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INFORMATION FOR MOTEC TRAVELLING VOLUNTEER

ABOUT GHANA

Ami Kotecha and P. Ofori-Atta

The Republic of Ghana is a country in West Africa. It was inhabited in pre-colonial times by a number of ancient kingdoms, including the Ga Adangbes on the eastern coast, inland Ashanti Kingdom and various Akan states along the coast and inland. Called the Gold Coast, the area was first seen by foreign people by the Portuguese traders in 1470 followed by the English in 1553, Dutch 1595, Swedes in 1640. Numerous castles built by these visitors along the Coast of Ghana became major centres of authority and trade, notably slavery. The British established a crown colony, Gold Coast in 1874.

It is the first sub-Saharan country to obtain independence from colonial rule. Upon achieving independence from the United Kingdom in 1957, the name Ghana was chosen for the new nation to reflect the ancient Empire of Ghana that once roamed the West of Africa. Accra is the Capital of Ghana. The name Accra is said to have originated from the description of many people similar to tiger Ants 'nkran' which then through modifications became Accra. The original seat of power by the colonial masters however used to be Cape Coast, a coastal town in Ghana typically a 'non-African' name supporting the English influence on Ghana. Today, as many Smiths, Quists, Macarthies and Dicksons are in Ghana as may be in England and Scotland.

The first Premier of Ghana, Dr Kwame Nkrumah stowed away in a ship as a youngster to England for his education and started a vision for Ghana and Africa which led to his return to his home country to fight for Independence for Ghana, and a Pan-African Movement –the evolving tide of which led to several other independent African states. Many human sacrifices were made to achieve independence. Rumour has it that the mosquito played a part in the fight against colonialism in West Africa. On March 6, 2007, Ghana celebrated the 50th anniversary of its independence. The population of Ghana is about 24 million. Natural resources include gold, diamond, bauxite hydro-power bauxite,



Map of Ghana.

Facts and figures:

President: Mr. John Agyekum Kufuor (Oxford graduate):

Religion: Christian 63%, Islam 16% Government: Democratic

Unemployment: ~20% Literacy: ~75% Major tribe: Akan 44% Famous people: Dr. J. B. Danquah, Dr Kwegyir Aggrey, Ohemaa Yaa Asantewaa, Obetsebi Lamptey, Aku Agyei, Nana Sir Ofori-Atta 1, Gbedemah, Krobo Edusei Komfo Anokye, Krobo Edusei, Dr Kwame Nkrumah and Kofi Annan, Osei Tutu, William Ofori-Atta, Phillip Gbeho, and Ephraim Amu.



Independence Square in Accra



Symbol of state, freedom, hope and responsibility.



Accra Airport (Kotoka) celebrates Ghana's 50th anniversary.



National Flag: A symbol of the blood and sweat of the people, the richness of its land and the common resolve to shine as a black people

WEATHER & TIME DIFFERENCE: Two seasons: dry and wet. Time...Greenwich Meridian through Ghana. Same time with U.K late Autumn, Winter. U.K 1 hour ahead in the Spring and SUMMER.

CURRENCY: Ghanaian Cedi, new GHC2 about £1.00

LANGUAGE: Multi-lingual, with many tribal languages: largest groups Akan / Twi/Fante; Others Ga; Ewe.

Lingua franca: **English**

VISAS: All require visa except Ghanaians and Ecowas countries (Economic Community of West Africa)

Requirements: Completed application form, valid passport, two passport photograph's, invitation letter or covering letter from Motec, £30.00 in postal

order by post -registered return self addressed envelope – allow for ten working days- or if cash and personal delivery application to the Commission at 104 Hihgate Hill, London, allow four working days for collection of passport

IMMUNISATIONS

Yellow fever is the only mandatory vaccine for travel to Ghana. It is a serious viral infection transmitted by mosquitoes. In mild cases symptoms are similar to influenza but more severe cases can lead to haematological abnormalities, renal failure and meningitis. The vaccine must be taken at least 10 days before travel and is effective for 10 years. It is not available on the NHS and costs approximately £50. You will receive a certificate which you may be asked to produce at immigration control in Ghana so please ensure that you carry it with you.

