

The Role of Men in Promoting Maternal Health in Yenagoa Metropolis, Bayelsa State

Adedoyin Oluwatoyin Omidiji

Department of Geography and Environmental Management, Faculty of Social Sciences, Niger Delta University, Bayelsa State, Nigeria

Received: 29.04.2025 | **Accepted:** 29.05.2025 | **Published:** 13.08.2025

***Corresponding Author:** adedoyinomidiji@ndu.edu.ng

DOI: [10.5281/zenodo.19483590](https://doi.org/10.5281/zenodo.19483590)

Abstract

Original Research Article

The high rates of maternal death and morbidity in the poor countries make maternal health a pressing public health concern worldwide. One important strategy for improving maternal health is drawing attention to the involvement of males in these areas. This study investigated how males in Yenagoa Metropolis have helped to raise awareness about maternal health. Descriptive cross-sectional survey methodology was used in the study. After 400 respondents were chosen using multistage and purposive selection, 384 questionnaire were considered valid. Analyses were conducted using descriptive statistics (frequency, percentage, mean, and standard deviation) and chi-square to test hypotheses at a significance level of 0.05. Data was collected using a standardised questionnaire. These findings demonstrated that males may play a role in promoting maternal health by assisting their partners financially (Mean =3.28) so that they can get prenatal care, give birth in a hospital (Mean =3.03), help with labour preparation, (Mean =2.94) and offer emotional support during the pregnancy (Mean =2.89). There are a number of issues that prevent males from becoming involved in maternal health activities. These include cultural views, employment commitments, ignorance, and financial restraints. There was a strong relationship between men's participation in maternal health activities and socio-cultural variables, according to the analysis by inference. The article concluded that men's participation is critical for improving maternal health outcomes. Therefore, it recommended additional male-oriented health education programs, male-friendly healthcare facilities for mothers, community sensitisation, and policies that encourage men to participate in maternal health promotion.

Keywords: Maternal Health, Male Involvement, Maternal Health Promotion, Yenagoa Metropolis, Antenatal Care, Bayelsa State.

Citation: Omidiji, A. O. (2025). The role of men in promoting maternal health in Yenagoa Metropolis, Bayelsa State. *GAS Journal of Arts Humanities and Social Sciences (GASJAHSS)*, 3(6), [44-53]

1. INTRODUCTION

In underdeveloped countries where maternal mortality and morbidity rates are shockingly high, maternal health concerns are among the top international public health priority. Pregnancy, labour, and the postpartum period are all important times for a woman's emotional and physical well-being. This encompasses not just skilled attendance during the birth but also high-quality prenatal care and postpartum care. Some of the avoidable causes of maternal mortality include unsafe abortions, heavy bleeding, infections, hypertension, and obstructed labour (WHO, 2020). Pregnant women are less likely to have these issues when they have access to adequate healthcare and peer support.

Some global initiatives to enhance maternal health outcomes have actually been put into action. It is essential, among other things, to encourage males to participate in maternal health care. Surprisingly few men have ever been present during a childbirth or pregnancy. To increase mother and child health, however, recent research shows that men must be active in maternal health. When men take an active role in their partners' physical and emotional health before, during, and after pregnancy, they are being involved in maternal health. Attending prenatal checkups with a partner, offering emotional and financial support, participating in health education programs, and making informed decisions about maternal care are all examples of this level of engagement (Ditekemena et al.,

2012).

In most African households, the men are the decision-makers, especially when it comes to important matters like healthcare and finances. Since males often provide financially for their families, they are the ones who decide when and where their women need medical care. Thus, their viewpoints, involvement, and comprehension might greatly affect the accessibility of therapies for maternal health for women. Involvement of men in maternal healthcare increases the likelihood that they will visit prenatal clinics, which in turn increases the likelihood that they will assist their partners with prenatal reading and preparation as well as seek professional assistance as needed throughout the birthing process (Alio et al., 2013).

