

Women and Equalities Committee

Oral evidence: [Mental health of men and boys](#), HC 1721

Wednesday 4 September 2019

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Members present: Mrs Maria Miller (Chair); Sarah Champion; Angela Crawley; Philip Davies; Stephanie Peacock.

Questions 197–241

Witnesses

[I:](#) Mark Brooks OBE, Chair, ManKind Initiative and Co-founder, Men and Boys Coalition; Steve Canning, Project Developer, Operation Emotion; Duncan Craig, Chief Executive Officer and Psychotherapist, Survivors Manchester; Ippo Panteloudakis, Head of Services, Respect.

[II:](#) Bob Greig, Director, OnlyDads; Honor Rhodes OBE, Director of Strategic Development, Tavistock Relationships; Sonia Shaljean, Managing Director and Founder, Lads Need Dads; Sarah Tyler, Barrister, Coram Chambers.

Written evidence from witnesses:

- [Lads Need Dads](#)
- [Men and Boys Coalition](#)
- [Operation Emotion](#)

Examination of witnesses

Witnesses: Mark Brooks OBE, Steve Canning, Duncan Craig and Ippo Panteloudakis.

Q197 **Chair:** Can I welcome our witnesses today, and those who will be watching online or in the public gallery? This is our fourth session of our inquiry into mental health of men and boys. Today we are hearing from two panels of witnesses, looking at very important areas. In the first panel we will hear about how sexual violence, abuse and domestic abuse can impact mental health in men and boys and what support is needed. In the second panel we will hear about how relationship breakdown can affect men and how family court processes can affect both men and boys.

I would like to suggest to anyone who is personally affected by the issues raised during the first half of this morning's session that they might like to consider calling SurvivorsUK on 0203 598 3898, or the Men's Advice Line on 0808 801 0327. I will make sure those bits of information are on our web page. For those affected by any issues during the second half of this morning's evidence session, please consider contacting organisations such as Relate, either online or by phone. Its number is 0300 003 0396.

Before we start our questions today, could I perhaps ask our witnesses to say their name and the organisation they represent?

Mark Brooks: My name is Mark Brooks. I am the chair of the ManKind Initiative charity. We provide support to our victims of domestic abuse, and we are delivering a number of Home Office-funded projects, including supporting police forces.

Steve Canning: I am Steve Canning. I work for a local charity called Operation Emotion. We provide support to men who have been sexually abused. We work in general practice, we provide training and we do campaign work. We use a lot of film to help campaign in the work that we do, and we run education courses for men to try to help them overcome trauma.

Duncan Craig: I am Duncan Craig. I am the Chief Executive of Survivors Manchester, an organisation supporting boys and men affected by rape, sexual abuse and sexual violence. I am also the co-founder of the Men & Boys Coalition, along with Mark, and the Male Survivors Partnership, which is an umbrella organisation working with sexual violence organisations, supporting specifically boys and men.

Ippo Panteloudakis: Hello. I am Ippo Panteloudakis. I am Head of Services at Respect. We are a domestic abuse organisation working with domestic abuse perpetrators, male or female, male victims of domestic abuse and young people's violence in close relationships.

Q198 **Sarah Champion:** My questions are really trying to understand the scale



HOUSE OF COMMONS

and the impact of sexual violence and abuse on the mental health of men and boys. I would like to start with Duncan and Steve. Approximately how many boys do you think are victims of sexual violence?

Duncan Craig: International research says that it is one in six of the male population. When we start looking at things like the Crime Survey for England and Wales and some of the MoJ and Home Office data, we begin to start having to separate out types of population as well, such as in terms of age, and types of crime. When we are looking at sexual violence, looking at rape, for instance, we are averaging around 78,000 victims of rape or attempted rape each year, and of that 9,000 are male. It works out, the MoJ said, at just over one in 10, and that is over the age of 16.

When you then begin to look just underneath it, an ONS report from 2017, which I looked at the other day, says 631,000 males.

Q199 **Sarah Champion:** Is the data specific enough that you can say boys, so under 16?

Duncan Craig: I think it is. Mark might be able to correct me here, but I think ONS can split it out. There is a problem when we look at academic research. Looking at women and girls, if a female is sexually abused as a child, if she does not report at the time that something is happening, she takes roughly about seven years to speak out, whereas males are taking in excess of about 25 years to speak out. In the data, then, you get the number of people who were abused at the time but, in terms of the reporting, the CPS and police data all gets a little bit confusing. Unfortunately no one in the UK yet has done a full-scale review of academic and peer research.

Steve Canning: I would add to that that the very simple answer is that we do not know. We can draw on statistics from a number of different sources, some of which are conflicting. Our own organisation works on a basis of one in 10 men and one in six women. That is a complete underestimation, but we choose a conservative comment around those figures because it is absolutely defensible. Most people are utterly shocked when they start to factor that across the population. The true answer is that we do not know.

We have worked with 400 men in the last five years. I would say that probably 95% of those men have never disclosed that to the authorities and would never go to the police. What we are looking at is the tip of the iceberg. What I would say to you as a Committee is that this is an endemic problem within society that needs some serious attention. If it was some epidemiology around disease, the Government would be leaping in to deal with these figures. I really think this is a huge problem that we know so little about. We have to know so much, do we not, in the society that we live in? This is something we know nothing about, and I would warn the Committee to consider this.



HOUSE OF COMMONS

Duncan Craig: I would support that. From your APPG, I know you know we do not know, but we have to find a way of knowing, and we just have to know what we know at the moment. One of the highlights that came out of some of the work that we have done with the MoJ, particularly around when we had the original male rape support fund, is that when the MoJ looked at the data we were talking about 9,000 males affected by rape or attempted rape. When we then looked at the data in terms of reporting to the police, it was about 1,550. One has to ask, "Where are the other people?" Reporting to the police is certainly not the bee's knees and end of for everybody, but there is something about those 7,450. When you begin to pie-chart them and cut them down—some people report to families, some people might go to a third-sector organisation and some people might go to a SAC—at some point there are a group of people, and these are the people that we do not know, who are sat in silence because they do not know that they can speak out.

Q200 **Sarah Champion:** Can you tell us the impact that it has on mental health, particularly around childhood and going into adulthood?

Duncan Craig: I often have to start with my own declarations. As a male victim of sexual violence, as a child abuse survivor and as a qualified psychotherapist myself, I am always really interested in how my experience is the same as or dissimilar to other people's experiences.

One of the things that we look at when we are dealing with boys and men who have been affected by child abuse is things around interpersonal stuff, so trust, relationships and trying to get into issues around control. When you have had the governance of your own body taken away from you, when you have lost the control of what passes this barrier, speaking personally—and I know this is true for many other men—it feels like you spend the rest of your life trying to get back that control and trying to make the past okay. The past is never okay. When you get to a point of realising that the past is never going to be any different, we are dealing with the internalised and externalised anger, and how that anger is actioned—violence. That is an external thing but also an internal thing, in terms of suicidal ideation and self-harm.

Q201 **Sarah Champion:** Steve, Duncan was talking about if the abuse happened in childhood. What happens if the sexual abuse happens in adulthood? Are you seeing different impacts on mental health?

Steve Canning: We are seeing the same thing. The male gender stereotyping really prohibits men from actually feeling that they can be vulnerable. We know that men are just as vulnerable as women in a lot of ways, particularly if it occurs during childhood or when they are teenagers. The worrying thing is, in short, its effect on mental health is it ruins lives. If men are spending an average of 30 years in secrecy with this, they are actually manifesting in all sorts of different ways, whether it would be drugs and alcohol or ending up in prison. We have personal testimony of this, from knowledge of the work that we have done. You get petty criminal activity, drugs and alcohol, and relationship problems.



These are all symptoms of a trauma that occurred in childhood. The four principles that we work with are really around identity issues, isolation, powerlessness and issues around trust and betrayal. They manifest themselves in all sorts of very bizarre ways. The mental health service will then pick that up and give people labels on what they should be doing. It is not saying, "What is wrong with you?" but, "What happened to you?" That is the inquiry that needs to happen.

Duncan Craig: My organisation, including me as part of my organisation, runs a trauma-focused clinic within prison; that is within one particular prison within Greater Manchester at the moment. We have been doing that for about three years now. We have seen about 200 men over the past three years, all of whom score really high on the IES-R—the Impact of Events Scale (Revised)—which is a self-reporting tool that the NHS use to look at PTSD symptoms. We know that about 30% of the male population have been diagnosed with PTSD, but we also know, according to psychiatrists, that PTSD is one of most under-reported mental health conditions. You can have somebody who has spent years trying to forget what happened to them, trying to turn the noise down, absolutely as Steve was saying, with drugs and alcohol. Mental health conditions come with it, such as psychosis. When you have that level of drug and alcohol use, we have to then start looking at a dual diagnosis.

