

## HIV/AIDS Profile: Ghana

### Demographic Indicators

	with AIDS	without AIDS		with AIDS	without AIDS
Population (1000s)	19,534	19,703	Growth Rate (%)	1.9 %	2.1 %
Crude Birth Rate	30	30	Crude Death Rate	10	9
Infant Mortality Rate			Life Expectancy		
Both Sexes	57	54	Both Sexes	57	61
Male	65	62	Male	56	59
Female	49	46	Female	59	63
		*****			
Percent Urban	37		Total Fertility Rate	4.0	

**Note:** Above indicators are for 2000.

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Estimated % of adults living with HIV/AIDS, end 1999	3.6 %
Cumulative AIDS rate (per 1,000) as of 5/7/98	1.32
Cumulative AIDS cases as of 5/7/98	24692

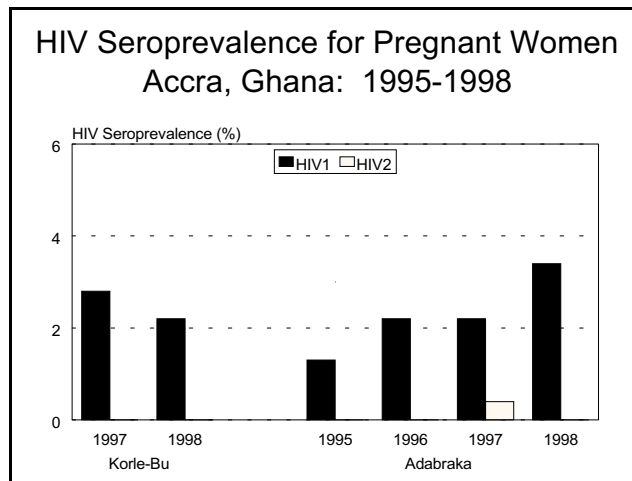
Sources: U.S. Census Bureau, UNAIDS, Population Reference Bureau, World Health Organization.

### Epidemiological Data

Epidemic State: Generalized

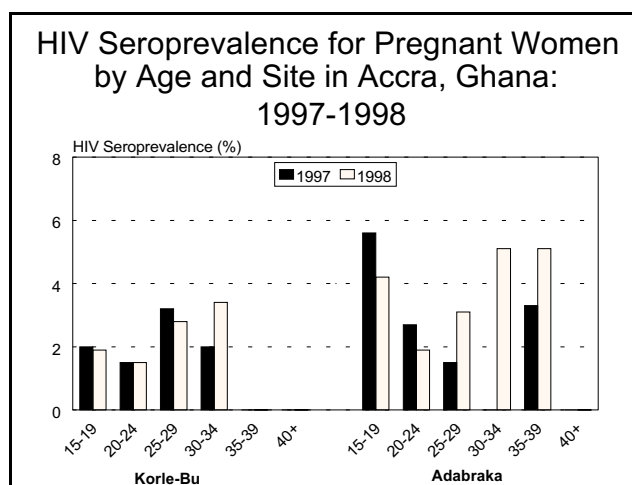
UNAIDS estimates that 4 percent of those 15 to 49 are HIV infected in Ghana. Sentinel surveillance revealed that, by 1998, anywhere from 2 to 12 percent of pregnant women were infected with HIV1 in Ghana. HIV2 infection levels ranged from no evidence of infection to 2 percent.

- In Accra, the capital, HIV1 seroprevalence among pregnant women ranged from 1 to 3 percent at two sentinel surveillance sites, Korle-Bu and Adabraka. At Adabraka, prevalence steadily increased during 1995-98. There was little evidence of HIV2 infection. Only in 1997 at Adabraka was HIV2 detected. Less than one-half of 1 percent of those tested were positive for HIV2.

