

# Application of Public Relations in Enhancing Healthcare Delivery to Women of Reproductive Age in South-East Nigeria

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**Abstract—** This study investigated the extent and frequency of use of PR tools for enhancing healthcare delivery to women of reproductive age from selected states in South-East Nigeria. The survey research design was adopted for the study while data was collected from 201 PR experts and 384 women of reproductive age (18-49 years). Mean, and standard deviation were used to answer the research questions while the t-test was used to test the hypotheses raised. The findings included that most of the PR tools, such as attendance at public events, blogging, social media marketing, advocacy and word of mouth advertising were used to a low extent. Based on the findings of this study, the researchers recommended, among others, that health workers should make use of PR tools to a large extent in delivering healthcare services to women of reproductive age.

**Index Terms—** Healthcare, PR tools, reproductive age, women.

## I. INTRODUCTION

Public relations (PR) is one of the essential communication tools through which goal-oriented messages are communicated to the target receivers. As a communication tool, public relations aims to pass precise information to the target with a view to informing or educating them on the issue. At its meeting in Mexico in 1978, the world assembly of Public Relations Associations agreed that "Public relations is the art and science of analyzing trends, predicting their consequences, counselling organisation leaders and implementing planned programmes of action which will serve both the organizations and the public interest" (Harrison, 2000, 6). The interest of the current study from the definition of public relations above commonly called the Mexican Statement is that public relations entails analyzing trends before decisions are made. Such analysis could help in the application of PR tools in solving issues for the overall benefits of the society. Nwosu (1995) opines public relations practitioners in organisations advise management on the importance of such issues as good performance, sensitivity to public interest and related matters. Ukonu *et al.*, (2017) say that public relations is a critical tool for behaviour change. See also Uduji (2013).

Public relations could be an effective tool for behaviour change communication. This is because public relations tools could be essential mechanisms through which opinion could

be shaped. Seitel (2007) says that the aim of public relations is to inform the public, prospective customers, investors, partners, employees, and other stakeholders and ultimately persuade them to maintain a certain view about the organization, its leadership, products, or of political decisions. Scholars (e.g., Cureteanu & Maxim, 2007; Shamsan & Otieno, 2015 ) reported that public relations is a critical tool for opinion moulding, attitude change and perceptions about an organization as well as defining the nature of the relationship between an organization and its public. Suffice it to say that public relations could be effective at behaviour modification; it follows logically that public relations tools could be useful for health campaigns, especially concerning reproductive health. Issues relating to reproductive health are of particular interest because of the critical nature of reproductive health regarding the general wellness of the public. The World Health Organization (1994) says that reproductive health includes: the ability to reproduce; freedom to control reproduction; the ability to go through pregnancy and childbirth safely, with successful maternal and infant survival and outcomes. It also includes the ability to obtain information about and access to safe, effective and affordable methods of family planning; the ability to have a satisfying, safe sex life, free from fear of pregnancy and disease and the ability to minimize gynecologic disease and risk throughout all stages of life. Looking at the conceptualization of reproductive health, it can be seen that women are at the centre of it. Even though the accepted age range for women of reproductive age is between 15-49 years according to the Federal Ministry Health, 2017, adulthood is prescribed to start at 18 years. Women of reproductive age need healthcare services like anti-natal, postnatal, family planning, among other maternal healthcare services. Dayaratna, (2000) World Health Organization (2004) and the Federal Ministry of Health, (2005) reveal that despite the existence of national programmes for improving maternal and child health in Nigeria, maternal mortality and morbidity continue to be high and the majority of maternal deaths can be prevented or reduced if women had access to, or visited maternal health services during pregnancy, childbirth and the first month after delivery. Part of the problems why health care services have not achieved the desired result is the communication gap between healthcare services providers and women of reproductive age. The Federal Ministry of Health (2017) acknowledge that health care information delivery has posed a serious challenge in a bid to deliver health care services to

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women of reproductive age. Evidence in the literature suggests that reproductive health is still a health problem in South-East Nigeria. For example, a study conducted by Ngwu (2012) found that most residents of Enugu state still have negative attitudes to issues relating to reproductive health. Therefore, this study explored the extent and frequency of use of PR tools for enhancing healthcare delivery to women of reproductive age in South-East Nigeria.

