Key Considerations for Engaging Men in Maternal, Infant, and Young Child Nutrition Programming

A Technical Report for USAID Resilience Food Security Activity Implementing Partners
About USAID Advancing Nutrition

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We wish to express our gratitude to representatives from Resilience Food Security Activity and nutrition implementing organizations who generously shared their experiences with and perspectives on engaging men in nutrition with us.
Overview

Nutrition and caregiving behaviors take place within family systems. Fathers, grandmothers, and other family members influence maternal, infant, and young child nutrition (MIYCN) decisions, behaviors, and outcomes. Despite this influence, MIYCN programs have traditionally focused on mothers. Increasingly, programs are including fathers and grandmothers in activities to improve MIYCN. Engaging key influencers within the family and wider community can increase support for recommended MIYCN behaviors and improve caregiving. As partners and fathers, men can have considerable influence on MIYCN. However, when expanding program activities to engage men, in particular, important considerations are needed to ensure women’s agency and safety.

Growing evidence suggests that engaging men in nutrition is often associated with improved infant and young child feeding, maternal dietary practices, improved couples’ relationships, and increased joint decision-making. It also has the potential to benefit children, female partners, families, and men themselves. Intentionally engaging men through gender transformative approaches—that seek to promote equity and transform gender relations—is important for improving nutrition outcomes as well as increasing women’s agency and it can have long-term positive changes in gendered power dynamics.

Recognizing men’s influence on MIYCN, the Bureau of Humanitarian Assistance (BHA) Resilience Food Security Activity (RFSA) implementing partners have increasingly sought to engage men in nutrition-specific and nutrition-sensitive interventions. However, depending upon the design and implementation of these interventions, efforts to engage men can also lead to risks of harm, including constraining women’s agency, exacerbating existing gender inequities, and increasing gender-based violence (Comrie-Thomson et al. 2021; Mkandawire and Hendriks 2019; Quisumbing et al. 2021). To reduce these risks, implementing partners can apply the key considerations described in this report to intentionally design, implement, and monitor activities to engage men. This technical report results from a review of the evidence and consultation with RFSA implementing partners and is grounded in the principles of “do no harm.”

In this report we present common approaches currently used for engaging men, findings from the literature and key informant interviews about barriers, and the key considerations for the design, implementation, monitoring, and sustainability of male engagement activities to minimize the risk of engagement while ensuring women’s agency and safety.

**Key Messages**

- Engaging men can improve MIYCN but it is not without risk.
- Designing, implementing, and monitoring interventions that engage men should be based on the principles of “do no harm” and focus on preserving and promoting women’s agency and safety.

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**What Does Male Engagement in the Context of MIYCN Mean?**

Male engagement in MIYCN means intentionally including men (individually and with their partners, families, and communities) to actively challenge gender norms, address unequal power dynamics, and meaningfully participate and share in the responsibility of MIYCN behaviors and outcomes.

(Glinski et al. 2018; Healthy Communication Capacity Collaborative 2014; Breakthrough ACTION 2021)
Objective

This report was developed for BHA RFSA implementing partners (e.g., project managers, nutrition advisors, social and behavior change advisors, gender advisors). The objective is to share best practices on safe and effective approaches to engage men in MIYCN while mitigating risk. This report summarizes evidence and learning about engaging men in MIYCN and presents key planning, implementation, and monitoring considerations and highlights potential risks and challenges to anticipate when engaging men.

The learning questions were—

1. What are commonly used approaches and activities for engaging men in MIYCN?
2. What is the evidence from the peer-reviewed literature about engaging men in MIYCN?
3. What are the barriers to engage men effectively and safely in MIYCN and how can risks be mitigated?
4. What are the key design, implementation, monitoring, and sustainability considerations for engaging men in MIYCN according to expert key informants, programmatic evidence, and the peer-reviewed literature?

Methods

For this technical report, USAID Advancing Nutrition conducted key informant interviews with RFSA implementers and advisors and a narrative literature review. For the key informant interviews, we spoke with experts about their experiences advising and implementing RFSA that engaged men in nutrition programming. For the narrative literature review, we reviewed the peer-reviewed literature and programmatic documents to examine approaches to and the impact of engaging men in MIYCN, early child development, and reproductive, maternal, and child health. We triangulated findings from interviews and the literature to answer our learning questions and to identify key considerations and characteristics of promising and effective activities to engage men in MIYCN.

Findings from the Literature Review and Key Informant Interviews

Our findings to each learning question are presented below and they reflect our review of programmatic documents, the peer-reviewed literature, and the perspectives of key informants.

1. What are commonly used approaches and activities for engaging men in MIYCN?

A wide variety of activities are being used to engage men in MIYCN and responsive care. Activities to engage men have been conducted at individual, couple, family, and community levels (Jeong et al. 2023; Martin et al. 2020). Figure 1 shows examples of activities and approaches to engage men at each of these levels and highlights the importance of recognizing men’s different roles. Men can be partners, parents, program participants, and agents of change and they can be engaged in different ways across each level.
Men-Focused Activities

Men’s Groups

Implementing partners shared examples of how they bring men together in groups to learn about nutrition, reflect on their roles as husbands and fathers, and discuss how they can improve their relationship with their partners through improved communication and joint decision-making. Program planners can integrate gender-transformative nutrition activities into existing formal or informal groups that include men (such as farmer field schools, savings and loans groups, and other livelihood groups) or form groups specifically for these activities. One men’s group example is Husbands’ Schools (Institute for Reproductive Health 2019), or Écoles des Maris, which was originally designed to engage men in reproductive health (antenatal care, assisted delivery, and family planning) and promote joint decision-making among couples in Niger. A group of husbands, called model husbands or maris modèles, received training to become change agents in their families and communities. Several key informants described how the topics discussed in Husbands’ Schools have been expanded to include nutrition. Similar gender transformative models are used elsewhere, where husbands of care group or savings and loan group members are invited to join men’s groups to discuss gender equity, nutrition, and health topics in a safe space to reinforce new behaviors. Care groups offer a way to identify men in households with pregnant women, which helps engage men before they become fathers. Rede HOPEM in Mozambique, for example, engages men when their

“For the sake of our male engagement piece, we want men to do more than just be participants in a project. We also want them to be allies for gender equality, to support the gender changes and the transformation that we want to see. We want men to be advocates. We want men to be champions.”

—Key informant
partners are pregnant, and Equimundo’s Program H approach promotes positive masculinity with young men aged 15–24. In Uganda, mentor fathers encourage early child development and violence prevention through the Responsible, Engaged, and Loving (REAL) Fathers Initiative.

Champions

In many countries, programs have trained gender champions (or male champions) to promote gender equity and better relationships to improve nutrition behaviors and outcomes. In practice, gender champions conduct home visits or are linked to care groups. In some settings, gender champion(s) might be men or women or, depending on the village size, there can be one male and one female gender champion. In Senegal, for instance, couples served as gender champions. Evidence shows that fathers value having and serving as role models (Flax et al. 2023; Martin et al. 2015). Program leaders can therefore invite men who are recognized in their communities for performing gender-equitable tasks—such as caring for children, fetching water, or cleaning—to become trained advocates for gender equity and recommended nutrition behaviors. When engaging men, program leaders must ensure that men view their involvement as beneficial to themselves as well as their partners and children.

