

Launch of Support to Evidence-informed Priority Setting (StEPS) Ghana Project

Theme: Enhancing prudent health resource management; the role of Priority Setting



28th September 2023 MOH Conference Room, Accra 10:00 am

Hon. Kwaku Agyeman-Manu (MP)



Launch of the Ghana Support to Evidence-informed Priority Setting (StEPS) project

Date: 28th September 2023; Venue: Ministry of Health Conference Room, Ridge; Time: 10:00 am

Theme

"Enhancing prudent health resource management; the role of Priority Setting"

Preamble

Non-communicable diseases (NCDs) are diseases that are not primarily caused by infections and cannot be spread from person to person. They are often chronic and long-lasting, leading to considerable morbidity, mortality, and economic burden. NCDs are a significant public health concern globally, and this is also true in Ghana. Some common examples of NCDs include cardiovascular diseases (such as heart disease and stroke), cancer, diabetes, and chronic respiratory diseases. These diseases are often associated with risk factors such as unhealthy diets, physical inactivity, tobacco use, and excessive alcohol consumption. In many countries, including Ghana, NCDs have become a major health challenge due to changing lifestyles, urbanization, and an aging population. The burden of NCDs can strain healthcare systems, reduce productivity, and place a significant economic burden on individuals and societies.

Priority setting in the context of NCDs involves determining which interventions, strategies, and policies should be given precedence in order to effectively prevent, control and manage these diseases. The Ghana Ministry of Health (MOH) is collaborating with the Bergen Centre for Ethics and Priority Setting in Health (BCEPS) of the University of Bergen in Norway to understand and promote ethically acceptable, fair, and efficient priority setting in national health systems. The project seeks to enhance the practice of priority setting in health and will lead to the development of a national framework for priority setting in Ghana applying it to benefits package for non-communicable diseases (NCDs) in Ghana.

Objectives

- To launch the STEPS project in Ghana
- To inaugurate the project Steering Committee, Technical Working Group, Project Secretariat
- To share project scope, activities, and outcomes
- To engage key stakeholders on the STEPS project objectives

Expected outputs

• Technical, Media, and Project briefs, etc. on StEPS project disseminated.

- Key stakeholders, including the Media, engaged on the NCD challenge and the need for priority setting
- The STEPS Project and Project governance structures inaugurated

PROGRAMME

Part 1	
09:30 am	Registration
10:00 am	Guests Seated
	Opening prayer
	Mr Festus Korang
	Head, Africa Union (AU) Desk, Ministry of Health (MOH) – 3 mins
	Introduction of the Chairman
	Dr Emmanuella Abassah-Konadu
	StEPs Project, MOH – 5 mins
	Chairman's Opening Remarks
	Dr Anarfi Asamoah Baah – 8 mins
	Welcome address
	Dr Mrs. Joycelyn Azeez
	Director of Pharmacy, MOH – 10 mins
	Statement by the Ghana Health Service
	Dr. Patrick Kuma-Aboagye
	Director General, Ghana Health Service – 10 mins
	Statement by Bergen Centre of Ethics and Priority Setting (BCEPS), University of
	Bergen
	Prof. Lumbwe Chola (StEPS Project Coordinator, Norway) – 10 mins
	Statement by the Diabetic Association of Ghana – 5 mins
	Presentation on Priority Setting
	Dr Maureen Martey
	StEPS Project Co-Chair Technical Working Group/
	Policy Planning Monitoring and Evaluation Directorate, MOH – 10 mins
	Presentation on the role of the StEPS project on Priority Setting
	Ivy Amankwah and Dr Leonard Baateama – 10 mins
	Question and Answer Session
	Short Address by the Norwegian Embassy in Ghana
	Ambassador Ingrid Mollestad
	Norwegian Ambassador to Ghana – 12 mins
	Keynote Address, Launch of StEPS Project and Project Governance Structures
	Hon. Kwaku Agyeman-Manu, MP, Minister of Health – 15 mins
	Chairman's Closing Remarks
	Dr Anarfi Asamoah Baah – 10 mins
	Vote of Thanks
	Dr Mavis Sakyi,
	StEPS Project/Technical Coordination Directorate, MOH – 5 mins
	Closing prayer
	Mrs Ivy Amankwah
	StEPS Project, MOH – 5 mins
	Media Engagement
	StEPS Project Senior Research Advisor and Technical Working Group

1st Joint Meeting of the StEPS Steering Committee, StEPS Technical Working Group and StEPS Project Secretariat

MCs:

Mr Nicholas Nyagblornu, PPME, MOH Dr Emmanuella Abassah-Konadu, Pharmacy, MOH

Zoom Meeting

https://us06web.zoom.us/j/88642318904?pwd=YmJhOFhTUkgydkNEWC9seEd4UUgrQT09 *Meeting ID*: 886 4231 8904 *Passcode*: 402968

Facilitator (Online participants):

Mr Abdul Mumin, PPME, MOH; IT Support: Peter Asante, IT, MOH

Brief on Non-Communicable Diseases (NCDs) in Ghana

What are NCDs?

