



Exploring the Potential Role of Men in Promoting Women's Health Through the Reflections on the Interconnections between Sex Differences and Gender Disparities

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Abstract

Background: The global burden of diseases affects women significantly with substantial morbidity and mortality. Women's health comprises of a wide range of health issues, including non-communicable diseases, and sexual and reproductive health problems. A major challenge is the sheer neglect of the critical role of men in promoting health and preventing disease among women. There are various factors that influence women's health, and the bio-psycho-social support from men is vital.

Aim: The aim of the study was to search for, and discuss the influence of men on women's health, and show the need to explore the potential roles that men can and need to play in shaping women's health for better outcomes.

Methodology: The research was a review study, with evidence extracted from articles and evidence-based documents on the influence and role that men have in shaping the health of women.

Findings: The influence of men in the course of women's health is significant. It was found that the orientation of men has to be changed by both the demand side and the supply side of women's health care services. Evidence reveals the strategic roles of men that needs to be explored through a multi-pronged approach based of collaborations with the stakeholders.

Conclusion: Men need to be actively engaged in the promotion of women's health. Men at all levels, from the individual, family, community, social, religious, cultural, and professional circles, should view women as reflections of men, and indispensable partner whose health should be promoted relentlessly for the enhancement of the overall health and wellbeing of humanity.

Keywords: Women's Health; Role of Men; Sex Differences; Gender Disparities; Global Health

Introduction

The global burden of disease in the female population has changed tremendously in recent decades. It is now glaring that non-communicable diseases (NCDs) now constitute the leading causes of morbidity and mortality among women in most countries globally [1,2]. Almost one in four of NCDs occur in the low- and middle-income countries (LMICs), and it is mainly within

these nations that NCDs are swiftly substituting infectious diseases, maternal and child diseases, and nutritional disorders as the foremost causes of disability and death [1,2]. Global efforts to enhance the health of women appear to focus more on sexual and reproductive health [1,2]. This review articles aimed to bring to the fore, the vital role that men can play in optimizing women's health taken into consideration the wide issues surrounding gender roles and sex differences from within the society to the global agenda.

The concepts of sex and gender

Sex is the term that describes the biological nature of a person's reproductive organs, and whether the organ carries XX or XY chromosomes. Gender encompasses the changes that result from the behavioural, psychological, and social consequences of the gender perceived to oneself by an individual. Gender is unlike sex, which is related to biological features. Gender has been known to be multifaceted and variable in nature [3]. The concept of gender, as a concept has been defined as the roles and norms that are constructed on a social basis, attributed to individuals by their male, female, or diverse identities, and by their contextual society, or applied to people based on the gender experienced by each individual [4]. Moreover, it refers to the meanings and expectations attributed by society and culture. Gender can differ according to the cultural values, place, and time [5].

According to the United Nations Women, gender equality entails providing equal rights, responsibilities, and opportunities for men and women, boys and girls; while equality does not denote that men and women are the same. The UN Women stated that equality does not reflect that the right, responsibilities, and opportunities of women and men rely on their birth status as male or female. They described gender equality as recognizing the diversity that exist between men and women, and taking into consideration the needs, interests, and priorities of both men and women. They consider the proposed gender equality between men and women as a fundamental human right issue, and a basic prerequisite to attain the goals of the sustainable development goals [6]. Gender inequality is visible in many areas in most societies, and one of the important and evident aspect of human of life affected is the field of health [7]. Within the health systems, restrictive gender norms with associated gender inequality are being practised, resulting in gender inequality in human health [8]. The arising situation substantially affects the physical, psychological, social, and reproductive health of women [4,7,9]. Thus, gender equality, which is a core guide in feminist movement literature for a while, is a method that needs to be taken into utmost consideration in programs and practices targeted at enhancing health for all [10]. Therefore, differences in sex, and the disparities in gender can affect the demand and supply of health care services at various levels, and by different factors.

