SRHR for All

Masculinities, Youth and SRHR:
An international collaboration for change
Introduction

Challenging stigma, discrimination, attitudes and laws that undermine the fulfillment of sexual and reproductive health and rights (SRHR) for all.

Recent years have seen the erosion of reproductive rights and the continued denial of sexual rights. This is particularly true for people who do not conform to traditional norms about sex, gender, and sexuality. This reality is a reminder of the work ahead and the need for resistance and action.

Throughout the world, SRHR are largely considered the sole responsibility of women, and many men neglect the SRHR needs of their partners and their families, as well as their own. Social norms around masculinity promote risky sexual behaviors and discourage boys and men from taking care of themselves by accessing health services. Engaging and educating boys and men around their own and their partners’ sexual and reproductive health is essential to reduce the burden of SRH on women and girls, and prevent STIs and unwanted pregnancies. Importantly, men and boys need to take responsibility by being engaged as allies and activists for the realization of SRHR for all.

MenEngage Alliance aspires to support movements to advance SRHR. That means protecting access to contraception, sexual health care, and comprehensive sexuality education. It includes promoting access to HIV/STD information and treatment that is friendly and inclusive. It also involves efforts to protect women’s right to safe abortion care. It means centering women’s right to choose and access safe and legal abortion, ending homophobia and transphobia, equality in access to contraceptive methods and services, as well as in contraceptive responsibility, and increasing men’s access to and use of HIV and other sexual and reproductive health (SRH) services.

MenEngage Alliance aspires for a world in which all people can enjoy the same health standards, and access quality health care without the burden of stigma, discrimination or intimidation. Age, sex characteristics, gender identity and self expression must not prevent people from accessing health services, receiving the care they need, and benefiting from science-based information about sexuality, reproduction, and social determinants of health. Similarly, race, ethnicity, class, education, geography, citizenship status, religion or ability must not be grounds for additional hurdles that often exclude some groups from the benefits of health care policies or deny some people the protection that the laws guarantee to others.

To address stigma and discrimination, and promote inclusion and equality, the Alliance is committed to upholding the feminist SRHR agenda and working in collaboration with regional networks and partners, including women’s rights and SRHR activists, LGBTIQA+ and SOGIESC activists and networks, and CSOs that promote social justice and human rights.

Supporting SRHR for all is part of broader commitments of MenEngage Alliance to full gender equality.
With support from Amplify Change, MenEngage Alliance has embarked on a two-year collaborative initiative – ‘SRHR For All’ – to realize its strategic vision for SRHR.

The overall goal of this strategic project is “to challenge stigma, discrimination, attitudes and laws that undermine the fulfillment of SRHR for all, through networked practice and evidence based advocacy for gender norms transformation and engaging men and boys in key SRHR issues.” To do this, the Alliance will focus on four core strategies:

1. Evidence generation and dissemination
2. Network-building and capacity strengthening
3. Interconnected advocacy
4. Strengthening partnerships and accountable practices

To launch the SRHR For All initiative, MenEngage Alliance convened 46 members and partners from 27 countries in Addis Ababa, Ethiopia from 30 April to 2 May 2019.

The meeting was a productive learning exchange among participants, with the agenda including a broad assessment of current challenges in each region and globally, as well as contributions from researchers, international SRHR experts in service provision and policy advocacy, SOGIESC advocates, youth members, and feminists with considerable experience in SRHR.

Four regions of the Alliance presented reports of current trends and gaps in their region, and also agreed on steps to be taken to develop and implement action plans for the next 18 months. This report provides an overview of the discussions, agreements and regional plans presented at the meeting.
**What is SRHR?**

SRHR was the focus issue in a 2018 edition of the leading medical journal, The Lancet. Emphasising the importance of SRHR as a crucial element of human rights, it offered the following definition of SRHR:

> Sexual and reproductive health is a state of physical, emotional, mental, and social wellbeing in relation to all aspects of sexuality and reproduction, not merely the absence of disease, dysfunction, or infirmity. Therefore, a positive approach to sexuality and reproduction should recognise the part played by pleasurable sexual relationships, trust, and communication in the promotion of self-esteem and overall wellbeing. All individuals have a right to make decisions governing their bodies and to access services that support that right.

A 2017 report from the World Health Organization described many useful links between sexuality, health and rights:

> An integrated approach to health and human rights lies at the heart of ensuring the dignity and well-being of all people, and includes, but is not limited to, the right to the highest attainable standard of health; the right to life and physical integrity, including freedom from violence; the right to equality and non-discrimination on the basis of sex; and the right to freedom from torture or cruel, inhuman or degrading treatment.

> The right to SRH is an integral part of the right to health, enshrined in article 12 of the International Covenant on Economic, Social and Cultural Rights.

> The promotion of gender equality is central to the achievement of SRHR of all people in all their diversity. This means recognizing and taking into account how unequal power in women’s intimate relationships, harmful gender norms and women’s lack of access to and control over resources affect their access to and experiences with health services.

---


---

Diagram from WHO (2017) showing the relations between sexual health, reproductive health, social/cultural factors, and foundational principles for supporting SRHR.
Recent years have seen a marked increase in opposition to – and backlash against – sexual and reproductive health and rights globally.

Previously hard-won gains are being eroded in diverse contexts around the world. Conservative governments, many of whom dispute the concepts of gender and SRHR, particularly sexual rights, are gaining strength and there is growing public opposition to SRHR from both traditional and religious groups and newer populist groups. At the United Nations, conservative governments such as Russia, the Holy See and the United States are collectively opposing resolutions in support of universal access to SRHR. Meanwhile, the US-implemented ‘Global Gag Rule’ continues to restrict health services around the world from providing abortion services and referrals to abortion providers.

The basic freedom to provide abortion-related information and counselling to help people make decisions for themselves is being severely eroded.

In contexts where policy frameworks include SRHR, the implementation, awareness and resourcing for such policies is poor or non-existent. It is clear that building a strong movement to promote SRHR is more essential than ever in these challenging times.

**The global SRHR landscape**

Within the SRHR field, there is a general (but slow) movement away from viewing SRHR as contraception and mostly an issue for cis-gender, heterosexual women, and an increasing emphasis on diversity and inclusion of the most marginalized.

This trend was reflected in the [Family Planning 2020](https://familyplanning2020.org) initiative - a global partnership for access to contraception. Rather than framing reproductive health services in relation to women only, the Family Planning 2020 commitments - renewed in 2017 - emphasised accessibility to services for all. Another opportunity at global level is the transition from the Millenium Development Goals (MDGs) to the [Sustainable Development Goals (SDGs)](https://un.org/sustainabledevelopment/sustainable-development-goals).