Research suggests that when men are actively involved in their wives' healthcare, it may lead to improved health results overall. Mullany (2006) found that women were more likely to use maternal health services, eat better throughout pregnancy, and follow doctors' orders when they were in prenatal care programs and their partner are actively supporting. Couples can more easily reach choices as a unit and expectant mothers can feel more supported emotionally when men are participating. Stress, anxiety, and depression are all detrimental to a healthy pregnancy and delivery, but when men are emotionally present for their pregnant partners, it helps alleviate these problems. Participation from males in maternal health improves preparation for birth and reduces the likelihood of complications. Proper preparation allows for a safe delivery. This involves being aware of potential threats while pregnant, hiring a competent birth attendant, organising transportation to healthcare facilities, and minimising medical expenditures. It is more likely that the family will be prepared to respond rapidly to pregnancy-related issues if men are involved in these preparations, which in turn reduces the time it takes to seek medical treatment (Thaddeus & Maine, 1994). Most underdeveloped nations lack the funding and personnel to adequately support maternal healthcare, even though men's engagement in this area has clear benefits. Cultural conventions and traditional gender roles dictate that men should remain out of pregnancy-related affairs. In most societies, males who go to prenatal appointments with their wives are seen as weak or submissive. According to Yargawa and Leonardi-Bee (2015), males are less likely to take part in programs aimed at improving maternal health because of cultural factors. The maternal health system in Nigeria is still facing the problem of maternal mortality, even though the government and international groups have made great strides in this area. Maternal mortality rates are among the highest globally in countries like Nigeria, where many pregnant women lack access to adequate healthcare and social support. In addition, research has shown that maternal health initiatives in Nigeria do not adequately include male participants. Cultural norms, low levels of education, and inadequate healthcare access are the main causes of this (Iliyasu et al., 2010).

Despite several government programs aimed at improving maternal health, the high maternal mortality rate in Nigeria continues to be a major concern for the general public. Poor birth weight, poor levels of faith in medical experts, and

inadequate social support are some of the causes of maternal mortality that persist despite attempts to increase access to healthcare. Providing women with sufficient healthcare prior to, during, and immediately after giving birth can avert the bulk of maternal mortality (WHO, 2020).

The absence of male involvement in maternal healthcare is a major contributor to the poor maternal health outcomes in developing countries. According to several communities in Nigeria, men are heavily involved in household decision-making, particularly when it comes to healthcare spending and use. Although men may not always recognise the need of maternal healthcare services or the dangers of pregnancy, it doesn't mean they're not affected. This information gap could postpone the development of prenatal care, increasing the likelihood of maternal complications and maternal mortality (Mullany et al., 2007).

There are a lot of cultural constraints and gender roles that prevent males from helping out with healthcare duties for their mothers. Men who want to help with maternal health care may encounter prejudice and sexism due to the widespread belief that women should have the primary role in these processes. Males are expected to abstain from attending prenatal care or activities promoting maternal health due to cultural conventions. The majority of women have difficulties during pregnancy without the emotional, financial, or practical assistance of their partners, according to Yargawa and Leonardi-Bee (2015).

Many medical facilities do not exactly want male patients. Some maternal health programs may only accept female participants, thus men may not be able to attend prenatal care appointments or learn about maternal health. This is further demoralising male healthcare workers and discourages men from engaging in programs that promote maternal health (Ditekemena et al., 2012).

Men in Yenagoa metropolis, Bayelsa State, do little to raise awareness about maternal health issues, and pregnant women in the city do not receive adequate treatment from the little healthcare facilities that are available. Although several studies have examined maternal health in Nigeria generally, there is inadequate study on men's roles specifically in supporting and contributing to better maternal health in Yenagoa. Without knowing the extent of male engagement and what motivates men to become engaged, it might be difficult to find strategies to attract men to support maternal health efforts. It is against this aforementioned gap that this present work emerged

2. LITERATURE REVIEW

2.1 Maternal Health

Maternal health relates to a woman's mental and physical health before, during, and after her pregnancy, World Health Organization (WHO, 2020) stated that for the sake of mother and child safety, maternal health is defined as having access to skilled delivery attendants, high-quality prenatal care,



emergency obstetric treatment, and postnatal care. A better chance of a healthy pregnancy and delivery is one of the main aims of maternal health care. Examples of such programs include vaccinations, healthy eating, prenatal care, and frequent checkups. The importance of maternal health programs in identifying and treating complications during pregnancy at an early stage was highlighted by Campbell and Graham (2006) as a vital role in reducing maternal mortality.

However, despite improvements in healthcare across the world, the maternal mortality rate remains high in many developing countries, especially in Sub-Saharan Africa. Globally, low- and middle-income countries account for over 94% of maternal mortality rates (2020). Culture, poverty, a shortage of doctors and nurses, and an antiquated healthcare system are all contributors to the alarmingly high maternal mortality rate in Nigeria. Considerations like as the mother's socioeconomic position, educational attainment, cultural beliefs, access to healthcare, and familial support system all have a role in her overall health. Family members' (and particularly men's) support is one of these factors (Mullany, 2006).

