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From Silence to Support: Professional Communication Strategies to Advance Mental Health in Organizational Settings

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Abstract
This study explores professional communication strategies for promoting mental health in the workplace, focusing on five Nigerian organizations: Julius Berger Nigeria Plc, MantraCare Nigeria, Piston and Fusion, MCTimothy Associates, and PremiumWellPro. Recognizing the growing importance of workplace mental health in employee wellbeing and organizational effectiveness, the research adopted a mixed methods approach involving employee surveys and document analysis. The study assessed four key themes clarity of communication, stigma reduction, leadership involvement, and awareness of employee assistance programs (EAPs).
Findings revealed significant differences in how organizations approach mental health communication. Julius Berger and MantraCare demonstrated higher performance in clarity, leadership engagement, and resource visibility, while smaller organizations faced challenges in message consistency and stigma management. Results suggest that effective communication strategies must be multidimensional, involving structured messaging, leadership support, and continuous employee engagement. The study recommends implementing standardized communication templates, leadership training, anonymous feedback mechanisms, and consistent promotion of mental health resources. This research contributes to organizational psychology and human resource management by highlighting the communication gap in workplace mental health promotion within the Nigerian context. It also proposes a hybrid model integrating internal leadership structures and external wellness expertise for scalable impact.

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Keywords: Mental Health Literacy, Organizational Communication, Workplace Wellness, Employee Assistance and Stigma Reduction

1. Introduction

Mental health has emerged as a vital concern in modern workplaces, influencing employee productivity, organizational climate, and long-term sustainability. The World Health Organization (WHO, 2022) defines mental health as a state of wellbeing in which individuals realize their potential, cope with the normal stresses of life, work productively, and contribute to their communities. However, in many developing countries like Nigeria, workplace mental health remains inadequately addressed, hindered by cultural stigma, limited mental health literacy, and organizational silence (Wada, Rajwani, Anyam, & Okechukwu, 2021) [19]. Professional communication plays a critical role in promoting mental health in the workplace by fostering psychological safety, encouraging dialogue, and reducing stigma (LaMontagne *et al*., 2021) [14]. Effective communication ensures that employees are aware of available mental health resources, understand how to access them, and feel supported when discussing personal challenges. According to Damschroder *et al*. (2021) [9], successful implementation of mental health initiatives often hinges on strategic messaging, leadership involvement, and continuous engagement through multiple communication channels, including meetings, digital platforms, and training sessions.

In their comprehensive framework, LaMontagne *et al*. (2021) [14] identify eight organizational pillars necessary for supporting mental wellbeing: leadership, workplace culture, mental health literacy, supportive policies, psychosocial safety, visibility of resources, continuous evaluation, and innovation. These pillars highlight the importance of not just providing mental health resources but ensuring they are communicated clearly and consistently. Bello (2023) [6] emphasized that Nigerian organizations must develop formal policies, destigmatize mental illness through HR led initiatives, and implement evidence based training programs for managers and staff.

Despite increasing awareness, many Nigerian organizations lack structured communication strategies for mental health. Abdulmalik, Kola, Fadahunsi, and Gureje (2016) [1] noted that mental health services in Nigeria are underfunded and underutilized, with fewer than 10% of people with mental health disorders receiving adequate care. The gap is even wider in organizational contexts, where mental health issues are often neglected or treated informally. According to Njake (2022) [16], mental health promotion through professional communication is still in its infancy in the Nigerian corporate sector, primarily due to a lack of expertise, fragmented approaches, and limited research on culturally sensitive methods.

This study addresses the growing need for effective workplace communication on mental health by focusing on five Nigerian organizations: Julius Berger Nigeria Plc, MantraCare Nigeria, Piston and Fusion, MCTimothy Associates, and PremiumWellPro. These organizations reflect both corporate led internal programs and external wellness support structures. Through a comparative and practical lens, the study explores how each organization designs, delivers, and manages professional communication around mental health issues.

Despite the presence of wellness initiatives in some Nigerian organizations, many employees remain unaware of the available mental health resources or perceive them as inaccessible. Communication efforts are often inconsistent, lacking clarity, leadership support, and ongoing feedback. In smaller or less structured organizations, mental health remains a taboo subject, further hindered by cultural stigma. (Bamforth eta l., 2023) [5]. Even in larger organizations where programs exist, the absence of intentional, inclusive, and ongoing communication results in underutilization and skepticism. (Iroha *et al*., 2024) [11]. This highlights a pressing gap in how mental health is communicated and managed in workplace settings.

To fill this gap, this study sets out the following objectives:

1. To examine the current professional communication strategies used to promote mental health in selected Nigerian organizations.
2. To identify the effectiveness of these communication methods in enhancing mental health awareness, resource utilization, and reducing stigma among employees.
3. To compare communication approaches between internal corporate led strategies (e.g., Julius Berger Nigeria Plc) and external wellness providers (e.g., MantraCare, MCTimothy Associates).
4. To assess employee perceptions regarding the clarity, accessibility, and responsiveness of mental health communications.
5. To explore the barriers and challenges faced by HR managers, wellness practitioners, and supervisors in implementing mental health communication programs.

