



THE
**MEN &
BOYS**
COLLECTION

STORIES OF GENDER
JUSTICE AND SEXUAL
AND REPRODUCTIVE
HEALTH AND RIGHTS

Who we are

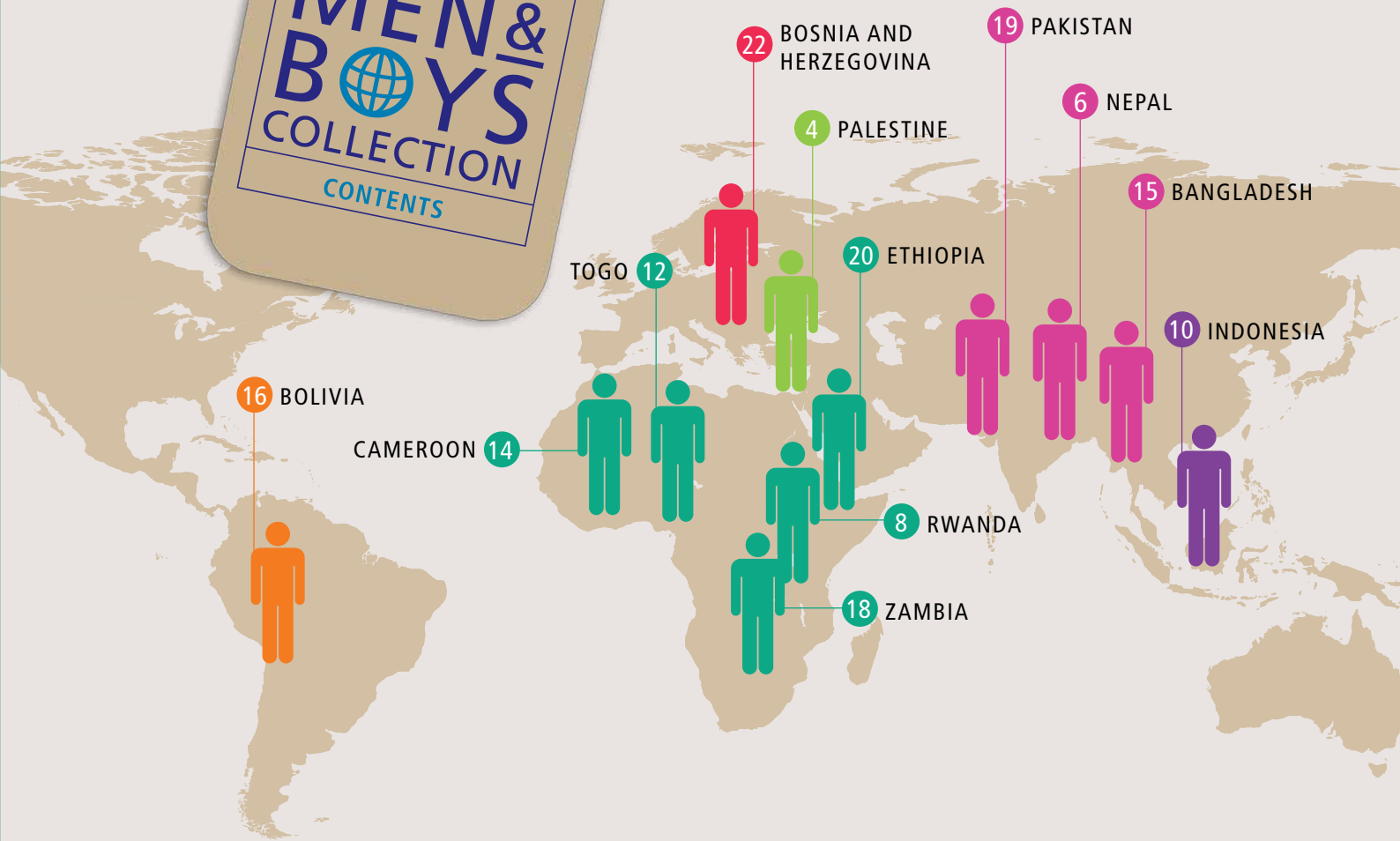
IPPF is a global service provider and a leading advocate of sexual and reproductive health and rights for all. We are a worldwide movement of national organizations working with and for communities and individuals.

