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Analysis of barriers to access, follow-up, and care for migrant women from the African continent with gynecological and obstetric conditions within the Aragonese healthcare system (Spain)

Submission date
20/04/2026

Recruitment status
No longer recruiting

Registration date
18/05/2026

Overall study status
Completed

Last Edited
18/05/2026

Condition category
Urological and Genital Diseases

[_] Prospectively registered
[_] Protocol
[_] Statistical analysis plan
[_] Results
[_] Individual participant data
[X] Record updated in last year

Plain English summary of protocol
Background and study aims
Many women move from African countries to Spain for different reasons, such as work, safety, or family life. Once in Spain, some of these women can find it hard to use health services, especially care linked to pregnancy, childbirth, and reproductive health. This study aims to understand what makes it difficult for African migrant women in the region of Aragon in Spain to access, continue, and receive good quality gynecological and obstetric care. By listening to women and professionals, the study hopes to find ways to reduce inequalities and improve health services for everyone.

Who can participate?
People aged 18 years or older can take part if they belong to one of these groups :
-African women who have used gynecological or obstetric health services in Aragon
-Spanish women who have used gynecological or obstetric health services in Aragon
-Healthcare professionals such as doctors, nurses, and midwives working in this area
-Healthcare administrative staff who help with appointments and registration
-Third sector professionals such as social workers and NGO staff who support migrant women

What does the study involve?
Participants will be invited to take part in a one to one interview. The interview will include open questions about experiences of accessing healthcare, communication, follow-up care, and any difficulties faced. The interview will be audio recorded with permission and later written down for analysis. Some information will also come from existing health records, but no names or identifying details will be used. Taking part is voluntary, and participants can choose not to answer any question or stop at any time.

What are the possible benefits and risks of participating?
There are no direct medical benefits for participants. However, sharing experiences may help improve health services for women in the future. Some questions may feel personal or bring up difficult memories, which could cause emotional discomfort. There are no physical risks, and support information will be offered if someone feels upset.

Where is the study run from?
The study is run from the Faculty of Social Sciences at the University of Zaragoza and takes place within the public healthcare system of Aragon in Spain.

When is the study starting and how long is it expected to run for?
May 2026to October 2026.

Who is funding the study?
This work was funded by the Carlos III Health Institute (ISCIII), with funds from the Research Network on Chronicity, Primary Care and Health Promotion (RICAPPS, RD24/0005/0004), which is part of the Cooperative Research Networks Oriented to Health Outcomes (RICORS) (Carlos III Health Institute), co-funded by the European Union.

Who is the main contact?
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Study information

Scientific Title
Barriers to access, follow-up, and care within the healthcare system in the case of African migrant women requiring healthcare

Acronym
BAMMA-GO

Study objectives
General Objective
To analyze the barriers to access, follow-up, and care faced by migrant women from the African continent who require healthcare services in Aragon.
Specific Objectives
1.1. To identify and analyze the characteristics of African migrant women who use healthcare services in Aragon as potential risk factors in healthcare provision.
1.2. To establish patterns of access to and use of specialized obstetric and gynecological healthcare services by African migrant women in Aragon.
1.3. To analyze the barriers and difficulties faced by African migrant women in obstetric and gynecological care in Aragon.
1.4. To understand the experiences and perceptions of African migrant women regarding obstetric and gynecological care.
1.5. To describe the perceptions, training, and practices of healthcare professionals regarding the care of African migrant women.
1.6. To examine the role of the third sector in the care and support of African migrant women in

Aragon.
1.7. To design a digital tool aimed at assessing risk situations in intervention contexts involving migrant women, to support professional decision-making and contribute to risk reduction.

Working Hypotheses
General Hypothesis
African migrant women in Aragon experience inequalities in access to, use of, and experiences with healthcare services—particularly in obstetrics and gynecology—due to the influence of sociocultural, linguistic, institutional factors and mutual perceptions between users and healthcare professionals.
Specific Hypotheses
1.1.1. African migrant women who use healthcare services in Aragon share specific sociodemographic characteristics (educational level, employment status, and legal status) that may potentially influence their access to and use of the healthcare system.
1.1.2. There are differentiated patterns of access to and use of obstetric and gynecological services among African migrant women compared to the native population, determined by factors such as language, health status, administrative situation, family situation, and lack of trust in the Spanish healthcare system.
1.1.3. The main barriers identified in obstetric and gynecological care are linguistic, cultural, religious, and administrative in nature, limiting the quality of care and continuity of healthcare services.
1.1.4. The experiences and perceptions of African migrant women regarding obstetric and gynecological care are influenced by a lack of cultural sensitivity, ineffective communication, limited awareness of their religious beliefs, and previous experiences of discrimination within the healthcare system or other public settings.
1.1.5. Not all healthcare professionals have the same level of training or intercultural sensitivity, which is directly reflected in the care provided to African migrant women. This may either reinforce or reduce inequalities in care.
1.1.6. The third sector plays a key mediating role in the care and support of African migrant women, facilitating access to healthcare services and acting as intermediaries between users and the healthcare system.
1.1.7. The identification of healthcare-system-related risk factors within the Aragon healthcare system, analysis and characterization of their impact on African migrant women, and the development—based on the collected information—of a risk assessment model to be used as a management tool in real-field conditions.

