Engaging Men for Gender Equality and Improved Reproductive Health

“Men, through their roles in the home, the community and at the national level, have the potential to bring about change in attitudes, roles, relationships and access to resources and decision-making which are critical for equality between women and men…. Men should therefore be actively involved in developing and implementing legislation and policies to foster gender equality, and in providing role models to promote gender equality in the family, the workplace and in society at large.”

– Former UN Secretary General, Kofi Annan

Overview
The importance of constructive men’s engagement (CME) in reproductive health (RH) has taken hold around the world over the past decade. Skeptics are being won over by the preponderance of evidence: unless men are actively engaged in supporting better health and well-being for families and the empowerment of women, progress will remain slow; women will remain vulnerable to reproductive health threats, including gender-based violence; and men themselves will remain trapped in the confining space of traditional masculine norms. These norms, including risk-taking, lack of health-seeking behavior, and emotional distance from women and children, harm men as well as women and children.

These harmful masculine norms can be challenged and changed. Numerous program examples from around the world show that men can be successfully engaged in gender-equitable decisionmaking—sharing responsibility for contraception, supporting safe childbirth, preventing violence, and protecting themselves and their loved ones from HIV and other sexually transmitted infections (STIs). These programs can have enormous payoffs for women, men, and families, but they must reach a much larger audience if they are to have an impact on gender norms, which are societies’ expectations of how men and women should behave. For this to occur, work to promote constructive men’s engagement must move to the policy level, where broader reforms can be defined, implemented, and mandated.

Why Engage Men? A Brief History
A decade ago, “addressing gender” in the context of reproductive health and family planning programs was, by and large, synonymous with the empowerment of women. Women’s health activists, who had fought to get women’s empowerment on the development agenda, recognized the transformative influence that changing gender norms could have on health and human rights, and were concerned that involving men would take resources and attention away from women. When the World Health Organization (WHO) developed a gender training initiative for policymakers and program managers, it focused exclusively on meeting the strategic gender needs of women.

The competition for scarce resources notwithstanding, more women’s health activists have now joined with those promoting CME to acknowledge that gender equality—a balance in the power and
A New Direction

A landmark WHO 2007 report, *Engaging Men and Boys in Changing Gender-Based Inequity in Health*, helped move the field in a new direction. Taking stock of a decade of program interventions involving men, and the extent to which they had been evaluated, the report identified interventions that had been successful or promising in changing men’s attitudes and behaviors, and improving health outcomes for men, women, and children. The investigators found that gender-transformative approaches—which deliberately involve participants in reflecting upon, questioning, and changing inequitable gender norms—were more effective than other approaches in changing attitudes and behaviors. However, the report concluded that, despite successful outcomes, all reviewed studies were short-term or pilot programs and none have been sustained.

One of the main conclusions of the 2007 report is that while there is sound evidence that gender norms can be changed, men must be included in order to achieve a favorable shift in the power imbalances between men and women and to arrive at more equitable and just societies.

Successful constructive men’s engagement would involve creating a social movement for change through:

- **Long-term investment** in reaching boys and young men in their formative years;
- **Far more attention to scale-up and to bringing about structural and policy changes** necessary to promote change on a large scale;
- **Policy initiatives** in which gender equality is established as a new social norm; and
- **Research that assesses the impact of legal and policy changes** on men’s behaviors and norms.

In fact, a broad consensus is now emerging in the gender and development field that change in gender norms at a societal level requires embedding the constructive engagement of men into public policy, through the passage and enforcement of laws, the funding of policy priorities, and through working with key stakeholders and the women’s health and rights movement to achieve common objectives.

Getting Started on Policy Change

A policy is a set of coherent decisions with a common long-term purpose. A public policy has been described as a set of laws, regulatory measures, course of action (or inaction) and funding priorities chosen by public authorities to address a problem or interrelated set of problems.

**USAID’s Support for CME**

1995: USAID’s internal Task Force on Gender recognized that women’s ability to prevent unintended pregnancies, have safe deliveries and healthy birth outcomes, and protect themselves from HIV and other STIs often depends on the cooperation, if not the consent, of their male partners.

1996: USAID surveyed its cooperating agencies on the extent to which men’s roles were considered in implementing family planning (FP) and reproductive health (RH) programs. The survey revealed that nearly all programs were tailored to reach women, and few engaged husbands, fathers, and sexual partners.

