



HEALTH POLICY PROJECT / GHANA

Building capacity for improved health policy, advocacy, governance, and finance

New Reporting System Increases Access to Justice and Key Services

Stigma and discrimination against people living with HIV (PLHIV) and key populations reduces access to lifesaving services, adversely affects health outcomes, and undermines human rights.

To reduce HIV-related stigma and discrimination, HPP supported a consortium of stakeholders in Ghana to develop a web- and SMS-based system for reporting HIV-related discrimination to the Commission on Human Rights and Administrative Justice (CHRAJ).

The confidential system provides a mechanism for civil society organizations to report cases to CHRAJ, track case progress, and use aggregated data for advocacy. Policymakers can also use the data to guide the development of HIV- and other related policies.

Since the system's launch in December 2013, 45 cases have been reported and are currently either completed, transferred to the relevant authority, or still under investigation by CHRAJ. Ultimately, the system will contribute to meeting the legal mandate of state institutions to protect the human rights of marginalized communities.

Overview

Ghana has the highest contraceptive prevalence rate (CPR) in the West Africa region. However, the CPR has stagnated over the past decade, the use of modern contraceptives remains low, and many Ghanaians still lack access to family planning and reproductive health (FP/RH) services.

Even as the country works to expand access to FP/RH services, it must also respond to the challenges posed by HIV. Although HIV prevalence is relatively low among Ghana's general population, it is considerably higher among key populations, such as men who have sex with men (MSM) and sex workers.

The Health Policy Project (HPP) supported the government of Ghana to mobilize political and financial support for, and strengthen implementation of, FP/RH and HIV/AIDS programs.

From 2011–2015, HPP and its local partners

- Generated, used, and disseminated data to increase political and financial support for FP/RH and HIV/AIDS programs
- Improved understanding among key government officials of the costs of delivering programs and services
- Updated key policies and strategies
- Built institutional and individual capacity to generate and analyze costing data
- Worked to reduce HIV-related stigma and discrimination (S&D) and improve access to services for key populations

Enabling Environment Improved for a More Effective HIV Response

HPP worked with the Ghana AIDS Commission (GAC) to update and disseminate the National HIV and AIDS, STI Policy, helping ensure that the updated policy was based on best practices and addressed gender equality, gender-based violence (GBV), and the needs of key populations at higher risk of HIV infection.

Advocacy Strengthened for Increased Support of FP and HIV Programs

To build the capacity of the National Population Council (NPC), HPP helped the council develop and use evidence-based advocacy tools to generate greater political and financial support for family planning in Ghana:

- Applied the GAP (Gather, Analyze, Plan) Tool¹ to help decisionmakers and advocates understand and plan for the costs involved in expanding access to FP/RH services
- Applied the RAPID² model at both then national and regional levels to demonstrate the socioeconomic impacts of rapid population growth and show how Ghana can benefit from the demographic dividend

Selected Publications

Prioritization of the Response under the New Ghana HIV Strategic Plan: A Program Optimization Perspective

The Costs and Impacts of Investing in the HIV Response in Ghana

Unit Cost of Providing Key Services at the Facility Level to Prevent Mother-to-Child Transmission of HIV: Ghana

Unit Cost of Providing Key HIV Services to Female Sex Workers and Males Who Have Sex with Males: Ghana

Ghana RAPID: The Change We Seek (including 10 regional briefs)

Cost of Family Planning Services in Ghana

Designing a Stigma and Discrimination Reporting System: Assuring Justice for People Living with HIV and Key Populations in Ghana

How Ghana Can Save Lives and Money: The Benefits of Financing Family Planning Through National Health Insurance

Ghana Family Planning Costed Implementation Plan, 2016–2020

New System Established for Addressing S&D Among Key Populations

HIV-related stigma and discrimination undermine the human rights and quality of life of people living with HIV and key populations. Ensuring that relevant legal protections are respected and enforced reduces the harmful consequences of such discrimination. HPP, in collaboration with the GAC, helped the Commission on Human Rights and Administrative Justice design and implement an innovative web- and SMS-based system for reporting S&D. The system helps ensure that those experiencing S&D have access to redress and/or linkages to relevant social services.

Costing and Financial Data Generated to Guide Programs

HPP supported the GAC and NPC to generate data and build capacity for costing the delivery of health services—a key component of improving health financing and enhancing sustainability:

- Determined the cost of service provision for prevention of mother-to-child transmission and key populations
- Assisted the NPC with estimating unit costs for the provision of FP commodities and services
- Prepared a policy brief to help policymakers understand the potential impact of including family planning in the national health insurance benefits package
- Developed—in coordination with the NPC and Ministry of Health—the Ghana Costed Implementation Plan for Family Planning, 2016–2020 (FP-CIP) to provide specific, costed activities for achieving Ghana’s national FP goals
- Used the Goals Model to analyze the effects of different funding scenarios on the impact and coverage of HIV programs and support Ghana’s applications to the Global Fund to Fight AIDS, Malaria and Tuberculosis

The Way Forward

Achieving Ghana’s development goals and meeting the reproductive health needs of the population requires strengthening the political and financial support for family planning and HIV programs. Government agencies leading the implementation of these programs need to be able to quantify the costs of the interventions to better mobilize support—from both the government and international partners. Future efforts should include

- Increased work with key populations to ensure their inclusion in the fight against HIV and their access to services free of stigma and discrimination
- Continued advocacy for family planning, including providing assistance to the NPC and Ministry of Health to implement and monitor the FP-CIP

Notes

¹ The GAP Tool is a simple software tool that helps policymakers understand the costs associated with expanding FP services and identify existing funding gaps. See: www.healthpolicyproject.com/index.cfm?id=publications&get=pubID&pubID=111.

² RAPID is a computer model that projects the social and economic consequences of rapid population growth for such sectors as labor, education, health, urbanization, and agriculture. It is an advocacy tool to help policymakers and other stakeholders understand the resources and lives that can be saved by investing in family planning. See: www.healthpolicyproject.com/index.cfm?id=publications&get=pubID&pubID=154.

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The Health Policy Project is a five-year cooperative agreement funded by the U.S. Agency for International Development under Agreement No. AID-OAA-A-10-00067, beginning September 30, 2010. The project’s HIV activities are supported by the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR). HPP is implemented by Futures Group, in collaboration with Plan International USA, Avenir Health (formerly Futures Institute), Partners in Population and Development, Africa Regional Office (PPD ARO), Population Reference Bureau (PRB), RTI International, and the White Ribbon Alliance for Safe Motherhood (WRA).

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