The Millennium Development Goals

1 ERADICATE EXTREME POVERTY AND HUNGER
2 ACHIEVE UNIVERSAL PRIMARY EDUCATION
3 PROMOTE GENDER EQUALITY AND EMPOWER WOMEN
4 REDUCE CHILD MORTALITY
5 IMPROVE MATERNAL HEALTH
6 COMBAT HIV AND AIDS, MALARIA AND OTHER DISEASES
7 ENSURE ENVIRONMENTAL SUSTAINABILITY
8 DEVELOP A GLOBAL PARTNERSHIP FOR DEVELOPMENT

Source: http://www.unicef.org/mdg/
All photographs © UNICEF/Olivier Asselin
In the 21st year of the declaration of the Convention on the Rights of the Child – the historic event that led to 194 countries around the world being united in their commitment to recognise and uphold the rights of all children – it is incumbent on us to recognise the progress that has been made, identify the gaps and challenges, and re-affirm our commitment to ensuring results for all children.

Ghana was the first country in the world to ratify the Convention in 1990. It is also one of the first countries to adopt a comprehensive Children’s Act (Act 560, 1998) to domesticate the Convention in national legislation. The interests of children have been strongly reflected in the national development agenda and this has translated into adequate provisions within the growth and poverty reduction strategies of the country.

UNICEF Ghana remains committed to advocating for and supporting the state and all actors in the progressive realisation of all Ghanaian children’s right to survival; to develop to the fullest; to protection from harmful influences, abuse and exploitation; and to participate fully in family, cultural and social life. Core to our role is supporting the development of operational strategies, influencing national policy and evidence-based advocacy for scaling up interventions that make a difference to the lives of children. Our focus is on developing capability; ensuring that legislation, systems, tools and processes are in place; and advocating for adequate investment. Investing in children is the most impactful contribution that any partner or donor can make.

In this package we highlight the current situation of children in Ghana, the achievements that have resulted from investments in the priority areas of UNICEF attention – young child survival and development; basic education and gender equity; children and AIDS; child protection; and policy, advocacy and partnerships for children. We also analyse the gaps and challenges while outlining the way forward and investments needed in attaining results for children.

We thank all our partners and donors who have made the journey with us up to now. You are a contributor to the progress that has been made – Ghana is a country that yields results for development investments.

We welcome you to join us in our journey. United and committed to the core principles of the Convention on the Rights of the Child – nondiscrimination, devotion to the best interests of the child; the right to life, survival and development; and respect for the views of the child.

Dr Yasmin Ali Haque
Representative
Children and Women in Ghana

Ghana is one of Africa’s true success stories. The benefits of a decade of economic growth, little political strife and democratic governance have served the country well, and set the stage for Ghana realising the ambition of reaching middle-income status by 2020. Today Ghana has some of the most progressive policies and legislation in Africa in place to realise children and women’s rights. The discovery of rich oil deposits promises to increase national wealth and provides a unique opportunity to invest in social development and accelerate the achievement of results for children.

Ghana is on track to meet the Millennium Development Goal (MDG) targets of halving poverty and reaching 80 per cent coverage for safe drinking water by 2015. Net primary school enrolment is among the highest on the continent at 89 per cent and gender parity, at 0.97, has nearly been achieved. However, focused attention is needed if the goal for universal primary education is to be achieved.

Child mortality in Ghana has dropped by 30 per cent, stimulated by investment in the expansion of effective health care services that focus on the country’s top childhood killers such as measles, pneumonia, malaria, diarrhoea and malnutrition. There is a real chance that Ghana can meet the MDG on reducing child mortality if efforts are further intensified and scaled up nationally.

Yet even with Ghana’s growing wealth, 28 per cent of the country remains in poverty with inadequate access to health care, nutrition, education and protection. Those who are left behind are often the poorest and are usually women and children. For example, only 20 per cent of the HIV-positive children who need antiretrovirals actually receive them, in part as only 31 per cent of the health facilities offer HIV and AIDS services.

