



# Convention on the Rights of the Child

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Committee on the Rights of the Child

## Consideration of reports submitted by States parties under article 44 of the Convention

Consolidated third to fifth periodic reports of States parties  
due in 2011

**Ghana\***

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## Foreword

The Government of Ghana made a promise to optimize the realization of children's rights when it ratified the Convention on the Rights of the Child in 1990. Ratifying the Convention set the stage for improving the general conditions of children in Ghana through legislation, policy formulation, legislation, programme/project implementation, research, monitoring and evaluation with respect to quality care.

The present report is the third, fourth and fifth consolidated periodic report of Ghana to the United Nations Committee on the Rights of the Child. It assesses the progress made by Government as regards the advancement of implementation and the status of children in terms of adherence to the principles of the Convention on the Rights of the Child, and the realization of their rights and freedoms at home, school and all other places in which they often find themselves, and the provision of their needs. The report chronicles responses of child-focused State institutions on their efforts to ensure children's rights and improve their access to quality education, health care, social welfare, protection and all other areas that affect child development between 2005 and 2010. Children's voices have also been echoed in the report.

The report reveals modest achievements made and challenges encountered by Government and its partners to address important needs and gaps of children in the enjoyment of their rights in Ghana. It also responds to certain important observations made by the Committee on the Rights of the Child on the previous reports submitted by Ghana to the Committee.

It is the firm belief of Ghana that the report findings will serve not only as assessment material, but also encouragement to governmental and non-governmental institutions, parents, community leaders, and other relevant child caregivers to continue to fulfil the rights of the child always ensuring the best interests of the child when dealing with all matters that affect children.

**Hon. Juliana Azumah Mensah**

**Minister for Women and Children's Affairs**

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- Stephen Adongo                Department of Social Welfare
- Kinsley Addo                    Births and Deaths Registry
- Bright Appiah                  Child Rights International

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## List of acronyms

AMA	Accra Metropolitan Assembly
ART	Antiretroviral therapy
CBO	Community-based organization
CSO	Civil society organization
CURIOUS MINDS	Children and Youth in Broadcasting
DHS	Demographic and Health Survey
DOVVSU	Domestic Violence Victim Support Unit of the Ghana Police Service
DSW	Department of Social Welfare
ECCD	Early Childhood Care and Development
EMIS	Education Management Information System
EPI	Expanded Programme on Immunization
FBO	Faith-based organization
FGM	Female genital mutilation
GES	Ghana Education Service
GHS	Ghana Health Service
GIS	Ghana Immigration Service
GPRSII	Growth and Poverty Reduction Strategy
HIRD	High Impact Rapid Delivery Supplementary Survey
HIV/AIDS	Human immunodeficiency virus/acquired immunodeficiency syndrome
ICT	Information and communications technology
IGF	Internally generated funds
IGO	Intergovernmental organization
ILO	International Labour Organization
IPEC	International Programme on the Elimination of Child Labour
IRAD	Information Research and Advocacy Division
ITN	Insecticide-treated net
JHS	Junior High School
KVIP	Kumasi Ventilated-Improved Pit
LEAP	Livelihood Empowerment Against Poverty
MDA	Ministries, departments and agencies
MESW	Ministry of Employment and Social Welfare
MICS	Multiple Indicator Cluster Survey
MMDA	Metropolitan Municipal and District Assemblies

MMTC	Metro Mass Transit Company
MMTS	Metro Mass Transit System
MOESS	Ministry of Education, Science and Sports
MOH	Ministry of Health
MOWAC	Ministry of Women and Children’s Affairs
NACP	National AIDS Control Programme
NADMO	National Disaster Management Organization
NCC	National Commission on Culture
NCCA	National Council for Curriculum and Assessment
NCPD	National Council on Persons with Disability
NDPC	National Development Programme Commission
NGO	Non-governmental organization
NIB	National Inspection Board
NPA	National Programme of Action
NRSC	National Road Safety Commission
NSID	National Stakeholder and Intervention Database
NTC	National Teaching Council
PMCT	Prevention of Mother-to-Child Transmission
PTA	Parent-Teacher Association
STI	Science, technology and innovation
TB	Tuberculosis
TVET	Technical and Vocational Education and Training
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNICEF	United Nations Children’s Fund
WFCL	Worst Forms of Child Labour
WHO	World Health Organization

