

# Know, Care, Do

A Theory of Change for Engaging Men and Boys in Family Planning



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## Acronyms

<b>FP</b>	Family planning
<b>SRH</b>	Sexual and reproductive health
<b>TOC</b>	Theory of change
<b>USAID</b>	United States Agency for International Development

# Introduction

Engaging men and boys in family planning (FP) and sexual and reproductive health (SRH)<sup>1</sup> can improve their own lives and those of their intimate partners, families, and communities. Evidence shows that engaging men and boys in FP/SRH programs can decrease unintended pregnancy, improve maternal health, reduce sexually transmitted infections such as HIV/AIDS, and advance gender equality (Hook et al., 2021; Rottach et al., 2009). Though progress has been made to engage men and boys more effectively in FP/SRH programs, most programs continue to do so in incomplete ways. For example, programs that pay limited to no attention to gender and power dynamics can reinforce existing inequitable

decision-making patterns and power structures that reduce the agency<sup>2</sup> of women and girls. Most FP/SRH programs also have a heteronormative focus (see Box 1). Furthermore, programs often emphasize the benefits of engaging men and boys as supportive partners of women and girls but do not meaningfully engage them as clients or users themselves or as agents of change for gender equality. FP/SRH programs also tend to focus on individual, household, service delivery, or community factors while overlooking broader gender and other social norms and influencing factors at the societal and institutional level, including key institutions<sup>3</sup> like health and education systems.

## Box 1. Gender and Gender Identities

Discussion of FP in this document focuses exclusively on heterosexual relationships between cisgender\* people due to the predominance of this relationship type around the globe and in existing FP programming. The authors acknowledge the inherent limitations of this heteronormative lens and its real-world implications for sexual and gender minority groups. More work is needed to better understand the unique experiences, priorities, needs, and preferences of men and boys across a diversity of gender identities/expressions and sexualities in FP programming. Programmers are encouraged to consider how this theory of change might apply to men and boys across relationship types, gender identities/expressions, and sexualities in contexts where they implement FP programming to ensure these programs reach as many men and boys as possible.

*\*Cisgender refers to a person whose gender identity aligns with their sex assigned at birth. For example, cisgender men are people who identify as men who were also assigned male at birth.*

- <sup>1</sup> Engaging men and boys in FP is not always the same as engaging them in broader SRH programs. However, the contents of this theory of change are relevant to both. The authors have sought to be explicit about instances where FP is the precise focus.
- <sup>2</sup> Agency is broadly defined as “the capacity for purposive action that draws on social and material resources at multiple levels to realize preferences and choices, enhance voice, and increase power and influence” (Edmeades et al., 2018).
- <sup>3</sup> The use of key institutions here is informed by the field of sociology where key institutions in society are understood to include these: economy, education, family, health care, religion, and government.

The failure to engage men and boys more meaningfully in FP/SRH programs reflects an internalization (e.g., individual values, attitudes, and beliefs) and institutionalization (e.g., laws and policies, health and education systems) of restrictive gender norms and roles that uphold reproduction (e.g., fertility, pregnancy, childbearing) and reproductive labor (e.g., household and childbearing responsibilities) as issues that primarily concern women. It also reflects the challenges of engaging with men and boys on these issues without threatening the reproductive rights of women and girls. As a result, programmers who want to engage men and boys in FP/SRH programming often have limited guidance on which issues to focus on, which groups of men and boys to work with, and how to best partner with them.

This document addresses this gap by presenting a broad theory of change (TOC) that aims to move the field toward reproductive empowerment for all (see *Box 2*). **The TOC for engaging men and boys in FP broadly describes the key drivers of men’s and boys’ engagement, critical intervention features to address these drivers, anticipated changes from the interventions, and how these changes shape and influence men’s and boys’ engagement in FP to advance universal reproductive empowerment.** In this way, this TOC can guide programmers as they consider how to address key drivers and bring about necessary changes to meaningfully involve men and boys in their FP programming.

## Box 2. Reproductive Empowerment

Reproductive empowerment is the process whereby individuals and groups increase their ability to make informed decisions about their reproductive lives; to fully participate in open discussion about sexuality, fertility, and reproductive health; and to act on their priorities and preferences to achieve desired reproductive outcomes free from violence, punishment, or fear. In terms of FP, individuals with high levels of reproductive empowerment should be able to do the following:

- Express their reproductive goals and desires (e.g., childbearing, parenting) freely to their partners, families, providers, and others;
- Fully and meaningfully participate and be taken seriously in communication and decision-making around desired reproductive outcomes with their partners, families, providers, and others; and
- Achieve their desired reproductive outcomes around contraception use, sexual intercourse, reproduction, and marriage/partnerships.

Reproductive empowerment is not a linear process. Programmers should seek to track, monitor, and measure fluctuations according to changes in life stage and intimate relationships.

