

Mentorship and Women's Career Advancement in Public Relations in North Central Nigeria

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Abstract

Despite the increasing feminisation of the public relations (PR) profession globally and in Nigeria, women remain underrepresented in leadership positions, particularly in North Central Nigeria where cultural and institutional barriers persist. This study examined mentorship as a strategic mechanism for advancing women's careers in the PR industry in the region. Anchored in Kram's Mentor Role and Transformational Leadership Theories, the research explored how mentorship contributes to career development, leadership preparation, and confidence building among female PR professionals. Adopting a qualitative, exploratory phenomenological design, the study draws on semi-structured interviews with mid- and senior-level female PR practitioners across North Central Nigeria. Data were analysed thematically to capture participants' lived experiences. Findings revealed that while mentorship is widely valued and positively influences professional growth, access to structured mentorship programmes remains inconsistent. Formal mentorship enhances promotion readiness and institutional visibility, whereas informal mentorship provides stronger psychosocial support and confidence building. However, barriers such as gender bias, hierarchical organisational cultures, limited female representation in senior roles, and inadequate institutional frameworks restrict the effectiveness of mentorship. The study concluded that institutionalised, inclusive, and well-supported mentorship systems are essential for dismantling systemic gender barriers and promoting sustainable career advancement for women in Nigeria's PR industry.

Keywords: Mentorship, Public Relations, Women's Career Development, Male allyship, Gender bias.

Introduction

Globally, public relations (PR) industry has seen a steady increase in female participation over the last few decades. Despite this progress, women in PR continue to face systemic barriers to career advancement, including limited access to leadership roles, unequal pay, and underrepresentation in decision-making positions (Topić, 2023; Meng & Neill, 2021). These disparities persist even in regions where women constitute the majority of the workforce in public relations. Scholars have highlighted that while women often dominate the lower and middle levels of PR, they are significantly underrepresented in top management (L'Etang, 2020).

In many African countries, including Nigeria, these challenges are even more pronounced due to cultural, institutional, and socio-economic factors (Ogbemudia & Adebayo, 2022). In Nigeria's North Central region, where gender roles are still heavily influenced by traditional and patriarchal norms, women's career progression in male-dominated sectors, including public relations, is often slow and uneven (Adebowale & Ocholi, 2023). Even in professional environments, women face various forms of structural discrimination that limit their visibility, recognition, and access to opportunities for advancement (Aderemi & Oyedele, 2021).

Mentorship has been widely recognised as a critical tool in supporting women's career development and leadership aspirations. It provides guidance, networking opportunities, skill-building, and psychosocial support necessary for career growth (Chukwudi & Okafor, 2022). In the public relations field, mentorship is particularly important due to the industry's reliance on networks, reputation, and visibility (Bowen, 2019). Effective mentorship can help women navigate the often informal and male-dominated professional networks that are key to success in PR careers. However, formal mentoring programmes are either limited or poorly structured in most Nigerian PR organisations (Adejumo & Alabi, 2021). Many women are left to rely on informal mentoring arrangements, which may not always be sufficient or equitable. Moreover, the absence of female leaders in senior positions reduces the availability of role models and mentors for younger women in the profession.

(Iwuoha & Omenugha, 2020). This reality underscores the importance of examining how mentorship can be leveraged as a strategic mechanism to promote gender equity and improve women's career trajectories in public relations in Nigeria's North Central region.

Given this context, the study explores the role of mentorship in shaping the career paths of women in the public relations industry in North Central Nigeria. The study aims to understand the nature and effectiveness of existing mentoring relationships, identify barriers to mentorship access, and assess how mentoring influences professional growth, job satisfaction, and leadership aspirations among women PR practitioners in the region. By focusing on Nigeria's unique social and professional setting, the study will add to ongoing conversations about gender equality in communication jobs and suggests practical ways to make lasting change.

Statement of the Problem

In recent decades, the field of public relations has experienced significant growth in Nigeria, particularly with the advent of digital communication platforms and a heightened emphasis on organisational reputation management. Women have increasingly ventured into PR, a profession that combines communication, media relations, and strategic management (Aderemi & Oyedele, 2021). Despite the growing presence of women in PR, they continue to face numerous obstacles that hinder their career progression, such as limited access to leadership roles, gender bias, and unequal opportunities for professional development (Adebowale & Ocholi, 2023; Omotayo & Adekunle, 2022).

According to recent Nigerian scholarship, one significant factor contributing to the underrepresentation of women in leadership roles within public relations is limited access to effective mentorship structures (Ola & Aina, 2020; Nwosu, 2021). Mentorship where a more experienced professional provides guidance and support to a less experienced colleague has been widely recognised as critical for career development, confidence building, and leadership preparation. However, studies within the Nigerian professional context indicate that many women in the PR industry lack access to structured or formal mentorship programmes and often depend on informal or irregular support systems that lack continuity and depth (Akinbobola & Ibenyenwa, 2019; Nwosu, 2021). This mentorship gap constrains their ability to develop strategic competencies, expand professional networks, and access leadership opportunities necessary for career advancement.

Oladipo, Oyesomi, & Okorie (2022) stated that, cultural and societal expectations about women's roles in North central Nigeria often reinforce patriarchal systems that marginalise women from leadership roles, thereby intensifying the need for mentorship interventions. Without effective mentorship, women in PR are more likely to encounter difficulties in accessing decision-making positions, negotiating for better roles, and balancing work-life responsibilities. This challenge is compounded by the absence of organisational policies that promote gender-sensitive mentorship schemes within PR firms and related industries (Ugwu & Obinna, 2023).

In North Central Nigeria, according to Nwosu & Soola (2022), these issues are compounded by limited access to professional development, underrepresentation in professional networks, and fewer role models for aspiring female PR professionals. There is also limited scholarly research focused specifically on the challenges women face in the PR profession in this region, which further perpetuates a lack of awareness and action among policymakers, media firms, and training institutions. While national and international campaigns have addressed gender inclusion in broader media spaces, the specific challenges in public relations, especially in regional contexts, remain underexplored.

Given these realities, there is a pressing need to examine how mentorship can serve as a strategic tool for promoting women's career advancement in PR within North Central Nigeria. This study, therefore, seeks to fill the research gap by investigating the role of mentorship in shaping the professional trajectories of women in this region's PR industry. Addressing this problem is crucial for fostering gender inclusivity, enhancing organisational productivity, and promoting equitable access to career opportunities in PR.

Objectives of the Study

The objectives of the study include:

1. To examine the role of mentorship in the career advancement of women in North central Nigeria's public relations industry.
2. To examine the availability of mentorship programmes accessible to women in the public relations industry in North Central Nigeria.
3. To identify the key barriers that hinder women's access to effective mentorship in public relations within North Central Nigeria.
4. To explore strategies for developing effective mentorship programmes aimed at improving women's career

advancement in the public relations profession in North Central Nigeria.

