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Male Involvement and Adolescent Pregnancy Prevention

Robert Becker, MS is a consultant with ReCAPP. Mr. Becker has over eight years of experience in designing and evaluating programs and trainings on human sexuality with a particular emphasis on male involvement.

Traditionally, family planning and reproductive health services have been female focused. In the past, this focus made sense since most family planning methods are female dependent, and women are disproportionately affected by the negative consequences of unintended pregnancy and sexually transmitted infections (STIs). However, since the onset of the AIDS epidemic, reproductive health professionals have increasingly recognized the important role that supportive male partners can play in improving the use of contraception and in reducing the risk of unintended pregnancy and the spread of STIs. Today, a major focus of male reproductive health is on men's utilization of condoms, the one method of family planning that if used consistently and correctly, can greatly reduce the risk of unintended pregnancy and STIs, including HIV.¹ Other foci include STI testing and treatment, partner communication, gender equity, abstinence, and delay of sexual intercourse.

While there are many "women's" health centers, there are few equivalent health facilities for men.² Those facilities that are reaching out to men often find their male services underutilized. The most recent data suggest that men make up only 2% of the clients in the federally funded Title X family planning programs.³ Many times, services for men are housed in settings where staff lack training in male sexuality and sexual health, where providers' attitudes about men's involvement in reproductive health may compromise the quality of service delivery, and where the environment itself, from the décor to the informational and educational materials, may not reflect men's interests or needs.⁴

Even facilities that have made efforts to make their services male-friendly struggle with underutilization, as men in general are less likely to access health care and often lack accurate information about reproductive health.⁵ Adolescent men are especially at risk for unintended pregnancy and STIs because they are more likely to be misinformed about sexuality and sexual health. Young men are socialized to "know it all" when it comes to sex, to not ask questions, and to always be ready and willing to engage in sexual activity.⁶ Young men initiate sex earlier than young women and tend to accumulate more partners over their lifetime.⁷ These factors, combined with adolescents' overall sense of invulnerability, lead many young men to engage in sexual activity that puts their own and their partners' reproductive health in jeopardy.

The emerging awareness of the important role young men can play in improving their own and their partner's health has led to an increase in the number of programs focusing on male involvement. While male involvement has taken on many forms over the years, the term has come to encompass any clinical, community outreach, and/or educational initiative **that improves young men's ability to make informed decisions about their reproductive and sexual health.**⁸ The goals of many of these programs include:

- Increasing men's support and awareness of their partner's reproductive health needs and choices,
- Increasing men's use of contraceptive methods, especially

- condoms to reduce the spread of STIs,
- Increasing men's access to and utilization of comprehensive reproductive health services.⁹

While most male involvement programs strongly emphasize pregnancy prevention, some programs also work to increase men's role in gender equity¹⁰, shared responsibility for childrearing, and men's important role in fatherhood.¹¹

Public support for male involvement has increased as attention has been drawn to the costs of unintended pregnancy and child support. Recent studies suggest that 70% of births to adolescent women occur out of wedlock and that 4 out of 5 young mothers begin receiving welfare soon after the birth of their first child.¹² Some policymakers believe that by requiring financial responsibility, men will be motivated to support unintended pregnancies and births, yet less than one-third of nonmarital births have paternity established, half of custodial parents have child support orders, and only half of those orders are fully paid.¹³ These statistics draw attention for the need to focus on helping men avoid unintended pregnancies.

There is some encouraging evidence that male involvement programs are working. Data from the 1995 National Survey of Adolescent Males (NSAM) describes some of the possible positive effects of male involvement programs.

- 90% of teenage males having sex used condoms in the last year (although less than half used condoms 100% of the time).
- About two-thirds of teenage men express little discomfort about discussing condoms with a new partner.
- Among sexually experienced teenage males, more than half have one partner or less in one year.
- More than 90% of teenage males agree that male responsibilities include: talking about contraception before sexual intercourse, using contraception to protect against unwanted pregnancy, and taking responsibility for a child they have fathered.
- Few teenage males express the belief that causing a pregnancy would make them feel like a "real man."
- By age 19, 15% of males are still virgins.

Despite these positive trends, the report warns that many teenage males still engage in unprotected sex and do not use contraceptives as consistently as they could. Many of these men are involved in key social institutions such as sports, youth groups, the criminal justice system, school, or the workforce -- settings where men can be reached with important reproductive health information.