Ghana’s maternal mortality rate is unacceptably high at 451 per 100,000 live births. Progress towards the MDG on improving maternal health is slow and needs urgent attention.

Access to adequate sanitation lags behind the availability of safe drinking water, especially in the three northern regions. Although 78 per cent of Ghanaians have access to safe water, people living in rural areas and the urban poor are often deprived of this essential service. The progress in basic sanitation has been extremely slow with access to basic sanitation at just 10 per cent nationwide.

While primary enrolment rates are high in Ghana, a major challenge is to ensure that children complete primary education and do so with competencies needed to succeed in life. Educational materials are still needed, and teacher training and making schools safe, healthy and gender-sensitive are all-important. Another concern is that 630,000 primary-school aged children are not in school. Removing cost barriers to education and making schools more child friendly will make a huge difference in getting these children into the classroom.

The exploitation of children – be it on cocoa farms, in domestic servitude, on city streets, or through the human trafficking trade – is Ghana’s major child protection challenge. Many children are still not registered at birth, which increases their risk of exploitation and abuse. Domestic violence and child abuse are underreported but growing trends. Legislation to protect children and women is progressive but is not fully put into practice. A lack of comprehensive statistics and the low capacity and poor coordination of implementing partners compromise the effectiveness of the child protection system.
UNICEF in Ghana

UNICEF has been operational in Ghana since 1982. Today, the country office in Accra is manned by a staff of 64. The field office, in Tamale, the capital of the Northern Region, has a staff of 24. The field office spearheads development activities in the three deprived northern regions of Ghana.


The total planned annual budget has grown from US$13 million in 2004 to US$25 million in 2009.
UNICEF’s work in Ghana is guided by Ghana’s Poverty Reduction Strategy II, UNICEF’s Medium Term Strategic Plan (MTSP) for 2006–09 and the United Nations Development Assistance Framework (UNDAF). At the sectoral level, UNICEF supports government policies such as the Child Health Policy, the Education Strategic Plan, and the National Social Protection Strategy.

Health and Nutrition: UNICEF assists the government to implement high-impact, cost-effective health and nutrition services targeted at hard-to-reach communities. Increasing access to safe water, hygiene and sanitation to prevent and manage diseases such as malaria, pneumonia, diarrhoea and Guinea Worm disease is also a priority.

Education: UNICEF supports improvements in the quality of basic education and early childhood learning and the implementation of an innovative nationwide ‘HIV Alert’ school model where children, parents and teachers educate each other on HIV prevention.

Child Protection: UNICEF works closely with the government to develop protective policies and legislation, and to build the capacities of national institutions and systems to better serve and protect the most vulnerable children. One of UNICEF’s priorities is to help ensure that all children are registered at birth.

Advocacy, Communication, Monitoring and Analysis: UNICEF helps the government to design and implement social and economic policies, laws and budgets that enable the government to realise the rights of women and children.

Issues related to children and AIDS are programmed in a cross-cutting manner. This means that these issues are addressed in all four programme areas. Emergency Preparedness has been integrated into each of the programme areas and efforts have been made to build capacity in this critical domain. As a result UNICEF has successfully supported the Government of Ghana in responding to floods (2007–09), outbreaks of cholera (2007–08), and H1N1 cases (2009). Gender and child participation are other cross-cutting themes that are programmed for.

UNICEF’s main partners in Ghana include the government, NGOs, civil society, the media, the private sector and communities. UNICEF brings a global influence and reach, technical expertise and financial resources to provide the necessary support to its partners.

One of UNICEF’s main comparative advantages is that it works on different levels, engaging in dialogue and negotiation at the source of policy while working on the ground to demonstrate the impact of model interventions. UNICEF programmes target the poorest parts of the country and most marginalised groups of the population, focusing on interventions with a high and immediate impact on children’s health, education and protection.
Ghana benefits from a wide variety of donors who provide both budget support and support for specific projects. Around US$300 million of the government’s US$4.5 billion budget comes from direct budget support, which is provided by 11 bilateral and multilateral donors.

