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When, Why and How Male Victim-Survivors of Sexual Violence Seek Help: Sexual Violence Practitioner Experiences of Support Provision

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Prior research has indicated significant delays in the help-seeking of male victim-survivors who have experienced sexual violence. Understanding the help-seeking behaviours among this cohort is crucial for empowering victim-survivor voices, developing effective support services and broadening scholarly understandings of help-seeking and crisis responses. Thirty-eight semi-structured interviews were conducted with practitioners working within the sexual violence support sector across regional, rural and urban Australia. Observations revealed a process of help-seeking among male victim-survivors that is most often aligned with: (1) readiness, (2) willingness and (3) commitment. Practitioners believed that recovery and healing can be a non-linear lifelong process, and that the decision to seek help is fraught with complexities and challenges. These challenges emphasize the need for services to offer responsive, person-centred and flexible support options.

KEY WORDS: male victimization, male victim-survivors, sexual violence, help-seeking, barriers to help-seeking, sexual violence support services

INTRODUCTION

The Australian Bureau of Statistics ([ABS] 2023) identified that 5,697 male victim-survivors reported experiences of sexual assault in 2023. Sexual violence against men has increased over the last 10 years, rising from 29.4 men per 100,000 in 2013 to 43.1 in 2023. In 2017, the Royal Commission into Institutional Responses to Child Sexual Abuse (RCIRCSA) also estimated a delay of up to 26.5 years for male victim-survivors to report sexual violence, while for women this was approximately 20.6 years (RCIRCSA 2017). The RCIRCSA (2017) identified that most victim-survivors of sexual violence choose not to report formally to police due to fear of reprisals from the perpetrator, not being taken seriously and feelings of shame associated with their

experiences of violence, among other considerations (see also Javaid 2020; Reeves *et al.* 2025; Scott *et al.* 2025; Weare *et al.* 2024).

Disclosures and reported rates of male sexual victimization do not reflect the true prevalence of this violence. Indeed, some research estimates that rates of sexual violence against men could be up to 5.2 times higher than is reported, while recorded rates of child sexual abuse are believed to account for only 5% of actual instances of sexual victimization in Australia (RCIRCSA 2017). While this study focuses on male victim-survivors, prior research and service data indicate that childhood sexual abuse (CSA) disproportionately affects women, gender-diverse people and other marginalized groups (Satyen *et al.* 2019; 2021). Recent statistical insights from Mathews *et al.* (2023) show that among 2,623 respondents who reported experiences of childhood maltreatment (which includes experiences of sexual assault), 52% identified as gender-diverse, 37.3% as women and 18.8% as men. These figures suggest that while CSA is a common referral pathway to support, the social visibility and service responsiveness to male survivors remain limited, reinforcing the need for gender-sensitive, inclusive approaches.

The effects of sexual violence on victim-survivors—regardless of their gender identity—are often overlapping and can be experienced in the immediate, short- or long-term. These effects include, for example, experiences of hypervigilance, shame and fear, among other emotional, physical, psychological and financial consequences (Iliadis 2020; Weare *et al.* 2024). Moreover, the impacts of sexual violence can influence a victim-survivor's perceived readiness and willingness to seek help (Murphy and Groves 2024; Seidler *et al.* 2016; Taylor *et al.* 2022). This further reflects the social challenge of naming abuse, particularly for those living with the mental and physical embodiment of trauma over long periods of time. Understandings or recognition of these traumatic experiences may therefore come more gradually for victim-survivors, especially when their experiences of love, trust, or family differ from dominant social narratives. These differences generate greater nuances to how readiness, willingness and commitment are understood, highlighting the need to recognize that such concepts are shaped by individual histories, experiences, interpretations and understandings.

To date, much of the literature has documented the barriers and enablers associated with women's help-seeking for sexual violence (see, for example: Satyen *et al.* 2019; 2021). This literature has also considered intersectional factors such as disability (Casebolt and Hardiman 2024; Frawley *et al.* 2022), cultural identity and culturally related needs (Satyen *et al.* 2019; Zark *et al.* 2023), caring responsibilities, and Aboriginal and Torres Strait Islander's experiences with help-seeking (Fiolet *et al.* 2022; Wright *et al.* 2022). Existing Australian research has examined the impacts of sexual violence on children and adolescents in both familial and institutional settings (Hayes and Carpenter 2013; Olejnikova *et al.* 2024; Salter 2018; Salter and Wong 2024). Less documented in the literature are the barriers and enablers encountered by men with a lived experience of sexual violence who wish to seek help for their victimization (Campagna and Zaykowski 2020; Cook *et al.* 2018; Donne *et al.* 2018). The research in this area has mostly been conducted in the United States (Carlisle and Schmitz 2023; Donne *et al.* 2018; Thomas and Kopel 2023) or the United Kingdom (Weare *et al.* 2024), leaving a gap in understandings about help-seeking among male victim-survivors of sexual violence in other countries, including Australia.

