MenCare+ Key Outcomes from a Four-Country Initiative to Engage Men in SRHR, Caregiving and Violence Prevention.







RWANDA



SOUTH AFRICA

In 2013, Rutgers and Promundo-US started a three-year collaboration called MenCare+: Engaging Men in a Four-Country Initiative. The MenCare+ programme aimed to engage men as equitable partners in maternal, newborn and child health, sexual and reproductive health and rights (SRHR), caregiving, and violence prevention in Brazil, Indonesia, Rwanda and South Africa. Implemented by a consortium of local NGOs and partners in each country, MenCare+ was designed as a comprehensive programme, with a set of complementary and integrated interventions, to achieve optimum impact; as opposed to the piecemeal implementation of one or two components. This sheet gives an overview of the key findings of the MenCare+ programme across all four countries.

ADOLESCENTS AND YOUNG PEOPLE

More than 8,600 young men and women participated at MenCare+ organised gender-transformative group education on SRHR and gender equality. Separate evaluation of MenCare+ interventions, using quantitative and qualitative methods, indicated the following changes:

- In Brazil, 'Shameless Campaign' activities led to a statistically significant increase in condom use among young women, and showed promising trends for young men. The campaign resulted in positive changes in young men's and women's attitudes about gender roles and contraceptives.
- In Indonesia, survey results found that young men's gender equitable attitudes improved significantly, with changes most apparent in their growing support for a more equitable division in caregiving and domestic tasks.
- In Rwanda, participation in Bandebereho group education led to statistically significant improvements in gender equitable attitudes, and increased demand for SRH services by young men and women. Young men and women also started displaying greater support for condom use, and young men reported their increased participation in household and domestic tasks.
- In South Africa, SRH educational groups helped young men to redefine their masculinity in more equitable terms: survey results suggested a statistically significant increase in young men's gender equitable attitudes. Contraceptive use increased by almost 11 percentage points among sexually active young men, and overall attitude towards contraceptives improved significantly. Qualitative findings supported these results, with men becoming more supportive of their partners and community, and serving as role models to other young men.

Findings from the surveys in all four countries, as well as participant testimonies, indicated positive changes towards more equitable attitudes on gender roles and contraception, and suggested changes in behaviour, including increased participation of young men in household work, and increased use of condoms in some settings. However, partners in some countries did report that strong patriarchal and religious norms continue to present barriers in challenging deeply entrenched norms. These include men serving as the head of the household, and being overall responsible for income generation.



FATHERS AND COUPLES

More than 6,900 current or expectant fathers, and their partners, participated in gender-transformative group education on maternal, newborn and child health, fatherhood and caregiving, SRHR, and gender equality. Evaluation findings pointed out to the following changes:

- In Brazil, group education for expectant parents led to more equitable attitudes, especially around women's sexual and reproductive rights. Increased communication about family planning was also observed, although not statistically significant. Qualitative data suggests that men had started taking a more active role during the prenatal period, and were more supportive of caregiving.
- In Indonesia, survey results indicate that men have become significantly more involved with their children. They played and talked more often with their children, and assisted children on their homework. Qualitative results indicate that after the programme, couples also started viewing contraception as a shared responsibility, and a common issue for discussion.
- In Rwanda, preliminary findings from a randomised controlled trial (RCT) of participants in couples' group education suggest that intervention has led to more equitable attitudes, greater communication on family planning, heightened contraceptive use, increased participation of men in antenatal care visits, and a reduction in women's experience of intimate partner violence. The full findings of the RCT will be available in mid-2016.
- In South Africa, gender equitable attitudes increased significantly among men participating in parenting groups. Couples who used a condom on the last time they had sex increased with 11 percentage points after the programme.

The findings indicate that approaching men as part of the solution, and creating safe spaces to share experiences around parenting and relationships, have enabled men and their partners to challenge gender-biased norms, and adopt more equitable attitudes and behaviours. These have led to new, and more positive perspectives on masculinity, including greater involvement of fathers and supportive partners at the home, and in childcare. However, across the countries, challenges to men's greater participation in antenatal care and delivery continue to persist. In some settings, men's own attitudes continue to limit their involvement. In other settings, structural barriers-such as the gender biases of health providers, or poor or inadequate health facilities-prohibit male involvement, particularly in delivery.

MEN'S COUNSELLING

Partners in all four countries adapted and implemented individual or group counselling methodologies for male perpetrators of violence in intimate partner relationships. As part of this effort, new gender-based violence (GBV) counsellors were trained, existing counsellors were equipped with methods and tools to better engage with male perpetrators, and linkages with the police and the justice sector were created.

In Brazil, Promundo supported Instituto Noos to integrate gender-fair perspectives on fatherhood and caregiving into the gender-reflective group exercises they facilitate with male perpetrators of intimate partner violencereferred by the court system. An evaluation of the adapted methodology found that integrated discussion of gender and fatherhood had a far greater impact on reducing men's use of violence, and helping them to deal with conflict.

