

INTERNATIONAL MEN & GENDER EQUALITY SURVEY (IMAGES)

A GLOBAL REPORT
IN 15 HEADLINES



IMAGES International
Men and Gender
Equality Survey

Acknowledgements

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INTRODUCTION

The International Men and Gender Equality Survey

WHERE ARE MEN ON GENDER EQUALITY?

More than 25 years since the landmark World Conference on Women in Beijing and the International Conference on Population and Development in Cairo, the world is further from achieving gender equality than it should be. Global data tracking progress on Sustainable Development Goal 5 show us that only 57 percent of women report making their own decisions about sexual and reproductive health and rights, with only three of every four women able to say no to sex – an essential dimension of bodily autonomy – and deciding about their own health care.¹ Contraceptive methods used by men or that require their cooperation make up only 25 percent of global contraceptive use, a rate virtually unchanged in the past few decades.²

Globally, women perform three to ten times as much unpaid care and domestic work³ as men.⁴ They also make up 70 percent of the global paid care workforce but represent only 25 percent of senior roles in that system⁵. At the current rate of change, the world is at least 91 years away from achieving equality in unpaid care work between men and women,⁶ as the traditional gendered division of tasks between paid work and reproductive labor persists. Women's political participation – a key indicator of women's full equality – has also stalled. As of March 2022, women constituted only 26 percent of parliamentarians globally.⁷ Additionally, the World Health Organization estimates that between 24 and 30 percent of women have experienced some form of violence perpetrated by a man, most often a male partner, with little evidence of decline in recent

decades.⁸ Data from 142 studies in 44 countries point to an alarming increase in men's violence against women during COVID-19.⁹

Behind all of these trends is the ongoing inequitable power, privilege, and gender norms related to men and masculinities. Indeed, women's economic, social, and political inequality is inequality relative to men, whether it be men who hold political and economic power or men in their households and intimate lives. As such, the need for policies to support changing masculinities and men's attitudes and behaviors is as urgent as ever. Furthermore, evidence shows that men and boys' lives are also shaped by the gendered violence they experience in their homes, schools, communities, and male peer groups. And numerous studies have affirmed how men's health and well-being are negatively affected by restrictive norms related to masculinity.¹⁰

In the past two years of COVID-19 and the resulting global economic decline, the progress toward full equality for women and girls has been sharply set back.¹¹ COVID-19 lockdowns have also thrown care inequalities into stark relief. Women have continued to do the lion's share of care work around the world under the pandemic, and the increase in unpaid care work – combined with a surge in domestic violence, as well as job losses and economic stress – has meant added strain on mental health, particularly among women.¹²

In this context, where progress has stalled or even reversed, it is imperative to ask: Where are men on gender equality? What are their attitudes and day-to-day lived experiences? Are men buying into or resisting the idea of gender equality? How are these issues

similar or different by country and cultural setting? How are men's own lives affected by salient norms related to masculinities and other factors that shape their lived experiences? And importantly, how can the evidence that answers these questions be used to drive progress toward more equitable, caring, and nonviolent versions of manhood for the benefit of all? These are questions that the International Men and Gender Equality Survey (IMAGES) global data set can begin to answer.

WHAT IS IMAGES, AND WHY IS IT IMPORTANT?

Led and created by Equimundo (previously Promundo-US, in partnership with Instituto Promundo in Brazil) and the International Center for Research on Women, IMAGES is one of the most comprehensive studies ever to explore men's practices and attitudes related to gender equality alongside women's. Using a wide variety of measures, IMAGES questionnaires investigate gender-based violence, health and health-related practices, household division of labor, men's participation in caregiving and as fathers, men's and women's attitudes about gender and gender-related policies, transactional sex, men's reports of criminal behavior, and quality of life. Details on the IMAGES surveys are presented in Appendix A.

The IMAGES questionnaire incorporates items from existing survey instruments on gender, quality of life, childhood antecedents of violence (including observing gender-based violence), health, sexuality, family gender dynamics, and fatherhood, as well as new items created specifically for the survey. It builds on the Gender Equality and Quality of Life Survey (GEQ Survey) first fielded in Norway, as well as widely used instruments such as the Gender Equitable Men (GEM) Scale and standardized questions from the multicountry surveys on violence against women developed in partnership with the World Health Organization. Wherever quantitative data collection and analysis have occurred using the IMAGES survey, research partners also have conducted

THE OVERARCHING GOAL OF IMAGES IS TO BUILD UNDERSTANDING OF MEN'S AND WOMEN'S PRACTICES AND ATTITUDES RELATED TO GENDER EQUALITY IN ORDER TO INFORM, DRIVE, AND MONITOR EFFORTS TO PROMOTE GENDER EQUALITY, PARTICULARLY AT THE GOVERNMENT POLICY LEVEL.

complementary qualitative studies in the same settings, seeking to document in depth the lived realities of gender inequalities, notions of masculinity and femininity, and participants' perspectives on efforts to promote gender equality. IMAGES data make it possible to:

- Explore men's experience on topics usually explored with women only;
- Triangulate results across men's and women's experiences;
- Generate a baseline on gendered attitudes and practices in a setting, such that progress toward the equality agenda can be contrasted with it in the future; and
- Contribute to a global effort to improve the evidence base on men and masculinities and on gender equality.

It is important to acknowledge that IMAGES is designed to focus on gender dynamics primarily in the households of heterosexual-identifying adult partners. The questionnaire asks respondents about their sexual orientation and sexual practices, including current or ever cohabitation with a same-sex partner and if they are heterosexual. Given the high prevalence of homophobic policies, laws, and social norms in the countries surveyed, it seems

likely that the percentage reporting a sexual orientation other than heterosexual has been lower than is actually the case. Several IMAGES studies have measured homophobic attitudes, but these modules have not been fielded in every study location due to government restrictions, safety risks to respondents or data collectors, and/or advice from local LGBTQIA+ and women's rights advocates that these topics were too culturally sensitive or politically dangerous to ask. In all locations, researchers have encountered the challenge of seeking to make diverse sexual orientations visible and honored, while also recognizing the unintended harm that may accrue from widely publicizing how commonplace homophobic attitudes are. IMAGES has not yet included questions about nonbinary gender identity. Future IMAGES surveys should continue to explore sexual orientation and begin to explore gender identity, going deeper in these much-neglected areas in ways that adhere to the needs and priorities of local LGBTQIA+ movement organizing.

IMAGES findings have been widely disseminated to inform policy and programming across multiple sectors. At the national level, IMAGES data have informed policy and action in a variety of ways, including inspiring men's health initiatives in Brazil, starting discussions with the Ministry of Health in Chile around engaging men in childbirth, promoting new and progressive sexuality education policies in Croatia, and initiating sexual and gender-based violence prevention activities with men in Tanzania and the eastern Democratic Republic of the Congo. At the global level, IMAGES data were the foundation for creating the global MenCare campaign, a 50-plus-country initiative to promote men's involvement as equitable, nonviolent caregivers. IMAGES data have also been consistently featured in State of the World's Fathers, a biennial global report on men's participation in caregiving (see www.stateoftheworldsfathers.org). IMAGES studies in many settings have been carried out by, and often funded in part by, the United Nations Population Fund, as well as UN Women. IMAGES also informed the multicountry Partners for Prevention (P4P) studies on

men's violence against women carried out in the Asia-Pacific region by multiple United Nations agencies.

The infographics here make use of a sample of 67,202 respondents across 32 countries. Of these respondents, 50,373 are male (from 32 countries) and 16,829 are female (from 21 countries), all of whom were interviewed face to face.¹³ For 12 studies, only men's data were collected and/or made available for the present analysis. The decision to include men alone in some locations reflected funding priorities or other local considerations. This was the least preferred option and relatively rare overall, as most studies followed the practice of asking similar questions of women and men. A focus on men and masculinities, including in sample construction, reflects the intended "value-add" of IMAGES within a prior body of evidence in which studies of violence, health, and family life generally included fewer questions for men, fewer men, or a subset of men who were sampled because of their relationships to women (i.e., husbands). IMAGES has addressed this limitation directly by focusing on men.

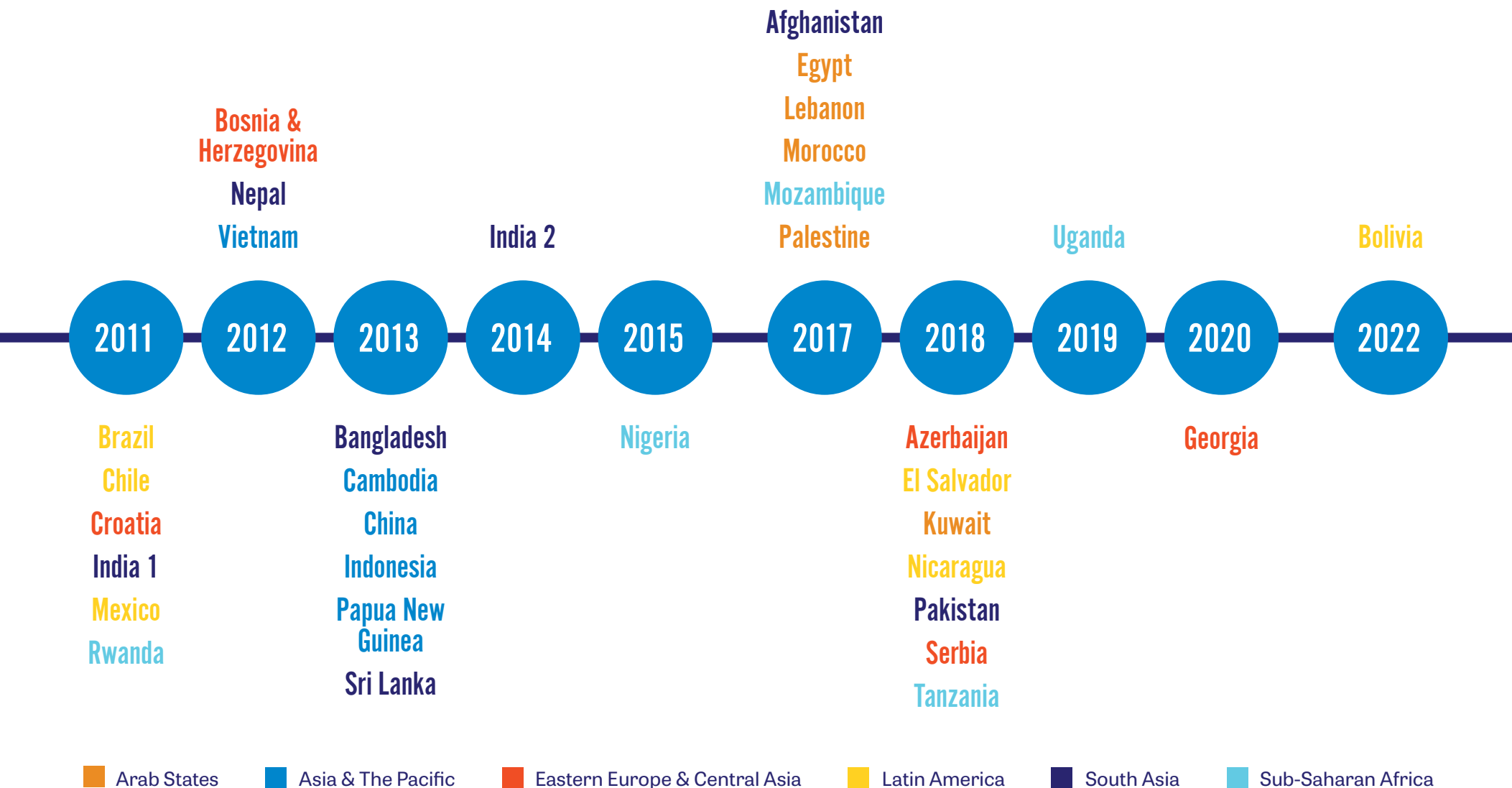
Figures 2 and 3 presents the sample size (and proportion of the global sample) for each study, organized by region. Figure 3 presents how the samples of men and women are distributed by age (18 to 24, 25 to 34, 35 to 49, and 50-plus), education (using global standard categories), and employment status at the time of the survey. Note that the totals may on occasion not sum to 100 percent because of rounding. Overall, the age distributions of men and women are comparable, with slightly fewer women sampled in the 18 to 24 and 35 to 49 age categories and a few more women in the oldest age group (50-plus) compared to men. With regard to education, men are more concentrated in the primary and lower/upper secondary categories, while women are more concentrated in the below primary and postsecondary categories. As for employment, the sample shows nearly three-quarters (73 percent) of men were currently employed at the time of the survey, while the opposite was true for women, with nearly three-quarters not currently employed (71 percent).

Samples were chosen to be representative of the specific geographic areas where the surveys were carried out and generally represented at least two major urban areas. Budgetary limitations meant that only some, not all, IMAGES studies achieved national representativeness in the manner of larger national initiatives, such as the Demographic and Health Surveys. Nonetheless, all samples followed best practice household sampling approaches, with samples drawn by national statistical bureaus, local census listings, and nationally recognized research firms or organizations.

When displaying comparisons among subsets of respondents (whether by sex, country, region,¹⁴ or other characteristics), only findings that are statistically significant at the $p < .05$ level are included.

It is important to be cautious when making longitudinal comparisons given that data was collected over 14 years in different settings. Nevertheless, IMAGES continues to provide a unique snapshot into a global picture of gendered attitudes and behaviors. While 32 countries were harmonized in the first round, efforts in the future will be to harmonize and analyze IMAGES data collected from other countries.

FIGURE 1
IMAGES OVER THE YEARS

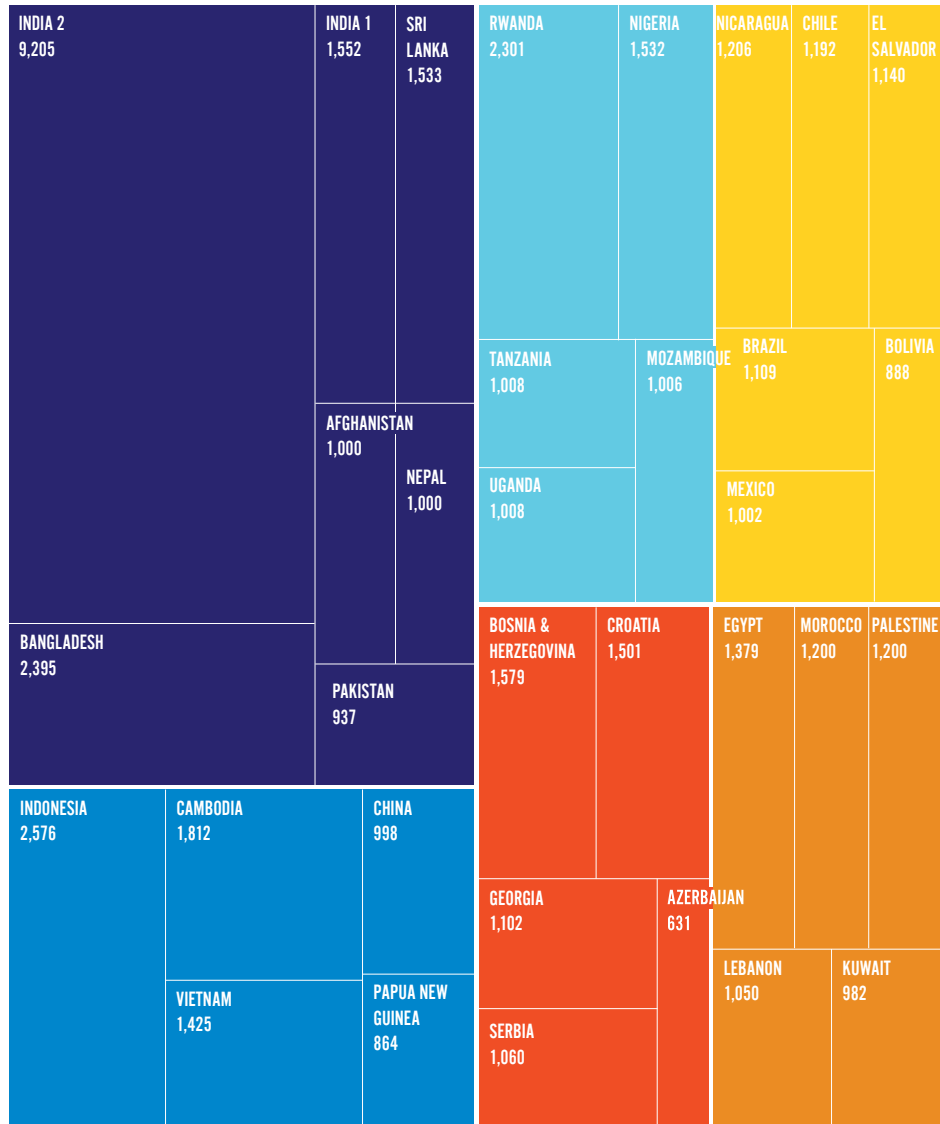


The chronological sequence of IMAGES and IMAGES-inspired studies from 2011 to 2022, by report publication date (color-coded by region)

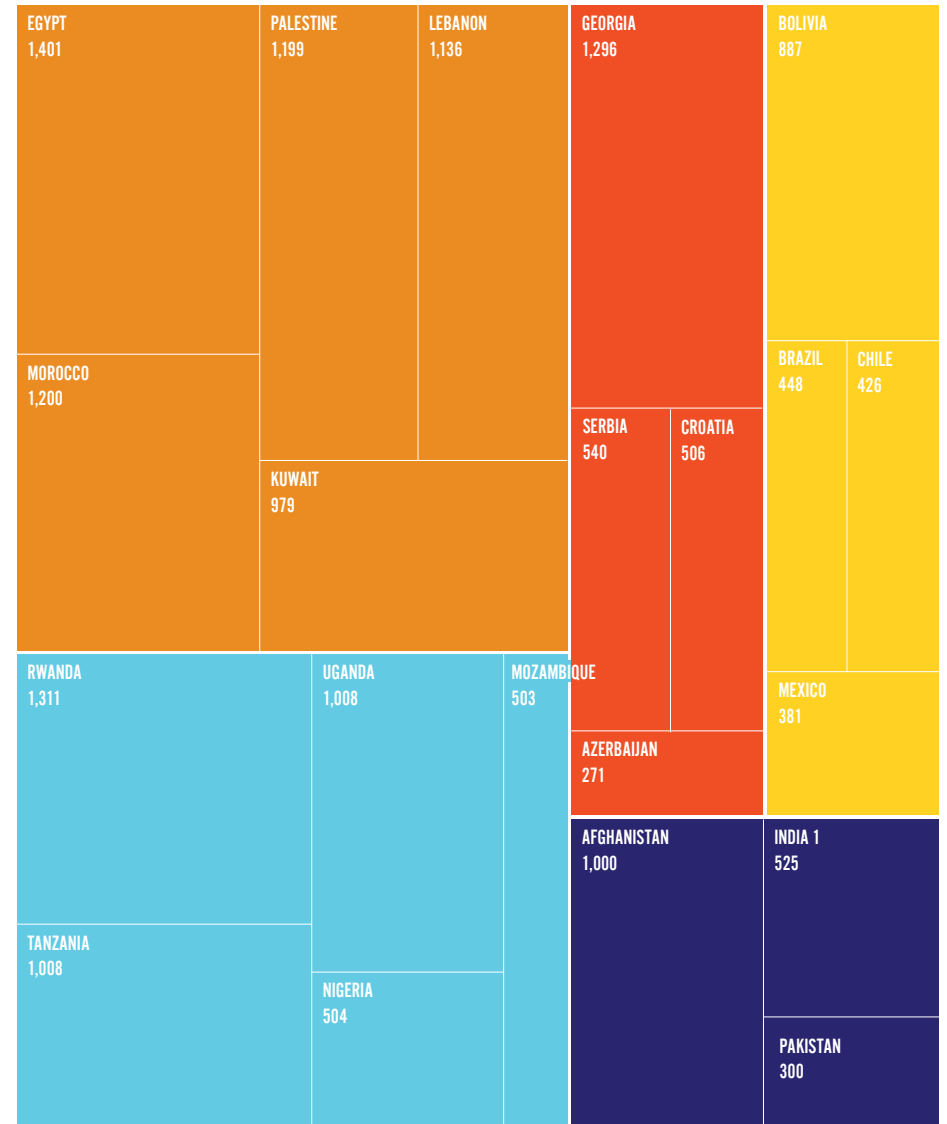
FIGURE 2

THE MEN AND WOMEN OF IMAGES

MEN

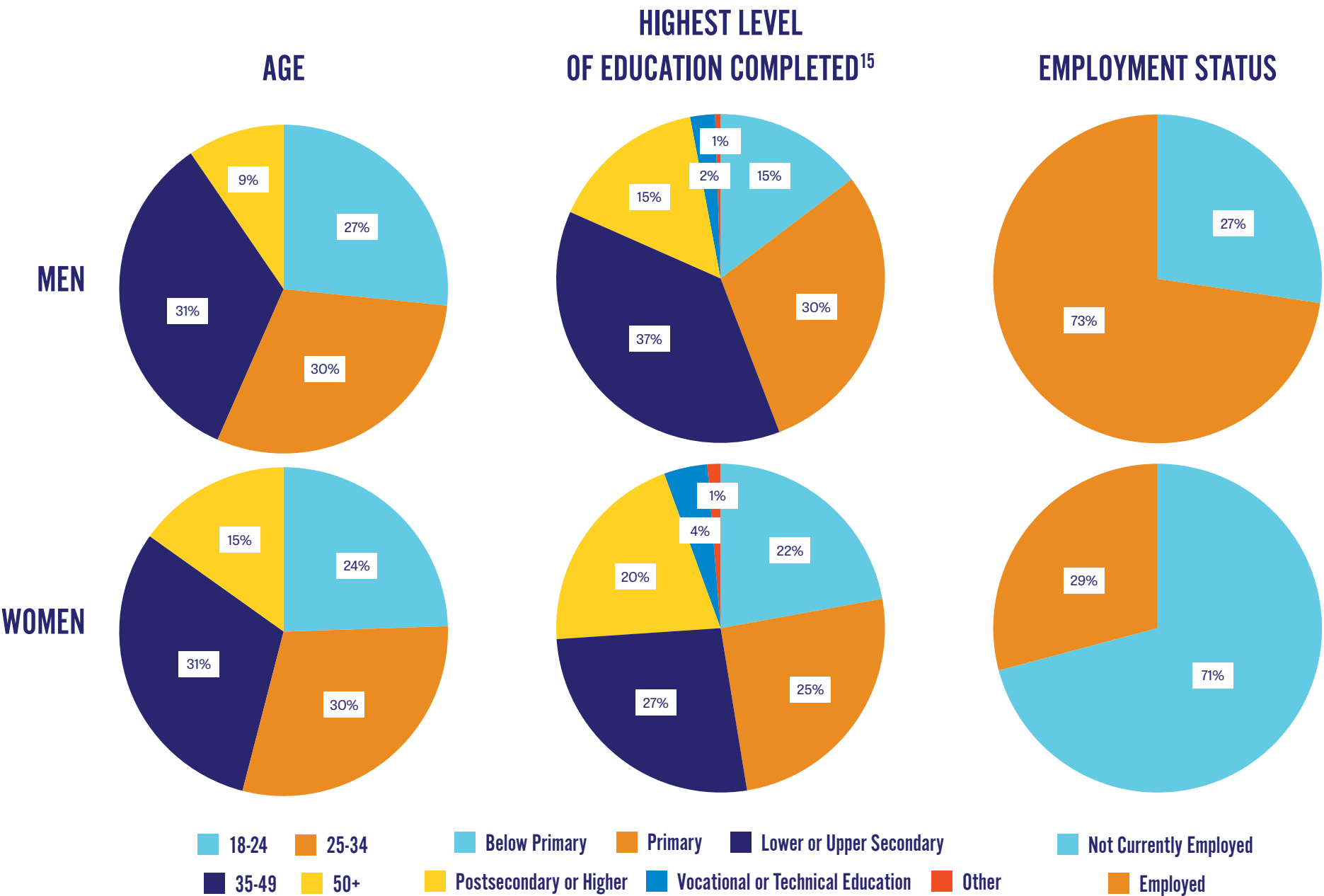


WOMEN



Men's sample sizes for IMAGES (total sample: 50,373) and women's sample sizes for IMAGES (total sample: 16,829).

FIGURE 3
RESPONDENTS' AGE, EDUCATION, AND EMPLOYMENT





CHILDHOOD EXPERIENCES

HEADLINE 1

Many children grow up seeing their fathers or other men dominate household decision-making.

Many men and women in IMAGES locations grew up witnessing unequal power in decision-making between men and women. IMAGES surveys asked respondents to reflect on their childhood homes and to share who in their childhood had the final say on the following decisions: spending on food and clothing, large investments (house, car, and large appliances), children's education, whether your partner/you may work outside the home, and how you spend your free time. Detailed information on all of the questions asked in each country can be found in country reports [here](#). The present analysis explores decision-making on large investments and children's education. The frequency with which respondents recall a highly unequal dynamic in their childhood homes is concerning worldwide, particularly in the Arab States, South Asia, and sub-Saharan Africa, where more than half of men in most countries recall male-only decision-making on large investments and education (Figure 4). Men's reports of decision-making about education follow the same general pattern as for large investments, though the pattern is slightly less pronounced.