Although this study contributes to a field largely shaped by US and UK scholarship, male experiences and disclosures of sexual victimization in Australia are influenced by distinct historical and cultural conditions that impact help-seeking. Trauma rooted in colonization, genocide, ongoing racism and hate crime reflects broader patterns of institutional harm, as well as denied recognition and support (Funston 2013; McDonald 2024). The RCIRCSA (2017) documented extensive abuse across religious and state-run institutions, reinforcing a long-standing fear of formal services and a failure to protect vulnerable children. Addressing male sexual victimization within the Australian context is therefore essential, not only to deepen recognition of these experiences, historical trauma, cultural silence and gendered expectations of stoicism, but also to confront Australia's 'history of resistance' in delaying access to support (McDonald 2024: 5).

This study draws on the perspectives of 38 sexual violence support service providers across regional, rural and urban Australia to explore factors influencing male victim-survivors' engagement with help-seeking. From these insights, three conceptual phases emerged: (1) *readiness* to seek support, often triggered by a life event and/or crisis; (2) *willingness* to engage with services, commonly shaped by service availability and prioritization and (3) *commitment* to the help-seeking process, reflected in how victim-survivors engage and maintain connection with services. While the terminology here speaks to more contentious phrasing, particularly in light of the 'attitude tests' victim-survivors are often subjected to within criminal justice settings, the phases are not intended as evaluative measures. Rather, they signal shifts in victim-survivor perspectives and decisions, whereby a victim-survivor may be ready but not willing, or willing but not yet ready. This seeks to underscore the fluid and non-linear nature of help-seeking and individualized journeys.

Terminology and scope

The focus of this research centres on the experiences and perceptions of sexual violence support service providers rather than male victim-survivors. This decision was made to avoid the potential distress and harm that the research might cause to victim-survivors. While recognizing that this research does not specifically include the voices of victim-survivors, practitioners' perspectives and insights help to shed light on the challenges and barriers male victim-survivors face. Such insights may also be used to improve current service provision and access, with goals of creating more trauma-informed and person-centred practices.

Throughout this study, I refer to 'male' victim-survivors as those who identify as a 'man', regardless of biological sex assigned at birth. Moreover, disclosing victimization and seeking help can be distinguished from reporting formally to the police. It is well-documented that for male victim-survivors of sexual violence, their decision to disclose their experiences and seek help is fraught with challenges (Dolev-Cohen *et al.* 2020; Reeves *et al.* 2025; Taylor *et al.* 2022; Weare *et al.* 2024). Disclosure to an informal network, such as friends and family, does not always lead to an official report or record; instead, it may allow the victim-survivor to access moral and emotional support which can facilitate their recovery and healing (Campbell *et al.* 2015; Zark *et al.* 2023). While disclosures can involve recounting an experience of victimization to an informal network without being tied to any follow-up action, formal reports often involve law enforcement bodies (like the police), health care services or social services producing an official account or record (Zark *et al.* 2023).

LITERATURE REVIEW

Sexual violence perpetration has gendered dimensions and is primarily perpetrated by men against women and children (Flood 2018).[1] It is also important to recognize men's experiences of sexual victimization, and the reality that violence against men is also likely to be perpetrated by other men. This underscores the extent to which sexual violence perpetration stems from male entitlement, privilege and power, with the perpetration intended to exert domination and control over (most often) women and children, as well as men and people with other gender identities (Our Watch 2021).

To address the intersecting and complex barriers that delay or prevent help-seeking, I apply Connell's (1995) concept of hegemonic masculinities and Liang *et al.*'s (2005) theory of help-seeking. The ensuing discussion explores how men's perceptions of readiness, willingness and commitment shape their engagement with support. This study builds upon 40 years of research calling for deeper insight into the gendered dynamics of male help-seeking after sexual violence (Sarrel and Masters 1982; Smith *et al.* 1988), offering a conceptual lens that centres men's lived experiences and the structural conditions shaping their decisions to seek support.

[1] Recent research has increasingly explored female-perpetrated sexual victimization against male-identifying victim-survivors, although less common, demonstrate the extensive impacts of sexual violence perpetration (see Loxton and Groves 2022; Murphy and Groves 2024).

'Real men' and masculinities as a barrier to help-seeking

Hegemonic masculinities refer to the power performed through socially normalized behaviours of male-identifying people in western societies. These behaviours are often dominant, controlling and aggressive (Connell and Messerschmidt 2005) and underpinned by notions of independence and capability (Lynch *et al.* 2018). While critics of hegemonic masculinities frequently suggest that it is a fixed concept of set behaviours consistent across countries, cultures, locations and races, Connell (1995) argues that masculinity remains in a constant 'state of play' (Connell and Messerschmidt 2005; see also McCook 2022; Messerschmidt and Messner 2018). In other words, hegemonic masculinities are continually changing, adapting and shifting, depending on time, place and culture.

Understanding that the cultural, historical and social context shapes the evolution and development of masculinities, Connell's (1995) work emphasizes the constantly shifting, fluid identity of manhood. Specifically, McCook (2022) summarizes how Connell's insights into heterogeneity among men is linked to their inequalities and differences in privilege and power, resulting in this plurality of masculinities. Likewise, Stern *et al.* (2015) consider how many of these hegemonic patterns and masculinities are established and enforced on men by other men, consequently impacting masculine presentations. With regard to help-seeking, Loxton and Groves (2022) maintain that societal understandings of who constitutes 'real men' can actively subordinate men who do not fit within such criteria and discourage or prevent them from seeking help (Javaid 2018; Weare *et al.* 2024). As experienced by other groups, such as women (Satyen *et al.* 2021), children (Campbell *et al.* 2015), those living with a disability (Kirkner *et al.* 2022) and LGBTQIA+ communities (Javaid 2017*b*), the shame, stigma and fear associated with help-seeking serves to de-legitimize men's experiences, as evidenced by the public doubt, dismissal and rejection they face (Andersen 2013; Carlisle and Schmitz 2023; Weare 2021). In this sense, help-seeking by male victims is seen as implying a degree of weakness and vulnerability that contradicts hegemonic notions of masculinity and 'real men' (Davies 2013). For example, the myth that men cannot or should not experience sexual violence often prevents them from disclosing (Andersen 2013; Loxton and Groves 2022; Weare *et al.* 2024).

