Annex 17. Ghana workshop

Report of Civil Society Consultation (11-12 May 2017)

Foreword

The struggle for health for all can never be achieved without the full understanding of responsibility and participation of duty bearer, right holders and civil society’s active interest in monitoring the change process.

Global health governance influences policy-making in all countries most especially the Low and Middle Income Countries who are burdened not only with meagre financial resources and mostly competing development priorities and diseases. These challenges could largely be attributed to poor leadership, corruption, the laxity of the system to ensure accountability and weak civil society capacity and resource to monitor the phases of development and demand accountability.

This consultative meeting, the second ever organized by PHM in country, puts PHM Ghana in the limelight as a force to develop grass root participation in understanding the processes and watching the health governance process from Ghana’s perspective. We will forever be grateful to PHM global and its partners for their assistance in this struggle and the unrelenting fighting spirit of PHM Ghana members and the affiliate organizations who will stop at nothing until health becomes a reality for all. Health for all! Now

Kingsley K. A. Pereko, PhD
National Coordinator
PHM Ghana

Abbreviations and Acronyms

| EB   | Executive Board |
| GHS  | Ghana Health Service |
| MoH  | Ministry of Health |
| PHM/Gh | People’s Health Movement, Ghana |
| WHA  | World Health Assembly |
| WHO  | World Health Organisation |

Introduction

In preparation for the 70th World Health Assembly to be held in Geneva from 22 - 31 May 2017, People’s Health Movement (PHM) in Ghana convened a two-day national civil society consultation to review in detail items that will be coming up for consideration and prepare a civil society position paper on the key items. PHM/Ghana is fast establishing a distinctive niche as the lead network that mobilizes civil society actors on issues of global governance for health in the country. PHM/Ghana is committed to a strong WHO, and a strong MoH/Ghana that is well positioned to effectively contribute and influence Ghana’s preparations and positions in international health decision making.

PHM/Ghana has been involved in the WHO-Watch initiative since 2011, with three active members having previously participated and served as WHO-watchers (see table 1 below). Furthermore, PHM/Ghana has previously convened similar civil society consultations ahead of WHA, the WHO Executive Board meeting and/or the WHO Regional Committee meeting for the Africa region. The engagement therefore offered the
opportunity to build on previous experiences and leverage new partnerships with other civil society organisations such as the Health Services Workers’ Union of TUC Ghana for greater voice and reach.

Table 1: Involvement of PHM/Gh in WHO-Watch

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>EB</td>
<td>EB128 (John)</td>
<td>EB130 (Sidua)</td>
<td></td>
<td></td>
<td>EB138 (Kingsley)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WHA</td>
<td>WHA64 (John)</td>
<td>WHA65 (John)</td>
<td></td>
<td></td>
<td>WHA69 (Kingsley)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AFRO/RC</td>
<td></td>
<td>AFRO/RC (Sidua)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Funding

We acknowledge the support of Médecine pour le Tiers Monde asbl and the global secretariat of the People’s Health Movement.

Participants

A total of 28 participants attended the workshop (33 in the first day and 28 in the second). Representatives of Ministry of Health and two senior public health specialists were also invited to guide the process. The full list of participants is attached to this report as Appendix 2.

The participants represented about 20 civil society organisations including members of PHM/Ghana, the media and organisations carefully selected to reflect the range of issues before WHA70. The organisations include the Health Services Workers’ Union of TUC Ghana, the Coalition of NGOs in Health, Ghana HIV/AIDS Network (GHANET), Coalition of NGOs in Water and Sanitation (CONIWAS), Youth Advocates Ghana (YAG), Society of Women Against AIDS in Africa (SWAA) Ghana, National Council for Civic Education, Theatre for Change, Network for Health Relief Foundation, Presby Health Service and the Department of Community Medicine, University of Cape Coast Medical School.

Prior to the two-day consultation, the coordinator of PHM/Ghana circulated a Guidance Note to prospective participants detailing the WHA70 Agenda items with the necessary links to relevant resolutions. He then shared information on key considerations in analysing resolutions as well as the format for preparing the papers.

Objectives

The main objective of the workshop was to harness the broad expertise within the membership of PHM/Ghana and civil societies active in health rights to develop a civil society position paper.

Specifically, the consultation sought to:

1. Draft PHM/Ghana position papers on the WHA70 agenda items

2. Engage with officials of the Ministry of Health to deepen understanding of the processes and build relation for advocacy
3. Create opportunity for networking and forging of strategic partnerships
4. Discuss ways of strengthening mobilization and strengthening PHM/Gh

Preparations for the workshop

PHM/Ghana prepared a Costed Concept Note which outlined what it sought to do and how. The Concept Paper was shared with PHM/Global and follow-up meetings held.