1997: USAID launched the Interagency Gender Working Group (IGWG) and convened a Subcommittee on Men and Reproductive Health. Thirty-five international organizations met quarterly with USAID colleagues for a number of years to debate, develop strategies, and share knowledge on how to constructively involve men in reproductive and maternal health programs for the benefit of women, children, and men themselves.

1997-2003: The Men and RH Subcommittee developed guidance for the field on gender-sensitive men’s involvement in family planning, safe motherhood, HIV/AIDS programs, fatherhood, and adolescent programming. USAID cooperating agencies increasingly implemented programs that aimed to foster behaviors in which power, privilege, and responsibility were more equitably shared between men and women.

2003: USAID and the Men and RH Subcommittee hosted an international conference to share best practices, operations research, pilot programs, and alliances promoting positive men’s engagement in RH.

2006: IGWG compiled a decade of research and programmatic guidelines into an electronic brochure, *SysteMALEtizing Resources for Engaging Men in Sexual and Reproductive Health*. Constructive men’s engagement (CME) was defined as the aim to involve men in reproductive health in three overlapping roles: as clients of RH services; as supportive partners to women; and as agents of change in the family and community.
Policy changes are often a response to social needs as well as to social justice and claims and concerns raised by experts and advocacy groups. But there are many steps between identifying the need and achieving effective action (see Figure 1).

A “policy scan”—a review of existing policies, laws and practices related to sexual and reproductive health and rights—is often the appropriate starting point. Once the policy landscape is known, advocates can raise awareness of laws aimed to promote better sexual and reproductive health that are not enforced, as well as areas where new legislation needs to be drafted. In April 2009, nearly 500 participants met in Brazil at the Global Symposium on Engaging Men and Boys to exchange lessons learned in their work and to set a strategic agenda. The resulting Rio Declaration urged the elimination of any policies that are inherently gender-inequitable:

“Governments should repeal all discriminatory laws and act on their existing national, international, and UN obligations and commitments, prioritize and allocate resources to gender transformative interventions, and develop policies, frameworks and concrete implementation plans that advance this agenda [of engaging men and boys to achieve gender equity].

The Rio Declaration, April 3, 2009

Promising Policy Initiatives

At the policy level, constructive engagement of men is still in its infancy. Cambodia was among the first countries to examine existing policies regarding men’s involvement in sexual and reproductive health, starting in 2003. This effort, initiated by civil society, led to the formulation of national guidelines for constructively engaging men. The report of the policy scan rightly observed that while national policies provide a vision and framework for moving forward, they need to be implemented and put into action through multi-sectoral programs and operational policies—the regulations, resource allocation, and systems that link laws and policies to programs. Government buy-in is essential.

The four promising policy initiatives below illustrate components of the policy process, particularly data gathering and analysis, policy scans, alliance building, strategy development, and action planning. Over time, these initiatives have the potential to create transformative change in the laws and policies that govern relationships between men and women.

Men and Gender Equality Policy Project (MGEPP) – Providing the evidence base for national and global accountability. This project is a collaborative effort among organizations based in a number of developing countries as well as in Norway. Its objective is to provide policymakers and program planners with data and feasible strategies to achieve large-scale change in men’s attitudes and behaviors relating to sexual and reproductive health, gender-based violence, fatherhood, maternal and child health, and men’s roles as caregivers. Strategies will be informed by the International Men and Gender Equality Survey (IMAGES), a stratified survey of randomly selected households, carried out in 2009 in Brazil, India, Chile, Mexico, Croatia and South Africa. Surveys will be carried out in 2010 in Bangladesh, Cambodia, and Rwanda. Adapted in part from Norway’s Gender Equality and Quality of Life Survey and the WHO Multi-country Study on Violence against Women, IMAGES surveys men and women (ages 18-59) about men’s attitudes and behaviors on a wide range of issues. Preliminary findings show that care giving and household tasks still remain strongly divided by gender; some men would like to be more involved in the care of their children but are hampered by lack of paternity leave policies; and perpetration of violence is associated with a childhood experience of violence, men’s belief in inequitable gender norms, and men’s economic disempowerment, stress or shame due to under- or unemployment. In addition to supplying evidence of where policy change is needed, IMAGES will provide an important baseline for measuring changes in social norms and behaviors over time as policy changes are enacted.
MenEngage Alliance – Building networks to support evidence-based advocacy and action. More than 400 organizations in sub-Saharan Africa, Latin America and the Caribbean, North America, Asia, and Europe have formed this Alliance to further CME efforts around the world. In October 2009, the Alliance sponsored a symposium in South Africa, “Strengthening Capacity of Civil Society and Government to Work with Men and Boys on Gender-Based Violence and HIV.” The symposium brought together activists, policymakers, service providers, and researchers working on gender, HIV, health, development, and human rights to produce clear country- and region-specific action plans to facilitate policy dialogue and advocacy and promote implementation of new policies to address these issues.