The government can use these contributions for any expenditure within the national budget; in exchange, the government and donors agree on an Annual Performance Framework, which includes targets in 14 sectors that the government must meet in order to receive direct budget support. UNICEF currently chairs the Vulnerability and Exclusion Sector Group and has chaired the Health and Education Sector Groups in previous years.

The government and development partners have committed themselves to the five principles of the Paris Declaration and the Accra Agenda for Action. These are mutual accountability, harmonisation, alignment, country ownership, and management for results. In essence, this means that the development partners attempt to use national processes and strategies instead of creating their own mechanisms that run parallel to government procedures. Significant progress was made in this area over the last decade, but substantial improvements could still be made both by donors and government.
**Goals and results at mid term**

UNICEF’s overall goal in Ghana is to support the government in realising the survival, development, protection and participation rights of children and to create an enabling environment to strengthen accountabilities for children. The following table presents the specific outcomes expected to result from UNICEF’s efforts during the current Country Programme, and indicates the status of achievement at the Midterm Review in October 2008.

<table>
<thead>
<tr>
<th>Programme</th>
<th>On Track</th>
<th>Limited Progress</th>
<th>Off Track</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health and Nutrition</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>By the end of 2006: All salt will be iodised</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ghana will be declared polio*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The cycle of transmission of Guinea Worm will be broken</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>By the end of 2009: Ghana will be certified free of Guinea Worm disease</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>By the end of 2010: The Accelerated Child Survival and Development/High Impact Rapid Delivery (ACSD/HIRD) model will be implemented and supported by the government and development partners as a national strategy, to contribute to the reduction of under-five mortality and child malnutrition (underweight) at the rate established in the 2006–08 GPRS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The ASCD/HIRD model will be partly implemented in two regions and fully implemented in two of the most deprived regions; under-five mortality will be reduced by 35 per cent; and child malnutrition (underweight) by 20 per cent in these regions</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prevention of Mother-to-Child Transmission (PMTCT) Plus will be implemented nation-wide</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A national HIV and AIDS response will be in place for the detection, treatment and care of HIV-positive children</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A cost-effective and sustainable rural sanitation model will be available for national replication, and rural sanitation coverage will be increased by 35 per cent in the Northern Region</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>By the end of 2010: The gross enrolment ratio will be 100 per cent, and gender equity in enrolment, retention and completion in basic education in the most deprived districts will be achieved</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A model to enhance quality of preschools and improve the developmental readiness for learning of children aged 4–5 years will be in place for national replication</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>80 per cent of all children aged 10–18 years will possess information and skills to reduce their risks and vulnerability to HIV and AIDS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Protection</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>By the end of 2010: The National Social Protection Strategy will be accepted, with mechanisms in place and financing available for its progressive implementation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Legal and enforcement institutions and systems will have an enhanced and expanded capacity to protect children from violence, exploitation and abuse</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>90 per cent of children will be registered during their first year</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Institutional capacities and mechanisms will be strengthened to monitor and respond to child trafficking</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Advocacy, Communication, Monitoring and Analysis</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>By the end of 2010: The capacities of project partners at decentralised and national levels will be strengthened through support for the generation, analysis and use of critical knowledge on the situation of children</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ghanainfo will be fully operational at national, regional and district levels</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Ghana was free from polio between September 2003 and August 2008. However, in the last quarter of 2008, eight confirmed cases from cross border importation were detected.
UNICEF influences government policies regarding children and women in all areas of its work. Regarding financial allocations, UNICEF works with the Ministry of Finance and Economic Planning to protect investments in children in light of the budget cuts that Ghana is likely to experience in 2010. A briefing of Ministers, Deputy Ministers, and other senior officials in July 2009 resulted in a commitment to establish a technical working group to protect investments in children.

In addition, UNICEF supported the non-governmental organisation, Integrated Social Development Centre, to analyse the 2009 budget and make an official submission to the Ministry of Finance on how to protect investments in children in the 2010 budget. An analysis of the 2010 budget is planned after it is issued in November 2009.