Gendered binary interpretations of victimization also compound the challenges associated with help-seeking by men and recognition of their experiences, including within LGBTQIA+ communities (Du Mont *et al.* 2013). For example, social stereotypes have hinged on the myth that 'male rape is solely a gay issue' (Javaid 2020: 415), which supports the false perception that other males do not experience sexual violence (Andersen 2013; Turchik 2012). These problematic assumptions do not match up with what is known about male victimization. For example, in a survey of 5,476 LGBTQIA+ Australians, 41% of females, 28% of males and 45% of transgender people reported intimate partner violence (IPV) (Pitts *et al.* 2006). Similarly, a 2008 study by the Australian Research Centre for Health and Sexuality (Leonard *et al.* 2008) found that 42% of lesbian women and 28% of gay men had experienced IPV. For trans men who have experienced sexual violence, they face heightened risks and fears when it comes to seeking help, including genderist or transphobic discrimination (Guadalupe-Diaz and Jasinski, 2017; see also Latham 2017). In this regard, Du Mont *et al.* (2013) identify that specialized LGBTQIA+ services are essential for encouraging trans victim-survivors to seek support for their victimization and needs. The limited or absence of support for LGBTQIA+ people can indeed deter their help-seeking (Du Mont *et al.* 2013; Javaid 2017*a*; Latham 2017; Reeves *et al.* 2025).

A three-stage theory of help-seeking

To address the intersecting and complex barriers that might delay or prevent help-seeking, Liang *et al.* (2005) developed a theory outlining three stages of help-seeking by victim-survivors: defining and recognizing the abuse, deciding to seek help, and selecting a support provider. Although Liang *et al.* (2005) based this theory on female-identifying victim-survivors of IPV, it offers crucial

insight into the similarities and differences of male victim-survivors' help-seeking behaviours. Their theory highlights the importance of a victim-survivor recognizing their experience of violence. The authors note that individual, interpersonal and sociocultural factors all play a key role in determining how a victim-survivor defines the harms they have experienced and in turn whether and how they recognize the harms as violence. In this first, earlier stage of definition and recognition, a victim-survivor is likely to take a comparative approach that seeks to dismiss or minimize the harm, whereas someone in the later stages of help-seeking may have informally disclosed and is well resourced to take the next step. These aspects which Liang *et al.* (2005) address add weight to this exploration into male help-seeking behaviours. Dierenfeldt and Balemba (2021) and Loxton and Groves (2022) reference how men struggle to align their experiences of victimization with 'accepted' definitions of masculinity; that is, of masculinity as characterized by dominant, controlling and emotionless responses. This realization of the divergence between their feelings and experiences and masculine norms can delay their recognition of their own experience and therefore reduce their willingness to seek help (Depraetere *et al.* 2020; Dierenfeldt and Balemba 2021).

The second stage in Liang *et al.*'s (2005) theory involves the decision to seek help. Similar to the first stage, the authors posit that individual, interpersonal and sociocultural factors influence readiness and willingness to seek support. As Seidler *et al.* (2016) explain, in reference to how men may seek help, men who demonstrate a willingness to seek help may be ready to take proactive steps but will only do so when 'their internal resources become depleted and depressive symptoms severe' (111). Moreover, this decision is often impacted by a fear of disbelief from others and shame stemming from patriarchal standards and expectations on men, such as those related to familial responsibilities (Curry 2019; Loxton and Groves 2022). This creates a situation where men's engagement with help-seeking is complex and non-linear, as many male victim-survivors follow a circuitous path through the three stages of the help-seeking process depending on others' response to their disclosure and recognition of their experiences.

The selection of a service provider is the third and final step in Liang *et al.*'s (2005) theory of help-seeking. Shaped by individual, interpersonal and sociocultural factors, this process of choosing support often requires deep consideration, akin to a cost-benefit analysis, whereby victim-survivors must consider the practical outcomes of accessing support. In their example, Liang *et al.* (2005) discuss how women navigate their support options, including whether they choose to turn to friends, family or other trusted people, specialist sexual violence services, or law enforcement agencies such as police. For male victim-survivors, prior research (Dolev-Cohen *et al.* 2020; Latham 2017; Reeves *et al.* 2025; Turell *et al.* 2012; Youngson *et al.* 2021) has identified a similar pattern of decision-making; however, men report a lack of available or specialized services (Latham 2017; Reeves *et al.* 2025; Turell *et al.* 2012). Moreover, the decision to take help-seeking a step further and report to police is not often made by male victim-survivors, particularly LGBTQIA+ men, who have reported low confidence in police officers' understanding of intersectionality and men's experiences of sexual violence more generally (Javaid 2017*a*; 2017*b*, Reeves *et al.* 2025; Scott *et al.* 2025). Many male victim-survivors fear that justice personnel will not recognize and understand their experiences of violence, thus reducing their confidence in reporting. Relatedly, Kay and Jefferies (2010) state that disclosures can be challenging for male victim-survivors because Australian support services often 'do not cater for male victims' (419).