In terms of your question before about the difference between current and non-current, this is only anecdotal but it seems that in people who have current issues—so people who have been raped or assaulted in, let us say, to fit in with date, the past 12 months—there is a much quicker route to self-harming behaviours. That is not just physical self-harming, like cutting, but neglect of need. That seems to be way more acute.

Q202 **Sarah Champion:** Put some more words on "neglect of need". What do you mean?

Duncan Craig: Even something as simple as not looking after personal care. Say something happens: you get a cut on your hand and really it needs seeing to but it is just neglected. It all boils down to self-worth. It boils down to, "I am not worthy. I am not worthy of being okay."

Q203 **Sarah Champion:** Is that tied in with masculinity?

Duncan Craig: It is tied in with gender norms. The reason I say that is because everyone seems to be talking about toxic masculinity at the moment. I have just read some stuff, and I am just not too sure it is the right conversation. The conversation should be about toxic gender norms—not just masculinity but maleness. I also think that toxic gender norms are really toxic for females as well. It is tied in to masculinity but it is more than that. It is the essence of who you are supposed to be in your gender.

Q204 **Sarah Champion:** Ippo, can I bring you in here? Is what Duncan and Steve are saying ringing true in terms of the people you work with?



Ippo Panteloudakis: Yes. We focus on domestic abuse mostly. I would like to make a comment around the underreporting issue, which is massive. We ran some analysis on our database, based on the calls that we put in our database, looking for the numbers of those who reported sexual abuse experiences. There was a massive difference between gay and heterosexual men. Gay men were much more likely to report experiencing sexual abuse and talk a bit more openly about it, whereas with heterosexual men we found that only around 1% reported experiencing it. You notice that I am not saying how many experienced it, but how many reported to our helpline. As standard practice we were not asking, whereas now we are trying to consider how we can introduce that question and bring that subject in, to consider sexual abuse in a more structured way as part of their experience.

Another issue, again, linking up with gay men, is that when there has been sexual abuse and there are other issues, such as drug and alcohol abuse, it tends to become recurring. I am bringing that back to your question about current or past experiences. Once it has started happening, with certain groups, it keeps happening, because that is the way it is—because they feel that is the way a relationship works and that it is okay to have those expressions of your sexuality and your masculinity.

I will agree with Duncan about the toxic masculinity that is perceived by a lot of men as offensive. I think it is offensive. Instead, if we want to identify something that is not healthy for the men and others around them, perhaps another term to introduce would be “harmful aspects of masculinities”, because there is not one masculinity; there are many expressions and manifestations. Some of those are problematic. It is not that we are saying that is wrong to like fast cars, sports or the opposite sex; it is about the unhealthy aspects: anything to do with violence, turning your emotions outwards in a negative way, et cetera.

Q205 **Sarah Champion:** Could I just ask you to speculate about the difference in reporting between gay men and heterosexual men?

Ippo Panteloudakis: I think gay, bisexual and trans men are more aware. Trans men, particularly, experience the highest levels of sexual and domestic abuse. I think they are more aware that there are some services that are targeted at them. There is more of an identification issue and more of a community, whereas with heterosexual men there is the issue of perception of services but also a systemic issue of the services themselves, in terms of how they present, how they want to become inclusive and how they present themselves to be inclusive of men. A generic service is more likely to be perceived as a service for women, in this context, rather than also a service for men. There are some added barriers that need to be addressed for men to get a clear message that, “This service is also for you”, and that it is good and healthy to speak to them.

Q206 **Sarah Champion:** This is a final question from me. I am assuming that



HOUSE OF COMMONS

you are talking about contact sexual abuse. Are you seeing an increase in online exploitation going on?

Duncan Craig: Yes, definitely. Just following on a little bit from what Ippo was sayin, in Survivors Manchester about 80% of the population that come in for service are self-defined as heterosexual; about 20% are self-defined as gay, bisexual or men who have sex with men. It is in the GBT—gay, bi and trans—that we are beginning to see an increase in a phenomenon that seems to be happening around online stuff. Again, this is just anecdotal but it is certainly not something that I have seen within the mainstream population of heterosexual males.

It feels like it is bridging into revenge porn, and it feels like that is something that we have not seen before. All of the media and all of the discussions have been around the way that women have been affected by revenge porn, and it feels like there is just this slowly emerging stuff. I am not saying it is directly linked to this, but I am always really interested that the people who come and talk to us about it are people who are often engaged in chemsex as well. It feels like that would make a bit more sense, because there is an online thing with that, particularly around meeting people, so you already have something on somebody. Then there is an exploitation aspect that goes from online to offline as well, but it is a very emerging thing.

Ippo Panteloudakis: Just to add very quickly to that, we have some of the same reports and experiences reported to us. On top of that, we are getting the sense that this is being or has been normalised, and that it is okay to exchange intimate photos, having no control of how these are going to be used, man to man, not reflecting on the impact on your wellbeing, in terms of what that photo might do to your career prospects, to a future partner or a future relationship, how it will emerge and what implications it will have six months or five years later, and how it can also be used as a tool for abuse and blackmail. We have heard a few stories like that as well.

Q207 **Philip Davies:** Sarah was asking about sexual violence. Can I turn your attention to domestic abuse? How many men experience domestic abuse, and what form does it typically take?

Mark Brooks: In terms of the ONS figures, around 695,000 men suffer domestic abuse every year; it is around one in three of all victims. Around 160,000 go to the police, but only about 5% of the people who actually access domestic abuse services are men. In terms of other figures, in terms of who they tell, about half do not tell anybody if they are a victim at the hands of a partner. Nearly all are suffering from emotional and psychological abuse, with, depending on the research, at least one in 10 thinking about suicide. That is from the ONS figures, but Women's Aid have done some really good research that suggests about 50% of men who are going through domestic abuse have thought about taking their own life.



HOUSE OF COMMONS

Philip Davies: Has anyone got anything that they want to add to that?

Ippo Panteloudakis: I agree with what Mark said about the impact and the official figures. This summer alone the Men's Advice Line had reports of two suicides of men who were experiencing domestic abuse. Even yesterday a mother called to tell us that she was planning the funeral of her son who had been in an abusive relationship for 10 years. They were encouraging him to access help and support. They found services and helplines for him, but he just would not. That is how it ended and it is extremely sad. It was not inevitable; that is the thing.

Duncan Craig: During our assessment process, if we see anybody or hear of any man that has come for services and is involved within a domestic abuse setting, we will always refer them through to Mark or the Men's Advice Line.

The one thing that I will say is that it seems to be beginning to be talked about a little bit more, ever since the BBC Three documentary. It felt like everybody in our service wanted to just about Alex Skeel and *Abused By My Girlfriend*. Again, it feels like, when the media starts to talk about something, it is like permission; it makes it okay. We have just begun to start collecting a little bit of data. We are not necessarily screening for it, but if anybody says it, then we just record it, just to see what the phenomenon is

Q208 **Philip Davies:** Following on from that, what struck me about those figures that you gave, Mark, was that so many men experience domestic abuse but so few report it, and even fewer seek help. Why is that? Why do so few report it and why do so few seek help?

Mark Brooks: There are three key areas, if I may. The first area is around masculinity and the barriers that that can present, in terms of shame, embarrassment and a lack of understanding that they are actually a victim of domestic abuse. There is a real sense of helplessness and it really undermines what it means to be a man, in terms of being strong and resilient, respect and being able to look after others in your family and yourself. It undermines a man's sense of what it means to be a man.

The other areas, which my colleagues have touched upon, are around societal stereotypes and service provision. There is a real empathy gap when it comes to vulnerable men in general, which I know has been covered more widely in this inquiry. For many men they fear that they will not be believed, they do not know who to tell and the services that are out there are not specifically promoting that they are available for men.

While things are getting better within the professional community we still do see barriers from some police officers, some in the domestic abuse sector and some from local authorities, who are not recognising the symptoms and the causes of domestic abuse as they would for female



HOUSE OF COMMONS

victims. That is catching up and there have been huge strides in the last five or 10 years. We used to get a lot of men calling our helplines, saying that they had gone to the police and they had been ridiculed and not taken seriously. Public provision and societal stereotypes around male victims are getting better but are not where they should be. That provides a barrier to men because they do fear they will not be believed, they do fear that there are not services available and they do fear that the reaction from friends, family, work colleagues and services will be to actually further belittle them.

