

Country Profile | President's Malaria Initiative (PMI)

GHANA

April 2009



At a Glance: Ghana

Population - 2009: 23.8 million¹

Life expectancy at birth - 2009:
59 years (male), 61 years (female)¹

Population at risk of malaria - 2006:
100%²

Under-5 mortality rate - 2007:
115/1,000, or approximately 1 in 9
children³

¹ US Census Bureau, International Data Base 2009

² WHO World Malaria Report 2008

³ UNICEF State of the World's Children 2009

Background

Malaria is transmitted throughout all of Ghana and is responsible for more than 44 percent of outpatient visits and approximately 22 percent of deaths in children under the age of five.

Ghana is one of 15 countries benefiting from the President's Malaria Initiative (PMI), a five-year, \$1.2 billion program led by the U.S. Agency for International Development (USAID) and implemented together with the Centers for Disease Control and Prevention (CDC).

Goal

The goal of PMI is to reduce malaria deaths by 50 percent in 15 countries in Africa by reaching 85 percent of the most vulnerable groups – principally pregnant women and children under five years of age – with lifesaving prevention and treatment measures.

PMI coordinates with National Malaria Control Programs (NMCPs) and international partners, including the World Health Organization (WHO); the Global Fund to Fight AIDS, Tuberculosis and Malaria; the World Bank Malaria Booster Program; the Roll Back Malaria partnership; the Bill and Melinda Gates Foundation; nongovernmental organizations, including faith-based and community groups; and the private sector.

Key Interventions

In support of Ghana's NMCP, PMI backs four key intervention strategies to prevent and treat malaria:

- Insecticide-treated mosquito nets (ITNs)
- Indoor residual spraying with insecticides (IRS)
- Intermittent preventive treatment for pregnant women (IPTp)
- Diagnosis of malaria and treatment with artemisinin-based combination therapy (ACT)

Results to Date

Ghana is entering its second year as a PMI focus country. With support from PMI and its partners, malaria control interventions are being implemented, and vital commodities are being distributed to vulnerable populations.

Insecticide-treated mosquito nets: Sleeping under a long-lasting ITN provides protection from malaria-carrying mosquitoes. The nets are nontoxic to humans, last up to three years, and do not need re-treatment. PMI supports Ghana's mixed model for the distribution of long-lasting ITNs, which includes mass free distribution; targeted subsidy programs, including voucher schemes in some regions; subsidized sales at public clinics; commercial sales; distribution at the community level through nongovernmental organizations; and workplace distributions. Since beginning work in Ghana, PMI has procured 410,000 ITNs; most of them will be distributed in early 2009. Last year, PMI worked with its partners to distribute more than 236,000 nets through a voucher program and another 750,000 ITNs, purchased by UNICEF and the World Bank, during a nationwide campaign to distribute 1.5 million ITNs.

Indoor residual spraying: IRS acts by killing or shortening the lives of adult female malaria-carrying mosquitoes when they rest on the sprayed inside walls of homes after feeding, cutting transmission of malaria. During 2008, PMI supported the first large-scale implementation of IRS in the public sector in Ghana, in collaboration with the Ghana Health Service. PMI also worked with the mining company AngloGold Ashanti, which provided technical assistance and collaboration, particularly in the areas of community sensitization, training of trainers, and training of spray operators. During 2008, PMI supported the spraying of more than 254,000 houses in Ghana, protecting more than 600,000 people.

Malaria in pregnancy: Pregnant women are particularly vulnerable to malaria, since pregnancy reduces a woman’s immunity to malaria. Unborn children also suffer the consequences of maternal malaria infections, which can result in low birthweight and a higher risk of death early in infancy. During 2008, PMI provided technical and financial support to update the health care worker training curriculum on malaria in pregnant women and supported training of 464 health workers on IPTp.

Diagnosis and treatment: ACTs are extremely effective against malaria parasites and have few or no side effects. In 2008, PMI provided technical assistance to strengthen the supply chain for ACTs and to promote their rational use. PMI also supported the development of the national policies on treatment, including the expansion of home management of malaria, the updating of training manuals, and the use of both microscopy and rapid diagnostic tests for malaria diagnosis. To avoid a nationwide stockout of ACTs, PMI procured an emergency supply of more than 1.1 million ACT treatments, which arrived in country in November 2008 for distribution to health facilities.

PMI Funding

For fiscal year 2009, PMI allocated \$17.3 million in funding for malaria prevention and treatment in Ghana. Of this amount, 33 percent will support malaria diagnosis and procurement and rollout of ACTs, 28 percent ITNs, 21 percent IRS, 3 percent IPTp, and 2 percent monitoring and evaluation activities. Nearly 50 percent of the total budget will be spent on commodities.

	FY 2007 Jump start funds	FY 2008	FY 2009
Budget	\$5 million	\$16.8 million	\$17.3 million

For details on 2009 PMI activities in Ghana, please see the Malaria Operational Plan at http://www.pmi.gov/countries/mops/ghana_mop-fy09.pdf.