Literature Review

Mentorship in Professional Development

Mentorship has emerged as one of the most influential strategies for career development and professional advancement across disciplines, including public relations. The concept reflects a dynamic relationship between a more experienced professional and a less experienced colleague, designed to enhance skills, knowledge, and career opportunities (Kram, 1985; Akinwale, 2020). Mentorship has been defined in multiple ways, but the common denominator is its role in facilitating career and psychosocial development. Eby et al. (2015) described mentorship as a relationship in which the mentor provides two critical functions: career development (e.g., sponsorship, coaching, exposure to opportunities) and psychosocial support (e.g., role modeling, counseling, and friendship). Similarly, Ragins (2019) argues that mentorship encompasses both structural and interpersonal dimensions, emphasising the importance of developmental relationships that support mentees in navigating organisational, career, and psychosocial challenges.

In contemporary scholarship, mentorship is increasingly viewed not merely as an individual support relationship but as an institutional strategy for addressing systemic inequities in career progression, particularly gender disparities in male-dominated professions (Hernandez, Ngunjiri, & Casimir, 2017; Ibarra, Carter, & Silva, 2018; Ragins & Kram, 2020). Recent studies emphasise that structured mentorship and sponsorship programmes can help reduce leadership gaps by improving access to networks, visibility, and advancement opportunities for women.

Within the PR industry, which has witnessed significant female participation yet persistent underrepresentation of women in top leadership roles, mentorship becomes an indispensable tool for fostering professional growth, leadership capacity, and gender equity (Place & Vardeman-Winter, 2018).

Mentorship exists in both formal and informal forms. Formal mentorship refers to structured, organisationally supported programmes that intentionally pair mentors and mentees around defined goals, timelines, and performance expectations (Clutterbuck, 2018; Allen & Eby, 2020). Such programmes are commonly implemented in corporations, universities, and professional associations, often incorporating monitoring and evaluation mechanisms to assess outcomes and career impact.

Informal mentorship, by contrast, develops organically through shared interests, professional interaction, or personal rapport (Humberd & Rouse, 2018; Ragins & Kram, 2020). These relationships are usually voluntary, less regulated, and in many cases more relational and long-term, although access to them may be uneven and influenced by organisational culture and social networks.

Comparative studies show that formal mentorship helps ensure wider access and organisational oversight, while informal mentorship often builds stronger trust and more personal commitment between mentors and mentees (Eby & Allen, 2018). In public relations practise, both forms exist side by side. Professional bodies such as the Nigerian Institute of Public Relations (NIPR) have introduced formal mentorship initiatives, while informal mentorship continues to thrive through workplace interactions and alumni networks.

The Role of Mentorship in Career Advancement

Mentorship is closely linked to leadership development, skill acquisition, and confidence building. Recent studies indicate that employees who receive mentorship are more likely to experience career advancement, improved compensation, and higher levels of job and career satisfaction (Ng, Eby, Sorensen, & Feldman, 2018). In public relations practise, mentorship exposes mentees to critical leadership skills such as strategic thinking, crisis communication, stakeholder engagement, and ethical decision-making. Mentors often act as role models, guiding mentees on professional conduct, organisational politics, and effective communication within complex institutional environments (Ragins, 2019).

Skill acquisition is another key benefit of mentorship. Beyond technical competencies such as media relations, campaign planning, and digital communication, mentees also develop essential soft skills, including negotiation, conflict management, emotional intelligence, and interpersonal influence, which are vital for leadership roles in public relations (Eby, Allen, Evans, Ng, & DuBois, 2013; Eby & Robertson, 2020). These skills are critical for Public Relations professionals, who operate in boundary-spanning roles that require balancing organisational interests with public expectations.

Confidence building, particularly for women, is perhaps one of the most underestimated outcomes of mentorship.

Research shows that women often face “imposter syndrome,” characterised by self-doubt and lack of confidence in male-dominated environments (Medical Mirror, 2021). Mentorship provides reassurance, validation, and encouragement that foster resilience and self-assurance. For example, studies show that women who are mentored by experienced public relations and organisational leaders are more confident in pursuing leadership roles and more willing to challenge gender stereotypes in the workplace (Ragins & Verbos, 2017).

Despite the ‘feminisation’ of Public Relations in terms of workforce representation, women remain underrepresented in leadership positions globally and in Nigeria (Aldoory & Toth, 2002; Okafor & Akande, 2020). Gender barriers persist through wage gaps, limited access to strategic roles, and stereotypes that portray women as suited for technical rather than leadership functions.

In Nigeria, research shows that cultural expectations, male dominance, and weak organisational support systems continue to limit women’s career advancement in public relations and related professions (Adesina, 2019; Akinwale & George, 2020). These challenges reduce women’s access to leadership opportunities and professional visibility. Mentorship helps to reduce these barriers by opening doors to opportunities and increasing visibility for women. Through career sponsorship, mentors actively support women’s inclusion in key decision-making spaces and recommend them for high-profile assignments that support career growth (Ragins, 2019). In addition, mentorship equips women with practical knowledge of workplace politics and strategies for dealing with gender bias, helping them navigate organisational environments more confidently (Eby & Robertson, 2020).

Mentorship also functions as a collective empowerment tool. Programmes that pair younger female professionals with senior women in PR foster solidarity, challenge stereotypes, and provide role models who demonstrate the possibility of female leadership (Place & Vardeman-Winter, 2018). In Nigeria, where women are often excluded from elite business and political networks, mentorship offers an alternative platform for building professional capital.

Barriers to Mentorship for Women in Public Relations

In the field of public relations mentorship is particularly important because of the profession’s relationship-driven and network-based nature. Despite these benefits, women in PR continue to face several barriers that limit access to effective mentoring relationships. These challenges arise from structural inequalities, gender stereotypes, organisational cultures, and socio-cultural expectations.

1. Shortage of Female Mentors in Leadership Roles

One major barrier is the limited number of female leaders available to serve as mentors. Although women constitute the majority of PR practitioners globally, they remain underrepresented in senior management and executive positions (Okafor & Akhagba, 2019). This imbalance makes it difficult for early-career women to find mentors who share similar experiences. According to Place and Vardeman-Winter (2018), the lack of female leadership reduces opportunities for role modelling and professional guidance.

2. Gender Bias and Stereotypes

Persistent gender stereotypes also limit mentorship opportunities for women in PR. Leadership is often culturally associated with masculine traits, reinforcing perceptions that men are more suited for authority roles while women are confined to supportive positions (Aldoory & Toth, 2002). These biases influence professional networks and mentorship access. Women are frequently excluded from influential informal networks often described as the “old boys’ club” (Jiang & Shen, 2020). Topic (2022) further argues that PR culture continues to privilege masculine norms, which restrict women’s access to mentorship and career sponsorship.