*Adapted from Edmeades et al., 2018*

# What Does “Engaging Men and Boys” in FP/SRH Mean?

Engaging men and boys in FP/SRH is an intentional process that supports men and boys to participate fully and meaningfully in FP/SRH both individually and with their intimate partners (e.g., individual and partner contraceptive use), families, and communities in supportive, affirming, and gender-equitable ways. *Full and meaningful* participation means men and boys care about and engage in FP/SRH as active protagonists in their own sexual and reproductive lives while supporting the sexual and reproductive lives of their partners and families. Engaged men and

boys actively resist inequitable gender norms, affirm women’s and girl’s bodily autonomy and agency, and act as equal partners and crucial supporters in decisions about sex and reproduction (Greene et al., 2020). Ideally, this leads to more equitable gender norms, roles, and dynamics when negotiating and making FP/SRH decisions and navigating control over and access to information, services, and products needed for all people to achieve reproductive empowerment (The Compass for SBC, n. d.). FP can be an essential tool in achieving universal reproductive empowerment.

## Box 3. Men and Contraception

Few primary male and male-cooperation contraceptive methods are available, such as male condoms, vasectomy, withdrawal, and fertility awareness methods. The limited availability and use of these methods are influenced by gender bias in FP service delivery, dominant masculine norms, myths and misconceptions about potential side effects, and other social and structural factors. More male-specific methods are needed to make it easier for men and boys to consider and accept FP as their responsibility. However, with or without such methods, social and structural barriers to men’s and boys’ engagement in FP will persist, as evidenced by low uptake of vasectomy. Engaging men and boys in FP programming can increase awareness, availability, use, and perceived validity of not only male-specific methods, but also male-cooperative and female-specific FP methods.



In practice, reproductive empowerment may or may not mean increased FP method use, depending on the priorities, concerns, and needs of men, boys, and their partners at any given time. Research and programmatic experience indicate that efforts to support men and boys to participate fully and meaningfully in FP/SRH must consider a broader approach including gender norms, roles, and dynamics for women, men, and couples within their social and cultural contexts. Thus, programmers should consider three key roles of men and boys when engaging them in FP/SRH:

As **partners** in their relationships regarding FP/SRH issues and in challenging and addressing gender inequality and inequitable gender norms and roles. Engaged men and boys collaborate with their partners using open, effective, and nonviolent communication, and they assume shared responsibility for FP/SRH outcomes. This type of communication enforces mutual compassion, respect, honesty, and enrichment.

As **clients or users** of FP/SRH with unique priorities, needs, and preferences that should be met by programs. Men and boys have particular priorities, needs, and preferences for accessing and using FP/SRH information, services, and products. These factors are constantly influenced by gender norms, roles, and dynamics. As a result, they change across the life course and can differ from those of women and girls. Service providers, policy makers, and others should acknowledge this diversity and respond accordingly, whether by directly providing FP counseling and access to male-controlled FP methods like condoms and vasectomy (see Box 3) or by supporting men and their partners to jointly achieve their reproductive desires and goals.

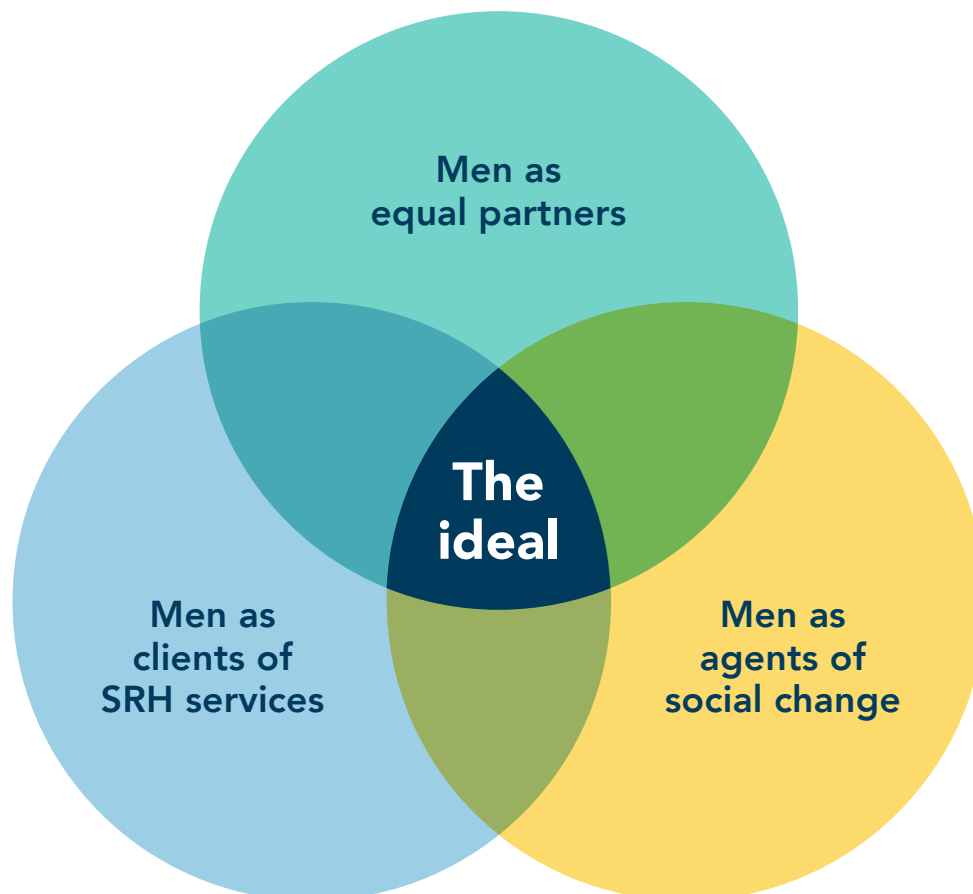
As **agents of change** who actively aim to improve FP/SRH outcomes for themselves, their partners, their families, and their communities. These men and boys show solidarity with women and girls in their lives, collaborate with women and girls and affinity groups, and use their social position to balance power dynamics and support public action to address barriers and promote facilitators of FP/SRH, particularly those related to gender norms, roles, and dynamics.



