## Long term socio-economic impact of nearmiss obstetric complications on women and their households: a longitudinal study in Burkina Faso

Patrick G.C. Ilboudo<sup>1,2,\*</sup>, Steve Russell<sup>3</sup>, Ben D'Exelle<sup>3</sup>

- 1 PhD student, University i Oslo
- 2 Agence de Formation, de Recherche et d'Expertise en Santé pour l'Afrique, AFRICSanté
- 3 University of East Anglia
- \* Correspondence to: p.c.g.ilboudo@studmed.uio.no

**INTRODUCTION**: Few studies have reported on the long term socio-economic impact of nearmiss obstetric complications on women and their households.

**OBJECTIVE**: To investigate the long term socio-economic impact of nearmiss obstetric complications on women and their households in Burkina Faso

**METHODS**: From December 2004 to March 2005, we created an epidemiological hospital-based cohort that included 337 clinically defined nearmiss women and 677 women who had an uncomplicated delivery. More than four/five years later (September- December 2009), we collected data on socio-economic indicators of 765 women out of this cohort. We compared household and individual level economic and well-being indicators of women who had severe obstetric complications (nearmisses) in 2004/5 with women who had an uncomplicated delivery. We used propensity score matching methods to remove initial selection bias.

**RESULTS**: We found that households of women who had severe obstetric complications four/five years before, were significantly less likely to eat rice (matched p=0.089), to eat luxury foods (matched p=0.023) and to spend money on their children's education (matched p=0.001) compared to households of women who had an uncomplicated delivery. Households of women with severe obstetric complications were also significantly more likely to buy food in credit (matched p=0.033), to reduce the number of meals consumed by their children (matched p=0.033) and to have their children skipping meals (matched p=0.082) and to face food insecurity (matched p=0.070). At the individual level, women with severe obstetric complications were significantly less likely to receive money from their husband for daily cooking (matched p=0.044) compared to the control group, and were significantly more likely to be unsatisfied with their quality of life (matched p=0.035), unsatisfied with their health (matched p=0.027) and to feel insecure in their ordinary life (matched p=0.090).

**CONCLUSION**: We conclude that severe obstetric complications pose long lasting negative effects on the livelihoods of women and their households. Our findings highlight the need of focused interventions in the benefit of these women.