## I. Introduction

### Process for preparing the report

1. In 1990, Ghana ratified the United Nations Convention on the Rights of the Child becoming the first country to do so. Signing on 29 January 1990 and ratifying on 5 February of the same year, Ghana became the first country to ratify the Convention.
2. Incidentally, after ratifying in 1990, the initial report of Ghana, which was to be submitted in 1992, was delayed and submitted in 1995. Again, the second periodic report which was due in 1997 was submitted in March 2005, when the third report was already due. This culminated in the submission of a consolidated report to the United Nations Committee on the Rights of the Child in 2005 to cover the second and third reporting periods.
3. After considering the second periodic (second and third consolidated) report of Ghana, the Committee on the Rights of the Child adopted it at the 1120th meeting held on 27 January 2006. The next periodic report of Ghana was fixed for 1 September 2012 and the Committee urged that the next periodic report of Ghana be consolidated to include the third, fourth and fifth periodic reports, and submitted 18 months before its due date, which was by 1 March 2011.
4. The processes involved in ensuring the collection and analysis of adequate and reliable data for the current periodic report were slow, thus affecting the ability of Ghana, once again, to submit its report at the due date.
5. The report was compiled by the Information Research and Advocacy Division (IRAD) of the Department of Children of the Ministry of Women and Children's Affairs with inputs from all relevant child-focused State institutions.
6. To start the process, IRAD organized a series of strategic national, regional and district forums with stakeholders, community members, including children, to inform and discuss the structure and content of the report. IRAD later designed questionnaires based on the Committee on the Rights of the Child's reporting guidelines and sent them to relevant child-focused government agencies to provide the information required. Deadlines were set for the submission of the information requested from strategic partners; the responses were very encouraging and most partners beat the deadlines set. IRAD put together the information gathered from the various agencies into a zero draft report, circulated it in an intermediary feedback process to allow partners to see the first draft report and make additional inputs.
7. A small core team made up of selected experts from the various ministries, departments and agencies, civil society groups, including non-governmental organizations (NGOs), and the media was set up by the Ministry of Women and Children's Affairs to thoroughly review the report. Subsequently, groups of children were met in a series of regional meetings to make additional inputs after which a stakeholder meeting of child-rights practitioners met to fine-tune the final report. The Government of Ghana and UNICEF provided funds for the various meetings.
8. The report addresses concerns raised in the previous consolidated report of Ghana submitted in 2005 to the Committee. This report is a 10-chapter document, which focuses on the main clusters of the Convention on the Rights of the Child. The review period falls within 2005 and 2010; however, since the report is being submitted in 2012, some important issues that occurred in 2011 and 2012 have been reported.

9. The report begins with an introduction, and continues with a section on general measures of implementation as the next chapter. Chapter II highlights new legislation, policies and programmes undertaken by Government and its partners to implement the Convention on the Rights of the Child in Ghana. Chapter III is on the definition of the child, which highlights other age definitions which exist aside from the age of a child. Chapter IV is on general principles, in regard to how Ghana has fared in dealing with issues of non-discrimination, best interest of the child, survival, protection, development and child participation within the review period.

10. The report also touches on civil rights and freedoms of the Ghanaian child as chapter V. The chapter makes particular references to birth and death registration, children's access to information, the status of the use of corporal punishment on children, and how Ghana has addressed concerns regarding the existence of harmful and abusive sociocultural practices. Chapter VI is on family and alternative care, whilst chapter VII is on basic health and welfare of the Ghanaian child. Achievements and challenges in regard to child-rights implementation in the health and welfare sector have been highlighted. Children's education, leisure and cultural activities are presented extensively in chapter VIII. Chapter IX is on special protection measures which have been implemented to address issues faced by children in extremely difficult situations such as those in conflict with the law, children in trafficking, street and other exploitative circumstances. The last chapter is on the Optional Protocols to the Convention on the Rights of the Child.

## **II. General measures of implementation**

### **A. Committee's concluding observations of initial report: general measures of implementation**

11. In its concluding comments on the State party's previous report, the Committee acknowledged the difficult socioeconomic conditions, high-level external debt and poverty which constrained Ghana from granting children their rights to the achievement of effective enjoyment of the rights of the child. The Committee noted the State party's inability to sufficiently address follow-up concerns raised in the initial report of Ghana. It urged the State party to take all necessary measures to address recommendations raised on data collection, corporal punishment and child labour.

#### **1. Data collection**

12. In compliance with the Committee's recommendations, it should be noted that Ghana has made significant improvements to the collection and collation of data on children within the reporting period. There have been very significant improvements in the collection and collation of data on children in the last decade. Some of the gains include the development of database systems at the Ministry of Women and Children's Affairs, Domestic Violence Victims Support Unit of the Ghana Police Service, Department of Social Welfare and other government agencies to capture various child welfare indicators.

13. The Ghana Statistical Service has also widened its focus to cover more child-related issues in national surveys such as the Demographic and Health Surveys and the Multiple Indicator Cluster Surveys.

14. In spite of the gains made, there are existing gaps that still need to be filled and these include the training and strengthening capacities of staff of the various government statistics directorates, divisions and units, and provision of adequate funds to improve an integrated information management system and a mechanism for consistent collection, analysis and sharing of child-related data for policy formulation.

## 2. Legislation

15. The Committee acknowledged with satisfaction Ghana's attempt to strengthen legislation regarding children; however, it raised concern about a gap between law and practice. The lack of adequate human and financial resources for an effective and systematic implementation of the Children's Act and other laws and regulations relevant for the promotion and realization of child rights was another issue raised. The Committee recommended appropriate steps to be taken to strengthen law enforcement and commitment towards policy implementation in a focused and systematic manner.

16. Following up on the Committee's recommendations, Ghana has strengthened its legislative environment by adopting new legislation such as the Human Trafficking Act, 2005 (Act 694), the Domestic Violence Act, 2007 (Act 732), the Persons with Disability Act, 2006 (Act 715) amongst others. Ghana has further demonstrated its commitment to international obligations by ratifying the Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict, and the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime. The submission of Ghana of a report to the United Nations Committee against Torture and also its acceptance of recommendations at the universal periodic review in 2008 in this regard (see A/HRC/8/36, para. 68 (6)) attest to the Government's commitment to prohibiting inhuman treatment and improving human dignity.

17. In spite of the gains made in legislation, there is the need for continuous awareness-raising, sensitization, advocacy and public education of Ghanaians, including children of all categories on the rights and protection needs of children in order to bridge the gap between law and practice.