Ideally, engaging men and boys in SRH entails them embodying all three of these roles, with each mutually reinforcing the other, as illustrated in **Figure 1**. For FP specifically, it is critical to support men and boys in cultivating the necessary knowledge, attitudes, and abilities and navigating gender roles and expectations and power dynamics in their particular contexts. In practice, this means supporting men and boys to:

- **Know** about FP by having factual knowledge about FP in particular, including practical knowledge of services and methods, and SRH more generally;
- **Care** about FP by assuming responsibility for their personal health and reproduction and accountability for supporting their partners' reproductive priorities and needs; and
- **Do** supportive actions for FP by taking concrete steps to communicate and help achieve reproductive intentions and goals for themselves and in support of their partners.

**Figure 1. Men's Roles in Sexual and Reproductive Health and Rights**



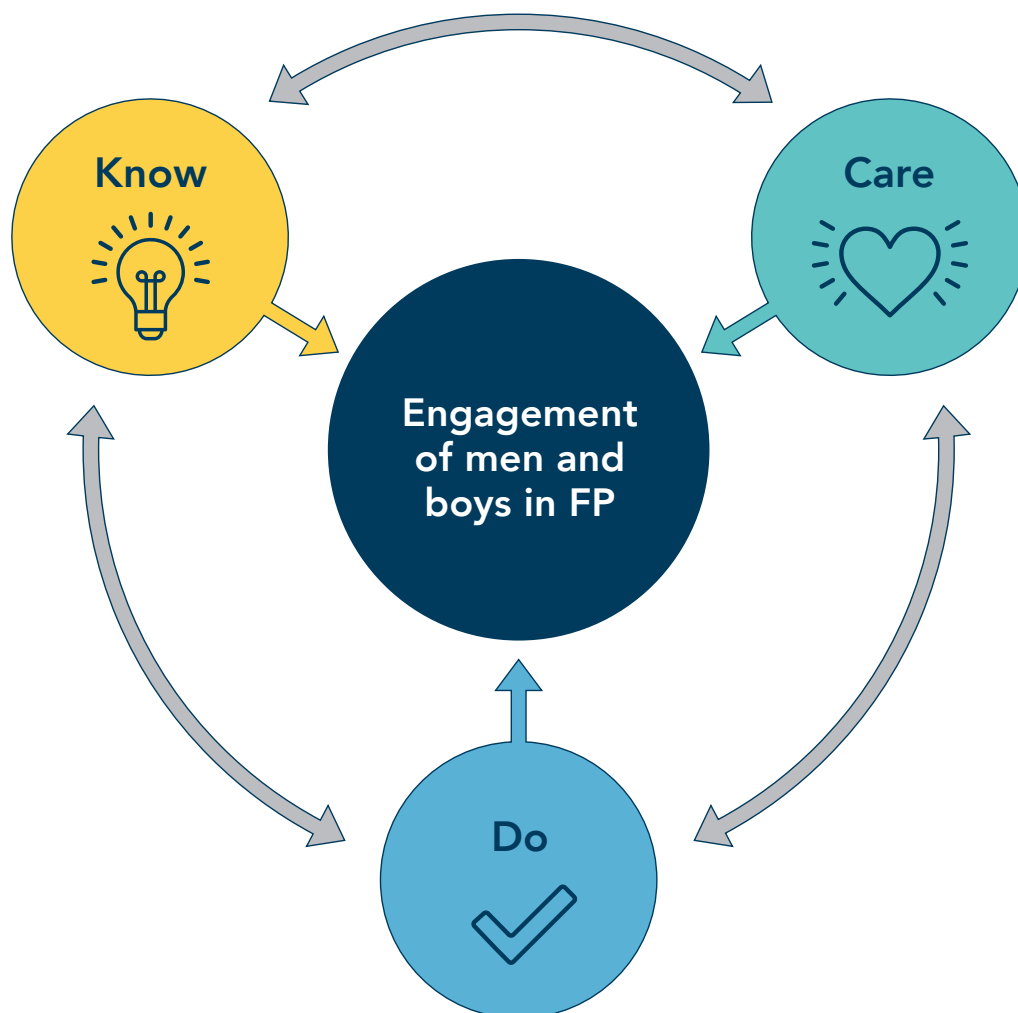
Source: Pascoe et al., 2012; adapted from Greene, 2002



**Figure 2** shows the dynamic between these three interrelated and interdependent components of *Know*, *Care*, *Do* for engaging men and boys in FP, which can interact with one another in myriad ways. Here are some examples:

- **Know about FP:** Men’s and boys’ depth of FP and SRH knowledge can influence their confidence in acting according to their own and their partners’ preferences and needs.
- **Care about FP:** The degree to which men and boys care about FP can affect their pursuit of accurate information, their uptake and use of FP services and methods, their individual attitudes and perceptions, and their decision-making and intention-setting, both individually and with partners.
- **Do FP:** Men’s and boys’ accurate knowledge of FP and the degree to which they care about FP can affect how they communicate fertility desires and FP intentions and whether they take supportive actions with their partners.

