FAMILY SHELTER FOR MEN & CHILDREN

Full Research Backgrounder





CONTACT

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INTRODUCTION: YOU CAN BE THE LIFELINE FOR FATHERS AND CHILDREN LIVING IN FEAR

Imagine that you and your child live each day in fear of family violence, but no one believes you because you're a man. That is the situation for thousands of fathers every year, and for over 450 men who reached out to our agency in 2018. Statistics Canada data and sociological research consistently indicate that men suffer domestic abuse at unexpectedly high rates. Yet their access to vital support services, including crisis centres and emergency counselling is almost non-existent.

The critical missing piece is domestic abuse shelters for fathers and children. Single father families constitute the fastest growing family form in Canada. Yet while the caregiving role of dads quickly expands, fathers who are suffering violence in the home still have no safe place where they can escape with their children.

There is good news though. In August 2018, several Alberta women's shelters released a ground-breaking report, *Shelter 2.0*, acknowledging the victimization of men and recommending that shelters "*need to expand our focus to include, for example, men and members of the LGBTQ2S+ community who are victims.*"¹ Meanwhile, a number of women's shelters have begun opening their doors to abused men.²

In March 2019, the government of the UK released its first-ever *"Position statement on male victims of crimes"* and earmarked one million pounds to charities that support men and boys who have experienced domestic violence.³ These funds will expand emergency services for male victims. In announcing these historic measures, Victoria Atkins, the UK Minister for Crime, Safeguarding and Vulnerability, stated *"Men can, and do, suffer from crimes such as domestic and sexual abuse."*³

These remarkable developments signal a breakthrough in community awareness that domestic abuse is a serious public concern that requires both a gender-inclusive and a gender-sensitive approach. Our proposal builds on these trends. The Canadian Centre for Men and Families will bring the first shelter for abused men and children to Toronto. This would be the first of its kind in Canada.

Our agency is in the right position to succeed. Here is a quick status update:

• We are well experienced in assessing and providing conselling and other services to victimized men and their families.

• We are a valued community partner and go-to agency for referrals from Toronto Police, Toronto Victim Services, hospitals, community health centres and a wide variety of other agencies.

• Legal Aid Ontario has authorized us to provide legal aid certificates to male victims of domestic abuse.

• The City of Toronto's subsidized housing agency has registered our organization as a "Verifier of Abuse," as part of their special priority program for victims of family violence. "Yet while the caregiving role of dads quickly expands, fathers who are suffering violence in the home still have no safe place where they can escape with their children." Canadian Centre for Abuse Awareness, the nation's largest victim support agency, has partnered with us to supply clothing and other vital goods to men and families in crisis.
We are regularly invited to run workshops for agencies

developing support for male victims, including the CMHA and the Ontario Network of Domestic Violence Treatment Centres.

We also have the backing of strong voices from within the Violence Against Women (VAW) community. The Executive Directors of several women's shelters and associated agencies have provided support and resources critical to this project.

These remarkable developments signal a breakthrough in public awareness that domestic abuse is a serious public concern that requires both a gender-inclusive and a gender sensitive approach.

Women and children also stand to benefit when male victims are supported. The form of domestic violence most injurious to women is mutually violent couples. Meanwhile, the intergenerational effects of family violence often result in the victimization of both men and women within the same family. Intervention programs that support victims regardless of gender have the best chance of breaking the cycle of violence, either within a relationship or between the generations. These gender inclusive strategies provide us the best opportunity to improve the health of children, families and communities.

The time has come to take a bold step. I am eager for us to join forces across the public and social service sectors as we embark on a remarkable project that will greatly improve many lives.

Best Regards

Justi Litter

Justin Trottier Executive Director, Canadian Centre for Men and Families

"Domestic violence against men is frequent and significant, and a rarely acknowledged fact." Rita Demontis, Men also suffer from domestic abuse, Sun newspapers, June 24, 2016 "These remarkable developments signal a breakthrough in public awareness that domestic abuse is a serious public concern that requires both a gender-inclusive & a gender sensitive approach."



"Over the years I had grown a lot of resentment and that resentment turned against the world, to the point where it was affecting my work, my health and everybody around me. I had to change my life around. Since I've been coming to the Centre I've opened bonds with my father. I never thought we would reconcile but recently he hugged me for the first time. If I had not gotten help from the Canadian Centre for Men and Families, I don't know where I'd be today."



Dorian, Client at the Canadian Centre for Men and Families

PROPOSAL OVERVIEW

We propose to establish the first dedicated shelter facility for abused men and their children in Canada. This shelter will be one of a small, growing community of shelters for male victims of abuse in North America. It will represent an expansion of the resources and infrastructure available for the Canadian Centre for Men and Families to grow its abuse prevention and victim support programs, which benefit the wider community.

OBJECTIVES

- To provide 24/7 community-based emergency shelter and crisis support services for men and their dependents who have experienced violence and/or abuse
- To provide crisis phone counselling, providing information on rights, options and available services, referrals and system navigation
- To support safety planning for men and their dependents who are experiencing violence and/or abuse and to help address their immediate safety concerns

SERVICES AND SUPPORTS

- Temporary safe and secure shelter residence
- Provision of residential supports (food, blankets, hygiene products)
- Emergency case management
- Emergency trauma counselling
- Services through the crisis phone line
- Assisting with housing applications
- Development of safety strategies or plans for men and their children
- Assistance with information about the justice system, immigration, transportation and language or cultural interpretation
- Outreach and advocacy on behalf of men and their children
- Male survivors of domestic abuse support group
- Legal Clinic
- Fathering After Separation or Divorce
- Drop-in peer support group
- Referrals or linking men to alternative accommodations and services

COLLABORATIVE SHELTER MODEL

We aim to establish the shelter in collaboration with the Ontario Ministry of Children, Community and Social Services, the Ontario Ministry of the Attorney General, and the City of Toronto, all of whom fund and/or regulate shelters and services for abuse victims. In preparing the vision for our shelter, we investigated shelter best practices and reached out to a wide variety of agencies, including Toronto homeless shelters, Violence Against Women (VAW) shelters and those shelters across North America that support abused men.⁴ We also consulted with officials from the Violence Against Women department within the Ministry of Children, Community and Social Services. They connected us with the Executive Directors of various GTA-based VAW shelters from whom we have since received support and documentation. Much of this wisdom found its way into this proposal.

