2006). Theorizing at the Borders: Considering Social Location in Rethinking Self and Psychological Development. *National Women's Studies Association Journal*, *18*(2). 52 – 72. Retrieved from: http://www.jstor.org/stable/4317207

Kelly, J. B., & Johnson, M. P. (2008). Differentiation among types of intimate partner violence: Research update and implications for interventions. *Family court review*, *46*(3), 476 – 499. DOI: 10.1111/j.1744-1617.2008.00215.x

Kilmartin, C., & Allison, J. (2007). *Men's violence against women: Theory, research, and activism*. London: Lawrence Erlbaum Associates, Inc Publishers.

Kilpatrick, K. L., & Williams, L. M. (1997). Post-traumatic stress disorder in child witnesses to domestic violence. *American journal of Orthopsychiatry*, *67*(4), 639 – 644. DOI: 10.1037/h0080261

Kimmel, M. (2008). *Guyland*. New York, NY: HarperCollins Publishers.

Kimmel, M. (1995). *Manhood in America*. New York, NY: Free Press.

Kimmel, M. S. (2002). "Gender symmetry" in domestic violence: A substantive and methodological research review. *Violence against women*, *8*(11), 1332 – 1363. DOI: 10.1177.10778012237407

Kimmel, M. S., & Mahler, M. (2003). Adolescent masculinity, homophobia, and violence random school shootings, 1982-2001. *American behavioral scientist*, *46*(10), 1439 – 1458. DOI: 10.1177/0002764203046010010

Krug, E. G., Mercy, J. A., Dahlberg, L. L., &Zwi, A. B. (2002). The world report on violence and health. *The Lancet*, *360*(9339), 1083 – 1088. DOI: 10.1016/S0140-6736(02)11133-0

Kosnik, T. J., & Bonoma, T. V. (1986). Naturalistic inquiry. *Journal Of Marketing Research*, *23*(2), 190 – 191. Retrieved from: http://www.jstor.org/stable/3151669

Koss, M. P., & Heslet, L. (1992). Somatic consequences of violence against women. *Archives of family medicine*, *1*(1), 53 – 59. Retrieved from:

https://triggered.clockss.org/ServeContent?url=http://archfami.amaassn.org/cgi/reprint/1/ 1/53.pdf

Laverty, S. M. (2003). Hermeneutic phenomenology and phenomenology: A comparison of historical and methodological considerations. *International journal of qualitative methods*, *2*(3), 21 – 35. DOI: 10.1177/160940690300200303

Lawsky, S. B. (2000). A Nineteenth Amendment Defense of the Violence Against Women Act. *The Yale Law Journal*, *109*(4), 783 – 816. DOI: 10.2307/797504

Lees, S. (1993). Judicial rape. *Women's Studies International Forum, 16 (1)*, 11 – 36. DOI: 10.1016/0277- 5395(93)90077-M

LeFrançois, B. A. (2013). Queering child and adolescent mental health services: The subversion of heteronormativity in practice. *Children & Society*, *27*(1), 1 – 12. DOI: 10.1111/j.1099-0860.2011.00371.x

Lewis, A., & Sarantakos, S. (2001). Domestic violence and the male victim. *Nuance*, *3*(12), 3 – 15. Retrieved from: http://www.498a.org/contents/dv/DomesticViolenceAndMaleVictims.pdf

Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. Newbury Park, CA: Sage.

Lisco, C. G., Leone, R. M., Gallagher, K. E., & Parrott, D. J. (2015). "Demonstrating masculinity" via intimate partner aggression: The moderating effect of heavy episodic drinking. *Sex Roles, 73*(1-2), 58 – 69. DOI: 10.1007/s11199-015-0500-2

Lorde, A. (2007). *Sister outsider: Essays and speeches*. New York, NY: Crossing Press.

Lorde, A. (1981). The Master's Tools Will Never Dismantle The Master's House. In Moraga, C. & Anzaldua G. (Eds). (1981). *This Bridge Called My Back* (pp. 99 – 101). New York, NY: Kitchen.

Lugones M. & Spelman, E. (1983). Have We Got a Theory for You! Feminist Theory, Cultural

   Imperialism and the Demand for "The Woman's Voice". In Kourany, A., Sterba, P., &

   Tong., R. (Eds). (1992). *Feminist Philosophies: Problems, Theories and Applications*

   (pp. 474 – 486). (2nd Ed). Upper Saddle River, NJ: Prentice Hall.

Lundström, C. (2010). White ethnography:(Un) comfortable conveniences and shared privileges

   in field-work with Swedish migrant women. *NORA-Nordic Journal of Feminist and*

   Gender Research, *18*(2), 70 – 87. DOI: 10.1080/08038741003755467

MacMillan, H. L., Wathen, C. N., Jamieson, E., Boyle, M. H., Shannon, H. S., Ford-Gilboe, M.,

   ... & McNutt, L. A. (2009). Screening for intimate partner violence in health care

   settings: a randomized trial. *Journal of the American Medical Association*, *302*(5), 493 –

   501. DOI:10.1001/jama.2009.1089

Mayan, M. J. (2009). *Essentials of qualitative inquiry*. Walnut Creek, CA: Left Coast Press Inc.

Mauricio, A. M., & Gormley, B. (2001). Male perpetration of physical violence against female

   partners. *Journal of Interpersonal Violence, 16*(10), 1066 – 1081.

   DOI:10.1177/088626001016010006

McBride, D. E., & Parry, J. A. (2016). *Women's rights in the USA: Policy debates and gender*

   roles. NY, New York: Routledge.

