



A Case Study in Lesotho: Gendered Healthcare Access and Maternal Outcomes in a North African Context,

Lerato Mokhethi¹, Mpho Molise^{1,2}, Mamello Phafoli¹, Thabiso Mokoena^{1,3}

¹ National University of Lesotho

² Department of Epidemiology, National University of Lesotho

³ Department of Surgery, National University of Lesotho

Published: 18 December 2023 | **Received:** 25 August 2023 | **Accepted:** 17 November 2023

Correspondence: lmokhethi@outlook.com

DOI: [10.5281/zenodo.18539417](https://doi.org/10.5281/zenodo.18539417)

Author notes

Lerato Mokhethi is affiliated with National University of Lesotho and focuses on Medicine research in Africa.

Mpho Molise is affiliated with Department of Epidemiology, National University of Lesotho and focuses on Medicine research in Africa.

Mamello Phafoli is affiliated with National University of Lesotho and focuses on Medicine research in Africa.

Thabiso Mokoena is affiliated with National University of Lesotho and focuses on Medicine research in Africa.

Abstract

Gender norms influence healthcare access and utilisation, with documented impacts on maternal health. Lesotho presents a valuable case study for examining these dynamics within a broader North African sociocultural context, where patriarchal structures often mediate women's access to medical services. This study aimed to analyse how gendered social determinants shaped access to obstetric care in a specific North African setting, using Lesotho as an illustrative case, and to explore the subsequent impact on maternal health outcomes. A qualitative, instrumental case study design was employed. Data were collected via in-depth, semi-structured interviews with purposively selected female patients and healthcare providers. Archival policy documents and local health facility records were analysed thematically to triangulate findings. A primary theme was the critical role of male partner or family authorisation in seeking care, which frequently delayed emergency obstetric interventions. Analysis of facility records indicated that a notable proportion of antenatal clinic attendees reported needing to consult their husband before attending. This gatekeeping dynamic was a recurrent barrier to timely care. Gendered power structures, manifesting as required male permission, are a substantial barrier to timely maternal healthcare in this context, adversely affecting service utilisation and outcomes. The case underscores the need to view medical access through a gendered lens. Health education programmes should actively engage men and community leaders. Health policy must advocate for and implement gender-sensitive service protocols that support women's autonomous decision-making in seeking care. gender, maternal health, healthcare access, North Africa, qualitative research, obstetric care This case study provides a context-specific analysis of how gendered social dynamics directly impact clinical pathways and maternal health, offering practical insights for developing more equitable healthcare delivery in similar settings.

Keywords: *Gender-based health disparities, Maternal health, Healthcare access, Sub-Saharan Africa, Qualitative case study*



ABSTRACT-ONLY PUBLICATION

This is an abstract-only publication. The complete research paper with full methodology, results, discussion, and references is available upon request.



REQUEST FULL PAPER

 **Email:** info@parj.africa

Request your copy of the full paper today!



SUBMIT YOUR RESEARCH

Are you a researcher in Africa? We welcome your submissions!

Join our community of African scholars and share your groundbreaking work.



Submit at: app.parj.africa



Scan to visit app.parj.africa

Open Access Scholarship from PARJ

Empowering African Research | Advancing Global Knowledge