

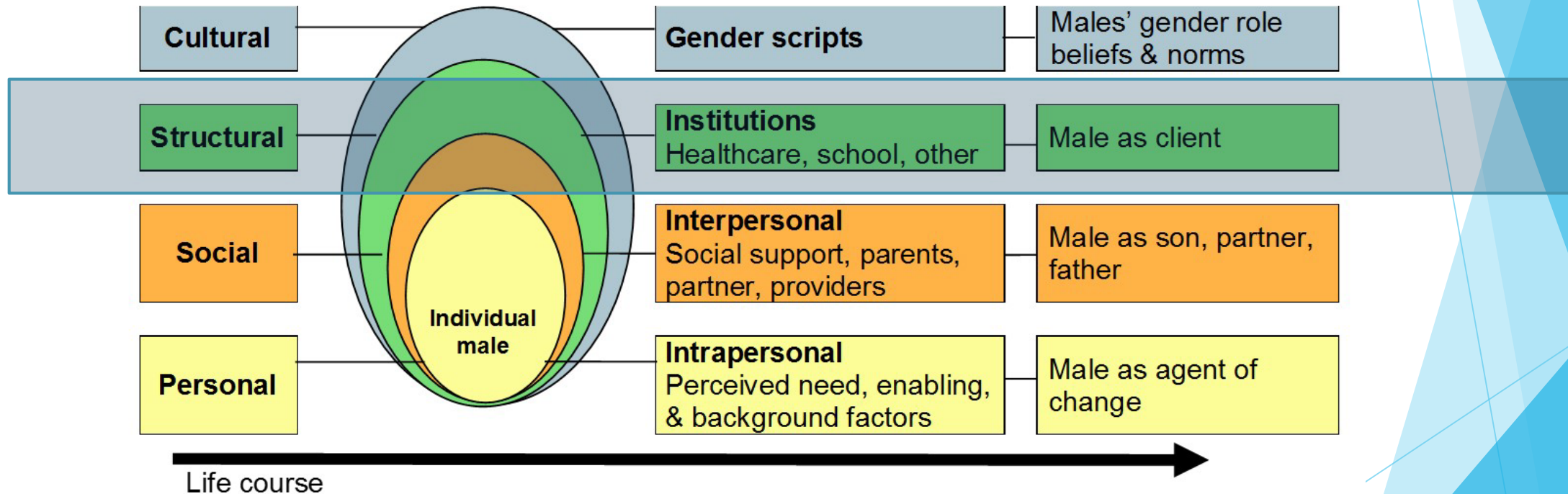
SRHR services for men: service needs, barriers, considerations and opportunities

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Men's SRHR in its own right needs to be seen as part of the gender equality agenda



Specific SRH service package for men and boys

Clinical SRH services

- 1 Assessment questions on male client history
- 2 Physical exam of male client
- 3 Contraception
- 4 Sexually transmitted infections
- 5 HIV and AIDS
- 6 Disorders of the male reproductive system including sexual dysfunction
- 7 Male cancers
- 8 Fertility and infertility
- 9 Supporting prenatal and postnatal care, including safe motherhood
- 10 Supporting safe abortion care
- 11 Sexual and gender-based violence support
- 12 Information and counselling

Non-clinical SRH supportive programmes

- 1 Information, education and communication materials
- 2 Skills building and support
- 3 Advocacy issues in which to engage men and adolescent boys



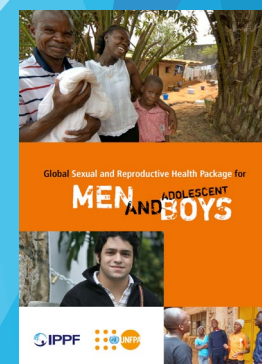
Global Sexual and Reproductive Health Package for

MEN AND ADOLESCENT BOYS



Shand, T., Hopkins, J., Zamir, J., Marcell, A. V., & Perlson, S. (2017). *Global sexual and reproductive health service package for men and adolescent boys*, IPPF and UNFPA.

