



Summary Report of the Consultations on the State of Universal Health Coverage in Ghana

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1. Introduction

BasicNeeds Ghana led a consultation workshop in June 2022 to track the progress towards achieving universal health coverage in Ghana by 2030. The consultation was part of a global initiative by the Civil Society Engagement Mechanism for UHC2030 (CSEM) to collect civil society inputs for the UHC2030 State of the UHC Commitment multi-stakeholder review. The sessions in Ghana were supported by UNAIDS, PMNCH, and United for Global Mental Health along with the CSEM Secretariat, hosted by Management Sciences for Health and WACI Health.

A total of 65 organisations and individuals participated in the face-to-face, virtual and one-on-one interviews. There were three strategic focus groups who took part in these consultations, including civil society organisations (CSOs), people with lived experience, service users, young people, women and government officials.

2. Challenges to achieving UHC

The consultations identified the following challenges to achieving UHC:

1. A lack of investment in and prioritisation of key areas in healthcare, such as mental health
2. A lack of incentives and scholarship packages for health workers, especially mental health workers
3. The effect of the Covid-19 pandemic on the health care system in Ghana and the possibility of future emergencies
4. Ghana's ineffective and dysfunctional National Health Insurance Scheme, which does not cover all conditions, especially mental health conditions
5. The poor or low integration of mental health into primary health care
6. Poor funding for community-level mental health and rehabilitation programmes
7. The lack of psychosocial services and counselling for people with mental health conditions, and for the population of Ghana as a whole
8. The poor integration of mental health care in the prevention and treatment of physical diseases, such as TB, HIV, diabetes and other non-communicable diseases, including NTDs



9. The government's focus on flagship programmes to the detriment of some areas specified in the UHC 2030 roadmap
10. The poor implementation of international conventions and protocols the government has signed up to and ratified
11. The difficulty in getting access to antiretroviral drugs
12. The significant stigma suffered by people living with HIV, disability and mental illness
13. The financial barriers that prevent people living with HIV, TB and mental health conditions from accessing quality health care
14. Geographical barriers can limit people's access to help services for HIV, TB, mental illnesses in Ghana.
15. The attitude of health workers is still a barrier for minority groups in accessing comprehensive health care
16. Ghana's maternal, child and infant mortality rates are still high
17. The sexual and reproductive health rights of Ghana's poorest and most vulnerable people are still not respected, and they don't get equal access to the relevant services
18. Sexual and reproductive health services for young people, women and the vulnerable are still not prioritised in Ghana
19. The health system doesn't give adolescent health rights and education the needed attention, leaving NGOs to do most of the work to raise awareness in Ghana



"There is an Ineffective health insurance system where even drugs on insurance are most often prescribed for payment, while psychotropic and anti-convulsant are not covered by insurance, and in short supply by government; thus, causing relapse of mental health patients"

Focus Group of CSOs



3. Measures to strengthen the health system in Ghana and achieve UHC

The consultation led to the following measures being proposed to the government to improve the health system in Ghana:

1. Improve health service provision for key groups, e.g., children, young people, the elderly, health workers, and people with mental health conditions.
2. Revise in-country health laws to follow international conventions, covenants and treaties signed and ratified by the Ghanaian government
3. Increase investment in mental health care, including to provide mental health coverage in the National Health Insurance Scheme
4. Ensure the full integration of mental health care in primary health services across all levels of the health sector and for all types of major diseases
5. Provide incentives for health workers to return to the country's health services and to ensure their retention
6. Ensure access to essential medicines and counselling services, especially for excluded groups such as people with HIV/AIDS, TB and mental health conditions
7. Integrate maternal, newborn and child health services across the health system, while incorporating MHPSS services for mothers who experience depression and other mental health conditions
8. Prioritise adolescents' health care, and ensure that services are provided with confidentiality and informed consent
9. Put measures in place to ensure that sexual and reproductive health for the most vulnerable people, such as those with mental illnesses and HIV/AIDS, are prioritised under UHC. For example, all people, including those with mental health conditions should have the right to choose whether to have an abortion
10. Sexual and reproductive health rights, education and services for young people should be integrated into the country's health promotion agenda, as stated in the Committee on Economic, Social and Cultural Rights (CESCR) and the Committee on the Elimination of Discrimination against Women (CEDAW).

4. Conclusion

To be able to achieve UHC, the government of Ghana needs to increase investment in the health sector. It must also distribute resources more equitably to the most neglected populations and for the most neglected diseases. And it must work to better integrate mental health into primary health care.

CSOs are pushing to make sure the UHC road map is effectively implemented in Ghana. But if the government does not rise to meet the challenges this report outlines, it will find it difficult to achieve UHC by 2030 as envisioned in the roadmap.