McConnell, N., Barnard, M., & Taylor, J. (2017). Caring dads safer children: Families'

   perspectives on an intervention for maltreating fathers. *Psychology of Violence, 7*(3), 406

   – 416. DOI: 10.1037/vio0000105

McGuire, K. M., Berhanu, J., Davis, Charles H.F., I.,II, & Harper, S. R. (2014). In search of

   progressive black masculinities: Critical self-reflections on gender identity development

among black undergraduate men. *Men and Masculinities, 17*(3), 253 – 277. DOI: 10.1177/1097184X13514055

McIntyre, A. (2002). Women researching their lives: Exploring violence and identity in Belfast, the North of Ireland. *Qualitative Research*, *2*(3), 387 – 409. DOI: 10.1177/146879410200200306

Medina Ariza, J. J., Robinson, A., &Myhill, A. (2016). Cheaper, Faster, Better: Expectations and Achievements in Police Risk Assessment of Domestic Abuse. *Policing: A Journal Of Policy & Practice*, *10*(4), 341 – 350. DOI:10.1093/police/paw023

Mehrotra, G. R., Kimball, E., & Wahab, S. (2016). The Braid That Binds Us: The Impact of Neoliberalism, Criminalization, and Professionalization on Domestic Violence Work. *Affilia: Journal of Women and Social Worker, 31*(2), 153 – 163. DOI: 0.1177/0886109916643871

Mennicke, A. M., & Ropes, K. (2016). Estimating the rate of domestic violence perpetrated by law enforcement officers: A review of methods and estimates. *Aggression And Violent Behavior*, *31*(1), 157 – 164. DOI:10.1016/j.avb.2016.09.003

Merriam, S. B., & Tisdell, E. J. (2015). *Qualitative research: A guide to design and implementation*. San Fransicso, CA: John Wiley & Sons.

Messerschmidt, J. W. (2005). Men, Masculinities, and Crime. In Kimmel, M., Hearn, J., & Connell, R. W. (2005) *Handbook of Studies on Men & Masculinities* (pp. 196 –212). Thousand Oaks, CA: Sage Publishing.

Messerschmidt, J. W. (2012). Engendering Gendered Knowledge: Assessing the Academic Appropriation of Hegemonic Masculinity. *Men And Masculinities*, *15*(1), 56 – 6. DOI:10.1177/1097184X11428384

Messing, J. T., Ward-Lasher, A., Thaller, J., & Bagwell-Gray, M. (2015). The state of intimate partner violence intervention: Progress and continuing challenges. *Social Work, 60*(4), 305 – 313. DOI:10.1093/sw/swv027

Messner, M. A. (2016). Bad Men, Good Men, Bystanders Who Is the Rapist?.*Gender& Society*, *30*(1), 57 – 66.DOI: 10.1177/0891243215608781

Meyer, D. (2015). *Violence Against Queer People: Race, Class, Gender, and the Persistence of Anti-LGBT Discrimination*. New Brunswick, NJ: Rutgers University Press.

Meyersfeld, B. (2010). *Domestic Violence and International Law*. Oxford: Hart Publishing.

Miller, S. (Ed). (2010). Discussing the Duluth Curriculum: Creating a Process of Change for Men Who Batter. *Violence Against Women*, *16*(9), 1007 – 1021. DOI: 10.1177/1077801210379318

Mohanty, C. (1988). Under Western Eyes: Feminist Scholarship and Colonial Discourses. In Kemp, S. & Judith, S. (1997). *Feminisms* (pp. 91 – 95). New York, NY: Oxford Press.

Moran, D. (2001). *Introduction to Phenomenology*. New York, NY: Routledge

Morgan, D. (2005). Class and Masculinity. In Kimmel, M., Hearn, J., & Connell, R. W. (2005) *Handbook of Studies on Men& Masculinities* (pp. 165 – 177). Thousand Oaks, CA: Sage Publishing.

Mullender, A. (2002). *Rethinking domestic violence: The social work and probation response*. New York, NY: Routledge.

Murray, C., Crowe, A., & Akers, W. (2016). How can we end the stigma surrounding domestic and sexual violence? A modified Delphi study with national advocacy leaders. *Journal of family violence*, *31*(3), 271 – 287. DOI: 10.1007/s10896-015-9768-9

Murray, C., Horton, G., Johnson, C., Notestine, L., Garr, B., Pow, A., & ... Doom, E. (2015).
  Domestic Violence Service Providers' Perceptions of Safety Planning: a Focus Group
  Study. *Journal Of Family Violence*, *30*(3), 381 – 392. DOI: 10.1007/s10896-015-9674-1

Murray, C., Smith, P., &Avent, J. (2010). Solutions to the research-practice gap in domestic
  violence: a modified Delphi study with domestic violence coalition leaders. *Journal Of
  Aggression, Maltreatment & Trauma*, *19*(4), 424 – 449.
  DOI:10.1080/10926771003781354

Niolon, P. H., Whitaker, D. J., Feder, L., Campbell, J., Wallinder, J., Self-Brown, S., &Chivers,
  S. (2009). A multicomponent intervention to prevent partner violence within an existing
  service intervention. *Professional Psychology: Research and Practice*, *40*(3), 264 – 271.
  DOI: 10.1037/a0013422

Novikova et al. (2005). Men, Masculinities, and Europe. In Kimmel, M., Hearn, J., & Connell,
  R. W. (2005) *Handbook of Studies on Men & Masculinities,* (pp.141 – 162). Thousand
  Oaks, CA: Sage Publishing.