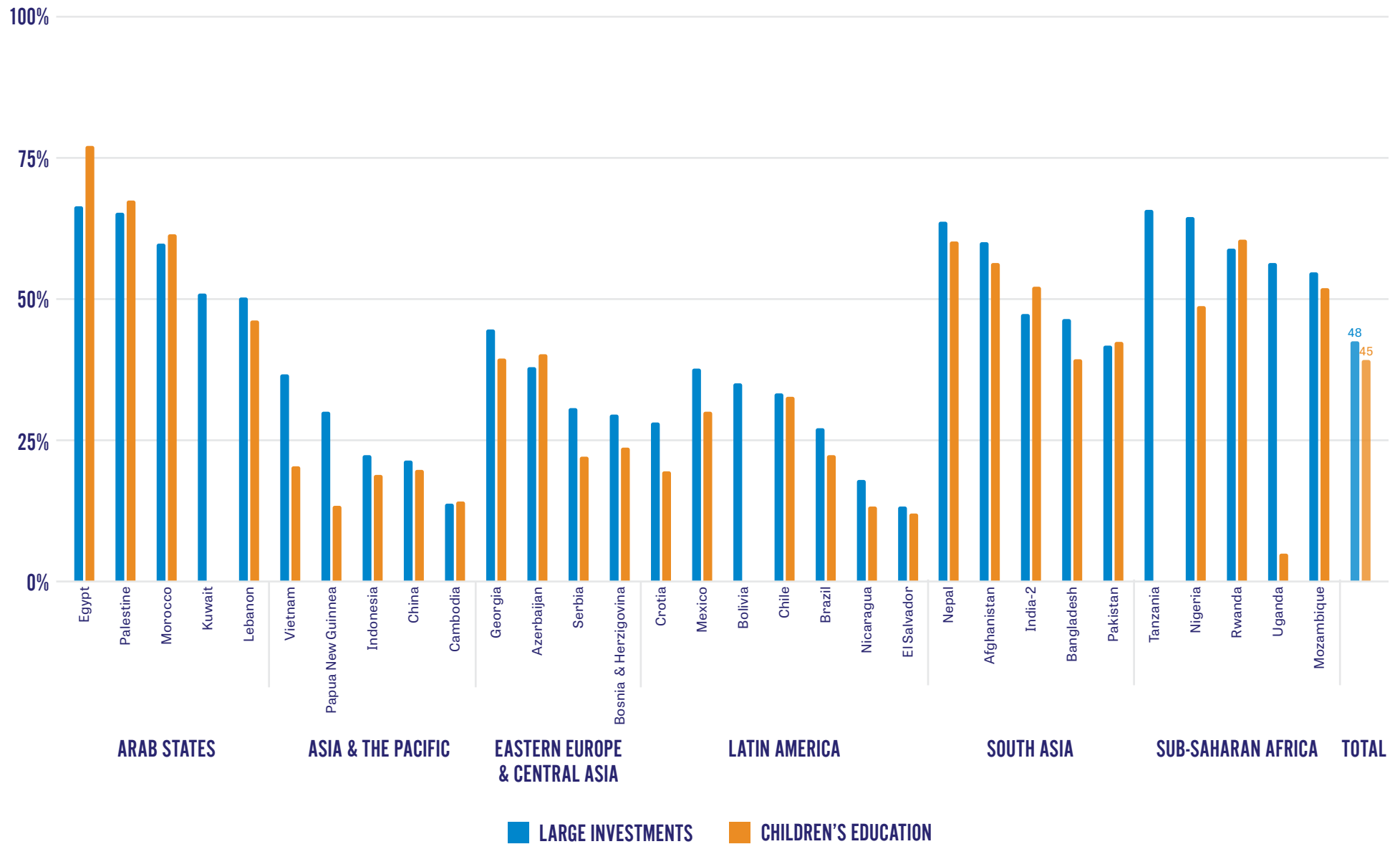
The data from women on male-dominated decision-making in their childhood homes follow a pattern that is similar to men's overall, with close to or more than half of all women reporting male domination in large investments in the Arab States, South Asia, and sub-Saharan Africa (Figure 5). Clear regional patterns can be seen. The percentages are especially high (near or above 70 percent) in Morocco and Nigeria. Male domination in these decisions is somewhat lower in Eastern Europe and Central Asia

and in Latin America and the Caribbean. Women report that in some settings (Morocco, Palestine, Lebanon, and Nigeria), decisions about education in their childhood homes were considerably less male-dominated than decisions about large investments. The global average shows that across all of the countries with significant results, decisions about children's education were generally more likely to be made jointly by men and women than decisions about large investments.

The key finding is that much of the current generation of adults across the world isare to their fathers – or other men in the household – dominating the important decisions of their lives. From a developmental perspective, memories of household domination by men can often normalize – for boys and girls, women and men, and all individuals – the idea that men's dominance and prominence are normal, accepted, and the way “things should be.” Women's economic empowerment, full labor force participation, and overall agency will continue to be constrained as long as this is the case.

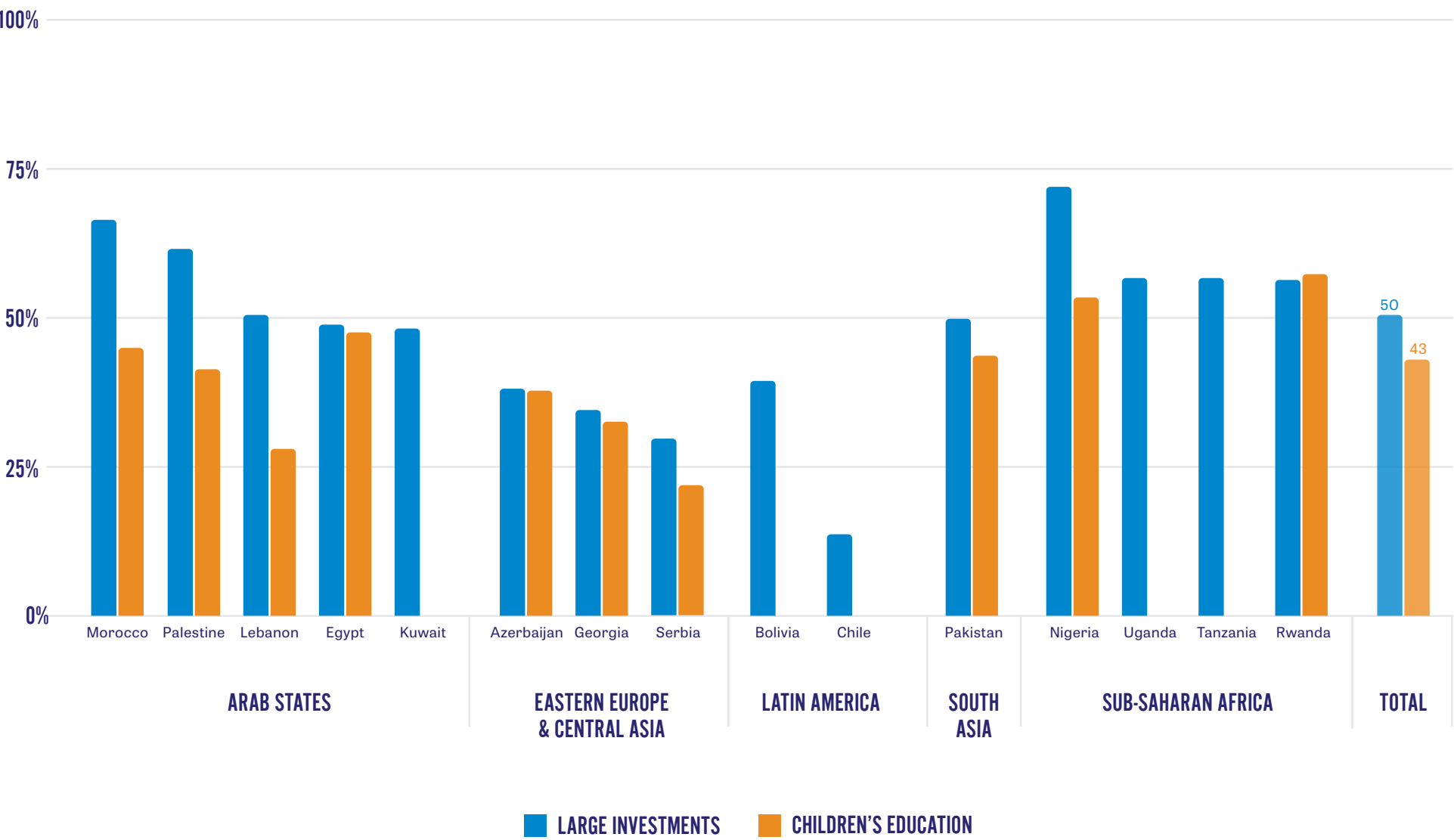
FIGURE 4

MEN'S RECOLLECTIONS OF MALE DOMINATED DECISION-MAKING IN THEIR CHILDHOOD HOMES



Proportion of male respondents who say men were the sole decision-makers in their childhood home regarding large investments and children's education.

FIGURE 5
WOMEN’S RECOLLECTIONS OF MALE DOMINATED DECISION MAKING IN THEIR CHILDHOOD HOMES



Proportion of female respondents who say men were the sole decision-makers in their childhood home regarding large investments and children's education.

HEADLINE 2

Care leads to care: Men whose fathers were involved in caregiving are more involved themselves.

Global data show that women perform on average 3.3 times the daily unpaid care men do.¹⁶ This discrepancy is one of the single largest drivers of women's curtailed educational opportunities, careers, and leisure time. Increasing equality in unpaid caregiving is fundamental to achieving gender equality. IMAGES explores this dynamic using an intergenerational perspective, asking respondents about care distribution in their childhood homes as well as in their current homes as adults.¹⁷

Recalling their childhood homes, too many respondents tell of their fathers playing a limited or nonexistent role in the routine care work of cleaning the house, preparing food, and washing clothes. In nine available countries, a majority of male respondents recall their father *never* doing any of this work; in several others, the majority say their father did one or two at most (Figure 6). East Asia and the Pacific stands out for its higher involvement rates among fathers, as reported by their adult sons. Sixty-eight percent of men in China, 67 percent in Papua New Guinea, and 62 percent in Vietnam share that their fathers were regularly involved in all three of these tasks. At the other end of the spectrum, the Arab States is the region that most consistently features the lowest reported rates of participation in care work, though countries from other regions also have very low participation rates: 71 percent of men in Egypt, 64 percent in Pakistan, 63 percent in Rwanda and Morocco, and 58 percent in Bangladesh report their fathers participated in none of these tasks. South Asia shows tremendous variability, where deeply involved fathers were essentially nonexistent in the Afghanistan sample,

yet nearly 80 percent of respondents in Sri Lanka witnessed their fathers perform two or more tasks.

These rates matter on their own and also because of how influential they can be for future generations of sons who witness these patterns. The slight generational trend in Figure 7 affirms that even as women's participation in the paid workforce has increased in recent decades, men's increases in caregiving contributions remain limited. Men over the age of 50, recalling childhoods in the 1970s or earlier, report the lowest involvement by their fathers in care work. Respondents in the youngest age group, who were children in the 1990s and early 2000s in most cases, report their fathers were significantly more involved. Younger men (aged 18 to 34) report having witnessed their fathers performing an average of 1.56 tasks of the three listed (cleaning the house, preparing food, and washing clothes), while the oldest men (aged 50 to 59) report having witnessed their fathers engaged in an average of 1.14. Women paint a less rosy picture of their fathers' involvement in these tasks, with women in all age groups from 25 up reporting their fathers performed an average lower than even one caregiving task. The subtle increase in women's estimations of their fathers' participation over time shown in Figure 7, however, does suggest that fathers may be playing a slightly larger role in the present day than decades ago, but the rates in most places remain very low.

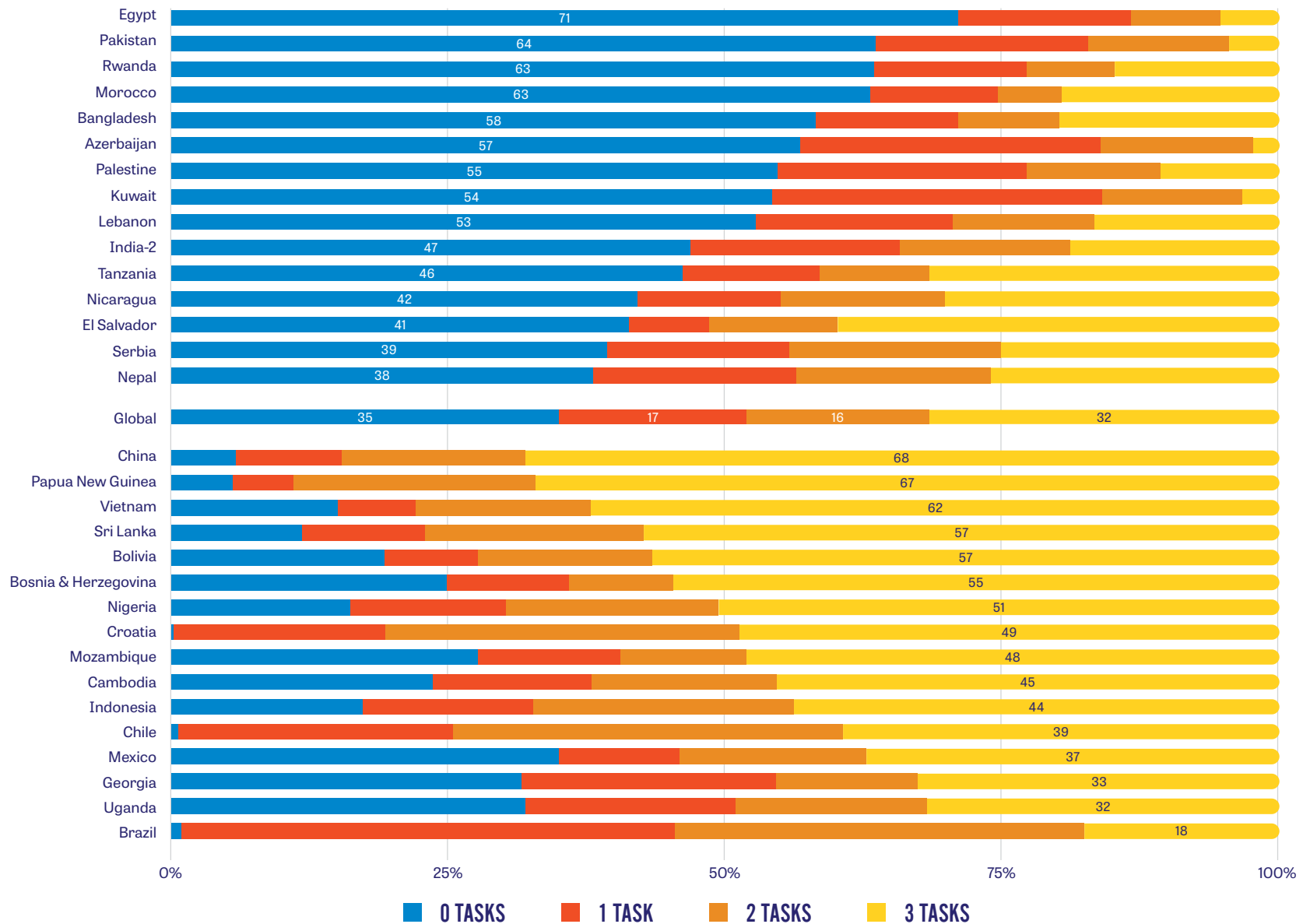
Finally, IMAGES data demonstrate that beyond just the mere passing of time, it is *witnessing involvement* in domestic work that can lead to increased involvement among future generations. The final

infographic of this set (Figure 8) shows that in most study countries, men whose fathers were more involved in unpaid care and domestic work are more likely to be more involved in this same work when they become parents. Moving from the group whose fathers did no domestic work to those who did one, two, and three tasks in turn, a similar upward trend is visible in men's own participation at statistically significant levels.

It is puzzling that fathers' contributions do not make even more of a difference in male respondents' contributions to their own households. Data show that even when respondents' fathers participated in three tasks, the respondents themselves (e.g., in the Arab States) participate in fewer than three tasks on average. Other factors are surely at play here, including cultural norms that vary across settings such as Vietnam and Egypt and, perhaps, a global trend toward gender conservatism across many parts of the world. There are no simple solutions to erasing the pervasive inequality in unpaid care and domestic work worldwide, but data show that as individual men increase their participation in care work, involvement pays forward by increasing the likelihood that their sons will follow suit.

FIGURE 6

TRACKING HIGH AND LOW PARTICIPATION IN DOMESTIC WORK AMONG FATHERS IN CHILDHOOD HOME



Proportion of male respondents who recall their father doing the following tasks regularly in their childhood home: cleaning the house, preparing food, and washing clothes.

FIGURE 7

CHANGES IN FATHERS' PARTICIPATION IN DOMESTIC WORK OVER TIME

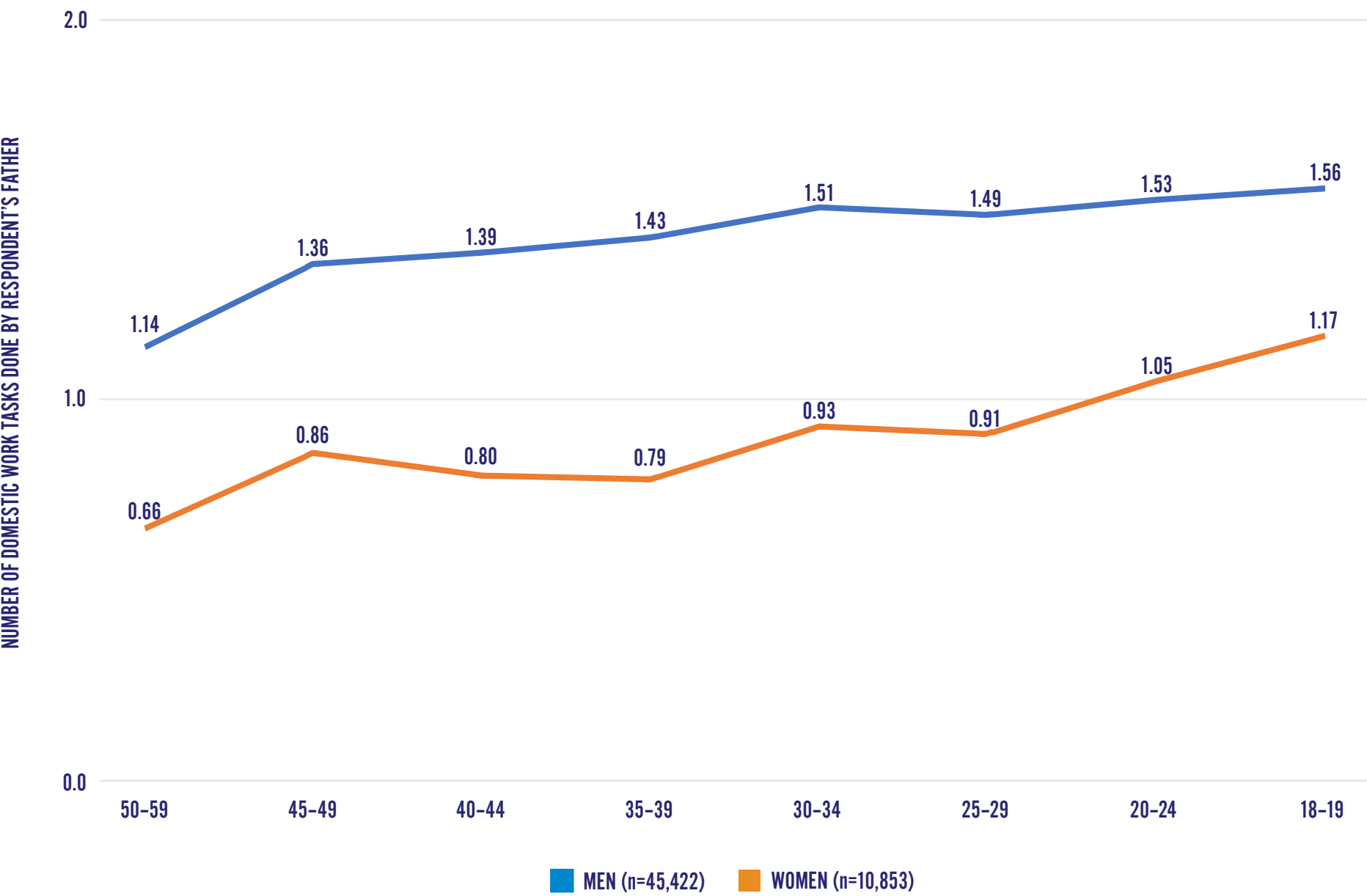
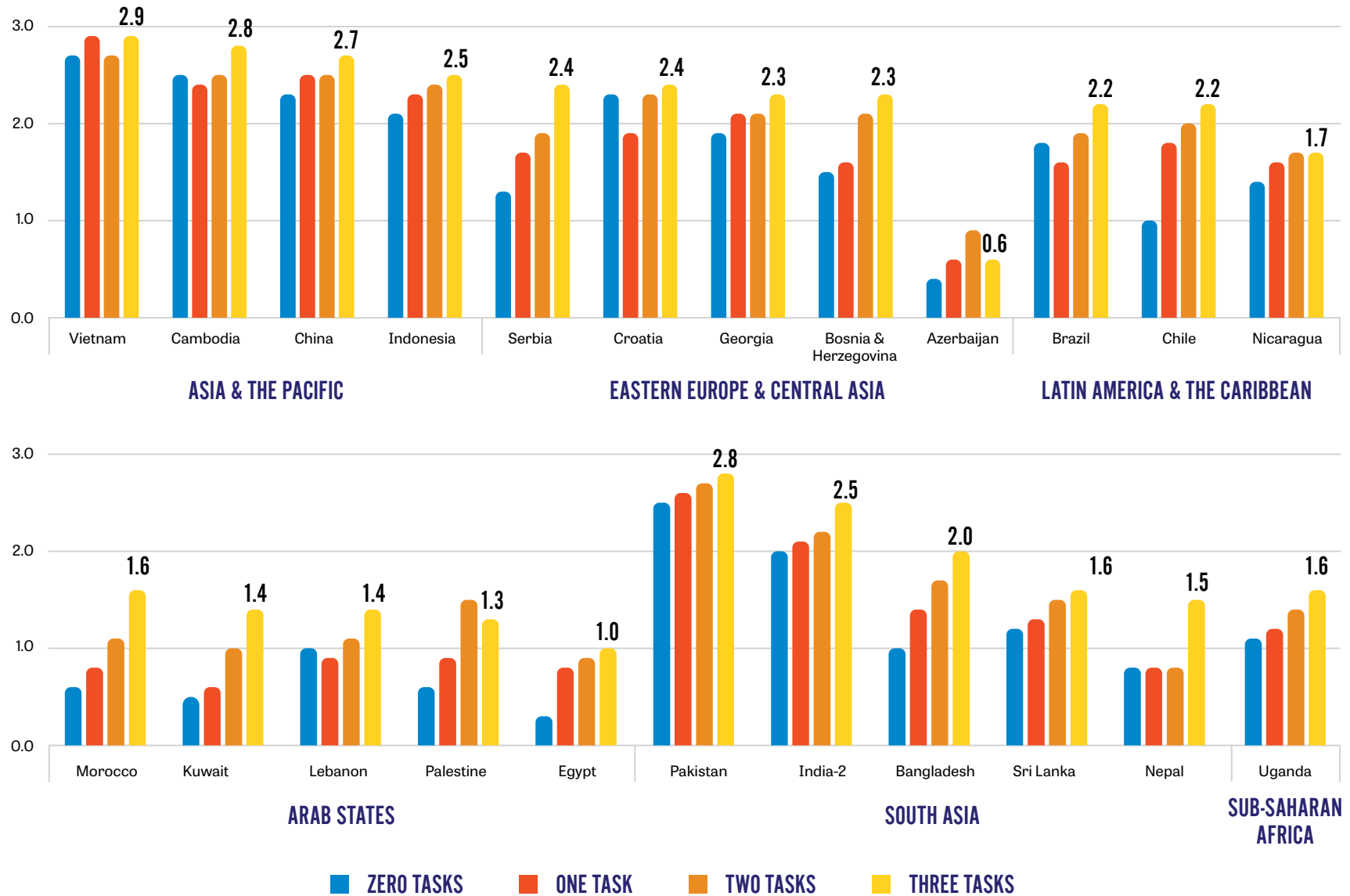


FIGURE 8

SONS TAKING AFTER FATHERS IN DOMESTIC WORK



Mean number of domestic work tasks (zero to three) done by male respondents as adults, divided based on their fathers' participation.

HEADLINE 3

Multiple and overlapping forms of violence during childhood are common.

Global statistics find that approximately one in two children experiences some form of violence.¹⁸ About three in five children aged 2 to 14 worldwide are regularly physically punished by their caregivers, and one in ten girls worldwide (or around 120 million girls) have experienced forced sexual acts. Compared with other types of violence against children, emotional abuse receives less attention because of its intangible nature. Research affirms, however, that 36 percent of adults report having experienced childhood emotional abuse.¹⁹ This is twice the proportion of those reporting physical abuse (about 18 percent), sexual abuse (8 to 18 percent), or physical neglect (about 16 percent). Emotional abuse harms millions of children's lives globally, and it is estimated that one in every three children is currently experiencing it.²⁰

Global data show strong correlations between having experienced violence (physical, sexual, emotional, and/or school-based violence) as a child and having witnessed one's mother experiencing violence, and that both are linked to adult perpetration of violence. A meta-analysis from 17 countries found that adults exposed to four or more adverse childhood experiences, including physical and emotional abuse, stood seven to eight times the chance of perpetrating interpersonal violence.²¹ Childhood exposure to violence has clear intergenerational effects.²²

A large proportion of IMAGES respondents report they experienced physical violence in their childhoods and/or witnessed physical violence against their mother by their father or other male partners of their mother. There is wide variation in rates of these multiple forms of violence across the IMAGES countries. However, the

intersection and concurrence of these two forms of violence – experiencing and witnessing it – stand out strongly in the IMAGES data. As the bottom row shows – those representing the percentages of each sample that experienced and witnessed physical violence – show in Figure 9, many male respondents – including about one in five in Mozambique, Nigeria, Mexico, and Morocco; one in four in Papua New Guinea; one in three in Bolivia; and one in two in Pakistan – endured *both* forms of violence in their childhoods.

