

National report on monitoring: Follow up to the declaration of commitment on HIV/AIDS

Introduction

This report on Ghana is the national follow up on the UNGASS declaration.

I. Status at a Glance

A Ghana HIV/AIDS Strategic Framework 2001-2005 has been developed and is operational. This plan has been formulated in recognition of the developmental relevance of the disease. The framework provides for a multi sectoral and multi disciplinary response, providing broad guidelines for sector ministries, departments, agencies, district assemblies, the private sector, civil society at large to evolve such specific HIV/AIDS plans and activities as may be determined by their specific needs.

The framework is informed by the Ghana Poverty Reduction Strategy.

The Ghana AIDS Commission was established in 2000. The functions of the commission are:

- Formulation of comprehensive national policies and strategies
- Provide high level advocacy for HIV/AIDS prevention control.
- Provide effective leadership in national planning and support supervision
- Expand and coordinate the total national response to HIV/AIDSs
- Mobilise, control and manage resources and monitor their allocation and utilization.
- Foster linkages among stakeholders
- Promote research, information and documentation
- Monitor and evaluate all on-going HIV/AIDS activities.

The following guidelines and policy documents have been developed and are being operationalised.

- Guidelines for antiretroviral therapy in Ghana
- Guidelines for the management of opportunistic infections and other related HIV diseases.
- Policy on reproductive and sexual health
- Prevention of Mother to Child Transmission of HIV in Ghana

The Commission is currently in the process of developing an IEC strategy on HIV/AIDS

II. Overview of the HIV/AIDS epidemic

The HIV/AIDS epidemic has become a serious developmental problem in Ghana. The 2001 sentinel Surveillance results indicate that out of a total of 383 HIV positive cases 131 were between the ages 15-24 years. This puts the proportion of young people age 15-24 years who are HIV positive at 34.2%. The prevalence of HIV/AIDS among 15-24 years is 3.1%.

III. National response to HIV/AIDS epidemic

1. National Commitment and Action

The changes in commitment made by national stakeholders in the fight against HIV/AIDS during the period January –December 2002 are based and embedded in the National HIV/AIDS Strategic framework. The framework provides guiding principles and prioritised strategies on the prevention of HIV transmission as well as the provision of care and support for people infected and effected by HIV/AIDS. It also provides an enabling legal and ethical environment. It provides the basis for monitoring and evaluating the National HIV/AIDS STI policy. This framework outlines the overall institutional arrangement for decentralised implementation.

Sector Ministries, departments, agencies within the period had integrated HIV/AIDS into their sector plans.

To promote multi-sectoral action to scale up efforts, the national response was decentralised utilising the available decentralised structures of the Public Administrative Systems. Regional and Districts AIDS Committees were formed. HIV/AIDS monitoring and Evaluation focal persons were appointed. This decentralisation ensured community participation, and active involvement of Regional Coordination Councils, District Assemblies and individual responsibility in all HIV/AIDS programmes.

2. National Programmes and behaviour

During the period under review, 16 Ministries, Departments and Agencies, 133 Non governmental Organisations and 3600 Community Base Organisation were supported to carry out specific HIV/AIDS programmes in the following areas

- Care and Support
- Peer Education
- Advocacy
- Awareness Creation through Information, Education and Communication and BCC
- Condom Distribution
- Counselling
- IEC
- HIV/AIDS Capacity Building
- HIV/AIDS Manual and Guidelines development

The target groups were:

- People living with and affected by HIV/AIDS
- Youth- in school and out of school
- Orphans and Vulnerable Children
- Women
- Migrant workers e.g. miners
- Mobile workers e.g. Truck Drivers, Market women
- Commercial Sex workers
- Security and Uniformed services
- Civil Servants

Indicators

Percentage of schools with teachers who have been trained in life-skill-based HIV/AIDS education and who taught it during the last academic year.

The datasource is the Ministry of Education. Currently data for this indicator is not available. There is a pending National Teachers Census planned for this year. Discussions on adding questions, which will enable the computation of this indicator are on going.

