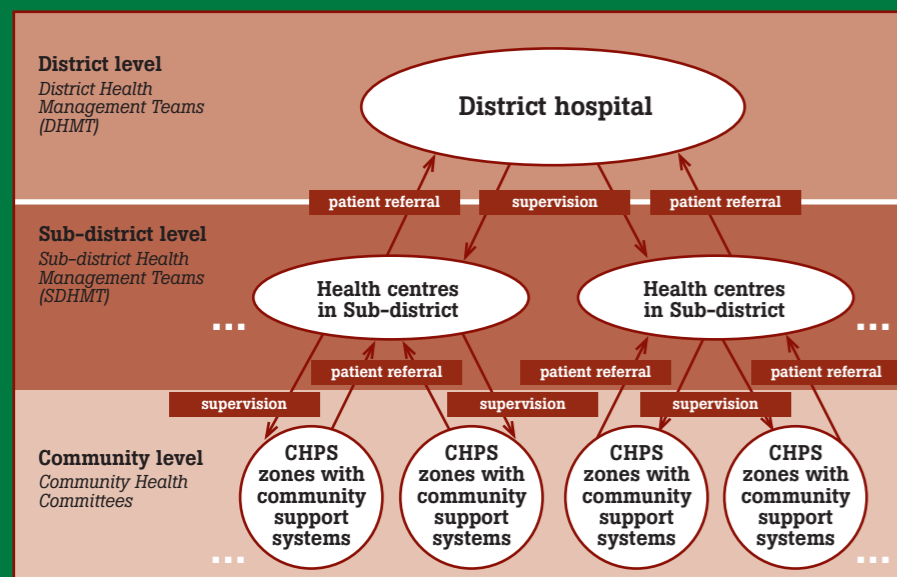


# THE GMHI REPORT

- » Presents evidence of the links between health and development in Ghana.
- » Analyzes the health needs of Ghana and develops a close-to-client strategy, anchored at the community level, for scaling up access to essential health services.
- » Recommends strengthening this strategy by paying more attention to specific health systems requirements in particular human resources.
- » Calls for attention to the lack of clean water and sanitation conditions, which causes about 70% of all communicable diseases.

The investment plan substantiates the proposed health package by detailing resource requirements, financing gaps, and resource allocation in line with policy priorities. The GMHI also estimates the cost of meeting water and sanitation targets. The GMHI finds that government allocations to the health sector have fallen in real terms since independence. A major challenge will be mobilizing resources for scaling up investment according to the GMHI's plan in order to achieve the MDGs and other national health targets.

## A Bottom-Up Service Delivery System for Equitable Scaling Up of Health Services (Part II of the GMHI Report)



## HEALTH AND DEVELOPMENT IN GHANA: FACTS AND FIGURES

- » Only 37% of the rural Ghanaian population have access to health services; 42% have access to potable water.
- » It is estimated that Ghana's low life expectancy of 57 years deprives the country of about US\$ 620 million in annual output.
- » Per capita government allocation to the health sector fell in real terms from US\$ 10.16 in 1978 to below US\$ 8 in 2003.
- » The Ghana Poverty Reduction Strategy envisions increasing government health expenditure as a percentage of total government expenditure to 7% in 2005 in real terms, likely to guarantee a per capita health expenditure equivalent to about US\$ 10 by 2006. This is still far below the CMH recommendation of US\$ 38 per person per year to scale up a set of essential interventions.
- » The richest households are estimated to benefit three times more from Government expenditures on health than the poorest.
- » Total debt relief to Ghana is estimated at about US\$ 3.7 billion. A significant amount of resources could thus be freed up for health.

## HOW IS THE REPORT TO BE USED?

- » Local and international advocacy
- » Revision of the health component of the Ghana Poverty Reduction Strategy, and promoting a clear link between the GPRS and the government's annual budget
- » Ministry of Health planning
- » District health planning
- » Developing proposals for the Millennium Project and the US Government's Millennium Challenge Account
- » Identifying areas for further research
- » More effective partnerships with donors, civil society and others



# SCALING-UP HEALTH INVESTMENTS

FOR BETTER HEALTH, ECONOMIC GROWTH AND ACCELERATED POVERTY REDUCTION

GHANA MACROECONOMICS AND HEALTH  
**GMHI**  
 INITIATIVE

# TOWARDS ACHIEVING THE MDGs: A HEALTH INVESTMENT PLAN FOR GHANA

» In Ghana, an additional US\$ 5 billion will be needed over 2002-2015 to achieve national health priorities, including the Millennium Development Goals (MDGs). This finding is part of the health investment plan of the Ghana Macroeconomics and Health Initiative (GMHI)'s report, "Scaling up Health Investments for Better Health, Economic Growth and Poverty Reduction."

» The report establishes a multi-year strategy to scale up a priority health package to improve health outcomes and improve access for the poor. This consists of essential health interventions, health systems development, close to client services, and improved access to water and sanitation. To bridge the financing gap, the GMHI report calls for concerted international support and proposes options to mobilize the required resources, including debt relief, increased aid and new financing mechanisms.

» The GMHI Report is aligned with completed and ongoing planning activities, such as the Ghana Poverty Reduction Strategy, the Medium-Term Expenditure Framework and the Ministry of Health Programme of Work.

**Summary of Incremental Cost of Scaling-up Health Spending, 2002-2015 in US\$ million, unless otherwise indicated (Part III of the GMHI Report)**

Time period	Incremental Cost	Total Cost
2002-2007	1,144	2,060
2008-2015	3,837	5,602
2002-2015	4,981	7,662
<b>Per capita health expenditure (in US\$)</b>		
2007	12	21
2015	31	41

# WHAT IS THE GMHI?

The GMHI is a participatory national health and development mechanism. It was set up in 2002 to establish the health needs of poor people, analyse the barriers to utilization of health and health-related services and identify ways to increase the efficiency of health spending.

By boosting inter-sectoral collaboration and promoting locally-developed evidence, the GMHI serves to:

- » Mobilize political support for enhanced investment in health and health-related sectors
- » Improve priority-setting in the health sector
- » Guide decisions on central and peripheral-level resource allocations to health
- » Increase aid effectiveness

# WHO ARE THE MEMBERS OF THE GMHI?

The GMHI brings together key players in the health sector and sectors that influence health to deliberate and take a common stand on pressing health and development issues. Members include representatives from the Ministries of Health, Economic Planning and Regional Cooperation, Finance, Local Government and Rural Development and related agencies such as the Ghana Health Services. All major health partners in Ghana participate in the GMHI, including WHO, the United Nations Development Programme (UNDP), the United Nations Children's Fund (UNICEF), the Danish International Development Agency (DANIDA), the United Kingdom Department for International Development (DFID) and the World Bank.



## FOR FURTHER INFORMATION

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