Non-communicable diseases (NCDs) are a growing health challenge in Ghana, driven by changing lifestyles, urbanization, and an aging population. This brief provides an overview of the NCD situation in Ghana, highlighting key NCDs, risk factors, and strategies for prevention and control.

What are some of the examples of NCDs common in Ghana?

- Cardiovascular Diseases (CVDs): Hypertension, ischemic heart disease, and strokes are major contributors to the NCD burden in Ghana. Elevated blood pressure and unhealthy diets contribute to CVD.
- 2. Diabetes Mellitus: Both type 1 and type 2 diabetes are on the rise in Ghana. Urbanization, sedentary lifestyles, and poor dietary habits contribute to this trend.
- 3. Cancers: Breast, cervical, and prostate cancers are prevalent in Ghana. Limited awareness, lack of screening, and late-stage diagnosis are challenges.
- 4. Chronic Respiratory Diseases: Chronic obstructive pulmonary disease (COPD) and asthma are significant concerns due to environmental factors and indoor air pollution.

What are some of the factors putting people at risk of developing NCDs?

- 1. Unhealthy Diets: High consumption of processed foods, sugary beverages, and inadequate intake of fruits and vegetables contribute to NCD risk.
- 2. Lack of Physical Activity: Sedentary lifestyles are prevalent, driven by urbanization and changes in work patterns.
- 3. Tobacco Use: Smoking and smokeless tobacco consumption are common risk factors for NCDs.
- 4. Harmful Alcohol Consumption: Excessive alcohol intake contributes to various NCDs, including liver diseases.

What are some of the typical strategies for Prevention and Control of NCDs?

- 1. Health Promotion and Education: awareness campaigns to educate the public on NCD risk factors and the importance of adopting healthier lifestyles.
- 2. Screening and Early Detection: screening programs for high-risk individuals to detect NCDs at early stages when interventions are more effective.

- 3. Primary Healthcare Integration: strengthening primary healthcare to provide early diagnosis, treatment, and management of NCDs.
- 4. Policy and Regulation: enforcing policies to reduce consumption of unhealthy foods, tobacco, and alcohol through taxation, labeling, and advertising restrictions.
- 5. Community-Based Interventions: engaging communities in NCD prevention through local health initiatives and partnerships.
- 6. Health Systems Strengthening: enhancing healthcare infrastructure, workforce capacity, and data collection systems to address NCDs effectively.
- 7. Multi-Sectoral Collaboration: working with various sectors such as education, agriculture, and urban planning to address NCD risk factors holistically.
- 8. Equity and Vulnerable Populations: prioritizing underserved populations to mitigate health disparities.
- 9. Research and Innovation: better understanding of local NCD patterns, evaluation of interventions, and development of context-specific solutions.

The burden of NCDs in Ghana requires a comprehensive and targeted approach. By addressing risk factors, promoting healthier lifestyles, and improving healthcare infrastructure, Ghana can effectively reduce the impact of NCDs and enhance the overall health and well-being of its population. Multidisciplinary collaboration and evidence-based strategies are crucial for success in this endeavor.

What is the Ghana StEPS project doing about NCDs in Ghana?

Defining a national priority setting framework and refining the benefits package for NCDIs in Ghana

Background: The Bill & Melinda Gates Foundation, the Trond Mohn Foundation and Norad is supporting BCEPS, to undertake work on defining and integrating essential NCD interventions in a number of Africa health systems. In Ghana the project aims at refining the benefits package for NCDIs in Ghana and strengthening the country capacity in the area of priority setting and NCDI benefit package refinement. Given the limited resources to support national health systems, there is need to ration these resources to achieve universal health coverage (UHC), which is a key component of the sustainable development goals (SDGs). The three steps of design, implementation and enforcement are needed to establish the optimal combination of explicit rationing mechanisms. There is therefore a well-recognized need to strengthen fair and efficient priority setting for UHC in the area of NCDs

Aim and objective:

The overall aim of this project is to facilitate effective priority setting in order to improve efficiency, equity, and financial risk protection from essential NCDI packages in Ghana. The specific objectives are to:

- 1. To define and propose an essential NCDI UHC package in Ghana
- 2. To develop capacity in health economics and priority setting related to NCDI in Ghana
- 3. To make recommendations for integrated delivery of priority NCDI interventions in the Ghana health system

Expected outcomes of the project:

- 1. Defined and proposed essential NCD UHC packages in Ghana
- 2. Trained experts in health economics and priority setting to strengthen capacity in the Ministry of Health
- 3. Recommendations for integrated delivery of priority interventions in Ghana



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