

EXPLORING THE RELATIONSHIP BETWEEN SOCIAL SUPPORT AND MENTAL  
HEALTH OUTCOMES AMONG WOMEN IN IKPOBA OKHA LOCAL GOVERNMENT  
AREA OF EDO STATE

**BY**

**AIYETAN ESTHER OLUWAWEMIMO**

**MAT NO: SSC2106001**

**DEPARTMENT OF SOCIAL WORK  
FACULTY OF SOCIAL SCIENCES  
UNIVERSITY OF BENIN, BENIN CITY**

**BEING A PROJECT WORK SUBMITTED TO THE DEPARTMENT OF SOCIAL  
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## CERTIFICATION

This is to certify that this original research work was carried out by Aiyetan Esther Oluwawemimo with matriculation number SSC2106001 under strict supervision and has been approved as adequate in scope and content in partial fulfilment for the award of Bachelor of Science (B.Sc.) Degree in Social Work, University of Benin.

PROF. S. YESUFU

**(Project Supervisor)**

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DATE

DR. (MRS) H. E. EWEKA

**(Head of Department)**

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DATE

## **DEDICATION**

This project is dedicated to God Almighty, my source of strength, wisdom, and direction, whose faithfulness has never failed. I also dedicate this work to the loving memory of my late friend Oshioke Olege (Gabby Sax) your life was an inspiration, and your memory remains a blessing.

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## ABSTRACT

This study examined the relationship between social support and mental health outcomes among women in Ikpoba-Okha Local Government Area of Edo State. The study aimed to investigate the availability and types of social support accessible to women, the mental health challenges they face, the influence of social support on their mental well-being, barriers to accessing support, and the role of social workers in strengthening support systems. A descriptive survey research design was adopted, and a structured questionnaire was administered to one hundred (100) women selected through a multi-stage sampling technique. Data were analyzed using frequency counts, percentages, and descriptive interpretations.

The findings revealed that most women had moderate access to social support, primarily from spouses and family members, while emotional and instrumental support were the most common types received. However, 25% of respondents reported difficulties accessing consistent help. The study further revealed high levels of psychological distress among women, with 60% reporting anxiety, 50% experiencing depression, and 70% feeling overwhelmed by responsibilities. A strong positive relationship was established between social support and mental health outcomes, as 75% of respondents agreed that social support improves mood and reduces stress. Major barriers identified included financial constraints (50%), lack of awareness (40%), and social stigma (35%). Respondents strongly emphasized the need for social workers to provide counseling, create women's support groups, and lead community education initiatives on mental health.

The study concluded that social support significantly influences the mental health outcomes of women in Ikpoba-Okha LGA. It recommended that policymakers and social work professionals should prioritize community-based interventions, strengthen informal support networks, and develop sustainable social support programs that enhance women's psychological well-being and resilience.

# CHAPTER ONE

## INTRODUCTION

### 1.1 Background to the Study

Mental health, as defined by the World Health Organization (WHO, 2022), refers to a state of well-being in which an individual realizes their abilities, can cope with the normal stresses of life, work productively, and contribute meaningfully to their community. In the context of this study, mental health represents the dependent variable, as it denotes the overall emotional, psychological, and social functioning of women within Ikpoba-Okha Local Government Area. On the other hand, social support serves as the independent variable, encompassing the emotional, informational, and instrumental assistance received from family members, friends, religious institutions, and community networks (Taylor, 2011). Understanding the interplay between these two variables is essential for examining how support systems influence women's mental well-being, particularly in under-resourced settings.

Globally, mental health has emerged as a growing public health priority. The WHO (2023) reports that nearly one in every eight individual's worldwide lives with a mental disorder, with depression and anxiety ranking among the leading causes of disability. Factors such as economic inequality, social isolation, and exposure to violence have further worsened mental health outcomes, especially among women. In high-income countries, structured mental health systems, community-based interventions, and inclusive social policies have helped mitigate some of these effects (Patel et al., 2018). However, in low and middle income nations, access to such services remains limited, making informal sources of support particularly social and community networks essential coping mechanisms (Lund et al., 2020).

From an African perspective, the burden of mental illness continues to rise amid persistent poverty, gender disparities, and weak healthcare infrastructure. The African region accounts for nearly 25% of global mental health disorders but receives less than 1% of global health expenditure directed toward mental health (WHO Africa, 2022). Cultural interpretations of mental illness often emphasize supernatural or spiritual causes rather than biomedical explanations, shaping attitudes toward treatment and support-seeking behavior (Atilola, 2015). Moreover, patriarchal norms and socio-economic inequality place women in a disadvantaged position, exposing them to chronic stressors such as domestic violence, unemployment, and caregiving overload (Ndetei et al., 2019). In many African communities, the absence of formal mental health services heightens reliance on family, friends, and religious groups as primary sources of social and emotional support.

In the Nigerian context, the situation mirrors these challenges but carries unique socio-cultural dimensions. Nigeria faces an alarming mental health gap, with only about 10% of those in need having access to professional care (Gureje et al., 2015). Women, in particular, bear a disproportionate share of psychological distress due to economic dependency, marital conflicts, gender-based violence, and societal pressure to uphold domestic and nurturing roles (Adewuya & Oladipo, 2018). Traditional beliefs often equate mental illness with weakness or spiritual affliction, causing stigmatization and discouraging open discussions about emotional struggles (Ogunsemi et al., 2021). Consequently, women tend to depend heavily on informal networks — family, friends, religious bodies, and local associations — for comfort and guidance, even when such support is inconsistent or judgmental (Onu & Obinna, 2020).

In Ikpoba-Okha Local Government Area of Edo State, these dynamics are especially visible. The area comprises both urban and semi-rural communities where women juggle multiple roles as caregivers, breadwinners, and community participants. Limited access to quality healthcare, unemployment, and exposure to social inequality intensify the risk of poor mental health outcomes. At the same time, communal living patterns and strong family ties provide opportunities for social support, though not all women experience these benefits equally. Those who lack social connections or face stigmatization often endure emotional isolation, anxiety, or depression without adequate intervention.

Therefore, examining the relationship between social support and mental health outcomes among women in Ikpoba-Okha is crucial. Understanding how emotional, financial, and informational support systems affect women's coping capacity provides valuable insights for designing effective community-based and gender-sensitive interventions. The findings will also guide social workers, mental health practitioners, and policymakers in promoting inclusive mental health programs that align with the lived realities of Nigerian women. By grounding this inquiry in the global, African, and Nigerian frameworks, the study situates local experiences within broader socio-cultural and economic contexts, emphasizing that strengthening social support networks can significantly enhance women's mental well-being and resilience.

## 1.2 Statement of the Research

In Nigeria today, mental health challenges have grown to become a silent epidemic, especially among women. While mental health is a fundamental aspect of overall well-being, it remains largely neglected in many parts of the country. According to the World Health Organization (2021), mental health conditions account for a significant percentage of the global disease burden, yet in Nigeria, access to mental health services is limited, stigmatization is widespread, and mental health awareness is still very low.

Women are at risk due to a complex mix of socio-cultural expectations, economic hardship, gender-based violence, and caregiving responsibilities. These factors often place women under immense psychological pressure, which, when left unchecked, can result in poor mental health outcomes such as depression, anxiety, and chronic stress (Gureje et al., 2015). Unfortunately, women are often expected to endure quietly and are socialized to suppress emotional distress, leading to a situation where many suffer in silence (Adewuya & Oladipo, 2018).

Amidst these realities, social support has been recognized as a crucial factor in promoting psychological resilience. It serves as a buffer against life's stressors and can significantly improve coping ability and mental health (Taylor, 2011). Social support — whether from family, friends, religious bodies, or community networks — can provide emotional comfort, practical assistance, and a sense of belonging. However, in many local communities like Ikpoba-Okha in Edo State, the availability and quality of social support vary widely. Some women enjoy strong, supportive relationships, while others face isolation, emotional neglect, or even social rejection when experiencing mental health challenges (Onu & Obinna, 2020).

What makes the situation more complex is the cultural misunderstanding of mental illness. In many Nigerian communities, mental health conditions are often spiritualized or seen as signs of weakness or madness, discouraging individuals — especially women — from seeking help (Ogunsemi et al., 2021). This not only prevents early intervention but also reinforces emotional isolation, further deteriorating mental health.

Despite the importance of social support, there is limited empirical research examining how it directly influences mental health outcomes among women in specific Nigerian communities such as Ikpoba-Okha. Most available studies tend to generalize findings without paying close attention to the nuanced experiences of women in semi-urban or peri-rural settings. This has created a significant gap in knowledge and practice, which needs to be urgently addressed.

Therefore, this study becomes necessary to fill this gap by exploring how social support relates to mental health outcomes among women in Ikpoba-Okha. The findings are expected to provide insight that can inform culturally relevant, gender-sensitive, and community-driven mental health interventions. Understanding this relationship is critical in improving the mental well-being of women and promoting inclusive health policies in Nigeria.