## II. STATEMENT OF THE PROBLEM

One of the problems facing the world today is how to ensure maternal health through good health practices. The increasing number of women-death as a result of reproductive health-related issues is a testimony to the precarious nature of the situation in Nigeria. World Health Organization (2016) revealed that every day, approximately 830 women die from preventable causes related to pregnancy and childbirth and that 99% of all maternal deaths take place in developing countries. The United Nations International Children's Emergency Fund (2017) says every 10 minutes, one woman dies because of pregnancy or childbirth in Nigeria, giving a total of 53,000 per year.

Poor information flow has been identified as part of the problems confronting health care services delivery to women of reproductive age. The situation in South-East is not any better as Ngwu (2012) reported negative attitudes of residents of the areas towards reproductive health. Although public relations is regarded as an effective tool for in communicating goal-oriented information, not much has been done concerning extent and frequency of application of PR tools in reaching women of reproductive age, hence the need for this study.

### Objectives of the Study

The general objective of this study is to determine how to apply PR tools for delivering healthcare services to women of reproductive age in Enugu State: Specifically, the study sought to achieve the following:

1. To determine the extent public relations tools are adopted in delivering healthcare services to women of reproductive age in selected States in South-East , Nigeria.
2. To determine the frequency of use of public relations tools in delivering health care services to women of reproductive age in selected States in South-East Nigeria.
3. To ascertain obstacles to the use of PR tools in delivering healthcare services to women of reproductive age in selected States in South-East.

### Research Questions

This study sought answers to the following questions:

1. To what extent are public relations tools adopted in delivering healthcare services to women of reproductive age in selected States in South-East Nigeria?
2. What is the frequency of use of public relations tools in delivering healthcare services to women of reproductive age in selected States in

South-East Nigeria?

3. What are obstacles to the use of PR tools in delivering health care services to women of reproductive age in selected States in South-East Nigeria?

### Hypotheses

This study tested the below hypotheses at 0.05 confidence level

**Ho<sub>1</sub>:** There is no significant difference in the mean scores of women of reproductive age and PR practitioners on the extent of use of PR tools for healthcare delivery

**Ho<sub>2</sub>:** There is no significant difference in the mean scores of women of reproductive age and PR practitioners on the frequency of use of PR tools for healthcare delivery.

### Public Relations Tools

Public relations practice is one of the ways through public awareness is created. Kotler and Armstrong, (2006) affirm that public relations can have a strong impact on public awareness at a much lower cost than advertising. Public relations makes use of certain tools to achieve its aim. Public relations could be for profit-based organizations or not-for-profit organizations. This study is limited to not-for-profit organizations as the delivery of healthcare to women is driven by the desire to save lives, not profit making.

Kotler (2008) outlines two models of public relations used in the non-profit sector: This includes 1) The classic, traditional model, centred on an institutional image, maintaining a certain equilibrium in the relationship between the public and institutions. 2) Awareness (public advocacy), closer to contemporary public relations, serve to initiate social action.

Rivero and Theodore (2014) say that the tools used in public relations are press releases, lobbying, product publicity, investor's relations, and development. Josan (2010) adds advocacy as part of the tools. IPR (2012) explains the following as the most commonly used PR tools:

**Attendance at public events.** To attract public attention and keep it engaged with a particular organisation or an individual, PR specialists take an advantage of every public event and the opportunity to speak publicly. This enables them to directly reach the public attending the event and indirectly, a much larger audience.

**Press releases.** Information that is communicated as a part of the regular TV or/and radio programme, newspapers, magazines and other types of mainstream media achieves a much bigger impact than advertisements. This is because most people consider such information more trustworthy and meaningful than paid ads. A press release is, therefore, one of the oldest and most effective PR tools.

