

**MOVING GHANA'S HEALTH FORWARD – SOCIO ECONOMIC DIMENSION  
OF MEDICAL INTERVENTION**

**By**

**DAASEBRE PROFESSOR (EMERITUS) OTI BOATENG**

*Omanhene of New Juaben Traditional State, United Nations Commissioner on the  
International Civil Service Commission and former Government Statistician.*

**Delivered On the Occasion of the Maiden Anniversary of Motec Life –UK**

**At**

**The British Council Hall, Accra, Ghana, Tuesday 16<sup>th</sup> October 2007**

Mr. Chairman, Professor Paul K. Nyame, Rector of the Ghana College of Physicians and Surgeons,  
Major Courage Quarshigah (Rtd), Hon. Minister of Health,  
Dr. Paul Ofori-Atta, Orthopaedic Surgeon and President of MOTEC LIFE – UK,  
Most Rev. Dominic Andoh, Emeritus Catholic Archbishop of Accra,  
Nananom,  
Representative of Migration and Development in Africa (MIDA),  
Distinguished invited guests,  
Representatives of the Media, Ladies and Gentlemen

It gives me the greatest pleasure to be part of this maiden lecture being organized by MOTEC LIFE – UK in collaboration with the Ministry of Health and the Akwantukese Festival of the Chiefs and People of New Juaben.

The Akwantukese Festival of New Juaben is deeply associated with this noble endeavour for several important reasons. First and foremost, the Festival signifies the great and historic exodus (Akwantukese) of the people of Juaben and their allies from Asante in the 19<sup>th</sup> Century which resulted in the establishment of the present New Juaben State in the Eastern Region as well as the creation of a Diaspora of our people all over Ghana and in many parts of the world. The Festival was instituted exactly ten years ago in October, 1997 with the supreme mission of development in unity for the welfare of the people. The welfare of our people is directly dependent on our good health which synchronizes with MOTEC's objectives. Again the famous St. Joseph's Hospital which is located in the Akwantukese territory of Koforidua, the capital of New Juaben, is a direct beneficiary of MOTEC's services in Ghana. Furthermore, we are all campaigning for the return of Ghanaian professionals in the Diaspora to assist in the socio-economic development of the country. Above all, we are together celebrating the Golden Jubilee of the resumption of our sovereign status. I wish to assure MOTEC-LIFE UK that the chiefs and people of New Juaben will continue to give them our traditional support.

The theme for this lecture is 'Moving Ghana's Health Forward – The Diasporic Dimension' and I have been slated to speak on 'Socio-economic Impact of Medical Intervention'. Upon a critical examination of the topic, I have decided to focus on Socio-cultural and Economic Dimension of Health.

Mr. Chairman, health is defined as the physical, social and mental wellbeing of an individual and not merely the absence of disease. The health of a nation, encompassing the physical, emotional and social wellbeing of the people, serves as an important development indicator of the country. Health is therefore intrinsically related to development and national welfare. Without health there will be no life and hence no development.

On 28<sup>th</sup> July, 1836, the then richest man in the world, Nathan Rothschild, died at the age of 59 of a routine infection easily cured today for any one who could find his way to a doctor or a hospital, even a pharmacy. This was before the germ theory existed and hence before any notion of the importance of cleanliness. Since then, medical science has made enormous strides from antibiotics to the pace-maker and birth control pills, from kidney transplant to artificial hearts. We doff our hats for these medical breakthroughs.

But as revolutionary medical techniques continue to make the headlines, another quieter revolution is happening in our homes across the world. As conventional medicine becomes ever more complicated and costly, a growing number of people are turning to natural healing – simple, traditional, decidedly low-tech methods of preventing illness and solving everyday health problems. In 1990 for instance, American's made an estimated 425 million visits to alternative health practitioners - more than they made to primary care physicians.

According to Andrew Weil, M.D. there has been a real change in the way people think about their health. They are realising that conventional medicine is expensive and sometimes dangerous – and not always effective. Until a few years ago, herbal teas, those age-old remedies from insomnia to morning sickness, were sold mainly in health food stores. Today, you will find endless variety stacked in the local super markets. Even mainstream doctors had began to recommend natural drugless therapies to treat both everyday complaints and serious illness. Dietary modification, for instance, has become the weapon of choice against a number of diseases that would have been treated mainly with prescription drugs a generation ago. “We know that many conditions are caused by the wrong diet and can be reversed by the right diet”, says Neal Barnard, M.D., president of the Physician Committee for Responsible Medicine in Washington, D.C., and author of *Food for Life* and other books on the healing aspects of food. He continues that “Heart disease, cancer, weight problems, arthritis, diabetes, high blood pressure – and other can all be treated to some degree with foods.”

