



Integrating Traditional Knowledge and Biomedical Practice: A Sustainable Model for Maternal Healthcare in Senegal

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Abstract

Maternal healthcare in Senegal faces challenges of access and cultural acceptability. Biomedical services are often underutilised, while traditional birth attendants remain a trusted yet under-supported resource. This study aimed to develop and pilot a model for maternal healthcare in southern Senegal that integrates traditional knowledge with biomedical practice. Its objectives were to assess community perceptions, identify barriers to integration, and evaluate a co-operative care pilot. A mixed-methods design was employed in a rural region. Qualitative data were gathered through focus group discussions with women of reproductive age, traditional birth attendants, and biomedical midwives. A structured survey was administered to a sample of postpartum women. A pilot programme of joint training and referral protocols was subsequently implemented and evaluated. Community trust in traditional birth attendants was high, with 78% of surveyed women reporting a preference for them for routine antenatal advice. Qualitative data highlighted the importance of spiritual and cultural practices during pregnancy. The pilot programme demonstrated a 40% increase in facility-based deliveries among participants receiving co-managed care. A synergistic model that values both traditional and biomedical knowledge is feasible and can enhance service utilisation. Successful integration requires formalising roles, mutual respect, and shared training. Health policy should recognise and formally train traditional birth attendants as community health liaisons. Biomedical training programmes should include modules on local cultural practices. Sustainable funding for joint initiatives is needed. maternal health, traditional birth attendants, healthcare integration, Senegal, cultural competence, sustainable healthcare This research provides an evidence-based framework for integrating maternal healthcare systems in Senegal, offering a model that could be adapted to similar contexts.

Keywords: *maternal healthcare, Senegal, traditional birth attendants, biomedical integration, sustainable health systems, sub-Saharan Africa*



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