## 3. National Programme of Action

18. The Committee urged that the State party expedite its efforts to adopt and effectively implement a comprehensive national plan of action for the full implementation of children's rights enshrined in the Convention, taking into account the objectives and goals of the outcome document entitled "A World Fit for Children" of the Special Session of the United Nations General Assembly on Children. It also recommended that the priorities identified in the plan be integrated into the Ghana Poverty Reduction Strategy and ensure the allocation of adequate financial and human resources. The Ministry of Women and Children's Affairs initiated the process for the preparation of the second national plan of action of Ghana for children with UNICEF pledging to support the process. The process halted when the Strategy was drafted and incorporated child-related concerns. Incidentally, many civil society groups have argued that the Strategy does not provide a comprehensive basis to implement the rights under the Convention and that steps be taken to have a second national plan of action for children.

## 4. Coordination

19. The Committee noted with concern the lack of effective interministerial coordination of all activities related to the implementation of the Convention on the Rights of the Child and the limited resources allocated to the Ministry of Women and Children's Affairs. It also expressed concern about the limited capacities of the District Assemblies which hamper the implementation of the Convention at the local level. It recommended that the State party establish a mechanism for effective interministerial coordination in which NGOs can participate and provide the Ministry with adequate resources for an effective performance of its tasks and responsibilities. The Committee further recommended that the State party take all necessary measures to ensure that the District Assemblies are

sufficiently resourced in terms, inter alia, of well-trained and informed staff as well as adequate financial resources.

20. During the reporting period, Ghana continued to undertake pragmatic steps to foster the relationship between the State and civil society institutions, which include NGOs, faith-based organizations (FBOs), community-based organizations (CBOs) and the media with a view to integrate and partner them in addressing child-rights concerns in the country. The period also saw the reactivation of networks such as the Child Protection Network and Child Abuse Network to periodically identify, share and propose solutions to emerging child-related issues. As regards the effective interministerial coordination of the activities related to the implementation of the Convention on the Rights of the Child, the Ministry of Women and Children's Rights has assumed the role of coordinating, monitoring and reviewing the formulation of gender and child responsive budget policies and their implementation within sectors since its establishment in 2001. This role is, however, challenged with the under-mentioned:

- Funding difficulties
- Perceived clash in mandate of other child-focused ministries, departments and agencies
- Inadequate human and material resources for service delivery.

21. The Ministry of Women and Children's Affairs is currently undergoing a re-engineering process to enhance capacity and efficiency in its monitoring and coordination mandates to mainstream gender, and improve the welfare of women and children in Ghana.

## **5. Independent monitoring**

22. The Committee appreciated the activities carried out by the Commission on Human Rights and Administrative Justice but expressed regret over the abolition of the specific department dealing with child rights. It also expressed concern at the lack of adequate human and financial resources. It urged Ghana to reconsider establishing a department which dealt with child-rights issues and also to make available adequate financial and human resources for an effective functioning of the Commission.

23. The Government of Ghana has expressed its full commitment to improving child rights promotion and so has re-established a special unit (Women and Children's Unit) which deals with women and children's rights issues. The Unit was set up in 2006 as part of the Legal and Investigations Department of the Commission on Human Rights and Administrative Justice. The Unit has trained officers at its head office and all the regional offices in Ghana specifically trained to deal with children's rights issues. The Commission continues to play an independent monitoring role and publishes annually on Human Rights Day (10 December) *The State of Human Rights (SOHR) Report* in which child-rights issues are specifically covered.

24. As regards the promotion and protection of children's rights, the Commission on Human Rights and Administrative Justice still receives individual complaints on child-related matters, which are categorized into administrative justice, family-related issues and general basic human rights. Most of the issues categorized under the family-related complaints relate to child/spousal maintenance, paternity and socioeconomic rights mostly health, social welfare, and educational rights. The Commission also periodically, samples children's views on child rights and publishes the response in the reports on the state of human rights.

25. The Commission on Human Rights and Administrative Justice is financed by Government, and also enjoys partnership funding from donors such as the Danish International Development Agency (DANIDA) and the United Nations Development

Programme (UNDP); however the Commission is under-resourced, which affects its operational capabilities.