We intend to operate as similarly as possible to existing Violence Against Women (VAW) shelters, according to the same Shelter Standards established by the Ministry of Children, Community and Social Services. We seek to be accepted officially as a domestic abuse shelter, either by the Ministry's VAW department or by the Ministry itself. Through our partnership with the VAW community, we hope to build a successful shelter based on the experience and knowledge of those who have come before us and to demonstrate our commitment to a collaborative model which improves services for the benefit of all victims. Toward this end, we have built an Advisory Board made up of leading members of anti-violence agencies, including directors of shelters and victim support agencies. The Advisory Board members are profiled later in this document.

24 HOUR HELPLINE

Our proposal includes the establishment of a 24 hour/day helpline for male victims of domestic abuse. This will be the first helpline in Canada dedicated to male abuse survivors. It will fill a major gap since we receive frequent queries from the public and from other social service agencies who are looking for a helpline to refer men in need. Operating a 24 hour/day helpline will ensure that the shelter program is available at all times.

FACILITY DETAILS

The proposed space is a house or a mixed-use commercial/ residential property. The facility, estimated value \$1.5 million, will accommodate up to six families with thirteen beds. Families will range in size from single men to families of four. The facility will operate as an emergency or short-term shelter, with stays not to exceed 90 days, barring exceptional circumstances.

The facility will act both as a shelter for men and children, and as a new home for the well-established Canadian Centre for Men and Families. It will bring residences, social services and administration together under the same roof. There will be a separation between the residential space, which provides the shelter and emergency services, and the public-access space where programs and administration will be headquartered.

We will continue to provide the same robust series of programs and services that are currently available at the Canadian Centre for Men and Families (CCMF).⁵ These will transition to the new location, and be located within the public-access space. Clients who are residents will have access to additional emergency support services such as trauma counselling, legal advice, case management and housing support, which will be provided within the residents-only space. When ready, these clients will also be welcomed to join the various group programs available to both residents and non-residents within the public-access space. "We have built an Advisory Board made up of leading members of the anti-violence community, including directors of shelters and victim support agencies." These services include many of the group programs now available at the CCMF, such as our Support Group for Male Survivors of Domestic Abuse, our Fathering After Separation or Divorce program, our Legal Clinic and our general drop-in peer support group.

OPERATIONS HIGHLIGHTS

The following are highlights from the Draft Operational Guide that we have prepared for this Shelter. The Operational Guide is based on the *Violence Against Women - Emergency Shelter Standards* provided by the Ministry of Children, Community and Social Services. They also reflect guidance from policies graciously shared with us by senior staff from several Violence Against Women shelters.

• All male-identified people, including gay, bi and trans men, as well as their dependents, will be admitted to the shelter. This includes gay, bi and trans men. Anyone outside this population will not be admitted, but will be referred to other agencies where possible.

• The Shelter will provide all men who enter the shelter and wish to access its services with a timely, standardized, comprehensive and clearly communicated intake process and associated procedures.

• The Shelter will provide clients with consistent and coordinated support and services, both at the shelter and with other community agencies, through comprehensive care management. Our case management process will include all required assessment, planning, counselling, monitoring, and evaluation of services. This process is driven by the specific needs of our clients and works to support clients in realizing their goals.

• The Shelter supports client transfer to other Shelters in order to protect the safety of the client. Since there are no other Shelters in the GTA established specifically for male victims of domestic violence and abuse, the Family Shelter for Men and Children will prioritize referrals to those Shelters that have entered into partnership with us to continue providing as many of our services as possible to these clients.

• The Shelter will offer men and their dependents the opportunity to provide feedback on their level of satisfaction with the services and supports they received.

• All clients will be offered an opportunity to complete the Ministry of Children, Community and Social Services Client Satisfaction Survey at regular intervals. The Shelter will regularly report on the response rate and articulate a strategy to address low response rates, if required.

"All male-identified people, including gay, bi and trans men, as well as their dependents, will be admitted to the shelter."

ANALYSIS IN SUPPORT OF A COMMON FACILITY FOR RESIDENCY & SERVICES

We are proposing a common facility rather than separate facilities for residency and services. Since shelters differ on this point, we do wish to briefly explain the rationale behind proposing a single facility.

There are several dimensions of analysis that are relevant. These include client outcomes, budgetary considerations, ease of service delivery, management practicality and safety concerns. A single facility is as good as, or better than, multiple facilities on all dimensions.

Let's start with client outcomes. After having analyzed the situation at a variety of other shelters, the conclusion we reached was that client outcome was not the reason most chose to separate the residency from the programs. Rather, shelters make this decision based on practical considerations which may differ from shelter to shelter.

Taylor House (Batesville, Arkansas) requires its residents to visit a separate facility for counselling, because that is the neighborhood in which most of their clients (who are non-residents) are located. Because their residency house was donated to them, they did not have the option of finding a mixed-use facility, and having residents visit a separate facility was more cost-effective than relocating their counselling services.

The Manitoba Men's Resource Centre indicated that clients who are resident in the facility where services are provided have better outcomes than those who live in a separate motel, even though they theoretically have access to the same support.

The Center for Safety (New York) and Bethesda House (Bowmanville, Ontario) have separate facilities for residency and services, but they are located within walking distance of each other. This is a common practice, as it reduces client transportation costs and improves the likelihood that clients will engage in services. However, it is difficult to find suitable venues that are sufficiently close to one another.