There are also issues around public policy, in terms of making sure that the discourse in the media and the narrative on domestic abuse is far more inclusive. It needs to continue to include an emphasis and focus on female victims, but also it needs to have an equal emphasis and focus on male victims, because that is what an inclusive society would expect.

Q209 Philip Davies: We all know that there are not enough refuges for female victims of domestic violence. What is the provision of refuges for male victims of domestic violence?

Mark Brooks: The last figures that we have collected state that there are 150 spaces for male victims of domestic abuse across the country, and 34 of those spaces are dedicated for men. The other spaces are available for men or women, depending on the level of need and availability of those spaces at their time. There are lots of areas in the UK where there are not enough spaces, especially in London and the south-east. Of course, that is not just about male victims of domestic abuse. People accessing those services are male victims of forced marriage, for example, and of course that includes men in same-sex relationships. We need more support for female victims—more refuges and safe houses—but we need more for men as well, including for their children.

Q210 Philip Davies: How do we achieve that? What needs to be done to bring about the provision that is required?

Mark Brooks: There needs to be more public political pressure, especially from central Government, and also from the police and crime commissioners and local councils, to make sure that they are actually complying with the law. If you have a man with children with exactly the same need and level of risk as a woman in the same situation, they need to have access to emergency housing provision and support. Therefore, I suspect there are many areas in which councils are failing in their public sector equality duty and the Care Act in terms of supporting male victims. Some men are having to travel hundreds of miles to find places. We know it is a situation that many women face, but also it is a situation that men face.

Q211 Philip Davies: Finally, do we have any figures on how many boys are exposed to domestic abuse at home and the impact it has on them?

Ippo Panteloudakis: Although I do not have specific figures, I would say that every boy and every girl living in a home where domestic abuse



HOUSE OF COMMONS

takes place is exposed to domestic abuse. Whether they witness it directly or indirectly, children know and they feel. They understand if there is tension. They see the bruises. They will hear the arguments and the fights. Every one will be affected. It is very difficult to quantify.

Duncan Craig: I suppose the quantification is the total number of families that are engaged in domestic abuse and domestic violence, and how many of those families have children.

Q212 **Philip Davies:** Does it affect boys in a different way from girls, being exposed to domestic abuse?

Duncan Craig: This is purely anecdotal. From the point of view of working with some families in a therapeutic way, I am not too sure I would stick my neck out and say it affects them differently, but I think they are sometimes exposed differently. There is much more of a protection of girls to get them out of the way than there is for boys. It is the way we think about the resilience of boys compared to the resilience of girls.

Mark Brooks: There has been some work from Professor Nicola Graham-Kevan, at the University of Central Lancashire, on trauma from children exposed to domestic abuse when they are growing up. They are more likely to be a perpetrator or a victim in their adult life by a factor of about four, and that is for boys and girls.

In terms of boys, when they are going through or seeing it in their household, obviously they have adverse childhood experiences. The thing is that when they are exhibiting those experiences, for example through school, with poor performance, bad behaviour, abusive behaviour towards their colleagues, and just being poorly behaved, the way that the education system actually supports them is different because of the stereotypes around boys. If boys are badly behaved, people think that is just because that is the way boys are and they are not looking at what is actually going on in the household. If a girl is in that situation, the school and the authority are more likely to look behind the curtain to see if there are any household issues causing that. When it is boys exhibiting those behaviours because they have seen their parents in abusive relationships, the same level of inquiry or professional curiosity is not taking place.

Steve Canning: We are hung up on academic attainment in schools, to the extent that we overlook some of the most important and fundamental principles of a child's journey through school, which are around child protection and safeguarding. They are just not as important. If we are looking at exclusions from school, it is extremely worrying, as is home schooling, where children are completely unprotected. That is a serious issue. It just needs to have the status that perhaps maths, science and English does, and it does not. We are trying to change hearts and minds around that and get some of the multi-academy trusts to start looking at this, rather than just worrying constantly about academic attainment,



because if you are not healthy and happy in school, how the hell do you learn? This is the important thing.

Ippo Panteloudakis: Another impact is that both boys and girls learn and take the message that it is okay to resolve conflict in relationships with violence and abuse. At some point in their lives, they will perpetuate those behaviours or be exposed to them in later life, either as perpetrators themselves or victims. It is hard to predict how this journey will unfold, but they get a very clear message that when things go wrong, you use violence and abuse, and that is okay. It is normalised, so it is passed on from generation to generation.

Steve Canning: For boys and men, if they are the victims of trauma in childhood particularly, then what they will do is often shut down a lot of their emotions. Women use their emotions and practise those much more. What you will find with men is that the first one they will reach for is anger. As Duncan was saying earlier, that is not always outward anger. Some people would argue that depression is a form of inverted anger. These kind of things really affect people's mental health, libido and ability to grow as an adult and to enjoy full citizenship. It is very worrying.

What we are doing is just seeing casualty after casualty after casualty. What we should be doing is picking it up a lot earlier and having a bit more of a campaign across Government. In the quality and outcomes framework, which I have had a bit to do with when I work with general practice, there is no mention of sexual abuse or sexual violence, which is very worrying.

Q213 **Chair:** Before we move on, can I just say that there will be people here listening today who are not as aware of domestic abuse against men. Are there types of domestic abuse that are particularly likely to affect men, and are there any differences compared with women?

Ippo Panteloudakis: I would say that men are more likely to report emotional abuse than physical abuse. I do not want to give stereotypes but that may partly be explained by the fact women tend to be less strong physically and there are other ways that they can achieve the same goal. One of the top things that we keep hearing, again and again and again, is, "She told me that if I were to leave I would never see the children again." This is one of the most effective strategies. It works and he does not even question it; he just believes it.

Another thing that is very common is how the perpetrator will use the man's gender, his masculinity, his maleness, to abuse him: "If you were a real man, you would be providing more." We have had many stories from men who have taken on loans and are in debt because they wanted to provide that extra money to fulfil that ideal. They also say, "If you were a real man, you would be a different person," or whatever. That resonates and hits very hard. Fatherhood is another issue, in terms of convincing him that he is not a very good father. Some of those can happen the other way around, with a male perpetrator and female



HOUSE OF COMMONS

victims. I am not saying that they do not happen, but these are very common.

There are also specific experiences for GBT men that do not apply necessarily to heterosexual men. Some information, from the SafeLives report, *Free to be Safe*, says that LGBT survivors are twice as likely to have self-harmed or have attempted suicide. They are also twice as likely to have been abused by family members, which tells us that it is particularly high within young LGBT people. There is also twice the use of drugs and alcohol than their heterosexual counterparts. All of these impacts are linked with the experiences that the intersection of gender and sexuality brings into the mix. I will leave it at that.

Q214 **Chair:** Mark, you are nodding vigorously. Do you want to add anything to that?

Mark Brooks: No, I have nothing to add to that.

Q215 **Stephanie Peacock:** I just want to ask a few further questions on the support available. What mental health support is currently available for men who have been victims of either sexual abuse or domestic violence?

Duncan Craig: Straight away we have to say that anybody can access a GP surgery. There is IAPT—Improving Access to Psychological Therapies. Quite a few IAPT services across the country are beginning to think of themselves as being more trauma-informed, particularly at a higher level, a step 3 level.

In terms of sexual violence services, there are about 130 organisations across the UK that are working with either boys and men solely, or boys, men, women and girls in an equal or equitable way. There is then a small proportion of organisations that are specifically working with women and then will do something for men; they might have an evening or they can access a telephone line. I think that is about 60 off the top of my head; I can certainly send you the data at a later date. It is in desperate need of some really good trauma-informed support.

Survivors Manchester were very heavily involved with the “Coronation Street” David Platt rape storyline. In the 72 hours that followed the airing of the story, the National Male Survivors helpline got a 1700% increase in calls. My own organisation had a 65% increase in requests for support. We are getting three brand new referrals every single day of the year, Monday to Sunday. When I speak to my colleagues at Rape Crisis England and Wales and my colleague over at Rape Crisis in Greater Manchester, what we know is that there seems to be a huge increase, both for males and females.

That is following some quite high-profile cases, particularly the football case. When Steve Walters and the guys particularly sat down on Victoria Derbyshire’s show and said, “This is us”, and kind of “Me too”, it gave people permission, and I do not think we have caught up with the support aspect of it yet. I just genuinely do not.



