

Chatbots, Board Games, and More

Using Innovative Methods to Engage Men in Family Health

June 27, 2023



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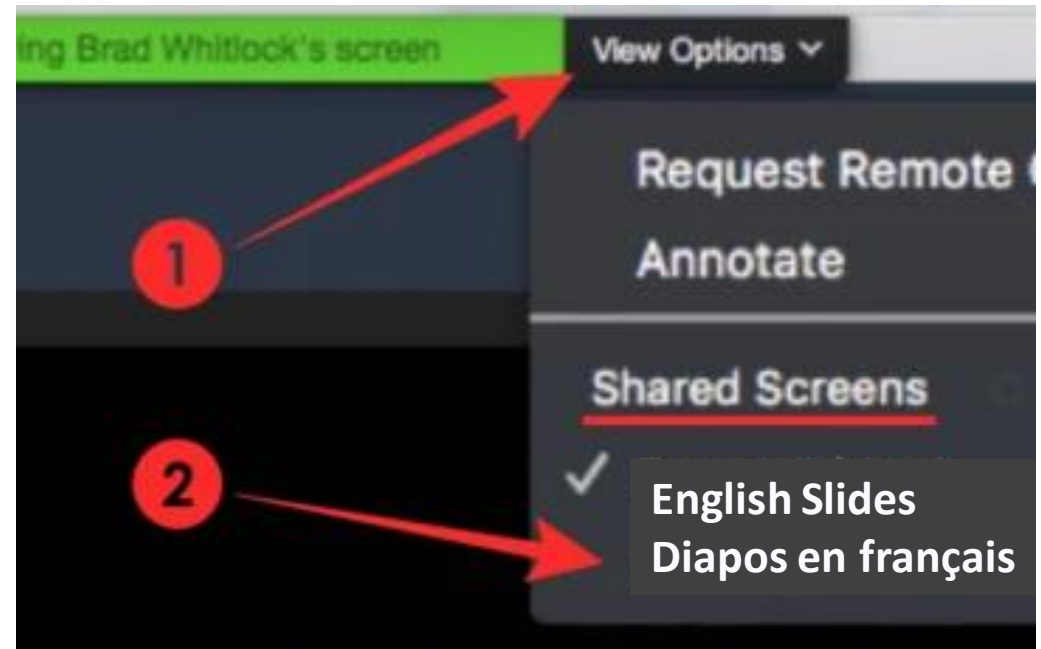


Housekeeping Announcements

- **Introduce yourself** in the chat! (name, organization, and location).
- If you have any questions, please submit them through the **“Q & A” function**.
- Feel free to share reflections and comments in the **chat** at any point!
- **Présentez-vous** dans le chat ! (nom, organisation et lieu).
- Si vous avez des questions, veuillez les soumettre par le biais de la fonction **«Q & A»**.
- N'hésitez pas à partager vos réflexions et vos commentaires dans **le chat** à tout moment !