Hepatitis A and diphtheria. Most people traveling with Motec will have had these vaccinations either as part of their childhood immunisation schedule programme or as part of occupational health requirements at work.

Other vaccinations recommended for travel to this area are **typhoid**. Typhoid fever is caused by a bacteria infecting the gastro-intestinal tract. It is spread through consuming infected water or foods. The incubation period can be anything from 10 to 20 days so you may not have any symptoms until you return home. Symptoms include high fevers; sweating; loss of appetite; severe diarrhoea and vomiting. The typhoid vaccine is usually administered in an injectable form (although oral versions are available) and needs to be repeated every 3 years. It needs to be taken at least 10 days before travel.

Hepatitis essentially means liver inflammation. Type A Hepatitis is caused by the Hepatitis A virus. It is transmitted through contaminated food and water and by contact with infected stools. The virus has an incubation period of 10 to 40 days and can present with loss of appetite, nausea, aching muscles and joints, mild fever and jaundice. The vaccine consists of a course of 2 injections, 6 to 12 months apart. Protection lasts for at least 10 years if both injections are taken within one year. The first injection needs to be taken at least 2 weeks prior to travel.

(Although Hepatitis B is only sometimes recommended for travel to Ghana, some of us will be carrying out exposure-prone procedures and it is advisable that you are immunised. Hopefully all members should have Hepatitis B immunisation as part of work requirements. It is one of the families of Hepatitis viruses that causes liver inflammation and is transmitted via infected fluids e.g. blood, saliva, sexual contact, contaminated needles. Without immunisation transmission rates after contact with infected fluids is higher (1 in 3) than for HIV (1 in 3000) and all precautions must be taken to avoid contact i.e. gloves, safe sharps handling, etc. The incubation period is between 2 to 6 months and symptoms include nausea, vomiting, lack of appetite, fever and jaundice. Vaccination is an extremely effective way of preventing infection. The course consists of 3 injections, the last two being administered one and six months after the first injection.) Members involved in surgical/clinical work are expected to hold valid immunisation certificate or

clearance accepted by their base hospitals in U.K. or on the continent before practicing in Ghana. You may need a booster vaccine so please check your immunisation history.

Diphtheria is an acute respiratory infection transmitted by droplets in the nose and throat being passed from person to person. It is a bacterial infection with a high mortality rate. Incubation is 2 to 5 days and symptoms include a fever, sore throat, cough and difficulty in breathing. Most people in Europe will have had the vaccine as part of childhood immunisations but will need a booster every 10 years at least 2 weeks prior to travel.

Malaria prophylaxis is strongly recommended. Malaria is a potentially fatal disease caused by mosquitoes. Symptoms can include lethargy, fever, vomiting and diarrhoea. It should be suspected if symptoms occur up to a year after foreign travel. 'Natural immunity' develops slowly (over 4 to 5 years- Pre-munition) and is lost rapidly within six months, so members of the team also including members of African origin now living in the UK are also advised to take precautions. Precautions such as using mosquito nets, mosquito repellent and wearing long-sleeved tops/ trousers in the evening are strongly advised. With regard to anti-malarials, it is best to discuss this with your GP or Practice Nurse. However, the anti-malarial of choice for this region is Malarone. It is a single tablet started 2 days prior to travel, taken every day while abroad and then continued for one week after returning home. It must be taken with a meal rich in fats (e.g. yoghurt, milk) to increase absorption.

Other immunisations that can be considered are tuberculosis, meningitis and rabies. Again, these are not mandatory but as we will be working in the healthcare setting, individuals may want to protect themselves. Most people should have been immunised against tuberculosis as part of occupational health requirements at work. Please consult your GP or Practice Nurse for individual advice regarding these immunisations.

