

Full Length Research Paper

Attributions for the culture of silence among victims of domestic violence: A case of married men in Kenya

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The study examines attributions for the culture of silence among ever-married male victims of domestic violence in Kenya. This study targets ever-married men who had attained post-secondary education and working in public service. The study adopted a case study design that allows a combination of descriptive and explanatory strategies. The public institution was purposively selected from where 120 respondents were randomly selected from an accessible population of 220. Data were gathered using semi-structured questionnaires and focused group discussions. Quantitative data were analyzed descriptively, while content analysis was used to generate themes. The results are consistent with previous studies that show that physical, psychological, sexual, verbal, and economic violence are prevalent. Further, regardless of the severity of the violence, most males prefer not to report it. The main attributions for the culture of silence were shame, humiliation, stigma, and isolation. As a result, male victims suffer concomitant psychosocial problems. Given the rising number of domestic violence victims, there is a need to provide psychosocial support by creating safe spaces for male victims to mitigate irreparable psychological damages and stabilize the families.

Key words: Domestic violence, male victims, culture of silence.

INTRODUCTION

Domestic violence is defined as a pattern of abusive behaviors by one or both partners in an intimate relationship (Drijber et al., 2012). The American Psychological Association (APA, 2001) defines domestic violence as ongoing patterns of behavior, attitudes, and beliefs in which a partner in an intimate relationship attempts to maintain power and control over the other through psychological, physical, and or sexual coercion.

Domestic violence is a global problem that cuts across culture, class, ethnicity, and age, and it is one of the most severe human rights problems (WHO, 2002). Pizzey (1975) argued that domestic violence is considered a private matter that can be resolved within the home. However, domestic violence is now of public concern with legal implications. Domestic violence victims can legally access justice if the abuse is reported. However, most

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cases go unreported, whether the victims are males or females who focus on numerous studies. Donovan and Hester (2010) posit that domestic violence is a gendered heterosexual phenomenon. Domestic violence is perceived through heterosexual lenses, with the male viewed as the abuser and women as the victims (Josolyne, 2011). The pioneering work by Steinmetz (1977) examined the "battered husband syndrome" where men were found to be reluctant to confess the violence to an outsider. George and Yarwood (2004) later argued that male victims do not come to the limelight because female victims outweigh them.

WHO (2002) states that domestic violence and gender-based violence are significant risks to women's health worldwide. Men, too, are increasingly becoming victims of domestic violence. For both men and women, the risks associated with domestic violence can be fatalities, physical injuries, psychosomatic and psychological problems with long-term health risk (Kenya Demographic Health Survey, (KDHS) 2014). Domestic violence against women has been extensively researched, and results show the contextual and cultural complexity it takes. This study focuses on ever-married men victims of domestic violence who are rarely, if ever, been systematically studied; consequently, understanding and awareness of the effects of domestic abuse against the victims are limited.

LITERATURE REVIEW

Several studies have examined the characteristics of domestic violence against men (Thureau et al., 2015; Wang et al., 2009; Khalifeh et al., 2015; Umubyeyi et al., 2014). Thureau et al. (2015), in a study examining 707 French victims of domestic violence among 81 men and 626 women, show that 49% of men were victims of repeated occasions of violence, 10% of men had been strangulated, 33% had weapons used against them, while 70% of men had been psychologically impaired. Wang et al. (2009), in a cross-sectional study of 2661 Chinese people, found that their female partners had hit 4% of men and 2% of couples had hit each other. Khalifeh et al. (2015), in another cross-sectional study with 170 male and 133 female psychiatric patients in England, reported that 42.9% of male patients had experienced emotional violence, 31.8% physical violence, 4.1% sexual violence. Additionally, Afifi et al. (2009), in a cross-sectional study involving 216 men and 190 women from the U.S., found that 23.3% of men in the survey were victims of domestic violence within their current relationships. Further, Umubyeyi et al. (2014) examined 440 men and 477 women in Rwanda and found that 4.3% of men had experienced physical violence, 7.3% psychological violence, and 1.5% sexual violence. Kolbe and Buttner (2020) found that wives mainly committed violence against men in a retrospective study that

spanned over four years at the Rostock outpatient department of domestic violence victims. They argue that most men were married to the female perpetrators or had lived with them for several years. Gadd et al. (2002) argue that domestic abuse against men can take life-threatening forms with the potential for long-term consequences. They argue that the humiliation and shame experienced when one decides to report abuse to the police can be overwhelming. As a result, male victims are unwilling to report because such an act will be undermining their masculinity (Carey, 2010; Gadd et al., 2002; Donovan and Hester, 2010)

