

Prepared for the Consultative Meeting on Strategies for increasing the engagement of the Private Sector in the National HIV/AIDS Agenda in MAP countries

LIVINGSTONE, ZAMBIA JULY 14TH-19TH, 2003

GHANA

Assessment of the Epidemiological Situation and Demographics

Estimated percentage of adults living with HIV/AIDS, end of 2002

These estimates include all people with HIV infection, whether or not they have developed symptoms of AIDS, alive at the end of 2002:

3.4 %

Estimated number of deaths due to AIDS

Estimated number of adults and children who died of AIDS during 2001: 28,000

Estimated number of orphans

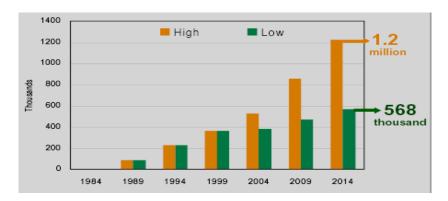
Estimated number of children who have lost their mother or father or both parents to AIDS and who were alive and under age 15 at the end of 2001:

200,000

- In the three major urban areas, Accra, Kumasi and Tamale, HIV prevalence increased from 0.7% in 1992 to 3.1% in 2000 for Accra, was 3.8% in 2000 for Kumasi and increased from 1.0% in 1994 to 1.3% in 2000 for Tamale. Outside of these areas, HIV prevalence increased, from 1% in 1991 to 3% in 1998.
- HIV seroprevalence rates among sex workers increased from 2% in 1986 to nearly 40% in 1991. By 1997/8, HIV prevalence in Accra and Tema had reached 74.2% among 'seater' sex workers and 27.2% among the 'roamer' sex workers. A repeat study in Accra and Tema in 1999 found 'seaters' with a rate of 78.5% and 'roamers' with a rate of 23.1%. In 1999, sex workers in Kumasi had an HIV infection rate of 82%.
- HIV prevalence among STI clinic patients in Accra increased from 2% in 1988 to nearly 9 % in 1991. In 1998, HIV infection among female STI patients tested in Adabraka, Greater Accra region, had reached 27%; in 1999, prevalence was 39%

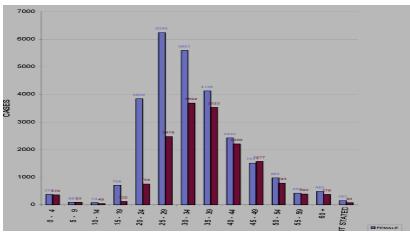
Source: UNAIDS/WHO Epidemiological fact sheet – 2002 Update; Ghana AIDS Commission

• Ghana's Ministry of Health projects that, in the worst case scenario, the prevalence rate could increase to 9.0% by 2014, giving a projected total number of infected Ghanaians to be about 1.2 million

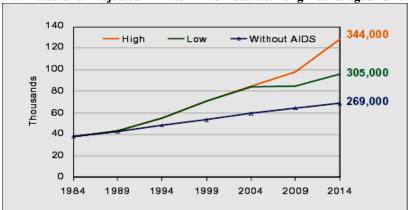


Source: National AIDS/STI Control Programme, Disease Control Unit, Ministry of Health (December 2001)

Reported cumulative AIDS cases in Ghana by age and sex, March 1986 to December 2000



Estimated and Projected Annual AIDS Deaths among Adults aged 15-49



Source: National AIDS/STI Control Programme, Disease Control Unit, Ministry of Health (Decema 2001)

HIV/AIDS Impact on the Macroeconomic level

• On a macroeconomic level, the impact of AIDS is difficult to assess. There are several mechanisms by which AIDS affects macroeconomic performance. AIDS deaths lead directly to a reduction in the number of workers available, and less experienced workers replace those who died, leading to lower productivity. A shortage of workers leads to higher wages, which leads to higher domestic production costs, and a loss of international competitiveness. Reduced savings because of greater health care expenditures and a loss of worker income can cause a significant drop in savings and capital accumulation. This leads to slower employment creation in the formal sector, which is particularly capital intensive.

Source: National AIDS/STI Control Programme, Disease Control Unit, Ministry of Health (December 2001)

HIV/AIDS Impact on the Private Sector

• One study on three Ghanaian firms in the manufacturing, banking and cargo handling industries found that currently, the relatively low incidence of HIV/AIDS at the workplace means that there is little demonstrable economic impact on companies. Present financial costs to HIV/AIDS appear relatively low, but will increase significantly with the rise in HIV/AIDS cases in these organizations. Already, on the average, it costs one of the Companies \$5 - \$54.3 per episode of illness for the employees who are sick.