**Figure 2. Engaging Men and Boys in FP: A Conceptual Model**



# Why is Engaging Men and Boys So Important?

Engaging men and boys in FP is key to achieving the ability of all people to freely choose if and when they have children and how many to have (United Nations, 2014). It matters for men and boys, whose reproductive desires, goals, and rights are frequently ignored or deprioritized by FP programs (see *Box 4*). It also matters for women and girls, who are often unable to fully exercise their reproductive rights due to gender-related factors, such as unequal gender norms and other dynamics that

give others (e.g., male partners, family members, policy makers) power over their FP behaviors and outcomes. Efforts to engage men and boys in FP must consider how gender and other social norms shape reproductive desires, goals, behaviors, and outcomes as well as the contextual gender role expectations for men and boys across relationships with intimate partners, parents, siblings, other household and family members, close friends, and colleagues.

## Box 4. Why FP/SRH Matters for Men

Men and boys who directly and meaningfully engage in FP/SRH also benefit in the following ways (Greene et al., 2020):

**Improved health and well-being.** Men and boys experience health concerns related to FP/SRH that are often not fully recognized by men and boys themselves and health care providers, among others. These health concerns include sexually transmitted infections (e.g., herpes, HIV/AIDS, syphilis), fertility issues (e.g., low sperm production, sperm duct blockages), sexual dysfunctions (e.g., erectile dysfunction, premature ejaculation), and cancers (e.g., testicular cancer and those caused by the human papillomavirus).

**Increased reproductive empowerment.** Many men and boys cannot fully achieve their reproductive desires and goals. Though women experience this issue more often, it nevertheless has far-reaching implications for men's and boys' lives beyond reproduction, such as completing formal education, handling economic and social costs of unintended pregnancy and childbearing, and developing and fulfilling life goals and plans.

**Strengthened relationship dynamics.** When men and boys engage with their partners in FP/SRH decision-making in a collaborative and respectful way, they are likely to have greater intimacy, trust, and respect in their relationships.

**Sustained life impacts.** Healthy, successful management of their reproductive lives helps men and boys pursue educational, employment, and personal enrichment opportunities, and also cultivate healthy, supportive relationships with their partners and children.

Inequitable gender and power dynamics occur in virtually all contexts. It is therefore necessary to ensure that any engagement of men and boys in FP also supports women and girls and prioritizes their bodily autonomy and agency in making decisions and accessing FP information, services, and methods. This is particularly critical when male partners' involvement contributes to inequitable gender norms, roles, and dynamics and

limits or violates the reproductive rights of women and girls. For example, in some settings, men's accompaniment or authorization may be required for women to access FP services and methods. It is important to carefully assess the feasibility of engaging men and boys in ways that truly support gender equality and to address any unintended consequences that may reinforce or exacerbate gender discrimination and inequalities.

## Key Principles for Engaging Men and Boys in FP



This theory of change is informed by the following key principles:

### 1 Recognize the central role of gender norms.

Though many of the same factors in engagement of women and girls also shape men's and boys' engagement in FP, gender inequality and restrictive gender norms contribute to important differences. Gender norms are often informal "rules" that define acceptable behavior and roles for people based on their gender identity—real or perceived—and vary over time and from place to place. For example, some norms discourage men and boys from engaging with FP or establish men as primary decision makers for household and family issues, including FP. Shifting harmful or inequitable gender norms requires careful examination of contextual dynamics within and between individual people, groups, and key institutions, like the health and education systems. It also requires efforts engaging men and boys in FP to extend beyond the health sector to other sectors to advance gender equality and improve health outcomes.

### 2 Adopt gender-transformative approaches.

Because gender norms are fundamental to how people view and experience their sexuality and relationships, programs that directly engage men and boys in FP must strive to be gender transformative in both intention and outcomes (Malhotra, 2021). The concept of mutuality, or equality and respect in relationships, is key to gender-transformative FP programming that engages men and boys, whose actions should be informed by both

their own reproductive intentions and goals and those of their partners. Ultimately, each program must design and implement culturally responsive, context-appropriate strategies and methods that leverage [gender synchronization](#) to positively engage everyone in equitably shifting gender norms, roles, and dynamics (see Box 5).

## Box 5. Defining Gender-Transformative Programs

Gender-transformative programs positively shift gender norms, roles, and dynamics across each level of the [socio-ecological model](#) to advance gender equality and achieve program objectives. “Gold standard” gender-transformative programs work toward the following goals:

**Shift understanding and participation in gender and power dynamics (e.g., decision-making, resource and asset management, division of labor) in equitable ways.** For example, a [gender-synchronized intervention](#) with first-time parents increases young men’s participation in cooperative decision-making about childbearing and relevant household planning.