HOUSE OF COMMONS

Steve Canning: We service Devon and Cornwall, which is a massive area for a small charity. There is a paucity of services for men; we are probably one of the only organisations in that area that can provide support. That is really worrying, when people have to travel 50 or 60 miles routinely to access our services. We do try to do a bit of peripatetic work, but that would suggest that there are inadequate services. I would say it is woefully inadequate for women and almost non-existent for men. That would be our view, particularly for where we are.

Duncan Craig: When I broke my silence 14 years ago, the closest place for me in Manchester was in Wiltshire, so I travelled down to Wiltshire. I had the funds to do it, but many people do not. There were four organisations specifically for males. A couple have closed and a few more have opened, and we now have nine across the UK specifically for males.

Steve Canning: Which is not a lot.

Duncan Craig: Two of us are sat here.

Sarah Champion: You are certainly down today.

Q216 **Stephanie Peacock:** In 2018 it was announced that as part of the five-year strategy to support mental health for victims of sexual assault, there would be an "improved provision for men". What, if anything, has this meant in practice?

Steve Canning: Are you referring to the MoJ funds? We applied to do some work in Dartmoor Prison. We had the support of the governor, the deputy governor, the head of probation and the local safeguarding. We actually wrote a very comprehensive application that was greatly supported by everybody, and we were not successful due to the fact we did not have the capacity to do one day a week of work in a prison; that was worrying. We have since applied again in the next round of MoJ funding, and we were told that we did not really have the experience in working with men who have been sexually abused. We have been doing this for 10 years non-stop, so it is confusing when you challenge that. The money is then given to another organisation in the city to run a helpline, and promptly they ring us up and say, "Could you take all these people and deal with them, because we cannot?"

Looking at what happened in the last round, one of the things that I was told was that they actually decided to fund things that they had funded before, which is not very helpful from a growth point of view. We found that quite frustrating.

Duncan Craig: I think you might be talking about SASS—the Sexual Assault Support Services. It is cross-Government and cross-Department, led by NHS England. I was part of the development of that, along with colleagues from many other organisations. What has happened since? We have had many meetings. We have quite a few ideas flowing. There are certainly the beginnings of a better development and a better way of working, but, as a male survivor, if I was not involved in this, I am not



too sure what I would see on the floor. I am not saying there is not anything, but I am just not too sure what I would see. What I will say is that there is a lot going on behind the scenes.

Q217 Stephanie Peacock: I have a final question. You have mentioned some things, but what do you think needs to be improved?

Duncan Craig: The thing that I always jump to is that what we have massively improved is this: for the first time ever, we have a Government position statement on boys and men affected by VAWG and we have a CPS position statement on boys and men affected by VAWG. That is fantastic and I am so thankful for that, but what happened to me is still described as something that happened to a woman or a girl, and I am not; I am a big boy now and I would like to be recognised.

We have to find a way of developing a strategy where VAWG can be VAWG. The danger in mixing some stuff up, if you look at the CPS reports, is that everybody thinks it is VAWG, as in violence against women and girls, but the data includes boys and men. What are we actually talking about? We need a separate strategy, and the strategy has to not just have a strategy for boys and men because there is one for women and girls, but also look at the issues.

Mark and I are on the trustee board of the Men & Boys Coalition. I have some debates with some of my fellow trustees, because I wonder whether a strategy for boys and men should include something like knife crime or suicide. It should not just be, "Here is a whole load of things that disproportionately affect women and girls, or that we think disproportionately affect women and girls, so let us just add them over to this." We need some proper thinking about it, and we need to look at the key issues that men and boys are dealing with in an interpersonal violence way.

Stephanie Peacock: That is really interesting.

Steve Canning: From a public health perspective, there is a lot more that could be done. I have mentioned the quality and outcomes framework. That should really begin to recognise and encourage GPs, through financial remuneration, to ask the question, because they are in a unique position. In terms of generic services, we are a small organisation that ends up dealing with the casualties. That cannot go on. What we have to do is to start to work much more on prevention. We have mentioned schools, and across public health it needs to be taken more seriously and given some view in society where we can have a healthy debate about it.

Sexual abuse operates in a very penumbral world. We just need to have the courage to step forward and shine some light into it as a society, as we are all responsible. I am equally as responsible as anybody to make sure that we have those sorts of debates. You cannot simply think that it might be a footballers' or wealthy people's issue; that is such a small



HOUSE OF COMMONS

percentage of the perpetrators. Some 80% of stuff happens in family homes, and 90% of people have a prior relationship with their victim or perpetrator. Those are issues that strike right at the heartland of what we know, which is family life. We have to have the courage to step forward and say a bit more about that.

Mark Brooks: If I could add to that, if I may, services that are available for men, regardless of who runs them, as long as they are very clearly aimed that they have a male service to their overall domestic abuse service, are really important, so that men realise that that service is available to them and there are tailored communications on parts of websites. That is really important.

In terms of the narrative on domestic abuse, we have spoken about the need for it to be more inclusive. We are getting there. I was really pleased that in the Domestic Abuse Bill the definition will be gender-neutral. We need to make sure that the guidance that underpins the Domestic Abuse Bill takes into account male victims, including men in same-sex relationships.

In terms of public policy, Duncan talked about the VAWG strategy. That really gives a clear indication to commissioners at a local and regional level that these services really should be primarily focused on women and girls. We need to keep the violence against women and girls strategy but we need to look at a different way of making sure that those commissioners recognise men and boys in that same situation. The last Victims' Commissioner supported a parallel strategy, and a number of charities out there support that as well, in parallel with what we have for the brilliant work for women and girls.

Steve Canning: In terms of reported crime, those are the statistics we know about. What we should be doing is getting the OPCCs here. We have lobbied like hell with our local OPCC, who agreed to do it in the end, to take some notice of unrecorded victims of sexual abuse and fold those back to MoJ. That is happening, but it could happen manifestly right across the country. That would really help to begin to give us a better idea of the enormity of the problem. It is a disaster that we are involved with. We just have to recognise that.

Duncan Craig: We need to make special mention and make sure that we really understand the needs of other communities. We are desperately failing trans communities in the sexual violence world.

I have just been in Uganda with the Refugee Law Project, looking at boys and men affected by rape during conflict and displacement, and I came back to England with a heavy heart, because I am not too sure that we are working with or even seeing boys and men who have been displaced. We also desperately need to support and work with communities of faith and communities of ethnicity. We do not fully understand that. I sometimes wonder if we even understand class as well. It is getting underneath it all. We just need to be brave.



HOUSE OF COMMONS

It has taken a while, but we are certainly getting to a point within the sexual violence sector where we are reaching out across the line to organisations that, for 20, 30 or 40 years, have worked specifically with females and done an incredible job. I will say this for the millionth time: it is because of those women that I can do what I can do, without a shadow of a doubt. Lee Eggleston, Sheila Coates and the women at Rape Crisis enable me to do my job now and enable me to step forward. We have begun to have a discourse and a narrative that does not mean that talking about men and boys negates women and girls. We have to move beyond this and be able to have some really adult conversations, without people doing that. I am all for that and I know that many of my female counterparts are, but Government have to be brave, and this is really brave.

Q218 Chair: Can I just take this forward a little bit? Mark, you talked about potentially the need for a parallel strategy for men and boys. Duncan, you are hinting at the need to perhaps have a cohesive strategy. I am not saying that there is a right or a wrong, but I am just interested in that. Practically for Government, that is quite a different approach: to have one strategy that might include everybody who is experiencing domestic abuse or sexual violence, and another to have a parallel strategy. How do Government make their mind up on that?

Duncan Craig: Sorry to correct, but I am definitely in the camp of having a parallel strategy rather than a cohesive strategy.

Q219 Chair: You hinted—and it was quite interesting—that there might be a way of trying to pull this together. Maybe I was wrong.

Duncan Craig: I want VAWG to be VAWG, and I want a parallel strategy that looks at the different needs of boys and men.

Q220 Chair: Do we need to do that as a stepping stone, maybe—to have a parallel strategy that eventually we might be able to roll together?

Duncan Craig: It is probably the safest way forward. It is probably a sensible way forward. I just want a parallel strategy but we have to take baby steps because a lot of people are very nervous about it, for absolutely hearts-and-minds reasons.