Source: J.S. Nabila, P. Antwi, K.Yeboah, S.O.Kwankye "A Study Of The Economic Impact Of HIV/AIDS On Selected Business Organizations In Ghana" In Collaboration With The Policy Project, Accra, Ghana (April, 2001)

National Response

- The Government of Ghana established a National Advisory Commission on AIDS in 19 followed by the National AIDS Control Programme in 1987. In September 2000, Gha took a significant step toward mobilizing all sectors in responding to HIV/AIDS establishing the multisectoral Ghana AIDS Commission. The Commission coordina the involvement of all public and private sector stakeholders in combating the epidem Specific aims are to prevent new infections among youth and other vulnerable grou mobilize groups to support persons living with HIV/AIDS; and establish a budget line every Ministry for HIV/AIDS activities, separate from the budget for the Commissi itself. The objectives of the Ghana HIV/AIDS Strategic Framework (2001-2005) include:
 - Reduce new HIV infections among the 15-49 age group and other vulnerable group by 30 percent by 2005;
 - Improve service delivery and mitigate the impact of HIV/AIDS on individual families, and communities by 2005;
 - Reduce individual and societal vulnerability and susceptibility to HIV/AIDS throu
 the creation of an enabling environment for the implementation of the nation
 response; and
 - Establish a well-managed, multisectoral and multidisciplinary institutional framework for coordination and implementation of HIV/AIDS programs in Ghana.

Source: National Strategic Framework, GAC, 2001

Multisectoral Response

- The U.S. Agency for International Development (USAID)/Ghana's HIV/AIDS strategy focuses on behavior change among vulnerable groups, youth, faith-based organizations and formal and informal workplace programs. USAID has supported the development of local capacity for diagnosis and surveillance of HIV and other sexually transmitted infections (STIs), and social marketing of condoms. USAID provided \$4.5 million in HIV/AIDS assistance to Ghana in FY 2001, up from \$4 million the previous year.
- With joint funding from USAID's Private Sector and Health Offices, more than 50 companies, including the entire mining sector, are targeted to implement workplace HIV/AIDS programs. Specialized organizations will help the companies customize programs that might include developing a company HIV/AIDS policy, training peer educators and counselors, promoting condom distribution, and providing voluntary counseling and testing services and STI management.

Source: USAID, HIV/AIDS in Ghana

• In November, 2002, the Global Fund to Fight AIDS, Tuberculosis and Malaria signed two Grant Agreements to increase access to HIV and tuberculosis (TB) services in Ghana. The \$4.2 million HIV/AIDS agreement will build 16 Voluntary Counseling and Testing (VCT) centers, provide Prevention of Mother to Child Transmission (PMTCT) services to 600 mothers per year, and begin antiretroviral therapy for 2000 people with AIDS. It also will strengthen Home Based Care (HBC) and peer education within rural communities by involving people living with HIV.

Source: http://www.usembassy.it/file2002_11/alia/a2112505.htm

- Under the **World Bank's Multicountry HIV/AIDS Program**, Ghana has received \$25 million for the Ghana AIDS Response Project.
- **DFID** has also provided £20 million to support the national response.

List of Contacts (Websites and useful contacts)

- Ghana AIDS Commission, P.O. Box CT5169, Cantonments-Accra. Tel: 233-21-782262/782263, Fax: 233-21-782264, E-mail: ghanaids@ghana.com Contact person: Prof. S.A.Amoa, Director-General, Tel: 233-21-762492 Email: sakyi 2000@yahoo.com
- National AIDS/STI Control Programme, P.O. Box KB 493, Accra. Contact person: Dr. Nii Acquaye Addo Tel: 233-21-662-691, Fax: 233-21-667-980, E-mail: nacp@ghana.com

| Ghana – List of Potential Direct Partners | | | |
|---|--|--|---|
| Source | URL/Contact Info | What to find | Comments |
| UNAIDS | Contact Person: Dr Kristan Schoultz Address: C/o UNDP, Box 1423, Accra Tel: 021-238256/254594 Fax: 021-254595 Email: schoultz@internetghana.com kristanscholtz@yahoo.com | Technical support for GAC | Serves on most of the sub committees of GAC Serves on SIPAA coordinating Committee |
| USAID Ghana | Contact Person: Mr Peter Wondergem Address: Box 1630, Accra Tel: 021-228440/228467/231939 Fax: 021-231937/231940 | Offers assistance on technical issues Supports with funds for consultants | Assisted in provision of M & E Specialist for M & framework development Support for Place Methodology for high prevalent areas Serves on GAC sub committees |
| DFID | Contact Person: Dr Victor Bampoe Address: Box 296, Accra Tel: 021-253243 Fax: 021-253244 Email: s-baldwin@dfid.gov.uk | Provision of funds for HIV/AIDS intervention activities | Supports capacity building Supports DRI up scaling Supports GAC Secretariat capacity building Serves on GAC sub committees |
| WHO | Contact Person: Dr M George Address: Box MB 142, Accra Tel: 021-763918/9 Fax: 021-763920 Email: whoghana@africaonline.com.gh | Provision of technical and financial support for GAC & MOH activities | Provides technical support for MTCT studies Supports DRI initiatives Serves on GAC sub committees |
| UNDP | Contact Person: Mr Fawundu Address: Box GP 2339, Accra Tel: 021-665511/7010930 Fax: 021-665578/661748 Email: info@unicar.org.gh | Chairs UN Expanded Theme Group | Coordinates technical and final support for GAC |
| World Bank | Contact Person: Ms Eileen Murray Address: 69 Dr Isert Street, North Ridge, Accra Tel: 021-229681/220837 Fax: 021-227887 | Financial support for HIV/AIDS intervention activities | Technical and financial support for GAC |