Percentage of large enterprises / companies that have HIV/AIDS workplace policies and programmes.

Major stakeholder identified is the Ghana Employers Association. Desk review is underway to obtain the data for the computation of this indicator.

Percentage of patients with STIs at health care facilities who are appropriately diagnosed, treated and counselled

Major stakeholder is the Ministry of Health. Current information is inadequate for the calculation of this indicator.

Percentage of HIV – infected pregnant women receiving a complete course of antiretroviral prophylaxis to reduce the risk of MTCT

Major stakeholder identified is FHI. Data on MTCT is being collected from two sites in Ghana. According to FHI this data is incomplete to compute the indicator. Mother to Child Transmission interventions are being piloted in only 2 studies.

Percentage of people with advanced HIV infection receiving antiretroviral combination therapy.

Major stakeholder identified is MOH. Currently no data is available as modalities for the use of ARVs is being developed.

Percentage of IDUs who have adopted behaviours that reduce transmission of HIV.

Not applicable to Ghana

Percentage of young people aged 15-24 who both correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission.

The Ghana Statistical Services is the data source. The 1998 Ghana Demographic Health Survey provides the data for computing this indicator.

Percentage of young people aged 15-24 reporting the use of condoms during sexual intercourse with a non-regular sexual partner.

The data source is the Ghana Statistical Services. The 2003 Ghana Demographic Health Survey may enable us compute this indicator.

Ratio of current school attendance among orphans to that among non-orphans.

The data source is the Ministry of Education. Currently no data is available from the Ministry on orphans though plans are underway to include questions in the annual census which will enable computation of this indicator.

IV. Major challenges faced and actions needed to achieve the goals and targets

Major challenges faced include the

- need to develop an institutional and decentralised structure for the coordination of M/E activities at national, regional and district levels
- the need to develop well focused goals, targets and M/E plans at sectoral, regional and district levels
- the requirement for consensus building in the development and application of indicators,
- the requirement for streamlined data collection and analysis and improved logistics and technology.
- Additionally, resources are required to address these challenges

Actions that have been taken include the establishment of Regional AIDS Committees, District AIDS Committees, M/E focal persons at national, regional and district levels. Additionally, consensus building on the selection and adoption of indicators has been carried out at all levels. A national M/E plan and framework have been developed as a result of consultations with partners and key stakeholders.

The primary stakeholders providing data for constructing the core indicators for monitoring the Declaration of Commitment on HIV/AIDS are as follows:-

- Ghana Statistical Services
The Statistical Services is to provide us with information on Knowledge and Behaviour through the Ghana Demographic Health Survey. The 1998 GDHS did not specifically ask the five sets of prompted questions
 - Can the risk of HIV transmission be reduced by having sex with only one faithful, uninfected partner?
 - Can the risk of HIV transmission be reduced by using condoms?
 - Can a healthy-looking person have HIV?
 - Can a person get HIV from mosquito bites?
 - Can a person get HIV by sharing meals with someone who is infected?

However, these questions were possible close-ended responses provided for the question “What can a person do (this question was preceded by “is there anything a person can do to avoid getting AIDS or the virus that causes AIDS” (M603 and M604)

On young people's condom use with non-regular partners

- In the last 12 months, have you had sexual intercourse with a non-regular partner who was neither your spouse nor someone you were living with?
- If the answer to the question is yes How many non-regular partners have you had sex with in the last 12 month?
- If the answer to question 1 is yes Did you (or your partner use a condom the last time you had sex with your most recent non-regular partner.

These sets of questions will be added to the pending GDHS (2003)

- Ministry of Education
This Ministry is responsible for life-skill-based HIV/AIDS education in schools. A proposed school-based survey is yet to be carried out. Principals, head of schools and teachers will be interviewed. We anticipate that the following questions will be asked to enable us compute the percentage of schools with teachers who have been trained in life-skills-based HIV/AIDS education and who taught it during the last academic year.