Recognizing that many Australian support services do not adequately cater to male victim-survivors, Huntley *et al.* (2019) and Simmons *et al.* (2016) argue that not only do men need to be at a point of crisis before they seek help, but the emerging *sense* of urgency is precisely what encourages them to disclose or report. These crises are biographically embedded, arising from cumulative stressors such as job loss or relationship breakdowns, rather than masculinity itself being 'in crisis'. Piatkowski *et al.* (2024) highlight how a historical 'one-size-fits-all' approach

reinforces stoic, self-reliant norms, particularly in rural and remote areas, where help-seeking is further discouraged. However, even when men do seek support, Seidler *et al.* (2018) note that early disengagement is common when services fail to offer gender-sensitive, trauma-informed care. This underscores the need for tailored responses that recognize the complex factors impacting readiness, willingness and commitment to seek help.

In light of the foundational research by Liang *et al.* (2005), this study explores how, when and why male victim-survivors of sexual violence navigate access to formal support services in regional, rural and urban Australia. Specifically, it builds on the proposed phases of male victim-survivor's (1) *readiness* to seek support; (2) *willingness* to engage with services and (3) *commitment* to the help-seeking process. Recognizing that Liang *et al.* (2005) centre their findings on women's experiences, this study extends their model to explore help-seeking among male victim-survivors. It acknowledges the diverse forms and contexts of victimization, and the unique challenges faced by men in accessing support. By foregrounding service provider insights, the study aims to indirectly empower victim-survivor needs and experiences, acknowledging that readiness, willingness and commitment to seek help are shaped not only by individual histories and trauma, but also by broader structures of mistrust, colonial legacies and systemic harm.

METHOD

This study is informed by a qualitative research design drawing on semi-structured interviews with 38 sexual violence support service practitioners from 19 different organizations that support male victim-survivors, across regional, rural and urban Australian locations, specifically from within Victoria, New South Wales, Queensland, South Australia, Tasmania and Western Australia. No participants were recruited from the Australian Capital Territory or the Northern Territory because the services from these states that were contacted did not respond to the invitation to participate.

Participants were representative of different levels of seniority and experience, including sexual violence counsellors, advocates, therapeutic specialists, caseworkers, psychologists, CEOs and founders of victim support organizations. Table 1 outlines the number and type of organizations. Participants were working within a variety of organizations at the time of the research, including those offering counselling specifically for boys and men, 24-hour and crisis services, National Redress Scheme (NRS) support and advocacy groups.

Interviews

Participants were asked to reflect on whether, when and how male-identifying victim-survivors pursue help-seeking following their victimization, and what factors are likely to impact their readiness or willingness to seek support. In doing so, participants drew upon their experiences supporting male victim-survivors to shed light on their journey of help-seeking. Examples of the sorts of questions asked during interviews included: (1) From your experience support male victim-survivors, is there a delay between victimization and help-seeking? If so, what influences/causes this delay?; (2) Drawing on your experiences supporting male victim-survivors, is it common for men to both disclose experiences of violence to the victim support sector and formally report to the police? and (3) Why do you feel male victim-survivors of sexual violence might delay or avoid reporting or help-seeking?

Interviews were conducted via Zoom, Microsoft Teams or phone and lasted approximately 60 minutes each. Eligibility for participation was contingent on being 18 years or older and working for an Australian organization supporting male victim-survivors of sexual violence. To maintain participant anonymity, pseudonyms were assigned to all participants. Potential participants were emailed a plain language statement (PLS) and consent form and asked to read the PLS ahead of making an informed decision about whether to participate in the research. The researchers adopted several risk

Table 1. Organization type and number

Organization type	Number
Service for institutional sexual abuse and part of the NRS	2
Sexual violence counselling service	2
Sexual assault rights and advocacy service	2
Family violence and sexual assault therapeutic treatment service	3
Counselling and support service for men and boys who have been sexually abused	1
Community men's group for conflict resolution and prison-to-community transition	1
Counselling and advocacy service for victim-survivors of sexual assault	1
Service for victim-survivors, families and communities and relationship services	2
Counselling and support service for male victim-survivors of child sexual abuse	1
24-hour emergency service for victim-survivors of sexual assault	1
Service for victim-survivors of sexual violence and part of the NRS	1
Victim-survivors/witnesses' navigation of criminal justice system: part of NRS	1
Support and advocacy service for people who grew up in orphanages and homes	1
Total	19

mitigation strategies to protect participants from any undue stress. These included participants not being asked to discuss their personal experiences of sexual violence and having access to the questions beforehand to prepare for the interview. Before starting, the interviewer and participant also established safe communication protocols to identify signs of discomfort, such as how the participant could indicate their unwillingness to answer a question or that they felt uncomfortable. At the end of the interview, participants were provided with the contact details of support services where they might access professional debriefing, including services outside their own organization.