Viewing slides in English or French

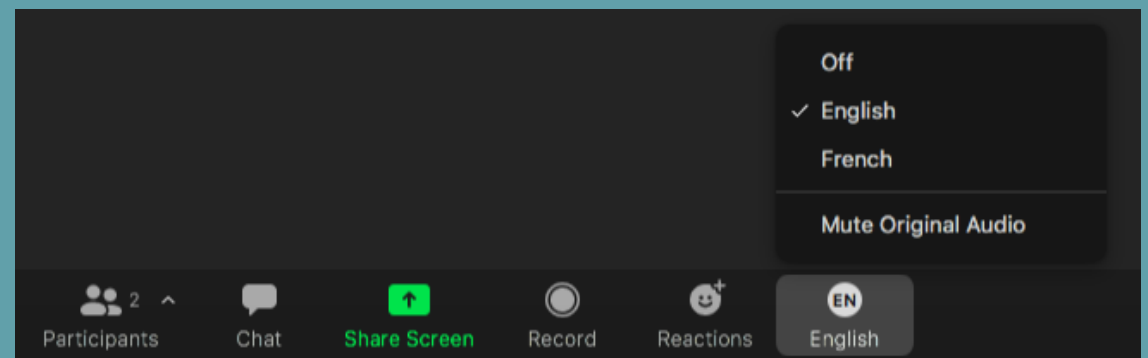
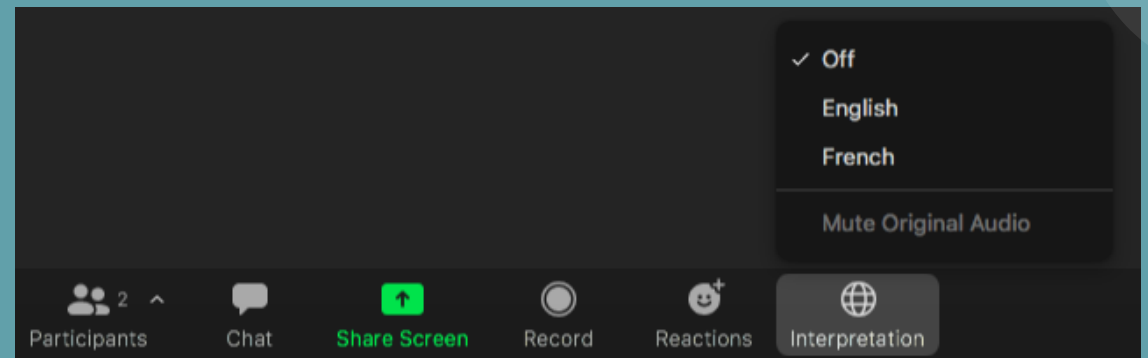
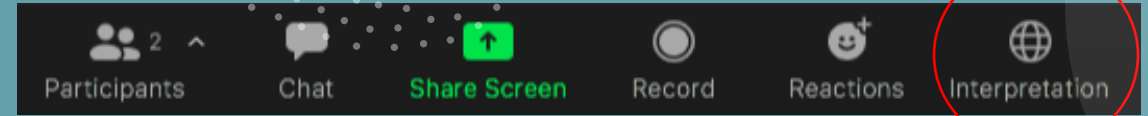
- To view the French version of the presentation, go to the top middle of the screen where it says “**View options.**” Select the option that says “**Diapos en français.**”
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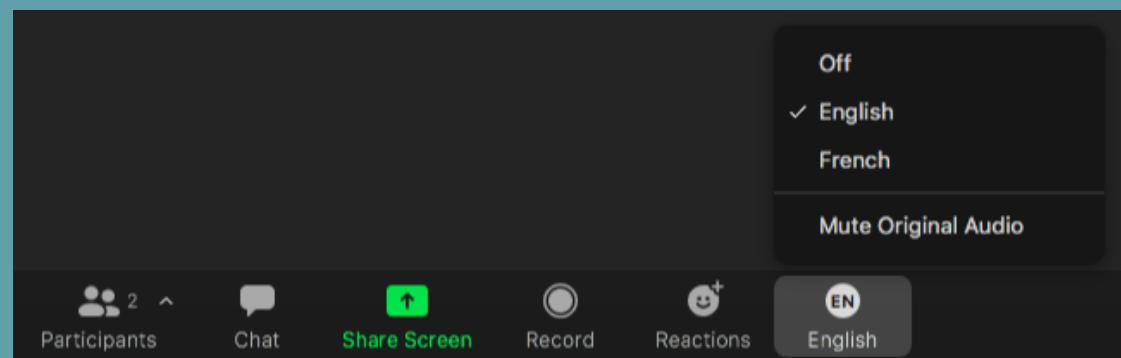
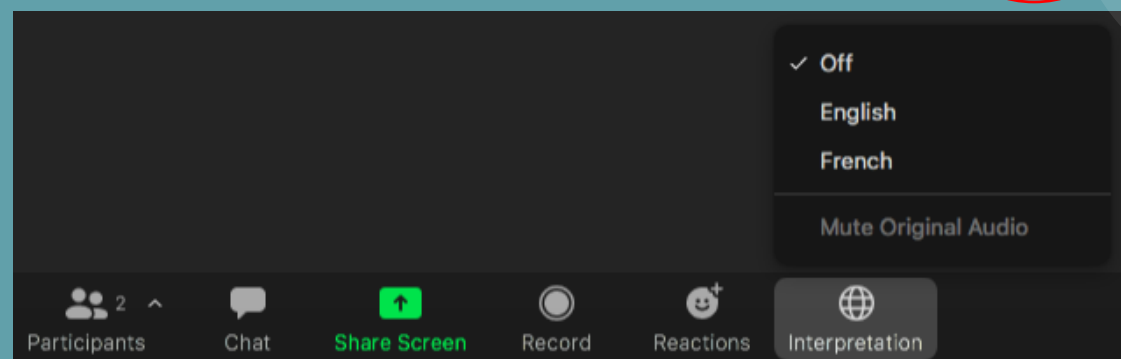
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Si vous utilisez un appareil mobile Android ou Apple, dans les commandes de votre réunion, appuyez sur les trois points, puis sur "Interprétation de la langue". Appuyez sur la langue que vous souhaitez entendre. Pour n'entendre que la langue interprétée, appuyez sur le commutateur "Mute Original". Cliquez sur "Terminé".



MOMENTUM Private Healthcare Delivery

VIYA Pakistan: Shifting the Family
Planning/ Reproductive Health Narrative
in Pakistan Through a Chatbot

Ayesha Leghari, Country Director, PSI Pakistan



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Family Planning in Pakistan: *Challenges and Opportunities*

Challenges

- **mCPR** among married women has remained **stagnant** over the last decade, with mCPR at 26.9%.¹
- Family Planning (FP) messaging has mostly targeted women, however men have **higher-decision-making authority** around number of children and contraceptive practices; **but are reluctant to use FP due to stigma and shame.**²
- Few male partners are **informed** about FP.



