Men-streaming in sexual and reproductive health and HIV

A toolkit for policy development and advocacy

MenEngage
boys and men for gender equality

IPPF

From choice, a world of possibilities

About IPPF

The International Planned Parenthood Federation (IPPF) is a global service provider and a leading advocate of sexual and reproductive health and rights for all. We are a worldwide movement of national organizations working with and for communities and individuals.

IPPF works towards a world where women, men and young people everywhere have control over their own bodies, and therefore their destinies.

A world where they are free to choose parenthood or not; free to decide how many children they will have and when; free to pursue healthy sexual lives without fear of unwanted pregnancies and sexually transmitted infections, including HIV.

A world where gender or sexuality are no longer a source of inequality or stigma. We will not retreat from doing everything we can to safeguard these important choices and rights for current and future generations.

About MenEngage

MenEngage is a global alliance committed to research, interventions, advocacy and policy initiatives that engage men and boys at all levels in achieving gender equality, preventing violence and promoting the health and well-being of women, men, and young people.

International Steering Committee Members include Promundo, International Center for Research on Women, the International Planned Parenthood Federation, Family Violence Prevention Fund, EngenderHealth, WHO, UNFPA, UNDP, Sonke Gender Justice Project, Save the Children-Sweden, Sahoyog, the White Ribbon Campaign and Men's Resources International. At the national level, members include more than 400 NGOs with extensive experience in engaging men and boys from Sub-Saharan Africa, Latin America and the Caribbean, North America, Asia and Europe.

Visit: www.menengage.org

Contents

What is the purpose of this toolkit?

TOOLKIT RATIONALE

This toolkit has been prepared to help organizations create affirmative policies which promote the positive roles that men can play in improving their own sexual and reproductive health – and those of women and children. The toolkit explains why this is important and how to achieve it. It also highlights how engaging men in sexual and reproductive health and rights and HIV policies, is not simply a goal in its own right, but can help move towards the goal of gender equity.

This toolkit also serves to support IPPF Member Associations in the implementation of the federation's policy on 'Men and Sexual and Reproductive Health' (adopted in 2008). In particular, Member Associations will find its contents useful, both for the purposes of integrating the elements of this policy within their work, and with a view to developing and adopting their own organizational policy on this issue.

WHO IS THIS TOOLKIT WRITTEN FOR?

This toolkit is intended for use primarily by those who are responsible for developing organizational policy within national and regional development organizations, including IPPF country Member Associations and their networks. A key audience is programme managers and Member Association executive directors – people who have decision making power to effect change within Member Associations. In addition, it will provide useful guidance to those involved in advocating for change at governmental level, and to government policy makers themselves.

The toolkit can be used by organizations which already have experience of working with men, and organizations with no such experience.

HOW SHOULD THIS TOOLKIT BE USED?

The toolkit is designed to provide 'end-to-end' guidance covering the policy process from inception to implementation. However, the material is structured in modules to allow you to choose which elements are most relevant to your own work.

Here are three ways that the toolkit could be used:

- **To undertake a major review of existing policies**. Guidance on screening policies and undertaking full impact assessment is designed to ensure that current policies do not – intentionally or unintentionally – ignore, marginalize or misjudge the role of men and boys.

- **To create a new policy statement** committing to working with men on sexual and reproductive health and rights and HIV. The toolkit includes examples of such policy statements from other organizations.

- **To consider how best to incorporate men into new policies in specific areas** of sexual and reproductive health and rights and HIV work.

The toolkit includes guidance on policy implementation, monitoring and evaluation, and stakeholder management which are relevant in all contexts.

STRUCTURE OF THE TOOLKIT

Section 1: Introduction. This section provides background information on why it is important to 'men-stream' gender by engaging men and boys in sexual and reproductive health and rights and HIV and AIDS policies; explores how thinking in this area has developed over recent years; and identifies the key policy issues to consider.

Section 2: The toolkit. This is the main part of the toolkit, including six separate modules which can be used as a complete programme of policy development and review, or as stand alone guidance on key aspects of the policy process.

Section 3: Resources. Three annexes outline IPPF's policy on men and sexual and reproductive health; offer a glossary of gender mainstreaming terms; and describe a case study from Cambodia.

1 Introduction

At present, programmes and services designed to improve sexual and reproductive health and rights, and prevent HIV, often fail to target men, to address their specific needs and understand the wider influence of male and female gender roles.

Carefully designed policies and interventions can bring about changes that improve men's and women's sexual and reproductive health or men's gender-related attitudes and behaviours, and can achieve this change in relatively short time periods. Men and boys are willing to change their attitudes and practices and, sometimes, to take a stand for greater gender equality.[1] By using the guidance in this toolkit, you will maximize your chances of designing policies that are successful in practice as well as in theory.

This introduction examines the rationale for engaging men and the international policy context as it has developed over recent years. It concludes by identifying the sort of practical policy issues that need to be addressed in relation to sexual and reproductive health and rights and HIV to achieve effective engagement with men and promote gender equity.[2]

WHY FOCUS ON MEN?

So why should men be incorporated in sexual and reproductive health policies and what is the problem with focusing only on women? There are several reasons:

- **It matters to men:** fostering the good health of men and boys is a direct and obvious benefit of incorporating men in sexual and reproductive health and rights and HIV policies. Including male perspectives at the policy level also sends a strong message about the importance of men's sexual and reproductive rights.

- **It matters to women:** the behaviours and values of men and boys also affect the health and well-being of girls and young women. By leaving men and boys out of sexual and reproductive health and HIV programmes and interventions only the symptoms experienced by women are addressed and the heart of the underlying problem remains unexamined or unchallenged. For example, programmes to prevent domestic violence by providing shelters for women and children – although vital – will not fully prevent the use of domestic violence, as these programmes only address the consequences of that violence. Only through challenging the behaviour of men who use this violence will domestic violence come to an end.

- **It matters to families:** male inclusion in sexual and reproductive health and rights and HIV policies can have an important positive effect on the health of families and children through men's role as fathers and heads of the household. For example, research in South Africa asking men about violence prevention strategies identified a large majority who advocated for more time to be spent sensitizing children, especially boys. Men also have a critical role to play in meeting the needs of orphans and vulnerable children.

- **It works:** recent projects have demonstrated significant potential in encouraging men's positive roles in building gender equality and improving men's and women's sexual and reproductive health.[3]

[1] Sonke Gender Justice Network (2009) *WHO Men and Gender Policy Brief: Policy Approaches to Involving Men and Boys in Achieving Gender Equality.* Paper prepared for the Department of Gender, Women and Health, World Health Organization.

[2] Gender equity means fairness of treatment for women and men, according to their respective needs. This may include equal treatment or treatment that is different but considered equivalent in terms of rights, benefits, obligations and opportunities. In the development context, a gender equity goal often requires built-in measures to compensate for the historical and social disadvantages of women.

[3] Greene ME, Walston N, Jorgensen A, Sambath MR and Hardee K (2006) *From Adding to the Burden to Sharing the Load: Guidelines for Male Involvement in Reproductive Health in Cambodia.* Washington, D.C.: Futures Group, POLICY Project. See also International Center for Research on Women (ICRW) and Instituto Promundo (2007) *Engaging Men* and *Boys to Achieve Gender Equality: How Can We Build on What We Have Learned?* Washington, D.C.: ICRW

In short, sexual and reproductive health and rights and HIV programmes are likely to have greater impact on communities if they address constructively the actual and potential role of men in society. But simply involving men – for example, by regarding men as a new 'client group' for existing services – will not be enough in itself to change the gender norms that act as a potential barrier to large-scale change in sexual and reproductive health and rights.

Wherever possible, positive engagement with men and boys should be achieved in ways that advance gender equity as well as improve immediate health outcomes. To give a practical example, couple counselling could simply include men in the counselling sessions or could explore power dynamics between the couple and promote gender equitable communication and decision making between men and women. At the policy level, the same principle of promoting gender equity applies. For example, reducing the spread and impact of HIV and AIDS will also require that efforts to address gender inequalities and gender roles be scaled up and improved. To be effective, gender-related HIV prevention strategies will need to engage men and bring about significant changes in men's attitudes and practices towards sex, women, their own health, and their role in caring for and supporting children.

Working with men and boys to achieve gender equity is a relatively new approach. Addressing gender equity as well as health outcomes is inevitably complex and likely to require both policy makers and programme managers to develop a more sophisticated understanding of gender dynamics than may otherwise be the case. But it is worth it. As new programmes engaging men and boys have been implemented, a body of effective evidence-based programming has emerged and confirmed that men and boys are willing to change their attitudes and practices and, sometimes, to take a stand for greater gender equality.[4] Following these findings, the World Health Organization recently released a report endorsing the efficacy of working with men to achieve gender equality.[5]

The arguments for involving men in sexual and reproductive health and rights and HIV policy and programmes, and using this involvement to push forward gender equity, are compelling. Nevertheless, the practicalities of implementing such an approach are rarely straightforward. One factor in this is the diversity of male identities. The category of 'men' is far from homogeneous, and different groups of men have very different access to and control over power and resources.

While men may share gender privilege in their relations with women, they also have widely differing experiences of power and oppression as a result of other forms of inequality and social exclusion, for example based on racism, economic exploitation and homophobia.[6] Accordingly, any approach to boys' and men's issues must acknowledge both commonalities and diversities in the lives of both boys and men.

An important component of any policy approaches focusing on men is to address the sexual and reproductive health of more marginalized groups of men: for example, migrant workers, men who have sex with men, male sex workers, refugees and prisoners. A further dimension is age. In particular, it is crucial to consider the potentially different needs and perspectives of young men, and how these can be acknowledged and addressed in the policy making process.

---

[4] Sonke Gender Justice Network (2007) *Engaging Men to Reduce Violence Against Women and Children, Prevent the Spread of HIV/AIDS and Promote Health, Care and Support to Orphans and Vulnerable Children in Nkandla, KwaZulu-Natal and Mhlontlo*, Cape Town: Sonke Gender Justice.

[5] International Center for Research on Women (ICRW) and Instituto Promundo (2007) *Engaging Men and Boys to Achieve Gender Equality: How Can We Build on What We Have Learned?* Washington, D.C.: ICRW

[6] Sonke Gender Justice Network (2009) *WHO Men and Gender Policy Brief: Policy Approaches to Involving Men and Boys in Achieving Gender Equality.* Paper prepared for the Department of Gender, Women and Health, World Health Organization.

A BRIEF HISTORY

The development of work on engaging men and boys in sexual and reproductive health and rights

Over the last two decades, gender mainstreaming has become a familiar concept to many policy makers. Gender mainstreaming is the process of assessing the implications for women and men of any planned action, including legislation, policies or programmes, in any area and at all levels. It is a strategy for making women and men's concerns and experiences an integral dimension in the design, implementation, monitoring and evaluation of policies and programmes in all political, economic and social spheres, such that inequality between men and women is not perpetuated.