2.2 Male Involvement in Maternal Health

Supporting a pregnant woman or partner during her pregnancy, delivery, and the postpartum period is an example of male involvement in maternal health. According to Ditekemena et al. (2012), males may have an active role in their partners' pregnancies by accompanying those to prenatal clinics, making healthcare decisions, providing financial assistance, and advertising healthy lifestyle choices.

Men were not involved in prenatal care or other reproductive health services in the past since these programs mostly catered to women. To improve women's health, however, studies show that men's participation is essential. Men who take part in programs that help pregnant women are more likely to know what to look for in a doctor and to help their partners avoid dangerous situations (Alio et al., 2013).

Men's engagement in maternal health can take several forms, including: Ensuring partners attend prenatal appointments together, involving in delivery readiness, Funding healthcare services, attend health education programs, assisting with domestic tasks while pregnant. Mullany et al. (2007) asserted that male presence improves maternal health outcomes by encouraging women to frequent prenatal clinics and seek the care of skilled people while giving birth.

2.3 Importance of Male Involvement in Maternal Health

Maternal health can only be improved with the active participation of males. Several studies have determined that

when men are actively involved in maternal healthcare, women are more likely to receive proper care during pregnancy and delivery. One major advantage of males being involved is that it makes healthcare services more accessible for women. Males in most African civilisations are the primary earners and decision-makers when it comes to the family's finances. Babies are more commonly born in hospitals and in prenatal clinics when their spouses foot the bill (Yargawa & Leonardi-Bee, 2015).

One way males might help pregnant women is by offering more emotional and psychological support. As taxing as pregnancy can be on a woman's body and mind, it can be made easier with a loving partner at her side. Research by Alio et al. (2013) found that pregnant women whose partners offered both emotional and practical assistance had better health. Men also have the significant challenge of getting ready for childbirth. Preparing for a safe birth involves securing healthcare, figuring out how to get there, and setting aside enough money to pay for anything that may come up. A pregnant woman can cut down on the time she spends waiting for medical attention for complications by being well-prepared for birth, Thaddeus and Maine (1994). The idea of family decision-making gains traction when males are engaged. Understanding maternal health problems better equips men to support their partners in making informed healthcare choices.

2.4 Obstacles to Men participation in Maternal Health.

Despite the fact that male involvement is of importance to maternal health, several obstacles hinder men to provide healthcare support to their wives. They include, but are not restricted to, traditional and cultural perspectives. Most culture's view pregnancy and delivery as primarily a woman's responsibilities. Male patients seeking to assist with maternal healthcare may encounter social stigma and even mockery, as reported by Yargawa and Leonardi-Bee (2015). A lack of understanding and training is another barrier. Most men do not understand the importance of maternal healthcare services and the complications that might arise during pregnancy. It is possible that men support maternal health programs completely due to a lack of knowledge (Mullany et al., 2007). Obstacles in the healthcare system are another reason men are not more involved. At other hospitals, males are under-represented in maternity healthcare and there is a lack of treatments tailored to their needs. For example, it is inappropriate for men to communicate with their spouses during prenatal clinic visits (Ditekemena et al., 2012). Men also face financial barriers that prevent them from fully participating. Many men are required to work while they are pregnant, which might make them question the need of bringing their partners with them to prenatal appointments.