Couple-Focused Activities

Couple Groups

Several projects bring couples together for group activities to talk about nutrition, health, and relationship strengthening. These activities often include sessions where couples learn together and others when participants are separated into gender-specific or gender-synchronized sessions. One example of a couple’s group is Catholic Relief Services’ SMART Couples (CRS 2017) project (Strengthening Marriages and Relationships through Communication and Planning). Program leaders organize couples into groups for learning sessions and then conduct home visit follow-ups to help couples sustain the behaviors. Experts coach couples on improved communication and joint decision-making around nutrition; maternal and child health; agriculture; water, sanitation, and hygiene; and household finances. Couple-focused activities are relevant in contexts with monogamous relationships but could result in greater household conflict in polygamous contexts if done poorly. Program designers should, therefore, carefully consider and appropriately adapt such activities based on context. Couple activities may also be incorporated into men-focused activities. In Rwanda, the Bandebereho trial (Doyle et al. 2018) implemented fathers groups facilitated by volunteer fathers, which also included several group sessions for couples.

Family-Focused Activities

Home Visits

Home visits often focus on mothers, but several implementing partners include men and other family members (e.g., mothers-in-law) in home visits. Program leaders should ask about women’s preferences for home visits, such as which times they prefer for individual sessions, do they want men to participate in home visits, and how having men present influences women’s communication and interaction. When involving men in home visits, men should receive nutrition recommendations tailored for their individual characteristics, abilities, and

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“Generally, social and behavior change activities engage not just one member of the family but different members, so that when there are household visits, it’s not just with women, they visit with men and grandmothers as well.”

—Key informant

“Generally, social and behavior change activities engage not just one member of the family but different members, so that when there are household visits, it’s not just with women, they visit with men and grandmothers as well.”

—Key informant

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circumstances. If home visits are being used as a strategy to engage men, they should be scheduled when men are most likely to be home and available. Before deciding to conduct home visits with fathers, implementers should listen to women’s preferences and determine how comfortable women are with having men included. In areas with high rates of gender-based violence consulting with women about their perspectives can help minimize risk. It is important to remember to engage with women first. During home visits men also need to be encouraged to reflect on their roles and responsibilities.

**Household Dialogue**

Household conversations that focus on improved communication skills and conflict resolution have been used successfully in nutrition and food security programs (Mukuria et al. 2016; Martin et al. 2020). Similarly, training couples on communication and conflict resolution skills as part of an intervention to address gender inequities has been associated with lower rates of gender-based violence (Gupta et al. 2013). CARE’s [Win-Win gender and agriculture project in Burundi](#) demonstrated that a gender transformative approach that included strengthening couples communication led to improved food and nutrition security, livelihoods, and gender equality. Key informants stressed the importance of providing men, women, and families opportunities to enhance their communication skills and strengthen their relationships. In Burkina Faso, a nutrition-sensitive agriculture program found that improved spousal communication contributed to reductions in wasting (Heckert et al. 2019). Resources for household dialogues include International Rescue Committee’s [EA$E Discussion Series](#) and Mercy Corps’ [Household Dialogue Toolkit](#).

**Community-Focused Activities**

**Community and Religious Leaders**

When men are encouraged to adopt new behaviors, they must also receive support at the community level. RFSA implementing partners can help create an enabling environment by engaging community and religious leaders. In rural northern Nigeria, the [Alive & Thrive Initiative](#) used a layered and sequenced social and behavior change approach to encourage fathers to support complementary feeding and purchase diverse foods for their young children, which was associated with improved complementary feeding practices. Program designers reached fathers through religious leaders, community gatherings, town hall meetings, voice recordings sent to mobile phones, and invitations to participate shared by community health extension workers during home visits (Flax et al. 2022).

**2. What is the evidence from the peer-reviewed literature about engaging men in MIYCN?**

Evidence is growing on the impact of engaging men in MIYCN; reproductive, maternal, newborn, and child health; and early child development. Findings from several studies suggest activities that engage men and women in contextually appropriate, gender-transformative interventions that seek to address related gender inequities can lead to changes in inequitable gender norms and improve health and nutrition outcomes. USAID Advancing Nutrition staff and others have conducted systematic reviews of the peer-reviewed literature and summaries of programmatic experience to synthesize this evidence (see annex table 1). Newer evidence, published after those review articles, is presented in annex table 2. These studies report on a variety of approaches to engage men in nutrition, health, and early child development, and use both gender-accommodating and gender-transformative approaches (see figure 1 above).
In annex table 2, studies evaluated a variety of intervention approaches, including home visits for couples, couple groups, separate mother and father groups, text messaging, mass media, or a combination of approaches. Several of these intervention studies yielded positive results, noting improved women’s nutritional status, and involvement in decisions related to children’s food consumption and nutrition. Women also reported increased support for child feeding and care.

However, not all intervention studies reported improved outcomes and practices. A few studies did not observe a significant improvement in women’s or children’s nutritional status, and some noted negative effects of engaging men—such as decreased women’s agency, limited decision-making power related to child feeding, and other outcomes that contribute to increased gender inequity and violence (Quisumbing et al. 2021; Han et al. 2023). Study authors and key informants emphasize the importance of conducting a gender analysis and formative research that engages all family members to ensure that women’s priorities are reflected when designing interventions (Aubel et al. 2021; Lowery et al. 2022; Martin et al. 2021), as well as the importance of monitoring for unintended negative consequences (Lowery et al. 2022). Authors and key informants noted that increased male engagement can reduce women’s decision-making power in an area (e.g., infant feeding) where women previously had control.

Low participation in activities to engage men in MIYCN was a challenge mentioned by key informants and authors. Implementing partners can use formative research to explore potential opportunities to motivate men to participate in MIYCN activities. There is evidence that men report more harmony and less stress in the home, improved relationships, increased bonding with their children, in addition to improved MIYCN. While findings from several studies suggest that engaging men is associated with improved MICYN behaviors and increased support, additional research is needed to identify which strategies and approaches are most effective and can be implemented in ways that increase women’s agency and decrease risks of harm to women.

3. What are the barriers to engage men effectively and safely in MIYCN and how can risks be mitigated?

Interview participants identified several barriers to effectively engaging men in MIYCN activities that were consistent with the literature. These included potential risks and unintended consequences and barriers to effective implementation. Anticipating these barriers can help prevent and address them. Activities to engage men in nutrition that are poorly designed or implemented have the potential to cause harm, including limiting women’s autonomy and exacerbating existing unequal gender norms (Comrie-Thomson et al. 2021).