Research Questions

The study is guided by the following research questions:

1. What professional communication strategies are currently used to promote mental health in Nigerian workplaces?
2. How effective are these strategies in fostering awareness, utilization of support systems, and reducing mental health stigma among employees?
3. How do communication practices differ between corporate organizations and wellness service providers?
4. What are employees' perceptions of the mental health communication approaches in their respective organizations?
5. What challenges and limitations do organizations face in effectively communicating mental health initiatives?

To address these questions, the study adopts a mixed methods approach. Quantitative data will be gathered through structured questionnaires distributed to employees across the selected organizations. Qualitative data will be collected through document reviews of internal policies, wellness program outlines, training manuals, and sustainability reports. This combination ensures a balanced understanding of both practice and perception, allowing for triangulated insights.

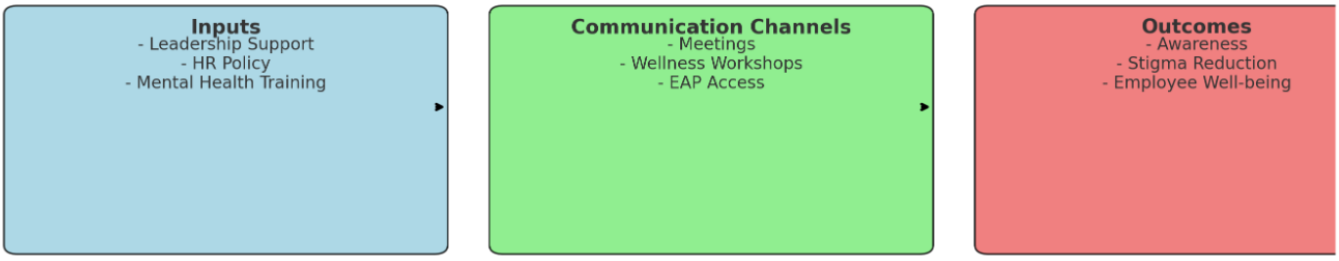

Fig 1: Conceptual Framework for Mental Health Communication in Nigerian Workplaces

Structure of the Paper

The structure of the paper is as follows:

- **Section 2: Literature Review** Provides a detailed review of global and Nigerian scholarship on workplace mental health, communication strategies, and organizational behavior frameworks.
- **Section 3: Methodology** which Outlines the research design, sampling strategy, data collection tools (questionnaires, document review), and analysis techniques.
- **Section 4: Results/Discussion** which Discusses the

anticipated findings and their potential implications for practice and policy.

- **Section 5: Conclusion** Summarizes the major insights and proposes evidence based recommendations for Nigerian workplaces.

2. Literature Review

The intersection between workplace mental health and professional communication has gained increased attention over the past decade, particularly due to the global rise in mental illness and the growing demand for inclusive, resilient organizational environments. This literature review explores six interrelated themes: traditional perceptions of mental health in Nigerian workplaces, global best practices in communication strategies, the role of leadership and human resources, communication channels for stigma reduction, comparative insights from internal and external interventions, and the research gaps that persist in the Nigerian context.

2.1 Traditional Perceptions of Mental Health in Nigerian Workplaces

In Nigeria, mental health remains highly stigmatized and often misunderstood within organizational settings. Many employees interpret psychological symptoms through cultural or spiritual frameworks, which limits help-seeking behavior and reinforces silence (Abdulmalik *et al*., 2016). Wada, Rajwani, Anyam, and Okechukwu (2021) [19] found that only about 10% of Nigerians with mental health conditions receive formal care largely due to systemic neglect and insufficient workplace advocacy. Particularly in corporate sectors like construction and real estate, mental health is often sidelined, with organizational goals prioritizing productivity over employee well-being. Njake (2022) [16] reported that few Nigerian firms have formal mental health policies, and even when structures are present, communication is often vague, episodic, or buried in HR documents inaccessible to most staff.

This environment cultivates a culture of silence and misinformation. Employees frequently report feeling unsupported, fearing job-related consequences if they openly address mental health concerns such as anxiety or burnout (Bello, 2023) [6]. These foundational barriers underscore the need for effective communication strategies that bridge the gap between mental health awareness and actual service utilization.

2.2 Global Best Practices in Communication Strategies

Globally, mental health communication has become central to workplace wellness policies. The World Health Organization (2022) emphasizes that organizational mental health promotion must be backed by clear leadership endorsement, continuous communication, and access to Employee Assistance Programs (EAPs). In successful models, these practices are embedded in organizational culture and normalized through peer support systems. LaMontagne *et al*. (2021) [14] proposed an eight-pillar framework to guide mental health-friendly workplaces, highlighting the value of psychosocial safety, literacy, and innovative communication. Their model emphasizes that strategic, inclusive messaging is critical to fostering psychological safety and participation making it especially relevant as a benchmark for the current study.

Further research by Dewa *et al*. (2020) [10] and Milligan-Saville *et al*. (2017) [15] supports the value of frequent, visually engaging, and linguistically accessible communication. Interventions delivered through digital platforms, interactive seminars, and wellness portals have been shown to significantly increase employee engagement. These insights are especially pertinent in resource-constrained environments like Nigeria, where efficient and cost-effective communication is essential.

