



Health Systems Functionality in Oti Region, Ghana

Rationale

The Ghana Health Service (GHS) is driven by a strong commitment to achieving positive health outcomes, strategically focusing on strengthening the primary healthcare system. Universal Health Coverage (UHC) aims to provide comprehensive health services to all individuals and communities without causing financial hardship. Currently, efforts predominantly revolve around national health systems and setting national targets for UHC and Health Security. This tends to relegate the comprehensive Primary Health Care (PHC) approach to the lower level. The current selective PHC approach centres on specific conditions and falls short of adequately addressing the dynamic health needs of key populations.

This perspective has prompted the Oti Regional Health Directorate to the significance of strengthening the district health system and facilitating the adaptation of health services to the dynamic needs of the population. This district-level assessment fosters an informed approach to UHC by re-evaluating strategies and resources that must be prioritised for delivering comprehensive PHC. This exercise was carried out in five (5) districts of the region.

The health system in the region can adapt and respond accordingly by ensuring that healthcare services are accessible, equitable, efficient and responsive to the diverse needs of different communities. It is paramount to recognise that effective UHC implementation requires a thorough understanding of the health system functionality at the lower level (district level), making WHO health system functionality assessment invaluable.

Key messages

- Health outcome indicators in the region are unsatisfactory, indicating that the health status and wellbeing of the population are not at desirable levels.
- Regional averages for determinants of health (53%), health security (48.9%), universal health coverage (43.6%), and primary health care (42.5%) fall below the recommended target of 75%. There are significant gaps in factors influencing health and access to healthcare.
- System functionality is generally satisfactory, as the region's health system can deliver services and manage its operations. Averages for service provision (>75%), management capacity (69%), and oversight capacity (>75%) are commendable.
- Management capacity requires targeted interventions to enhance its effectiveness.
- Engaging stakeholders across various sectors, including healthcare providers, communities, policymakers, and organisations, is essential for collectively improving health indicators and ensuring comprehensive healthcare delivery.

1. Regional Overview: Health Service Outcomes

The Oti Region, carved out of the Volta Region, is one of Ghana's six newly created regions, established in 2019. Regarding health, the region faces opportunities and challenges typical of developing regions.

The Worawora Government Hospital serves as the designated Regional Hospital. However, patients requiring secondary-level healthcare are referred to facilities in the Volta Region or the Northern Region since the hospital has seen marginal infrastructural development from its current status as a district hospital.

About 30% of the region's population resides in island communities, impeding high coverage of essential health services. The inadequate number of skilled health professionals, lack of staff accommodation and inadequate means of transport, logistics and equipment are the other challenges inhibiting service delivery.

Despite the challenges above, the region is making great strides in ensuring good quality health care provision.

OTI REGION	NUMBER
Regional population	779,962
No. of districts	9
No. of communities	1,191
Facility types	
Hospital	7
Polyclinic	3
Health Centre	50
CHPS	194
Maternity home	1

1.1 Universal Health Coverage

Universal Health Care includes the availability of essential health services, coverage of essential health services and financial risk protection. Regional scores for availability of essential services and coverage of essential health services were 73% and 77.5%.

On financial risk protection, the region scored 69.7%. Most of the clients in the region have yet to renew their National Health Insurance, making them incur extra costs. This contributes to poor health outcomes and affects the well-being of community individuals.

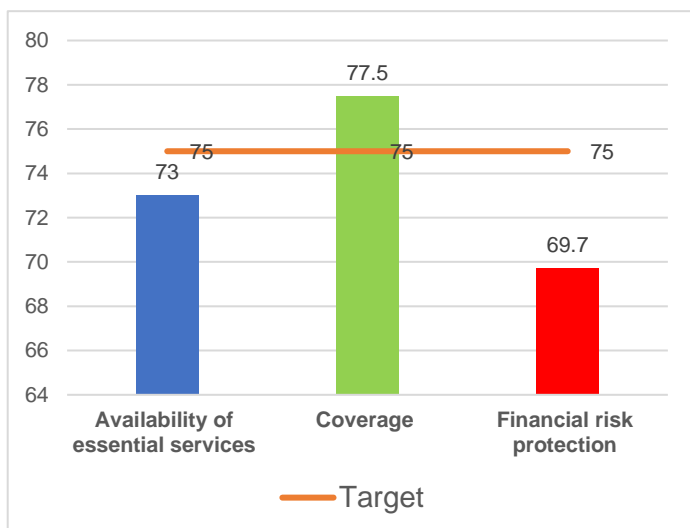


Figure 1A: Oti Regional Scores on the three domains of UHC (source: WHO)