SRH clinical services for men and adolescent boys	Components*
6. Disorders of the male reproductive system, including sexual dysfunction	a. Diagnose and counsel client on sexual dysfunctions (erectile dysfunction, delayed ejaculation, premature ejaculation), and provide referral
	b. Treat (or refer) for sexual dysfunctions (erectile dysfunction, delayed ejaculation, premature ejaculation)
	c. Treat (or refer) for other disorders of the male reproductive system (warts, varicoceles, urological disease, etc.)
	d. Screen and treat urinary tract infections (or refer)
7. Male cancers	a. Counsel client on sexual and reproductive-related male cancers (prostate, testicular, penile, anal, breast)
	b. Take a history for sexual and reproductive-related male cancers
	c. Refer for further investigation and management as necessary
8. Fertility and infertility	a. Counsel client on basic fertility awareness including pre-conception health
	b. Counsel couples for conception (if the partner agrees)
	c. Counsel client on infertility
	d. Provide basic infertility care for men, including semen analysis
	e. Provide vasectomy reversal (recanalisation) services (or refer)
	f. Treat for infertility/provide assisted reproduction (or refer)
	g. Counsel client (and partner) on adoption (or refer)





Demand side barriers for men

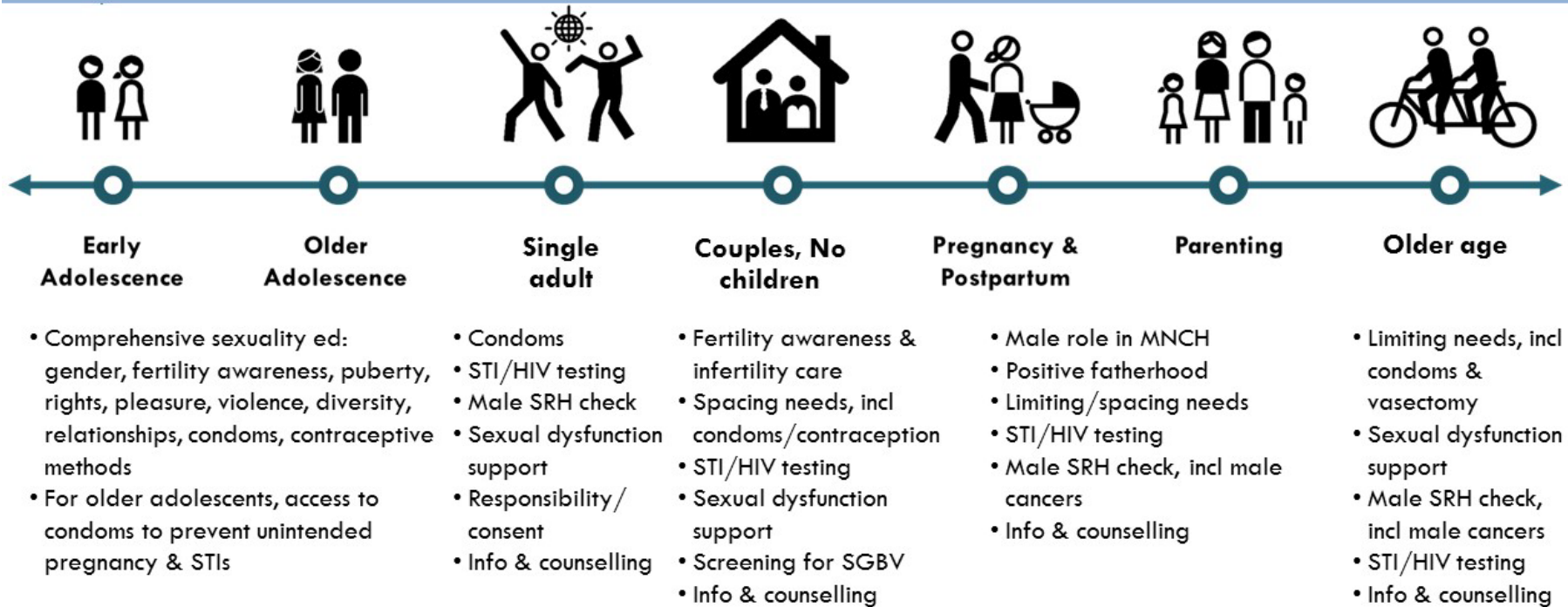
- ▶ Men's limited knowledge/misunderstanding (particularly contraception)
- ▶ SRH education/information/campaigns not targeting men
- ▶ Messaging: negative, blaming, only instrumental
- ▶ Men's friends/peers can be source of misinformation/ myths
- ▶ Men's rejection of sexual health information flows from women to men
- ▶ Lack of focus on men feeds a sense of 'exclusion'
- ▶ Sexual pleasure, performance & fertility concerns
- ▶ Masculinities/gender norms limiting male health-seeking (stoicism, breadwinner, pride, virility)

