

BRIEF INFORMATION ABOUT THE GHANA UNIVERSAL HEALTHCARE CAMPAIGN

Who are we?

The Universal Access to Healthcare Campaign is a national campaign driven by a network of local and international NGOs including the Alliance for Reproductive Health Rights (ARHR), ISODEC, Essential Service Platform, SEND Ghana, and Coalition of NGOs in Health and Oxfam in Ghana.

The goal of the campaign is for Government of Ghana to legislate for *quality* and accessible universal healthcare for all free at the point of use with identified new sources of funding coming from tax and innovative finance mechanisms by 2015.

What are our objectives?

- (i) The Government of Ghana implements a clear plan for the removal of all user fees to make healthcare free at point of use by 2015.
- (ii) Advocate for Government of Ghana to implement basic and quality universal healthcare for all in Ghana free at point of use by 2015.
- (iii) Government of Ghana implements policies that streamline healthcare financing, delineating roles and responsibilities of the NHIA, Ghana Health Service and the Ministry of Health.

Who are the partners to the campaign?

- Integrated Social Development Centre (ISODEC)
- Coalition of NGOs in Health
- Alliance for Reproductive Health Rights
- SEND Ghana
- Essential Service Platform
- People's Health Movement Ghana circle

Why the Ghana Universal Health Campaign?

Health Care is uneven and unequal in Ghana: Access to effective health interventions is low, particularly for the poorest, resulting in unnecessary high morbidity and mortality. In some cases people live more than 60km from a health facility. It is estimated that nationally, about 60% of the population has access to health facilities. However, among the rural population this figure is much lower; only 37% live within one hour travel time (by any available means) from the health facility.

- After more than 7 years of implementation of the NHIS, all time coverage has been low. **Only 34% of the population are covered** at the beginning of 2011. Why don't we reform the system to make healthcare accessible to all?
- Currently, the mandatory premium for the over 70% informal workers creates barrier for people to get quality healthcare while at same time contribute to less than 5% of total inflows to the NHIA. So why not raise money through other innovative mechanisms and taxation rather than the premiums?
- Those excluded from the NHIS still pay user fees in the cash and carry system, and millions of citizens who cannot afford are still excluded from the health care they need.
- Out of pocket payments are still more than twice the WHO recommended proportion of total health care expenditure of about 15%-20%.
- Majority are still unprotected from catastrophic health events
- Insurance financing is also in danger of reinforcing and perpetuating historical imbalances in the level and quality of services across different areas and regions in Ghana as reimbursement payments flow to those facilities already in a strong position to attract more patients.
- Health Infrastructure: Inadequate, ill equipped and unevenly distributed –most deprived communities do not even have CHIPS compounds. Moreover, the current system is too much focused on curative care rather than preventive interventions which are proven more cost-effective in the long-run. This is sad.
- Persons living with HIV and AIDS have difficulty accessing ARVs as they are required to pay GHc 5.00 per visit. **This must not be the case.**
- The coverage of supervised deliveries for 2010 is 48.2% .Meaning 52.8% of the pregnant women still deliver at home; this is serious.

For more information about the campaign visit

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