Gender mainstreaming has, to date, been used primarily to increase awareness of women's perspectives and how to address them in policy making. This has been very important in challenging masculine norms and gender inequalities, and in empowering individual women and their organizations to participate in both policy debates and practical delivery of policy goals. However, more recently, academics, leading non-governmental organizations, UN agencies and some governments have suggested that fostering gender equality requires a different approach. This involves promoting active male involvement and recognizing that men are 'gendered subjects' in the same way as women – the fact that men are male has an impact on the way they live, and is not simply a neutral factor. This is referred to as a 'relational approach' to gender mainstreaming.

In the sexual and reproductive health and rights context, there is growing recognition among the international community that addressing gender inequities in health, promoting sexual and reproductive health and rights, and preventing HIV and gender-based violence at all levels in society is not possible without efforts to directly engage men and boys as partners in these processes.

In turn, this reflects the increasing acknowledgement, particularly within the sexual and reproductive health community, of men

and boy's own specific sexual and reproductive health needs and rights. This is highlighted in global public health challenges, such as the growing rates of HIV infections and sexually transmitted infections (STIs), the number of men who die early from treatable illnesses such as STIs, heart disease and cancer because they do not seek help until it is too late, the number of deaths due to illegal abortions, and the number of injuries sustained through gun and knife crime. All are directly linked to gender norms (societal messages that dictate what is appropriate or expected behaviour for males and females) and the harmful behaviours enacted as a result of these gender norms. Therefore work seeking to engage men and boys has increasingly been seen as essential to not only empowering women and improving women and children's sexual and reproductive health, but to improving men and boy's own sexual and reproductive health outcomes.

As a result of these developments there has been a recent proliferation around the world in programmatic efforts and interventions (primarily through health services, workshops and community advocacy/campaigns) seeking to engage men and boys in questioning social and cultural norms, addressing gender inequalities, and promoting better sexual and reproductive health outcomes and rights for themselves, other men and boys, women and children.[7]

So far, most work with men has been local in scale and limited in scope. To transform the pervasive gender inequalities which characterize nations and regions around the world, work with men will need to be scaled up. Policy approaches are a central means to this goal. This is true at governmental level, where national guidelines on men, health and gender equality would not only provide an opportunity to build the capacity of programmers and policy makers, but would also facilitate better cohesion and collaboration across government and civil society in their work with men.[8] It is also true in relation to civil society organizations, where organizational commitments and policies can make a significant difference to the design and implementation of individual services and projects.

---

[7] For a recent and wide-ranging survey of such interventions see Barker G, Ricardo C, Nascimento M and World Health Organization (2007) *Engaging Men and Boys in Changing Gender-based Inequity in Health: Evidence from Programme Interventions*. Geneva: World Health Organization.

[8] See, for example, the HIV/AIDS/STD Strategic Plan for South Africa
2007–2011 (National Strategic Plan). Key priority areas recommended by this Strategic Plan include developing "a comprehensive package that promotes male sexual health and which addresses gender and gender-based violence" …and introducing "programmes and strategies to address stereotype gender identities that contribute to gender-based violence."

POLICY ISSUES

Work undertaken by Sonke Gender Justice Network for the World Health Organization has attempted to identify the range of policy issues that might be relevant in trying to involve men and boys in achieving gender equality. The lists that follow, extracted from a comprehensive policy review (with additional amendments),[9] highlight the policy areas that might be regarded as most directly linked to sexual and reproductive health and rights. The lists include both government policy and organizational policy issues with additional amendments.

SEXUALITY, SEXUAL AND REPRODUCTIVE HEALTH AND HIV

a) Promote responsible sexual behaviour of men and boys

- Support responsible sexual behaviour by youth and men through government educational policies, and allow youth to explore alternatives to those social norms which promote risky behaviour, the sexual double standard regarding women's and men's behaviour, and the association between men's sexual experience and sexual status.

- Implement sexuality education that promotes a diverse and positive view of sexuality with a gender equality perspective inclusive of men.

- Promote men's condom use through diverse media, such as television soap operas, advertising campaigns and other fora.

- Make condoms widely available to men and boys, as well as women and girls, in secondary schools, from retail centres and elsewhere.

- Engage men with leadership positions in government and community life to publicly encourage men and boys to play an active role in supporting both their own sexual and reproductive health and that of women and girls.

- Remove any organizational and programme obstacles that prevent men from supporting their own and women's sexual and reproductive health.

- Endorse and enforce codes of conduct in uniformed institutions and services prohibiting the use of sexual violence within institutions and against communities.

- Ensure that HIV frameworks and strategies seek to inter alia:

  - Increase male access to, and utilisation of, voluntary counselling and testing (VCT) services.

  - Involve male role models (particularly those living with HIV) to encourage other men to use condoms and be tested for HIV and STIs.

  - Support the involvement of male partners in the prevention of mother-to-child transmission (PMTCT).

  - Involve men in challenging HIV and STI related stigma and discrimination.

- Highlight the role that men can play, on agreement with their partner or wife, in increasing their partners' access to safe abortion services

- Ensure the fact that strategies to promote gender equality highlight the fact of inequities in society being an issue of concern for men as well as women, and articulate the benefits of gender equality for everyone.

b) Address health care needs of men and boys

- Promote men's participation in and responsibility for contraception, including through increased use and acceptance of existing and effective male methods of contraception and take steps to increase the social acceptability of such methods.

- Create or expand programmes and services that specifically address men and boys' sexual and reproductive health and HIV needs, including the provision of HIV treatment, care and support; and ensure that service providers have the confidence and skills to address these needs.

- Ensure that funding for men's health programmes complements and supports, and does not compete with or undermine the provision of health care for women.

- Endorse and promote harm minimization strategies in prisons, including the provision of condoms and injecting drug equipment to inmates.

- Guarantee the right to diverse sexual expression. Work to remove the stigma, prejudice and discrimination which hinder men's ability to disclose particular sexual practices and orientations and thus compromise the health of their female partners.

---

[9] Sonke Gender Justice Network (2009) *WHO Men and Gender Policy Brief: Policy Approaches to Involving Men and Boys in Achieving Gender Equality.* Paper prepared for the Department of Gender, Women and Health, World Health Organization.

- Adopt, implement and enforce measures that reduce vulnerability by protecting the rights and facilitating access to services tailored to the particular needs of highly vulnerable populations including men who have sex with men.

- Ensure that sexuality education includes content focused on sexual diversity.

- Address men's involvement in sexual exploitation in their roles as clients, organizers and traffickers in commercial sex work/prostitution.

- Provide specific interventions for males living with HIV, which include:

  - addressing the sexual and reproductive health needs of men and boys living with HIV, including providing support for this group to live a healthy sexual life

  - support with adherence for those on antiretroviral treatment

  - support for those who wish to have children and families

- Ensure that, in adopting laws which sanction or regulate commercial sex work/prostitution, such laws impose at least as significant a burden on clients (the vast majority of whom are male) as they do on sex workers/prostitutes (the majority of whom are female). Governments should consider the adoption of models of regulation in which clients rather than sex workers/prostitutes are subject to legal sanction.

- Adopt and ensure strict enforcement of laws prohibiting trafficking of women and girls.

c) Promote involvement of men and boys in care and support

- Ensure promotion of education by national and international public sector agencies to funders, policy makers and service providers about the importance of increasing men's involvement in HIV care and support activities.

d) Family life, domestic work and work/life balance

- Use financial and social policy to improve the balance between work and family life, and encourage men to make an equal contribution to domestic work.

- Expand paternal leave provisions.

- Create disincentives for employers to demand overtime work.

- Create a legal structure for permanent part-time work and incentives for men to use it.

- Develop aspects of family law that enable men to be active partners in the lives of children and dependents; review and make appropriate changes in adoption policies and the care of orphans and adopted children.

- Take measures to help teenage and young fathers be involved in the support and care of their children while continuing their education and training. Such measures include:

- Require education and training institutions to design their programmes and schedules to facilitate care work by teenage and young fathers without breaks in study.

- Structure health services concerning pregnancy and early childhood to promote the participation of young fathers.

- Recognize workers' child care obligations in setting terms of employment and schedules of work.

- Include incentives for child care contributions in recruitment and promotion policies.

- Build into collective bargaining strategies the possibility for men's involvement in care work.

- Develop interventions which provide specific support, education and information to fathers, and promote the role of responsible fathering in educating children about gender equality and healthy relationships, and in improving family health.

e) Gender-based violence

- Review and implement international commitments related to prevention, protection, and service provision regarding gender-based violence.

- Involve men and boys in all gender-based violence programmes as agents for change (as allies and targets).

- Develop or review national gender equality policies, in relation to the role of men and boys in combating gender-based violence.

- Formulate programmes to combat gender-based violence at different levels (national, regional and international) reinforcing the involvement of boys and men in programme planning, implementation, monitoring and evaluation.

- Promote violence prevention strategies which address the root causes and impacts of violence, including violence and abuse against men and boys, particularly in high-risk settings.

2 The toolkit

MODULE A

UNDERSTANDING THE POLICY CONTEXT

Before attempting to draft a new policy, or revise an existing one, it is essential to know what problem, issue or needs the policy is aiming to address. This module looks at how to undertake such a needs assessment.

STEP 1 ASK KEY QUESTIONS

Start by asking some key questions (see the box opposite). In some instances, there will be clear and readily accessible information to answer these questions. But this will not always be the case.

STEP 2 CONDUCT A NEEDS ASSESSMENT EXERCISE

A new needs assessment exercise will usually be necessary where your organization, region or country has little or no gender perspective in its current policies; or where there is little track record of linking sexual and reproductive health policies with gender equity. Even where some relevant information and data exist, undertaking a fresh or more formal needs assessment exercise can also be a key building block in the wider task of engaging stakeholders and securing commitment to the goal of a relational approach to gender issues. See Module E for further guidance on working with stakeholders.

STEP 3 GET AGREEMENT ON YOUR ANALYSIS

Having mapped the information that is readily available to you, you may choose to consult others, either individually or collectively, to ensure that you have a full and accurate analysis that is agreed by others with an interest in the policy area. This might involve the establishment of a formal working group or a more ad hoc meeting of relevant individuals. The picture of needs that you develop through this process needs to be documented and endorsed by those involved. It will then be able to inform your work on policy review and development.

UNDERSTANDING THE PROBLEM: KEY QUESTIONS

- What are the main causes of poor sexual and reproductive health among men and women, and how do they differ?

- What sort of services and programmes are needed to address these sexual and reproductive health and HIV prevention issues?

- What services and programmes are currently provided to men and women?

- What are the main perceived gaps in service provision at present? How do these differ between different groups of men, for example young men, men who have sex with men?

- What opportunities exist to develop a stronger focus on men?

- Do we address the needs of men living with HIV?

- Do we provide specific services for men of different sexual orientations, including men who have sex with other men (homosexual, bisexual and transgender)?

REMEMBER!

In undertaking a needs assessment, it is important not to focus your analysis of needs only on 'male' health issues (for example male circumcision, men who have sex with men), but also to see men as partners in improving female sexual and reproductive health outcomes.

For example, studies show that men have far more sexual partners than women and often have multiple concurrent partners, placing both themselves and their partners at high risk of HIV infection and other sexually transmitted infections.[10] Traditional gender roles in this context therefore risk compromising women's health and the potential for healthy relationships between men and women, as well as putting men's health and well-being at risk.