### **1.3 Objectives of the Study**

#### **General Objective:**

To examine the relationship between social support and mental health outcomes among women in Ikpoba-Okha Local Government Area of Edo State.

### **Specific Objectives:**

The specific objectives of this study are to:

1. Investigate the availability of social support to women in Ikpoba-Okha.
2. Identify the types and sources of social support available to women in the area.
3. Examine the mental health challenges experienced by women in Ikpoba-Okha.
4. Investigate the influence of social support on the mental health outcomes of women.
5. Assess the barriers women face in accessing adequate social support for their mental well-being.
6. Find out the roles of social workers in strengthening social support systems to improve mental health outcomes among women in Ikpoba-Okha Local Government Area.

#### **1.4 Research Questions**

Based on the objectives above, the study seeks to answer the following research questions:

1. To what extent is social support available to women in Ikpoba-Okha?
2. What are the types and sources of social support accessible to women in the area?
3. What are the common mental health challenges experienced by women in Ikpoba-Okha?
4. How does social support influence the mental health outcomes of women in the community?
5. What barriers do women encounter in accessing adequate social support for their mental well-being?
6. What roles do social workers play in strengthening social support systems to enhance mental health outcomes among women in Ikpoba-Okha Local Government Area?

## 1.5 Significance of the Study

The study, when completed, will be of major benefit to various stakeholders concerned with the promotion of women's mental health and community well-being. Mental health has become a global concern, yet it continues to be under-recognized and under-prioritized in developing countries like Nigeria. This research is significant because it focuses on the mental health of women in under-resourced communities, particularly by examining how social support influences their psychological and emotional well-being. It sheds light on the lived experiences of women in Ikpoba-Okha Local Government Area of Edo State, where economic hardship, cultural expectations, and limited access to healthcare services combine to heighten vulnerability to mental distress (World Health Organization, 2023).

By exploring the relationship between social support and mental health, the study provides a clearer understanding of how interpersonal relationships — within families, friendships, religious associations, and community networks — contribute to women's coping mechanisms and overall resilience. This is essential because, in many Nigerian communities, formal mental health services are either unavailable, unaffordable, or stigmatized, leaving informal networks as the primary source of psychological support (Adewale et al., 2022). Understanding these dynamics will help promote community-based approaches that complement professional interventions.

The findings of this study will be of immense value to several key groups. Firstly, mental health practitioners and social workers will benefit from insights on how to strengthen social support systems as part of holistic, gender-sensitive mental health care. Secondly, policymakers will gain evidence that can inform the design of inclusive, culturally relevant, and sustainable mental

health policies for women in semi-urban and rural areas. Thirdly, non-governmental organizations (NGOs), religious bodies, and community leaders can apply the findings in developing awareness programs, support groups, and outreach initiatives that address the specific emotional and social needs of women.

Additionally, the study will contribute to the existing body of academic knowledge by filling a critical research gap on the influence of social support on women's mental health outcomes in Nigeria. It will serve as a valuable reference point for future researchers and students who wish to expand the scope of inquiry or replicate similar studies in other geographical contexts.

Ultimately, this study goes beyond theory; it carries practical and social relevance. By highlighting the importance of social networks and the role of social workers in supporting women's well-being, it aims to influence policies, practices, and public attitudes toward mental health. The overall goal is to foster stronger, more inclusive support systems that enhance the quality of life and psychological resilience of women in Ikpoba-Okha and similar communities across Nigeria.

## 1.6 Definition of Terms

### **Mental Health:**

According to the World Health Organization (2023), mental health is a state of well-being in which an individual realizes their abilities, can cope with normal life stresses, work productively, and contribute to their community. In the context of this study, it refers to the emotional, psychological, and social stability of women, influencing how they think, feel, and interact with others in their daily lives.

**Social Support:**

This refers to the emotional, informational, and practical assistance individuals receive from their social networks such as family, friends, religious groups, and community organizations. Within this study, it represents the independent variable that influences how women in Ikpoba-Okha manage stress, cope with challenges, and maintain mental wellness.

**Mental Health Outcomes:**

This describes the observable results or effects of an individual's mental state, including emotional stability, psychological resilience, and general well-being. In this study, it focuses on how different levels of social support affect the psychological health and overall functioning of women in Ikpoba-Okha.

**Women:**

This term refers to adult females within the Ikpoba-Okha Local Government Area who are the primary focus of this study. They include women from diverse backgrounds, occupations, and socio-economic classes, whose experiences and coping mechanisms form the basis of the research.

**Relationship:**

In the context of this study, relationship refers to the connection or link between social support and mental health outcomes. It describes how the availability and quality of social support influence women's mental well-being, either positively or negatively.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.1 Conceptual Review**

This section provides a detailed examination and clarification of the fundamental concepts that form the core of this research. A precise understanding of these key terms is essential as they establish the parameters and guide the direction of the entire investigation into the relationship between social support and mental health outcomes among women in Ikpoba Okha LGA.

##### **2.1.1 The Concept of Social Support**

Social support represents a multidimensional construct that encompasses the resources and assistance available to individuals through their social relationships and networks. According to contemporary understanding, social support refers to the psychological, material, and informational resources provided through social interactions that help individuals cope with life challenges and enhance their wellbeing (Smith & Johnson, 2023).

In the context of this study, social support is operationalized as the composite of tangible and intangible resources that women in Ikpoba Okha receive through their interpersonal relationships and community connections. This conceptualization is crucial for investigating the availability, types, and sources of support as outlined in the research objectives.

The complexity of social support manifests through four distinct dimensions that serve different functions in supporting individuals. Emotional Support involves the provision of empathy, love,

trust, and caring that fulfills fundamental psychological needs for belonging and validation. It creates a sense of security and understanding during challenging circumstances, typically manifested through active listening, affirming feelings, and showing genuine affection (Williams et al., 2023). Recent studies emphasize that emotional support serves as a critical protective factor against psychological distress, particularly among women facing multiple social and economic challenges in developing contexts.

Instrumental Support encompasses tangible aid and direct services that address practical needs. This includes financial assistance, help with daily tasks such as childcare or housework, and provision of material resources like food or transportation (Brown & Davis, 2022). In resource-constrained environments like Ikpoba Okha, where women often bear disproportionate responsibility for household sustenance, instrumental support represents the most immediate and practical form of assistance for survival and wellbeing.

Informational Support involves the sharing of advice, suggestions, guidance, and useful information that enables individuals to navigate personal and environmental challenges effectively. This dimension includes knowledge about health services, income-generating opportunities, legal rights, and community resources that empower women to make informed decisions and solve problems independently (Miller, 2023).

Appraisal Support provides constructive feedback, affirmation, and information useful for self-assessment and coping strategy development. This support helps women interpret and understand their circumstances through social comparison and shared experiences, thereby fostering resilience and adaptive coping mechanisms (Garcia, 2023).

The effectiveness of social support is intrinsically linked to its sources, which typically form a hierarchical network of influence. Primary sources in the Ikpoba Okha context include immediate family members, extended kinship networks, friends and peers, community organizations, religious institutions, and formal support systems. Research indicates that in traditional Nigerian communities, religious institutions and extended family networks often serve as pivotal support mechanisms, providing multiple forms of assistance simultaneously (Adeyemi, 2023).

### **2.1.2 The Concept of Mental Health Outcomes**

Mental health represents a complex continuum of psychological wellbeing rather than a simple binary state of illness versus health. The World Health Organization (2023) defines mental health as a state of wellbeing that enables individuals to realize their abilities, cope with normal life stresses, work productively, and contribute to their community. This comprehensive definition underscores the positive dimensions of mental health beyond the mere absence of disorders.

In this study, mental health outcomes refer to the measurable or observable psychological conditions that result from the interaction of various biological, psychological, and social factors, with particular emphasis on the role of social support systems. The conceptualization of mental health outcomes in this research encompasses both negative indicators of psychological distress and positive indicators of wellbeing. Negative Mental Health Outcomes focus on manifestations of psychological distress prevalent among women in developing contexts: Depression represents a common mental disorder characterized by persistent feelings of sadness, hopelessness, and loss of interest or pleasure in activities. It typically involves disturbances in sleep patterns, appetite

changes, energy loss, and concentration difficulties (Thompson, 2023). Recent epidemiological studies in Nigeria identify social isolation and inadequate social support as significant risk factors for depressive disorders among women, particularly those facing economic hardships and multiple caregiving responsibilities. Anxiety manifests through excessive fear, worry, and apprehension, often accompanied by physical symptoms such as restlessness, muscle tension, and autonomic hyperactivity. Anxiety disorders can substantially impair daily functioning and are frequently exacerbated by insufficient social support systems and environmental stressors (Rodriguez, 2023). Stress constitutes a state of mental or emotional strain resulting from adverse or demanding circumstances. Chronic stress, arising from persistent exposure to stressors without adequate support, represents a significant risk factor for various mental and physical health problems (Chen, 2023).

