



ATELIER RÉGIONAL SUR LES OBJECTIFS DE DEVELOPPEMENT DURABLE LIES A LA SANTE

REGIONAL WORKSHOP ON HEALTH-RELATED SDGS

**Baseline Study on Monitoring Health – Related Sustainable Development Goals:
the case of Ghana**

John A. Boateng (PhD)

West African Network of Emerging Leaders (WANEL)

Outline of the presentation

- Background
- Methodology
- Results
- Recommendation
- Conclusion

Background

- Part of the baseline study conducted in Ghana, Burkina Faso and Senegal
- To ascertain the availability and alignment of health-related SDG indicators to the national framework
- Help to monitor progress on health-related SDGs at national and regional levels
- lay the groundwork for the improvement of the design and implementation of health policies

Background

- Main objective:
 - to provide benchmarks for measuring and monitoring progress on the health-related SDGs.
- Specific objectives:
 - a) Examine the availability of data for the indicators of health related Sustainable Development Goals;
 - b) Assess the extent to which SDG targets are aligned with national framework targets
 - c) Suggest approaches to improve national monitoring of identified indicators.

Methodological review

International literature review – identified 43 health-related indicators of the SDGs

National Literature review – focused on the indicators identified by the international literature review

- whether data for the indicator was available (compliant /identical or approached/close) or unavailable
- Source of data

Methodological review

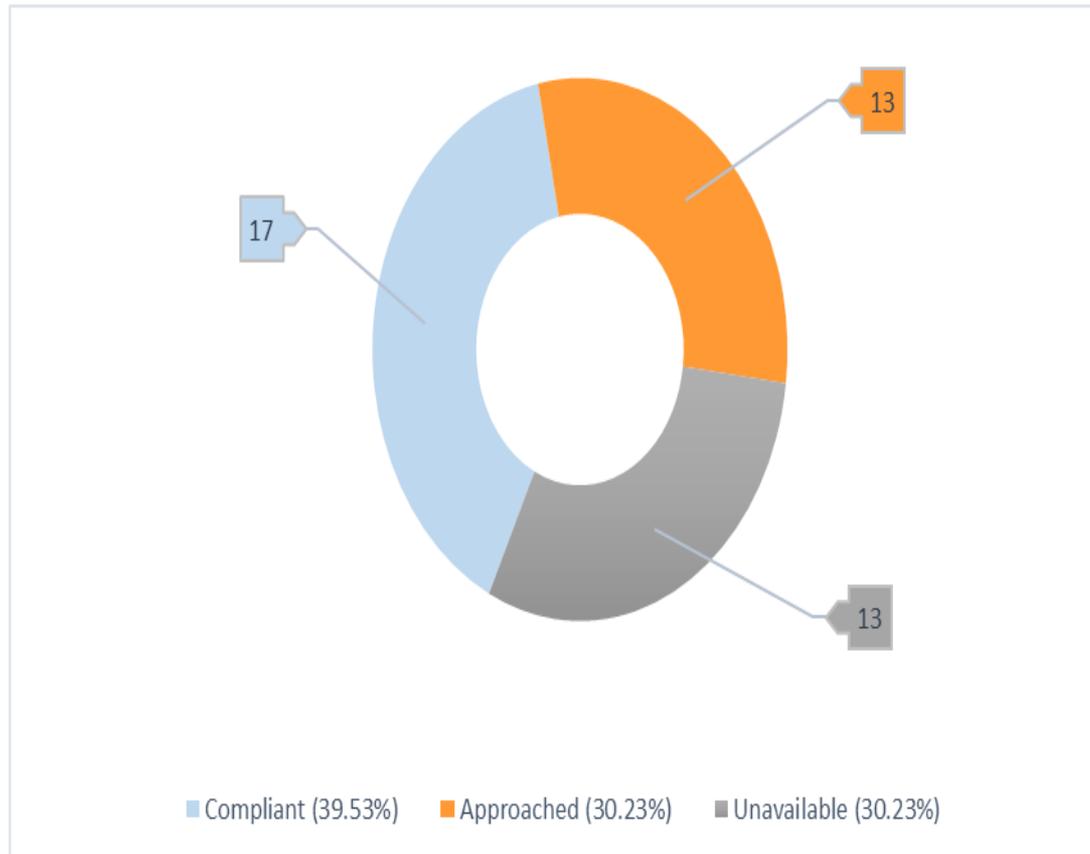
- **Type of data** : whether it was routine data, surveys, censuses or projections.
- frequency of production of the indicator (annual, quarterly, etc.);
- the level of disaggregation of the indicator (sex, age, place of residence);
- the availability of data from 2010 to 2017;
- Policies, strategies or initiatives and programs;

Methodological review

- Alignment of SDG framework to the national framework
 - Evaluation criteria focused on
relevance;
priority level;
statistical quality.
- Expert interviews were also conducted for validation and