Then:

- Engagement with PHM Global (reporting formats, contracting)
- Participants selection
- Venue selection (centrality)
- Online core group discussions
- Invitations: emails, walk ins, follow-ups etc

Day One

Opening Session

Presentation by Dr. Pereko on PHM Ghana

Presenting on PHM-Ghana, Dr. Pereko touched on the formation of PHM in Ghana and the fact that PHM-Ghana is a registered organization in Ghana due to the country’s unique requirement for state recognition and also due to the unique role PHM Ghana stands to play in Ghana’s Health Governance. He highlighted PHM’s contribution to health governance forums both in Ghana and abroad and also some in country activities in strengthening civil society capacity in watch dogging in ensuring health for all.

Introduction of Chairman

Chair’s Opening Remarks

Presentation on PHM and Advocacy on Global Health Governance by Dr. Kingsley Pereko

Presentation on PHM’s role and representation in Global Health Governance through its partner Medicus Mundi International and other CSOs was done by Dr. Pereko a past watcher. Speaking on the topic, he touched on Ghana’s unique advantage of having benefited from such engagements in the past. He also highlighted the pre workshops that are organised by PHM for various watchers prior to the WHO executive board meetings and the World Health Assembly and also touched on the various outputs of such workshops such as the development of policy briefs and statements that highlight key issues to be considered in lobbying delegates to make informed decisions. He however touched on the gap in documenting the real impact of such engagement which needs to be collectively conducted in measuring the impact of civil society participation in health governance. He also highlighted the challenges in resource mobilisation for CSO active participation, the late publication of reports at times which doesn’t give delegates enough opportunity to study before deliberations and thus the importance of CSOs notes on such items to delegates.

Presentation on WHA 70th and why this is important for PHM/Ghana by Mr. Selorme

A member of PHM (Selorme) gave a brief presentation on WHA70 and why it was important for PHM Ghana. He explained that the WHA70 was the highest decision making body of the WHO and that it was in such a forum global decisions concerning health were made. Though each nation is usually represented by a delegation led by the health minister, it was important for PHM Ghana to get involve in shaping Ghana’s
position on the many health thematic areas because PHM Ghana is made of many different organizations and individuals with diverse backgrounds who could contribute meaningfully to developing a position that best represents the health concerns of the masses. It was for this reason he said PHM Ghana takes the WHA sessions every year very seriously.

**Overview of the Agenda of the 70th World Health Assembly by Ms. Nancy Ansah**

Ms. Nancy Ansah of Regency University and a member of PHM Ghana presented on the proposed agenda for the WHA’s 70th meeting. Ms. Nancy presented on 9 clusters of technical agenda items proposed for the WHA and shared some general comments by PHM global. For each broad thematic area, there were several sub-themes under but participants were patiently taken through each one of the sub-themes for further discussions and prioritisation.

**Questions and Recommendations:**

Questions were posed by participants and some responses and recommendations were proposed as follows:

1. Which arm of PHM made comments/recommendation?
   a. Global PHM
2. Presentation on most current situation/ a trend analysis of past situations could have better informed recommendations
3. More emphasis on the SDGS would have enlightened CSOs

**Keynote Address by Dr. Jehu Appiah, Country Director, IPAS**

Dr. Jehu Appiah, Country Director for Innovations for Poverty Action (IPAS) in a Keynote address to participants and the media touched on key issues affecting health advancement in Ghana. This included illegal mining (galamsey), poor sanitation and little attention to primary health care (PHC). According to Dr. Appiah, kidney failure is becoming a common medical condition seen in most health facilities which might be stemming from the presence of mercury in foods. Additionally, Dr. Appiah lamented the poor sanitation of the country and its concomitant effects on the health of populations usually revealed in diarrhoea and typhoid outbreaks. Finally, Dr. Appiah emphasized the need for the country to concentrate more efforts on PHC, disease surveillance to tackle issues such as Zika, Ebola and Cerebro Spinal Meningitis (CSM) in Ghana and the Sub region, as well as provide free family planning commodities among other factors to improve Reproductive Maternal Neonatal and Child Health.

Major areas of interest and concern raised by the guest speaker included:

- The galamsey menace and its effects to the health of the nation
- Food production and consumption in public places such as chop bars, restaurants, wayside food vendors etc
- Issues of cholera and diarrhoea especially at this time of the year
- Strengthening primary health care and education especially in poor and hard to reach communities
- CSM: he lamented how even health professional saw the seasonal outbreak of CSM as normal and that with the right interventions, we could as a nation deal with it
- Monitoring and evaluation of the entire process to ensure that policies and programs that arise from WHA are well implemented at the local level

In conclusion, Dr. Appiah charged Civil Society Organizations (CSOs) including PHM to advocate for equal and quality health for all. He also charged the government to safeguard the environment and concentrate on developing rich country-specific policies for sustainable development.

