



# Getting to Equal: Men, Gender Equality, and Sexual and Reproductive Health and Rights\*

## The Vision

Imagine what people's sexual and reproductive lives would look like if people in all their gender and other diversities equally enjoyed knowledge, skills, self-esteem, and access to services; conducted their relationships with respect for their partners and their rights; avoided or embraced parenthood with intention and planning; and made decisions that took into account the impact of their choices throughout their lives and throughout the lives of their partners and children. Imagine if governments everywhere prohibited discrimination, proactively advanced human rights and gender equality, and ensured that everyone enjoyed their full right to health as enshrined in international laws and global and regional declarations.

This vision motivates Equimundo's *Getting to Equal* initiative and this report. The report aims to shift the global discourse on men and sexual and reproductive health and rights (SRHR) among funders, researchers, policymakers, program implementers, and service providers toward a more holistic, gendered, and relational understanding of SRHR and toward the achievement of gender equality.

The world is far from achieving this vision. Restrictive gender norms in most parts of the world reinforce stereotyped roles, including the idea that SRHR is "women's business," and health policies commonly reflect those norms. The large gaps in collective knowledge – and the strongly held view that SRHR is primarily a women's issue – reflect a worldview that does not treat men's SRHR as central to their lives or to the lives and well-being of others.

Through a review and analysis of the latest global evidence, this report offers up a new way to think about men and SRHR from two angles: it reinforces what we know already – that men are crucial to achieving SRHR for everyone – and it makes the case that SRHR is central to men's lives. Reimagining men's important roles in SRHR could contribute to the broader achievement of SRHR and other related health and development outcomes.

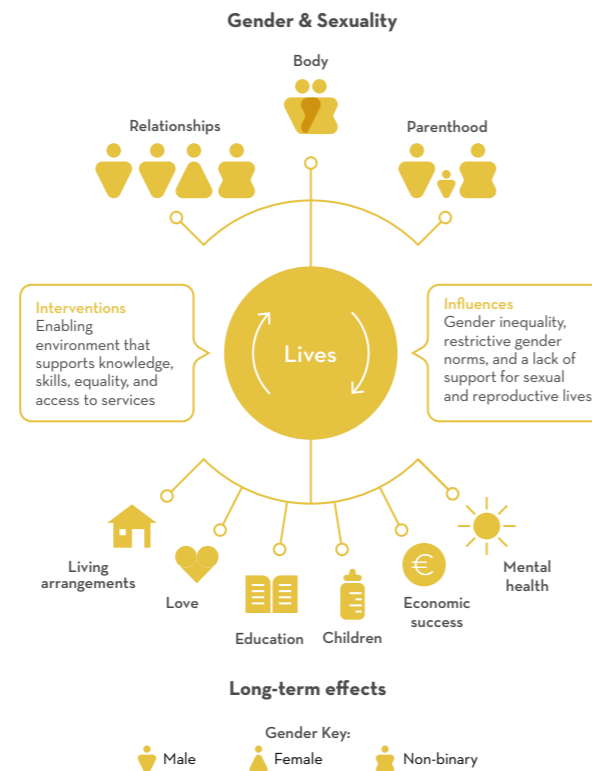
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## Contributing to a Busy Field with a New Framing of the Issues

The Sustainable Development Goals, including universal health coverage have created an unprecedented moment to advance a new understanding of men's relationship with SRHR. Despite considerable research and advocacy on men and SRHR over the 25 years since the International Conference on Population and Development in Cairo, men and boys remain quite peripheral to the SRHR field.

However, SRHR is central to men's lives everywhere, and the global data arrayed for this *Getting to Equal* report bear this out, even when data reflect the realities of low- and middle-income countries in some instances and high-income countries in others. The report is organized around three key aspects of SRHR that shape men's lives: bodies, relationships, and reproduction, each of which has its own section. The final section looks at how – mediated by factors that support and undermine their health and well-being – these aspects of SRHR ultimately shape other outcomes throughout men's lives, including their mental health, schooling, economic roles, caregiving opportunities, and living arrangements.



## Men's Bodies: Knowledge, Health, and Identity

Part and parcel of SRHR is a discussion of men's *bodies* – how boys and men learn about sexuality, how they feel about themselves, their attitudes toward and respect for others, the conditions of sexual initiation, and how they learn to care – or not – for their own bodies. Globalization has spread a highly muscular ideal for men, and research shows that 22 percent of young men in the United States have muscularity-oriented eating disorders.<sup>1</sup> The timing and conditions of sexual debut vary greatly across settings, with early debut associated with coercion, as in South Africa, where approximately 50 percent of boys who had first sex before age 13 were coerced.<sup>2</sup>

In the absence of comprehensive sexuality education, pornography is standing in as a source of readily available information. Some pornography may support learning and exploration, in particular for non-heterosexual young people exploring their sexuality, but pornography may also reinforce stereotypes and violence.<sup>3</sup> Dominant masculine norms can also contribute to risky sexual behavior, multiple relationships, and reluctance to seek treatment or participate in counseling, all factors that jeopardize their health and that of their sexual partners.