Results

Health-related SDG Indicator production/ data availability for Ghana

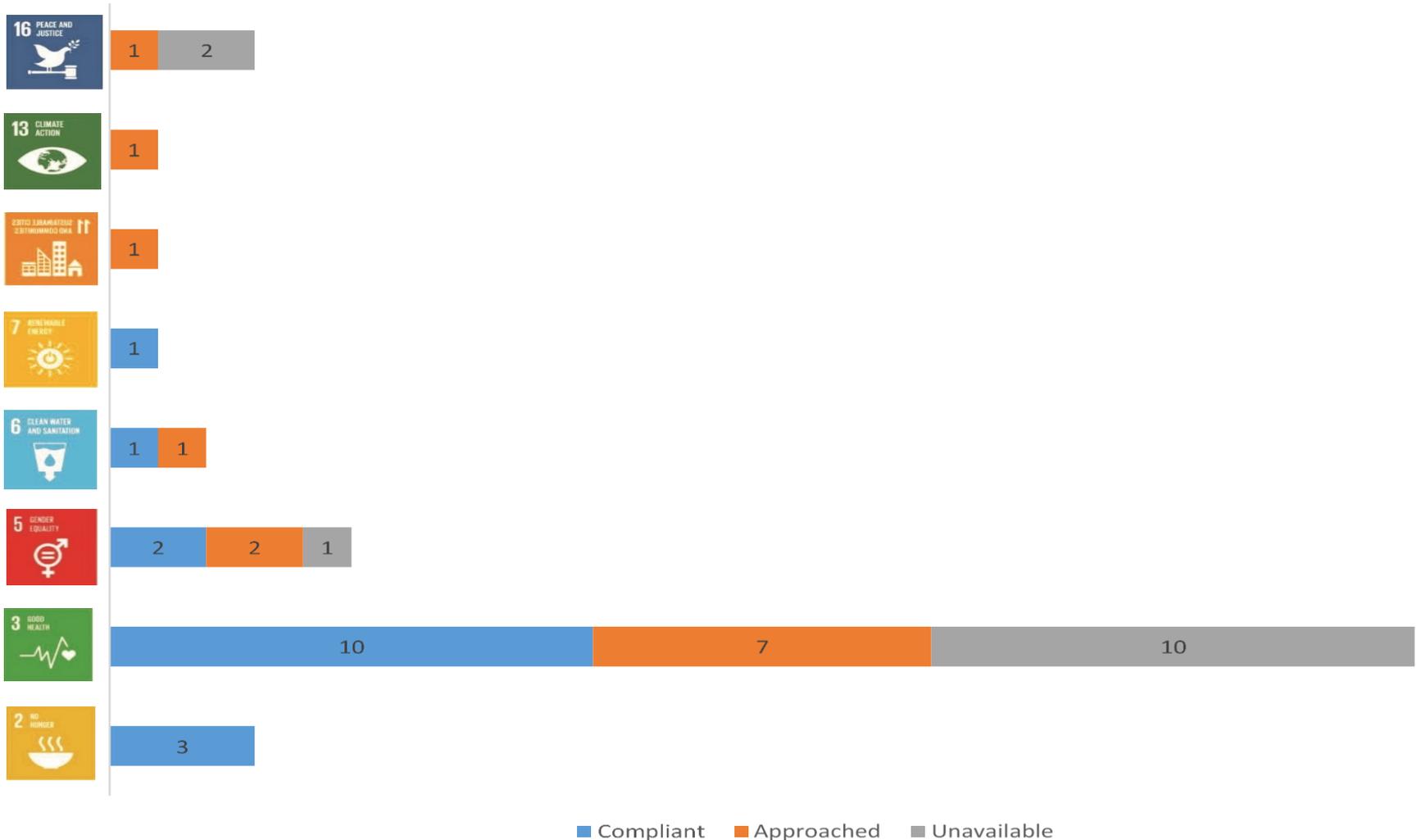


Results

- ❑ Of the 13 unavailable indicators, 5, namely targets 3.5.1, 3.8.1, 3.8.2, 5.6.1 and 16.1.2 belonged to Tier 3 classification
- ❑ The rest of the 7 unavailable indicators and 13 of the nationally available indicators (approached) belonged to Tiers I and II which have clearly defined concepts and internationally established methodologies.
- ❑ This creates opportunities for Ghana to focus its data production efforts on these areas to begin filling its data gaps.