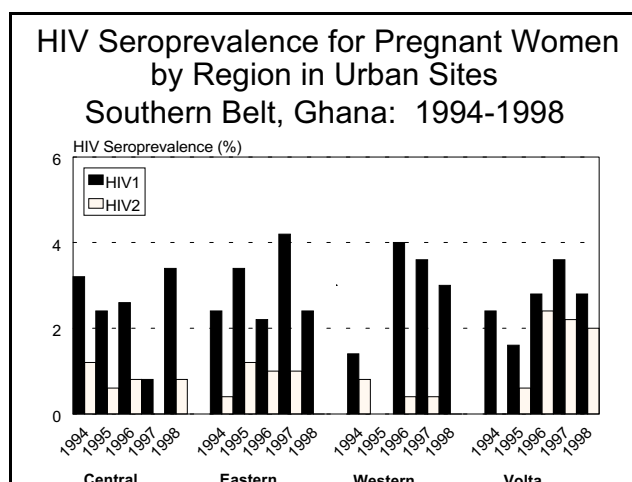


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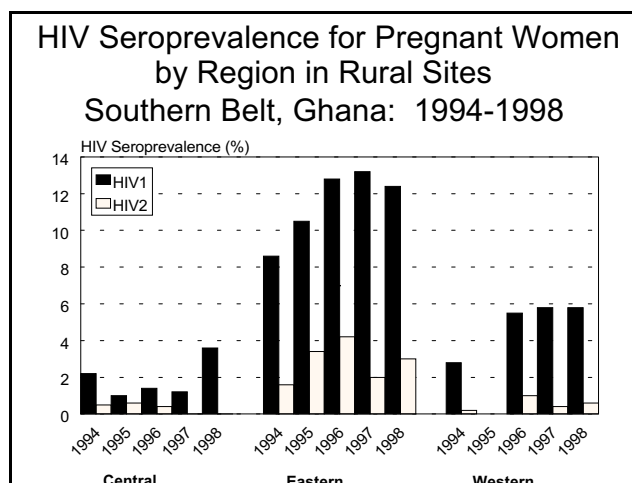
- Among pregnant women, HIV seroprevalence in Accra varied by age. In general, HIV infection levels were higher among pregnant women tested at the Adabraka site in both years. In 1997, among 15-19 year old women tested at the Adabraka site, 6 percent were HIV positive. In 1998, 4 percent of 15-19 year olds were HIV positive.



- Sentinel surveillance among pregnant women at urban sites in four regions located in the Southern Belt of Ghana found HIV1 infection levels between 1 and 4 percent during 1994-98. HIV2 infection rates ranged from no evidence of infection to 2 percent.

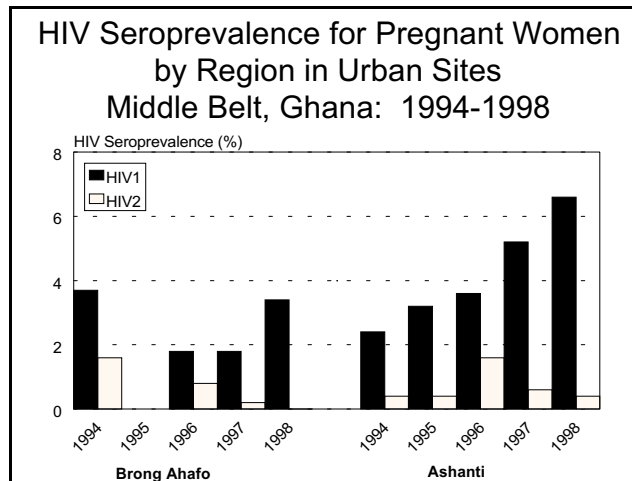


- Compared to urban sites, sentinel surveillance among pregnant women at rural sites in the Southern Belt generally found higher levels of HIV1 infection. In the Eastern Region in particular, HIV1 prevalence ranged from 9 to 13 percent during 1994-98. Unusually high HIV prevalence rates seen here can be explained by sex worker migrations, particularly to Agomanya, located in the Eastern Region.