Data analysis

The data analysis followed Braun and Clarke's (2022) reflexive thematic analysis, which uses researcher interpretation and subjective analysis of qualitative interview data. A reflexive thematic analysis was well suited for this research, as it considers the researchers' interpretation in the coding and analysis stages (Braun and Clarke 2022). This approach honoured the rich, complex and real-world data obtained from the one-on-one interviews with sexual violence support service practitioners (Braun and Clarke 2022).

Manual transcription of the interviews acted as an early point of engagement with the data, allowing us to consider tone and context, and to make note of important narratives emerging from the data. The analysis then proceeded to a more deductive approach to code and theme development, drawing on existing theoretical frameworks to guide and support the coding process, rather than trying to apply a set structure. Inductive reasoning also helped us to identify connections between the themes derived from the interviews and themes established in the pre-existing literature.

Latent coding was applied during the six phases of the analysis to establish significant patterns in the data, going beyond surface data or frequency of data alone (Braun and Clarke 2022). The key themes identified related to: (1) victim-survivors' readiness to seek support, which was often influenced by a triggering life event that resulted in crisis; (2) victim-survivors' willingness to seek help, which was often impacted by service availability and prioritization and (3) victim-survivors' commitment to the process of help-seeking, specifically how they engage and maintain their connection with services. In this regard, service providers highlighted the importance of service engagement as a continuous, lifelong journey for male victim-survivors.

RESULTS

Readiness of male victim-survivors to seek help

Practitioners highlighted a range of factors related to men's readiness to seek help in relation to their experience of sexual violence. Notably, the key factors raised included particular life events that triggered and/or retraumatized the victim-survivor which led to 'some kind of crisis or a breakdown' (Bernard, Victorian counsellor and advocate). Practitioners frequently used phrases like 'rock bottom' (Anna, Victorian recovery service CEO) or described victim-survivors as being 'at the end of [their] rope' (Lela, Victorian caseworker) when detailing men's motivations and readiness for help-seeking. Manny (Queensland support specialist and researcher) identified one such example:

> They [victim-survivors] might [see discussions of sexual violence on] social media, they might see the Royal Commission [into Institutional Responses to Child Sexual Abuse], somebody might ask them a question at a drug and alcohol place, they might have been talking with their GP, they might have been arrested … They might have then gone to prison. Police might have knocked on their door to encourage them to come forward, they might be starting a relationship, they might be ending a relationship, they might have a child being born, they might have a child who was their age [or] turning the age they were when they were abused … They might see the perpetrator, might hear the perpetrator's dead, they might be going to the funeral of a parent who [dismissed their disclosure] … there might be [a] performance appraisal [at work] … They might go to have a vasectomy, have a colonoscopy, or a prostate check, they might go to the dentist, they might have [an] operation. They might move into residential care, [there may be] relationship difficulties, couples counselling … suicide attempts … or they might see a friend or hear of somebody else who's hurting and then they come forward. All of those things could influence somebody to come forward. (Manny, Queensland support specialist and researcher)

Participants recognized that regardless of the reasons underpinning the decision to seek help, it is often associated with a negative or impactful life event that feels like a point of crisis. As Kalei, a Victorian counsellor and advocate, explained:

> Often if the symptomology becomes so big, the impacts become so big, and it is then that [men] kind of seek help. It is often not a pre-emptive kind of seeking of help… It usually has to get to the point where somebody is saying, 'If you do not get counselling this relationship is over'. (Kalei, Victorian counsellor and advocate)

Factors commonly cited by practitioners as influencing the decision to seek help included that 'they have lost their job, [or] they have disclosed to someone for the first time' (Kalei, Victorian counsellor and advocate). For other victim-survivors, the reason might be their reliance on coping mechanisms that are no longer effective, at which point 'relationships fall apart, alcohol and drugs [are] not working for them anymore and friendships [are] disappearing' (Bruno, Victorian support service psychologist). Several participants raised the value of relationships as a key factor leading to help-seeking, with Morty (Victorian counselling and redress coordinator) discussing the power of ultimatums in these scenarios:

> A big motivation, for some men was [that] … their relationship with their partner had escalated to a point where the relationship was at risk, and in some cases [there] would even be an ultimatum from a partner to get help or that is the end of the relationship. (Morty, Victorian counselling and redress coordinator)

Often participants also linked the point of crisis to issues with coping mechanisms, where 'a lot of the time the usual mode of kind of coping … does not work anymore' (Shantae, Victorian

counsellor and advocate). Service providers observed that victim-survivors generally use 'unhealthy coping mechanisms, from a normative standard, like drinking or alcohol use' (Morty, Victorian counselling and redress coordinator), which function to delay symptoms or allow the individual to avoid feelings of guilt, shame and pain (Freeland *et al.* 2018). This is particularly impactful in non-urban communities that value 'hyper-masculinity' (Morty, Victorian counselling and redress coordinator). Interviewees noticed that male victim-survivors may struggle to begin their help-seeking journey, as seeking help is closely associated with vulnerability and weakness, particularly in regional communities where male victim-survivors are measured against expectations of physical labour, and emotional stoicism (Connell and Messerschmidt 2005; Pease 2010). Winnifred (Victorian senior counsellor and advocate) observed that male victim-survivors frequently walk a fine line between coping and crisis, as the fear of being seen as 'weak' or 'vulnerable' leads many to delay help-seeking until a point of crisis:

> I feel like a lot of men wait until things are really bad. So, there is either coping or in crisis, like those are the two modes: coping or crisis. (Winnifred, Victorian senior counsellor and advocate)

Regardless of the reasons for seeking help, many practitioners acknowledged that the reasons for seeking help are numerous, complex and far reaching, seemingly innocuous for some, but life-changing for others. However, there remains an undercurrent of pain and stress for many. As Keith noted, many male victim-survivors are found to be 'holding [the experiences of sexual violence] in for 70 years, 60 years, and then 1 day just breaking down at the kitchen table'. Danzal (Queensland men's group founder) elaborated on this experience among victim-survivors, describing the avoidance and delay that may occur:

> When our lives get really hard, when there has been something that has been bothering us for a long time … and we've suppressed them, or dealt with them in some way, or whatever it is, but it is still there. … [For example, a victim-survivor may say,] 'I've been focusing on dealing with those bits in my life; I gotta stop drinking or I have gotta stop the drugs, or I have gotta stop the risky behaviour' … But then there is this other thing that is underneath that [they are] not talking about. (Danzal, Queensland men's group founder)

While the factors discussed above alone do not automatically determine one's readiness, willingness or commitment to seek help, practitioners explained how such circumstances are often the impetus for male victim-survivors to consider seeking help, thus contributing to their readiness for it. This notion of readiness through crisis aligns with prior literature that frames help-seeking as non-linear and dynamic process shaped by the individual. Particularly, Seidler *et al.* (2018) and Piatkowski *et al.* (2024) argue that traditional masculinities, in both urban and non-urban contexts, can inhibit emotional disclosure and delay help-seeking until distress becomes unmanageable.

Willingness of male victim-survivors to seek help

Support providers noted that the immediate availability of support is particularly important for male victim-survivors of sexual violence considering that their readiness to seek help can often be triggered by a crisis occurring. As Shantae (Victorian counsellor and advocate) observed, delays in receiving support can impact the momentum of help-seeking:

> It takes such courage to actually get to the point of coming through the door … only to be told, 'Look, sorry, you are going to wait another six months until you can actually start the work'. By then, a lot of the times when I actually pick up people off the waitlist … they have moved on. (Shantae, Victorian counsellor and advocate)

In relation to this, practitioners spoke of 'windows of opportunity for intervention' (Nikola, Victorian counsellor and advocate). However, because services are 'overwhelmed and under-resourced' (Stanley, South Australian senior case manager/counsellor), these windows can be missed and so access to help for victim-survivors in this situation needs to be prioritized. Evren detailed how without immediate support, male victim-survivors face a greater risk of ceasing their engagement with a support service:

> If we do not get them on that first call or very near soon after, then the likelihood of them not calling back or reaching out, at least for a significant amount of time, is high. (Evren, New South Wales non-profit clinical services manager)

Because of the heightened risks of losing male victim-survivor engagement and contact, participants raised the importance of priority systems based on perceived vulnerability and crisis. As Manuel described:

> We have a bunch of criteria that would prioritise someone to be seen earlier. Generally, if they are younger, if they're … only 20 years old or below, like teenagers. Aboriginal [and Torres Strait Islander identity] is another [factor we would consider and prioritise]. And if there are … pending … court [proceedings] … [support is prioritised for] the emotional support of writing a victim impact statement and all that stuff. (Manuel, Victorian counsellor and advocate)

Although victim support services may work to support and prioritize those whom they deem to be most vulnerable, waitlists can still be applicable and deter others who require support. As noted by Tisha (Victorian therapeutic and community services manager) commented:

> Our waitlist for us is significant, it's the biggest it's ever been for our service, but [in] metro their waitlist is 12 months … we need the fundings to be able to address it … it's a government, not just state government, it's a federal government [issue], we need to take action to address it. Like yes, we've got a global pandemic but there's other pandemics that are happening out there, you know family violence, sexual assault, mental health, they're pandemic that we need to pay more attention to and put a lot more into. (Tisha, Victorian therapeutic and community services manager)

Likewise, willingness to engage with services was also spurred by perceived availability of and accessibility to support, which was significantly limited for those in rural or regional areas. As mentioned by more than half of interviewees, the distance and time it takes to reach a service significantly impacts service access and availability, and in turn victim-survivor attendance. Some practitioners expressed that many victim-survivors are 'looking at four hours minimum [travel time to a service] … and that would be historically terminal [for help-seeking] … especially if they were in school or working' (Tisha, Victorian therapeutic and community services manager).

Participants' accounts demonstrate that men's willingness to seek help is often undermined by structural barriers such as service availability and overload, long waiting periods and geographic isolation. These logistical constraints not only delay initial engagement but can also lead to early attrition. This reflects Liang *et al.*'s (2005) conceptualization of willingness as a distinct phase in the help-seeking process, whereby willingness is not simply a matter of motivation or access, but also whether men believe services can help them.