The Kenya National Crime Research Centre (KNCRC) (2014) report on gender-based violence in Kenya involving 231 men shows that 68.1% had experienced inflicting bodily harm (expressed as hitting/battering/ beating); 58.3% domestic conflict (bodily harm and verbal abuse), while 49.1% verbal abuse/abusive language). Data from the Nairobi Women's Hospital Gender Violence Recovery Centre show that 6% of men victims of gender-based violence had sought medical attention. Additionally, KDHS (2014) reported that the ever-married men age 15-49 (44%) had ever experienced violence since the age of 15 and that men rarely report that wives or partners are the perpetrators of the violence. This report revealed that 6% of men had experienced sexual violence, 7% physical violence, while 21% emotional violence. The two reports show significant differences in the percentages of the reported cases, suggesting a lack of systemic assessment of how many men are domestic violence victims.

The studies reviewed above reveal that violence against men a global phenomenon similar to what is experienced by women. Where men are victims of violence, women are the perpetrator except in same-sex male marriages. Hamel (2007) found that women initiate physical violence more often than men do. Further, abusive women engage in emotional abuse, controlling behaviors, physical intimidation, and other forms of abusive tendencies, just like men perpetrators of violence. Unfortunately, male victims of domestic violence lack distinct recognition because, in most societies, domestic violence is a gendered social problem where males are presumed to be the perpetrators (Josolyne, 2011; Dutton and White, 2013; Hogan et al., 2012). Josolyne (2011) posits that the experiences of male victims of abuse resemble those typically experienced by female victims. Hines et al. (2007) state that men prefer not to report the abuse believing that the police would not take any action, and if and when they do, the male victim is likely to be blamed. Hence, men opt not to talk about violence because of the secretiveness, cultural values, masculine identity, tolerance, shame, and fear of losing face.

KDHS (2008-09) noted that in most cultures in Kenya, the level of spousal violence initiated by wives is only a fraction of the violence initiated by husbands. Holding this

position justifies the reasons why violence against men is often ignored. Inadvertently and because of little research on violence against ever-married men in Kenya, little or no funding is provided to address its effects (Hogan et al., 2012). However, there are detrimental negative physical, psychological, behavioral, and health concerns associated with domestic violence on men victims.

This problem is further compounded by patriarchal values that discourage men from speaking out against violence, especially if meted by a wife (Cheung et al., 2009). Paradoxically, just like women opt to remain in an abusive relationship and remain silent to protect their children, some studies have found this to be true in men. The KDHS (2014) revealed that men stay in abusive relationships to protect their children as they fear that the woman may influence them to think that he is a bad person or that he does not love them.

Although there is no single reason that can solely be attributed to violence against ever-married men, often women who are perpetrators are assumed to use violence for self-defense (Kaluyu, 2007). Additionally, violence against men is often attributed to men's inability to provide for the families, unfaithfulness, drunkenness, as reported in local dailies regularly. Further, women frustrated by their spouse's irresponsibility might become violent (Njuguna, 2014; Drijber et al., 2012; Simonelli and Ingram, 1998).

What is puzzling is that men victims of domestic violence suffer in silence, with most cases going unreported despite various support systems (KDHS, 2014). Drijber et al. (2012) further posit that violence against men goes unrecognized because it is often associated with shame, embarrassment, ridicule, and stigma. The theory of learned helplessness argues that violence is learned, positing that men who come from family backgrounds where they witnessed violence in their early childhood are least likely to engage in violence and are often likely to become victims. The cultural ideologies upheld silences the men by the constant reminder that "men do not cry" to portray the masculine identity.

Additionally, there is silent judicial discrimination against men victims, with most courts being more sympathetic to women victims, thus making males less likely to get a fair hearing. Nevertheless, abused men, just like abused women, suffer from depression, stress, and psychosomatic symptoms (Cheung et al., 2009; Barnett et al., 2005). This paper is informed by learned helplessness theory to shed light on why men victims of violence often choose to stay in abusive relationships in silence.