3 Theoretical Framework

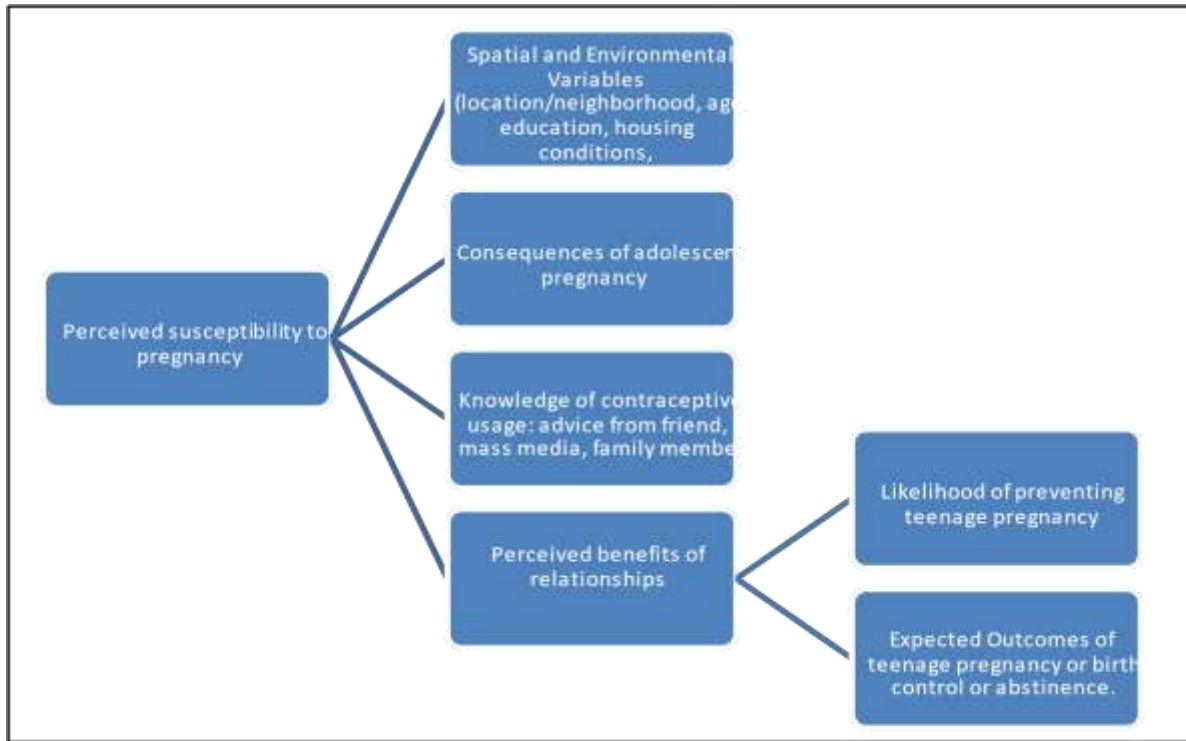


Figure 1: Health Belief Model
Source: Adapted from Brindis, Sattley & Mamo (2005))

This work employed the Health Belief Model (HBM), to elucidate the decision-making process behind individuals' health-related actions. This theory provides better grasp on the factors that encourage people to engage in preventive healthcare. In an effort to better understand and predict health-related actions, Rosenstock initially created the Health Belief Model in the 1950s. According to Rosenstock (1974), people are more inclined to participate in health-promoting activities when they see a health condition as serious and think they can do anything to reduce the problem's occurrence or severity. The Health Belief Model proposes that men are more inclined to participate in their partners' healthcare during pregnancy, delivery, and the postpartum period if they are educated about the possible hazards of pregnancy difficulties and the advantages of offering assistance, in relation to maternal health. Also, as Rosenstock (1974) pointed out, campaigns to raise awareness and educate the public about health issues can change people's minds and get them to do better by themselves. Thus, if men are better informed about their role in maternal health, they may be more likely to participate in the maternal healthcare program, which is good for mothers' health.

4 Empirical Review

The importance of men's efforts to improve maternal health has been the focus of few empirical study in few parts of globe. The

studies emphasise that husbands' involvement is crucial to enhancing healthcare use and results for women. In 2006, Mullany examined men's role in the health programme of women in Nepal. According to this research, men participation in prenatal education programs has a major influence on women seeking out maternal healthcare services when necessary. After husbands learned more about pregnancy, they were more inclined to advise their wives to seek out prenatal care and skilled labour and delivery assistance.

Similarly, Ditekemena et al. (2012) researched fathers' engagement in maternal healthcare in the Democratic Republic of the Congo to identify the factors that impact it. Evidence from this study suggests that men's knowledge and understanding of maternal health have a substantial impact on their engagement with maternal healthcare providers. Greater education and awareness of the risks associated with pregnancy and childbirth increased the likelihood that men would be there for their spouses during these times.

Iliyasu et al. (2010) reviewed the literature on male involvement in supporting maternal health services in Nigeria. Cultural biases and lack of knowledge are big barriers to their participation in maternal healthcare. The majority of males were not included in maternal healthcare programs due to the widespread belief that women should be in charge of all things pertaining to pregnancy.



involvement in maternal health promotion and the variables that influence it.

5.3 Sample size

Sample size determined by using Cochran (1977)'s formula for large population. :

$$n = \frac{Z^2 p(q)}{e^2} = 384, \text{ rounding up to for Where:}$$

- Z = z- score (confidence level) (e.g 1.96 for 95%)
- p = estimated population proportion
- e = is the error margin

This sample size of 384 male was increased to 400 to cater for sampling and human errors, however, 384 set of questionnaire were retrieved and used to analyze. For generalizability and statistical reliability of the findings, the set of questionnaires were administered proportionally upon the respondents among the communities chosen purposively in the study area. The communities are Agbia, Yenegwe, Agudama, Okutukutu, Pansa, Okaka, Onopa, Ovom, Agbura, Famgbe. Only the men who had a pregnant wife or a wife who had given birth in the past three years were selected in the study as they were deemed to have pertinent experience associated with maternal health.

