

Silence, Stigma, and Systemic Neglect:

The Hidden Burden of Women’s Gynaecological Health in Africa

Focus on Heavy Menstrual Bleeding, Endometriosis and Menopause

“Heavy Menstrual Bleeding has a pooled prevalence of 48.6% across 10 LMIC cities; Menopause brings high symptom burdens yet diagnostic and therapeutic access remains thin; Endometriosis is under-detected and delayed despite workable imaging pathways.”

BACKGROUND

Gynecological conditions such as heavy menstrual bleeding (HMB), endometriosis, and menopause significantly affect women’s health, wellbeing, and productivity across Africa.^(1,10,8,9,5) Despite their prevalence, they remain under-recognised and underfunded within health systems, leading to delayed diagnoses and limited access to care.^(1,2,8) Strengthening awareness, research, and clinical capacity, including the routine use of validated tools and guideline-aligned pathways, is essential to ensure early diagnosis, equitable treatment, and improved quality of life for women across the continent^(2,6,7,8) Addressing these “hidden burdens” is essential to achieving Universal Health Coverage and advancing gender equity (SDGs 3 and 5).

AIM

To synthesise evidence on disease burden in Africa, diagnostic pathways, treatment practices, and clinical development activities to inform future research, policy, and programming.

METHODS:

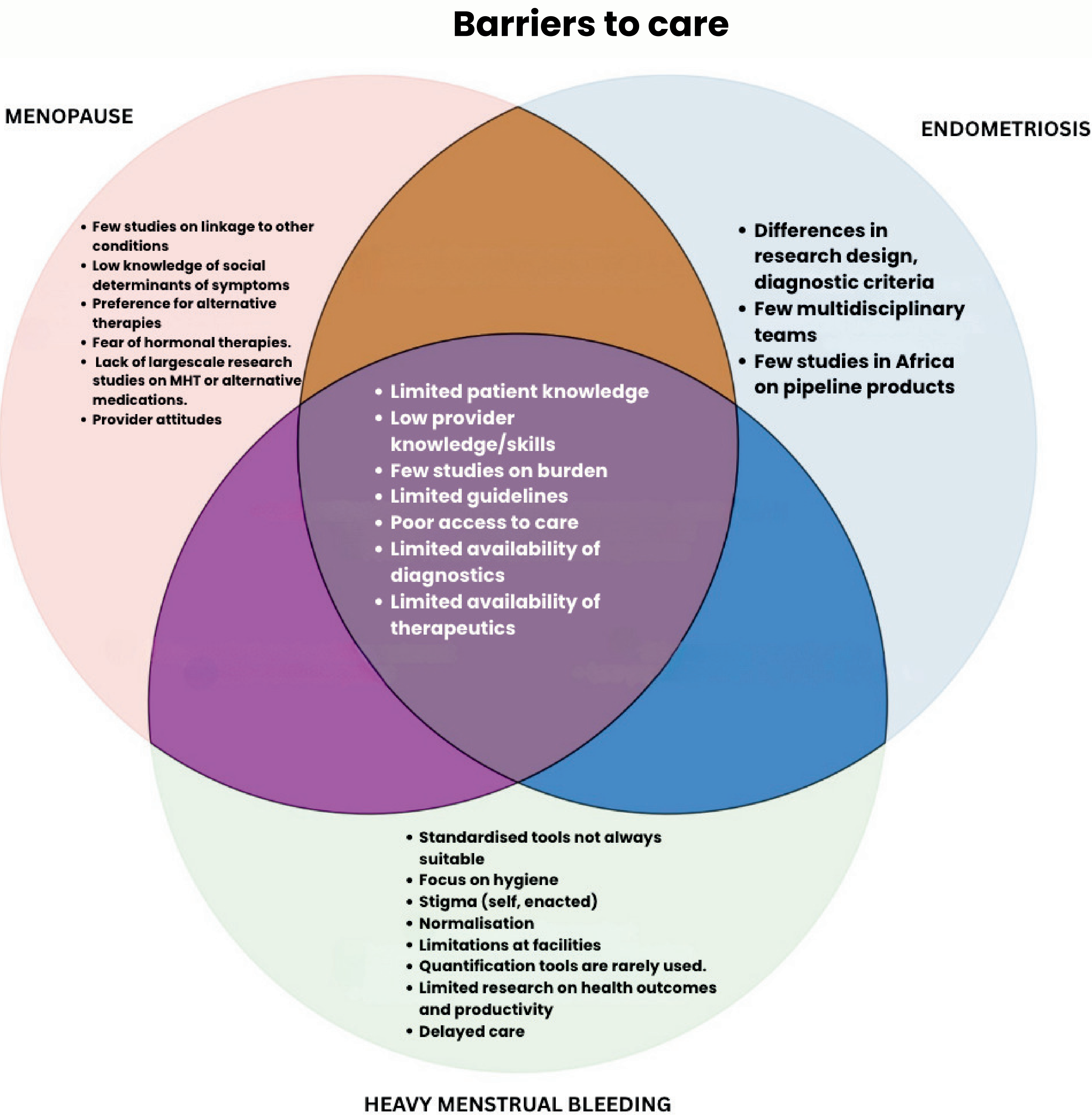
This scoping review, conducted using the Arksey and O’Malley framework [11] and guided by the PRISMA-ScR checklist⁽¹²⁾ synthesised African evidence on the epidemiology, guidelines, treatment practices, and care gaps in women’s health. Using the PCC framework to define eligibility [11], studies involving women across Africa were identified through major databases and grey literature sources. Data were rigorously screened and extracted, and findings were to highlight key findings and research gaps.

RESULTS

A total of 120 publications were included in the scoping review. 14 experts were consulted through FGDS and a further 70 experts were engaged at a two-day convening to validate and enrich the findings of the review.

SUMMARY OF FINDINGS

Across Africa, endometriosis, HMB, and menopause remain profoundly **under-recognized and under-resourced**, despite their significant impact on women’s health, well-being, and productivity^(1,10,8,5).



While each condition presents unique issues, they intersect through common barriers—limited diagnostics, stigma, inequitable access, and policy neglect^(4,9,5,CoP,2,8). These overlaps reveal how systemic bias and underinvestment perpetuate women’s health inequities, emphasizing the need for greater awareness, research, and inclusive health policies^(6,7,8,10)

CONCLUSION

HMB, endometriosis, and menopause share a continuum of under-recognition, delayed diagnosis, and fragmented care across African health systems [1, 8,10]. Persistent stigma, data gaps, and underfunding continue to limit progress and access to quality care^(5,CoP,) The scoping review found that diagnostic tools are scarce, national guidelines are minimal, and local innovations remain underdeveloped, reinforcing inequities in women’s health care^(2,7,8,9,CoP,) There is an urgent need for context-specific national guidelines, integration of gynaecological health into Universal Health Coverage (UHC) and Non-Communicable Disease (NCD) frameworks, and investment in affordable diagnostics and health-worker training^(2,8,9,) Strengthening clinical capacity, decentralizing services, and embedding women’s health in primary care are critical steps toward sustainable impact^(2,8,). Progress depends on women-led, Africa-driven research, integrated policy action, and community advocacy grounded in lived experience [CoP]. Data-informed leadership and inclusive governance will be essential to transform silence into visibility and ensure that women’s pain, bleeding, and stigmatisation are recognized as core public-health priorities within gender-responsive health systems^(1,5,CoP,)

References

