



Gendered Dimensions of Medical Practice and Access in North Africa: A Contemporary Analysis

Aminata Ouédraogo¹, Fatimata Sanogo^{2,3}, Idrissa Sawadogo³

¹ International Institute for Water and Environmental Engineering (2iE)

² Joseph Ki-Zerbo University, Ouagadougou

³ Department of Surgery, International Institute for Water and Environmental Engineering (2iE)

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Correspondence: aoudraogo@hotmail.com

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Author notes

Aminata Ouédraogo is affiliated with International Institute for Water and Environmental Engineering (2iE) and focuses on Medicine research in Africa.

Fatimata Sanogo is affiliated with Joseph Ki-Zerbo University, Ouagadougou and focuses on Medicine research in Africa.

Idrissa Sawadogo is affiliated with Joseph Ki-Zerbo University, Ouagadougou and focuses on Medicine research in Africa.

Abstract

Gender norms significantly influence healthcare systems in North Africa, yet contemporary analyses of their impact on medical practice and patient access are scarce. This is especially critical in obstetrics and gynaecology, where gender dynamics are central to care. This paper analyses the gendered dimensions of medical practice and healthcare access in a North African context, using Burkina Faso as a case study. It identifies key barriers and facilitators from both practitioner and patient perspectives within medicine. A qualitative, phenomenological approach was employed. Data were collected through semi-structured interviews and focus group discussions with healthcare professionals and female patients in urban and rural settings. Thematic analysis was used to interpret the data. Analysis revealed a dominant theme of gendered authority, where medical knowledge and decision-making are frequently perceived as masculine domains. Many female patients reported deferring to male family members for permission to seek care, including for gynaecological issues, which directly impeded timely access to services. Gender constructs are embedded within the medical ecosystem in this context, influencing professional hierarchies and creating substantial barriers to equitable healthcare access for women. Addressing these dimensions is crucial for improving health outcomes. Medical training curricula should integrate gender-sensitivity modules. Healthcare institutions should develop policies promoting female leadership and create more women-friendly service environments. Community engagement programmes are needed to challenge restrictive gender norms affecting health-seeking behaviour. Gender, Medical Practice, Healthcare Access, North Africa, Burkina Faso, Obstetrics, Gynaecology, Qualitative Research This paper provides evidence-based insights into how gender operates within a North African medical context, offering practical recommendations for clinicians, policymakers, and educators to foster more equitable healthcare systems.

Keywords: *Gender, Healthcare Access, Medical Practice, Sub-Saharan Africa, Qualitative Analysis*



ABSTRACT-ONLY PUBLICATION

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