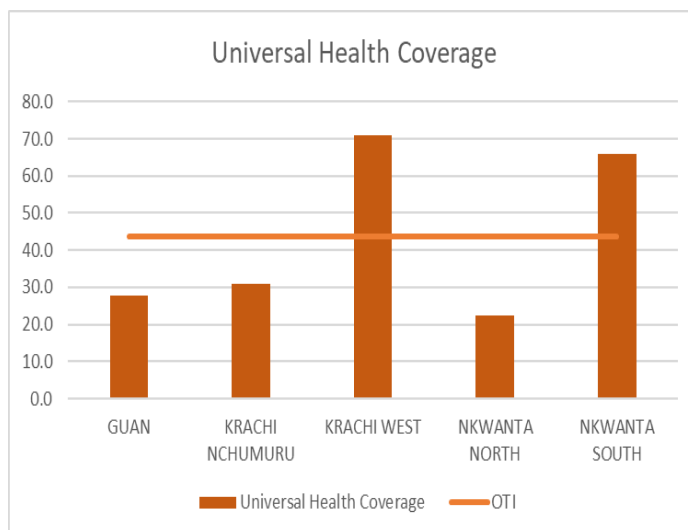


Figure 1B: Oti Region UHC scores in five districts (source: WHO)

- Three out of the five districts performed low in UHC except for Krachi West and Nkwanta South, which have Hospitals, giving them the capacity to provide additional services.
- This is due to inadequate skilled human resources (Doctors, midwives, nurses, PA, etc.) and the refusal of staff to accept posting to the hard-to-reach areas to offer essential care.
- Lessons learnt from the best practices in Karachi West and Nkwanta South will be replicated across other districts

1.2 Health Security

Health Security outcomes, including organisation and leadership, prevention of health threats, detection of health threats, and response to health threats in the Oti region, remain a challenge that needs urgent attention. The overall average health security score for the Oti region is 64.6%. This is composed of multiple factors, which are grouped under prevention (58.0%), detection (65.6%), response (72.6%), and organisation and leadership (57.2%).

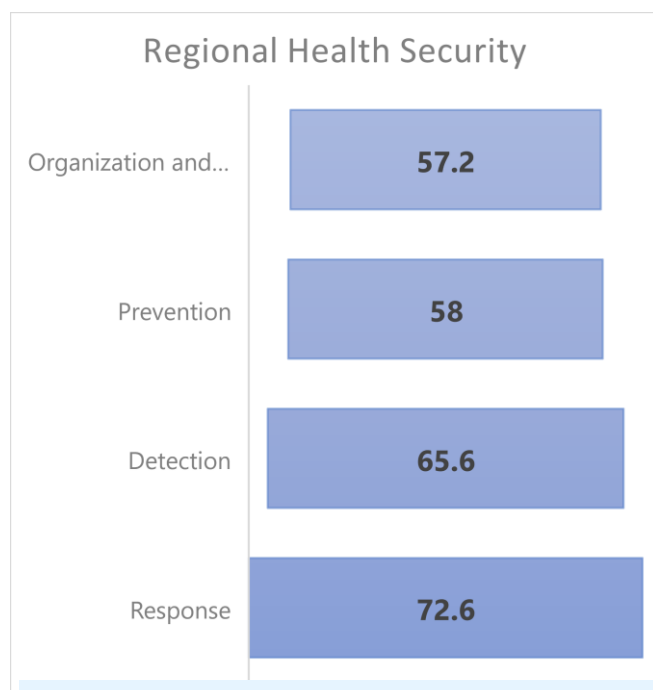


Figure 2A: Oti Regional Score on four domains under Health Security (source: WHO)