The questions are:

- Does your school have at least one qualified teacher who has received training in participatory life-skills-based HIV/AIDS education in the last five years?

- If the answer is yes did this person teach life skills-based HIV/AIDS education on a regular basis to each grade in your school throughout the last academic year?

- **Family Health International**

FHI (Ghana) is currently assisting in MTCT activities in some districts in Ghana. The impact indicator Percentage of HIV infected infants born to HIV infected mothers cannot be obtained because the data is currently not available. This indicator can only be obtained from data collected from mother-infant pair when the infant is 18 months. Secondly the child's HIV status should ideally be confirmed using PCR to determine the presence of HIV antigen if waiting for 18 months is unacceptable. PCR is not routinely done therefore routine data on it is not available.

Data on percentage of HIV infected pregnant women receiving a complete course of antiretroviral prophylaxis is obtained from two sites in Ghana in the Manya Krobo districts. The figures obtained are from these two sites. The data is collected for this indicator is jointly the responsibility of the Ministry of Health and FHI

- **Ghana Employers Association**

The Ghana Employers Association is the umbrella organisation for all employers in Ghana. A review of the activities carried out by GEA shows that surveys conducted during the period under review did not include questions on workplace personnel policies and procedures.

V. Support required from country development partners

Apart from the Government of Ghana support, the Government has obtained IDA credit from the World Bank and has also obtained a DFID grant to support the national response. More support is required in the areas of Technical Assistance, capacity enhancement, sharing of best practices and development and implementation of facility surveys.

VI. Monitoring and Evaluation environment

Regional and District Monitoring and Evaluation focal persons for all 10 Regions and 110 Districts in the country have been nominated and established. Their roles and responsibilities include the following:

Regional M/E focal persons

- Identify and prepare an inventory with the help of the District Monitoring and Evaluation Focal Persons on all NGOs, CBOs, MDAs, FBOs, Private Companies and Development Partners working on HIV/AIDS within the Region.
- Document the major activities on HIV/AIDS in the Region.
- Interact with the District M/E Focal Persons, collate and compile their monthly reports.
- Prepare quarterly reports on Regional HIV/AIDS activities to the Ghana AIDS Commission.
- Arrange dissemination of information on HIV/AIDS at all levels within the Region.
- Prepare and implement a Regional M/E plan.
- Act as a resource point for information on HIV/AIDS relevant to the Region.
- Organise fora for District M/E focal persons to encourage dissemination of best practice.
- Facilitate the work of the Regional AIDS Committee as member/secretary by performing tasks such as organisation of meetings, record keeping etc.

District M/E focal persons

- The District Monitoring and Evaluation Focal Person shall collaborate with Assembly members, Unit Committees, Chiefs/ Opinion Leaders to identify, prepare an inventory of and monitor all NGOs, CBOs, FBOs, and other institutions working on HIV/AIDS related activities in the district.
- Document and review NGO proposals submitted to the district in collaboration with the DAC and make recommendations for endorsement to the DCE.
- Ensure appropriate documentation and screening of CBO proposals submitted to the district.
- Prepare monitoring and evaluation plans for HIV/AIDS activities within the district through the selection of appropriate indicators.
- Collect monthly progress reports on activities of NGOs, CBOs, FBOs, and institutions working on HIV/AIDS related activities in the district and forward these to Regional M/E focal persons.
- Facilitate the work of the DAC and technical team as member/secretary
- Act as resource person for district level information on HIV/AIDS.
- Assist NGOs, CBOs, FBO, and institutions working on HIV/AIDS related activities in the District to identify sources of funding for HIV/AIDS activities.

Consultation process for the national report on monitoring the follow up to the declaration of commitment on HIV/AIDS

June – September 2002

Consultative meetings held with Development Partners, NGOs, Regional/District M/E Focal Persons, MDAs, to discuss UNGASS Requirements

December 2002

Consensus building meeting organised by Ghana AIDS Commission in collaboration with key data sources/stakeholders

January 2003

Request for data from stakeholders

February 25th 2003

Deadline for submission of data to GAC by stakeholders

February 27th 2003

Stakeholders meeting to review data, plan report writing.