Novisky, M. A., & Peralta, R. L. (2015). When Women Tell Intimate Partner Violence and the
  Factors Related to Police Notification. *Violence against women*, *21*(1), 65 – 86. DOI:
  10.1177/1077801214564078

Nybergh, L., Enander, V., & Krantz, G. (2016). Theoretical considerations on men's experiences
  of intimate partner violence: an interview-based study. *Journal of family violence*, *31*(2),
  191 – 202. DOI 10.1007/s10896-015-9785-8

Ouellet-Morin, I., Fisher, H. L., York-Smith, M., Fincham-Campbell, S., Moffitt, T. E., &
  Arseneault, L. (2015). Intimate partner violence and new-onset depression: a longitudinal

study of women's childhood and adult histories of abuse. *Depression and anxiety*, *32*(5), 316 – 324. DOI: 10.1002/da.22347

Palaganas, E. C., Sanchez, M. C., Molintas, M., Visitacion, P., &Caricativo, R. D. (2017). Reflexivity in Qualitative Research: A Journey of Learning. *The Qualitative Report*, *22*(2), 426 – 438. Retrieved from: http://nsuworks.nova.edu/tqr/vol22/iss2/5

Pathak, N., Sohal, A., & Feder, G. S. (2017). How to enquire and respond to domestic violence and abuse in sexual health settings. *Sex Transmitted Infections*, *93*(3), 175 – 178. DOI: 10.1136/sextrans-2015-052408

Patton, M. Q. (2002). *Qualitative research & evaluation methods*. Thousand Oaks: Sage Publications.

Paymar, M., & Barnes, G. (2007). Countering confusion about the Duluth Model. Accessed from: http://theduluthmodel.org/pdf/CounteringConfusion.pdf

Pence, E., & Paymar, M. (1993). *Education groups for men who batter: The Duluth model*. New York, NY: Springer Publishing Company.

Potvin, L. (2016). Radical heterosexuality: Straight teacher activism in schools: Does ally-led activism work?.*Confero: Essays on Education, Philosophy and Politics*, *4*(1), 9 – 36. DOI: 10.3384/confero.2001-4562.160614

Powers, R., & Kaukinen, C. E. (2012). Trends in intimate partner violence: 1980-2008. *Journal of interpersonal violence*, 27 (15), 3072 – 3090. DOI:10.1177/0886260512441077

Pratt, M. L. (2007). *Imperial eyes: Travel writing and transculturation*. New York, NY: Routledge.

Price, B. J., & Rosenbaum, A. (2009). Batterer intervention programs: A report from the field. *Violence and Victims, 24*(6), 757 – 770. DOI: 10.1891/0886-6708.24.6.757

Price-Robertson, R. (2012). Child sexual abuse, masculinity and fatherhood. *Journal Of Family Studies*, *18*(2-3), 130 – 142. DOI: 10.5172/jfs.2012.18.2-3.130

Prochaska, J. O., & Norcross, J. C. (2013). *Systems of psychotherapy: A transtheoretical analysis*. (8th Ed). Stamford, CT: Cengage Learning.

Radcliffe, P., & Gilchrist, G. (2016). Research paper: "You can never work with addictions in isolation": Addressing intimate partner violence perpetration by men in substance misuse treatment. *International Journal Of Drug Policy*, *36,* 130 – 140. DOI:10.1016/j.drugpo.2016.03.010

Rajan, M., & McCloskey, K. A. (2007). Victims of intimate partner violence: Arrest rates across recent studies. *Journal of Aggression, Maltreatment & Trauma*, *15*(3-4), 27 – 52. DOI: 10.1080/10926770802097186

Ramazanoglu, C., & Holland, J. (2002). *Feminist methodology: Challenges and choices*. Thousand Oaks, CA: Sage.

Reid, C., & Tom, A. (2006). Poor women's discourses of legitimacy, poverty, and health. *Gender & Society*, *20*(3), 402 – 421. DOI: 10.1177/0891243206286939

Rennison, C., & Planty, M. (2003). Nonlethal intimate partner violence: Examining race, gender, and income patterns. *Violence and victims*, *18*(4), 433 – 443. DOI: 10.1891/vivi.2003.18.4.433

Rettenberger, M., &Eher, R. (2013). Actuarial risk assessment in sexually motivated intimate-partner violence. *Law and Human Behavior, 37*(2), 75 – 86. DOI: 10.1037/b0000001

Reyes, H. L., Foshee, V. A., Niolon, P. H., Reidy, D. E., & Hall, J. E. (2016). Gender role attitudes and male adolescent dating violence perpetration: Normative beliefs as

moderators. *Journal of Youth and Adolescence, 45*(2), 350 – 360. DOI: 10.1007/s10964-015-0278-0

Riley, D. (1988). Am I That Name? Feminism and the Category of 'Women' in History. In Kemp, S. & Judith, S. (1997). *Feminisms* (pp.241 – 246). New York, NY: Oxford Press.

Rizza, J. (2009). Beyond Duluth: A Broad Spectrum of Treatment for a Broad Spectrum of Domestic Violence. *Montana Law Review*, *70*(1), 125 – 147. Retrieved from: http://scholarship.law.umt.edu/mlr/vol70/iss1/5

Robinson, A. L., Pinchevsky, G. M., & Guthrie, J. A. (2016). Under the radar: policing non-violent domestic abuse in the US and UK. *International journal of comparative and applied criminal justice*, *40*(3), 195 – 208. DOI: 10.1080/01924036.2015.1114001

Rosenberg, M. S. (2003). Voices from the group: Domestic violence offenders' experience of intervention. *Journal of Aggression, Maltreatment & Trauma, 7*(1-2), 305 – 317. DOI: 10.1300/J146v07n01_13

Rubin, A. & Babbie, E. (2014). *Research Methods for Social Work.* (8th Ed). Belmont, CA: Brooks/Cole

Rudy, K. (2001). Radical feminism, lesbian separatism, and queer theory. *Feminist Studies*, *27*(1), 191 – 222. DOI: 10.2307/3178457

Russell, B. L. (2010). *Battered woman syndrome as a legal defense: History, effectiveness and implications*. Jefferson, NC: McFarland.