**Strengthen gender and other social norms that support gender equality.** For example, [comprehensive sexuality education](#) programs help adolescents aim for mutually respectful, enriching relationships and to act on this intention when selecting partners and friends.

**Improve the social standing of women and girls and other vulnerable and oppressed individuals and groups.** For example, an integrated FP and education program engaging both mothers and fathers shifts norms around women’s value in the family and helps reduce early marriage and improve school attendance among adolescent girls.

**Transform the structures, systems, laws, and policies that reinforce and perpetuate gender discrimination and inequalities.** For example, policy makers can develop and implement men’s health care policies and health systems can train staff and providers on men’s health needs and allocate resources for targeted outreach and engagement.

*See IGWG, 2017 & Malhotra, 2021*

### **3 Focus on individual men and boys and their relationships.**

To date, most work to engage men and boys in FP focuses on couples, particularly married couples. This document focuses on individual men and boys and the people with whom they have intimate sexual relationships (i.e., partners). These relationships range from short-term informal relationships to long-term marriages or unions. The nature of a relationship, including the commitment level between partners, can influence uptake and perceptions of FP. Thus, it is important to acknowledge and respond to the wide range of relationships in which men and boys participate.

### **4 Emphasize universal reproductive empowerment.**

This TOC for engaging men and boys in FP is informed by the broader framework of reproductive empowerment (see *Box 2*). This framework goes beyond contraceptive use to consider how FP can contribute to universal reproductive empowerment. Women and girls bear a disproportionate share of the consequences of reproduction and are systematically disadvantaged in society and relationships by unequal gender norms, roles, and dynamics. Thus, any programming aiming to improve men's and boys' reproductive empowerment must not—intentionally or unintentionally—violate or restrict the rights of women and girls or threaten their bodily autonomy and agency, such as limiting their ability to make their own decisions regarding health care, contraception, and having or not having sex (United Nations Population Fund, 2021).

### **5 Position engagement in the broader context of men's and boys' lives.**

The relevance of FP in the everyday lives of men and boys depends on their current life stage and their previous life experiences. It is critical that programming recognize that the needs, desires, and goals of men and boys change as they age. For example, an adolescent boy may want to avoid having children, whereas a young man starting a family may be concerned about when to have children, and an older man may focus on how many children to have. Additionally, the social expectations of appropriate behavior and roles vary according to life stage. Programming that applies a life course perspective recognizes and responds to the implications of FP choices and decisions at different times by addressing men's and boys' current life stage while also considering their past and preparing them for the future (Passages Project, 2020). For example, an unintended pregnancy or birth of a child in adolescence can have lifelong effects on educational and employment opportunities, income generation, relationship health, and life satisfaction (Greene et al., 2020).