- In Indonesia, improved coordination between the police, hospitals, and social services that provide counselling-including for men with abusive behaviour-made the process of referrals more effective. Due to this system strengthening, many men entered the men's counselling programme. But, dropout rate remained relatively high: anger management counselling was often considered non-masculine, and the number of sessions was seen as excessive.
- In Rwanda, the Rwanda Men's Resource Centre (RWAMREC) worked with mental health professionals in the public health system to train community facilitators who implemented 'Pillars of Peace' groups with men to foster better couple relations, and end men's use of violence. Qualitative data from the piloting of these groups indicates that men's participation in these spaces helped improve their communication and relationships with their partners and children, and to adopt new behaviours to resolve conflict, without the use of violence.
- In South Africa, collaboration with the court system and the National Department
 of Social Development has resulted in referrals of men to GBV counselling
 services. More than 1,100 men and women received counselling in the three
 years that MenCare+ ran in South Africa. Improved relationship between partners
 was a common finding in the qualitative evaluation. Both partners reported to
 have developed a more respectful and supportive relationship, through the
 counselling programme. Both men and women expressed that there is now less
 fighting in their relationship, and the male partner has become more supportive.

The findings across the four countries suggest that different approaches to men's counselling have helped men to develop more respectful and supportive relationships with their partners. Men also expressed that these approaches helped increase their respect for themselves. Although recruitment and retention of men was a challenge in several settings, these were mitigated through partnership and linkages with the social services and the justice sector.

HEALTH AND SOCIAL SERVICES

MenCare+ partners also worked with health institutions, and others, to foster an enabling environment for gender equality and men's involvement in MNCH, SRH and violence prevention, by building the capacity of health and social workers to provide gender-responsive services. In total, more than 2,500 health sector professionals received training on adolescent SRHR, and on male involvement in family planning, antenatal care, and delivery.

- In Brazil, Promundo partnered with the Ministry of Health to develop and launch an online educational platform to train health staff on genderresponsive approaches to engage men on MNCH. In-person trainings conducted led to increased awareness of the importance of engaging men. As one participant stated, "It's as though... we had taken off a blindfold... and began to see the men who were there. Perhaps they were always there, but we only now perceive their presence."
- In Indonesia, Rutgers WPF Indonesia trained health workers to facilitate the increased participation of men in antenatal care, and their presence at childbirth. The PULIH Foundation, along with Rutgers WPF Indonesia, published training modules and guidelines for health workers on how to respond to issues such as MNCH, and GBV. In view of strengthening the capacity of health institutions, the city health office of Jakarta, in cooperation



The MenCare+ programme is a 3-year, 4-country collaboration between Rutgers and Promundo-US, created to engage men aged 15–35 as caregiving partners in maternal and child health and sexual and reproductive health rights. The programme is supported by the Ministry of Foreign Affairs of the Netherlands and is implemented in Brazil, Indonesia, Rwanda and South Africa (2013-2015).



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www.twitter.com/ mencareglobal with PULIH, included male involvement and MNCH in their programme plans for the years 2016-2019.

- In Rwanda, RWAMREC partnered with the Maternal and Child Health Department within the Rwanda Biomedical Center to train health providers, in four districts, on providing youth-friendly SRH services, and to engage men in MNCH. A survey of the trained health providers showed more equitable gender attitudes, and an increased understanding of the importance of engaging men in SRH and MNCH services.
- In South Africa, Mosaic and Sonke Gender Justice worked with the National Department of Social Development to train social workers on the Toolkit for Men. Through their efforts, a continuous learning credit system, linked to access to the Toolkit for Men, was institutionalised.

POLICY- AND DECISION-MAKERS

MenCare+ partners trained more than 2,900 policy- and decision-makers on the importance of gender-transformative programming, and men's involvement in MNCH, SRHR, and violence prevention. More than 100 public health policies and laws were analysed at federal, state and municipal level to inform policy advocacy, and advance work towards gender equality and violence prevention.

- In Brazil, Promundo collaborated with the Ministry of Health and Education to institutionalise gender-transformative approaches. The advocacy efforts of MenCare+ partners were important in achieving an extension on paternity leave. At the State of Rio de Janeiro, for example, paternity leave for civil and military government employees was extended from 5 to 30 days. New legislation also expanded paternity leave from 5 to 20 days for employees of many Brazilian companies who participate in the government's 'Corporate Citizen Program.'
- In Indonesia, MenCare+ partners participated at the National Reference Group on Violence Against Women, along with several ministries, national NGOs, women's crisis centres, and UN agencies (UNDP, UNFPA, UN Women, UNICEF). Within the National Reference Group, MenCare+ partners provided advice on men's engagement on GBV counselling, including the establishment of GBV counselling within the police service.
- In Rwanda, the MenCare+ programme was implemented in close collaboration with the Ministry of Health, and district officials to support the implementation of Rwanda's gender equality and health policies. MenCare+ group education curricula were officially approved by the Ministry of Health, and were considered by district officials as effective approaches to engage men in gender equality and violence prevention.
- In South Africa, MenCare+ partners participated in the Advisory group on Parent and Infant Child Health, contributing to amendments in the country's Corporal Punishment Act.

National-level partnership building and advocacy within MenCare+ was closely linked to global advocacy efforts of the consortium, which crystallised around the launch of the State of the World's Fathers report worldwide.

In the Netherlands, the report launch was successful in raising the paternity leave from two to five days, and placing the topic firmly on the political agenda.