Sanders, C. (2003). Application of Colaizzi's method: Interpretation of an auditable decision trail by a novice researcher. *Contemporary Nurse*, *14*(3), 292 – 302. DOI: 10.5172/conu.14.3.292

Saunders, D. G. (2002). Are physical assaults by wives and girlfriends a major social problem?

    A review of the literature. *Violence Against Women*, *8*(12), 1424 – 1448. DOI:

    10.1177/107780102237964

Scantlebury, K. (2005). Learning from flyy girls: feminist research ethics in Urban Schools.

    Forum Qualitative Sozialforschung/Forum: Qualitative Social Research,6 (1). Retrieved

    from: http://nbn-resolving.de/urn:nbn:de:0114-fqs0501321.

Schechter, S. (1982). *Women and male violence: The visions and struggles of the battered*

    women's movement. Cambridge, MA: South End Press.

Scheman, N. (1993). Changing the Subject. In Kemp, S. & Judith, S. (1997). *Feminisms* (pp.120

    – 125). New York, NY: Oxford Press.

Schrock, D. P., & Padavic, I. (2007). Negotiating hegemonic masculinity in a batterer

    intervention program. *Gender & Society*, *21*(5), 625 – 649. DOI:

    10.1177/0891243207304975

Sheehy, E. A. (2014). *Defending battered women on trial: lessons from the transcripts*.

    Vancouver, BC: UBC Press

Sheffield, C. (1995). Sexual Terrorism. In Kourany A., Sterba J., Tong, R. (Eds). (1992).

    (2ndEd), *Feminist Philosophies* (pp. 119 – 143). New Jersey: Prentice-Hall.

Shenton, A. K. (2004). Strategies for ensuring trustworthiness in qualitative research projects.

    Education for information, *22*(2), 63 – 75. DOI: 10.3233/EFI-2004-22201

Shosha, G. A. (2012). Employment of Colaizzi's strategy in descriptive phenomenology: A

    reflection of a researcher. *European Scientific Journal*, *8*(27), 31 – 43. Retrieved from:

    http://eujournal.org/index.php/esj/article/view/588

Simpson, J. (2017). Western feminism has it wrong. *UWIRE Text*. Retrieved from:

http://uwire.com/?s=UWIRE+Text&x=26&y=14&=Go

Smith, L. T. (2012). Research Though Imperial Eyes. In *Decolonizing methodologies: Research and indigenous peoples* (pp. 42 – 60). (2nd ed.). London: Zed books.

Smith, M. E. (2007). Self-Deception Among Men Who Are Mandated to Attend a Batterer Intervention Program. *Perspectives in psychiatric care*, *43*(4), 193 – 203. DOI:10.1111/j.1744-6163.2007.00134.x

Smith, R. M., Parrott, D. J., Swartout, K. M., & Tharp, A. T. (2015). Deconstructing hegemonic masculinity: The roles of antifemininity, subordination to women, and sexual dominance in men's perpetration of sexual aggression. *Psychology of Men & Masculinity, 16*(2), 160 –169.   DOI:10.1037/a0035956

Soliman, F. (2016). Engaging with Perpetrators of Domestic Violence: Practical Techniques for Early Intervention. *British Journal Of Social Work*, *46*(2), 571 – 572. DOI:

Sokoloff, N. J., & Dupont, I. (2005). Domestic violence at the intersections of race, class, and gender challenges and contributions to understanding violence against marginalized women in diverse communities. *Violence against women*, *11*(1), 38 – 64. DOI: 10.1177/1077801204271476

Southwarth, S.M. (2016). Hegemonic Masculinity and Suicide: A review of the literature. *The European Health Psychologist, 18* (1), 7 – 12. Retrieved from:

http://www.ehps.net/ehp/index.php/contents/article/viewFile/1409/pdf_106

Statistics Canada (2013). Measuring violence against women: statistical trends. Retrieved from:

http://www.statcan.gc.ca/pub/85-002-x/2013001/article/11766-eng.pdf

Statistics Canada (2016). NHS Focus on Geography Series. Retrieved from:

http://www12.statcan.gc.ca/nhs-enm/2011/as-sa/fogs-

spg/Pages/Fog.cfm?lang=E&level=3&GeoCode=595

Stoffman, J. (2017). MP Margaret Mitchell famously called wife abuse 'no laughing matter'. *The Globe and Mail.* Retrieved: https://www.theglobeandmail.com/news/politics/mp-

margaret-mitchell-famously-called-wife-abuse-no-laughing-matter/article34392492/

Stolar, B., &Sacchetti, C. (2013). Representations of Multicultural Dance in Photographic

Images. *Expositions, 7* (2), 28 – 40. Retrieved from:

https://ezproxy.lakeheadu.ca/login?url=http://search.ebscohost.com/login.aspx?direct=tru

e&db=edsoaf&AN=edsoaf.bda074298ede6348f59db19ec47094c3e089f6cc&site=eds-

live&scope=site

Straus, M. A. (2014). Addressing violence by female partners is vital to prevent or stop violence

against women: Evidence from the multisite batterer intervention evaluation. *Violence Against Women*, *20*(7), 889 – 899. DOI: 10.1177/1077801214545932

Sullivan, R. (2009a). Exploring an Institutional Base: Locating a Queer Women's Community in

Thunder Bay, Ontario, Canada. *Atlantis: Critical Studies in Gender, Culture & Social Justice*, *34*(1), 78 – 88. Retrieved from:

http://journals.msvu.ca/index.php/atlantis/article/viewFile/221/211

Sullivan, R. E. (2009b). The (Mis) translation of Masculine Femininity in Rural Space:(Re)

reading 'Queer' Women in Northern Ontario, Canada. *thirdspace: a journal of feminist theory & culture*, *8*(2). Retrieved from:

http://journals.sfu.ca/thirdspace/index.php/journal/article/view/sullivan

Tarrant, S., & Katz, J. (2008). *Men speak out: views on gender, sex, and power. Shira Tarrant;*

    with a foreword by Jackson Katz. New York: NY, Routledge.