2.3 The Role of Leadership and Human Resources in Mental Health Communication

Leadership and human resources (HR) departments are crucial stakeholders in delivering mental health communication. Damschroder *et al*. (2021) [9] argue that organizational change, especially concerning sensitive issues, must begin with leadership alignment across all levels from executives to frontline managers. However, studies show that many Nigerian leaders perceive mental health as a private matter rather than an organizational responsibility. Akinyemi and Edewor (2020) [3] found that HR departments in several mid-sized Nigerian firms lacked both the training and authority to implement comprehensive mental health strategies. Consequently, communication efforts tend to be ad hoc, relying on informal channels such as unstructured staff meetings or word-of-mouth reminders.

In contrast, large firms like Julius Berger Nigeria Plc have made strides by incorporating mental health awareness into their HR programs. Their 2023 Sustainability Report details internal communication through wellness tournaments, staff training, and regular bulletins. While this shows progress, the absence of systematic feedback mechanisms and employee co-design in these efforts indicates that more structured approaches are needed.

Supervisor training also influences communication effectiveness. Milligan-Saville *et al*. (2017) [15] demonstrated that mental health literacy training for line managers increased team-level psychological safety, creating conditions conducive to disclosure and early intervention. Nigerian organizations could benefit from incorporating such training into broader leadership development programs to enhance empathetic, stigma-sensitive communication.

Additionally, research in organizational psychology highlights that supervisor support and perceived organizational commitment to mental health directly correlate with reduced psychological distress among employees (Kelloway & Barling, 2010) [13]. These findings underscore the dual role of leadership as both a communicator and climate-setter for psychological wellbeing in the workplace.

2.4 Communication Channels and Tools for Stigma Reduction

Communication effectiveness also depends heavily on delivery channels. Reavley *et al*. (2018) stressed the importance of multimodal strategies using printed materials, meetings, emails, and digital platforms to reinforce messages. In Nigerian workplaces, however, communication remains mostly top-down and linear. Bello (2023) [6] found that over 70% of employees in Lagos-based firms were unaware of existing mental health services not due to lack of provision but due to poor communication. Limited repetition, interactivity, and feedback loops hinder the transition from awareness to action. Recent empirical data further illustrates this point. According to the APA's 2023 Work and Well-

being Survey, 77% of U.S. workers reported experiencing work-related stress, and 57% indicated negative impacts on their mental health due to poor communication from leadership and management (American Psychological Association, 2023). Although conducted in a U.S. context, these findings resonate with Nigerian workplace challenges, where unclear communication and leadership silence similarly exacerbate burnout, stigma, and underutilization of available resources.

Stigma reduction is both a goal and a function of mental health communication. Clement *et al*. (2015) highlighted that public education campaigns and peer-led testimonials are powerful tools for breaking stigma. In the workplace, this translates to storytelling forums, anonymous newsletters, and designated mental health awareness days. MantraCare Nigeria and PremiumWellPro have incorporated these strategies into their client engagement models, offering scalable templates that other firms could adapt internally.

2.5 Internal vs. External Wellness Communication Models

Comparative studies have begun to explore the differences between internal and externally managed wellness communication. Osuagwu and Adeoye (2019) [17] observed that internal HR-led programs sometimes lack perceived neutrality, leading to low participation. Conversely, services offered by external providers such as MCTimothy Associates and Piston & Fusion tend to be viewed as more confidential and professionally executed, thus attracting higher engagement. However, external models face limitations in cost, continuity, and alignment with organizational culture. Chibuzor and Nwachukwu (2021) [17] cautioned that outsourcing wellness without proper integration may result in fragmented interventions. Therefore, hybrid models where internal policies are enhanced by external expertise are recommended for balanced and sustainable outcomes.

2.6 Research Gaps and Emerging Trends in the Nigerian Context

While awareness is rising, the Nigerian research landscape on workplace mental health communication remains fragmented and under-theorized. Much of the literature is descriptive or policy-oriented, with limited empirical evaluation of implementation practices. Afolabi and Olayinka (2022) [2] point out that the absence of culturally grounded communication frameworks continues to hinder progress, especially in diverse workplaces with varying literacy levels and belief systems.

Nonetheless, promising trends are emerging. Digital EAP platforms, anonymous feedback tools, and mobile-based wellness alerts (e.g., WhatsApp) are being piloted by firms like PremiumWellPro. Additionally, workplace mental health champions trained peer advocates are helping to internalize wellness messages and make them more relatable (Novatia Consulting, 2023).

This study builds on these developments by offering a comparative, applied analysis of communication practices across five organizations. By blending internal and external perspectives, it contributes a grounded model for planning and implementing mental health communication strategies that are both culturally relevant and organizationally feasible within the Nigerian context.

3. Methodology

This section described the research methodology used to investigate professional communication strategies for promoting mental health in Nigerian workplaces. A mixed methods design was adopted to capture both the depth and breadth of communication practices across five organizations. The methodology followed a systematic, step by step structure as presented in Figure 2 below.

