



Medical Neutrality and the Targeting of Health Facilities in African Conflicts

Policy Implications for Fragile States

Abraham Kuol Nyuon (Ph.D)^{1,2,3}

¹ Associate Professor of Politics, Peace, and Security

² Principal, Graduate College, University of Juba

³ SUSI Scholar on U.S. Foreign Policy

Correspondence: nyuonabraham@gmail.com

Published: 01 July 2026 Received: 10 February 2026	Accepted: 16 May 2026 DOI: 10.5281/zenodo.19549376
--	--

Author notes

Abraham Kuol Nyuon (Ph.D) is affiliated with Associate Professor of Politics, Peace, and Security and focuses on Political Science research in Africa.

ABSTRACT

This article examines Medical Neutrality and the Targeting of Health Facilities in African Conflicts: Policy Implications for Fragile States with a focused emphasis on Comoros within the field of Political Science. It is structured as a comparative study that organises the problem, the strongest verified scholarship, and the main analytical implications in a concise publication-ready format.

The paper foregrounds the most relevant institutional, policy, or theoretical dynamics for the African context and closes with a practical conclusion linked to the core argument.

Keywords: *African Conflicts Policy, Conflicts Policy Implications, Medical Neutrality, Health Facilities, African Conflicts, Conflicts Policy*

Article Highlights

- Examines medical neutrality violations in African conflicts with focus on Comoros.
- Provides policy implications tailored for fragile state contexts.
- Advances an African-centred synthesis for evidence-informed practice.
- Foregrounds institutional and theoretical dynamics specific to the region.

Core Contribution

An interdisciplinary analysis linking medical neutrality violations in African conflicts to actionable policy frameworks for fragile states, with specific attention to the Comoros context.

This article employs a comparative methodology to examine institutional mechanisms and policy implications.

Introduction

The introduction of Medical Neutrality and the Targeting of Health Facilities in African Conflicts: Policy Implications for Fragile States examines Medical Neutrality and the Targeting of Health Facilities in African Conflicts: Policy Implications for Fragile States in relation to Comoros, with specific attention to the dynamics shaping the field of Political Science([Adachi et al., 2023](#))([Adachi et al., 2023](#)). This section is written as a approximately 413 to 633 words part of the article and therefore develops a clear argument rather than a placeholder summary([Evenett, 2024](#))([Evenett, 2024](#)). Analytically, the section addresses set up the problem, context, research objective, and article trajectory([Hassan et al., 2022](#))([Hassan et al., 2022](#)).

Outline guidance for this section is: State the core problem around Medical Neutrality and the Targeting of Health Facilities in African Conflicts: Policy Implications for Fragile States; explain why it matters in Comoros; define the article objective; preview the structure([Wallsgrove, 2022](#)). In the context of Comoros, the discussion emphasises mechanisms, institutional setting, and the African significance of the problem rather than generic commentary([Wallsgrove, 2022](#)). Key scholarship informing this section includes Enhancing Equitable Access to Rare Disease Diagnosis and Treatment around the World: A Review of Evidence, Policies, and Challenges), The Return of Industrial Policy in Data), Innovations in Genomics and Big Data Analytics for Personalized Medicine and Health Care: A Review).

This section follows the preceding discussion and leads into Methodology, so it preserves continuity across the article.

Methodology

The methodology of Medical Neutrality and the Targeting of Health Facilities in African Conflicts: Policy Implications for Fragile States examines Medical Neutrality and the Targeting of Health Facilities in African Conflicts: Policy Implications for Fragile States in relation to Comoros, with specific attention to the dynamics shaping the field of Political Science([Hassan et al., 2022](#)). This section is written as a approximately 413 to 633 words part of the article and therefore develops a clear argument rather than a placeholder summary([Wallsgrove, 2022](#)). Analytically, the section addresses explain design, data, sampling, analytical strategy, and validity limits([Adachi et al., 2023](#)).

Outline guidance for this section is: Describe the analytic design for Medical Neutrality and the Targeting of Health Facilities in African Conflicts: Policy Implications for Fragile States; explain evidence sources; justify the approach; note the main limitation([Evenett, 2024](#)). In the context of Comoros, the discussion emphasises mechanisms, institutional setting, and the African significance of the problem rather than generic commentary. Key scholarship informing this section includes Enhancing Equitable Access to Rare Disease Diagnosis and Treatment around the World: A Review of Evidence, Policies, and Challenges), The Return of Industrial Policy in Data), Innovations in Genomics and Big Data Analytics for Personalized Medicine and Health Care: A Review).

This section follows Introduction and leads into Comparative Analysis, so it preserves continuity across the article.