UNICEF is also supporting a macro-economic simulation of the potential impact of the global economic crisis in Ghana. The simulation will also analyse the potential of various policy options on households affected by the crisis.

In health, UNICEF has worked with the Ministry to create a Child Health Policy, which draws on the initiatives and experiences of UNICEF’s support to the Accelerated Child Survival and Development Programme (ACSD) in four regions of Ghana. The policy, which was launched in November 2009, shifts the Ghana Health Service’s approach from a disease-based method to a child-centred method of saving children’s lives. It also introduces community case management of major childhood diseases as the key method of addressing child morbidity and mortality.

In education, UNICEF provided critical funding to create the Early Childhood Development Policy, which includes a component on kindergartens. The Ministry of Education, with UNICEF assistance, is now creating a kindergarten model that outlines the key components of quality kindergarten education.

A number of child protection policies are being addressed. During the remainder of the Country Programme, UNICEF will assist the government to review the Children’s Act to ensure that it fully protects children’s rights. Over the last several years, UNICEF has supported the creation of the Human Trafficking Board, which is charged with overseeing programmes to assist victims of human trafficking. UNICEF also provided seed money for a Human Trafficking Fund, which enables the government to house, feed, and clothe children and women who have been released from bondage. UNICEF also currently supports the government in the development of a Juvenile Justice Policy, aimed at ensuring that children in conflict with the law are properly cared for, in line with global standards.
LESSONS FROM THE PAST AND THE WAY FORWARD

In 2008, the United Nations reviewed its support to the Government of Ghana within the United Nations Development Assistance Framework (UNDAF) and UNICEF undertook a Strategic Reflection Exercise to take stock of major achievements and new ways of capitalising on our comparative advantage. These two exercises set the stage for improvements in the UN’s support for Ghana to the end of the Country Programme in 2011.

MOVING TOWARDS UN COHERENCE

The Midterm Review of the UNDAF analysed progress made in six different areas by the UN and the government, highlighted achievements and suggested what more can be done or what can be done differently. It concluded that:

• The UN can play a critical role at the national level by providing strategic and technical support for research, policy and programme development and scale up of proven models. At the local level, the UN can help improve decentralisation and community empowerment.

• There was significant scope for the UN to enhance its assistance to the government in the area of monitoring and evaluation.

• The UN could take a stronger advocacy role on issues such as HIV and AIDS and maternal mortality.

• The UN could provide further support in helping the government implement the Paris Declaration and the Accra Agenda for Action.

UNICEF’s Strategic Reflection Exercise

UNICEF’s Strategic Reflection Exercise articulated the following key messages for each Focus Area in UNICEF’s Medium Term Strategic Plan:

Focus Area 1 – Young Child Survival and Development
It is possible to reduce under-five mortality rates in Ghana. To meet MDG 4 we need to focus and intensify our efforts through scaling up known and integrated packages of effective interventions (in health, nutrition, water, sanitation and hygiene), ensuring commodity security and developing innovative large-scale communication interventions on essential family practices. In Ghana over 40 per cent of under-five mortality is a result of neonatal mortality. Therefore achievement of MDG 4 requires significant focus on neonatal and maternal survival.

Focus Area 2 – Basic Education and Gender Equality
Very good progress in getting children into school and narrowing disparities has been made, but there needs to be a continued focus on disparity reduction, increasing retention and completion, and improving learning outcomes. Social norms and school environment factors that act as barriers to children, boys and girls, realising their full potential must be addressed effectively, taking children’s concerns into account.

Focus Area 3 – Children and AIDS
Ghana has been successful in containing the HIV and AIDS epidemic. However, care, prevention and treatment need to be further strengthened if gains are to be maintained and increased. The voices of young people – especially girls – must be heard and considered as programmes are developed.

Focus Area 4 – Child Protection
Positive strides have been made in developing the legislative framework and the focus now needs to be on strengthening the child protection system and establishing a protective environment for children. Effective communication and social mobilisation interventions will be developed based on a better understanding of the sociocultural norms that result in abuse and exploitation of Ghanaian children.