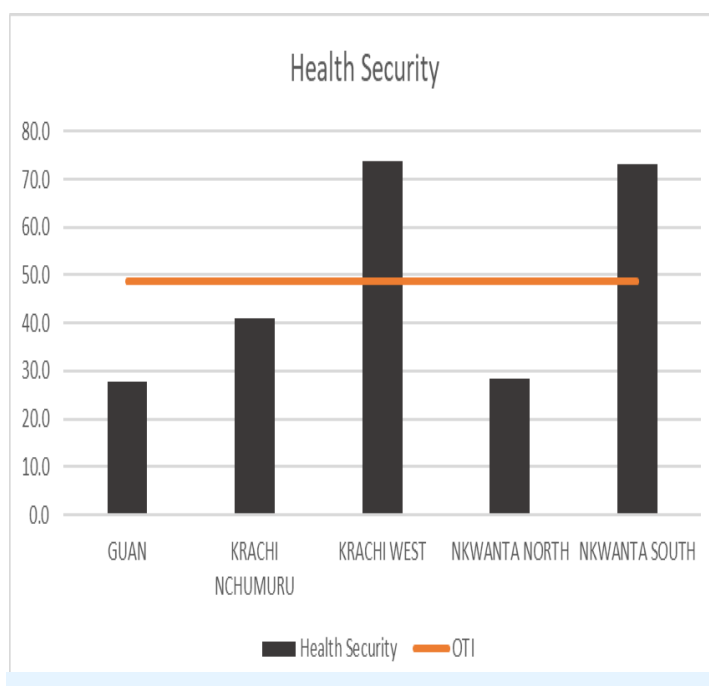


Figure 2B: Oti region Health Security scores in five districts (source: WHO)

- Guan, Krachi Nchumuru and Nkwanta North districts have very low (<45%) Health Security scores largely due to a lack of hospitals and few health centres.
- Nkwanta South and Krachi West Municipalities have fairly good (>70%) Health Security scores
- The Regional average health security score is 48.9%. This is due to inadequate specialized skilled staff such as Medical Officers, Physician assistants, Nurses, etc.
- Inadequate diagnostic facilities are prevalent in the region.

1.3 Determinants of Health

Health determinants outcomes, including social, economic/commercial, environmental, and political/security determinants, could be better in the Oti Region. The overall average determinants of health score is 74.3 out of 100. The social determinants of health stand at 81.3%, environmental determinants at 75.4%, economic determinants at 66.2% and political determinants at 72.6%.

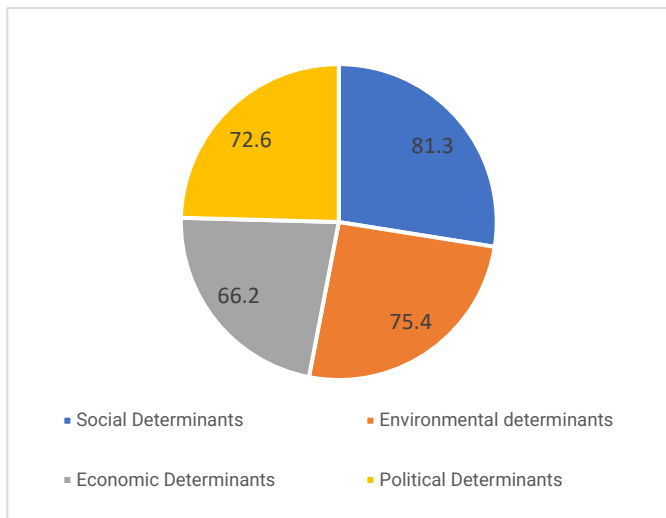


Figure 3A: Oti Regional score for Determinants of Health (source: WHO)

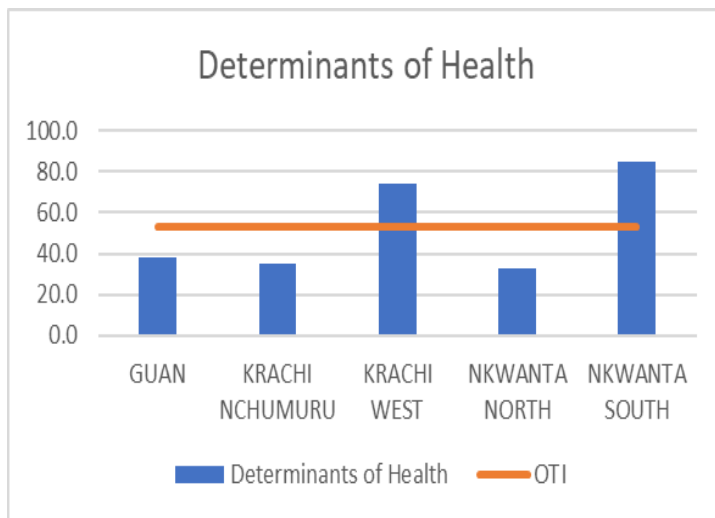


Figure 3B: Determinants of Health scores in five districts (source: WHO)