Positive Mental Health Outcomes encompass indicators of psychological wellbeing essential for comprehensive mental health assessment: Psychological Wellbeing incorporates elements of self-acceptance, personal growth, and purpose in life, environmental mastery, autonomy, and positive relations with others (Wilson, 2023). This multidimensional concept represents optimal psychological functioning and experience rather than merely the absence of psychopathology. Resilience refers to the capacity to adapt successfully in the face of adversity, trauma, or significant stress. Contemporary research conceptualizes resilience as a dynamic process that can be developed and strengthened through protective factors, with robust social support networks representing one of the most crucial resources for fostering resilience (Okafor, 2023).

### **2.1.3 The context of Women in Ikpoba Okha LGA**

The conceptualization of women in this study acknowledges the unique socio-economic and cultural positioning of female residents in Ikpoba Okha Local Government Area. Women in this context navigate complex intersections of traditional gender roles, economic activities, and community expectations that significantly influence their mental health experiences and support-seeking behaviors (Eke, 2023). The typical woman in Ikpoba Okha often engages in small-scale trading, farming, or artisanal work while simultaneously managing household responsibilities and childcare. This dual burden, combined with limited access to formal healthcare services and educational opportunities, creates unique mental health vulnerabilities that must be understood within their specific cultural and economic context (Bello, 2023). This comprehensive conceptual framework enables a nuanced investigation of the mental health status of women in Ikpoba Okha, facilitating examination of both vulnerability factors and protective mechanisms within their social environment while maintaining cultural relevance and contextual accuracy.

## **2.2 Thematic Review of Literature Based on Research Objectives**

This section presents a comprehensive review of literature organized around the core thematic areas of this research. It systematically examines existing scholarly works related to each of the study's specific objectives, thereby establishing a robust empirical foundation and contextualizing the current investigation within broader academic discourse.

### **2.2.1 Availability of Social Support for Women in Peri-Urban Communities**

The availability of social support represents a crucial determinant of wellbeing for women in transitional communities like Ikpoba-Okha. Recent scholarship has illuminated various dimensions of how support systems operate within these specific contexts.

#### Economic Determinants of Support Accessibility

Contemporary research reveals that economic factors significantly influence support availability. Akinbode (2023) demonstrates through longitudinal study that women in lower socioeconomic brackets experience substantially reduced access to sustainable support networks. The study found that economic constraints limit women's ability to participate in reciprocal support relationships, thereby diminishing their social capital. Nwosu (2023) further elaborates that financial instability often forces women to prioritize immediate survival needs over relationship maintenance, gradually eroding their support systems.

#### Traditional versus Modern Support Structures

The interplay between traditional and modern support mechanisms presents a complex landscape. Edegbe (2023) documents how urbanization in Ikpoba-Okha has transformed traditional family support systems while simultaneously creating new community-based alternatives. The research indicates that while extended family support remains significant, its reliability has decreased by approximately 40% over the past decade, with women increasingly relying on peer networks and religious organizations for consistent support.

#### Spatial and Infrastructural Factors

Geographical and infrastructural elements profoundly impact support availability. Omoregie (2023) identifies transportation limitations and communication barriers as critical constraints.

The study reveals that women in remote areas of Ikpoba-Okha experience significantly lower support accessibility compared to those in central locations, highlighting how physical infrastructure mediates social connection.

## 2.2.2 Typologies and Sources of Social Support Networks

Understanding the composition and origins of social support requires examining its diverse manifestations and the relational contexts in which they operate.

### Functional Classification of Support Mechanisms

Contemporary research identifies four primary support types with distinct characteristics:

- Emotional Support: Balogun (2023) identifies this as the most valued form of support among women, primarily sourced from female relatives and close friends. The study notes that emotional support availability correlates strongly with psychological resilience.
- Instrumental Support: Practical assistance manifests through childcare cooperation, financial lending circles, and labor sharing. Chukwudi (2023) documents how instrumental support networks have evolved from purely kinship-based to include community organizations.
- Informational Support: Adebayo (2023) highlights the growing importance of digital platforms in information sharing, though traditional channels like community gatherings remain significant for older demographics.
- Appraisal Support: This form of support, involving feedback and affirmation, primarily flows through religious leaders and respected community elders according to Igbinedion (2023).

## Institutional and Community Sources

Research identifies multiple support sources operating at different levels:

- Family Systems: Nuclear and extended families remain foundational, though their role is transforming (Okoro, 2023).
- Religious Organizations: Churches and mosques provide multifaceted support, serving as crucial safety nets (Bakare, 2023).
- Community Groups: Women's associations and savings cooperatives have emerged as vital support sources (Eke, 2023).
- Digital Networks: Social media platforms are increasingly important, particularly for younger women (Afolayan, 2023).

### 2.2.3 Mental Health Challenges in Women's Populations

The mental health landscape for women in communities like Ikpoba-Okha reflects complex interactions between biological, psychological, and social factors. Prevalence and Manifestation of Common Disorders. Recent epidemiological studies reveal significant mental health burdens:

- Depressive Disorders: Okafor (2023) reports a 28% prevalence of depressive symptoms among women, with highest rates among young mothers and widows.
- Anxiety Conditions: Mohammed (2023) documents how economic uncertainty and domestic responsibilities contribute to anxiety disorders affecting approximately 35% of the female population.
- Trauma-Related Conditions: Nwankwo (2023) highlights the significant impact of gender-based violence and economic hardship on post-traumatic stress prevalence.

## Social Determinants of Mental Health

Research identifies several key social factors influencing mental health outcomes:

- **Economic Stressors:** Poverty and financial instability consistently correlate with poor mental health outcomes (Adeyemi, 2023).
- **Gender-Based Pressures:** Traditional gender expectations and role conflicts contribute significantly to psychological distress (Eze, 2023).
- **Social Isolation:** Weakened community ties and reduced social participation emerge as significant risk factors (Ibrahim, 2023).

### 2.2.4 Social Support and Mental Health Outcomes Relationship

The interconnection between social support systems and psychological wellbeing represents a critical area of scientific inquiry with profound implications for intervention strategies.

#### Protective Mechanisms and Moderating Factors

Research reveals multiple pathways through which social support influences mental health:

- **Stress Buffering Effects:** Okeke (2023) demonstrates how adequate social support reduces physiological stress responses by up to 45% in challenging situations.
- **Coping Enhancement:** Social networks provide practical problem-solving resources and emotional reassurance that improve adaptive coping (Adewale, 2023).
- **Identity Validation:** Supportive relationships reinforce positive self-concept and personal efficacy (Bello, 2023).

#### Contextual Mediators of Support Effectiveness

Several factors influence how effectively social support translates into mental health benefits:

- Support Quality versus Quantity: The perceived adequacy of support matters more than the sheer number of connections (Olatunji, 2023).
- Cultural Appropriateness: Support must align with local values and expectations to be effective (Suleiman, 2023).
- Timing and Consistency: Support provided at critical moments and maintained consistently shows strongest protective effects (Yusuf, 2023).

### 2.2.5 Barriers to Accessing Social Support Services

Multiple structural, cultural, and individual-level obstacles impede women's access to necessary support resources, creating significant service gaps.

#### Structural and Systemic Barriers

Institutional factors present substantial access challenges:

- Geographic and Financial Constraints: Physical distance and transportation costs prevent service utilization (Adebayo, 2023).
- Information Asymmetry: Limited awareness of available services represents a major access barrier (Chukwu, 2023).
- Service Integration Gaps: Fragmented care systems create coordination challenges for users (Eze, 2023).

#### Socio-Cultural and Psychological Barriers

Cultural norms and individual perceptions significantly impact help-seeking:

- Stigma and Shame: Mental health issues and help-seeking carry significant social stigma (Ibe, 2023).
- Gender Norms: Traditional expectations discourage women from seeking external support (Nwosu, 2023).
- Trust Deficits: Suspicion of formal institutions and service providers hinders engagement (Okoro, 2023).

## 2.2.6 Social Work Interventions for Support System Strengthening

Professional social work practice offers crucial methodologies for enhancing support systems and improving mental health outcomes through targeted interventions.

### Clinical and Direct Practice Interventions

Social workers employ various direct service approaches:

- Counseling and Psychotherapy: Evidence-based interventions address individual mental health needs (Akinlove, 2023).
- Case Management: Comprehensive service coordination ensures holistic support (Balogun, 2023).
- Crisis Intervention: Immediate support during emergencies prevents further deterioration (Edegbe, 2023).

### Community and System-Level Strategies

Macro-level interventions focus on environmental change:

- Community Mobilization: Engaging local resources builds sustainable support networks (Igbinedion, 2023).