Additionally, many of the shelters which we contacted do not run group programs, whereas we have found group programs to be a critical component of our client's healing. We will have a limited number of clients resident at any given time. Therefore the success of our group programs will require that both resident and non-resident clients be available to participate in a common group, provided that they have had similar experiences of domestic abuse. Our experience at the Canadian Centre for Men and Families demonstrates that this is feasible, as we routinely involve men from homeless shelters within our group programs. Resident men will be provided with extra unique emergency services and will only join the group when they feel ready.

With respect to budgetary considerations, we will realize an economy of scale savings in our infrastructure, administrative and human resource costs by operating a common facility. Since the shelter will require 24 hour/day management or supervision, pooling our staffing resources into a common facility makes this more manageable. We will also save on transportation costs by not having to shuttle clients between multiple sites. Similar considerations make a common facility easier to manage and operate.

One reason often given for separating the shelter from the services is that of safety and security. The safety of clients is extremely important, but we've learned from discussions with shelter directors that the appearance of safety is often a bigger issue than actual safety concerns. This perception issue may be a bigger factor in women's shelters than in men's shelters. The Manitoba Men's Resource Centre reported that security was not as rigid in their men's facility as in the women's facility operated by their parent organization.

None of the shelters for abused men that we contacted had ever experienced any security issues. While client perception of safety is an important element in healing, safety perception can be enhanced in various ways, including through a security system and cameras on the premises, and a staff person on site 24 hours. Another way to enhance both the perception and the reality of safety is by providing a separate entrance to the residency so that shelter clients can access their homes without needing to go through the public-access space. This is important for another reason. While many victims of domestic abuse may feel embarrassment, the shame of being a victim may be even more intense for men. Therefore, providing men with a direct and private route to their residency could be critical.

THE CASE FOR A SHELTER FOR ABUSED MEN AND CHILDREN

A Growing Acknowledgment of Male Victimization

We have long known that domestic violence spans all ethnicities, ages and socioeconomic statuses. Now we are increasingly aware that domestic violence also spans all genders, gender identities and sexual orientations.

There is an ongoing debate among researchers of family violence concerning the rate of male victimization. Our case for a shelter for abused men is based on an emerging core consensus that whatever the exact number, the rate of male victimization is much higher than is publicly recognized and the consequences of this violence are severe.

This conclusion is fully in line with the following recommendation from the *Shelter 2.0* Report, which was published in August 2018 by several Alberta women's agencies, under the leadership of the Calgary Women's Emergency Shelter and YWCA Calgary:

We unequivocally know violence against women is largely perpetrated by males; yet, we cannot ignore that this is not the only form of violence impacting those we serve. The findings noted require us to expand the prevailing paradigm guiding research, government and community responses to violence, which assume girls and women are the only victims of violence perpetrated by males. Coercive controlling violence is the deadliest form of violence and therefore rightly captures the focus of our work; however, the reality is more broad and complex and so must be our responses. While this violence has historically been viewed as a women's issue and a women's response, we must learn from and adapt to changing social conditions and societal norms.⁶

The Report concludes that shelters "will need to expand our focus to include, for example, men and members of the LGBTQ2S+ community who are victims.... This means acknowledging men also experience abuse and violence."⁷

"Our case for a shelter for abused men is based on an emerging core consensus that whatever the exact number, the rate of male victimization is much higher than is publicly known and the consequences of this violence are severe."



The policy implications for domestic abuse shelters going forward is summarized as follows:

Shelter 2.0 means we will prioritize the experience of violence reflective and inclusive of gender diversity. From this perspective, we can consider the role of shelters as violence shelters, with the possibility of serving those in transition male-to-female or female-to-male, males and females experiencing violence. This does not mean all women's shelters become all-gender shelters. Rather, as a violence prevention system, we will develop options to address the experience of violence reflective and inclusive of gender diversity.⁸

Consistent with these policy recommendations, women's shelters in Alberta have recently begun opening their doors to men and children, including the women's shelters in Medicine Hat, Strathmore and Brooks.⁹

Facts and Figures

Various techniques are used for collecting data on domestic violence. The portrait painted of family violence will differ considerably depending on the methodology employed. Police and emergency room data show a significant majority of female victims, while large scale population surveys usually report gender symmetry between men and women. The difference is partly attributable to the form of domestic abuse captured by these different methodologies. Data received from police and hospitals is more often a case of coercive controlling behaviour or "intimate terrorism." Meanwhile, population surveys mostly capture instances of situational couple violence.

A second reason for the difference is that police and emergency room data capture instances of abuse which are consistent with institutional policies around domestic violence. Police data record only those incidents where police make an arrest or where police choose to log an incident as domestic violence. Most police agencies in Canada are directed to employ a gender lens when dealing with domestic violence and therefore treat reports of male and female perpetration differently, often declining to take action against an abusive woman.¹⁰ This may explain why male victims are significantly more likely to report dissatisfaction with police, according to the 2014 Canadian General Social Survey.¹¹

Many hospitals in Canada have a policy in place to ask women if their visit to the Emergency Room was due to domestic violence, but few ask such questions of men. It is therefore likely that police and emergency room data seriously underreport the extent of male victimization. "Police and emergency room data capture only instances of abuse which are consistent with institutional policies around domestic violence." In the following analysis, we explore a variety of population surveys pointing to gender symmetry in domestic violence. The largest study on domestic violence ever completed, known as *The Partner Abuse State of Knowledge Project* (PASK), summarized 1,700 peer-reviewed studies, concluding:

"The most comprehensive review of the scholarly domestic violence research literature ever conducted concludes, among other things, that women perpetrate physical and emotional abuse, and engage in control behaviors, at comparable rates to men."¹²

Domestic violence researcher Martin Fiebert of the Department of Psychology at California State University, assembled an annotated bibliography of 343 scholarly investigations with an aggregate sample size of over 440,850 people. His conclusion was that "*women are as physically aggressive as men (or more) in their relationships with their spouses or opposite-sex partners.*"¹³

Murray Strauss is a leader and pioneer in the field of family violence research. In an article reflecting on the research in family violence he concludes "*over 200 studies have found about the same percentage of women as men physically assault partners, and that the risk factors and motivations are mostly the same as for men.*"¹⁴ The following tables are copied from this article.