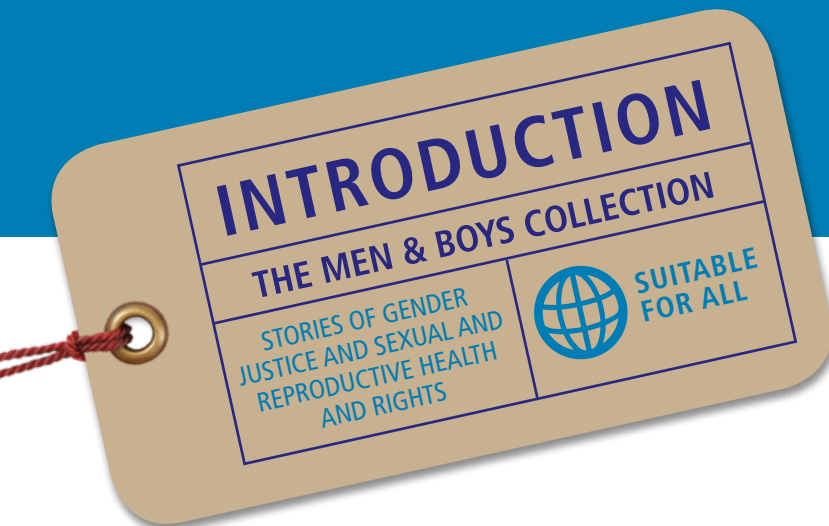
We work towards a world where women, men and young people everywhere have control over their own bodies, and therefore their destinies. A world where they are free to choose parenthood or not; free to decide how many children they will have and when; free to pursue healthy sexual lives without fear of 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.

Acknowledgements

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“... I realised that society sets stereotypical roles for men and women. But, we as individuals can change these views. And to begin with, I can change mine.”

ZAHEE, 15, MALDIVES

Men are husbands, partners, fathers, brothers and sons, and their lives are intertwined with that of women, children and other men. Across the world, rigid gender norms, and harmful perceptions of what it means to be a man have far reaching consequences on health and well-being. However, growing evidence shows that where men and boys are engaged in tackling gender inequality and promoting women's choices, the resulting outcomes are positive and men and women are able to enjoy equitable, healthy and happy relationships.

IPPF is committed to working with men and boys as clients, partners and agents of change, regardless of age, social or health status, disability, sexual orientation or gender identity. This commitment is framed within a human rights framework and outlined in the IPPF *Men and Sexual and Reproductive Health Policy*.¹ The policy reflects the importance IPPF attaches to addressing men's sexual and reproductive health and rights (SRHR) and creating conditions for equitable relationships for individual health and the development of communities.

“The issues I heard about caught my attention. Being young, we feel that the world is ours and we want to try everything – we are sexist, thinking it is ‘natural’. But, I learned that our attitudes can change, that sexism brings no benefit and should be modified.”

YOUNG MAN, EL SALVADOR

1. See Annex A (page 28) in *Men-streaming in sexual and reproductive health and HIV*. Available at: <http://ippf.org/resources/publications/Men-streaming-sexual-and-reproductive-health-and-HIV>

“Something very precious to me is that I now have more skills to talk to my family about different topics that are important to us young people. Also, when my friends ask me about these issues, I speak with great confidence about what I know of comprehensive sexuality education.”

RENE, 16, MALE PEER EDUCATOR, EL SALVADOR

As part of the Federation’s broader gender work, the focus on men and boys is in three main areas:

- 1. Men as clients** – men have specific sexual and reproductive health needs. IPPF encourages health seeking behaviour by providing client-friendly services and comprehensive sexuality education.
- 2. Men as partners** – men have an important role to play as partners: they have a shared responsibility for decisions around contraception, preventing HIV or other sexually transmitted infections; they have a responsibility as parents and caregivers; and they have a supportive and enabling role to play during pregnancy and childbirth and if their partner needs to access a safe abortion service.
- 3. Men as agents of change** – men and boys are key agents of change. This includes: the promotion of gender equitable fatherhood; advocacy against discriminatory laws and policies; changing attitudes and behaviours that are a cause and consequence of sexual and gender-based violence and women’s inequality.

The case studies in this collection highlight some of the ways that IPPF Member Associations are working to put this broad and comprehensive framework into practice. They are personal accounts of the journeys that men and boys are making in their lives and as champions for gender justice. The voices in the following pages show a snapshot of IPPF’s work to support gender equality and the SRHR needs of men and boys.



PALESTINE

ACTIVE ABOUT
CHANGE

“I decided to be responsible for gender equity and to combat gender-based violence. Men have to raise their voices.”

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“I grew up in a very conservative and male dominated society, where girls couldn’t decide about their future and related issues. After I volunteered with the PFPPA [Palestinian Family Planning and Protection Association] I decided to be responsible for gender equity and to combat gender-based violence. Men have to raise their voices. I want my daughter in the future to decide about her future; whether to marry or not, decide the number of children she has. Today I believe ... tomorrow you will believe,” said Momen, a 23-year-old man.

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Momen’s experience of growing up in a male dominated society in Palestine had a powerful effect on him. He wanted to make changes.

He joined the PFPPA National Youth Committee and became a qualified peer educator and trainer.

Many of the sessions he led were to his peers in very vulnerable areas. He took part in radio and university symposiums and

advertised PFPPA’s youth-friendly services, encouraging other young people seek services in the centre and refer their peers to join PFPPA’s group of volunteers.

In addition, Momen joined the PFPPA youth theatre group in 2012, and as an actor he participated in several theatre sketches to deliver messages about sexual and reproductive health. He is still an actor and is now co-director for the theatre group.

