Introduction

The growing number of programs engaging men in reproductive health reflects exciting changes in the field. Men are central to sexual and reproductive health and the surge in programs reflects an appreciation of how working with them contributes to their health and the health of their partners and children, and, potentially, to broader equity objectives.

Why Spend Limited Resources on Men?

Decades of research on reproductive and child health show that everyone can benefit when men are thoughtfully engaged. Programs may address men’s own needs, providing them with information, skills, and services that improve their health. The information and skills can help men be more respectful, communicative, and supportive in their sexual partnerships. Women themselves often ask that reproductive health programs work with men.

Some programs work to develop men’s capacity as fathers, providing them with the knowledge, skills, and confidence to be more involved with their children. International data on men’s use of physical violence against women suggest that working with men could both reduce this violence and improve sexual and reproductive health outcomes. An overarching benefit of all of these activities, when they are conducted with sensitivity to social inequities, is that they can contribute to gender equity and to broader development objectives.

And why might men want to take more of an active role in sexual and reproductive health? Somewhat surprisingly, there are many reasons. Men want information and usually have little access to it. They recognize the risks that their behavior and lack of information pose to their own health. They are concerned with the health of their partners. They wish for improved relationships with their children. And many of them recognize the importance of human rights, including women’s rights.

How Best to Work With Men: Making Sense of Available Resources

Distinguishing among the number and diversity of programs, research, and tools is daunting. Which provide the best examples? What criteria can we use to select the most interesting models? It is hard to know where to begin.

This brochure lays out key resources for working with men, organized to make them easy to access and apply to current work. It provides a framework for distinguishing among varied programs, and illustrates the range with strong examples. This is by no means an exhaustive list of the resources on men and reproductive health. It is an attempt to systematize what is available, and to explain some of the huge variability in existing materials. The brochure provides guidance for how male engagement can be a lens through which communities question norms about masculinity and programs integrate approaches to gender equity. The categories into which the materials are organized are not mutually exclusive, and some publications appear more than once. This has been done so that whatever users’ primary interests are, they can find the most helpful and relevant resources for their work.

Disclaimer. This brochure was prepared by the Population Reference Bureau for the Interagency Gender Working Group (IGWG), with funding provided by the U.S. Agency for International Development (USAID) under the BRIDGE project (GPO-A-00-00004-00). This document presents the work of many authors and organizations as they relate to the constructive engagement of men and boys. The contents of the brochure and the links herein do not necessarily reflect the views of the Interagency Gender Working Group, USAID, or the Population Reference Bureau or its sponsors.
Methodology

This review scanned a wide range of publications, websites, curricular materials and other tools, as well as organizational resources. Selection criteria included:

• Fresh and promising approaches
• Interesting and well-done evaluations
• Range of geographical areas and reproductive health topics
• Ready availability through hyperlinks
• Timeliness (mostly material since 2000)

Organization of This Brochure

The numerous resources on engaging men in sexual and reproductive health reflect several different approaches to this work. A first group of programs addresses men as clients, focusing on their own reproductive health needs. A second set includes men as partners, promoting men’s central roles in supporting women’s health. A third set views men as agents of social change. This last group of programs may engage in a variety of reproductive health activities, but also promotes gender equity, both as an end in itself as well as a means of improving everybody’s health. Again, these approaches are not necessarily mutually exclusive yet most programs fall into at least one of these categories.

This brochure provides key resources — program reviews, case studies, evaluations, policy examples, and tools — for each of five substantive areas: family planning/contraception; maternal and neonatal health and fatherhood; male identities and roles; STI and HIV/AIDS prevention, diagnosis, and treatment; and gender-based violence. Because programs rarely address only one area of work with men, the resources appear in multiple locations.

Resources on Approaches to Engaging Men

These resources are useful for illustrating and explaining these approaches further.

Men as Clients:

• EngenderHealth. Involving Men as Partners in Reproductive Health: Lessons Learned from Turkey (June 1999).

Men as Partners:

• EngenderHealth. Working with Men/Men as Partners in Reproductive Health (accessed online June 15, 2006).
Methodology, continued

- IGWG. *Three Case Studies: Involving Men to Address Gender Inequities* (July 2003).
- Oxfam. *Gender is Everyone’s Business: Programming with Men to Achieve Gender Equality* (June 2002).
- UN and the ILO, for the Expert Group Meeting on the Role of Men and Boys in Achieving Gender Equality. *Evolving the Gender Agenda – Men, Gender and Development Organisations* (October 2003).