		Perpe	etrator	
Study	Severity of Assault	Male	Female	
1975 National Family Violence Survey (Straus et al., 1980)	Minor	11.6%	12.1%	
	Severe	3.8%	4.6%	
1985 National Family Violence Survey (Gelles & Straus, 1990)	Minor	11.3%	12.1%	Q13
	Severe	3.0%	4.4%	
Canadian National Survey (Lupri, 1990)	Minor	17.8%	23.3%	Q14
	Severe	10.1%	12.9%	
Canadian General Social Survey (1999)	Overall Rate	7.0%	8.0%	Q15
British Crime Survey (1996)	Overall Rate	4.2%	4.1%	Q16
National Co-Morbidity Study (Kessler, 2001)	Minor	17.4%	17.7%	
	Severe	6.5%	6.2%	
National Alcohol & Family Violence Survey (Straus, 1995)	Overall Rate	9.1%	9.5%	
	Severe	1.9%	4.5%	
Dunedin Heath & Development Study (US Dept of Justice, 1999)	Overall Rate	27.0%	34.0%	Q17
National Violence Against Women Survey (Tjaden & Thoennes, 2000)	Overall Rate	1.3%	0.9%	
Youth Risk Behavior Survey (CDC, 2006)	Overall Rate	8.8%	8.9%	Q18
National Youth Survey (Wofford-Mihalic, Elliott & Menardm 1994)	Overall Rate	20.2%	34.1%	
	Severe	5.7%	3.8%	
National Longitudinal Study of Adolescent Health (Whitaker et al., 2007)	Overall Rate	8.8%	8.9%	

TABLE 1 Twelve Examples of More Than 200 Studies Showin	ng Gender Symmetry in Partner Violence
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Strauss also reached conclusions relevant to the question of the type of violence suffered:

"The percentage of women who physically assaulted a male partner is as high or higher than the percentage of men who physically assaulted a female partner, and that this applies to severe violence such as kicking, choking, and attacks with objects and weapons, as well as to minor violence. Although not shown in Table 1, women initiate PV [Partner Violence] at the same or higher rates as men, and they are the sole perpetrator at the same or higher rates (Capaldi, Shortt, & Crosby, 2003; Kessler, Molnar, Feurer, & Appelbaum, 2001; Straus, 2005; Straus & Ramirez, 2007).

In 2004, *The National Clearinghouse on Family Violence* of the Government of Canada published a document entitled "Intimate Partner Abuse Against Men."¹⁵ This document served to synthesize the government's findings to date on men and domestic violence. The document acknowledged that men have always been a significant victim group within the domestic violence population. It referred to earlier studies conducted in 1987 which found that 23.3% of surveyed women acknowledged they had physically abused their intimate partners at least once in the previous year.^{16 17} The document went on to further characterize the violence, stating *"like all previous studies of intimate partner abuse, the GSS findings indicate that abuse was not an isolated event: 54% of these male victims had experienced spousal violence more than once in the preceding period. In fact, 13% of them had experienced it more than ten times."*¹⁸

From the time that Statistics Canada first started collecting data on family violence with the 1999 General Social Survey (GSS), the similar rates of male and female victimization were immediately apparent, with 7% of men and 8% of women reporting victimization.¹⁹

According to the 2014 General Social Survey on Family Violence, the most recent Statistics Canada survey on domestic abuse, a nearly equal proportion of men and women reported having experienced spousal violence within the preceding five years, specifically 342,000 women and 418,000 men.²⁰ The emergence of *Partner Assault Response* intervention programs designed for females who perpetrate domestic violence is another indicator that female perpetration – and by extension male victimization — is a real problem.

Male Victims of Severe Violence

A common belief that can undermine the case to support male victims is based on the erroneous view that if men suffer domestic abuse it is not at severe levels. However, a large body of evidence shows that male and female victims of IPV report having sustained similar levels of severe violence. The 2014 Canadian General Social Survey data indicate that 22% of male victims and 19% of female victims of IPV were found to have experienced severe physical violence along with controlling behaviours.²¹ Women were twice as likely as men to experience being sexually assaulted, beaten, choked or threatened with a gun or a knife, while men were more than three and one-half times more likely than women to be the victim of kicking, biting, hitting or being hit with an object.

Gender Differences in the Effects of Domestic Violence

A meta-analytic review concluded that of those injured by a partner, 38% were men and 62% were women.²² A very similar finding was found in the 2014 GSS, where 40% of female victims and 24% of male victims reported physical injuries.²³ Even though men and women commit severe violence at similar rates, women are more likely to suffer injury as a result of the different average strengths of men and women:

According to Straus & Gelles (1990: 98, 104, 120, 163), the difference in consequences reported by men and women can in large part be explained by the greater average size, height, weight and strength of men, thereby increasing the risk of injury among women.²⁴

At the most severe end, domestic homicide, data shows that three quarters of victims are women and one quarter are men.²⁵

Violence against men does result in serious physical consequences. Denise Hines and Emily Douglas studied male victims who contacted victim support agencies, including the US National Domestic Abuse Helpline. Within this sample, 58% had PTSD, 20% had experienced extreme violence (choking, using a knife, burning with scalding water, targeting of their genitals) and 78% were injured, sustaining on average eleven injuries.²⁶ In 95% of instances, the female perpetrators used controlling acts consistent with Intimate Terrorism. Yet many of these men were told by the service provider they spoke with that they were the real perpetrator, an outrageous form of revictimization.