Shirley Archer has stated in her book titled *The Everything Low Cholesterol* that “without health and vitality, without close connection to the family, friends, and community, and without passionate love for my work and for my life, my life held little value, regardless of how many material possession I might own. According to the Centres for Disease Control, about half of all deaths in the United States are linked to behaviours that can be changed. By making healthy choices, you will live longer, enjoy a higher quality of life, feel better about yourself, have more energy, look better and reduce your risk of disease. Health does not come in a bottle or pill. Your doctor cannot ‘make’ you healthy. Only you can create your health on a daily, weekly, monthly and yearly basis. Your health is a direct result of your way of living – eating, breathing, walking, sleeping, and embracing life.

### ***Poor Eating Habits***

One of the greatest ironies of modern living is that it is actually much easier to survive in a manner that contribute to poor health and chronic disease than it is to live a life of vibrant, vital health. The reasons for this are many and complex. Some of the factors of modern convenience are closely intertwined with the leading risk factors for heart disease. The foods that are the easiest to obtained and the most plentiful are fast high-fat, high-sugar, calorie-rich, highly refined processed foods. These foods are often nutrient poor, yet cheap and effortless to find. It takes more time and dedication to find and prepare natural, whole foods. But the rewards of eating such health-enhancing foods are clear. You will live longer and feel better.

### ***Lack of Exercise and Excess Weight***

In the olden days, people did not need to exercise because the task of daily living kept them active. In contrast, today we can drive to work or run errands, sit in a chair to perform our jobs, shop and play games on our computers, use elevators and escalators to transport our bodies and even use remote control-devices to operate the appliances in our homes. Physical education is no longer a required daily curriculum for children, and stationary, technology-driven activities are often children's choice for play instead of physical outdoor games. All of this technology means that something we use to take for granted, like walking around each day to complete our tasks or even to have fun and play, is no longer an essential part of our lives. Instead, we need to plan for movement. We need to brainstorm strategies to stay active. All of these inactivity has contributed to weight gain. When the inactivity is combined with easy-to-grab calorie-rich foods, even more weight gain is the result.

### ***Exposure to toxins***

Another aspect of modern living that makes it difficult to support health is that we are exposed to environmental toxins, including numerous carcinogens. Cigarette smoke, air pollution, and other harmful chemicals in our air, water, and food supply undermine our well-being. They have also been proven in scientific studies to be harmful to both human health and to the environment. Chemicals and other toxins in our water, air, buildings, and food supply are impossible to avoid completely. Although you cannot totally control the environment you live in, you can do your part to work actively towards your health. Your personal effort to promote your own health can make a powerful difference in spite of your environment.

### ***Mental Stress***

One of the most prominent features of modern living is the difficulties of escaping the mental stress of daily life. Technology continues to drive the pace of work and living to faster and faster speeds. The cost of living, the pressure of competition for material wealth, and the challenge of balancing family, professional and community ties all contribute to increasing daily pressures. Finding time to relax, unwind and savour simple pleasures becomes a rare treat.

Ghana, like many other developing countries, has significantly controlled some of the most important causes of illness and deaths such as yellow fever, yaws, smallpox, syphilis, diphtheria and leprosy. These epidemic diseases generally resulted in acute short-term

illness with a very high death toll. In non-fatal cases, the consequences were prolonged illness with devastating impact on the individual and the household. While much remains to be done in order to improve the overall health of the population, the substantial progress made over the past 50 years has been largely due to the use of compulsory mass vaccination campaigns, more food and better nutrition, greater access to potable water, hygiene and sanitation, and modest improvement in standard of living. This effort has led to a substantial gain in life expectancy, from about 33 years in 1940 to about 58 years today. But this is still far below the desirable 72 years for the developed countries or the biblical years of three score and ten.

Mr. Chairman, as we celebrate the 50<sup>th</sup> Anniversary of our Independence, the health profile of the country as presented recently by the Minister of Health, Major (rtd.) Courage Quarshigah, is quiet gloomy. Malaria, a disease caused by plasmodium species and transmitted by the female anopheles mosquito, which is easily preventable, accounts for 13 percent of all deaths in Ghana as well as a whopping 33 percent of all admissions in health facilities. According to recent Ministry of Health statistics, the yearly total economic cost of only reported cases of malaria is a colossal amount of US \$772.4 million, an amount which can easily build the Bui Hydroelectric Dam.