The patterns of experiencing and witnessing physical violence look similar for women and for men, though men report having experienced higher levels of this violence as children. Mexico and Nigeria stand out as settings where all or nearly all men report having experienced physical violence as children, and Uganda is notable as a place where men universally report having witnessed physical violence against their mothers when they were children. To validate the findings on these three outlier countries, the data were compared with 2020 World Health Organization (WHO) data.²³ The WHO data show that 63 percent of boys and girls aged 1 to 14 in Mexico reported having experienced violent discipline in the past month, lower than the IMAGES results; in Nigeria, this WHO figure was 86 percent for boys and 84 percent for girls. The WHO data on Uganda showed that 65 percent of boys and 67 percent of girls had witnessed physical violence in the home before age 18, yet 85 percent of boys and girls aged 1 to 14 had experienced violent discipline *in the past month*.

FIGURE 9

DIFFERENT FORMS OF VIOLENCE IN CHILDHOOD

		ARAB STATES					ASIA & THE PACIFIC					EASTERN EUROPE					LATIN AMERICA					SOUTH ASIA					SUB-SAHARAN AFRICA						
		Egypt	Kuwait	Lebanon	Morocco	Palestine	Cambodia	China	Indonesia	Papua New Guinea	Vietnam	Azerbaijan	Bosnia & Herzegovina	Croatia	Georgia	Serbia	Bolivia	Brazil	El Salvador	Mexico	Nicaragua	Afghanistan	Bangladesh	India-1	India-2	Nepal	Pakistan	Sri Lanka	Mozambique	Nigeria	Rwanda	Tanzania	Uganda
1. EXPERIENCED PHYSICAL VIOLENCE AS A CHILD THEMSELVES	MEN	11	17	26	38	18	10	6	14	34	24	6	38	6	21	39	42	8	40	99	24	2	3	10	17	9	59	12	46	95	17	25	10
	WOMEN	13	12	16	30	11	NA	NA	NA	NA	NA	2	NA	NA	15	27	35	NA	NA	NA	NA	1	NA	NA	NA	NA	34	NA	NA	96	NA	15	7
2. WITNESSED PHYSICAL VIOLENCE AGAINST THEIR MOTHER	MEN	16	34	14	40	25	24	21	14	56	30	38	10	16	8	24	51	16	24	22	24	29	28	38	20	29	76	31	30	22	44	34	100
	WOMEN	27	49	16	35	22	NA	NA	NA	NA	NA	23	NA	NA	4	25	48	NA	NA	NA	NA	25	NA	NA	NA	NA	73	NA	NA	22	NA	36	46
EXPERIENCED BOTH 1 & 2	MEN	5	12	5	22	11	5	3	5	24	12	4	8	3	3	17	33	3	17	21	10	0	2	6	5	4	49	7	19	20	11	13	10
	WOMEN	8	11	9	15	8	NA	NA	NA	NA	NA	1	NA	NA	2	14	25	NA	NA	NA	NA	0	NA	NA	NA	NA	26	NA	NA	20	NA	8	5

Showing varying rates of concurrence of experiencing physical violence and witnessing physical violence against one's mother in respondents' childhood.



GENDER ATTITUDES

HEADLINE 4

Inequitable ideas about manhood and masculinity are alive and well.

Restrictive, inequitable, and stereotypical views of men's and women's roles are highly prevalent across IMAGES settings. IMAGES assesses ideas about traditional masculinity and masculine norms as a primary focus, and this section explores three statements in particular: "A man should have the final word about decisions in his home" (power); "A woman's most important role is to take care of her home and cook for her family" (household gender roles); and "A woman should tolerate violence in order to keep her family together" (violence).

As Figures 10 and 11 demonstrate, IMAGES data show that men in the Arab States have consistently traditional and inequitable ideas about gender, with Egyptian men most committed to all three measures of traditional or restrictive manhood, and Lebanese men the least, particularly with regard to tolerating violence. Men in sub-Saharan Africa appear to hold traditional ideas of masculinity overall, but Mozambique is an interesting exception, with distinctively lower levels of traditional, restrictive attitudes across all three measures. Men from South Asia and from East Asia and the Pacific share similar attitudes, with a strong emphasis on the importance of maintaining inequitable gender roles.

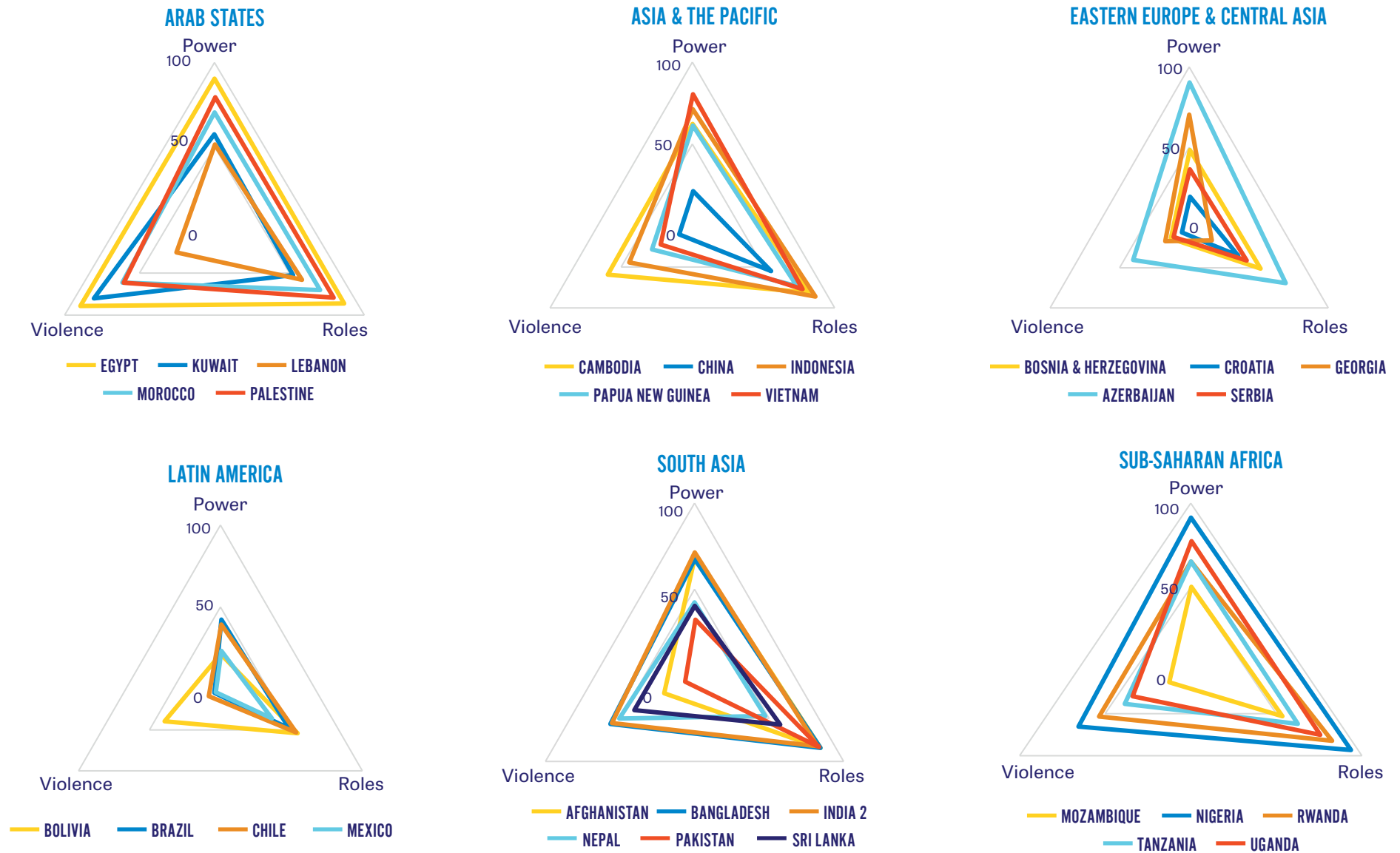
Women in the five regions for which we have data are far less likely to hold consistently traditionalist views, except in sub-Saharan Africa, where women show the greatest agreement with men on the three dimensions of traditional gender roles. Women in South Asia largely agree with stereotypes regarding gendered power and roles but do not feel women should tolerate violence from male partners. Women in the Arab States, like men in the region, have the most consistent

adherence to all three dimensions of traditional, inequitable gender norms. Overall, however, it is traditional attitudes about roles and power that women and men are more likely to uphold, while women and men appear to be less accepting of the view that women should tolerate violence from a male partner.

What these figures show us is that gender traditionalism is alive and well, including support for maintaining inequitable gendered roles, men's domination in decision-making, and justification of violence against women. At the same time, though, these attitudes vary substantially and point to opportunities to shift gender norms by building on change that is already happening.

FIGURE 10

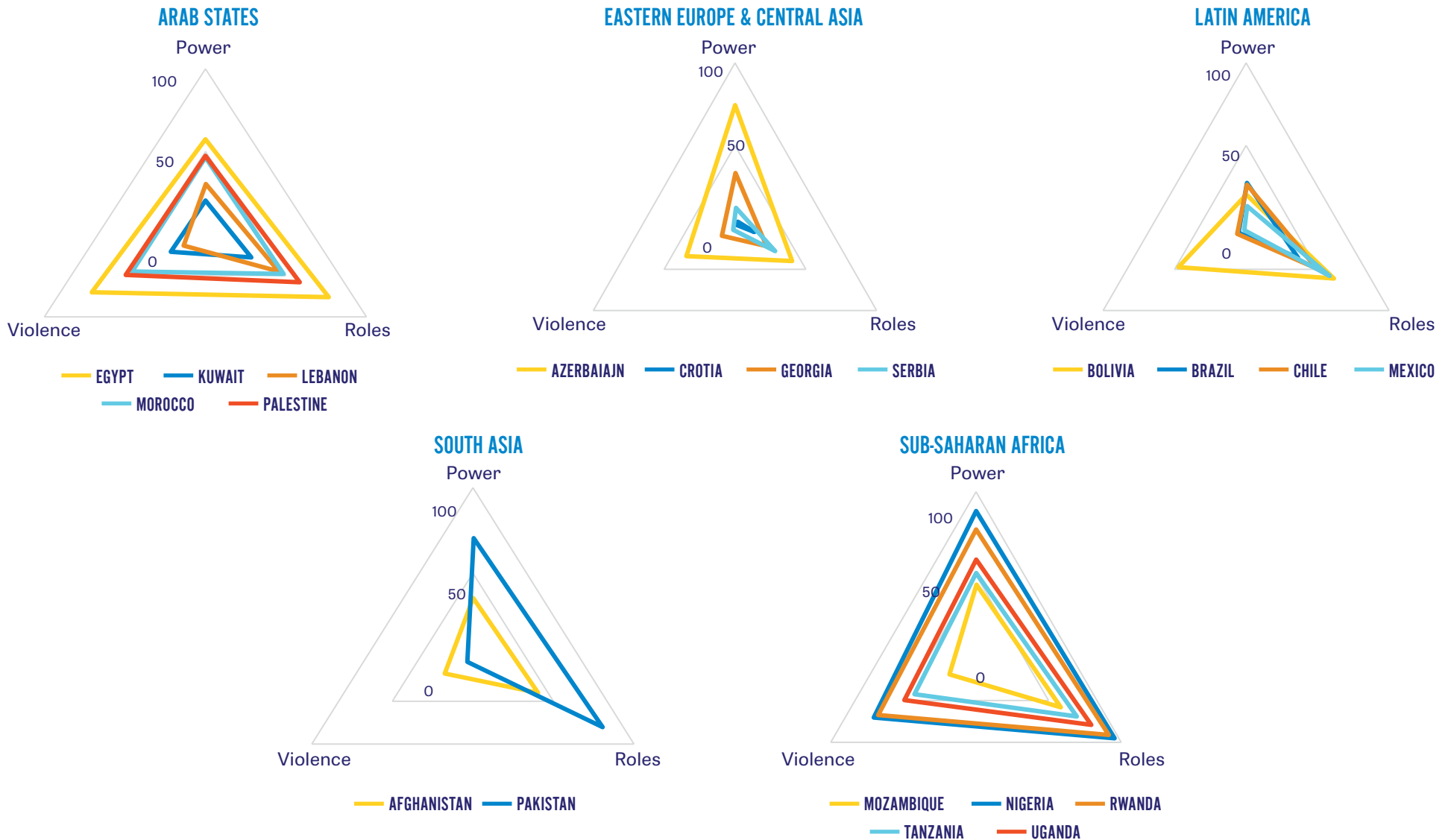
MEN'S AGREEMENT WITH THREE GENDER ATTITUDES



Proportion of men in each country who agree or strongly agree with three statements: "A man should have the final word about decisions in his home" (power); "A woman's most important role is to take care of her home and cook for her family" (roles); and "A woman should tolerate violence in order to keep her family together" (violence).

FIGURE 11

WOMEN'S AGREEMENT WITH THREE GENDER ATTITUDES



Proportion of women in each country who agree or strongly agree with three statements: “A man should have the final word about decisions in his home” (power); “A woman’s most important role is to take care of her home and cook for her family” (roles); and “A woman should tolerate violence in order to keep her family together” (violence).

HEADLINE 5

Progress to equity stalled: Younger men rarely have more gender-equitable attitudes than older men.

Alongside recent increases in the global discourse about gender equality, one might expect to see a meaningful shift in attitudes about these topics over time. But do younger people actually hold more equitable views about gender than older people do? In an analysis of the three previously mentioned dimensions of gender attitudes (power, household gender roles, and violence), the answer for young women is *mostly yes*, while the answer for young men is *sometimes but mostly not*. For this analysis, a single measure of how gender equitable a person's attitudes are was created from these three attitudinal measures. Respondents received a score of 1 for each of the three statements they *disagreed* with, for a scale score total of 0 to 3, with a higher number indicating more equitable views.

Among men, age cohort is significantly correlated with the combined attitude score in 16 studies (Figure 12). To be sure, in select locations such as Georgia, Lebanon, Chile, and Cambodia, younger age cohorts consistently hold more equitable scores. More often than not, though, this significant relationship seems to show that men's attitudes follow a curved pattern, whereby the oldest and the youngest men hold more restrictive views than those in their early 30s.

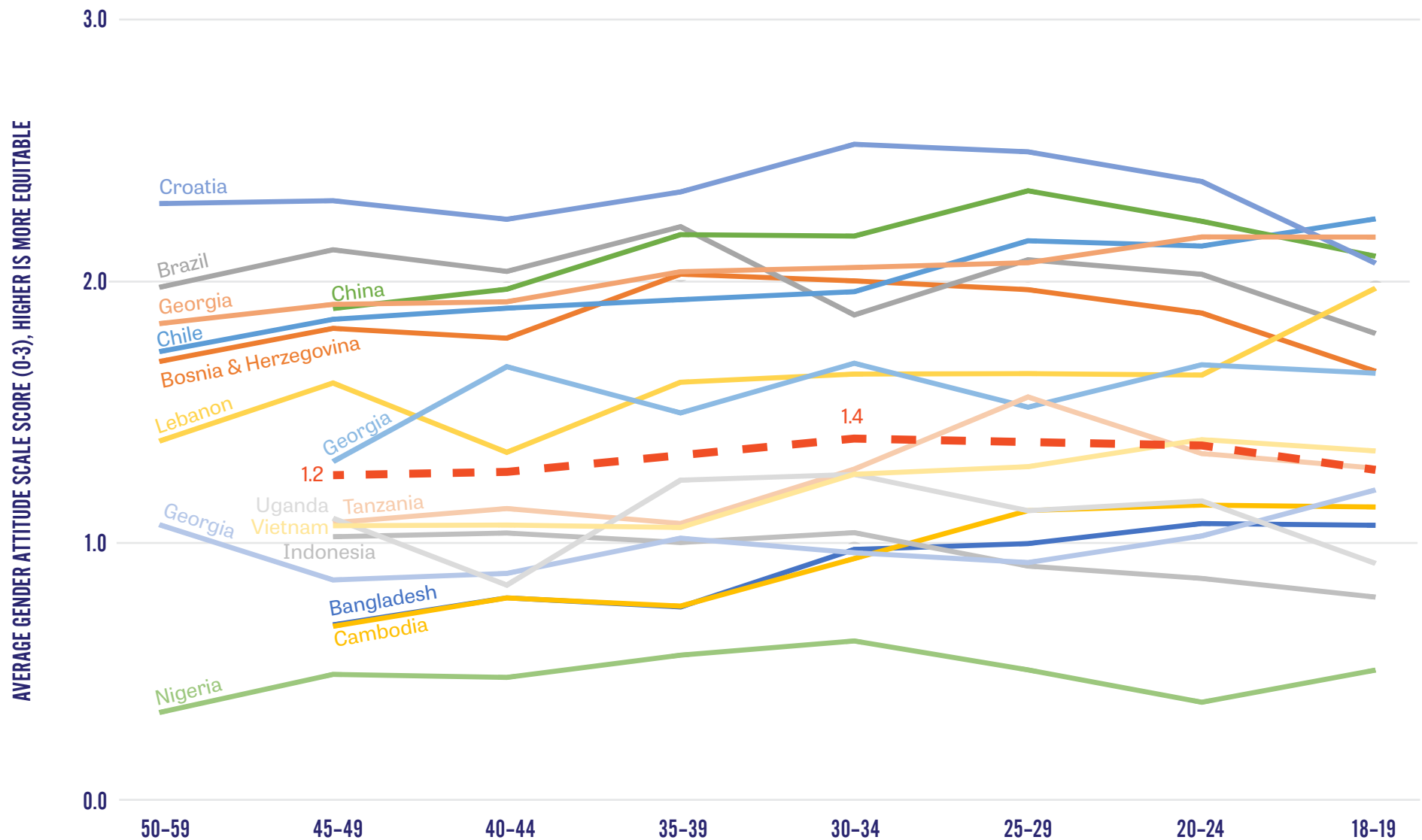
Among women, however, the relationship is more consistently positive across all age groups (Figure 13). As a whole (with the exception of Uganda), the directionality is clear: Younger age groups of women hold significantly more equitable views than older age groups do, especially when taking an average of the 12 studies in which this relationship was statistically significant.

Younger men's restrictive gender attitudes seem consistent during an era of backlash against the progress of women's movements and amid the rise of anti-feminist political leaders, a push back against the women's rights agenda, and in some countries, "men's rights" and male supremacist groups, particularly in online and social media spaces frequented by young people. We can also hypothesize that the youngest groups of men – especially those not yet partnered or raising children – hold idealized or hypothetical notions of their (future) roles in heterosexual relationships, while men with the lived experience of cohabitating and cooperating with their partners have come to a *slightly* more equitable worldview. Regardless, this pattern questions the idea that the younger generation of men is more likely to buy into gender equality. For many younger men in some settings, the case must still be made for why gender equality is urgently needed and has not yet been achieved, which presents a serious challenge for policymakers, activists, and educators alike.

Nonetheless, it is notable that no statistically significant link exists between age groups and these three gender attitude statements in fully half the studies available among men. This is further evidence that social change in gender issues is more than just a matter of inevitable generational change. This work demands more dedicated and country-specific action to shift the views of every succeeding wave of young men and new parents. Notably, combining all countries where this relationship is significant reveals that no men in any age group have as progressive or equitable views as even the age groups of women with the least equitable views.

FIGURE 12

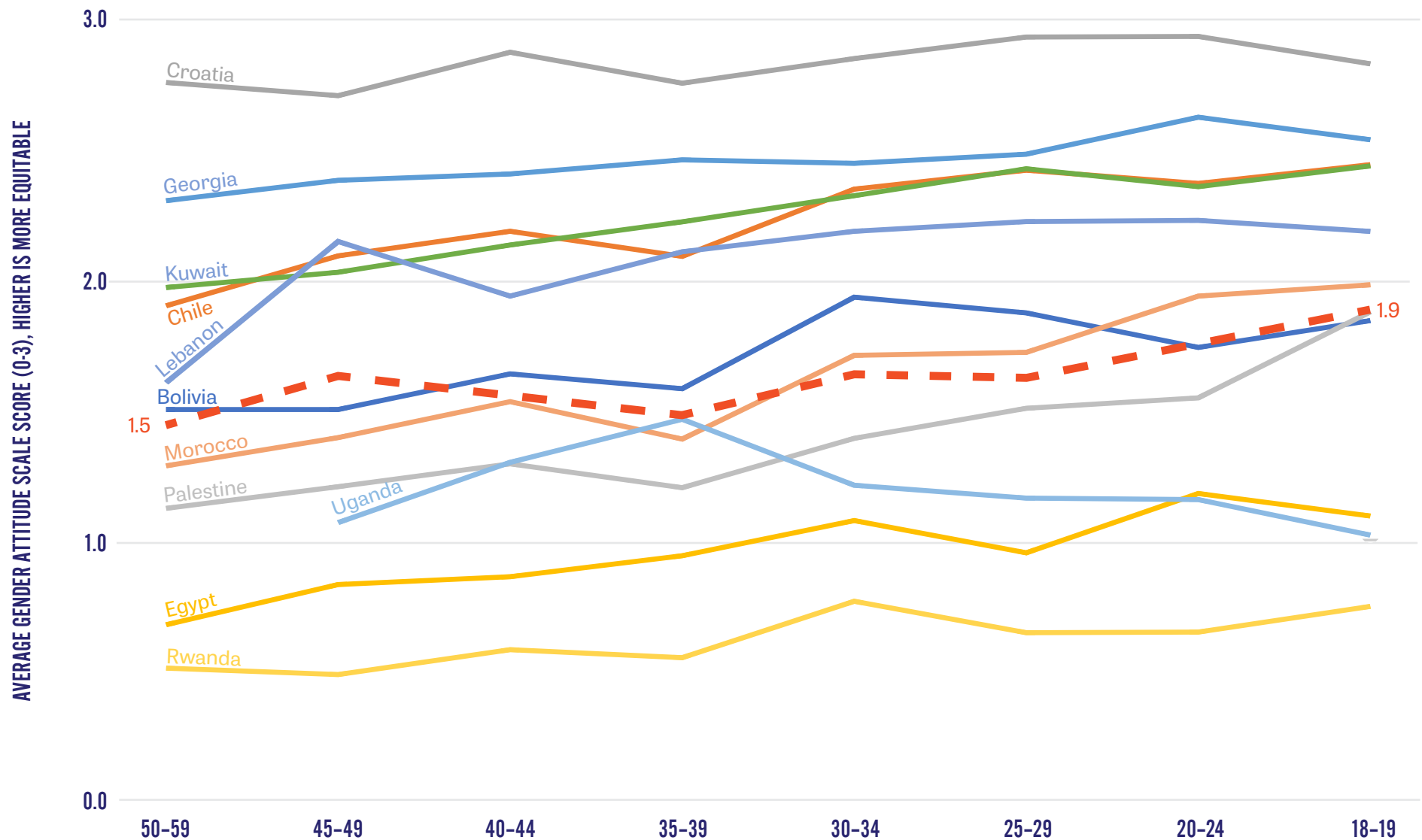
GENDER ATTITUDES ACROSS AGE COHORTS (MEN)



Men's Gender Attitude Scale combined score (0 to 3) across age groups, drawing again from three items: "A man should have the final word about decisions in his home" (power); "A woman's most important role is to take care of her home and cook for her family" (roles); and "A woman should tolerate violence in order to keep her family together" (violence). A higher number indicates more equitable views. Results are statistically significant at the $p < .05$ level across the age groups.

FIGURE 13

GENDER ATTITUDES ACROSS AGE COHORTS (WOMEN)



Women's Gender Attitude Scale combined score (0 to 3) across age groups, drawing again from three items: "A man should have the final word about decisions in his home" (power); "A woman's most important role is to take care of her home and cook for her family" (roles); and "A woman should tolerate violence in order to keep her family together" (violence). A higher number indicates more equitable views. Results are statistically significant at the $p < .05$ level across the age groups.

HEADLINE 6

Many men support equality in the abstract but defend their privilege and the status quo in practice.

Pushing men on a full gender equality agenda requires (1) assessing men's willingness to make concrete changes that would reduce their privilege in relation to women; and (2) addressing homophobia and heteronormativity, which are key pillars in reinforcing patriarchal privilege. In exploring these topics, IMAGES data frequently point to a mismatch between respondents' willingness to support broad notions of equality and their reluctance to embody that support on a closer personal and political level.

First, IMAGES data often find that men show moderately high support for gender equality in the abstract; this is evidenced in Figure 14 by the high proportions of men disagreeing with the notion that "more opportunities for women mean that men lose out." This disagreement implies that, in general, men feel they don't stand to suffer when instrumental changes are put in place to advance women's opportunities. It is, therefore, notable that when asked to support a specific policy that puts this view to the test, they show far lower rates of support. With the exception of Lebanon, when asked about quotas for women in executive positions and in government, a concrete example of "more opportunities for women," men show lower levels of support compared to their more general attitude. An abstract notion of equal opportunity is easier to support, it seems, than specific step to make that notion – and its associated challenge to the patriarchal status quo – real.

