



Photo Credit: Ingress Health Partners



# BRIDGING KNOWLEDGE GAPS TO IMPROVE MATERNAL HEALTH DECISION-MAKING: LESSONS FROM PROJECT AISHA IN KADUNA AND LAGOS STATES, NIGERIA

**Authors:** Regina Ajuonu, Orode Doherty and Oluwabukunmi Obadeyi.

Maternal health in Nigeria is shaped not only by the availability of medical services but also by the extent to which women are empowered to make informed decisions about their own health. Unfortunately, this is constrained by multiple interlinked factors that limit women's autonomy, leaving many women unable to fully exercise agency in maternal health choices.

Notably, socio-cultural barriers, including family power dynamics, often restrict women's

autonomy to independently seek care, while economic constraints such as poverty and financial dependence on male partner or family — hinder their ability to act on available knowledge. Compounded by limited education and inadequate maternal health awareness, women's capacity to understand risks and make informed choices is hampered. Access to reliable information is further undermined by poor infrastructure, low digital penetration, many—especially in rural areas—excluded from

vital health messages. Even when information is available, distrust in health systems due to poor service delivery and inadequate facilities discourages engagement. Fragmented and ineffective health communication, often not tailored to local languages or cultural contexts, weakens the impact of health education efforts. Together, these limitations create significant barriers to empowering Nigerian women in making informed maternal health decisions.

Project Aisha is a maternal health initiative designed to strengthen the health system, foster community trust, and ensure safer pregnancies and childbirth experiences—especially in underserved areas. Primarily, the project aims to reduce maternal mortality and obstetric complications including Postpartum haemorrhage (PPH), Pre-eclampsia/eclampsia (PEE) and Obstructed labour (OL) through timely interventions and improved care pathways.

## UNDERSTANDING THE BARRIERS

In 2023, a baseline study was conducted to uncover the hidden factors behind women’s reluctance to use healthcare facilities and the socio-cultural nuances to their health seeking behaviours across communities in Kaduna and Lagos State. The assessment was focused on women of reproductive age, their male partners and key decision influencers and the findings highlighted low knowledge about maternal danger signs, fear of medical interventions such as surgeries, episiotomies, and negative healthcare workers attitude as the leading factors behind poor maternal healthcare utilization.

## THE MATERNAL HEALTH INFLUENCER (MHI) MODEL

Based on these findings, the initiative expanded to include community-focused maternal health knowledge empowerment to address myths and misconceptions about health facilities and workers, rebuild trust and confidence for health systems and ensure safer pregnancy and birth outcomes. This approach was anchored by community nominees – Maternal Health Influencers (MHIs), carefully selected by community leaders after critical stakeholder engagements. These women and men were trained using project designed community health literacy scripts, and onboarded to sensitize individuals and existing groups with culturally relevant, and accurate maternal health messages.

The MHIs created awareness on maternal and newborn danger signs during pregnancy, delivery and at postpartum, basic obstetric healthcare facility options.



They emphasized the importance of birth preparedness and complication readiness to facilitate behavioural change, and informed maternal health decisions, including spousal support and involvement in mother and child matters. These MHIs transformed into bridges - linking the communities with the healthcare facilities. By leveraging existing community and local government stakeholder systems, the project is driving grassroots interventions in Kaduna and Lagos States.

### **Implementation Across Kaduna and Lagos**

In Kaduna's ancient alleys and bustling markets, and across Lagos's vibrant urban centers and underserved slums, Project Aisha is breaking barriers—arming women with the knowledge and confidence to make life-saving maternal health decisions. Since its launch in 2022, and the onboarding of 20 Maternal Health Influencers (MHIs), 6 in Kaduna and 14 in Lagos, these MHIs have stepped forward as trusted change agents, delivering culturally attuned, accurate messages that empower not only women but also husbands, mothers-in-law, fathers-in-law, sisters, and community stakeholders.

Project Aisha is more than a program—it is a movement to transform maternal health decision-making, one empowered woman and one informed community at a time.

### **Case Study: Zaria LGA, Kaduna State**

In Zaria, Kaduna State, MHIs, such as Hajjiya Binta and Laurat deployed to Wuciciri and Kufena wards conducted home visits, and

hosted market and adult literacy school sessions. They discouraged forced girl-child marriage before age 18, educated listeners on forms of gender-based violence and its effects on women, children and families, and promoted spousal accompaniment for antenatal and delivery trips. Mothers-in-law and Fathers-in-law joined, amplifying messages that boosted red flag awareness and emergency readiness. Mothers-in-law, once skeptics, now urge clinic visits, nudging partner involvement and cutting home births among traditional birth attendants (TBAs) by 78%.

A major shift has been observed among TBAs - notable for supporting childbirths in homes for a token, now modifying their age-long childbirth assistant practices and acting as tracing and mobilization agents of pregnant women to access quality healthcare services. These women collaborated with the MHIs during market storms and health commemorative events around the ancient towns and villages of Zaria, persuading for skilled birth delivery, and chanting maternal danger signs awareness songs in local dialect to every listener.