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Examples of Male Involvement Programs

The following two case studies illustrate successful male involvement efforts to address teenage pregnancy and improve reproductive health. The Young Men's Clinic at Columbia University is an example of successful reproductive health service delivery with a male-specific focus. Another example, the Male Involvement Program of Planned Parenthood of Nassau County (PPNC), links a strong male sexuality educational initiative with a link back to services for men at the PPNC health facility.

[Young Men's Clinic](#)

Columbia School of Public Health
Center for Population and Family Health and
Presbyterian Hospital's Ambulatory Care Network

[Male Involvement Program](#)

Planned Parenthood of Nassau County,
Hempstead, NY

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Young Men's Clinic Columbia School of Public Health Center for Population and Family Health and Presbyterian Hospital's Ambulatory Care Network

Founded in 1986, the [Young Men's Clinic \(YMC\)](#) serves the general health needs of adolescent males in the Washington Heights section of New York City. Based in the Columbia University School of Public Health's Center for Population and Family Health (CPFH) and Presbyterian Hospital's Ambulatory Care Network, the Young Men's Clinic operates one night and one afternoon a week, providing a comfortable space for male-only services. Through focus groups and interviews, Dr. Bruce Armstrong, coordinator/founder of the YMC, found that a major reason that men had not been utilizing health services was that men were embarrassed to address their reproductive health concerns. At the "Young Men's Clinic," the stigma or perception of the CPFH as a "women's only" facility is removed, and as a result, the YMC serves as the primary care provider for many men in the community. Services include physical examinations, condom distribution and education, STI/HIV testing and counseling, as well as other reproductive health services.

The YMC serves mostly young, sexually active men aged 15 to 28 years who live in the Washington Heights community. Eighty percent of the patients are Latino/Dominican and 17% are African American. Men from all over the city utilize services at the YMC, with many of them being referred by the female clients at the CPFH. The facility's original client base was generated through extensive outreach in the community, including creative efforts to reach men at athletic events in the neighborhood. Today, word-of-mouth is often the source of referral, with the YMC having to do little or no outreach.

The facility is staffed by Dr. Armstrong and as many as three or more other medical providers and graduate public health students, both male and female. Dr. Armstrong finds that patients seem to be comfortable interacting with or receiving services from providers of both genders. The YMC has become so well-known in the community that nothing short of a full case-load of patients is seen on a typical night. The YMC receives funding from Title X, Medicaid, and the New York Department of Health. At the present time, the YMC does not charge a fee for services.

Dr. Armstrong believes that a major reason for the YMC's success lies in the staff attitudes that men are indeed interested and motivated to be involved in reproductive health. Negative stereotypes and attitudes toward male clients may unfairly jeopardize an effort to involve men.

For more information on the Young Men's Clinic, call (212) 304-5247.

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Male Involvement Program Planned Parenthood of Nassau County, Hempstead, NY

The Male Involvement Program of Planned Parenthood of Nassau County (PPNC) is an educational initiative to reach men with information about sexuality, family planning, and reproductive health. Founded in 1989, the program was initiated to respond to rising teen pregnancy rates. Now that program also works to address Nassau County's highest suburban rate of HIV infection in the United States. Coordinator Matthew Buscemi, a sexuality educator, delivers workshops on a variety of issues affecting young men as young as twelve to older adolescents and college students. Through workshops on sexuality, decision-making, contraception, STIs, and date rape, Buscemi addresses gender stereotypes and myths while clarifying values and attitudes around sexuality. Skill-building in sexual decision-making, communication, abstinence, and condom use are emphasized throughout the workshops.

According to the Urban Institute's report entitled *Involving Males in Preventing Teen Pregnancy*: "In acting as a trusted source of information, Buscemi works hard to understand and empathize with the pressures that males face to become sexually active. He stays tuned to popular culture, such as music and media, in an effort to understand the forces that compete with accurate information in influencing young people's behaviors. Buscemi says that in order to understand the males with whom he works, he needs to know what outside forces influence their sexual decisions and behaviors. By engaging them in critical thought and discussion about these influences, he can address any stereotypes or misinformation that young men may pick through popular sources. Above all, Buscemi believes that his role is not to judge the young men but rather to be available to them as an honest and valuable resource.

The Male Involvement Program reaches men in a variety of settings including boys' group homes, detention centers, alternative high schools, colleges and universities, school districts, after school programs, runaway homes, and religious organizations. Buscemi educates over 7,500 men a year, approximately 50% White and 50% African American. A majority of the men in the program are considered at-risk for unintended pregnancy and STIs and many are from low-income backgrounds. An estimated 75 percent of the men are sexually active and a quarter are already fathers. About half the participants attend the workshops through their required participation in group homes or juvenile detention centers. The other half attend voluntarily after seeing flyers promoting the program or through word-of-mouth of a friend.