April 2003

Forward Ghana UNGASS National Report To UNAIDS, Geneva

April – Dec 2003

Consultations with stakeholders on the need to include UNGASS indicators in the design of their surveys and plan for next reporting

Jan – Dec 2004

Data collection

National Composite Policy Index

Strategic Plan	1. Country has developed multisectoral strategies to combat HIV/AIDS	YES	National Strategic Framework 2001-2005
	2. Country has integrated HIV/AIDS into its general development plan	YES	Ghana Poverty Reduction Strategy (GPRS)
	3. Country has a functional national multisectoral HIV/AIDS management/coordination body	YES	Ghana AIDS Commission
	4. Country has a functional national HIV/AIDS body that promotes interaction among government, the private sector, and civil society	YES	Ghana AIDS Commission
	5. Country has a functional HIV/AIDS body that assists in the coordination of civil society organisations	YES	Various NGO – umbrella groups at National and Regional levels
	6. Country has evaluated the impact of HIV/AIDS on its socio-economic status for planning purposes	NO	
	7. Country has a strategy that addresses HIV/AIDS issues among its national uniformed services (including armed forces and civil defence forces)	YES	

Prevention	<ol style="list-style-type: none"> 1. Country has a general policy or strategy to promote IEC on HIV/AIDS 2. Country has a policy or strategy promoting reproductive and sexual health education for young people 3. Country has a policy or strategy that promotes IEC and other health interventions for groups with high or increasing rates of HIV infection 4. Country has a policy or strategy that promotes IEC and other health interventions for cross-border migrants 5. Country has a policy or strategy to expand access, including among vulnerable groups, to essential preventative commodities 6. Country has a policy or strategy to reduce MTCT 	<p>IN PROGRESS</p> <p>YES</p> <p>IN PROGRESS</p> <p>IN PROGRESS</p> <p>IN PROGRESS</p> <p>YES</p>	<p>National IEC Integrated Strategy</p> <p>Adolescent Reproductive Health Policy</p> <p>Prevention of Mother to Child Transmission of HIV</p>
Human Rights	<ol style="list-style-type: none"> 1. Country has laws and regulations that protect against discrimination of people living with HIV/AIDS 2. Country has laws and regulations that protect against discrimination of groups of people identified as being especially vulnerable to 	<p>YES</p> <p>NO</p>	<p>National HIV/AIDS and STI Policy</p>

	HIV/AIDS		
	3. Country has a policy to ensure equal access for men and women to prevention and care, with emphasis on vulnerable groups	NO	
	4. Country has a policy to ensure that HIV/AIDS research protocols involving human subjects are reviewed and approved by an ethics committee	YES	
Care & Support	1. Country has a policy or strategy to promote comprehensive HIV/AIDS care and support with emphasis on vulnerable groups	IN PROGRESS	Guidelines for antiretroviral therapy in Ghana
	2. Country has a policy or strategy to ensure or improve access to HIV/AIDS related medicines, with emphasis on vulnerable groups	IN PROGRESS	
	3. Country has policy or strategy to address the additional needs of orphans and other vulnerable children	IN PROGRESS	

ANNEX 1

Preparation/consultation process for the National Report on monitoring the follow-up to the Declaration of Commitment on HIV/AIDS

1) Which institutions/entities were responsible in filling out the indicators forms?

a) NAC or equivalent	<u>Yes</u>	No
b) NAP	Yes	<u>No</u>
c) Others (please specify)	Yes	No

2) With inputs from:

Ministries:

Education	<u>Yes</u>	No
Health	<u>Yes</u>	No
Labour	<u>Yes</u>	No
Foreign Affairs	Yes	<u>No</u>
Others (please specify)	Yes	No
Ghana Statistical Services	<u>YES</u>	

