DO’s & DON’Ts for engaging men & boys

What should you do, and not do, when engaging men & boys in promoting health and gender equity? This resource brings together recent best practices and lessons learned for male engagement across health areas. It is intended to inform decision-making about programs, policy, media coverage, and funding priorities.

Why should you engage men & boys? Because they have their own distinct health needs and vulnerabilities, and because engaging men can benefit everyone—including women and girls. The reality is that inequalities in social value, power, and opportunities of men and women have provided men with many advantages, while at the same time men are disproportionately affected by many health challenges (e.g., homicide, alcohol abuse). Confronting both issues requires a careful balance, and the guidance below seeks to provide practical suggestions around how to do this.

DO recognize and meet men’s distinct needs.

• Engage men and boys in ways that acknowledge and meet their unique needs—as clients, as partners, and as agents of change.
• Don’t overlook men and boys as clients, including within reproductive health programs. Men often access health services later than advised (including for HIV/STIs), which can lead to adverse outcomes and high mortality rates.
• Take into account the high rates of violence, depression, and substance abuse men experience, linked to harmful norms around masculinity. Ideally, seek to prevent these experiences, through intervention and legal/policy reform.

DON’T engage men at the expense of women.

• Ensure that male engagement efforts do not compromise women’s safety and ability to make decisions and access services. Track this carefully.
• Pay particular attention to any potential increases in gender-based violence; know referral pathways to provide adequate support to survivors.
• Provide sufficient staff training—including refresher training—around how best to balance engaging men and women, and monitor programs to make sure that women aren’t left out.

DO seek to transform harmful gender relations and norms.

• Recognize that some common gender norms and dynamics are harmful.
• Implement programs that explicitly seek to shift gender norms—called “gender transformative” programming—which are more effective in improving health outcomes than those that do not (see link to resources on the back). Investing in transforming gender norms can also be cost-effective and improve program sustainability.
• Engage men in caregiving as a powerful entry point for transforming gender relations and norms.

DON’T discount the structural barriers men face when accessing health services.

• Ensure privacy, convenience (e.g., after-work hours), and a welcoming environment (e.g., staff prepared to receive men). Like other clients, men need options and information that meet their needs.
• Don’t assume that health facilities are necessarily the best place to provide health services. Often, community-based services can best reach men.
• Advocate for policy change that breaks down structural barriers preventing men from accessing services.
**DO** gather evidence with men and boys (and not just women and girls).
- Speak directly to men and boys, in addition to women and girls, when designing a male engagement program/policy or evaluating its effects.
- Seek to understand the kinds of issues raised in these DO’s and DON’Ts: for example, diversity and needs across the life course, structural barriers to accessing services, and the impact of transforming gender norms.
- Ensure that all research follows ethical standards, especially around sensitive subjects like relationship violence.
- Use the research tools and measures already available whenever possible.

**DON’T** start with the assumption that all men are bad actors.
- It is counter-productive to hold negative assumptions about men as a group, even though men who engage in harmful behaviors like partner violence must be held accountable.
- Find and amplify the voices of men who support gender equity and those who are positively changing.
- Engage men and boys in recognizing how restrictive masculine norms negatively affect their own health and well-being, as well as that of partners, children, and families—and how moving away from these norms can benefit everyone.

**DO** start early in the life course.
- Start building equitable gender norms in childhood to promote healthier decision-making later in life. Messages about men’s and women’s expected roles and behavior are internalized starting early in life.
- Ensure boys’ and young men’s access to mentors who endorse equitable gender norms and model healthy behavior.
- Implement evidence-based interventions to prevent and address children’s exposure to adverse experiences like violence and trauma, which are common among both boys and girls. These experiences affect men’s and their partners’ health outcomes later in life.

**DON’T** overlook the diversity of men and boys in the population.
- Design programming and activities to reflect critical dimensions of men’s diversity, such as gender identity, sexual orientation, race/ethnicity, fatherhood, class, religion/faith, and age.
- Intervene during transformative moments in the life of men and boys (e.g., puberty, school graduation, marriage, parenthood), when their needs and outlooks are changing.

**DO** engage men on their own and in groups of men, as well as together with women.
- Consider implementing male-only groups as spaces for men to consider harmful gender norms and the benefits of change, as well as to freely discuss sensitive topics, express worries, practice healthy communication, and seek advice.
- Avoid ONLY engaging men in male-only spaces, which can reinforce inequitable gender norms. Ensure opportunities for men and boys to engage in dialogue that includes women and girls.
- Seek to build skills around positive communication and shared decision-making among genders within couples and families, in all program activities.

**DON’T** overlook scale and sustainability for achieving impact.
- Consider how to reach entire populations or communities and how to sustain those efforts over time.
- Seek to build effective male engagement strategies into policies, institutions, and systems—for example in healthcare, education, the workplace, and government.
- Use one of the existing, evidence-based male engagement strategies and activities whenever possible.

For more resources, visit [www.igwg.org/priority-areas/male-engagement](http://www.igwg.org/priority-areas/male-engagement)


This document is made possible by the support of the American People through the United States Agency for International Development (USAID). The contents of this document are the sole responsibility of the authors and do not necessarily reflect the views of USAID or the United States Government.