Prioritization of WHA70 Agenda and Thematic Themes by Mr. John Eliasu Mahama

Mr. John Eliasu Mahama facilitated the session. He first reviewed the proposed WHA agenda with participants. As a result of the large volumes of the themes and sub-themes to be discussed, participants agreed to prioritize the agenda so as to be able to develop a more comprehensive and meaningfully position that best represents the views of Ghanaians at large. The five major themes were however maintained while the sub-themes under each major theme were prioritized:

<table>
<thead>
<tr>
<th>Group A: Preparedness, surveillance and response</th>
<th>Group B: Health Systems</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Priority Items:</strong></td>
<td><strong>Priority Items:</strong></td>
</tr>
<tr>
<td>A70/8</td>
<td>A70/18</td>
</tr>
<tr>
<td>A70/9</td>
<td>A70/20</td>
</tr>
<tr>
<td>A70/10</td>
<td>A70/22</td>
</tr>
<tr>
<td>A70/12</td>
<td>A70/23</td>
</tr>
<tr>
<td>A70/13</td>
<td></td>
</tr>
<tr>
<td>A70/17</td>
<td><strong>Group Leader:</strong></td>
</tr>
<tr>
<td></td>
<td>Nancy</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Group C: Communicable and Non-Communicable Diseases</th>
<th>Group D: Promoting health throughout life</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Priority Items:</strong></td>
<td><strong>Priority Items:</strong></td>
</tr>
<tr>
<td>A70/25</td>
<td>A70/35</td>
</tr>
<tr>
<td>A70/31</td>
<td>A70/36</td>
</tr>
<tr>
<td>A70/34</td>
<td>A70/37</td>
</tr>
<tr>
<td><strong>Group Leader:</strong> Mark</td>
<td><strong>Group Leader:</strong> Henrietta</td>
</tr>
</tbody>
</table>

Guidance for Group Work

Before the working groups were formed to tackle the above themes, the PHM Coordinator walked participants through a guideline on how to develop a position paper. He explained what participants should look out for when reading the documents and the most suitable terms to use when coining the final position. Based on expertise and experiences, participants were put into groups of at least three for each thematic area. Each group was to pick two sub-themes, discuss and develop position papers on them. As a result of inadequate time, many of the groups were only able to develop position papers on one sub-theme.

The following were guidelines for the group work:

- Background (group, recommendations, decisions report is expecting people to take)
- Executive summary of report
- PHM’s previous position on Watch
- Take a stand/your own proposition

Closing Remarks by Chairman

Dr. Joseph Amuzu thanked the People’s Health Movement, Ghana for convening such a meeting to review policy documents that would go far to improve health. He however encouraged PHM to review their activities and discuss in detail their movement for health. He also encouraged the team of health workers to get
government counterparts involved in the fight for health. These activities, he added, will increase the voice of PHM and other CSOs in the country.

He reminded participants to relate the agenda to Ghana’s context and not especially forget of the current health challenges Ghana is crippling with.

Day 2

Opening

• Prayer by Prince Abugri
• Introduction of new participants

Recap of Day One

A member of PHM/Ghana, John Eliasu Mahama facilitated a session on the recap of main items from the previous day.

Presentation by Mr. Mark Atuahene, Ministry of Health

A presentation by Mr. Mark Atuahene from the Policy Planning Monitoring and evaluation division of Ministry of Health/Ghana. His presentation touched on the content of the Aide Memoire drafted during the Health Summit, 2017. He also discussed plans of the MoH to develop the next medium-term development plan for the health sector (2018-2021) which CSOs are expected to participate.

Mr. Mark Atuahene shared some of the details captured in the Aide Memoire and they include the following health sector priorities:

1. Institutional maternal and neonatal deaths
2. Routine maternal health deaths
3. Quarterly meetings should be held with CHPS
4. Assessment of delays
5. Human Resources for Health
6. Assess for excess for export
7. Encourage specialization
8. Financial accountability
9. Epidemic preparedness and response
10. Health promotion (which is now under FHD)
11. Non-communicable disease – set up NCD department at MOH
12. Quality of Care issues – HeFRA to assess facilities for quality
13. Public-Private Partnership
14. Supply Chain challenges

Questions & Discussions:

• Qn: Has the Aide Memoire been finalized?
  o Ans: The document has been finalized and signed but that should not prevent CSOs from making key inputs for consideration
• Qn: How can CSOs contribute to the medium-term plan development?
  o Ans: CSO’s have been factored into the participants list. PHM can officially inform the Minister about their interest to participate in the process.
• Comment: It is important to consolidate fragmented NGO networks in Ghana so that they are fairly represented under the Coalition of NGOs

• Recommendation: The health sector, especially at facilities, should have sign language interpretation for people with disabilities. This is a great topic to discuss with the honorable minister of health.
• Existing data (such as on discrimination against/challenges Persons with Disabilities (PWD) face should be shared to develop a concept note for advocacy
• Write a position paper that is backed by strong data to meet with the minister. Mr. Atuahene will help coordinate at the Ministry’s level.
• Policy makers must make a conscious effort to include PWD in discussions to make inputs
• Another area requiring more attention is the aged

Group Work

Following the plenary session, participants worked in their various groups for about 3 hours to finalize their draft position papers.