Opportunities

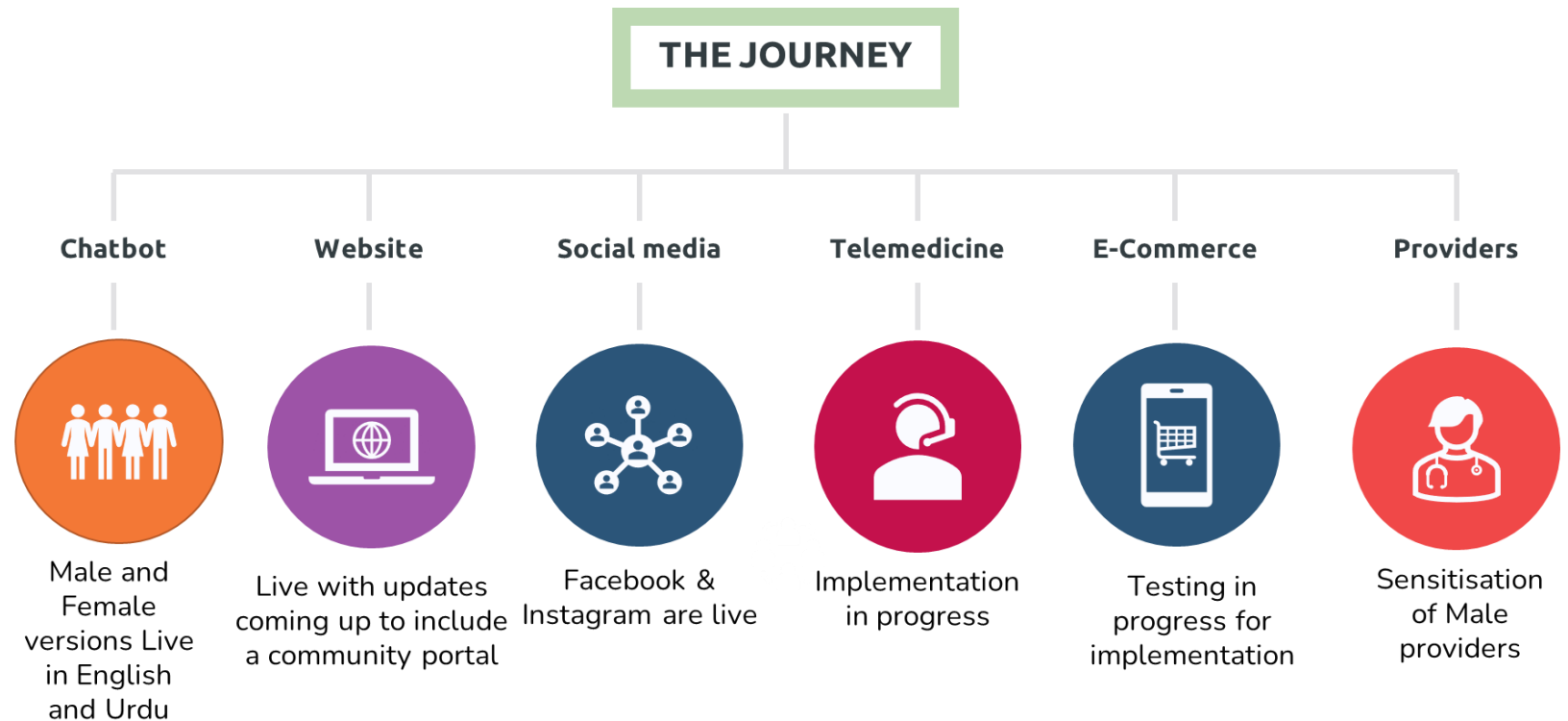
- **Gender transformative** approaches have identified **empowerment** as key to improving FP metrics, which means an informed partner becomes critical.
- FP programs have mostly been **analogue** and intervention oriented; increasing **need for new, innovative avenues** to improve FP.
- Provincial governments like Sindh are interested in promoting FP use among men and **investing resources to improve messaging.**
- There is increasing growth and use of **internet, social media, and mobile connectivity.**



1. FP2030. *FP2020: The Arc of Progress 2019-2020*. 2020.
2. National Institute of Population Studies (NIPS) [Pakistan] and ICF. *2017-18 Pakistan Demographic and Health Survey Key Findings*. 2019.

Introducing VIYA

VIYA is a first-of-its-kind lifestyle wellness chatbot in Pakistan that aims to destigmatize conversations around FP, reproductive needs, and contraceptive options. It is a force multiplier to enable male engagement to improve FP metrics in Pakistan and a centralized platform and community for men to seek information on FP.