While the MDGs focused on the average level of health and development measures, the SDGs focus on 'leaving no-one behind' and identifying the most excluded.

**ICPD: A global SRHR framework**

In 1994, the International Conference on Population and Development (ICPD) marked a change in collective thinking around SRHR. It helped center the individual – and particularly women and girls – as users of SRH services, recipients of sexual health education, decision-makers on methods of contraception and the prevention/treatments of sexually transmitted diseases (STDs) and HIV, and people facing real-life barriers to accessing healthcare. This paradigm shift continues to reminds us that people have individual agency, and should not merely be considered as demographics or statistics.

Unfortunately, some SRHR interventions seem impermeable to the sexual and reproductive health frame adopted in 1994 at the ICPD. These traditional approaches have remained attached to demographic concerns. They continue to address SRHR as a means to achieve greater contraceptive prevalence, rather than centering individual rights, health, and freedoms. In general, even as they seek to involve men and boys in health care and sexual health education, traditional approaches stem from the belief that ultimately, women are the focus of successful programs.

It is within this frame that some programs and studies have chosen to focus on involving men, either as the subject whose health needs are not being met, or as supporting partners to women who face barriers to healthcare. They also seek to address sexual behavior and the way people in relationships discuss sexuality, pregnancy and protection against infections. Some of them seek to influence perceptions and awareness of social gender norms that impact health.
**Masculinities and SRHR**

Two important aspects of SRHR are the empowerment of women and girls, and transforming masculinities.

The kick-off meeting was a first step towards broader understanding among the Alliance’s membership of how the concept of gender is entangled in a series of social roles and expectations that are arbitrary and unevenly organized to the exclusion of women and gender non-conforming people. MenEngage Alliance promotes a revision and transformation of patriarchal power imbalances, and seeks to destabilize stereotypical male gender roles and hegemonic expressions of manhood.

In its efforts to do this from an accountability standpoint, which is a core principle the Alliance has embraced, the participants at the Addis Ababa kick-off meeting put into practice some key principles of accountability, such as:

- Active listening to and consulting with women’s rights groups.
- Bringing a political lens to spaces that are led by traditionally patriarchal decision-making practices.
- Amplifying feminist and LGBTI Q viewpoints and voices, and strengthening the human rights call for social, economic and environmental justice for all.
- Ensuring that “engaging men and boys” and “transforming masculinities” contributes to gender justice, equal rights, and solidarity among all of us.

When addressing SRHR, the Alliance prioritizes challenging social norms, stigma, discrimination, attitudes and laws that undermine the fulfilment of SRHR for all. SRHR is often divided in siloed categories and treated as either male or female, leaving men disconnected from sexuality and reproduction as interconnected parts of the human experience. Women usually bear the responsibility for managing reproduction, and sexual health is often seen as STDs prevention, usually associated with gay men’s behaviors. While research has begun to look at the critical roles of men and boys in SRHR, the men and masculinities field has some catch-up to do to thoroughly understand how it might contribute to a gender transformative shift in the way policy makers approach SRHR. The Alliance needs to look into classic divisions within SRHR:

- **Men as partners** – in heterosexual, homosexual, bisexual and other relationships,
- **Men as allies** to family and community members who seek contraceptive, abortion, and HIV services and care,
- **Men as individuals with their own health needs** seeking care to protect their own sexual health and that of their sexual partners.

To strengthen our regional networks and ‘Community of Practice’ in their ability to address SRHR from a gender transformative lens, the Alliance has engaged feminist organizations with a solid track record in SRHR to support us in the process of understanding the complexity of SRHR today through a feminist lens.

A transformative approach to SRHR, particularly when openly seeking to empower women and girls, must adopt an analysis of how social norms and dynamics of power and privilege affect individuals’ access to SRHR. A ‘critical masculinities’ approach acknowledges women’s realities and leadership in claiming services and rights, while emphasising the need to deconstruct gendered power dynamics that limit people’s access to SRHR. Incorporating a transformative masculinities lens into SRHR programming means understanding how current SRHR programming impacts people differently on the basis of how they identify themselves on the gender spectrum.

While an increasing number of NGOs globally are engaging men and boys to advance gender equality and the rights of women and girls, many still stick to less politicised issues in the feminist agenda such as fatherhood and healthy relationships. Great progress has been made in involving men and boys in gender-based violence prevention, which has produced powerful methodologies and tools in research, education, outreach and advocacy to reduce gender-based violence, and improve actions to eliminate violence against women and girls.
When it comes to SRHR, women’s and LGBTQI movements have been calling on the men and masculinities field to support the more challenging SRHR issues, including the need for advocacy for safe and legal abortion and ending homophobia/transphobia.

Traditionally, approaches to engage men and boys in SRHR have focused on men as partners, or on certain behaviours that are viewed as typically male. Few have focused on men as diverse individuals with their own SRHR needs and rights, or as part of an uneven playing field.

It is critical to look at individual men as sexual beings, and consider how they connect with their identities, expectations, and behaviors when they relate to peers and intimate partners. The critical questions to ask are:

- Are there significant trends, depending on men’s sexual orientation, gender identity, contraception preferences and ability to care for themselves and others?
- How do patriarchal norms around masculinity lead men to continue to assume that SRHR is a women’s problem?
- Who are the men who engage in unhealthy or harmful sexual activity?

These harmful social norms not only negatively affect women, but also LGBTQI people, including those who do not conform to conventional gender categories, as well as cisgender, heterosexual men. When incorporating a transformative masculinities lens, it is also important to avoid replicating the gender binary or reinforcing a polarized understanding of people’s health that keeps men and boys from engaging in advocacy for improved health and rights for all people. For example, when we discuss abortion or cervical cancer we must be mindful of the particular needs of transgender men.

Engaging men in SRHR requires more than policy frameworks, toolkits and manuals. It requires meaningful connections with different social movements. When it comes to movement building, and particularly when addressing controversial SRHR issues, we must go beyond projects and individual interests and focus on the big picture. Engaging in SRHR is part of an ongoing effort by the Alliance to make its work more political, to not always choose to work on the ‘low-hanging fruit’ or ‘softer’ issues in the feminist agenda, instead advocating on more contentious SRHR issues such as comprehensive sexualities education, abortion, and sex-work.

