HIV/AIDS in Ghana

A USAID Brief

Though HIV/AIDS has spread more slowly in Ghana than in other African countries, the disease is firmly established within the general population and shows no signs of stabilizing. According to Ghana’s Ministry of Health, an estimated 350,000 adults were living with HIV/AIDS in 2000, yielding an adult infection rate of 3.0 percent. The Joint United Nations Programme on HIV/AIDS (UNAIDS) also estimated a 3.0 percent adult prevalence at the end of 2001, with 360,000 adults living with HIV/AIDS.

As of 2000, about two of every three reported HIV/AIDS cases in Ghana occurred among females, down from five out of every six cases in the earliest stages of the epidemic. One reason for higher rates among women appears to be the migration of Ghanaian female sex workers to and from neighboring countries, particularly Côte d’Ivoire, which has the highest HIV prevalence in West Africa. In 1997, HIV prevalence among home-based commercial sex workers in Accra-Tema and Kumasi was 76 percent and 83 percent, respectively. Prevalence among pregnant women in major urban areas was 2 to 7 percent in 1998. In rural areas, HIV prevalence ranged from 2 to 12 percent among pregnant women.

More than 90 percent of Ghanaian men and women are aware of the key ways in which HIV/AIDS is transmitted. However, major behavioral changes needed to slow transmission rates have not occurred. The relatively large number of HIV-infected women has led to an increase in pediatric HIV/AIDS prevalence. As of June 1998, 387 pediatric AIDS cases had been reported. Approximately 85 percent of Ghana’s pediatric cases are attributed to mother-to-child transmission, and drugs used to prevent this mode of transmission are only slowly becoming available. The remaining 15 percent of pediatric cases are attributed to contaminated blood transfusions and equipment.

At the end of 2001, UNAIDS estimated that 34,000 children under age 15 were living with HIV/AIDS, and 200,000 children orphaned by AIDS were living in Ghana.

NATIONAL RESPONSE

The Government of Ghana established a National Advisory Commission on AIDS in 1985, followed by the National AIDS Control Programme in 1987. In September 2000, Ghana took a significant step toward mobilizing all sectors in responding to HIV/AIDS by establishing the multisectoral Ghana AIDS Commission. The Commission coordinates the involvement of all public and private sector stakeholders in combating the epidemic. Specific aims are to prevent new infections among youth and other vulnerable groups; mobilize groups to support
persons living with HIV/AIDS; and establish a budget line in every Ministry for HIV/AIDS activities, separate from the budget for the Commission 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 groups by 30 percent by 2005;
- Improve service delivery and mitigate the impact of HIV/AIDS on individuals, families, and communities by 2005;
- Reduce individual and societal vulnerability and susceptibility to HIV/AIDS through the creation of an enabling environment for the implementation of the national response; and
- Establish a well-managed, multisectoral and multidisciplinary institutional framework for coordination and implementation of HIV/AIDS programs in Ghana.

**USAID SUPPORT**

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.

**USAID supports the following country programs:**

**Behavior change**

The Ghana Social Marketing Foundation (GSMF) in collaboration with the Johns Hopkins University/Population and Communication Services (JHU/PCS) initiated a “Stop AIDS, Love Life” public education campaign in February 2000. The campaign aims to increase the perception of risk among the population, with an emphasis on youth; increase social support for preventive behaviors; increase and expand condom usage among youth; and increase compassion for people living with AIDS. Sales have more than doubled to 1.8 million condoms a month since the campaign began.

USAID/Ghana guided the high-profile, multimedia campaign, which included radio and television announcements and testimonials by people living with HIV/AIDS. As of May 2002, Ministry of Communication audiovisual vans had provided information on HIV/AIDS to Ghanaians in 1,100 rural villages and towns. In addition, road shows toured 110 towns and cities throughout the nation.

<table>
<thead>
<tr>
<th>Estimated Number of Adults and Children Living with HIV/AIDS (end 2001)</th>
<th>360,000</th>
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<tbody>
<tr>
<td>Total Population (2001)</td>
<td>19.7 million</td>
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<tr>
<td>Adult HIV Prevalence (end 2001)</td>
<td>3.0 %</td>
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**HIV-1 Seroprevalence in Urban Areas**

<table>
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<tr>
<th>Population at High Risk (i.e., sex workers and clients, STI patients, or others with known risk factors)</th>
<th>72.6 %</th>
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<tbody>
<tr>
<td>Population at Low Risk (i.e., pregnant women, blood donors, or others with no known risk factors)</td>
<td>2.7 %</td>
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*Sources: UNAIDS, U.S. Census Bureau*
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In a second phase, traditional chiefs issued strongly worded messages through the media. The third phase of the campaign is under development, and will focus on messages of compassion for those living with HIV/AIDS.

