

# Appeal 2003-2004



International Federation  
of Red Cross and Red Crescent Societies

## GHANA

### Appeal no. 01.31/2003

*Click on programme title or figures to go to the text or budget*

	2003 (In CHF)	2004 <sup>2</sup> (In CHF)
<b>1. Health and Care</b>	<b>217,580</b>	<b>230,000</b>
<b>Total</b>	<b>217,580<sup>1</sup></b>	<b>230,000</b>

#### Introduction

Ghana is a small but wealthy country in West African terms. Major health problems include communicable diseases, poor sanitation and poor nutrition in the north of the country. Even though the country's economy is improving steadily, the government still does not prioritise spending on health.

The Ghana Red Cross is a rather strong West African National Society that enjoys a good public image, a large base of community volunteers and many partnerships with international and local humanitarian organisations. The National Society is well positioned to fill gaps in state-provided services, especially through its community-based health programming. Therefore, the Federation Secretariat aims to further develop the National Society's project management and volunteer management through its existing community-based projects.

#### National Context

Ghana's economy is based on agriculture accounting for 36% of the GDP and 60% of employment. Major health problems are communicable diseases, poor sanitation and poor nutrition. There is a lack of food security in some regions due to inadequate rainfall, poor soil quality, high population density and long periods of drought (eight months per year).

The government estimates that only 45% of the rural population has access to health services. More than half (64%) the population, however, has access to potable water and adequate sanitation facilities. Some services, particularly vaccinations, are strong. More than three-quarters of one-year olds have been vaccinated against measles and tuberculosis (1999 data from UNDP). Under-five mortality was 102 per 1,000 live births in 2000, down from 190/1,000 thirty years ago. Still public expenditure on health was only 1.7% of the GDP in 1999 (UNDP).

The government plans further liberalisation in the health sector, having passed legislation permitting private practitioners to fill gaps in the state-provided services. The reforms, scheduled for implementation by 2003, should pave the way for more private hospitals in the capital, Accra, and the integration of rural mission hospitals into the national network. (EIU)

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<sup>1</sup> **USD 149,24,927 or EUR 147,932.**

<sup>2</sup> **These are preliminary budget figures for 2004, and are subject to revision.**

### Human Development Indicators at a Glance

	Ghana	Sub-Saharan Africa	World
Life expectancy at birth (years)	56.8	48.7	66.9
Adult literacy rate (% age 15 and above), 2000	71.5	61.5	~
Adult literacy rate (female as % of male), 2000	78	77	~
Combined primary, secondary and tertiary gross enrolment ratio (%), 1999	42	42	65
GDP per capita (PPP\$), 2000	1,964	1,690	7,446
People living with HIV/AIDS, adults (% age 15-49), 2001	3	9	1.2
Refugees (thousands), in/out, 2000	13/13	~	~

Source: UNDP HDR 2002

### National Society Priorities

The Ghana Red Cross (GhRC) is active in all ten administrative regions of the country and in 75 out of 110 districts: its network covers about 60% of the country. It has a well-defined and functioning management structure. Its constitution clearly defines the functions of the policy-making bodies and the implementation bodies. The GhRC has had or continues to have a working relationship with the government, UNICEF, Save the Children, UNHCR, Action Aid, GTZ, UNAIDS, USAID, and the EU in addition to the Red Cross Movement in its programmes of health, social welfare, youth, dissemination, emergency relief and disaster preparedness.

Per an external audit on its activities in 1992, the National Society has continued to focus on improving its management, programme management, resource development and its partnership agreements with other organisations.

### At a Glance

	YEAR	COMMENT
Statutes	yes	Last revision unknown
National Disaster Plan	yes	Revision planned
National Development Plan	2001-2005	
CAS	ongoing	Swiss RC is involved
Self Assessment	2002	
Elections	1999	General Assembly
Yearly audit	no	

### Main Strengths

- Good public image.
- Community volunteers.
- Strong external partnerships.
- Credibility.
- National coverage.

### Main Challenges

- Financial management.
- Clear lines of responsibility between governance and management.
- Strategic plan.

The GhRC's priorities are based on its Strategic Plan of 2001-2005:

- Training in project management HQ and district level.
- Development of communication strategy for image building.
- Establishing a volunteer management system.
- Increasing GhRC's self-financing from 55 to 80% of core costs.
- Rapid response to disasters in 10 regions and 40 districts (Decentralisation of disaster response teams).
- Training selected staff in advocacy and lobbying skills.
- Reducing vulnerability of women and children in rural and deprived urban areas to communicable and other endemic diseases (minimum 5 communities per district).
- Increasing access by women in rural and deprived urban areas to available food and improved utilisation (minimum 5 communities per district).
- Make GhRC youth more visible and independent in planning, implementing and funding their own programmes.

### **Red Cross and Red Crescent Priorities**

International Federation: The Federation has supported the GhRC on emergency relief operations and its measles campaign in 2001/02, as well as institutional and resource development in the past.

ICRC: In recent years, the ICRC has been supporting the GhRC to strengthen its ability to respond to emergency situations in the event of conflict and to provide effective and efficient tracing services and to carry out dissemination activities to promote the Fundamental Principles and to raise awareness of IHL among members of the armed forces, the police and political parties.

Bilateral: The Swiss Red Cross has a delegate who has been in country since 2001, supporting the GhRC with development, including its forthcoming CAS. The Swiss Red Cross is also constructing a new headquarters building for the National Society. In addition, the Swiss Red Cross has supported GhRC rural health projects and a hostel for homeless young women. The German Red Cross has supported GhRC primary health projects for children in rural areas as well as income generation and fund-raising projects. The American Red Cross and Canadian Red Cross support the GhRC's 'child survival' health project.