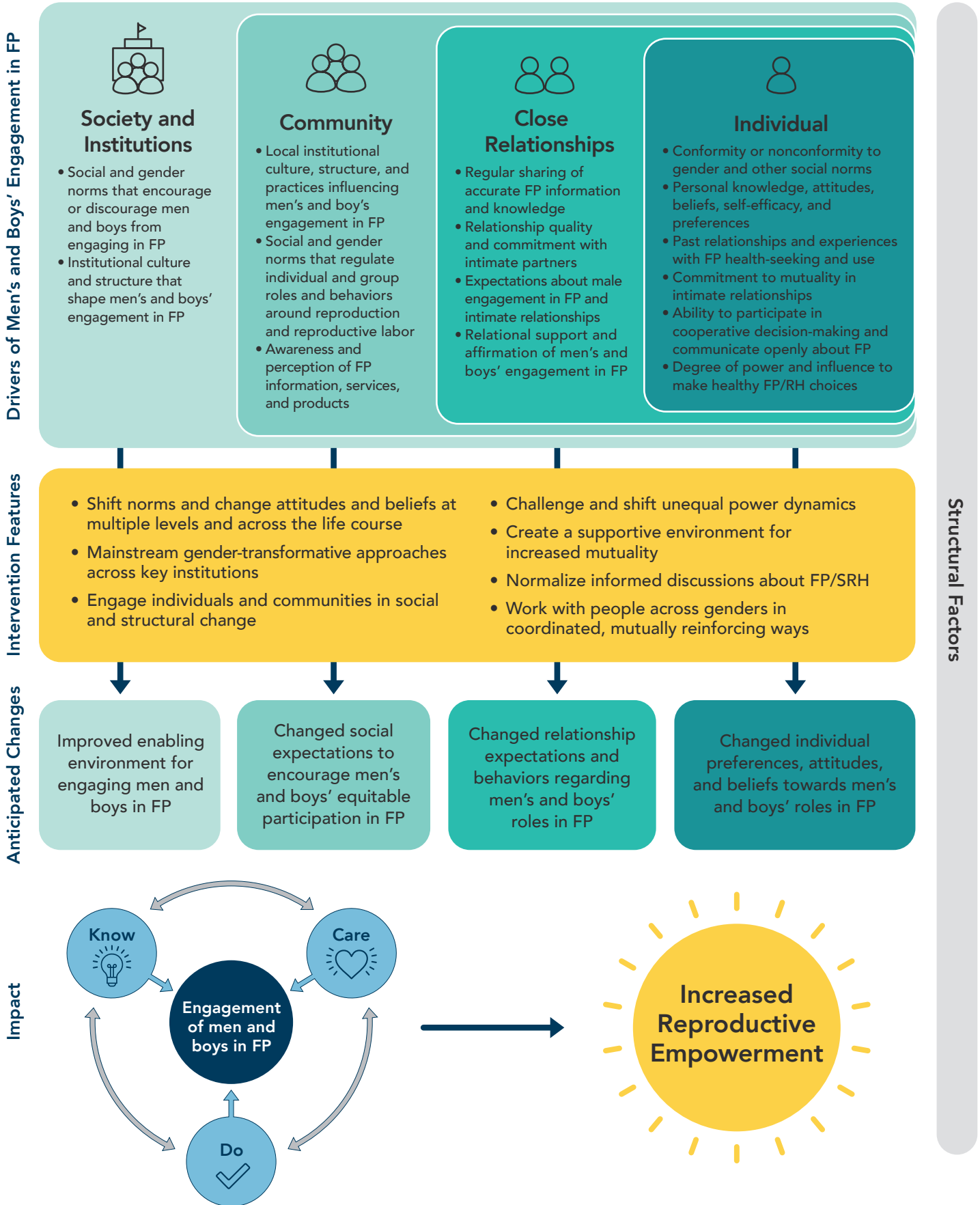


# Theory of Change for Engaging Men and Boys in FP

The TOC for engaging men and boys in FP broadly describes key drivers of men's and boys' engagement, critical intervention features to address these drivers, anticipated changes from the interventions, and how these changes shape and influence men's and boys' engagement in FP to advance reproductive empowerment for all (see *Figure 3*). This section describes each element of the TOC in detail. In the TOC graphic, *structural factors* (e.g., governance, economic conditions, political stability, humanitarian situations, and health or education systems) are represented by the bar across the bottom of the figure. Most current interventions have not sufficiently targeted or addressed structural factors. This is an important growth area for future programming and research.



Figure 3. A Theory of Change for Engaging Men and Boys in FP



# Drivers of Men's and Boys' Engagement in FP

FP behaviors are significantly influenced by factors beyond the individual, including close relationships (e.g., intimate partners, parents, siblings, other household/family members, close friends, and colleagues), communities, and broader society. At each of the following levels, key drivers target and impact the three components of *Know, Care, Do* for engaging men and boys in FP in distinct yet interrelated ways.



## Social and Institutional Level

Gender and other social norms define norms of masculinity and femininity, sexual and reproductive behavior and roles, and acceptable intimate relationships and relationship dynamics, including how, when, and by whom FP is used. Importantly, these norms are reflected in laws, regulations, and policies, as well as the structure and culture of key institutions such as health and education systems. For example, the health care system may offer and promote female-specific FP methods in line with health policies that implicitly or explicitly focus on women's responsibility in FP, or health care staff may not be welcoming to men or feel equipped to engage with men in FP counseling. Similarly, teachers and other staff in educational settings who consider it inappropriate to discuss FP with children and adolescents may be reluctant to discuss healthy relationships or human reproduction and sexuality, particularly with boys.



## Community Level

Local norms and practices may be similar (e.g., viewing FP as a "women's issue") or different (e.g., varying across religious or cultural groups) to those at the social and institutional level, depending on the context. Community-level norms also may directly influence individual knowledge, preferences, attitudes, beliefs, and behaviors. Their myriad influences are expressed and enforced through the social networks of men and boys. Finally, the ability of men and boys to engage in FP is shaped by the capacity and performance of local institutions, especially health and education, to reach them with health information, services, and products.



## Close Relationship Level

Engagement of men and boys in FP is shaped by their close relationships with intimate partners, parents, siblings, close friends, and colleagues. As these people share solicited and unsolicited information, opinions, and experiences with FP, they can influence men and boys to think and behave in certain ways. Additionally, intentionally or not, they model and endorse certain ways of thinking and behaving, which are observed and learned by men and boys as part of [gender socialization](#). Gender socialization begins early in life. In puberty, adolescent boys are more likely than girls to endorse unequal gender norms due to new and intensified gender role expectations and peer pressure to uphold dominant masculine norms (Amin et al., 2018).





## Individual Level

Men's and boys' personal characteristics and experiences drive their engagement in FP at this level, as well as their conformity or nonconformity to gender and other social norms. Their knowledge, attitudes, beliefs, self-efficacy, and preferences regarding FP are shaped by myriad personal characteristics and experiences, including experience (or lack of experience)

with FP method use, reproductive desires and goals, ability to participate in cooperative decision-making and communicate openly about FP, degree of power and influence to make healthy FP/ RH choices, commitment to mutuality in intimate relationships, capacity to cultivate and maintain healthy relationships, personal traits (e.g., physical, emotional, intellectual), socio-economic standing (e.g., education and income level), and life stage.