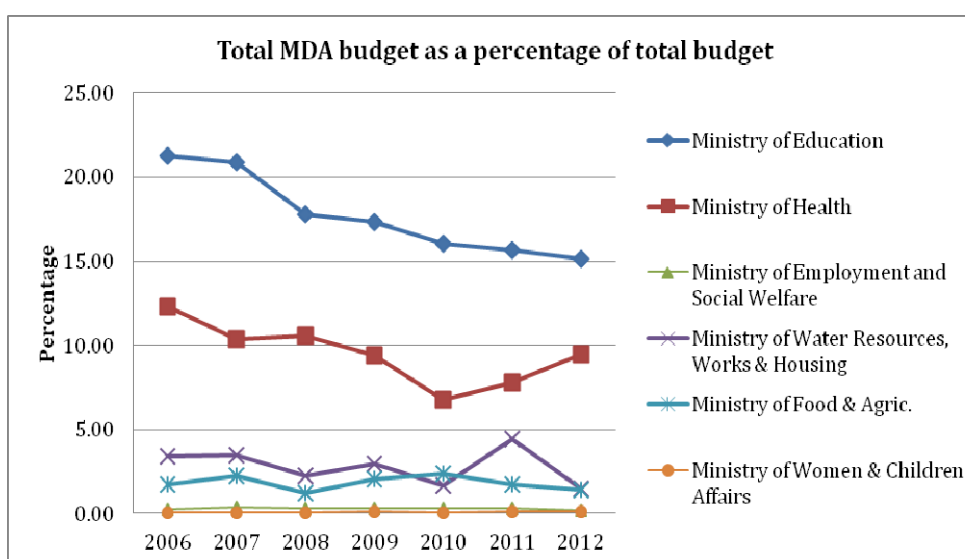
## 6. Resources for children

26. On resources for children, the Committee recommended that the State party pay particular attention to the full implementation of article 4 of the Convention by increasing and prioritizing budgetary allocations to ensure the implementation at all levels of the rights of the child with particular attention being paid to the protection of the rights of children belonging to vulnerable groups including children with disabilities, children affected or/and infected by HIV/AIDS, children in street situations and children living in poverty.

27. Specifically, there is still no budget allocation for the implementation of the Convention of the Rights of the Child in Ghana; however, there is a budget for children-related expenditure. Allocations for child-related policy issues are given to government sectors that cater for children's activities in the areas of education, health, social welfare, governance, birth and death registration, and child protection. Budget allocations for children within the review period were very limited and insufficient to respond to national and local priorities for the protection and promotion of children's rights. From figure 1, apart from the health sector where there seems to be an increase, allocations to all other key child-focused ministries, departments and agencies have stagnated in the last five years. For instance, the Ministry of Education's share of the total budget has been on the decline from about 21.4 per cent in 2006 to 15 per cent in 2012. Of all the child-focused ministries, the budget of the Ministry of Women and Children's Affairs and the Ministry of Employment and Social Welfare constitute the lowest as seen in figure 1.

Figure 1

**Total MDA budget as percentage of total budget**



## B. Conformity with the Convention on the Rights of the Child

28. Ghana has made significant efforts to bring its domestic legislation and practice into conformity with the Convention. As a dualist State, Ghana passed the Children's Act 1998 (Act 560) to domesticate the Convention in its national law. The following new domestic legislation adopted in the reporting period further enhances the minimum standards set down in the Convention.

**1. Persons with Disability Act, 2006 (Act 715)**

29. The Persons with Disability Act, 2006 (Act 715) came into force on 11 August 2006 shortly after the preparation of the consolidated second and third report to the Committee of 1997-2005. Act 715 emphasizes the rights of children with disabilities to equal treatment as regards every facility, amenity and protective measures that an able child would ordinarily enjoy. The right of the child with disabilities is also recognized by the fact that Act 715 makes contravention of sections 1, 2, 4 and 6 an offence punishable by a term of imprisonment or a fine.

**2. The Ghana National Commission on Children (Repeal) Act, 2006 (Act 701)**

30. Act 701 repealed the Ghana National Commission on Children Decree 1979 (AFRCD 66) on 24 March 2006 to convert the Ghana National Commission on Children to a department (Department of Children) of the Ministry of Women and Children's Affairs. There is now a designated department with management responsibility for coordination, monitoring, research, policy management related to children under the Ministry of Women and Children's Affairs.

**3. The Domestic Violence Act, 2007 (Act 732)**

31. The Domestic Violence Act, 2007 (Act 732) came into force on 4 May 2007; it includes acts which, under the Criminal Offences Act, 1960 (Act 29), constitute a threat or harm to a person. It goes further to specify acts, threats or acts likely to result in physical abuse or the deprivation of basic amenities to another person where a relationship exists between the complainant and the victim. In the case of a child, section 2 (1) (d) of Act 732 follows the agreement of the State party to recognize that every child, for the full and harmonious development of his or her personality, should grow up in a family environment in an atmosphere of happiness, love and understanding.

32. It will be noted that where there is a need for special protection for a child, the Court may refer matters concerned with the temporary custody of a child in a situation of domestic violence to a Family Tribunal. The Court now has particular powers to grant protection orders to protect a person and children from various forms of abuse and harassment and thereby guarantees the continued development of the child in a safe environment in compliance with articles 3, 14, 18, 19 (1) and 20 of the Convention. To facilitate the implementation of the Domestic Violence Act, 2007 (Act 732), special courts have been established within the district court structure to deal with gender-based domestic violence cases. This is to complement an effective enforcement of the Criminal Offences Act, 1960 (Act 29).

**4. Education Act, 2008 (Act 778)**

33. The Education Act, 2008 (Act 778), came into force on 9 January 2009, and enhances the right to education of every child. Under the Act each child who attains school-going age has a right to free compulsory basic education in Ghana. The Act also stipulates that the design of a school should be able to accommodate children with special needs and requirements to prevent discrimination of children with disabilities.

**5. Property Rights and Succession Bill, 2009**

34. In accordance with article 22 of the 1992 Constitution of the Republic of Ghana the Property Rights of Spouses Bill is currently before Parliament where the Bill was laid in October 2009. It is expected to be enacted in 2012. The provisions allow for the equal distribution of marital property on separation or on the dissolution of a marriage and cohabitation after a minimum period of five years.



35. The Bill when enacted will permit certain considerations to be taken into account by a judge who determines how the joint property of a couple in one of the three marriage types (Muslim, customary and civil marriage) and in cohabitation should be shared. For instance, consideration will be given to the contributions in kind such as the childcare provided by a spouse during the marriage and shelter where the matrimonial home is jointly owned or rented.