### **Primary support from the Movement in 2002**

<b>Partner</b>	<b>Health</b>	<b>Relief</b>	<b>Disaster Management</b>	<b>Humanitarian Values</b>	<b>Organisational Development</b>	<b>Other</b>
ICRC			xx			xx
Federation*	xx					
Swiss RC	xx				xx	xx
German RC	xx				xx	
American RC	xx					
Canadian RC	xx					

*\*Federation support comes from Swedish RC and American RC*

### **Priority Programmes for Secretariat Assistance**

The National Society agreed with the Federation Secretariat to Secretariat support on its priority of community health. Thus the Secretariat will be supporting the GhRC to develop better

volunteer management and project reporting through its HIV/AIDS/STDs awareness and prevention and community-based health care programming.

## **1. Health and Care W** *<Click here to return to the title page>*

### **Background and achievements/lessons to date**

#### Background:

- Susceptibility to HIV/AIDS and STDs due to poverty, ultimately leading to rural-urban migration for commercial sex work.
- Stigma and denial with regard to HIV/AIDS, making care and support for PLWHA and those affected by HIV/AIDS a daunting challenge.
- High under-five mortality rates (due to Acute Respiratory Illnesses, diarrhoea diseases, malaria, measles).
- Waterborne and hygiene related illnesses.
- Endemic for malaria.
- Guinea worm disease still prevalent.
- Low access to health care services.

#### Achievements:

- HIV/AIDS prevention activities among youth, using the peer education strategy.
- Child Survival programme.
- Promotion of Maternal and Child/Reproductive health through mothers' clubs.
- Well-trained, enthusiastic and wide network of volunteers.
- Well established mothers clubs throughout the country.
- Eye care programme.
- Strong partnerships at the international, national and local levels, and good collaboration with the Ministry of Health.

#### Lessons learned:

- Need to address motivation aspects of volunteering, including maintaining existing network of volunteers.
- Need to strengthen reporting at all levels.

### **Overall Goal**

To contribute towards the reduction of morbidity and mortality linked to childhood illnesses, and transmission of HIV/AIDS/STDs in Ghana.

### **Programme Objective**

The Ghana Red Cross has reinforced its efforts to combat childhood illnesses, and HIV/AIDS/STDs among youth in selected regions in Ghana, through intensified IEC and social mobilisation activities.

### **Expected Results**

1. HIV/AIDS/STDs prevention and care activities are increased in three regions (Central, Volta and Eastern).
  - Increased knowledge about HIV/AIDS/STDs transmission among in- and out-of-school youth in the target areas.
  - Quality of life of PLWHA improved in the selected districts through appropriate home-based care.
  - Increased capacity of the National Society to undertake HIV/AIDS/STDs prevention and care activities.

- Adoption of safer sex practices through the promotion of behaviour change, including access to condoms.
2. There is increased knowledge and appropriate practices regarding childhood illnesses among mothers in 30 communities of Lawra District, in Upper East Region.
- Updated vaccination cards of all children followed by 'Mothers' Clubs' volunteers, in the target communities, according to Expanded Programme of Immunisation standards.
  - Improved home-based management of malaria, diarrhoea, acute respiratory infections, breast feeding, and proper supplementary feeding.
  - Reinforced GhRC capacity to plan and manage the 'child survival' project effectively.

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# BUDGET 2003

## PROGRAMME BUDGETS SUMMARY

Appeal no.: 01.31/2003

Name: Ghana

PROGRAMME:

	Organisational Development	Health & Care	Disaster Management	Humanitarian Values	Federation Coordination	International Representation	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter & construction	0	0	0	0	0	0	0
Clothing & textiles	0	3,000	0	0	0	0	3,000
Food	0	0	0	0	0	0	0
Seeds & plants	0	0	0	0	0	0	0
Water & Sanitation	0	0	0	0	0	0	0
Medical & first aid	0	9,000	0	0	0	0	9,000
Teaching materials	0	150	0	0	0	0	150
Utensils & tools	0	0	0	0	0	0	0
Other relief supplies	0	9,000	0	0	0	0	9,000
<b>SUPPLIES</b>	0	21,150	0	0	0	0	21,150
Land & Buildings	0	11,016	0	0	0	0	11,016
Vehicles	0	0	0	0	0	0	0
Computers & telecom	0	0	0	0	0	0	0
Medical equipment	0	0	0	0	0	0	0
Other capital exp.	0	0	0	0	0	0	0
<b>CAPITAL EXPENSES</b>	0	11,016	0	0	0	0	11,016
Warehouse & Distribution	0	0	0	0	0	0	0
Transport & Vehicules	0	7,316	0	0	0	0	7,316
<b>TRANSPORT &amp; STORAGE</b>	0	7,316	0	0	0	0	7,316
Programme Support	0	14,142	0	0	0	0	14,142
<b>PROGRAMME SUPPORT</b>	0	14,142	0	0	0	0	14,142
Personnel-delegates	0	17,511	0	0	0	0	17,511
Personnel-national staff	0	61,827	0	0	0	0	61,827
Consultants	0	0	0	0	0	0	0
<b>PERSONNEL</b>	0	79,339	0	0	0	0	79,339
W/shops & Training	0	14,750	0	0	0	0	14,750
<b>WORKSHOPS &amp; TRAINING</b>	0	14,750	0	0	0	0	14,750
Travel & related expenses	0	42,792	0	0	0	0	42,792
Information	0	0	0	0	0	0	0
Other General costs	0	27,074	0	0	0	0	27,074
<b>GENERAL EXPENSES</b>	0	69,866	0	0	0	0	69,866
<b>TOTAL BUDGET:</b>	0	217,580	0	0	0	0	217,580