

**A MULTIMODAL ANALYSIS OF PUBLIC
HEALTH POSTERS ON TEN KILLER DISEASES
IN KATSINA STATE, NIGERIA**

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**A MULTIMODAL ANALYSIS OF PUBLIC
HEALTH POSTERS ON TEN KILLER DISEASES
IN KATSINA STATE, NIGERIA**

by

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TABLE OF CONTENTS

ACKNOWLEDGEMENT.....	ii
TABLE OF CONTENTS	iv
LIST OF TABLES	x
LIST OF FIGURES	xii
LIST OF ABBREVIATIONS	xvii
LIST OF APPENDICES	ix
ABSTRAK.....	xx
ABSTRACT.....	xxii
CHAPTER 1 INTRODUCTION.....	1
1.1 Background to the Study.....	1
1.1.1 Nigeria.....	4
1.1.2 Health Campaign	7
1.1.3 Public Health Campaign Materials	12
1.1.3(a) Public Health Posters	15
1.1.4 Common Diseases in Nigeria.....	18
1.2 Statement of the Problem.....	20
1.3 Research Objectives	23
1.4 Research Questions	24
1.5 Significance of the Study	24
1.6 Scope of the Research	28
1.7 Definitions of Key Terms	31
1.8 Overview of Chapters	36
1.9 Conclusion	37
CHAPTER 2 LITERATURE REVIEW	38
2.1 Introduction.....	38

2.2	Multimodality	38
2.3	Multimodality in non-Health Genres	44
2.3.1	Multimodality in Health Genres	45
2.4	Multimodality in Public Health Posters	52
2.4.1	Public health posters in other disciplines.....	54
2.4.2	Selected theories in previous studies	56
2.4.3	Synthesizing Findings from Previous Research.....	62
2.5	Gaps in Literature	65
2.6	Generic Structure Potential	67
2.6.1	Social Actor Network.....	74
2.6.1(a)	Exclusion	74
2.6.1(b)	Inclusion.....	75
2.6.1(b)(i)	Activation and Passivation	76
2.6.1(b)(ii)	Generalization and specification	76
2.6.1(b)(iii)	Individualization and assimilation.....	76
2.6.1(b)(iv)	Association and Dissociation	77
2.6.1(b)(v)	Indetermination and differentiation	77
2.6.1(b)(vi)	Nomination and categorization.....	77
2.6.1(b)(vii)	Functionalisation and Identification.....	77
2.6.1(b)(viii)	Personalisation and impersonalisation.....	78
2.6.1(b)(ix)	Over-determination.....	78
2.7	Visual Representation of Social Actors	80
2.7.1	The Image and the Viewer	80
2.7.1(a)	Social Distance	81
2.7.1(b)	Social Relations	81
2.7.1(c)	Social Interaction	82
2.7.2	Depicting People	83

2.7.2(a)	Exclusion	83
2.7.2(b)	Roles	83
2.7.2(c)	Specific and Generic	84
2.7.2(d)	Individual and Group	84
2.7.2(e)	Categorization.....	84
2.8	Logico-Semantic Relations between Image and Text	86
2.8.1	Status Relation	86
2.8.2	Logico-Semantic Relations	87
2.9	Conceptual Framework	91
2.10	Conclusion	93
CHAPTER 3 RESEARCH METHODOLOGY		94
3.1	Introduction.....	94
3.2	Research Design.....	94
3.3	Study Area	96
3.3.1	Nigerian HealthCare Systems	97
3.3.1(a)	Primary Health Care	99
3.3.1(b)	Secondary Health Care	102
3.3.1(c)	Tertiary Health Care.....	103
3.3.1(d)	Health Care System in Katsina State	108
3.4	Data Collection	109
3.5	Sampling Strategy	113
3.5.1	Breakdown of Data Based on the Ten Killer Diseases	118
3.5.2	Breakdown of Data Based on Language.....	119
3.5.3	Sources Of Data	123
3.6	Data Coding	124
3.7	Data Analysis	126
3.8	Conclusion	128

CHAPTER 4	DATA ANALYSIS AND DISCUSSION: GENERIC STRUCTURE POTENTIAL OF PUBLIC HEALTH POSTERS	129
4.1	Introduction.....	129
4.2	Generic Structure Potential of the Public Health Posters	129
4.3	The Seven Elements of the GSP of PHP	140
4.3.1	The lead.....	144
4.3.2	The Display	154
4.3.3	Announcement	158
4.3.4	Enhancer	172
4.3.5	Tag.....	177
4.3.6	Call-And-Visit Information.....	178
4.3.7	Emblem.....	180
4.4	Summary of the Chapter	182
CHAPTER 5	DATA ANALYSIS AND DISCUSSION: THE LANGUAGE FEATURES OF PUBLIC HEALTH POSTERS	186
5.1	Introduction.....	186
5.2	Overview of Social Actors in Public Health Posters	186
5.3	Social Actor Analyses.....	191
5.3.1	Exclusion Strategy	191
5.3.1(a)	Suppression.....	192
5.3.1(b)	Backgrounding.....	194
5.3.2	Inclusion.....	196
5.3.2(a)	Activation.....	196
5.3.2(b)	Passivation	204
5.3.1(b)(i)	Subjectivation.....	205
5.3.1(b)(ii)	Beneficialisation.....	207
5.3.2(c)	Collectivization.....	211

5.3.2(d)	Indetermination.....	213
5.3.2(e)	Classification	216
5.4	Summary of the Chapter	219
CHAPTER 6 DATA ANALYSIS AND DISCUSSION: THE IMAGE FEATURES OF THE PUBLIC HEATH POSTERS		
6.1	Introduction.....	222
6.2	Overview of Represented Participants in Public Health Posters	222
6.3	Represented Participants and the viewers.....	227
6.3.1	Social Distance.....	227
6.3.2	Social Relations	230
6.3.3	Social Interaction	232
6.4	Depicting the Represented Participants	236
6.4.1	Exclusion.....	236
6.4.2	Roles	240
6.4.3	Individual and group	246
6.5	Summary of the Chapter	250
CHAPTER 7 DATA ANALYSIS AND DISCUSSION: TEXT-IMAGE RELATIONS IN PUBLIC HEATH POSTERS.....		
7.1	Introduction.....	253
7.2	Overview of Status and Logico-Semantic Relations	254
7.3	Status Relations in PHP	260
7.3.1	Equal Status Relation.....	260
7.3.1(a)	Image and text Independent.....	260
7.3.1(b)	Image and text complementary.....	266
7.3.2	Unequal status	270
7.3.2(a)	Image subordinate to text.....	270
7.4	Logico-Semantic Relations	275
7.4.1	Expansion.....	275

7.4.1(a)	Elaboration.....	276
7.4.1(a)(i)	Exposition.....	276
7.4.1(a)(ii)	Exemplification	279
7.4.1(b)	Extension	285
7.5	Summary of the Chapter	288
7.6	Discussion and Summary.....	292
CHAPTER 8 CONCLUSION		296
8.1	Introduction.....	296
8.2	Summary	296
8.3	Findings.....	300
8.3.1	Generic Structure Potential	300
8.3.2	Language Features	302
8.3.3	Image Features	304
8.3.4	Text-Image Relations	306
8.4	Implications.....	309
8.4.1	Multimodality	309
8.4.2	Public Health.....	312
8.5	Recommendations and Directions for future research.....	316
8.6	Conclusion	323
REFERENCES.....		329
APPENDICES		
LIST OF PUBLICATIONS		