The psychological consequences are even more similar between men and women.²⁷ The 2014 GSS found that most of the long-term effects of traumatic IPV associated with PTSD-related symptoms did not differ significantly between men and women. Other studies have reached similar findings, and the following offers a representative example of the overall conclusion from the literature on partner abuse:

*It is true that physical violence perpetrated by women is less likely to result in physical injury (Straus, 2004), and women suffer higher rates of serious injury (Cowell & Burgess, 1996; Department of Justice, 2011); however, the physical, psychological, and financial injuries resulting from women's perpetration of physical IPV are neither infrequent nor inconsequential (e.g., Coker et al., 2002; LaRoche, 2008; Reid et al., 2008; Rennison, 2003).*²⁸

Conclusion

Research supports a gender-inclusive and gender-specific approach to intervention programs. It is beyond dispute that domestic abuse is a serious issue for women and that comprehensive intervention programs must continue to expand to guarantee women live lives free of violence. At the same time, men also suffer severe abuse with serious consequences for them and their children. It is appropriate that resources be mobilized on addressing the gap in services for men.

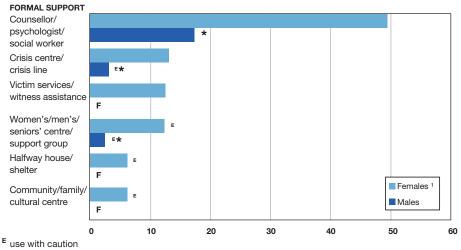
Findings should be used to support the development and implementation of interventions that acknowledge the use of violence by women in intimate relationships but also recognize how participants' treatment needs may differ. Intervention strategies that are both gender-inclusive and gender-sensitive may have the greatest potential for reducing IPV and improving clinical outcomes (Dixon & Graham-Kevan, 2011; Hamberger, 2005; Larance, 2006; Straus, 2011).²⁹

ACCESS TO CRITICAL SERVICES

The 2014 General Social Survey report concluded that despite high levels of victimization, male victims continue to be significantly less likely to have access to essential support services like counselling, crisis centres, victim services or domestic abuse shelters. This leads to severe implications for these men, their children and our communities.

The table below is reproduced from Family Violence in Canada: A Statistical Profile (2014).³⁰

Formal supports used by victims of self-reported spousal violence, by sex, 2014.



F too unreliable to be published

* significantly different from reference category (p < 0.05)

NOTE: Includes legally married, common-law, same-sex, separated and divorced spouses who reported having experienced violence within the 5-year period preceding the survey. Totals do not add to 100% due to multiple responses. Data for the territories will be published at a later date.

SOURCE: Statistics Canada, General Social Survey, 2014

Research by Dr. Emily Douglas and Dr. Denise Hines into the help-seeking behaviours of men supports the case for a shelter for male victims of family violence. According to their findings, male victims do engage in help-seeking behaviours. In fact, 43.7% of male victims contacted an explicit domestic violence agency, 23.4% contacted a hotline and 66.2% reached out to a mental health professional.³¹ The disappointing findings, however, have to do with the inadequacy of what these men found:

A large proportion of those who sought help from DV agencies (49.9%), DV hotlines (63.9%), or online resources (42.9%) were told, "We only help women." Of the 132 men who sought help from a DV agency, 44.1% (n=86) said that this resource was not at all helpful; further, 95.3% of those men (n=81) said that they were given the impression that the agency was biased against men. Some of the men were accused of being the batterer in the relationship: This happened to men seeking help from DV agencies (40.2%), DV hotlines (32.2%) and online resources (18.9%).

"The same 2014 **General Social Survey report** concluded that despite high levels of victimization, male victims continue to be significantly less likely to have access to essential support services like counselling, crisis centres, victim services or domestic abuse shelters. This leads to severe implications for these men, their children and our communities."

^{1.} Reference category.

The conclusion of their research is remarkable: "results indicate that men who seek help for IPV victimization have the most positive experiences in seeking help from family/friends, and mental health and medical providers. They have the least positive experiences with members of the DV service system."³²

In other words, "The resources providing the least support to men seeking help for IPV victimization are those that are at the core of the DV service system: DV agencies, DV hotlines and the police."

Research by Venus Tsui reached similar conclusions. In her paper *Reframing the Help-Seeking Experience of Male Survivors in Intimate Partner Abuse*,³³ she found that men rated informal helpers, like friends and family, significantly more useful than formal helpers from within the social service system. She found that men experienced a number of obstacles trying to connect with formal help:

Abused men do not feel comfortable requesting services because men are often portrayed as perpetrators in domestic violence and perceive seeking/accepting help as vulnerable and weak. It is imperative that service providers/practitioners understand their perception, cultural norms and preference for anonymity in service provisions. Re-framing help-seeking in a culturally sensitive way is highly recommended.

We share these findings not to lay blame, but rather to better understand the problem our proposal is seeking to address. The conclusion, that men will seek help but that help is often not available or not receptive to men as victims, makes a strong case for a domestic violence shelter dedicated to the needs of men and their families. The result would be an improvement in the health and well-being of men and their children, because, as Douglas and Hines found, positive help-seeking experiences are associated with better mental health outcomes, whereas negative help-seeking experiences are associated with poorer mental health outcomes. In fact, they found that *"for each additional positive helpseeking experience, men were about 40% less likely to abuse alcohol in the previous year. For each additional negative help seeking experience men were 1.37 times more likely to meet clinical cutoff of <i>PTSD."* ³⁴

While most of the research cited above was conducted in the United States, there is no reason to believe that the situation is different for male victims in Canada. In terms of Canadian research, the Government of Canada document "Shelters for abused women in Canada, 2014" found that in 2013/2014 there were 627 shelters that offered services to abused women and only 6% of these venues allowed the admission of adult men.³⁵ Note that this amounts to only 36 shelters across Canada, and includes emergency shelters which offer only short term stays (1 to 3 days) and others which mix both abused and non-abused individuals. In addition, some of the domestic abuse shelters which claim to be open to men have in practice been suspicious when men seek their services, further reducing the use of these facilities by men. This trend does appear to be changing as, happily, a growing number of women's shelters have begun opening their doors to men and their children, in acknowledgement of male victimization.

"The conclusion, that men will seek help but that help is often not available or not receptive to men as victims, makes a strong case for a domestic violence shelter dedicated to the needs of men and their families."

