



# Male survivors of sexual violence and abuse: Barriers and facilitators to reporting and accessing services

## Overview

In 2020, the Ministry of Social Development (MSD) commissioned an exploratory study into the barriers and facilitators to reporting and accessing support services for male survivors of sexual violence and abuse (SVA). The research was conducted by a team from across Te Herenga Waka – Victoria University of Wellington, the University of Otago, and the Donald Beasley Institute. Ethical approval was granted by Te Herenga Waka Victoria University Human Ethics Committee.

The complete study details and findings can be found in the main report by Dixon, Treharne, Pettie, Bowden, Patterson, Beres, Mirfin-Veitch, Shaw, Eketone-Kelly & Ashdown (2023) available from MSD's Insights web page: [www.msd.govt.nz/insights](http://www.msd.govt.nz/insights)

## Research to ensure services better support male survivors

Services dedicated to male survivors in Aotearoa New Zealand are relatively new and research is needed to inform their ongoing development and address gaps in service provision. This research aimed to understand the barriers and facilitators to reporting and accessing support services with a view to informing the design of services so that male survivors can be better supported.

## Experiences of survivors and perspectives of service workers

Fifty-two male survivors living in the Greater Wellington and Otago regions of Aotearoa New Zealand, took part in interviews about their experiences of the barriers and facilitators to reporting and accessing support services. The male survivors' experiences were compared alongside the perspectives of 13 service workers from the same regions who participated in an anonymous online questionnaire.

## How men disclosed, reported, and accessed support

Disclosure, reporting and accessing services are interconnected and part of a helpseeking process, with 31 survivors carrying out all three helpseeking actions. Only six survivors performed one of these actions in isolation (two survivors accessed support services only; four disclosed only). Disclosure plays an important role in the helpseeking journey and it was commonly the first helpseeking action for the majority of male survivors.

Survivors take many years to report their sexual victimisation, the average time taken to report was 18 years, and only 34 male survivors reported their sexual victimisation. The most common reasons for reporting were to access financial aid and to prevent harm to others. The majority of participants accessed specialist support services whereas eight had accessed non-specialist support only.



## Key barriers and facilitators to helpseeking

### Gendered social norms and myths are a barrier for helpseeking

**Barrier:** The stereotype that sexual violence does not happen to men.

**Barrier:** Stereotypes that male survivors are likely to be gay or transgender or go on to perpetrate violence.

**Facilitator:** Education to break down stereotypes and educate people that anyone, of any gender, can experience SVA can facilitate help seeking.



### The presence and quality of formal and informal social support impacts helpseeking

**Barrier:** Not having appropriate people available to disclose to reduced opportunities for the male survivors to recognise what constitutes SVA and seek help.

**Barrier:** When informal disclosure or reporting was not received positively it could be a barrier to accessing services.

**Facilitator:** Disclosure was facilitated by trusted friends or family/whānau members, or through peer support work/groups, who could help the male survivor feel safe.

**Facilitator:** Male survivors found it good to talk to informal and formal supports, including strangers, when the person received their story with compassion and belief.



### The complex nature of trauma hinders timely helpseeking

**Barrier:** The complex effects of trauma manifested in a range of symptoms across the lifespan. This made it difficult for the male survivors and others to identify the cause, thus acting as a barrier to early intervention via access to support services for SVA.

**Barrier:** Helpseeking was delayed for male survivors who felt controlled by perpetrators.

**Barrier:** The ongoing effects of trauma mean that recovery can be a slow journey for male survivors, with survivors having to feel safe and mentally strong to helpseek.



### Service provision, visibility and design need to be tailored to male survivors to facilitate access

**Barrier:** A lack of appropriate and affordable services for diverse groups of men. Services that can cater for the diversity of male survivors were called for.

**Facilitator:** Access to services was facilitated by visibility and clear messaging about who services were provided for.

**Facilitator:** Male survivors described how choice of a range of services, designed to meet their complex needs, was required to enable access.



### Quality support from service workers can build agency and maintain male survivors' helpseeking

**Facilitator:** Appropriate support from trained service workers is particularly important to help the male survivors cope before, during and after reporting.

**Facilitator:** Service workers who are welcoming, knowledgeable and competent in dealing with trauma facilitate male survivors' ability to helpseek.

**Facilitator:** Male survivors described how important it was for services to work with them in a way that built agency to encourage reporting and accessing of services.



## Recommendations

### Gender-inclusive societal education initiatives

It is recommended that SVA be understood as a gender-inclusive problem and a public health issue. Initiatives that educate everyone that SVA happens to a diverse group of male survivors is required to achieve change and encourage early intervention.



### Gender-inclusive training of service workers

It is recommended that specialist and non-specialist service workers receive an appropriate level of gender-inclusive training on how to understand and respond to male survivors, and how to sensitively invite disclosure.



### Initiatives to increase social support for male survivors

It is recommended that social support be increased for male survivors via government funding of formalised peer support groups for male survivors. Also, it is recommended that there are adequate expert support 'navigators' to guide male survivors through the reporting and court process, and provision of ongoing societal education initiatives and campaigns that encourage men to reach out.



### Bespoke and accessible service provision

It is recommended that bespoke and accessible service provision can be achieved by targeted funding towards support services for male survivors. Male survivors wanted to have access to a choice of service workers from a range of demographic backgrounds, options of treatment modalities, wrap-around services, bridging support and for services to be accessible.



### Design of trauma-informed services and activities

It is recommended that policy and support services be designed to ensure male survivors have access to a trauma-informed workforce, and services that are survivor-friendly, male-friendly, transgender-friendly, culturally responsive and trauma-informed.