VIYA's Reach

38,000+

New users on the
Chatbot

28

Average age of
users

87%

Male users

21

Average # of
messages per user

1.3 Mil+

Messages
exchanged

49%

Customer
satisfaction score

70%

Urdu users

48%

Married
users

VIYA's Impact and Looking Ahead

- Pakistan's first omnichannel and bilingual chatbot for men and women to learn about family planning and sexual reproductive health.
- Seventy-three percent of the sessions were in Urdu, thus highlighting the importance of localized content.
- Top selected topics were:
 - Sexual health (38%)
 - FP methods (16%)
 - Myths (12%)
- Average user profile: Male, married, 29 years old, two kids, worried about economy and wife's health.

MOMENTUM Country and Global Leadership

Engaging Men While Strengthening Women's Autonomy: Using Most Significant Change to Understand Male Engagement in Côte d'Ivoire and Togo

Roseline Akoua Yeboua, Gender Advisor, Côte d'Ivoire



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MOMENTUM Country and Global Leadership Research Question

Global learning question: How can male involvement be implemented in family planning (FP)/reproductive health (RH) care and maternal, newborn, and child health (MNCH)/antenatal care (ANC) services in a way that meets the needs of men and couples as clients without compromising women's rights and autonomy?

Adapted question for Togo and Côte d'Ivoire: How can men be involved in community-based couple communication activities in a way that promotes positive FP/maternal health outcomes, without compromising women's rights and autonomy?

Interventions

Togo

- Group discussions with couples (men alone and couples together), using curriculum developed under the United State's Agency for International Development's (USAID's) Maternal and Child Survival Program (MCSP).
- Household visits with couples.

Côte d'Ivoire

- Group discussions with couples (men alone and couples together), using adaptation of evidence-based curriculum developed by Equimundo (Program P/Bandebareho).