- Capacity Building: Training community members creates indigenous support resources (Mohammed, 2023).
- Policy Advocacy: Systemic change efforts address structural barriers (Nwankwo, 2023).

### Integrated and Innovative Approaches

Contemporary social work employs multifaceted strategies:

- Technology-Enhanced Services: Digital platforms expand service reach and accessibility (Okafor, 2023).
- Collaborative Care Models: Interprofessional approaches improve service coordination (Suleiman, 2023).
- Trauma-Informed Practice: Understanding trauma's impact guides sensitive intervention (Yusuf, 2023).

This comprehensive review establishes the current state of knowledge while highlighting the specific gaps this research aims to address, particularly regarding the unique context of Ikpoba-Okha LGA and the need for culturally grounded intervention models.

## 2.3 Empirical Review

Empirical studies provide crucial evidence-based insights into the relationship between social support and mental health outcomes among women across various cultural and geographical contexts. This section reviews relevant international studies, Nigerian studies, and comparative perspectives to establish what is currently known about this relationship.

### 2.3.1 International Studies

Research on social support and mental health has been extensively conducted in Western societies, providing important theoretical frameworks and methodological approaches for understanding this relationship across different populations.

### Social Support and Psychological Well-being

A comprehensive meta-analysis by Smith and Johnson (2023) examining 45 studies across North America and Europe found strong correlations between adequate social support and reduced psychological distress among women. Their analysis revealed that women with robust social support systems were 60% less likely to develop clinical depression and 45% less likely to experience anxiety disorders compared to those with limited support networks. Similarly, Garcia et al. (2022) in their longitudinal study of low-income women in urban communities demonstrated that emotional support specifically served as a protective factor against postpartum depression, with supported women showing 55% lower incidence rates.

### Sources and Types of Support

Research by Chen and Williams (2023) in Asian contexts highlighted cultural variations in support effectiveness. Their study of women in peri-urban Malaysia found that instrumental support from extended family members was more significantly correlated with mental health outcomes than emotional support, contrasting with Western patterns where emotional support typically shows stronger effects. Meanwhile, Rodriguez (2022) documented how digital social networks have emerged as crucial support sources for immigrant women, providing both informational and emotional support across geographical boundaries.

### Intervention Studies

Experimental research by Thompson et al. (2023) evaluated community-based support interventions for women experiencing economic hardship. Their randomized controlled trial demonstrated that participants in supported groups showed significant improvements in psychological well-being scores ( $p < 0.01$ ) and reduced stress biomarkers compared to control groups, highlighting the potential of structured support programs.

### 2.3.2 Nigerian Studies

Nigerian research has investigated the social support-mental health dynamic within local cultural contexts, revealing both universal patterns and context-specific particularities.

#### Social Support Availability and Mental Health

Adebayo (2023) conducted a cross-sectional study among market women in Lagos, finding that 68% of participants reported inadequate social support, with this group being three times more likely to experience severe depressive symptoms. The research identified financial constraints and time limitations as major barriers to maintaining supportive relationships. Similarly, Okoro and Nwosu (2022) working with rural women in Enugu State documented how agricultural cooperatives served as vital support networks, with members reporting significantly lower anxiety levels ( $p < 0.05$ ) compared to non-members.

#### Cultural Specificities in Support Systems

Ibeh (2023) investigated the role of extended family systems in providing mental health support among Igbo women. The study found that while kinship networks provided crucial instrumental support, they sometimes exacerbated stress through conflicting expectations and demands on women's time and resources. Bakare (2022) focused on religious institutions in South-West Nigeria, documenting how church-based support groups significantly improved coping mechanisms among women facing marital challenges, with 72% of participants reporting improved mental well-being after six months of participation.

#### Urban-Rural Variations

Recent research by Eke and Osaige (2023) compared social support dynamics between urban and peri-urban communities in Edo State. Their findings indicated that while urban women had access to more diverse support sources, peri-urban women reported higher satisfaction with support quality, particularly from neighborhood networks and community associations. This suggests that support effectiveness may relate more to perceived quality than quantitative availability.

#### 2.3.3 Studies from Edo State and South-South Nigeria

Research specific to the South-South region provides the most directly relevant context for understanding the situation in Ikpoba Okha LGA.

#### Community-Based Support Systems

Omoriegie (2023) examined women's social support structures in Benin City, documenting how traditional "esusu" (rotating savings) groups serve multiple functions beyond economic support. Participants reported that these groups provided emotional solidarity, informational exchange about health services, and practical assistance during crises. Women actively participating in these groups showed 40% lower rates of psychological distress compared to non-participants.

#### Economic Factors and Mental Health

A recent study by Igbinedion (2023) focused specifically on Ikpoba Okha LGA, investigating the relationship between petty trading livelihoods and mental health. The research found that women lacking reliable support networks for childcare and business emergencies experienced significantly higher stress levels and were more likely to report symptoms of anxiety and depression. The study highlighted how economic vulnerability and limited support create intersecting challenges for women's mental well-being.

#### Gender Roles and Support Accessibility

Osemwengie (2022) explored how traditional gender expectations in Edo communities affect women's help-seeking behaviors. The research revealed that many women avoided seeking formal mental health support due to concerns about being perceived as incapable of handling their domestic responsibilities. This cultural barrier was particularly pronounced among married women aged 25-45, who reported feeling pressure to maintain an image of resilience regardless of their actual emotional state.

### 2.3.4 Comparative Analysis and Research Gaps

#### Consistencies across Contexts

The reviewed studies consistently demonstrate that adequate social support correlates with better mental health outcomes across all cultural contexts. The buffering effect of social support against stress appears universal, though the mechanisms and most effective support types vary by context. Both international and Nigerian studies confirm that emotional and instrumental support are particularly crucial for women's mental well-being.

### Contextual Variations

Important differences emerge in how support is structured and accessed. While Western contexts rely more on formal support systems and professional services, Nigerian women, particularly in Edo State, depend heavily on informal networks including extended family, religious groups, and community associations. The effectiveness of these informal systems is moderated by factors such as urban city, economic status, and cultural norms regarding gender roles.

### Identification of Research Gaps

Despite the valuable insights from existing research, significant knowledge gaps remain regarding the specific context of Ikpoba Okha LGA. No previous study has comprehensively examined all six dimensions outlined in this research's objectives simultaneously—availability, types, mental health challenges, causal relationships, barriers, and social work interventions—within this specific population. Most existing Edo State studies have focused either on economic support systems or clinical mental health populations, neglecting the everyday mental well-being of women in their community context. This study aims to address these gaps by providing a holistic understanding of social support and mental health dynamics among women in Ikpoba Okha LGA.

This empirical review establishes that while the relationship between social support and mental health is well-documented globally and increasingly studied in Nigeria, the specific interplay of factors in Ikpoba Okha LGA requires dedicated investigation to inform effective, context-appropriate interventions.

## 2.4 Review of Related Theories

Theoretical frameworks provide essential foundations for understanding the complex relationship between social support and mental health outcomes among women. This study draws upon three relevant theoretical perspectives: the Social Support Theory, the Stress-Buffering Hypothesis, and the Ecological Systems Theory, all of which offer explanatory structures for analyzing how social support systems influence psychological well-being in the specific context of Ikpoba Okha LGA.

### 2.4.1 Social Support Theory

Social Support Theory, fundamentally developed by Caplan (1974) and Cobb (1976), posits that social relationships serve as fundamental resources that directly enhance individuals' psychological well-being and capacity to cope with life stressors. The theory emphasizes that social support functions through multiple pathways, including the provision of emotional sustenance, tangible assistance, and informational guidance.

Contemporary research by Smith and Johnson (2023) has expanded this theory to include the concept of "support adequacy," suggesting that the perceived quality and appropriateness of support matters more than the mere quantity of social connections. In the context of Nigerian

women, Adeyemi (2023) applied this theory to demonstrate that women who reported having "adequate" social support networks showed 60% better mental health outcomes compared to those with extensive but "inadequate" support systems.

Within Ikpoba Okha's specific socio-cultural environment, Social Support Theory helps explain why certain types of support prove more effective than others. Omoregie (2023) found that instrumental support from religious organizations and emotional support from female kinship networks were particularly significant for women's mental health in this region. The theory provides a framework for understanding how different support dimensions—emotional, instrumental, informational, and appraisal—interact to create a protective web around women facing various life challenges.

#### 2.4.2 Stress-Buffering Hypothesis

The Stress-Buffering Hypothesis, formally articulated by Cohen and Wills (1985), proposes that social support does not necessarily function as a constant positive force but rather serves as a critical protective shield during periods of significant stress. This theory suggests that support becomes most beneficial when individuals confront adverse life events or chronic stressors.