Role of health care providers regarding gender considerations

On the side of the health care providers, beliefs, prejudices, values, or practices, when confronted with diseases, injuries, or dis-

abilities, could affect people's (especially women's) health negatively [11]. It imperative that health care professionals consider gender equality in every aspect of their practices while providing services for those in need [9,12]. The health care providers need to know of the cultural features of the society of the people they service, and be mindful of the potential gender inequalities, and the societal views and roles needed to enhance the status of women's health within the society. They should take steps to ensure that they inform the residents of the community about gender equality, while they pay attention to, learn, and teach gender-related developments. Importantly, they should provide health care services in a fair manner, without any form of discrimination [9,11,13,14]. Furthermore, ensuring gender equality by health care providers will enhance the quality of care with resulting better health outcomes. Fulfilling the Sustainable Development Goals within the context of universal health will be incomplete without taking into consideration and addressing the role of restrictive gender norms, and gender inequality within the health systems of all societies [11,15]. Therefore, it is vital that the 'supply' side of health care is re-structured in order for health care provision for women to consider the role that men can play in helping to enhance women's health.

Burden of women's health issues

Generally, sometimes ago, non-communicable diseases (NCDs) formed the leading causes of morbidity and mortality, with a rapidly rising input to the global burden of disease. For instance, NCDs form about 70% of the causes of death in women, showing an increase in prevalence from 1990, where NCDs constitute 40% of mortality in women. The highest causes of death were due to ischaemic heart disease, stroke, chronic obstructive pulmonary disease (COPD), Alzheimer's disease, diabetes mellitus, hypertension, and lung cancer respectively. In the same vein, the topmost causes of disability-adjusted life years (DALYs) for women globally in 2013 were NCDs including ischaemic heart disease, low back pain, stroke, COPD and depression [16]. Therefore, NCDs, which are usually chronic and life-long diseases constitute a major source of morbidity and mortality among women. Thus, it should not be astonishing if a women's health is given a priority in order to enhance global health in general.

More recent global findings showed that females were noted to have greater burden of morbidity-driven diseases with the most prominent discrepancies in disability-adjusted life years (DALYs) for low back pain, depressive disorders, and headache disorders

(see figure 1) [17]. However, males had more DALY rates for mortality-driven diseases, with the highest differences in DALYs for COVID-19, road traffic injuries, and ischaemic heart disease [17]. The notable differences between sexes were higher over age and remained persistent over time for all diseases except HIV/AIDS. The major difference in HIV/AIDS was found among people aged 25–49 years within the sub-Saharan Africa with more DALYs among females than males [17].

On the one hand, the aforementioned findings reflect that females experience diseases that have higher morbidity, and with which they live longer than males. Therefore, women have higher demand for, and are actually in need of more health care. However, they may be the sex group with less access in many settings. In addition, the decision to seek for healthcare mostly begins in the

family setting, where oftentimes the support, and sometimes the permission, of the male partner is required. These observations may thus, indicate the relevance of incorporating the involvement of men in women’s health care services. On the other hand, the possibly contested aspect of women’s health could have been misconceived by men as the sole aim of the women’s health agenda to enable women to become independent of men regarding sexuality and reproduction. It should therefore not be much surprising that the ship to secure good health for women has been facing high tides perpetually. Therefore, re-designing and re-presenting the focus of attaining a healthy female population to the men through a reflection showing the interconnections between sex differences and gender disparities could be the stitch in time, that might save more than nine.