Men as Partners (MAP) – Mobilizing leaders to promote national dialogue and reform policies and law. In Tanzania, where this international program has been active since 1996, a scan of key health policy documents revealed that the government commitment to men’s engagement was evident only in relation to its national HIV policies. However, this provided an opening to advocate for greater men’s engagement in other health-related policies. MAP’s CHAMPION Project is mobilizing men to “redefine” what it means to be a man, and take an active stance for gender equality. CHAMPION promotes a national dialogue about gender roles, encouraging gender equitable beliefs and behaviors, and strengthening national policies and laws with relevance to gender. The CHAMPION workplace program is supporting the development of employer policies that provide more comprehensive HIV and RH services to men. CHAMPION also engages with district-level health offices to make men’s HIV services more accessible and of higher quality. At the national level, CHAMPION is currently working with the National Ministry of Health to include a new module on clinical HIV services for men within the national HIV Voluntary Counseling and Testing training curriculum and the National PMTCT Services training curriculum.

The “Men- Let’s Be Accountable” campaign asks men to do specific things to benefit society and promote gender equity. With high rates of HIV among pregnant women, prevention of mother-to-child transmission of HIV (PMTCT) is an important national priority. Accompanying female partners to PMTCT centers was prioritized as a critical and concrete stop that men can take to support their partners and protect offspring. Providers are trained to offer male-friendly couple counseling and men are trained as facilitators for family health. MAP is a key member of the MenEngage Alliance, and CHAMPION’s future policy agenda will include advocating for national policies to engage men in preventing gender-based violence.

Sonke Gender Justice Network – Implementing actions to hold government accountable for policies to promote gender equity. Established in South Africa in 2006, Sonke Gender Justice now works across Southern Africa on policy reform, especially related to the intersection of HIV and gender-based violence. In South Africa, Sonke is both challenging national policies that support traditional male gender norms and advocating for the enforcement of policies and strategies that were developed in response to the harmful legacy of apartheid. Although the South African government declared in 1994 that achieving gender equality was a national goal, Sonke has drawn attention to the government’s failure to achieve that objective, including its ineffective efforts to reduce the highest reported incidence of rape of any country.

Sonke Gender Justice undertook an extensive analysis to review laws and policies related to homicide, domestic and sexual violence, firearms, gangs and organized crime, incarceration, juvenile justice, alcohol and substance abuse, violence in the media, employment, HIV and health policy, including male circumcision. The findings reveal that, despite the constitutional commitment to gender equality, some policies perpetuate traditional masculinities, while others, such as the national HIV/AIDS strategic plan, acknowledge the importance of gender but fail to offer any specific policy guidance. Sonke argues that policies must be aligned with the government’s stated goals and commitments:

“Public policy is generally geared to limit, constrain or punish men’s behavior. Much less often is policy framed as providing an opportunity to change constructions of masculinity in a positive way as part of a broader social project of building gender equality in society through constructive engagement of men and boys.”

Sonke is now challenging the South African government to live up to international agreements such as CEDAW and the Beijing Platform of Action, to pass national gender legislation, and to provide clear budgetary allocations for enactment and enforcement of these more progressive policies.
Recommendations

To bring constructive men’s engagement to scale, societies must enact and enforce legislative and institutional changes that eliminate harmful gender norms. Creating lasting social change requires fostering alliances within and outside of legislative bodies, holding governments accountable for commitments to international agreements and to constitutional law, and enacting new gender transformative policies and legislation. Policy and advocacy audiences are encouraged to:

Engage in dialogue from the beginning
Reach out to gatekeepers who may act as roadblocks to change; Include sectors of the government outside of health, including Ministries of Labor and Education, to develop and implement a multi-sectoral CME approach.

Build a sustainable social movement
Valuable partnerships can be created among civil society, other social justice movements, and the private sector, including industries that employ primarily men. Speak with a unified voice and seek statements of support from leading organizations.