METHODOLOGY

A cross-sectional study was conducted with a population-representative sample drawn ever-married men aged 25-50+ years. The sample was selected from a total number of married

men employed in a public institution in Nairobi County, Kenya, who had attained post-secondary education. The study aimed at 220 ever-married men, where 50% were randomly selected to participate in the study.

Data collection instruments

Data were collected using an unstructured questionnaire containing items on various forms of violence and silence culture attributions. Focus Group Discussions (FGD) were held to generate an in-depth understanding of the respondent's view of the study variables. A total of 12 respondents who volunteered to participate in the study were divided into two groups. The interview schedule Section A focused on the demographic data of the respondents, Section B common forms of domestic violence in marriages as well as which specific ones the respondents had ever experienced, Section C examined how the respondents experience them, while Section D focused on attributions for the culture of silence. A reliability Cronbach's Alpha of 0.79 was determined using test-retest, and the instrument was considered reliable.

Further, the researcher ascertained the validity of the instruments during the piloting session with participants who shared similar characteristics sampled population gave suggestions that helped remove ambiguities in the instrument. The researcher made an appointment with the two groups of respondents, each with six respondents. The average time taken by the two groups was 1:30 min to complete the discussions.

Statistical analysis

Differences in demographic factors and the prevalence of forms of violence were analyzed using descriptive statistics. The research classified FGDs findings into themes which included forms of violence, psychosocial effects, and attribution for silence culture attribution.

Ethical considerations

The research protocol and study tools were approved for scientific and ethical integrity by the National Council of Science Technology and Innovation. The researcher applied WHO guidelines on ethical issues related to violence research to select the participants. The participants were further informed about their free choice to participate and withdraw at whatever time they wanted. The researcher secured written consent from all respondents before the interview. To respondents were assured of confidentiality.

RESULTS

Demographic data

The majority of the respondents, 76% who participated in the study, were between 25-44 years, while 19% were between 45-54 years. The lowest percentage (5%) of those who participated were over 55 years. Further, 36% were married between 6-10 years, 30% 11-20 years, 20% above 21 years, while 14% had been married for five years or less. Most of the respondents, 92%, had attained post-secondary education, with only 8% who had achieved secondary education.

Forms of domestic violence reported

The respondents' most common form of violence was physical, 80%, psychological violence, 72%, and verbal violence, 64%. The other forms of violence identified included sexual 6% and related financial abuse at 4%. These findings correspond to various studies reflected in literature (KDHS, 2014, 2008-2009; Thureau et al., 2015; Wang et al., 2009; Umubyeyi et al., 2014; Hines et al., 2007) that reported that most men are prone to experience physical and psychological abuse. The FGD sessions examined the forms of abuse under the following themes: physical abuse, psychological and verbal abuse, and descriptive results.

Experiences of physical abuse

Physical abuse was the most prevalent among men victims, which is similar to that reported by women victims (KDHS, 2014). When asked to specify the forms in which physical violence occurred, they said pushing, slapping, punching, biting, and even throwing an object at the victim. These findings are similar to those reported by Drijber et al. (2012), who found that the typical household items used are chairs, knives, vases, and tableware.

Experiences of psychological and verbal abuse

Of the 12 respondents involved in the FGD, 70% stated that women are good at inflicting psychological and emotional abuse. Often women's abuses include refusal to offer food, locking spouses out of the house, or ridicules to demean the man in front of children. It was also evident that most respondents noted that most of them suffer psychologically and are uncomfortable explaining some specific experiences of psychological abuse because they regard them as "very sensitive," "personal," or "annoying to mention." Another respondent stated that "discussing such experiences shows that you are a weak man who is not in control." This finding implies that even though men acknowledge that various psychological abuse is prevalent, most men had experienced it from time to time. The respondents stated that a lack of communication exacerbated psychological abuse. The results revealed that at least 80% of the respondents in the FGD had experienced prolonged silence and refusal to discuss family matters. The respondents stated that lack of communication and demeaning acts like being locked out of the house was common.

60% of the respondents in the FGD had experienced humiliation connected to poor communication. The respondents stated poor communication and secrecy on how family finances were being used as a big problem.