However, Momen thought this wasn’t enough for him or enough for gender equity and equality, so when he graduated as a journalist he produced several documentary films to highlight gender equity with PFPPA. One of these films – *The Surrounded House* – calls for the implementation of United Nations Decision 1325 on Women, Peace and Security, which recognizes women’s contribution to conflict resolution, prevention and management.

At present Momen is one of the main male activists combating gender-based violence in Palestine. Every year he takes part in the 16 Days Campaign Against Gender Violence.





The male involvement programmes have helped address issues of high fertility rates, gender-based violence and low contraceptive prevalence, choice and access.

Sarala*, a young Nepalese woman, grew up in an environment where the notion of masculinity is based on men's sexual and physical domination over women. She did not want to have another child immediately after her last child's birth, but she could never talk about sex with her husband. She wanted him to support her in decisions about spacing the birth of their children. He, however, assumed that birth spacing was entirely a women's responsibility. Sarala felt helpless – not only was she restricted from making choices regarding her sexual and reproductive health but she also faced violence. Her husband often abused her physically and verbally.

The Family Planning Association of Nepal (FPAN) run male involvement programmes that provide male targeted sexual and reproductive health services and enable men to be more supportive partners. These programmes have helped address issues of high fertility rates, gender-based violence and low contraceptive prevalence, choice and access. After having been introduced to FPAN's work, Sarala's husband Hari* became one of the active participants in his local male involvement programme and one of its most enthusiastic supporters.

A lot of men like Hari now visit the clinic for sexual and reproductive health services. The programme has raised men's awareness about sexual and reproductive health matters – helping to prevent HIV and other sexually transmitted infections (STIs). Couples in the community are more likely to avoid unwanted pregnancy and prevent STI transmission. And Sarala has decided, jointly with Hari, to use a long term family planning method.

Hari has been involved in group discussions – both with his wife and in all-male groups – and this has helped Sarala raise sensitive subjects at home. The male involvement programmes have also resulted in other benefits including raising the issue of gender equity and an improvement in the community's general health.

After counselling services Hari has overcome some of the ingrained cultural beliefs about masculinity that encouraged negative behaviours in men. He now respects Sarala's choices and realizes that sexual and reproductive health is a matter for both of them.

* Names have been changed





RWANDA

COMING
FULL CIRCLE

"I used to get home late at night and never participate in any household activity, like taking care of the children or washing the clothes. My wife would spend nights without eating because I got home so late."

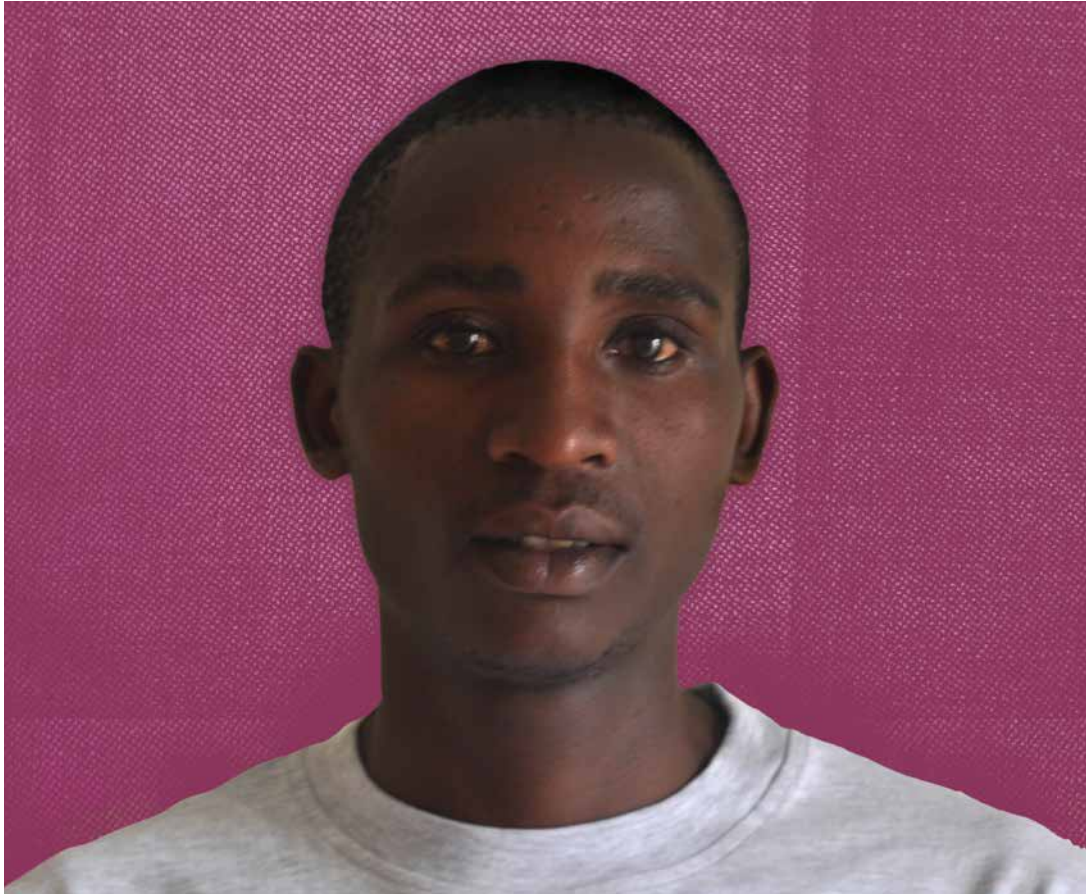
Rwanda is one of the countries where the MenCare+ programme is being implemented. The programme – a collaboration between Rutgers WPF (IPPF Dutch Member Association) and Promundo-US – works to engage men as partners in maternal and child health and sexual and reproductive health and rights. Jean-Marie Vianney is a 29-year-old father from the Bwishyura Sector of Karongi District in Rwanda. This is his story.