36. Reference to this provision in the event of separation or divorce will indirectly make further provision for the maintenance of the child who may otherwise be left destitute. The substantive provisions on child maintenance are to be found in the Children's Act, 1998 (Act 560).

#### **6. The Intestate Succession Amendment Bill, 2009**

37. The Intestate Succession Bill is still before Parliament. The provisions in the Bill take into account changes in the Ghanaian family system towards a more nuclear family unit but acknowledge the difficulties that can be experienced by children faced with the practices of the cultural system of inheritance and treatment of the spouse and child on the death of the deceased family member in many areas of the country.

38. Consequently the provisions of the Bill make it an offence for a child or spouse to be ejected unlawfully from the matrimonial home. The Bill in addition to the provisions explained in the 2005 report specifically provides for children where there is no surviving spouse and directs that educational fees and other needs of the child are to be paid for and provided before distribution of the deceased's estate. It also provides that the spouse and child are to be adequately housed and that the household chattels of the intestate are to be distributed to the spouse and child.

39. The Bill therefore improves provisions for the child in that children of the intestate will have recourse to the Court if left destitute by the extended family seizing the property of the parent.

#### **7. The National Health Insurance Amendment Bill, 2011**

40. The National Health Insurance Amendment Bill is before Cabinet for approval. The clauses in the Bill revise the law related to health insurance to ensure that residents and other categories of persons have access to quality health-care services. The provision of health care is currently provided for by the National Health Insurance Act, 2003 (Act 650) through the National Health Insurance Fund.

41. Although Act 650 has been quite successful in providing basic health care to the people of Ghana, many difficulties such as an inefficient complaints system and a restrictive membership system has meant that its implementation has not been effective, in the latter case insofar as access to health care by children is concerned. The Bill gives children free health care and decouples their access to health care from their parents.

42. The Bill broadens coverage to include residents (and therefore children) and goes further to include a person suffering from congenital disabilities. It is therefore envisaged that the Bill will enhance the implementation of article 23 of the Convention.

#### **8. The Mental Health Amendment Bill, 2011**

43. The Mental Health Amendment Bill was passed in March 2012. The proposals in the Bill will make changes to the Mental Health Act, 1972 (NRCD 30) which focused mainly on institutional care. Although the 1972 Act took into account the patient, the patient's property and voluntary treatment, the provisions in the Bill bring the current provisions for

the promotion and protection of the rights of people with mental disorder in line with international standards.

44. The Mental Health Amendment Bill introduces innovative provisions to make particular provision for the care and welfare of children with mental disorders, which are conducive to the realization of the rights of the child as enshrined in articles 2, 3, 6, 9, 13, 20 and 23. Since the passage of NRC 30, private and public mental health care has improved in the country.

45. Human rights violations against children can occur in both public and private mental health institutions. The Mental Health Amendment Bill is very significant because it makes specific provisions for the protection of children with mental disorders and prevents them from being subjected to improper or inadequate treatment which is in contravention of the human rights provisions of article 37 of the Convention, particularly, the right not to be subjected to torture or other cruel, inhuman or degrading treatment or punishment.

### **C. Ratifications**

#### **1. Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict**

46. The Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict was ratified by Ghana on Friday, 17 July 2009.

#### **2. Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime**

47. There are three protocols that are referred to jointly as the Palermo Protocols, and that were adopted by the United Nations in 2000 in Palermo, Italy, together with the United Nations Convention against Transnational Organized Crime. They are:

- Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children
- Protocol against the Smuggling of Migrants by Land, Sea and Air
- Protocol against the Illicit Manufacturing of and Trafficking in Firearms, Their Parts and Components and Ammunition.

48. Ghana ratified the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children at the thirty-fifth sitting of Parliament on 17 July 2009 through a resolution for the ratification of the Protocol.

### **D. Remedies available and their accessibility to children**

49. A District Assembly is required by legislation to protect the welfare and promote the rights of children within its area of authority. On the application of a Probation Officer or Social Welfare Officer, a Family Tribunal may make orders that are appropriate and considered to be in the best interest of the child.

### **E. Independent national human rights institution**

50. The Commission on Human Rights and Administrative Justice is an independent national human rights institution and detailed information on the processes for appointing

its members and descriptions of its mandate as well as the role it plays with regard to the promotion and protection of children's rights has been outlined in the previous report. The Commission is financed by Government and also enjoys financial support from development partners such as DANIDA and UNDP. Another major facility for children to seek remedies for violations of their rights is the independent monitoring mechanism of the Commission.

## **F. Measures taken to make the Convention widely known**

51. As noted in the previous periodic report, the Convention on the Rights of the Child and the Children's Act, 1998 (Act 560) have been translated into six widely spoken Ghanaian languages to facilitate their appreciation and use among the general public. Aspects of the Convention daily form the basis of topical issues discussed by both State and private electronic and print media throughout the country. Children are active participants in some of these media discussions such as the *Junior Graphic* newspaper.

52. The Department of Children, Department of Social Welfare, Ghana Education Service, Ghana Health Service, DCD, Non-Formal Education Division, Domestic Violence Victim Support Unit of the Ghana Police Service, Commission on Human Rights and Administrative Justice and other child-focused State and non-State agencies (NGOs, CBOs, FBOs, etc.) collaborate with their respective partners to organize seminars, workshops and meetings aimed at promoting the rights of the child. These programmes have contributed immensely to the education and to raising the awareness of officials, community members, parents, traditional authorities, and a cross-section of children on child-rights issues.

