Introduction

Although family planning historically has been considered the sole domain of women, the paradigm is shifting. Recent research offers compelling evidence that men and boys have an important role to play in family planning, both to meet their own reproductive health needs and to support and facilitate their partner’s access and use.

Gender norms and other power dynamics influence how women and men access, use, and make decisions about family planning methods. Women and girls may lack the autonomy, mobility, and/or resources to obtain family planning services; may face discrimination from healthcare providers; or may experience family and community pressure related to family planning. Men and boys may perceive that health facilities are not male-friendly, may feel uncomfortable discussing fertility preferences and contraceptive methods with their partners, or may be influenced by norms that say family planning is the woman’s responsibility. Given these realities, engaging men and boys is imperative to ensure that everyone who wants it can access and use family planning, and to continue to change unequal gender and power dynamics. Male engagement improves not only women’s and girls’ health and wellbeing, but also the health of men and their children.

Policy is an essential lever for expanding demand for and access to family planning. However, there is a dearth of literature about effective policy approaches to build support for and facilitate engagement of men and boys as contraceptive users, as supportive partners for family planning, and as agents of change. To strengthen policy approaches to engage men and boys in family planning, the Health Policy Plus (HP+) project, funded by the U.S. Agency for International Development (USAID), developed a policy framework for male engagement. This brief provides an overview of the framework and shares examples of how it can be applied to strengthen the enabling environment for male engagement.

Development and Summary of the Policy Framework

To develop the male engagement policy framework, HP+ interviewed global experts in male engagement and family planning to collect input on policy frameworks and new research on, and good practices in, male engagement in family planning and reproductive health. Next, HP+ conducted a literature review of international policy guidelines, frameworks, and tools to identify approaches and emerging best practices for engaging men and boys as family planning clients, as supportive partners, and as
agents of change. The literature search included publications written in English and published between January 2009 and December 2019. HP+ searched “family planning” in combination with “male engagement,” “men as users,” “supportive partners,” “agents of change,” and “gender equity.” Additionally, the review included a set of pre-identified documents from donors, implementing partners, and peer-reviewed journals. HP+ extracted policy recommendations and evidence-based practices on engaging men and boys in family planning from the literature and categorized the information to develop the framework.

The male engagement policy framework is organized around men’s and boys’ three overlapping roles. It includes 27 policy provisions that influence men’s and boys’ participation in family planning and seven principles for male engagement. The framework can be used as a resource for policymakers to design policies that support male engagement in family planning. It can also be used as a policy analysis tool to identify strengths and gaps in global, national, and subnational policy environments related to male engagement. It is not expected that a single policy will encompass all the provisions found in the male engagement framework. Rather, the framework describes a supportive policy environment for male engagement, representing the range of actions that can be incorporated into a set of policies, laws, strategies, and guidelines to create that environment. The following section provides a narrative summary of the framework. A discussion about how the framework can be applied to strengthen the enabling environment for family planning follows. Finally, the full framework is presented.

**Men and Boys as Family Planning Clients**

Policies engage men and boys as family planning clients when they focus on meeting men’s and boys’ unique needs as family planning users. These policies seek to create an environment that provides men with accessible and affordable male-friendly services and information, including for vasectomy. Examples of qualities of male-friendly services include nonjudgmental attitudes from providers, confidentiality, inclusion of community-led services, flexible operating hours, affordability, and informed consent. Policies that engage men and boys as family planning clients include strategies to strengthen the capacity of the health system to provide high-quality male-friendly services by training health workers and increasing the number and distribution of male health workers. Service delivery is guided by clinical guidelines to assess and address men’s and boys’ family planning needs, including counseling on topics such as male and female methods for preventing pregnancy, preconception health, infertility, and sexuality and relationships.