Male victim-survivors' commitment to and motivation for seeking help

Most participants associated help-seeking with a non-linear lifelong journey; however, many flagged the colloquial mindset of quick-fix therapy and the risks that arise out of viewing therapy as 'done'. It was common for male victim-survivors to approach services seeking 'solution points

and 'construction' (Sabina, Victorian counselling service operations director) with an end goal to 'fix myself' (Vita, Victorian caseworker). However, interviewees highlighted that the journey of seeking support is 'an evolving thing … it is not really something you just do' (Vita, Victorian caseworker). Bernard (Victorian counsellor and advocate) commented, 'if it is not the right time and they do not want to … [forced help-seeking] is almost retraumatis[ing] … [and can] harpoon any future help-seeking'. Manny (Queensland support specialist and researcher) argued that engagement over a lifetime may allow for a more developed and introspective approach to help-seeking:

> Do not set this dynamic up that 'if I talked to a counsellor when I am 12 or 13 about this, then [I am fixed]'. Because we know that as adults, we reflect on our lives at different stages, 30s, 40s, whatever. And we want to make sense of that, we want to sense make that, particularly guys like sense making, around [sexual violence] and what 'this means for me now' … 'What I might do about this information and what it might mean to my life'. (Manny, Queensland support specialist and researcher)

Consequently, service providers spoke of the importance of an as-needed or 'phase-based approach' (Kaydence, South Australian counsellor) to support provision, as victim-survivors' recovery stage can be a key indicator of continued service engagement. Several participants observed that recognition of one's own trauma and harm often coincides with ageing and life stages, as in earlier life stages victim-survivors are focused on 'surviving their childhood' (Kaylani, South Australian social worker and case manager), while 'later in life, it is more about broader ramifications [of the harms experienced]' (Anton, Victorian counsellor and advocate). In relation to this, Vita (Victorian caseworker) discussed how the process of recognizing victimization often occurs at a later stage of life, when a victim-survivor's children have left home or victim-survivors have reached retirement:

> [Victim-survivors who were] abused as children … do not know what it is, they do not have the language to describe what it is … and then getting to their 20s, it is about having fun and enjoying your 20s, maybe having kids, maybe going to uni, whatever. When you are in your 30s, they might be struggling with work/life balance or family balance, you know? It is not really until you get into your later sort of 30s/40s, and 50s, where you sort of go, 'Oh hang on a minute, I have got time now, I am not sort of distracted with all these other life things'. You get a little bit more time to consider and reflect on what has happened in the past. I mean, it has obviously always been there and probably been playing out in all kinds of horrendous ways. That is when people seek help. (Vita, Victorian caseworker)

Other participants suggested that victim-survivors' maturity is more than just age-related growth as it also marks a time when an individual is prepared to participate in a process of healing that is suited to them. As Bernard (Victorian counsellor and advocate) asserted, engaging with help-seeking too early can mean 'the readiness is not usually there'. Readiness to seek support was commonly framed as a 'kind of maturity and settling in some respects. Settling in life … to make sense and recognizing that stuff has happened to them' (Kaylani, South Australian social worker and case manager). Approaching help-seeking as a lifelong process means that even when victim-survivors are 'finished' with receiving support, life experiences or events may lead them to seek out further counselling sessions down the track.

In regional and remote communities, disclosing male sexual victimization can pose significant risks to victim-survivor safety and confidentiality, particularly where such disclosures challenge dominant social narratives and community status quo. Keith (South Australian redress caseworker) observed that low rates of reporting and help-seeking reinforce the fear of 'rocking the

boat' (Winnifred, Victorian senior counsellor and advocate), and the belief that sexual violence 'does not happen here'. These insights reflect how community attitudes and culture can shape not only readiness and willingness, but also a victim-survivor's capacity to commit to ongoing formal support. Prior research similarly highlights that help-seeking is contingent on broader social acceptance and perceived safety (Pease 2010; Piatkowski *et al.* 2024; Seidler *et al.* 2018), reinforcing the need to understand commitment as relational and context-dependent.

DISCUSSION

This study examined the factors contributing to help-seeking behaviours among male victim-survivors of sexual violence. Through semi-structured interviews with 38 sexual violence support service practitioners across rural, regional and urban Australian locations, this study aimed to understand when, why and how men seek help, exploring participants' observations of what might impact help-seeking. According to these practitioners, the process of being ready, willing and committed to seeking help is key to informing the decision-making of male victim-survivors, especially in the context of Australia's historical response and resistance to male victim-survivors (McDonald 2024). Participants spoke about the various barriers and delays associated with male victim-survivors' help-seeking and explained that the process of seeking support is non-linear and, in many cases, a lifelong journey. In providing this insight, the research raises the need for more responsive and trauma-informed pathways to and through help-seeking (McLachlan 2024; Seidler *et al.* 2018).

The interviews with practitioners revealed a clearly recurring pattern among male-identifying victim-survivors of sexual violence, emphasizing the need for a context-dependent approach to the process of formal help-seeking. Akin to the early stages of this process proposed by Liang *et al.* (2005), problem definition and appraisal require the victim-survivor to recognize, acknowledge and identify a certain pattern of behaviour as abusive. Based on the discussions with service providers, the vast majority of male victim-survivors whom the participants supported shared a very similar mentality and approach in relation to recognizing harm and seeking help. Specifically, many male victim-survivors are not ready to seek help until a crisis occurs, which aligns with key research by Turell *et al.* (2012) and Reeves *et al.* (2025). This insight into patterns of help-seeking among men also revealed strong connections with Connell and Messerschmidt's (2005) concept of hegemonic masculinities, as male victim-survivors either consciously or unconsciously downplay their experiences or responses that threaten masculine personas to avoid alienation by or criticism from other men or their community (Berdahl *et al.* 2018; Perales *et al.* 2023). Therefore, greater development is needed in creating person-centred help-seeking pathways, which acknowledges the diversity within and between masculinities (McLachlan 2024; Seidler *et al.* 2018).