53. A number of publications that relate to children's rights have also been produced to educate and inform the public about the status and situation of children in Ghana. UNICEF Ghana has assisted the Department of Children of the Ministry of Women and Children's Affairs in the printing and distribution of 15,000 copies of the second periodic report of Ghana, child-friendly versions of the Convention, 3,000 copies of Act 560 (Golden Dish), Act 732 and Act 694, as well as other research and child-focused reports such as a study on corporal punishment, which have been circulated nationwide through workshops, community durbars and other forums. Copies were also sent to libraries, educational and academic institutions, governmental organizations and NGOs. Other State and non-State agencies have equally benefited in this manner from UNICEF and other development partners to strengthen awareness-raising of child rights in the country.

### **1. Challenges in dissemination, training and awareness-raising**

54. Even though some levels of achievement have been made in making children's rights widely known through public education, acceptance of the ideals of the Convention has been very slow in Ghana. Many interactions held by IRAD and other child-focused agencies with Ghanaians have shown that many people do not understand the concept and so feel that children are too young to have their rights. An interaction with 300 children in 2011 (30 selected from each region) indicates that even though most children in the country know that children have fundamental rights, they lack knowledge on the specific rights of children. The majority of children have very little knowledge about the Convention.<sup>1</sup>

<sup>1</sup> 2011 Regional consultation with children on Ghana's third, fourth and fifth consolidated report to the United Nations Committee on the Rights of the Child.

## **2. The next steps towards making the Convention widely known**

55. There is need for continuous awareness-raising, advocacy and public education to improve knowledge on the rights and protection needs of children. Incorporation of human rights, and specifically child rights, in the curricula at all levels of the educational system is an important area that can be considered. An increase in budgetary allocations for child-rights focused organizations would also be greatly useful in improving the efficiency and effectiveness of their outputs at the national, regional and local levels.

## **G. Cooperation with civil society organizations**

56. As regards the implementation of all aspects of the Convention, the cooperation between Government and civil society organizations, including NGOs, intergovernmental organizations (IGOs), and children's groups has been positive. Government and its partners have individually and jointly taken measures to publicize and make the principles and provisions of the Convention widely known. Through networking activities of the Child Protection Network, Child Abuse Network, National Orphans and Vulnerable Children Coordinating Committees, Multisectoral Committee on Juvenile Justice, Community Child Protection Teams among others, Government and civil society organizations meet and plan on various issues affecting children.

### **1. Role of non-governmental organizations**

57. NGOs have partnered Government at different levels in publicizing the Convention on the Rights of the Child and have also implemented programmes to meet different needs of children nationwide. There is a wide spread of NGOs across Ghana carrying out projects and programmes to improve the welfare of the child. These have received government support and cooperation at different policy levels. At policymaking level, the State party also involves NGOs in the formulation of policies, strategies and development plans of Government.

### **2. Role children play in national decision-making**

58. Children's groups have also been involved in high-level policy decision interventions. For instance, children have been engaged in the formulation of policies such as the Adolescent Health Policy, the Child Labour Policy, the Human Trafficking Act and the Domestic Violence Act. CURIOS MINDS produced abridged versions of the Domestic Violence Act, the Children's Act and the Human Trafficking Act. Children are also key actors in sensitizing their peers on the dangers of sexually transmitted diseases and immoral behaviour that affect the proper growth and development of children. There has been an increase in the number of child-rights clubs, children and youth clubs in Ghana, most of them trained by the Ministry of Women and Children's Affairs and the National Commission on Civic Education on the Convention on the Rights of the Child, leadership skills and on methods of influencing policy at local, national and international levels. Children can also express their views on national issues through child-centred newspapers such as the *Junior Graphic*.

59. Some of the children's clubs, especially Children and Youth in Broadcasting (CURIOS MINDS), and Child Rights International have utilized knowledge gained in propagating Convention messages to children and adults at different operational communities in Ghana. From a single programme on national radio, CURIOS MINDS now handles six different programmes targeted at addressing children and young people's issues. Children are directly involved in determining the topical issues to be discussed on air. The topics are dovetailed into the principles of children's rights and responsibilities. CURIOS MINDS won two prestigious media awards; one for being the best Youth

Broadcasting Programme in the world, and the other for being the best Youth Broadcasting in Africa.

### **III. Definition of the child**

#### **Definition of a child under domestic law and regulations**

60. Ghana defines each human being below the age of 18 years as a child entitled to the rights and protection stipulated under the Constitution and Children's Act 1998 (Act 560). Thus there is no difference in the definition of the child between national legislation and the Convention.

61. The law in Ghana does not differentiate between girls and boys. Boys and girls are equal before the law and this is derived from article 17 of the Constitution, which also prohibits discrimination on grounds of gender. However, other age definitions exist including the age of a juvenile (12 years), and the age for voting (18 years). Others are the legal age for alcohol consumption (18 years), the age for admission to formal employment (15 years), marriage (18 years), obtaining driving licence (18 years), sexual consent (16 years), voluntary enlistment in the armed forces (18 years), and criminal responsibility (12 years). Details of the definitions found on pages 11-15 of the State party's second periodic report are still relevant and currently apply in Ghana.