The prolonged period of silence created suspicion,

which the respondent stated was emotionally draining. As a result, one respondent stated, "men feel threatened" and feel unsafe, leading to violence to regain control, as stated by Njuguna (2014). Lack of communication was closely linked to verbal attacks, ridicule, verbal harassment, and name-calling, showing psychological violence concomitant nature. As a result, most respondents stated that the result was shaming and social isolation by most men victims of domestic violence (Carey, 2010; Drijber et al., 2012; Kolbe and Buttner, 2020).

Experience of sexual violence abuse

Robinson and Rowlands (2006) noted that forced sex, even by a spouse, is an act of aggression and violence. The study revealed that only 6% of respondents had been sexually abused, similar to the one reported by the KHDS (2014). During the FGD, most respondents shared away from discussing sexual offenses, with most stating that "this is not a matter we can discuss." The reasons given were "sex is a private matter," "it is uncultural," and "it is embarrassing." These responses imply that sexual violence is most likely not going to be reported, a finding that contradicts those reported by KCRC, which shows significantly large numbers of men victims of sexual abuse. The secrecy with which the violations can occur makes it difficult to determine how the respondents have experienced this form of abuse. This finding suggests that culturally, sex is privately handled, and it is a forbidden issue that men cannot openly discuss, which contradicts women's ability to report a sexual offense. This raises the question of how men handle denial of conjugal rights, especially during divorce cases.

Why men will not talk and cannot talk

Gelles (1993, 1980) argues that the family is a sacred institution for many Americans, and the family's rights to privacy are protected. Therefore, violence in the family is considered a private, family matter hidden behind a closed door. This implies that domestic violence, among other vices that occur at home, remains unchallenged and undercover. Even though family violence is acknowledged, many people who witness it are reluctant to report it for fear of interfering with family privacy or fear of retaliatory attacks (Barnette et al., 2005).

In this study, men socialized to believe that the family is a private institution, men are the family leader, and women are subservient to their husbands. As a result, when men become domestic violence victims, there is a disturbance of order and function. Unlike most abused women, who take action, the men are left in a void. They become stigmatized and prone to long-term mental health challenges that can affect the quality of their lives.

What is of interest is if the silence men victims of violence uphold is rooted in patriarchy and masculinist constructions of gender ideology (Sassatelli 2011, Yllo 2005), just like women's positions. Social forces effectively silence abused women (Anderson, 2010), with most suffering without disclosing to their families and friends because they fear the shame accompanying such disclosure.

As a result, men victims of abuse go unrecognized. They were probably less likely than women to report such incidents for fear of embarrassment, ridicule, and the lack of available support services (Barbette et al., 2013; Cheung et al., 2009). When men seek help or support, they are either ignored, ridiculed and even accused of being the violence initiator. The FGD session study respondents identified the following themes that explain the culture of silence: shame, stigma, masculinity, and the need to protect children. At least 80% of the respondents agreed that it was shameful to admit abuse by the wife. The argument is that men fear social ridicule and stigma associated with violence since they are expected to be stronger than women. In this case, abuse implies a lack of masculinity and weakness, yet the. Socially men are expected to be physically dominant and aggressive partners. Consequently, men admitting victimhood and labeling the violence a crime perpetrated by women is considered emasculating (KDHS, 2014; Steinmetz, 1977). These findings are consistent with the literature on domestic violence that men feel the pain of psychological and emotional abuse they endure as being far more intense than any physical abuse they encounter (Rhodes and McKenzie, 1998; Kelly and Johnson, 2008).

60% of FGD respondents stated that men victims would not talk about the abuse for the children's sake. According to Steinmetz (1977), many abused husbands refuse to leave for fear of leaving their children with abusive women. They believe that if they stay, they can at least protect the children where necessary. There is a cultural expectation that men should be strong and not cry for help. As a result, men put on a brave face and mask a masculine identity in an abusive relationship.

Do married men suffer any psychosocial effects of domestic violence?