## Men's Relationships: Intimate Partnerships, Health, and Rights

Intimate *relationships* form the context in which much of a person's life may be spent, and a sexual double standard for women and men has a pervasive effect on relationship dynamics, power differentials, and relationship violence and control. Though age at first marriage has been increasing for women, it has not changed much for men. However, in many low- and middle-income countries, men have experienced declines in *ever* marrying over the past 15 years, with especially sharp drops in the proportion of young men who had ever married or been in a union among those aged 20 to 24 in West and Central Africa and those aged 25 to 29 in South Asia.<sup>4</sup> Few comparative data exist on LGBTQIA+ experiences related to intimate relationships, despite a documented increase in countries with laws supporting marriage equality.

Additionally, commercially mediated marriage across national borders has risen sharply in recent years, especially in countries with skewed sex ratios as a result of son preference; a third of all marriages in Taiwan,

for example, involve women from Southeast Asian countries.<sup>5</sup> The Americas stand out for the massive increase in consensual unions as a fraction of all partnerships between 2000 and 2010.<sup>6</sup> Altogether, the research in this area highlights shifts in the aggregate patterns of sexual partnering and the importance of social norms in determining relationship experience.

## Men's Reproduction: Motivations and Intentions

Another vital component of men's SRHR is *reproduction*, including contraceptive decision-making, the degree to which pregnancy is wanted, son preference, childlessness, and the sensitivity of men's fertility to economic conditions. Relationship dynamics are essential for understanding if and when men become parents and how many children they may have, and men play an important role in determining how many children women may have as well. An estimated 10 to 40 percent of women experience reproductive coercion (when male partners limit their ability to control their reproduction) across low- and middle-income countries; reproductive coercion is associated with physical and sexual intimate partner violence and contributes to unintended pregnancy and other poor reproductive health outcomes.<sup>7</sup>

Additionally, men's economic roles make their family formation and reproduction vulnerable to economic turbulence, with repercussions that can preclude marriage and childbearing or that can lead to increased fertility at older ages, as occurred among Greek men between 1992 and 2011.<sup>8</sup> Also important are some of the unique qualities of men's reproduction: that they may have children without knowing about it and that they are more likely than women to experience increased fertility as a consequence of sequential relationships after separation and divorce.

## Men's Lives: Reframing SRHR and What It Means to Men

An important contribution of this research is its documentation of the long-term impact of SRHR on other aspects of men's *lives*. From how negative experiences in disclosing sexual orientation among LGBTQIA+ youth affect their school performance and mental health to the intergenerational consequences for men's marriage prospects of son preference in the parental generation, the impacts of different aspects of SRHR are varied and lasting. Data on the long-term impact of SRHR has generally been collected on adolescent girls and women as an important argument for investing in SRHR. However, many of the benefits of this investment are also experienced by adolescent boys and men: Just like adolescent motherhood, adolescent fatherhood reduces schooling and long-term human capital development, while pregnancy prevention supports school completion. These benefits accrue not only to men but also to their sexual partners and to any children they may have. Data from the United States show that the "schooling penalty" of unintended pregnancy has risen for adolescent boys while declining for adolescent girls over the past 20 years.<sup>9</sup> When men delay childbearing in response to economic crisis, they may never become fathers, another long-term impact of SRHR that has implications for men's well-being and the unfolding of their lives.

## Recommendations

Health systems and services, schools, policies, and norms all reinforce the idea that SRHR is primarily of concern to women. To reposition men in relation to SRHR, and to achieve and live up to the commitments and promise of the Sustainable Development Goals, a broad range of actions are needed and are elaborated upon in the full report:

**Advocacy** is needed to change the culture and institutionalization of men's disengagement with SRHR. A top priority is comprehensive sexuality education for everyone of all ages to teach about sexuality, challenge gender inequality and restrictive gender norms, and combat violence against women, including and in addition to against LGBTQIA+ people.

**Policies** are needed that reframe the connections between men's lives and SRHR. The call for universal health coverage and the principle of synergy in the Sustainable Development Goals provide an impetus for governments to think more holistically about how they invest in sexual and reproductive health and to integrate a gendered perspective.