---

[10] Sonke Gender Justice Network (2007) *Engaging Men to Reduce Violence Against Women and Children, Prevent the Spread of HIV/AIDS and Promote Health, Care and Support to Orphans and Vulnerable Children in Nkandla, KwaZulu-Natal and Mhlontlo, Eastern Cape.* Cape Town: Sonke Gender Justice

MODULE B

INSTITUTIONAL COMMITMENT

This module looks at how to win the support of your organization for the goal of engaging men and boys directly as partners in addressing gender inequities and promoting improved health outcomes for all.

Securing institutional commitment and support is fundamental from the very beginning of the project, not only to ensure sustainability but also to create an enabling organizational environment and maintain the morale of staff directly involved.

STEP 1 IMPLEMENT APPROPRIATE ACTIONS

Securing this institutional commitment requires practical actions to build capacity to take this agenda forward. In the box opposite is a list of suggested actions.

STEP 2 COMPLETE THE SELF-AUDIT TOOL

On the following page is a self-audit tool that you can use to identify where your organization's infrastructure needs improving.

If your self-audit produces mainly or entirely 'No' answers, you may decide to take some time to work on improving the institutional infrastructure before proceeding with the next stages of this toolkit. In this situation, you will obviously be best placed to identify within your organization the most appropriate institutional levers and processes.

SUGGESTED ACTIONS FOR SECURING COMMITMENT

- **Create an internal working group** with representatives of all key internal departments, to ensure collective understanding of what is involved and why it is important. Such groups can also have a valuable added benefit of helping to build support for the approach being taken and encourage a sense of collective ownership of the process from the outset.

- **Develop an internal communications plan** to explain to staff, board members and volunteers. This need not be complex or time-consuming, but this internal 'conversation' needs to be planned and managed carefully.

- **Appoint a high level sponsor** who will drive the work of policy review and development and can operate across departments. A study of Australian public sector organizations found that senior figures' "active and unequivocal support for the advancement of gender equality and women's interests in policy making" was a crucial element in successfully advancing gender equality in these institutions.[11]

- **Allocate resources** to develop knowledge of gender issues and build capacity.

- **Coordinate work to review and develop gendered policies.** Male involvement efforts must be more than a series of separate programme activities. The ultimate goal is for institutional architecture of policy making to recognize gender equality as "a central foundation for any effective response"[12] rather than a discrete issue considered by, and of interest only to, specialists.

- **Generate expertise** on men and gender equality. For example, options canvassed at a Finnish conference on gender equality included a special unit within the government on men and gender equality, a dedicated civil servant, the funding of research on men and gender, and subsidies for men's organizations that work for gender equality.[13]

[11] Schofield T and Goodwin S (2005) Gender politics and public policy making: prospects for advancing gender equality. *Policy and Society.* 24(4): pp. 25–44.
[12] Greig A, Peacock D, Jewkes R and Msimang S (2008) Gender and AIDS: Time to Act. *AIDS,* 22 Suppl, S35-S430
[13] Varanka J, Närhinen A and Siukola R (eds.) (2006) *Men and Gender Equality – Towards Progressive Policies.* Conference report. Helsinki: Ministry of Social Affairs and Health, Finland. pp. 75.

SELF-AUDIT TOOL: INSTITUTIONAL COMMITMENT	Yes	Partially	No
1	Organization has a clear statement of commitment to gender equality and non-discrimination, including a relational approach to gender mainstreaming.			
2	This commitment is supported by induction and ongoing training for relevant staff and volunteers, including use of gendered language.			
3	New policies are subject to gender-proofing as a formal stage in their development, and the proofing process is founded on a relational approach to gender mainstreaming.			
4	Policies are reviewed at regular intervals, ideally at least every three years, and the review process incorporates gender-proofing.			
5	A named individual or team is responsible for offering advice and assistance to staff and volunteers on gender issues, including men and masculinities.			
6	Existing partner organizations are made aware of the organization's commitment to a relational approach to gender mainstreaming.			
7	Organization creates and maintains strategic partnerships with other organizations working with men and boys in order to tackle gender inequalities.			
8	Organization is committed to allocating resources to enable effective implementation of the actions above, and funding for gender equality work with men and boys is not at the expense of existing or future funding for empowerment work with women and girls.			

MODULE C

DEVELOPING A POLICY STATEMENT: ENGAGING MEN AND BOYS

This module explains how to draft a 'stand alone' policy statement on engaging men and boys.

For many organizations, the most immediate and efficient way to tackle 'men-streaming' will be to devise a new statement of policy which communicates clearly the corporate commitment to involving men and boys in sexual and reproductive health and rights and HIV work, and promoting gender equity through this work. This is the approach taken by the new IPPF policy guidelines on men and sexual and reproductive health (Annex A), and by other policy makers.[14]

The benefits of this approach are clarity of intent, relative speed of action and ease of communication to stakeholders.

STEP 1 FRAME YOUR POLICY STATEMENT

The first step in drafting a policy statement on engaging men and boys is to frame the issue appropriately. Ideally your policy should address the points in the box opposite.

STEP 2 DEVELOP A STATEMENT OF PRINCIPALS

You may also want to include a statement of principles, like the one on the following page taken from the Cambodian guidelines on involving men in sexual and reproductive health and rights:[16]

FRAMING A POLICY STATEMENT

Your policy statement should:

- Explain why it is important to address the sexual and reproductive health needs and rights of both males and females.

- Acknowledge work done to date by your own organization (and any key partners) and indicate how this will change, or be developed, in the future.

- Identify the ways in which men and boys can play an active part in achieving improved health outcomes and gender equality, focusing particularly on those which are of most importance to your own organization.

- Recognize the diversity of men's situation.

- Reflect local cultures, traditions, community practices and structures that are supportive of equal relationships between women and men.

- Include an implementation strategy which acknowledges the potential barriers to male engagement and steps planned to tackle those barriers.

- Include plans for evaluating the impact of the policy in terms of outcomes for men and boys as well as women and girls.

REMEMBER!

Before looking at the key steps in developing such a policy statement, the risks and disadvantages inherent in this approach should be recognized. Academics and activists have suggested that: *"Policy-making on men and gender should be integrated into policy-making on gender equality, rather than constructed as separate from, and equivalent to, policy-making on gender or on women."*[15] It could therefore be argued that creating a 'stand alone' policy on engaging men and boys effectively perpetuates the view that action on male engagement is separate from the wider sexual and reproductive health and rights and HIV policy sphere.

The main alternative approach is to review all existing policies on sexual and reproductive health and rights and HIV to identify where there is a need to adjust these policies to incorporate men. This approach is the subject of Module D. It is inevitably more time-consuming and resource intensive. Accordingly, while it undoubtedly represents 'best practice' it may also prove difficult to achieve.

To address these concerns, it is recommended that where an organization chooses to kick-start the process of 'men-streaming' by developing a stand alone policy, a commitment should also be given to reviewing existing policies over a fixed time period. This might be done as part of a regular cycle of policy review, or as a one-off exercise.

---

[14] See, for example, Greene ME, Walston N, Jorgensen A, Sambath MR and Hardee K (2006) *Adding to the Burden to Sharing the Load: Guidelines for Male Involvement in Reproductive Health in Cambodia.* Washington, D.C.: Futures Group, POLICY Project.

[15] Sonke Gender Justice Network (2009) *WHO Men and Gender Policy Brief: Policy Approaches to Involving Men and Boys in Achieving Gender Equality.* Paper prepared for the Department of Gender, Women and Health, World Health Organization.

[16] Greene ME, Walston N, Jorgensen A, Sambath MR and Hardee K (2006) *From Adding to the Burden to Sharing the Load: Guidelines for Male Involvement in Reproductive Health in Cambodia.* Washington, D.C.: Futures Group, POLICY Project.

STEP 3 CONSIDER THE KEY ROLE OF LANGUAGE

Language has a key role to play in signalling policy intentions and making sure that the policy messages are heard by men. As one expert has pointed out: *"the agenda of engaging men is not novel because of who it addresses, but how."*[17] Policy makers therefore need to identify where men are missing in such language and take specific steps to include them.

In the new IPPF policy guidelines the contrast between the 'before' and 'after' introductory policy statements is evident as much in the language as in the policy content:

Before: IPPF believes that family planning is a fundamental right of both sexes. Men, both as individuals and as part of a couple, have a right to family planning education and services, and a responsibility for informed contraceptive decision making and practice.

After: IPPF is committed to working with men and boys as clients, partners and agents of change in our efforts to meet the goals and objectives of the Federation's Strategic Framework. This applies to males of all sexual orientations, including heterosexual, homosexual, bisexual and transgender. This policy reflects the importance the Federation attaches to addressing male sexual and reproductive health and rights, and the need to work with men and boys as equal partners in the provision of comprehensive sexual and reproductive health and HIV services.

EXAMPLE OF A STATEMENT OF PRINCIPALS FROM CAMBODIA

- Policies and programmes to involve men in reproductive health should be based on an approach that respects the dignity of both men and women and promotes equity between men and women.

- Involving men is not simply about serving an additional clientele, but about improving women's health by educating their male partners and serving their needs.

- Resources for programmes and services for women and the quality of those programmes and services should not be compromised by adding or scaling up programmes and services for men.

- The needs of young men should be carefully considered and reflected in reproductive health policy and programme development, to start this group on the path to good lifelong reproductive health.

- Existing research on the benefits of involving men in reproductive health in Cambodia and elsewhere should be used to guide male involvement activities.

STEP 4 SECURE SUPPORT FOR YOUR NEW POLICY

Most institutions will have well established internal procedures for approving new policy. However, internal procedures can mean that this process is slow and internal barriers to agreement are not always easy to overcome. As policy owner, it is essential to be alert to potential problems and proactive in seeking resolution of those problems.

You will almost certainly need to submit a report with the necessary evidence and arguments to make the case for change. Prefacing your new policy with a statement of principles that explain the underpinning rationale may help to communicate to the decision makers why the change in policy is required. You could also call on stakeholders to act as advocates for change if you anticipate difficulties in securing agreement. Your policy statement could ultimately provide a platform for collaborating with partner organizations and governmental agencies to raise awareness on sexual and reproductive health and rights and HIV in the country/community and to develop joint action plans.

CASE STUDY: INCORPORATING MEN IN GENDER AND DEVELOPMENT POLICY

The International Planned Parenthood Federation has recently reviewed its own guidelines on men and sexual and reproductive health, including HIV. The full policy is reproduced in Annex A.

[16] Greene ME, Walston N, Jorgensen A, Sambath MR and Hardee K (2006) *From Adding to the Burden to Sharing the Load: Guidelines for Male Involvement in Reproductive Health in Cambodia*. Washington, D.C.: Futures Group, POLICY Project.

[17] Flood M (2005) *Mainstreaming Men in Gender and Development*. Presentation to AusAID Gender Seminar Series, Canberra, December 2005.

MODULE D

REVIEWING EXISTING POLICIES

This module explains how to assess the impact of your existing sexual and reproductive health and rights policies from a gender perspective, with a view to achieving large-scale changes in relation to men and boys, women and girls.