HIV incidence is said to be high in sub-Saharan Africa and prophylaxis (post-exposure prophylaxis) can be bought privately by individuals wanting to take their own supply in case of contact with infected blood/ saliva etc. It consists of 2 or 3 anti-retrovirals with anti-emetics that must be started within 24 hours of exposure and taken for 30 days. A good website for more detailed travel advice is www.netdoctor.co.uk

Travel insurance: Every member travelling as part of Motec is advised to have travel insurance as members on previous trips have had personal items stolen. Unfortunately, Motec cannot reimburse any losses incurred during working visits. The usual precautions when travelling abroad apply to trips to Ghana as well i.e. keep all valuables including your passport at a secure place on you. do not carry any expensive items unless necessary and do not display valuable possessions.

Medical insurance: Any members carrying out clinical work in Ghana will be covered by the local hospital medical indemnity. If there are any individual concerns, please contact your British medical insurance provider for advice specific to your questions.

ELECTRICAL APPLIANCES

Electrical appliances are supplied by a 240v power source (as in the UK) and 3-pin plugs are used. A combination of the 'round' 3 pin plug and the 'square' 3 pin plug (as in the UK) are found in Ghana so carry a plug converter with you.

FOOD AND WATER

The usual precautions that apply when travelling to any foreign country apply to Ghana as well. Motec members will have most meals prepared by the hospitals they are working in which will be prepared in hygienic conditions. If any member has any specific food requirements, please let the Team Leader know who will try and organise this for you. You may wish to take snacks and other food items with you. As a group we are being looked after as guests of the hospitals and it may not always be possible to cater to every taste. Please try and bear in mind that we are in Ghana as guests and must be respectful to our hosts.

Like most parts of the developing world, you are not encouraged to drink tap water although most of the cities tap water may be safe to drink. Bottled water e.g. Voltic is recommended. Small companies make water in smaller plastic bags. Avoid these if you can. Be aware of the usual precautions of avoiding juices/ squashes made up with water unless you know that bottled water has been used and salads reliably washed.

CONTACT NUMBERS

Base Hospitals

Koforidua: Administrator -Rev. Fr. John Oppong 08120221
08120210. From the UK..00 233 8120221

Holy Family Hospital, Nkawkaw: Sr. Superior -Rev. Sr Agatina 084222207;
Clinical Director—Dr S.K. Amuzu 084222199

Motec Ling co-ordinator during working visits: 0242812573

British High Commission

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Office **Main Office:**
Hours: Monday to Thursday 07:45 - 15:45 hours
Friday: 07:45 - 13:45 hours

Website: <http://www.britishhighcommission.gov.uk/ghana>

To call the UK from Ghana, the code is 00-44- then the number you want to dial without the first 0. For example, if you want to call 0207- 407-8765, then you need to dial 00-44-207-407-8765. The same rules apply for calling a mobile number in the UK i.e drop the first 0.

ACCOMMODATION /FOOD / TRAVELS BY HOST HOSPITALS

ACCRA: Accommodation in Accra is under review. In the past, Mensvick Hotel at \$65 per night seemed a reasonable option with part sponsorship by Lister Hospital (discontinued). Motec believes that the Hotel bills are costing the organisation and other responsibilities available are being looked into. The Order of St John of God, who have ownership of Koforidua St Joseph's Hospital, has accommodation on the outskirts of Accra, on Dodowa road which can house up to seven people. There are regular visitors there from abroad and booking needs to reviewed on a regular basis with the Provincial General. Problem of electricity and water supplies at the property seems to have been rectified. Efforts at discounted hotel bills for Motec visitors are being pursued. If successful individual hotel bills throughout the two week visit could be cut down to about \$150 (£75) for a three night stay in Accra. Until that target is achieved provision for \$200 (£100) is to be made by members.