**Newsletters:** Sending newsletters – relevant information about the organisation or/and its products/services - directly to the target audience is also a common method to create and maintain a strong relationship with the public. PR specialists use it to share news and general information that may be of interest to the target audience rather than merely promoting products/services.

**Blogging.** To reach the online audience, PR specialists use the digital forms of press releases and newsletters,, but they

also use a variety of other tools such as blogging and recently, microblogging. It allows them to create and maintain a relationship with the target audience as well as establish a two-way communication.

**Social media marketing.** It is used primarily by the marketing industry. Social media networks, however, are also utilised by a growing number of PR specialists to establish a direct communication with the public, consumers, investors and other target groups.

It is important to add here that there may be many other PR tools which specialists use in their daily practice (Josan (2010)).

### III. LITERATURE REVIEW

#### **Public Relations and Healthcare Delivery**

Healthcare is a fundamental need of all human beings. As a critical need, healthcare describes health services given to persons for the purposes ensuring a healthy living. The World Health Organization (2004) defines healthcare as services provided to individuals or communities by health service providers for the purpose of promoting, maintaining, monitoring or restoring health. Kehinde and Chukwuemeka (2016) describe healthcare as service to the sick, the mentally and physically incapacitated members of the society who need medical attention and help. Kehinde and Chukwuemeka add that this service is provided by health institutions called hospitals, clinics, medical centres, etc. This study found the description of healthcare by WHO most appropriate because it does not focus on only the sick, rather, services aimed at promoting and maintaining healthy living. Public relations could be useful in healthcare for the purposes of promoting healthy living.

Over the years, public relations practice in healthcare has undergone some changes, perhaps, as a result of the changing nature of society. Tomic, Lasic and Tomic (2010) corroborate that the practice of public relations in healthcare has changed along with the significant changes in healthcare. According to them, public relations in health care are not particularly different from public relations in any other industry considering that the overall objective of the public relations is still to “match long-term relationships” and “manage reputation. Nonetheless, public relations in healthcare is considered unique because it concerns human lives. Traynowicz-Hetherington and Parkinson (2001) affirm that healthcare is a unique industry because of things at its disposal such as life, death and recovery. Cutlip, Center and Broom (2003) aver that health institutions are expected to more and better respond to the desires and needs of their market. The submission of Cutlip et al implies that institutions are to treat their publics in the same manner that other organizations do. One of the ways to do this is through public relations.

Public relations practice has been found to be an effective health care delivery tool. Good public relations practices is likely to influence healthcare delivery in three broad ways. First, it will likely influence the choice of health centres, second, it will likely influence indices of healthcare management performance, and in the third place, it will

influence public attitude to healthcare services. This assumption concerning the tripod importance of public relations in health care delivery is supported by evidence in the literature. For example, Tengilimoglu, Yesiltas, Kisa, and Dziegielewski (2008) examined the effect that public relations activities can have regarding consumer decisions and choice on a sample of 971 patients within the public, university and private hospitals in Ankara, Turkey. The researchers found that public relations activities were a crucial factor in determining consumer hospital choice. According to the result, the majority of respondents reported that the behaviour and attitude of personnel as public relations activities that support the hospital's reputation within the public were the primary variables in hospital choice.

Kehinde and Chukwuemeka (2018) investigated public relations as a tool for effective healthcare management, using Hetta Medical Centre, Ota, Ogun State, Nigeria, as a case study. The results showed that there is a positive relationship between good public relations and Hetta Medical Centre's management performance.

Gbadeyan (2010) examined how marketing and public relations activities have contributed to the realization of the organizational objectives of Not-for-Profit health care in Nigeria. The study was carried out in ten out of the sixteen Local Government Areas of Kwara State of Nigeria. The data for the research was obtained through Pro-forma type questionnaire administered to both health care marketing staff and patients from twenty out of the one hundred and thirty-five government hospitals in the state. The results of the study indicated that there exists a significant relationship between the income received from patient and marketing budget for the Health Care Organisation. The Model fit for the effect of education, age and work experience on salary was significant at 99 percent while a similar result was obtained for the effect of marketing activities on Hospital Services at 99 percent significant level. Therefore, public relations tools could be helpful to healthcare services.