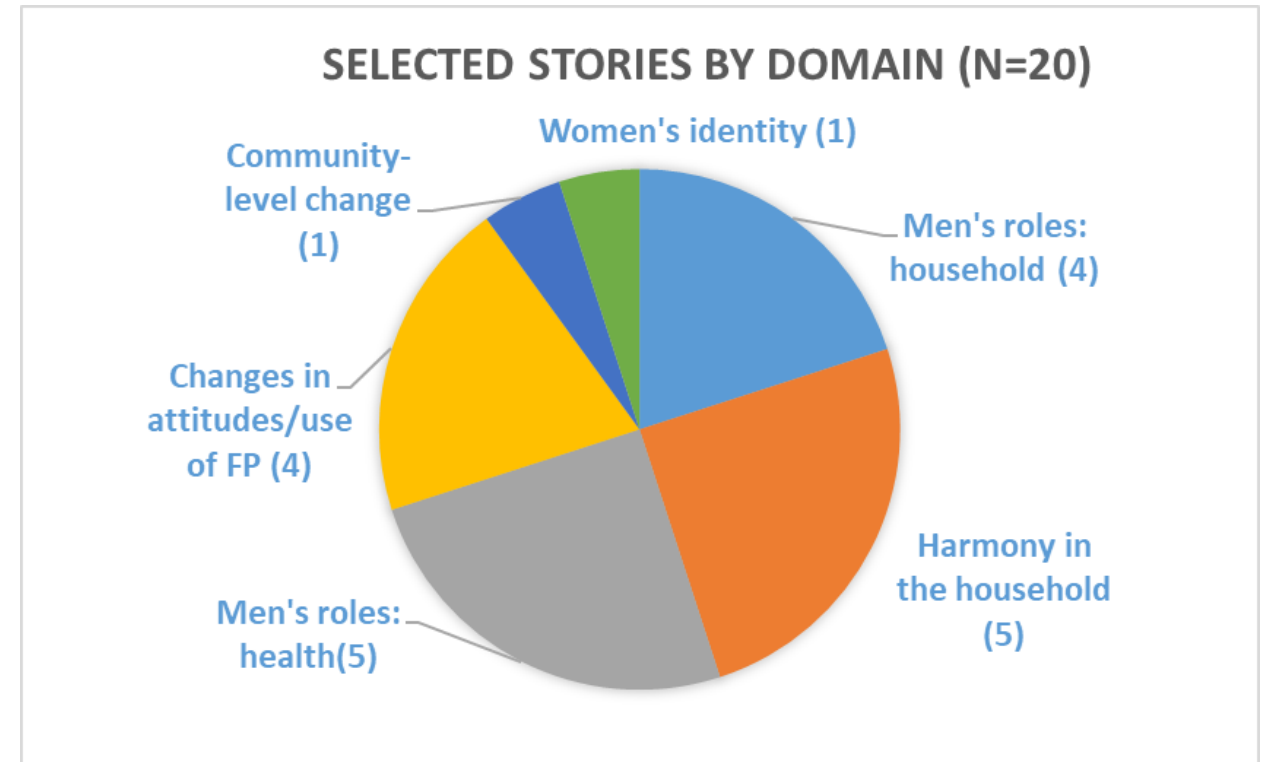
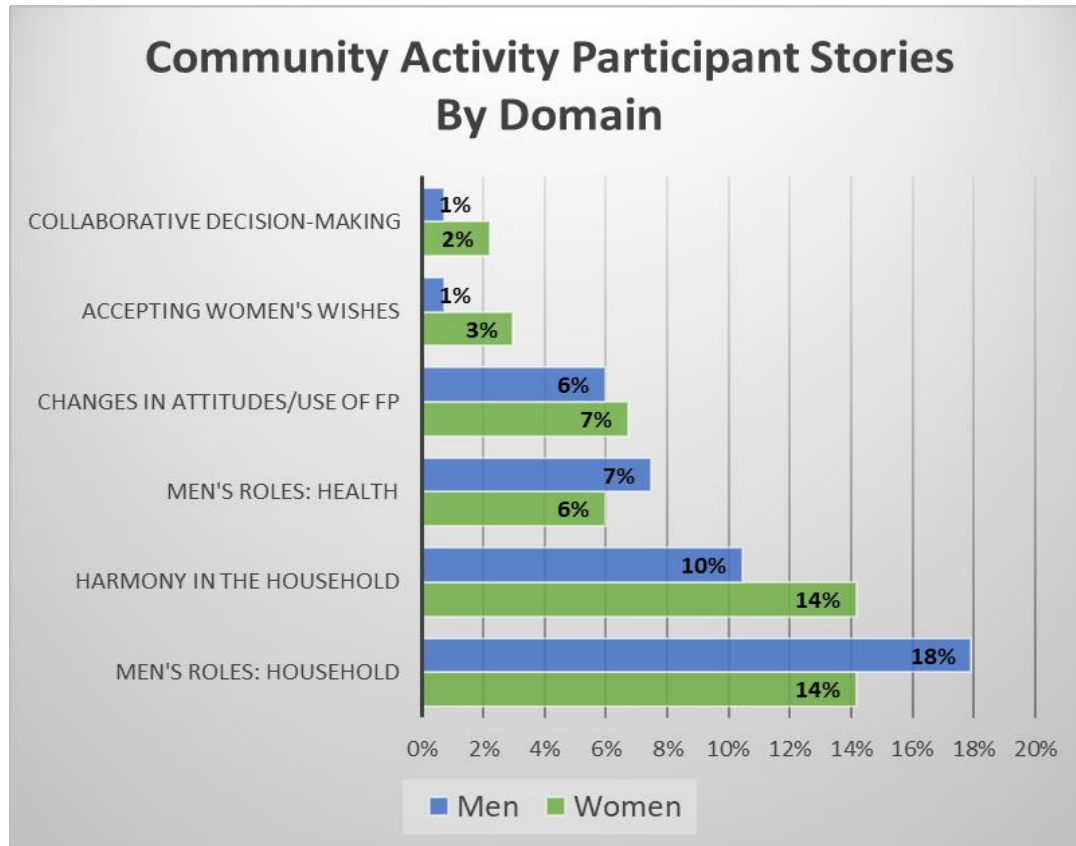
Discussion group content: gender and power; sexual and reproductive health and rights; sharing household responsibilities; being a father; men's participation in MNCH; FP; communication and active listening



Most Significant Change Question

In your opinion, what is the most important change that has occurred in your community regarding the roles of women and men in FP/RH since the couples' activities began?

Story Categorization by Domain



Men's Roles: Household, Health

“When we started work [in the groups], I could see that my husband had changed; he helped me to work. In the past few days I've been sick and when we go to the field, it's monsieur who cuts the wood, he takes the yams and banana bunches on his bike to send to the village. I've been sick for a long time, and my husband wouldn't give me any money to go to the hospital. But the day before yesterday he gave me the money and accompanied me to the hospital for treatment. He stayed at the health center with me for all my treatment. When we go to the fields, on our return he helps me with the cooking. When the children go to school, he gives them lunch and keeps a close eye on them.”

—Female participant, Côte d'Ivoire

How Has This Contributed to Our Research Question?

Global learning question: How can male involvement be implemented in FP/RH care and MNCH/ANC services in a way that meets the needs of men and couples as clients without compromising women's rights and autonomy?

Adapted question for Togo and Côte d'Ivoire: How can men be involved in community-based couple communication activities in a way that promotes positive FP/maternal health outcomes, without compromising women's rights and autonomy?