You may decide to review your existing policies following the adoption of a stand alone policy statement (see Module C) or instead review your policies without creating such a statement (i.e. skip Module C). You will be best placed to judge which approach is likely to make most impact – and can most readily be achieved – within your own organization.

The guidance here focuses on incorporating men and women into **existing** sexual and reproductive health policies. However, the same tools and techniques can be adapted for use in developing **new** policies. In general terms, the self-audit tools and checklists can be used as a guide to best practice rather than as a means of assessing current levels of compliance.

STEP 1 IDENTIFY RELEVANT POLICIES

The first step is to identify the potentially relevant policies that exist within your organization. It may seem obvious, but it is surprising how often a full list of policies is unavailable within any given organization as there is no single point of policy 'ownership'. It is therefore important to be able to recognize a policy when you see it. **A policy is any statement that guides action towards achievement of a desired outcome.**

Start by listing all policies that guide decision making and action within your organization. In carrying out this exercise remember that *"…any and all policy, whether it is apparently 'gender-neutral' or explicitly gendered, may have gendered impacts. Any policy may have effects which are different for women compared to men."*[18] Equally, male involvement plays – or could play – a significant part in most, if not all, aspects of sexual and reproductive health. Involving men can strongly influence the uptake of family planning and maternal health services, reduce husband-to-wife transmission of sexually transmitted infections (STIs) and encourage the uptake of STI counselling and treatment, and also lower the incidence of mother-to-child transmission of HIV through effective birth-spacing programmes and uptake of voluntary confidential counselling and testing.[19]

REMEMBER!

It is important not to make assumptions about the sorts of policy issues that are relevant to sexual and reproductive health outcomes. For example, research has highlighted that women's lack of economic rights, and consequent economic dependency on men, can also increase their risk of HIV infection.[20]

Because of the potential scope of the exercise, mapping relevant existing policies will usually require the assistance of others who have policy responsibilities within the organization. If your institution has numerous policies, or it proves impossible to identify all policies because some are unwritten or their status is unclear, do not be disheartened. Start with the most obviously relevant policies and come back to the process of policy identification once you have more experience of screening and impact assessment.

STEP 2 SCREEN FOR POLICIES WITH THE MOST SCOPE

Carrying out a full gender impact assessment on every policy is the ideal approach to policy review in this context. However, this may be difficult or impossible because of time, money or other resource constraints. It is therefore most efficient to concentrate on policies where there is most scope to work with men and boys to improve sexual and reproductive health outcomes and tackle gender inequality.

[18] Sonke Gender Justice Network (2009) *WHO Men and Gender Policy Brief: Policy Approaches to Involving Men and Boys in Achieving Gender Equality.* Paper prepared for the Department of Gender, Women and Health, World Health Organization.

[19] Greene ME, Walston N, Jorgensen A, Sambath MR and Hardee K (2006) *From Adding to the Burden to Sharing the Load: Guidelines for Male Involvement in Reproductive Health in Cambodia.* Washington, D.C.: Futures Group, POLICY Project

[20] Greig A, Peacock D, Jewkes R and Msimang S (2008) Gender and AIDS: Time to Act. *AIDS,* 22 Suppl, S35-S43

The process of screening is designed to identify which are the most relevant policies to improving men's sexual and reproductive health, preventing HIV and promoting gender equality and to make an initial assessment of impact (strengths, weaknesses and gaps) in relation to each policy.

Screening is intended to be primarily a desk-based exercise. Nevertheless, it is important to allocate sufficient resources and time to the process; where possible, consultation with internal colleagues and volunteers should also be built into the timetable.

USING THE SELF AUDIT TOOL IN THE INITIAL SCREENING/ASSESSMENT OF POLICIES

Part 1 of the self-audit tool below can be used to review the text of policy statements for compliance with best practice. Although this can be completed by a single individual, the robustness and quality of the judgements will normally be improved by some degree of consultation. If time allows, it can be valuable to use the tool in a group setting. This will provide an opportunity for differences of perspective to be aired and, with appropriate facilitation, judgements can be reached which reflect a consensus view. Note that some questions may not always be applicable.

Part 2 of the tool requires access to the results of policy evaluation. In some cases, no evaluation will have been undertaken, so this cannot be completed. Where evaluation has been carried out, it may not have included a formal gender analysis. However, it will sometimes be possible to analyze existing data in new ways to produce gender disaggregated figures. Simply complete as much of the form as you can.

SELF-AUDIT TOOL: REVIEW POLICIES – Part 1	Yes	Partially	No
Policy includes explicit reference to men and boys, as well as women and girls.			
Policy seeks to address sexual and reproductive health needs and rights of both males and females.			
Policy recognizes potential role for men and boys in promoting improved sexual and reproductive health outcomes.			
Policy recognizes potential role for men and boys in preventing HIV, and caring for those living with HIV and AIDS.			
Policy seeks to address the needs of men living with HIV.			
Policy seeks to address the needs of other vulnerable male populations.			
Policy identifies ways in which men and boys can play an active part in achieving gender equality.			
Policy seeks to address the needs of men of all sexual orientations, including those who have sex with other men (homosexual, bisexual and transgender).			
Policy recognizes the diversity of men's situation.			
Policy reflects local cultures, traditions, community practices and structures that are supportive of equal relationships between women and men.			
Policy includes implementation strategy which acknowledges the potential barriers to male engagement and steps planned to tackle those barriers.			
Policy ensures that interventions targeting men and boys do not compete with or undermine interventions targeting women.			

SELF-AUDIT TOOL: ANALYSIS OF POLICY EVALUATION – Part 2	Yes	Partially	No
Evaluation of policy impact has identified outcomes for men and boys as well as women and girls.			
Evaluation of policy impact has identified positive outcomes for men and/or boys.			
Evaluation of policy impact has identified positive outcomes for women and/or girls.			

"Gender impact assessment delivers more effective policies by getting those responsible to think about the different effect policies have on women and men. It enables policy-makers to picture the effects of a given policy more accurately and to compare and assess the current situation and trends with the expected results of the proposed policy."[21]

STEP 3 PRIORITIZE AND PLAN

Following the initial screening, you will need to decide which policies should proceed to full impact assessment. It is impossible to say how long it takes to complete an impact assessment as this will inevitably vary from policy to policy and from one policy making institution to another. You may find it best to select only one policy for full assessment to begin with, and use the experience of conducting that assessment to inform planning for further assessments.

DECIDING ON WHICH POLICIES TO PROCEED WITH

Political realities and resource factors often dictate a pragmatic approach to prioritization. For example, you may decide to prioritize a full impact assessment when:

- There is conflict or disagreement about an existing policy or proposal and an impact assessment may help to resolve it.

- Already vulnerable groups of people appear to be disadvantaged by an existing policy.

- The existing policy has impacts over a large geographical area and/or large population.

- You know there is likely to be a degree of support for change in a particular area. Starting with the 'easy' policies may be a sensible approach in situations where the whole concept of engaging men in sexual and reproductive health and HIV is potentially contentious. For example, in some countries, promoting men's roles as fathers has been a gender issue that has met least resistance.

- Time, money and expertise are available for assessment in a particular policy area.

STEP 4 CONDUCT THE IMPACT ASSESSMENT

Impact assessment is simply a process for identifying how policies and procedures affect those they are directed at (and potentially others who are not an intended target group).

Impact assessment is normally a staged process in which evidence is accumulated and tested through discussion and review, building a picture of the current impacts of any given policy. This will ultimately help to identify any ways in which the policy or function should be changed, or areas where further evidence may be required in order to propose policy changes.

Your primary focus will be analysis and evaluation of the policy impacts in terms of gender-related criteria (also known as a 'gender audit'). You will need to think about indirect and unintended impacts as well as direct, intended ones. By the end of the impact assessment, you should aim to have answers to the questions on the following page.

[21] Greig A, Peacock D, Jewkes R and Msimang S (2008) Gender and AIDS: Time to Act. *AIDS*, 22 Suppl, S35-S43

IMPACT ASSESSMENT QUESTIONS

- What is the policy trying to achieve and who is it intended to benefit?[22]

- What is the impact of the policy on men, women and children (and on sub-groups of men, women and children, for example according to age, sexuality, HIV status)?

- Does the policy meet the different needs of women and men?

- Does the way the policy is carried out have an adverse impact on:
  - gender equality?
  - the maintenance of good relations between men and women?

- Does the way the policy is carried out have a beneficial impact on:
  - gender equality?
  - the maintenance of good relations between men and women?

- What do men and women, including their representative organizations, say about the policy issues and outcomes?

REMEMBER!

It is essential to keep focused on the overall purpose of the impact assessment exercise – does this policy work well and does it need to change? The promise of more data, new research findings or another consultation meeting can all lead to deferral of a final report. Remember, the perfect impact assessment is not your goal. The report is just a stepping stone.

STEP 5 CHOOSE FURTHER TOOLS TO SUPPORT YOUR ASSESSMENT

Research and statistics

The starting point for your full impact assessment will be the analysis of policy evaluation (which looks at policy impact) undertaken as Part 2 of the screening process (see page 16). Your own evaluation findings will make a critical contribution to the assessment. However, if the screening established that there was a total absence of evaluation data, or insufficient data to generate a gender analysis, you will need to decide whether further research is necessary and, if so, when and how to carry this out.

Questions that you might look to research or statistical data to answer include:

- What is the gender make-up of the people affected by the policy?

- What does sub-analysis of these affected groups tell us about their age, sexuality, sex, socio-economic status, religion, etc.

- What was the sexual and reproductive health and HIV status of these groups prior to implementation of the current policy? What is the sexual and reproductive health and HIV status of these groups now?

- How were the needs of different sexual orientations addressed prior to implementation of the current policy? How are these addressed now?

- What were the attitudes of these groups towards key sexual and reproductive health issues prior to implementation of the current policy? What are their attitudes now?

- What sexual and reproductive health services were available to them prior to implementation of the current policy? What services are available now?

- How are outcomes different for men and women?

- Are there unexpected or unintended impacts on men and boys?

- How has the policy affected relationships between men and women?

You should always consider whether any new research is proportionate to the importance of the policy and whether there are alternative means of establishing impact. Using data and research held by others can often prove valuable, even if not undertaken specifically in relation to your own policy. Academics and civil society organizations often produce summaries or reviews of existing research in the form of articles or briefing papers.[23]
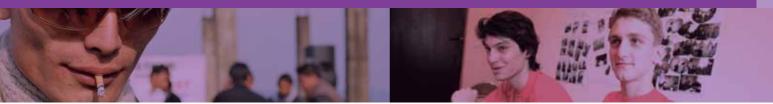
Benchmarking

Another useful tool is benchmarking. This involves identifying other policies in the same field – nationally or internationally – which appear to be working well and so provide 'benchmarks' against which to assess your own policy. It is not intended to be a method for 'copying' other policies. The purpose is to understand why other policies are drafted as they are and why they achieve positive impacts. However, this can be time-consuming and the results may need careful analysis due to regional or national differences.