Ippo Panteloudakis: There is a reason why we have the VAWG strategy. There is a certain context globally that has all those issues underneath. We need to find something equivalent for men and boys in terms of what the issues are. We should be including something that talks with compassion about the things that men do wrong: that they perpetrate violence, or issues around harmful aspects of masculinity, as we were talking about earlier. I can see a strategy that would include those elements as well as how men are abused as men and as boys, sexually and in other ways, and why it is that the majority of homicide victims in society are male: men killing other men. We know that. There is knife crime and a lot of other unhealthy, unhelpful and unsafe behaviours.



HOUSE OF COMMONS

This strategy—call it parallel or whatever you like; I do not want to define it right now—can include all those issues that talk about what it means to be a man today in whatever way you feel comfortable but that is good for you and healthy for you, and in which you develop your masculinity and your maleness without it negatively impacting on others, and having a system of protection when others impact negatively on you as a victim of any kind. It is not about taking away, as the other panellists have said, from anything that is for women and girls. That should remain, continue and possibly strengthen. It is about finding what is particular about men. We need something that is generally informed. That is what we are looking at: what is different between men and women? Putting everything in the same basket means that someone's needs are not going to be met. Women's needs are not being met adequately either, in this context.

Q221 Chair: The reason why I pressed on that a little is because on a number of occasions, the Committee has heard concern about the way in which local authorities are commissioning gender-neutral services, particularly around domestic abuse, the reason for that often being a very poor understanding of what the public sector equality duty is and the need to put forward the needs of the individual over and above anything else. I just wanted to flesh that out through this conversation, just so I got your perspective.

Ippo Panteloudakis: For me, there is no such thing as gender-neutral. The table is gender-neutral. People have a gender and they associate with a certain gender, and they socialise with a gender. Very young boys and girls behave in a certain way that they learn from other boys or other men. Gender is out there and we cannot ignore it. Gender-neutral probably means one size fits all so that we can tick certain boxes and allocate some money, but no one's needs are adequately met in this way—women's or men's. It has to be something that is proportionate and relevant to each community, wherever that community is, and that can be different from one community to another, including, for example, refuges. We may need to look at a different model of providing that safe space, which is not necessarily a refuge for women or men in the future. It could be different health protection. If we keep our minds within the context of so many refuges for women and perhaps having another 25 for men, that may just about be good enough today but it will not be good enough in five or 10 years' time and we will have wasted millions of pounds that we probably will not have on something that may be underused or will not offer the protection that we want people to have.

Mark Brooks: On gender-neutral, what commissioners and local councils are doing, often working with clinical commissioning groups and with police and crime commissioners, is commissioning services to make sure that every individual at risk or a victim of domestic abuse is supported. They have a legal duty to do that under the Equality Act. The way they commission those services now is just to commission one service, but that does not mean that that service cannot offer a service for female



HOUSE OF COMMONS

victims and a slightly different service for male victims, or make it clear that it is available for women and men. I am concerned when people say that gender-neutral services take something away from women. That is a risk, but the issue is that commissioning authorities have a legal duty to support male victims and their children. If I am being honest, I think that argument is a bit of a red herring, because what it is really saying is, "We will just commission services for women and we are not worried about men who are going through domestic abuse." There is a political narrative to that.

Q222 Chair: The written evidence that we have received also suggests that Australia and Ireland have developed best practice regarding supporting men's mental health. Mark or Duncan, do you want to comment on that?

Duncan Craig: I know that in Australia the Royal Commission in particular have been doing a lot of work around developing a strategy for mental health that is very gender-inclusive and very gender-specific. That is something that we have certainly been missing here. In terms of gender-neutral, we talk about gender-neutral services sometimes in mental health. In terms of the mental health of women, particularly when you look at maternity services, there are some very specific needs for women in those services. We also need some very specific needs for mental health services for men. Sometimes we need to think about our language and think that if we have strategies and if we have something that gives us a framework to think about developing better services, it helps commissioners and it helps service leads. It also helps the public to understand as well.

Mark Brooks: The fact that Australia and Ireland have a men's health strategy is really important and a real marker. Government more widely need to look at having a similar strategy in the UK, or certainly in England and Wales. We saw the suicide figures that came out yesterday, with a big increase in the number of male suicides and an increase in female suicides. What is concerning about those figures is the fact that male suicides often increase when there is a recession. The fact is that we are not in a recession any more, so why have those figures gone up? We no longer have a Minister for Suicide Prevention; that went with the reshuffle over the summer. Reinstatement of that would be really important. It would also make sure that there was a focus on male suicide as well as enabling a focus on female suicide. We need to step up more in terms of Government and public policy on this particular issue. Others are doing it brilliantly, in Ireland and Australia, so why can we not?

Q223 Sarah Champion: At the very first session, we had some survivors come and speak to us. I was really struck that they were saying that the support services that are there are very feminine in their presentation and in the language that they use, and that counselling is seen as a women's talking shop. I just wonder, from what you have been saying, whether there has been any research done. I was particularly struck



HOUSE OF COMMONS

when you said that within the gay community, there was more of an acceptance that you could come forward and talk about it. Have there been any public health campaigns or any research? Just providing a service is not good enough if people do not feel able to access it. What needs to happen so that men feel able to step over that threshold?

Duncan Craig: We have not had a public health campaign. Particularly around funding announcements, both the Home Office and MoJ have done some specific, targeted stuff, originally particularly around the Male Rape Support Fund and then subsequent support funds. That gives men permission to step forward. Where things have really taken off, going back to what I was saying before, is with Alex Skeel's documentary, with *Coronation Street* and *Hollyoaks*.

On *Hollyoaks*, we did a big piece of work with them to look at the football abuse story that was based on Steve Walters's story. Steve helped me with the writers and we developed it. We had an ISVA for the first time ever on a British soap opera. I looked at our data and, really interestingly, during this period of time, more young men were ringing Survivors Manchester and asking for ISVAs. It is not a formal campaign, but what we know is that that the stuff out there in the media—social media as well as the very traditional media—really helps people step forward.

The Male Survivors Partnership has developed the male quality standards, thanks to Lloyds, the Home Office and the Ministry of Justice. What we know is that as people begin to accept them and begin to try to work through them to accreditation, some organisations have not been able to do it because there are certain criteria. It could be something as simple as, if you are working with men, whether you have male staff or male representation on your board of trustees. If you have an expert advisory panel of service users, are there males on there? Some organisations' constitutions do not allow that, which means that they cannot meet quality standards, yet are still being funded to work with men.

During the research that we did for the quality standards as they were being developed, one service user wrote anonymously to the survey, saying that, just prior to his trial, he went to see his ISVA. The ISVA was brilliant and he had a really brilliant experience with his ISVA, but he could only ever see his ISVA in Costa Coffee because the building that the support service was housed in was a female-only building. I question that and think, "How does that even happen?" We have not had research. We need it. Going back to what you were saying, we need some public health campaigns around it.

Chair: We are running very tight on time, so I am going to have to draw this first panel to an end, but I have to say thank you to all of you for an incredibly helpful and very thought-provoking session on, as somebody was saying, ground that needs to be covered more. Thank you, all.

Examination of witnesses

Witnesses: Bob Greig, Honor Rhodes, Sonia Shaljean and Sarah Tyler.

Q224 **Chair:** Our second panel of witnesses joins us, and I will swiftly move on. We are running a little tight on time; sorry for keeping people waiting. Sarah is going to start our questioning for this panel. Before we do that, could I just ask everybody to say their name and where they come from?

Sarah Tyler: My name is Sarah Tyler. I am a family law barrister. I do divorce and private law children, and I have done some public law work as well. I am speaking from my personal professional experience, not on behalf of my chambers or the family law Bar as a whole.

Sonia Shaljean: Good morning. My name is Sonia Shaljean. I represent Lads Need Dads. I am the founder and managing director. Lads Need Dads provides male mentoring to boys aged 11 to 15 who have absent fathers.

Honor Rhodes: My name is Honor Rhodes and I work for Tavistock Relationships, which is a relationship support counselling and therapy organisation. I am also a trustee of the Early Intervention Foundation, which has been doing a lot of work reviewing the evidence around parental conflict and its impact on children. For several years, I sat on the Cafcass board.

Bob Greig: I am Bob Greig. I co-direct OnlyMums & OnlyDads, which is a community interest company, not for profit. We offer initial direction and support to separating mums and dads, grandparents and, occasionally, other family members.

Q225 **Sarah Champion:** I want to start by looking specifically at divorce and separation and the impact that it has on both men and boys. Bob, could I start with you? Can you outline the impact that divorce or separation can have on the mental health of the men experiencing it?