Supply side barriers for men to SRH (public) services

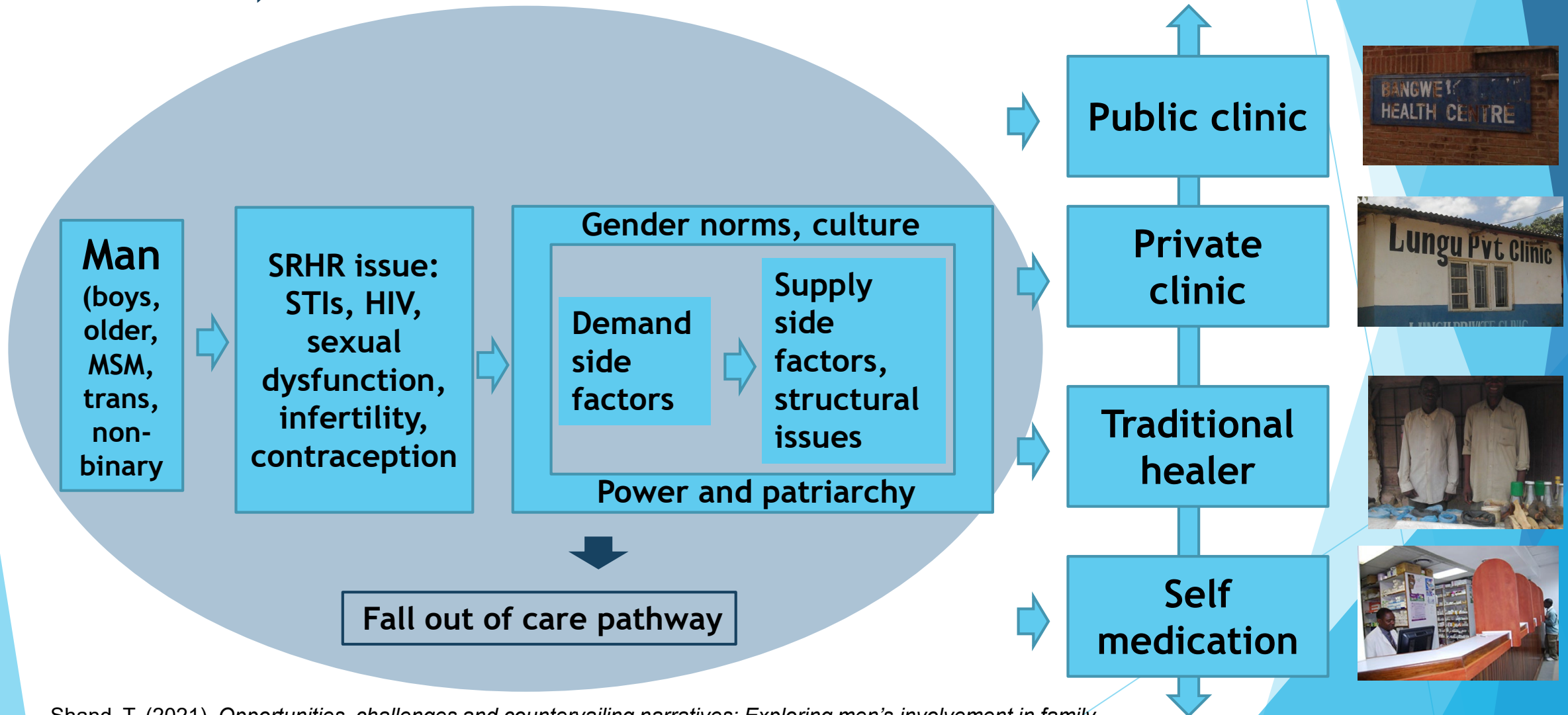
- ▶ Limited SRH/clinical services specifically for men: such as infertility screening, STIs, sexual dysfunction, vasectomy services
- ▶ Environment: seen as women and children's space
- ▶ Poorly trained health providers (on male SRH)
- ▶ Negative attitudes of health providers
- ▶ Poor confidentiality and quality of care
- ▶ Long queues and wait times
- ▶ Structural issues: inconvenient opening times, layout (limited privacy), stock outs, distance, few male staff
- ▶ Institutional masculinities



Critical consideration #1: male SRHR life course



Consideration #2: Men's health-seeking (or not) differs across their SRHR concerns