Potential Risks

Sexual and Gender-Based Violence

In contexts with high rates of gender-based violence and where such violence is normalized, RFSA implementing partners must prioritize protecting women when engaging men. Program designers should consider if the behaviors being promoted will put women at increased risk of violence, compromise their safety, or limit their autonomy. RFSA implementing partners can implement gender-transformative activities to address gender-based violence and establish process monitoring systems to ensure that male engagement activities do not contribute to exacerbating gender-based violence, making program changes, if needed.
Decreased Women's Autonomy

In many settings, decisions related to how women feed and care for their children are traditionally within women's domain. Engaging men in these areas has the potential to increase support for recommended practices and decrease women's workload, but it can also restrict women's autonomy. For example, if men start telling women how to feed or care for their children, it can reduce women's existing, and often limited, agency to make decisions in this space. Interventions that engage men can reinforce harm because of existing gender inequality and other vulnerabilities by reinforcing inequitable gender norms, particularly those related to caregiving. Including men in domains that were previously women's without addressing power imbalances can negatively affect women's autonomy (Comrie-Thomson et al. 2021).

Potential Stigma and Social Sanctions

Encouraging men to adopt new behaviors that are inconsistent with social and gender norms can result in men being stigmatized by their families and communities. Providing safe spaces and peer support for men as they try to adopt new practices can help men feel comfortable and supported. It is important that activities to engage men in nutrition address multiple levels (individual, community, societal) to create support for new behaviors. Programs that include women and men, but not their broader social networks, can leave intervention participants vulnerable to stigma and lacking support for new practices (Comrie-Thomson et al. 2021).

Implementation Challenges

Organizational Capacity

Key informants emphasized the importance of staff training on gender and opportunities for staff to reflect on their own gender norms. They also noted that training at the start of a project is insufficient; they wanted refresher training and opportunities for continued dialogue, experience sharing, and reflection. In addition, they believed training should be available for new staff members who join a project and did not participate in the original training. Staff members should also be trained to remain aware of an intervention's potential unintended consequences, with a clear reporting process and protocol to address any negative outcomes.

Dedicated Resources

Key informants also described the need for dedicated staff focused on gender activities and integration. Gender is a cross-cutting issue and requires someone to ensure it receives adequate attention in project planning and implementation. For instance, program planners often expect gender to be part of other activities, but do not ensure there are dedicated attention, resources, and funding. RFSA implementing partners should dedicate funds and other resources specifically for gender activities. When planning for activities and allocating resources, implementing partners should remain realistic about what can shift during a project life cycle because normative change takes time.

Maintaining Participation

Key informants acknowledged challenges to maintaining men's participation in nutrition activities. Current literature notes the importance of scheduling activities at times that make it easy for men to
attend and designing activities around men’s motivation. Men also need different communication approaches than women, as their perspectives, motivation, and social norms often differ from their partners’ (Grandner et al. 2022). Several examples of interventions to engage men reported low participation (Flax et al. 2019; Luoto et al. 2021; Rothstein et al. 2023; Garcia et al. 2022). Adapting approaches, as needed, based upon men’s input can help ensure continued participation. Project leaders can adapt activities based on what they learn through monitoring and Collaborating, Learning, and Adapting (CLA) practices.

Figure 2. Interagency Gender Working Group Gender Integration Continuum

Using the Interagency Gender Working Group (IGWG) Gender Integration Continuum (see figure 2) (IGWG 2017) as a guide, approaches and activities to engage men in nutrition can be categorized based upon if and how gender is considered in the design, implementation, and monitoring and evaluation of activities. USAID RFSA implementing partners’ activities that engage men to improve MIYCN behaviors and outcomes should use or move toward gender-transformative programs and policies to create a supportive environment where women have the agency, resources, and support to improve their own nutritional status as well as that of their children. Working toward gender-transformative programs takes time, commitment, and careful planning to understand how best to influence related social, political, and structural factors. Guidance on gender-transformative approaches in nutrition include—

- USAID Advancing Nutrition: Integrating Gender into Nutrition Programs (USAID Advancing Nutrition 2022)
- Food and Agriculture Organization: Compendium of Good Practices of Gender Transformative Approaches for Food Security and Nutrition (FAO, IFAD, and WFP 2020)

Activity Categories

**Gender-unaware** activities and policies are designed without considering gender norms, power dynamics between women and men, or gender’s influence on roles and responsibilities related to nutrition and larger social, economic, or political forces. In other words, gender-unaware activities ignore gender completely.

**Gender-exploitative** activities and policies unintentionally or intentionally reinforce or take advantage of gender inequalities or could use an approach that increases gender inequities. Program leaders should not use a gender-exploitative approach in their activities and projects because it could increase risk to women.

**Gender-accommodating** activities and policies work around existing gender inequities and norms without trying to address or change them.

**Gender-transformative** activities and programs seek to transform gender relations and promote equity by—

- encouraging critical reflection of gender inequities, norms, roles, and dynamics
- identifying and encouraging positive gender norms that promote equity
- promoting the agency of women and marginalized groups
- changing underlying norms, policies, and systemic factors that allow gender inequities to continue.

(PRB 2017)
4. What are the key design, implementation, monitoring, and sustainability considerations for engaging men in MIYCN?

**Key Design Considerations for Engaging Men in Nutrition**

The following considerations can help ensure that activities to engage men in nutrition are safe and effective.

- Engage women and ask them if and how they would like men to be engaged.
  - Particularly in areas with high rates of gender-based violence, it is important to ask women their preferences about how to engage men and if they have particular concerns.
  - Existing data about gender-based violence in your specific context can provide guidance on the feasibility of engaging men in a safe way.
- Provide opportunities for community participation throughout the project life cycle to ensure activities to engage men reflect the context and community priorities.
- Conduct a gender analysis in the first year to understand existing gender norms and inform contextually appropriate activities to engage men.
- Design activities that are grounded in women’s empowerment and promote women’s leadership. Make sure women are protected from harm and activities are designed to minimize risk.
- Leverage what men are already doing. Most men want their wives and children to be healthy and relationships with their partner and children to be positive. Many men already provide some forms of support; consider how this can be expanded.
- Reinforce social and gender norms that encourage men to become supportive and caring partners.
- Acknowledge men’s unique needs. Develop content that is specific to their experiences, beliefs, and motivation as partners, parents, participants, and agents of change.
- Engage the entire family and whole community, including female partners, other family members (particularly grandparents), and community leaders.
- Identify opportunities for integration. If possible, use existing platforms that already engage men, such as community groups and meetings, and integrate nutrition into these activities. Also find opportunities to include men in ongoing nutrition activities, such as including men in home visits by scheduling them when men will be home.

Design activities with sustainability in mind. Plan how gender transformative approaches and related outcomes will continue after a project ends.
Design Considerations

Efforts to engage men in nutrition should follow effective approaches for designing nutrition social and behavior change activities, ensure that male engagement efforts do not impede women’s agency, and be adapted for the context so they are appropriate. Further guidance on quality social and behavior change approaches for nutrition include the USAID Advancing Nutrition publications, Integrating Gender into Nutrition Programs: Program Guide (USAID Advancing Nutrition 2022), Program Guidance on Engaging Family Members (USAID Advancing Nutrition 2020), and New Tools for High-Quality Nutrition Social and Behavior Change Programming.