- Positive attitudes about FP use and increased FP uptake.
- Improved collaboration with household tasks.
- Some reports of collaborative decision-making (increased women's decision-making power, increased men's involvement).
- Some reports of husband agreeing to wife's wishes due to increased knowledge on husband's part (no change in women's decision-making power).
- Many reports of increased communication and increased harmony within the household.

Time for a quick poll!

MOMENTUM Routine Immunization Transformation and Equity

Involving men to boost immunization services in northern Mozambique

Neide Guesela, National SBCC Advisor, Mozambique



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Setting the (global) stage

- Millions of children continue to miss routine vaccinations each year.
- Gender roles and norms dictate mothers being sole caretakers.
- Male involvement could improve and sustain coverage.
- Lack of male involvement contributes to:
 1. Reduced immunization uptake.
 2. Increased dropout.
 3. Untimely commencement and completion of routine child vaccination schedules.
- Demand-generating interventions traditionally target women, resulting in men feeling unwelcome or uncomfortable at child health services.
- Lack of laws, policies, data and training on gender issues in health sector.
- Lack of guidance on engaging men in child rearing and health care.



Gender-related drivers / domains affecting health

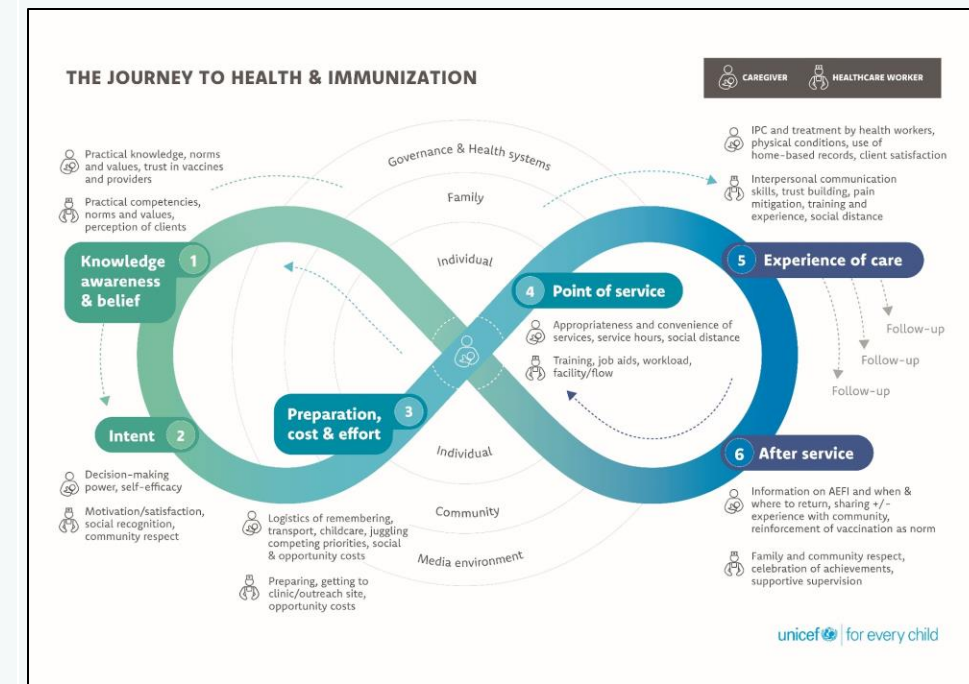


- **Access to assets** such as land, capital, and tools, as well as knowledge, education, information, and social support.
- **Practices and participation**, which mandate different roles for men and women, when and where their activities occur, and determine their capacity to participate in decision-making and economic, political, and social activities.
- **Institutions, laws, and policies**, which influence health, often establishing systems which restrict women's and men's access to quality health services and information, and through laws and policies that influence access to assets and shape beliefs and perceptions.
- **Beliefs and perceptions** about what it means to be a man or woman in a specific context which facilitate or limit access to assets and affect practices and participation. Social norms often mandate roles that influence health status, determine options, or affect safety.

Insights from Zambezia and Nampula provinces, Mozambique

Insights from community hearings on why men are not involved in their **family's immunization journey** and what they think about male involvement to help increase immunization uptake:

- Male involvement considered an *action*—where men take children to the health facility to be vaccinated. Most men are not eager to do so.
 - Not in line with social norms
 - May not feel comfortable in health facility common spaces, which are mostly full of women
 - In general, have more limited health and immunization service experience; possible “fear of the unknown”
- Men are willing to get involved in their children’s immunization “journey” but are not clear on what that actually entails.
- The “immunization journey” requires both demand and supply side considerations.