### **IV. General principles**

#### **A. Non-discrimination**

62. While noting that the Constitution prohibits discrimination on grounds of sex, race, colour, ethnic origin, creed, religion, social or economic standing or political opinion, the Committee expressed its concern at the fact that discrimination against certain groups of children such as girls, children with disabilities, children of asylum seekers, children of immigrants, children infected and/or affected by HIV/AIDS and street children still exists in practice. It urged Ghana to adopt a comprehensive strategy to eliminate de facto discrimination against all vulnerable groups of children and ensure full implementation of all legal provisions in full compliance with article 2 of the Convention.

63. It should be noted that the laws of Ghana are not discriminatory against any vulnerable groups; however, social practices tend to bring out discriminatory tendencies, which affect certain vulnerable groups of children. Within the reporting period the media and other civil society groups in Ghana have reported incidents of discriminatory practices and have mounted a series of campaigns to discourage these practices. Admittedly, in spite of the presence of legislation, there is much more work to be done in order to improve the living standards of children with disabilities.

##### **1. Gender imbalances**

64. With regard to gender imbalances, it must be noted that girls' education continues to be a topical issue on Government's agenda, and significant inroads have been made over the last decade. Significant gains have been made in the initiatives put in place by Government and its partners to improve gender imbalance in education in Ghana. For instance, the endorsement of affirmative actions as a mechanism to address gender imbalances in Ghana has paid off as current enrolment figures of females have significantly

improved at all levels. Government is in the process of drafting an Affirmative Action Bill with significant inputs from civil society organizations.

## **2. Rural urban differences in health and educational facilities**

65. In terms of policy, Government's focus on education and health is not discriminatory against any groups of children. In relation to health, the Ghana Health Service Code of Ethics and the Parent's Charter mention the principles of non-discrimination and the fact that health workers are expected to adhere to these in the delivery of health services. According to the Code, no service personnel are to discriminate against patients/clients on the grounds of the nature of illness, political affiliation, occupation, disability, culture, ethnicity, language, race, age, gender, religion, etc. in the course of performing their duties.

66. On the basis of the Code of Ethics, every child is expected to receive adequate health care, yet the state of infrastructure in certain remote and rural parts of the country, costs of health care and proximity constraints create discriminatory conditions that tend to affect children's access to health-care services in rural areas.

## **3. Children with disabilities**

67. Other groups of children who suffer discrimination are children with disabilities. Children with disabilities have special needs and live under difficult circumstances, which are usually not met either at the family or State level. For instance, in terms of education, most public schools do not have facilities and structures in place for persons with disabilities. Children with a disability find it difficult to access public buildings, transport and other facilities. There are not enough recreational facilities for children even though their situation may be different in special schools. In addition to discrimination, they also face stigmatization.

68. The Persons with Disability Act, 2006 (Act 715) seeks to bridge existing gaps between persons living without disabilities and persons with disabilities.

## **B. Best interest of the child**

69. The Committee reiterates its concern about the application of the principle of best interest of the child, which is dependent on the sensitivity of the officials of the particular institution concerned and may not be systematic. It advised that the State party ensure that the principle be systematically applied in all programmes, policies and decisions that concern children.

70. This is expressed in the application of laws and in the adjudication procedures where a judge is expected to apply the principle of the best interest of the child in dealing with cases involving children. Even though a judge is called upon to strictly apply the procedures and application of the law, the judge can exercise his discretionary powers by taking into consideration the overall interests of the child in the case in question.

71. In the formulation of child health-related policies and during the delivery of services to children the best interest of the child is also sought. For example, in some situations where parents have refused routine immunization and blood transfusion for their children, all means have been explored, mostly through dialogue with opinion leaders to ensure that the child is immunized, sometimes against sociocultural norms and practices.

72. According to the Commission on Human Rights and Administrative Justice, the majority of human rights cases received by it are child related. Approximately 41.2 per cent (4,665) out of 11,323 human rights cases received from the Commission in 2008<sup>2</sup> were child related. In all cases, the principles of the Convention including the best interest of the child are applied in resolving these cases. From the experience gathered the courts and other institutions also apply these principles.

73. Even though certain efforts are being made both at the institutional level and household level to apply the principle, ensuring its effective implementation has not been the best. Much more is required to ensure the best interest of the child in all matters that affect them.

### **C. Respect for the views of the child**

74. Pertaining to the concerns raised by the Committee on prevailing societal attitudes which tend to limit children from freely expressing their views on matters in schools, home, judicial and administrative proceedings, particularly in rural areas, numerous achievements have been made to take the views of children on board in national and domestic issues. In recent times, considerable efforts have been made to involve children in policy issues. Some of the examples that can be cited are the Children and Youth Forum on Water, Hygiene and Sanitation and Oil Forum (2010). Mock African Union summits in which children are actively involved to add their voices to the decisions taken can also be mentioned. Again, during Ghana's recent Constitutional Review exercise, a special session was held exclusively for children to make inputs. To meet children's demands, two consultants have been engaged to help the review committee put together their report and ensure it reflects issues raised by children during the interactions.

75. Significant efforts have also been made in line with the Committee's recommendations to strengthen efforts to recognize children's views in judicial and other administrative matters that focus on children in accordance with article 12 of the Convention.

76. There is strong indication of a positive change in attitudes towards children's views, even though achievements in this area have not been measured. There is compelling evidence from media reports that in some Ghanaian communities, children are still seen and not heard. Ghana has a long way to go to ensure that children find their voices in issues that affect their rights, welfare and development. Traditions die hard, despite the fact that general recognition of children's views may be increasing.