Gender Analysis

RFSA implementing partners are required to conduct a gender analysis in the first year of any program. Key informants stressed how important this process is for understanding the norms, roles, and relationships in the local context. A gender analysis lets implementing partners examine household dynamics and the roles of men and other family members, while also identifying influencers and how to reach them. Key informants also suggested exploring how men want to be involved in nutrition and what would motivate their participation in nutrition activities. Depending on the context, a gender analysis could include questions about polygamous households, pastoralist communities (where men often may be away from home), and migration and consider how these factors may influence how men are engaged in nutrition. For example, asking if engaging men is appropriate in areas where men are migrating for work and may not be home for long periods of time, or asking members of polygamous households how they would like men to be more involved, how they would like household members to participate, and if they have any concerns about how it could influence household dynamics. The gender analysis needs to be context and program specific and should result in actionable information and align with a program’s theory of change. After completing the gender analysis, implementing partners should share their findings with community members and leaders.

The gender analysis will help implementing partners understand prevailing gender norms and practices around household conflict, mitigation, and escalation. Existing data from previous assessments and research in their geographic areas and a gender analysis can help implementing partners understand the context in which they are working. Gender norms are not static, however, and can change rapidly due to stressors (such as economic instability, climate change, shocks, or conflict) (Glinkski et al. 2018; ODI/UK Aid 2015). For example, during an economic downturn norms related to early marriage may regress or if community leaders no longer accept gender-based violence (GBV) it can change norms around the acceptance of GBV. In addition, men and women experience stressors differently. There is increasing evidence that stressors increase gender-based violence and that women and men have different preferences and capacities to respond to shocks and stressors. As conditions change, stressors increase and risks to women increase;

“Your gender assessment helps you see the focus areas and what you want to do for your male engagement component. Definitely I would also recommend getting to know your context. Don’t just cut and paste the male engagement piece. You need to know how influential they are, the spaces that they’re in, and then use those as your entry points.”
—Key informant

“The balance of power at the household changes. The money empowers the lady. She can now make decisions in the household on what food to buy. She can decide to take her child to the hospital when sick or buy her clothes or pay her school fees. If she makes these decisions alone, the man feels his position is threatened. Somebody else is making decisions, and he feels very uncomfortable. This might lead to a backlash or conflict at the household level, such as interpersonal violence.”
—Key informant
therefore, implementing partners should make risk mitigation an integral part of CLA plans and monitor for negative unintended consequences, particularly those related to women’s agency and safety.

**Participatory Design**

RFSA implementing partners should include mothers, fathers, grandmothers, and other family members when designing activities to engage men in nutrition. Best practices call for exploring the roles of family members and the social and gender norms that influence MIYCN (Aubel et al. 2015; Aubel et al. 2021) and designing activities that engage all influential family members through tailored activities that reflect their roles related to MIYCN. This includes asking women if and how they want men to be involved and if they have any concerns about involving them. In addition, program designers should ask men how they believe they can help improve nutrition in their families (Gopal et al. 2020). Listening to men’s views regarding where, how, and when to provide support can help program designers create effective programs and ensure that men are active participants in program activities.

**Integration Opportunities**

Platforms that already engage men, such as community groups and meetings (e.g., farmer field schools), offer opportunities to integrate nutrition and gender transformative approaches into existing activities. In addition, RFSA implementing partners can use the results of gender analyses and formative research to identify potential opportunities to intentionally engage men in ongoing nutrition activities—such as scheduling home visits and other community activities when men will be available and adapting the content for men. For example, Rede HOPEM (Oxfam 2016) in Mozambique and Catholic Relief Services in Nicaragua (CRS and USAID 2014) used existing community platforms, including sporting events, to promote positive masculinities and recommended care and feeding practices with men.

**Tailored Approaches**

Activities to engage men must focus on men’s unique roles, capacities, influence, and needs, while also highlighting potential benefits men and their families can experience when men become engaged in nutrition. Men have multiple roles; they are program participants, partners, parents, and agents of change. Engaging men using layered, sequenced activities across the multiple levels of the socio-ecological framework can help ensure activities take place within a supportive environment and promote tailored activities that address barriers to engagement at each level. Sustainable and lasting change requires equitable gender norms and attitudes; multiple contact points from multilevel, multicomponent social and behavior change interventions are needed to achieve this level of change. For example, in Northern Nigeria, Alive & Thrive engaged fathers in complementary feeding through home visits, religious services, community meetings, mobile phone messages, and mass media. Figure 1 illustrates the multiple roles men have and the types of activities and approaches that can be used to address each level.

Layering and sequencing of activities can provide these channels and contact points and reinforce and support changes in gender attitudes and behaviors. Approaches should also be tailored to the program context. Table 1 provides examples of how to tailor approaches to engage men. For example, in contexts with polygamous households, couple-focused activities are likely to be inappropriate and could increase conflict within the household. One key informant described using household dialogues or father groups rather than couple-focused activities in polygamous contexts.
<table>
<thead>
<tr>
<th>Examples of Insufficient Approaches for Engaging Men</th>
<th>Strategies to Engage Men More Effectively</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inviting men to participate in home visits and counseling them about the same behaviors as women</td>
<td>Home visits include counseling for men that corresponds to their roles related to MIYCN and shares specific ways they can support recommended behaviors (e.g., instead of telling men their wives should exclusively breastfeed, the focus of activities with men should center on negotiating what men can do to ensure women have time to breastfeed, by reallocating household chores to others).</td>
</tr>
<tr>
<td>Inviting men to cooking demonstrations without addressing the stigma men are likely to experience or how women may feel their role is being taken away</td>
<td>Include cooking demonstrations as part of larger community activities and dialogue about gender norms. Design these activities in consultation with women about the type of support they would like (e.g., in addition to including men in cooking demonstrations, actively discuss and negotiate with men on how they can buy nutrient-dense foods and allocate resources to meet women and children’s needs).</td>
</tr>
<tr>
<td>Conducting fathers’ groups that use the social and behavior change content from women’s care groups</td>
<td>Social and behavior change content encourages men to reflect on gender norms, fatherhood, and their responsibilities related to MIYCN, and to help protect women from being blamed for suboptimal MIYCN behaviors or outcomes (e.g., focus the content on what men can do to support women so women can adopt improved behaviors—time, women’s workload, access to financial resources and diverse foods).</td>
</tr>
</tbody>
</table>
Key Implementation Considerations for Engaging Men in Nutrition

The following considerations can help ensure that activities to engage men in nutrition are safe and effective:

- Train staff and others responsible for intervention or service delivery, provide facilitated opportunities, and support staff to reflect on their own gender attitudes throughout the project life cycle.
- Implement activities for men that promote reflection, dialogue, and skills for improved communication and relationships and that seek to transform harmful gender norms.
- Identify men who support gender equity to serve as role models in their communities.
- Implement activities that engage men in multiple ways—as individuals, in groups of men, and together with women and other family members.