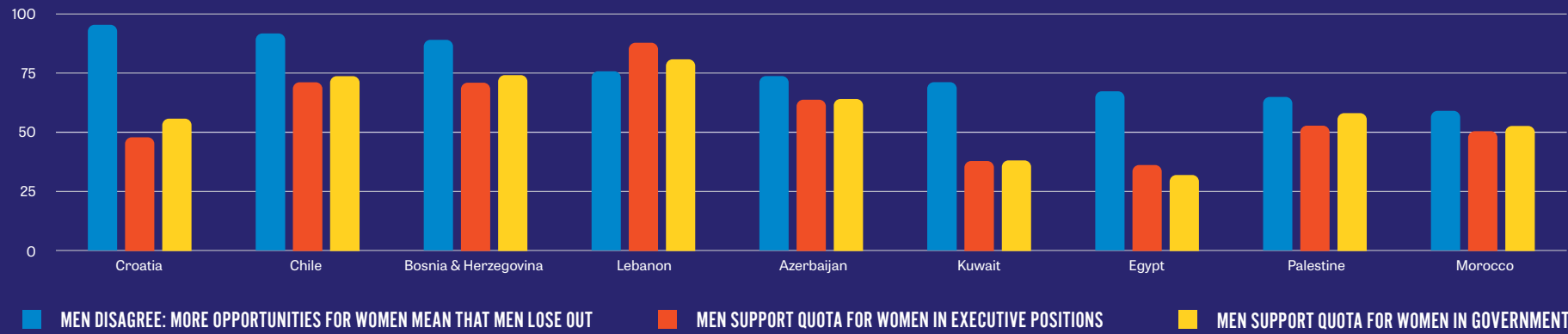
IMAGES data in certain settings also explore a similar dynamic with regard to homophobia. Many researchers have shown how homophobia is a core dimension of traditional masculinity.²⁴ The questionnaire included items to assess attitudes on LGBTQ

identity and rights and on homophobia, including the statement: "Homosexuality is natural and normal." While not asked in a preponderance of settings,²⁵ in most cases, majorities of men and/or women agree with this positive statement. Morocco is a notable exception here. A second item situates the topic closer to home, representing a concrete application of this abstract value: "I would be ashamed if I had a homosexual son." Where included in the questionnaire, this discriminatory idea is quite well supported. Majorities of men in ten of 15 locations agree with this statement. IMAGES data suggest that these two seemingly contradictory ideas can exist simultaneously within the same community and same mindset. In sum, many women and men may accept sexual diversity in the abstract but show homophobic views when the question is poised in a more personal way.

FIGURE 14

EXPLORING MEN'S PRIVILEGES

	WOMEN Agree: I would be ashamed if I had a homosexual son.	MEN Agree: I would be ashamed if I had a homosexual son.	WOMEN Agree: Homosexuality is natural and normal.	MEN Agree: Homosexuality is natural and normal.
Georgia	79.7	93.61	NA	NA
Tanzania	NA	91.24	NA	NA
Bosnia & Herzegovina	NA	80.18	NA	30.78
Indonesia	NA	76.07	NA	NA
Cambodia	NA	70.9	NA	NA
Sri Lanka	NA	67.65	NA	NA
Croatia	39.6	62.55	66.27	45.48
Papua New Guinea	NA	59.49	NA	NA
China	NA	56.61	NA	NA
Nepal	NA	55.6	NA	NA
Chile	64.44	44.03	59.81	58.88
Brazil	30.8	43.65	72.32	63.59
Nicaragua	NA	33.16	NA	NA
Vietnam	NA	29.33	NA	NA
Serbia	34.58	20	58.67	73.25
Lebanon	NA	NA	60.04	32.92
Mexico	NA	NA	74.14	78.2
Morocco	NA	NA	3.8	5.75



Respondents' rates of agreement or support for various statements and policies.

HEADLINE 7

Women and men who grew up seeing gender equality in their households as children hold more equitable attitudes.

Despite the global consensus – as expressed in national laws and international agreements – on the need to achieve gender equality, the prevailing social norms and expectations that men are breadwinners and women are housewives/caregivers are still pervasive and widely embraced.²⁶ Of course, neither women working outside the home nor men doing caregiving work necessarily means gender equality. What is more, women and men may engage in these activities out of necessity rather than choice. And women working outside the home may still be expected to shoulder a double burden of unpaid care work at home.

A study of 29 countries found that adult sons whose mothers were employed outside of the home when they were boys spend more time in caregiving for their own family, while adult daughters of these mothers spend less time doing housework.²⁷ A higher percentage of women working outside of the home helps challenge those social norms, though in many settings, it has not led to male partners' increased engagement in caregiving work²⁸. IMAGES data show that specific modeling by a parent of the same sex can have important effects on that individual's gender attitudes.

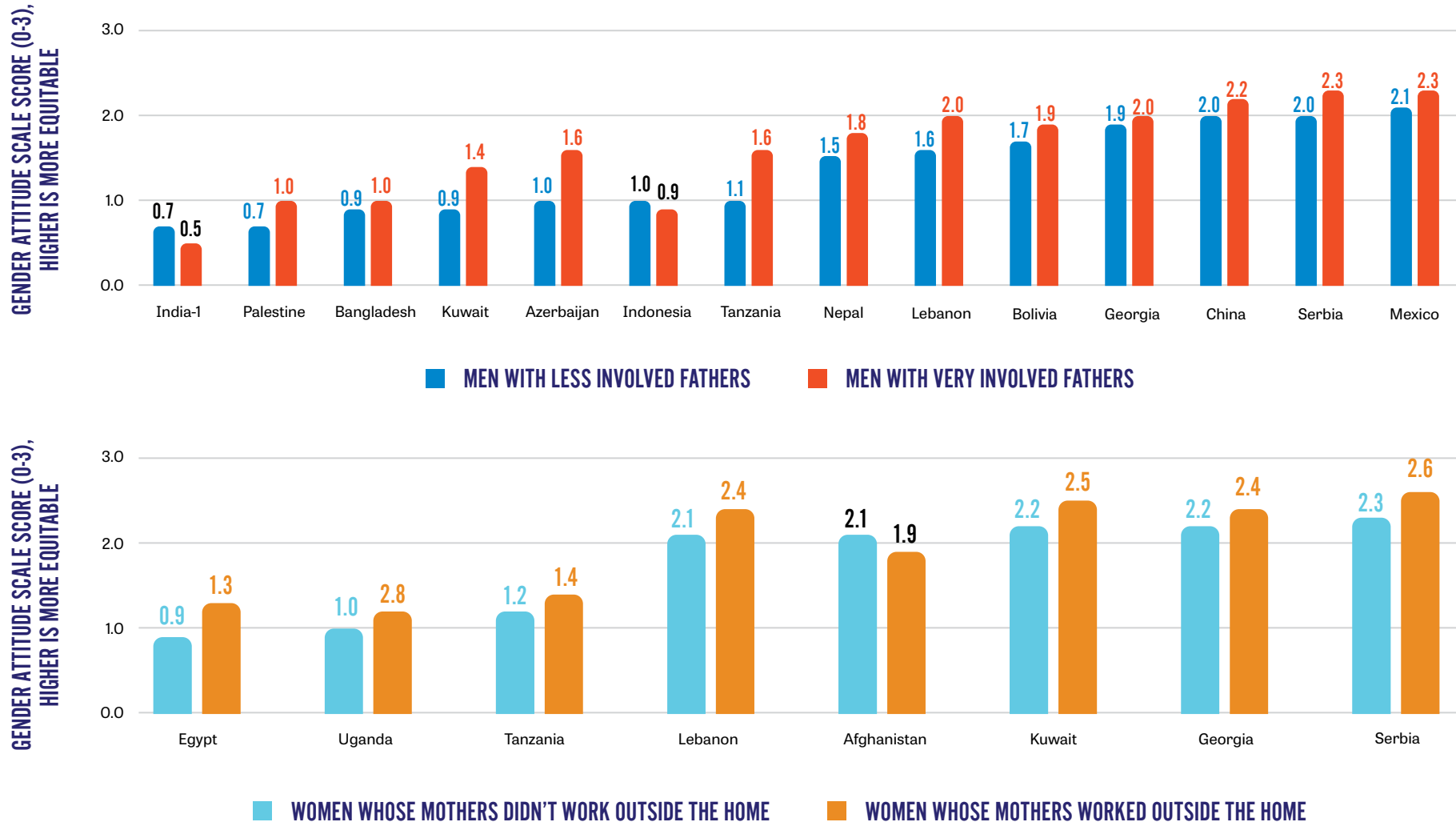
As Figure 15 shows, men who saw their fathers heavily involved in household work tend to hold significantly more gender-equitable attitudes. Kuwait, Azerbaijan, and Tanzania stand out as countries where the difference between the gender attitudes of men who did or did not have involved fathers is particularly large. Similarly, women who saw their mothers working outside the home have significantly more gender-equitable attitudes. In each case, behavior by the same-sex parent that went against the gender stereotype

had lasting effects in the attitudes of their children. To be sure, there are “exceptions that prove the rule” in both charts in Figure 15; in India and Indonesia among men and Afghanistan among women, these relationships are statistically significant, though not at a high real-world magnitude, in the opposite direction. Yet by and large, we find that the legacy of nontraditional gendered behavior on the part of parents lives on in the attitudes of their children. Of note, it may be that women are more likely to report their mothers working because, in general, they paid more attention to their mothers' roles inside and outside the home as they assessed their own future prospects and life trajectories, whereas boys might have paid more attention to their fathers' trajectories and behaviors.

Finally, IMAGES data demonstrate that mothers and fathers reinforce each other's influence when they make choices that differ from the traditional gender norms. When both parents engage in nontraditional gender activities, their actions reinforce those of the other person to shape the attitudes of their children. The attitudes of women and men together reflect the influence of both parents' modeling in heterosexual households. When both parents adhered to gender-traditional practices, their children's attitudes as adults are the least gender-equitable (Figure 16). When one parent was less traditional, it was mothers' work outside the home more than fathers' caregiving that had the greater impact on their children's attitudes. When mothers worked outside the home and fathers were very involved as caregivers, their combined impact was the greatest on transmitting gender-equitable attitudes to their children.

FIGURE 15

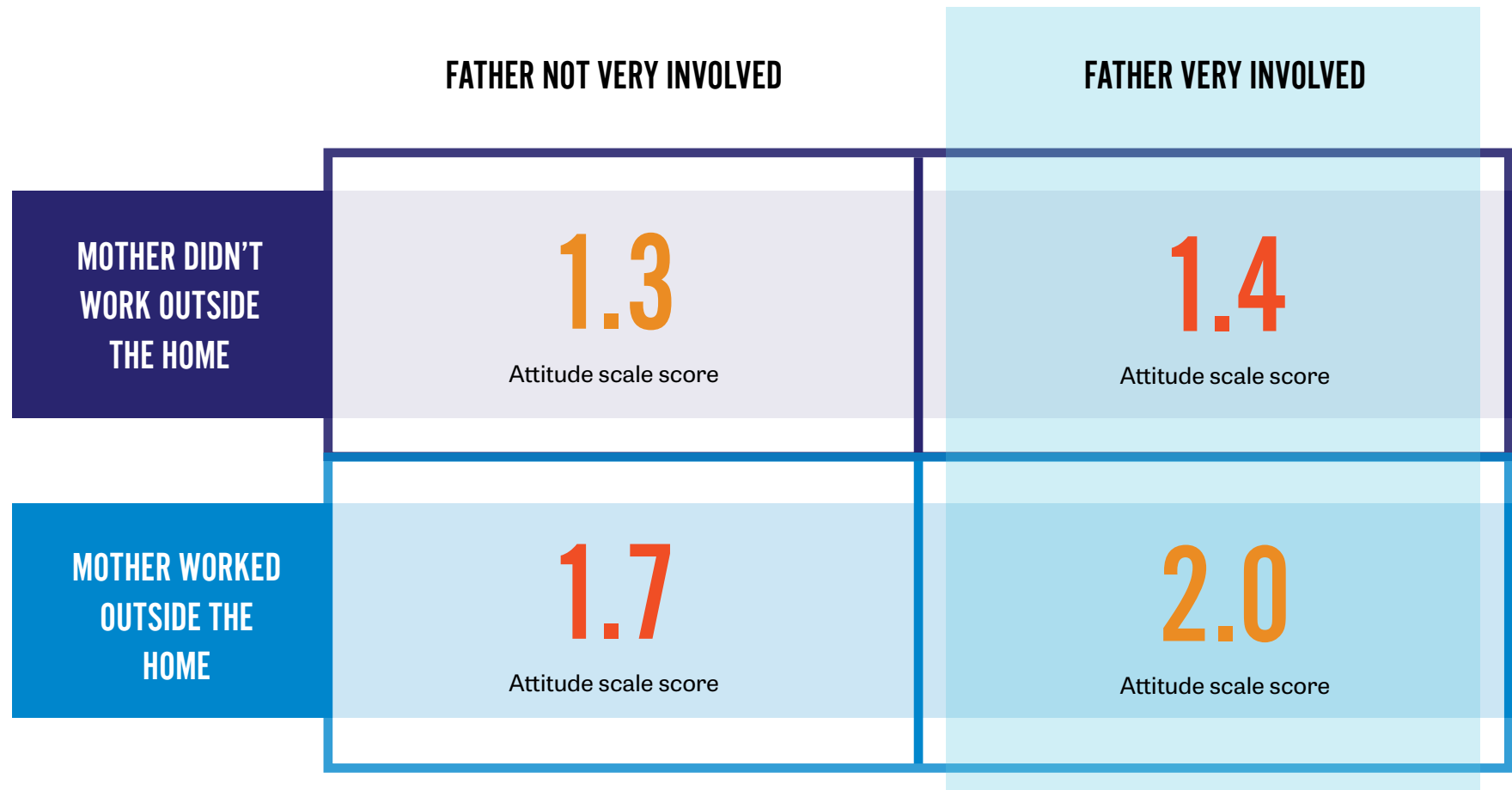
PARENTAL INFLUENCES ON GENDERED ATTITUDES



Gender Attitude Scale combined score (0 to 3) among men based on their father's involvement in three of three domestic tasks (cleaning the house, preparing food, and washing clothes) during their childhood (top half) and among women based on whether their mother worked outside the home during their childhood (bottom half). The scale score is again drawn from agreement/disagreement with three items: "A man should have the final word about decisions in his home" (power); "A woman's most important role is to take care of her home and cook for her family" (roles); and "A woman should tolerate violence in order to keep her family together" (violence). A higher number indicates more equitable views. Findings are significant at the $p < .05$ level.

FIGURE 16

WHEN PARENTAL INFLUENCES OVERLAP



Gender Attitude Scale combined score (0 to 3) among all respondents, regardless of gender, drawing from the restricted sample for which data exist on both mother's outside work and father's involvement in domestic work. The score among those who witnessed these elements of equality for both parents is by far the most equitable. Findings are significant at the $p < .05$ level.

A close-up photograph of a person's hand holding a wooden clothespin. The hand is positioned over a white cloth, possibly a tablecloth or a piece of laundry. The background is blurred, showing what appears to be a window with curtains. The text "POWER AND CARING AT HOME" is overlaid on the bottom left of the image in a bold, blue, sans-serif font.

POWER AND CARING AT HOME

HEADLINE 8

Household power is unequal and contested between women and men, especially with regard to money and women's mobility.

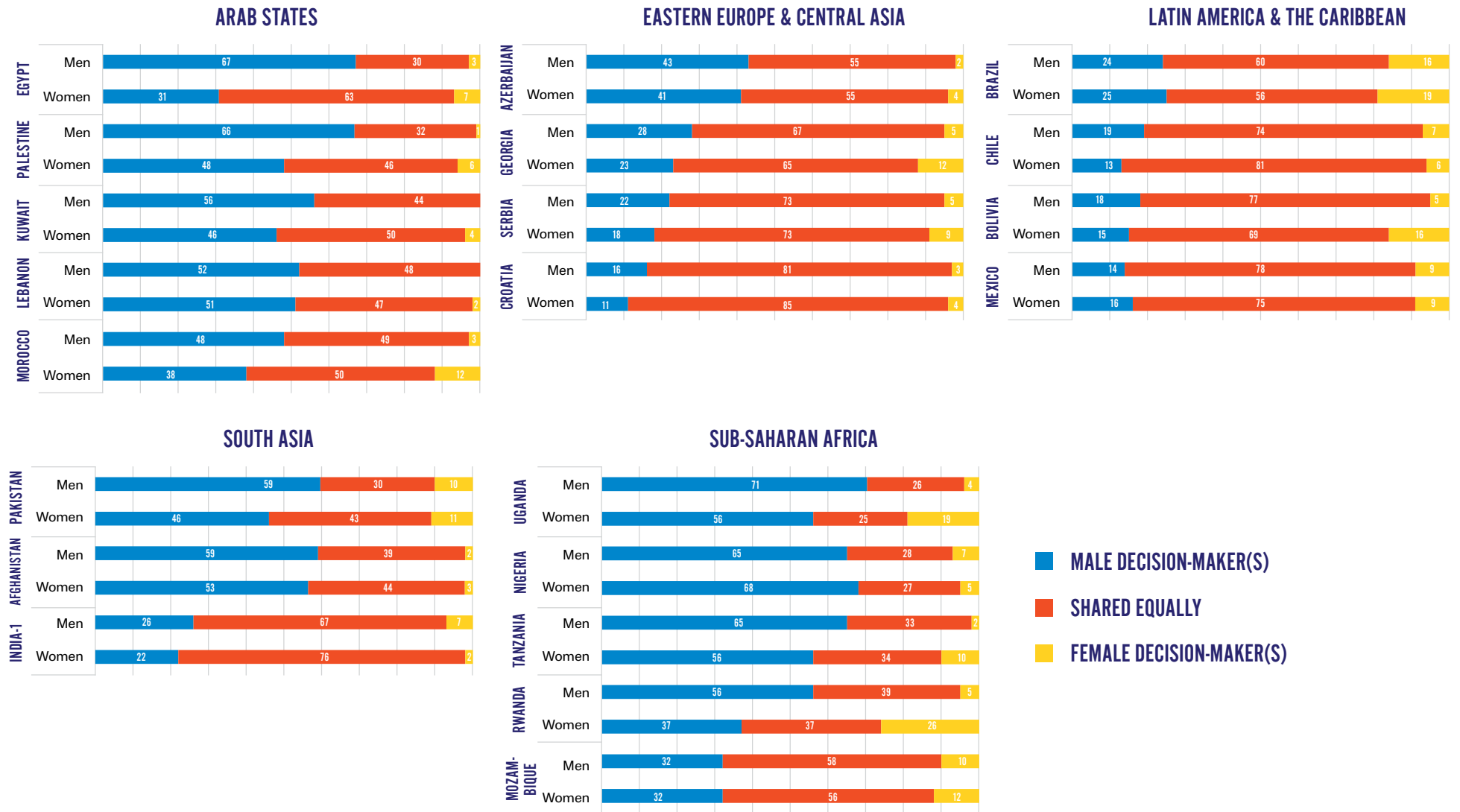
IMAGES results find that countries vary considerably on whether household decision-making is male-dominated for large household investments (things like buying a car, a house, or furniture). Significant regional variation is visible in men's and women's responses, with Latin America and the Caribbean showing the lowest proportions of male domination in household decision-making and much decision-making shared equally overall, likely reflecting women's relatively high labor force participation in the region. Across the regions, there is strong agreement between men's and women's assessments of the household dynamic. In general, the theme expected to appear – men giving themselves more credit for equal sharing than women recognize – did not emerge. If anything, the opposite is true: Women report they have some contributing power in the “share equally” scenario, but the same percentage of men don't see it that way, and insist on or perceive their primacy in financial decision-making.

One universal finding is that if one disregards “shared equally,” Bolivia is the only country where women are more likely than men to report making the final decision (gray compared to blue in Figure 17). The highest overall levels of male domination in decision-making can be seen in the Arab States and in sub-Saharan Africa. Eastern Europe and Central Asia shows the greatest variability within a single region, ranging from 43 percent of men and 41 percent of women reporting male domination in decision-making in Azerbaijan to 16 percent of men and 11 percent of women in Croatia saying the same. Indeed, the levels of men (81 percent) and women (85 percent) in Croatia reporting shared decision-making are the highest across all of the countries for which there are data.

In no country does anywhere near the majority of women report they have the “final say” on how they spend their own free time (Figure 18). In eight of the 13 countries for which IMAGES surveys included this question, men are more likely to have the final say than women about *women's* movement. And the “shared equally” response when it comes to women's freedom of movement is hardly an indication of equality and autonomy; women alone should be able to decide how they spend their time. Only in Morocco and Kuwait do at least a third of women report that they are making the final decision on their own behalf.

FIGURE 17

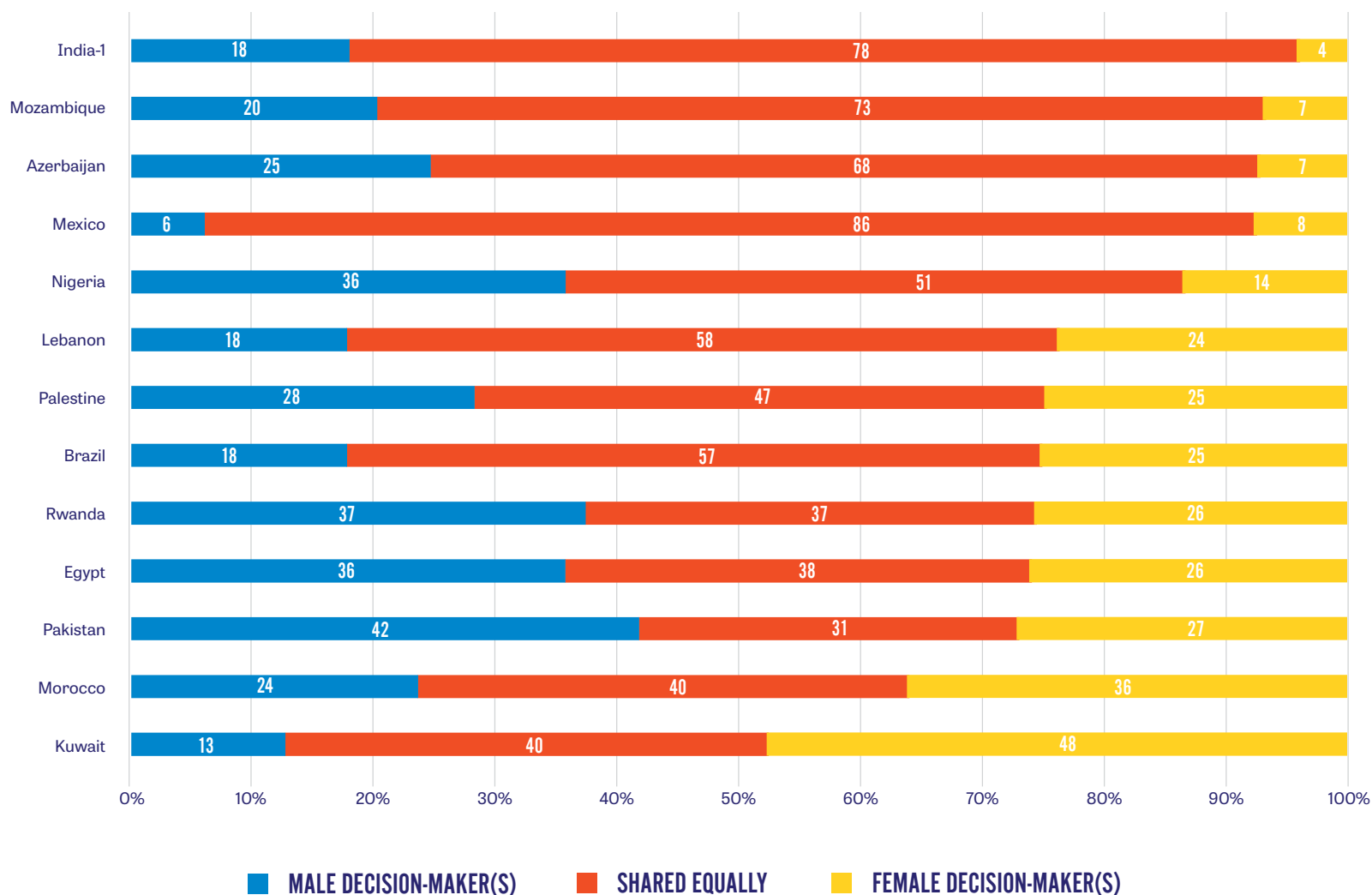
MONEY MATTERS: DECISION-MAKING POWER OVER LARGE FINANCIAL INVESTMENTS



Proportion of men and women's responses on who in their homes has the "final say with regard to large financial investments": male family member(s), shared equally, or female family member(s).

FIGURE 18

DECISION-MAKING POWER OVER HOW WOMEN SPEND THEIR FREE TIME



Women's responses to who in their homes has the "final say with regard to how [respondent] spends her free time": whether she or another female family member has the final say, the final say is shared equally among female and male family members, or a male family member has the final say. Findings are statistically significant at the $p < .05$ level.

HEADLINE 9

Household decision-making is more equitable when women have more education and greater economic independence.

Years of research on women's status have affirmed the importance of education²⁹ and labor force participation³⁰ as key contributors to achieving equitable household power. Women's responses in IMAGES surveys show that in many locations, educational attainment and employment status are positively correlated with equally shared or female-led decision-making around major financial purchases. IMAGES data help demonstrate that these aspects of women's lives – their educational opportunities, income-earning, and household power – are part of the same equation and the same interlocking set of oppressions and opportunities.