### ***Trends in childhood Mortality***

In 2006, a total of 2089 children under five years died from malaria out of 78464 admitted with the disease – a malaria case fatality rate of 2.7 percent among children under 5 years. In 2005, the fatality rate was 2.8 percent, that is, 2469 deaths out of 86974 admissions. When data from the four Demographic and Health Surveys conducted in 1988, 1993, 1998 and 2003 are compared for the most recent five-year period preceding each survey, the marked decline in both infant and under-five mortality observed in the three earlier surveys appears to have been halted during the five year period preceding the 2003 GDHS. This is caused principally by an increase in the neonatal mortality rate from 30 per 1,000 for the 0-4 years preceding the 1998 GDHS to 43 per 1,000 during the same period prior to the 2003 GDHS.

### ***Education and Health***

Taken together, income and education are key determinants of health. The Ghana demographic and Health survey (GDHS) series shows that the higher a mothers' educational level (or access to information), the greater the positive impact on her child's health.

Studies have found that it is not just general education, but health specific knowledge that matters. What enables women to improve their children's nutrition is their ability to use their general knowledge and skills to acquire health-specific knowledge. Such knowledge is unequally distributed, and poor people generally have less of what they need to know about avoiding some health risks. While almost equal numbers of educated and uneducated people appear to know about HIV/ AIDS, only about 58 percent of those with no education say that an apparently healthy-looking individual may have HIV compared to 93 percent of those with secondary or higher education.

### ***HIV/AIDS and STI's***

In profiling HIV/ AIDS and STI's in Ghana, cumulative data for the period 1986 to 2001 shows that the most affected age group was the 15 - 49 group, with the peak between 25 and 34 years, HIV/ AIDS affects women disproportionately, as they account for about 60 percent of all reported cases. The primary HIV/ AIDS / STI intervention strategy is through information, communication and education; voluntary counselling and testing; and reducing mother-to-child transmission. A national HIV/AIDS strategic framework 2001-2005, which provides the basis for a national response, is being implemented. It moves health service to community locations, works towards sustainable volunteerism and community health action, empowers women and vulnerable groups and improves health provision, household and community interaction.

Specifically, the strategy is aimed at increasing outreach programmes to make HIV/AIDS / STI service available at community level and provide information on life style-related diseases. While the availability of anti-retroviral treatment grows, the emphasis remains on prevention of opportunistic infections with the introduction of minimal level of anti-retroviral therapy as an adjunct.

### ***The National Health Insurance***

The National Health Insurance Scheme is the greatest gift that any Government can give to her people. This scheme which permits easy access to health facilities by all citizens irrespective of location or income can only be sustainable if, as a nation we adopt the appropriate preventive measures so as not to overwhelm the hospitals and other health facilities with preventable diseases.

### **Recommendations.**

It is highly recommended that:

1. Health workers should have positive attitude to work.
2. There should be adequate logistics for effective health delivery in the country.
3. There should be voluntary blood donation to save situations of haemorrhage.
4. All Ghana Health Service workers should be motivated through the provision of adequate incentive package.

### **Preventive**

On the preventive aspect of health care, I would recommend the following:

1. Existing policies to be intensified to effectively control risk factors that expose individuals to the major communicable diseases and reduce the incidence of water-borne and other environmental diseases arising from unsanitary practices and inadequate housing.
2. Intensive and sustainable public education which focuses on health specific knowledge to improve sanitation, promote safe and responsible sexual practices and enhance the general wellbeing of the people.
3. Provision of adequate nutrition and supplement to improve health.
4. Effective control of substance abuse which continues to maim and incapacitate thousands of able-bodied people in the country every year with detrimental effect to the country.

5. The Ghana Health Service should encourage systematic research at periodic intervals to update the national health profile.

Above all, I would recommend the formation of strong and effective Consumer Associations at the national, district and sub-district levels to cater for the welfare of the general consuming public through monitoring of the sale and consumption of unwholesome foods as well as all marketable items, which impinge on human health.

### **Curative**

On the curative aspect of health, there is the need for:

6. Accessible and affordable health care service. Generic drugs should therefore be made easily available.
7. Critical examination, diagnosis and prescription of adequate curative drugs.
8. Emphasis on the respect for patient/client rights including the physically challenged and the aged.
9. Effective Information, Education and Communication strategy to permit clients to make informed choices and facilitate rational decisions on usage of drugs.
10. Strict observance of the professional code of ethics to minimize abuse of patients.
11. A competent, dedicated, honest and client-focused service personnel.
12. Adequate emphasis on herbal/plant medicine to conserve foreign exchange.

In conclusion, it is hoped that the NHIS will greatly increase access to health services especially in rural areas to improve the overall health delivery system in the country and the general health status of Ghanaians.