Faith-based organizations

Family Health International (FHI)/IMPACT, with USAID support, is working with three of the largest churches and several Muslim groups to sensitize faith leaders and train priests, imams, marriage counselors, and grass roots women’s and youth groups in discussing HIV/AIDS. This activity led JHU/PCS to support a national dialogue among the leadership of faith-based organizations. The Ghana Council of Churches and all major Muslim groups are jointly developing a program to promote compassion for people living with HIV/AIDS, and to initiate care and support services. Muslim and Christian leaders have pledged their commitment through a joint communiqué that will be presented to the President of the Republic of Ghana this year.

Prevention/education

USAID/Ghana is working with the Ministry of Education to integrate HIV/AIDS into school curricula and to develop appropriate teaching materials and support for after-school clubs for the students, and parent-teacher meetings. In Ghana’s highest prevalence region, adolescent girls are targeted through “Queen Mothers”— senior women whose duty is to prepare adolescent girls for marriage and sexuality. Out-of-school youth, especially Muslim groups in Accra, are reached through peer educators at so-called “idle spots” where teenagers congregate.

STI management

Working with the Ministries of Health and Defense, FHI/Impact has trained approximately 250 medical officers in counseling and STI syndromic management. Hospital laboratory staff have also been trained in quality assurance testing for HIV and STIs.

Surveillance

With USAID support, Ghana has developed one of the most advanced national sentinel surveillance systems for HIV and STIs in Africa. Through this activity, four public health reference laboratories have been established, with appropriate staff training and equipment provided. USAID provides HIV reagents for surveillance and donor blood testing, made available through the Ministry of Health.

Treatment

Antiretroviral treatment has recently become available in Ghana through the USAID-supported START (Support, Treatment and Anti-Retroviral Therapy) Program, launched in November 2001 in a high prevalence area. Services include voluntary counseling and testing; clinical management of HIV-related conditions, opportunistic infections and HIV/AIDS; prevention of mother-to-child transmission and community programs for home-based care; orphan care; and community-based prevention activities. The program builds on community programs previously initiated by USAID.

Vulnerable populations

GSMF and the U.S. Peace Corps have developed a behavior change activity aimed at commercial drivers and the traveling public in 20 major transportation hubs covering the entire country, including the Ghanaian part of the Abidjan–Lagos (Nigeria) axis. Advocacy and sensitization workshops have been conducted with local transport executives, more than 400 peer educators have been trained, and tens of thousands of persons have been counseled by these educators. GSMF has also trained more than 4,000 hairdressers and barbers in HIV/AIDS prevention, condom promotion, and communication skills. The program has now expanded to 400,000 dressmakers—mostly young females—and includes condom negotiation skills training.

With USAID funding, FHI/Impact provides technical support for five uniformed services, including the armed forces, the police, the prisons service, the immigration service, and the customs excise and preventive service. The program involves policy initiatives at the highest level, peer education, counseling, and education and communication activities for uniformed services, their partners, and civilian employees. The program’s next phase will include provision of voluntary counseling and testing services for the uniformed services.
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Workplace programs
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.

CHALLENGES
According to the Ghana HIV/AIDS Strategic Framework, challenges to implementing a strong national response to HIV/AIDS include:

- Delaying onset of sexual activity among youth;
- Reducing the number of sexual partners;
- Promoting condom use among sexually active individuals;
- Ensuring adequate and effective management and treatment of STIs;
- Making services available to prevent mother-to-child transmission of HIV and promoting utilization of these services;
- Increasing utilization of voluntary counseling and testing services;
- Strengthening institutional care and providing quality home-based care for persons living with HIV/AIDS; and
- Enacting and enforcing appropriate legislation to facilitate care and support of persons living with HIV/AIDS.
SELECTED LINKS AND CONTACTS

1. USAID/Ghana, E45/3 Independence Avenue, Accra. Tel: (233-21) 228-440, Fax: (233-21) 231-937, Web site: http://usembassy.state.gov/ghana/wwwwhaid.html

2. National AIDS/STI Control Programme, P.O. Box KB 493, Accra. Tel: 233-21-662-691, Fax: 233-21-667-980, E-mail: nacp@ghana.com

3. Ghana AIDS Commission, P.O. Box CT5169, Cantonments-Accra. Tel: 233-21- 782262/782263, Fax: 233-21-782264, E-mail: ghanaids@ghana.com

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For more information, see www.usaid.gov/pop_health/aids/ or www.synergyaids.com.

Please direct comments on this profile to: info@synergyaids.com.

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