# Intervention Features for Engaging Men and Boys in FP

Interventions aimed at engaging men and boys in FP must address key drivers of engagement at multiple levels to shape each *Know, Care, Do* component, all while following key principles of engagement (see *Box 6*). The most successful intervention approaches share the following common features:

- **Shift norms and change attitudes and beliefs** that are specifically related to the *Know, Care, Do* components at multiple levels and across the life course for mutual reinforcement and increased sustainability of gender-equitable changes.
- **Mainstream gender-transformative approaches across key institutions**, such as educational and health systems, at the social and institutional or community levels. Consider where it might be necessary to assess organizational culture and gender competency. Work with partners and stakeholders to build and strengthen

staff capacity for engaging men and boys in FP as needed (HRH2030, 2020).

- **Engage individuals and communities in social and structural change** to create an enabling environment that promotes, supports, and sustains men's and boy's engagement in FP as regular clients or users, supportive partners, and agents of positive change.
- **Challenge and shift unequal power dynamics**, particularly those based on gender and factors such as income and educational status, which influence the ability and willingness of men and boys to participate fully and meaningfully in FP as clients or users and supportive partners. As previously described, examining gender and power dynamics in intimate relationships can help men and boys acknowledge and confront power imbalances and encourage mutualism and respect in their intimate relationships. It is also important to

examine and address gender and power dynamics within health service provision. These dynamics can differ depending on whether men, women, boys, or girls access information, services, and/or products individually or with their partners.

- **Create a supportive environment for increased mutuality** in intimate relationships across the life course. For example, work with individuals, couples, and communities to shift gender and other social norms and expectations around the social role of couples and gender roles in relationships (see *Appendix 2 for useful resources*). Central to this feature is building skills and cultivating values that support positive, healthy, and equitable relationships and sexual and reproductive lives.

- **Normalize informed discussions about FP/SRH** in public and private spaces. Open, frank, and factual discussion of FP/SRH, including sexuality and reproduction, is necessary for reducing the social exclusion and stigma often attached to these topics.
- **Work with people across genders in coordinated, mutually reinforcing ways** using a [gender-synchronized approach](#) that acknowledges how gender and other social norms are reinforced and perpetuated (Bartel & Greene, 2018; Greene & Levack, 2010; Kraft et al., 2014). Ensure that this work is conducted in partnership with community members and designed to be culturally relevant and context-appropriate to avoid harm to women and girls.<sup>4</sup>

### Box 6. Key Principles for Engaging Men and Boys in FP

- Recognize the central role of gender norms.
- Adopt gender-transformative approaches.
- Focus on individual men and boys and their relationships.
- Emphasize reproductive empowerment for all.
- Position engagement in the broader context of men's and boys' lives.

<sup>4</sup> In some cases, this might entail implementing programming with mixed-gender groups or separate implementation with single-gender groups. Either way, it is important to coordinate all efforts in mutually reinforcing ways that promote gender-equitable norms, roles, and dynamics.





# Anticipated Changes Resulting from Interventions



Through addressing each of the *Know, Care, Do* components for men's and boys' engagement in FP, interventions using these features can trigger the following changes:

## Improved Enabling Environment for Engaging Men and Boys in FP

In an enabling environment, men and boys will be more likely to feel and be supported in seeking out FP information, services, and methods and to consider FP as relevant to their lives and their intimate relationships. Men and boys also will be viewed as relevant and important audiences by key institutions (e.g., education and health systems) that play critical roles in reaching individuals and groups with FP information, services, and methods. Interventions seeking to shift inequitable norms of masculinity and femininity, mainstream gender-transformative approaches across institutions, and normalize informed discussions about FP/SRH are particularly important in this process.

## Changed Social Expectations to Encourage Men's and Boys' Equitable Participation in FP

Social expectations among partners, families, peers, and communities will encourage men and boys to view FP as a personal concern and responsibility; to seek out FP information, services, and methods; and to actively support and use FP methods. Interventions should seek to build on changes in the social and institutional environments to redefine social expectations around men's and boys' engagement in FP.

## Changed Relationship Expectations and Behaviors Regarding Men's and Boys' Roles in FP

An expectation of respectful and mutualistic intimate relationships will encourage both partners to fairly and equally engage in FP to achieve mutual goals for themselves and their families. In addition to efforts to shift gender-inequitable norms and behaviors, interventions that feature deliberate efforts to foster mutualism and respect in intimate relationships will be more successful in engaging men and boys in FP cooperative decision-making in gender-equitable ways, particularly when combined with efforts to encourage open, effective, and nonviolent communication between partners about sexuality and FP.

## Changed Individual Preferences, Attitudes, and Beliefs about Men's and Boys' Roles in FP

Men and boys will express more positive preferences, attitudes, and beliefs regarding FP, have accurate knowledge about body literacy and FP, and participate in shifting gender and social norms and expectations around the social role of couples and gender roles in relationships. Interventions that result in more favorable preferences, attitudes, and beliefs will contribute to improved self-efficacy and skill development around FP, helping men and boys to turn their intentions into actions that support themselves and their partners.