“I used to think that a man had to be respected by all of his family and did not have any responsibility to take part in household activities, because they belonged to the wife and children. I thought a real man had to show his dignity when he was at home with his wife or in the presence of other family members and that he had to be respected without any complaints. Alongside that attitude I used to get home late at night and never participate in any household activity like taking care of the children or washing the clothes. My wife would spend nights without eating because I got home so late.

After participating in the fathers' group education, my attitude changed. I now take care of my child. I take care of his cleanliness, wash his clothes, feed him,

etc. I also wash my own clothes and my wife's. I do any household task now like cleaning the house, cooking meals, fetching water, and other responsibilities. I am now aware that all those activities are my own responsibility, and that they are not only my wife's jobs. I come home early now and support my wife in our family activities. Before this group education, I would not take care of our bedroom, but now, I like it and do it often. I cannot go to my job without fetching water, because we live very far from the fountain [water tap].

My wife and I are actually very happy with these new attitudes and we really appreciate the programme that I went on, which was the answer to many household conflicts. I think this programme must be supported so that it can be extended to reach more of the population. It is a good way of dealing with major problems that affect many families. I am aware that my wife works hard every day, and now I can understand how exhausted she gets from her household jobs and because of that I do my best to stop her from getting so tired. Currently, we are in love and we have happiness, peace and close collaboration as a family that respects each other.”



INDONESIA
PRACTICING AND
PREACHING GENDER
EQUALITY

"... our home has become the emergency consultation room for couples. I give advice based on what I apply daily in my own marriage. "

Ustaz Muhammad Nursalim was born and raised in Madura, an island in East Java. He is an imam and married to Nur Fadlilah. Here is an extract of an interview conducted by MenCare+, a collaboration between Rutgers WPF (IPPF Dutch Member Association) and Promundo-US.

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Nur Fadlilah: “Ustaz Nursalim came here as a guest teacher. When he proposed to me, I told him ‘I’m an activist. I love to work and travel. I could never be a stay-at-home wife. I can’t even cook!’ But, he had no problem with that. We respect each other’s work.”

Ustaz Nursalim: “My wife is busy as head teacher of the village kindergarten, so I handle all the domestic duties. When my youngest needs breastfeeding I take her to my wife at school for a feed.”

Nur Fadlilah: “A lot of parents come here to study Qu’ran with us. When they come round they see my husband is doing the cooking. At first they were shocked.

Most men are just too proud to help with domestic chores, but now the men in this village even follow my husband’s lead.”

Ustaz Nursalim: “We hear of cases of husbands abusing their wives. They don’t know how to manage their anger. So our home has become the emergency consultation room for couples. I give advice based on what I apply daily in my own marriage. Besides teaching, I often give talks at boys’ circumcision or coming of age celebrations. I tailor my words to the people I meet. Yesterday, for instance, I talked about how to respect our daughters and girls in general.”

Nur Fadlilah: “I feel blessed to have a spouse like him. I have a girlfriend who is married to a powerful imam, but he still can’t think ‘outside the box’. There’s no equality in their marriage.”

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To see the full interview visit <http://www.men-care.org/Films.aspx>



TOGO
WHAT?
A CONTRACEPTIVE
METHOD FOR MEN!

“At last my wife and I are free! Free to express our sexuality and love without fear of an unwanted pregnancy ...”

Koffi Sêvi is a 52-year-old man from Togo. He became a strong advocate for vasectomy after having himself discovered this method of contraception.

“While listening to an ATBEF [Association Togolaise pour le Bien-Etre Familial] radio programme on NANA FM I heard about a method that enables men to take responsibility for family planning instead of women. Of course everyone knows about male condoms, but a contraceptive method for men was new to me.

I’ve been married to Akoua for 17 years, nature has given us nine children, who we love, but for a carpenter and housewife, raising and caring for nine children is not easy.

We considered family planning after our fifth child, but unfortunately my wife had an adverse reaction to the modern contraceptive methods we tried and I didn’t realize there was a contraceptive method that I could use! I still remember the time when she tried using an implant – every day she suffered from dizziness and headaches. So we stopped and as a result ended up six years later with four more children.