According to the practitioners interviewed, once a male victim-survivor has acknowledged their victimization of sexual violence and is ready to seek help, the sense of urgency to act quickly is often overpowering—and they are then willing to engage with help. Participants affirmed that the availability of immediate support is thus vital in this context, regardless of whether male-identifying victim-survivors choose to seek help immediately. In line with Liang *et al.*'s (2005) theory of help-seeking, interview data revealed that men's willingness to seek help shifts considerably over time as they come to terms with understanding the impacts of sexual violence on their life. While Liang *et al.*'s (2005) theory is based on women who no longer blame themselves for the abuse, for male victim-survivors, it is more the recognition that either coping or avoiding is no longer an effective strategy that leads them to seek help. Moreover, a key factor contributing to male victim-survivors' willingness to seek help is their perceptions of the available support, especially for those in non-urban Australian communities. The absence of accessible, specialized, tailored support for male victim-survivors can contribute to a sense of powerlessness and scepticism about the value of support services, reducing their willingness to seek help (Dolev-Cohen *et al.* 2020;

Latham 2017; Reeves *et al.* 2025; Turell *et al.* 2012; Youngson *et al.* 2021). As such, McLachlan (2024) and Seidler *et al.* (2018) advocate for trauma-informed, person-centred models that tailor support to individual lived experiences and personal histories. They emphasize that help-seeking must operate collaboratively to empower choice and voice, while also responding to the layered impacts of trauma, mistrust and systemic harm that shape one's engagement with support.

Participants further observed that among male victim-survivors', their readiness, willingness and commitment to help-seeking was largely a lifelong journey and process. Participants highlighted that the journey of seeking support is 'evolving … it is not really something you just do' (Vita, Victorian caseworker). These expectations around seeking support may help to explain why male victim-survivors often wait until a point of crisis or readiness to seek help. Within Liang *et al.*'s (2005) theory, the process of choosing a service is described as a cost-benefit analysis; and while this is true for men as for women, the sexual violence support service providers in this research frequently observed male victim-survivors' strong desire for quick-fix therapy. The desire for an immediate solution, or even to avoid therapy, is arguably reflective of hegemonic expressions of masculinities (Berdahl *et al.* 2018; Connell and Messerschmidt 2005; Perales *et al.* 2023), which influence expected male behaviour, recovery time and responses to sexual violence. Practitioners' views and accounts in this research raised the nuances of help-seeking among male victim-survivors, whereby narratives on how help-seeking should occur or traditionally has occurred may be impacting perceptions of and engagement with the help-seeking process. Through these understandings, the findings work to empower victim-survivors indirectly by highlighting service providers' insights into the complex conditions that shape help-seeking. Notably, that readiness, willingness and commitment are often shaped by individual histories, trauma, mistrust, colonial and systemic harm. This research offers insights that may serve the development of more responsive, person-centred and trauma-informed pathways. Promoting the creation of safer spaces for victim-survivors to engage with on their own terms.

CONCLUSION

This article explored the help-seeking behaviours of male victim-survivors of sexual violence as reported by practitioners across regional, rural and urban Australian locations. From these insights, three fluid phases are presented: (1) *readiness* to seek support, often triggered by a life event and/or crisis; (2) *willingness* to engage with services, commonly shaped by service availability and prioritization and (3) *commitment* to the help-seeking process, reflected in how victim-survivors engage and maintain connection with services over time. Participants in this study identified that the factors influencing when, why and how male victim-survivors seek help are often context-dependent and that the decision to engage with a service is usually motivated by some sort of crisis occurring in the victim-survivor's life, signalling that they can no longer cope with the impacts of their victimization without support.

A key limitation of this study is that it draws on the views and accounts of sexual violence support service providers rather than those of victim-survivors. However, this was chosen to avoid any potential distress or retraumatization that might arise from interviews with victim-survivors. Despite this limitation, the inclusion of sexual violence support workers provided valuable insights from people who directly support victim-survivors and are witnesses to their help-seeking journeys. Future research in this area would greatly benefit from victim-survivor input. A further limitation of this study is that the findings only reflect the help-seeking behaviour of victim-survivors who have chosen to engage with formal sexual violence support services, therefore limiting the generalizability of the results. This highlights the need for ongoing engagement with how male victim-survivors of sexual violence engage with or avoid help-seeking.

Understanding when, how and why male victim-survivors seek help is crucial to developing effective support systems. Participants emphasized the need for support to be individualized and

non-linear, recognizing that the impacts of violence unfold across both short- and long-term timelines. As McLachlan (2024) and Seidler *et al.* (2018) note, service responses must attend to personal histories and interpretations to create pathways where victim-survivors feel safe, supported and empowered to seek help on their own terms.

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CONFLICT OF INTEREST STATEMENT

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