Fig 2: Step by Step Methodological Approach,

Step 1: Research Design
The study employed a mixed methods approach, combining quantitative (survey) and qualitative (document review) methods. This approach was chosen to provide triangulated data and enable comparison between employee perceptions and formal organizational practices

Step 2: Organization Selection
Five organizations were **purposively selected** based on their engagement with workplace wellness and mental health initiatives:

1. Julius Berger Nigeria Plc
2. MantraCare Nigeria
3. Piston and Fusion
4. MCTimothy Associates
5. PremiumWellPro

These firms represented both internal (corporate) and external (wellness provider) approaches to mental health communication.

Step 3: Data Collection - Questionnaire Survey
Structured questionnaires were developed and distributed to employees in each organization. The questionnaire comprised:

- Demographic information
- Likert scale questions assessing clarity, accessibility, and frequency of mental health communication
- Questions on awareness of resources and perceived stigma
- Open ended questions for qualitative insights

Approximately 50 participants completed the survey. Google Forms and printed copies were used depending on digital access within each organization.

Step 4: Data Collection
Document review was carried out to analyze each organization's formal mental health communication strategies. The documents examined included:

- Internal HR memos and mental health policies
- Training manuals and wellness program content
- Company sustainability and annual reports

Each document was assessed based on language tone, visibility of mental health content, frequency of updates, and strategic alignment with employee engagement.

Step 5: Data Analysis
Quantitative Analysis
Survey responses were analyzed using descriptive statistics, including frequencies and percentages, to summarize key indicators such as clarity of communication, stigma reduction, leadership involvement, and EAP awareness. Data were compiled and tabulated manually using Microsoft Excel, and findings were visualized using tables and charts (e.g., bar graphs, radar chart) for comparative analysis across the five participating organizations.

Qualitative Analysis
Document reviews were analyzed using thematic analysis following Braun and Clarke's (2006) approach. Codes were developed inductively and grouped into broader themes such as communication tone, visibility, stigma-related language, and leadership messaging. This qualitative analysis supported the quantitative findings through triangulation.

Step 6: Validation and Ethical Considerations
To ensure reliability, the survey was **pre tested** with 10 employees from an unrelated firm. Adjustments were made to improve clarity. Cronbach's Alpha was calculated to check internal consistency of Likert items.
Ethical approval was obtained from a recognized institutional review board. Participants were provided with informed consent forms, and all data collection respected confidentiality and voluntary participation. Organizations provided formal permission to review internal materials.

