SUMMARY OF KEY ISSUES FROM PREVIOUS UPR CYCLES AND RECOMMENDATIONS MADE

At the 2012 UPR, a number of recommendations were made to Ghana to continue to improve mental health, combat maternal mortality, improve the registration of people at birth and provide access to universal health care. Some progress has been made in several areas of the recommendations. As an example, birth registration increased from about 30% in 2000 to over 60% in 2010. Ghana has also launched a new automated birth registration system to make registration of new babies quick and easy.

NATIONAL FRAMEWORK

Ghana is a state party to several instruments on the Human Right to Health. These include the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW), International Covenant on Civil and Political Rights (ICCPR), International Covenant on Economic, Social and Cultural Rights (ICESCR), Convention against Torture (CAT). Others are the African Charter on Human and Peoples’ Rights (ACHPR) and its Protocol on the Rights of Women in Africa (Maputo Protocol) as well as the Convention on the Rights of the Child. Ghana is also party to the Universal Health Coverage and Promotion of Primary Health Care for All as stipulated in the WHO Guidelines 2014.

Chapter Five of Ghana’s 1992 Constitution promotes and ensures the protection of human rights and SDG3 projects that by 2030 Ghana as part of the global community must reduce the global maternal mortality ratio to less than 70 per 100,000 live as well as under five mortality. The global community target is to reduce neonatal mortality to as low as 12 per 1,000 live births and under 5 mortality to at least 25 per 1,000 live births. Currently in Ghana, maternal mortality rate stands at 350 per 100,000 births and under five mortality rate stands at 60 per 1,000 live births.

Ghana continues to build on improvements in birth registration with a new automated birth registration system to make registration of new babies quick and easy. Pre-natal and Post-natal services ensure the development and safety of pregnant mothers. Ghana has community health centers known as Community Base Health Planning Services (CHPS) that provide primary health care to citizens where they need it. There have been efforts to create awareness on adolescent reproductive health rights and sexuality while immunization programs have been expanded.

Ghana has developed the Ghana Family Planning Costed Implementation Plan, 2016–2020 (GFPCIP) to increase the modern contraceptive prevalence rate (CPR) from 22.2% to 30% amongst married and from 31.7% to 40% amongst unmarried, sexually active women by 2020.

CHALLENGES

1. Inadequate investments in Reproductive, Maternal, Neonatal and Child Health

<table>
<thead>
<tr>
<th>Metric</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total population (2012)</td>
<td>25,366,000</td>
</tr>
<tr>
<td>Density of doctors, nurses, and midwives</td>
<td>10.2 per 10,000 population</td>
</tr>
<tr>
<td>Births attended by skilled health personnel</td>
<td>68%</td>
</tr>
<tr>
<td>Maternal mortality rate</td>
<td>380 per 100,000 live births</td>
</tr>
<tr>
<td>Newborn mortality rate</td>
<td>28 per 1,000 live births</td>
</tr>
<tr>
<td>Under-5 mortality rate</td>
<td>72 per 1,000 live births</td>
</tr>
</tbody>
</table>

**Source:** Countdown to 2015 (2014). Fulfilling the Health Agenda for Women and Children: the 2014 Report.
2. Ghana Family Planning Costed Implementation Plan (GFPCIP), 2016–2020 not fully implemented

2. Family planning does not only promote good health but also improves livelihoods and promotes economic growth, accelerating development. Failure to fully implement the GFPCIP does not only deny Ghana the opportunity to improve CPR but a boost in economic growth and productivity that can raise incomes and allow families and governments to improve the well-being of future generations.

3. Financial lapses in the National Health Insurance Scheme (NHIS) and the Government’s inability to include family planning services in the NHIS.

3. This negatively affects maternal and child health as affordability becomes an issue of great concern and increase rates maternal and child mortality.

4. Lack of Comprehensive Sexual Education (CSE) in schools and lack of well-resourced Adolescent-Friendly Corners in most health facilities

4. There is increasing rate of teenage pregnancies in schools and the communities despite efforts to create awareness on adolescent reproductive health rights and sexuality. There are also maternal deaths resulting from unsupervised deliveries and unsafe abortions.

RECOMMENDATIONS

1. Government must ensure that all Community-Based Health Planning Services (CHPS) compounds are resourced and functional to address the health emergencies and maternal health concerns and deliveries.

2. Government must ensure the full implementation of Family Planning Costed Implementation 2015, a document developed by Ghana Health Service and also ensure that the provision of Family Planning services are covered under the National Health Insurance Scheme (NHIS).

3. Ghana’s National Health Insurance Scheme must be financially sustained to be able to provide basic healthcare to mothers, babies and the aged.

4. Government must include Comprehensive Sexual Education (CSE) in schools as complementary handbooks. Health facilities must have well-resourced Adolescent-Friendly Corners by March, 2018, which are financed by internally generated funds.

ABOUT THIS FACT SHEET

This factsheet was prepared by: Mind Freedom Ghana/Concern Health Education/ Gender Violence Survivors Support Network/ Network of Women in Growth Ghana/ Amnesty International/ Community and Family Aid Foundation/ Women in the Lord’s Vineyard/ Grace to Grace Foundation/ Society and Youth Foundation/ Relive Ghana/ The Light Foundation Ghana (TLF)/ One Love Initiative Foundation/ Community Outreach Alliance/ Patient Friend Foundation (PFF)/ Community Youth Development Foundation (CYDEF)/ POS Foundation and KASA Initiative, under the Ghana Human Rights NGOs Forum.

REFERENCES:

New Automated Birth Registration System (May 2016)
Ghana Family Planning Costed Implementation Plan 2016
2016 Annual Report – Ghana Health Service
2014 Annual Report of the Family Health Division of Ghana Health Service
Ghana Family Planning Costed Implementation Plan, 2016–2020