La Palm Beach Hotel in Accra where a night is a minimum of about US\$400



Motec at Pramso St Michael's Volunteers Residence

PRAMSO ST MICHAEL'S HOSPITAL

Pramso has a four bed room visitors bungalow which is new and of very good standard. Near by is Lake Bosomtwi which offers the natural beauty of forest, mountains, valleys and water in a crater said to have been created by the impact of a meteor or so several thousand years ago. Efforts are being made by Motec representative and friends to arrange discounted hotel for our charity in the suburb of Kumasi (for social breaks) in stunning hotels.

NKAWKAW: Holy Family Hospital has a four bed room house for groups of workers and may not accommodate more than that number. For food, some visiting groups do have their meals with the nuns at the Convent. Motec had a designated paid cook who would offer most requested meal and non-alcoholic drinks. Meal times are set by the team in consultation with the cook. The hospital supports travel arrangements to and from the airport and tours in collaboration with the Nursing Training College. This is co-ordinated by the Motec Team Leader at site with local hospital administrator. In difficult circumstances the overall Motec cross site team leader has to be consulted to minimise disruptive or excessive demands on the local services.

KOFORIDUA : St Joseph's Hospital has a long track record of supporting volunteer health workers. Transportation to and from the airport is arranged well ahead of time. The minibus is a bit old but reasonably comfortable. Efforts are being made to replace the bus as large numbers of volunteer visitors means high demand on the vehicle which also serves the logistic needs of the hospital. Two bungalows with total of seven beds are available for volunteers. They are close together and most often, the teams meet in the evenings for a drink and discussion in the 'red house'. Meals are with the monks. Breakfast 7:15, Lunch 13:30, Dinner 19:30. Most visiting groups have lunch in theatre during working day of sandwich and drinks. Motec in the past have departed from this tradition which unfortunately keeps the theatre staff working extra 1 or two hours every working day. Review overdue. Most tours are organised from Koforidua

But with several Motec sub groups, it is anticipated that all the hospitals will co-operate with travel and tour to minimise the burden on any single hospital.



Theatre staff, St Joseph's Koforidua



Motec as guests - Koforidua Traditional Council Meeting



KOFORIDUA TOWNSHIP



Koforidua Residence1..self-contained: sometimes used by Motec.



Koforidua, main residence - Main accommodation for four.



Meal time with host, Koforidua St Joseph's Dining room.



TEMA GENERAL HOSPITAL: Motec with hierarchy of TGH. Collaboration planned

ASAFO / Western Region:

Assessment in due course.

SOCIAL EVENINGS:



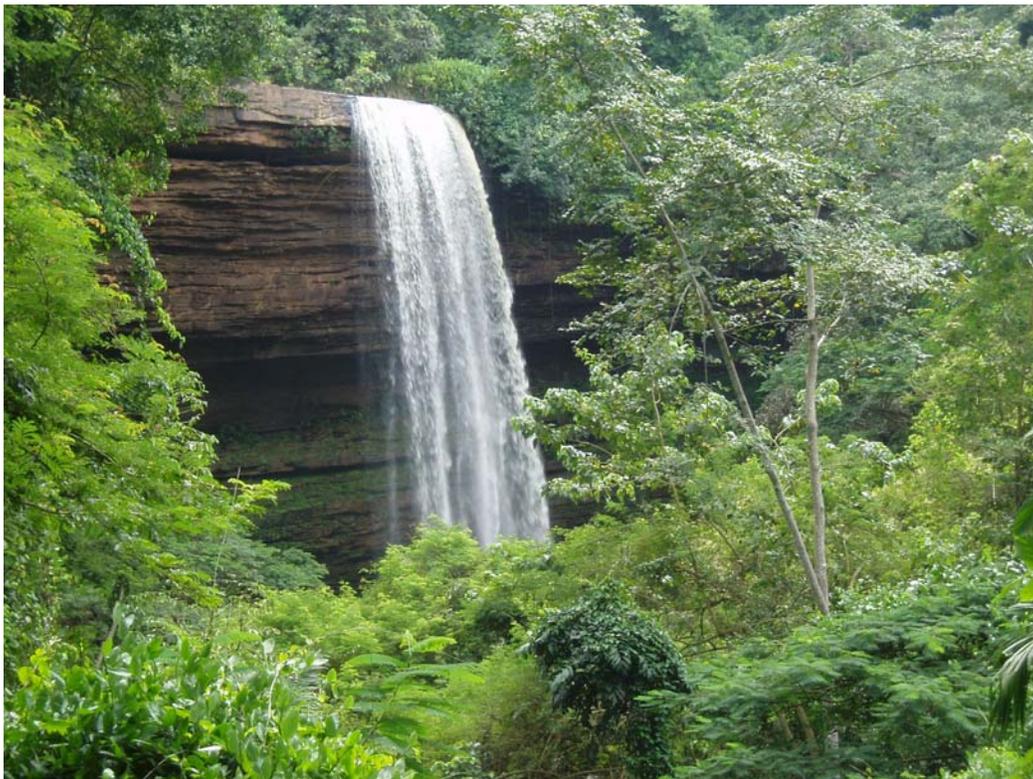
Till Hunger do we part. His and Hers at Kakum Park near Cape Coast.

Motec will try as an organisation to part sponsor social evenings. A contribution of £50 per member will provide memorable and decent evenings for the entire visit.





Motec's Social Evenings



Boti Falls, near Koforidua

GHANA MEDICAL AND DENTAL COUNCIL REGISTRATION

Requirements:

COMPLETED APPLICATION FORM C.V, 2 PASSPORT PHOTOS, REFERENCE LETTER CONFIRMING POSITION OR JOB IN HOSPITAL by Senior Medical Doctor, COPIES OF PROFESSIONAL CERTIFICATES, **FEES OF US\$300**, NAMED HOSPITAL (GHANA).

These are to be submitted first for host hospital to sign before a letter from Dr Wilfred Addo, Clinical Director for Koforidua who also works part time at Eastern Regional Office of the Ministry of Health before sponsor or Motec pays the fee for the doctor on submission of application

TRADITION and CULTURAL ATITUDES.



DASEBERE DR OTI BOATENG, PARAMOUNT CHIEF OF KOFORIDUA JUABENG IN TRADITIONAL REGALIA WITH MOTEC

Ceremonial Cloth:

a) **Kente** traditionally is a hand woven ceremonial cloth of the Ashanti tribe of Ghana.

Bonwiire in Ashanti is the a town noted for large scale production of kente. Usually woven as small strips and joined together in bales. Originally called 'nwontoma' – the woven cloth, it is popularly called kente. The name kente is believed to originate from the 'basket' which is a special bag woven from the bark of the raffia tree. In akan, basket is '**kenten**' and the cloth woven in a similar fashion was then called '**kente**'. Other tribes like the Ewes also make a variation of style and colour of Kente. There are other ethnic tribes who probably 'migrated' from Ghana who make Kente in West Africa and the West Indies.



Kentei weaving Centre at Bonwire in Ashanti



Kente Stole(strip) in the making

b) Adinkra is another traditional cloth. It is believed to have originated from a tribe

ruled by the King of Gyaman who lived in an area now called the Ivory Coast. Oral history suggest that the king was defeated and killed in an invasion by the Ashanti when he tried to copy the golden stol of Ashanti. The word 'adinkera' means 'farewell' and it is commonly worn as a large piece of cloth at funerals. It seems that the cloth has been popularised in its production and usage by the Ashantis more so than the originators in the Ivory Coast.

In modern times, symbols have been inco-operated into the cloth widening the use of the cloth for different occasions. The symbols which carry different messages that often match the event or the ceremony of the day. Motec has adopted some of these symbols at the web site.