Results

Current state of data production in Ghana for the health-related SDGs



Results

Table 6: Type of Data by Source

Type of data	Number (%)	Data source
Survey	21(60%)	National Statistical System (Ghana Statistical Service)
Administrative or routine	9(26%)	National Statistical System (Ministries, Department and Agencies)
Projections	5(14%)	International
Total	35	

Table 8: Level of Disaggregation

	LOCATION		AGE		GENDER	
	Yes	No	Yes	No	Yes	No
Goal 2	3	0	3	0	3	0
Goal 3	16	1	7	6	7	4
Goal 5	3	1	3	0	N/A	N/A
Goal 6	2	0	0	1	0	2
Goal 7	1	0	0	1	0	1
Goal 11	0	1	0	1	0	1
Goal 13	1	0	0	1	0	1
Goal 16	1	0	1	0	1	0
Total	27 (90%)	3(10%)	14(58%)	10(42%)	11(55%)	9(45%)

Note: The figures are based on the 30 available indicators.

Prioritization of SDG Health Related Targets

Table 2: Priority, relevance and statistical quality of indicators by SDGs

Goals	Relevance		Priority		Statistical Quality	
	yes	No	Yes	No	Yes	No
2	3	0	3	0	3	0
3	27	0	25	2	10	7
5	5	0	5	0	2	2
6	2	0	2	0	1	1
7	1	0	1	0	1	0
11	1	0	1	0	0	1
13	1	0	1	0	0	1
16	3	0	1	2	0	1
Total	43	0	39	4	17	13

Alignment of SDG Health Related Targets to the National Framework

SDG indicators aligned to the national development framework

Goals	Targets
2	2.2.1 Prevalence of stunting (height for age <-2 standard deviation from the median of the World Health Organization (WHO) Child Growth Standards) among children under 5 years of age
	2.2.2 Prevalence of malnutrition (weight for height $>+2$ or <-2 standard deviation from the median of the WHO Child Growth Standards) among children under 5 years of age, by type (wasting and overweight)
	2.2.2 Prevalence of malnutrition (weight for height $>+2$ or <-2 standard deviation from the median of the WHO Child Growth Standards) among children under 5 years of age, by type (wasting and overweight)
6	3.1.1 Maternal mortality ratio
	3.1.2 Proportion of births attended by skilled health personnel
	3.2.1 Under-5 mortality rate
	3.2.2 Neonatal mortality rate
	3.7.1.1 Proportion of women of reproductive age (aged 15–49 years) who have their need for family planning satisfied with modern methods
	3.b.1 Proportion of the target population covered by all vaccines included in their national programme
7	7.1.1 Proportion of population with access to electricity

Barriers and Constraints in the monitoring of health related SDGs

- **Unrevised reporting template**
 - previous reporting template based on the past Medium-Term Development Policy Framework (2014-2017) which preceded the 2030 Agenda.
- **Non-integration of data from Civil Society Organisations/ Private Sector**
 - Data from CSO's not integrated into the National Statistical System

Barriers and Constraints in the monitoring of health related SDGs

- **Lack of data on mortality** – the dead is buried without obtaining Death Certificate
- **Lack of political commitment** – inadequate budget provision and release of funds
- **Lack of Capacity at the local Level to collect data** - Logistics and technical competences needed to collect, manage and communicate data is a challenge.

Efforts to deal with the challenges

- **Establishment of SDG Unit/Secretariat** - to produce data for the SDGs and report Ghana's progress in achieving the SDGs
- **Improving mortality data**
 - District Health Information System 2 (DHIS2); 50-60% of deaths are captured
 - medical certificate on the cause of death has been modified to comply with the standards of the World Health Organisation (WHO).
 - only medical doctors are allowed to certify the cause of death
 - online course on medical certificate of cause of death

Efforts to deal with the challenges

- **Baseline reports on SDGs**

- which collected data on available indicators.

- A progress report is to be produced every two years to track Ghana's progress in achieving the SDGs.

Recommendation

- **Revise reporting templates**
 - to align with the SDG framework
 - to deal with issue of disaggregation
- **Integrate data from Civil Society Organisations/ Private Sector** - get the full complement of data.
- **Increase government commitment – funding**
- **Build Capacity at the local Level to collect data**
 - providing training and logistics
 - opening more statistical offices at the local level

Conclusion

- All the 43 indicators were relevant to Ghana. While 38 were priority indicators, 17 of the available indicators were of good statistical quality
- The study revealed that 10 out of the 43 SDG health related indicators, representing 23% were aligned to the national development framework.
- The development of the GSGDA before the introduction of SDGs explains the low level of alignment.

Conclusion

- This report provides the baseline values for 17 indicators of the health related SDGs which serves as a reference point for tracking progress towards achieving the health related SDGs.
- The report further indicates that there is heavy reliance on survey data in the monitoring of SDGs in Ghana which takes 5 to 10 years.
- While data exists within the various government agencies for 13 other indicators, they do not entirely meet the metadata requirements due to gaps in concepts, definitions and or coverage.

Conclusion

- For Ghana to have a timelier, frequent and disaggregated data, its administrative data system needs to be strengthened.