Bob Greig: We see many men suffering with depression, and sometimes depression and anxiety. In the conversations I have had over the 11 to 12 years of running OnlyDads, three things come up as a cause. In terms of the importance of the subject matter, many men feel unable to talk about how much they love the child and, if there is a dispute going on about that child, nothing is more important for that dad. In terms of the time it takes to get matters sorted with mum or through mediation or, ultimately, through family courts, those delays can run easily into years, not months. The third is universal; I have hardly spoken to a dad who has been through divorce or separation and who does not highlight this. It is that sense of isolation and the lack of support, not only perhaps losing their child through nasty Children Act proceedings or whatever but



the loss of social circles as well. Many feel an inability to talk to friends. That feeling of isolation ultimately feeds that depression.

Q226 **Sarah Champion:** Do you see that as different from how it impacts women?

Bob Greig: Not the anxiety. With depression, we certainly hear more of it from men. We are not an evidence or data-collecting organisation. We are small, frontline and grassroots, so I cannot give you accurate figures, unfortunately. We do not have that sort of resource. However, the depression side of mental illness, in the thousands of cases we deal with, comes more from men than women.

Q227 **Sarah Champion:** That is very interesting. Honor, could I move on to you? I do not know if you want to add to that, but I would also like you to explore the impact that divorce or separation can have on the mental health of boys and whether boys differ from the way that girls might experience it.

Honor Rhodes: There is some lovely evidence on this, which it is not mine. It is from the Early Intervention Foundation's review that it conducted in 2016 and which I am sure you have had sight of. What is interesting is that there does appear to be a differential response. First, when there is conflict between parents, it seems to affect a father's relationship with his children more severely than a mother's relationship with her children; we do not know why. I would love to give you an answer but we do not know why. I am sure that there are societal norms playing out.

In terms of the impact on boys and girls, there is a differential impact in that boys are more likely to physically leave an environment where there is hostility and distress. You have to remember that divorce is not the seismic event but just one part of a process, which is, for most children, absolutely awful. It is the bit before. It is the divorce. It is what happens afterwards. Boys particularly, when they are physically free enough, will leave home and seek out families and relationships in other places, some of which are healthy and we would want to promote, and some of which are in gangs.

Of all the social troubles that we are contending with, if we could just tolerate thinking about relationships, we would get to a better answer than flinging lots of money in an unthinking way at what gangs do for young men. Young women are much more likely to stay at home but disappear into an online world in their bedrooms, and that is just as risky.

We have noticed particularly a differential impact. We are an organisation. We have no horse in the race. It is really important to say that Tavistock Relationships is not making people stay married or whatever. We work with gay and lesbian parents as well. We are just interested in what holds people together—that relationship rope—and that is what we focus on. That is the patient, if you like. We measure



HOUSE OF COMMONS

people's mental health ferociously and there is a differential from the very start.

When a couple comes, in trouble, perhaps with one thinking about separation—often a woman is thinking about separating—we will measure their mental health. Men present, by and large, as quite well at the start of therapy, and women will be really below the clinical cut-off point for caseness. Some are alarming. We measure it at three-month intervals. Most people are done with us in less than a year and, by the end of it, we have normally restored a woman to about the point her partner was when he came in, and he is there as well. In the meantime, however, he has had the most tremendous dip, so you could argue that what we are doing is making men considerably worse.

What is happening in the couple is that men are understanding and being able to understand quite how distressed their relationship is. They honour it and they work on it and they think about it hard, which, in itself, helps a woman believe that there is something, whether they stay together or not. In a way, the trajectory for men is different than for women and, if you plotted that, it would be really interesting.

I have one last thing. Think about rough sleepers and why people are on their own. People are lonely because relationships all along their lives have broken down. There is something about how we help families do better, together or apart. As I say, I have no horse in this race.

Q228 Sarah Champion: Can I pull you back to what you were saying about the impact on children? What you were describing felt like coping strategies. Could you talk more about the impact that it has on their mental health and, when they are not coping, how that might demonstrate?

Honor Rhodes: Whether they are coping or not coping, the impact of parental conflict, separation and divorce is exceptionally severe. It will affect a child's capacity to learn at school because they are too anxious. It affects their physical health. It will certainly affect their sleep, their eating and their digestion. All the very simple things that we, as parents, safeguard and want to protect are attacked. It affects their capacity to make and sustain friends. It goes on to affect their long-term capacity to have meaningful relationships. It affects their capacity to work.

Q229 Sarah Champion: Sonia, I would love to hear more about why you set up your organisation and what you do, because it is very relevant to what we are discussing. Could you also comment on the impact on both men and boys?

Sonia Shaljean: It is such a huge topic.

Sarah Champion: You have about a minute and a half.

Sonia Shaljean: In a nutshell, I set up Lads Need Dads because I had worked mainly with men across the voluntary and statutory sector. I had



worked in domestic abuse and with anger management, troubled families, homelessness, and alcohol and drug misuse, and I kept on finding that a lot of clients were male and also came from homes where there had been family breakdown and absent fathers. I have a big passion for early intervention. I wanted to create a programme for boys because I see males as a high-risk gender. Through early intervention, hopefully we can reduce those cycles of men falling into homelessness, drugs and alcohol or broken relationships for the next generation. It is all about early intervention, equipping and empowering young men before they start to fail at school or develop mental health problems.

Q230 Sarah Champion: We have relationship education about to be implemented in a year's time. Is that resilience something that could be taught at primary-school age? What would that look like?

Sonia Shaljean: We do get lots of calls from primary-school children asking whether we can do Lads Need Dads at primary age. We particularly work with 11-15, because adolescence is a really difficult transitional period for the child but also for the mother, if she is on her own. Any intervention at any age is brilliant. It is great to teach emotional intelligence at primary school but particularly in secondary school with adolescents. Girls socialise to express our feelings and talk openly, and we are relational, whereas boys, from a very early age, are taught those messages that we have heard again and again about pulling yourself together or manning up. It is still out there.

We run sessions on gender stereotypes and what it is to be a man on our school programmes. Again and again, we get the same answers coming out from boys about how they see themselves as men and how women are. They are old-fashioned, traditional stereotypes that still come out: a woman's place is in the home; we are rubbish drivers—it is true that I am not that good—men should be strong; it is wussie to wear pink. All those really obvious stereotypes that you think are no longer said are still said by young men growing up. They are growing up in houses where men are not there, so you cannot even say that it is a male problem. They have no access to men. They have no role models around them, so they are possibly hearing it from women and maybe reinforced by their mother. That needs addressing.

Q231 Sarah Champion: How does that compound mental health issues as they are going through life?

Sonia Shaljean: For the boys we come across, there are two forms. You get internalisers—boys who withdraw and do not express themselves, so they become depressed and internalised—and you get externalisers, who may express disruptive behaviour at school. It is the internalisers who we worry about: those who do not express how they feel. Some of them do not even speak. It takes them a long time to even start to talk, which could have been due to trauma or just never being encouraged to have a voice. The big thing that we find is that, because we do emotional check-ins every session, where we get the boys to say how they feel, we



HOUSE OF COMMONS

literally have to start off by giving them visual cards to choose a face or a picture, because they do not know how they feel half the time. It is either anger or indifference.

Because we work with a high ratio of male volunteers, they are role-modelling how they are feeling. It is great: you have eight boys and four men in a room able to talk about how they feel, and they will see the men talking and being open. It is a great modelling of emotional literacy for them. It is one of the things we hear from the boys time and time again, because we work with them for 18 months and then open-ended after that. The main thing they value from the programme is their ability to talk openly about how they feel. For me, it is a great protective factor moving forward for boys as they grow into young men and fathers themselves.

Q232 Sarah Champion: Sarah, I am going to jump topic a bit. Some evidence suggests that there is a negative impact on the mental health of those who represent themselves in a family court. I wonder if you could speak a little about that.

Sarah Tyler: I can well imagine that is right. I would not necessarily be coming into very close contact with them unless I then represented them at a later stage. I would echo what Bob said: when there is family breakdown, it can manifest in court in a number of different ways. You may have divorce and finance proceedings, children at proceedings, and injunctions. It is extremely stressful. The subject matter is the most important for those individuals at a very difficult time. If they are representing themselves, they may have had no legal advice at all and go through a process whereby, although the family courts do try to be open and non-intimidating and to provide as much information as they can, people often attend court with very different expectations of what is going to happen and of what the law and the procedure is. They may find it very difficult to put their case across. They may not be asking for things that they could be asking for. It is very difficult for judges, it is very difficult for legal representatives on the other side and it is very difficult for those individuals.