Tradition / Attitudes through Colonial Heritage and Natural Instincts.

In spite of colonialism and neo colonialism, Ghana still retains significant traditional and cultural attitudes and practices. In the past, Ghanaians were ruled by their colonial masters the 'OBURONI'- the white person who provided new things that seemed wonderful. There remains that mentality that the person coming from Oburoni land has the means to provide and there is the tendency for people to request for assistance in various forms including payment of school fees, education abroad, financing business, invitation abroad, donation of mobile phone, direct request for cash etc. The British Ghanaians volunteer visitor is also subjected to similar pressures especially from distant relatives. It is important that you promise no one anything that you cannot provide. If you advertise your personal equipment and even

yourself, proposals for your items and your love could follow. Phone numbers and email addresses are easily requested by people. Beware of requests which will follow beyond belief upon return to the United Kingdom. Generally, Ghanaians are courteous and very diplomatic and straight talk can be considered rude. After diplomacy has failed, firm words are the only way to affirm your stand.

- Greetings of groups of people should be from your right side if at all possible.
- To visit a chief or king, a present of livestock or drink or an item original to your home town or country is expected. An address to the chief should be directed to a linguist or a spokes person. Sometimes a prayer may be said by the traditionalist for good luck and God's protection with the pouring of alcohol on the ground in an un-harmful traditional 'ritual' called '**pouring of libation**'.
- The use of Brother or Sister MAY NOT ACTUALLY MEAN BLOOD RELATIONS. It could mean someone who comes from the same town, somebody respected enough, of the same age group with common problems and aspirations. A person may be introduced as a father or mother when the English vocabulary should be uncle or auntie. There are also reverend brothers and sisters who will be working in the target hospitals who will be called brothers and sisters who may not be blood relations with the Ghanaian volunteers.
- Reading about Ghana will be helpful but attendance of Motec meetings will always provide a forum to learn about cultural experiences from members who have been on duty in Ghana. Attendance of Motec meetings highly recommended prior to working visit to Ghana.

AFRICAN SUN / SHOCK SYNDROME: THE UN-PREPARED

Features:

Grumpiness, loss of motivation, lack of co-operation, failure to appreciate efforts of colleagues, tendency to stay isolated, early preparation to return to U.K., tendency to say no to any suggestion, fault finding mission, sudden loss of appetite, self devaluation of contribution to team work, self denial, sleepless nights etc. This is not a medical entity but close to a description of a person who did not take pre-departure information seriously. Rule out malaria, missing home syndrome,



A recovery ward waiting to be supported.



An Old theatre needing replacement: patients could be waiting no more.

Factors - prevention

1. Travelling Motec-Life-UK members should remind themselves of the objectives of the organisation. In essence, Motec visits are intended to improve working practices, educate and be educated. The Hospitals cannot be expected to be of a standard of a private English Hospital. There will be practices that would shock you. Most of the time, the underlying problems originate from a combination of factors: shortages, limited finances, lack of education and skilled personnel, lack of appreciation of the risks, and colonial legacies. There is no need to volunteer to work in such environment if you have assumed that you are going to work in another London Hospital. We should be aware that many years ago, medicine was still being practiced in the U.K. and it has been through perseverance that medical practice has reached the level that we are in the developed world. A story of 'volunteer temper tantrums' have been reported by some voluntary groups.
2. Ghana generates electricity power from Akosombo hydro-electric dam, the biggest man made dam in the world. Electricity is marketed to neighbouring countries to earn Ghana decent income. With poor rains, the water levels can be too low to sustain the demand and rationing of electricity supplies sometimes become necessary. A torch in your bag, regular charging of your mobile phone should minimise the impact of loss of electricity power.
3. Some help for some patients can be considered but there is the need to exercise caution. Avoid direct financial support as you could be drawn into a pitiful feeling of guilt for the others in the queue that you cannot help.
4. It has been noted that when Motec visits Ghana, *segregation* of blacks from white and vice versa is too obvious. To work as a team, and for first time visitors and foreign visitors to be supported sufficiently, it will be helpful if members make *extra effort to break ranks, mingle and discuss problems as a team, with purpose and openness. Unity is strength.*
5. The Ghanaian members of the team are usually under intense pressure to meet their social responsibilities at home in Ghana. *The pressure is intense but should not be an excuse to leave our project marooned.* It will be advisable for this particular group of Motec members to extend their stay in Ghana in order to cater for their family and social needs without disrupting the working programme. Members are allowed to spend week ends with their families in Ghana. Prior to departure from England, some individual members may be asked to lead the week-end tour. It is our responsibility to make safe tours and the Ghanaian membership should share the responsibility. Equally important is that all members should make allowance for spending during tours.