STEP 6 DRAW UP AN IMPACT ASSESSMENT REPORT

Although an impact assessment report will often have more than one audience, it is primarily intended to support the case for any subsequent policy revision. The key audience will therefore be the institutions or individuals with authority to approve policy. Its main purpose is to summarize the process of impact assessment and policy review for those who have not been directly involved and who have limited time to engage with the issues.

---

[22] Ideally, of course, you will know the answer to this before you begin, if you have completed a needs assessment exercise at the outset
[23] Greig A, Peacock D, Jewkes R and Msimang S (2008) Gender and AIDS: Time to Act. *AIDS*, 22 Suppl, S35-S43

IMPACT ASSESSMENT REPORT TEMPLATE

Name of policy

Policy owner

Contact details

Report author

Contact details

Policy aims

Give brief background information, summarizing the policy's origins, purpose and goals. Describe how it has been implemented, and any relevant information about future implementation plans.

Gender relevance

Summarize the conclusions of the screening process, explaining why the policy is relevant, the priority that was given to the full impact assessment and why.

Research and consultation

Summarize the data, evidence and other information sources used to inform the assessment. Identify any data gaps and what efforts have been made to fill them. Include a summary of the research findings, highlighting those findings which illustrate differential impacts on men and women, or sub-groups of them.

Outline the consultation process used, who was involved, and the mechanisms for seeking feedback.

Impact assessment

What conclusions did you draw from the information gathered?

Options appraisal

Which areas of the policy require revision to ensure gender equity and improved sexual and reproductive health outcomes for men? What alternatives have you identified? How have you assessed the relative merits of different alternatives? What process have you used to reach decisions? Did you undertake further consultation at this stage?

Recommendations

If changes are limited, list individual recommendations. If the policy requires more substantial revision, append a draft text of the proposed new policy highlighting key changes from the original version.

Communication and dissemination

What message needs to be communicated and to whom? How will the message reach key organizations? How will the message reach different groups of men and women? Are separate approaches necessary?

Monitoring and evaluation

When will the policy be reviewed again? What data gathering processes are being put in place to enable evaluation?

In addition to identifying the impacts, your report should consider whether the existing policy should be amended, or other actions taken, to maximize positive and minimize negative impacts. Your recommendations should be included in the report. If the policy changes required are not self-evident from the impact assessment, you will need to undertake an options appraisal in order to decide what recommendations to make.

In order to choose between different options, you may decide to carry out a traditional 'SWOT' analysis[24] or a cost-benefit analysis.[25] A gender analysis should also be part of the approach, using these questions as your frame of reference:

- How does each option impact positively or negatively on women and men?

- Do any of the options reinforce or challenge traditional views of men and women?

- Which option(s) empower men and women most effectively?

- Where a negative impact is identified, what mitigating action can be taken to reduce the impact or produce a more gender-balanced policy?

STEP 6 REVISE POLICIES AND MAKE THE CASE FOR CHANGE

When preparing revisions to your existing policies, you should consider the language in which the policies are expressed as well as substantive revisions. See also Module C for more about the role of language.

TECHNIQUES FOR REVIEWING THE LANGUAGE OF YOUR POLICIES

Simple techniques for reviewing gender assumptions in language include the following:

- Use the 'find and replace' facility on your computer to find and substitute 'he' for 'she' throughout the document (and vice versa) to see whether it still makes sense. If not, it is likely that the original draft made assumptions about female or male experience which need to be checked before inclusion.

- Use the 'word search' facility on your computer to find every reference to 'men' and 'women' in a policy document and check whether (a) the reference could be replaced by 'people' or (b) a reference to men needs to be partnered by a reference to women and vice versa.

- Ask both a male and female colleague to read the policy document and offer comments on it. Even better, although more time-consuming, ask community groups representing men and women to proof read policy documents as part of the consultation process.

Most institutions will have well-established internal procedures for changes to existing policy. However, internal procedures can mean that this process is slow and internal barriers to agreement are not always easy to overcome. As policy owner, it is essential to be alert to potential problems and proactive in seeking resolution of those problems.

You will almost certainly need to submit a report with the necessary evidence and arguments to make the case for change. Prefacing your revised policy with a statement of principles that explain the underpinning rationale may help to communicate to the decision makers why the change in policy is required. You could also call on stakeholders to act as advocates for change if you anticipate difficulties in securing agreement. Your policy statement could ultimately provide a platform for collaborating with partner organizations and governmental agencies to raise awareness on sexual and reproductive health and rights in the country/community and to develop joint action plans.

---

[24] SWOT stands for '**S**trengths, **W**eaknesses, **O**pportunities and **T**hreats'. This sort of analysis is most easily undertaken through brainstorming or group discussion.

[25] Allocating a monetary value to projected health gains is not always straightforward, but can be important when health impacts are to be weighed against non-health impacts. There are a number of techniques available to undertake cost-benefit analysis.

MODULE E

WORKING WITH STAKEHOLDERS

This module looks at how to involve stakeholders – both internal and external – in the process of policy development and review.

Involving stakeholders in the policy development or review process will help to ensure that policies reflect multiple perspectives – not just those of the policy originators – and generate a sense of ownership among those who will be involved in its implementation. In broad terms, the same principles apply to internal and external stakeholders. The process of engaging stakeholders should be properly planned with clear objectives and named responsibilities, a timetabled action plan, training for staff leading the consultation, and clear explanations of the issues and process for those being consulted.
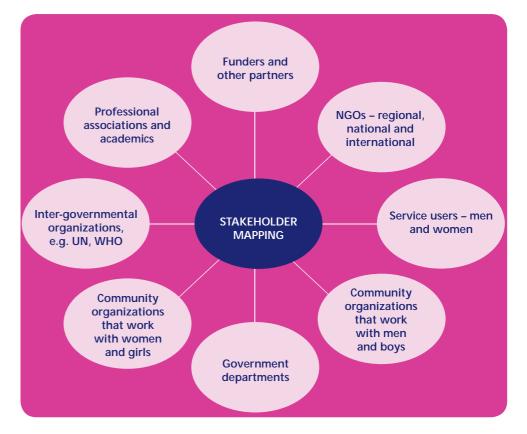
STEP 1 DECIDE WHEN TO ENGAGE STAKEHOLDERS

It is important to think carefully about the timing of any consultation activity. Generally it is good practice to involve stakeholders at all stages in policy development, review and implementation. There are inevitable risks involved in early consultation, however, so think about how expectations and conflicting interests are going to be managed.

STEP 2 IDENTFY WHO THE KEY STAKEHOLDERS ARE

Stakeholders include staff, volunteers and board members of your own organization (internal stakeholders) as well as external organizations and individuals who might have an interest in your policy objectives and how they are delivered in practice. See the diagram below for an example of external stakeholder mapping.

In identifying stakeholders, especially when it comes to consultation, ensure that a range of different perspectives are reflected. It is important to include people who have a good understanding of the policy or function (for example those involved in policy development) as well as people with knowledge of the target groups and other stakeholders.

EXAMPLE OF EXTERNAL STAKEHOLDER MAPPING

- Funders and other partners
- NGOs – regional, national and international
- Service users – men and women
- Community organizations that work with men and boys
- Government departments
- Community organizations that work with women and girls
- Inter-governmental organizations, e.g. UN, WHO
- Professional associations and academics

STAKEHOLDER MAPPING

STEP 3 FOLLOW A STAKEHOLDER ENGAGEMENT CHECKLIST

Use this checklist to help you think through how you will involve stakeholders.

✔ What information do stakeholders need at the outset? As part of the planning process, sensitization and preparatory meetings within your organization will be important. During these meetings, discussions should focus on:

- the importance of engaging men and boys

- how engaging men and boys can also promote gender equity

- the policy development and/or policy review process that is planned

- how policy commitments will translate into programme delivery

- if a meeting is not feasible, a letter should be sent to key internal and external stakeholders.

✔ What methods of consultation will be used and at which stages of the impact assessment? Consultation methods should be tailored to the groups you want to reach. Use existing mechanisms, where possible, to avoid duplication of effort. Focus groups, written questionnaires, interview surveys or expert advisory groups all have potential value. If you are establishing working groups or consultative forums, you may need to have more than one group to cover the relevant interests and perspectives. Remember to consult internally with all staff, including staff associations and volunteers.

✔ Will stakeholders be consulted individually or in groups?

✔ What information will be made available to those being consulted? It is essential to explain in advance to those being consulted both the process of consultation and the issue being examined. It is also important to ensure that anyone you consult understands that gender equality remains the guiding principle. Otherwise, there is a risk that the intent to tackle 'men's issues' is misunderstood or the process is deliberately hijacked by organizations with their own agendas.

✔ Do representative organizations truly reflect the voice of men and women expected to benefit from the policy? If not, what is the strategy for reaching different groups of women and men?

✔ What resources are available to encourage full participation by different groups of stakeholders?

✔ How will stakeholders be kept informed about what happens after they are consulted? It can be frustrating and counter-productive to ask stakeholders to assist in policy development and then give no feedback on how their input has been used.

✔ Involve stakeholders in monitoring and evaluation work. Indeed, stakeholders should ideally be involved in the design of the evaluation approach, not only in monitoring performance or data collection. In particular, stakeholders with a role in service delivery are often well placed to identify methodological flaws arising from failure by policy makers to understand how the policy will be delivered 'on the ground'. Funders and other senior stakeholders will also be able to look critically at the robustness of proposed performance measures, to ensure that they offer a transparent and accessible means of judging success and value for money.

MODULE F

MAKING POLICY WORK IN PRACTICE

This module looks at implementation, monitoring and evaluation of policies.

One of the keys to effective policy making is to be clear from the outset about how to implement the policy and what might block you doing it successfully. A beautifully drafted policy that is fully gender-proofed is of no value if it simply sits on a shelf. Successful policies are live, practical guides to organizational practice.

STEP 1 IMPLEMENT THE POLICY

When a policy comes to be implemented, joint working with stakeholders becomes a necessity. Partnership is the key to success. Addressing pervasive problems of gender inequality requires institutional strength, networking and collaboration. If partnerships have already been established through the policy development process, this can provide a valuable operating framework. Where such partnerships are not in place, now is the time to create them.

Using existing policy mechanisms

It is important to make use of existing networks and institutions when implementing policy – especially when the policy objectives represent a significant shift from previous social and cultural norms. However, existing policy mechanisms are not always straightforward to access or use positively. For example, experts have recently argued that the architecture of national, regional and global HIV responses can themselves present obstacles to change, rather than being part of the solution, by excluding women's rights advocates and ignoring gender-transformative interventions. If you are not confident about how to work

through these existing routes, take advice from regional or national experts on which policy mechanisms are likely to prove most valuable.

Forming a taskforce or project group

A taskforce can often be a valuable means of driving forward implementation of policy changes.[26] At a very simple level, accepting an invitation to join a taskforce confers a degree of engagement with, and support for, the policy goals. There need be no limit on the size of a taskforce, but its terms of reference and frequency of meeting need to be consistent with the numbers involved. It might be composed exclusively of internal staff members and volunteers, or have a wider level of external representation. Always be clear whether such bodies have decision making powers or are advisory only.