The Alliance’s efforts in SRHR are intended as an allyship approach to feminist movements and people of diverse sexual orientations, gender identities/expressions and sexual characteristics. This contribution intends to expand the involvement of men and boys in support of these issues, influence public opinion, lobby decision-makers, and help transform masculinities to improve the health of all.

Involving men and boys means bringing men into SRHR either because they are part of the problem and/or because they may be able to be part of the solution.
Youth autonomy, empowerment, and leadership

In order to advance the SRHR promises of ICPD, youth autonomy and decision making must be prioritised. Projects often fail because adults believe they understand what young people need and want, but do not allow young people to lead and decide for themselves.

Young people are bold and do not take no for an answer, they have new perspectives and new language to discuss these issues, and are eager to voice their concerns and opinions.

Laws and policies that are built on the lived experiences of young people are more impactful than those based on assumptions about what young people should need and want, but do not allow young people to lead and decide for themselves.

Furthermore, to deconstruct gender norms and assumptions related to sexuality, we must also engage with the public, educators and service providers, to influence their mindsets. One way to achieve this goal is through initiatives to sensitize policymakers and service providers to the benefits of gender transformative approaches.

When given the space and the support to engage in activism for their rights, young people are a powerful force for change. However, adults often act as obstacles to young people. Intentionally or not, adults (educators, parents, providers, policy makers) tend to perpetuate outdated assumptions and social stigma around issues including sexuality, pregnancy, STIs and HIV prevention. This can stall conversations and impede clear, science driven communications.

Storytelling is an effective method for young people to challenge these barriers and get to the other side of stigma around SRHR, for example by telling policymakers stories of abortion.

Engaging men and boys in SRHR from a gender, rights and inclusion lens seeks to influence understanding of gender norms, and contribute to erasing the gender divide. By looking at the complexity of gender inequality, some successful examples are programs that focus on demonstrating how violence against women, GBV and homophobia impact the SRH of women and men. Yet another promising example seeks to sensitize men to women’s abortion seeking or abortion experiences, with both the goal of reducing stigma about abortion and improving couples communication, and ultimately increasing the level of support available to women who seek and choose to have an abortion.

Programs often add men and boys to service provision, or include men and boys and their health needs in health education. They may address communication gaps and negotiation skills about SRHR in a variety of ways. However, these programs tend to operate within institutional settings that are resistant to new approaches.

The result is usually a treatment of SRHR as a list of health needs, and a ‘menu’ approach to healthcare and education, with the involvement of men and boys as one more item. While these programs do no harm, and in fact expand the scope of care and information, they fall short of proposing and evaluating a distinct model to meeting people’s SRHR needs that effectively connects health, rights, gender equality, inclusion and empowerment of women, girls and gender non-conforming people.

Programs must understand information and experiences across the socio ecological spectrum, from how individuals receive and understand SRHR, to how communities and institutions process information and either reinforce or break with existing stigmas.

Training of service providers can be a way to break with the chain of misinformation and assumptions that lead to stigma and discrimination, and barriers to accessing health care and information. The traditional discourse about sexuality has focused on risk reduction and the prevention of pregnancy and STIs, while the concept of sexual intimacy and pleasure as part of people’s lives has been largely absent from the debate. There is a need to refocus the discussion towards acknowledging pleasure and the right to enjoy sex freely as a normal part of human development, and to dismantle the stigma surrounding these issues to enable people to openly discuss their SRHR.

Programming is usually more successful when it approaches SRHR in a holistic and comprehensive manner (WHO, 2017). Programs must understand information and experiences across the socio ecological spectrum, from how individuals receive and understand SRHR, to how communities and institutions process information and either reinforce or break with existing stigmas.
Engaging men in key areas of SRHR

The SRHR For All meeting in Addis Ababa was an opportunity to explore the role of engaging men and boys in the critical areas of SRHR. The following sections summarise the discussions.

The right to choose and access safe and legal abortion

The right to safe and legal abortion is one of the most heavily contested political issues globally. One of the primary goals of the SRHR For All project is to raise men and boys’ awareness on women’s right to safe and legal abortion, to engage men to advocate for strengthened legislation and to promote policies that address the roles of men in increasing access to safe abortion.

Many of the misconceptions surrounding abortion, including that is a complicated and risky procedure, need to be challenged. Information about abortion should be included as part of comprehensive sexuality education in schools, so that boys and young men are informed about these issues from a young age and able to discuss them openly with their partners and others.

There is a need to engage men in group discussions to create awareness on the issues around abortion, the consequences of unsafe abortion, its links to patriarchy, and its impact on their own lives.

Many of the misconceptions surrounding abortion, including that is a complicated and risky procedure, need to be challenged. Information about abortion should be included as part of comprehensive sexuality education in schools, so that boys and young men are informed about these issues from a young age and able to discuss them openly with their partners and others.

Public conversations about the impact of abortion on everyone’s lives can help normalize abortion as part of the many reproductive decisions women make and that many men experience too. More media focus is needed on men’s experience and storytelling by men and women whose lives have been changed for the better by terminating a pregnancy. Stories of men who have accepted that women are the ones to make decisions about abortion, and emphasis on the role of communicating well with a partner and acknowledging when they are not ready to become fathers, all are helpful ways to convey the message that it is possible for men to remain engaged with their partners throughout an abortion experience. There is a need to develop clear and effective messaging on abortion targeted at men, emphasising that reproductive rights are important health rights that allow women to exercise control over their own physical and emotional health.

Greater equality in contraceptive responsibility

Around the world, responsibility for using contraception to prevent pregnancy and sexually transmitted infections (STIs) continues to be seen as women’s responsibility. A combination of lack of information about contraception and harmful social norms and expectations around masculinity mean that men fail to take joint responsibility for preventing pregnancy and STIs. At the same time, it is men who hold decision-making power over condom use, and women are often unable to negotiate the terms of sexual activity.

It is crucial therefore to raise awareness among men and boys, encourage them to take responsibility for contraceptive use, and advocate for accessible education and services to enable them to do so. Education around contraception is often directed at girls, both in school and family settings, and boys often do not receive information about pregnancy and contraception. Sexual education in schools must include full and accurate information on all contraceptive methods to all young people, and encourage honest and open conversations on these issues.