LIST OF TABLES

		Page
Table 1.1	Definitions of Terms.....	31
Table 2.1	Definitions of Matching of Research Objectives, Research Questions and Framework.....	92
Table 3.1:	Differences Between Facilities in Nigerian Healthcare System	104
Table 3.2	Number of Health Facilities by Ownership and Category.	107
Table 3.3	Health facilities by category and ownership distributed across the thirty-four Local Governments of Katsina state	109
Table 3.4	Tertiary Health Facilities covered by the Study	111
Table 3.5	List of Secondary Health Facilities covered by the research.....	111
Table 3.6	List of Primary Health Facilities sampled from Daura.....	111
Table 3.7	List of Primary Health Facilities sampled from Funtua	111
Table 3.8	List of Primary Health Facilities sampled from Katsina	112
Table 3.9	Breakdown of Data Based on the Ten Killer Diseases.....	118
Table 3.10	The Languages of the Sampled Data.....	119
Table 3.11	Distribution of Data According to Sources	123
Table 3.12	Data Coding System	125
Table 4.1	Categories of Posters According to Number of GSP Elements	131
Table 4.2	Occurrences of Cheong’s (2004) Seven GSP Elements in the Data.....	139
Table 5.1	Representation of Social Actors in Public Health Posters.....	188
Table 5.2	Definitions of Human and Non-human Activated Social Actors in PHP	198
Table 6.1	Relationship Between the Participants and the Viewers	224
Table 7.1	Major Visual Resources in Public Health Posters	254
Table 7.2	Status Relations in Public Health Posters.....	256

Table 7.3	Logico-Semantic Relations in Public Health Posters	258
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LIST OF FIGURES

		Page
Figure 1.1	Map showing six geo-political regions, thirty-six states and one FCT	6
Figure 1.2	Main Causes of Death in Nigeria 2019	20
Figure 1.3	Predicted risk map of malaria prevalence of under-5 children for the 37 states in Nigeria.....	22
Figure 2.1	Interaction to create Interpersonal, Ideational and Compositional/Textual meanings	71
Figure 2.2	The Display in Print Advertisement	72
Figure 2.3	The announcement in print advertisements	73
Figure 2.4	Social Actor Network	79
Figure 2.5	Representation and Viewer Network.....	83
Figure 2.6	Visual Social Actor Network.....	85
Figure 2.7	System of text-image status relations	87
Figure 2.8	System of expansion for text-image relations	88
Figure 2.9	Network of combined status and logico–semantics	90
Figure 2.10	Conceptual framework for multimodal analysis of public posters.....	91
Figure 3.1	Map showing Katsina, its neighbouring states, and the thirty-four Local Governments	97
Figure 3.2	Graaph visualizing the distribution of health facilities by ownership category	108
Figure 3.3	Breakdown of Data Based on the Ten killer Diseases.....	118
Figure 3.4	The Languages of the Data.....	122
Figure 3.5	Distribution of Data According to Sources.	123
Figure 4.1	Obligatory Elements in PHP.....	134
Figure 4.2	Optional Elements in PHP.....	136
Figure 4.3	Generic Structure Potential of Public Health Posters	138

Figure 4.4	Obligatory and Optional Elements Based on Occurrences	139
Figure 4.5	PHP with seven and three elements of Cheong’s GSP (DD-E-S-1 AND ND-E-P-9).....	141
Figure 4.6	Typical Hausa woman as a LoA.....	145
Figure 4.7	Non-Hausa woman as LoA.....	146
Figure 4.8	PHP with LoA and Comp. to LoA (ND-E-P-1 AND ND-E-P-2)	147
Figure 4.9	Successful PHP with single (TB-E-P-10) and dual (ND-E-S-8) represented participants as LoA	149
Figure 4.10	PHPs Lacking Comp. to LoA (CBD-E-S-1 AND MLR-PG-S-4)	151
Figure 4.11	Leads with more than one LoA (CBD-H-P-7 AND TB-E-P-3).....	152
Figure 4.12	Implicit Display (ND-E-P-19 and MLR-E-S-7).....	155
Figure 4.13	Explicit Display (MLR-PG-S-2)	157
Figure 4.14	PHP Announcements (ND-E-S-24, ND-H-S-28 and MLR-E-S-1)	159
Figure 4.15	Many messages in one poster in Roman script.....	161
Figure 4.16	Too much information in Ajami script	162
Figure 4.17	Structural constructions of primary and secondary announcements of PHP (ND-E-S-4 and HIV-E-P-5).....	164
Figure 4.18	Functional constructions of primary and secondary announcements of PHP (LRI-H-P-3, HIV-E-S-2 and ND-E-P-5)	166
Figure 4.19	PHP with more than one primary announcements (TB-E-PR-11).....	167
Figure 4.20	English Announcement translated into Hausa Language (TB-E-T-6, TB-H-P-5 and TB-H-P-12)	169
Figure 4.21	Same Announcement in English, Hausa Roman <i>and</i> Arabic <i>orthography</i> (LRI-E-T-1, LRI-H-P-3, and LRI-AJM-P-7)	171
Figure 4.22	PHP Enhancers Performing Interpersonal Function (HIV-E-PR-17, HIV-E-PR-16 and ND-H-S-28).....	173
Figure 4.23	PHP Enhancers Performing ideational Function (MLR-PG-S-2 and ND-E-S-8).....	176

Figure 4.24	The Tag of Public Health Posters (MLR-E-S-1 and MLR-PG-S-4)	177
Figure 4.25	Call-And-Visit Information of PHP (TB-E-P-7, MGT-E-PR-3 and LRI-AJM-P-2)	179
Figure 4.26	PHP with no Emblem (ND-E-S-7 and ND-E-P-17).....	181
Figure 4.27	PHP with Emblems (ND-E-S-21 , MGT-E-P-4 and TB-AJM-P-1)	181
Figure 5.1	Exclusion and Inclusion Representation Strategies in Public Health Posters	190
Figure 5.2	Suppression of social actor in PHP (ND-E-P-27)	193
Figure 5.3	Backgrounding in PHP (ND-E-P-15)	195
Figure 5.4	Human and Non-human Activated Social Actors in PHP.....	197
Figure 5.5	Activation in PHP (ND-E-S-24).....	202
Figure 5.6	Disease Activation in PHP (MLR-E-T-3)	203
Figure 5.7	Subjectivation in PHP (MGT-E-P-2)	207
Figure 5.8	Beneficialisation of Nets in PHP (MLR-E-S-8).....	209
Figure 5.9	Beneficialisation of Newborn Patients in PHP (ND-E-P-5).....	210
Figure 5.10	Collectivisation in PHP (HIV-E-S-2)	213
Figure 5.11	Indetermination with indefinite pronoun ‘someone’ in PHP (TB-E-T-6).....	214
Figure 5.12	Indetermination with indefinite pronoun ‘one’(HIV-E-P-13).....	215
Figure 5.13	Classification with Age in PHP (MGT-E-PR-3).....	217
Figure 5.14	Classification with Gender in PHP	218
Figure 6.1	How PHP’s Participants Relate with the Viewers.....	225
Figure 6.2	PHP’s Close Shot Social Distance (MLR-E-S-5 and TB-E-T-2).....	228
Figure 6.3	PHP’s Long Shot Social Distance (HIV-E-S-3)	229
Figure 6.4	PHP Vertical Angle (MLR-E-S-5)	231
Figure 6.5	PHP Horizontal Angle (HIV-E-PR-19).....	232
Figure 6.6	PHP Offer Gaze (TB-AJM-P-1 and MGT-E-PR-3).....	233