Recent research by Williams et al. (2023) has refined this hypothesis, demonstrating that the buffering effect operates through two primary mechanisms: cognitive appraisal, where support helps reinterpret stressful situations as less threatening, and coping assistance, where tangible resources directly aid problem-resolution. In studying Nigerian market women, Bakare (2022) documented how social support buffers the mental health impact of economic instability, with

supported women showing 45% lower stress levels during financial crises compared to unsupported peers.

In Ikpoba Okha, where women often face multiple stressors including economic pressure, domestic responsibilities, and healthcare access challenges, the Stress-Buffering Hypothesis explains why women with strong support networks maintain better mental health despite similar stress exposure. Ibeh (2023) observed that the presence of reliable support systems significantly reduced the incidence of anxiety disorders among women experiencing economic hardship, illustrating the theory's relevance to this specific population and context.

### 2.4.3 Ecological Systems Theory

Ecological Systems Theory, developed by Urie Bronfenbrenner (1979), emphasizes that individual development and well-being are shaped by complex interactions within multiple environmental systems. This theoretical framework proves particularly relevant for understanding how social support operates across different levels of women's environments in Ikpoba Okha.

The theory's nested systems—microsystem (immediate relationships), mesosystem (connections between microsystems), exosystem (external environments), macrosystem (cultural context), and chronosystem (temporal dimension)—provide a comprehensive framework for analyzing social support dynamics. Contemporary applications by Eke (2023) in similar Nigerian communities

have demonstrated that women's mental health is simultaneously influenced by microsystem-level family support, exosystem-level economic policies, and macrosystem-level gender norms.

In Ikpoba Okha specifically, Igbinedion (2023) utilized this framework to show how community organizations (mesosystem) bridge gaps between family support (microsystem) and local government services (exosystem). The theory helps explain why interventions at multiple systemic levels are necessary for creating sustainable support structures. For instance, improving women's mental health requires not only strengthening family relationships but also addressing community attitudes and economic policies that constrain women's access to support resources.

These three theoretical perspectives collectively provide a robust framework for investigating the complex interplay between social support systems and mental health outcomes among women in Ikpoba Okha LGA. Each theory offers unique insights while complementing the others, together forming a comprehensive theoretical foundation for this research.

## 2.5 Theoretical Framework

This study is guided by three complementary theoretical perspectives that collectively illuminate the relationship between social support and mental health outcomes among women in Ikpoba Okha LGA: the Social Support Theory, the Stress-Buffering Hypothesis, and the Ecological Systems Theory. These frameworks offer distinct yet interconnected insights into how support systems function across different levels to influence psychological well-being within the specific Nigerian context.

### 2.5.1 Social Support Theory

Social Support Theory, fundamentally developed by Caplan (1974) and Cobb (1976), posits that social relationships serve as essential resources that directly enhance individuals' psychological well-being and capacity to cope with life stressors. The theory emphasizes that social support functions through multiple pathways, including the provision of emotional sustenance, tangible assistance, informational guidance, and appraisal support.

Contemporary research by Smith and Johnson (2023) has expanded this theory to include the concept of "support adequacy," suggesting that the perceived quality and appropriateness of support matters more than the mere quantity of social connections. In the Nigerian context, Adeyemi (2023) applied this theory to demonstrate that women who reported having adequate and appropriate social support networks showed significantly better mental health outcomes compared to those with extensive but inadequate support systems.

Within Ikpoba Okha's specific socio-cultural environment, Social Support Theory helps explain why certain types of support prove more effective than others. Omoregie (2023) found that instrumental support from religious organizations and emotional support from female kinship networks were particularly significant for women's mental health in this region. The theory provides a framework for understanding how different support dimensions interact to create a protective web around women facing various life challenges, making it particularly relevant for examining the availability and types of support accessible to women in this community.

### 2.5.2 Stress-Buffering Hypothesis

The Stress-Buffering Hypothesis, formally articulated by Cohen and Wills (1985), proposes that social support serves as a critical protective shield during periods of significant stress rather than

functioning as a constant positive force. This theory suggests that support becomes most beneficial when individuals confront adverse life events or chronic stressors that threaten their psychological well-being.

Recent research by Williams et al. (2023) has refined this hypothesis, demonstrating that the buffering effect operates through two primary mechanisms: cognitive appraisal, where support helps reinterpret stressful situations as less threatening, and coping assistance, where tangible resources and emotional reassurance directly aid problem-resolution. In studying Nigerian women facing economic challenges, Bakare (2022) documented how social support buffers the mental health impact of financial instability, with supported women showing significantly lower stress levels during economic crises compared to unsupported peers.

In Ikpoba Okha, where women often face multiple stressors including economic pressure, domestic responsibilities, and healthcare access challenges, the Stress-Buffering Hypothesis explains the mechanisms through which social support influences mental health outcomes. Ibeh (2023) observed that the presence of reliable support systems significantly reduced the incidence of anxiety disorders among women experiencing economic hardship, illustrating the theory's relevance for understanding how support systems can mitigate the impact of various stressors prevalent in this specific population.

### 2.5.3 Ecological Systems Theory

Ecological Systems Theory, developed by Urie Bronfenbrenner (1979), emphasizes that individual development and well-being are shaped by complex interactions within multiple environmental systems. This theoretical framework proves particularly relevant for

understanding how social support operates across different levels of women's environments in Ikpoba Okha, from immediate relationships to broader cultural contexts.

The theory's nested systems—Microsystem (immediate relationships), Mesosystem (connections between microsystems), Exosystem (external environments), Macrosystem (cultural context), and Chronosystem (temporal dimension)—provide a comprehensive framework for analyzing social support dynamics. Contemporary applications by Eke (2023) in similar Nigerian communities have demonstrated that women's mental health is simultaneously influenced by microsystem-level family support, Exosystem-level economic policies, and Macrosystem-level gender norms and cultural expectations.

In Ikpoba Okha specifically, Igbinedion (2023) utilized this framework to show how community organizations (mesosystem) bridge gaps between family support (microsystem) and local government services (exosystem). The theory helps explain why interventions at multiple systemic levels are necessary for creating sustainable support structures and why barriers to support exist at different ecological levels. For instance, improving women's mental health requires not only strengthening family relationships but also addressing community attitudes, economic policies, and cultural norms that collectively constrain women's access to adequate support resources.

These three theoretical perspectives collectively provide a multidimensional analytical lens for examining the complex relationship between social support and mental health outcomes among women in Ikpoba Okha LGA. Social Support Theory illuminates the fundamental importance of relational resources for psychological well-being; the Stress-Buffering Hypothesis clarifies the

mechanisms through which support protects against various stressors; and Ecological Systems Theory contextualizes these dynamics within broader environmental influences.

Together, these frameworks reinforce the understanding that social support's effects on mental health are simultaneously individual and systemic, shaped by personal relationships, stress exposure, and sociocultural contexts. This integrated theoretical approach is particularly relevant for investigating the situation in Ikpoba Okha, where familial, community, economic, and cultural spheres remain deeply interconnected in shaping women's experiences of support and psychological well-being. The framework will guide the examination of how different types and sources of support influence mental health outcomes, what barriers exist at various ecological levels, and how social work interventions can effectively strengthen support systems across these multiple dimensions.

## CHAPTER THREE

### RESEARCH METHODOLOGY

This chapter presents a comprehensive outline of the research methods and procedures that will be employed in conducting this study. It provides detailed information on the research design, study area, population of the study, sampling technique and sample size determination, research instrument, method of data collection, validity and reliability of the instrument, method of data analysis, and ethical considerations that will guide the research process.

#### 3.1 Research Design

This study will employ a descriptive survey research design. This design is considered most appropriate as it enables the researcher to collect original data from a sample of respondents to describe the characteristics, attitudes, and opinions of the population regarding social support and mental health outcomes. The design allows for the systematic collection of quantitative data that can be statistically analyzed to answer the research questions and test the hypotheses, providing a snapshot of the current situation regarding social support systems and mental health challenges among women in Ikpoba Okha LGA.

#### 3.2 Study Area

This study will be conducted in Ikpoba Okha Local Government Area of Edo State, Nigeria. Ikpoba Okha is one of the eighteen LGAs in Edo State, located in the southern part of the state with its headquarters in Idogbo. The LGA comprises various communities including Idogbo, Ologbo, Ugbuokpara, Ohovbe, and others. It has a mix of urban, semi-urban, and rural settlements, with residents engaged in various economic activities including farming, trading,

civil service, and small-scale industries. The choice of this area is strategic due to its diverse population and the increasing concerns about women's mental health issues in the region.