In many cases, even if men are well informed about contraception, social pressures encourage men to choose unprotected sex. It is helpful therefore to tackle the ‘macho culture’ and talk about social norms surrounding us all which prevent men from wearing or accepting condoms or other forms of contraception. For example, dispelling the myth that undergoing a vasectomy means ‘losing’ a part of your manhood.
Increasing men’s access to and use of HIV and other SRH services

Several factors contribute to discourage men from using sexual and reproductive health services, including HIV/AIDS testing and treatment services. Heavily ingrained cultural and social norms teach men that seeking help is a sign of weakness, and that SRHR is women’s responsibility.

Healthcare systems are not well equipped to include men and address men’s health needs, and national health policies and guidelines often limit their focus on men to risk prevention, and particularly to STD and HIV prevention.

Evidence suggests that it is more effective to encourage men to seek preventive care while striving to implement health services and policies that integrate different services at each healthcare facility or delivery point. For example, ways that are more inclusive of men, women and non-binary individuals of all ages. Family planning clinics can offer a full range of care, making it easier for all people to access healthcare in one visit to a health center. This works best when these health centers are not perceived as primarily a “women’s health clinic” or an “adult, married couple service provider”.

Campaigns and outreach to men encouraging them to get tested for STDs and HIV, are successful examples of breaking the stereotypes and stigma surrounding sexual health. National campaigns, such as those around Fathers Day, can encourage men to attend antenatal clinics with their partners. Adding HIV screening for parents that attend antenatal clinics as part of a package of preventive measures such as iron intake, tetanus vaccines, syphilis and other STDs testing, is another effective strategy.

Comprehensive Sexuality Education

Rights and gender are key elements that bring a new dimension to sexuality education. By including a focus on gender norms, equality, bodily autonomy and consent, comprehensive sexuality education (CSE) can more effectively address stigma and prevent discrimination and exclusion.

CSE has been proven to be effective in increasing young people’s health outcomes, attitudes towards gender, and sense of confidence and identity. Despite this growing body of evidence, CSE remains a controversial term and faces resistance in many contexts. This is particularly true for CSE that openly addresses the full range of contraceptive options, abortion facts and the realities of LGBTQI experiences. Although national policies mandating CSE in schools exist in many contexts, implementation is poor or non-existent.

Deepening the involvement of boys and young men in CSE is a challenge. Further work is needed to explore and understand the benefits of engaging boys and young men in CSE, and develop promising practices. The following examples were highlighted at the SRHR For All meeting in Addis Ababa, 2019:

When sexuality is approached as a positive, pleasurable part of who we are (not focused solely on the prevention of pregnancy and STIs) students are more likely to actively engage in lessons.
It is important to include sexual minorities in school curricula, and to give teachers the tools to support young people of diverse sexual orientations and gender identities.

• It is useful to have separate gender groups in addition to mixed groups depending on the topic being discussed. Due to prevailing gender norms that expect cis men to know everything and discourage them from asking questions, cis male-only groups can encourage men to talk openly about their sexuality and ask questions. However mixed groups are also important as all genders need to learn to communicate openly around these topics with one and other.
• It is important that all young people are taught about all biological aspects of reproduction. For example, all young people should be taught about menstruation, which is often taught only to girls, thereby further increasing stigma around the subject.
• It is important to engage young men not only as potential perpetrators and enablers of violence, but in their many roles related to SRHR. Programmes focused on young men and boys must address the reality of their lives and the diversity that exists among boys.
• For CSE to be effective it is important to train teachers well and to do a value clarification with teachers on their own gender attitudes and stereotypes. Concepts must be explained clearly so educators can translate these concepts to be relevant to young people.
• Successful programmes start with individual boys and support them to understand themselves, their body, their experience of being boys and their relationship to their sexuality.
• Much of the resistance to CSE comes from young people’s parents. It is important therefore to work with parents, many of whom have not received sexuality education themselves, to explain concepts so they can be assured it is not against their values. It is also important to create safe spaces separated by gender when working with parents and teachers.
• School-based programmes for young people can be complemented by text-message programmes and apps where young people can easily access information and guidance.

Preventing gender-based violence

Gender-based violence and SRHR are inextricably linked, and it is essential that approaches address these linkages.

Gender-based violence in its multiple forms restricts the choice and ability to negotiate sex for those that experience it, limiting access to crucial SRH services and increasing the likelihood of unwanted pregnancy and STIs.

In order to complement these efforts and prevent gender-based violence men and boys need to be engaged in challenging the social norms and attitudes that lead to gender-based violence, including FGM and early and forced marriage, and national policies should seek to reduce GBV through the engagement of men and boys.

While across the world governments are implementing policies designed to prevent and respond to gender-based violence, in many contexts these approaches still focus on women. In addition, while states increasingly have laws on issues such as marital rape, implementation is poor and in many contexts customary law continues to hold power and is a major barrier to fighting gender-based violence. Despite laws banning discrimination based on sexual orientation and gender identity and protecting LGBTQI rights, these are often not enforced and LGBTQI people continue to face violence and exclusion. The lack of data on gender-based violence, for example on child pregnancy, also undermines GBV prevention.

Some promising practices highlighted by participants to engage men in the prevention of GBV include:

• The Carribbean regional level initiative Partnership for Peace, a 16-week court mandated re-education programme targeted at perpetrators of gender-based violence.
• Hiwot Ethiopia has been running a radio programme called Men Do Care four times a week for the last 9 years in which men discuss issues such as FGM and child marriage. Hiwot are also working with religious leaders on the issue of child marriage to encourage them to promote education for young women as an alternative.
• The Peruvian Masculinities Network organize Anti-Machismo Brigades to work on engaging men in the prevention of violence and street harassment. They are also working in collaboration with the Ministry for Women to promote responsible fatherhood.
• The Uruguayan center for Maskulinitiies had a successful experience training police officers using a gender transformative approach in which they reflected on their own ideas on masculinity and patriarchy.
Advocating for SRHR for all

The advocacy work of MenEngage Alliance focuses on policy change at the national, regional and global levels and on creating synergies between decision-making levels.

As part of this initiative, SRHR ‘Changemakers’ can play a crucial role in influencing policy advocacy and the project as a whole is expected to make a significant contribution to the development of the interconnected advocacy strategy.