Men as Agents of Positive Change:

- IGWG. *Implementation Guide on Reaching Men to Improve Reproductive and Sexual Health for All* (September 2004).
- IGWG. *The ‘So What?’ Report: A Look at Whether Integrating a Gender Focus Into Programs Makes a Difference to Outcomes* (March 2004).

Tools for Engaging Men in Sexual and Reproductive Health

Work with men has been conducted in all substantive areas of reproductive health. Here are some tools that provide an overview of how to engage men in sexual and reproductive health overall:
Family Planning/Contraception and Other Reproductive Health Services

Family planning programs have perhaps evolved the most, from historically focusing exclusively on women to now involving men as agents of change. Following the 1994 International Conference on Population and Development in Cairo, many programs viewed men as obstacles to family planning and involved them simply as allies in the goal of increasing contraceptive prevalence among women. Gradually, programs emerged that factored in men’s own reproductive health needs, making services more attractive to men, improving men’s access to services and information, and increasing providers’ comfort in working with men.

Program Examples:

Men in Agrarian Settings:

Men as Clients and Community Leaders:
- JHUCCP, PRISM Project Male Motivation Campaign. Impact of a Male Motivation Campaign on Family Planning Ideation and Practice in Guinea (April 2002).

Men as Clients and Partners:
- EngenderHealth. Involving Men as Partners in Reproductive Health: Lessons Learned from Turkey (June 1999).
Family Planning/Contraception and Other Reproductive Health Services, continued

- Reproductive Health Outlook (RHO). *Men and Reproductive Health Program Examples*.

**Programmatic Tools:**
**Men as Agents of Positive Change**

**Men as Clients**

**Research and Evaluation:**
- Hawkes, S. *Sexual Health Exchange 1998, no. 3, “Providing Sexual Health Services for Men in Bangladesh.”*
Maternal and Neonatal Health and Fatherhood

Maternal health is an area in which men can potentially play an important role. Reducing maternal morbidity and mortality necessarily relies on the collaboration of other members of a woman’s household, in addition to health workers and the woman herself. Providing fathers and other family members more information about the health risks involved in the whole process, and clarifying for them the important roles they could fill in identifying and responding to problems, programs can find constructive ways of recruiting men to support women’s reproductive health and to learn more about their own. Men can see to women’s nutritional needs during pregnancy, support women in seeking out prenatal care, and recognize the symptoms of complications.

Program Examples:
- Fathers Direct, a National (UK) Information Centre on Fatherhood (accessed online June 15, 2006).
Maternal and Neonatal Health and Fatherhood, continued

Programmatic Tools:
- CEDPA. *Choose a Future! Issues and Options for Adolescent Boys* (Nov. 1998).

Research and Evaluation:
Male Identities and Roles

Different groups of men face divergent health needs and challenges, and many programs around the world have focused on some of the specific groups. The resources in this section are divided into three sections: 1) young men and socialization, 2) men at work and in uniform, and 3) men who have sex with men.

Young Men and Socialization

The socialization of boys and men into masculinities that can negatively affect their health and that of their partners has increasingly drawn the focus of the reproductive health field. Men’s roles as students, workers, spouses, fathers, and so on, have varying implications for their health and that of those around them. The new appreciation of masculine socialization and its effects on health and well being has led to the development of very interesting work with young men.

Program Examples:

- Panos Institute and UNAIDS. *Young Men and HIV: Culture, Poverty and Sexual Risk* (2001).

Men at Work and in Uniform

Work settings provide important opportunities to reach men with information and services. Men’s identities as workers can also contribute to specific risks. Military training and sports play important roles in socializing boys and men by, among other things, suppressing individuality and personality, promoting a dominance-oriented idea of masculinity, encouraging aggression, and distorting the importance of competition. Thus, working with men of the police and military in promoting awareness and skills-building can be especially fruitful.
**Male Identities and Roles, continued**

**Overview of Issues:**
- UN and the ILO, for the Expert Group Meeting on the Role of Men and Boys in Achieving Gender Equality. *The Role of Men and Boys in the Fight Against HIV/AIDS in the World of Work (Oct. 2003).*