Folligstad et al. (1991) found that emotionally abusive relationships can destroy one's self-worth, leading to anxiety and depression, and making one feel helpless, ashamed, and alone. The results reveal that for men who experienced physical violence, 75% of them experienced anger and rage, 40% were emotionally hurting, 35% reported sadness or depression, 15% reported feeling shame or fear, and 10% felt unloved or helpless. The verbally abused respondents felt isolated, withdrew from family functions, felt harassed and disrespected, felt numb or helpless, shame, and humiliated. Even though these men considered separation or divorce, they could

not carry it through immediately because by leaving, society would know there is a problem in the marriage. The respondents stated that abused men are prone to extreme psychological torture, resulting in health issues such as hypertension, diabetes, heart problems, and other illnesses. The respondents stated that married men who have a drinking problem could indicate psychological and emotional abuse. It was also evident that most men will not talk about emotional pains because it is perceived as a weakness. After all, "real men" are not supposed to show emotional weakness. As a result, most men try to camouflage the psychological and emotional pain.

DISCUSSION

The study sought to establish the forms of violence among ever-married men experience, the psychosocial effects, and the attributions for the culture of silence. The majority of the respondents were aged 25-44 years and were in marriage for a period ranging from 6 to 21 years. The majority of the respondents had attained post-secondary education.

In Kenya, domestic violence progressively draws the policymaker's attention as more and more women victims are reported with severe injuries. However, the KDHS and KNCRRC reports reveal that men are increasingly becoming victims of domestic violence in numbers that cannot be ignored. These trends are similar to those reported in western societies, as shown in the reviewed literature. Even though this current study has presented similar findings to those reported elsewhere, the study did not comprehensively examine other factors like personality influences, specific cultural backgrounds, and socio-political determinants of domestic violence.

The findings of this study are consistent with KDHS (2014), KNCRRC 2014; Drijber et al., 2012), Hines et al. (2007), Hogan et al. (2012), Robinson and Rowlands (2006), Thureau et al. (2015), Wang et al. (2009), Khalifeh et al. (2015) and Umubyeyi et al. (2014) who argue that male victims of domestic violence experience what female victims experience. The study established that married men were prone to physical violence 80%, psychological and emotional violence 72%, verbal violence 64%, and sexual 6%. The FGD revealed that all the respondents were aware that women are domestic violence perpetrators, just like the male perpetrators. Even though women perpetrators do not appear to seek power and control over their men (husbands), subjecting the man to violence makes the man subject to ill-treatment. Unlike men who often have been found to use physical violence, this study revealed that women use psychological and emotional abuse than physical abuse characterized by demeaning behaviors, general ridicule, belittling statements, and a general lack of sensitivity (Njuguna, 2014; Drijber et al., 2012).

Further, where women used physical violence, it was characterized by punches, scratches, scolding with hot

objects or liquids, bites, kicks, genital hits. It was also evident that physical and psychological violence was preceded and followed by a lengthy period of poor communication between them. In general, the respondents stated that the home environment was generally very hostile to men.

Hogan et al. (2012) posit that lack of avenues to address male victims of abuse leads to many negative physical, psychological, behavioral, and health concerns. Men who have continually abused emotionally chip away their feelings of self-worth and independence (Steinmetz, 1998; Simonelli and Ingram, 1998; Njuguna, 2014). This study revealed that most respondents had experienced psychological and emotional violence that was considered worse than physical violence. The respondents stated that most of them had anger and rage, moments of extreme sadness or depression, feeling shame or fear, or felt unloved or helpless (Hines and Malley-Morrison, 2001; Hogan et al., 2012). Further, the verbally abused respondents felt isolated, withdrawn from family functions, felt harassed and disrespected, felt numb or helpless, shame, and humiliated (Hogan et al., 2012). Studies are consistent with those by Follingstad et al. (1991) have confirmed that abused men suffer depression, stress, and psychosomatic symptoms.

Globally, the majority of cases of male victims go unreported. This study revealed that men suffer just like women victims do, but seldom report (Hogan et al., 2012; Hines et al., 2007; Drijber et al., 2012; Cheung et al., 2009). Domestic violence against men is surrounded by the secrecy buried in the cultural values, masculine identity, tolerance, shame, and fear of losing face, just like in women. The KDHS 2008-2009 report points out that only a fraction of the level of violence initiated by wives is reported. Hogan et al. (2012) argue that there is a distinct lack of recognition of male victimization in domestic violence, confirmed in this study. Domestic violence victims treat this matter in secrecy and as a personal problem upholding that family is a private institution (Donovan and Hester, 2010; Barnett et al., 2005). Hines and Malley-Morrison (2001) posit that men fear stigma, ridicule, and shame, and to remain in control, they keep silent. Cultural values and ideologies play a significant role in silencing male victims because of the embarrassment and likelihood of being ostracized for being abused by a woman (Josolyne, 2011, Cascardi et al., 1992; Dutton and White, 2013). The fear of being regarded as man enough is enough to silence the man completely.