“Men and boys are FP [family planning] users when they use male-controlled modern contraceptive methods (i.e., condoms and vasectomy) or a cooperative modern contraceptive method that requires participation from both partners (e.g., the Standard Days Method).” (USAID, 2018, p. 7)
Men and Boys as Supportive Partners

Policies that engage men and boys as supportive partners recognize the importance of a couple’s shared responsibility for contraception and of relationships built on respect and mutual trust. They use strategies to include men and boys in family planning programs in a way that supports, rather than compromises, women’s autonomy and decision making. They ensure providers are trained in couple’s counseling, including how to recognize controlling and coercive behavior. Policies that engage men and boys as supportive partners also use strategies to educate men and boys on women’s reproductive health rights and they direct programs to provide opportunities for men and boys to build empathy for women’s and girls’ concerns regarding family planning. They also recognize men’s and boys’ roles in caregiving and include strategies to promote male caregiving and positive parenting skills.

“Men and boys are agents of change when they use their social capital, status, or power to take public action outside of their intimate sexual relationships to address barriers to FP and contraception, particularly those related to harmful gender norms and inequalities.” (USAID, 2018, p. 10)

Men and Boys as Agents of Change

Policies that engage men and boys as agents of change use strategies to engage men and boys as advocates and influencers to challenge unequal gender and power dynamics. Such policies direct programs to engage male role models and advocates to clarify misconceptions associated with male-specific reproductive healthcare and to encourage other men to take responsibility for developing healthy families. They direct community-based programs to support individual and community reflection on social norms and expectations related to reproductive health, family size, caregiving, and contraception. Policies direct programs to engage men who are in leadership and influential positions to publicly encourage other men and boys to take an active role in supporting their own reproductive health and that of women and girls.

“Men and boys are supportive partners when they have a positive impact on their partners’ FP choices and contraceptive use through increased couple communication and equitable, joint decision-making, resource provision for FP services, and/or support for continued use.” (USAID, 2018, p. 9)

Principles for Male Engagement

Policy frameworks that engage men and boys in family planning are guided by seven underlying principles. The principles cut across men’s and boys’ three roles in family planning. They aim to ensure that policies address men’s family planning needs while protecting women’s decision making and autonomy. The principles also include evidence-based programmatic approaches, such as using multisectoral and integrated approaches, that lead to improved family planning and gender outcomes.
PRINCIPLES FOR MALE ENGAGEMENT

Do no harm: Meet men’s and boys’ needs while respecting women’s autonomy.

Positive engagement: Involve men and boys from a positive perspective.

Rights-based: Provide men and boys with equitable access to voluntary, high-quality family planning services that provide informed choice for men and boys to meet their health needs.

Reproductive empowerment: Recognize that men’s and boys’ ability to choose whether, when, and how many children to have has long-term impacts on their own lives.

Youth: Use an age-appropriate, life-stage approach tailored to cultural contexts.

Multisectoral approach: Use multisectoral and integrated programs.

Monitoring and evaluation: Include measures to track differential impacts of family planning policies and programs by gender.

Application

HP+’s male engagement policy framework is a tool that can be used to inform policy development and support policy assessment and monitoring. When designing or updating policies, policymakers can use the framework as a resource to identify specific strategies for engaging men and boys in family planning that can be incorporated.

The framework can also be used as an analytical tool to help users uncover strengths and gaps in the policy environment for male engagement. For example, HP+ used the framework to conduct a global policy analysis of national health and gender policies from 26 USAID family planning priority countries (see DeGraw and Rottach, 2021). HP+ also used the framework to conduct a deep dive assessment of the policy environment for male engagement in Nepal and Bangladesh. In these three analyses, HP+ analyzed the text of the policies to assess the extent to which they adhered to the standards in the male engagement policy framework and to identify policy barriers and enablers. Findings across the three studies showed that while governments consistently positioned family planning as a central priority for improving the health and wellbeing of the population, it was often framed as a woman’s issue with targeted strategies to improve their access and availability to contraceptives and care, with little attention given to men’s and boys’ roles. The results of the analyses can be used to advocate for improved policies that support engagement of men and boys in family planning.