3. Organisational and Structural Barriers

Organisational culture can significantly influence access to mentorship. Many PR firms lack structured mentoring programmes, leaving mentorship to informal networks where women are often excluded (Meng & Neill, 2021). Additionally, cross-gender mentorship may be limited in male-dominated workplaces due to fears of misinterpretation or workplace gossip. Linehan and Scullion (2008) explain that such perceptions can discourage both women from seeking mentorship and senior men from mentoring female colleagues due to reputational concerns.

4. Intersectional Inequalities

Mentorship challenges are not experienced equally among women. Intersectional factors such as race, ethnicity, class, and age can create additional barriers. Women from minority ethnic or socio-economic backgrounds may face compounded exclusion within organisations due to structural and cultural biases (Edwards, 2018; Place & Vardeman-Winter, 2018). Studies show that these inequalities can further limit access to mentorship and professional networks (Bhopal, 2020; Creedon & Cramer, 2021).

5. Work–Life Balance Pressures

Work–life balance pressures also affect women's participation in mentorship relationships. Women often carry significant caregiving responsibilities, which can limit the time and flexibility needed to sustain mentoring engagements. Research indicates that work–family conflict and gendered social expectations continue to restrict women's involvement in professional networking and mentorship activities, particularly in developing contexts (Ojong & Mboho, 2019; Adebayo & Kolawole, 2021).

6. Cultural and Regional Constraints

In African contexts such as Nigeria, cultural norms may further limit women's access to mentorship. Patriarchal structures often restrict women's participation in leadership and decision-making roles (Olorunnisola & Amobi, 2013). Cultural expectations may also discourage close professional relationships between men and women, reducing cross-gender mentoring opportunities. Consequently, Nigerian women in PR frequently encounter mentorship barriers shaped by societal expectations, gender norms, and organisational limitations.

Theoretical Framework

Mentorship and Career Development Theory (Kram's Mentor Role Theory)

One of the most influential frameworks in mentorship studies is Kathy Kram's Mentor Role Theory, which highlights two broad categories of mentoring functions: career-related functions and psychosocial functions (Kram, 1985). Recent scholarship has extended Kram's model, emphasising relational, developmental, and context-sensitive dimensions of mentorship. For example, Allen and Eby (2018) highlight that mentoring in recent time is more dynamic, reciprocal, and influenced by organisational culture, diversity, and power structures, particularly in fields like public relations where gender equity remains a critical concerns.

Career functions focus on how mentors assist their protégés in advancing professionally. These include sponsorship (actively recommending protégés for promotions or opportunities), coaching (providing guidance on skills and strategies), protection (shielding protégés from harmful politics or risks), exposure and visibility (connecting protégés with influential networks), and challenging assignments (giving protégés opportunities to demonstrate competence) (Kram, 1985). Each of these functions directly contributes to a protégé's career progression, especially in competitive fields such as public relations, where advancement often depends on networks and visibility.

Psychosocial functions, on the other hand, address the personal and emotional support provided by mentors. These include role modeling, counseling, acceptance and confirmation, and friendship (Ragins & Kram, 2007). Such support helps protégés build confidence, develop a professional identity, and navigate challenges related to self-esteem and work–life balance. Psychosocial support is particularly important for women in male-dominated environments, as it provides them with a sense of belonging and validation.

Kram's framework shows that mentorship is not merely about skill transfer but also about holistic development. Both career and psychosocial functions are necessary for protégés to thrive. In Nigerian PR contexts, where women face structural barriers like gender bias, cultural stereotypes, and limited male allyship, Kram's theory offers a useful lens for understanding how mentorship can provide both professional growth and emotional resilience.

Transformational Leadership Theory

Transformational Leadership Theory, first introduced by James MacGregor Burns (1978) and further developed by Bernard Bass (1985), emphasises the role of visionary and ethical leadership in motivating and developing followers beyond immediate self-interests to achieve collective goals. Unlike transactional leadership, which is based on exchanges and performance-based rewards, transformational leadership focuses on values, inspiration, individualized support, and intellectual stimulation. These are qualities that are highly relevant in addressing issues of gender equity in the workplace.

This theory is particularly pertinent to the Nigerian public relations (PR) industry, where leadership styles can either reinforce existing gender norms or serve as a catalyst for change. Transformational leaders are characterised by their ability to recognize and nurture talent regardless of gender, challenge traditional

hierarchies, and promote inclusive cultures (Bass & Riggio, 2006). In a field like PR, where communication, empathy, and adaptability are essential, transformational leadership offers a framework through which organisations can empower women and foster male support.

Recent empirical studies indicate that transformational leadership is significantly associated with higher levels of employee satisfaction, innovative work behaviour, and organisational commitment in contemporary organisations (e.g., Banks et al., 2021; Babalola, Stouten, & Euwema, 2022). Within the Nigerian context, scholars have similarly observed that transformational leadership practices foster team cohesion, professional motivation, and performance outcomes across corporate and public sector institutions (Adeyemi & Olowookere, 2021; Nwachukwu & Chladkova, 2022). Furthermore, emerging research suggests that women leaders frequently demonstrate transformational leadership behaviours including mentoring orientation, participative decision-making, collaboration, and emotional intelligence which remain undervalued within traditionally male-dominated leadership structures (Badura et al., 2022; Eagly & Heilman, 2023; Olayinka & Aina, 2020).

In the Nigerian context, where patriarchal leadership is often normative, Transformational Leadership Theory provides a progressive alternative by advocating leadership rooted in fairness, ethical decision-making, and support for underrepresented groups. Transformational Leadership Theory is highly relevant to this study as it emphasises leadership that inspires, motivates, and fosters positive change in individuals and organisations. This style of leadership is particularly effective in addressing systemic issues such as gender inequality in professional environments, including public relations (PR) in North Central Nigeria. Recent scholarship describes transformational leaders as individuals who inspire change, stimulate innovation, and empower followers to transcend self-interest in pursuit of collective organisational goals (Northouse, 2021; Banks et al., 2018).

Transformational leadership is characterised by idealised influence, inspirational motivation, intellectual stimulation, and individualised consideration, all of which contribute to higher engagement and performance outcomes. It aligns with the study's call for structural change and cultural transformation within PR organisations. By promoting leadership that is inclusive and empowering, the theory underscores the importance of strategic mentorship in dismantling systemic barriers to women's advancement in Public Relations..

Methodology

This study adopted a qualitative research design grounded in an exploratory phenomenological approach to examine the lived experiences of female public relations professionals in North Central Nigeria regarding mentorship and career advancement. Qualitative research is appropriate because it focuses on the meanings individuals attach to their experiences within specific social contexts, emphasising participants' interpretations and rich narrative data (Ugwu & Eze Val, 2023). The study is conducted in North Central Nigeria comprising Plateau, Nasarawa, Benue, Kogi, Niger, Kwara, and the Federal Capital Territory—an emerging region in PR practice where the mainstreaming of women in professional networks remains imperative.