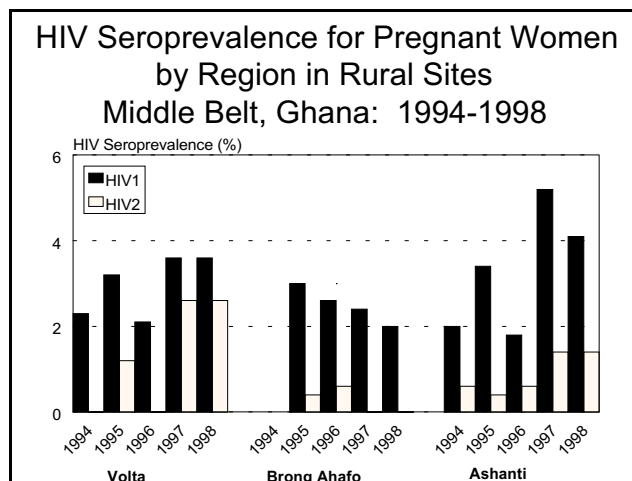


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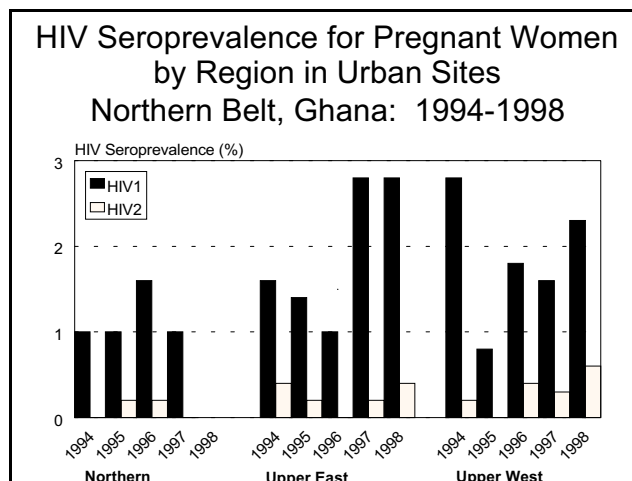
- Sentinel surveillance among pregnant women at urban sites in Brong Ahafo and Ashanti Regions in the Middle Belt found that HIV1 prevalence ranged from 2 to 7 percent during 1994-98. HIV1 prevalence steadily increased in Ashanti Region during this time period. HIV2 prevalence ranged from no evidence of infection to 2 percent of pregnant women tested.



- Sentinel surveillance among pregnant women at rural sites in Brong Ahafo, Ashanti, and Volta regions in the Middle Belt found somewhat lower levels of HIV1 infection than that found in the urban sites. HIV1 prevalence ranged from 2 to 5 percent during 1994-98. HIV2 prevalence levels were identical to those found at urban sites, 0 to 2 percent.

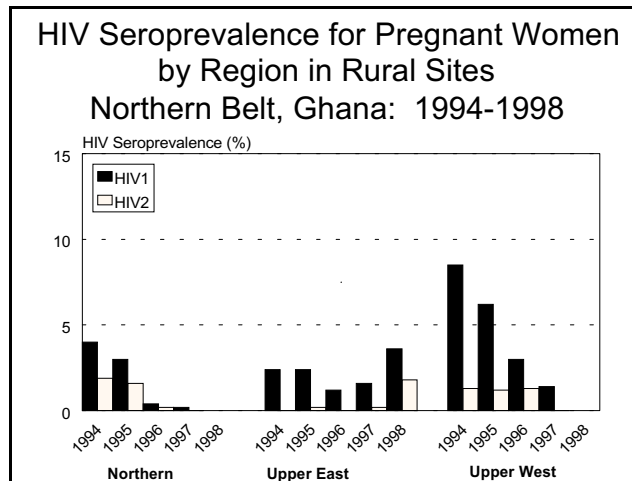


- HIV seroprevalence among pregnant women tested at sentinel urban sites in the Northern Belt was generally lower than that found elsewhere in Ghana. HIV1 prevalence ranged from 1 to 3 percent while HIV2 prevalence ranged from no evidence of infection to 1 percent during 1994-98.

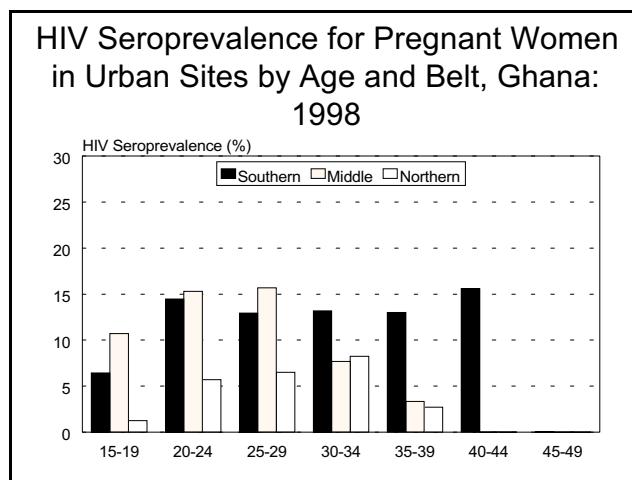


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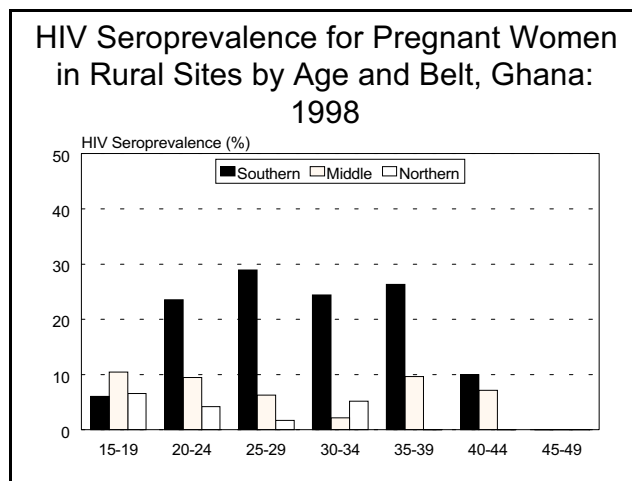
- HIV seroprevalence among pregnant women tested at sentinel rural sites in the Northern Belt was higher than that found at urban sites there. HIV1 prevalence ranged from less than 1 percent to 9 percent. HIV2 prevalence ranged from no evidence of infection to 2 percent during 1994-98.