### **Case Study: Epe LGA, Lagos State**

Lagos's dynamic MHIs, including Mrs. Kafaya in Epe, blend Yoruba stories with nutrition tips, guiding on fund conservation through consumption of nutrient rich, locally available foods and vegetables. Sisters and partners stepped up, transforming family dynamics for maternal and newborn health.

## IMPACT AND KEY INSIGHTS

In Zaria, Kaduna State, MHIs like Hajara tackled rural isolation, trained extended families to spot maternal and newborn danger signs, promoted early antenatal and follow-up visits and spousal support for adequate nutrition. Mothers-in-law, once skeptics, now urge clinic visits, fueling partner involvement and cutting home births by 78% completed referrals among traditional birth attendants (TBAs).

The MHI model, as one of its kind ignited dramatic shifts. Women met in their natural spaces – homes, business and marketplaces, and in existing groups, gained knowledge and shared stories in family compounds.

### Insights

Show improved recognition of danger signs, leading to quicker decision-making and reduced delays in seeking medical care.

Are empowered to prioritize maternal and newborn health, increasing facility deliveries and skilled care.

Sustainability and reinforcement are key for lasting impact.

Awareness correlates with decreased mortality rates, as communities are more likely to seek help for critical symptoms.

## Emerging Results from Community Health Literacy Interventions

After one year of providing targeted health education, we saw a 19% improvement in women's awareness of three or more maternal red flags (baseline of 62.1% with endline of 81.1%). Pregnant women who previously had limited understanding about danger signs and where to obtain lifesaving, emergency obstetric and newborn care (EmONC) services became knowledgeable following MHI encounters; the awareness level surged by 16.5% from a baseline of 77.5% to 94% at endline. Some complicated and life threatening conditions that previously ended in whispers are gradually turning into demands for hospital intervention. In these two (2) states, maternal health literacy sensitization capable of shaping behaviours and positively transforming health decisions reached over 62,000 unique individuals across over 30 political wards.

*“Your health education last time hastened my recovery from the distressing chest pain I have been experiencing in this pregnancy. I visited the Health Center as you advised, thinking it was Ulcer. But after series of tests and examination, I was diagnosed of Hypertension in pregnancy by the Doctor. Am now on regular treatment & BP check and feeling better. Thank you“.*

Hajiya H. B - Zaria

## Overcoming Contextual Challenges

These influencers overcome local hurdles—Zaria's 'Ba Shiga' traditions, Lagos's chaos—with traffic jam, WhatsApp, and gatherings. These metrics underscore Project Aisha's impact: over 45,000 women of reproductive age reached, proving the power of community-nominated voices.



Sensitization of Patent Medicine Vendors and Apprentices in Oju Oto, Lekki 1, Ibeju-Lekki. Photo Credit: Ingress Health Partners



Maternal health influencer educating pregnant women on danger signs. Photo Credit: Ingress Health Partners

## Voices from the Community

“

*“To be candid, the project has not only saved lives of our pregnant women but also given them an unending joy in their productive years. The project remains the best, it opened the eyes of many to critical maternal health issues and provided them with core solutions when cases arise.*

*Project Aisha has influenced lives of our women, also lighten the minds of our men on supportive measures during pre and post natal period. I commend the organisers, health partners and MHI of this program for the actualization of the objectives of the program*

*On this note, I suggest the program should be introduced to remote areas of Ibeju Lekki Local Government Area of Lagos State”.*

- Balogun Sikiru O  
MHI Epe, Lagos.

“

*“Supporting maternal health awareness has been a good experience for me. It helped me understand the challenges many mothers face during pregnancy and childbirth. It has also made me more caring and aware of the need to support mothers in the community. By sharing simple health information and encouraging mothers to attend antenatal care, deliver in health facility, I believe my effort has helped in a small way to support the health and safety of both mother and child”.*

- Asubuojo Olayinka  
MHI Ifako Ijaiye, Lagos

## CALL TO ACTION

Let's drive change! Let's save lives!! Communities, healthcare providers, and policy makers, lets unite to:

Scale up awareness programs on maternal and newborn danger signs.

Empower community health influencers (MHIs/CRPs) and workers to educate and support case accompaniments.

Ensure accessible healthcare for all pregnant women and newborns.

Support integration of women and children into social health insurance to reduce out-of-pocket expenses strain.

Project Aisha isn't just bridging knowledge gaps, its improving and forging Maternal Health decision-makers. As Mrs. Akinpelu in Ifako-Ijaiye says, "From fear to readiness—we own our health now." In Kaduna, and Lagos, empowered women are rewriting maternal stories, one informed choice at a time.

# EXPLORE PROJECT AISHA



Scan Code to visit  
our website