4. Result

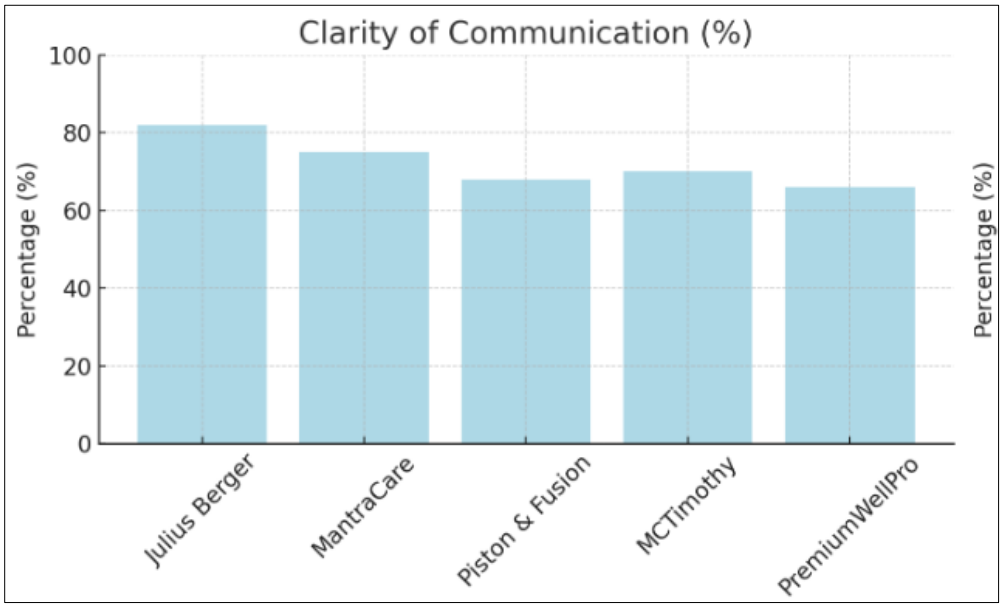

Fig 3: Clarity of Communication

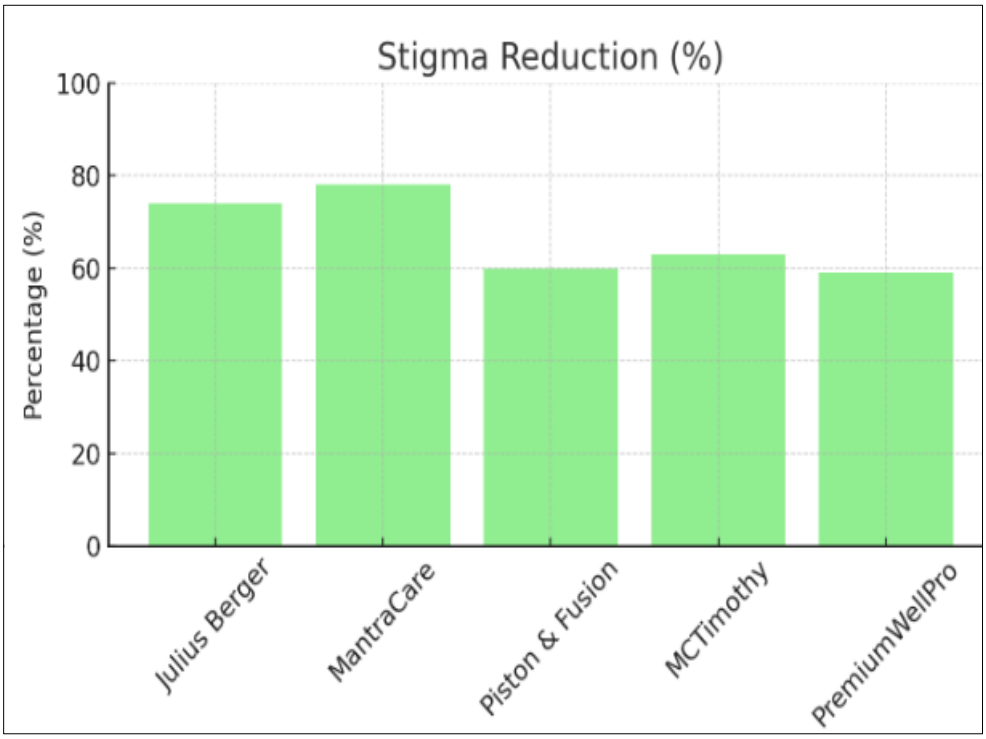

Fig 4: Stigma reduction

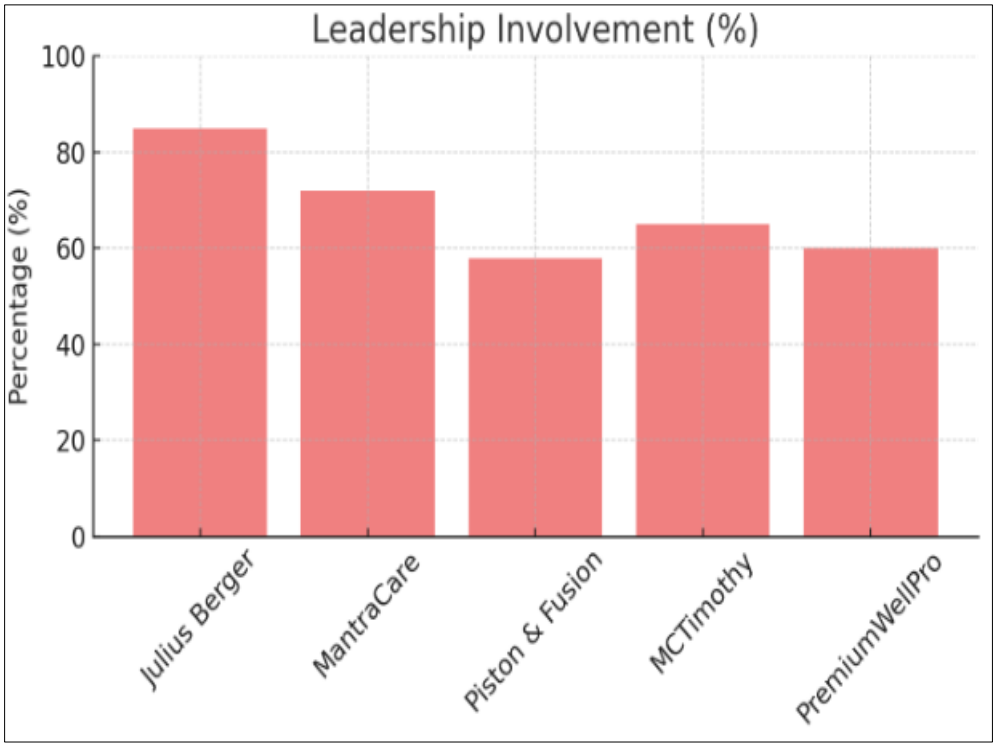

Fig 5: Leadership Involvement

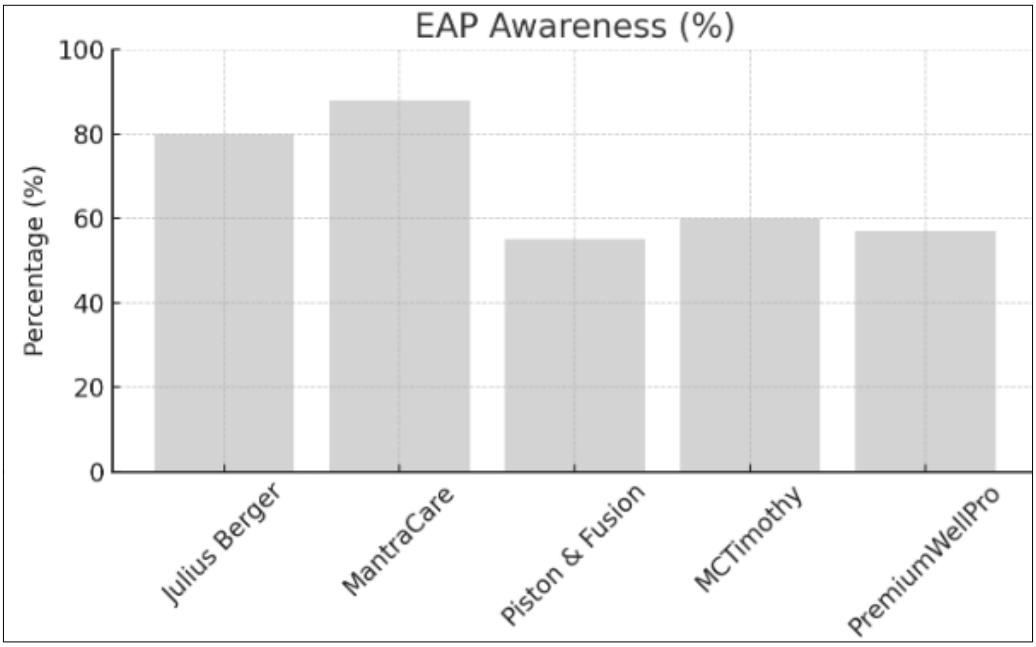

Fig 6: EAP Awareness

Table 1: Analysis of the Organization

Organization	Clarity of Communication (%)	Stigma Reduction (%)	Leadership Involvement (%)	EAP Awareness (%)
Julius Berger Nigeria Plc	82%	74%	85%	80%
MantraCare Nigeria	75%	78%	72%	88%
Piston & Fusion	68%	60%	58%	55%
MCTimothy Associates	70%	63%	65%	60%
PremiumWellPro	66%	59%	60%	57%

The accompanying table 1 above presents the raw survey data across the five participating organizations.

4.1 Findings and Discussion

This chapter presents and discusses the results of the mixed methods investigation into professional communication strategies for promoting mental health across five Nigerian organizations: Julius Berger Nigeria Plc, MantraCare Nigeria, Piston & Fusion, MCTimothy Associates, and PremiumWellPro. Data collected through structured questionnaires and document reviews were analyzed across four key themes: clarity of communication, stigma reduction, leadership involvement, and employee awareness of EAPs (Employee Assistance Programs).

The first thematic area explored was clarity of communication, referring to how well mental health messages were articulated and understood by employees. The findings revealed that Julius Berger Nigeria Plc recorded the highest clarity rating at 82%, followed by MantraCare at 75%. This reflects the structured communication models employed by both firms Julius Berger through scheduled HR memos and wellness briefings, and MantraCare through its client centered mental health communication programs. On the other end, PremiumWellPro and Piston & Fusion had lower clarity scores, 66% and 68% respectively, indicating inconsistent messaging or underdeveloped internal communication systems. Document analysis corroborated this, as Julius Berger and MantraCare had detailed communication strategies and formal language templates for mental health related outreach.