Messages shared on how men can engage in child immunization

- Provide transportation or money for transportation for the mother to take the child to health facilities. **(ACCESS)**
- Accompany the mother to the health facility, especially if they have to walk long distances or through risky areas. **(ACCESS)**
- Assist with household chores so mother can be freed up to take the child for immunization. **(PRACTICES & PARTICIPATION; TIME USE)**
- Stay at home with the other children when the mother needs to go to the vaccination site. **(PRACTICES & PARTICIPATION)**
- Discuss the importance of vaccination and the vaccination calendar with other men--be an advocate. **(ASSETS/EDUCATION; BELIEFS & PERCEPTIONS)**
- Welcome the opportunity to discuss your family's health and all the things that go into keeping a family healthy. **(PRACTICES & PARTICIPATION; ASSETS/EDUCATION)**

Project Priorities for Engaging Men in Mozambique

- Working with community health workers, the project guarantees demand generation activities for immunization services involve men without diminishing women's agency and autonomy.
- Project works to address the behaviors and beliefs that dictate that women should be solely responsible for child immunization.



MOMENTUM Integrated Health Resilience

Male Engagement Implementation and Experiences in South Sudan

Kenyi Athanasius, Social Behavior Change/Gender
Advisor, South Sudan



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Why Is Male Engagement Important in South Sudan?

Social Norms Assessment Findings

- Men make many of the decisions in the household.
- Not all men and boys are aware of the benefits of antenatal care (ANC), post-partum counseling, etc.
- Taboos around first onset of menses, especially among men and boys toward young girls.
- The concept of "family planning" does not resonate well.

How Is Male Engagement Used to Address Challenges?

- **Male engagement board game – Together We Decide (one for FP, one for MNCH)**
- Menstrual hygiene management (MHM) board game – Together We Decide
- Couples' communication dialogues
- Partnership Defined Quality (PDQ)/ Community Action Cycles (CAC)



Types of Messaging/Focus of Male Engagement Activities

- The board game includes interactive cards to foster discussion of gender norms and dynamics.
- The game highlights the benefits of male engagement in FP/MNCH.
- It also allows participants, through playing the game, to understand the consequences of not involving boys and men in decision-making.

TRUE OR FALSE?



Apart from attending antenatal care visits, a man can support his partner by learning about things they should be doing during the pregnancy to relieve stress and encourage the consumption of healthy foods.

TRUE

A man can learn during the ANC visits how to support and ensure the health of his partner and baby once at home.

Benefits of Male Engagement

- Increased uptake of services such as family planning.
- Improved maternal and child health outcomes.
- Reduction of violence against women.
- Increased economic productivity.
- Improved social cohesion – Together for Each Other (*Sawa le baad*)



Examples of Outcomes of Male Engagement Activities in South Sudan

- The action plan from the **CAC planning** in Magwi (September 2022) included increasing **meaningful engagement of men**, community leaders, and religious leaders as users, innovators, and advocates for FP/RH service in the community.
- During the **male engagement training** in Magwi (May 2023), a chief mentioned that as a result of their couple communication community engagement meetings, **violence against women reduced**.

In a few words, describe something that has resonated or been surprising from the presentations.

On the count of three, enter your response in the chat.

MOMENTUM Safe Surgery in Family Planning and Obstetrics

Engaging Men: Vasectomy and Gender

Roy Jacobstein, Consultant



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2023 Paper: Analysis of Trends in Vasectomy Use Worldwide and in LMICs

- Vasectomy use in 95 countries; > 90% of world's population.
- Eighty-four low and middle-income countries (LMICs): Every LMIC in Africa, Latin America and the Caribbean, and Asia that met criteria.
- Compared use of vasectomy (i.e., male sterilization) with use of tubectomy (i.e., female sterilization).
- Compared country rankings on vasectomy prevalence with United Nations-compiled country rankings on gender inequality.