Figure 6.7	PHP Demand Gaze (HIV-E-S-1 and TB-E-T-6).....	235
Figure 6.8	PHP Demand and Offer Gaze (ND-E-P-3).....	236
Figure 6.9	Men excluded in neo-natal posters (ND-E-P-1, ND-E-P-5, AND ND-E-P-17)	237
Figure 6.10	Men excluded in malaria posters (MLR-E-S-6, MLR-E-S-5, AND MLR-PG-S-4).....	238
Figure 6.11	Women as agents (ND-E-P-27, CBD-H-P-3, AND ND-E-P-18).....	240
Figure 6.12	Children as patients (ND-E-P-2 AND ND-E-P-14)	242
Figure 6.13	Symbolical subjugation of man 1 (DD-E-S-1, AND ND-E-S-4).....	244
Figure 6.14	Symbolical subjugation of man 2 (DD-E-S-1, AND ND-E-S-4).....	245
Figure 6.15	Homogenization by headscarf and hijab (MLR-PG-S-4, AND CBD-H-P-4)	246
Figure 6.16	Individualization in PHP (TB-E-P-10, AND CBD-H-P-3).....	248
Figure 6.17	Individualisation with cloth.....	249
Figure 7.1	PHP's Major Visual Resources	255
Figure 7.2	Status Relations in Public Health Posters.....	257
Figure 7.3	Logico-Semantic Relations in Public Health Posters.....	259
Figure 7.4	Equal Status, Image and Text Independent 1 (ND-E-P-19).....	261
Figure 7.5	Equal Status, Image and Text Independent 2 (HIV-E-P-7).....	263
Figure 7.6	Equal Status, Image and Text Independent 3 (MLR-E-S-1)	265
Figure 7.7	Equal Status, Image and Text Complementary 1 (HIV-E-P-12).....	267
Figure 7.8	Equal Status, Image and Text Complementary 2 (HIV-E-P-13).....	269
Figure 7.9	Equal Status, Image subordinate to text 1 (ND-E-S-7).....	271
Figure 7.10	Equal Status, Image subordinate to text 2 (CBD-H-P-6).....	272
Figure 7.11	Equal Status, Image subordinate to text 2 (TB-H-P-12).....	273
Figure 7.12	Exposition 1 (ND-E-P-5)	276

Figure 7.13	Exposition 2 (HIV-E-P- 6).....	278
Figure 7.14	Exemplification 1 (ND-E-S-25)	280
Figure 7.15	Exemplification 2 (STK-E-T-2)	283
Figure 7.16	Exemplification 3 (ND-E-S-8)	284
Figure 7.17	Extension 1 (ND-H-S-28)	286
Figure 7.18	Extension 1 (MLR-E-S-5)	287

LIST OF ABBREVIATIONS

CHEW	Community Extension Health Worker
COVID-19	Coronavirus disease -19
DPL	Drug package leaflets
EHA & EHO	Environmental Health Workers
GSP	Generic Structure Potentials
GSPC	Generic Structure Potential Component
HIV/AIDS	Human Immunodeficiency Virus/ Acquired Immunodeficiency Syndrome
ITC	Inter-Semiotic Texture Component
IUHPE	International Union of Health Promotion and Education
LGA	local government areas
LoA	Locus of Attention
MDG	Millennium Development Goals
MOH	Ministry of Health
NHPP	National Health Promotion Policy
PHC	Primary Health Care
PHP	Public Health Posters
PIL	Patient information leaflet
PPI	patient package insert
RSAC	Representation of Social Actor Component
THC	Tertiary Health Care
UN	United Nations
UNICEF	United Nations International Children's Emergency Fund
USAID	U.S. Agency for International Development
VEC	Verbal Elements Component
VRC	Visual Representation Component

WHO

World Health Organisation

LIST OF APPENDICES

APPENDIX THE 100 POSTERS AND SUMMARY OF GSP ELEMENTS

ANALISIS MULTIMODAL POSTER KESIHATAN AWAM MENGENAI SEPULUH PENYAKIT PEMBUNUH DI NEGERI KATSINA, NIGERI

ABSTRAK

Penyelidikan ini membentangkan analisis multimodal poster kesihatan awam (PHP) mengenai sepuluh penyakit pembunuh di Katsina State, Nigeria. Poster kesihatan awam ialah alat penting untuk kempen pencegahan penyakit, sering digunakan untuk menyebarkan maklumat tentang punca penyakit, gejala dan strategi pencegahan. Walaupun penggunaannya meluas, penyelidikan terhad telah menilai keberkesanannya, terutamanya di Nigeria Utara. Kajian ini bertujuan untuk mengisi jurang itu dengan menganalisis bagaimana poster ini berkomunikasi melalui bahasa dan imej. Penyelidikan ini menggunakan pendekatan multimodal, menggunakan Cheong (2004) Potensi Struktur Generik (GSP), Teori Aktor Sosial van Leeuwen (2008), dan Sistem Hubungan Logico-Semantik Martinec & Salway (2005) untuk menilai struktur generik, bahasa, dan ciri imej, serta interaksi antara teks dan imej. Satu sampel 100 poster dari pelbagai hospital di Negeri Katsina telah dianalisis. Penemuan menunjukkan bahawa PHP mempunyai corak struktur yang berbeza dan sangat bergantung pada interaksi antara teks dan visual untuk menyampaikan mesej mereka. Walaupun imej menyokong maklumat yang disampaikan oleh teks, poster sering bergantung pada penjelasan teks untuk mencapai kejelasan. Walau bagaimanapun, pergantungan pada konstruk multimodal yang kompleks boleh menjadikan poster ini kurang dapat diakses oleh khalayak sasaran mereka, terutamanya dalam persekitaran luar bandar yang kemahiran tafsiran mungkin

terhad. Penyelidikan ini menyumbang kepada pemahaman komunikasi kesihatan pelbagai mod di Nigeria, menawarkan pandangan untuk menambah baik reka bentuk dan kesan bahan kesihatan awam. Penemuan ini akan memberi manfaat kepada institusi kesihatan, NGO, dan agensi kerajaan yang terlibat dalam promosi kesihatan, membantu mereka dalam mewujudkan mesej kesihatan awam yang lebih berkesan dan mudah difahami. Selain itu, ia menyokong usaha berterusan untuk memerangi penyakit endemik dengan meningkatkan celik kesihatan awam melalui alat komunikasi yang lebih baik.

A MULTIMODAL ANALYSIS OF PUBLIC HEALTH POSTERS ON TEN KILLER DISEASES IN KATSINA STATE, NIGERIA

ABSTRACT

This research presents a multimodal analysis of public health posters (PHP) on ten killer diseases in Katsina State, Nigeria. Public health posters are vital tools for disease prevention campaigns, often used to disseminate information about disease causes, symptoms, and prevention strategies. Despite their widespread use, limited research has evaluated their effectiveness, particularly in Northern Nigeria. This study aims to fill that gap by analyzing how these posters communicate through language and images. The research employs a multimodal approach, using Cheong's (2004) Generic Structure Potential (GSP), van Leeuwen's (2008) Social Actor Network, and Martinec & Salway's (2005) System of Logico-Semantic Relations to evaluate the generic structure, language, and image features, as well as the interaction between language and image. A sample of 100 posters from various hospitals in Katsina State was analyzed. Findings indicate that PHP has distinct structural patterns and relies heavily on the interplay between language and visuals to convey messages. While images support the information conveyed by the text, the posters often depend on linguistic explanations to achieve clarity. However, the reliance on complex multimodal constructs could make these posters less accessible to their target audience, particularly in rural settings where interpretive skills may be limited. This research contributes to the understanding of multimodal health communication in Nigeria, offering insights into improving the design and impact of public health materials. The findings will benefit health institutions, NGOs, and government agencies involved in health promotion, aiding them in creating more

effective, easily understandable public health messages. Moreover, it supports ongoing efforts to combat endemic diseases by improving public health literacy through better communication tools.