The target population consists of female PR professionals working in corporate organisations, government ministries and agencies, media firms, and Non Governmental Organisations (NGOs), particularly those at mid- and senior-level positions. Purposive sampling is employed to select participants with at least five years of professional experience. Data is collected through semi-structured interviews, which allow for guided yet flexible, in-depth exploration of participants' experiences and generate detailed data beyond what structured instruments can capture (Aliero, 2022).

Data Presentation and Analysis

The analysis focuses on qualitative data derived from semi-structured interviews conducted with eight participants drawn from different sectors of Public Relations practice. The participants represented government establishments, educational institutions, the military, healthcare organisations, media organisations, and professional bodies. The findings are presented according to the major themes that emerged from the interview data.

Participant Profiles

Participant	Role	Sector	Key Themes
P1	Reporter/Lecturer	Government Media	Guidance, gender imbalance, cultural barriers
P2	Principal PRO	Government Establishment	Informal mentorship, male dominance
P3	Assistant Director, Communications	Educational Sector	Leadership participation, confidence building
P4	Acting Director, Army Public Relations	Military	Leadership development, inclusion
P5	Assistant PRO	Educational Institution	Confidence, harassment, technical skills
P6	Protocol/PR Officer	Health Sector	Leadership by example, practical learning
P7	Professor/MNIPR Council Member	Media & Education	Coaching, institutional mentorship
P8	Senior Communications Officer	NGO	Coaching, sponsorship, male allyship, career visibility, formal mentorship policies

Source: Field Survey, 2026.

Discussion of Findings

The findings from Participants 1 to 8 reveal that mentorship plays a significant role in women's career advancement in Public Relations in North Central Nigeria. Mentorship contributes to professional growth through confidence building, leadership preparation, networking, practical skills acquisition, workplace visibility, sponsorship, and career guidance.

The findings further reveal that mentorship within Public Relations practice remains largely informal and dependent on personal initiative and workplace relationships. Participants consistently highlighted the absence of institutionalised mentorship programmes and formal mentorship policies specifically designed to support women's career advancement.

Gender imbalance emerged as one of the most significant challenges affecting women's career progression. Participants reported that leadership positions remain predominantly occupied by men, thereby reducing access to female mentors and role models. Cultural expectations, religious norms, workplace discrimination, and work-family responsibilities were also identified as barriers limiting women's participation in mentorship opportunities and leadership development activities.

Participant 8 further introduced the important concepts of sponsorship and male allyship. The participant emphasised that mentors can increase women's visibility by recommending them for projects, leadership roles, and professional development opportunities. Additionally, support from male leaders was identified as a critical factor in accelerating women's advancement within organisations.

Despite these challenges, the findings demonstrate that women who receive mentorship are more likely to develop confidence, professional competence, leadership capacity, resilience, and career visibility. The findings therefore suggest that structured mentorship initiatives, sponsorship opportunities, and supportive organisational policies are essential for strengthening women's participation and advancement in Public Relations.

Conclusion

This study examined mentorship as a strategic tool for advancing women's careers in public relations in North Central Nigeria, where gender disparities in leadership persist despite the growing number of women in the profession. The findings confirm that structural barriers such as gender bias, limited access to leadership roles, weak institutional frameworks, and cultural expectations, continue to restrict women's career progression.

The study highlights mentorship as a critical mechanism for addressing these challenges. Formal mentorship enhances visibility, promotion readiness, and institutional knowledge, while informal mentorship strengthens confidence, resilience, and professional identity. However, access to both remains uneven due to hierarchical cultures, limited female representation in senior roles, and insufficient organisational support.

Guided by Kram's Mentor Role Theory and Transformational Leadership Theory, the study concludes that structured, inclusive, and well-supported mentorship systems are essential for dismantling systemic barriers and promoting sustainable gender equity in the PR industry in North Central Nigeria.

Recommendations

Drawing from the study's findings, several practical implications emerge for strengthening women's career advancement in public relations in North Central Nigeria:

1. Given the demonstrated importance of mentorship but its largely informal nature, organisations should institutionalise structured mentorship programmes with clear objectives, transparent mentor–mentee matching processes, and measurable outcomes. Professional bodies such as the Nigerian Institute of Public Relations can support this by developing standardised mentorship frameworks for member institutions.
2. To address identified barriers including gender bias, limited access to influential networks, and opaque promotion systems organisations should implement transparent, merit-based promotion criteria and ensure equitable access to leadership development opportunities.
3. Leadership culture must intentionally promote gender equity. Senior executives should adopt gender-sensitive leadership practices, integrate equity targets

Organisations should establish monitoring mechanisms to track mentorship outcomes and women's representation in leadership. Continuous evaluation will enhance accountability and ensure sustained institutional commitment to gender inclusion.

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**Communicating for Behaviour Change on Maternal Health in Northern Nigeria:
A Field Report from *Dukawa* Community in Kano State**

by

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Abstract

This study examined the exposure of men in *Dukawa* community of Kano State in Northern Nigeria to strategic information, their sources and channels on maternal health, and how the exposure relate to the men's understanding and possible behaviour change on maternal health. Guided by the Communication for Social Change Theory, a purposive sample of 360 married men in *Dukawa* community was selected for the study. A simple descriptive analysis revealed that a significant number of the men in *Dukawa* community, $n=165(45.8\%)$, are not exposed to strategic maternal health information, though evidence of a variety of accessible channels and sources of information was found. The most cited reason for not being exposed to maternal health information was the personal belief that maternal health is a women-only issue – $n=102(61.8\%)$ of the 165 participants who are not exposed. Radio was found to be the most frequent information channel, while health workers and religious leaders were cited as the predominant and reliable source of maternal health information for the men in *Dukawa* community. Those who are exposed to strategic maternal health information, $n=195(54.2\%)$ of 360 participants, mostly reported not experiencing improved understanding of maternal health issues, $n=87(44.6\%)$, and not sure of benefiting from the exposure at all, $n=48(24.6\%)$. Drawing on these findings, the study concluded that there is an important gap in behaviour change communication that leaves the prevalence of existing norm, which holds maternal health is women-only issue in *Dukawa* community. The study recommended that the local health authorities should liaise and work closely with the community-based organisations and available non-governmental organizations to develop and implement contextual and participatory communication plan for educating the men and promoting inclusivity and behaviour change on maternal health in *Dukawa* community.