Identifying training needs

Training programmes at both institutional and operational levels must be revised to reflect the commitment to gender equitable male involvement, and to help managers educate providers on working with men and couples. The matrix below suggests some key areas for training, but you will need to tailor this to your own needs.

IDENTIFYING TRAINING NEEDS

Subject area	Staff numbers	Volunteer numbers	Proposed action	Priority High = 4 Low = 1	Funding required
Gender mainstreaming – basic awareness					
Understanding 'Gender in Development'					
Monitoring and evaluation techniques					
Working effectively with partners and other stakeholders					

[26] In Kenya, for example, the National Male Circumcision Taskforce serves as an advisory body for the Ministry of Health policy objectives within the national health structure. The Taskforce was set up as part of the implementation of a new policy on male circumcision.

STEP 2 DISSEMINATE THE POLICY – GET IT TO PEOPLE, TELL PEOPLE ABOUT IT

A communications strategy involves building relationships with others and conveying ideas and messages in ways that the target audiences can understand. In a policy context, this is likely to involve communication both to professional groups and to new and existing user groups. The strategy used to communicate the policy can play a significant role in acceptance and implementation. Timing, choice of communication channel, language and imagery are all important to ensure that the policy intent is understood.

Involve communication specialists where possible to design dissemination strategies. It is also likely that you will need to recruit more male providers and volunteers for outreach activities, community-based distribution of contraceptives and educational activities. Partnerships with existing media and social marketing organizations can also be used to develop messages that encourage men to pursue health-seeking behaviours and that challenge negative attitudes and values.

STEP 3 DEVELOP A MONITORING AND EVALUATION STRATEGY

Monitoring and evaluation are integral to effective policy implementation. They are concerned with measuring results achieved, and analyzing and reflecting on the process that led to those results in ways that enable continuous improvement. Reporting on performance also increases accountability to those served by policies and those funding implementation of policies.

Evaluation involves bringing together the evidence you have collected and asking critical questions about your work and its impact. Evaluation is often something that happens only at the end of a project and focuses primarily on accountability. This is important – but evaluation should also tell us about the 'how' and 'why' of change, so this learning can be applied to future work.

DEVELOPING A COMMUNICATION STRATEGY

Consider these issues in developing your communication strategy:

- What message needs to be communicated?

- How will the message reach different groups of men and women? Are separate approaches necessary?

- How will men and boys be involved in the implementation of the communication strategy?

- Do the communication materials incorporate gender-inclusive language, images, symbols and examples?

- How will the message reach key organizations?

A range of formal and informal techniques will probably need to be deployed, according to the intended audience. Some of these possible approaches are listed in the chart below.

DISSEMINATION TECHNIQUES

Formal	Informal
Briefings/meetings	Networks
Newsletters	Listening/talking
Media coverage	Sharing
Staff emails	Discussion
Conferences	Training
Policy documents	Internet/intranet forums

MONITORING AND EVALUATION PRINCIPALS

Monitoring and evaluation should:

- Be underpinned by the provision of appropriate training and support to staff involved in developing and implementing policies (and volunteers, where appropriate) to increase their evaluation skills and improve decision making.

- Have at its core a participatory approach in which key people who have a concern and interest in a project are actively and meaningfully involved in its evaluation.

- Be results-focused, and aligned with wider corporate or governmental strategic goals and objectives.

- Demonstrate the impact of policies in ways that are convincing, easy to understand and intellectually honest.

Plans, timetables and resources for monitoring and evaluation must be in place at the outset. If they are not, there is an inevitable risk that baseline information will not be collected and evaluation efforts will be sidelined by the pressures of day-to-day programme and service delivery.

Evaluations in relation to policy can find it difficult to link policy changes to results in 'the real world'. However, it is essential to make this connection and to tackle the impact of policy changes on projects, programmes and other interventions, and their results. There is a need to determine indicators of success as part of policy planning, not as part of implementation.

"A good gender-focused evaluation is first of all a good evaluation, with a clear and simple objective, a transparent design, findings based on evidence, clear evaluation criteria and gender-specific indicators."[28]

STEP 4 MEASURE PERFORMANCE

To measure performance, as part of your monitoring and evaluation, you will need to determine:

a) What performance indicators to adopt.

Process indicators are concerned with what needs to happen within organizational practice in order to achieve desired outcomes. Typical dimensions of process indicators are action-orientated:

- ways of doing things
- styles
- behaviours
- practices

Outcome indicators are concerned with the intermediate or longer-term outcomes of the policy implementation and are tied to impact goals. They often refer to 'endpoints'. However, they can also be used to measure impact at interim stages. Typical dimensions of outcome indicators are:

- goals
- desired products
- numbers
- impacts
- changes
- new practices

Since most sexual and reproductive health and HIV-based policies are ultimately about effecting positive changes in male and female health status, the most critical outcome indicators tend to refer to population-based outcomes. For example, a classic outcome indicator would be 'The attributable effect of a policy on a specified previous sexual and reproductive health status at a population level, for example national, regional, district, locality'. However, it is perfectly possible and valid to identify intermediate outcomes which refer to shifts in behaviour, attitude or culture which could be positively attributable to a given policy. For example, the World Health Organization and Instituto Promundo have developed a measurement instrument entitled the 'Gender Equitable Men' scale, which focuses on men's equitable or inequitable attitudes, and can be used across different projects to provide a standard reference point.[27]

Being selective about the kind of indicators you choose and the number of indicators you use will make evaluation more manageable. Some indicators will provide evidence on several outcomes.

b) How to measure performance against them.

Quantitative and qualitative approaches should both be considered, as each has a contribution to make. Where statistical (quantitative) measures are being used, make sure that you establish 'baseline' measurements prior to implementation. The appropriate methodologies for monitoring your process and outcome measures might include use of questionnaires, surveys, focus groups, interviews, audit or observation.

It is also important to consider how you will obtain gender disaggregated data; and how data and statistical information can be collected by gender and sub-groups within those overall groups. Consider also the minimum sample sizes that will be necessary to make your findings statistically valid.

Technical difficulty or resource-intensiveness of certain mechanisms for data collection may make it impossible to use your preferred performance indicators; look for the best alternatives.

[27] International Center for Research on Women (ICRW) and Instituto Promundo (2007) *Engaging Men and Boys to Achieve Gender Equality: How Can We Build on What We Have Learned?* Washington, D.C.: Futures Group, POLICY Project.
[28] Watkins F (2004) *Evaluation of DFID Development Assistance: Gender Equality and Women's Empowerment. DFID's Experience of Gender Mainstreaming: 1995 to 2004*, Unpublished
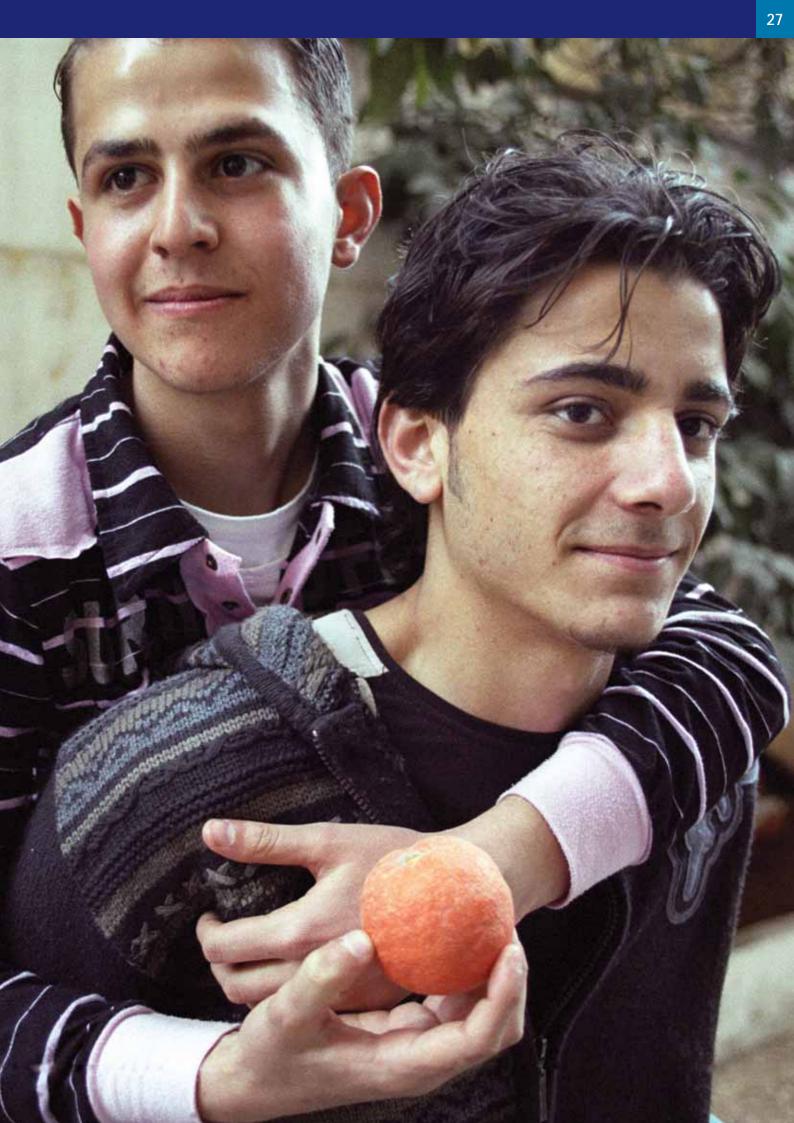
STEP 5 FINISH WITH THE MONITORING AND EVALUATION CHECKLIST

Having developed a monitoring and evaluation strategy for your new policy, use the checklist below to ensure that you have incorporated a comprehensive gender perspective. If you answer 'No' or 'Partially' to any of the following statements, you should consider how you can incorporate these considerations into your current monitoring and evaluation systems.

REMEMBER!

In relation to monitoring, evaluation, learning and reporting, do get specialist advice if you don't have the knowledge yourself. You can ask for information and data from national and international non-governmental organizations, government bodies, academics and researchers. They may also be able to provide technical support or guidance through their own staff, or funds to procure technical advice from other sources. The Resources section that follows provides links to further reference material that may be useful.

MONITORING AND EVALUATION CHECKLIST	Yes	Partially	No
Success measures are included in original policy statements.			
The monitoring and evaluation approach for policies embraces both process and outcome measures, including attitudinal shifts.			
The monitoring and evaluation approach looks at whether policy as implemented has expanded the role of men and boys in achieving gender equality, improving sexual and reproductive health outcomes, and preventing HIV.			
The monitoring and evaluation approach considers the ways in which implementation of the policy affects men and women, boys and girls (and, where appropriate, sub-sets of each group) in different ways.			
The monitoring and evaluation approach takes into account the impact of the policy on men and women not directly addressed by the policy (for example in a policy statement about access by men to HIV services, monitoring should assess the impact on women in the community, both those living with HIV themselves and those whose partners or sons are HIV positive).			
Mechanisms and resources for evaluation are agreed prior to policy implementation.			
Women and men (of different ages) are involved in the monitoring and evaluation approach.			
Wider stakeholders are involved in the monitoring and evaluation approach.			
Results of policy monitoring and evaluation are (a) publicly accessible and (b) used to inform further development of the relevant policy.			