- In 1998, HIV seroprevalence among pregnant women tested at sentinel surveillance sites in urban areas of Ghana was generally highest in the Southern Belt. Among the youngest women tested, those 15-19 years of age, HIV prevalence ranged from 1 percent in the Northern Belt to 11 percent in the Middle Belt.

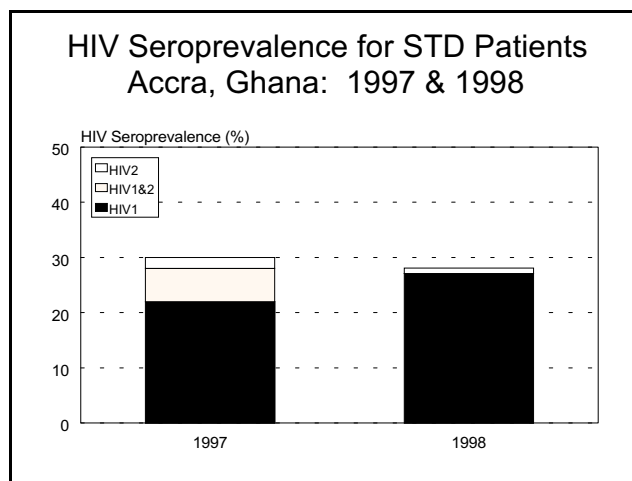


- In 1998, HIV seroprevalence among pregnant women tested at sentinel surveillance sites in rural areas of the Southern Belt was actually higher than that found in Southern Belt urban areas. HIV prevalence ranged from no evidence of infection among the oldest women to 29 percent among 25-29 year olds.

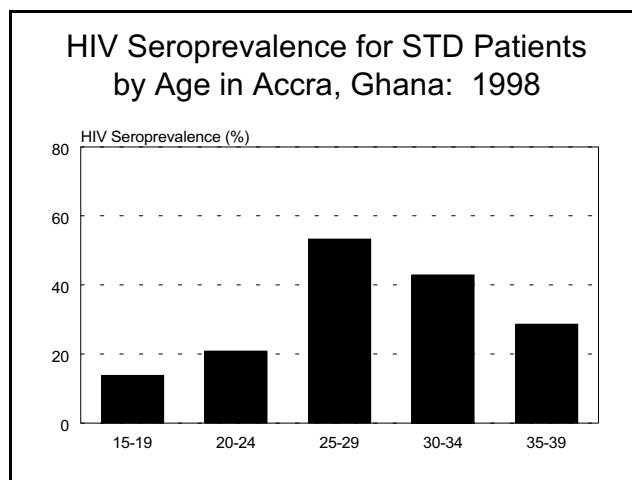


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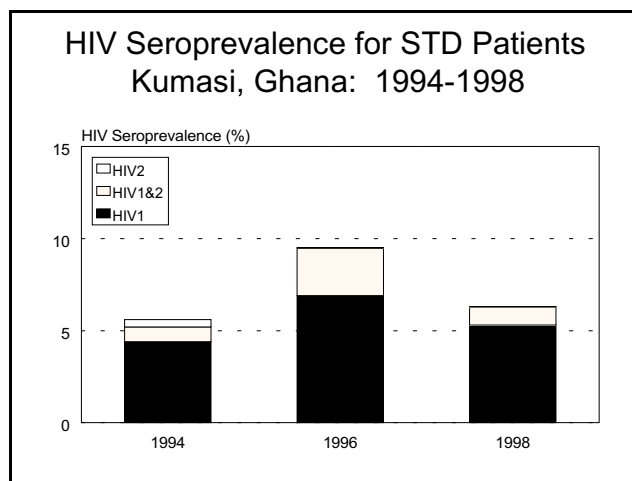
- HIV1 seroprevalence among STD patients tested at the Adabraka sentinel surveillance site located in Accra rose from 22 to 27 percent between 1997 and 1998. At the same time, HIV2 infection went from 2 to 1 percent of patients tested. Six percent of patients were dually infected in 1997, none in 1998.