**Services** are needed that embrace a gender-transformative approach, open up space for boys and men to play

more positive roles in supporting their sexual partners, and serve men's needs along with those of girls and women and people of all gender identities and sexual orientations.

**Research** is needed to address blind spots and build the evidence on men's relevance to SRHR. Systematic data gaps reinforce stereotypes about men and impede a more comprehensive framing of men and SRHR across the life course and what works to engage them.

The report emphasizes the central role of SRHR in the lives of men and demonstrates that they – and those around them – miss out when they are unable to manage their SRHR with information, skills, and respect. The substantial rewards to be reaped from men's more informed, active, and caring roles as SRHR citizens could improve the health and lives of everyone.<sup>10</sup>

### Getting to Equal Initiative on Men and SRHR

To learn more about the Getting to Equal initiative, visit <https://equimundo.org/resources/getting-to-equal-overview/>

#### Principles:

1. Repositioning men in SRHR must be accompanied by a sustained focus on women's rights and choice.
2. The relational aspects of SRHR must be met with gender-transformative programs and policies.
3. Work with men should reflect their diversity and the reality that men and ideas about manhood vary across contexts and evolve over time.

#### Products of the initiative to date:

1. **Overview of the initiative.**
2. **Getting to Equal: Men, Gender Equality, and Sexual and Reproductive Health and Rights.** Global review.
3. **Strengthening National Responses: A Review of Family Planning Costed Implementation Plans.** Analysis of how national Family Planning 2020 plans incorporate a focus on engaging men and transforming gender norms (forthcoming, with Family Planning 2020).
4. **Getting to Equal: Engaging Men and Boys in Sexual and Reproductive Health and Rights and Gender Equality: A Call to Action.** Provides guiding principles and highlights the key actions produced in partnership with Family Planning 2020.

### References

1. Nagata, J. M., Murray, S. B., Bibbins-Domingo, K., Garber, A. K., Mitchison, D., & Griffiths, S. (2019). Predictors of muscularity-oriented disordered eating behaviors in US young adults: A prospective cohort study. *International Journal of Eating Disorders*.
2. Richter, L., Mabaso, M., Ramjith, J., & Norris, S. A. (2015). Early sexual debut: Voluntary or coerced? Evidence from longitudinal data in South Africa—the Birth to Twenty Plus study. *South African Medical Journal*, 105(4), 304–307.
3. Kingston, D. A., & Malamuth, N. M. (2011). Problems with aggregate data and the importance of individual differences in the study of pornography and sexual aggression: Comment on Diamond, Jozifkova, and Weiss (2010). *Archives of Sexual Behavior*, 40(5), 1045–1048.
4. Demographic and Health Surveys from 28 countries, analysis by authors, updated and adapted from Mensch, B. S., Singh, S., & Casterline, J. B. (2005). Trends in the timing of first marriage among men and women in the developing world. In C. B. Lloyd, J. R. Behrman, N. P. Stromquist, & B. Cohen (Eds.), *The changing transitions to adulthood in developing countries: Selected studies* (pp. 118–171). Washington, DC: The National Academies Press.
5. Lin, Y. C., Yen, Y. Y., Chang, C. S., Ting, C. C., Chen, P. H., Chen, C. C., ... Huang, H. L. (2014). Oral health disparities of children among southeast Asian immigrant women in arranged transnational marriages in Taiwan. *Caries Research*, 48(6), 575–583.
6. Esteve, A., & Lesthaeghe, R. J. (Eds.). (2016). *Cohabitation and marriage in the Americas: Geo-historical legacies and new trends*. Springer.
7. Miller, E., Decker, M. R., McCauley, H. L., Tancredi, D. J., Levenson, R. R., Waldman, J., ... Silverman, J. G. (2010). Pregnancy coercion, intimate partner violence and unintended pregnancy. *Contraception*, 81(4), 316–322.
8. Tragaki, A., & Bagavos, C. (2014). Male fertility in Greece: Trends and differentials by education level and employment status. *Demographic Research*, 31, 137–160.
9. Covington, R., Peters, H. E., et al. (2011). *Teen Fatherhood and Educational Attainment: Evidence from Three Cohorts of Youth*. Ithaca, NY, Cornell University.
10. Heymann, J., Levy, J. K., Bose, B., Ríos-Salas, V., Mekonen, Y., Swaminathan, H., ... Darmstadt, G. L. (2019). Improving health with programmatic, legal, and policy approaches to reduce gender inequality and change restrictive gender norms. *The Lancet*, 389(10087), 2367.