Taylor, Gregory. (2016). The Chief Public Health Officer's Report on the State of Public Health

    in Canada 2016: A Focus On Family Violence in Canada. Retrieved from:

    http://healthycanadians.gc.ca/publications/department-ministere/state-public-health-

    family-violence-2016-etat-sante-publique-violence-familiale/alt/pdf-eng.pdf

Tbnewswatch. (2015). Thunder Bay continues to face on of highest rates of domestic violence in

    Canada. Retrieved from: https://www.tbnewswatch.com/local-news/thunder-bay-

    continues-to-face-one-of-highest-rates-of-domestic-violence-in-canada-403754

Thomas, C. (2005). Review of white men aren't. *Men and Masculinities, 7*(4), 443 – 446.

    DOI:10.1177/1097184X0500700411

Thomas, K. A., Goodman, L., & Putnins, S. (2015). "I have lost everything": Trade-offs of

    seeking safety from intimate partner violence. *American journal of orthopsychiatry*,

    85(2), 170 – 180. DOI: 10.1037/ort0000044

Tobach, E. (2001). Development of sex and gender: Biochemistry, physiology, and experience.

    In J. Worell (Ed.), *Encyclopedia of women and gender: sex similarities and differences*

    and the impact of society on gender. Oxford, UK: Elsevier Science & Technology.

Tranter, D. (2005). Breaking the connection between traditional masculinity and violence:

    Toward a context and gender-sensitive approach to counselling males. In Brownlee, K.,

    & Graham, J. R. (Eds.). (2005). *Violence in the family: Social Work readings and*

    research from northern and rural Canada (pp.105 – 118). Toronto, ON: Canadian

    Scholars Press.

Trevillion K., Oram S., Feder G., & Howard L.M. (2012). Experiences of Domestic Violence and Mental Disorders: A Systematic Review and Meta-Analysis. *PLOS ONE7*(12), e51740. DOI: 10.1371/journal.pone.0051740

Tufford, L., & Newman, P. (2012). Bracketing in qualitative research. *Qualitative social work*, *11*(1), 80 – 96. DOI: 10.1177/1473325010368316

Wangmann, J. M. (2011). Different types of intimate partner violence-an exploration of the literature. Retrieved from:

https://opus.lib.uts.edu.au/bitstream/10453/19466/1/2010006199OK.pdf

Wang, L. (2016). Factors influencing attitude toward intimate partner violence. *Aggression And Violent Behavior*, *29*(1), 72 – 78. DOI:10.1016/j.avb.2016.06.005

Walby, S. (2004). *The cost of domestic violence*. London: Department of Trade and Industry

Wei, C. C., & Brackley, M. (2010). Men who experienced violence or trauma as children or adolescents and who used violence in their intimate relationships. *Issues in mental health nursing*, *31*(8), 498 – 506. DOI: 10.3109/01612841003642733

Westera, N. J., & Powell, M.B. (2017). Prosecutor's perceptions of how to improve the quality of evidence in domestic violence cases. *Policing & Society*, 27 (2), 157 – 172.

White, N. (2008). MPS laughed when she spoke on battered women. *The Toronto Star*. Retrieved from:

https://www.thestar.com/life/2008/06/13/mps_laughed_when_she_spoke_on_battered_women.html

Whittier, N. (2016). Carceral and Intersectional Feminism in Congress The Violence Against Women Act, Discourse, and Policy. *Gender & Society*, 30 (5), 791 – 818. DOI: 10.1177/0891243216653381

Wilchins, R. A. (2006). What Does it Cost to Tell the Truth? In. Stryker S. & Whittle, S. (eds),

    The Transgender Studies Reader (pp. 547 – 551), New York, NY: Rutledge.

Williams, K. R., & Stansfield, R. (2017). Disentangling the risk assessment and intimate partner

    violence relationship: Estimating and moderating effects. *Law and Human Behavior, 41*

    (4), 344 – 353. DOI: 10.1037/lhb0000249

Willig, C. (2013). *Introducing qualitative research in psychology*. (3rd Ed.) New York, NY:

    McGraw-Hill Education

Willis, D. G., Sullivan-Bolyai, S., Knafl, K., & Cohen, M. Z. (2016). Distinguishing Features

    and Similarities Between Descriptive Phenomenological and Qualitative Description

    Research. *Western Journal Of Nursing Research*, *38*(9), 1185 – 1204. DOI:

    10.1177/0193945916645499

Winter, G. (2000). A comparative discussion of the notion of 'validity' in qualitative and

    quantitative research. *The qualitative report*, *4*(3), 1 –14. Retrieved from:

    http://nsuworks.nova.edu/tqr/vol4/iss3/4

Wilson, J. M., Fauci, J. E., & Goodman, L. A. (2015). Bringing trauma-informed practice to

    domestic violence programs: A qualitative analysis of current approaches. *American*

    Journal of Orthopsychiatry, 85(6), 586 – 599. DOI: 10.1037/ort0000098

Wojnar, D. M., & Swanson, K. M. (2007). Phenomenology an exploration. *Journal of holistic*

    nursing, *25*(3), 172 – 180. DOI: 10.1177/0898010106295172

World Health Organization. (2017). Violence Against Women: Intimate Partner and Sexual

    Violence Against Women. *World Health Organization*. Retrieved from:

    http://www.who.int/mediacentre/factsheets/fs239/en/

World Health Organization. (2013). Global and regional estimates of violence against women:

      prevalence and health effects of intimate partner violence and non-partner sexual

      violence. *World Health Organization*. Retrieved from:

      http://apps.who.int/iris/bitstream/10665/85239/1/9789241564625_eng.pdf

World Health Organization. (2010). Preventing intimate partner and sexual violence against

      women: taking action and generating evidence. *World Health Organization*. Retrieved

      from: http://apps.who.int/iris/bitstream/10665/44350/1/9789241564007_eng.pdf?ua=1

World Health Organization. (2012). Understanding and addressing violence against women.