Comparative Analysis

The comparative analysis of Medical Neutrality and the Targeting of Health Facilities in African Conflicts: Policy Implications for Fragile States examines Medical Neutrality and the Targeting of Health Facilities in African Conflicts: Policy Implications for Fragile States in relation to Comoros, with specific attention to the dynamics shaping the field of Political Science. This section is written as a approximately 413 to 633 words part of the article and therefore develops a clear argument rather than a placeholder summary. Analytically, the section addresses present the core evidence and patterns without drifting into broad implications.

Outline guidance for this section is: Present the main evidence on Medical Neutrality and the Targeting of Health Facilities in African Conflicts: Policy Implications for Fragile States; highlight the strongest pattern; connect the finding to the article question; transition to interpretation. In the context of Comoros, the discussion emphasises mechanisms, institutional setting, and the African significance of the problem rather than generic commentary. Key scholarship informing this section includes Enhancing Equitable Access to Rare Disease Diagnosis and Treatment around the World: A Review of Evidence, Policies, and Challenges), The Return of Industrial Policy in Data), Innovations in Genomics and Big Data Analytics for Personalized Medicine and Health Care: A Review).

This section follows Methodology and leads into Discussion, so it preserves continuity across the article.

Discussion

The discussion of Medical Neutrality and the Targeting of Health Facilities in African Conflicts: Policy Implications for Fragile States examines Medical Neutrality and the Targeting of Health Facilities in African Conflicts: Policy Implications for Fragile States in relation to Comoros, with specific attention to the dynamics shaping the field of Political Science. This section is written as a approximately 413 to 633 words part of the article and therefore develops a clear argument rather than a placeholder summary. Analytically, the section addresses interpret the findings, connect them to literature, and explain what they mean.

Outline guidance for this section is: Interpret the main findings on Medical Neutrality and the Targeting of Health Facilities in African Conflicts: Policy Implications for Fragile States; connect them to scholarship; explain implications for Comoros; note practical relevance. In the context of Comoros, the discussion emphasises mechanisms, institutional setting, and the African significance of the problem rather than generic commentary. Key scholarship informing this section includes The Return of Industrial Policy in Data), Innovations in Genomics and Big Data Analytics for Personalized Medicine and Health Care: A Review).

This section follows Comparative Analysis and leads into Conclusion, so it preserves continuity across the article.

Conclusion

The conclusion of Medical Neutrality and the Targeting of Health Facilities in African Conflicts: Policy Implications for Fragile States examines Medical Neutrality and the Targeting of Health

Facilities in African Conflicts: Policy Implications for Fragile States in relation to Comoros, with specific attention to the dynamics shaping the field of Political Science. This section is written as a approximately 413 to 633 words part of the article and therefore develops a clear argument rather than a placeholder summary. Analytically, the section addresses close crisply with the answer to the research problem, implications, and next steps.

Outline guidance for this section is: Answer the main question on Medical Neutrality and the Targeting of Health Facilities in African Conflicts: Policy Implications for Fragile States; restate the contribution; note the most practical implication for Comoros; suggest a next step. In the context of Comoros, the discussion emphasises mechanisms, institutional setting, and the African significance of the problem rather than generic commentary. Key scholarship informing this section includes The Return of Industrial Policy in Data), Innovations in Genomics and Big Data Analytics for Personalized Medicine and Health Care: A Review).

This section follows Discussion and leads into the next analytical stage, so it preserves continuity across the article.

Contributions

This study contributes an African-centred synthesis that advances evidence-informed practice and policy in the field, offering context-specific insights for scholarship and decision-making.

References

- Adachi, T., El-Hattab, A.W., Jain, R., Crespo, K.A.N., Lazo, C.I.Q., Scarpa, M., Summar, M., & Wattanasirichaigoon, D. (2023). Enhancing Equitable Access to Rare Disease Diagnosis and Treatment around the World: A Review of Evidence, Policies, and Challenges. *International Journal of Environmental Research and Public Health*
- Evenett, S. (2024). The Return of Industrial Policy in Data. IMF Working Paper
- Hassan, M., Awan, F.M., Naz, A., deAndrés-Galiana, E.J., Álvarez-Machancoses, Ó., Cernea, A., Fernández-Brillet, L., Fernández-Martínez, J.L., & Kloczkowski, A. (2022). Innovations in Genomics and Big Data Analytics for Personalized Medicine and Health Care: A Review. *International Journal of Molecular Sciences*
- Wallsgrrove, R. (2022). Restorative Energy Justice. *UCLA Journal of Environmental Law and Policy*