A CLOSER LOOK AT THE HEALTHCARE SYSTEM IN GHANA

LEVEL 5

LEVEL 4

LEVEL 3

LEVEL 2

LEVEL 1

POLICY OBJECTIVES:

- 1. Bridge the equity gaps in geographical access to health services
- 2. Ensure sustainable financing for healthcare delivery and financial protection for the poor
- 3. Improve efficiency in governance and management of the health system
- 4. Improve quality of health services delivery including mental health services
- 5. Enhance national capacity for the attainment of the health related MDGs and sustain the gains
- 6. Intensify prevention and control of non-communicable and other communicable diseases

Source: Health Sector Medium Term Development Plan, MoH, 2014, pg. 20

ш	
o	\$

HEALTHCARE FINANCING Health expenditure:	GHANA (2014)	SSA
per capita (current US\$)	\$58	\$98
total (% of GDP)	3.6%	5.5%
public (% of government expenditure)	6.8%	
public (% of total health expenditure)	59.8%	42.6%
External resources for health (% of total expenditure on health)	15.4%	11.2%
Out-of-pocket (% of total expenditure on health)	26.8%	34.5%

(World Bank, July 2016)

41%

HEALTH INSURANCE



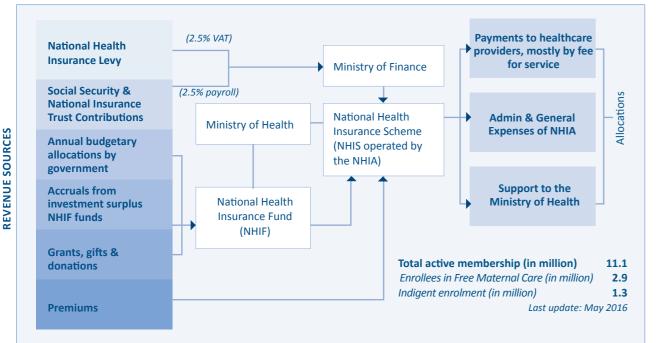
45% All health insurance / saving products (beneficiaries as % of the population)

National Health Insurance Scheme: It is intended to cover 95% of disease conditions and includes primary, secondary, tertiary, and pharmaceutical goods and services. The majority of the population is exempt from paying premiums.

Private Mutual Health Insurance Schemes (PMHIS) and Private Commercial Health Insurance Schemes (PCHIS): target corporate bodies and organised groups. They have a wide range of premiums and benefit packages.

Micro Health Insurance: at early stage of development, an example is Tigo where you can save money for healthcare expenses through monthly airtime deduction

ORGANISATION OF NHIS: SOURCES AND EXPENDITURES



POLICY AIM: "To improve access to quality, efficient and seamless health services that is gender and youth friendly and responsive to the needs of people of all ages in all parts of the country" Source: Health Sector Medium Term Development Plan, MoH, 2014, pg. 19

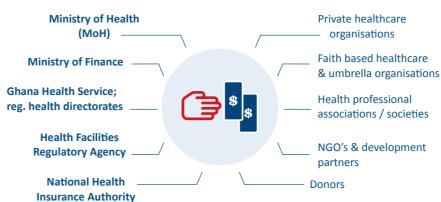
POPULATION	GHANA	(2015)	SSA
Total (in million)	27.4		1001.0
Ages 0-14 (% of total)	38.8%		42.9%
Ages 15-64 (% of total)	57.8%		54.0%
Rural (% of total population)	46.0%		62.3%
HEALTH OUTCOMES			
Life expectancy at birth, total (years)	61.3%	(2014)	58.6
Maternal mortality ratio (modeled estimate, per 100,000 live births)	319		547.0
Mortality rate, infant (per 1,000 live births)	42.8%		56.4
Fertility rate, total (births per woman)	4.2	(2014)	5.0
(World Bank, downloaded July 2016)			



MOBILE CELLULAR SUBSCRIPTIONS (PER 100 PEOPLE) World Bank Oct 2016

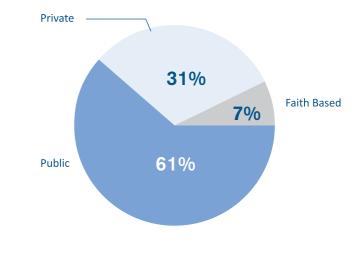
GHANA 115.0 (2014)

STAKEHOLDERS



Private facilities are mainly located in urban areas:

three main locations for private facilities are Kumasi (19%), Accra (17%) and Tema (8%).



LEVELS OF CARE AND RESPONSIBILITIES (total ca. 4,000 healthcare facilities)* 6 Tertiary hospitals | Private: 17% | FB: 0% 9 Regional hospitals | Private: 0% | FB: 0% District hospitals (364) | Private: 47% | FB: 16% 364 2,346 Health centres & clinics | Private: 43% | FB: 8% Health posts or outreach sites, mobile health services 653 Private: 0% | FB: 0%

*Source: numbers of healthcare facilities are based on http://data.gov.gh/dataset/health-facilities and edited by PharmAccess