After hearing the radio programme, my wife and I decided to go to ATBEF clinic for

more information on vasectomy. At the first consultation, the provider assured me that my manhood would still be intact after the surgery, but my wife and I still had questions and doubts. You know the importance of sex in marriage. What if I cannot get my manhood back after the surgery? However, a week later, the second consultation with the provider eased my fears. Two weeks later, it was done.

Vasectomy is not as complicated as you might imagine. It lasted 30 minutes in total and I was able to go home straight after the procedure. What I had heard on radio was right: from the follow-up consultation to the spermogram, everything was straightforward.

At last my wife and I are free! Free to express our sexuality and love without fear of an unwanted pregnancy. Free to educate our children without refusing one to another. Moreover, I think it is my duty to help ATBEF disseminate useful information to men.

My wife and I have become now become vasectomy champions and it is with pleasure that I participate in awareness campaigns and programmes on the topic.”





CAMEROON

ACCEPTING SEXUAL DIVERSITY

"As I grew up, I felt more and more attracted to men but realized that I would never be able to freely love a man in Cameroon."

In Cameroon, same-sex acts are punishable by imprisonment of up to five years and the media has repeatedly launched negative campaigns against homosexuality. Discrimination from health service providers limits access to sexual and reproductive health services for lesbian, gay, bisexual, transgender and intersex (LGBTI) individuals.

The Cameroon National Association of Family Welfare (CAMNAFAW) responded to this gap by sensitizing staff on issues of sexual diversity and sexual rights, and working with members of the LGBTI community to provide tailored sexual and reproductive health and HIV services. For 22 year old Emmanuel, accepting his sexual orientation in a hostile environment has given him cause for reflection.

“Cameroon is quite an unforgiving country for homosexuals. There are laws to suppress homosexuality and this is supported by many people in Cameroon. Discrimination runs deep within families.

When I was a kid I was never into the kind of games ‘real’ boys liked. This really frustrated my parents. As I grew up, I felt more and more attracted to men but realized that I would never be able to freely love a man in Cameroon.

When I finally told my family I was gay, this was the beginning of hell. I was brutally rejected by everybody I knew. Eventually, a gay friend told me about CAMNAFAW where I could go to safely meet with others and also receive non-judgemental counselling, support and sexual health information. This was the most important moment of my life! It was like being born again. I’ve met people like me and people totally different from me but who accept me. Nobody judges one another. I have made so many friends and have been given information about how to take care of myself.

The hatred in me has gone. I’m happy with myself, I’ve reconciled my conscience and I’ve even tried to start a dialogue with my parents.”



"If I had not attended the session at the FDC I would not have known about family planning, the right time to have a child or the consequences for girls of having a baby too young."

Bangladeshi housemaid Rebeya was just 14 when she married rickshaw puller Rafiquil. Rafiquil knew that his income was not sufficient to raise a family, but his relatives were putting pressure on him and his wife to have a baby. Rebeya was also worried because she had heard about the consequences of having a baby too young.

A few months into their marriage Rebeya and her husband went to an information session at the Family Development Centre (FDC), run by the Family Planning Association of Bangladesh (FPAB). After the consultation they both agreed to wait until she was 18 to have their first child. But their decision was met with a negative reaction from his family, which only changed when Rafiquil explained the health risks of having a baby so young.

Four years later Rafiquil and Rebeya discussed it again and decided to have a child. When she got pregnant her husband took care of her. He took her to the FDC where she received antenatal services, medicine and advice, and made sure she had regular check-ups. When Rebeya went into labour her husband did not want to risk home delivery because he was worried about her giving birth with untrained birth attendants, so they went to hospital.

After the birth of his daughter, Rafiquil said: "If I had not attended the session at the FDC I would not have known about family planning, the right time to have a child or the consequences for girls of having a baby too young."

He thanked FPAB and its staff for providing them with the right information and services. Now they are happy with their child.



BOLIVIA

THE SEX TALK

"At first I was embarrassed, but we started talking with cartoons, puzzles and games. I enjoyed it, because I understood what she was teaching me."

Across five states of Bolivia, thousands of children have been part of a comprehensive sexuality education for community and family project, which is aimed for children from 6 to 11 years. The project has been implemented by CIES (Centro de Investigación, Educación y Servicios) with support and financing of RFSU (IPPF Swedish Member Association). The curriculum was developed with parents and teachers in order to provide a unique and comprehensive sexuality education methodology for children in primary schools. Since 2011, over 5,860 have children attended comprehensive sexuality education workshops, while over 1,800 parents have learned effective and assertive communication strategies with their children. Here is the experience of one of them.

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"My name is José Gabriel and I'm nine years old; I am studying at San Luis school in Tarija Bolivia. Two years

ago my teacher Rosita started talking about sexuality education or, as we call it, the CIES course. At first I was embarrassed, but we started talking with cartoons, puzzles and games. I enjoyed it, because I understood what she was teaching me. My teacher explained to me how my body works and how to clean it. She also told me that I have a penis and girls have a vagina. Now, I teach the same things to my little brothers when they ask.

