



A Case Study of Informal Healthcare Provision in Urban Eritrea: Gynaecological and Obstetric Services,

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Abstract

In many urban African settings, informal healthcare providers fill critical gaps in formal health systems, particularly for maternal and reproductive health services. The nature, scope, and role of this informal sector in Eritrea's urban centres, specifically concerning gynaecological and obstetric care, remain under-documented. This case study aimed to describe and analyse the characteristics of informal gynaecological and obstetric service provision in a major urban area of Eritrea. It sought to document the types of services offered, the providers' backgrounds, and the perceived reasons for their utilisation by the community. A qualitative, instrumental case study design was employed. Data were collected through in-depth, semi-structured interviews with informal healthcare providers and women who had utilised their services. Supplementary observational data were gathered from informal practice settings. Thematic analysis was used to interpret the data. Informal providers, predominantly women with experiential or apprenticeship-based training, offered a range of services including antenatal advice, postnatal care, and traditional remedies for gynaecological complaints. A key theme was their role in providing culturally congruent care and privacy, which was a significant factor for many service users. A substantial proportion of interviewed women reported using informal services as a first point of contact for sensitive reproductive health issues. The informal healthcare sector constitutes an integral, albeit unregulated, component of the urban maternal health ecosystem in Eritrea. It addresses specific socio-cultural and accessibility needs not fully met by the formal health system. Formal health system engagement with informal providers through training and referral pathways should be explored. Further research is needed to assess the clinical safety and efficacy of common practices. Policy discussions should consider mechanisms for oversight and integration to improve overall maternal health outcomes. Informal healthcare, maternal health, gynaecology, obstetrics, Eritrea, urban health. This study provides a detailed account of informal gynaecological and obstetric care in urban Eritrea, contributing evidence to inform policy discussions on healthcare integration in similar settings.

Keywords: *Informal healthcare provision, Urban Africa, Maternal health, Reproductive health services, Health systems, Eritrea*



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