Implementation Considerations

Core Approaches

When implementing gender-transformative activities, program planners should use approaches and activities that encourage critical reflection, dialogue, experience sharing, gender-synchronized activities, and shared responsibility (CRS 2017; ICRW 2018; Lowery et al. 2022; Martin et al. 2021). In addition, program planners should design activities with women’s empowerment at the forefront. This includes consulting women, who are most often the primary beneficiary, about if and how they would like men involved and any concerns they have about engaging men. Facilitated community visioning and consultation can identify concerns women have about involving men in MIYCN.

**Critical reflection.** Provide opportunities for men and women to critically reflect on what it means to be a man or a woman in society and to challenge inequitable gender norms and power imbalances. Ask men to think about what kind of fathers and partners they want to be and think back to their own experiences with their fathers and how this has influenced their thoughts and actions related to fatherhood.

**Dialogue.** Create spaces and opportunities for participants to share their experiences and learn from each other as they try to become more equitable and engaged partners and fathers.

**Experience sharing.** Encourage men and women to talk with others about what they are learning, challenges they have encountered, and ways they have overcome them. This sharing can happen during formal activities with other participants and can be encouraged to share with others in their social network.

**Gender-synchronized activities.** Work intentionally to reach both women and men through sequential or simultaneous complementary activities. Create men- or women-only sessions so participants can talk about sensitive issues that may be uncomfortable to discuss in front of the opposite sex and offer opportunities to develop peer support. Include joint sessions that allow men and women to come together to reflect on and challenge gender roles and power dynamics.

**Shared responsibility.** Design activities that are grounded in women’s empowerment and stress men’s roles and responsibilities related to their families and encourage them to take on a supportive and active role to help alleviate women’s burdens.
Male engagement approaches that are tailored to the local context can increase men’s support for and involvement in recommended care and feeding practices and improve relationships. When developing or adapting content for social and behavior change activities, program leaders must tailor it to the context and ground it in principles of women’s empowerment. Several implementing partners described using a rights-based\(^1\) focus to ground their activities and emphasize changing gender norms, agency, relationships, and related structures.

**Gender Norms**

When engaging men in nutrition, implementing partners should create opportunities for men to participate in dialogue, experience sharing, and critical reflection related to gender norms and how they affect their families’ health and well-being. Several gender-transformative dialogue-based curricula (Bandebereho; International Rescue Committee’s EA$E Discussion Series) are available that promote nutrition and reproductive, maternal, newborn, and child health.

**Healthy Relationships**

Evidence from the gray and peer-reviewed literature demonstrates that male engagement activities can improve couple and family relationships (Thuita et al. 2021; Matare et al. 2019; Martin et al. 2021). While healthy relationships are not necessarily a nutrition outcome, activities that focus on improving couples’ relationships are essential. Women who receive more support report improved MIYCN practices (Allotey et al. 2022a). Men also benefit from improved relationships and harmonious households.

Activities to strengthen relationships promote communication skills, joint decision-making, planning and budgeting, and conflict resolution strategies. One example is the Stepping Stones (Gordon et al. 2017) a social norms change training package developed by Salamander Trust.

**Women’s Workload Reduction**

Women are overwhelmingly responsible for unpaid care, and their workloads related to household, agriculture, and paid work responsibilities can make it challenging for them to practice recommended nutrition behaviors. Implementing partners talked about giving men opportunities to examine issues related to gender, power imbalances, and workload sharing with their spouses. This engagement of men can help reduce women’s workloads, but also increase paternal understanding of the value of the unpaid labor women often do around the home. Several examples exist of activities that engage men in caregiving, cooking, and domestic chores and to promote positive masculinity. In Mozambique, Rede HOPEM used its Men in the Kitchen program to teach men how to cook. Several implementing partners also described inviting men to participate in cooking demonstrations where men participate in cooking and encourage discussion, experience sharing, and critical reflection around gender norms related to MIYCN and caregiving. Community cooking demonstrations can also help normalize men cooking. Men’s engagement should be a contribution to the household, and not put women at increased risk. The box below offers suggestions for ways men can be actively involved as partners, parents, and agents of change.

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\(^1\) A rights-based approach is grounded in human rights standards, promotes and protects human rights, and reflects values related to equity and inclusion. It includes examining inequities and addressing discrimination and power imbalance that can result in groups of people being excluded. (UN Sustainable Development Group n.d.).
**Examples of Recommended Practices**

The following are examples of recommended actions men can take to support MIYCN that have been found to be acceptable when testing them with men during trials of improved practices in several countries (Matare et al. 2019; Martin et al. 2021; Martin et al. 2017).

- Ask your wife what help or support she needs and provide the help she asks for.
- Provide a variety of foods to pregnant and lactating women and children six months and older.
- Do other chores, cook, and care for older children so your wife has time for infant and young child care and feeding.
- Help soothe a crying infant without giving foods and liquids other than breastmilk before six months.
- Prepare food and feed complementary foods to children six months and older.
- Help care for children by listening to them, talking and singing to them, and giving them chances to play.
- During pregnancy, encourage and remind your wife to take micronutrient supplements.
- Talk with others in your family about these new behaviors and why they are important to your family.

**Key Monitoring Considerations for Engaging Men in Nutrition**

The following considerations can help ensure that activities to engage men in nutrition are more likely to be safe and effective:

- Monitor the experiences of women and men participating in project activities, with a particular focus on women’s autonomy, gender norms, decision-making, and gender-based violence.
- Incorporate principles of CLA into all activities that engage men.
- Ensure that programs use evidence to adapt activities so they are appropriate throughout the project life cycle.
- Include women and men when collecting data to understand their unique experiences.

**Monitoring Considerations**

In addition to designing intentional male engagement activities based on the results of gender analyses and formative research, it is important to monitor implementation fidelity and the experiences of women and men, with a particular focus on women’s autonomy, gender norms, and decision-making (Comrie-Thomson 2021) and acknowledge the potential for unintended negative consequences that could cause harm. Regularly bringing together group facilitators, gender champions, and others who are delivering activities with men to discuss their experiences and collaboratively solve problems can provide a forum for identifying problems that may not be included in routine monitoring activities. It is
also important to evaluate how engaging men influences project outcomes. Implementing partners should collect data from men and women about men’s participation in project activities and changes in men’s attitudes and behaviors. Collecting process indicators helps program designers understand project outcomes. In addition, implementing partners should consider assessing male engagement during mid-term evaluations. Interviewees suggested linking indicators to the outcomes of a gender analysis. Others have created custom indicators related to gender, such as CARE’s Gender marker and Measuring Gender Transformative Change (Hillenbrand et al. 2015).