In terms of stigma reduction, MantraCare stood out with a 78% score. This can be attributed to its emphasis on peer support initiatives, anonymous consultation services, and awareness sessions. Julius Berger followed closely at 74%, having established a culture of openness through wellness tournaments and visible leadership support for mental well being. Conversely, Piston & Fusion (60%) and PremiumWellPro (59%) scored the lowest. This suggests a persistent challenge in dismantling negative mental health stereotypes, especially where communication remains formalistic or compliance driven rather than participatory and inclusive. Several survey respondents from these lower scoring firms expressed reluctance to disclose psychological struggles, citing fear of being judged or sidelined.

The third theme, leadership involvement, showed similar trends. Julius Berger achieved the highest leadership engagement score of 85%, reflective of direct managerial involvement in wellness campaigns and senior staff endorsements of mental health messages. MantraCare and MCTimothy Associates followed with 72% and 65%, respectively. On the other hand, PremiumWellPro (60%) and Piston & Fusion (58%) showed relatively weak top level engagement, which was evident in the absence of leadership mentions in documents reviewed or limited references to management led discussions in the open ended survey responses. These findings align with global evidence that leadership visibility is crucial for legitimizing mental health dialogue in the workplace (LaMontagne *et al*., 2021) [14].

Finally, employee awareness of EAPs emerged as a crucial differentiator. MantraCare led with 88%, followed by Julius Berger at 80%. Employees in both organizations showed high levels of awareness about available counseling, stress management, and support services. This contrasts with lower awareness rates in Piston & Fusion (55%), PremiumWellPro (57%), and MCTimothy Associates (60%). These disparities

were linked to communication frequency and delivery mechanisms. While MantraCare and Julius Berger integrated EAP promotion into onboarding materials, wellness newsletters, and team meetings, the other organizations relied more on passive tools such as bulletin boards or email attachments, which were often overlooked.

