

Maternal birth preparedness and complication readiness remains low in low- and middle-income countries: a systematic review and meta-analysis of observational studies

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Background: The global maternal mortality rate due to preventable pregnancy related complications is 810 per 100,000 live births. Poor maternal involvement in birth preparedness and complications readiness (BPCR) practice contributes to poor maternal and child health outcomes in low- and middle-income countries (LMICs). This systematic review and meta-analysis determined the pooled prevalence of maternal BPCR in LMICs.

Methods: Literature published in English language from 2004 through 2022 was retrieved from CINAHL, EMBASE, Google Scholar, Scopus, PubMed, and Web of Science databases. Egger's test and I² statistics were used to assess the publication bias and heterogeneity. The publication bias and heterogeneity was validated using the Duval and Tweedie's nonparametric

interval (CI) of BPCR was estimated using random effect model. The review protocol has been registered in PROSPERO

prevalence studies was used. STATA Version 16.0 was used to conduct the pooled meta-analysis.

42 days of delivery of the baby arranged transport service by family members. In addition, 80% of health facilities in the study area did not have a dedicated room for labor and delivery. The study was conducted in