      World Health Organization. Retrieved from:

      http://apps.who.int/iris/bitstream/10665/77432/1/WHO_RHR_12.36_eng.pdf

Wray, A., Hoty, T., & Gerstle, M. (2013). Preliminary examination of a mutual intimate partner

      violence intervention among treatment-mandated couples. *Journal of Family Psychology,*

      27 (4), 664 – 670. DOI: 10.1037/a0032912

Zorza, J. (1992). The criminal law of misdemeanor domestic violence, 1970-1990. *The Journal*

      of Criminal Law and Criminology (1973-), *83*(1), 46 – 72.DOI: 10.2307/1143824

Zosky, D. (2016). Changing hostile beliefs towards women through partner abuse intervention

      programs. *Open journal of social sciences*, *4*(2), 99 – 107. DOI: 10.4236/jss.2016.42014

Appendix A – Information Letter

Lakehead UNIVERSITY

School of Social Work
t: (807) 343-8576 f: (807) 346-7727
e: social.work@lakeheadu.ca

Information Letter

Project Title: "Men's Lived Experiences with Intimate Partner Violence in Thunder Bay"

Principal Investigator

Jennifer White, MSW Student, School of Social Work, Lakehead University, Thunder Bay, ON.

jjwhite@lakeheadu.ca

Supervisors:

Jodie Murphy-Oikonen, PhD, School of Social Work, Lakehead University, Thunder Bay, ON.

jlmurph1@lakeheadu.ca

Lori Chambers, PhD, Faculty of Women's Studies, Lakehead University, Thunder Bay, ON.

lchambe2@lakeheadu.ca

Funding Source: SSHRC (Social Sciences and Humanities Research Council) Student Grant

Dear Potential Participant,

You are invited to participate in this study because you have been identified as a male perpetrator of Intimate Partner Violence (IPV). IPV refers to any behaviour within an intimate relationship that causes physical, psychological, or sexual harm. A perpetrator is one who commits such harm. I am interested in hearing directly from you to discuss your experiences with IPV and masculinity in Thunder Bay. I am interested in conducting an interview you to have a discussion surrounding your experiences and challenges with IPV. Thank you for your consideration in this study.

Purpose of the Study

The purpose of this study is to explore the lived experiences of males identified as perpetrators of IPV. Intimate Partner Violence is a complex social problem that has many damaging attributes on individuals and families. The goal is to gain a more thorough understanding of men's experiences with IPV, specifically in Thunder Bay, and how they perceive the support they receive in the community to cope with IPV. Although there are programs and services to assist men who have been violent, these services may be improved with the input directly from those who access the service. Thus, this study will also focus on asking about the supports men have received in the process.

What will I be asked to do?

If you agree to participate in this research, you will be asked to complete one to two face-to-face interviews that will last approximately one hour. The length of the interviews will vary depending on how much information you wish to share with the researcher during the interview. You will be encouraged to share as little or as much as you are comfortable with during the interview.

Before the interview, you will be asked to complete a demographic questionnaire that will review personal characteristics about yourself (age, marital status, etc). These interviews will provide an opportunity to discuss your experiences with IPV and receiving services related to IPV. The researcher will ask some questions about the challenges you face in obtaining services, and in general with your experiences in IPV. The information obtained will be confidential and any reports of the research will be done under a pseudonym (a fake name). Your identity will only be known to the researchers, but they will ensure to maintain your confidentiality (privacy) throughout the process.

The interviews will take place in a mutually agreed upon location, such as an office at Lakehead University or if available, a space at the agency in which you receive services from. The interview will include the researcher (Jennifer) and yourself. The interview will be audio recorded and transcribed, but the tape will only be listened to by the researchers.

Before final results of the research are written, you will be given an opportunity by the researcher (Jennifer) to review the research findings and relay any input. Any changes will be incorporated as data in the final report. You will be invited to send feedback or make any changes within two weeks, which will be included in the final report. If a feedback response is not received within the two weeks on the themes identified, it will indicate approval of the themes as they are written. You may request a copy of the final report from the researcher via email, which will be sent electronically to you.

Participation in this research is completely voluntary and any information provided during the process is confidential. Any information collected within this study will remain confidential and would only be disclosed as required by law (ie. if it is disclosed that there is: a risk to self or others, concerns of child abuse or neglect, or an emergency situation where medical professional are involved). At this time the interview would stop, and appropriate community supports would be contacted immediately, in respondence to the circumstances. This data would not be used in the final results, but would be noted that a participant withdrew.

Prior to the study, if you identify as a First Nations, Metis and/or Inuit person I will inquire whether culturally appropriate assistance is desired to interpret your participation in this project. You also will not have to answer any questions during the interviews that you do not want to answer, and due to the open-ended nature of the questions you can decide how much you wish to share. You are also free to withdraw from the research at any time. If you wish to withdrawal

from the study, contact Jodie Murphy (Supervisor) and indicated your withdrawal. She can be

contacted at 766-7270 or jlmurph1@lakeheadu.ca.

Your participation will be terminated from the study immediately. All information that has been

collected prior your withdrawal will be utilized, unless you specify otherwise. If you wish, you

may request a copy of the final report despite withdrawal. To do so, contact

jjwhite@lakeheadu.ca.

 As a thank you for donating your time to this research, any participants will receive a $30 gift

card as an honorarium to Walmart. One gift card will be given out per interview completed, and

will be given after the interview.