Conclusion

The male engagement policy framework documents recommended policy provisions that strengthen a supportive environment for engaging men and boys in family planning programs and services. The framework can be used by policymakers and advocates to strengthen the policy environment for engaging men and boys in family planning, create better entry points into the health system for this population, and contribute to improved gender equality. Men’s and boys’ engagement improves not only women’s and girls’ health and well-being, but also men’s health and the health of their children.
MALE-FRIENDLY SERVICES

Policy explicitly mentions men and boys as important recipients of reproductive health services, positioning men and boys as family planning clients (Thomson-de Boor and Shand, 2013).

Policy ensures an accessible, affordable, and patient-centered environment, stipulating that male-friendly family planning services have the following qualities: nonjudgmental attitudes from providers, comprehensive holistic services, confidentiality, choice of knowledgeable service providers, inclusion of community-led services, flexible opening hours, affordability, combined fixed-site and mobile outreach, and informed consent (IPPF and UNFPA, 2017).

Policy describes actions to build the capacity of healthcare workers to provide high-quality, male-friendly family planning services (PMNCH, 2013).

Policy describes actions to increase recruitment and geographic distribution of male health workers for accessible care (PMNCH, 2013).

Policy directs family planning programs to reach men with family planning services and messages at places where men meet (i.e., at workplaces, places of worship, sports gatherings, and other community venues) (Hook et al., 2018).

The range of methods covered under insurance schemes cover short-acting, long-acting reversible, and permanent contraceptive methods (including vasectomy) to ensure that women and men have access to their preferred method (USAID, n.d.).

Policy includes information, education, and communication strategies to increase men’s and boys’ knowledge of family planning and encourage men and boys to access family planning services (e.g., strategies to provide accurate information to counter myths and misperceptions, to positively influence men’s and boys’ attitudes toward condom use, and to positively influence men and boys to have open discussions regarding sex and contraception options with their partners) (Sonke Gender Justice, 2015).

Policy specifically includes strategies to address gender norms that affect men’s and boys’ use of contraceptive methods (Sonke Gender Justice, 2015).

Policy ensures that male and female condoms are readily available for men, boys, women, and girls, and widely distributed to both in various community settings (IPPF and UNFPA, 2017).
VASECTOMY
Policy requires vasectomy services to provide pre-vasectomy counseling, to inform men about the effectiveness of vasectomy and potential side effects/complications, to clearly articulate the degree of permanency, and to explain that this method does not provide protection from HIV and other sexually transmitted infections, ensuring informed choice before proceeding with the procedure (IPPF and UNFPA, 2017; Shattuck et al., 2016).

Policy does not require unnecessary eligibility requirements (including partner’s consent), tests, preconditions, or waiting periods before undergoing vasectomy and policy notes that a vasectomy can be performed any time a man requests it if there is no medical reason to delay (WHO/RHR and CCP, 2018; WHO, 2016).

Policy allows associate clinicians and doctors to provide vasectomies as part of established competencies, noting that guidelines recommend against provision by lay health workers as it is outside their established competencies (WHO, 2017).

To ensure affordability, policy guarantees that vasectomy costs for marginalized populations are covered through public funding and policy allows reimbursement rates that are high enough to retain vasectomy providers or mandate insurance coverage of vasectomy without cost sharing (White et al., 2017).
MEN AND BOYS AS SUPPORTIVE PARTNERS

SHARED RESPONSIBILITY AND JOINT DECISION MAKING
Policy includes strategies to train staff to be able to counsel couples and recognize possible controlling or violent behavior by a partner (UNFPA and EngenderHealth, 2017).

Policy directs family planning services to create safe spaces where men and women can be provided with family planning services and information together, if a woman chooses to include her partner (IPPF and UNFPA, 2017).

Policy recognizes the importance of shared responsibility for contraception (USAID, 2018).