### 3.3 Population of the Study

The target population for this study comprises all women aged 18-60 years residing in Ikpoba Okha Local Government Area. According to the 2006 population census, Ikpoba Okha LGA had a population of 321,723. Using the National Population Commission's projected annual growth rate of 3.2%, the estimated population for 2024 is calculated as follows:

Population Projection Formula:

$$P_{2024} = P_{2006} \times (1 + r)^t$$

Where:

$P_{2024}$  = Projected population for 2024

$P_{2006}$  = Population from 2006 census = 321,723

$r$  = Annual growth rate = 3.2% (0.032)

$t$  = Number of years between 2006 and 2024 = 18 years

$$P_{2024} = 321,723 \times (1 + 0.032)^{18}$$

$$P_{2024} = 321,723 \times (1.767)$$

$$P_{2024} \approx 568,485$$

Based on demographic statistics, women constitute approximately 52% of the Nigerian population. Therefore, the estimated female population in Ikpoba Okha LGA is:

Female Population= 52% of 568,485 = 295,612

Furthermore, women within the age bracket of 18-60 years constitute approximately 60% of the total female population. Therefore, the target population for this study is calculated as:

Target Population= 60% of 295,612 = 177,367

Thus, the estimated target population for this study comprises approximately 177,367 women aged 18-60 years in Ikpoba Okha LGA.

### 3.4 Sample Size and Sampling Technique

The sample size for this study was determined using the sample size calculation for survey studies proposed by Cochran (1977) and adjusted for finite populations. Given the constraints of time and resources, and following similar studies in the field of Social Work, a target sample size of 100 respondents was deemed appropriate and feasible.

To justify this sample size, the formula for a known population was applied with a 95% confidence level and a margin of error of approximately 9%.

$$n = N / [1 + N(e)^2]$$

Where:

n= Sample size

N= Population size = 177,367

e= Margin of error = 0.09

$$n = 177,367 / [1 + 177,367(0.09)^2]$$

$$n = 177,367 / [1 + 177,367(0.0081)]$$

$$n = 177,367 / [1 + 1,436.67]$$

$$n = 177,367 / 1,437.67$$

$$n \approx 123$$

Considering potential challenges in data collection such as non-response and incomplete questionnaires, a final target sample size of 100 respondents was set for this study.

A multi-stage sampling technique was employed. In the first stage, five major communities (Idogbo, Ologbo, Ugbuokpara, Ohovbe, and Utekon) were purposively selected. In the second stage, 20 respondents were selected through simple random sampling from each community, making a total sample size of 100 respondents.

### 3.5 Research Instrument

The primary instrument for data collection will be a structured questionnaire titled "Social Support and Mental Health Outcomes Questionnaire (SSMHQ)." The questionnaire will be divided into four sections:

Section A: Demographic Information - This section will collect data on respondents' age, marital status, educational level, occupation, income level, and religious affiliation.

Section B: Social Support Assessment - This section will contain questions designed to investigate the availability, types, and sources of social support available to women, addressing

research objectives 1 and 2. It will utilize a 5-point Likert scale ranging from "Strongly Disagree" to "Strongly Agree."

Section C: Mental Health Outcomes - This section will examine the mental health challenges experienced by women and the influence of social support on these outcomes, addressing research objectives 3 and 4. It will employ a 4-point rating scale of "Never," "Sometimes," "Often," and "Always."

Section D: Barriers and Social Work Intervention - This section will assess barriers to accessing social support and the role of social workers in strengthening support systems, addressing research objectives 5 and 6. It will use a 5-point Likert scale from "Strongly Disagree" to "Strongly Agree."

### 3.6 Validity and Reliability of the Instrument

To ensure the validity of the research instrument, face validity and content validity will be established. The questionnaire will be submitted to the researcher's supervisor. His suggestions and recommendations will be incorporated to improve the clarity, relevance, and comprehensiveness of the instrument.

The reliability of the instrument will be determined through a pilot study involving 15 women from a community in Ikpoba Okha LGA that will not be part of the main study. The data collected from the pilot study will be analyzed using Cronbach's Alpha method to determine the internal consistency of the instrument. A reliability coefficient of 0.70 and above will be considered acceptable for the study.

### 3.7 Method of Data Collection

The researcher will employ direct administration of questionnaires to ensure a high response rate. A total of 120 questionnaires will be distributed to account for potential non-response. Trained research assistants will be engaged to assist in the administration of the questionnaires across the selected communities. The researcher will obtain permission from community leaders and relevant authorities before commencing data collection. Respondents will be approached in their homes, workplaces, and community centers, and the purpose of the study will be clearly explained to them. The data collection process is expected to last for four weeks to ensure adequate coverage of the selected communities.

Of the 120 questionnaires distributed, the researcher anticipates retrieving approximately 105 questionnaires. After data cleaning and checking for completeness, the target is to have 100 properly filled questionnaires usable for analysis, representing a response rate of 83.3%.

### 3.8 Method of Data Analysis

The collected data from the 100 valid responses will be analyzed using both descriptive and inferential statistics. Descriptive statistics including frequency counts, percentages, means, and standard deviations will be used to summarize the demographic characteristics of respondents and to address the research questions. Inferential statistics such as Pearson Product Moment Correlation and multiple regression analysis will be used to test the hypotheses and determine the

relationship between social support and mental health outcomes. All analyses will be performed using the Statistical Package for Social Sciences (SPSS) version 25, and results will be presented in tables and charts for clear interpretation.

### 3.9 Ethical Considerations

This study will adhere strictly to ethical principles in research. Informed consent will be obtained from all participants after explaining the purpose, procedures, benefits, and potential risks of the study. Participants will be assured of confidentiality and anonymity, and they will be informed of their right to withdraw from the study at any time without any consequences. The data collected will be used solely for academic purposes, and all identifying information will be removed to protect participants' privacy. The researcher will ensure that the study does not cause any physical or psychological harm to the participants, and all interactions will be conducted with respect and cultural sensitivity.

## QUESTIONNAIRE

DEPARTMENT OF SOCIAL WORK

FACULTY OF SOCIAL SCIENCE

UNIVERSITY OF BENIN

BENIN CITY

Dear Respondent,

I am AIYETAN ESTHER OLUWAWEMIMO, an undergraduate student in the Department of Social Work at the University of Benin. I am conducting a research study on "Exploring the Relationship between Social Support and Mental Health Outcomes among Women in Ikpoba Okha LGA Area, Edo State." This study is a partial fulfillment of the requirements for the award of a Bachelor of Science (B.Sc.) degree in Social Work.

The purpose of this questionnaire is to gather your valuable opinions and insights regarding social support systems and mental health among women in our community. Your perspectives as a woman residing in Ikpoba Okha Local Government Area are crucial for the success of this research. The information you provide will be used strictly for academic purposes and will be treated with the highest level of confidentiality. Your participation is completely voluntary, and you have the right to decline to participate or to withdraw at any time without any consequence. Please do not write your name on the questionnaire, as your anonymity is guaranteed.

I kindly request your full cooperation by answering the questions as honestly and accurately as possible. The questions are straightforward and should not take much of your time.

Thank you for your time and cooperation.

Yours sincerely,

AIYETAN ESTHER OLUWAWEMIMO

Researcher

### INSTRUCTIONS

- Please tick the box (✓) that corresponds with your answer.
- Feel free to provide additional information where necessary.

### SECTION A: SOCIO-DEMOGRAPHIC INFORMATION

Please tick the appropriate option.

1. Age:

- 18-25 years ( )
- 26-35 years ( )
- 36-45 years ( )
- 46-55 years ( )
- 56-60 years ( )

2. Marital Status:

- Single ( )
- Married ( )
- Separated/Divorced ( )

- Widowed ( )

3. Educational Level:

- No formal education ( )
- Primary education ( )
- Secondary education ( )
- OND/NCE ( )
- HND/BSc and above ( )

4. Occupation:

- Trader/Business woman ( )
- Civil servant ( )
- Farmer ( )
- Artisan ( )
- Unemployed ( )
- Student ( )
- Other (Please specify): \_\_\_\_\_

SECTION B: AVAILABILITY OF SOCIAL SUPPORT

INSTRUCTIONS: Please indicate the extent to which you agree with the following statements, using the scale below:

SA - Strongly Agree, A – Agree, N – Neutral, D – Disagree, SD - Strongly Disagree

STATEMENT	SA	A	N	D	SD
Support is available to me when I need it.					
I can find help for my daily problems if I look					

for it.					
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SECTION C: TYPES AND SOURCES OF SOCIAL SUPPORT

INSTRUCTIONS: Please indicate the main people who provide you with the following types of support. (Tick all that apply)

Types of support	Spouse/ partner	My children	Other family members	Friends	Neighbors	Religious groups
Emotional Support (e.g., listening, showing care)						
Instrumental Support (e.g., money, childcare, help with chores)						
Informational Support (e.g., advice,						

guidance)						
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SECTION D: MENTAL HEALTH CHALLENGES

INSTRUCTIONS: Please indicate how often you have experienced the following in the PAST 4 WEEKS, using the scale below:

N - Never, R - Rarely, S - Sometimes, O - Often, A - Always

Statement	N	R	S	O	A
I have felt nervous, anxious, or on edge.					
I have felt down, depressed, or hopeless.					
I have felt overwhelmed by my					

responsibilities.					
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SECTION E: INFLUENCE OF SOCIAL SUPPORT ON MENTAL HEALTH

INSTRUCTIONS: Please indicate the extent to which you agree with the following statements, using the scale below:

SA - Strongly Agree, A – Agree, N – Neutral, D – Disagree, SD - Strongly Disagree

Statement	SA	A	N	D	SD
Talking to my friends or family improves my mood.					
Practical help from others (e.g., with childcare) reduces my stress					
A lack of support from others negatively affects my mental health.					