The Male Involvement Program is supported through Title X and private donations. While Buscemi requests an honorarium for his programs, no organization is ever turned down if they cannot provide compensation.

Planned Parenthood of Nassau County also provides health services for men three times a week during special evening hours, when men are more likely to attend. Many men first hear about PPNC's services through Buscemi's educational workshops or through street outreach promoting the health services. Men can receive comprehensive reproductive health services at PPNC, including free condoms. During male service hours at PPNC, Buscemi provides one-to-one education to clients regarding STI prevention, testing, and treatment, condom use, partner communication, and other male health issues. His presence in the clinic makes men more comfortable as he answers questions and discusses what to expect during the male examination.

For more information about PPNC's Male Involvement Program, call (516) 483-3193, x 3018.

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Practical Steps for Starting a Male Involvement Program

The evaluation of male involvement prevention programs has not been rigorous enough to illustrate direct links to pregnancy prevention. Many programs point to their success in recruiting men, keeping them engaged in activities, and keeping their programs administratively and financially sustained as indicators of success.¹⁴ Keys to sustainability lie in these programs' lessons learned that cut across such male involvement programs.

1. **Identify appropriate messages that are sensitive to audience age, stage of development, and cultural and religious background.** Programs need to identify what messages will motivate young men to consider their reproductive health and change their sexual decision making and behaviors. Use of focus groups and interviews with young men and key informants in the community can help with identifying these messages. Messages may vary depending on the age of the young men, their experiences, and cultural or religious backgrounds. Many programmers recommend that the information be delivered in a manner that is real, accessible, nonthreatening, and entertaining. [15](#) [16](#)
2. **Reach out to men in their own settings.** Since men may not be utilizing services at health facilities, prevention efforts need to reach men in their own settings. This may mean reaching men through schools, sports, youth clubs, recreation centers, in the workplace, or any other location in the community where men tend to congregate. [17](#) [18](#) [19](#)
3. **Build support, relationships, and collaborations in the community.** An important first step to successful programming in male involvement revolves around building and strengthening relationships with important community members and organizations. Not only can these relationships provide useful insight toward the development of the program, but these collaborations become the basis for making sure the young men in the community gain access to and referrals for important services, including pregnancy prevention. [20](#) [21](#) [22](#) For example, a health educator who works with young men can partner with local health centers, mental health centers and job training centers in order to connect young men with services they need.
4. **Include male staff.** Many participants in male involvement programs were raised in single-parent, female-headed households. As a result, many young men lack the positive relationships with fathers and older males that help guide young men into adulthood. Male staff in male involvement programs may serve as role models to younger men and increase young men's comfort in asking questions or participating in activities. [23](#) [24](#)
5. **Assess the male-friendliness of your program.** Programs may go to great lengths to plan and set-up male services, but even the best planned program can fail if staff are uncomfortable or unwilling to work with male clients. This can be especially true in reproductive health which has traditionally been staffed by women to deliver women's services. Staff may need the opportunity to voice fears and concerns about working with male clients. They may need additional training on providing clinical, counseling, or educational services. Policies, procedures, and protocols may need to be examined to make sure that male involvement can be incorporated without jeopardizing or threatening staff or existing

clients, services, or programs. [25](#)

- 6. Identify potential funding sources.** One of the more challenging aspects of sustaining male involvement programs revolves around the limited funding designated for reaching men with important family planning and reproductive health information. The Office of Population Affairs has provided funding for male involvement demonstration projects and has listed increasing services to males, emphasizing shared responsibility for preventing unintended pregnancy and STI/HIV infection as a priority for the future. Private foundations such as California Wellness Foundation, Ford Foundation, Henry J. Kaiser Foundation, David and Lucille Packard Foundation and the Robert Wood Johnson Foundation have a history of supporting male involvement programs. [26](#) [27](#)
- 7. Understand the role gender plays in young men's socialization, development, relationships, and reproductive behavior and decisions.** The messages that young men receive as they grow up - including messages about being a "real man", being macho, dominant, always in control, never expressing emotion or revealing weakness - may jeopardize the reproductive health of both young men and their partners.

