



A Meta-Analysis of Informal Healthcare Provision and Maternal Health Outcomes in Urban Democratic Republic of the Congo

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Abstract

In urban Democratic Republic of the Congo, a considerable proportion of maternal healthcare is delivered by informal providers, such as traditional birth attendants, medicine vendors, and unlicensed practitioners. The effect of this reliance on maternal health outcomes is not well understood, with existing evidence being fragmented. This meta-analysis aimed to synthesise quantitative and qualitative evidence on the relationship between informal healthcare provision and key maternal health outcomes in urban DRC. Its objectives were to quantify the prevalence of use and to identify associated health impacts. A systematic review and meta-analysis was conducted. Multiple electronic databases were searched for relevant studies. Inclusion criteria encompassed observational and qualitative studies reporting on informal sector use and maternal outcomes. Quantitative data were pooled using random-effects models; thematic synthesis was employed for qualitative findings. The analysis indicated that informal providers attend a substantial proportion of urban births, with a pooled estimated prevalence of approximately 40%. Their involvement was associated with both positive and negative outcomes. Reported benefits included improved accessibility and cultural concordance. Negative associations included higher rates of delayed referral for obstetric complications and suboptimal management of postpartum haemorrhage. Informal healthcare providers fill a critical gap in the formal health system, yet their role presents a complex duality for maternal health. While improving access, unregulated practice can contribute to adverse outcomes, underscoring a significant public health challenge. Policymakers should develop regulatory frameworks focusing on training, formal linkage with the health system, and clear referral pathways for informal providers. Future research should evaluate intervention models that integrate and supervise these providers to improve safety. maternal health, informal health sector, urban health, Democratic Republic of the Congo, meta-analysis, traditional birth attendants This study provides the first comprehensive quantitative synthesis on the prevalence and maternal health impacts of informal healthcare provision in urban DRC, offering consolidated evidence for policy and practice.

Keywords: *maternal health, urban Africa, informal healthcare, meta-analysis, traditional birth attendants, Democratic Republic of the Congo*



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