Civil society organizations	<u>Yes</u>	No
People living with HIV/AIDS	<u>Yes</u>	No
Private sector	<u>Yes</u>	No
UN organizations	Yes	<u>No</u>
Bilaterals	Yes	<u>No</u>
International NGOs	<u>Yes</u>	No
Others (please specify)	Yes	<u>No</u>

3) Was the report discussed in a large forum? **Yes** No

4) Are the survey results stored centrally? **Yes** No

5) Is data available for public consultation? **Yes** No

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Date: 5/4/03

Signature: _____

**ANNEX 2
NATIONAL COMPOSITE POLICY INDEX QUESTIONNAIRE**

Strategic plan

1. Has your country developed multisectoral strategies to combat HIV/AIDS? (Multisectoral strategies should include, but not be limited to, the health, education, labour, and agriculture sectors)

Yes X	No	N/A
<p>Comments: A national strategic framework has been developed and is being implemented. The National strategic framework provides broad guidelines for sector Ministries, Departments, Agencies, District Assemblies, the Private Sector, Civil Society at large to evolve and implement specific HIV/AIDS strategic plans and play their role in a multi-sectoral process.</p>		

2. Has your country integrated HIV/AIDS into its general development plans (such as its National Development Plans, United Nations Development Assistance Framework, Poverty Reduction Strategy Papers and Common Country Assessments)?

Yes X	No	N/A
<p>Comments: This has been done through consultations during the development of the Ghana Poverty Reduction Strategy. (GPRS)</p>		

3. Does your country have a functional national multisectoral HIV/AIDS management/coordination body? (Such a body must have terms of reference or equivalent, defined membership, action plans and staffing support, and should have met at least once in the last 12 months.)

Yes X	No	N/A
<p>Comments: The Ghana AIDS Commission is the national supraministerial multisectoral coordination body under the office of the President of Ghana with functions of advising the Government of Ghana, advocacy, formulation of national plans and guidelines, monitor and evaluate, identify, mobilise and manage funds. The Ghana AIDS Commission comprises 46 members, and they meet every quarter with 15 of them representing various Ministries i.e either the Minister or the Deputy. Other members include representatives of civil society organisations, faith based organisations, private sector and PLWHA.</p>		

4. Does your country have a functional national HIV/AIDS body that promotes interaction among government, the private sector and civil society? (Such a body must have terms of reference or equivalent, defined membership, action plans and staffing support, and should have met at least once in the last 12 months.)

Yes X	No	N/A
Comments: Please refer to question 3. The Ghana AIDS Commission performs this action.		

5. Does your country have a functional HIV/AIDS body that assists in the coordination of civil society organizations? (Such a body must have terms of reference or equivalent, defined membership, action plans and staffing support, and should have met at least once in the last 12 months.)

Yes X	No	N/A
Comments: Yes these umbrella groups exist at national, regional and district levels.		

6. Has your country evaluated the impact of HIV/AIDS on its socioeconomic status for planning purposes?

Yes X	No	N/A
Comments: In progress		

7. Does your country have a strategy that addresses HIV/AIDS issues among its national uniformed services, including armed forces and civil defence forces?

Yes X	No	N/A
Comments:		

Prevention

1. Does your country have a general policy or strategy to promote information, education and communication (IEC) on HIV/AIDS?

Yes X	No	N/A
Comments: Development of an Integrated National IEC strategy is in progress in consultation with key partners.		

2. Does your country have a policy or strategy promoting reproductive and sexual health education for young people?

Yes X	No	N/A
Comments: Adolescent Reproductive Health Policy is available developed through broad consensus building under the auspices of the National Population Council.		

3. Does your country have a policy or strategy that promotes IEC and other health interventions for groups with high or increasing rates of HIV infection? (Such groups include, but are not limited to, IDUs, MSM, sex workers, youth, mobile populations and prison inmates.)

Yes X	No	N/A
Comments: Key partners working in promoting IEC amongst vulnerable groups have specific strategies. Additionally, the Integrated National IEC strategy is in progress.		