Policy recognizes the importance of relationships between men and women that are based on mutual trust, respect, ownership of decisions and their outcomes, shared benefits, and equal opportunities (UNFPA and EngenderHealth, 2017).

Policy uses strategies that include men and boys as partners to support women's and girls' reproductive health in a way that supports rather than compromises women's and girls' decision making (Sonke Gender Justice, 2015).

INFORMATION AND EDUCATION
Policy recognizes the need for increased education on women's and girls' reproductive health and rights and provides strategies to provide this education (Thomson-de Boor and Shand, 2013).

Policy directs programs to provide opportunities for men and boys to build empathy for women's and girls' challenges and issues (USAID, 2018).

CAREGIVING
Policy recognizes men's and boys' role in caregiving and includes strategies to promote caregiving and parenting skills among men and boys (Glinks, et al., 2018; UNFPA and Promundo, 2010; Kato-Wallace et al., 2016). Policy recognizes men's and boys' potential role as supportive partners (Thomson-de Boor and Shand, 2013).
MEN AND BOYS AS AGENTS OF CHANGE

ADVOCATES
Policy directs family planning programs to engage and train male role models and family planning advocates—these men can assist in demystifying myths associated with male-specific reproductive services and encourage other men to take responsibility for the development of healthy families (Open Hearing of the New Zealand Parliamentarians’ Group on Population and Development, 2015).

INFLUENCERS
Policy directs community-based programs to support individual and community reflection on norms, expectations, and roles pertaining to reproductive health, family size, caregiving, and contraception at different life stages through community group engagement (HIPs, 2018).

Policy directs programs to engage men in leadership positions in government and community life to publicly encourage other men and boys to take an active role in supporting their own sexual and reproductive health and that of women and girls (IPPF and MenEngage, 2010; Sonke Gender Justice, 2015).
PRINCIPLES FOR MALE ENGAGEMENT

**Do no harm:** Policy includes statements that programs involving men and boys should do no harm to women (UNFPA and EngenderHealth, 2017); policy aims to meet men’s and boys’ needs while respecting women’s autonomy, guaranteeing women the choice as to whether to include their partners in reproductive and sexual health counseling, service delivery, and treatment (HIPs, 2018; UNFPA and EngenderHealth, 2017).

**Positive engagement:** Policy directs programs to involve men and boys from a positive perspective, understanding that they can play a positive role in their partner’s health and in their own sexual and reproductive health (UNFPA and EngenderHealth, 2017).

**Rights-based:** Policy stipulates that men and boys have equitable access to voluntary, high-quality family planning services that provide full, free, and informed choice for men to meet their reproductive health needs (FP2020, n.d.; Newman and Feldman-Jacobs, 2015).

**Reproductive empowerment:** Policy recognizes that men’s and boys’ ability to choose when to have children and how many to have has long-term impacts on their own lives (such as the effect of unintended pregnancies on men’s education level, working ability/level, caregiving capacity, and well-being) (Edmeades et al., 2018).

**Youth:** Policy directs programs to utilize an age-appropriate approach tailored to youth and adolescent-specific needs, cultural contexts, and life stages (e.g., adolescent male-friendly services, community-based distribution of information and condoms or distribution from condom outlets, and free or subsidized family planning services for young men). Furthermore, policy directs programs to use gender-transformative comprehensive sexuality education for adolescents to build healthy sexual and reproductive health attitudes and behaviors¹ (Hook et al., 2018; MenEngage Alliance, 2017; USAID, 2018).

**Multisectoral programs:** Policy utilizes multisectoral and integrated programs (combining community norms outreach, mobilization, and mass-media campaigns with group education) (PMNCH, 2013; UNFPA and EngenderHealth, 2017).

**Monitoring and evaluation:** Policy includes measures to track the differential impact of family planning policies and programs on women/girls and men/boys (HIPs, 2018).

¹ Gender transformative programs address the causes of gender-based inequalities and work to transform harmful gender roles, norms, and power relationships.
References