1.4 Primary Health Care

Primary Health Care (PHC) outcomes, including knowledge, human resources for health, technology, stakeholder alignment to national priorities, financing, and community and individual empowerment, are fairly good in the districts with hospitals (Krachi West and Nkwanta South). The overall average primary health care score for the Oti region is 64.9 out of 100. This is computed from the six PHC elements based on the Alma/Ata declaration.

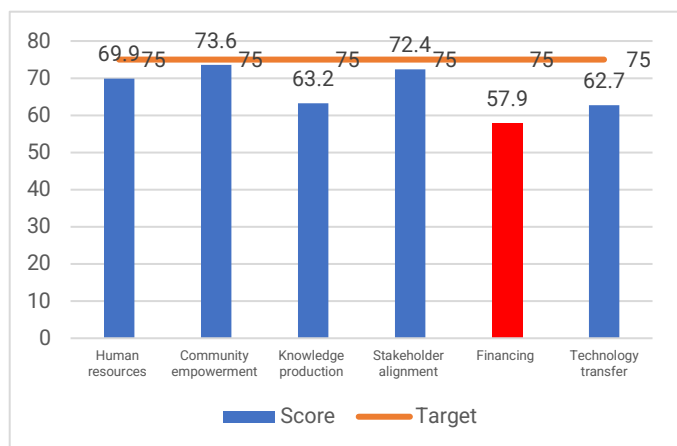


Figure 4A: Oti Regional Scores on various PHC domains (source: WHO)

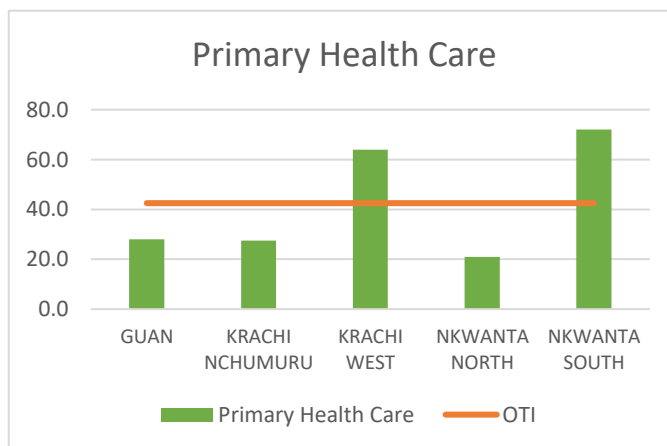


Figure 4B: Oti Region PHC scores within five districts (source: WHO)

- PHC is less than 30% in the Guan, Krachi Nchumuru and Nkwanta North districts
- Staff posted to the region do not report but rather seek reposting to the other regions, reducing the human resource status in the region.
- Poor accommodation facilities for the few health staff who accept postings to the region.
- The region lacks critical health workers in hard-to-reach areas, and the hospital lacks the required skill mix

2. Regional Overview: System Functionality

System functionality across the facilities in the region is generally good. However, there is still more to be done as some of the district scores, notably Guan and Nkwanta North, were barely satisfactory.

The overall average health systems functionality score is 81.5 out of 100. The oversight capacity is 89.4%, the management capacity is 79.8%, and the health systems capacity has a score of 79.5%. Out of the five districts assessed, Krachi Nchumuru (95.0%) has the highest functionality score, whereas Nkwanta North (72.0%) has the lowest.

The Oti region generally has much work to do to ensure better access to essential services, better quality of care, effective demand for essential services, and robust resilience to shocks. The overall health systems capacity score is 79.5%. Access is 76.8%, whereas quality of care scores 81.2%. Demand is 90.9%, and resilience has a score of 77.0%.