CHAPTER 1

INTRODUCTION

Grounded in the framework of multimodality, this current study analyses Public Health Posters (PHP, henceforth) from Katsina State, Nigeria. This section opens the research work by presenting the contents of this first chapter as follows: Background to the study, statement of the problem, research objectives, research questions, significance and scope of the research, definitions of key terms, overview of chapters and conclusion.

1.1 Background to the Study

Over the past two decades, the conventional emphasis on language as the exclusive medium of meaning in communicative events has been questioned (Hull & Nelson, 2005). Goodwin (2001), van Leeuwen, and Kress (2006), among others, championed this paradigmatic shift, introducing what they termed *multimodality*. The concept of multimodality first appeared in the middle and late 1990s when two academic giants were said to have used the term in their separate and distinct research areas. Godwin, a US-based researcher in ethnomethodology and conversation analysis, used the term multimodality in an article submitted for publication to the *Journal of Pragmatics* in 1998.

Likewise, Kress and van Leeuwen, prominent UK-based social semiotic researchers, employed this term in their seminal work *Multimodal Discourse: The Modes and Media of Contemporary Communication* (2001). Since then, multimodality has continued to flourish, attracting researchers from different academic fields: semiotics, linguistics, media studies, new literacy studies, education,

sociology, and psychology, especially with the publication of the first edition of the *Handbook of Multimodal Analysis* (Jewitt, 2009), the launch of Routledge Series of Multimodal Studies (2011) and that of a journal titled, “Multimodal Communication” (2012), (Jewitt et al., 2016). The central argument posited by the forerunners of multimodality is that all communication is multimodal (Jewitt et al., 2001; Kress & Leeuwen, 2020; Ventola et al., 2004a). This means that text, whether spoken or written, exhibits the features of more than one semiotic resource. In other words, no mode of communication can be used in isolation; written communication always goes with frames, spaces, typeface, and colour, while spoken is accompanied by gestures, facial expressions, body, and eye movement (Kress & van Leeuwen, 2001).

Nigeria is the most populous country on the African continent. Currently, it has a population of 211,400,708 people (about 47% of West Africa’s population). Likewise, it has one of the largest youth populations in the world (United Nations, 2019) and abundant natural resources. It is Africa’s biggest oil exporter and has the largest natural gas reserves on the continent (The World Bank, 2021). Politically, multi-party democracy has been practised in the country since 1999, following decades of military rule. Some of the major challenges in Nigeria include Corruption, ethno-religious tensions, security force abuses, discrimination against women and sexual minorities, and government harassment of political opponents and journalists. In 2015, Nigeria experienced its first democratic transfer of power between political parties when former military ruler Muhammadu Buhari won the presidential election and was re-elected in 2019 (Husted & Blanchard, 2020).

Concerning the healthcare system, there are three categories of health facilities in Nigeria: Tertiary, Secondary, and Primary, which are managed by the

three tiers of government: federal, state, and local governments. However, the management is done under the guidance, coordination, and supervision of the Federal Government (Public Health Nigeria, 2020). Private health facilities are also recognized in the structure of Nigerian healthcare. Even though their jurisdiction is under the State Ministry of Health, they provide multiple services (Polsa et al., 2011). Although slowly improving, Nigeria is experiencing numerous challenges in providing healthcare to its citizens: Lack of health facilities, health centres, personnel, and medical equipment, especially in the rural areas, and poor funding. Despite several reforms to increase healthcare provision to the Nigerian people, health access is only 43.3% (Welcome, 2011). Consequently, Nigerians suffer from numerous health issues; however, the top killer ones include malaria, lower respiratory infections, HIV/AIDS, diarrheal diseases, road injuries, protein-energy malnutrition, cancer, meningitis, stroke, and tuberculosis (Faisal Muhammad1 et al., 2017).

Posters have been tremendously used to influence public opinion. The messages of a newspaper article may be forgotten easily. Still, photographs or visuals generally remain indelible in people's memories. Similarly, a leaflet or newspaper can be thrown away without being read; the radio or television can be turned off, and movies or political meetings can be skipped. However, everyone receives messages when walking or driving or when they come across posters on bulletin boards at workplaces, hospitals, clinics, or pharmacies. Posters, like other forms of communication, are used to change perceptions, market a product or service, or change behaviour patterns. Public health posters fall into the third category, intending to raise public awareness and result in better health practices. (William, 1990). In Nigeria and Katsina State in particular, as in many other countries and

cities, such as Hong Kong and New York (P. Zhang, 2018), PHP is used to achieve these purposes. They are considered multimodal texts because they are composed using language and images (Kenneth, 2020). Therefore, this present study is embarked upon to collect the samples of PHP from Katsina State, Nigeria, specifically those on the ten killer diseases, and analyse them through the multimodal framework to find out how the different semiotic resources (image and language components) are co-deployed in the construction of meaning in the posters and how they convey messages. This is important, considering the findings of some previous studies that the existing method of meaning construction of health information materials is ineffectual, because sometimes, many meaning-making potentials are co-deployed, and this makes them ambiguous (Pulos, 2020) with low impact on the target audience, (Kahari, 2013) which can create misunderstanding, (Dynel, 2021), (Hansen et al., 2018). Hence, the current research will significantly uplift the role of PHP as a health campaign material in Nigeria's healthcare system.

1.1.1 Nigeria

Nigeria is officially referred to as the "Federal Republic of Nigeria." It is comprised of 36 states and the Federal Capital, Abuja. It is located in West Africa and shares borders with the Benin Republic in the West, Chad and Cameroon in the East, and the Niger Republic in the North. It is the most populous country on the African continent. It is the second-biggest economy in Africa, the third-largest military power, and the tenth oil producer in the world. It has seven highly populous cities; each contains more than one million people (*West Africa Gateway: Nigeria*, 2012).

In Africa, Nigeria has the most extreme language diversity. The country has about 521 native languages (Taiwo, 2012), among which three, Hausa, Yoruba, and Igbo, have been constitutionally recognized as the major regional languages as they are predominantly spoken in the Northern, Eastern, and Western parts of the country respectively. Apart from the indigenous languages, English and Arabic are also spoken. There is also the Nigerian pidgin, which had served as a lingua franca in coastal towns and is now a lingua franca among Nigerians, in addition to its role as a language of advertisement (ibid). English is constitutionally enshrined as the official language of the country. Thus, the Nigerian constitution, government records, administrative instructions or directives, legislative procedures, court proceedings, and minutes of official meetings are documented in English. Therefore, this research work pays attention to PHP in English and pidgin, as well as Nigeria's major indigenous languages.

Based on geographical location, similar ethnic groups, and common political history, Nigeria is divided into six geo-political zones, namely: North Central, which includes: Benue, FCT, Kogi, Kwara, Nasarawa, Niger, and Plateau; North East contains: Adamawa, Bauchi, Borno, Gombe, Taraba, and Yobe; North West comprises: Kaduna, Katsina, Kano, Kebbi, Sokoto, Jigawa, and Zamfara; South East encompasses: Abia, Anambra, Ebonyi, Enugu, and Imo; South-South covers: Akwa-Ibom, Bayelsa, Cross-River, Delta, Edo, and Rivers; South West encloses: Ekiti, Lagos, Osun, Ondo, Ogun, and Oyo.