The Alliance’s advocacy is multi directional: Global frameworks will support challenging national and regional discriminatory policies and legislation that will inform global advocacy agendas, providing the evidence base and expert voices for global efforts under a collective umbrella framework. Finally, the diverse thematic priorities of the Alliance will converge through advocacy that seeks to hold governments to account for enforcing and implementing global policy frameworks such as the Sustainable Development Goals (SDGs), the International Conference on Population and Development (ICPD) Program of Action, compliance with the Commission on the Status of Women (CSW), Human Rights Council Resolutions, and the Committee on the Elimination of Discrimination Against Women (CEDAW) reviews, among other processes. Some of the Alliance’s advocacy objectives in SRHR are:

• Elevating the voices and participation of our members in regional/international fora
• Supporting and facilitating capacity strengthening on advocacy skills around policy development and reform in coordination with other gender justice movements, based on regional strengths and needs
• Connecting local realities to international frameworks and vice versa
• Mobilizing members at all levels to meaningfully connect and contribute to broader political agendas and global movements for SRHR, women’s rights and gender justice
• Co-creating an integrated advocacy strategy

For the Alliance’s advocacy efforts to be successful they must be accountable.

Accountable advocacy means working together, through common values, with broader women’s rights and SOGI/LGBTQIA+ movements, and contributing with a men and masculinities lens to larger efforts to advance feminist advocacy agendas.

MenEngage Alliance will strive to ensure that our members do not replicate patriarchal power dynamics in our advocacy work, and instead be cognisant of its own position and use it to amplify feminist voices. Engaging in SRHR is part of an ongoing effort by the Alliance to make its work more political, to not always choose to work on the ‘low-hanging fruit’ or depoliticised issues in the feminist agenda, instead advocating on more contentious SRHR issues such as CSE, abortion and sex-work.

Across our advocacy on SRHR, peace and security, gender-based violence, unpaid care are emerging issues that we seek to advance as part of a common advocacy framework to engage men and boys, and make a real contribution to gender justice. We advocate for work to engage men and boys that is:

- Accountable to the SRHR agenda led by women’s rights organisations and LGBTQI advocates orientations or gender identities
- Informed by feminist principles, with an intersectional lens and inclusive
- Human-Rights Based
- Gender-Transformative

Men/Chibuta from Zimbabwe presents her region’s advocacy strategy
SRHR around the world

Africa

Africa has strong policy frameworks on SRHR in place, including the Maputo Protocol, but faces challenges in the implementation of these frameworks and a lack of political commitment.

Currently the region is experiencing conservative and religious backlash to SRHR language and concepts. LGBTQI rights remain heavily contested, and the African Union is currently struggling with accepting the concept of sexual rights. It has refused to give status to several LGBTQI organizations and networks, leading to doubts around whether it is truly working towards human rights in the region. Issues of abortion and comprehensive sexuality education are also facing resistance and the Global Gag Rule has severely limited the ability of NGOs in the region to even provide information about abortion.

As an initial step, the changemakers will conduct a review of the different sub-regions in Africa, which will assess what the region has achieved in terms of SRHR and what are the current gaps. This document will be used to inform the network's advocacy work as the project advances. The African network identified three priority issues for the project: gender-based violence, ending homophobia and transphobia, and increasing men's access to and use of HIV/AIDS services. The region identified some key upcoming events and advocacy opportunities including ICPD+25, the Sexual Violence Research Institute (SVRI) conference and ICASA.

Caribbean

Countries in the Caribbean have varying levels of legal access to abortion, with some having no legal access to abortion unless the life of the pregnant woman is in danger. In addition, there are still significant cultural, economic and social barriers to abortion in the region. Issues of abortion and comprehensive sexuality education are also facing resistance and the Global Gag Rule has severely limited the ability of NGOs in the region to even provide information about abortion.

The Caribbean changemakers are carrying out a desk review in order to produce a 'Situational Analysis and Promising Practices Report' highlighting policies, organizations and projects on SRHR in the region, with a specific focus on those which engage men and boys. Five national convenings and one regional level consultation will be coordinated in which local agencies, civil society organizations, academia and governments will come together for knowledge sharing and to strengthen the capacities of local stakeholders to engage men and boys in SRHR advocacy (programs, community mobilization, campaigns, and policy). This will support in creating alliances and partnerships at local and regional level, to disseminate the report findings and to identify at least two priority SRHR areas on which to focus the project's engagement with men and boys.

The changemakers' goal is to create a brief step-by-step guide to help CSOs and youth advocates plan, implement or improve advocacy initiatives on engaging men and boys in SRHR advocacy which will be used to ensure sustainability. The changemakers will also develop and manage a webpage on the existing CariMAN's website to highlight existing and new projects on engaging men and boys in SRHR advocacy and the development of a CariMAN Social media platform. A social media campaign commemorating the 16 Days of Activism against Gender-based Violence will highlight the work of 16 affiliate organizations on SRHR advocacy with men and boys. The changemakers will also participate and organize a roundtable discussion at CSW64 to share country and regional models, projects and programs for engaging men and boys in SRHR advocacy.
Latin America

The Latin American region has made advances in SRHR-related public policy thanks to the efforts of diverse social movements. However, young people in most countries do not have access to any sexuality education, the region has some of the highest rates of teenage pregnancy in the world and abortion is illegal or restricted in the majority of Latin American countries. While there have been legal advances towards the protection of human rights in the region, with Central American countries still lagging behind, these instruments have not always translated into people’s day to day lives and practices. State institutions have mainly focused their efforts in SRHR on birth control and the prevention of STIs, and not from a rights-based perspective focusing on bodily autonomy and sexual citizenship. In addition, policies and interventions have largely focused on women, excluding strategic sectors such as men and boys. Currently, hard-fought gains are at risk due to the increased influence of ultra-conservative movements, a return to the militarization of the state and religious fundamentalisms.

The Latin American Changemakers’ action plan is organized in two stages, one focused on consolidation and capacity building of the changemakers on specific SRHR advocacy topics. This includes a mapping of the current state of SRHR in Latin America, including existing programmes and policies, relevant actors and possible alliances, and challenges, and simultaneously highlighting a map of internal capacities and resources within the regional network relating to men and SRHR.

Stage two is the implementation of concrete actions based on the learning achieved from the capacity building of the changemakers.

A campaign to promote co-responsibility in SRHR targeted at men and boys will be developed supported by a network of young people who will play a key role in creating the concept of the campaign and carrying out its activities.

A range of materials will be developed for the campaign including posters, videos and podcasts. Educational and training material will also be developed for health care and education providers.

South Asia

In South Asia, big data is showing many SRHR indicators are improving. However, many CSOs working on the ground are observing an opposite trend, which needs to be dissected. Some of the key issues in the region include teenage pregnancy, menstrual hygiene and stigma, comprehensive sexuality education and early and forced marriage. Youth friendly SRHR services are lacking in the region and transgender rights.