- Guan, Krachi Nchumuru and Nkwanta North district's performance (all less than 40%) reflect the overall regional picture of Oti with an average score of less than 60%.
- This is due to the poor infrastructure and low levels of economic activities, among others.
- Most of the facilities in the region have improved drinking water sources, some of which were provided by the communities and others by NGOs.
- Very few communities in the region practice open defecation.

2.1 Health Systems Capacity

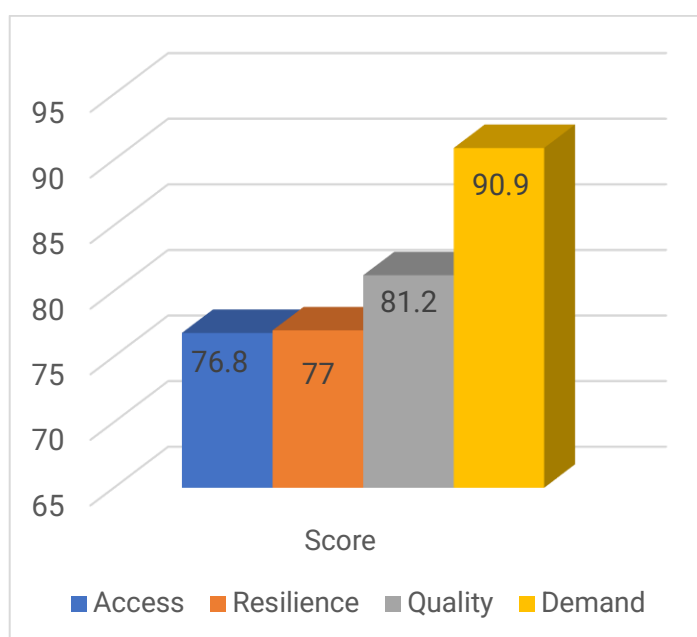


Figure 5A: Oti Regional Score on Service Provision Capacity (source: WHO)

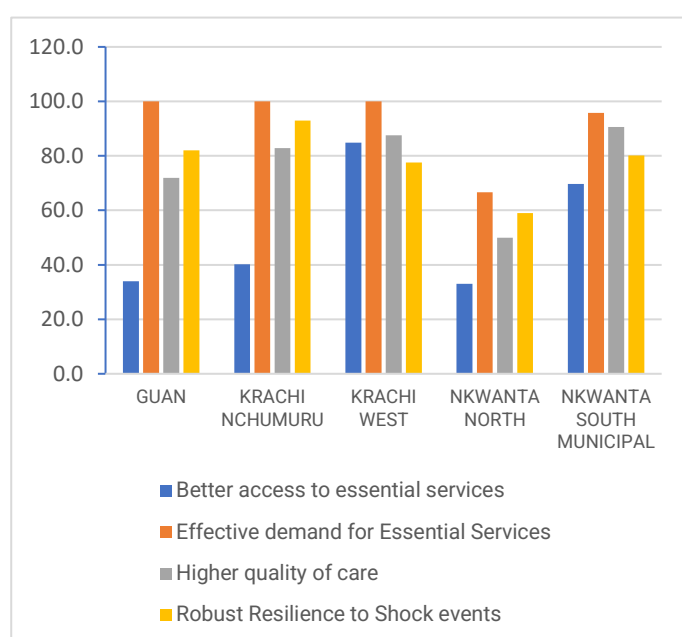


Figure 5B: Oti Region on Service Provision Capacity scores in five districts (source: WHO)

- Access to essential services is generally a challenge (<50%) in the Oti region, hence the need to introduce new interventions.
- The districts in the region have put up interventions like regular home visits and pregnancy schools to promote health and well-being for individuals and pregnant women.
- There is effective demand for essential services (about 80%) across the districts.
- The quality-of-care provision is high (>75%).
- Robust resilience to shock events is fairly good (>75%)

2.2 Management Capacity

As indicated in the graphs, technical accountability scored 95.9% compared to social accountability at 78.5%. The public health confidence is 80.2%, whereas stakeholders' engagement is 88.6%. The legal and authority score is 92.2%, while the regulatory mechanism has a score of 94.6%.