**Program Examples:**

**Men in the military**

**Men in agrarian settings**

**Men at the office**

**Truck drivers**

**Miners and other migrant workers**

**Men Who Have Sex with Men**

**Program Examples:**
- UNAIDS. *Men Who Have Sex with Men* (accessed online June 15, 2006).
Male Identities and Roles, continued

Programmatic Tools:

- IGWG. *Conference on Reaching Men to Improve Reproductive Health for All* (Sept. 2003).
- Naz Foundation International. *Actions for Life: Looking at Developing Sexual Health Services for Males Who Have Sex With Males* (Feb. 1999).
  - Community Mobilizing
  - Developing Community-Based Sexual Health Services for Males Who Have Sex With Males in South Asia
  - MSM and Rights-Based Approach

Research and Evaluation:

STI and HIV/AIDS Prevention, Diagnosis, and Treatment

Men can also play an important role in HIV prevention, treatment, and care. Societal expectations of men's sexual behavior, including early sexual initiation, multiple sexual partners, risky behavior, and aggression in sexual relationships, puts both men and their partners at risk of HIV. The acceptance of a large age gap between men and their female partners provides additional risks of HIV infection to girls and women. Further, men and boys are expected to be knowledgeable about sex, which limits their willingness and ability to access information on HIV prevention. Programs that address these societal norms and expectations can help men take steps to protect themselves and their partners and support them to engage in healthy sexual behavior.

Counseling, testing, and treatment programs can reach out to men to ensure they are being tested and receiving appropriate services. These programs can also work to ensure that men are involved in PMTCT services, and that men are supportive of their partners upon disclosure of serostatus and in accessing and adhering to treatment. Finally, HIV/AIDS programs can engage male partners and other men in the community to share in caretaking responsibilities, thereby easing the burden of caring for people infected and affected by AIDS that disproportionately falls on women and girls.

Overview of the Issues:

- Panos Institute and UNAIDS. *Young Men and HIV: Culture, Poverty and Sexual Risk* (2001).
  - *Addressing the Sexual Cultures of Heterosexual Men: Key Strategies in Involving Men and Boys in HIV/AIDS Prevention*.
  - *HIV Prevention with Men: Toward Gender Equality and Social Justice*.
  - *Men and Boys Can Make a Difference in the Response to the HIV/AIDS Epidemic*.
  - *The Role of Men in the Fight Against HIV/AIDS*.

- UNAIDS. *Men Who Have Sex with Men* (accessed online June 15, 2006).

Program Examples:

- FHI. *HIV/AIDS Interventions With Men Who Have Sex With Men (MSM)*
- FHI, YouthNet. *HIV-Infected Youth* (January 2005).
  - English
  - Spanish
  - French
STI and HIV/AIDS Prevention, Diagnosis, and Treatment, continued

- Population Council. Understanding the HIV/STI risks and prevention needs of men who have sex with men in Nairobi, Kenya (September 2005).

Programmatic Tools:
- CEDPA. The Better Life Options Program for Adolescent Boys in India
- IGWG. Conference on Engaging Men and Boys in RH/Maternal Health/HIV (October 2005).
- IGWG. Conference on Reaching Men to Improve Reproductive Health for All (September 2003).
- Naz Foundation International. Actions For Life - Developing MSM Sexual Health Services (February 1999).
- Naz Foundation International. Community Mobilizing (March 1999).
- Naz Foundation International. Developing A Community-Based Sexual Health Service for MSM in South Asia (August 1999).
- Stepping Stones (July 2004).
STI and HIV/AIDS Prevention, Diagnosis, and Treatment, continued

Research and Evaluation:


Gender-Based Violence

Gender-based violence, including female genital cutting, is increasingly viewed as a serious public health problem. Patterns of violence both reflect and reinforce the gender inequalities that undermine reproductive health and well being. Men have an important role to play in overcoming violence, both toward their own sexual partners and toward others in their communities. Only by changing norms around the acceptability of violence against women can the practice be eradicated.

State-of-the-art programs that work with men to address gender-based violence take a holistic approach, recognizing the importance of involving all members of the community. Programs target policymakers, religious and community leaders, parents, teachers, men, women, and adolescents with the aim of refuting gender-based violence as a social norm. These programs raise awareness about sexual coercion and psychological, physical, and sexual abuse. They train police, provide psychological care and legal referrals, and attempt to change behaviors by challenging existing stereotypical gender roles of manhood.