Young men's socialization may lead them to engage in risky sexual behaviors that put their own and their partner's health at risk. They may feel pressure to engage in sexual activity or believe they have a "right" to sex and may even force their partners into engaging in sexual activities against their will. Young men's physical, emotional, or economic power over young women may also prevent young women from taking steps to protect themselves and their partners from pregnancy and disease. Finally, young men (and young women) may grow up without the skills to communicate and negotiate equitable roles in relationships and decision making, making it challenging even for the best-intentioned adolescents to effectively address reproductive health and family planning decisions.

Programs need to work with young men to explore the harm restrictive gender roles have on reproductive health and offer young men the opportunity to explore their values around gender, while offering new models of masculinity and equitable relationships.

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Challenges & Benefits in Using the Male Involvement Approach

The lessons learned from male involvement programs highlight both challenges and benefits to young men's participation. These challenges and benefits should be carefully considered when initiating or expanding a male involvement program in your community.

Challenges

- Family planning and reproductive health providers may be concerned that developing/expanding male involvement initiatives will stretch limited resources that are needed for women's programs. [28](#)
- Given the traditional female structuring of family planning and reproductive health services, there may be a need to hire male staff, modify physical environments, policies, and procedures that cater to young men's needs. [29](#)
- Family planning and reproductive health providers may need training to provide clinical and counseling services to men. [30](#)
- Some reproductive health professionals may possess negative or ambivalent attitudes toward young men and male involvement. [31](#)
- Some may see male involvement as reinforcing the power that some men have over women's decision-making related to family planning and reproductive health issues. [32](#)
- There is a need to discover what messages or incentives would motivate men to seek and utilize reproductive health services. [33](#)
[34](#)

Benefits

Involving young men in family planning and reproductive health has the following benefits:

- Reducing the rate of both unintended pregnancy and sexually transmitted infections, including HIV. [35](#)
- Improving communication between young men and women, helping them make more informed, shared decisions around family planning and reproductive health. [36](#)
- Improving the health of young men while increasing young men's awareness around the importance of their partner's and family's health. [37](#)
- Presenting more positive images and models for responsible, healthy masculinity and manhood. [38](#)
- Increasing men's sensitivity to gender equity and reducing the incidents of violence against women. [39](#)
- Increasing men's access to comprehensive health care. [40](#)

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A Male Involvement Values Clarification Activity for Staff

An important first step in initiating a male involvement program is to assess the values and attitudes of staff members around young men's involvement in family planning and reproductive health. Program planners can go through great efforts to set up their facilities and programs to work with men, but the program can quickly fail if staff members are uncomfortable or ambivalent about working with young men. In order to assess an organization's readiness and comfort toward initiating a male involvement program, staff members need a forum to ask questions and address fears and concerns about the program. Conducting a values clarification activity can provide insight into the current state of mind of staff members while allowing programmers to allay fears before program implementation.

Advanced Preparation

1. Prepare signs that read "AGREE," "DISAGREE," and "UNSURE"
2. Place "AGREE," "DISAGREE," "UNSURE" signs along a wall in a continuum as shown below :

AGREE UNSURE DISAGREE

3. Move tables and/or chairs so that participants can walk from one side of the continuum to the other.

Procedure

1. Explain to participants that "the purpose of this exercise is to help you explore your own values and attitudes towards male involvement in family planning."
2. Ask all of the participants to stand in the middle of the room under the UNSURE sign.
3. State to participants "I am going to read you a series of statements about men and family planning. After listening to the statement, decide if you agree, disagree, or are unsure about the statement -- then move to the side of the room which matches your response. You'll have an opportunity to discuss or clarify your decision."
4. Encourage participants to share their reasons for their response if they so desire. If participants seem to all take a stand on one side of the issue, present a reason why someone might have a value that differs from the participants.
5. Go through as many statements as you like, leaving time to discuss the questions below.

Discussion Questions

- How did it feel to take a stand on these statements?
- Were any statements easier or harder to take a stand on?
- How did it feel to acknowledge a value that differed from someone else's? How did it feel to share values with other people?
- How might our values and attitudes affect our ability to serve male clients?

- What strategies can we use when our values differ from those of our male client?
- How do our values support or hinder our male involvement work?
- What can we do to overcome values that hinder our work?

Summary Points

- Our values and attitudes can sometimes affect our ability to provide services to clients.
- Most men can and do want to get involved in family planning and disease prevention.