- HIV seroprevalence varied by age among the STD patients tested at the Adabraka sentinel surveillance site. Fifty-three percent of those 25-29 were HIV positive in 1998.

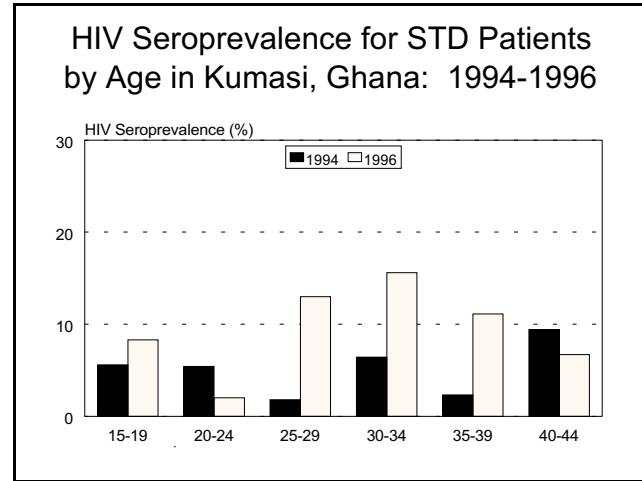


- HIV1 prevalence among patients tested at the sentinel STD clinic in the Komfo Anokye Teaching Hospital (KATH) in Kumasi, the capital of Ashanti Region and the second largest city in Ghana, fluctuated between 4 and 7 percent during 1994-98. HIV2 prevalence ranged from 1 to 3 percent. In 1994, less than 1 percent of patients tested positive for both viruses. In 1996 and 1998, none were dually reactive.

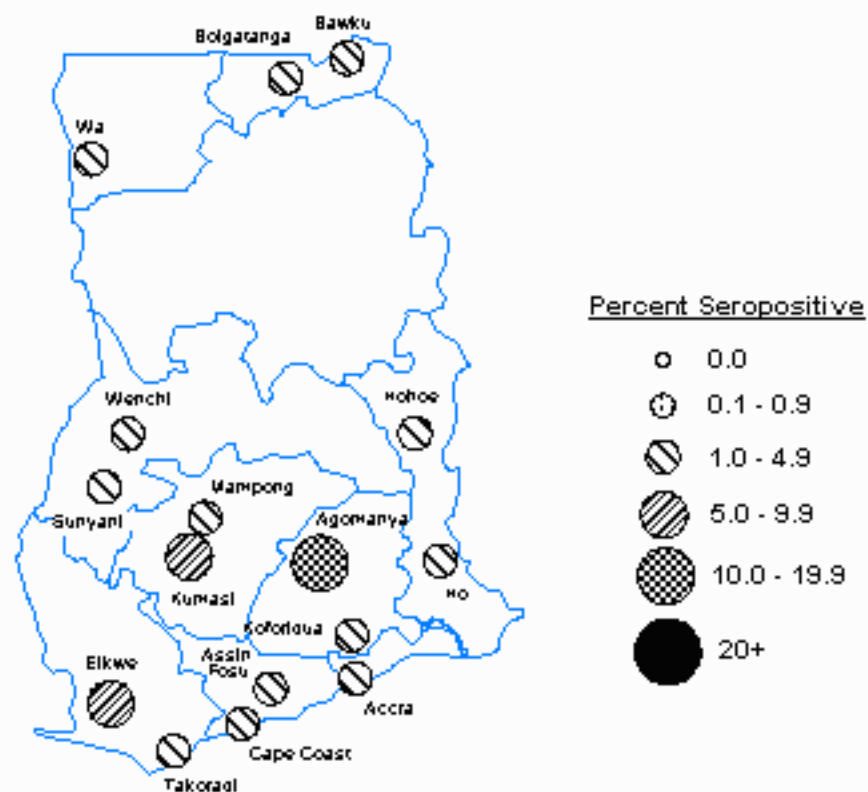


## Ghana

- HIV prevalence data were available by age for the patients tested at the KATH STD clinic in 1994 and 1996. In 1994, prevalence ranged from 2 to 9 percent. In 1996, prevalence ranged from 2 to 16 percent.



# Seroprevalence of HIV-1 for Pregnant Women Ghana: 1998



U.S. Census Bureau, Population Division,  
International Programs Center,  
Country Profile, September 2000.

## Sources for Ghana

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- M0436 Ministry of Health, 1995, HIV/STD Sentinel Surveillance: 1994, Disease Control Unit, Ministry of Health, Accra, Ghana, March, unpublished report.
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