The very lack of shelter for abused men compounds the problem of lack of data for researchers in the area of male victimization.

The current situation for research on male victims of severe IPV can be likened to the situation for female victims of severe IPV prior to the shelter movement: we knew they existed, but we knew little about them because there were few places where we could study them. Similarly, researchers interested in the plight of male victims of severe IPV have been unable to study them because there has been no one place where abused men gather.³⁶

Canadian authority on family violence Dr. Don Dutton, University of British Columbia psychologist and Canadian authority on family violence agrees, stating

"One of the problems with the constant sampling of women from shelters was the lack of a comparable shelter group of male victims (which Dragiewicz & Lindgren, 2009 argued against)... The gender paradigm never acknowledges the existence of male victims, in part, because shelters for men (and hence, samples of male victims) have never existed."³⁷

Will Men and their Families Actually Use a Shelter?

The question is often raised at the early stages of establishing male specific shelters as to whether men will actually use them. Yet key elements of this proposal have precedent in Canada and the US. The Manitoba Men's Resource Centre in Winnipeg provides residential space for men and their children who are fleeing domestic abuse. In the last 12 months, they were regularly at capacity, registering 830 bednights of use. In Montreal, the Maison Oxygène offers shelter and support services for fathers and children in crisis. The Taylor House in Batesville, Arkansas (population 40,000), operates an abused men's shelter with nine beds. They have been at capacity for the last six months. The scale of the shelter we are proposing would be similar to these facilities, but operating in a much more populous location with a far more numerous potential clientele. We also know that 25% of calls to shelter helplines in the United States are from men.

Although we do not operate a shelter or market ourselves as a shelter, we already receive about a dozen calls a week from Toronto men looking for shelter as domestic abuse victims, and another fifteen calls a week from men outside the GTA.

A shelter specifically dedicated to male victims of domestic abuse is vital, according to research commissioned by the Canadian Centre for Men and Families and funded by Homelessness Partnering Strategy, an agency of the Government of Canada. This research project studied the extent to which male domestic abuse victimization results in men becoming homeless. It was found that male victims of domestic abuse are twice as likely to report a willingness to access a domestic abuse shelter when it is explicitly dedicated to men as opposed to a generic shelter or a women's shelter that was open to men. The research also discovered that abused men rarely receive the supportive services they desperately need from a homeless shelter that serves the general homeless population.

HOW A SHELTER FOR MEN & CHILDREN BENEFITS WOMEN AND THE COMMUNITY

We are seeking to open a shelter for abused men and their children. In no way is this project seeking to undermine services and support for women and their children. Violence Against Women shelters perform a critical service in the community. We are partnering with VAW shelters in order to expand the services which are available to all families fleeing abuse and violence. This collaborative approach will be maintained through our Advisory Board, which includes representatives of women's shelters, victim service centres, police agencies and key people from the anti-abuse community.

Violence Against Women advocates and service providers have been instrumental in achieving a profound and positive transformation of attitudes and public policy. Domestic violence was once ignored as a private matter to be left behind closed doors. Now we treat it as a serious problem of great public concern. With changing public perceptions have come reforms in police and court practices that have moved from ignoring or minimizing family violence to intervening to support victims and hold perpetrators accountable. This is the result of a tremendous effort largely undertaken by Violence Against Women advocates, academics and professionals. We applaud these efforts and we are inspired by this history.

Our work is part of this ongoing evolution and is aimed at making domestic violence services even more inclusive. This does not only mean inclusive of men and children, but also of other victims who break the stereotype, including victims of violence in same sex relationships.

For example, research shows that we are not doing enough to support gay and lesbian victims:³⁸

Some lesbian women victims also find shelter and police services to be lacking, and their experiences with DV agencies, as of 10 years ago, range from lack of outreach to outright exclusion (Donnelly et al. 1999). In one study of battered lesbian women, 15 of the 19 women who had called the police found them not at all helpful or just a little helpful (Renzetti 1989). Our results also parallel those of a study of gay men seeking help for IPV victimization from a range of sources: friends, relatives, clergy, mental health and medical providers, DV service system, and the police (McClennen et al. 2002).

Senior age victims, both men and women, are also particularly vulnerable to falling through the cracks.

"Violence Against Women advocates and service providers have been instrumental in achieving a profound and positive transformation of attitudes and public policy."

Bilaternal Partner Violence

Our inability to imagine domestic violence as anything other than that of a male perpetrator and a female victim actually keeps women at risk. That is because the most common form of domestic violence is bilateral violence perpetrated by mutually violent couples, and this is precisely the scenario in which women are most likely to be injured.³⁹ According to a study by the US Centers for Disease Control and Prevention, mutual violence can escalate over time and results in a higher likelihood of greater injury compared to situations of unilateral violence.⁴⁰

Reciprocal intimate partner violence was associated with greater injury than was nonreciprocal intimate partner violence regardless of the gender of the perpetrator. Prevention approaches that address the escalation of partner violence may be needed to address reciprocal violence.⁴⁰

Research on couples seeking therapy also revealed that bilateral aggression leads to a higher amount of physical violence and injury than unilateral violence.⁴¹ These are overwhelmingly not situations in which one partner is always the aggressor and the other partner acting only in self-defence. Men and women are found to initiate violence at about the same rate in cases of mutually violent couples.⁴²

When we are sensitive to the victimization of both men and women, we may find more opportunities to block the escalation of mutual violence and we may therefore reduce the chance that a woman will be injured.