#### **Situational Theory**

This study found expression on the situation theory. The theory was propounded by Grunig and Hunt in 1984. It holds that the relationship between knowledge (awareness), attitudes and behaviour is contingent on some situational factors. Grunig and Hunt (1984: 130) list four key situational factors: as the level of problem recognition; the level of constraint recognition (does the person see the issue or problem as within their control or ability to do something- in this case, the focus is if women of reproductive age recognize healthcare as critical to their health) the presence of a referent criterion (a prior experience or prior knowledge, in this case, prior knowledge or experience with reproductive health challenge); and level of involvement. According to Grunig and Hunt, a greater understanding of communication theory is essential among public relations practitioners. Grunig and Hunt posit that the results of communication will not always be behavioural; they may be cognitive (simply getting people to think: about something), attitudinal (form an opinion), or behavioural. This theory served as a prism for investigating

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the application of PR tools in enhancing healthcare delivery to women of reproductive age in Enugu State, Nigeria.

### Methodology

Survey research design was used for this study. The study was carried out in selected States in South-East Nigeria. A total of 201 (67 each in every state) public relations practitioners from primary, (51) secondary (69) and tertiary (81) health care centres in Enugu, Ebonyi and Anambra States took part in the study. Also, a total of 384 (128 in each state) women of reproductive age took part in the study. To select the PR respondents, the researcher adopted snow ball sampling technique in which case initial respondents were identified and requested to recommend other public relations experts in healthcare centres. Both those from the public and private health centres were eligible to participate in the study. To select the women of reproductive age who took part in the study, the researcher used the Cochran formula. With 95 percent level of confidence (confidence interval -  $\pm 5\%$ ), the population estimate of 50% (.5) and a permitted margin of error at .05 (5 percentage points), the Cochran Equation '1' which yielded a representative sample for the population that is large. Purposive sampling was then applied to selected women of reproductive age (15-49 years).

A self-developed questionnaire was used to collect data for the study. A total of three communication experts validated the instrument. Its reliability was ascertained using test-retest approach, and this yielded Pearson's Correlational coefficient 0.084 which was considered high reliability. In the analysis of data for the study, the researcher used mean and standard

deviation to answer the research questions while t-test was used to test the hypotheses raised. Also, the real limit of number was used to measure the extent and frequency of use of PR tools. This is shown below:

### The extent of use of PR tool

Large extent: 2.0-3.0

Moderate extent: 1.5-1.9

Low extent: 0.50-1.49

### Frequency of use of PR tool

Very frequent used: 2.0-3.0

Moderately frequent: 1.5-1.9

Not frequent: 0.50-1.49

It is important to add here that this was a three-point scale, hence the highest mean score was 3.0. Regarding the problems confront the use of PR tools for health delivery to women of reproductive age, the benchmark for accepting or rejecting a stamen was 2.0.

## IV. RESULTS

All the copies of the questionnaire instrument (201 copies) administered to PR practitioners were filled and returned. However, among the 384 copies administered to women of reproductive age, only 352 copies representing 92% were returned. The result is at this moment presented in the following table:

**Table 1: Mean and standard deviation of respondents on the extent of use of PR tools for**

S/N	PR	PR Experts(n=201)			Women (n=352)		
		Mean	SD	RE	Mean	SD	RE
1	Newsletter	2.0	0.68	La. E	2.2	0.69	La.E
2	Advocacy	1.4	0.88	Lo.E	1.3	0.89	Lo.E
3	Word of mouth	1.3	0.78	Lo, E	1.1	0.98	Lo.E
4	Blogging	1.2	0.79	Lo. E	1.2	0.79	Lo.E
5	Social media marketing	1.1	0.85	Lo.E	1.1	0.85	Lo.E
6	Media relations	1.5	0.97	ME	1.0	0.77	Lo.E
7	Press Release	1.5	0.79	ME	1.6	0.59	ME
8	Attendance at public events	1.2	0.89	Lo. E	1.3	0.69	Lo.E