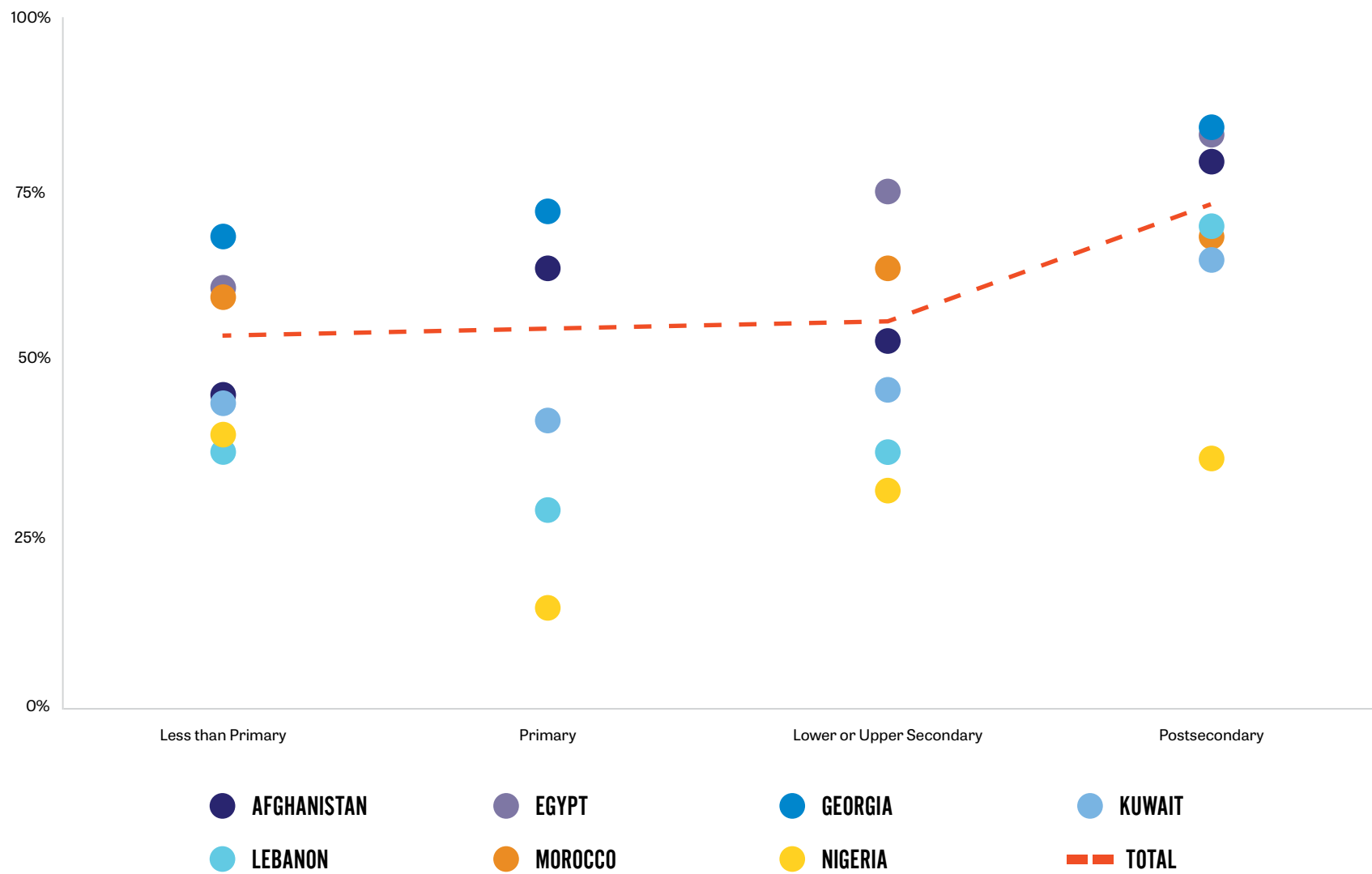
Women's educational attainment is positively associated with equal or female-led decision-making in seven of the country studies (Figure 19). While results vary by location, the pattern shows modest increases in decision-making equality as women reach the lower or upper secondary level, and then a major increase for those with postsecondary education. However, these educational opportunities are relatively rare among women in IMAGES studies, meaning that precious few experience this association. As Figure 20 shows, in nine countries, women who were working outside the home for pay at the time of the study played a significantly greater role in major household financial decisions than those who were not formally employed. Overall, when these nine countries are combined into an average, the scope of this association mirrors that of education, wherein about three in every four women who were formally employed (the same proportion as those with postsecondary education) say that financial decision-making is shared equally or female-led. Among women not formally employed in these same

countries, that figure is only 57 percent. The relationship between employment and power seems particularly strong in the Arab States; more than half of the total countries (included only when they achieve statistical significance) in both figures are from the Arab States.

The key finding is that educating girls and empowering them in the labor market contributes to more equitable household decision-making in the long run. Many factors of women's empowerment interact, including education, employment, and decision-making, but none of these alone will achieve true equality in the home. For that, we must address the systemic and individual obstacles to men doing their full part at home as well.

FIGURE 19

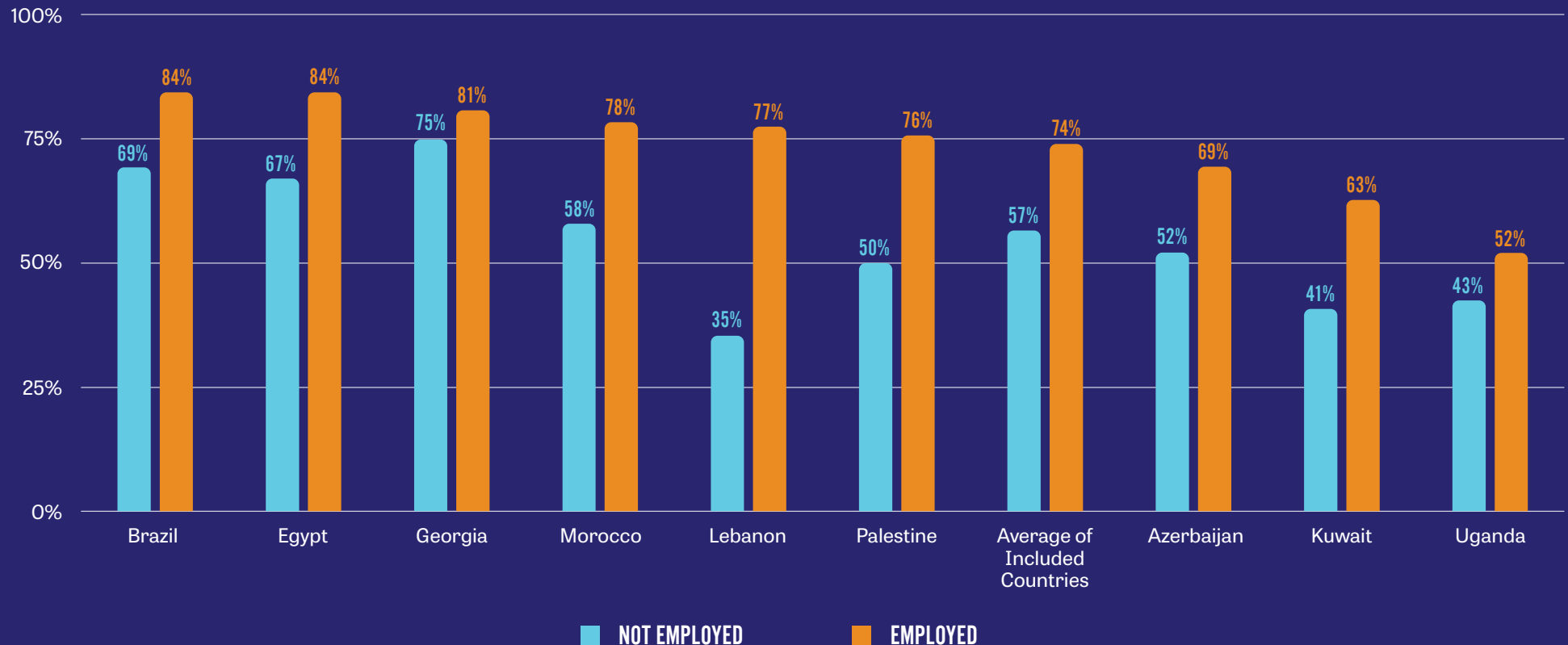
WOMEN'S EDUCATION LINKED WITH DECISION-MAKING POWER



Proportion of women reporting the “final say” on major household financial decisions is either shared equally or female-led, broken out by women’s educational attainment. The countries shown are only those for which this association meets the $p < .05$ significance level, and the “Average of Included Countries” line is calculated from these seven countries alone.

FIGURE 20

WOMEN'S EMPLOYMENT LINKED WITH DECISION-MAKING POWER



Proportion of women reporting the “final say” on household financial decisions is either shared equally or female-led, broken out by women’s formal employment status. The countries shown are only those for which this association meets the $p < .05$ significance level, and the “Average of Included Countries” is calculated from these nine countries alone.

HEADLINE 10

Men's and women's household division of labor is inequitable, but men often don't acknowledge this.

On average, women spend three to ten times as much time as men on unpaid care and domestic work, as noted earlier, independent of women's or their partners' employment status.³¹ COVID has reinforced women's domestic workload, in many cases obliging them to leave the paid labor force and certainly requiring them to engage simultaneously in caregiving and paid work from home.³² This ongoing inequality affects women's employment and is associated with their lower wages for the same work compared to men. The IMAGES surveys collect data on whether women and men perform the following (and many other) tasks: cleaning the house, preparing food, and washing clothes. The analysis shows that at least 90 percent (and generally closer to 100 percent) of women everywhere have participated in all three of these tasks.

In contrast to women's near-universal participation in this domestic work, Figure 21 shows, men's reports of participating in all three tasks are more limited. The global average shows that fewer than 50 percent of the men in IMAGES samples have participated in all three tasks and that 28 percent have never participated in any of them. Particularly striking is the fact that in El Salvador, India (India-2 only), Bangladesh, Uganda, Pakistan, Lebanon, Afghanistan, Morocco, Palestine, Kuwait, Azerbaijan, and Egypt, a higher share of men have never participated in any of the tasks than have participated in all three. In Pakistan, Afghanistan, Morocco, Palestine, Kuwait, Azerbaijan, and Egypt, more than half of men have never participated in any of them.

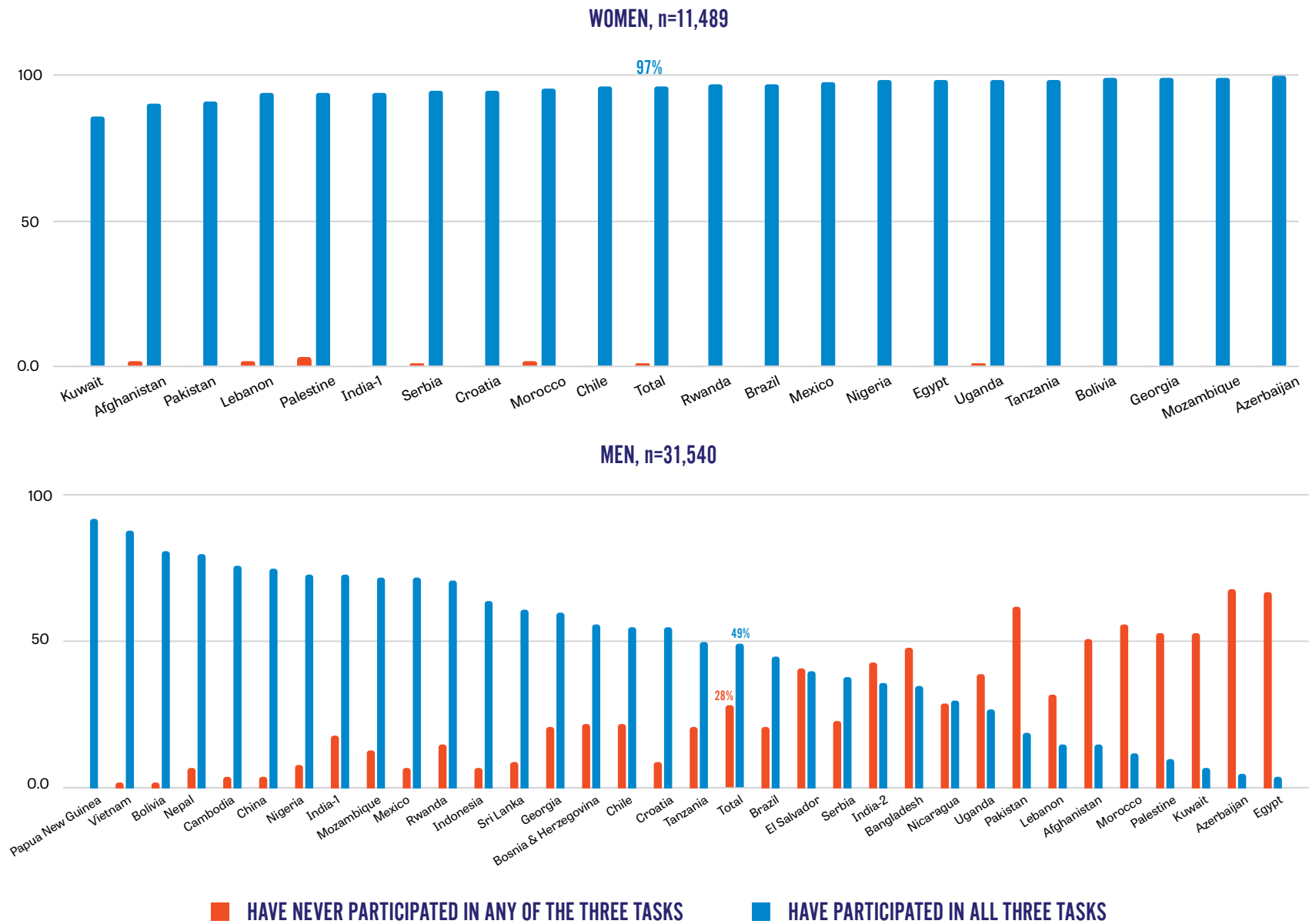
In addition, men and women tend to disagree about their respective contributions to the care of their children, with men generally

reporting more participation in this care work than women say men carry out. In every country where women's and men's data exist, the proportion saying that daily routine care of the child is "shared equally" is higher among men (see orange in Figure 22) than among women. Also notable is how rarely overall "always or usually him" appears. Daily, routine childcare is, by and large, seen as "women's work," even as change is slowly happening.

In addition, to the extent that men perform childcare tasks, there is a clear and gendered division of tasks that are performed primarily by women and primarily by men. Drawing on IMAGES data, we can conclude that men play with their children far more commonly than they bathe their children (see Figure 23). Despite considerable variation in the absolute and relative levels of engagement in these activities across regions, one pattern is clear: Men are consistently engaged in more playing and less bathing. The near-global challenge is how to implement policies and other social change to encourage and demand men share fully in all kinds of caregiving.

FIGURE 21

COOKING, CLEANING, AND LAUNDRY



The proportion of women (top half) and men (bottom half) who report having never participated in three “traditionally feminine” tasks (cleaning the house, preparing food, and washing clothes) in their lifetime and those who report having participated in all three.

FIGURE 22

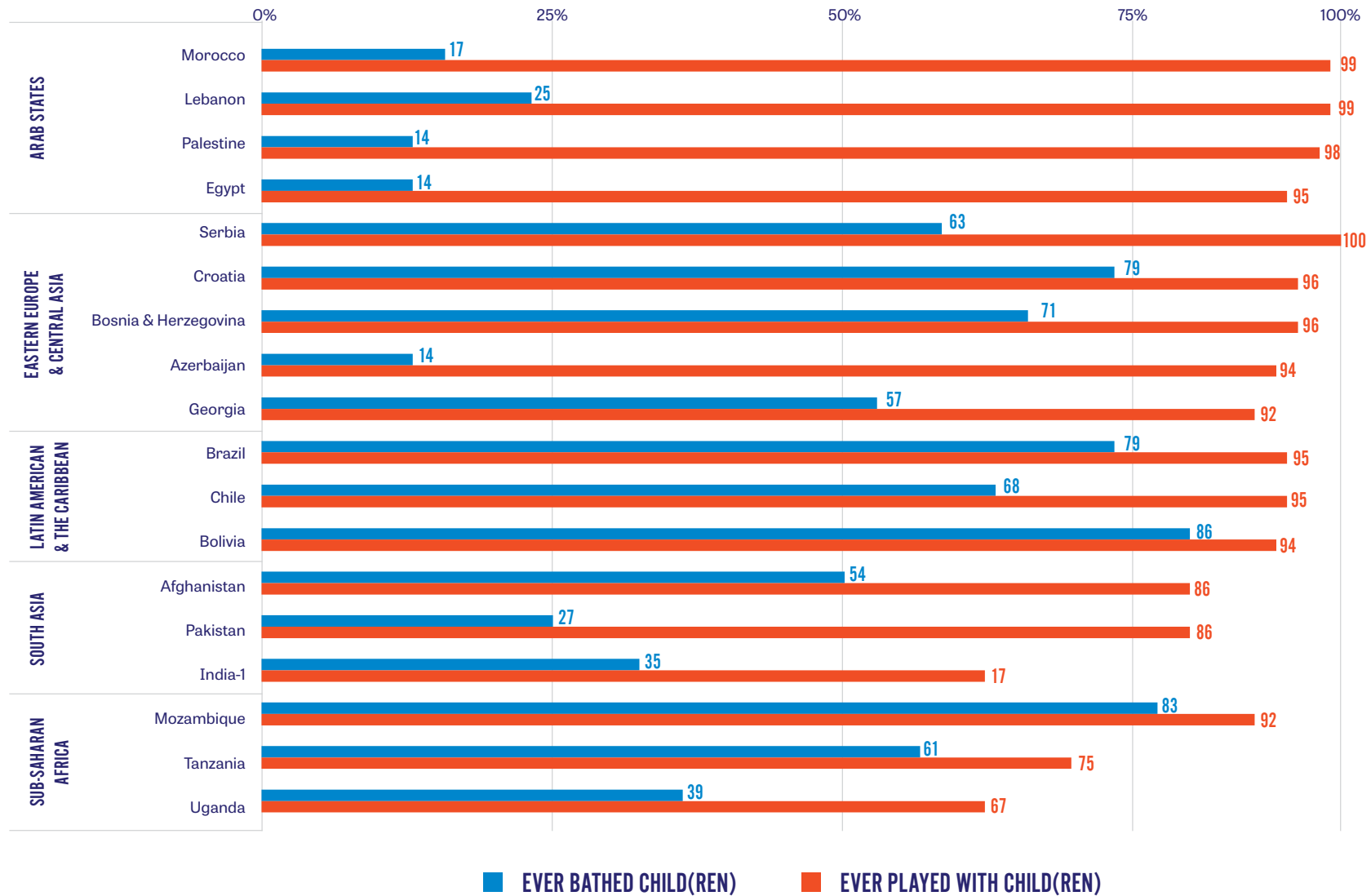
IS DAILY ROUTINE CARE OF CHILDREN “SHARED EQUALLY”?



Proportion of respondents with children reporting who primarily undertakes “daily routine care of the child.” Respondents were prompted to think of their current youngest child or the most recent time they had a child aged 0 to 4, and they could select “always or usually me,” “shared equally,” or “always or usually spouse.”

FIGURE 23

MAKING THE MESS VS. CLEANING IT UP



Proportion of fathers who report that they ever bathed their child(ren) and/or ever played with their child(ren)



VIOLENCE

HEADLINE 11

Many men exert power and control over women in their lives through multiple forms of violence.

Too many men exert undue power and control over the women in their lives, including and going beyond physical forms of violence. Studies on intimate partner violence have only recently begun to ask men about their perpetration of violence, and IMAGES has sought to help fill this gap in the evidence base, with an abundance of caution and with caveats. Survey data on intimate partner violence likely underrepresent the true prevalence of violence, owing to the sensitivity, shame, and even criminal law connected to these acts. And prevalence surveys do not pick up the most serious of cases: femicide and instances in which women and girls may sustain permanent injury rendering physical or mental disability.

IMAGES questions built on the years of developing questions with women that seek to reduce the stigma or fear of reporting having experienced violence. Similarly, IMAGES built on pioneering research into men's reports of gender-based violence in locations such as Gauteng Province, South Africa, in order to construct questions seeking to increase the likelihood that men would honestly respond about their perpetration of violence.³³ Women's responses present a useful point of comparison to other existing data sources on the prevalence of intimate partner violence in the study countries, and in most cases, are seen as reliable indicators of prevalence. IMAGES researchers always receive extensive safety and ethical training and practice prior to fieldwork, which is undertaken in accordance with best-practice standards of privacy, confidentiality, compassion, support, and safely distributing referral information for service providers in respondents' local areas.

IMAGES collects data on psychological, economic, physical, and sexual violence.³⁴ Of course, other forms also exist, including reproductive violence, and in recent years, technology-facilitated gender-based violence, in which bullying is permitted and amplified by devices and social media. Sexual violence is systematically the least reported form of violence by men, and the gap between women's greater reports of this form of violence is especially large in Tanzania, Uganda, Morocco, and Egypt (Figure 24). Marital rape figures importantly as a form of sexual violence that is commonly disavowed by men yet undermines women's physical and psychological well-being.³⁵

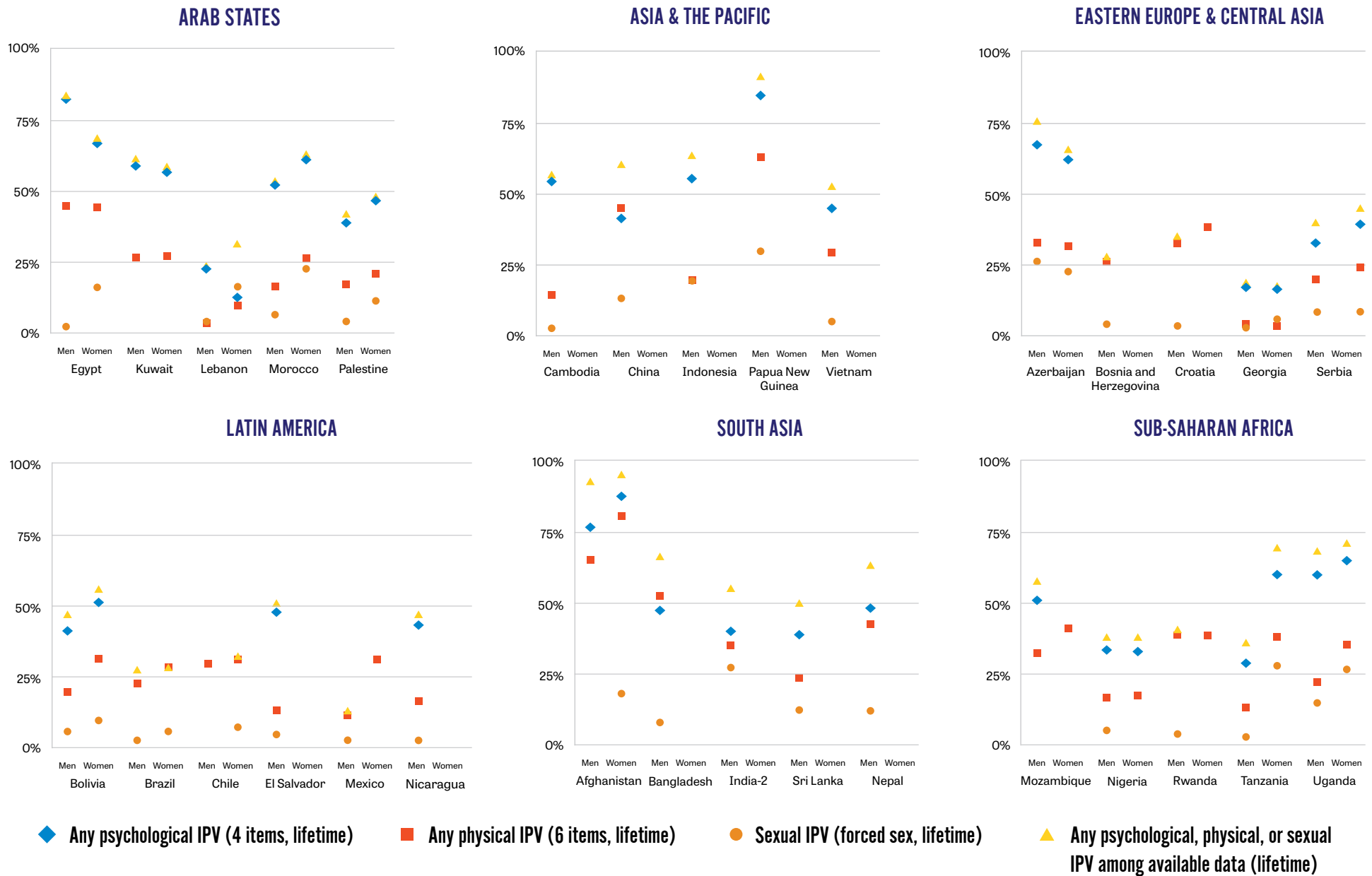
While overall rates of intimate partner violence differ among regions and countries, the overall picture points to the urgency of this issue. Men's use of many forms of intimate partner violence remains extremely high around the globe, and IMAGES data provide evidence that it is possible to assess the extent of men's use of violence by asking men themselves. Where data are available for both women and men, women generally, but not always, report having experienced higher levels of violence than men indicate they have perpetrated. The exceptions among the countries included here are Azerbaijan, Georgia, Egypt, and Kuwait. One explanation for this counterintuitive finding is that where violence is normalized and internalized, women may not even see it as violence but rather as a form of discipline they have "deserved."³⁶ In the case of Egypt, women report higher levels of sexual and economic violence, but men's much higher reporting of psychological violence "washes out" those results.