Presentation of Group Work

After the working group sessions, each group then presented their work and position to plenary. For the group that worked on human resources for health, they were tasked to note and also review issues on distribution of health workers, working tools and brain waste/circulation/distribution. Timelines for the implementation strategies by member nations was the point raised for group that worked on adolescent and women’s health to note. Other positions such as antimicrobial resistance and child obesity were also extensively discussed. The positions were then forwarded to the PHM Ghana coordinator and his team for further development.

General Discussions on Mobilizing for Health in Ghana

Before the session was brought to an end, participants spent some time to discuss PHM Ghana and the way forward for the movement. Members were admonished by the chairman to take the movement seriously and also commit a bit to make the movement stronger. Some suggestions for the leadership of PHM Ghana were as follows:

1. Leadership should ensure the movement is formally recognised at the MOH
2. Make effort to contact and work with Coalition of NGOs in health
3. Ensure that major stakeholders and organizations with influence are normally invited to the meetings of the movement
4. Re-organise the administrative wing of the movement to make it more effective so it works as a professional body
5. Involve government staff in PHM/Gh activities

Advocacy after the workshop

1. Submission of PHM/Ghana position paper to Ministry of Health, Ghana Health Service, and Ghana Mission in Geneva. The paper has also been shared with PHM/Global.
2. Media engagement:
   b. Article on the Website of Hope for Future Generations (HFFG), one of the participating NGOs: [http://www.hffg.org/1.11001940](http://www.hffg.org/1.11001940)
3. PHM Exchange: Posted on: 24 May, 2017
   PHM-Exch> [PHM NEWS] PHM Ghana presents civil society’s position to the Ghana delegates attending WHA70!

PHM Ghana, Health Services Workers' Union of TUC and other civil society organisation participated in an extensive civil society consultation of the issues to be discussed at WHA70. On the 17th of May, PHM Ghana met with the head of Ghana's delegation to WHA to present civil society's position. The position paper prepared was submitted to the Ministers office and all of Ghana's delegations including the executive secretary in Ghana who is the permanent rep to WHO Executive Board and World Health Assembly.

4. Click here to view: PHM Ghana position paper and the Letter to the Minister of Health

Challenges and Limitations

1. Limited Budget meant that largely Accra-based participants were invited (as adequate provision was not made to accommodate many participants from other parts of the country).
   a. more participants than invited the proposed participants list was 18 however over 30 participants reported for the first day and 28 the second day stretched our budget beyond limits
   b. unbudgeted items - conference rooms (linked to electricity issue)
   c. fund transfer delays
2. Getting senior level directors of GHS or MoH to the event was challenging. However, relations have been built and networks established with the units and institutions that are directly involved in the drafting of Ghana’s resolutions. This should fast-track future events.
3. Technical nature of resolutions and generally low public engagement in global health governance processes meant that we had to spend more time to digest, analyse and raise issues/concerns

Key lessons / Key Success Factors

1. Strategic partnerships with TUC, some organisations supporting their staff to participate, heads of organisations participating by themselves
2. Involvement of Key Resource Persons was crucial: Dr. Joseph Amuzu (Public Health Consultant); and Dr. Koma Jehu Appiah (Country Director, Ipas/Ghana)
3. Media Engagement – helped with visibility
4. The event was generally an opportunity for mobilizing CSO front on health and PHM/Ghana membership drive
5. Commitment of PHM/Ghana --- high volunteer drive --- especially core group worth commending.

Recommendations

On the last day of the workshop, core members of PHM/Ghana stayed late into the evening to review the workshop. The Key highlights include:

- Institutionalize the event – work towards convening such consultative meetings on an annual basis
- Initiate the planning process early; this calls for greater local ownership of the programme
- Domestic resource mobilization at least as counterpart funding for future watching
- Getting other partners involved
- Attempt watching domestic health policy making processes (National health forum, MoH policy making processes, health-related bills at parliament, Budget monitoring, domestic health concerns such as effects of small scale gold mining etc)
- Important to link WHA watching process with capacity building. It would be good if future watches include capacity building components. Eventually the capacity will help with domestic watching

• Ensure continued engagement --- Create WhatsApp platform for continued interaction with members
• Follow-up after WHA to see how Ghana implements key resolutions

Appendix 4: Photo gallery

Participants chanting health for all now

Thematic discussion groups

Presentations

Morning briefing of day one

Post consultative meeting review by Core Group