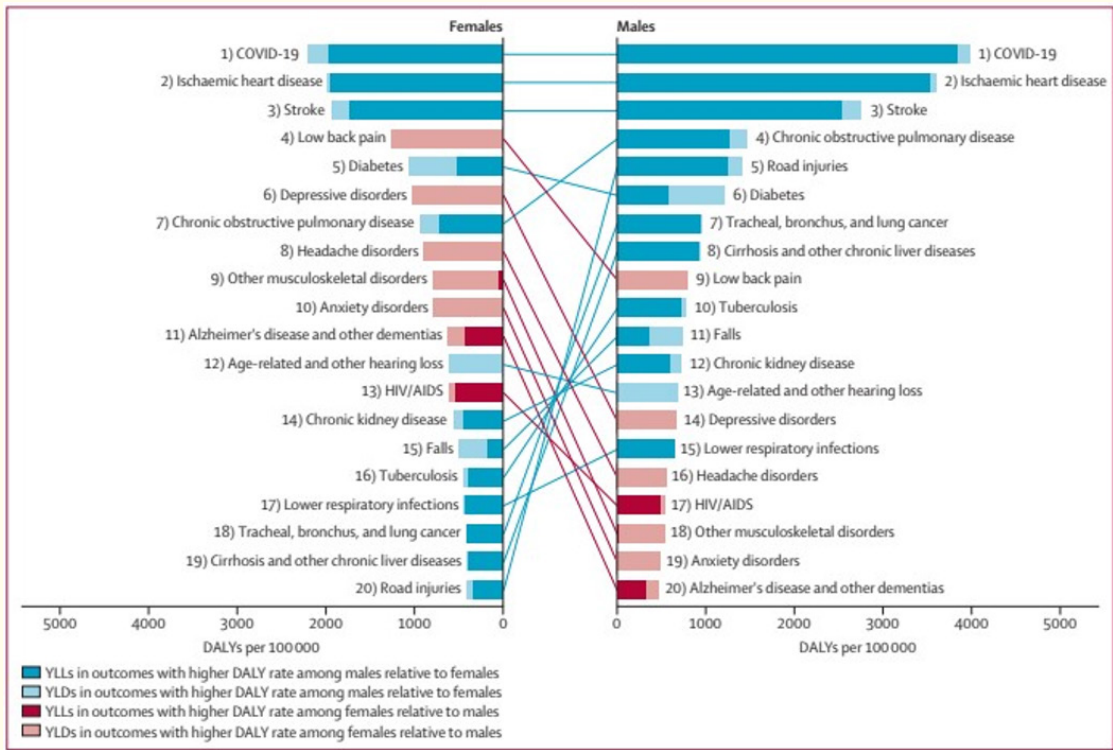


Figure 1: Global rankings of the top 20 causes of DALYs globally for females and males, age-standardized (10 years and older), 2021. (Source: Patwardhan, 2024).

Global dimensions to women’s health

A major blueprint in the global efforts towards Women’s Health was the United Nation’s (UN) Millenium Development Goals (MDGs) meant to enhance international development, and meet the needs of the under-privileged populations. Improvement of maternal health was the fifth MDG, which targeted the reduction

of maternal mortality by 75% between 1990 and 2015, mainly through increasing the availability and access to reproductive health [1]. Following the recognition of obstacles in the pathway toward reducing maternal deaths in several countries, the United Nations launched the ‘Global Strategy for Women’s and Children’s Health’ in 2010, which called for consolidated national and interna-

tional actions to proffer solutions to key health issues confronting women and children [18]. This major global step led to the creation of the 'Every Woman Every Child movement', which forms a pathway for the journey towards eliminating every preventable cause of death among women, adolescents, and children [19].

In September 2015, an updated version of the 'Global Strategy for Women's, Children's and Adolescents' Health (2016–2030)' was launched by the UN in collaboration with the World Health Organization (WHO) [20]. This combined effort reinvigorated the course towards improving the health, and ending all forms of preventable deaths in women, children, and adolescents by the year 2030. In conformity with the Sustainable Development Goals (SDGs), a target was set to attain one-third reduction in the burden premature deaths arising from NCDs [19,20]. Subsequently, The UN General Assembly hosted the 'Global Leaders' Meeting on 'Gender Equality and Women's Empowerment: A Commitment to Action', where financial commitments in the sum of US\$25 billion were made, with significant political support pledged [21,22].