Before, saying those words was bad. I could not talk about sex because my dad got angry and told me that children should not talk about such things. Now, after my dad and my mum had lessons with my teacher, we talk about sex and stuff. It isn't bad to talk about sex anymore; my dad also speaks with my brothers and my sisters. That makes me happy."

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ZAMBIA

BECOMING BETTER PARTNERS

"My wife is using an injectable and we made the decision together."

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"I used to laugh at my friends when I found them washing clothes. I would say: 'you are married, but I am not. So why are you washing clothes if you are married?' But when I came to PPAZ [Planned Parenthood Association of Zambia], I learnt about these gender stereotypes. I can now tell other men that they must help their wife."

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In 2011 Planned Parenthood Association of Zambia with Sonke Gender Justice and RFSU (IPPF Swedish Member Association) launched a three year project to increase male involvement in sexual and reproductive health.

As part of the project, safe spaces were created where men could get condoms and attend sessions about norms and expectations. There were also drama performances and mobile video shows.

Partnerships were created with local government clinics to increase access to integrated services for men such as male circumcision and treatment for sexually transmitted infections.

Information sessions and discussions, which were part of the project, helped men and boys understand the importance of changing traditional beliefs and practices that were harmful to them and their partners.

Through the project, PPAZ saw a significant increase in the number of men accessing sexual and reproductive health services, an increase in HIV counselling and an uptake of HIV testing by men. It was found that when services were targeted specifically at men, they often returned with their partners for family planning services and for gender focused discussions.

"It took me a lot to know and accept that when my partner needs to go to hospital I have to go with her . I now know that this is an important thing to do, especially when she is pregnant."



“The pain was so intense that I had to crawl on the floor. I remained locked inside the toilet until the pain had subsided to a bearable level ...”

This is the story of 16-year-old Amir from the Faisalabad district of Pakistan.

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“Two years ago I developed a pain in my genitals but was too embarrassed and ashamed to discuss it

with anyone. I hoped that it would go away if I ignored it, so I did and carried on with my normal routine but each day the pain got worse.

One day I noticed that my penis was swollen and there was blood in my urine. The pain was so intense that I had to crawl on the floor. I remained locked inside the toilet until the pain had subsided to a bearable level and then I put on a brave face before going outside again. I had to put on a brave face because I was convinced that if I shared this problem with my older brother he would make fun of me rather than help me.

In my desperation one day I picked up the courage to visit a local *hakeem* – a Muslim physician – but I lost my nerve and didn’t tell him about the problem. By this stage, my penis had swollen further and now also had boils on it. The pain was excruciating

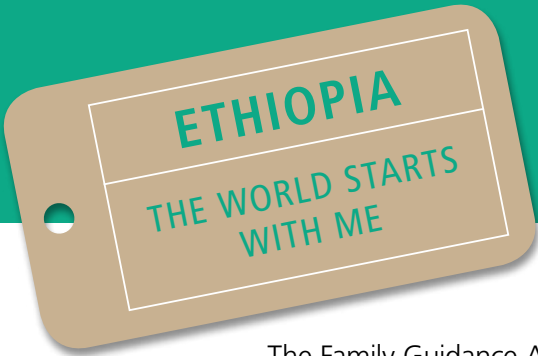
but I had no clue what to do and where to go for help so I kept quiet and suffered in silence.

Eventually I remembered a brochure I had been given about Rahnuma-FPAP’s (Family Planning Association of Pakistan’s) youth resource centre. I had carelessly stuffed it in into my bookshelf. Fortunately I found the brochure and that day, instead of going to school, I went to the centre, but had no idea what to expect. When I got there the trained peer educators assured me that my appointment would be confidential and encouraged me to share my problem for the first time.

This I did and a peer educator accompanied me to the male doctor at the Rahnuma-FPAP clinic nearby and I was diagnosed with a sexually transmitted infection (STI). The doctor did not press me for details about how I had got the STI, but explained the importance of completing the treatment.

Today, I am a healthy 18-year-old. I still regularly visit the youth resource centre and receive information on safe sex and other useful information about sexual and reproductive health and rights.”

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ETHIOPIA

THE WORLD STARTS WITH ME

"When I learned about gender and equality I figured I could change something myself. It all starts with being allowed to get an education, so girls need to have time to go to school."

The Family Guidance Association of Ethiopia (FGAE) is one of 13 partners of IPPF Dutch Member Association, Rutgers WPF, implementing *The World Starts With Me* programme. The computer-based programme covers a wide range of topics related to sexuality with a positive approach to sexuality and youth. It supports young people to make their own well-informed choices regarding their relationships and sexual lives, and to respect themselves and their partners. Here Haile, 15, shares his thoughts after participating in the programme.

“It’s important for me that men and women are equal. Our country consists of 50% women, so why should they be left out? Women should be respected, so that harmful cultural practices like genital cutting and abduction stop. They should be able to develop themselves, learn and work, just like men.