The changemakers in South Asia will identify high level forums on SRHR that are active in the region, as well as some of the communications tools that are being used in the region to promote SRHR such as apps, comic books and brochures. They will also map the organizations in the regions that are working on early and forced marriage and engaging men and boys, and develop a quarterly newsletter with case studies from their campaigns.

The South Asian region have chosen to focus on early and forced marriages as it is a common issue in all member countries in the network, aligns with the networks strategic plan, and it is an issue which is rooted in patriarchal power dynamics and which men in power can greatly influence the prevalent norms.

South Asian region have chosen to focus on early and forced marriages as it is a common issue in all member countries in the network, aligns with the networks strategic plan, and it is an issue which is rooted in patriarchal power dynamics and which men in power can greatly influence the prevalent norms.
‘At-large’ members discussion

At large members of MenEngage Alliance are organisations on the Global Board that do not represent regional networks. Instead, one of their roles is to ensure the inclusion of specific issues, expertise, and themes. At the SRHR For All meeting, At large members and partners discussed the role and value addition they will bring to the project. They agreed that the broad role of at-large members should be to:

- Provide mentorship and support to the regions and changemakers on the implementation of their work plans, especially on strategic and policy issues
- Bridge regional and global level advocacy, including by creating space in global or high-level events for regional exposure and participation
- Support with establishing a community of practice among involved participants
- Uphold MenEngage Alliance’s broad commitment to inclusivity, including in the language it uses
- Share what their organizations are doing and identify overlaps and opportunities
- Coordinate solidarity among movements, for example by mobilizing our members on SRHR to support specific other movements
- Coordination of research and advocacy components conducted at regional level

Some specific activities identified were:

- Establish communication among at-large members via an email list (communication with the regions is to be facilitated by the Global Secretariat)
- Assemble a bios document of each organization and share with the regions
- Develop a concept and language clarification on each of the six priority areas as a starting point for the regions to work with
- Develop a position statement
- MenEngage Alliance and feminist human rights organisation, CREA, will develop a curriculum for the engagement of men and boys in SRHR
- Review and respond to the regional work plans when they are finalized and identify areas in which they can support

Knowledge sharing and communications

Sharing knowledge, experiences, and promising practices should be seen as a key element in promoting SRHR, including through engaging men and boys. Because many SRHR efforts and systems have traditionally had a stronger focus on women compared to other groups, there is a gap in understanding when it comes to engaging men. The participants at the SRHR For All meeting in Addis Ababa identified gaps in knowledge, and developed ideas for how to bridge those gaps. They focussed on developing suggestions for resources and activities based on five areas: advocacy; capacity strengthening; messaging; research; and cross-movement building.

While not all of the following ideas will be developed (due to limited resources, time and capacities), they all offer an insight into potential sub-projects that would support the SRHR For All initiative, and provide a useful basis for future work on engaging men and boys in SRHR at various levels.

Developing advocacy tools

Advocating at local, national, and regional levels requires knowledge and understanding of policy frameworks and global agreements, as well as effective approaches and advocacy strategies. A number of ideas to support advocacy to engage men and boys in SRHR were suggested during the SRHR For All meeting:

- A global SRHR advocacy toolkit, providing clear goals, objectives, and approaches when engaging with national, regional and global level policy spaces.
- Media products, which could be used online including social media
- An SRHR advocacy strategy and plan, including a stakeholder mapping
- A policy mapping, showing the level of positive (and harmful) SRHR policies by country and region
- Global, regional and national resource mobilization plans
Capacity strengthening

A need to strengthen understandings and capacities was identified by the participants at the SRHR For All meeting. Specifically, it is hoped that it will be possible to advance towards a common understanding on engaging men and boys in SRHR. This should be done in a horizontal way, rather than top-down, with participants acknowledging the responsibility for education and learning is shared collectively. Capacity strengthening might include activities like:

- A platform for dialogue, as well as space for courses, webinars and resource-sharing
- Evidence-informed understandings
- Collecting and disseminating of promising practices
- Map out expertise within the network/partners
- Identify the tools that already exist

Developing effective messages targeting men and boys

Participants at the SRHR For All meeting felt that SRHR messages aimed at engaging boys and men should be positive and active. The most suitable opportunities, contexts, and channels for sharing messages need to be better understood. Importantly, participants at the SRHR For All meeting felt messages need to use non-academic, colloquial language. That can best be achieved by working with communities and groups affected by the issues.

Participants were mindful that communications efforts need to be prepared for resistance - especially in conservative contexts, where it is important to learn and understand common conservative arguments. They should be prepared to deal with adverse reactions from people who may need reassuring that the messages can support their other values.

Evidence-informed advocacy

Participants at the SRHR For All meeting suggested that efforts to bring men and boys into positive discussions and practices on SRHR must be based on evidence, including academic research. One important element of this could include mapping out the evidence on engaging men and boys in SRHR. Participants at the SRHR For All meeting listed the following areas that could be mapped out:

- Research on vulnerable groups SRHR
- Evidence of contributions of working with men and boys on SRHR
- Contribution of LGBTQ-phobia work on health and wellbeing
- Access to abortion, and attitudes towards family planning services
- Comprehensive sexualities education
- Stigma around SRHR
- Discrimination against SOGIESC
- Contraception use
- HIV services
- GBV/VAWG
- Success stories/promising practices

These issues must not only be understood at a global level, but also in regional and local contexts. Acknowledging the scale of the task, participants at the SRHR For All meeting suggested some approaches to developing a strong evidence base, such as:

- See what has already been done and share/disseminate useful evidence and evidence reviews
- Divide up components across regional partners
- National/regional policy and knowledge briefs - include global and regional mandates
- National partners create situation analyses
- Examine how data were produced. We must be impeccable and debunk weak/false studies.

Existing sources for policies and policy briefs include:

- African Ministers of Women and Gender Affairs
- Protocol to the African Charter on the Rights of Women in Africa (the 'Maputo Protocol')
- Maputo Plan of Action 2016-2030
- The African Youth Charter
- African Union Commission Continental SRHR Policy Framework
Cross-movement building as strategy

Many parallel social and gender justice movements exist. Participants at the SRHR For All meeting were mindful that MenEngage Alliance - and specific initiatives to engage men and boys in SRHR - should add value to a plethora of other work on SRHR, and a long history of SRHR activism led by women’s rights and LGBTQI rights organisations. There is an opportunity to strengthen the acceptance of a gender-transformative masculinities lens as supportive of other feminist movements.