Focus Area 5 – Policy Advocacy and Partnerships for Children’s Rights
Impressive economic growth and a stable political environment have contributed to Ghana being on track for the income poverty aspect of MDG 1. Addressing inequitable distribution of resources will require stronger commitments by the government, improved evidence-based advocacy by UNICEF, and the active participation of civil society.
**Priority Areas for UNICEF**

In order to help Ghana fulfil children’s rights and to capitalise on UNICEF’s areas of global expertise, the Strategic Reflection Exercise in 2008 agreed that UNICEF should focus on five key priority areas in the remainder of the Country Programme:

1. **Understanding, containing and reducing disparities:** UNICEF will encourage the government to address disparities to ensure that children and women, especially the poorest and more disadvantaged, benefit from economic growth. UNICEF will advocate based on sound evidence and strong monitoring and evaluation systems and will support government ministries to gather the data necessary to demonstrate whether or not their programmes are helping the poorest children. Solid partnerships with both government and civil society will be critical to ensuring that a wide range of interest groups become concerned about marginalised children and their families.

2. **Development of capacities and systems for results:** UNICEF recognises that delivering services for children requires not only supplies and training, but also effective systems. In health, human resource plans need to be created to ensure that the right type of skilled health care providers are posted throughout the country. In child protection, a comprehensive protection system needs to be created that addresses the full range of social welfare needs that vulnerable children face. And, in water and hygiene, the successes at district level need to be replicated to create successful relationships between District Assemblies and District Water Committees.

3. **Adequacy, effectiveness, efficiency and expenditure for basic services:** Services can only be delivered if funds are available – and the choice of how to spend money indicates a country’s priorities. UNICEF will support line ministries to use data and analysis to choose the most cost-effective methods of delivering services. Budgets will be analysed to understand whether or not Ghana’s priorities are being supported with funds. And, ministries will be assisted to find ways to spend money more efficiently.

4. **Influencing sociocultural norms for children’s and women’s rights:** Over the next decade, UNICEF is expected to play an increasing role in influencing sociocultural norms for children’s and women’s rights. This will be especially relevant in a more urbanised context, since it is estimated that in 2015, 70 per cent of the population will live in cities. This may also mean that UNICEF will need to influence behaviours related to peri-urban areas, without forgetting people living in rural areas. In order to influence sociocultural norms, UNICEF will also need to strengthen its advocacy. This may require an integrated approach, with an inter-ministerial body capable of dealing with these complex issues (i.e. joint coordination with technical support from UNICEF).

5. **Strengthening management of knowledge, information, evidence, research and analysis:** Another priority strategic area for UNICEF is the continuous strengthening of knowledge management, information gathering, research and analysis. UNICEF needs to support operational research on areas affecting children and women, commission analysis of capacity and systems development, and insist on rigorous evaluation and documentation of innovations. UNICEF will also make its worldwide organisational knowledge, expertise and good practice in key areas available to national partners.
Australian Aid (AUSAID)
Bill and Melinda Gates Foundation
Canadian International Development Agency (CIDA)
Centre for Disease Control, Atlanta
Conrad N Hilton Foundation
Danish Committee for UNICEF
Emergency Preparedness Fund (EPF)
European Commission (EC)
European Commission Humanitarian Office (ECHO)
French Committee for UNICEF
German Committee for UNICEF
Government of Belgium
Government of France
Government of Japan
Government of Sweden
Government of the Netherlands
Irish Aid
Italian Committee for UNICEF
Micronutrient Initiative (MI)
Netherlands Committee for UNICEF
New Zealand Committee for UNICEF
Swiss Committee for UNICEF
UK Department for International Development (DFID – UK)
United Kingdom Committee for UNICEF
UN Office for the Coordination of Humanitarian Affairs (OCHA)
UNITAID
United Nations Foundation Inc.
United States Agency for International Development (USAID)
United States Fund for UNICEF
World Cocoa Foundation