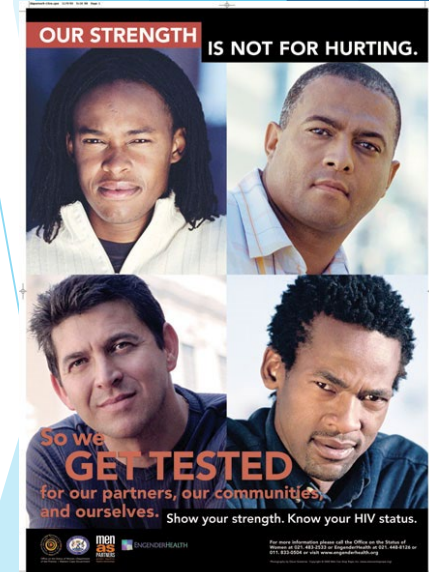


Consideration #3: Private sector are filling the current gap in men's SRH services (and may be reinforcing gender stereotypes in doing so)



What has worked on men's SRHR

- Peer/group education, male leaders (religious)
- Media/campaigns/IEC targeting men
- E-health/m-health/Apps
- Capacitating health providers
- Facility: Environment, male only clinics
- Outreach/mobile clinics: community, home, workplace
- Male service providers
- Combined, positive and feminist informed approaches consistently shown to be most effective



Useful resource: Edström, J., Hassink, A., Shahrokh, T. & Stern, E. eds. (2015), *Engendering Men: A Collaborative Review of Evidence on Men and Boys in Social Change and Gender Equality*, EMERGE Evidence Review. Brighton: Promundo-US, Sonke Gender Justice and the Institute of Development Studies

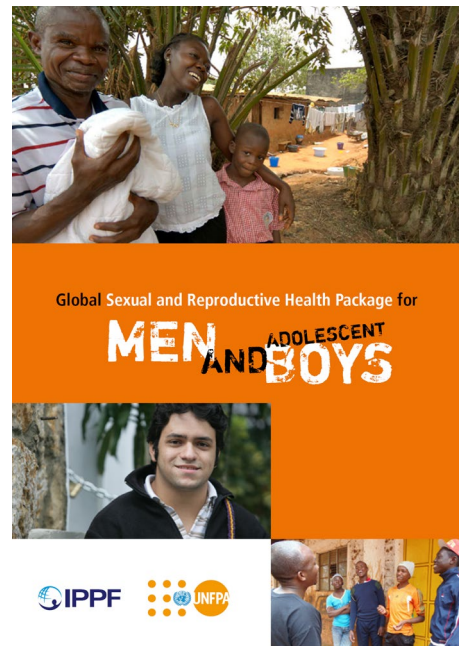
Thank you

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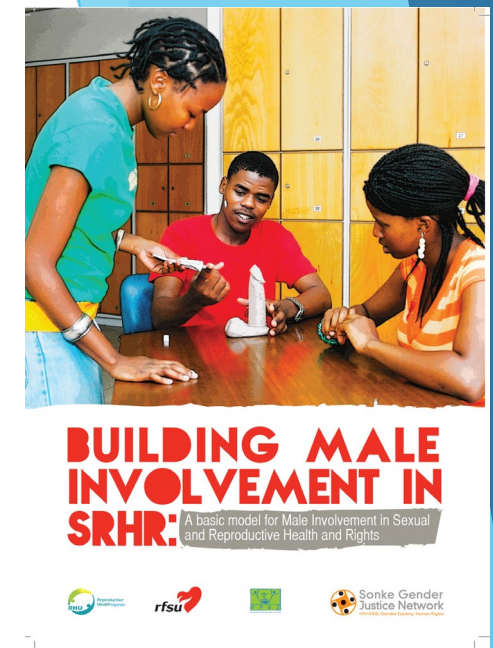
Links to resources:

Global SRH service package for men and adolescent boys, IPPF and UNFPA.

<https://www.ippf.org/resource/global-sexual-and-reproductive-health-package-men-and-adolescent-boys>



Building Male involvement in SRHR: A basic model for Male Involvement in SRHR, Sonke Gender Justice
<https://menandboys.ids.ac.uk/files/building-male-involvement-srhr-basic-model-male-involvement-sexual-and-reproductive-health-and>



Getting to Equal Publication, Engaging men and boys in SRHR and Gender Equality, Promundo (has priority SRH service areas for men):
<https://promundoglobal.org/resources/getting-equal-engaging-men-boys-sexual-reproductive-health-rights-srhr-gender-equality/>