3 Resources

Annex A IPPF policy: Men and sexual and reproductive health

INTRODUCTION

1. IPPF is committed to working with men and boys as clients, partners and agents of change in our efforts to meet the goals and objectives of the Federation's Strategic Framework. This applies to males of all sexual orientations, including those who have sex with other men (homosexual, bisexual and transgender) and regardless of HIV status.

2. This policy reflects the importance the Federation attaches to addressing male sexual and reproductive health and rights, and the need to work with men and boys, together with women and girls, as equal partners in the provision of comprehensive sexual and reproductive health services. This is critical to meeting today's global public health challenges, and is in line with the International Conference on Population and Development Programme of Action, the Millennium Development Goals and a wide body of international research.

3. This policy builds on existing programmes and initiatives within IPPF, and provides guidance to volunteers and staff on where these may need to be developed or expanded. It outlines a number of steps to be undertaken by Member Associations and the IPPF Secretariat in order to implement services in line with this commitment. All policies and programmes within the Federation should be planned taking account of this policy, and implemented and evaluated accordingly.

MEN'S ROLE IN PROMOTING GENDER EQUITY IN HEALTH

4. IPPF believes that in order to address underlying power and gender imbalances, and their effects on health, it is essential to work with men in promoting gender equity. Strategies and programmes seeking to challenge the practices and structures creating gender inequalities should, therefore, explicitly engage men and highlight their positive and influential role. Such engagement should, at all times, enhance rather than diminish women's autonomy. IPPF undertakes, where possible, to:

    i. Promote gender equity as an issue of concern for men as well as women, and highlight the benefits of a more equal society for everyone.

    ii. Work with positive male role models and undertake campaigns and educational programmes to empower men and boys to fully understand and promote gender equity and support the sexual and reproductive health and rights of others, in particular women and young people.

    iii. Work with both sexes to challenge often 'negative' traditional gender norms/stereotypes, tackle homophobia, and promote more equitable ways of living and loving.

    iv. Work with women and girls to support the development of more equitable attitudes and behaviours among men and boys.

REACHING BOYS AND YOUNG MEN

5. IPPF is committed to reaching boys and young men, together with girls and young women,[29] through comprehensive sexual and reproductive health information and services, to address the specific vulnerabilities and sexual and reproductive health needs of this group. The Federation also recognizes the importance of early intervention to foster healthy sexual health attitudes and behaviours among boys and young men. The Federation undertakes, where possible, to:

    i. Address the specific needs of boys and young men within existing sexual and reproductive health programmes, clinics and youth friendly services.

    ii. Provide appropriate information, counselling and outreach that empower boys and young men to feel respected and confident in accessing support and using condoms.

    iii. Work with young men and boys through comprehensive sexuality education and peer education programmes to increase their life skills and understanding of personal health, equitable relationships and the negative impact of traditional gender stereotypes.

[29] Boys, young men, girls and young women refer to those between the ages of 10 to 24.

MEN AS PARTNERS IN PREVENTING HIV AND OTHER SEXUALLY TRANSMITTED INFECTIONS

6. IPPF believes that the programmes and services of Member Associations should recognize the critical role that men and boys play as partners in addressing the HIV epidemic and preventing other sexually transmitted infections (STIs), and seek to facilitate their involvement. IPPF undertakes, where possible, to:

    i.   Increase male access to, and utilization of, voluntary counselling and testing (VCT) services, and to increase their uptake of necessary treatment, care and support.

    ii. Advocate for the involvement of positive male role models (particularly those living with HIV) to encourage other men and boys to use condoms and be tested for HIV and STIs.

    iii. Address the sexual and reproductive health and positive prevention[30] needs of men living with HIV, their partners and family members, including providing support for men in serodiscordant relationships.

    iv. Support the involvement of male partners in the prevention of mother-to-child transmission (PMTCT).

    v.   Involve men in strategies to reduce HIV and STI related stigma and discrimination.

MEN AS PARTNERS IN THE PROVISION OF SAFE ABORTION SERVICES

7. IPPF acknowledges that men and boys have a role to play in increasing their partners' access to safe abortion services, thus contributing to a decline in maternal morbidity and mortality related to unsafe abortion. This approach to working with men and boys should, at all times, be underpinned by support for a woman's right to choose. The Federation undertakes, where possible, to:

    i.   Provide specific information and education for men on abortion and how to support interventions to increase access to safe abortion services.

    ii. Work with men and boys to advocate for changes in legislation, to address stigma and discrimination, and to remove obstacles to accessing safe abortion services.

    iii. Enable and encourage men and boys to participate in pre- and post- abortion counselling sessions, if a woman so desires.

MEN AS PARTNERS IN IMPROVING ACCESS TO SERVICES

8. IPPF recognizes the importance of working with men to reduce barriers and increase access to sexual and reproductive health information, sexuality education and high quality family planning services. This includes sensitizing men to their responsibilities in promoting women and adolescents' sexual and reproductive health, well-being and rights. IPPF undertakes, where possible, to:

    i.   Strengthen information and education which promote male responsibility and the sexual and reproductive health needs and rights of women, men and adolescents.

    ii. Work with men to encourage them to assume full responsibility for their sexual behaviour and to protect the health, well-being and rights of their partner and family.

    iii. Promote joint decision making and shared responsibility by men and women, particularly in relation to use of contraception and other safer sex techniques, within a gender equity framework.

MEN AS FATHERS

9. IPPF promotes the important role that men play as fathers. The Federation supports the development and promotion of gender equitable fatherhood, and recognizes the important role of fathers in safe motherhood and antenatal care, as well as in the promotion of women and adolescents' physical and psychological well-being. The Federation undertakes, where possible, to:

    i.   Provide specific support, education and information to fathers, and promote the role of responsible fathering in improving family health and reducing fatality risks pre- and post-childbirth.

    ii. Embrace fatherhood in its diversity of forms, recognizing that working with men as parents provides an important opportunity to also address other sexual and reproductive health needs and issues.

    iii. Provide support and counselling services to facilitate the greater sharing of family responsibilities and the concerns for pregnancy support.

---

30 Positive prevention is defined as prevention for, and with, people living with HIV.

MEN AS PARTNERS IN ELIMINATING GENDER-BASED VIOLENCE

10. The Federation is committed to involving men in the reduction of gender-based violence. The Federation believes that policies, programmes, services and campaigns should explicitly highlight the role of men as part of the solution to addressing and preventing this violence. Such an approach should remain accountable to women, and promote their empowerment. IPPF undertakes, where possible, to:

i.   Highlight that violence against women also negatively impacts on men and boys and their families, and that an end to such violence will bring benefits to everyone's health and well-being.

ii. Support men's anti-violence activism that demonstrates clear alignment with principles of gender equity.

iii. Promote violence prevention strategies which address the root causes and impacts of violence, including violence and abuse against men and boys, particularly in high-risk settings.

MEN'S SEXUAL AND REPRODUCTIVE HEALTH NEEDS AND RIGHTS

11. The Federation is committed to ensuring that programmes and services also identify and address the sexual and reproductive health needs and rights of men and boys. IPPF believes that this is necessary both to improve the health of men and boys themselves, and as an important way of encouraging men to enhance the sexual and reproductive health of others, in particular women and young people. The Federation undertakes, where possible, to:

i.   Create or expand programmes and services to specifically address men and boys' sexual health and reproductive needs and concerns.

ii. Review existing sexual and reproductive health policies, programmes and interventions to ensure that they actively promote the greater engagement of men and boys and facilitate their access to services.

iii. Promote the use of male role models to encourage other men to take greater care of their sexual and reproductive health.

iv. Enhance understanding among men of the sexual and reproductive health rights and needs of their partners, lovers and children.

POLICY IMPLEMENTATION

In line with this policy, the IPPF Secretariat and Member Associations are urged to raise awareness among volunteers and staff to develop their own appropriate strategies. More specifically:

12. Member Associations should endeavour to:

i.   Integrate, based on the appropriate areas of this policy, a focus on working with men and boys, and addressing their sexual and reproductive health needs, within existing policies and programmes.

ii. Provide training and support to build the capacity, skills and attitudes of staff, service providers and peer educators to work with men and boys, particularly the most vulnerable.

iii. Create and maintain strategic partnerships with other organizations working with men and boys, including linkages to enable appropriate referrals.

iv. Review and/or plan, implement and evaluate programmes and activities in line with this policy.

13. Central Office and Regional Offices will seek to:

i.   Support development of these programmes and services and, where possible, provide Member Associations with technical support. IPPF Central and Regional Offices will also endeavour to raise funds for the implementation, and scaling-up, of this work.

ii. Ensure that relevant IPPF standards and guidelines (clinical and non-clinical) reflect the above policy.

iii. Develop strategies, where possible, to integrate a stronger focus on men and boys within the Federation's core business, including a monitoring and evaluation and gender analysis framework for this aspect of the Strategic Framework.

iv. Establish and/or develop existing links with organizations working on this issue.

Annex B Glossary: Gender mainstreaming terms

TERM/WORD	EXPLANATION
Culture	The distinctive patterns of ideas, beliefs and norms which characterize the way of life and relations of a society or group within a society.
Diversity	The range of values, attitudes, cultural perspectives, beliefs, ethnic background, sexual orientation, skills, knowledge and life experiences of the individuals making up any given group of people.
Empowerment	Developing the ability to achieve full potential by changing existing power relationships and the forces that marginalize women and disadvantaged social groups. Goals include challenging and transforming behaviour, structures and institutions that perpetuate discrimination and inequality (such as family, religion and patriarchy), and improving decision making and access to resources.
Gender	A concept that refers to the social differences, as opposed to the biological ones, between women and men that have been learned, are changeable over time and have wide variations within and between cultures.
Gender analysis	The study of differences in the conditions, needs, participation rates, access to resources and development, control of assets, decision making powers, etc. between women and men in their assigned gender roles.
Gender audit	The analysis and evaluation of policies, programmes and institutions in terms of how they apply gender-related criteria.
Gender-based violence	All forms of violence targeted at an individual because of his or her gender, including, but not limited to, domestic violence, rape and sexual assault, community violence, and emotional or psychological abuse.
Gender-blind/neutral	Failing to distinguish between the needs of men and women, neither reinforcing nor questioning gender roles. In some cases, gender neutral can also mean having no differential positive or negative impact for gender relations or equality between women and men.
Gender disaggregated data	The collection and separation of data and statistical information by gender to enable comparative analysis/gender analysis.
Gender discrimination	The systematic, unfavourable treatment of individuals on the basis of their gender, which denies them rights, opportunities or resources.
Gender division of labour	Gender division of labour refers to the social allocation of activities on the basis of sex. Gender division of labour cannot be derived from sex or the biological traits of women and men. It is a learned process and, as such, it forms the basis of the gender relations in the society.
Gender equality	The measurable equal representation of women and men. Gender equality does not imply that women and men are the same, but that they have equal value and should be accorded equal treatment.
Gender equity	The application of fairness or justice in all gender issues, including both the composition of power structures and to social divisions of labour. In reproductive health, for example, women bear the larger share of costs, dangers and burdens.
Gender impact assessment	Examining policy proposals to see whether they will affect women and men differently, with a view to adapting these proposals to make sure that discriminatory effects are neutralized and that gender equality is promoted.
Gender in Development	The Gender and Development perspective grew out of critiques of the Women in Development approach beginning in the late 1970s/early 1980s and remains the dominant approach in the development field today. The approach is primarily based on the idea that the efficiency focus of Women in Development instrumentalized women, and that an exclusive focus on women did not take into account the fact that gendered subordination may act as a barrier to women's participation in development. The Gender in Development approach focuses more closely on gender relations, that is, how gender norms affect both men and women's place in society and the relationship between them.