When I learned about gender and equality I figured I could change something myself. It all starts with being allowed to get an education, so girls need to have time to go to school. This is why I’ve started to help my sister out with chores in the house since

I took part in *The World Starts With Me* programme. Now I cook and clean too, and she has time to play and to do her homework.

And you know what? My relationship with my sister has even improved! We talk more often and like each other better. We even study together now, and I really like that. This way we help each other to achieve our goals.

When I grow up and have a relationship of my own with a girl, I also want to share responsibilities with her. I want to have an open relationship in which we can talk freely and be happy and healthy.

In the drawing [opposite] you see me cooking and my sister reading a book and we’re both happy.”



BOSNIA AND HERZEGOVINA

I NEVER THOUGHT
I WOULD CHANGE

"I am ready to stand up as a man and to start talking with my peers about important things in the process of becoming a man."

“

"My name is Vedad and this is my *man* story!

I've been a member of Association XY for more than two years, volunteering and working as a leader and trainer in a 'Be a man' club. I applied because I wanted to find out what it was and because I heard that those who took part in Association XY activities would get a couple of days off school.

To begin with I wasn't very interested in participating in the workshops. Mostly I was thinking about how to spend my free time after the workshops finished.

I cannot blame my friends directly, but I'm aware of the influence they had on me, the influence that we all have on each other. We thought we were macho men and I personally thought it was the right way to grow up, to be masculine.

And then, 'Be a man' happened in my life. As time passed, I started to think more and more about what they meant with that phrase, and then I started to think about whether I really was a man.

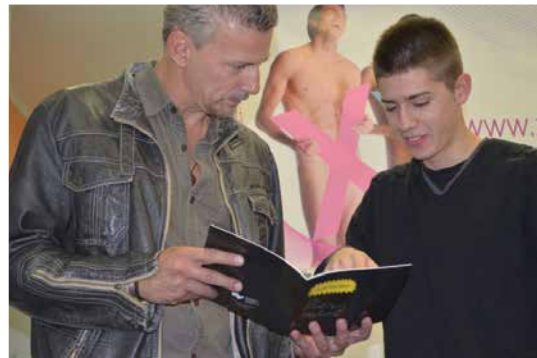
I can't even explain now why I have changed or how and when it happened. It's just that, now, I see where I am, I see the right way to think about things and how to better make decisions.

If I was that old Vedad, this story would finish much faster and would be much shorter. I wouldn't have time for you. I would be on the street, drinking beer or coffee.

Instead now I am ready to stand up as a man and to start talking with my peers about important things in the process of becoming a *man*. I teach and talk about what I have learned and been through, about the mistakes, facts and lessons that I have learned on my way.

My ex-friends do not know what it looks like to wake up free, without worries. They do not know how to be calm and do something useful. They do not know that I'm a real man now, a real and successful young man who gets applause and builds his brain and character with successes behind him. A real man with real standards!"

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“We, men, are not so aware of the importance of pregnancy care and the dangers women face during delivery. Now I have this understanding, I will let my wife deliver in a health facility and will encourage others to send their pregnant wife to a clinic.”

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MALE COMMUNITY CAREGIVER, AFGHANISTAN

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“A few months ago I happened to bump into a group of guys that I used to do workshops with. At the beginning, I thought they were not paying attention during the workshops, but peer education is a great tool and as the time went by, I was surprised by the knowledge they had gained and the level of care about their own sexual and reproductive health.”