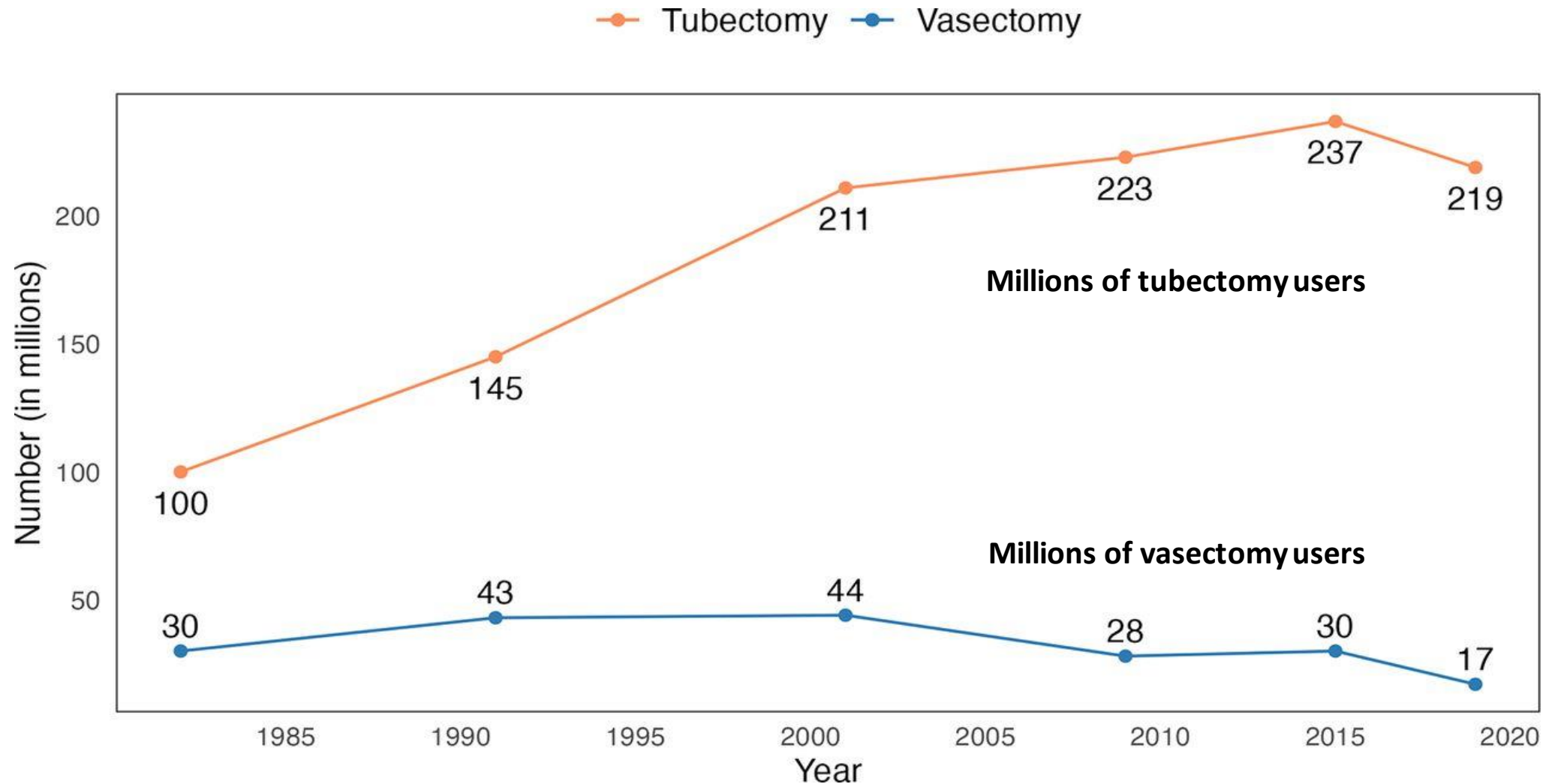
Vasectomy: Background and Context

- One of only two contraceptive methods for men.
- One of only two permanent methods, along with tubectomy.
- Deep-seated myths and misconceptions – men, women, and providers – and provider bias against it is widespread.
- Despite many positive method features, demand for vasectomy has always been low in LMICs.

Key Findings About Vasectomy and Gender Equality

- Number of vasectomy users in the world **declined 61% the past 20 years** – not even half of what it was 40 years ago.
- **Only 20 of 197** countries have vasectomy prevalence of 1% or higher.
- **In almost all LMICs** vasectomy prevalence has always been **negligible**: Only 1 in 1000 women or fewer relying on a partner's vasectomy.
- Countries with the **highest gender equality** are among those countries with the **highest vasectomy prevalence**, and vice versa.

Trends in Vasectomy and Tubectomy Use, 1982-2019



767 million users of contraception globally. Tubectomy most widely used single method.

F:M disparities in permanent method use widened from 3:1 to 13:1, and much greater in LAC and Asia, e.g., 76:1 in India.

Countries With High Vasectomy Prevalence and High Gender Equality: Very High Correspondence

Country	Latest Survey Year	Vasectomy Prevalence	Ranking on Vasectomy Prevalence (among 176 countries)	Ranking on Gender Inequality Index (among 91 countries)
South Korea***	2009	17%	1	5
Australia***	2016	14%	2	8
Bhutan**	2010	13%	3	38
U.S.A.	2019	11%	4	12
New Zealand**	2015	10%	5	10
United Kingdom**	2012	10%	6	9
Belgium*	2010	8%	7	3
Canada*	2006	7%	8	7
Spain***	2018	6%	9	6
Netherlands**	2013	6%	10	2

Recommendations for Vasectomy Programming

- ✓ Foster **vasectomy champions** at all levels—policy, program, provider, community, donor—and **satisfied men willing to discuss vasectomy in their community**.
- ✓ Expand emphasis on **demand-side work**, including focusing on women as well as men, and addressing gender constraints.
- ✓ Harness **mass and social media** channels to increase accurate knowledge of vasectomy, link clients to providers, and ensure quality.
- ✓ Develop a **vasectomy-focused initiative**, perhaps as part of a broader male health/reproductive health project.

Let's discuss!