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The effect of maternal morbidity on productivity: a household level analysis in Ghana

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Aim:

To investigate the productivity losses of maternal morbidity in Ghana

Objectives:

- To estimate the magnitude of productivity losses of maternal ill health
- To estimate the magnitude of household coping strategies
- To examine the extent to which productivity losses vary by poverty status

Methods:

A survey was conducted in three districts of Central region in Ghana in 2005 among 233 women who had delivered within the preceding four months. Maternal morbidity, defined as occurring during the puerperium, the period of six weeks after delivery, was self-assessed by respondents. Productivity losses were measured by the inability to attend fully to normal daily activities. Respondents were asked to estimate the time they were unable to work at all, their reduced effectiveness of working while ill and the contribution of others who assisted them with their normal activities. Per capita household expenditure was used as a measure of poverty status.

Key findings:

Over half of the sample (51%) was unable to attend fully to normal daily activities in the six weeks after delivery. The productivity losses associated with maternal morbidity are significant and comparable with losses from other types of illness. On average, 14.1 days were lost through absence from work. A further 3.7 days on average were lost through reduced effectiveness in working while ill. Household coping strategies, in the form of assistance from others, recovered about a third of the total productivity losses. Estimated productivity losses were smallest among the poorest quintile of households, reflecting their lesser ability to take time off from

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normal activities when ill. These estimates are important because, if losses in the production of market and household goods and services are taken into account, maternal health strategies may in effect pay for themselves in monetary terms. The reduction of productivity losses may also contribute to poverty reduction goals.

Key words: Maternal morbidity, productivity losses, Ghana