6. Some arrangements being made for Motec's working visits are done from the U.K in consultation with the various authorities. There a few trains in Ghana to delay any of our plans but the traffic in Accra, the bureaucracy that exists in Ghana and indeed elsewhere in the world means that things move slowly and members should be prepared for shortfalls in some departments. Motec has had the co-operation of many people that has minimised these difficulties.



KOFI ANNAN PEACE KEEPING TRAINING CENTRE- ACCRA

Man should endeavour to keep the peace and promote good health. Peace and good health cannot be easily measured but can be fully enjoyed even in the silence of our hearts knowing that we have pledged to contribute our quota.

Paul Ofori-Atta



*Happy patient after knee replacement:
'Expectation is one thing, preparation of mind for the unknown is a major task
which we must consider in our endeavours' - Eva*



*'The giant steps we take, often require careful guided support, belief in
ourselves to get there holding firmly to our faith while appreciating the
commitment and sacrifices of those who heed our cry.' Says Mrs Tamakloe*

COMMON AKAN WORDS

Remember the akan alphabet has some vowels that are unique, probably closer to German and French. The reason is that the Akan alphabet was first written by a German. Some alphabet for "OU" is written like the mirror image of C. There is letter e in akan and another letter E which is written like the mirror image of Figure 3 pronounced like EERHH,,,silent R.

Maakye.....Good morning

Response:

Yaa nua (brother, sister not necessarily your relative: an expression of love, how you see the person as brother or sister),

Yaa agaya(somebody old enough to be your father)

Yaa 'EeRHna'_(somebody old enough to be your mother)

Yaa ahenewaa(to a royal, prince, princess etc although the individual may not necessarily be a royal. Its just to express respect.

Maa akye.....Good morning

Maa ha.....Good afternoon

Maa adwo....Good evening and good night

Responses: same as above irrespective of time.

Sometimes if it is cold, I mean 18 to 22 degrees Centigrade in the mornings, greetings can be modified to reflect the concern for people's welfare. So you could greet

D...u..ee ne awo! Sorry for the cold.....Response non specific but can answer as previous.

D..u...ee ne owia..Sory for the heat.....Response as above.

Me da wo ase (pronounced me da wase. Actually means I kotow you. I lie down for you)....Thank you.

Papa no no!.....That's a good one!

Wo ho te sei?.....How are you?.....Response. . **Me ho ye**...I am fine/well

Ade pa nkye..(often also meaning good night...'DA YIE' good night) Till the morning/May a good morning come.....Response of acknowledgement... **Yooo!**

Da yie.....Good night.....Response **Yooo!**

Me pa wo kyei.....I beg of you/please

Me do wo se nea wo tie, se nea Onyame 'bou' wo: I love you the way you are, the way God made you!

Me 'kou' da.....I am going to sleep.....Response...**DA YIE**..Sleep well.



REV. SR OFORI-ATTA doing the Kakum forest dance about 250feet in the air as she led Motec volunteers to different heights in their lives. She came prepared. Motec member can also get prepared for Ghana. Love you all, Motec, she said.