Denis Laroche, in a study published by the Institut de la statistique du Québec (Statistics Quebec), reached the same conclusion about the vulnerability of women as a result of our failure to support male victims:

> The fact that men are less likely to confide in a family member or friend, to report the situation to the police or seek assistance from a support organization, in the few instances in which such help is available, constitute an additional factor of vulnerability and, if the violence is recurring, increase the risk of their resorting to physical violence as well (Langhinrichsen-Rohling, 2005: 115; Ehrensaft et al.; 2004: 267; Kwong et al., 1999: 157; Straus & Gelles, 1990: 501).⁴³

Gender-based violence researcher Pamela C. Alexander of the Wellesley Centers for Women, in her 2015 book *Intergenerational Cycles of Trauma and Violence*, argues that:

"the inattention to women's violence, either in mutually violent relationships or unidirectionally violent relationships, keeps women vulnerable in the current relationship (as they fail to seek help and minimize their partner's behavior in part because of their own violence) and keeps them at risk for finding themselves again and again in new abusive relationships."⁴⁴ "When we are sensitive to the victimization of both men and women, we may find more opportunities to block the escalation of mutual violence and we may therefore reduce the chance that a woman will be injured."

Intergenerational Family Violence

Family violence can be cruelly transmitted between generations. Regardless of gender, individuals who suffer family violence as children are more likely to perpetrate domestic violence as adults ^{45 46} and more likely to suffer revictimization by becoming a victim of domestic violence in adult relationships.^{47 48}

The severe long-term effects on children of growing up exposed to family violence include antisocial behaviour, substance abuse, and bullying,⁴⁹ along with *"behavioural effects such as aggression and delinquency, and psychological effects such as anxiety, depression and low self-esteem."*⁵⁰ According to research by the Canadian Centre for Justice Statistics:⁵¹

> History of family violence in the childhood home was notable among those who reported being the victim of spousal violence as adults. Over one in five (21%) spousal violence victims reported having witnessed abuse committed by a parent, step-parent or guardian as a child. This proportion is significantly higher than the 11% of respondents in spousal relationships free of violence who had witnessed violence as children.

According to the 2014 GSS, 51% of both male and female victims of spousal abuse reported that children had heard or seen the abuse committed against them.⁵² This is why our proposal is for a family shelter for both individual men as well as fathers and children experiencing family violence.

With some domestic violence being intergenerational, family violence may take the form of a female perpetrator with a male victim in one generation followed by a male perpetrator and a female victim in the next.⁵³

Intervention programs that break the cycle of violence, either within a relationship or between the generations, by supporting victims regardless of gender, offer the best chance of improving the health of children, families and communities. "Intervention programs that break the cycle of violence, either within a relationship or between the generations, by supporting victims regardless of gender, offer the best chance of improving the health of children, families and communities."

ABOUT THE CANADIAN CENTRE FOR MEN AND FAMILIES

Leadership Around Male Victimization

Our agency runs Toronto's first support program for male survivors of family violence. We developed a package of services: a support group, individual trauma counselling, legal aid, referral to shelters, and access to goods and products for families fleeing abuse. This unique program is now the model for similar programs being developed at our Centres in Ottawa, St. Thomas (Ontario) and Calgary.

In September 2018, we received a federal government research grant from Homelessness Partnering Strategy, an agency of the federal government, to lead a research project entitled "Studying Male Homelessness as a Consequence of Domestic Violence." This is the first Canadian study to explore policies to assist men rendered homeless because of domestic abuse. The Report will be published in the spring of 2019 and will include recommendations on establishing a successful shelter for abused men and children.

Recognized Authority for Agency Referrals and Partnerships

Our agency routinely supports clients who have been referred to us by Toronto agencies, including:

- Victim Witness Assistance Program
- Victim Services offices across the GTA
- Police Services across the GTA
- Homeless shelters across the GTA
- Toronto Western Hospital
- Catholic Family Services and various other family service agencies in the GTA
- Canadian Mental Health Association offices
- Refugee and resettlement agencies
- Youth Services agencies
- Family Health teams
- Safe Centre of Peel
- Sound Times Support Services
- Rehabilitation Services
- John Howard Society
- Women's College Hospital
- Centre for Addiction and Mental Health
- Krasman Centre
- Centre for Spanish Speaking people
- Toronto Bail Program

In recognition of our experience in support of male victims of domestic abuse, our agency is regularly invited to present workshops or training sessions by other agencies which are looking to improve their services in this area, such as:

- Toronto Police Domestic Violence Advisory Committee (Presentation)
- Legal Aid Ontario (part of LAO's Long Term Strategy for Domestic Violence)
- Seneca College Social Services (Class Presentation)
- Salvation Army Maxwell Meighen (Presentation to staff and clients)
- Christie Ossington Neighborhood Centre (Presentation to staff and clients)
- Riverdale Family Mediation (Workshop)
- Ontario Network of Sexual Assault/Domestic Violence Treatment Centres (Workshop)
- Canadian Mental Health Association Oxford County (Training session)

- Ontario 211 (Workshop)
- Toronto Distress Centre (Conference Presentation)
- St. Michael's Hospital (Advised on an app to screen victims of domestic violence)
- Family Dispute Resolution Institute of Ontario (Consultation on IPV policy)

Access to Legal Support

Our agency is the first charity accredited by Legal Aid Ontario to provide legal aid certificates specifically to male domestic violence victims. Legal Aid Ontario is funded by the Government of Ontario to support access to legal services for low income individuals. Through our association with Mediate393 and Mediate47 our program and service information is now available at the Family Law Information Centres at two Ontario courthouses.

Affordable Housing

The City of Toronto's subsidized housing agency has registered our organization as a "Verifier of Abuse." We are the first men's facility to participate in their Special Priority Housing Category for victims of spousal abuse.

Psychiatric Services

We have partnered with the Fathers Mental Health Network and can provide fathers with access to free psychiatric services at Mount Sinai Hospital and St. Joseph Hospital.

Partnerships with Toronto and Area Shelters

Some male survivors of family violence will end up in Toronto's homeless shelters. We are connected to shelters throughout the Greater Toronto Area. Since we opened in the fall of 2014, we have referred over 150 men to the following shelters: Seaton House, Christie Ossington Neighborhood Centre, Fort York Shelter, Family Residence, Good Shepherd, Salvation Army, Fred Victor and Cornerstone Community Association.