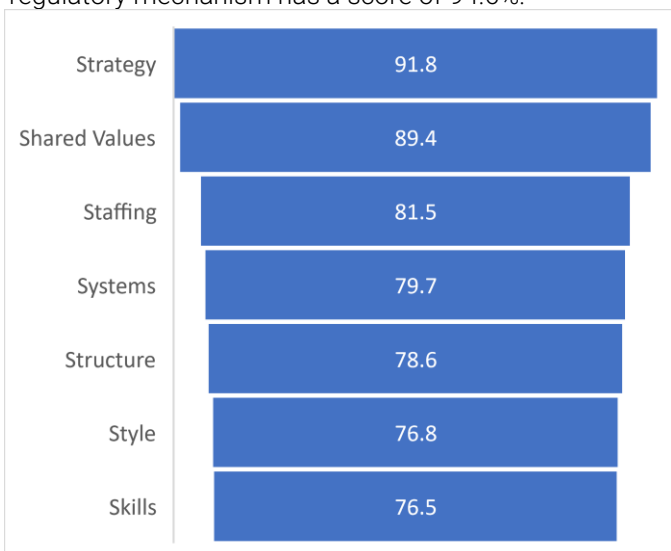


Figure 6A: Oti Regional Score on Management Capacity (source: WHO)

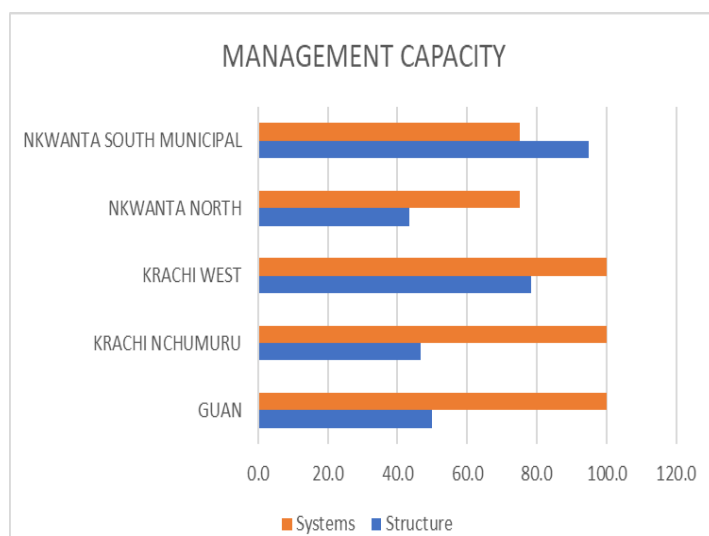


Figure 6B: Oti Region Management Capacity scores in five districts (source: WHO)

- There are generally good (>75%) health systems in place.
- Structures are fairly bad (60%), depicting the status of the Oti region as a deprived region.
- Involvement of key stakeholders is needed to create more regional structures.
- Sustained and regular maintenance is important to ensure access to good-quality health structures.

2.3 Oversight Capacity

The overall score for the district's management capacity is 79.8%. The score is derived from the 7S score outlined in the graphs. Across all five districts, the management capacity ranged from 55.4% to 91.9%. With the hard Ss, strategy has a score of 91.8%, structure 78.6%, skills (76.5%), Style (76.5%) and shared values (89.4%).

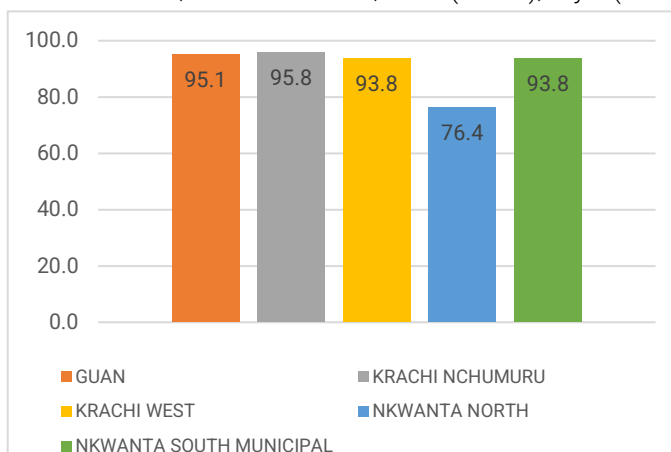


Figure 7: Oti Regional Score on Oversight Capacity scores in five districts (source: WHO)