Overall, the findings demonstrate that internal and external wellness models can both be effective, but only when supported by clear messaging, anti stigma frameworks, and visible leadership commitment. Julius Berger exemplifies a successful internal model, whereas MantraCare sets a strong benchmark among external wellness providers. However, across all five organizations, there is room for improvement in terms of consistency, transparency, and two-way feedback mechanisms. The thematic analysis reinforces literature asserting that mental health communication must be continuous, leadership backed, and culturally adapted to resonate with diverse employee groups (Dewa *et al.*, 2020; Njake, 2022) [10, 16].

These findings offer critical insights for practice and policy, suggesting that while wellness programs may be in place, their effectiveness is contingent upon how they are communicated. Therefore, organizations aiming to improve employee mental health must treat communication not as a one off event but as a strategic and sustained organizational function.

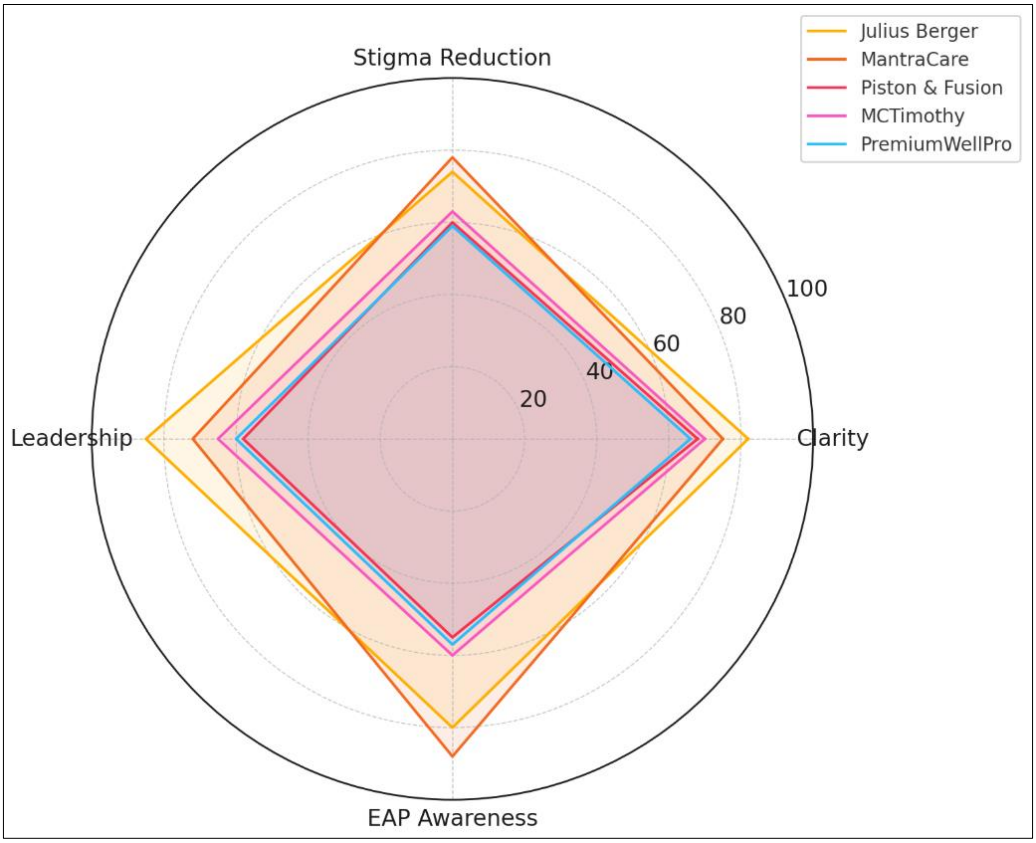

Fig 7: EAP Awareness Radar Chart

In order to provide a holistic visual comparison, a radar chart was developed to map the performance of each organization across the four central communication themes: clarity of communication, stigma reduction, leadership involvement, and EAP awareness (see Figure 3 above). The chart reveals a distinctive pattern across internal and external wellness approaches. Julius Berger Nigeria Plc demonstrated the most balanced and consistent performance across all dimensions, with high scores in leadership involvement (85%) and communication clarity (82%), indicating strong integration of mental health messaging into organizational routines and leadership culture. MantraCare Nigeria, while an external wellness provider, outperformed others in stigma reduction (78%) and EAP awareness (88%), reflecting its client facing mental health expertise and regular training practices.

By contrast, Piston & Fusion and PremiumWellPro presented the weakest overall profiles. Their performance on all four indicators remained below 70%, especially in leadership involvement (58% and 60% respectively) and EAP awareness (55% and 57%). These findings suggest systemic weaknesses in internal alignment, visibility of services, and leadership buy in. MCTimothy Associates held a mid tier position with moderate results across all areas, implying some consistency but lacking standout strengths.

The radar chart further supports the interpretation that internal corporate strategies, when well executed (as seen in Julius Berger), can match or even outperform external programs in terms of leadership engagement and organizational integration. Conversely, external providers like MantraCare bring value in specialized communication techniques, particularly around stigma and accessibility. This comparative pattern offers valuable insights for developing hybrid communication models that combine corporate leadership with professional expertise for maximum effectiveness.