Source: Field survey, 2018

### Key:

**La.E.:** Large extent:

**ME:** Moderate extent

**Lo. E:** Low extent

The table above determined the extent of use of PR tools in delivering healthcare information services to women of reproductive age in Enugu Anambra and Ebonyi States. The result revealed that most of the tools were used to a low extent with very few used to a moderate extent. The only newsletter was used to a large extent. No significant difference was observed between the responses of women of reproductive age and PR experts. While the extent of use measures the degree to which such tools are used, it does not provide evidence concerning the frequency with which the tools are used. The frequency of use focuses on the number of times such tools are used in the delivery of such services. The following table provides evidence on the frequency of use of such tools.

**Table 1I: Mean and standard deviation of respondents on the frequency of use of PR tools for delivering healthcare services to women of reproductive age**

S/N	PR	PR Experts(n-201)			Women (n=352)		
		Mean	SD	RE	Mean	SD	RE
1	Newsletter	1.5	0.89	MF	1.0	0.49	NF
2	Advocacy	1.5	0.82	MF	1.3	0.99	NT
3	Word of mouth	1.2	0.74	NF	1.1	0.88	NF
4	Blogging	1.1	0.73	NF	1.2	0.69	NF
5	Social media marketing	1.2	0.95	NF	1.2	0.88	NF
6	Media relations	2.2	0.87	VF	2.0	0.87	VF
7	Press Release	2.1	0.69	VF	1.6	0.89	MF
8	Attendance at public events	1.0	0.69	NF	1.0	0.99	NF

Source: Field survey, 2018

**Key**

Very Frequent= VF

Moderately Frequent=MF

Not frequent= NF

The table above examined the frequency of use of PR tools in delivering healthcare information services to women of reproductive age in Enugu Anambra and Ebonyi States. The result revealed that most of the tools were not frequently used. The result did not show significant difference between the responses of women of reproductive age and PR experts. To determine the obstacles to the use of PR tools in delivering healthcare services to women of reproductive age in Enugu State, Nigeria, the following table was computed:

**Table 1II: Mean and standard deviation of respondents on the obstacles to using of PR tools for healthcare delivery to women of reproductive age.**

S/N	Problem	PR Experts(n-201)		
		Mean	SD	RE
1	Poor funding	2.5	0.81	Accepted
2	Lack of office accommodation	2.7	0.96	Accepted
3	Poor staffing	2.0	0.67	Accepted
4	Non-inclusion in management issues	2.1	0.84	Accepted
5	Lack of motivation	2.2	0.56	Accepted
6	Lack of working tools like gadgets	2.3	0.85	Accepted
7	Near absence of regular training	2.0	0.78	Accepted

Source: Field survey, 2018

Table III above sought to determine the obstacles to the use of PR tools for healthcare delivery to women of reproductive age. Only PR experts practising in healthcare centres in Enugu Anambra and Ebonyi States. responded to the questionnaire. The result showed that all the items presented were accepted as obstacles to use of PR tools for healthcare delivery to women of reproductive age. This is because all the items had means scores of 2.0 and above which is within the benchmark of the study.

**Test of Hypotheses**

Two hypothesis guided this study. These hypotheses are tested below:

**Hypothesis one:** There is no significant difference in the mean scores women of reproductive age and PR practitioners on the extent of use of PR tools for healthcare delivery.