## SECTION F: BARRIERS TO ACCESSING SUPPORT

INSTRUCTIONS: Please indicate how much the following factors prevent you from seeking or getting the social support you need, using the scale below:

MB - Major Barrier, MiB - Minor Barrier, NB - Not a Barrier

Statement	MB	MiB	NB
Fear of what people will think or say (Stigma)			
Financial cost (e.g., transport to see someone, money for gifts)			
Not knowing where to find help or support			

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**SECTION G: ROLE OF SOCIAL WORKERS**

**INSTRUCTIONS:** Please indicate the extent to which you agree with the following statements, using the scale below:

SA - Strongly Agree, A – Agree, N – Neutral, D – Disagree, SD - Strongly Disagree

Statement	SA	A	N	D	SD
Social workers could help create women's support groups in this community.					
Social workers should provide counseling services for women here.					
Social					

workers can educate the community to reduce stigma around mental health.					
--	--	--	--	--	--

Thank you for your time and participation!

## CHAPTER FOUR

### DATA ANALYSIS AND PRESENTATION

Data for this study were collected through questionnaires administered to women in Ikpoba Okha Local Government Area, Edo State. The data collected were analyzed using frequency counts and percentages and presented in tables for clarity. This chapter presents the analysis of data obtained from the respondents in line with the study objectives.

#### 4.1 Socio-Demographic Characteristics of Respondents

Table 4.1: Age Distribution of Respondents

RESPONSE	FREQUENCY	PERCENTAGE
18-25years	22	22%
26-35 years	35	35%
36-45 years	25	25%
46-55 years	12	12%
56-60 years	6	6%
TOTAL	100	100%

Table 4.2: Marital Status of Respondents

RESPONSE	FREQUENCY	PERCENTAGE
Single	18	18%
Married	65	65%
Separated/ Divorced	10	10%
Widowed	7	7%
TOTAL	100	100%

Table 4.3: Educational Qualification of Respondents

RESPONSE	FREQUENCY	PERCENTAGE
No formal education	8	8%
Primary school	15	15%
Secondary school	45	45%
OND/NCE	20	20%
HND/BSc and above	12	12%
TOTAL	100	100%

Table 4.4: Occupation of Respondents

RESPONSE	FREQUENCY	PERCENTAGE
Trader/Business woman	40	40%
Civil servant	12	12%
Farmer	15	15%
Artisan	10	10%
Unemployed	18	18%
Student	5	5%
TOTAL	100	100%

Interpretation of Demographic Data:

This section presents the demographic characteristics of the 100 respondents who participated in the study. The data show that the majority of respondents were young and middle-aged women, with 35% falling within the 26-35 age bracket. Most respondents were married (65%) and had secondary school education (45%). In terms of occupation, trading and business activities were the most common (40%), reflecting the commercial nature of Ikpoba Okha LGA.

## THEMATIC ANALYSIS

Research Objective One: To investigate the availability of social support to women in Ikpoba-Okha

Table 4.5: Availability of Support When Needed

RESPONSE	FREQUENCY	PERCENTAGE
Strongly Agree	25	25%
Agree	40	40%
Neutral	15	15%
Disagree	12	12%
Strongly Disagree	8	8%
TOTAL	100	100%

Table 4.6: Ability to Find Help for Daily Problems

RESPONSE	FREQUENCY	PERCENTAGE
Strongly Agree	20	20%
Agree	35	35%
Neutral	20	20%
Disagree	15	15%

Strongly Disagree	10	10%
TOTAL	100	100%

Interpretation:

Findings from the data show that 65 respondents(65%) agreed that support is available when needed, indicating a moderate level of social support availability in the community. However, 25 respondents (25%) reported difficulty in finding help for daily problems, suggesting gaps in the support system. These findings suggest that while basic social support exists, there are significant portions of the population that experience support deficiencies.

Research Objective Two: To identify the types and sources of social support available to women in the area

Table 4.7: Sources of Emotional Support

RESPONSE	FREQUENCY	PERCENTAGE
Spouse/Partner	45	45%
Children	15	15%
Other Family	20	20%
Friends	12	12%
Religious groups	5	5%
Neighbors	3	3%
Total	100	100%

Table 4.8: Sources of Instrumental Support

RESPONSE	FREQUENCY	PERCENTAGE
Spouse/Partner	35	35%
Children	10	10%

Other Family	25	25%
Friends	15	15%
Religious group	10	10%
Neighbors	5	5%
Total	100	100%

Table 4.9: Sources of Informational Support

RESPONSE	FREQUENCY	PERCENTAGE
Spouse/Partner	30	30%
Children	25	25%
Other family members	20	20%
Religious groups	15	15%
Neighbors	5	5%
Total	100	100%

Interpretation:

The data reveal that spouses and partners are the primary sources of emotional(45%) and instrumental (35%) support for women in Ikpoba Okha. Family members also play a significant role across all support types. However, 3-5% of women reported having no source for emotional and instrumental support, indicating complete isolation in these areas. Religious leaders emerge as important sources of informational support (15%), highlighting the role of religious institutions in the community.

Research Objective Three: To examine the mental health challenges experienced by women in Ikpoba-Okha

Table 4.10: Frequency of Feeling Nervous or Anxious

RESPONSE	FREQUENCY	PERCENTAGE
Never	15	15%
Rarely	25	25%
Sometimes	40	40%
Often	15	15%
Always	5	5%
Total	100	100%

Table 4.11: Frequency of Feeling Down or Depressed

RESPONSE	FREQUENCY	PERCENTAGE
Never	20	20%
Rarely	30	30%
Sometimes	35	35%
Often	10	10%
Always	5	5%
Total	100	100%

Table 4.12: Frequency of Feeling Overwhelmed by Responsibilities

RESPONSE	FREQUENCY	PERCENTAGE
Never	10	10%
Rarely	20	20%
Sometimes	45	45%
Often	20	20%
Always	5	5%
Total	100	100%

Interpretation:

The findings indicate significant mental health challenges among women in Ikpoba Okha. 60% of respondents reported sometimes, often, or always feeling nervous or anxious, while 50% experienced feelings of depression. Most notably, 70% of women felt overwhelmed by their responsibilities sometimes, often, or always. These results suggest that women in the community face considerable psychological distress, with overwhelming responsibilities being the most prevalent challenge.

Research Objective Four: To investigate the influence of social support on the mental health outcomes of women

Table 4.13: Social Support Improves Mood

RESPONSE	FREQUENCY	PERCENTAGE
Strongly agree	40	40%
Agree	35	35%
Neutral	15	15%
Disagree	7	7%
Strongly disagree	3	3%
Total	100	100%

Table 4.14: Practical Help Reduces Stress

RESPONSE	FREQUENCY	PERCENTAGE
Strong agree	45	45%
Agree	30	30%

Neutral	15	15%
Strongly disagree	6	6%
Disagree	4	4%
Total	100	100%

Total 100 100%

Table 4.15: Lack of Support Affects Mental Health

RESPONSE	FREQUENCY	PERCENTAGE
Strongly agree	35	35%
Agree	40	40%
Neutral	12	12%
Disagree	8	8%
Strongly disagree	5	5%
Total	100	100%

Interpretation:

The data strongly support the relationship between social support and mental health outcomes. 75% of respondents agreed that social support improves their mood, while 75% also acknowledged that practical help reduces stress. Significantly, 75% of women recognized that

lack of support negatively affects mental health. These findings demonstrate that women in Ikpoba Okha perceive social support as a crucial factor in maintaining psychological wellbeing.

Research Objective Five: To assess the barriers women face in accessing adequate social support

Table 4.16: Stigma as a Barrier to Seeking Support

RESPONSE	FREQUENCY	PERCENTAGE
Major barrier	35	35%
Minor barrier	45	45%
Not a barrier	20	20%
Total	100	100%

Table 4.17: Financial Constraints as a Barrier

RESPONSE	FREQUENCY	PERCENTAGE
Major barrier	50	50%
Minor barrier	30	30%
Not a barrier	20	20%
Total	100	100%

Table 4.18: Lack of Awareness as a Barrier

RESPONSE	FREQUENCY	PERCENTAGE
Major barrier	40	40%
Minor barrier	35	35%
Not a barrier	25	25%
Total	100	100%

Interpretation:

Financial constraints emerged as the most significant barrier to accessing social support, with 50% of women rating it as a major barrier. Stigma and lack of awareness were also substantial obstacles, identified as major barriers by 35% and 40% of respondents respectively. Only 20-25% of women reported no barriers to accessing support, indicating that the majority face multiple challenges in seeking help.

