



# Reconstructing Reproductive Health: A Perspective on Post-Conflict Medical Challenges and Opportunities in Comoros

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## Abstract

Political instability and conflict in the Union of the Comoros have severely disrupted the healthcare system. Reproductive health services face particular strain, with compromised infrastructure, workforce, and supplies worsening maternal and neonatal outcomes. This perspective critically examines the challenges for reproductive healthcare delivery in post-conflict Comoros. It aims to identify systemic barriers and potential opportunities for sustainable reconstruction and innovation. This is a perspective article synthesising observations from field experience, analysis of grey literature, and regional health system reports. It employs a reflective, analytical approach. Key insights: A critical shortage of skilled birth attendants outside Moroni forces reliance on traditional care. Destroyed infrastructure presents an opportunity to implement integrated, community-based models rather than repair legacy systems. Rebuilding public trust in formal services is a prerequisite for improving their use. The post-conflict period presents both profound challenges and unique opportunities. Context-sensitive reconstruction of reproductive health services could strengthen the wider health system and improve population health. Prioritise decentralised training for midwives and community health workers. Integrate mental health support into maternal care. Foster partnerships with local communities to co-design services and rebuild trust. Leverage mobile health technology to overcome geographical barriers. post-conflict health, reproductive health, health systems strengthening, maternal health, Comoros, medical challenges This perspective provides a focused analysis on the intersection of post-conflict recovery and reproductive health in a small island African state, offering insights for similar settings.

**Keywords:** *Post-conflict reconstruction, Reproductive health, Health systems strengthening, Sub-Saharan Africa, Humanitarian medicine, Maternal health services, Fragile states*



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