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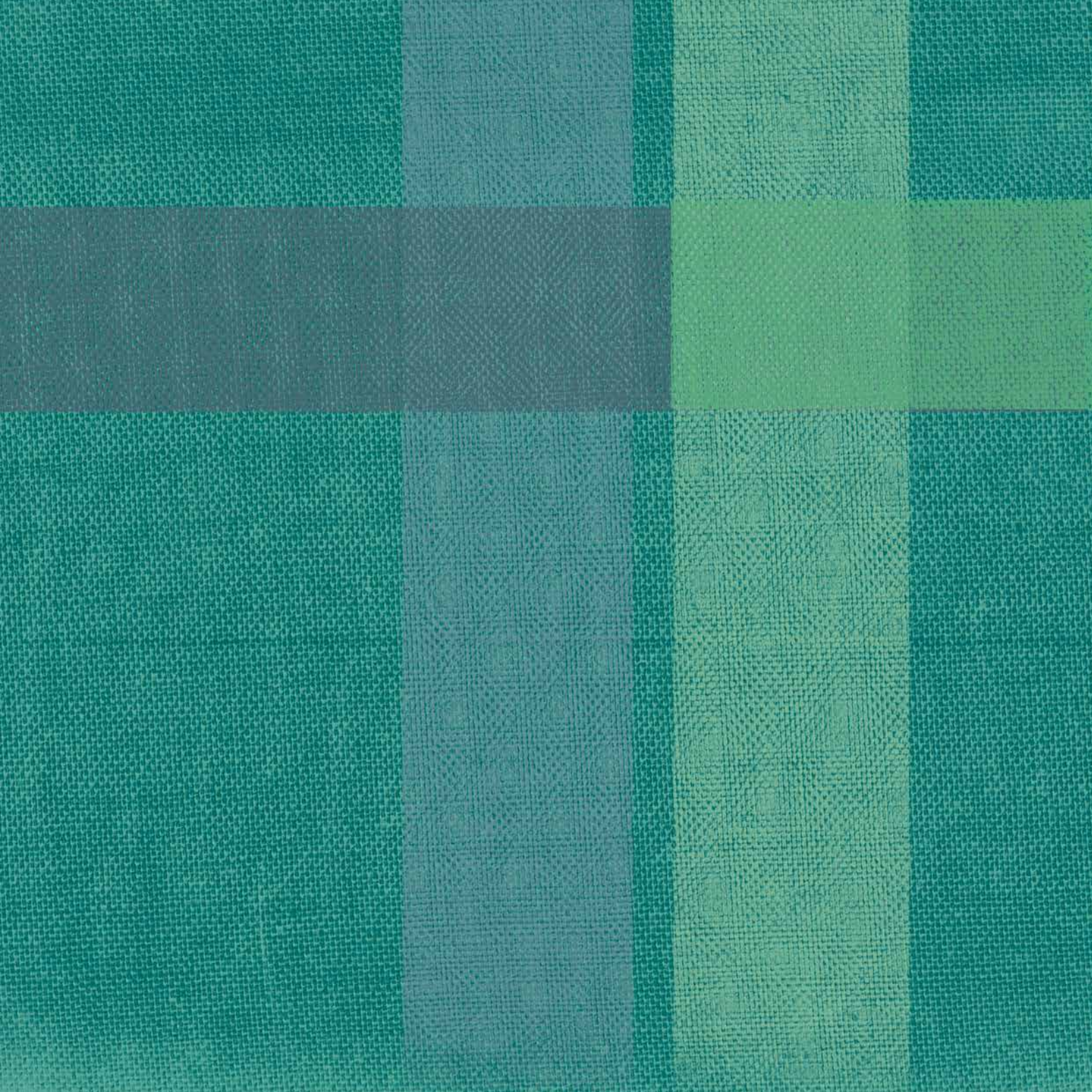
MALE PEER EDUCATOR, MACEDONIA

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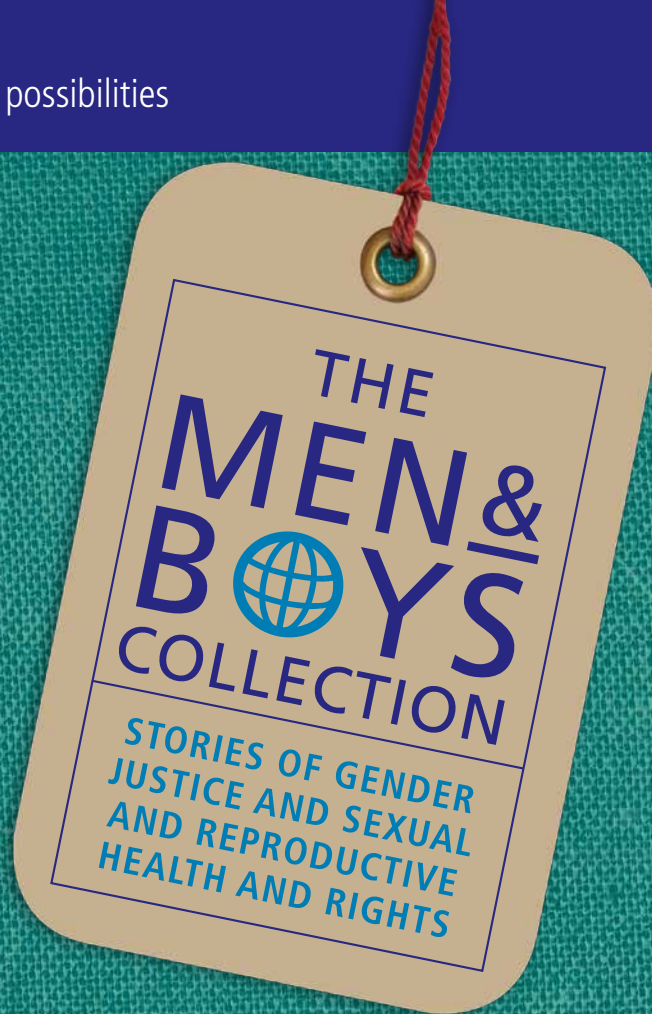
“A counselling space has been put in place in order to ensure intimacy and confidentiality in Dar Naim clinic. From that moment, my friends and I rushed to that clinic, because we are no longer afraid of being stigmatized or rejected, and because the service providers are treating us in a non-judgmental way.”

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YOUNG MAN, MAURITANIA



Men are husbands, partners, fathers, brothers and sons, and their lives are intertwined with that of women, children and other men. The stories in this collection highlight some of the ways that IPPF Member Associations around the world are working with men and boys as clients, partners and agents of change. These accounts – in their own words – show the journeys that men and boys are making in their sexual and reproductive lives and as champions for gender justice.



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