Keywords: Health, Maternal, information, communication, Behaviour Change, *Dukawa*, Kano State

Introduction

Maternal mortality has remained an issue of disturbing public concern and a major challenge in Nigeria. According to the National Primary Health Care Development Agency (NPHCDA, 2023), Nigeria makes up only 2% of the world's population but accounts for 14% of the global maternal death burden. Approximately 52,000 (142 per day) women die each year, and this translates to 1 in every 9 maternal deaths worldwide. As reported by NPHCDA, 80% of maternal mortality in Nigeria occurs in rural communities, and about 70% is preventable through demand-focused communication and improved service provision. Although the government and development partners have made frantic efforts with little success to reverse the situation, it seems that effective interventions to improve maternal health outcomes in most parts of Nigeria would require communication strategies that focus on the men at primary healthcare and community levels to raise their awareness, change their behaviours, and integrate them as key policy formulation and implementation actors. This is because of the determinative role that husbands play at the family level in healthcare seeking decision among women, especially in the traditional northern communities where campaign resistance has historically remained high.

Modern communication sources, including mass media (radio, television, newspapers, and the internet) and interpersonal sources (traditional leaders, health educators, etc.), have been actively involved in transmitting information aimed at influencing maternal health outcomes in northern Nigeria. In health campaigns, the mass media, for instance, generate awareness of maternal health issues, interventions, and events, and set agendas for national and public discourse, while interpersonal sources operate in the background to influence community response to campaigns negatively or positively.

Maternal health focuses on the health and well-being of pregnant women from the inception of the pregnancy, through antenatal care (ANC) to childbirth and post-natal care (Abubakar *et al.*, 2022). Effective communication promotes awareness of an issue, enhances knowledge and beliefs, and influences behaviour change (Calvert, 2011). Amoo *et al.* (2020) reaffirm the above assertion that mass media play vital roles in every society as they

shape culture, influence politics, affect people's attitudes, and play important roles by raising health concerns, especially as it relates to women and children in the contemporary business world.

Gambo, Suleiman and Shaibu (2023) assert that the dissemination of credible maternal health information by relevant mass media institutions is important from the stage of pregnancy to enlighten mothers on the utilisation of maternal health care services to prevent complications and numerous problems that may arise in childbirth, survival, and development. Similarly, interpersonal communication sources are crucial in public health as they enable the establishment of trust with individuals and communities, facilitating the exchange of vital health information, promoting behavior change, and ultimately leading to improved health outcomes (Chepngena & Lydia, 2023). Maternal health has long been a public concern in the developing world and a major cause of death for women in the reproductive age group (Gil-Gonzalez, Portino, & Ruiz, 2006). According to the United Nations Children's Emergency Fund (UNICEF, 2014), daily, maternal health-related issues claim the lives of about 2,300 children below five years and 145 women of childbearing age in Nigeria.

The determinative role of men in health-seeking behaviors among women in most parts of Africa has been attributed to the practice of patriarchy (Joseph & Jessica, 2009). A patriarchal system limits the choices for women to seek healthcare without their husbands' approval. This means that no matter how convinced a pregnant woman might be to seek healthcare, the husband decides whether to do so. This makes men's involvement in maternal health campaigns an essential strategy for reducing maternal and child mortality (Nuhu & Muheirwe, 2019). However, due to protracted exposure to negative information about the motives of western countries and non-governmental organisations (NGOs) for health interventions in Africa (Renne, 2006, Ozohu-Suleiman, 2010a, Aserogun, Ozohu-Suleiman, & Muhammed, 2025), improving maternal health outcomes, especially in the patriarchal and predominantly Muslim northern communities, would require evidence-driven and targeted communication efforts to change the behavior of the men who are the primary decision makers at the family levels. This proposition leaves an agitation for improved understanding of the nature, flow, and influence of existing communication on maternal health in rural communities of northern Nigeria.

Objectives of the Study

1. Evaluate the exposure of married men to maternal health information in Dukawa community
2. Determine the major and most trusted sources and channels of information on maternal health among the married men in Dukawa community
3. Determine the aspects of maternal health information the married men are most exposed to in the community
4. Determine the perceived influence of exposure to maternal health information on the men's understanding of maternal health issues the community.

Literature Review

Significance of Sources and Channels in Health Persuasion

In any communication that aims to persuade, the source of the message is important. That is why Lasswell's communication model begins by asking "Who says What...?" (Sapienza, Iyer, & Veenstra, 2018). The trust determination model also emphasizes dependency on the source for risk communication to be effective because people tend to believe and act on information coming from the sources they trust (Covello, 2001, Ozohu-Suleiman, 2010b). A source of communication is the individual, group, or entity that originates or creates and sends a message to a receiver. A source is the one who kick-starts the entire communication process, whether through speaking, writing, or other means of encoding messages, such as body language or digital signals.

In rural communities, various communication sources are voluntarily involved in or engaged to create and disseminate maternal health information and messages. In northern Nigeria, there is a heavy presence of mass media organisations – radio, television, Internet, and social media, which variously penetrate the local populations with news and other types of information on various subject matters, including maternal health. Interpersonal communication sources such as traditional leaders, religious leaders, friends, families, and community organisations that are governed by traditions have also been found to be highly influential in some parts of the region on matters of health and other public communications (Ozohu-Suleiman, 2010a). Often in face-to-face mode, interpersonal communication facilitates dialogue, helps clarify doubts, and allows for culturally sensitive messaging, crucial in societies where cultural beliefs and norms impact health choices (Dudgeon & Inhorn, 2004). Beyond individual interactions, group communication methods such as community meetings, focus groups, and workshops encourage shared learning and collective action. These form and for a of

communication serve as avenues for discussing health concerns, challenging harmful norms, and encouraging positive behavior change through social support and peer influence (Rimal & Lapinski, 2009).

In a study on how communication sources, user traits, and innovation features influence the adoption of communication technology, Stuart (2000) offers a core analysis of how various sources, such as mass media and personal interactions, affect the uptake of new ideas, especially with emerging technologies. While the focus is on technology adoption, his theoretical framework applies to broader behavior change efforts, including health-related actions. The study highlights that source credibility, user characteristics, and message relevance are key in shaping responses to communication. In the area of maternal health, this suggests that men's attitudes are affected not only by the messages but also by who originates them (the source), whether mass media, community leaders, health workers, or peers.

In maternal health communication, the choice of channel can affect how men understand and respond to health messages. Studies have demonstrated that when messages are disseminated through trusted channels, the receivers are more likely to pay attention and respond positively to maternal health persuasions. However, a communication gap arises when the channels used are not trusted or have poor accessibility. For instance, using social media in a community where most men depend on radio or interpersonal channels reduces message reach and effectiveness. Therefore, knowing the channels preferred by audiences is essential for developing and rolling out interventions aimed at increasing awareness and promoting male involvement in maternal health campaigns.