Lifetime psychological intimate partner violence	Lifetime physical intimate partner violence	Lifetime sexual intimate partner violence
<p>This refers to one or more lifetime experiences (women) or uses (men) of these acts:</p> <p>[He] has:</p> <ul style="list-style-type: none"> Insulted [her] or deliberately made [her] feel bad about [herself] Done things to scare or intimidate [her] on purpose, for example, by the way [he] looked at [her] or by yelling and smashing things Belittled or humiliated [her] in front of other people Threatened to hurt [her] or someone who is important to [her] 	<p>This refers to one or more lifetime experiences (women) or uses (men) of these acts:</p> <p>[He] has:</p> <ul style="list-style-type: none"> Slapped [her] or thrown something at [her] that could hurt [her] Pushed [her], cornered [her], or pulled [her] hair Hit [her] with a fist or with something else that could hurt [her] Kicked, dragged, or beat [her] Choked or burned [her] on purpose Threatened to use or actually used a gun, knife, or other weapon against [her] 	<p>This refers to one or more lifetime experiences (women) or uses (men) of this single act:</p> <p>[He] has:</p> <ul style="list-style-type: none"> Forced [her] to have sex with [him] when [she] did not want to

In men's questionnaires, "he/him" appears as "you" and "himself" as "yourself." In women's questionnaires, "she/her" appears as "you" and "herself" as "yourself."

FIGURE 24

REPORTED USE (MEN) AND EXPERIENCE (WOMEN) OF THREE FORMS OF IPV



HEADLINE 12

Violence leads to violence.

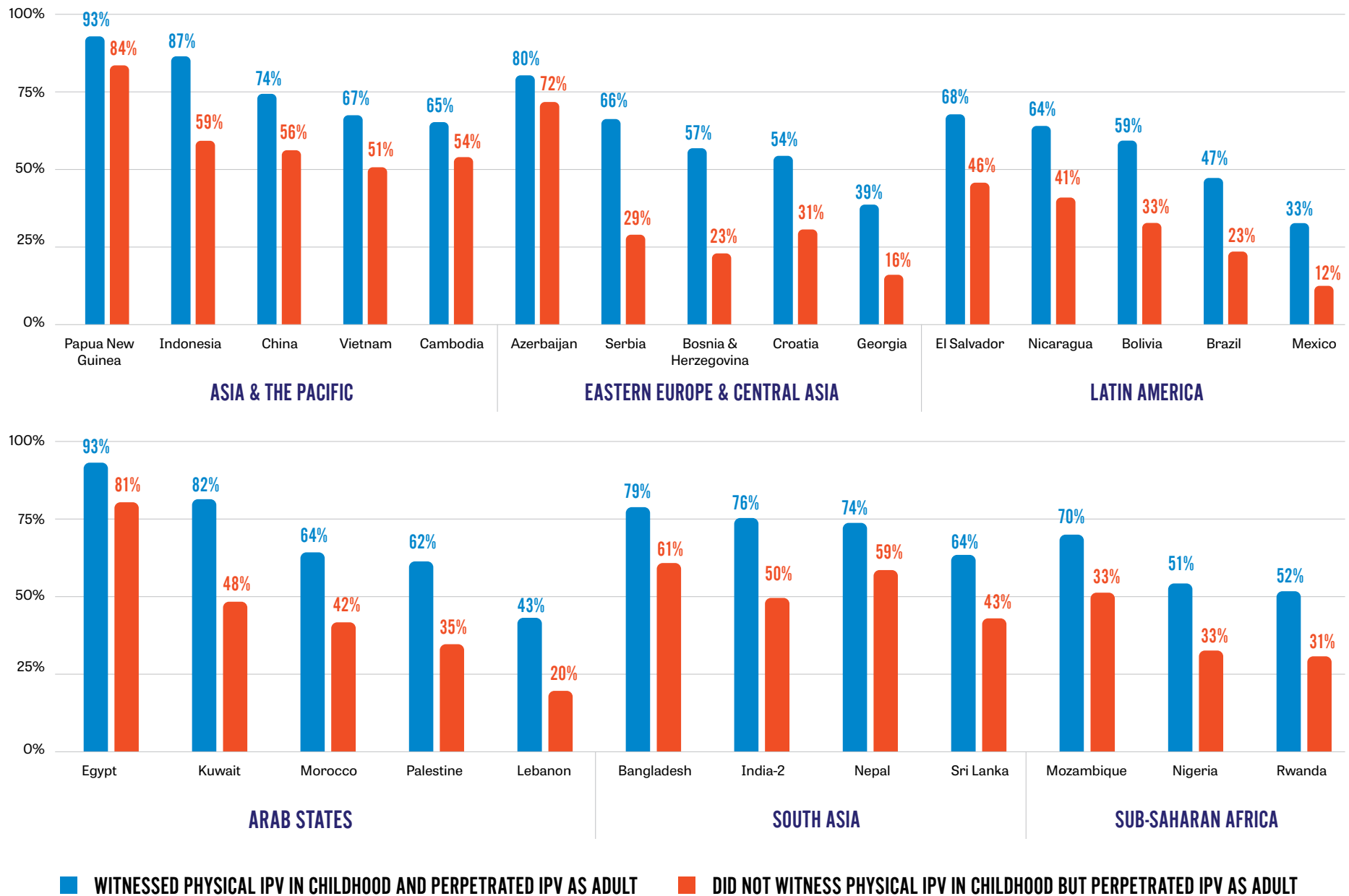
Existing research on the prevalence and nature of intimate partner violence, primarily with women-only samples, has long shown that witnessing violence against one's own mother during childhood is among the strongest, if not the single strongest, predictor of adulthood experiences of intimate partner violence. This holds true even in multivariate models accounting for several other key factors.³⁷ On the flip side, as presented earlier, seeing in childhood parents' positive examples (in the form of equitable relationships) can also improve respondents' attitudes and likelihood of participating in unpaid care and domestic work as adults. In sum, parental modeling works in a negative way with regard to violence, just as it works in a positive way with regard to engagement as a caregiver (by fathers) and work outside the home (by mothers).

For the analysis presented in Figure 25, IMAGES male respondents were sorted by whether or not they reported witnessing intimate partner violence by their father or another male figure against their mother. Then, the reported rates of using any form of intimate partner violence themselves were calculated separately for these two groups. In nearly all participating studies, this analysis shows a statistically significant link, whereby those who witnessed violence at home were much more likely to use violence in their own adult relationships. The figure shows the statistics for all 27 locations where this statistically significant link emerged. In some locations, men who witnessed violence as children have a likelihood of using intimate partner violence fully double that of those who did not witness this violence as children. This finding adds to the deep literature demonstrating the same unfortunate pattern for women, in which having observed violence against one's mother shows a strong link with one's own likelihood of

experiencing intimate partner violence as well. IMAGES data show that many men learn by example, normalizing as children men's violence against women and repeating the pattern later in life themselves.

FIGURE 25

LINKS BETWEEN WITNESSING VIOLENCE AS A CHILD AND PERPETRATING IPV AS AN ADULT



A close-up, low-angle shot of a person's face, focusing on the nose, mouth, and chin. The person has dark skin and is smiling, showing their teeth. The background is a soft, out-of-focus light blue.

**HEALTH AND
WELL-BEING**

HEADLINE 13

Though sexual and reproductive health and rights are often viewed as “women’s issues,” men are participating.

Although sexual and reproductive health tends to be viewed as women’s domain, the global data show that men are often supportive and active in decision-making about contraceptive use and antenatal visits, as well as in decision-making on and actions to terminate a pregnancy. They also are often present during labor and delivery. IMAGES includes four measures on these issues for both women and men (Figure 26). With regard to who has the final say in contraceptive decisions, women report 65 percent of those decisions are shared equally, while for men, this figure is 75 percent. However when the “shared equally” category is added to the response that she has the final say, the total is very similar: 86 percent for women and 85 percent for men. Similarly, looking at whether a male respondent – or a female respondent’s male partner – provided financial support for an abortion, 65 percent of women and 69 percent of men say he did.

There are, however, some important mismatches between women’s and men’s views. Where men’s and women’s responses appear to diverge most is in men’s physical presence for two important events. The first is whether he attended one or more antenatal care visits during the most recent pregnancy. Women report their partners were with them in the clinic for an antenatal visit significantly less often than men report having been there. Sixty-four percent of women report that their male partners accompanied them, while 78 percent of men report being present for one or more antenatal visits.

The divergence is similar regarding women’s and men’s reports

of where the man was during the last childbirth: Nine percent of women say that their male partners were in the delivery room, while 31 percent of men say this was the case. Even when the percentage reporting the man was elsewhere in the building is added to the percentage reporting his being in the delivery room, the divergent reports from women and men are not entirely reconciled. These two figures taken together equal 58 percent for women and 66 percent for men. Most importantly, 42 percent of women report their male partners were not present anywhere in the building, while 34 percent of men say they were not present.

Traditional gendered views about sex and reproduction contribute to poor sexual and reproductive health by impeding communication and creating unstated expectations and pressures. A look at men’s responses to three attitudinal questions related to sexual and reproductive health and rights shows some of the gendered expectations underlying this area. Men’s responses to “It is a woman’s responsibility to avoid getting pregnant” and “I would be outraged if my wife asked me to use a condom” vary considerably (Figure 27). At the same time, men around the world show high levels of agreement with the statement “Men need sex more than women do” – including more than half of men in 11 of the 20 countries for which data are available on this measure.

These gender-traditional attitudes about topics related to sexual and reproductive health and rights shape relationship dynamics. In Palestine, Lebanon, Uganda, and Tanzania, more than 30 percent of men who agree it is the *woman’s* responsibility to avoid getting

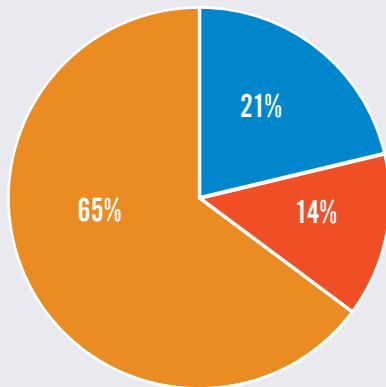
pregnant assert that contraceptive decision-making is *male*-led (Figure 28). This reflects the view apparently held by many men that men have decision-making power over women's bodies and women should comply with those decisions. On the flip side, men who take responsibility for pregnancy avoidance are less likely to report male dominance in contraceptive decision-making and implicitly show greater support for women's bodily autonomy.

FIGURE 26

MEN'S PARTICIPATION IN SRHR BEHAVIORS

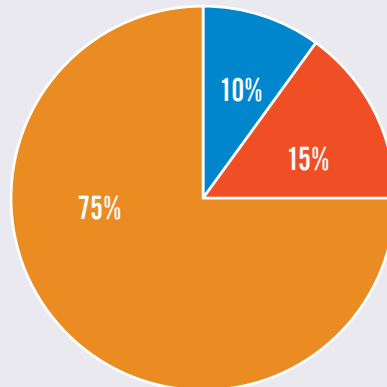
WHO HAS FINAL SAY IN CONTRACEPTIVE DECISIONS?

FEMALE RESPONDENTS N = 7,483



SHARED EQUALLY HER HIM

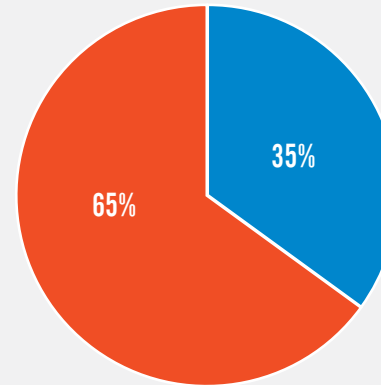
MALE RESPONDENTS N = 9,497



SHARED EQUALLY HER HIM

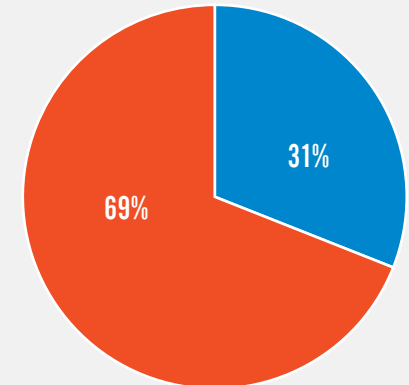
DID HE PROVIDE \$ FOR ABORTION?

FEMALE RESPONDENTS N = 787



NO YES

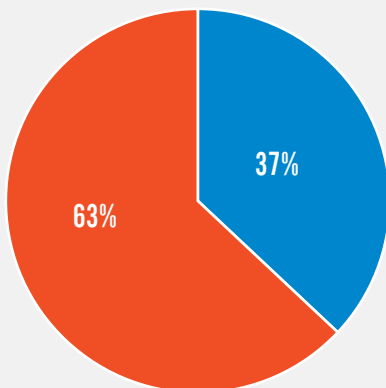
MALE RESPONDENTS N = 1,309



NO YES

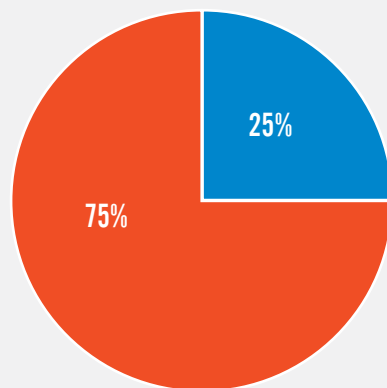
DID HE ATTEND 1+ ANC VISIT LAST PREGNANCY?

FEMALE RESPONDENTS N = 8,008



NO YES

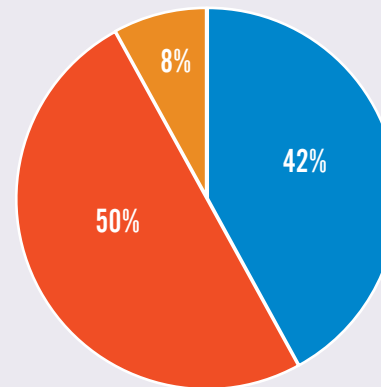
MALE RESPONDENTS N = 20,755



NO YES

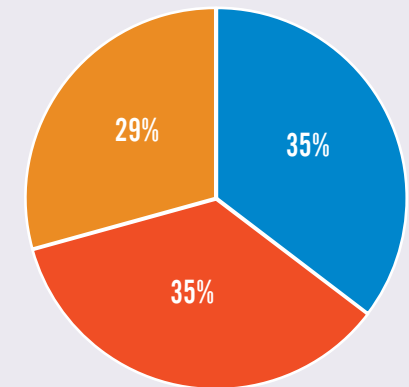
WHERE WAS HE FOR THE LAST CHILDBIRTH?

FEMALE RESPONDENTS N = 5,507



NOT PRESENT ELSEWHERE IN HOSPITAL* DELIVERY ROOM

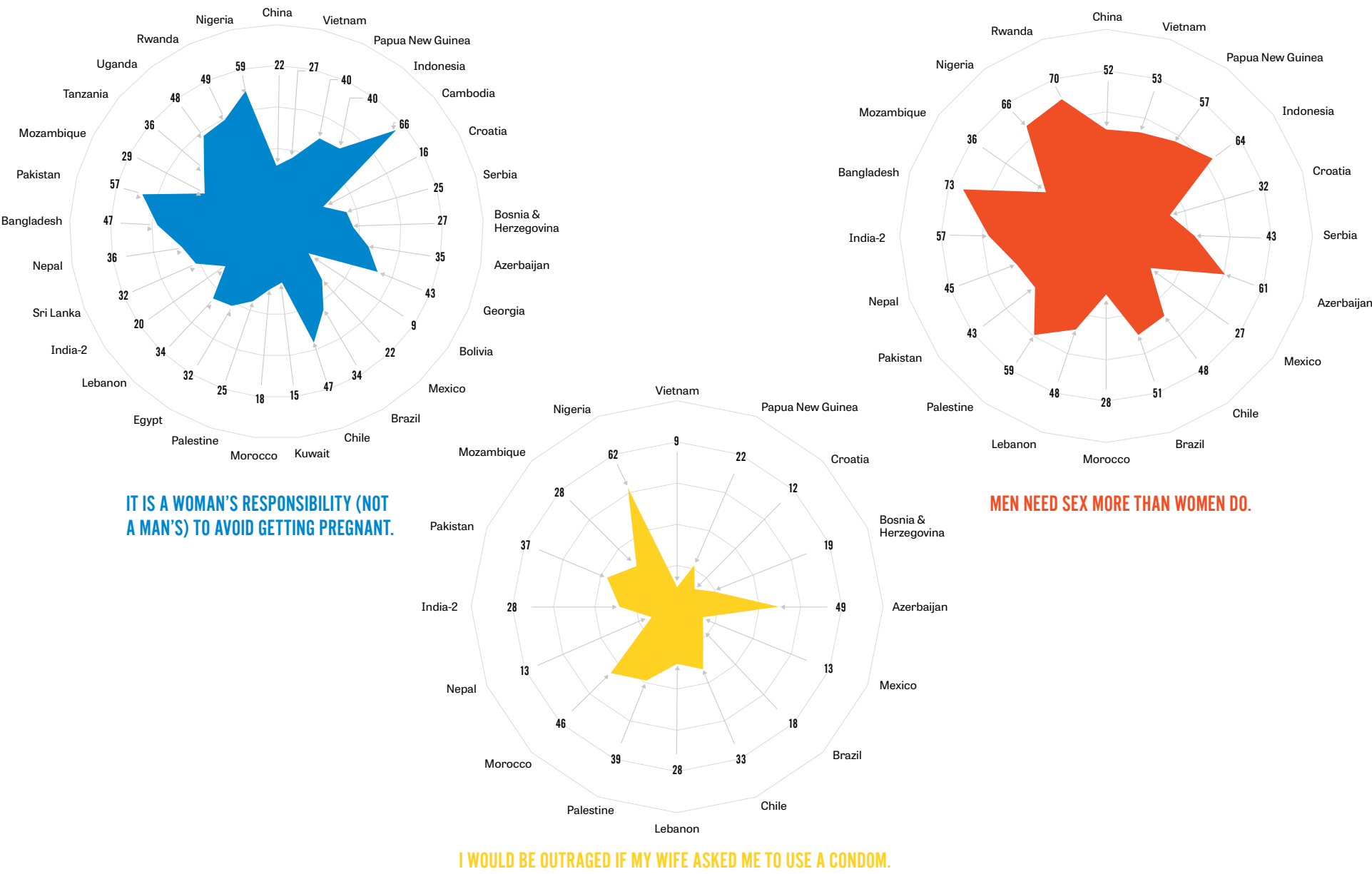
MALE RESPONDENTS N = 15,883



NOT PRESENT ELSEWHERE IN HOSPITAL* DELIVERY ROOM

FIGURE 27

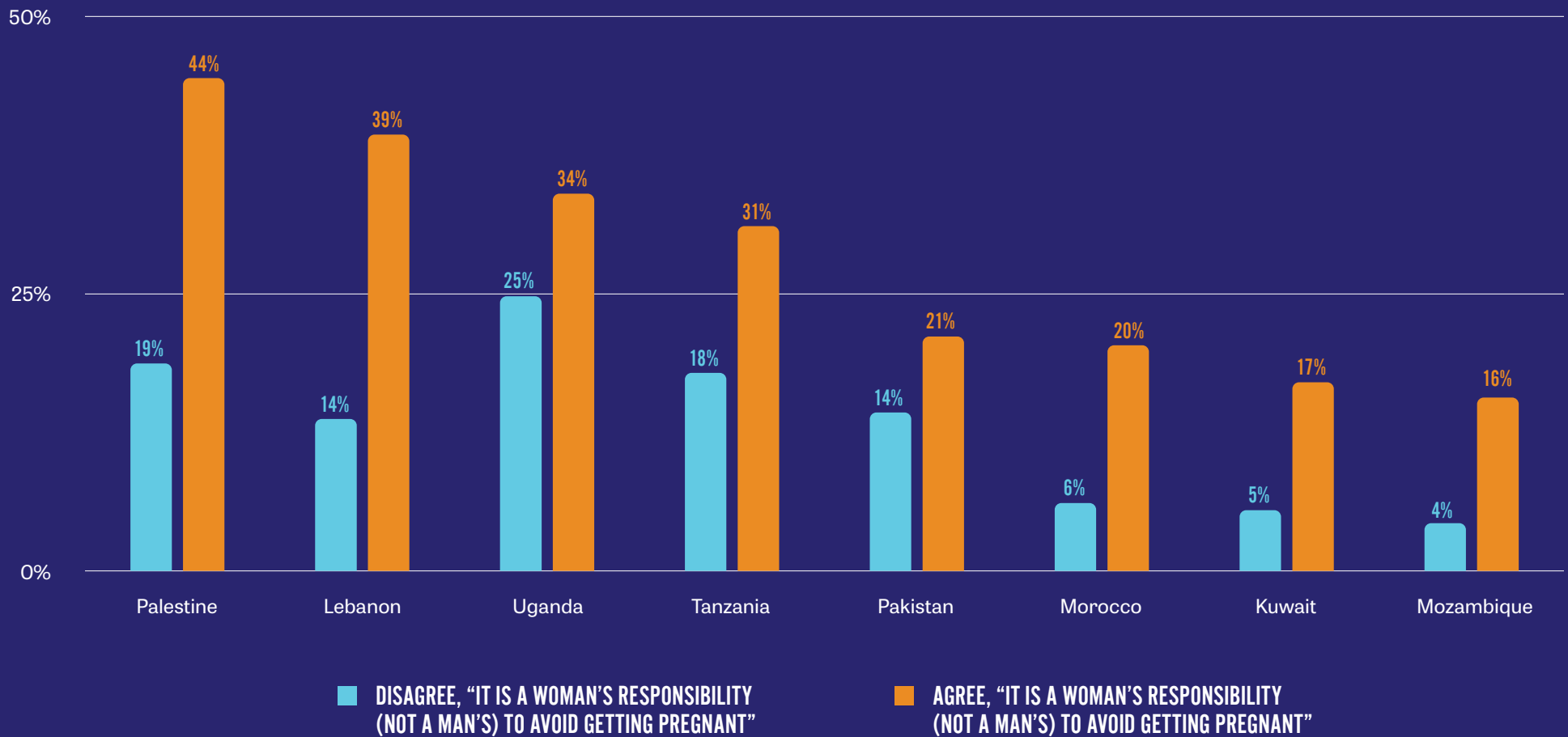
SEXUAL & REPRODUCTIVE HEALTH ATTITUDES



Proportion of men in each country listed who agree or strongly agree with the reproductive health statement in the middle of the diagrams.

FIGURE 28

DISJOINTED AND GENDERED DECISION-MAKING ON CONTRACEPTION



Proportion of male respondents who say decision-making on contraceptive use is male-led, broken out by male respondents' views on contraceptive responsibility. All data in this table are statistically significant at $p < .05$.

HEADLINE 14

Adhering to inequitable gender attitudes is bad for men's health.

Globally, numerous studies have shown a link between traditional masculinity and practices that are harmful to men's health, including risk-taking, substance abuse, and avoidance of seeking care.³⁸ In some societies, men are expected to remain strong and keep going even when they are sick or injured. This expectation makes men less likely to seek medical or other forms of help when they need it. Traditional masculinity can also drive men to take risks, and around three-quarters of global deaths from road crashes occur among boys and men. In various societies, masculine norms suggest that men should be knowledgeable and dominant in their sexual activities. These expectations encourage men to have multiple partners, avoid conversations about contraceptive use, drink alcohol, smoke, and maintain other unhealthy practices.

Country-specific gender attitudes were calculated together to determine each respondent's gender-attitude profile in relation to the mean value within their specific country context. Figures 29 and 30 show ten variables covered in the IMAGES surveys for the countries in this analysis. Measures of agreement with three dimensions—power, roles, and violence—were selected for the earlier analysis of attitudes because they are available across all countries. But as is clear from these figures, these three questions were a small subset of these amazingly rich data. Respondents' answers on every available gender equality survey item from Figures 29 and 30 were combined into a single scale score. For some countries, the scale was based on seven answers and for some ten. These scale scores were then divided into two groups: those with gender attitudes *more* restrictive than average and those with gender attitudes *less*

restrictive than average.³⁹ While this is a multicountry snapshot, it is important to keep in mind that the underlying gender attitude scale in each country was slightly different. The emphasis is on the *relative* restrictiveness of a given man's attitudes about gender compared to his peers.

The countries shown in Figure 31 are only those for which a statistically significant (chi-square) relationship emerged between gender-related attitudes and health behaviors. Several countries with similar trends that fell short of the significance threshold have been left out. A few analyses, marked with two asterisks, are ones for which the relationship moves in the opposite direction from the prevailing trend, also at a *statistically significant level*. By and large, however, there were strong associations in nearly all countries between men holding more restrictive gender norms and specific negative health outcomes.

Men with more restrictive gender attitudes engage in more binge drinking, with the association between more restrictive views of gender and more binge drinking being significant and remarkably consistent across Latin America and the Caribbean, Eastern Europe and Central Asia, and sub-Saharan Africa. Men with more inequitable attitudes are also more likely to report feelings of depression, as reflected in yes/no answers to the question, "Are you feeling down, depressed, or hopeless?" And some men with more traditional attitudes more frequently engage in poor health-seeking behavior: They often have not sought any health services for themselves within the past two years, a very low bar indeed. Yet these data show that there are other men for whom gender-traditional attitudes

are associated with greater likelihood of seeking out health care. This may reflect a prioritization of the self prevailing over the sense that a “real man” does not need to go in search of help with his health. The high number of countries for which the significance is the reverse of what was expected also indicates that attitudes are not the only driver of men’s poor health-seeking behavior; other important factors include men’s working lives (their exposures and the flexibility of their time) and the availability of health services.