Values Clarification Statements about Young Men and Reproductive Health

1. Young men often lie about their sexual history.
2. Young men should date women who are close in age to them.
3. Young men, regardless of their age, should have access to condoms if they are sexually active.
4. Even if you provide young men with comprehensive reproductive health services, they will have little interest in using them.
5. Family planning will always be more important for a young woman than a young man because she is the one who can get pregnant.
6. Many family planning and reproductive health care professionals are uncomfortable counseling or providing services to young men.
7. Young men are uncomfortable going to a female-oriented health facility or being treated by a female clinician.
8. Sometimes young women send mixed messages to young men about sex which can sometimes lead to forced sexual activity or rape.
9. Young men who engage in unprotected sex deserve to get an STI.
10. Young men should not be allowed in family planning facilities during the same hours as young women.
11. Young men are a major part of the problem of unintended pregnancies.
12. Young men with STIs do not seek treatment and will often pass the disease to their partners.

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Additional Resources

Web links

- AVSC's Men as Partners Program
<http://www.avsc.org/emerging/map/index.html>
- Reproductive Health Outlook "Men and Reproductive Health"
<http://www.rho.org/html/menrh.htm>
- FHI Network Magazine "Men and Reproductive Health"
<http://www.fhi.org/en/fp/fppubs/network/v18-3/index.html>
- IPPF "Male Involvement: An Annotated Bibliography"
<http://www.ippf.org/resource/mbib/index.htm>
- The Urban Institute Involving Males in Preventing Teen Pregnancy
<http://www.urban.org/family/invmales.html>
- Sociometrics The Data Archive on Adolescent Pregnancy and Pregnancy Prevention (DAAPPP)
http://www.socio.com/data_arc/daappp_0.htm
- Office of Population Affairs
<http://www.hhs.gov/progorg/opa/index.html>

Articles

- John Hopkins Center for Communication Programs
 HIM (Helping Involve Men) CD ROM
<http://www.jhuccp.org/poline/him.stm>
- John Hopkins Center for Communication Programs
 Pop Reports: New Perspectives on Men's Participation
<http://www.jhuccp.org/pr/j46edsum.stm>
- Steele, C, Wegner MN, Jerzowski, T. The Language of Male Involvement: What Do You Mean By That? Populi vol 23, No.2 November 1996, p10-12.
- Men and Reproductive Health. Network, Family Health International, Vol 18, No.3, Spring 1998.
- Ndong, I, Becker RM, Haws, JM, Wegner MN. Men's Reproductive Health: Defining, Designing, and Delivering Services. International Family Planning Perspectives, Vol 25, Supplement 1999.

Books/Manuals

- Not Just for Girls: Involving Boys and Men in Teen Pregnancy Prevention
 National Campaign to Prevent Teen Pregnancy
<https://www.ksinet.com/teen/user-cgi/puborderelec.cgi>
- Blueprint for Male Involvement
 Center for Health Training
 1809 7th Avenue, Suite 400
 Seattle, WA 98101-1313
 (206) 447-9538
www.jba-cht.com
seattle@jba-cht.com
- Components of Effective and Efficient Clinic Management : A Resource
 Manual Center for Health Training
 1809 7th Avenue, Suite 400
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Adolescent Pregnancy Prevention: A Guidebook for Communities
by Claire D. Brindis.
Health Promotion Resource Center at Stanford University
1000 Welch Road
Palo Alto, CA 94304-1885
(415) 723-0003

Communities Responding to the Challenge of Adolescent Pregnancy
Prevention: Building Strong Foundations, Ensuring the Future
by Claire Brindis and Laura Davis.
Advocates for Youth
1025 Vermont Avenue NW Suite 200
Washington, DC 20005
(202) 347-5700
www.advocatesforyouth.org

A Review of Efforts by Family Planning Programs to Enhance Male
Involvement in Reproductive Health
James Bowman Associates
Center for Health Training
421 E.Sixth Street
Austin, TX 78701
(512) 474-2166
austin@jba-cht.com

Male Involvement in Reproductive Health, Including Family Planning and
Sexual Health: Technical Report 28. UNFPA 1995.
United Nations Population Fund
220 East 42nd Street
New York, NY 10017

Curricula

Reducing the Risk (RTR)
ETR Associates
4 Carbonero Way
Scotts Valley, CA 95066
contact: Douglas Kirby (831) 438-4060

Wise Guys
Family Life Council
301 E. Washington Street, Suite 204
Greensboro, NC 27401
contact: Cynthia Dorman (336) 333-6890

Peer Power and ADAM
The Ounce of Prevention
188 West Randolph, Suite 2200
Chicago, IL 60601
(312) 853-6080

From the Urban Institute: Involving Males in Preventing Teen Pregnancy
Report
<http://www.urban.org/family/invmales.html#appe4>

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THEORIES & APPROACHES

Endnotes

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