Maternal Health Standards and Inclusive Communication for behaviour Change

Maternal health concerns women's well-being during pregnancy, childbirth, and the postpartum period (WHO, 2015). Proper maternal health care can prevent complications such as hemorrhage, infections, and death for both mother and child. Ohaja *et al.* (2023) note that maternal health extends beyond just preventing illnesses during pregnancy and delivery. It also involves access to quality care before, during, and after childbirth, along with support for mothers' emotional and social needs. According to Ohaja *et al.* (2023), poor maternal health in many African countries is often due to limited access to accurate health information. They emphasise that how health messages are communicated can significantly influence people's behaviors. This is especially important for men, whose support can help women attend clinics, prepare for birth, and follow medical advice.

According to the WHO (2015), good maternal health involves access to antenatal care, professional support during delivery, and proper postnatal care. It also includes good maternal nutrition, partner involvement, family support, and access to emergency services when necessary. Importantly, maternal health isn't just a woman's concern; it impacts families and society at large. In many Nigerian households, especially in patriarchal communities like Dukawa in Kano State, men often influence decision-making. A woman's attendance at antenatal visits, access to skilled birth care, and postnatal support often depend on her husband's views, financial situation, and cultural beliefs. Therefore, maternal health should be viewed as a shared responsibility among healthcare providers, the government, the community, male partners, and targeted communication efforts.

However, in patriarchal societies, men hold primary leadership responsibilities over women. This often impacts how communication flows within and between families and communities regarding reproductive and maternal health. Studies indicate that in patriarchal societies, reproductive health communication is often mediated by men, limiting women's choices in decision-making. For example, Ganle and Dery (2015) examined barriers to male involvement in Ghanaian maternal healthcare. They found that deeply rooted patriarchal beliefs led many men to see maternal health as a woman's issue, which limits their participation. This cultural practice negatively affects maternal health outcomes because men are often unaware of the importance of antenatal care or childbirth risks. The study emphasizes that men's exclusion from maternal health discussions is both cultural and systemic, as these topics are rarely part of daily conversations in male-dominated, patriarchal communities.

Ohaja *et al.* (2023) highlight in their narrative review on media and maternal health in Africa that many campaigns mainly target women. This creates a communication gap, as men, particularly in rural communities, are often less educated and disengaged, though they are crucial decision-makers. They advocate for culturally sensitive and inclusive communication strategies that involve men in active participation rather than mere observers in maternal health efforts.

In another study by Ibrahim, Idris, Abubakar, Gobir, Bashir, & Sabitu (2014) on determinants of male involvement in birth preparedness in rural northern Nigeria, it indicates that only 6.6% of males show proper involvement in birth preparedness, which includes saving money for transportation, ensuring that the woman gets access to good and skilled healthcare during birth, and also being there to support her emotionally. The study,

which uses both interviews and surveys to collect data, found that male involvement was very low due to poverty, low education, and strong cultural norms that see the matter as a “feminine issue.” In the end, the study strongly recommended that more communication strategies should be implemented to raise awareness among men in order to improve participation.

Similarly, Amole, Abubakar, Bello, Farouk, & Iliyasu (2023) examined birth preparedness, complication readiness, and male participation in maternal health in Northern Nigeria. Their results indicate that only 32.1% of men in Ungogo Local Government Area of Kano State escort their wives to clinics during pregnancy and childbirth, most of whom have some level of knowledge and life experience. Consistent with previous studies, the researcher found that many men in such patriarchal societies tend to avoid involvement in maternal issues due to cultural norms and limited education. Therefore, the researcher recommended that one effective way to enhance male involvement in maternal health is to promote health education through local communication channels, such as village meetings, community leaders, and peer education. These community-based approaches are more likely to be accepted and resonate with the local population.

In a study on Women’s Perception of Male Involvement During Pregnancy and Labor in Ibadan by Ojo, M. O., Fafure, I. O., & Ani, F. I. (2019), they surveyed 367 women in Ibadan to investigate how involved their husbands were during pregnancy and labour, focusing mainly on the women’s observations and experiences regarding their husbands’ support. The results show that only a few men accompanied their wives to antenatal care, and even fewer were physically present during childbirth. Moreover, the reasons given for this low level of involvement include a busy work schedule, lack of awareness, and cultural norms. However, the women pointed out that there has been some improvement in their husbands’ attitude towards maternal care after health talks were given in mosques, churches, and radio stations. This highlights the importance of communication in changing perceptions and recommends increasing such efforts. Amole et al. (2023) investigated men's knowledge and participation in maternal healthcare in urban Kano State, using a cross-sectional survey. Their findings revealed that only a small portion of men are aware of key maternal issues such as antenatal care, maternal nutrition, and financial preparedness. The main factors for their low involvement include age, education level, and lack of health information. Conversely, men with greater access to health information via media, community leaders, or healthcare workers were more likely to engage in maternal healthcare. Likewise, research on knowledge and attitude of men towards risk factors influencing maternal mortality in Magume community, Zaria by Jimoh et al (2019) discovered that some men are aware of some of the factors that causes maternal mortality, but low education and cultural beliefs are also the main reasons in that community that hinder the men from involving in maternal care, which is why the researchers lastly concluded that educating men and changing cultural attitudes are essential steps to reduce maternal mortality.

The reviewed studies consistently show that men in Northern Nigeria have low involvement in maternal health due to cultural norms, low education, and limited access to health information (Ugal & Tyohemba, 2019; Okafor et al., 2022; Ibrahim et al., 2014; Iliyasu et al., 2010). While some research highlights the importance of communication and media in improving male participation, most studies either focus on women as the primary audience or examine male involvement without evaluating how men actually receive, interpret, and act on maternal health messages. There are limited empirical evidence on the effectiveness of communication in engaging men, the specific aspects of maternal health they are exposed to, and whether this exposure translates into changes in attitudes or behavior.

Theoretical Framework

Communication for Social change theory

This study is situated in the framework of communication for social change (CSC) theory, which views communication as a collaborative and participatory process aimed at fostering meaningful social transformation. Rather than relying solely on one-way dissemination of information, CSC stresses dialogue, shared understanding, and community involvement in addressing social concerns. In rural settings like Dukawa, where men often shape decisions related to maternal health, engaging them through participatory communication may strengthen awareness and encourage active support for maternal care. The framework, therefore offers a relevant lens for exploring how exposure to maternal health messages may influence men’s attitudes and levels of involvement.

Methodology

This study employed a quantitative survey method to examine men's exposure to maternal health communication and their attitudes towards maternal health in Dukawa community. The population of this study is men living in the Dukawa community, specifically those who are married. According to the Kura Council's Department of Planning and Research, the estimated population of Dukawa ward in 2025 is 6,935. Of this, 3,606 are males, and 3,329 are females. This study focused on the 3,606 male population in Dukawa community. Using Solvin's Formula, a sample size of 360 participants was drawn from the study population. Considering that there was no sampling frame as of the time of this study, purposive non-probability technique was adopted to reach out to the married men in the community.