With the apparent global efforts to enhance women's health, there is need for advocacies within countries to be strengthened, in order to consolidate on their national strategies by ensuring the establishment and implementation of country-specific plans. The federal government's efforts should be made to extend to state government through sustained partnerships. The state governments' frameworks are needed to support local/county/district government authorities in every geographical location around the world. By promoting women's health through the aforementioned pathway, the various communities and family units would thus, be able to engaged through a channel for promoting the health of women. By engaging the mindsets and capabilities of men, men should be able to consider sexual differences and gender disparities as beneficial factors that should be used for promoting women health from the family unit. Thus, the stronghold of the family would help to facilitate women's health from each family.

Reflections on the interconnections between men and women

Apart from the biologically sex-specific health conditions that affect women alone, there are many NCDs that form a high burden of disease among women. The care for NCDs which are mainly chronic medical disorders, appear to demand more medical, financial, family, and social support systems, which are usually relatively less available, accessible, and affordable for women. Caring for NCDs often require daily medication intake, recurrent attendance

at the health facility, nutritional needs, and therefore uninterrupted financial means, that appear to be out of reach of women. It is therefore, essential that men are actively called upon to be involved and engaged in securing good health for women by connecting the mind of men to an imaginary mirror whereby a man sees himself as a product of a woman (mother), visualizes himself as a brother of a woman (sister), views himself as a progress partner of a woman (wife), observes himself as a procreator of a woman (daughter) who then appears to be a reflection of the man and possibly the man can then look at his daughter as his future self. A man thus, would be unable to detach himself from championing the women's health agenda. Each man would therefore be able to reflect through a mind exercise of thinking of a woman as himself in the mirror who needs to be supported in all aspects of ensuring a healthy women population.

Therefore, the sex differences and gender disparities need to be visualized as potential opportunities that could be used to reflect on the interconnections between men and women. Although the dissimilarities are what appear to be deterring the agenda to enhance women's health, they should be used as an avenue to pave the way towards attaining a healthy woman in each house, and healthy women everywhere in the world.

Evidence on the role of men in women's health

In providing family planning services for women, gender barriers to the use of contraceptives, and seeking maternal healthcare have been identified, as many women need the permission of their husbands in order to use healthcare services, even in emergency situations. Furthermore, supply side obstacles aggravate the issue, as many health service providers would not render family planning services to women without the approval or presence of the husbands. Moreover, some male health service providers would refuse to admit a woman for delivery in a health facility if the husband objected to care to be provided by a male health personnel, irrespective of whether a female health personnel warm available or not [23].

Men have been found to facilitate access to health care for women and newborns along the care-seeking continuum (comprising of decision to seek care, reaching a health facility, obtaining care) of motherhood. To be specific, men have taken ownership of their responsibility as decision-makers, and supported facility-based health care. They play a vital role in organizing transport means,

and accompanying their partners to the facilities. Moreover, men have been served as advocates for women by taking responsibilities for purchasing medications and supplies, and registering complaints concerning the services obtained. However, certain barriers have been noted to deter men from fulfilling the roles stated, such as lack of knowledge, inadequate time, cost of care, focus on generating income, and health facility policies restricting men's involvement at facilities [24]. Men are capable of providing support and care for women and children in the home. Emotional and financial supports can be practically provided by men, in order to enable women to be able to access essential maternal health services [25]. The relevance and benefits of skilled healthcare for women during pregnancy and childbirth have been recognized by men, although the majority of men did not actively get involved in activities of maternal healthcare [26]. The challenges that were identified according to a study in Ghana were health services factors, negative cultural beliefs, the perception of maternal care to be the female's responsibility, the higher cost of men attending care with women [26].