Figure 1.1 Map showing six geo-political regions, thirty-six states and one FCT

Source: (Bakare, 2015)

Consequently, this current research intends to cover Katsina out of the seven states in the North-West Zone. This is because, despite the significance of PHP in public health education, not even a single research has been carried out on the posters used for the campaign against the ten killer diseases in the state from a multimodal perspective. PHP may hypothetically be the second or third major source of information on public health issues in the State. Similarly, the researcher discovered that the PHP is similar across the North-Western States, possibly because the inhabitants of this part of Nigeria have a similar linguistic and cultural identity. Similarly, the posters are designed and distributed mostly by the Federal Ministry of Health and some donor agencies like WHO, UNICEF, and USAID. As a result, the Hausa, Yoruba and Igbo cultures are depicted on the posters. Concerning the medium of communication, English is the most dominant language used, followed by the languages of these three major tribes depending on the targeted zone. In the

North-Western zone, where Hausa is the dominant language, many posters appear in English and Hausa.

1.1.2 Health Campaign

According to WHO's constitution (1948), 'Health is a state of complete physical, social and mental being, and not merely the absence of disease or infirmity' (Nutbeam & Muscat, 2021, p. 2). WHO views health as a fundamental human right; all people should have access to basic health resources. Within the purview of health campaigns, health has been considered a resource that allows people to lead productive lives individually, socially, and economically. To Viner and Macfarlane (2005), health is an optimum physical, emotional, social, spiritual, and intellectual well-being. As observed by the United States Department of Health, Education, and Welfare (1979, P.19), 'health campaign' or 'health promotion' as it is sometimes referred to, 'is a combination of health education and related organizational, political and economic programmes designed to supports changes in behaviour and the environment that will improve health.' Similarly, Viner and Macfarlane (2005) define health promotion as the science or art of helping people change their lifestyles to achieve optimal health. Lifestyle change can be facilitated through efforts to increase awareness, change behaviour, and create environments that support good health practices.

Thus, the primary goal of health campaigns is to empower individuals to gain greater control over their health and its determinants, thereby improving both personal and public health. According to the World Health Organisation report based on the first international conference on health promotion held in Ottawa in 1986, health promotion literally means enabling people to take control and improve their health

conditions. It is any combination of education, political, regulatory, and organizational support for actions and living conditions that are conducive to the health of individuals, groups, or communities. In these two definitions, health promotion goes beyond something medical, or something you fix to the doctor or availability of technology, medicine or high gross national product; rather, it is something that is rooted in our culture, social behaviour and how we allocate our resources and opportunities which will ultimately lead to improved quality of life, (Nwabuko et al., 2018).

Thus, health promotion goes beyond the efforts of health staff as it transcends the issues of a healthy lifestyle to that of well-being (WHO, 1986). There is no shortage of attempts to define the term 'health promotion', for as far back as 1985, the concept acquired many definitions: 'measures designed to help individual efforts to improve healthy behaviour or activities designed to encourage positive change'. It also means 'health education through the mass media.' It is also deployed as 'an umbrella term to cover health education as well as environmental legal and fiscal measures designed to advance health' (Tannahill, 1985).

Thus, health promotion is a universal, appealing form of modern public discourse, realised in and through a range of semiotic means. At present, one encounters health promotion messages in almost every public space: shopping centres, libraries, restaurants, supermarkets, pharmacies, car parks, bus stops, billboards and other poster sites. These messages occur in multiple material forms and genres: radio, television, newspaper and magazine articles, handbills, leaflets, pamphlets, and posters. Nowadays, they are also found on social media platforms like Facebook, Twitter, and WhatsApp. Indeed, such is the relentless ubiquity of

health promotion texts in everyday life, and individuals are regularly and unavoidably exposed to health education messages that warn the public about specific health risks.

Therefore, health promotion discourse can broadly be defined as a form of communication which seeks ‘to inform and persuade intended audiences to change habits or adopt new routines’ (Finan, 2002, p. 16). Accordingly, health promotion campaigns are pedagogical, with campaigners assuming a position of knowledge and authority over others, targeting populations perceived to need instruction and information (Lupton, 1995). Available evidence shows that health promotion is an active tool for galvanising individual and collective health actions aimed at preventing diseases, improving the health and well-being of the populace, and ensuring a healthier society for all.

Health campaign messages are effectively circulated worldwide courtesy of the availability of several means of health communication. They deliver essential health interventions to billions of people worldwide each year. Cost-effective and proven to achieve coverage goals. Campaigns have become a strength of global health initiatives to reduce population incidence of certain diseases (Haenssger et al., 2021). Health campaign messages constitute a medium through which public awareness of critical health issues is created, thereby bringing about the desired behavioural and social change in the targeted individuals and communities.

Health campaign messages play significant roles in disseminating life-saving messages informing, influencing, and motivating individual, institutional, and public audiences about important health issues. The threesome: communication, social marketing, and public relations are interrelated and essential for a successful public

health campaign (Nwabuko et al., 2018). In addition, health promotion is an integral component of health communication, health protection, disease prevention and treatment. It is a core competency in public health and health promotion practice. It is pivotal in achieving public health objectives (Okeya & Akinwande, 2020).

Health promoters have drawn upon a repertoire of persuasive strategies to encourage the public to adopt certain behaviours and to raise their awareness of risk, the most common approaches being fear appeals and the unvarnished presentation of facts (Monahan, 1995). Despite the documented benefits of using more positive appeals to promote health, employing, for instance, supportive messages that underscore hope, reward and positive outcomes is arguably the most commonly used strategy in recent times. This is a scary tactic designed to elicit fear and anxiety in people against the diseases. As it were, the appeal is that they are deemed effective means of securing attention and provoking attitude and behavioural change.

In the Nigerian context, the advancement of health promotion as a public health strategy has maintained a slow pace basically due to a dearth of health promotion workforce to reach the country's teeming population (Ekenedo & Ezedum, 2013). Nigeria joined health promotion by signing into law and launching the National Health Promotion Policy (NHPP) in 2006. The goal of the policy was to reinforce the Health Promotion ability of the National Health System in improving Nigerians' health status and achieving the health-related Millennium Development Goals (MDGs (Federal Ministry of Health, 2007).

A Strategic Framework and Implementation Plan for the policy were subsequently developed. One of the main thrusts of the National health promotion policy was widening the narrow focus of health education in Nigeria to consider the

current understanding of health promotion (FMOH, 2006). The policy provided that health education was to be strengthened to act as a focal point for health promotion in Nigeria by playing a key role in coordinating, supporting, training and disseminating guidelines of good practice and networking in health promotion. This will involve re-designating health educators to health promotion specialists and reorienting them to the shift of emphasis from health education to health promotion.

The policy's strategic framework and implementation guidelines, however, highlighted several weaknesses that could limit the capacity of the Nigerian health system to carry out Health Promotion effectively. They include little understanding of concepts of health promotion; minimal, ad hoc and inconsistent implementation of Health Education/Health Promotion at the three tiers of government; poor communication design process as most health educators are unqualified and lack key communication skills; few health programmes are directed at building capacity at the community level; lack of frameworks or guidelines that ensure systematic planning and management of health education interventions; lack of clear mechanisms for monitoring and evaluating health communication activities; failure to mobilize the health promotion potential from other ministries; and lack of coordination of the different organizations carrying out health promotion (Federal Ministry of Health, 2007).