Data were collected using the questionnaire to capture responses from the participants, and the data collected were presented using the descriptive method of data analysis. Reliability was tested through a pilot study using the test-retest method, where the same respondents completed the questionnaire twice at different times to check response consistency. The outcome of the pilot study indicated a satisfactory level of consistency over time. Based on observations from the pilot phase, necessary adjustments were made before proceeding to the final data collection. Eventually, the survey was implemented in Dukawa community with the following participation details (Table 1).

Data Presentation and Analysis

Table 1: Survey participants Information		
Participants	FREQUENCY(N)	PERCENTAGE(%)
A. AGE		
18-25	24	6.7%
26-35	70	19.4%
36-45	192	53.3%
46 and Above	74	20.6%
B. Marital Status		
Married	360	100%
C. Years In Marriage		
Less Than A Year	1	0.3%
1-5 Years	41	11.4%
6-10 Years	96	26.7%
11-15 Years	167	46.4%
16 And Above	55	15.3%
D. Number Of Wives		
1	111	30.8%
2	169	46.9%
3 And Above	80	22.2%
E. Number Of Children		
1-3	58	16.1%
4-6	119	33.1%
7 And Above	183	50.8%
F. Level Of Education		
No Formal Education	133	36.9%
Primary	139	38.6%
Secondary	81	22.5%
Tertiary	7	1.9%
TOTAL	360	100.0

Source: Field Survey, 2026.

Overall, the demographic information in Table 1 shows that the survey participants as targeted were married. They were predominantly middle-aged, and had relatively large family sizes, with modest levels of formal education. These features are typical of rural communities in Northern Nigeria. Exhaust all the tables with their summaries before proceeding to the discussion of findings

The first objective of this study was to evaluate the exposure of married men in Dukawa community to maternal health information. This was essentially meant to establish the extent to which the survey participants receive messages on maternal health from various communication sources available in the community. This was immediately followed by the second objective, which seeks to determine the specific sources and channels of information available to the men on maternal health. The finding (Table 2) shows that a large proportion of respondents, $n=165$ (45.8%), do not receive any messages on maternal health, indicating that a significant population of men in Dukawa community are not exposed to strategic messaging on maternal health. This highlights an important communication gap in strategic maternal health messaging in the community. Based on this finding, respondents who indicated no exposure to maternal health messaging were excluded from analyses boarding on the influence of communication in the community.

The data also reveals that radio is the most common channel through which men in Dukawa community receive maternal health messages, with 97 (26.9%) of participants indicating it. Other channels, such as organized health talks, accounted for (7.2%) responses; religious gatherings were selected by 25 respondents, demonstrating that faith-based settings play a modest yet significant role in conveying maternal health information in Northern Nigeria, particularly in Dukawa.

Additionally, community meetings were selected by 7.2% participants, indicating that some men receive maternal health messages through local gatherings or community discussions. Only 10 (2.8%) respondents reported receiving messages via television, 5 (0.6%) through WhatsApp, followed by 3 (0.8%) who mentioned town announcers as a channel, and only 2 (0.6%) selected SMS as the channel through which they received maternal health messages. None of the respondents indicated they received messages through newspapers/magazines, posters, flyers, billboards, or other channels (see Table 2).

Table 2: Exposure and Channels of Maternal Health Messages in Dukawa community

VARIABLES	FREQUENCY(N)	PERCENTAGE(%)
Television	10	2.8%
Radio	97	26.9%
Newspaper/magazine	0	0%
Town Crier	3	0.8%
Posters/Flyers/ Billboards	0	0%
Whatsapp	5	1.4%
Sms (text Message)	2	0.6%
Organized Health Talks	27	7.5%
Community Meeting	26	7.2%
Religious Gatherings	25	6.9%
Others (please Specify:)	0	0%
Don 'T Receive Messages (not Exposed)	165	45.8%
TOTAL	360	100.0

Source: Field Survey, 2026.

Considering the large number of participants who reported that they do not receive maternal health messages at all (see Table 2), the researchers probed further to know the reason why they do not receive messages. Table 3 below provides an analytical summary of the reasons.

Table 3: Reasons why respondents are not exposed to maternal health messages

REASONS CATEGORY	FREQUENCY (N)	PERCENTAGE (%)
BELIEVE MATERNAL HEALTH IS A WOMEN-ONLY ISSUE	102	61.8%
LACK OF INTEREST	38	23.0%
LACK OF AWARENESS	25	15.2%
TOTAL	165	100.0

Source: Field Survey, 2026.

Table 3 shows the responses of 165 participants who stated that they do not receive any maternal health messages from any channel at all. A high number of them, 102 (61.8%), indicated that they believe maternal health is a women-only issue. This highlights an important cultural practice that underscores the need for interventions to change men's behaviours towards maternal health in the rural communities such as Dukawa. Furthermore, 38 (23.0%) mentioned that they simply do not have an interest in maternal issues, using phrases like "not interested" and "not my thing." This shows that even when the information is available to them, they still don't have an interest in listening. Additionally, 25 respondents reported a lack of awareness, which may be because they are not aware of the channels or platforms through which maternal health messages are disseminated. These findings indicate that the communication gap is not only the problem, but rather there is also a deep cultural and motivational barrier that limits men's engagement with maternal health messages in Dukawa community. On the sources from which maternal health messages are received among married men in Dukawa community, Table 4 below presents the data summary.

Table 4: Sources of maternal health information in Dukawa Community

Sources	FREQUENCY (N)	PERCENTAGE (%)
Health Workers	75	38.5
Religious Leaders	25	12.8
Traditional Birth Attendants	18	9.2
Community Leaders	19	9.7
Family Members / Friends	8	4.1
Media Practitioners	39	20.0
Government Health Agencies	7	3.6
Non-governmental Organizations	4	2.1
Others (please Specify):	0	0%
TOTAL	195	100.0

Source: Field Survey, 2026.

Table 4 shows that most respondents, $n=75$ (38.5%), receive maternal health messages from health workers, followed by media practitioners, $n=39$ (20.0%), religious leaders, $n=25$ (12.8%), community leaders, $n=19$ (9.7%), and traditional birth attendants, $n=18$ (9.2%). A smaller number of respondents chose family and friends, $n=8$ (4.1%), government health agencies, $n=7$ (3.6%), and non-governmental organizations, $n=4$ (2.1%) as their main sources of maternal health information.

Table 5: Most trusted sources of maternal health information

SOURCES	FREQUENCY(N)	PERCENTAGE(%)
Health Workers	64	32.8
Religious Leaders	62	31.8/
Media Practitioners	23	11.8
Community Leaders	15	7.7
Family Members / Friends	5	2.5
Traditional Birth Attendants	18	9.2
Government Health Agencies	4	2.1
Non-governmental Organizations	4	2.1
Others (please Specify):	0	0.0
TOTAL	195	100.0

Source: Field Survey, 2026.