The impact of gender dynamics on maternal health have been found to be related to social norms, division of labour, and access to resources, in the broad sense [27]. Decision-making was noted to be interconnected with all the aforementioned three factors. Firstly, the social norms that affect gender dynamics include perceptions of pregnant women's attitudes and behaviour, concerns about domestic violence, men's attitudes regarding fatherhood, and health worker attitudes and behaviour. Secondly, division of labour entails women's workload in the antenatal and postnatal periods, and the lack of male involvement at health facilities. Thirdly, access to resources has been described as regarding lack of money, lack of income generating jobs, lack of income to meet health centre financial demands, and lack of money needed for transport services [27].

There are interventions that were carried out to influence the involvement of men in maternal and newborn health [25]. They were meant to address the factors that influence men's role in women's health. Studies have shown that the interventions to aimed at engaging men were associated with enhanced antenatal care attendance, health facility birth, skilled birth attendance, postpartum care, birth preparedness, care for complications, and maternal nutrition [25]. Although, the impact of the interventions on morbidity, mortality, and breastfeeding was less glaring, the

interventions had positive impact/improvement on male partner care for women, improved couple communication, and joint couple decision making, with unclear effects on women's autonomy [25]. The assessment of the interventions revealed that the interventions enhanced the care provided for newborns and women, and help to strengthen family relationships [28]. However, poorly implemented interventions have been found to be associated with risks of harm, like deterring women from accessing maternal and neonatal health services, and complicating the negative influences of the prevailing gender inequalities [28]. The decision and extent of men's support for maternal and neonatal health could be influenced by household needs, socio-demographic factors, and peer networks. The perceived benefits of the interventions were found to be compelling, while the reported risks of negative impact were manageable by cautious implementation. There was clear evidence of demand from men, women, and healthcare providers to improve the opportunities to enhance men's involvement in women and newborn health [28].

The vital role of men in consolidating maternal health care have been acknowledged by both men and women, although only few men were actually involved [29]. The benefits identified in engaging men in maternal health care includes: learning the risk factors that affect women's health from health services providers, and preparing to address them; and reinforcing the implementation of the instructions received from the health personnel that men need to serve as family guardians and protectors [29]. The challenges to the engagement of men in maternal health services were found to be systemic in nature, beginning from the family, to the social environment with consideration for culture-related gender norms, and to the health facility settings with structural barriers inhibiting the implementation of couple-friendly maternal health services [29]. The involvement of men in women's health has been found to be associated with improved knowledge and acceptance of family planning, partner accompaniment to health facility, and the defeminization of gender and social roles. There is an important role of men's participation in maternal, neonatal, and child health, which helps to facilitate decisions concerning women's health and children health, and also improving partner support for the use of family planning methods [30]. Men have been noted to demonstrate poor knowledge of obstetric danger signs in the postpartum period, though, they were more knowledgeable of the danger signs during the pregnancy and delivery periods. They demonstrated the knowledge of being aware that antenatal care can lower the risk of

pregnancy complications. Education was observed as a vital factor, as literate men were more likely to possess helpful health-behaviour perceptions. In addition, higher socio-economic status was observed to have a positive association with the view that childbirth should take place in the health facility setting [31].

A study that assessed gender roles as a form of determinant of health found certain factors to be responsible for the impact of gender roles, including: (1) the disregard of women by the society, (2) use of force on women, (3) labelling women as sexual objects, (4) having a say in society, (5) overvalued masculinity and femininity roles, and (6) gender equality [32]. The study found that health-care professionals observed that women have been neglected by institutions in various societies since gender roles were strong-minded by patriarchal societies [32]. Consequently, the societal-generated situations can adversely influence the health of individuals, and populations. Therefore, it is keen that importance is attached to equality between women and men in order to improve health of women who have been behind in obtaining quality health care services. Healthcare professionals can thus support equality in order to improve the quality of health care being provided to both males and females.