Conclusion

The increasing trend of domestic violence has left many men victims of domestic violence stigmatized and unsupported. Even though numerous evidence-based interventions have addressed domestic violence against women, the poor-rate men come out and report abuse,

challenging to offer intervention despite advancement in education against retrogressive cultural practices that glorify the masculine identity, oblivious that some men will be victims of domestic violence. This paper argues an urgent need for a men support system that demystifies violence against men to offer informed support. Given the increase in male victims of domestic violence, there is a need to carry out an in-depth study to determine the mechanisms that can be adopted to create safe spaces for men to feel secure to address the secretive, shameful, and stigmatizing nature of women perpetrated domestic violence in a patriarchal society where masculinity is glorified. With statistics and lived experiences revealing an increase in male victims of domestic violence, the questions that remain to be answered are: Why more females becoming violent? Have men always been victims but remained hidden by the gender view of domestic violence? Answering these questions will demystify male victims' experiences and pave the way for increased awareness of the support services available for all victims' gender, notwithstanding.

Limitations of the study

The findings of this study are limited to a small sample of married men victims of domestic violence and the culture of silence. This has implications for the generalizability of the results. However, the findings of this study provide a basis for extensive research on the need to create safe spaces for men victims of domestic violence to enable them to speak openly on domestic violence.

CONFLICT OF INTERESTS

The author has not declared any conflict of interests.

REFERENCES

- Afifi TO, MacMillan H, Cox BJ, Asmundson, GJG, Stein MB, Sareen J (2009). Mental health correlates of intimate partner violence in marital relationships in a nationally representative sample of males and females. *Journal of Interpersonal Violence* 24(8):1398-417.
- Anderson KL (2010). Conflict, Power, and Violence in Families. *Journal of Marriage and Family* 72(3):726-742.
- The American Psychological Association (APA) (2001). *Publication Manual of the American Association*. 5th Edition <https://www.apa.org/pubs/books/4200061>
- Barnett O, Miller-Perrin CL, Perrin RD (2005). *Family violence across the lifespan: An introduction* (2nd ed.). Sage Publications, Inc.
- Carey M (2010). *Male Victims of Domestic Abuse*, [online]. Available at: http://www.amen.ie/theses/mandy_carey_thesis.pdf
- Cascardi M, Langhinrichsen J, Vivian D (1992). Marital aggression. Impact, injury, and health correlate for husbands and wives. *Archives of Internal Medicine* 152(6):1178-1184.
- Cheung M, Leung P, & Tsui T (2009). Asian Male Domestic Violence Victims: Services Exclusive for Men. *Journal of Family Violence* 24(7):447-462.
- Donovan C, Hester M (2010). 'I Hate the Word "Victim"': An Exploration of Recognition of Domestic Violence in Same-Sex Relationships. *Social Policy and Society* 9(2):279-289.