Table 5 shows that among the 195 respondents who are exposed to and receives maternal health messages in Dukawa community, $n=64$ (32.8%) reported health workers as their most trusted source of maternal health information. This is closely followed by $n=62$ (31.8%) of the respondents who selected religious leaders, and $n=23$ (6.4%) respondents who selected media practitioners as their most trusted information sources on maternal health.

The third objective of this study was to find out the aspects of maternal health information to which the men in Dukawa community are most exposed. Among the 195 respondents who reported receiving messages, the most commonly communicated aspect was “antenatal care attendance”, $n=66$ (33.8%), followed by “maternal nutrition”, $n=35$ (17.9%) and “importance of hospital delivery”, $n=24$ (12.3%).

Overall, the findings indicate that although some aspects of maternal health, such as antenatal care attendance and maternal nutrition, are being communicated, other critical areas like male involvement in maternal health, postnatal care, the importance of hospital delivery, mother-to-child transmission of diseases, and family planning receive minimal attention (see Table 6).

Table 6: Most frequently received aspects of maternal health messages

MESSAGE	FREQUENCY(N)	PERCENTAGE(%)
Antenatal Care Attendance	66	33.8
Maternal Nutrition	35	17.9
Family Planning	17	8.6
Importance Of Hospital Delivery	24	12.3
Danger Signs During Pregnancy	9	4.5
Birth Preparedness And Complication Readiness	20	10.2
Postnatal Care	10	5.1
Newborn Care Practices	1	0.5
Prevention Of mother-to-child transmission of Diseases	5	2.5
Importance of male involvement in maternal health	9	4.6
Others (please Specify):	0	0%
TOTAL	195	100.0

Source: Field Survey, 2026.

Finding:

most respondents, $n=87(44.6\%)$, reported having no improved understanding of maternal health issues despite exposure to information. However, evidence was found of absolute $n=195(100\%)$ willingness among the men to take supportive actions towards improving maternal health in Dukawa community.

The fourth objective of this study sought to determine how exposure to maternal health information relates to the men's understanding of maternal health issues in Dukawa community. The survey participants were asked to indicate whether exposure to maternal health information has improved their understanding of maternal health issues. The participants were also asked if, given information support, they are willing to take supportive actions for improving maternal health in their community.

Majority, $n=87(44.6\%)$, of the 195 respondents who reported exposure, indicated that the exposure has not improved their understanding of maternal health issues. A lesser number of respondents, $n=60(30.8\%)$, reported that they gained improved understanding of maternal health issues from exposure to maternal health information. Although those who are not sure if exposure to maternal health information has helped to improve their understanding of maternal health issues are much lesser, $n=48(24.6\%)$, the overall influence of exposure to maternal health information on the men's understanding of maternal health issues in Dukawa community is low. However, the absolute willingness of the participants, $n=195(100\%)$, to give supportive actions towards

improving maternal health (Table 7) clearly underscores the need for more strategic steps to inform, educate and include the men in the pursuit of the objectives of maternal health in the community.

Table 7: Perceived influence of exposure to maternal health information and willingness for supportive actions (N=195)

VARIABLES	FREQUENCY(N)	PERCENTAGE(%)
Improved understanding	60	30.8
Not improved understanding	87	44.6
Not sure	48	24.6
Willingness for Supportive actions	195	100.0

Source: Field Survey, 2026.

Discussion of Findings

Based on the findings from this study, the exposure of men to strategic maternal health information in Dukawa community is generally low. Although some men reported receiving maternal health messages through channels such as radio, religious gatherings, health talks, and community meetings, a substantial proportion of respondents reported no exposure at all. This suggests that maternal health communication efforts in the community are poor and not sustained in reaching men. This finding is consistent with earlier empirical studies conducted in Nigeria and other developing countries. For instance, Adelekan et al. (2014) had found that men's exposure to maternal health information in many Nigerian communities remains limited, largely because maternal health communication is traditionally targeted at women. Similarly, Iliyasu et al. (2010) reported that men in northern Nigeria often lack access to maternal health information due to deeply rooted cultural beliefs that define pregnancy and childbirth as women's affairs. These studies support the present finding that many men in Dukawa community remain unreached by maternal health messages.

On the most common source of maternal health information for men in Dukawa community, health workers were indicated by most of the respondents. This finding suggests that health professionals play an important role in creating and disseminating maternal health information to men in Dukawa community. The health workers also happen to be the most trusted information source on maternal health in the community. The implications of this are that the health workers stand as a formidable means of social and behavior change interventions in Dukawa community. The likelihood of this fact being applicable in similar or nearby communities is high. Also, the study emerged with radio as the most frequent channel through which the men in Dukawa community receive maternal health information. This particular finding resonates with extant literature on the radio as the most ubiquitous media through which the larger populations of northern Nigerian can be reached (Utalor, 2019; Shalom et al., 2024). Again this implies that radio should remain in focus for development communication interventions in Dukawa and similar communities.

On the aspect of maternal health information, the men in Dukawa community are most exposed to, this study reveals that among the 195 respondents who reported receiving maternal health messages, antenatal care attendance, maternal nutrition and the importance of hospital delivery were the most frequently communicated aspects. Again this finding shows that other important aspects of maternal health information such as birth preparedness, complication in pregnancy, and family planning, which came up as less frequently received aspects of maternal health information could be strengthened through other means of planned communication in the community.

As this study also reveals, there is a limited relationship between exposure to maternal health messages and men's understanding of maternal health issues in Dukawa community. With limited understanding of maternal health issues, there is little to expect of the men's active involvement in the implementation of the policies and intervention programs on maternal health. However, it is interesting to note that an absolute majority of the men who indicated that they were exposed to maternal health messaging was willing to render supportive actions toward the realization of the goals of maternal health despite their limited understanding of the issues.

Conclusion

this study establishes that men in *Dukawa* community of northern Nigeria are underexposed to strategic maternal health information. This tends to leave a significant communication gap and prevalence of the existing cultural norm in which maternal health is considered and treated largely as women's issue. A variety of information sources and modern communication channels on maternal health are available in the community, but deliberate and sustained community engagement is significantly lacking, thus absents and weakening communication from influencing or facilitating the needed change in men's behavior towards maternal health in the community. Interestingly, there is absolute willingness among the men to participate in supportive actions towards improving maternal health in the community. However, this is unlikely to happen with current levels of exposure to information and necessary health education.

Recommendation

Based on the findings of this study, it is therefore recommended that the local health authority should liaise and work closely with the community based organizations and available non-governmental organizations to develop and implement contextual and participatory communication plan for educating the men and promoting inclusivity and behaviour change on maternal health in *Dukawa* community.

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