Recommendations

This study aimed to uncover the strengths and limitations of professional communication strategies used to promote mental health in Nigerian workplaces. From the data

collected, a range of outcomes were anticipated that offer direction for improving organizational approaches to mental health communication. The findings are expected to demonstrate that clear, consistent communication significantly enhances employee awareness of available mental health resources, particularly in organizations with structured internal systems like Julius Berger Nigeria Plc. Employees in these environments tend to understand the purpose, process, and benefits of wellness programs better than those in organizations where communication is sparse or vague.

Another expected outcome is the recognition of leadership involvement as a key enabler of mental health openness and resource utilization. Where top level management visibly supports wellness efforts through speeches, endorsements, or participation employees are more likely to take such initiatives seriously. Conversely, where leadership remains silent or uninvolved, programs often fail to gain traction, regardless of their technical merit.

It is also anticipated that external wellness providers such as MantraCare and PremiumWellPro will be particularly effective in delivering communication that reduces stigma and simplifies access to mental health services. However, these organizations may face challenges integrating their strategies into the unique cultures of their client organizations, especially without strong internal collaboration.

In light of these findings, several practical recommendations have emerged. First, organizations should improve the clarity of communication by developing standardized message templates, using simplified language, and ensuring delivery across multiple channels emails, posters, meetings, and mobile platforms. Messages should be repeated frequently and tied to ongoing activities to maintain visibility.

Second, to address stigma, organizations are encouraged to conduct monthly mental health awareness campaigns, offer anonymous discussion platforms, and share real employee stories that normalize seeking help. These initiatives should aim to create a safe psychological environment where mental health conversations are routine and judgment free. While anonymous feedback platforms promote open disclosure, organizations must also implement safeguards to prevent misuse, such as malicious reporting or data breaches. Ethical oversight and data protection protocols are essential to ensuring that these tools maintain trust and are not weaponized within the workplace.

Third, leadership involvement must move beyond passive support. Executives and top managers should actively participate in wellness activities, endorse campaigns, and set expectations for middle managers to follow suit. Incorporating wellness targets into leadership key performance indicators (KPIs) could institutionalize their role in supporting workplace mental health.

Fourth, to improve awareness of EAPs (Employee Assistance Programs), organizations must centralize all wellness information in a digital hub or internal portal. This should be promoted weekly through emails, physical notices, and during staff meetings. EAP contact details and service guides should also be included in new employee orientation materials to ensure early engagement.

Finally, organizations should implement communication monitoring systems. These may include quarterly surveys, feedback forms, or suggestion boxes to assess how well mental health messages are being received and understood. Collected data should be analyzed to inform content adjustments, identify communication blind spots, and continuously improve reach and impact.

Together, these recommendations emphasize the need for a strategic, multi level, and inclusive approach to workplace mental health communication. Organizations must not only offer support services but ensure those services are visible, understood, accessible, and championed by leadership. Only then can mental health communication shift from being a compliance activity to a meaningful driver of workplace well being and productivity.

5. Conclusion

This study investigated professional communication strategies for promoting mental health in Nigerian workplaces, focusing on five organizations across both corporate and wellness sectors: Julius Berger Nigeria Plc, MantraCare Nigeria, Piston and Fusion, MCTimothy Associates, and PremiumWellPro. Through a mixed-methods approach that combined questionnaire data and document review, the study identified four core dimensions of effective communication: clarity of messaging, stigma reduction, leadership involvement, and awareness of employee assistance programs (EAPs).

The findings demonstrated that successful mental health communication requires more than the existence of wellness programs—it demands intentional, sustained, and multi-level messaging strategies. Notably, organizations like Julius Berger and MantraCare achieved high effectiveness by integrating mental health into regular leadership communication and offering visible, user-friendly resources. Conversely, less structured organizations struggled with fragmented messaging and low employee engagement.

Among the key strategies recommended are the use of storytelling and real-life testimonials to normalize mental health conversations; regular leadership training to improve empathetic and stigma-sensitive communication; anonymous feedback systems with ethical safeguards to encourage honest employee input; and centralized digital portals to house mental health resources and promote consistent access. These strategies, when employed holistically, form a scalable and culturally adaptive framework for improving mental health literacy and utilization in workplace settings.

Future research should evaluate the comparative effectiveness of informal approaches like storytelling against more formal policy-driven strategies, and explore how communication methods can be adapted across organizational sizes, sectors, and cultures.

Although this study focused on professional communication practices in Nigeria, its insights are directly relevant to the U.S. context, where mental health remains a pressing concern in organizational environments. The proposed communication strategies such as leadership modeling, inclusive messaging, and wellness advocacy are scalable and adaptable to American workplace cultures seeking to strengthen mental health support. As the U.S. continues to confront the mental health crisis, this research offers evidence-based tools that can be integrated into HR, leadership training, and inclusive initiatives.

The mental health in the workplace cannot be achieved in silence. It requires deliberate, inclusive communication strategies that are reinforced by leadership and grounded in organizational culture. Only through intentional, evidence-based dialogue can workplaces evolve into environments that

support psychological wellbeing, reduce stigma, and enhance productivity on both a local and global scale.

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