## Conclusion

Engaging men and boys in FP remains an ongoing challenge and opportunity in the FP/SRH field, in part due to different interpretations of what it means to engage men and boys and its limits and potential for improving health outcomes. This TOC aims to improve engagement with men and boys by defining the core components of *Know, Care, Do* (see *Figure 1*), establishing key principles for engaging men and boys in FP (see *Box 6*), and identifying how interventions can strengthen men's and boys' engagement in FP through specific intervention approaches and strategies. By upholding increased reproductive empowerment for all as the overarching goal, this TOC encourages programmers to focus on underlying root causes of low levels and quality of men's and boys' engagement in FP, including gender inequality and inequitable gender and social norms.

Most men and boys live in places where FP and SRH are narrowly defined as a women's issue; where they are discouraged from fully and meaningfully participating in their reproductive lives; where consistent, caring, and equitable intimate relationships are not widely modeled and encouraged; and where they receive little support to participate in FP actively and equitably. This TOC is useful for understanding in general terms how different interventions, or intervention packages, can address key drivers of men's and boys' engagement in FP while reinforcing women's and girls' bodily autonomy and agency and ultimately increase reproductive empowerment for all by influencing and shaping what men and boys *know, care, and do* about FP.

# Appendices

## Appendix 1:

### Useful Resources for Engaging Men and Boys in FP

Understanding and supporting men and boys in accordance with their experiences, priorities, needs, and preferences is key to their successful engagement with family planning (FP) across diverse contexts. The following resources will be helpful in deepening this understanding, strengthening advocacy for men's and boys' engagement in FP programming, and developing interventions to support them in setting and achieving FP desires and goals both individually and with partners.

#### [DO'S and DONT'S for Engaging Men & Boys](#)

This resource features practical guidance that broadly applies to engagement with men and boys around health promotion and gender equality. The recent best practices and lessons learned directly apply to FP programming and services. The guidance is available in [English](#), [French](#), [Portuguese](#), and [Spanish](#).

#### [A Policy Framework for Engaging Men and Boys in Family Planning Programs and Services](#)

This resource presents a policy framework for engaging men and boys and examples of how the framework can be applied to strengthen the enabling environment for men's and boys' engagement in FP.

#### [Advancing Male Engagement in Family Planning and Reproductive Health: An Advocacy Tool](#)

This resource includes an advocacy implementation plan template that guides users in identifying FP decision makers, assessing their familiarity with and support for engagement with men and boys, and tailoring their advocacy goal and approach to decision maker priorities and spheres of influence. The advocacy tool is available in [English](#) and [French](#).

#### [Engaging Men and Boys in Family Planning: A Strategic Planning Guide](#)

This resource is intended to lead program managers, planners, and decision makers through a strategic process to identify effective investments for engaging men and boys in efforts to improve sexual and reproductive health.

#### [Essential Considerations for Engaging Men and Boys for Improved Family Planning Outcomes](#)

This resource aims to increase understanding of the role of gender in FP and articulate a framework for engaging men and boys as clients or users, supportive partners, and agents of change. It provides examples of effective interventions for engaging men and boys that can be incorporated into FP programs.

#### [Male Engagement in Family Planning: Understanding Global Policy Barriers and Enablers](#)

This resource examines the policy environment for male engagement in FP across diverse countries and outlines critical policy barriers and enablers within and across countries.

#### [Underfunded and Underutilized: An Argument for Vasectomy Advocacy to Improve Method Choice](#)

This resource offers guidance on how to increase advocacy for the inclusion of vasectomy in FP and reproductive health investments, programming, and national strategies.

#### [Vasectomy Message Framework: A Tool to Help Advocates Prepare for Conversations with Key Stakeholders](#)

This resource provides concrete talking points and supporting evidence to make the case for increasing access to vasectomy to expand method choice.

## Appendix 2:

### Useful Resources for Gender and Other Social Norms

Identifying, challenging, and shifting gender and other social norms is key to successful engagement with men and boys in family planning (FP) across diverse contexts. The following resources will be helpful in understanding how to consider and address gender and other social norms throughout the project life cycle of programming, especially programming focused on social and behavior change.

#### [Resources for Measuring Social Norms: A Practical Guide for Program Implementers](#)

This resource offers concrete and practical guidance on how to identify and measure social norms and use information gathered about social norms to inform programming.

#### [Social Norms Exploration Tool](#)

This resource provides information and steps to conduct a social norms exploration and includes specific activities, tools, templates, and tips.

#### [Data, Tools, and Measurement: Guide to Recent Resources](#)

This resource provides links to diverse resources on how to measure norms change using both qualitative and quantitative approaches. Case studies are included for consideration.

#### [Getting Practical: Integrating Social Norms into Social and Behavior Change Programs](#)

This resource helps program planners and designers to design or modify social and behavior change programs that consider, fortify, or shift the norms influencing their program's behavioral objectives. It also assists them in monitoring the effects of those programs on social norms.

#### [Gender Norms and Masculinities](#)

This resource helps explore the meaning of "masculinities" and other gender norms across a range of different themes and how to shift or fortify norms as relevant. It includes good practices and lessons learned from global programming.

#### [Understanding the Male Life Course: Opportunities for Gender Transformation](#)

This resource presents a framework that conceptualizes men's experiences, challenges, and opportunities across the life course.

## Appendix 3:

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