Nigeria organised its second National Conference on Health Promotion in June 2010 in Abuja. The conference, however, did not address the issue of capacity building and competency development as recommended by the Nairobi Conference. The 7th Global Conference had identified for action strengthening leadership, adequate financing and growing the practitioner skill base, including setting accreditation competencies and standards for health promotion (WHO, 2009). The

International Union of Health Promotion and Education (IUHPE), in the report ‘Shaping the Future of Health Promotion: Priorities for Action’ noted that workforce capacity and capability for health promotion is well developed in only a few countries, and under-resourced or entirely lacking in many, (IUHPE and Canadian Consortium for Health Promotion Research, 2007). In addition, it identified that urgent and sustained action is required to strengthen the capacity of academic health promotion.

World Health Organisation (WHO) assisted Nigeria in training 260 health educators from the Ministry of Health after the policy's launch (WHO, 2007). The aim was to re-orient them in health promotion practice as recommended by the NHPP. They were also expected to build the capacity of other staff in the Ministry whose duties are health promotion oriented. Nevertheless, this process was not able to produce the needed workforce significantly, considering the large population of Nigerians that will be reached with health promotion in various settings. Hence, there is a need for Nigeria to consider encouraging the development of health promotion programs in higher institutions as this would facilitate the training of a large number of health promotion professionals within a short period (Ekenedo & Ezedum, 2013).

1.1.3 Public Health Campaign Materials

Public health campaign materials are also called ‘outdoor advert,’ ‘outdoor campaign tools,’ ‘campaign images,’ and ‘medical informative genre. According to Ogunnike (2017), Unuobonah and Oyeboode (2013), Brookes and Kevin (2014), and Belles-Fortuno (2018), public health campaign materials refer to medical posters, banners, billboards, handbills, P-caps, T-shirts, and flags pasted, or hung within and outside hospitals for the campaign and enlightenment against diseases in society.

These materials use different semiotic modes, such as color, image, text, and layout, to instruct, advise, persuade, and inform the audience concerning the causes, effects, transmission, and contraction of given diseases. Hence, they constitute an excellent example of what Kress and Leeuwen (2020) O'Halloran & Smith (2012) refer to as "multimodal texts": texts produced using different semiotic modes.

Ogunnike (2017) viewed these kinds of informational materials, specifically medical posters, as "multimodal institutional non-verbal communication." According to her, medical posters have two major participants: The medical personnel and the general public. The personnel are the encoders, while the general public is the decoders. Similarly, Brookes and Harvey (2014, p. 6) refer to Public Health Campaign Materials as "Campaign Images." They further described them as "the most prominent and richly multi-semiotic mode of communication: billboard, poster, and leaflet."

Equally, Belles-Fortuno (2018, p. 1) describes them as a "Medical Informative Genre" (MIG). Concerning their roles in medical institutions, he explains that they complement the roles of health practitioners. Public health campaign materials are not merely informative documents; they are also meant to educate and persuade patients to alter their behavioural healthcare practices and better health problems (Worden & Flyan, 2001 in Belles-Fortuno, 2018:2). Regarding the design of Public Health Campaign Materials, Belles-Fortuno (ibid:2) insists that the design plays a significant role in boosting people's understanding of information. In their words:

Consequently, MIG's effective information design and layout matters, and multimodal attributes such as heading hierarchy, typography,

visible structure, colour, visual identities, etc assist readers in understanding and getting the key information.

The quotation above justifies the assertion that Public Health Campaign Materials constitute an excellent example of a multimodal text requiring multimodal attention.

In addition, Unuabonah and Oyebode (2013, p. 812) view HIV/AIDS posters as "Outdoor Campaign Tools." This kind of advertisement is found in public spaces with an unlimited audience and greatly captures the audience's attention. Outdoor advertising is a rich research area that requires special attention (Molina, 2006) and (Ajayi, 2015) in (Unuabonah & Oyebode, 2013, p. 813). Thus, in this regard, the current research sets to add to the existing literature on Public Health Campaign Materials.

In the same vein, Ogunnike et al. (2016) maintain that medical posters are non-verbal visual communication that "use descriptive language to describe diseases, their conditions, contaminations and effects on human lives." They explain that these posters depict health-related issues such as causes, effects, symptoms, and transmission of diseases, as well as drug administration and cleanliness.

To this end, this proposed research considers Public Health Campaign Materials as any poster, billboard, banner, handbill, P-cap, T-shirt, leaflet, or pamphlet multimodally designed to inform, educate, persuade, and warn the target audience. However, this current study is restricted to PHP for the following reasons: First, they are the most common public health campaign materials found in the hospitals of Katsina State. Second, compared to billboards, banners, handbills, caps,

T-shirts, leaflets, and pamphlets, posters are the most frequently used tools for Public Health Education (P. Zhang, 2018).

PHP is mostly produced by Federal Ministries of Health, non-governmental organizations, and donor agencies like WHO, UNICEF, and USAID as part of their collaborative efforts to fight against diseases in Nigeria, Africa, and the world. This reveals the high esteem health promoters hold for PHP in their campaigns against diseases. It is even obvious that hundreds of PHP are found in the various hospitals in Katsina State; they may be the second category of objects that one notices as one enters a hospital apart from the building structures.

1.1.3(a) Public Health Posters

Health posters communicate disease information, identify risk factors, and promote behavioural change. The healthcare providers shape and define normal and healthy behaviours and conditions in the language used. Health posters are a common component of the health care system. They serve as a means of promoting ideas, dispelling notions and beliefs, and offering advice on health issues by healthcare providers. It is believed that the health posters do more than create awareness. They implicitly encode hidden elements that affect the public. Thus, health posters are not a mere collection of words; they are systematically organized expressions that consider social, cultural, and national representations, particularly regarding health issues. Accordingly, the impact of health posters is strong upon the readers due to certain linguistic and visual features that make them memorable and effective. These meaning-making items and cues go beyond their denotative meanings. They have pragmatic as well as metaphoric values inherent in them (Joy & Ezirim, 2023).

Posters provide an effective mode of delivering messages and are the commonest and fastest means of information dissemination (Chopra & Kakar, 2014). They are also the easiest and the most cost-effective way to deliver messages. A simple, small media poster can become a multimedia trend if it strikes the right cord with a viewer, who then might share the poster as a photograph and forward it to their peers, and the chain would go on. A poster is supposed to catch the attention, inform, convince, and provoke if the viewer feels addressed; a poster can influence their decisions through language and images (Kakar et al., 2020).

An optimally designed poster appeals to the viewer's curiosity and intellect. A good quality poster must attract attention, be memorable, and have an interesting design with a structured message or statement. Posters are known to stimulate the psychomotor skill of learning in a viewer effectively. They act as a medium of communication that elicits attention and focuses on the centre of interest. They are effective if the images and slogans can be identified easily. The message's appeal allows the public to accept it on a widespread spectrum of emotional, social, and intellectual levels. The poster should be in a language that is understood by the target group (Samanez, 1987).

Consequently, posters in public spaces such as pillars, parking lots, restrooms, hospital waiting areas, and bus stations are subject to several external influences such as the type of environment, lighting conditions, weather conditions, competition with other nearby visual media, and partial concealment by persons or objects. The sum of these influences, and not always the optimal framework conditions, greatly impacts the visibility and readability of posters. All these factors,

clubbed together, impact the efficacy of the poster. The inclusion of too much information can be a shortcoming in any poster. Therefore, for a poster to be good, the message should be simple and short for comprehensibility and remembrance (Rege, 1963).