Collaborating, Learning, and Adapting

Through intentional and systematic CLA practices, implementing partners can adapt and improve programs while they are being implemented. Key informants described approaches they used for in-program adaptation, such as conducting pause-and-reflect sessions every two months to identify aspects of program implementation that needed improvement. Community consultations throughout a project life cycle can create a platform for CLA and provide opportunities to anticipate change. Implementing partners should regularly consult women about their experiences with activities that engage men to ensure programs are meeting the intended outcomes. The Amalima project in western Zimbabwe offers one example of using CLA to engage men to improve women’s and children’s health.

Sustainability and Scale

Sustainable and lasting change means transforming norms and beliefs, which requires multiple contact points and channels of communication and connection (individual, family, community, health facility, and societal). Implementing partners should plan for sustainability from the start of project activities. Sustainability refers to both the maintenance of activities to engage men and the endurance of changes in gender norms, related behaviors, and outcomes. Integrating male engagement activities into existing structures and groups can help ensure that activities continue after a project ends. For example, implementing partners shared successes they have had working closely with government partners to adopt activities and content. Regularly bringing group facilitators, gender champions, and activity leaders together to discuss their experiences and collaboratively solve problems or challenges can help keep everyone motivated. The following factors have been identified as essential for sustaining nutrition and food security project benefits: (1) resources, (2) managerial and technical capacity, (3) implementers’ and participants’ motivation, and (4) links to government or other organizations (Rogers et al. 2015). In addition to changes in MIYCN behaviors, couples often report improved communication and increased harmony in their homes after participating in gender transformative activities. These improvements can motivate men and families to sustain changes in behavior. In the Agricultural Support Programme implemented in Zambia (Farnsworth and Munachonga 2010), a facilitated household dialogue approach was implemented with farming households to encourage men and their families to discuss farming, food production, food security, and nutrition needs. Following these facilitated household discussions, men
reported greater harmony with their wives and children in managing household resources and improving their food security and livelihood conditions. Harmony at the household level was something men noted was an important motivator to continue this type of dialogue. Keep in mind that sustainability can be contingent on the context; if conditions become unfavorable it can be difficult for families to sustain change and they may revert to earlier attitudes and behaviors.

**Future Directions**

As noted earlier, activities that engage men in nutrition must ensure women’s empowerment, and program implementers should include approaches to examine potential unintended consequences in routine project monitoring. A review of the literature and interviews with program implementers showed growing evidence about the positive impact of engaging men, but more evidence is needed to identify which activities and approaches are most effective, and how best to implement them. Efforts to engage men must also include family members and the broader community who are highly influential in MICYN behaviors and outcomes. Changing gender norms so men participate in care and feeding practices requires support from other family members, particularly grandmothers and the wider community. Male engagement, when done thoughtfully and carefully, can play an important role in improving MIYCN outcomes and contribute to important changes in women’s agency, empowerment, and mental and physical health, as well as improve couple’s relationships and increase harmony in the home. Activities that engage men must be based on gender analyses, formative research, and community participation, and be part of larger efforts to improve MIYCN that include all key influencers, complementary activities for women, and ensure women’s agency and safety.

Intentionally engaging men in nutrition can lead to fathers who—

- Actively participate in promoting and protecting their partners’ and children’s nutrition, health, and well-being
- Feel emotionally connected to their children and partners and provide related emotional, tangible, and informational support
- Share responsibility with their partners for caregiving and household tasks
- Make decisions together with their partners and support their partners’ autonomous decision-making
- Resolve conflicts in a constructive and peaceful way and contribute to caring and respectful family relationships

Source: (WHO and UNICEF 2022; Plan International and Promundo 2021)
Resources

Tools and Manuals


Male Engagement and Gender-Transformative Approaches

References


### Annex: Summary of Evidence

#### Annex Table 1. Review and Summary Articles about Engaging Men and Families in Nutrition, Reproductive, Maternal, Newborn, and Child Health and Development

<table>
<thead>
<tr>
<th>Review Objective</th>
<th>Key Findings and Recommendations</th>
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<tr>
<td><strong>Reviews and Summaries Focused on Engaging Men in Maternal, Infant, and Young Child Nutrition</strong></td>
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<td><strong>Aubel et al. 2021. “A family systems approach to promote maternal, child and adolescent nutrition.”</strong></td>
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</table>
| Introduce a [special journal supplement](#) summarizing 11 articles that examined the role and influence of family members (frequently fathers) and interventions that engaged family members in maternal, child, or adolescent nutrition. | - Presents the benefits of using a family systems approach and not only a nuclear family model to promote nutrition.  
- Formative research is needed to explore family systems.  
- It is important to engage men in ways that are culturally appropriate and reflect women’s perspectives and community dialogue.  
- Future interventions can be improved by using systems thinking and recognizing individuals are part of family and community systems. |
| **Lowery et al. 2022. “Experiences engaging family members in maternal, child, and adolescent nutrition: a survey of global health professionals.”** |
| Document 183 global health professionals’ experiences engaging family members in nutrition activities and their perceived barriers, facilitators, and recommendations for nutrition activities that engage family members. | - Conducting formative research with all members of a family system and using participatory processes throughout a project’s life cycle showed benefits.  
- Engaging families supported improved behaviors, sustainability, and community ownership.  
- Interviewees described positive and negative unintended consequences from engaging men and concerns about the potential for women’s discomfort, decreased autonomy, and (less commonly) violence. |
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<tr>
<th>Martin et al. 2020. “Mixed-methods systematic review of behavioral interventions in low- and middle-income countries to increase family support for maternal, infant, and young child nutrition during the first 1000 days.”</th>
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</table>
| Examine the impact of behavioral interventions to engage family members, such as fathers and grandmothers, in MIYCN. Review 25 studies (16 with quantitative and 13 with qualitative data). | • Most quantitative studies engaged fathers and focused on breastfeeding outcomes, finding positive impacts on exclusive breastfeeding rates and family members' knowledge and support.  
• The few quantitative studies on complementary feeding and maternal nutrition suggested positive benefits.  
• Qualitative studies reported improved relationships and nutrition behaviors and challenges due to social and gender norms. |

<table>
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<tr>
<th>Martin et al. 2021. “Engaging family members in maternal, infant and young child nutrition activities in low- and middle-income countries: A systematic scoping review.”</th>
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</table>
| Review 87 articles from 63 studies that implemented social and behavior change interventions to engage family members in maternal and child nutrition in low- and middle-income countries. | • Studies used a variety of activities to engage fathers, grandmothers, and other family members, including facility, community-based, individual or group-based interventions, community mobilization, and mass media and digital health. Activities reached mothers and family members together or separately.  
• Most interventions were in the health sector; rare exceptions included nutrition-sensitive agriculture, social protection, early child development, and community development interventions.  
• Most studies did not address family communication or dynamics, decision-making, or gender norms.  
• Studies noted the importance of formative research or theories informing intervention design. |