Access to Important Products for Men and Families

Our partnership with the Canadian Centre for Abuse Awareness (CCAA) is critical. The CCAA has received corporate sponsorship in the form of men's clothing. We provide clients with winter and formal wear, children's clothing, briefcases and handbags, toys, hygiene products and bedding.

Healing Journeys Conference

Our agency is now the primary organizer of the first annual conference to focus on the intersection of men, trauma and mental health. Our partners are the Canadian Centre for Abuse Awareness, the Gatehouse and Male Survivor. Our keynote speakers have included Simona Jellinek, a lawyer who works with victims of violent crime, Tracey Clarke who heads the Victim Witness Assistance program for Ontario, Yvonne Bergmans who leads the Suicide Studies unit at St. Michael's Hospital, Michelle Squires, Legal Aid Ontario Policy Counsel and head of the Long Term Strategy for Domestic Violence, and Gary Sangha, Detective with the Special Victims Unit of York Regional Police.

National Media Coverage of our Programs and Services

Media regularly consult with us on a number of issues where we have established ourselves as a leading resource. Media contacts have come to us from most major Canadian publications as well as many international press outlets. The following are selected highlights.

The Sun newspapers ran a national story featuring our domestic violence services, which appeared in all Sun newspapers across Canada: *Men Also Suffer from Domestic Violence* http://www.torontosun.com/2016/06/23/men also-suffer-from-domestic-abuse

CBC's "The National" has covered our agency and its clientele, including coverage of one of our support group meetings and an interview with our Executive Director. *Why some men are not adapting to the changing job market* https://www.youtube.com/watch?v=4gijdEl6PKI

Douglas Todd: Why no shelters for male victims of partner violence? Vancouver Sun: http://tinyurl.com/y6eolejf

Des Hommes Brisés La Presse: http://tinyurl.com/y5hlnbme

Abused men's shelter challenges myths, stereotypes Advocates Daily: http://tinyurl.com/y57kqdvb

Internationally, our work has been featured in *The New York Times, The Associated Press, Psychology Today, The Guardian* and *The Independent*.

Evaluation

Our Board member Dr. Paul Sandor, Professor of Psychiatry at the University of Toronto, has forged a research collaboration between our agency and the University Health Network. The aim of this project is to conduct a scholarly study around men's access to and benefit from social services in the community. We are administering Client Satisfaction and Quality of Life Surveys to our clients and the resulting data will be used both for internal evaluation purposes to improve program delivery as well as in support of policy recommendations to men's service providers in Toronto.

FAMILY SHELTER FOR MEN & CHILDREN | ADVISORY BOARD

Full biographical information available at menandfamilies.org/shelter



Carrie McManus Director of Programs, Sagesse Domestic Violence Prevention Society. Sagesse provides services to victims of abuse in 50 Alberta communities.



Steve Doherty Executive Director, Youth Without Shelter, a Toronto shelter for homeless young people.



Geoff Thompson Director of the Manitoba Men's Resource Centre, the only Canadian shelter for men fleeing intimate partner violence.



Margaret Newall Pioneer in the women's shelter movement, Co-Founder and 10 years Chair, Prairieaction Foundation, and Co-Founder, RESOLVE (Research and Education for Solutions to Violence and Abuse).



Don Wright Founder and 28 years Executive Director of the British Columbia Society for Male Survivors of Sexual Abuse, supporting male victims of sexual and domestic violence.



Lauren Vanspall Community Relations Officer, Toronto Police Services





Alexandra Lysova Assistant Professor of Criminology, Simon Fraser University. Her groundbreaking research on male victims of domestic violence is funded by the SSHRC and the the Carnegie and Fulbright Foundations.



Gary Sangha Detective, Special Victims Unit, York Regional Police.



Sandy Prentice Counsellor at a GTA Violence Against Women Shelter and Caseworker in a shelter and homelessness agency.



Maria Barcelos Executive Director, The Gatehouse, an agency for men and women who have experienced abuse.

Margaret Arnason

Assaulted Women's Helpline and the City of Toronto Trainer and Counsellor for violence against women/ gender based violence.



Don Neufeld Program lead and social worker, Caring Dads parenting group and the Partner Assault Response Program.

Michael Healey

Facilitator, Men's Domestic Abuse Group, Canadian Centre for Men and Families, Program Faciliator, John Howard Society.



Marcus Jackson

Manager, Taylor House, a domestic violence shelter for men and children, in Batesville, Arkansas.

Kaitlyn Anastasiou

Chair, Education Committee, Ontario Network of Sexual Assault/ Domestic Violence Treatment Centres.

Sheri MacDonald

President of the Ontario Network of Victim Service Providers.

FAMILY SHELTER PROPOSED BUDGET

PROPERTY VALUE: \$1,500,000

INITIAL CASH OUTLAY	
Mortgage Down Payment	\$525,000.00
Land Transfer Tax	\$45,000.00
Additional Home Purchase Costs	\$3,500.00
Building Improvement	\$125,000.00
Building Furnishings	\$50,000.00
Total Initial Cash Outlay	\$748,500.00

OPERATING COSTS (ANNUAL)

Building	
Mortgage Payments (\$975,000)	\$59,280.00
Property Taxes	\$11,500.00
Insurance	\$20,000.00
Maintenance	\$10,000.00
Programs and Services	
Emergency services staff	\$80,000.00
Program materials	\$7,500.00
Meals and supplies for residents	\$21,000.00
Administrative	
2 on-site administrators	\$75,000.00
Office supplies	\$4,500.00
Utilities	\$6,000.00
Security	\$20,000.00
Total Annual Operating Expenses	\$314,780.00
	• · • • • • •
Total 3 Year Project Cost	\$1,692,840

3 YEAR FUNDING PLAN

Funds Currently Available	\$300,000.00
Grants from Corporations and Foundations	\$200,000.00
Annual Fundraising Campaigns	\$400,000.00
Ontario Government Funding	\$800,000.00

Total Revenue

ENDNOTES

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⁵ For a full list of our current programs and services, visit http://www.menandfamilies.org/programs_services/

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