Posters were first used by public health educators in educational campaigns in the early nineteenth century when health education specialists adopted modern approaches of visual persuasion. Instead of dull pamphlets, modern health messages should mark attractive layouts, colours, and typefaces for utmost impact (Colgrove, 2004). This clique of scholars recommends that public health posters be carefully planned, dramatic, entertaining, and captivating. Posters are designed to catch the viewers' attention and communicate messages quickly, usually with limited text and strong graphics. As relatively inexpensive forms of popular media, posters in the twentieth century were a favorite way to advocate a cause. They provide opportunities for community concerns and can be used to call a broad public audience (Boyle, 2003). Due to the many qualities of posters, public health campaigners are encouraged to use them as a powerful medium for visually transmitting knowledge about the disease and promoting changes in behaviour. It is against this background that the poster designers developed strong visuals and metaphoric vocabulary to help in shaping and defining "normal" and "healthy" behaviours and conditions, which has provided the basis for a variety of campaigns against infectious diseases and environmental health hazards (Boyle, Ibid). Therefore, it is believed that understanding the pragmatic value of the linguistic items inherent in the posters would go a long way in ensuring that the intended goal is achieved.

Posters are employed to transfer health messages. They are made to act like advertisements for goods and services. Health posters send signals to attract their target addressees, persuade them to embrace the messages and swing into action. In terms of scalability, there is a close relationship between 'health' and a company's product, as described by Bundesen, the president of the American Public Health Association, cited in Colgrove (2004, 507) "health is a saleable commodity, a desire for good health must be aroused, stimulated by knowledge of its value and means of attainment. Then the health salesman must come in".

Therefore, by combining images and text, public health posters include the techniques of advertising to sell 'health' as a precious commodity. Similarly, Colgrove (2004, p.506) adds that "health education was linked to the notions of commerce and sales. The rise of consumerism fed the emergence of health education, as health professionals self-consciously borrowed the new techniques of advertising that were remaking the American landscape". Drawing on the success of posters as advertising tools, public health educators began to use them in educational campaigns during the years of the First World War. According to (Brandt, 2020), the campaign against venereal diseases, one of the highest-profile public health efforts during and after World War I, featured the latest persuasive techniques, such as posters and films. For centuries, smallpox, plague, typhus, and cholera epidemics have encouraged people to respond to measures designed to inform and educate citizens about health hazards.

1.1.4 Common Diseases in Nigeria

The concept of "disease," like many other academic terms, is so elusive. This resulted in so many attempts to define it. Literally, it is seen as the opposite of ease;

‘dis-ease’ is when something is wrong with a bodily function (Stedman, 1995). However, the general statement in describing it is ‘the sum of abnormal phenomena displayed by a group of living organisms in association with specified common characteristics or set of characteristics by which they differ from the norm for their species in such a way as to place them at a biological disadvantage, (E. J. M. Campbell et al., 1979, p. 1).

It is also referred to as "any deviation from or interruption of the normal structure or function of any part, organ, or system (or combination thereof) of the body that is manifested by a characteristic set of symptoms and signs . . .", (Dorland, 2020). More technically, the disease is seen as a pathological condition of the body that presents a group of clinical signs and symptoms and laboratory findings peculiar to it, and that sets the condition apart as an abnormal entity differing from other normal or pathological body states. The concept of disease may include the condition of illness or suffering not necessarily arising from pathological changes in the body. There is a major distinction between disease and illness in that the former is usually tangible and may even be measured. In contrast, illness is highly individual and personal, as with pain, suffering, and distress." For instance, hypertension is a disease but not an illness; hysteria or mental illness are illnesses that have no evidence of disease as measured by pathological changes in the body (Venes, 2017).

Thus, disease is unavoidable in every society as people get infected by various sicknesses. Likewise, we often hear about disease outbreaks in various communities and societies. Some of these diseases are infectious and are contracted in our daily activities, like malaria, typhoid, HIV/AIDS, hepatitis B, A, etc. Some are due to deficiencies like goitre, xerophthalmia, cretinism, etc. Some are hereditary, like sickle cell anemia, diabetes, etc., while some are physiological like asthma,

glaucoma, etc. Also, some are communicable or non-communicable; some are chronic, and others are not. Whatever type it is, disease tempers the well-being of individuals in society, and to restore the infected bodies to normal, they must be treated (NHR, 2010 in Saulawa, 2018).

In an article published by Statista Research Department, 05-03-2021, the major causes of death in Nigeria, as of 2019, are neo-natal disorders 12.25%, followed by Malaria, 12%, Diarrheal disease, 11.36%, Lower Respirator infection, 10.85%, HIV/AIDs, 5.18%, Ischemic heart disease 4.37%, Stroke 3.98%, Congenital birth defects, 3.26%, Tuberculosis, 2.84%, Meningitis, 2.82%. These statistics are represented in the following chart.

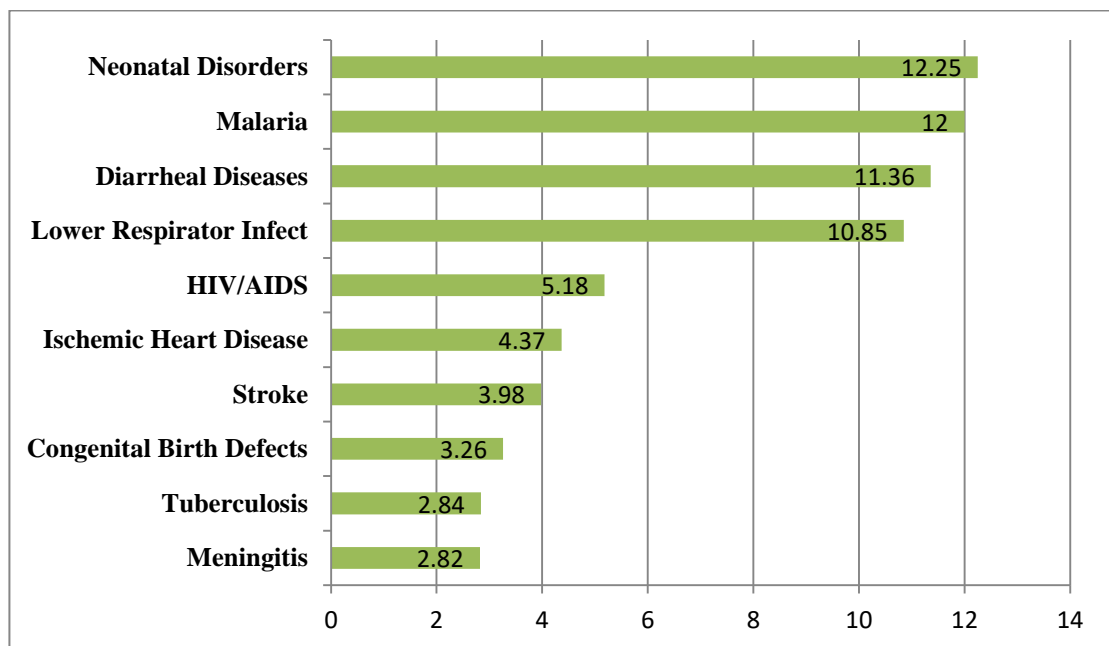


Figure 1.2 Main Causes of Death in Nigeria 2019

Source: (Statista, 2021)

1.2 Statement of the Problem

Public Health Posters (PHP) are omnipresent on the walls of hospitals in Katsina State, conveying critical health information aimed at improving the well-being of its

inhabitants. These posters serve as visual aids designed to communicate health messages quickly and effectively, a globally recognised strategy in public health campaigns (Haenssger et al., 2021). These posters instruct, warn, and advise the public on disease prevention and management, particularly regarding common diseases such as HIV, tuberculosis, malaria, and neonatal disorders. This aligns with the purpose of public health posters, which have been used to promote awareness and preventive actions for diseases in many countries (Kakar et al., 2020). They also provide guidance on health practices like antenatal visits, vaccinations, and medical check-ups, which are essential elements of primary health care. Public health messaging has been critical in promoting routine immunizations and maternal care, particularly in regions with high infant and maternal mortality rates (WHO, 2021). Despite their significant role in health education, public health posters (PHPs) have garnered limited scholarly attention, particularly from a multimodal analytical perspective, an area increasingly recognized as essential in understanding how health messages are conveyed through a combination of language and visual elements (O'Halloran, 2011; Jewitt et al., 2016). In Nigeria, studies on public health campaigns have focused predominantly on language analysis, with limited consideration of the interplay between linguistic and visual resources (Ogunnike, 2017; Unuabonah & Oyebode, 2013).