4. Does your country have a policy or strategy that promotes IEC and other health interventions for cross-border migrants?

Yes	No X	N/A
Comments:		

5. Does your country have a policy or strategy to expand access, including among vulnerable groups, to essential preventative commodities? (These commodities include, but are not limited to, condoms, sterile needles and HIV tests.)

Yes X	No	N/A
<p>If yes, please list</p> <p>Groups: Commodities:</p>		
<p>Comments: National guidelines for development and implementation of HIV Voluntary Counselling and Testing in Ghana is in the process of development.</p>		

6. Does your country have a policy or strategy to reduce mother-to-child HIV transmission?

Yes X	No	N/A
<p>Comments: Guidelines. Prevention of Mother to child transmission of HIV in Ghana has been developed for implementation.</p>		

Human rights

1. Does your country have laws and regulations that protect against discrimination of people living with HIV/AIDS (such as general non-discrimination provisions and those that focus on schooling, housing, employment, etc.)?

Yes	No X	N/A
Comments:		

2. Does your country have laws and regulations that protect against discrimination of groups of people identified as being especially vulnerable to HIV/AIDS discrimination (i.e., groups such as IDUs, MSM, sex workers, youth, mobile populations, and prison inmates)?

Yes	No X	N/A
If yes, please list groups:		
Comments:		

3. Does your country have a policy to ensure equal access, for men and women, to prevention and care, with emphasis on vulnerable populations?

Yes	No X	N/A
Comments:		

4. Does your country have a policy to ensure that HIV/AIDS research protocols involving human subjects are reviewed and approved by an ethics committee?

Yes X	No	N/A
Comments:		

Care and support

1. Does your country have a policy or strategy to promote comprehensive HIV/AIDS care and support, with emphasis on vulnerable groups? (Comprehensive care includes, but is not limited to, VCT, psychosocial care, access to medicines, and home and community-based care.)

Yes X	No	N/A
<p>If yes, please list</p> <p>Groups: Commodities:</p>		
<p>Comments:– The National Guidelines for Development and Implementation of HIV Voluntary Counselling and Testing in Ghana is in the process of development.</p>		

2. Does your country have a policy or strategy to ensure or improve access to HIV/AIDS-related medicines, with emphasis on vulnerable groups? (HIV/AIDS-related medicines include antiretrovirals and drugs for the prevention and treatment of opportunistic infections and palliative care.)

Yes X	No	N/A
<p>If yes, please list</p> <p>Groups: Commodities:</p>		
<p>Comments: Draft ARV guidelines, Prevention of Mother to Child Transmission of HIV in Ghana is available.</p>		

3. Does your country have a policy or strategy to address the additional needs of orphans and other vulnerable children?

Yes X	No	N/A
Comments: In progress		

ANNEX 3

Country: Ghana

Indicator: Young People's knowledge about HIV prevention

Data Source Name

Ghana Statistical Services

Data Source Type

Ghana Demographic Health Survey -1998

Data Collection period

15	11	98
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 to

15	02	99
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	Males		Females			
Both						
1. HIV can be avoided by having sex With only one faithful uninfected partner	85	174	333	568	418	742
2. HIV can be avoided by using condoms	82	143	181	216	263	359
3. A healthy looking person can get HIV	141	278	477	734	618	1012
4. A person can get HIV from mosquito bites	118	279	606	1164	724	1443
	Urban	Rural	Urban	Rural	Urban	

Rural

Number of respondents giving the correct
answers to all the above questions

8	28	87	120	95	148
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Number of respondents aged 15-24 who gave
Answers (including don't know) to all of the
above 4 questions or had never heard of HIV

177	384	608	1168	785	1552
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Percentage of the national population (age 15-24)
who lived in Urban areas

17.8	16.8	17.3
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Indicator score by sex and residence

Divide the number of respondents who gave
correct answers to all 4 questions by the
number who answered to all 4 questions and
multiply by 100

4.5	7.3	14.3	10.3
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