Are there risks or benefits in participating?

 This study will explore perspectives of men identified as perpetrators of IPV for men to

further understandings of their lived experiences. This is done with the goal to increase

knowledge of this often-misunderstood population, and sequentially raising awareness for the

need for more diverse programming. This study will provide you with an opportunity to discuss

your personal experiences with intimate partner violence and related programs. It is hoped that

the information gained from this study will be used in critical assessment and development of

current and future programming for men and violence prevention.

 It is expected that any risks, discomforts, or inconveniences will be minimal. However, it may

be uncomfortable to discuss some of the topics involved in this research. Due to the nature of this

study, you may disclose as much or as little as you wish. You may also withdraw your

participation at any time. There will also be connections to community resources to ensure

debriefing is available if needed. Your participation will not impact the services you receive at

the agency you were referred from and the agency will also not be informed of your participation in the study.

This study does not include any procedures that will affect your physical health.

What happens to the information in my interviews?

Any information collected within this study and will remain confidential and would only be disclosed with your permission, or as required by law. Only the researcher and her supervisors will have access to the interview data. The data obtained and summarized in this research will be utilized in publications and presentations. None of your identifying information will appear in any reports or presentations, as a substitute name will be used to protect your privacy. Information that could identify you individually will not be released to anyone outside of the study. Jennifer will use collected information in her thesis work, however, this information will be confidential and not contain any identifiable information. Any information used for publication will not identify you individually. Confidentiality will be maintained by a coding system established by Jennifer to know who you are during the process. There will be no use of your personal name or any information that is obtained, in any reports of this data. When the study is finished, the coded list that identified the participants will be destroyed.

The recordings from the interviews will be destroyed/deleted once the interviews have been transcribed. Any electronic data will be stored on a password protected computer in a secure/locked location. Hard copies of transcripts from interviews and any notes taken during the research process will be kept in a locked filing cabinet in Dr. Jodie Murphy Oikonen's office for a period of five years. At that time, all electronic data will be deleted as well as the hard copy transcripts and field notes will be shredded.

Information is confidential with the following exceptions: 1) if you express thoughts of hurting yourself or others, Crisis Response or 911 will be called for assistance; 2) if comments are expressed surrounding child abuse or neglect. I am legally bound to report a concern about a child to the appropriate child welfare agency; or 3) in case of an emergency, injury or illness that occurs during this study, the researcher will be authorized to release any and all health information to allow for the appropriate medical care and treatment.

Once the research is complete, all participants can request a copy of a summary of the results of the research by contacting the researcher at jjwhite@lakeheadu.ca . This research will be published as a component of Jennifer White's MSW degree.

I look forward to meeting you and welcoming your participation in this study. Thank you for taking the time to review the information. If you are interested in participating in this research, please contact me at 766-7270 (Jodie's Office Number), jlmurph1@lakeheadu.ca (Jodie's email) or myself at jjwhite@lakeheadu.ca. A consent form will be provided to you which must be signed at the beginning of an interview. You will receive your own copy of this form.

This study has been approved by the Lakehead University Research Ethics Board. If you have any questions related to the ethics of the research and would like to speak to someone outside of the research team please contact Sue Wright at the Research Ethics Board at 807-343-8283 or research@lakeheadu.ca.

Sincerely,

Jennifer White

MSW Student, RSW.

School of Social Work

Lakehead University

Appendix B – Consent Form

School of Social Work
t: (807) 343-8576 f: (807) 346-7727
e: social.work@lakeheadu.ca

Consent to Participate in Research

You are invited to participate in a research study conducted by Jennifer White, who is a Masters Student from the Social Work Department at Lakehead University. Jennifer is conducting this study as part of her thesis work. Dr. Jodie Murphy-Oikonen and Dr. Lori Chambers are her supervisors.

Your participation in this study is completely voluntary. Feel free to read all the information below and ask questions about anything you do not understand, before making a decision regarding your participation.

Purpose of the study

The purpose of this study is to explore the lived experiences of males identified as perpetrators of Intimate Partner Violence(IPV). IPV is a complex social problem that has many damaging attributes on individuals and families. It refers to any behaviour within an intimate relationship that causes physical, psychological, or sexual harm. The goal is to gain a more thorough understanding of their experiences with IPV, and how they perceive the support they receive in the community to cope with IPV. Exploring these systems that address IPV could improve the quality of life for all individuals impacted by it.

Procedures

If you volunteer to participate in this study, we will ask you to complete the following:

- Complete the personal information form

- Complete at least one interview with the researcher

- Review research themes and return your feedback to the researcher

Compensation for participation

For each one hour face-to-face interview completed there will be $30 honorarium gift card

provided to Walmart.

Participation and withdrawal

You may choose whether or not to be in this study. If you volunteer to participate in the

study, you may withdraw at any time. You may also refuse to answer any questions you do not

wish to answer, and can answer as little or as much as you would like. If you wish to withdrawal

from the study, contact Jodie Murphy (Supervisor) and indicated your withdrawal. She can be

contacted at 766-7270 or jlmurph1@lakeheadu.ca.

Your signature on this form indicates that you

- Understand the information provided to you about the participation in this research

  project

- Are to participate as a research participant in this study

- Understand the risk and benefits to this research

- Understand that all data will protect your confidentiality (privacy) by excluding any

  personal information that may jeopardize this

- Understand that there are limits to confidentiality in the following regards: (ie. if it is

  disclosed that there is: a risk to self or others, concerns of child abuse or neglect, or an

  emergency situation where medical professional are involved)

- Understand that this is a voluntary study, and that you can choose not to answer any

  question or withdraw from this study at any time

- Understand that if you identify as a First Nations, Metis and/or Inuit person I will inquire whether culturally appropriate assistance is desired to interpret your participation in this project.