This strategy was important in ensuring that the sample population was well versed with the knowledge and experience in relation to maternal health support.

6. Results and Findings

6.1 Socio-Demographic Characteristics

Table 4.1: Distribution of Respondents by Age

Age (years)	Frequency	Percentage (%)
21–30	102	26.6
31–40	156	40.6
41–50	84	21.9
51 years and above	42	10.9
Total	384	100.0

The majority of respondents, 102 (40.6%), were between 31–40 years, indicating that most participants were within the active family and reproductive age group.

Table 4.2: Distribution of Respondents by Marital Status

Marital Status	Frequency	Percentage (%)
Married	288	75.0
Single	42	10.9
Divorced	24	6.3
Widowed	30	7.8
Total	384	100.0

Most respondents, 288 (75.0%), were married, suggesting that the sample was appropriate for a study on male involvement in maternal health.

Table 4.3: Distribution of Respondents by Educational Level

Educational Level	Frequency	Percentage (%)
Primary	54	14.1
Secondary	120	31.3
Tertiary	174	45.3



No formal education	36	9.4
Total	384	100.0

Most of the respondents, 174 (45.3%), had obtained tertiary education implying an informed study population.

6.2 Research Questions

Research Question 1: What are the roles of men in the promotion of maternal health in Bayelsa State, Yenagoa Metropolis? A score of 2.50 and over was considered Accepted whereas a score of less than 2.50 was considered Rejected.

Table 4.4: Mean and Standard Deviation on the Roles of Men in Promoting Maternal Health

S/N	Item	SA	A	D	SD	Mean	SD	Decision
1	Men accompany their spouses to antenatal clinic visits	114	156	72	42	2.89	0.96	Accepted
2	Men provide financial support for maternal healthcare services	180	138	42	24	3.23	0.88	Accepted
3	Men assist in birth preparedness and emergency planning	126	144	78	36	2.94	0.95	Accepted
4	Men encourage their spouses to deliver in health facilities	150	132	66	36	3.03	0.97	Accepted
5	Men help with household tasks during pregnancy	90	120	102	72	2.59	1.05	Accepted
6	Men participate in postnatal care support	84	126	108	66	2.59	1.02	Accepted
	Grand Mean					2.88	0.97	Accepted

The grand mean of 2.88 shows that the respondents agreed that men have significant roles to play in ensuring that maternal health is promoted in Yenagoa Metropolis. The middle rank was the financial support of the maternal healthcare services with the mean of 3.23, and the lowest though accepted means were 2.59 of help with household tasks and postnatal care support. This finding supports the work of Alio et al., 2013 that men's involvement is crucial to enhancing maternal healthcare use and good results. It also aligns with the findings of Mullah, 2006 that men participation in prenatal education programs has

a major influence on women seeking out maternal healthcare services when necessary. After husbands learned more about pregnancy, they were more inclined to advise their wives to seek out prenatal care and skilled labour and delivery assistance.

Research Question 2: What are the factors that influence men's role in promoting maternal health in Yenagoa Metropolis, Bayelsa State?

Table 4.5: Mean and Standard Deviation on Factors Influencing Men's Involvement

S/N	Item	SA	A	D	SD	Mean	SD	Decision
1	Cultural beliefs hinder men's involvement in maternal health	132	150	60	42	2.97	0.97	Accepted
2	Work schedule limits men's participation in maternal health activities	174	120	54	36	3.12	0.98	Accepted
3	Lack of knowledge reduces men's involvement	108	162	72	42	2.88	0.95	Accepted
4	Clinic environment is not male-friendly	120	138	84	42	2.88	0.98	Accepted
5	Financial constraints affect men's support for maternal health	156	126	66	36	3.05	0.98	Accepted



6	Education improves men's involvement in maternal health	144	150	60	30	3.06	0.92	Accepted
	Grand Mean					2.99	0.96	Accepted

The grand mean of 2.99 indicates that the respondents were of the agreement that there are various factors that affect the participation of men in maternal health promotion. The most striking factor was work schedule having mean 3.12 and education with 3.06 and financial constraints with 3.05. This finding agree with the work of Yargawa and Leonardi-Bee (2015)., that Male patients seeking to assist with maternal healthcare may encounter social stigma and even mockery, The finding of (Dietekemena et al., 2012 is in line with the findings of this work , that lack of understanding and training is another barrier. Most men do not understand the importance of maternal

healthcare services and the complications that might arise during pregnancy.

