

## Empowering communities to demand for their health rights



### AT A GLANCE

*The Gender Equality and Social Inclusion (GESI) project is a Star-Ghana funded project with an overall aim of ensuring that gender equality and social inclusion is systematically integrated in national policies and programmes. The project engages key state and non-state actors who are the Ministry of Health/ Ghana Health Service, National Health Insurance Scheme, Ministry of Gender, Children and Social Protection, Local Government and Rural Development, Media and Civil Society Organizations in Health to ensure the achievement of the overall aim.*

### CHALLENGE

A section of Ghanaians are socially excluded and marginalized in their quest to seek for health care. They do not benefit from the services which are well within their rights as humans. This group consists of persons with disabilities (PWDs), women and adolescents who are trapped in needless cycles of poverty. Inequality and social exclusion in health care is

more evident in the quality of care administered to this group of people. Every person should have equal access to the opportunities, services and resources that allow them to reach their full potential.

### APPROACH

Alliance for Reproductive Health Rights, through its STAR Ghana Foundation funded project, continues to advocate for the integration of Gender Equality and Social Inclusion (GESI) actions into national policies, programs and initiatives. Not only will this help Ghana achieve the UHC 2030 goals but it will empower this group of people to demand for quality health outcomes.

### RESULTS

In Tsate, a rural community in the South Dayi district of the Volta Region, an adolescent girl is grateful that her local CHPS now offers adolescent friendly services and is appreciative of the GESI project which has enabled adolescents to receive the utmost respect from healthcare providers whenever they visit the facility and also receive the quality of care required.

The inception of the GESI project has brought remarkable difference in the knowledge and awareness of community members on how to demand for their health rights. Community members are well versed with the Patients' Rights Charter which enables them to confidently assert their rights and demand for better quality of care. Community members can now hold their service providers and community leaders accountable because they are aware of the government's commitments towards achieving Universal Health Coverage.

An example of community member's ability to demand for their health rights was a case where a community nurse in the Otwekwa community in the Agona East district was going to be transferred from the community's health facility to the dismay of the community members. Through active community engagement with the District Health administration, community members insisted on maintaining the nurse in the community due to the quality of service she provided to the community; which was agreed by the District Health administration. This effort was largely possible because community members knew their rights and had been empowered through the GESI project. The project has gone a long way to improve not only the attitudes of health workers towards GESI groups but also towards the entire community. The overall client-provider relationship has improved in the Otwekwa community and there exists an environment for responsive service delivery.

The GESI project has brought about significant changes, particularly, an increase in client compliance to referrals and an improvement in the health seeking behaviors of community members. The facility head of the Bandoth Hans CHPS compound explained that community members are more health conscious and actively seek health care for themselves and their families, instead of them staying at home when they were not well. There has equally been a commencement of home visit for the aged who are not able to visit the facility. A recurring issue that often inhibited access of healthcare services by persons with disabilities was the inaccessibility of CHPS compounds. Persons with disabilities in Benyadze community were unable to visit their facility because of lack of disability friendly routes to the building.



Through the project, community members are advocating for the construction of a new CHPS compound that is disability friendly at Benyadze. The lack of inter-sectoral collaboration at the district level often inhibits a structured health care system in a number of districts. The GESI project highlights the critical need for inter-sectoral collaboration. The Municipal Assembly, Municipal Health Administration, National Health Insurance Authority, tradition and religious leaders as well as our Community-Based Organization are actively working towards better coordination and communication among the various sectors in the Komenda, Edina and Eguafu Abrem Municipality.

## CONCLUSION

The success of the GESI project is partly contingent on the involvement of community members; especially those who have been socially excluded. Empowering communities is a significant step towards achieving universal health coverage. Community education empowers community members to demand for their rights, better care and hold their healthcare providers and necessary stakeholders accountable.