It is important to be clear about the added value of a ‘men and masculinities’ lens based on a gender transformative approach. This is true for those working to engage men and boys in SRHR, as well as how these efforts are understood by parallel women’s and LGBTQI movements.

There is a need to identify parallel movements, and map out the individual and collective links to those movements at all levels (International ↔ Regional ↔ National ↔ Community). Common spaces can be identified, and supportive messages developed as part of shared agendas.

Various approaches to strengthening cross-movement efforts were suggested at the SRHR For All meeting, including:

- Using social media to connect and voice support for other movements
- Work with women journalist organisations for story writing
- Work with progressive religious groups, including storytelling using religious stories.
- Map strategies with religious movements and moments
- Work with women in trade unions

Several movements were identified as important to support through efforts to engage men and boys in SRHR, including:

- Youth and students
- Feminist women’s rights organisations
- HIV
- LGBTQI
- Disability
- Trade unions
- Climate justice
- Positive fatherhood

Moving from recognition to understanding

In Addis Ababa, meeting participants acknowledged structural ways in which some people, some groups, and some identities are systematically excluded from:

- Access to health care,
- Legal protections and provisions,
- Quality supplies and programs.

To address SRHR from the lens of engaging men and boys, and transforming masculinities, it is important to look critically at these systems to understand power dynamics related to:

- Who occupies decision-making spaces related to contraception, abortion, sexuality, sexual behavior, STDs, HIV, GBV and child abuse?
- How are decisions made?
- Who is being excluded from decisions or from full access to care, services, supplies, information?
- How does exclusion happen? What does it look like?

In Ethiopia, participants and changemakers inspired and challenged the Alliance to yield to and be inclusive of youth needs and their thought processes, and acknowledged the need to expand understanding of what it means to be a gay, bisexual or transgender man, and to articulate the Alliance’s position and advocacy on issues of sexual orientation, gender identity, expression and sexual characteristics (SOGIESC).

The gathering raised awareness about and visibility of the intersecting power dynamics related to class, race, ethnicity, SOGI and sex/gender stereotypes, which are the foundation and root causes of most barriers to SRHR.
Moving forward

In order to further unpack the gender barriers to SRHR and address the structural aspects of patriarchy, the Alliance will continue to collaborate with the feminist human rights organization, CREA, to explore aspects of power and privilege that are woven into the SRHR cloth. CREA has produced a long standing Institute on power, patriarchy and sexuality, which has nurtured a new generation of feminist leaders since 2007. CREA’s accumulated knowledge and lessons learned from the global SRHR feminist movement and its many cohorts of leadership building will be invaluable to MenEngage Alliance, and we feel privileged to partner with them.

In a learning workshop in October led by CREA, regional leaders of the Alliance and project changemakers will be diving into issues of male privilege related to systems of control, intervention and denial over the female body, sexuality and reproductive capacity. Working together with young people, we will expand our collective understanding of patriarchy as a social, political system, and how transformative approaches may help us change gender and masculinities norms. By working with CREA, the Alliance will strengthen its accountable practices that stem from recognition of the leadership of feminist organizations in SRHR.

Platform for Action on SRHR

The Alliance’s efforts to strengthen a critical voice for how to engage men and boys in advancing SRHR for all from a feminist stand point seek to co-create a global, collective platform for action. Each region, through their SRHR work plans of action and the involvement of changemakers and partners, will contribute to a global advocacy platform on SRHR for the Alliance.

At the recent Nairobi Summit in celebration of 25 years of gains and commitments to fulfill the promise of the 1994 ICPD, MenEngage Alliance further articulated its vision for a global platform for action. The MenEngage commitment to the ICPD+25 reads as follows:

MenEngage Alliance envisions a world where human beings from different regions, cultural contexts and unique circumstances are equally recognized as rights holders, and all people have access to information, services and resources to care for their sexual and reproductive health.

MenEngage Alliance aspires to a future that embraces feminist values of equal rights and a culture of care that respects the SRHR of all people with no exclusions.

Therefore MenEngage Alliance stands in solidarity with Feminist and SOGIESC movements and activists in this journey.

MenEngage Alliance understands “all men and boys” as inclusive of their full diversity, including gay, bi-sexual, queer, non-binary, and trans men.

MenEngage Alliance commits to fully support:

• Feminist, SRHR, Youth and LGBTIQ and Gender Non-Conforming rights activists, organizations and movements, and their advocacy and political agendas at ICPD+25, standing in solidarity and meaningful allyship behind their asks and demands within this space.

• To advance all efforts to engage men and boys to transform masculinities in SRHR through feminist-informed, gender-transformative, human rights-based, intersectional and accountable approaches that seek to dismantle patriarchy, and to transform social norms around masculinities, unequal power relations and root causes of violence and discrimination against all women, girls and SOGIESC peoples.

• Universal Access to Sexual and Reproductive Health for All, within the scope of Universal Health Coverage (UHC) for all people, and with attention and care for the rights, health, and needs of all women and girls, all men and boys, and other marginalized groups often excluded from accessing basic healthcare and education, including access to HIV treatment and a better quality of life for people living with HIV and access to HIV prevention treatment for all, especially in countries with low social and economic status where the seroprevalence is still high.

Additionally, we stand in an unwavering commitment to advocating for:

• The Right to Comprehensive Sexuality Education (CSE) that is science-driven and mindful of universal and equal human rights, and that addresses boys and young men’s notions, attitudes and behaviours associated with sexuality, power, privilege, gender identities, masculinities, women and girls’ empowerment, and reproductive rights.

• The Right to Safe Abortion for All Who Can Become Pregnant, with access to the information and means to have a safe abortion, including self-managed options, and to engage men and boys to work as meaningful allies to eliminate stigma and discrimination in access to SRHR including safe abortion.

• The Right of All People to Bodily Autonomy and Integrity Free From Discrimination and Coercive Practices by increasing men and boys’ understanding and acceptance of the fact that human rights apply to all people, that no one’s right is above another’s, and that no one should be denied their right to health.

• The Right to Enjoy Health Care Systems and Policies that Serve and Protect the SRHR of All People by working to transform discriminatory and divisive distribution of responsibilities between men and women and gender non-conforming people, in and within access to SRHR, including in decision-making spheres, and public and private spheres, in order to transform unequal gender norms, attitudes and beliefs.