**Table IV: Showing the mean difference between the PR experts and women of reproductive age on the extent of use of PR tools for healthcare delivery**

	Group	N	Mean	Std. Deviation	Std.	Error
					Mean	
The extent of use of PR tools	Women	352	1.4833	.40361	.20281	
	PR experts	67	1.3100	.1075	.21424	

Source: Field Survey, 2018

The result from the table above yields p value =0.621. Hence the P value is greater than 0.005, we accept the null

hypothesis and conclude that there is no significant difference in the mean scores women of reproductive age and PR practitioners on the extent of use of PR tools for healthcare delivery to women of reproductive age.

**Table V: Table IV: Showing the mean difference between the PR experts and women of reproductive age on the frequency of use of PR tools for healthcare delivery**

	Res.	N	Mean	Std. Deviation	Mean	Std. Error
Frequency of use of PR tools	Women	352	1.3583	.41241		.10538
	PR experts	67	1.2333	.37244		.07818

Source: Field Survey, 2018

The result from the table above yields p value =0.611. Hence the P value is greater than 0.005, we accept the null hypothesis and conclude that there is no significant difference in the mean scores women of reproductive age and PR practitioners on the frequency of use of PR tools for healthcare delivery to women of reproductive age.

#### V. DISCUSSION OF FINDINGS

This study investigated the extent and frequency of use of PR tools for enhancing healthcare delivery to women of reproductive age in Enugu Anambra and Ebonyi States, Nigeria. The study also focused on the obstacles militating against the use of PR tools for healthcare delivery to women of reproductive age. The result of this revealed that most of the PR tools such as attendance at public events, blogging, Social media marketing, advocacy and word of mouth were used to a low extent. The result further revealed the low frequency of use of most of these tools among PR experts. The two null hypotheses raised for the study were accepted as the result showed no significant statistical difference in the mean scores of both women of reproductive age and PR experts from healthcare centres from Enugu State. This result has raised concerns over the health of women of reproductive age because PR tools can create awareness on reproductive health. Therefore, it low extent and low frequency of use suggest that the need for a paradigm shift is desired. This is more so that studies from Kehinde and Chukwuemeka (2018), Yesiltas, Kisa, and Dziegielewski (2008) suggest that appropriate application of PR tools could be beneficial to health campaigns. Based on the evidence in literature vis-à-vis the result of this study, the researcher argues that if PR tools are appropriately applied, this could lead to a corresponding increase in awareness on reproductive health issues.

The result of this study also showed that obstacles to the application of PR tools for healthcare delivery include: poor funding, lack of office accommodation, poor staffing, non-inclusion in management issues, lack of motivation, lack of working tools like gadgets and near absence of regular training. The result of this study is similar to that of Omondi (2012) found that these factors limit effective performance of PR officers. What this means is that for PR tools can only be effectively applied for healthcare delivery if these problems are addressed.

The implication of these findings on the situation theory

of Grunig and Hunt (1984). Grunig and Hunt had argued that there exists a relationship between knowledge and attitudes. The implications of this theoretical postulations on the current study is that, when women of reproductive age know health issues, it is likely to influence their attitudes. Attitude change is a very critical component of healthcare services because if people do not change their attitudes either to visit healthcare centres or exhibit certain health behaviour, it will be difficult for any health campaign to succeed.

#### VI. CONCLUSION/RECOMMENDATIONS

Based on the result of this study, the researcher concludes that PR tools such as newsletters, press releases, media relations, advocacy, among others are lowly applied in enhancing healthcare delivery to women of reproductive age from Enugu Anambra and Ebonyi States. The researcher also concludes that the frequency of application of these tools for healthcare delivery to women of reproductive age is low. The basic contribution of this study is that it has provided empirical evidence for understanding the extent of involvement of PR tool in healthcare delivery to women of reproductive age. This understanding could be useful to researchers, policy makers, healthcare workers as well as communication experts. Based on this conclusion, the researcher makes the following recommendations: PR experts should be fully involved in the delivery of healthcare to women of reproductive age, there is the need for the great extent and frequency of use of PR tools for healthcare delivery. Also, PR units should be properly funded to enable them to support health centres in healthcare delivery. Finally, further studies are recommended to expand to cover more places for better generalization.

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