- Drijber BC, Reijnders UJL, Ceelen M (2012). Male victims of domestic violence. *Journal of Family Violence* 28(2):173-178.
- Dutton DG, White KR (2013). *Male Victims of Domestic Violence*. New Male Studies. *An International Journal* 2(1):5-17.
- Follingstad DR, Brennan AF, Hause ES, Polek DS, Routedge LL (1991). Factors moderating physical and psychological symptoms of battered women. *Journal of Family Violence* 6(1):81-95.
- Follingstad DR, Wright S, Lloyd S, Sebastian JA (1991). "Sex Differences in Motivation and Effects in Dating violence." *Family Relations Journal* 40(1):51-57.
- Gadd D, Farrall S, Dallimore D, Lombard N (2002). *Domestic Abuse Against Men In Scotland*. Scottish Executive Central Research Unit
- Gelles RJ (1980). Violence in the Family: A Review of Research in the Seventies. *Journal of Marriage and the Family* 42(1):873-885.
- Gelles RJ (1993). Through a Sociological Lens: Social Structure and Family Violence. In: Gelles, R.; Loseke, D., editors. *Current Controversies on Family Violence* pp. 31-46.
- George MJ, Yarwood DJ (2004). *Male Domestic Violence Victims Survey 2001: Main findings*. Dewar Research.
- Hamel J (2007). Toward a Gender-Inclusive Conception of Intimate Partner Violence Research and Theory: Part I- Traditional Perspectives. *International Journal of Men's Health* 6(1):36-53.
- Hines DA, Brown J, Dunning E (2007). Characteristics of callers to the Domestic Abuse Helpline for Men. *Journal of Family Violence* 22(2):63-72.
- Hines DA, Malley-Morrison K (2001). Psychological effects of partner abuse against men: A neglected research area. *Psychology of Men and Masculinity* 2(2):75-85.
- Hogan K, Hegarty JR, Ward T, Dodd LJ (2012). Counselor's experiences of working with male victims of female-perpetrated domestic abuse. *Counselling and Psychotherapy Research* 12(1):44-52.
- Josolyne S (2011). *Men's experiences of violence and abuse from a female intimate partner: Power, masculinity, and institutional systems*. (Doctoral dissertation, University of East London) Corpus ID: 146577991.
- Kaluyu VK (2007). *Causes, consequences and management strategies of gender-based domestic violence: A case of central division Kitui District Kenya* (Doctoral dissertation, Egerton University).
- Kelly JB, Johnson MP (2008). Differentiation among types of intimate partner violence: Research update and implications for interventions. *Family Court Review* 46(3):476-499.
- Khalifeh H, Moran P, Borcehmann R (2015). Domestic and Sexual violence against patients with server mental illness. *Psychological Medicine* 45(4):875-886.
- Kolbe V, Buttner A (2020). Domestic violence against men: Prevalence and risk factor. *Deutsches Ärzteblatt International* 117(31-32):534.
- Njuguna J (2014). *Causes and consequences of domestic violence against men in Mukurwe-in Constituency, Kenya*. (Doctoral dissertation, University of Nairobi).
- Pizzey E (1975). *Chiswick Women's Aid-- a Refuge From Violence*. *The Journal of the Royal Society for the Promotion of Health* 95(6):297-298.
- Drijber BC, Reijnders UJL, Ceelen M (2012). Male victims of domestic violence. *Journal of Family Violence* 28(2):173-178.
- Rhodes NA, Mackenzie EB (1998). Why do battered women stay?: three decades of Research. *Aggression and Violent Behavior* 3(4):391-406.
- Robinson AL, Rowlands J (2006). *The Dyn Project: Supporting men experiencing domestic abuse*. Cardiff University.
- Sassatelli R (2011). Interview with Laura Mulvey: Gender, Gaze and Technology in Film Culture. *Theory, Culture and Society* 28(5):123-143.
- Simonelli CJ, Ingram KM (1998). Psychological distress among men experiencing physical and emotional abuse in heterosexual dating relationships. *Journal of Interpersonal Violence* 13(6):667-681.
- Steinmetz S K (1977). *The Battered Husband Syndrome*. *Victimology* 2(3-4):499-509.
- The Kenya Demographic Health Survey (KDHS)(2014). <https://dhsprogram.com/pubs/pdf/fr308/fr308.pdf>
- The Kenya Demographic Health Survey (KDHS)(2008-09). <https://dhsprogram.com/pubs/pdf/fr229/fr229.pdf>
- The Kenya National Crime Research Center Report (KNCRC) (2014). <https://www.crimeresearch.go.ke/>
- Thureau S, Le Blanc-Louvry I, Gricourt C, Proust B (2015). Conjugal violence: A comparison of violence against men by women and women by men. *Journal of Forensic Leg Medicine* 31:42-46.
- Umubyeyi A, Mogren I, Ntaganira J, Krantz G (2014). Women are considerably more exposed to intimate partner violence than men in Rwanda: Results from a population-based, cross-sectional study. *BMC Women's Health* 14(1):1-2.
- Wang T, Parish WL, Laumann EO, LuoY (2009). Partner violence and jealousy in child: a population-based survey. *Violence Against Women* 15(7):177-98.
- World Health Organization (WHO) (2002). *World Report on Violence and Health*. Geneva.
- Yllo KA (2005). Through a Feminist Lens: Gender, Diversity, and Violence: Extending the Feminist Framework. *Current Controversies on Family Violence* 2:19-34.