



Navigating the Informal Sector: A Policy Analysis of Medicinal Access and Maternal Health in Urban Guinea

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Abstract

In urban Guinea, the informal sector is a primary source of medicines for many pregnant women. Its unregulated nature poses risks to safe maternal healthcare, revealing a disconnect between formal policy and practice. This policy analysis examines the role of the informal medicinal sector in urban Guinea's maternal healthcare. It evaluates existing policies, identifies barriers to formal care access, and analyses implications for maternal health outcomes. A qualitative policy analysis was conducted. This comprised a desk review of national health policies and grey literature, synthesised with thematic analysis from key informant interviews and focus group discussions with healthcare providers, informal vendors, and women of reproductive age. A persistent reliance on the informal sector was identified, driven by affordability and geographical accessibility. A key finding was a profound disconnect between restrictive formal drug policies and pragmatic dependence on informal vendors, fostering clandestine health-seeking behaviours and potential risk. The informal medicinal sector is an entrenched, yet risky, component of the maternal healthcare landscape in urban Guinea. Policy approaches that ignore or criminalise it are ineffective and may worsen maternal health vulnerabilities. Policy should shift towards pragmatic regulation. Recommendations include developing training for informal vendors on safe maternity-related medicines, piloting formal care linkage systems, and revising medicine scheduling to improve access to essential drugs. maternal health, informal sector, medicinal access, policy analysis, Guinea, urban health This analysis provides a focused examination of the policy-practice gap regarding informal medicinal access for maternal health in urban Guinea, offering evidence for context-specific regulatory engagement.

Keywords: *informal sector, maternal health, Sub-Saharan Africa, health policy analysis, pharmaceutical access, urban health systems, unregulated medicines*



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