

# Effects of conflict on women's reproductive health need to be managed sensitively

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Clinicians need to be sensitive and aware of the unique challenges of women's reproductive health needs in times of conflict, suggests a new review published today (4 July) in *The Obstetrician & Gynaecologist (TOG)*.

Approximately 1.5 billion people are currently living in countries affected by conflict, fragility or large-scale violence. Women and children account for approximately 75% of those displaced by conflict and roughly 20% of those displaced are women of reproductive age and one in five will be pregnant.

This new review looks at how conflict can negatively impact all aspects of reproductive health, directly through damage to services, gender-based violence and forced displacement of populations and indirectly through reductions in the availability of basic healthcare.

The review states that gender-based violence, sexually transmitted infections (including HIV), and maternal and neonatal mortality and morbidity all flourish in times of conflict. Furthermore, the loss of access to adequate family planning and basic [health services](#) also increases reliance on traditional or harmful methods, including unsafe termination of pregnancy.

Looking at maternal mortality specifically, high rates are frequently encountered in conflict-affected populations; eight out of the ten countries with the highest [maternal mortality](#) ratios have experienced

current or recent conflict. Moreover, the review notes that approximately 15% of displaced [pregnant women](#) will encounter a potentially life-threatening complication, such as haemorrhage, sepsis, obstructed labour or eclampsia.

The authors of the review therefore emphasise the importance of appropriate and timely recognition of, and response to, obstetric emergencies as the key to saving lives. However, in the context of conflict and displacement, services are often scarce, resulting in delays in reaching the care required. Furthermore, the poor security conditions, exodus of healthcare providers, lack of transport and loss of facilities result in heightened vulnerability and reduced access to life-saving interventions.

Clinicians in the UK may treat women migrating from conflict affected areas, and should therefore be sensitive to the reproductive health challenges faced by these women, the review states. The authors conclude by saying that awareness and recognition by medical staff to these issues may be beneficial to the women's care and aid them in accessing the appropriate services.

Dr Benjamin Black, Specialist Trainee in Obstetrics and Gynaecology currently working with Medecins Sans Frontieres in Sierra Leone, and lead-author of the review said:

"In an increasingly globalised world a working knowledge of reproductive health during conflict allows [clinicians](#) to approach subjects sensitively with women, building a relationship of trust and understanding, allowing women to gain access to services they need.

"Recognition and response to the reproductive health needs of women during humanitarian emergencies has advanced. However, much more needs to be done around the time of the crisis and post-crisis, and more

awareness is needed of these issues."

Jason Waugh, TOG Editor-in-Chief added:

"For twenty years, [reproductive health](#) has been formally recognised as a human right and this [review](#) highlights the importance of providing adequate services in conflict and displacement settings.

"Clinicians working in the UK will come across [women](#) who have experienced conflict zones who may have certain health needs as a result. Therefore, an understanding of the difficulties they may have faced will enhance the care given."

**More information:** B O Black, P A Bouanchaud, J K Bignall, E Simpson, M Gupta. Reproductive health during conflict. *The Obstetrician & Gynaecologist* 2014; [dx.doi.org/10.1111/tog.12114](https://doi.org/10.1111/tog.12114)

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