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| Describe and review strategies to engage men in exclusive breastfeeding promotion across 20 low- and middle-income countries. Categorize USAID Child Survival and Health Grants into one of three categories for intensity of male engagement: none, low, and high. Test the association between intervention intensity and changes in exclusive breastfeeding. | • The studies showed no clear pattern between intensity of activities engaging men and changes in exclusive breastfeeding.  
• A better understanding of how gender norms influence male involvement in infant feeding is needed. Projects should not assume male engagement would be appropriate or effective everywhere.  
• Most projects did not conduct formative research. Findings highlight the
<table>
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<th>Studies</th>
<th>Key Considerations</th>
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| **Comrie-Thomson et al. 2021**. “How do women, men, and health providers perceive interventions to influence men’s engagement in maternal and newborn health? A qualitative evidence synthesis.” | - Interventions that engage men in maternal and newborn health can improve the quality of couple relationships and bonding between fathers and newborns.  
- Poorly designed and implemented activities that engage men in maternal and newborn health can increase the risk of harm, such as increasing gender inequity, limiting access to services, or disrupting caregiving. These risks can be managed through careful design, implementation, and monitoring.  
- Social and peer networks influence the adoption of more gender-equitable behaviors, and family relationships influence how men respond to interventions.  
- Interventions should be gender-transformative to reduce the risk of harm. |
| **Dickin et al. 2021. “Exploring the influence of social norms on complementary feeding: A scoping review of observational, intervention, and effectiveness studies.”** | - Programs used community engagement and media interventions to address social and gender norms.  
- Evaluations of norms-focused interventions reported improved feeding practices, but few assessed impacts on norms.  
- Social and gender norms influence “who” feeds children or how children are fed through resource, food provision, and time allocation. |
Gender norms affect women's workload, access to resources, and time to prepare foods and feed children.

Gender norms influence intrahousehold food allocation of food, which influences the availability of foods for young children.

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<tr>
<td>Identify intervention studies in low- and middle-income countries that engaged men to improve nurturing care for children less than five years of age. Review 44 studies from 33 interventions.</td>
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<tr>
<td>Most interventions invited fathers to participate alongside their female partners.</td>
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<td>Community-based peer groups were the most common type of intervention. It was common for programs to use the same structure for men as they used for women without adaptation or tailoring.</td>
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<td>Intervention materials largely focused on child health and nutrition and couples’ relationships.</td>
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<td>Factors that encouraged success included—</td>
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<tr>
<td>— Provide flexible scheduling.</td>
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<td>— Engage community members and use participatory approaches.</td>
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<td>— Integrate with existing platforms.</td>
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<tr>
<td>— Use formative research with fathers for program design.</td>
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<tr>
<td>— Create opportunities for gender-specific spaces to benefit men and women (especially in setting with inequitable power dynamics).</td>
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<tr>
<td>— Engage fathers early, starting in the antenatal period.</td>
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## Annex Table 2. Key Individual Studies about Interventions that Engaged Men in Maternal, Infant, and Young Child Nutrition, Health, and Caregiving

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Participants, Study Design</th>
<th>Outcomes</th>
</tr>
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</table>
| **Bangladesh: Quisumbing. 2021. “Designing for empowerment impact in agricultural development projects: Experimental evidence from the Agriculture, Nutrition, and Gender Linkages (ANGeL) project in Bangladesh.”** | ANGeL was implemented by the Government of Bangladesh and included agricultural training (A), nutrition behavior change communication (N), and gender sensitization (G) trainings delivered to husbands and wives together (during 17–44 sessions). Cluster-randomized controlled trial with four intervention arms (A, N, AN, ANG) and one control arm. | • ANGeL found that agriculture training can improve production diversity, which can improve diet quality, but diet improvements are greater when combined with nutrition.  
• Adding gender sensitization to the agriculture and nutrition intervention did not improve production or diet outcomes.  
• All intervention arms increased women’s empowerment scores and empowerment status, with no evidence of unintended impacts on workloads.  
• Evidence around the impact on intimate partner violence is unclear. ANG showed weakly significant increases in emotional and physical intimate partner violence compared to AN groups.  
Related article  
**Burkina Faso: Moore et al. 2023. “Sustainability and scalability of egg consumption in Burkina Faso for infant and young child feeding.”**

| The “Un Oeuf” intervention provided chickens, nutrition and agriculture training, counseling, and print materials created a song and engaged community leaders as champions. Husbands were invited and encouraged to attend integrated nutrition and agriculture trainings with their wives. | Focus group discussions with cluster-randomized trial participants, which had three arms: chickens and behavior change communication, behavior change communication only, and control. | • When mothers received the “Un Oeuf” intervention, significant increases were seen in both egg consumption and improvements in child growth outcomes.  
• During focus group discussions, women highlighted how support from their husbands helped them feed their children eggs.  
• Husbands purchased chickens, built hen houses, helped care for the chickens, and gave eggs to children to help improve child egg consumption and dietary diversity.  

Related articles:  
• Stark et al. 2021. “The Un Oeuf study: Design, methods and baseline data from a cluster randomised controlled trial to increase child egg consumption in Burkina Faso.” |


| This study looked at combinations of mother groups, food vouchers, and father groups meetings. Father groups included information about diet diversity, child nutrition, fathers’ role in childcare, shared division of household labor, and gender-equal decision-making. | Multi-arm, cluster randomized controlled trial (cRCT) with 806 mother-child dyads and 510 fathers. | • Adding father groups to mother groups (either with or without food vouchers) did not lead to larger improvements in child diet outcomes.  
• Fathers in the behavior change groups were encouraged to be more involved in child feeding practices, which resulted in a reduced maternal autonomy in decision-making in the sphere of child feeding. |
<table>
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<tr>
<th>Ethiopia: Tsegaye et al. 2022. “Theory-based nutrition education intervention through male involvement improves the dietary diversity practice and nutritional status of pregnant women in rural Illu Aba Bor Zone, Southwest Ethiopia: A quasi-experimental study.”</th>
</tr>
</thead>
</table>
| Nutrition education through groups and home visits was offered to couples (pregnant women and their husbands) and to pregnant women alone. | Pre and post-test quasi-experimental study (n=377) | • Women’s mean dietary diversity scores differed significantly between the couples group, women-only groups, and the comparison group; women in the couples group and women-only group were more likely to eat a diverse diet than the comparison group.  
• At the end of the intervention, the nutritional status of the women in the couples group improved significantly compared to the comparison group. |