It is now increasingly common to address GBV in the context of reproductive health programs. This is because 1) reproductive health programs are often the first point of contact for women with the health system; 2) GBV has important direct effects on health; and 3) both violence and reproductive health are affected by the same gender inequities.

Overview of the Issues:

Involving Men in Combating Female Genital Cutting:
- Mossaad, T. *Mobilizing Men Toward Combating Female Genital Mutilation* (September 2003).
- Ouoba, D. *Involving Men to Abandon Female Genital Mutilation. A Community-Based Education Program in Burkina Faso* (September 2003).

Programs:
- EngenderHealth, Men as Partners. *Digital Stories from South Africa*
- FEMNET. *Male Involvement in Programmes to Combat Gender Based Violence: Malawi and South Africa* (September-November 2002).
Gender-Based Violence, continued

- FHI, YouthNet. *Boys and Changing Gender Roles: Emerging Program Approaches*
- IGWG. *Involving Men to Address Gender Inequalities* (July 2003).
- UN and ILO, Expert Group Meeting. *Strategies and Approaches to Enhance the Role of Men and Boys in Gender Equality: Case Study of Yemen* (October 2003).

**Tools:**
- Kaufman, M. *The AIM Framework. Addressing and Involving Men and Boys to Promote Gender Equality and End Gender Discrimination and Violence* (March 2003).
- Ouoba, D. *Involving Men to Abandon Female Genital Mutilation. A Community-Based Education Program in Burkina Faso* (September 2003).

**Research and Evaluation:**
- PAHO. *Research Protocols to Study Sexual and Reproductive Health of Male Adolescents and Young Adults in Latin America* (2000).
- Wassef, Nadia. *Male Involvement in Perpetuating and Challenging the Practice of Female Genital Mutilation in Egypt* in Men’s Involvement in Gender and Development Policy and Practice (pp. 44-51) (2001).
Policy

“Male involvement policy” is elusive, so it may be preferable to begin by articulating principles that acknowledge gender inequities and state the need to involve men in overcoming these inequities in order to improve health for all. A high level commitment of this kind—be it at the national or grass roots level—can be implemented across various sectors. Relatively little has been done through national policy to address the social relationships that limit health and support men’s constructive engagement in sexual, reproductive, and family life.

Policy Examples:

- Policy Project. *From Adding to the Burden to Sharing the Load: Guidelines for Male Involvement for Reproductive Health in Cambodia* (Jan. 2006).

Policy Tools:

- Policy Project. *From Adding to the Burden to Sharing the Load: Guidelines forMale Involvement for Reproductive Health in Cambodia* (Jan. 2006).

Research and Evaluation:

- *Bellagio Statement on Working with Men to End Gender Based Violence* (October 2001).
- POLICY Project. *Challenges and Opportunities for Male Involvement in Reproductive Health in Cambodia* (June 2005).
  - Expert Group Meeting
  - Final Report

Conferences:

- UNFPA. *Programme of Action of the International Conference on Population and Development (ICPD)*, especially Section 4.24-4.29, Male Responsibilities and Participation (1994). See also, [www.unfpa.org/gender/icp_06.htm](http://www.unfpa.org/gender/icp_06.htm).
Policy, continued

**Organizations of Interest:**
- EngenderHealth
- Family Violence Prevention Fund
- Fathers Direct, a National (UK) Information Center on Fatherhood
- Instituto Promundo
- Men Can Stop Rape
- Naz Foundation
- Instituto PAPAI
- Population Council
- Sahayog
- White Ribbon Campaign
- YouthNet

**Acknowledgments**

The literature review and analysis for this IGWG electronic brochure on constructive male engagement were conducted by Margaret E. Greene, Associate Professor in the School of Public Health and Health Services at George Washington University. This work could not have been accomplished without the research assistance of Kara Tureski, and the guidance and support of Michal Avni, Diana Prieto, and Rebecca Callahan of USAID’s Global Health Bureau. Thanks also go to reviewers Harris Solomon, Judith Helzner, Anne Eckman, and Gary Barker. The editing and production of the brochure were done by Charlotte Feldman-Jacobs and Emily Poster of the Population Reference Bureau, with funding from USAID under the BRIDGE project (GPO-A-00-00004-00).

July 2006