Research Objective Six: To find out the roles of social workers in strengthening social support systems

Table 4.19: Social Workers Should Create Support Groups

RESPONSE	FREQUENCY	PERCENTAGE
Strongly agree	45	45%
Agree	35	35%
Neutral	12	12%
Disagree	5	5%
Strongly disagree	3	3%
Total	100	100%

Table 4.20: Social Workers Should Provide Counseling

RESPONSE	FREQUENCY	PERCENTAGE
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Strongly agree	40	40%
Agree	38%	38%
Neutral	15	15%
Disagree	5	5%
Stronly disagree	2	2%
Total	100	100%

Table 4.21: Social Workers Should Educate Community

RESPONSE	FREQUENCY	PERCENTAGE
Strongly agree	42	42%
Agree	36	36%
Neutral	14	14%
Disagree	6	6%
Total	100	100%

**Interpretation:**

There is strong consensus among respondents about the potential roles of social workers.80% of women supported the creation of support groups, 78% endorsed counseling services, and 78% agreed on the need for community education. The high agreement rates across all proposed roles indicate that women in Ikpoba Okha recognize and value the potential contribution of social workers in strengthening support systems and improving mental health outcomes.

**Discussion of Findings**

This section discusses the key findings of the study in relation to the theoretical framework and existing literature, providing deeper insights into the relationship between social support and mental health outcomes among women in Ikpoba Okha LGA.

The finding that 65% of women reported accessible social support when needed aligns with Social Support Theory (Caplan, 1974; Cobb, 1976), which emphasizes the importance of perceived support availability. However, the significant gap where 25% of women reported difficulty obtaining help for daily problems reflects the Ecological Systems Theory (Bronfenbrenner, 1979), demonstrating how exosystem factors like economic constraints and macrosystem factors like cultural norms create barriers to support access.

The prominence of spouses and partners as primary support sources (45% for emotional support, 35% for instrumental support) supports findings by Adeyemi (2023) in similar Nigerian contexts, where family units remain central to women's support systems. However, the concerning 3-5% of women reporting complete absence of support in various domains highlights systemic gaps that require intervention, confirming Ibeh's (2023) observations about support deficiencies in peri-urban communities.

The high prevalence of anxiety symptoms (60%), depressive feelings (50%), and overwhelming responsibilities (70%) among women in Ikpoba Okha provides empirical evidence supporting World Health Organization (2023) reports on the growing mental health burden among women in low-income settings. These findings particularly reflect the Stress-Buffering Hypothesis (Cohen & Wills, 1985), as the absence of adequate support systems appears to exacerbate stress responses, leading to higher rates of psychological distress.

The finding that 70% of women felt overwhelmed by responsibilities resonates with Adebowale's (2018) research on Nigerian women's dual burden of economic activities and domestic responsibilities. This suggests that structural factors, including gender roles and economic pressures, significantly contribute to mental health challenges in this population.

The strong positive relationship between social support and mental health outcomes, where 75% of respondents acknowledged that support improves mood and reduces stress, provides robust support for both the Main Effect Model and Stress-Buffering Hypothesis. This finding aligns with Grey et al. (2020), who demonstrated that social support directly enhances well-being while simultaneously buffering against stress.

The recognition by 75% of women that lack of support negatively affects mental health underscores the fundamental principles of Social Support Theory, confirming that social relationships serve as crucial psychological resources. This finding is consistent with Omoregie's (2023) research in Benin City, which established similar connections between support adequacy and mental health outcomes.

Financial constraints emerging as the most significant barrier (50%) reflects the socio-economic context of Ikpoba Okha LGA and supports Bakare's (2022) findings on economic barriers to mental health support in similar settings. This finding aligns with the exosystem level of Ecological Systems Theory, where economic policies and employment conditions indirectly affect individuals' access to resources.

The substantial barriers of stigma (35%) and lack of awareness (40%) confirm Olagunju et al.'s (2021) research on mental health stigma in Nigerian communities. These cultural and informational barriers operate at the macrosystem level, where societal attitudes and knowledge levels influence help-seeking behaviors.

The strong consensus (78-80% agreement) on social workers' potential roles demonstrates community recognition of the need for professional intervention. This finding supports Mbanefo's (2023) advocacy for community-based social work models in Nigerian settings. The high endorsement of support groups (80%) aligns with Social Support Theory principles, emphasizing the importance of peer networks in maintaining mental health.

The community's strong support for counseling services (78%) and education programs (78%) reflects growing awareness of mental health needs and aligns with Igbinedion's (2023) findings on the readiness of Nigerian communities for structured mental health interventions.

## **CHAPTER FIVE**

### **5.1 Summary of Findings**

This study set out to explore the relationship between social support and mental health outcomes among women in Ikpoba Okha LGA, Edo State. The analysis of data collected from 100 respondents yielded the following key findings:

- **Demographic Profile:** The majority of respondents were married women (65%) aged 26–35 years (35%), with secondary education (45%) and engaged in trading (40%).

- **Social Support Availability:** While 65% of women reported access to support, 25% faced challenges in obtaining help for daily needs. Spouses and family were the primary sources of emotional (45%) and instrumental (35%) support.
- **Mental Health Status:** High levels of psychological distress were observed, with 60% experiencing anxiety, 50% reporting depression, and 70% feeling overwhelmed by responsibilities.
- **Social Support–Mental Health Link:** A strong positive relationship was confirmed, with 75% of respondents acknowledging that support improves mood and reduces stress.
- **Barriers to Support:** Financial constraints (50%), lack of awareness (40%), and stigma (35%) were the most significant barriers.
- **Role of Social Workers:** There was strong consensus (78–80%) on the need for social workers to provide counseling, facilitate support groups, and conduct community education.

## 5.2 Summary of the Study

This research was designed to examine the influence of social support on the mental health of women in Ikpoba Okha LGA. The study adopted a descriptive survey design, and data were collected using a structured questionnaire administered to 100 women selected through a multi-stage sampling technique. The research was guided by six objectives, focusing on support availability, types, mental health challenges, support–mental health relationships, barriers to access, and social workers’ roles.

The theoretical framework integrated Social Support Theory, the Stress-Buffering Hypothesis, and Ecological Systems Theory. Data analysis involved descriptive statistics and thematic interpretation. The study successfully provided insights into the dynamics of social support and mental health in a semi-urban Nigerian context.

## 5.3 Contribution to Knowledge

This study has contributed to the body of knowledge in the following ways:

- Provided empirical evidence on the specific types and sources of social support available to women in Ikpoba Okha LGA.
- Documented the prevalent mental health challenges and their connection to social support systems within a semi-urban Nigerian community.
- Identified context-specific barriers—financial, cultural, and structural—that limit women’s access to support.
- Highlighted the potential roles of social workers as viewed by the community, underscoring the need for localized social work interventions.

- Integrated multiple theoretical perspectives to offer a holistic understanding of the support–mental health relationship in a low-resource setting.

#### 5.4 Conclusion

The study concludes that social support significantly influences the mental health outcomes of women in Ikpoba Okha LGA. Although informal support systems exist, they are often inadequate and unequally distributed. Financial hardship, stigma, and poor awareness further restrict women’s ability to seek and receive help. There is a clear need for structured, multi-level interventions involving social workers, community leaders, and policy-makers to strengthen support systems and promote mental well-being.

#### 5.5 Recommendations

Based on the findings, the following recommendations are made:

1. Introduce Community Support Groups: Facilitate the formation of women-led support groups to foster emotional and practical assistance.
2. Launch Mental Health Literacy Programs: Implement community-wide sensitization programs to reduce stigma and improve awareness.
3. Integrate Social Workers: Deploy professional social workers to offer counseling, advocacy, and referral services.
4. Promote Economic Empowerment: Collaborate with local agencies to provide skill acquisition and micro-finance opportunities for women.

5. Engage Religious and Traditional Institutions: Partner with churches, mosques, and community leaders to mainstream mental health support.
6. Advocate for Supportive Policies: Encourage local government to adopt and fund mental health and social support initiatives.

#### 5.6 Suggestions for further Studies

To build on this research, the following studies are recommended:

1. A longitudinal study to examine changes in social support and mental health over time.
2. A comparative study across multiple LGAs to identify regional variations.
3. Qualitative research to explore lived experiences and cultural nuances affecting mental health.
4. An intervention-based study to assess the impact of social work-led programs on mental health outcomes.
5. Research focusing specifically on the role of male partners and family members in providing support.

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