



An Ethnographic Study of Therapeutic Access and Obstetric Care in the Republic of Congo,

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Abstract

Access to essential medicines and quality obstetric care is a persistent challenge in sub-Saharan Africa, affecting maternal and neonatal health. The Republic of Congo represents a setting where systemic health system barriers interact with local practices to shape care. This ethnographic study explored the lived experiences and systemic factors influencing women's access to therapeutic resources and obstetric care in the Republic of Congo. It aimed to identify key barriers and facilitators from the perspectives of patients, their families, and healthcare providers. A multi-sited ethnographic study was conducted in urban and rural health facilities. Data collection involved prolonged participant observation, in-depth interviews with 42 participants (including pregnant and postnatal women, traditional birth attendants, midwives, and doctors), and analysis of health system documents. A central finding was the pervasive practice of 'medicinal improvisation', where frequent essential drug stock-outs forced providers and patients to seek alternatives, often at personal cost. Financial constraints were the primary barrier, with most interviewed women reporting catastrophic out-of-pocket expenditure for basic supplies. Care-seeking pathways were heavily shaped by familial and community networks. Access to obstetric care and medicines is severely constrained by economic and logistical health system failures, leading to adaptive but precarious coping strategies. This situation compromises the quality and safety of maternal care. Strengthen the national essential medicines supply chain with improved monitoring. Develop a targeted subsidy programme for maternal health commodities. Formally integrate community health workers into referral systems to bridge access gaps. Ethnography, obstetric care, access to medicines, maternal health, Republic of Congo, health systems This study provides an in-depth, contextual understanding of the complex dynamics limiting therapeutic access and obstetric care, highlighting the critical intersection of systemic deficits and local adaptive practices.

Keywords: *Medical anthropology, Sub-Saharan Africa, Maternal health, Healthcare access, Ethnographic methods, Obstetric care, Essential medicines*

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