Bob spoke about the delays, which are a really big issue in the family courts and in courts generally. You will be waiting months to get the next hearing. There is a period where there are things you need to do for that next hearing, but if you are looking at six months for a trial and the outcome of that might have a very significant impact on the type of arrangement you have with your children, that is a very stressful process to go through, particularly when, if it is men—and you have heard from other speakers about the way that men tend to deal with things in terms of accessing support and speaking about issues and isolation—that compounds itself over that period of time.

The lack of legal aid is also a really big issue. People do not have that safety net. There is anecdotal evidence of people who would otherwise be coming to court trying to resolve their differences outside of court or do



HOUSE OF COMMONS

not go at all. That then causes knock-on effects, mostly for the children who do not have their issues and their circumstances aired before a tribunal.

Bob Greig: Could I just add to what Sarah was saying? There is something about family courts that act like a Taser to some men. Really competent and articulate men I have spoken to find it impossible to go into a courtroom and argue their case. The first time that happened, I was surprised, but it has happened over the years to many men. I am thinking of a local man to me—an academic engineer—who was just unable to do that.

Q233 **Sarah Champion:** What do you put that down to?

Bob Greig: Court is frightening. Leaving your relationship with your children in the hands of a third party, where it could go wrong, is the ultimate gamble, I suppose, to some dads. There is something in all our minds: "Courts are for criminals, not for me. I have done nothing wrong." There is the whole façade and interior of many court buildings. They are stark, unwelcoming and unfriendly places. I would not place too much store on that, but those things are relevant.

Sarah Tyler: Can I just add one point to that? I do not want to trample on any further questions, but there is a perception among many men who I speak to and represent that the courts are going to be biased against them. I do not know where it comes from, whether it is from speaking to other people who have been through it or online, but I do not think that is accurate and I will tell them. It relates really to where the children are. Particularly when they are dealing with children's cases, courts are in the job of assessing risk. It is about the children's welfare. Generally, in the cases I have of family breakdown, the children are more likely to remain with the mother. When you are looking at the finances, their welfare is the first consideration, so they are more likely to remain in the home. That puts additional practical stresses on the men going through that process. They feel that the women are getting everything. It is a by-product of the fact that they tend to be the ones who have primary care of the children.

Q234 **Stephanie Peacock:** I am going to ask a few questions on the child arrangement order, so it builds on what you have just mentioned. First, how can going through a court case involving child arrangement orders impact on the mental health of fathers?

Sarah Tyler: I have already mentioned some of it. You are more likely to have litigants in person in Children Act proceedings than in finances on divorce. That is my experience. They might come to court after the initial separation and, while it is not always the case, it is much more likely that the children remain with the mother before it comes to court and is then assessed. The court goes through an initial gatekeeping process to look at any safeguarding issues. Very simple ones include criminal records and local authority involvement. They look at what you need to do to



HOUSE OF COMMONS

safeguard the arrangements for the children there, as well as, of course, what the other parent says.

Reflecting on some of the themes that came through from the earlier session, such as the way in which historic trauma that men have been through manifests in a particular way—and this is just one example and is not all dads—you often see cases where mothers will say he behaves in a certain way which would be harmful to the child. It might be true or it might not be true. It might be somewhere in between. The court has to go through the process of analysing that, and it is very difficult, because they have to ensure as the first consideration that the child is safeguarded. When you factor in the delays, it is often a long period of time before that can be properly assessed at a final hearing if it is a dispute of fact as to whether someone did or did not do something. That all adds to the stress that the father experiences of maybe feeling the subject of false allegations, unfair treatment or bias against him, and then having to wait for a really long time before he has free access to his children. Sometimes they are false allegations; sometimes they are in the middle; sometimes they are true. It is a very difficult process to go through.

One of the previous speakers said that often the first emotion that men will reach for is anger, which then acts as the other side of the coin to a mother saying—and I do not want to get too stereotyped about it—“He behaves in a very angry way and I am worried about that impacting the children and that being an expression of the father’s emotion.” It can be a very toxic stalemate, because it takes a long time to resolve those issues properly.

Q235 Stephanie Peacock: In what ways would the mental health effect on fathers be different from the effect on mothers?

Sarah Tyler: Primarily, it is the point about: fathers may feel cut out, powerless or trampled on by the court.

Q236 Stephanie Peacock: You mentioned in your earlier answer—and this is something I am going to come on to—that some evidence received suggests that fathers going through the legal process are less likely to end up with the primary care of children. You have given your view on that. What impact can that have on the mental health of fathers? Does anyone have any other points that they want to make on that?

Sarah Tyler: I do not think I said that, at the end of the process, they are less likely to have the primary care. Before it has gone through that process—and this is only a generalisation and there is no research or data gathered on it—if parents have had a shared-care arrangement when they are in a relationship and they both share the childcare, that is more likely to be the outcome at the end of it. If the mother is primarily the carer, that is more likely to be the outcome at the end of it. There are lots of different reasons for that. One is practicalities and what the children are used to. The court will always, however, look at ensuring



HOUSE OF COMMONS

that, where it is safe to do so, the other parent has a good, meaningful relationship and time with the child. It is more a reflection of how people run their lives pre-separation than a predisposition by the courts.

Bob Greig: Can I just zoom in on something Sarah said? For us, it is seeing dads who say they have been falsely accused of domestic abuse who sometimes cannot see their children for three, four or maybe five months. The family courts seem to accept huge tranches of time before they sort these matters out. I would just highlight the levels of frustration that those fathers experience during those times as probably the pinnacle of frustration, because there is nothing they can do.

Honor Rhodes: At Tavistock Relationships, we are Freudian, so we are all about love, death, sex and hate. We have to remember that these are very primary emotions that are activated in the loss of a relationship. There is truly grief and grieving, but most people defend themselves against that. Bob and I were having a lovely conversation about not wanting to feel lonely at the end of a relationship. There is something about child arrangement orders that feel deeply unsatisfactory to absolutely everybody. There is a sort of inequality in that, but it is also often unsatisfactory for the child too.

What we have to help parents remember, for their sons and their daughters, is that what children need to believe is that however their parents feel about one another, they do love them. That is the bit that gets forgotten and that is the protective thing for both boys and girls. I am really interested in child arrangements because they are often very technical, so they give the opportunity for plenty of returns. I was once talking to a judge who said she asked one family who kept coming back every summer whether they would not like to have a holiday next year. They could save their money on solicitors' fees. They were trying to litigate on whether a child should have their hair cut. This was not a Sikh child. This was a British-born child, and it was a haircut. These are people for whom the war continued. That is often what child arrangements are. If they could step aside for a moment and think about what ordinary people do at the end of a relationship, they are very sad, they are very angry, they are really snippy and they try to make everybody hate them for a bit, and then they get on with their lives and realise that they are going to have to co-parent. That is the healthy bit.

We have people who are so far removed from that—both men who present in one way and women who present in another—but child arrangements are just an opportunity for the war to continue. The war becomes life and work, and people devote money, time, thinking and energy to it. It becomes impassioned and inflamed. What we have to do is just pull the rug out from underneath everybody and say, "Why do you not want to be ordinary? Why do you not want to just crack on with your life like everybody else? Treat yourself, take a moment and have a pause. Your children will thank you."



Q237 Stephanie Peacock: How does what you describe in court decisions in relation to child arrangement orders impact the children and their mental health? What support is offered to children through this process?

Honor Rhodes: I hope you have had evidence from somebody from a child and adolescent mental health service, because you should, if only for them to tell you that often local NHS CAMHS services make it a point of principle not to offer therapy or help to children whose parents are going through divorce and separation. That is not being mean, but it is because the child's situation is unresolved and there is nothing you can do for a child when their arrangements are unresolved. You can, indeed, make it worse. They will ask parents to do the good parental thing and resolve it, but they would have a lot to tell you about what boys are going through when this is going on, and what girls are going through. The presentations, as we know, in children are very different.

The impact on children from this is that you will often have a child who will be deeply resentful that anybody is taking a view about what they should do on a Wednesday. The problem with child arrangements is that they are very blunt. They do the best they can, but children are changing all the time. They have a club on a Wednesday. They want to see their friends on a Wednesday. They do not want to see their dad in a contact centre—and those are vile. I do not know if you have ever visited any, and that is really rude of me, but they are not places you would want to go and spend any time. They also do not really want to see their dad in McDonald's. They would really like their dad to be with them when they do some ice-skating or unusual things, and yet there is no trust.