Ensure support of women’s rights organizations
Work collaboratively on policy positions and actions with women’s groups to achieve common gender quality objectives and to demonstrate that women support and welcome these efforts.

Align with networks
International organizations promoting policy change for gender equity and men’s accountability, such as the MenEngage Alliance and the White Ribbon Campaign, offer guidance on developing action plans and overcoming challenges. Alignment adds visibility and credibility to local and national efforts.

Appeal to men as partners, fathers, and members of society
Drawing attention to men’s roles as responsible facilitators rather than obstacles to improved health, highlights the social benefits of constructive men’s engagement for men as well as their families and communities.

Enlist cultural icons and authoritative agents of change
Capitalize on normative change that is already underway. Promote progressive role models by enlisting support from representatives of media and popular culture as well as coaches, teachers, and religious leaders.

“STEP BY STEP” TO DEVELOP AND SCALE UP CME POLICIES IN MALI

Mali, a country with enormous health challenges, provides a model of the policy reform process to constructively engage men. Women in Mali are largely illiterate (83 percent), and have limited autonomy to make decisions, including in regard to their own reproductive health. Only six percent use a modern method of contraception, and the birth rate remains among the highest in Africa, an average of six births per woman. But the policy environment is shifting, as political and religious leaders have increasingly voiced support for family planning and reproductive health. Over the course of several years, multiple organizations and stakeholders have come together on this effort, drawing on each others’ expertise and skills to engage men and improve reproductive health.

- In 2003-4, the USAID mission brought in the IGWG to provide gender training for its staff and partners, sparking interest in the role of men in reproductive health in Mali;
- In 2005, the Mission’s Gender Strategy highlighted CME to improve health;
- In 2006, the Health Policy Initiative (HPI) conducted an assessment, and a stakeholders group was formed to support the development of national CME guidelines.

- In 2007, with the Ministry of Health (MOH) on board and the Cambodian CME policy as a model, an advisory group drafted guidelines for engaging men in RH. The IGWG training module on constructive male engagement was used to train program implementers from international and national civil society and faith-based organizations as well as staff from the Ministries of Health, Women, and Youth;
- In 2008, the MOH approved the draft national CME guidelines. The guidelines were a result of the years of collaboration between the MOH and various partners, including the National Technical Assistance Project (ATN), Futures Group, HPI/Mali, IntraHealth, and private consultants. A training of trainers was piloted with a RH program implemented by Care International.

With the receptivity of the country’s leaders to improve RH and the sustained interest of USAID Mission personnel committed to gender equity, multi-sectoral support was built for constructive men’s engagement. While implementation and effectiveness of the National CME Guidelines must be monitored, policy reform in Mali has the potential to offer important lessons for future policy reform efforts.19
Use data effectively
Data on the social and economic costs of harmful male gender norms can be powerful. Demonstrate to legislators that CME leads to improved health outcomes and saves money. Document, e.g. through IMAGES survey data, the health and social benefits of more equitable relationships between men and women.

Measure accountability
Routinely monitor the implementation of policy changes, and evaluate whether social norms and health outcomes are changing over time. Maintain ongoing dialogue with policymakers.

Conclusion
Policy solutions need to embrace gender equity as a defining principle; to ensure that laws, policies and programs apply to all people, and will be implemented in such a way that the unbalanced allocation of resources and power between men and women, boys and girls, and between different social groups is addressed. Policy work to support the constructive engagement of men in reproductive health is only beginning in most countries, including many developed countries. With clear guidance that CME advances gender equity, and with useful models and policy guidelines to adapt, this work can be expected to advance more quickly. A more equitable future is in sight.

For More Information
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Endnotes
4 See www.igwg.org/Publications/Systemalitizing.aspx.
9 See www.menengage.org/symposium2009_rio.asp.
12 See www.menengage.org.
13 See www.genderjustice.org/za/menengageafricasymposium.html.
15 The Champion Project is a five-year project of EngenderHealth/Tanzania, funded by USAID, through PEPFAR.
20 These recommendations draw from the work of the organizations profiled in this brief, and from ICRW and Instituto Promundo. See www.icrw.org/docs/Engaging_Men_and_Boys_to_Achieve_Gender_Equality.pdf
21 The Canada-based White Ribbon Campaign works in 60 countries to end men’s violence against women. See www.whiteribbon.ca.

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