TERM/WORD	EXPLANATION
Gender in Development (cont.)	The approach also attempts to demonstrate the ways in which gendered subordination is constructed by a variety of institutions: the household, the market, the state and the community. Recent Gender in Development approaches have focused on development institutions, seeking ways to better understand the gender bias (and subsequent resistance to gender mainstreaming and gender analysis) inherent in these organizations themselves. Although the two approaches are theoretically very distinct, recent critiques have argued that the distinction is not apparent in practice, and that development institutions remain focused on Women in Development efficiency approaches. There have also been critiques of the misinterpretation of 'gender' to mean 'women' and the co-option of processes like gender analysis and gender mainstreaming by development organizations that have manipulated these theories and used them to serve their own (unchanged) purposes.
Gender mainstreaming	Gender mainstreaming is the process of assessing the implications for women and men of any planned action, including legislation, policies or programmes, in any area and at all levels. It is a strategy for making women's as well as men's concerns and experiences an integral dimension in the design, implementation, monitoring and evaluation of policies and programmes in all political, economic and social spheres, such that inequality between men and women is not perpetuated.
Gender norms	Social expectations for appropriate behaviours of men as compared to women and women as compared to men. Gender norms are passed on to boys, men, girls and women by their families, peer groups, and social institutions among others.
Gender-proofing	A check carried out on a policy proposal to ensure that any potential gender discriminatory effects arising from that policy have been avoided and that gender equality is promoted.
Gender relations	Hierarchical power relations between men and women that tend to disadvantage women. Although gender hierarchies are often accepted as 'natural', they are in fact socially determined, subject to cultural differences, and also change over time. They form and are formed by a range of institutions: for example, the family, legal systems and the market.
Gender roles	Learned behaviours in a given society/community, or other special group, as a result of which activities, tasks and responsibilities are perceived as male and female. Gender roles are affected by age, class, race, ethnicity, religion and by the geographical, economic and political environment. Changes in gender roles often occur in response to changing economic, natural or political circumstances, including development efforts. Both men and women play multiple roles in society. The gender roles of women have been traditionally identified as reproductive, productive and community managing roles, while men's are traditionally categorized as either productive or community politics.
Gender-sensitive	Programmes that recognize the specific needs of men and women based on the social construction of gender roles.
Gender socialization	Patterns of behaviour taught to children and adults in order to help them learn to behave as acceptable females or males. It begins at birth via naming, clothing and treatment of the infant, and it continues to be taught and reinforced throughout life within most social institutions.
Gender training	A facilitated process of developing awareness and capacity on gender issues, to bring about personal or organizational change for gender equality.
Gender-transformative	Approaches that seek to transform gender roles and promote more gender equitable relationships between men and women.
Inequitable gender norms	These relate to the negative influence of rigid expectations of women's role in society as compared to men. For example: inequitable gender norms negatively influence sexual and reproductive health-related behaviours and disease prevention as well as men's use of violence against women.
Men and masculinities	A framework to better understand the male side of the gender equation. It involves questioning the masculine values and norms that society places on men's behaviour, identifying and addressing issues confronting men and boys in the world of work, home and relationships, and promoting the positive roles that men and boys can play in attaining gender equality.

TERM/WORD	EXPLANATION
Patriarchy	Systemic societal structures that institutionalize male physical, social and economic power over women.
Positive action	A generic term for programmes which take some kind of initiative, either voluntarily or under compulsion of the law, to increase, maintain or rearrange the number or status of certain group members usually defined by race or gender, within a larger group. Positive action is permitted under the sex and race legislation in order to help overcome obstacles to full equality of opportunity. Positive action is targeted at a particular group and intended to eliminate and prevent discrimination or to offset disadvantages arising from existing attitudes, behaviours and structures.
Reproductive rights	Reproductive rights rest on the recognition of the basic right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children and to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health. They also include the right of all to make decisions concerning reproduction free of discrimination, coercion and violence (World Health Organization).
Sex	The biological characteristics that define humans as female or male. The sets of biological characteristics tend to differentiate, but they are not mutually exclusive, as there are individuals who possess both.
Sex disaggregated statistics	The collection and separation of data and statistical information by sex to enable comparative analysis (sometimes referred to as gender disaggregated statistics).
Sexual orientation	Refers to the primary sexual attraction to the same or opposite sex, or both sexes. Most societies find it hard to accept that homosexuality or bisexuality is a universal part of human sexuality. Many people who are gay, lesbian or bisexual neither experience nor desire a choice in their sexual orientation.
Sexual rights	Sexual rights embrace human rights that are already recognized in national laws, international human rights documents and other consensus documents. These include the right of all persons, free of coercion, discrimination and violence, to the highest attainable standard of health in relation to sexuality, including access to sexual and reproductive health care services; seek, receive and impart information in relation to sexuality; sexuality education; respect for bodily integrity; choice of partner; decide to be sexually active or not; consensual sexual relations; consensual marriage; decide whether or not, and when to have children; and pursue a satisfying, safe and pleasurable sexual life.
Social construction of gender	Gender as a social construct attributes different roles and responsibilities to females and males, and gives them unequal access to resources and power which are reinforced in social interaction within social institutions, for example the family, schools, religious settings, workplaces, etc.
Women in Development	Women in Development is an approach developed in the early 1970s as a reaction to women having been left out of the development process. Women in Development evolved from a (primarily) North American liberal feminist framework and was also heavily influenced by the work of women researching development, such as Ester Boserup.[31] Women in Development gave primacy to women's productive roles and stressed the integration of women into the market economy, as it was based on the premise that women's subordination was directly linked to their exclusion from the formal marketplace. Early Women in Development approaches focused on 'women in isolation' and took on mostly women-only projects and research, for example, regarding women's economic contribution and women's contribution to agricultural productivity. The most common representations of Women in Development policy were the anti-poverty and the efficiency approaches, which viewed women's participation in development as necessary only insofar as their participation in the market was required for the rapid economic growth sought by development agencies and international monetary institutions.

For further details on Sexual and Reproductive Health terms, please refer to the International Planned Parenthood Federation (IPPF) Glossary. This can be accessed at www.ippf.org.

[31] Ester Boserup (1970), Women's Role in Economic Development, London: Earthscan

Annex C Case study: Policy on male involvement in reproductive health in Cambodia[32]

Starting in 2003, concerted efforts by a group of non-governmental organizations in Cambodia secured government support for a new policy after more than two years of discussion and engagement:

"…a group of advocates recognized that involving men was an important aspect of improving the country's reproductive health status. Members of MEDiCAM, a large network of health nongovernmental organizations in Cambodia, formed the Reproductive Health Promotion Working Group (RHPWG), with technical assistance from the POLICY Project.

Working as a bridge between implementers and policymakers, the RHPWG identified male involvement in reproductive health as its top advocacy priority. Through concerted advocacy efforts, the group succeeded in garnering policymaker support and worked with relevant ministries and other stakeholders to establish standard guidelines for male involvement programs.

The draft guidelines were structured to align with the major components of the country's forthcoming Strategic Plan for Reproductive Health in Cambodia (2006–2010), which now refers explicitly to male involvement in several places. Cambodia's experience is a good model for other countries seeking to strengthen male involvement initiatives through advocacy, policy development, and implementation.

…. A policy foundation for program work can help ensure the scaling up of initiatives. Prior to this work in Cambodia, activities to involve men were small in scope and primarily conducted by NGOs. Weaving male involvement into the Strategic Plan for Reproductive Health in Cambodia (2006–2010) makes it more likely that male involvement will become a central feature of public and NGO-led RH activities."

DATE	ACTIVITY	MILESTONE/ACHIEVEMENT
September 2003	Reproductive Health Promotion Working Group (RHPWG) formed	RHPWG specifies its reproductive health advocacy mission
November 2003	Initial workshop on advocacy	RHPWG identifies advocacy objective to develop male involvement guidelines
February 2004	RHPWG advocacy small grant awarded	
March 2004	Workshop on policy analysis and presentation skills	Policy gaps and opportunities identified
May 2004	Workshop to draft advocacy tools and plan stakeholder meeting	POLICY identifies additional technical assistance needs
June 2004	POLICY core and Interagency Gender Working Group funds allocated	
September 2004	Workshop on male involvement	RHPWG adopts male involvement principles and finalizes advocacy materials
October 2004	Stakeholder meeting with non-governmental organizations, ministries, donors	Mother and Child Health Director supports formulation of male involvement guidelines
December 2004	Roundtable with senior ministry officials	Ministry of Health, Ministry of Women's Affairs and Ministry of Education agree on need for guidelines; RHPWG tasked with drafting
February 2005	POLICY and RHPWG complete paper summarizing recommendations from key informants	
May 2005	Workshop to draft guidelines with multisectoral partners	Minister of Health endorses male involvement
June 2005		Male involvement language included in National Standard Guidelines for Adolescent-Friendly Reproductive and Sexual Health Services
November 2005	RHPWG formally introduces draft guidelines at Ministry of Health consultative meeting on the Strategic Plan for Reproductive Health in Cambodia (2006–2010)	Male involvement included in one of four guiding principles
December 2005	Final Ministry of Health consultative meeting on the strategic plan	Male involvement incorporated in Strategic Plan for Reproductive Health in Cambodia (2006–2010): implementers specifically referred to draft guidelines; draft guidelines cited as reference, with RHPWG listed as author; male involvement included in proposed essential service package

[32] Greene ME, Walston N, Jorgensen A, Sambath MR and Hardee K (2006) From Adding to the Burden to Sharing the Load: Guidelines for Male Involvement in Reproductive Health in Cambodia. Washington, D.C.: Futures Group, POLICY Project.

Men and boys are willing to change their attitudes and practices and, sometimes, to take a stand for greater gender equality. By using the guidance in this toolkit, you will maximize your chances of designing policies that are successful in practice as well as in theory.

Men-streaming in sexual and reproductive health and HIV

A toolkit for policy development and advocacy

Sexual and reproductive health and rights and HIV programmes are likely to have greater impact on communities if they address constructively the actual and potential role of men in society. At present, however, many such programmes often fail to target men, to address their specific needs and understand the wider influence of male and female gender norms.

This **Men-streaming toolkit** helps organizations create, and advocate for, affirmative policies which promote the positive roles that men can play in improving their own sexual and reproductive health – and those of women and children. It explains why this is important and how to achieve it. It is intending for use primarily for those responsible for developing organizational policy at national, regional and international levels.