6.3 Test of Hypothesis

In testing the hypotheses, Chi-square was used at 0.05 level of significance.

H₀: Men involvement is not significantly related to the promotion of maternal health in Yenagoa Metropolis, Bayelsa State

Table 4.6: Chi-square Analysis of Men's Involvement and Promotion of Maternal Health

Men's Involvement	Poor Maternal Health Promotion	Good Maternal Health Promotion	Total
Inadequate involvement	54	126	180
Adequate involvement	126	78	204
Total	180	204	384

$\chi^2 = 11.67$, $df = 1$, $p = 0.001$, Level of significance = 0.05
Decision: Since $p < 0.05$, the null hypothesis is rejected.

Interpretation: The intervention of men is significantly related to enhancement of maternal health in Yenagoa Metropolis in Bayelsa State. This shows that the degree of men participation/ support has a great bearing upon the health promotion of mothers. This support the work of Mullany (2006) that when men are actively involved in their wives' healthcare, it may lead to improved health results overall. Moreover, that that women

were more likely to use maternal health services, eat better throughout pregnancy, and follow doctors' orders when their partners are actively supporting.

H₀₂: There is no statistically significant relationship between socio-cultural factors and men's involvement in maternal health promotion in Yenagoa Metropolis, Bayelsa State.

Table 4.7: Chi-square Analysis of Socio-Cultural Factors and Men's Involvement

Socio-cultural Factors	Low Men's Involvement	High Men's Involvement	Total
High socio-cultural barriers	108	54	162
Low socio-cultural barriers	66	156	222
Total	174	210	128

$\chi^2 = 15.73$ $df = 1$, $p = 0.000$, Level of significance = 0.05
Decision: Since $p < 0.05$, the null hypothesis is rejected.



Interpretation:- Men in Yenagoa Metropolis have a great connection between socio-cultural factors and maternal health promotion. This implies that socio-cultural barriers play a great role in determining the level of participation of men in maternal health activities. This is in agreement with the submission of Yargawa and Leonardi-Bee (2015) that males are less likely to take part in programs aimed at improving maternal health because of cultural factors. Cultural conventions and traditional gender roles dictate that men should remain out of pregnancy-related affairs. In most societies, males who go to prenatal appointments with their wives are seen as weak or submissive.

7 CONCLUSION AND RECOMMENDATIONS

The impact of males in Yenagoa Metropolis on maternal health support has been examined in this article. The work found out that, men support their spouses' health in many ways, including finance, by encouraging their partners to use antenatal care services, by assisting with birth preparation, and by being there emotionally and domestically for their pregnant wives. Additionally, the study indicated that maternal healthcare service use is significantly impacted by male involvement in maternal health. When men are involved in helping pregnant women, they are more likely to go to prenatal appointments, get competent medical care throughout birth, and follow doctors' orders. Therefore, improving maternal health outcomes relies heavily on men's participation in healthcare for mothers. Regardless, the study provided more evidence that males have limitations in enhancing maternal health for a variety of reasons. There include a lack of male-accessible medical services, cultural views, job obligations, and knowledge about maternal health. Cultural norms that see pregnancy and delivery as primarily a woman's issue also contribute to men's reluctance to participate in maternal healthcare.

Additionally, the inferential analysis showed that men's engagement is significantly related to maternal health promotion, suggesting that men's participation might have a good impact on maternal health care practices. Male participation in maternal health was also shown to be significantly impacted by socio-cultural variables. In summary, male engagement is crucial to improving maternal health outcomes. The promotion of maternal health in the Yenagoa Metropolis may be substantially enhanced by education, the removal of cultural obstacles, and the active participation of males in healthcare initiatives for mothers.

The recommendations to better involvement of males in maternal health are: More awareness and sensitization programmes on the involvement of males in maternal health. Therefore, the engagement of males in the provision of healthcare for mothers is an essential component in the process of improving the outcomes of maternal health. Secondly, the beliefs in culture, the obligations of employment, the lack of knowledge regarding maternal health, and the lack of medical resources that are available to males should be improved. Enlightenment, the removal of cultural obstacles, and the more participation of males in programs that provide maternal healthcare in Yenagoa

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