Ethics approval required
Ethics approval required

Ethics approval(s)
Approved 14/01/2026, CEICA. Comité de ética de Investigación clinica de Aragón (Aragon Clinical Research Ethics Committee) (Avda. San Juan Bosco, 13., Zaragza, 50009, Spain; +34 976 71 5895; mgonzalezh.ceic@aragon.es), ref: PI25/482

Primary study design
Observational

Secondary study design
Qualitative study

Study type(s)

Health condition(s) or problem(s) studied
Gynecological and obstetric healthcare for migrant women from the African continent

Interventions
A mixed-methods research design will be employed, integrating quantitative and qualitative approaches.
The quantitative approach will focus on the collection and analysis of numerical data to address the research hypotheses. To this end, objective, systematic, and rigorous procedures will be used. Data collection will be carried out through Bigan, the Big Data project of the Department of Health of the Government of Aragon, aimed at improving healthcare through the use of routinely generated data from the public healthcare system of Aragon. The variables to be analyzed will include age, nationality, referrals to different care areas, diagnoses, and treatments.
In parallel, the qualitative approach will aim to understand the barriers experienced by migrant women within the healthcare system of Aragon, both in terms of access and throughout the different phases of the care process (first contact, consultation development, follow-up, and completion of the intervention) in the fields of Obstetrics and Gynecology, including care provided by midwives.
Interviews will be conducted with migrant women and Spanish women in order to identify barriers to accessing and using the healthcare system, as well as to analyze the extent to which these barriers are shared by both groups. In addition, the perspectives of healthcare professionals (medicine and nursing), healthcare administrative staff, and third-sector professionals with experience in supporting migrant women will be included.
The qualitative analysis process will be iterative and will include the transcription of the interviews and their subsequent coding. Categories and subcategories will be developed through the identification of higher-level conceptual themes and subthemes. The analysis will follow the phases of open, axial, and selective coding characteristic of grounded theory. For this purpose, NVivo software (demo version) will be used.
The principal investigator will follow the COREQ (Consolidated Criteria for Reporting Qualitative Research) checklist in order to enhance the reliability and transferability of the study.
During the selective coding phase, the main categories will be integrated to develop a comprehensive understanding of the phenomenon under study. This process will be supervised by the thesis supervisors, who will verify the consistency between the original data and the interpretations made.
Finally, the integration of quantitative and qualitative results will allow the identification and assessment of the role of socioeconomic determinants in the development of certain pathologies, as well as the efficiency of the healthcare system in enabling African migrant women to access healthcare services. This will contribute to the development of risk assessment tools applicable within the healthcare setting.

Intervention Type
Mixed

Primary outcome(s)
1. Barriers to access to the healthcare system for gynecological and obstetric conditions among African immigrant women measured using Discourse (qualitative methods) at a single time point

2. Barriers to treatment and follow-up among African immigrant women with gynecological and obstetric conditions. measured using Discourse (qualitative methods) at a single time point

3. Consequences of delays in care and problems in the follow-up and management of gynecological and obstetric conditions among African immigrant women. measured using Discourse (qualitative methods) at a single time point

Key secondary outcome(s)

Completion date
30/10/2026

Eligibility

Key inclusion criteria
Group 1: Healthcare professionals:
Specialist nurses in Obstetric and Gynecological nursing (midwives) and primary care nurses, as well as physicians specializing in Obstetrics and Gynecology, primary care, and emergency services. All participants must have a minimum of one year of professional experience in the field. In the case of retired individuals, their retirement must not exceed two years
Group 2: Administrative staff within the healthcare system:
Administrative professionals working in primary care, emergency services, and specialized units (such as mammography units), who have direct contact with users in tasks related to registration within the healthcare system and the management, assignment, and modification of appointments. All participants must have a minimum of one year of professional experience in the field. In the case of retired individuals, their retirement must not exceed two years
Group 3: Third-sector professionals:
Professionals from the third sector (social workers from social services, the healthcare system, or private organizations). All participants must have a minimum of one year of professional experience in the field. In the case of retired individuals, they must not have been retired for more than two years. In addition, their professional experience must be linked to care for migrant women, including support functions in accessing medical services
Group 4: African women:
African women who have had contact with the healthcare system in Aragon regarding matters related to their gynecological health
Group 5: Spanish women:
Spanish women with experience of contact with the healthcare system in Aragon on issues related to their gynecological health

Healthy volunteers allowed
No

Age group
Mixed

Lower age limit
18 Years

Upper age limit
100 Years

Sex
All

Total final enrolment
0

Key exclusion criteria
The exclusion criteria included professionals without direct experience or whose contribution was not relevant to the objectives of the study, as well as individuals with cognitive or sensory factors that prevent them from completing the interview.
Likewise, individuals who have not submitted and signed the informed consent will be excluded.

Date of first enrolment
01/05/2026

Date of final enrolment
30/09/2026

Locations

Countries of recruitment
Spain

Sponsor information

Organisation
RICAPPS(RD24/0005/0004). Red de Investigación en Cronicidad, Atención Primaria y Prevención y Promoción de la Salud (Research Network on Chronicity, Primary Care, and Health Prevention and Promotion).

Organisation
GAIAP. Grupo Aragonés de Investigación en Atención Primaria. (Aragonese Primary Care Research Group)

Funder(s)

Funder type

Funder Name
Carlos III Health Institute (ISCIII), with funds from the Research Network on Chronicity, Primary Care and Health Promotion (RICAPPS, RD24/0005/0004), which is part of the Cooperative Research Networks Oriented to Health Outcomes (RICORS) (Carlos III Health Institute), cofunded by the European Union

Funder Name
GAIAP. Grupo Aragonés de Investigación en Atención Primaria. (Aragonese Primary Care Research Group. GIIS011)

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary
Not expected to be made available

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Participant information sheet	Migrant women (in Spanish)		21/04/2026	No	Yes
Participant information sheet	Third sector (in Spanish)		21/04/2026	No	Yes
Participant information sheet	Workers (in Spanish)		21/04/2026	No	Yes