The health burden in Katsina State is significant, with diseases like malaria, lower respiratory infections, and HIV/AIDS remaining major causes of mortality. Katsina, one of the states with the highest prevalence of these diseases, urgently needs effective health communication strategies. For example, the figure below represents Katsina State among the states with a high risk of malaria prevalence in under-five children.

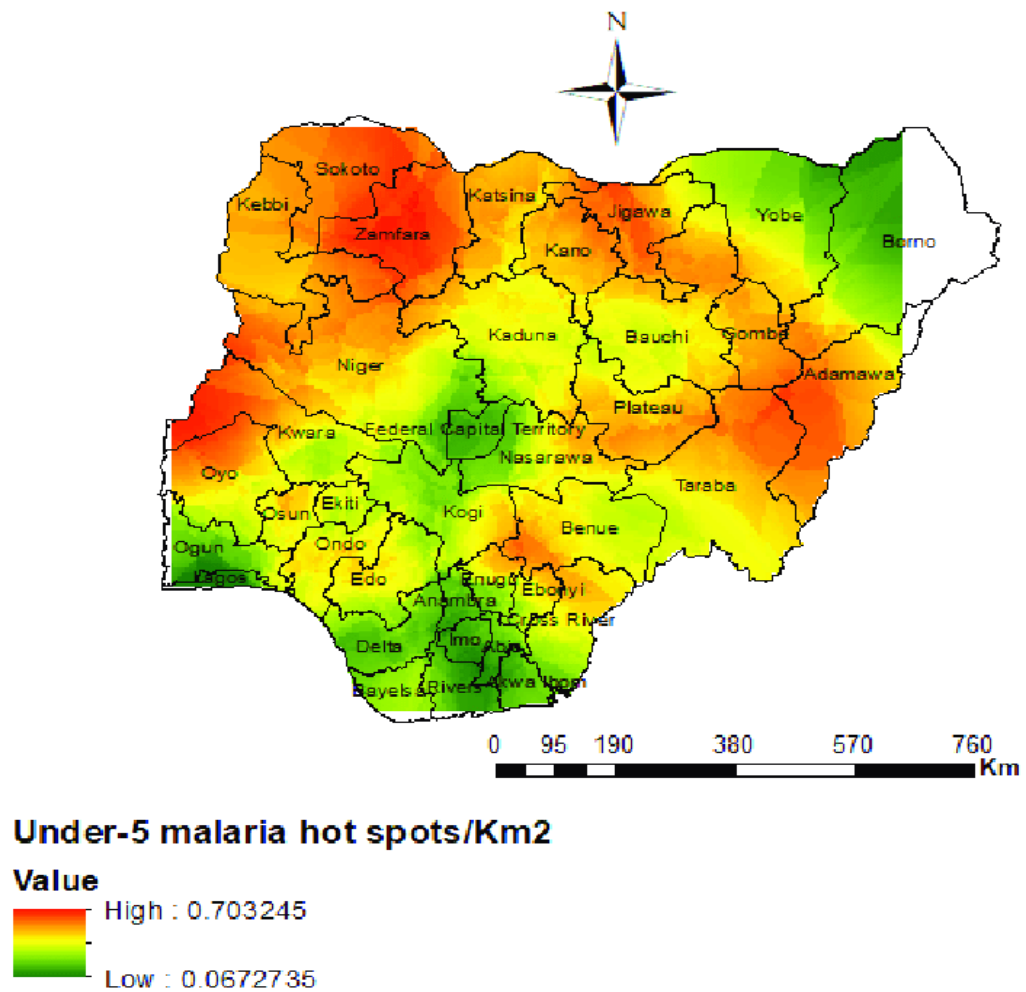


Figure 1.3 Predicted risk map of malaria prevalence of under-5 children for the 37 states in Nigeria

Source: (Ugwu & Zewotir, 2020).

However, the existing posters fail to effectively communicate with their intended audience due to design flaws that do not fully engage with the local socio-cultural and linguistic context. Previous studies on PHP in Nigeria, such as those by Unuabonah & Oyebode (2013) and Ogunnike (2017), have focused on posters from the Southern region or applied monomodal frameworks, limiting their analysis to language or visual elements in isolation. Furthermore, studies like Ogunnike & Ahmed (2016) excluded Katsina State from their scope despite its high disease burden. These gaps reveal a lack of comprehensive research on PHP in the North-

West region, where public health challenges are acute and there is an urgent need for effective health communication. The present study addresses these gaps by conducting a multimodal analysis of PHP from Katsina State, focusing on posters related to ten killer diseases prevalent in the region. Through Cheong's (2004) Generic Structure Potential, van Leeuwen's (2008) Social Actor Network, and Martinec & Salway's (2005) Logico-Semantic Relations, this research seeks to investigate how language and visual resources are co-deployed in these posters to construct meaning and convey health messages effectively. By examining both new and existing posters, this study contributes to improving the design of PHP, ensuring they resonate more effectively with their intended audience.

This study is essential because it explores how the current PHP design may inadvertently hinder transmitting crucial health information. Without such an investigation, health campaigns in Katsina State may continue to be less effective, undermining efforts to combat endemic diseases. By filling this knowledge gap, the research will offer actionable insights for improving public health communication strategies, benefiting not only the people of Katsina but also informing broader health promotion efforts across Nigeria.

1.3 Research Objectives

The main aim of this research work is to conduct a multimodal analysis of PHP from Katsina State, Nigeria, to achieve the following objectives:

- i. To identify the generic structure potential of the PHP on the ten killer diseases from Katsina State, Nigeria.

- ii. To examine the language features of the PHP on the ten killer diseases from Katsina State, Nigeria.
- iii. To examine the image features of the PHP on the ten killer diseases from Katsina State, Nigeria.
- iv. To explain text-image relations that manifest in the PHP on the ten killer diseases from Katsina State, Nigeria.

1.4 Research Questions

This study seeks to address the following research questions:

- i. What is the generic structure potential of the PHP on the ten killer diseases from Katsina State, Nigeria?
- ii. How are language features employed in the PHP on the ten killer diseases from Katsina State, Nigeria?
- iii. How are image features employed in the PHP on the ten killer diseases from Katsina State, Nigeria?
- iv. How are image-text relations created in the PHP on the ten killer diseases from Katsina State, Nigeria?

1.5 Significance of the Study

As highlighted in the statement of the problem, no multimodal research has been conducted on Public Health Posters (PHP) from Katsina State, Nigeria, despite their widespread use in health campaigns across the region. While previous studies such as Unuabonah & Oyeboode (2013) and Victoria Ogunnike (2017) have explored PHP in the Western part of the country, the socio-cultural and linguistic landscape of Katsina State differs significantly from these regions. These differences have profound