8 Sexual orientation, gender identity and expression, and sexual characteristics (SOGIESC)
9 Bodily autonomy is understood to encompass SOGIESC identities and experiences as well, per the Yogyakarta Principles: yogyakarta-principles.org relating to the right to the highest attainable standard of health, paragraph 17.
## Participants List

<table>
<thead>
<tr>
<th>NAME</th>
<th>ORGANIZATION</th>
<th>COUNTRY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>AT-LARGE MEMBERS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bafana Khumalo</td>
<td>Sonke Gender Justice</td>
<td>South Africa</td>
</tr>
<tr>
<td>Ilze Smit</td>
<td>Rutgers</td>
<td>Netherlands</td>
</tr>
<tr>
<td>Jameel Zainir</td>
<td>IPPF</td>
<td>India</td>
</tr>
<tr>
<td>Lydia Mongarera</td>
<td>ATHENA Network</td>
<td>Uganda</td>
</tr>
<tr>
<td>Margaret Greene</td>
<td>Promundo</td>
<td>USA</td>
</tr>
<tr>
<td>Olusgun Odumosu</td>
<td>AMSHeR</td>
<td>Nigeria</td>
</tr>
<tr>
<td>Preston Mitchum</td>
<td>Advocates for Youth</td>
<td></td>
</tr>
<tr>
<td><strong>SRHR PROJECT PARTNERS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Judith Oka</td>
<td>IPAS Africa</td>
<td>Kenya</td>
</tr>
<tr>
<td>Madhumita Das</td>
<td>CREA</td>
<td>India</td>
</tr>
<tr>
<td>Nondo Ejano</td>
<td>WGNRR</td>
<td>Tanzania</td>
</tr>
<tr>
<td>Richard Lusimbo</td>
<td>Sexual Minorities Uganda</td>
<td>Uganda</td>
</tr>
<tr>
<td><strong>REGIONAL REPRESENTATIVES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carlos Ildibouo</td>
<td>NAMEN</td>
<td>Canada</td>
</tr>
<tr>
<td>Akaro Campos</td>
<td>MenEngage Latin America</td>
<td>Costa Rica</td>
</tr>
<tr>
<td>Jose Alfredo Cruz Logo</td>
<td>MenEngage Latin America</td>
<td>Mexico</td>
</tr>
<tr>
<td>Hassan Sekajool*</td>
<td>MenEngage Africa</td>
<td>Uganda</td>
</tr>
<tr>
<td>Mabel Sergendo</td>
<td>MenEngage Africa</td>
<td>Uganda</td>
</tr>
<tr>
<td>Bilquis Tahira</td>
<td>MenEngage South Asia</td>
<td>Pakistan</td>
</tr>
<tr>
<td>Velusamy Weerasingham</td>
<td>MenEngage South Asia</td>
<td>Sri Lanka</td>
</tr>
<tr>
<td>Tyrone Buskire</td>
<td>CarIAM</td>
<td>Grenada</td>
</tr>
<tr>
<td>Hernando Muñoz Sanchez</td>
<td>MenEngage Latin America</td>
<td>Colombia</td>
</tr>
<tr>
<td><strong>SRHR CHANGEMAKERS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adhli Suraj VMDKHN Bandara</td>
<td>MenEngage South Asia</td>
<td>Sri Lanka</td>
</tr>
<tr>
<td>Inam Ull Haji</td>
<td>MenEngage South Asia</td>
<td>Pakistan</td>
</tr>
<tr>
<td>Suwiktha Rana</td>
<td>MenEngage South Asia</td>
<td>Nepal</td>
</tr>
<tr>
<td>Sohanur Rahman</td>
<td>MenEngage South Asia</td>
<td>Bangladesh</td>
</tr>
<tr>
<td>Neeti Neeti</td>
<td>MenEngage South Asia</td>
<td>India</td>
</tr>
<tr>
<td>Patricia Proz</td>
<td>MenEngage Uruguay</td>
<td></td>
</tr>
<tr>
<td>Cesar Cordova</td>
<td>Instituto WEM</td>
<td>Costa Rica</td>
</tr>
<tr>
<td>Sofia Mandragón</td>
<td>Red Persama-de Masculinidades</td>
<td>Peru</td>
</tr>
<tr>
<td>Pamela Saavedra</td>
<td>Cultura Salud</td>
<td>Chile</td>
</tr>
<tr>
<td>Hernando Hernandez</td>
<td>Hombres Construyendo Empatías</td>
<td>Mexico</td>
</tr>
<tr>
<td>José Darío Díaz</td>
<td>Colombia Network on Masculinities</td>
<td>Colombia</td>
</tr>
<tr>
<td>Daryl George</td>
<td>Antigua Government Department</td>
<td>Antigua</td>
</tr>
<tr>
<td>Ajan Benoit</td>
<td>GrenChap</td>
<td>Grenada</td>
</tr>
<tr>
<td>Shaley Cornwall</td>
<td>CarIAM</td>
<td>Grenada</td>
</tr>
<tr>
<td>Trizia Bastes-Gabin</td>
<td>University of the West Indies</td>
<td>Trinidad &amp; Tobago</td>
</tr>
<tr>
<td>Harriet Chibuta</td>
<td>Young Women in Action</td>
<td>Zambia</td>
</tr>
<tr>
<td>Kassum Coudelly</td>
<td>Global Institute for Women’s Empowerment Group</td>
<td>Mali</td>
</tr>
<tr>
<td>Linda Kastra</td>
<td>COMEN</td>
<td>DRC</td>
</tr>
<tr>
<td><strong>MENENGAGE ALLIANCE GLOBAL SECRETARIAT</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jennifer Rodriguez Bruno</td>
<td>MenEngage Global Alliance</td>
<td>USA</td>
</tr>
<tr>
<td>Laxman Bellore</td>
<td>MenEngage Global Alliance</td>
<td>Nepal</td>
</tr>
<tr>
<td>Magaly Marques</td>
<td>MenEngage Global Alliance</td>
<td>USA</td>
</tr>
<tr>
<td>Sinelad Nolan</td>
<td>MenEngage Global Alliance</td>
<td>Ireland</td>
</tr>
<tr>
<td>Tom Hornbrook</td>
<td>MenEngage Global Alliance</td>
<td>UK</td>
</tr>
</tbody>
</table>

*also an SRHR changemaker*
The SRHR For All Project aims to challenging stigma, discrimination, attitudes and laws that undermine the fulfillment of sexual and reproductive health and rights for all. It does this through network-based practice and evidence based advocacy for gender norms transformation and engaging men and boys in key SRHR issues.

SRHR For All is a project of MenEngage Alliance generously supported by Amplify Change.