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| Peer-facilitated father and grandmother support groups used a gender-transformative approach to promote infant and young child feeding, increase support, and improve relationships. | Eighteen focus group discussions with participants from quasi-experimental study | • Fathers and grandmothers valued their groups. Fathers described improved relationships with their spouses, increased involvement in child care and feeding, and increased help with household tasks.  
• The support groups promoted active participation, critical reflection, and joint problem-solving, which helped build cohesion among group members.  
| Related articles: |
| • Martin et al. 2015. “What motivates maternal and child nutrition peer educators? Experiences of fathers and grandmothers in western Kenya.” |

|---|
| This study engaged mothers and fathers through community meetings, religious services, home visits from community health extension workers, mobile | Cross-sectional population-based surveys with fathers and mothers with a child aged 6–23 months; (n=495) | • There were no changes in mean child dietary diversity scores between baseline and endline, but children’s consumption of fish and eggs was significantly higher at endline compared with baseline.  
• A higher percentage of children at endline compared with baseline had minimum meal frequency and minimum acceptable diet. |
| Study included community health extension officers and “model fathers” who facilitated men’s groups, as well as weekly text messages, megaphone blasts, leaflets, and posters. | Pre- and post-evaluation design and focus group discussions with participants and interviews with group facilitators; (n=149 fathers) | • The odds of children consuming animal source foods two or more times in the previous week increased from baseline to endline, as did the odds of consuming milk, eggs, and beef, but not fish.  
• At endline, fathers had higher levels of support for children consuming animal source foods and increased joint decision-making about how to use home-produced milk. | Related article:  
• Farnworth et al. 2023. “Gender roles and masculinities in leveraging milk for household nutrition: Evidence from two districts in Rwanda.” |

| Rwanda: Flax et al. 2023. “Engaging fathers to support child nutrition increases frequency of children’s animal source food consumption in Rwanda.” |  |  |  |

| Tanzania: Galvin et al. 2023. “Effects of engaging fathers and bundling nutrition and parenting interventions on household gender equality and women’s empowerment in rural Tanzania: Results from EFFECTS, a five-arm cluster-randomized controlled trial.” | Community health workers delivered a gender-transformative behavior change program to mothers or couples during group and home visits comparing nutrition-only | Cluster-randomized 2 × 2 factorial trial plus control including mothers (n=815) and fathers (n=733) of children aged 18 months | • Compared to a nutrition intervention engaging only mothers, a gender-transformative approach to engaging fathers and couples (promoting positive fatherhood and equitable intimate partner relationships) and the inclusion of parenting sessions focused on responsive caregiving, positive discipline, play, and communication contributed to gender equity and women’s empowerment.  
• The study observed the greatest benefits to women’s agency and women’s |

Related articles:  
• Allotey et al. 2022b. “Maternal and paternal involvement in complementary feeding in Kaduna State, Nigeria: The continuum of gender roles in urban and rural settings.”  
• Schnefke et al. 2023. “Attitudes, beliefs and social norms regarding infant and young child feeding among Nigerian mothers, fathers and grandmothers across time.”
<table>
<thead>
<tr>
<th>Interventions</th>
<th>Tanzania: Rothstein et al. 2023. “Engaging men in maternal, infant and young child nutrition in rural Tanzania: Outcomes from a cluster randomized control trial and qualitative study.”</th>
<th>Participation was a challenge, as many men thought that nutrition and health topics were a woman’s responsibility and men prioritized income-generating activities over participating in group discussions.</th>
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<tr>
<td>Bundling of gender-transformative nutrition and parenting interventions.</td>
<td>This study focused on behavior change with four intervention arms: interpersonal communication (IPC), short messaging service (SMS), combination of both interventions (SMS + IPC); and standard of care (control).</td>
<td>Men’s nutrition knowledge improved significantly more among those enrolled in a combined intervention strategy leveraging both traditional IPC and an SMS text-messaging intervention, as compared with those receiving either strategy alone.</td>
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<tr>
<td>Dietary diversity when couple engagement and bundling of activities were combined.</td>
<td>2 × 2 factorial, cRCT (n=1,442) of mothers and fathers with children less than 12 months old</td>
<td>Participation was a challenge, as many men thought that nutrition and health topics were a woman’s responsibility and men prioritized income-generating activities over participating in group discussions.</td>
</tr>
<tr>
<td>Related article:</td>
<td>Rothstein et al. 2021. “Assessing the challenges to women’s access and implementation of text messages for nutrition behaviour change in rural Tanzania.”</td>
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### Individual Studies that Engaged Men in Reproductive, Maternal, Newborn, and Child Health and Early Child Development

<table>
<thead>
<tr>
<th>Kenya: Garcia et al. 2022. “Father involvement and early child development in a low-resource setting.”</th>
<th>Father support was associated with maternal-reported child feeding practices and shared decision-making. The results from the trial (see Luoto et al. below) reported fathers’ greater interpersonal support to mothers and participation in shared household decision-making were positively associated with child development, but no association between fathers engaging directly with children and children’s outcomes.</th>
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<tr>
<td>This study was an evaluation of the Msingi Bora responsive parenting intervention with group sessions and home visits. Fathers were invited to attend sessions with mothers and there were fathers-only sessions with similar content.</td>
<td>Father support was associated with maternal-reported child feeding practices and shared decision-making. The results from the trial (see Luoto et al. below) reported fathers’ greater interpersonal support to mothers and participation in shared household decision-making were positively associated with child development, but no association between fathers engaging directly with children and children’s outcomes.</td>
</tr>
<tr>
<td>Secondary analysis of data from a multi-arm, cluster-randomized community effectiveness trial; mothers and fathers of children aged 6–24 months</td>
<td>Father support was associated with maternal-reported child feeding practices and shared decision-making. The results from the trial (see Luoto et al. below) reported fathers’ greater interpersonal support to mothers and participation in shared household decision-making were positively associated with child development, but no association between fathers engaging directly with children and children’s outcomes.</td>
</tr>
<tr>
<td>The authors note low father participation rates and the importance of using tailored content for mothers and fathers based on an understanding of gender norms.</td>
<td>Father support was associated with maternal-reported child feeding practices and shared decision-making. The results from the trial (see Luoto et al. below) reported fathers’ greater interpersonal support to mothers and participation in shared household decision-making were positively associated with child development, but no association between fathers engaging directly with children and children’s outcomes.</td>
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Key Considerations for Engaging Men in Maternal, Infant, and Young Child Nutrition Programming | 32
| The gender-transformative Bandebereho couples’ intervention engaged men to improve reproductive, maternal, newborn, and child health and reduce violence through peer educator–facilitated sessions with men and their partners. | Follow-up rounds from randomized control trial with 1,123 men and 1,162 women with children under five years old | Through structural equation models, several mechanisms for the intervention effects were identified, including positive couple dynamics (e.g., emotional closeness, increased communication, and men’s gender-equitable attitudes).  

- The results highlight the importance of multiple components and pathways that lead to an intervention’s impact and suggest that the positive outcomes are the result of the holistic intervention. |

**Rwanda: Levto et al. 2022. “Improved Relationship Quality, Equitable Gender Attitudes, and Reduced Alcohol Abuse as Key Mechanisms to Reduce Intimate Partner Violence in the Bandebereho Couples’ Randomized Trial in Rwanda.”**

Related articles and resources:  
- Doyle et al. 2018. “Gender-transformative Bandebereho couples’ intervention to promote male engagement in reproductive and maternal health and violence prevention in Rwanda: Findings from a randomized controlled trial.”  
- Doyle et al. 2014. “Transforming gender roles in domestic and caregiving work: preliminary findings from engaging fathers in maternal, newborn, and child health in Rwanda.”  