

Ghana's Integrated Child Health Campaign

1-5 November 2006

THE POTENTIAL TO SAVE AT LEAST 20,000 YOUNG CHILDREN'S LIVES

The Challenge

Every year in Ghana, about 80,000 children do not live to celebrate their fifth birthday. Most of these children die from preventable causes. Malaria is hyper-endemic in Ghana and claims one-quarter of all under-five deaths every year – 20,000 young lives. Acute respiratory infection is responsible for 18 per cent of under-five deaths, and diarrhea for another 18 per cent. Malnutrition is the underlying cause of death in half of all under-five deaths.

Over the last five years, national infant mortality and under-five mortality rates in Ghana have not improved – startling evidence that children continue to die needlessly.

Saving Young Lives – What Works

A number of simple, proven and cost-effective health and nutrition interventions can prevent the loss of life among infants and children.

- **Bed Nets:** The use of insecticide-treated bed nets (ITNs) can reduce all-cause child mortality by 20 per cent.
- **Vitamin A:** Providing children with Vitamin A supplements every 6 months can also save young lives by 20 per cent.
- **Measles vaccine:** Immunizing all children against measles can eliminate measles as a cause of death.
- **Polio vaccine:** Immunizing all children against polio can eradicate polio.
- **Deworming:** Ensuring that children are dewormed twice a year reduces cases of anemia and improves cognitive development.
- **Exclusive breastfeeding** for six months and complementary feeding together can avert 19 per cent of child deaths.
- **Oral Rehydration Salts** used promptly and effectively to treat diarrhea can reduce child mortality by 15 per cent.

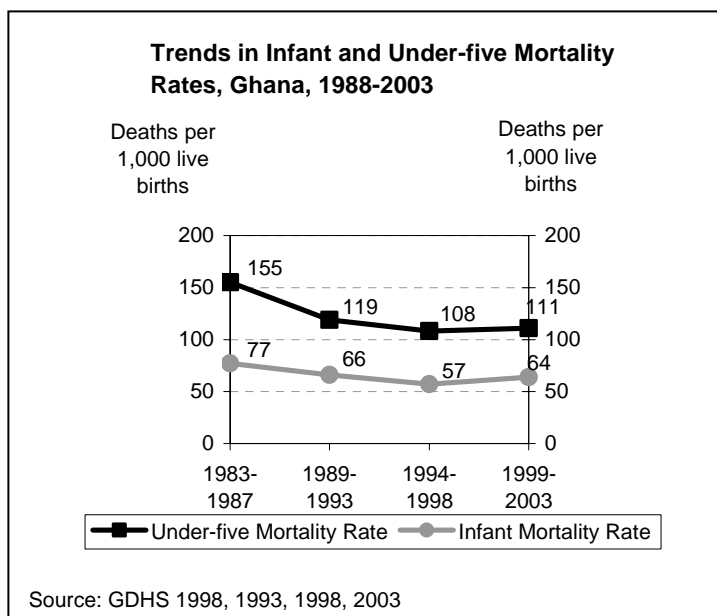
Good news in Ghana

Since the 2002 measles campaign in Ghana, **no children have died from measles.** There have also been **no polio cases** since 2003.



Reducing Child Mortality in Ghana

The Government of Ghana recently adopted the **High Impact Rapid Delivery** (HIRD) approach as a national strategy to reduce child mortality. The approach bundles core health and nutrition interventions and delivers many of them in the heart of communities where families tend to lack access to healthcare facilities and lack even the most basic knowledge on how to manage common childhood disease.



The HIRD package includes:

- Routine immunization
- Vitamin A supplementation
- Exclusive breastfeeding and complementary feeding
- Use of insecticide treated bed nets
- Treatment of diarrhea (using Oral Rehydration Therapy), malaria and pneumonia
- Prevention of mother-to-child transmission of HIV (PMTCT)

Initiated by the Ghana Health Service, the **Community-based Health Planning and Services (CHPS) Initiative** is a complementary strategy to the HIRD approach.

CHPS promotes the idea that communities can be active participants in the provision of their own healthcare. The programme delivers primary health care closer to communities, mainly through CHPS compounds, community-built units housing at least one community nurse.

The Integrated Health Campaign: A Jumpstart for Reducing Child Mortality

The one-week integrated health campaign supplements the HIRD and CHPS initiatives, boosting the chances of child survival for millions of children across Ghana.

Who Will Benefit?

- **Polio vaccine** for all children 0-5 years
5.9 million children
- **Measles vaccine** for all children 9-59 months
5 million children
- **Vitamin A** supplementation for all children 6-59 months
5.4 million children
- **Free Long-Lasting bednets** for all children 0-2 years
2.1 million bednets
- **Deworming** for children 2-5 years in three northern regions
500,000 children



How Will the Campaign Work?

There will be **9,050 immunization points** around the country, and scores of teams to ensure all children are reached. Supervised by a health worker, each team will have 2-4 members:

- One or two volunteers for crowd/flow organizing and screening/recording
- One health worker to provide vaccinations (mixing and injection)

Fixed-post teams: 160 children per team per day (one vaccinator and three volunteers)

Mobile teams: 80 children per team per day (one vaccinator and two volunteers)

Camp-out teams: 40 children per team per day (one vaccinator and one volunteer)

What's Happening Now?

- Ship loads with containers full of bed nets are arriving
- Vaccines are being flown in to the country
- Over 28,000 volunteers are being oriented
- Communities across the country are being mobilized
- A massive awareness-raising and education campaign is underway

Meeting the Communication Challenge

It will take a massive effort to spread the word to every family to take their children to the closest immunization site and to ensure they sleep under a treated bed net.

The campaign calls for:

- Mobilization by every District Assembly
- An inter-ministerial response
- Support from faith-based organizations
- Campaign visits and other initiatives by development partners and ambassadors

Campaign Leadership: The campaign is led by the Ministry of Health and the Ghana Health Service, in collaboration with other key government Ministries and District Assemblies. The campaign is supported by the Government of Japan, DFID, UNICEF, WHO, World Bank, Micronutrient Initiative (CIDA), USAID, UN Foundation (Measles Partnership), Rotary Club, Ghana Red Cross Society, private sector and other development partners.