Men as instruments of breakthrough solutions

As the focus was more on sexual and reproductive health as the major theme of the various global health and local health agendas, a complete appreciation of the aims and components of women's health in its reality appear to be lacking. Therefore, misconception of the Women's Health agenda precipitated under the eyes of participants, thereby overlooking many aspects could not have been surprising. If at the international level, the nitty-gritty of WH had an unclear atmosphere, how then can we be sure that the course of WH at the grassroots level, either within communities, or within the perimeters of each home, will be achieved? A down-to-top approach whereby men are convinced through their mindset from within their homes and families right up to the United Nations global agenda round table on women's health is expected to pave the way for a brighter future in the pathway to attaining positive outcome in the WH agenda, rather than the reverse.

Why do men (and boys) need to end violence against women (and girls) in all ramifications.

Men should be instruments of change in the fight to end violence against women especially regarding the health of women.

This is because if men view women as their (men's) own reflections, the likelihood of perpetrating violence/abuse/neglect of women's health, would be substantially reduced.

Why should men view women as the reflections of men?

Men are the nurtured products of mothers, the beneficial partners of the wives, the harvesters of the daughters, and the protected beneficiaries of aunts, cousins-sisters, grandmas, etc. Therefore, the health of women should be a core and accepted responsibility of men. Neglecting the health of women, in its reality, translates into devastating effect on the health of men themselves. An unhealthy mother would not be able to nurture her son adequately, care for her husband, cater for her father, etc. Therefore, poor health of women can indirectly result in poor health of the husband, the son, the father, the brother, etc. Solving the issues around Women's health need to commence from men's perception towards women, who need to understand that the woman/girl who can be a victim of the man's neglect can only give back to the society through the men she nurtures only if her health is promoted by men, who are waiting for benefits from the women.

Re-positioning women's health

Contemporary approaches to enhancing women's health do not encompass all the health conditions that constitute the highest burden of disease, which are the NCDs. Some specific reproductive health disorders are also excluded by the agenda in the past, like pregnancy-induced hypertension and gestational diabetes, which affect the health of females later in life [2]. This reflects a limitation in the opportunities available to improve women's health most effectively and most efficiently. Furthermore, a program on women's health targeting only reproductive age group alone could be inequitable because it ignores women who do not bear children, or are outside of the age bracket [2]. The barriers that have been identified need to be bridged through community awareness and mobilization programmes in order to enhance more male involvement, effective leadership, health education, patient-focused training on maternal health care for health professionals [26]. Thus, a wider scope of women's health agenda that incorporated non-communicable diseases, with a refined approach to sexual and reproductive health inclusion needs to be established.

Conclusion

Women's health is an apparent issue of discourse on the global health agenda. However, the global efforts to promote women's

health appear to have been diminishing along the pathway from the global level to the family unit. The national and local governments across the world should establish, consolidate and implement frameworks which would deliver health and health care for women through collaborative efforts to involve men. The potential role of men in promoting women's health from the family units back to the global level needs to be explored.

Recommendations

Improving the health of women in every community by utilizing the role of men requires a multi-pronged approach as follows.

- Re-orientation of men from within the family on their strategic position as family leaders and caregivers for all members of the family.
- Considering the gender roles in the family, while encouraging men to expand their support for the entire family by getting involved through active participation in the women's health.
- Identifying the factors that deter men from involving in women's health and providing context specific solutions that are acceptable in different communities.
- Enhancing the awareness of health care providers regarding the societal norms and gender roles attached to women's health in their communities of practice, while collaborating with men to promote women's health.
- Empowering women through education and socio-economic support in order for them to be able to lessen the financial burden on men regarding provision of health care services for women.
- Community leaders can be engaged in promoting the involvement of men in identifying women in need of health care and supporting men to be able to ensure women have access to the required services unhindered.
- Government institutions should be empowered to take over some roles in supporting men in the provision of health care services for women, such as making antenatal care and child health care services to be free, or at least subsidized through government-led health insurance, and other health-financing methods.

Conflict of Interest

The authors declare no conflict of interest.

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