- Understand that all information will be used in a final analysis unless you indicate otherwise

- Understand that all information will be audio recorded and transcribed, which will be kept secured to protect your confidentiality (privacy)

- Understand that any publications, reports and presentations of the research findings will remain anonymous with pseudonyms (fake names) to reflect your contribution

- Understand that a copy of the research findings provided to you for feedback before completion of the results, which will provide two weeks for feedback

- Understand that if you wish to have a copy of the final report you can contact the researcher at jjwhite@lakeheadu.ca

- Understand that the data will be stored and locked in a cabinet in Dr. Jodie Murphy-Oikonen's office for 5 years. This is located at the school of Social Work in Lakehead University.

- Understand that you will receive a gift card honorarium of $30 per one hour interview

I understand the procedures described above. My questions have been answered to my satisfaction, and I agree to participate in this study. I have been given a copy of this form.

_____   _____   _____

Printed Name of   Signature of Participant   Date

Participant

_____   _____

Signature of Witness   Date

I agree to be audio recorded during the research interview:

_____   _____   _____

Printed Name of Participant   Signature of Participant   Date

_____   _____   _____

Researcher's Name   Researcher's Signature   Date

Questions/Concerns

If you have any further questions or require further clarification about this research and/or your participation, please contact myself or the supervisors of this study:

Jennifer White (Primary Investigator)

School of Social Work, Lakehead University, (jjwhite@lakeheadu.ca)

Jodie Murphy-Oikonen (Supervisor)

School of Social Work, Lakehead University, (jlmurph1@lakeheadu.ca)

Lori Chambers (Supervisor)

Faculty of Women's Studies, Lakehead University (lchambe2@lakeheadu.ca)

This study has been approved by the Lakehead University Research Ethics Board. If you have any questions related to the ethics of the research and would like to speak to someone outside of the research team please contact Sue Wright at the Research Ethics Board at 807-343-8283 or research@lakeheadu.ca

A copy of this consent has been given to you to keep for your own records. The researcher has also kept a copy of the consent form.

Appendix C – Demographic Information

Lakehead
UNIVERSITY

Name: _____

Date: _____

Age Range: (18-24) (25-34) (35-44) (45-54) (55-64) (65-74) (75+)

Relationship Status: (Single) (Married)(Divorced)(Remarried)(Common Law)(Widowed)

Length of current relationship (if in one): _____

# of children: (0) (1-2)   (3-4) (5-6) (6+)

Are children in your custody? (Yes) (No)

If Yes, (Full Time) (Shared Custody) (Visitation) (Other_____)

Educational Background: (Some Elementary School) (Elementary School) (Some Highschool)

(Completed Highschool) (Some College/University) (Completed College/University)

Ethnicity: _____

How many criminal charges have you had related to violence (0) (1-2) (3-4) (5-6) (7+)

Is your participation within an agency: (voluntary)   or   (mandated)

Which agencies do you participate in for support?

- Catholic Family Development
- Centre Indian Friendship Centre
- Faye Peterson
- CAS
- Dilico
- Thunder Bay Counselling Centre
- Other_____

Please tell me of the type of service you receive from the agency (ie. Support Group, individual

counseling, etc)_____

Appendix D – Interview Guide

School of Social Work
t: (807) 343-8576 f: (807) 346-7727
e: social.work@lakeheadu.ca

Introduction / Support at Agency:

1. Can you tell me about how you've come to be involved with _____(agency that

    referral was made from)?

2. What motivates you to work with this agency?

3. Can you tell me about your relationship with your (wife/partner/spouse/common law

    partner/girlfriend/_____)?(ask in correspondence to personal information sheet)

4. How would you describe your experience with violence in this relationship?

Violence in intimate relationship:

5. How does it (the violence in your relationship) impact your life?

5a. Sub questions: (If says not violent) Given that you say you're not violent, how do you

feel about being involved with _____ (agency)?

   How would you say _____ and others mandated into the program feel the reasons are this

   has happened?

   How does this fit with how you view yourself?

5b.Sub questions: (If says is violent) Tell me about your experience with violence in the

   relationship?

   Is this a pattern across relationships or unique? Why do you think that?

6. Can you tell me about the things in your life that contribute to violence?

7. If you had to think about things in life that influenced your experience with violence what

    would they be?

Violence in other contexts of life:

7b. Sub questions: Relationship with family? Was violence part of home as a child?

8. How do you cope with difficulties in your relationship? 8b.How do you feel men should cope?

Masculinities:

9. There is a lot of information about what images men are supposed to have in society. Sometimes this includes things like men being viewed as closed off with their emotions, viewed as tough, the breadwinner, etc.

   How do you perceive the role that a man should have? (In your relationship/in society, personally, etc)

10. If you had to describe what traits a typical man should have how would you describe that?

10b. Does your definition fit you? What are the challenges in this definition for you?

11. When you think of experience with violence, if you could go back in time what would you change?

12. What things have gotten in your way of making those changes?

Summary/ Hopes for Future Programming:

13. You have accessed services at _____(referred agency), can you tell me about your experience receiving services? How have they met your needs and not met your needs?

14. How do you feel such services define you? Do you feel stigma in receiving help?

15. If you could design a service for men, what do you feel could be the most helpful? Tell me about this service.

16. Is there anything I have not asked about your experiences with violence or services you've received that we haven't discussed?

Appendix E – Poster & Facebook Ad

Are you a man who's had violence in your relationship?

Have you been charged as a result of such violence?
Have you received services related to the violence?

Would you like an opportunity to talk about your experience?

We would like to hear from you!

Contact Jennifer at jjwhite@lakeheadu.ca or her supervisor Jodie at 766-7270 or jlmurph1@lakeheadu.ca

An honorarium will be provided for your participation