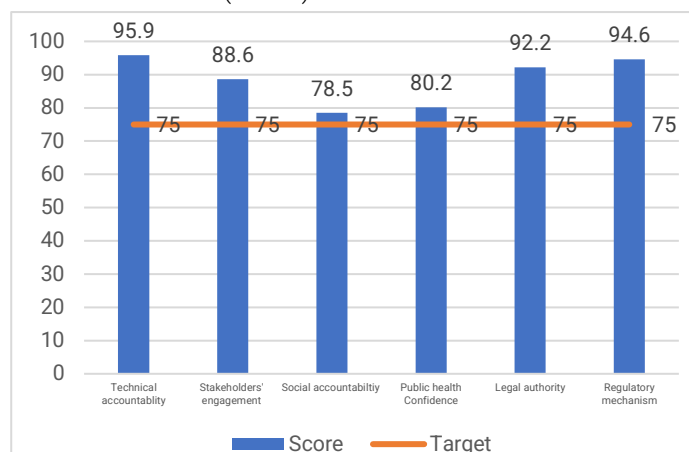


Figure 8: Oti Region Oversight Capacity (source: WHO)

- There is generally a high score (>75%) across all districts. Sustained oversight capacity to be ensured in all the districts.
- All the districts meet twice a year for mid-year review and annual review of their performance with stakeholders.
- Periodic management meetings and monitoring visits to review strategies, operational activities, and interventions.

3. Regional Priorities Moving Forward

The Oti Regional Health Directorate, guided by a comprehensive assessment of health service outcomes and health system functionality, has strategically outlined a pathway for progress. The following activities and actions have been prioritised to enhance health service delivery and create opportunities for advancement.

Utilisation of Assessment Results

- The region and its districts will utilise the assessment results to identify weak areas and gaps in primary health care within their jurisdictions.
- The outcomes will serve as a foundation for targeted improvement strategies.

Performance Improvement Strategies

- Management will develop strategies based on assessment results to enhance performance in areas of weakness while sustaining strengths.
- These strategies will facilitate a balanced and comprehensive approach to health system enhancement.

Widen Assessment Scope

- Extend the application of the tool to assess all remaining districts and facilities within the region or district.
- This broader assessment will provide a more comprehensive understanding of health system functionality.

Ownership and Engagement

- Foster engagement with leadership and management to ensure full ownership of the assessment tool.
- This engagement will promote active participation and commitment to implementing necessary improvements.

Staff Retention and Recruitment

- Implement strategies to retain staff, particularly those at the peripheral levels.
- Advocate for critical staff, such as clinical and public health professionals, to strengthen service delivery at health centres and CHPS levels.

Stakeholder Collaboration for Resources

- Collaborate with relevant stakeholders, including local and traditional authorities, NGOs and civil society organisations (CSOs), to secure logistical and financial resources.
- This collaboration will ensure equitable access to quality healthcare services.

Capacity Building

- Implement on-site coaching, training, orientation, and facility support visits.
- Create an environment conducive to learning, sharing best practices, and enhancing the skills of healthcare personnel.

Social Accountability

- Address social accountability concerns across all levels of healthcare delivery.
- Foster transparency, responsiveness, and effective governance in healthcare services.

References

- WHO (2023). Functionality of sub-national units. Accessed from <https://aho.afro.who.int/functionality-assessment/af> on 25th July, 2023.

Sources

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This Factsheet was produced by the Ghana Health Service Oti Regional Health Directorate under the leadership of:

Dr. Osei Kuffour Afreh – Regional Director of Health Service, Oti region
Mr. Tanko Abdul-Razak – Regional TB/HIV Coordinator
Mr. Daniel Boakye Ansah – Regional CHPS Coordinator
Mr. Kyere Samuel – District CHPS Coordinator, Kadjebi
Dr. Cornelius Debpuur – Deputy Director, Research and Development Division, Ghana Health Service
Ms. Edith Mansah – Policy Planning Monitoring and Evaluation Division, Ghana Health Service

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Contact us at: iAHO@who.int

Connect with us on LinkedIn: <https://www.linkedin.com/company/iaho/>