Part of what we have to do is to help child arrangements be more sophisticated, rich and nuanced, and to allow parents some levers about changing without this endless trooping back to court and consulting the child about what the child wants, and trusting children without requiring them to choose. Boys particularly find this notion of being placed in a position to have to choose where they are, who they are and what they do intolerable. Their loyalties are fierce to their mothers and we give them real schism. It is painful to watch.

Q238 Philip Davies: Sarah, you touched on this and I just wanted to explore it a bit further. You mentioned how parents made allegations, some of which were true and some were not, and maybe some were somewhere in the middle. I just wonder about the extent of people making false allegations about somebody in order to deprive them of the opportunity of seeing their children. How widespread a problem is that in terms of gaming the system? You said the courts take an attitude of precaution whereby, if an allegation has been made, they do not want to make a decision which puts somebody in danger. How widespread is that gaming of the system: making allegations knowing that the court will deny access to the father for a certain period of time and undermining that relationship?



Sarah Tyler: There are no figures on it. It does happen, I would say, occasionally rather than more often than not. You will often have someone who makes allegations and you never get them determined because other things are proposed and they do not need to be determined, so you do not have a decision on that. People might make allegations but they are not proven; it does not mean they made them up. I would say it is not common. I cannot say anything more than that.

Q239 **Philip Davies:** If somebody did make an allegation and it was shown to be untrue, what are the consequences of that, or can they do it with impunity?

Sarah Tyler: To go through that process, you would have to have a trial where someone makes an allegation, the other person says it is not true, and the court has to conclude that they made it up. The consequences of that are, of course, that they have lied in their oral evidence and in their sworn statement, so they could be pursued for that. It is more likely that the court would be interested in looking at the consequences of that—and I am going to deal with this only in the context of children proceedings, which are probably the most relevant—for the other parent's relationship with the children. You do see it in cases that become intractable and very high-conflict, where there is a high degree of animosity between the parents. Those proceedings tend to go on for a really long time and are extremely difficult because where you can get to is a parent who will say anything to stop a relationship between the child and the other parent, but the consequences of changing where the child lives could be extremely detrimental for that child, so you are balancing the impact on the relationship between the absent parent and the child versus the impact on the child of removing them from that home. That is when you get into intractable hostility and alienation-type cases.

Q240 **Philip Davies:** I want to move on to alienation, because it is linked to it. It might not necessarily be due to a court case; it probably will be, but not necessarily. I have been struck by the growing number of cases that I have been passed on of parental alienation. It seems to be a growing phenomenon, where, in effect, one parent is actively turning the child against the other parent. Do people on the panel see this as a growing phenomenon?

Bob Greig: It is a phrase we hear increasingly. Five years ago, I never heard any dad talk of parental alienation; now, many dads talk of parental alienation. I have noted from emails and phone calls that their definition of parental alienation is their own. One of the bits of advice we give to dads across the board is to try to steer away from that phrase because it means different things to different people. Ultimately, what it means, by any clinical definition, is that you are accusing mum of being a child abuser, and you are going to have to evidence that in court. It has become mixed up with problems over child contact, basically, and it is a phrase that, from where I am sitting, has lost all meaning.



Honor Rhodes: I prefer to call it badness. It is entirely possible for a parent with care to try to poison their child against the other parent. I do not think it happens very often. You have to be savage and utterly self-centred to do that because it can only do your child harm. However, you do then have an ally in the horror of this other person out there. I go back to the idea that, if we could help people to just take a moment and think about the quality of their lives, the quality of their relationships and the best outcomes they want for their children, you can sometimes help parents sidestep this.

We had a couple we worked with who were a long time post divorce separation, and they had a six-year-old who used to be dropped off at a park gate to go and see the hated father. He would get out of his mother's car with his little pull-along suitcase. He would walk across the park with a dip in the middle, emerge at another gate and get into his father's car. The therapist just stopped therapy and said, "Let me just tell you a story about two very unreasonable people who are really harming their child." It took that sort of stop for these people just to have a think about what it meant for their child.

I do not call it parental alienation. I say it is part of that bell curve of human behaviour and it is at one extreme end. We have to look at it and say, "It is harmful and we need to prevent it. It needs to stop." We can, by and large, do it but, for most parents, we need to scaffold their capacity to allow the other parent to be half-decent. After all, they have had a relationship; they must have liked them at one time. We have to help them hold on to something that is good and hopeful for their children's benefit.

Sonia Shaljean: Can I just add something? The boys we work with have had long-term parental absence. We do not often work with families going through courts because we believe it is hard to get involved. We do not want to take the role of the father away from the father, so we do not often get referrals where that is taking place.

What is really valuable to know is that, in the programmes that the boys go through, they start to find their voice and they start to talk about their absent dad. They are able to articulate how they feel to their mother, who maybe they felt extremely loyal to for years, and have not mentioned the elephant in the room. We get some boys who present for assessment and we may be the first people who have ever talked about their dad. Their dads are alive. For 20% of the boys we get, their fathers have died. For the other 80%, their fathers are alive and kicking. Some of them have physically broken down just at the mention of "dad": "Tell me about your dad. What kind of things did you like to do when he was around?" It is this massive release that they feel to be able to talk about him because they are silenced a lot of the time. They are not able to talk about him at home because of this loyalty to mum.



HOUSE OF COMMONS

What is fantastic is that we did our pilot for 18 months; 22% of boys on the programme had little or sporadic contact with their fathers and by the end 75% had regular or renewed relationships. That is not using the court system at all; that is just being human and the mothers seeing the value of the male input in their boys' lives and seeing their boys transform in front of them from being emotionally shut down to being emotionally articulate, confident and resilient young men. They start to look at their own issues and think, "Hang on, we will let dad in." There are other ways to tackle absence other than contact orders and the court system. There are human ways of doing it and we have proven that that is one model that is working at the moment.

Q241 Philip Davies: Sarah, finally, could I just ask you, from your observation and your experience, if there is anything in particular that the Ministry of Justice or the court system should do differently in order to try to address some of the problems that you experience and identify?

Sarah Tyler: The issue with listing and the time period you have to wait to get another hearing is definitely something that is a Ministry of Justice problem. It is about resources and the availability of judges and magistrates to hear those cases. That is something that is within their control.

You heard mention from Honor about contact centres. Where there is a safeguarding risk but contact needs to take place—time with one parent and the children—there is a real lack of those. There are waiting lists and they are prohibitively expensive for lots of people. Supervised contact can be between £50 and £100 an hour, which is just out of reach for a lot of people. The Central Family Court in London has set up a contact centre within the court to fill that gap, which is really welcome and works quite well.

From listening to your earlier speakers and the panel, there are lots of resources that are available that perhaps people involved in the family court process do not know about. People could have an adjournment or stop the proceedings to go off and explore alternative measures. There has been a move to try mediation. It may be effective, but I do not really see those cases where it is effective. I know that the president of the Family Division is looking at ways to get people out of the family courts if they do not need to be there. If there is not really a safeguarding issue or a legal issue that needs to be determined, and if it is just the practical arrangements and difficulties between the parents, that does not need to be in court. Funding for that, looking at that and room for that, if legislation is required, could be something that is looked at.

On alienation, a really good piece of research was done last year by Cafcass—the Children and Family Court Advisory and Support Service—and Cardiff University, which looked at alienation as a whole. They did a review of case law and available research. Their view was that they do not think it is not more common but it is hard to tell because of the lack



HOUSE OF COMMONS

of reported cases. That is really the only way to tell. It is a very interesting piece of research if you want to look at that in more detail.

Bob Greig: I have two answers to Mr Davies. False allegations are not something we hear about too much, but when you talk to dads they will often talk about exaggerated, and sometimes greatly exaggerated, accusations, where a skirmish on the landing or at the fridge—and it often seems to be the fridge—will turn into a domestic abuse situation. Many dads will talk of having a one-off or maybe two or three small incidents of domestic abuse that then get blown up.

On things the MoJ could do, family courts have the rhythm of test match cricket. It is really slow—appallingly slow—and I could speak for every mum and every dad who has been through the system. Please just speed it up. It takes weeks and weeks for reports to come through. I do not understand it. There is no reason for it.

Chair: With that image in our minds, we are going to have to draw a close. Rain stopped play, and we have to draw our session to a close. It was incredibly helpful. Thank you for bringing your expertise to our Committee and to our deliberations. It has been very helpful.