FIGURE 29

GENDER ATTITUDES DEEP DIVE (MEN)

THEME	ITEM	ASIA & THE PACIFIC					EASTERN EUROPE & CENTRAL ASIA					LATIN AMERICA & THE CARIBBEAN					ARAB STATES					SOUTH ASIA					SUB-SAHARAN AFRICA						
		Cambodia	China	Indonesia	Papua New Guinea	Vietnam	Azerbaijan	Bosnia & Herzegovina	Croatia	Georgia	Serbia	Bolivia	Brazil	Chile	El Salvador	Mexico	Nicaragua	Egypt	Kuwait	Lebanon	Morocco	Palestine	Afghanistan	Bangladesh	India-2	Nepal	Pakistan	Sri Lanka	Mozambique	Nigeria	Rwanda	Tanzania	Uganda
Power	A man should have the final say about decisions in his home.	63	22	72	62	81	91	49	20	71	37	22	43	40	-	24	-	90	58	52	71	80	70	68	72	43	33	41	51	92	66	66	78
Roles	A woman's most important role is to take care of the home and look after the kids.	82	56	87	74	78	70	52	36	17	43	55	49	54	8	56	12	87	53	59	71	80	85	85	83	48	84	58	54	94	83	63	76
SRHR	It is a woman's responsibility (not a man's) to avoid getting pregnant.	66	22	40	40	27	35	27	16	43	25	9	34	47	-	22	-	32	15	34	18	25	-	47	20	36	57	32	29	59	49	36	48
Violence	There are times when a woman deserves to be beaten.	28	9	32	21	1	37	23	12	65	27	10	17	10	18	38	43	53	21	6	40	56	57	61	12	4	34	33	44	29	21	41	26
Zero-Sum	More rights/opportunities for women mean that men lose out.	-	-	-	-	-	26	11	5	13	24	6	-	8	22	-	19	33	29	24	41	35	55	-	-	-	86	-	12	-	-	21	54
Homophobia	I would be embarrassed if I had a homosexual son.	71	57	76	59	29	-	80	63	94	20	-	44	44	36	-	33	-	-	-	-	-	-	-	83	56	-	68	-	-	-	91	-
Femininity: Family Over Self	A woman should tolerate violence to keep the family together.	60	10	45	29	23	41	14	6	18	12	40	5	9	-	4	-	90	81	26	62	63	21	57	56	51	7	41	13	66	54	39	35
Femininity: Misogyny	Women are too emotional to be leaders.	-	-	-	-	-	55	-	-	-	-	48	-	-	25	-	31	-	45	45	42	67	66	-	-	-	58	-	-	-	-	-	
Masculinity: Toughness	To be a man, you need to be tough/ aggressive.	96	73	95	92	-	-	73	62	-	76	-	45	41	12	-	16	27	68	35	62	40	76	95	91	70	97	57	22	69	19	-	90
Masculinity: Hypersexuality	Men need sex more than women do.	-	52	64	57	53	61	44	32	-	43	-	51	48	-	27	-	-	-	48	28	59	-	73	57	45	43	-	36	66	70	-	-

Proportion of men in each country who agree or strongly agree with each statement.

FIGURE 30

GENDER ATTITUDES DEEP DIVE (WOMEN)

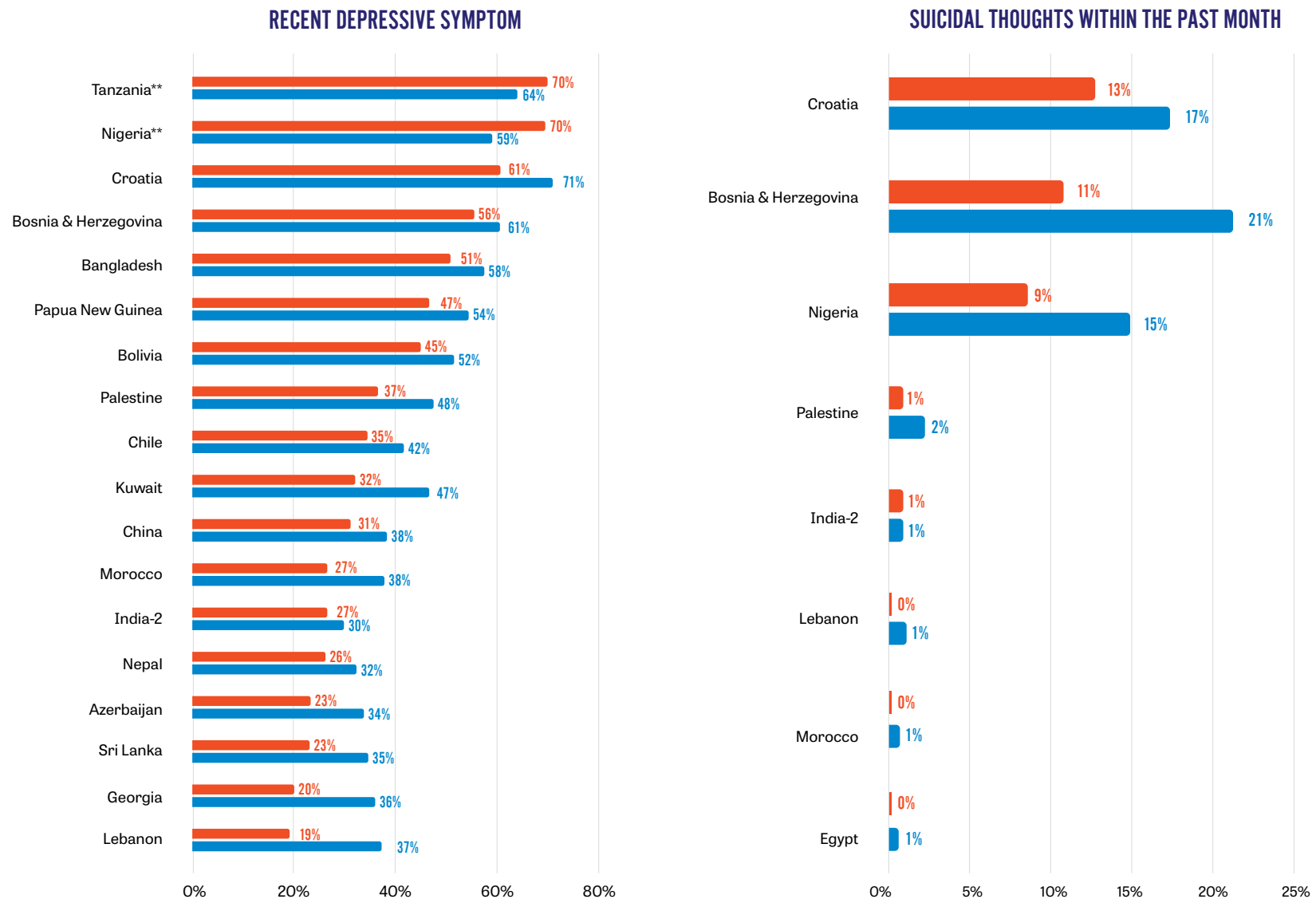
THEME	ITEM	EASTERN EUROPE & CENTRAL ASIA				LATIN AMERICA & THE CARIBBEAN				ARAB STATES					SOUTH ASIA			SUB-SAHARAN AFRICA				
		Azerbaijan	Croatia	Georgia	Serbia	Bolivia	Brazil	Chile	Mexico	Egypt	Kuwait	Lebanon	Morocco	Palestine	Afghanistan	India-1	Pakistan	Mozambique	Nigeria	Rwanda	Tanzania	Uganda
Power	A man should have the final say about decisions in his home.	75	1	34	13	21	28	27	14	58	21	31	47	48	37	–	71	45	89	78	52	60
Roles	A woman's most important role is to take care of the home and look after the kids.	41	13	23	29	62	37	50	59	77	29	46	49	59	41	29	81	59	96	92	70	80
SRHR	It is a woman's responsibility (not a man's) to avoid getting pregnant.	20	9	30	21	16	71	64	25	24	37	21	35	31	–	18	30	53	68	73	35	64
Violence	There are times when a woman deserves to be beaten.	29	4	14	8	10	9	8	3	33	9	5	21	26	27	41	14	13	28	20	22	26
Zero-Sum	More rights/opportunities for women mean that men lose out.	25	2	8	16	11	–	7	–	16	10	10	19	18	32	–	81	–	–	–	16	34
Homophobia	I would be embarrassed if I had a homosexual son.	–	40	80	35	–	31	64	–	–	–	–	–	–	–	38	–	–	–	–	91	–
Femininity: Family Over Self	A woman should tolerate violence to keep the family together.	35	2	10	7	48	6	7	2	71	22	14	46	50	18	43	4	19	71	68	44	35
Femininity: Misogyny	Women are too emotional to be leaders.	29	–	–	–	36	–	–	–	–	39	23	32	52	30	–	38	–	–	–	–	–
Masculinity: Toughness	To be a man, you need to be tough/aggressive.	–	26	–	64	–	40	22	–	23	4	31	57	21	57	42	29	–	53	18	–	–
Masculinity: Hypersexuality	Men need sex more than women do.	67	28	–	32	–	49	64	26	–	–	33	79	71	–	38	24	56	93	92	–	–

Proportion of women in each country who agree or strongly agree with each statement.

FIGURE 31

LINKING ATTITUDES TO HEALTH-RELATED BEHAVIORS

■ MORE EQUITABLE THAN AVERAGE ■ MORE RESTRICTIVE THAN AVERAGE

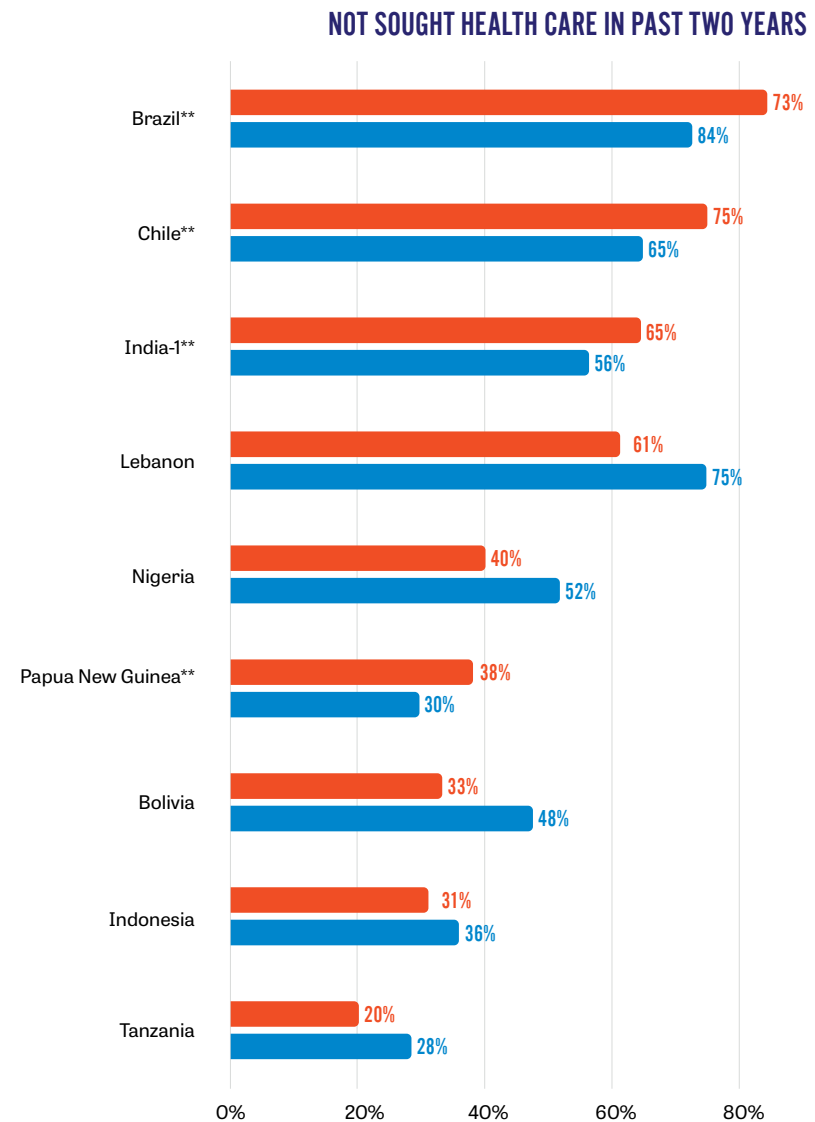
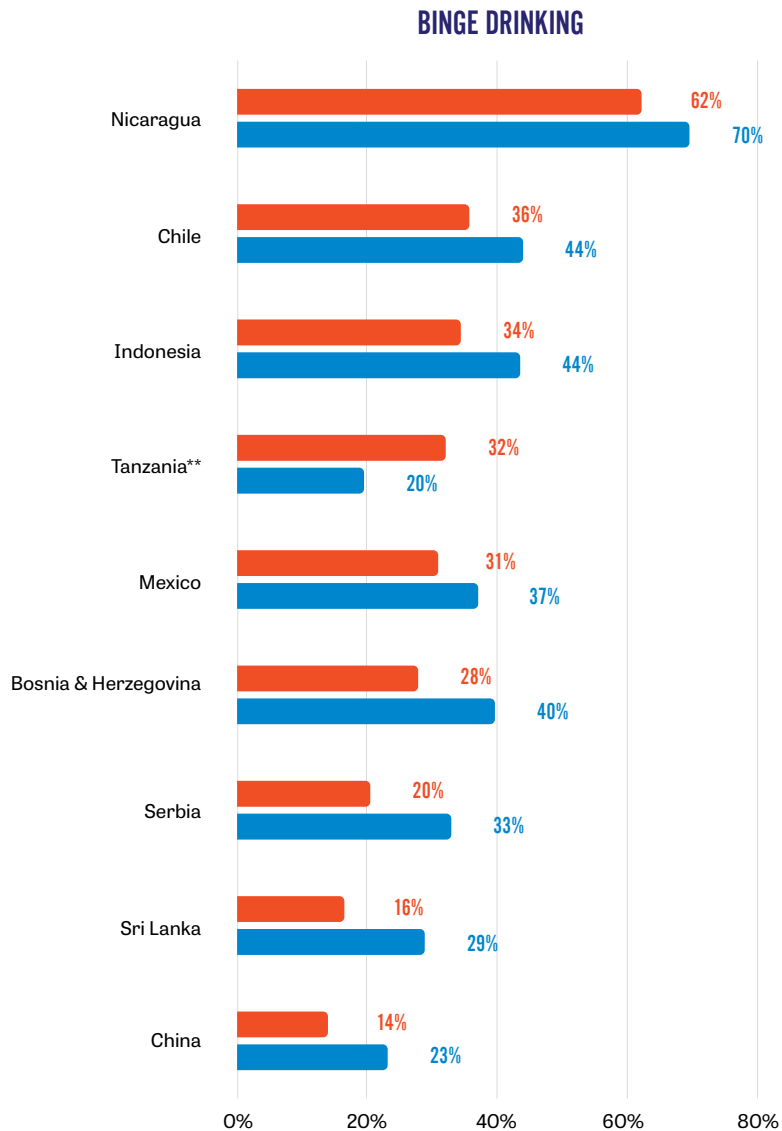


Drawing from men's data only, statistically significant associations between relative score on the longer gender attitude scale (see prior figures) - (1) recent self-reports of depressive feelings (not a diagnosis); (2) suicidal thoughts within the last month. Two asterisks (**) indicate the relationship moves in the opposite direction from the prevailing trend, also at a statistically significant level.

FIGURE 31 (CONT.)

LINKING ATTITUDES TO HEALTH-RELATED BEHAVIORS

■ MORE EQUITABLE THAN AVERAGE ■ MORE RESTRICTIVE THAN AVERAGE



Drawing from men's data only, statistically significant associations between relative score on the longer gender attitude scale (see prior figures) - (1) recent binge drinking, or having five to six drinks or more at least once a month; (2) not having sought health care for the past two years. Two asterisks (**) indicate the relationship moves in the opposite direction from the prevailing trend, also at a statistically significant level.

HEADLINE 15

Stresses and fears related to providing financially and protecting the family are widespread.

The expectations that men should be breadwinners are strong and pervasive. Men often pin their identities on this financial provider role, but in many economic circumstances, this is impossible. Men face pressures to conform to this role from peers and family, including intimate partners, and their ability to fulfill the role can determine their eligibility for marriage and their satisfaction and stability within that marriage. Men perceive this pressure to be providers even in divergent settings with financial crises, war, displacement, or high unemployment rates. Although the “provider” identity is expected of all men, structural forces outside their control often curtail their opportunities to fulfill the role.

The IMAGES survey includes a question to assess agreement with the statement “I am frequently stressed or depressed because of not having enough work or income.” While there is wide variation, the overall results show this “provider” identity stress is very common: 61 percent of men overall affirm this stress, and the rates are above 90 percent in Croatia, Bosnia and Herzegovina, Brazil, Nigeria, and Chile and extend as low as 17 percent in Kuwait. As a region, the Arab States (as represented in Figure 32) shows consistently lower work-related stress among men than other regions.

Yet when people from the region were asked whether they agreed with the statement “I worry about not being able to provide my family with daily life necessities,” at least 60 percent of both women and men responded affirmatively, with the exception of Kuwait (see Figure 33). While they may not have been stressed or depressed, men and women certainly feel the pressures of the role and worry

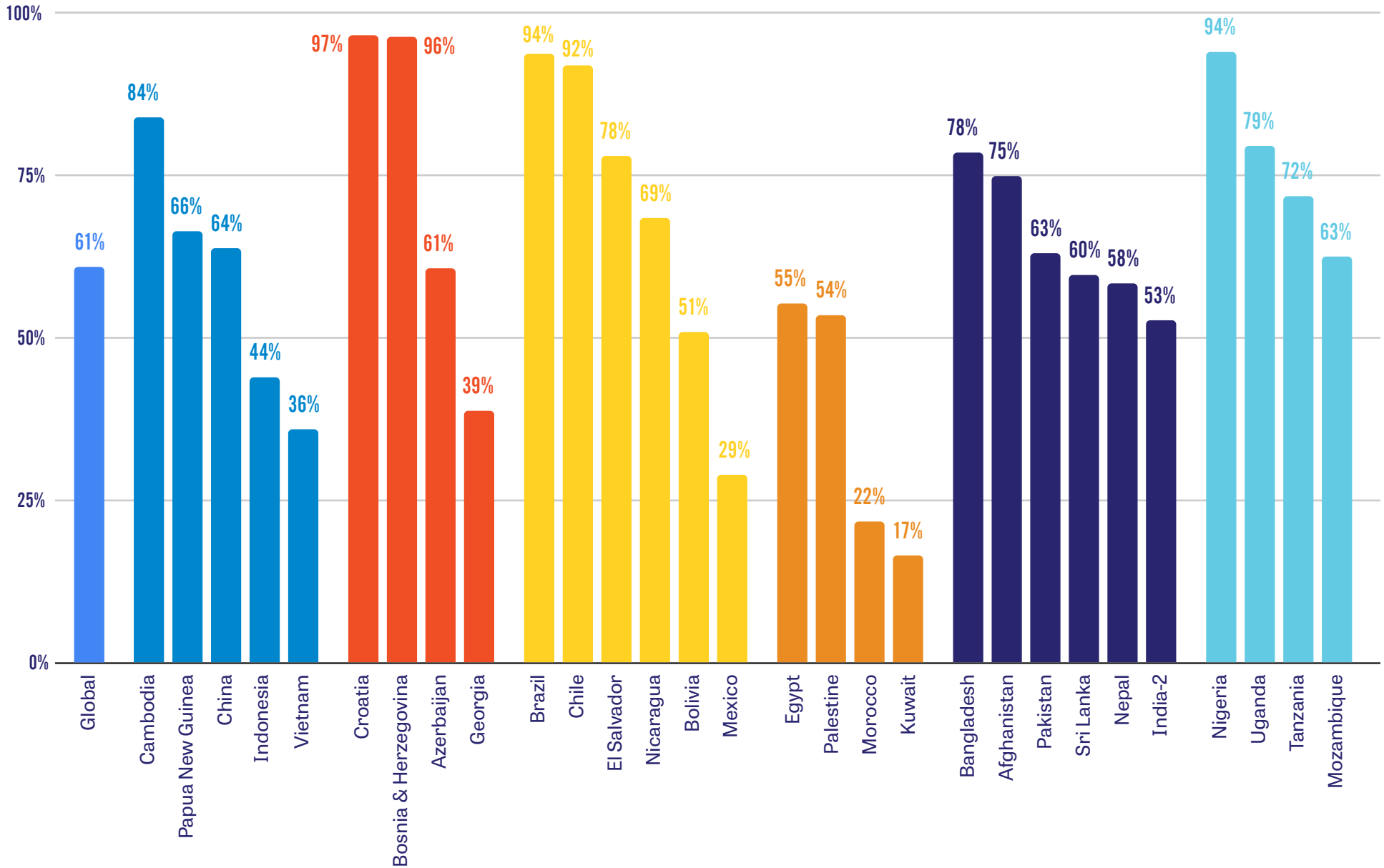
about their ability to fulfill it. Indeed, women in Lebanon and Egypt were more likely than men to agree with the statement on being worried about providing for their families.

A complementary aspect of traditional masculinity is that a man must be the “protector” of his family. IMAGES measures this by asking whether women and men agree with the statement “I worry about my family’s safety.” In the midst of active political or armed conflict, the forces that risk the safety and livelihood of men and their families go far beyond anything under individual control. For example, over 95 percent of men and women in Palestine and Lebanon express worry about their families’ safety.

War, economic instability, and other major structural factors continue to shape men’s lives in extremely diverse contexts and make it difficult for them to achieve their desired roles as providers. Figure 345 reports on the high percentages of men and their families exposed to direct conflict in seven disparate IMAGES countries. The experiences reported here highlight the impossibility of fulfilling traditional masculine roles under these circumstances. They also highlight the extent to which trauma is a reality in so many people’s lives. From personal experiences of physical violence cited by men in Afghanistan and El Salvador to witnessing killings and rape in Mozambique, Papua New Guinea, and Rwanda to active participation as combatants in Nicaragua and Serbia, conflicts have profoundly affected millions of men and women. There is little that they as individuals can do to alter the regional or global political and economic affairs that shape their lives.

FIGURE 32

STRESS RELATED TO THE EXPECTATION THAT MEN BE SOLE FINANCIAL PROVIDERS

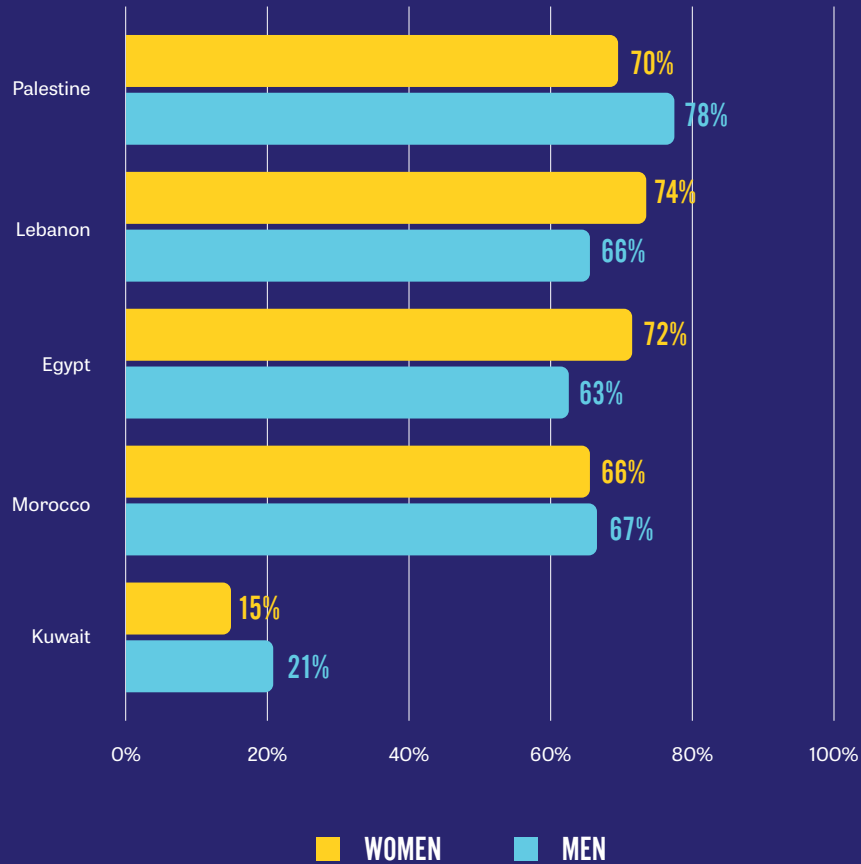


Proportion of men who agree or strongly agree with the statement “I am frequently stressed or depressed because of not having enough work or income” (or subtle variations on this language).

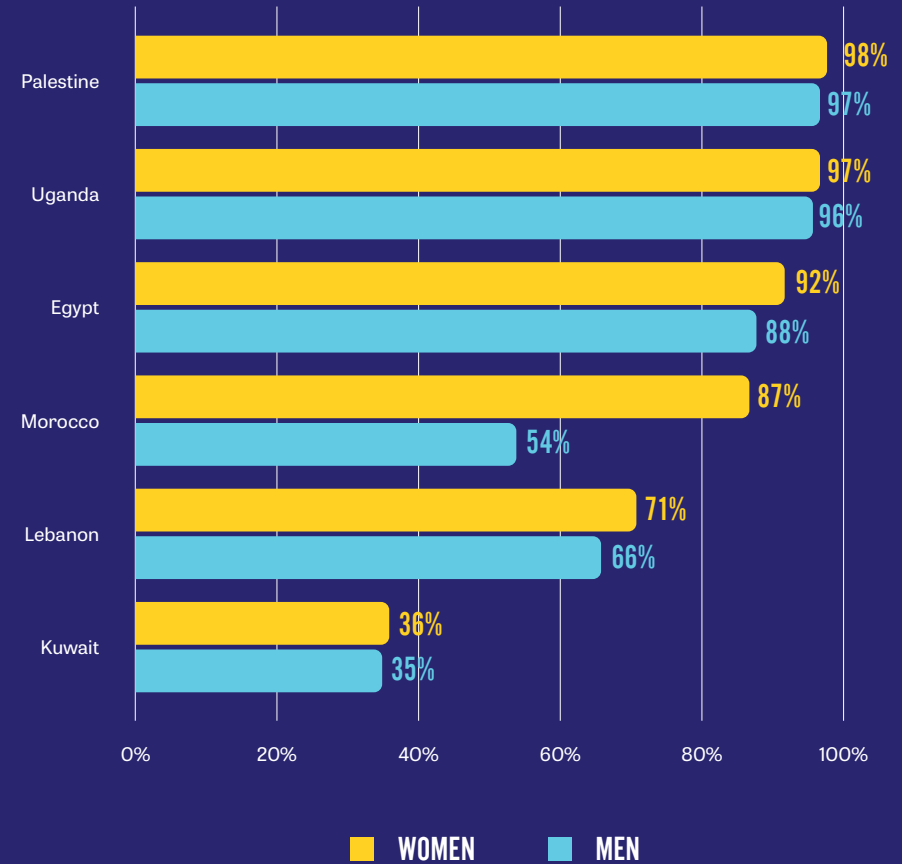
FIGURE 33

PROVIDER & PROTECTOR

"I WORRY ABOUT NOT BEING ABLE TO PROVIDE MY FAMILY WITH DAILY LIFE NECESSITIES."



"I WORRY ABOUT MY FAMILY'S SAFETY."



Proportion of women and men in select countries who agree or strongly agree with the statements "I worry about not being able to provide my family with daily life necessities" and "I worry about my family's safety."

FIGURE 34

PROPORTION OF RESPONDENTS IN CONFLICT-AFFECTED COUNTRIES WHO REPORT CERTAIN COUNTRY-SPECIFIC EXPERIENCES



Proportion of respondents in conflict-affected countries who report certain country-specific experiences.

WHAT IS NEXT

What Is Next? What Will It Take to Bring Men On Board as Full Allies in Gender Equality?

With more than 67,000 respondents from 32 countries over the past 12 years, IMAGES data provide insights on the inertia and barriers to engaging men in gender equality, as well as the opportunities for achieving true change. From these 15 headlines, the following emerge as key opportunities for action:

Masculinities are changing but are also constrained by larger political and structural influences.

The clear patterns across countries and regions suggest how much local, national, regional, and global cultural factors influence individual men and, thus, how important regional and national policies and circumstances are for achieving change. While IMAGES gathers data on individual men and women, their relationships, and their life trajectories, it is clear how much contextual factors – media, political realities, economic realities, broader social and gender norms, national policies, and the like – influence men's attitudes, practices, and relationships. In particular urgent action is needed at the local, national and international levels to push back against conservative, anti-feminist movements and voices in some settings by bringing young women and men on board with the full gender equality platform.

For all the changes in women's educational attainment and workforce participation and in legal changes to build gender equality into national policies, men and masculinities have been slow to change.

Men around the world continue to hold onto views that they should be providers and protectors and suffer considerable stress when they can't achieve traditional versions of working manhood. Furthermore, too many stubbornly cling to restrictive, inequitable views of themselves as making decisions for their families and female partners rather than as being collaborative, egalitarian members of the household. Many women also continue to hold restrictive, inequitable views about men and women, but they are also much more likely than men to question these views. The motor of women, especially younger ones, pushing for equality should be harnessed and supported to achieve the full promise of gender equality – including nudging the younger generation of men toward change.

Mothers, fathers, and households that are able to break away from gender stereotypes create change that paves the path forward to the next generation and represents a potential motor for faster movement toward equality.

Across settings and on multiple indicators, men who saw their fathers involved in domestic work or taking up egalitarian roles in household decision-making and who saw their mothers in the paid workforce tend to be more equitable and more involved in hands-on unpaid care and domestic work in their own households when they become adults. This somewhat obvious association means interventions that engage parents in raising their children in equitable ways are one of the keys to achieving individual and societal change.

Globally, boys and girls witness and experience multiple and overlapping forms of violence, which pays forward as one of the largest factors in men's use of violence as adults, particularly their use of violence against female partners.

This finding—consistent with other research on the intergenerational transmission of violence—in no way gives any man (or woman) an excuse for using violence. Instead, it reinforces how urgently violence prevention must involve both reducing violence against children in all its forms and also including unlearning violence and understanding and addressing the trauma associated with childhood experiences of violence as part of engaging men and boys in preventing intimate partner violence. Ending men's violence against their female partners requires understanding and preventing the violence that happens in boys' childhoods. These are not competing priorities but instead overlapping urgencies.

Men's health and well-being are harmed by restrictive norms related to gender roles and masculinities which provides a tremendous incentive for men to be allies in the progress toward healthy masculinity and gender equality.

A consistent association across diverse regions of the world is found between men holding rigid, restrictive views of manhood and their experience of poor mental and physical health. This finding in no way minimizes the agency, opportunities, and quality of life that are denied to women and girls because of restrictive gender norms, gender inequality, and misogyny. The finding that men have worse life outcomes if they hold gender-inequitable attitudes implies that achieving gender equality requires men to understand their stake in achieving healthy, connected, equitable, and nonviolent versions of manhood. It is in appreciating the harm of restrictive gender norms to men and to women that men can and must be drawn into the journey to gender equality.

From a research standpoint, existing and new national surveys should ask men and boys about their experiences of gender relations and power and about their attitudes on manhood with a particular lens on men who question inequitable and stereotypical versions of manhood.

IMAGES surveys have been comparatively small in most settings. The questions included in IMAGES should be incorporated into larger national, regional, or global surveys so that results can inform policymaking at higher levels. They should also be incorporated so that more stakeholders, including policymakers, can take into account men's resistance or support of gender equality, as well as expand efforts to engage men as allies for gender equality and in creating healthier versions of manhood for their own well-being.

The gaps in men's actions to achieve gender equality are evident, but men's support for gender equality provides opportunities to speed up change.

Many research efforts, policymakers, and policies assume that men are or will always oppose gender equality. And indeed, IMAGES results find huge gaps in men's actions for gender equality, whether in terms of their use of violence against female partners, their restrictions on the autonomy of their female partners, or their domination of household decision-making. But there are also numerous areas – often unrecognized – in which men are involved and their involvement could increase. This includes building on men's involvement in their children's education, men's frequent reports of playing with children and performing other caregiving roles, men's positive participation in contraceptive decision-making (and in abortion-related decision-making), and men's presence during prenatal visits and childbirth. While men should be doing these things at even higher levels, there is a sizable proportion of men in diverse settings already doing these things. The individual and social conditions that enable these positive, more equitable behaviors by some men can offer insights on how to engage more men in taking the urgent and necessary journey toward gender equality, full respect for the rights and autonomy of women and girls, and nonviolence. There is no single path toward men's equitable attitudes and behaviors, but there is much that can be learned from men in diverse settings who are on that path already.

WHAT IS NEXT

Call to Action

GOVERNMENTS

National ministries and policymaking bodies focused on gender equality should use IMAGES and other gender data to inform policy by increasing male allyship for equality.

IMAGES data provide detail on the diversity of men and specific ideas on how and where to engage them: from prenatal visits to sexual and reproductive health services to involvement in care work. IMAGES also provides clear measures of men's resistance to gender equality, such as regarding quotas for women in government or university settings. These areas of resistance offer guidance on how to target campaigns and messaging to men. Several national policies were developed in response to IMAGES findings:

In Brazil, data supported advocacy for a national men's health sector within the Ministry of Health and a specific men's prenatal health protocol and online training modules for primary health providers. That program has now existed for more than ten years and has shown impact in terms of men's participation in prenatal visits and men's own seeking of primary health services as a result of being "recruited" into the national public health system via prenatal visits. IMAGES results in Brazil showing that men were going to prenatal visits in large numbers were shared with health ministry officials in Brazil and helped spur the discussions about how to use that positive participation as a point of entry for men into the health system.

In Chile, data on men's participation in prenatal visits and in childbirth were similarly shared with officials in early childhood development and supported the ongoing work to engage men in early childhood development efforts.

National governments should carry out scans and reviews of their policies on ways to engage men and boys in promoting gender equality.

Such scans should look at policies and initiatives related to health (including sexual and reproductive health), caregiving, violence prevention, employment, political participation, education, and more. IMAGES data affirm many opportunities within these sectors where men could be more engaged. Some specific areas, such as prenatal visits, would be easy first steps toward men's engagement.

Efforts to promote real change in social and gender norms through a gender-transformative approach should be integrated across sectoral policies, from health sectors, to education and employment ministries.

Seeking to promote positive masculinities, these efforts should go beyond merely engaging men. This work takes time, effort, expertise, and the explicit intention to change those norms, shift opportunities, and build resources and agency for women and girls.

- Comprehensive sexuality education offers a critical opportunity for young men and young women to learn about equality, respect,

consent, and so on. The IMAGES data highlight how much needs to be done to encourage men to play a more active and supportive role in sexual and reproductive health and rights.

- Parental leave policies and early childhood policies should also look at ways to engage men from the start in equitable care of young children.
- Ministries of education and local education bodies should implement campaigns and curriculum reform to promote healthy, equitable ideas of manhood to boys starting at early ages.

UNITED NATIONS SYSTEM AND DONORS

All United Nations agencies and international donors should include policies and concrete actions for engaging men in gender equality, building those actions into existing funding streams, and assessing movement toward that goal.

The questions and items used in IMAGES provide specific ideas of how change can be measured in terms of attitudes, behaviors, and life outcomes.

Far more needs to be done to support international agreements, national policies, national campaigns, and actions within existing international development platforms to encourage men to lean into a more gender-just world.

Many existing platforms assume either that men's change is too slow to make a difference or that men will not change. Other calls for action, such as those calling on men to do more care work, lack specific goals and targets. Sometimes, the focus is on “men as champions,” highlighting the actions or words of a few men rather

than the widespread policy and structural change necessary. Drawing on existing successes, such as HeforShe is an important first step.

United Nations agencies and other international bodies that carry out or support regular household surveys and other data collection should include measures of men's attitudes and behaviors, including some of the items from IMAGES, in their instruments.

Over more than a decade, IMAGES results have affirmed that it is both possible and strategic to assess men's acceptance or resistance to gender equality policies.

The United Nations system and donors can play a leading role in promoting a positive framing of gender-equitable masculinities, going beyond the idea of a zero-sum game when discussing the role of men in gender equality.

Some discussions in United Nations meetings have suggested that attention to men detracts from or takes resources away from women and girls. The IMAGES data have affirmed the importance of taking a “both/and” approach to gender equality, recognizing the relational nature of gender dynamics and the harms to everyone of rigid or discriminatory gender attitudes.

CIVIL SOCIETY ORGANIZATIONS

IMAGES data can support civil society organizations in their programmatic actions by providing a stronger evidence basis for their work and providing potential indicators of impact. The work to engage men as allies in gender equality has largely been led by a host of dynamic, creative, and visionary civil society organizations. The MenEngage Alliance, the global network of male allyship organizations, currently has more than 1,000 member organizations and numerous regional networks, each of which is addressing the specific challenges and contexts of their respective geographies. Civil society organizations such as these, informed by IMAGES data, can in turn support governments in integrating stronger social change components into sectoral programs in health, employment, education, agriculture, and so on, as well as use measures from IMAGES as potential indicators of impact.

Programs should use IMAGES data to better understand where and how men can be engaged in gender equality and to resist backlash movements. The survey data are also a powerful source of information on the overall resistance and specific sticking points in progress toward gender equality. Many civil society organizations (including those working on women's rights, reproductive rights, and LGBTQIA+ rights, among others) have experienced recent pushback, whether socially or politically, on efforts working toward equality. This pushback often takes the form of directly defending and championing a traditionalist view of the world as a "zero-sum game" that is "men versus women," which IMAGES data can powerfully rebut in many cases. Data alone are not sufficient to fully curtail the powerful opponents of gender equality and full human rights, but they can provide powerful material for campaigns demonstrating that a more gender-equal world is both good for all genders, families, societies, and economies and is necessary for the well-being and rights of all.

RESEARCH COMMUNITY

We continue to need more, and better, research on men's relationship with gender equality in policy and practice.

The tremendous growth in research on men and masculinities in recent decades shows a greater maturity in the gender equality field, which is increasingly recognizing and addressing the relational aspects of gender, in which everyone plays a role. IMAGES seeks to provide ways to standardize and compare men's attitudes, practices, and life outcomes across settings. As challenging and imprecise as that can be, these efforts are useful for painting a more complete picture of how gender is lived by women and men, particularly when triangulated with qualitative research. Chiefly, IMAGES seeks to show the dynamic nature of relationships, and of men's attitudes and behaviors, and to present the plurality of men. In short, it sees men and masculinities not as "frozen pictures" stuck in patriarchal, inequitable norms, behaviors, and systems but as mutable, dynamic, and complex.

Research should go beyond polls and surveys to also explore the nuanced lived realities of gender (particularly among nonbinary and marginalized identities and groups) and the effectiveness or shortcomings of efforts to advance equality.

More qualitative and operational research is needed that is designed to specifically help programmers and policymakers understand the diversity of experiences of gender, as well as which intervention or campaign approaches are most promising.

PRIVATE SECTOR

The private sector has an important role to play in developing institutional cultures that permit employees of all genders to engage more fully with family life.

The insights from IMAGES suggest that some key aspects of this institutional culture include the need to:

Offer men the flexibility they need to provide unpaid care to their children and spouses;

- Convey the expectation that men will play a role in health, including sexual and reproductive health and rights, and carry through on this with information about services, the time to access them, and the insurance to cover the costs involved;
- Communicate to staff that gender-based violence, including workplace sexual harassment, is always unacceptable and provide workplace-based workshops and training on violence prevention; and
- Offer high-quality counseling and support services, including opportunities to discuss the role that masculinity plays in making some aspects of life more challenging at times.

Endnotes

1. United Nations Population Fund. (2022). World Population Dashboard. <https://www.unfpa.org/data/world-population-dashboard>; United Nations Population Fund. (2020). Women's ability to decide: Issue Brief on Indicator 5.6.1 of the Sustainable Development Goals. <https://www.unfpa.org/resources/womens-ability-decide-issue-brief-indicator-561-sustainable-development-goals>
2. Ross, J., & Hardee, K. (2017). Use of male methods of contraception worldwide. *Journal of Biosocial Science*, 49(5), 648–663. <https://doi.org/10.1017/S0021932016000560>
3. "Caregiving" and "care work" refer to the care of children, older adults, people with disabilities, or ill family members in the home setting. "Paid care work" and "paid caregiving" refer to care provided in the context of work, payment, or as a profession. "Domestic work" refers more specifically to cleaning, food preparation, and similar tasks that are related to care work.
4. Addati, L., Cattaneo, U., Esquivel, V., & Valarino, I. (2018, June 28). Care work and care jobs for the future of decent work. International Labour Organization. http://www.ilo.org/global/publications/books/WCMS_633135/lang-en/index.htm
5. World Health Organization. (2019, March 20). 10 key issues in ensuring gender equity in the global health workforce. <https://www.who.int/news-room/feature-stories/detail/10-key-issues-in-ensuring-gender-equity-in-the-global-health-workforce>
6. Barker, G., Garg, A., Heilman, B., van der Gaag, N., & Mehaffey, R. (2021). State of the World's Fathers: Structural solutions to achieve equality in care work. Washington, DC: Promundo-US. <https://www.equimundo.org/resources/state-of-the-worlds-fathers-2021/>; Charmes, J. (2019, December 19). The unpaid care work and the labour market: An analysis of time use data based on the latest world compilation of time-use surveys. International Labour Organization. http://www.ilo.org/gender/Informationresources/Publications/WCMS_732791/lang-en/index.htm
7. IPU Parline. (2022, March 1). Global and regional averages of women in national parliaments. Inter-Parliamentary Union. <https://data.ipu.org/women-averages>
8. Ruxton, S., & Burrell, S. R. (2020). Masculinities and COVID-19: Making the connections. Washington, DC: Promundo-US. <https://www.equimundo.org/resources/masculinities-and-covid-19-making-the-connections/>
9. O'Donnell, M. (2020, November 24). Preventing a "return to normal": Addressing violence against women during COVID-19. Center for Global Development. <https://www.cgdev.org/blog/preventing-return-normal-addressing-violence-against-women-during-covid-19>
10. Heise, L., Greene, M. E., Opper, N., Stavropoulou, M., Harper, C., Nascimento, M., & Zewdie, D. (2019). Gender inequality and restrictive gender norms: Framing the challenges to health. *The Lancet*, 393(10189), 2440–2454. [https://doi.org/10.1016/S0140-6736\(19\)30652-X](https://doi.org/10.1016/S0140-6736(19)30652-X); Ragonese, C., Shand, T., & Barker, G. (2019). Masculine norms and men's health: Making the connections. Washington, DC: Promundo-US. <https://www.equimundo.org/resources/masculine-norms-and-mens-health-making-the-connections/>; Heilman, B., & Barker, G. (2018). Masculine norms and violence: Making the connections. Washington, DC: Promundo-US. <https://www.equimundo.org/resources/masculine-norms-violence-making-connections/>
11. Rafaeli, T., & Hutchinson, G. (2020). The secondary impacts of COVID-19 on women and girls in Sub-Saharan Africa (K4D Helpdesk Report 830). Brighton, UK: Institute of Development Studies. <https://opendocs.ids.ac.uk/opendocs/handle/20.500.12413/15408>
12. Bolis, M., Parvez, A., Holten, E., Mugehera, L., Abdo, N., & Moreno, M. J. (2020, June). Care in the time of coronavirus: Why care work needs to be at the centre of a post-COVID-19 feminist future. Oxfam. <https://policy-practice.oxfam.org/resources/care-in-the-time-of-coronavirus-why-care-work-needs-to-be-at-the-centre-of-a-po-621009/>; Heilman, B., Castro Bernardini, M. R., & Pfeifer, K. (2020). Caring under COVID-19: How the pandemic is – and is not – changing unpaid care and domestic work responsibilities in the United States. Oxfam, Promundo-US, & MenCare. <https://www.equimundo.org/resources/caring-under-covid-19-how-the-pandemic-is-and-is-not-changing-unpaid-care-and-domestic-work-responsibilities-in-the-united-states/>
13. While two separate surveys were conducted in India, the second is the one used in this analysis.
14. Classifications by region mostly, though not entirely, match regional groupings used by the United Nations Population Fund (UNFPA) (see <https://unfpa.org/worldwide>). This analysis diverges from UNFPA's system in combining East and Southern Africa and West and Central Africa into a single region – sub-Saharan Africa – and in dividing UNFPA's Asia and the Pacific into two regions: South Asia and East Asia and the Pacific. Countries in Latin America and the Caribbean, the Arab States, and Europe and Central Asia are presented in the identical regional grouping to UNFPA's standard classification.
15. United Nations Educational, Scientific and Cultural Organization. (2011). International Standard Classification of Education: ISCED 2011. <http://uis.unesco.org/sites/default/files/documents/international-standard-classification-of-education-isced-2011-en.pdf>
16. The World's Women 2020: Trends and Statistics online portal is the result of the collective effort of a wide range of contributors from around the world, under the leadership of the United Nations Statistics Division, a division of the Department of Economic and Social Affairs.
17. For more exploration of care work in respondents' adult homes, see Headline 10.
18. United Nations Children's Fund. (2014). Hidden in plain sight: A statistical analysis of violence against children. <https://www.unicef.org/reports/hidden-plain-sight>; United Nations. (1993). Declaration on the elimination of violence against women (General Assembly Resolution 48/104). <https://www.ohchr.org/sites/default/files/eliminationvaw.pdf>

19. Kumari, V. (2020). Emotional abuse and neglect: Time to focus on prevention and mental health consequences. *The British Journal of Psychiatry*, 217(5), 597–599. <https://doi.org/10.1192/bjp.2020.154>
20. Shiva Kumar, A. K., Stern, V., Subrahmanian, R., Sherr, L., Burton, P., Guerra, N., Muggah, R., Samms-Vaughan, M., Watts, C., & Kapoor Mehta, S. (2017). Ending violence in childhood: A global imperative. *Psychology, Health & Medicine*, 22(supp.1), 1–16. <https://doi.org/10.1080/13548506.2017.1287409>
21. World Health Organization. (2020). Global status report on preventing violence against children 2020. <https://apps.who.int/iris/handle/10665/332394>
22. Guedes, A., Bott, S., Garcia-Moreno, C., & Colombini, M. (2016). Bridging the gaps: A global review of intersections of violence against women and violence against children. *Global Health Action*, 9(1). <https://doi.org/10.3402/gha.v9.31516>
23. World Health Organization. (2020). Global status report on preventing violence against children 2020: Country profiles. <https://www.who.int/teams/social-determinants-of-health/violence-prevention/global-status-report-on-violence-against-children-2020/gsrpvac-country-profiles>
24. Haywood, C., Johansson, T., Hammarén, N., Herz, M., & Ottemo, A. (2017). *The conundrum of masculinity: Hegemony, homosociality, homophobia and heteronormativity*. Routledge.
25. As noted previously, the IMAGES core questionnaire includes questions on sexual identity and sexual activity of all kinds. However, heteronormativity and homophobia are so widespread that questions about homosexuality were not asked in many settings due to concerns about cultural sensitivities and potential political opposition (see the introduction for a more detailed discussion on the process and considerations around these questions' inclusion). It is likely that the fear of discussing or revealing sexual orientation has meant that sexual diversity has been underreported in countries where it has been asked.
26. Organisation for Economic Co-operation and Development. (2019). SIGI 2019 global report: Transforming challenges into opportunities. <https://www.oecd.org/publications/sigi-2019-global-report-bc56d212-en.htm>
27. McGinn, K. L., Castro, M. R., & Long Lingo, E. (2019). Learning from mum: Cross-national evidence linking maternal employment and adult children's outcomes. *Work, Employment & Society*, 33(3), 374–400. <https://doi.org/10.1177/0950017018760167>
28. Charmes, J. (2019, December 19). The unpaid care work and the labour market: An analysis of time use data based on the latest world compilation of time-use surveys. International Labour Organization. http://www.ilo.org/gender/Informationresources/Publications/WCMS_732791/lang--en/index.htm
29. Jejeebhoy, S. J. (1995). *Women's education, autonomy, and reproductive behaviour: Experience from developing countries*. Clarendon Press.
30. Sell, M., & Minot, N. (2018, November–December). What factors explain women's empowerment? Decision-making among small-scale farmers in Uganda. *Women's Studies International Forum* 71, 46–55. <https://doi.org/10.1016/j.wsif.2018.09.005>
31. Sepúlveda Carmona, M., & Donald, K. (2014). What does care have to do with human rights? Analysing the impact on women's rights and gender equality. *Gender & Development*, 22(3), 441–457. <https://doi.org/10.1080/13552074.2014.963305>; Charmes, J. (2019, December 19). The unpaid care work and the labour market: An analysis of time use data based on the latest world compilation of time-use surveys. International Labour Organization. http://www.ilo.org/gender/Informationresources/Publications/WCMS_732791/lang--en/index.htm
32. UN Women. (2020, November 25). Whose time to care?: Unpaid care and domestic work during COVID-19. <https://data.unwomen.org/publications/whose-time-care-unpaid-care-anddomestic-work-during-covid-19>
33. Machisa, M., Jewkes, R., Lowe Morna, C., & Rama, K. (2011). *The war at home: Gender Based Violence Indicators Project*. Johannesburg: Gender Links. https://genderlinks.org.za/wpcontent/uploads/imported/articles/attachments/13452_begin_war_at_home.pdf
34. IMAGES definitions of intimate partner violence replicate the gold-standard modified conflict tactics scale as implemented in Demographic and Health Survey and World Health Organization studies: United Nations Statistics Division. (2022, March 31). SDG indicator metadata. <https://unstats.un.org/sdgs/metadata/files/Metadata-05-02-01.pdf>
35. Yllö, K., & Torres, M. G. (Eds.). (2016). *Marital rape: Consent, marriage, and social change in global context*. Oxford University Press. <https://doi.org/10.1093/acprof:oso/9780190238360.001.0001>
36. Miedema, S. S., Warner, X., Leung, L., Wilson, M., & Fulu, E. (2022). Prevalence and factors associated with men's perpetration of intimate partner violence in South Tarawa, Kiribati. *Asia Pacific Journal of Public Health*. <https://doi.org/10.1177/10105395221085151>
37. Gil-González, D., Vives-Cases, C., Ruiz, M. T., Carrasco-Portiño, M., & Álvarez-Dardet, C. (2008). Childhood experiences of violence in perpetrators as a risk factor of intimate partner violence: A systematic review. *Journal of Public Health*, 30(1), 14–22. <https://doi.org/10.1093/pubmed/fdm071>; Kitzmann, K. M., Gaylord, N. K., Holt, A. R., & Kenny, E. D. (2003). Child witnesses to domestic violence: A meta-analytic review. *Journal of Consulting and Clinical Psychology*, 71(2), 339–352. <https://doi.org/10.1037/0022-006x.71.2.339>; Stith, S. M., Rosen, K. H., Middleton, K. A., Busch, A. L., Lundeberg, K., & Carlton, R. P. (2000). The intergenerational transmission of spouse abuse: A meta-analysis. *Journal of Marriage and Family*, 62(3), 640–654. <https://doi.org/10.1111/j.1741-3737.2000.00640.x>
38. Heise, L., Greene, M. E., Opper, N., Stavropoulou, M., Harper, C., Nascimento, M., & Zewdie, D. (2019). Gender inequality and restrictive gender norms: Framing the challenges to health. *The Lancet*, 393(10189), 2440–2454. [https://doi.org/10.1016/S0140-6736\(19\)30652-X](https://doi.org/10.1016/S0140-6736(19)30652-X)
39. This analysis is based on the approach applied in: Heilman, B., Barker, G., & Harrison, A. (2017). *The Man Box: A study on being a young man in the US, UK, and Mexico*. Washington, DC, & London: Promundo-US & Unilever. <https://www.equimundo.org/resources/man-box-study-young-man-us-uk-mexico/>