77. Subject to family influences, most Ghanaian children enjoy freedom of association and right to play and families mostly ensure protection of privacy of their children.

78. It should also be noted that information provided in paragraphs 94 to 99 on page 21 of the last country report is still valid. Through child-rights clubs, Easter Schools for children, celebration of calendar events such as African Union Day, National Children's Day, International Day of the Family, etc. children have been educated on their rights and their capacity has been built to ensure that their rights are not trampled upon. Teachers and parents have also been sensitized to respect the views of the child.

79. Incidentally, the regional consultations with children did show that much more education is needed to improve parental attitudes in respect to views of children. A student from Sekondi College in the Western Region of Ghana expressed the following:

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<sup>2</sup> Current figures not available at the time of compilation.

“The voices of children are very loud in Ghana, but cannot be heard by many of our parents. If only they can listen for a minute, many children will have their basic needs met.”

## **D. The right to life, survival and development**

### **1. Measures taken to protect children from xenophobia**

80. There is no official information indicating the existence of xenophobia in the country. Ghana is a country that is very hospitable and accepts people of all cultures.

### **2. Deaths of persons under age 18 as a result of capital punishment**

81. Even though the law in Ghana allows the death penalty, children are exempted from capital punishment and no child has ever been subjected to the death penalty. In lieu of the death sentence, the Court shall order the detention of the juvenile during the pleasure of the President (sect. 295 of the Criminal and Other Offences (Procedure) Act, 1960, Act 30). This provision has been strictly adhered to by the Courts.

### **3. Deaths of children as a result of traffic or other accidents in Ghana**

82. The NRSC Act, 1999 (Act 567) established the National Road Safety Commission to ensure safety on roads in Ghana. Between 2005 and 2010, a proportion of more than 18 per cent of persons who died in road accidents constituted children according to the Commission. Causes of traffic accidents in the country can be grouped into three broad areas. These are human error, nature of roads, and state of vehicles. Programmes implemented to reduce road accidents include:

- Road safety education for all categories of road users, especially children
- Introduction of physical and other measures in vehicles to control and manage speed
- Proper vehicle and driver testing procedures
- Training of drivers through the running of a National Drivers Academy
- Use of retro-reflective tapes on vehicles and the continuous use of advance warning triangles to aid vehicle conspicuity
- Towing services
- Introduction of a National Road Safety Awards Scheme to recognize the transport organizations that have embraced the systems approach to manage safety issues.

83. The current operational constraints of the Commission are inadequate funding, inadequate stakeholder commitment to road safety and the lack of political commitment.

### **4. Respect for the views of the child**

84. Children’s views have gained more prominence than a decade ago when the popular saying “a child is seen but not heard” was held with credence (refer to above-mentioned paragraphs 94 to 100 on pages 21 and 22). Incidentally, the regional consultations with children did show that much more education is needed to improve parental attitudes in respect to views of children. A student from Sekondi College in the Western Region of Ghana expressed:



“The voices of children are very loud in Ghana, but cannot be heard by many of our parents. If only they can listen for a minute, many children will have their basic needs met.”

## V. Civil rights and freedoms

### A. Birth registration

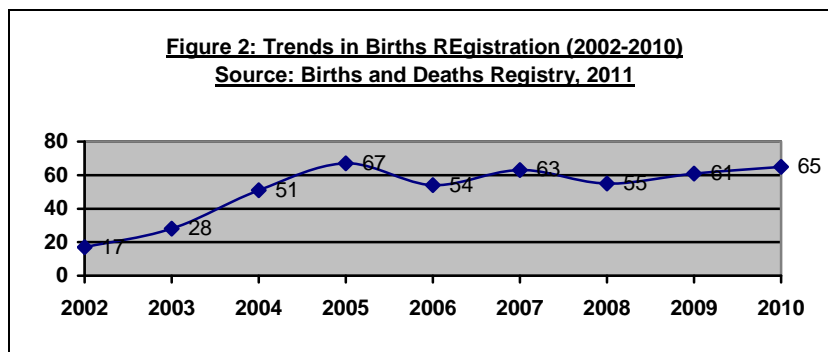
85. The Committee raised concern about the many challenges faced in registering births in Ghana, particularly in rural areas, and for abandoned children, asylum seekers and refugee children. The Committee enumerated challenges such as poor staffing, inadequate funding and lack of logistics. It recommended the following:

- Strengthening its efforts in terms of financial allocations and improved institutional capacities
- Taking appropriate measures to register those who have not been registered at birth
- Strengthening the cooperation of the Births and Deaths Registry between the local government and community-based institutions
- Increasing the appreciation of the importance of birth registration and providing information on the procedure of birth registration, including the rights and entitlements derived from the registration, to the public, through television, radio and printed materials
- Paying particular attention to the improved access to an early birth registration system by abandoned children, asylum seekers and refugee children.

86. Information provided by the Births and Deaths Registry indicates that birth and death registration has improved since the last reporting period. According to the Registry there has been significant improvement in data collection and management of information on children at the national, regional and district levels since 2002. In the year 2002, the coverage of birth registration was 17 per cent nationwide. By the end of 2005, the coverage had risen to 67 per cent, a remarkable improvement of 50 per cent. Incidentally, the figure dropped to 54 per cent by the end of 2006, shot up again to 63 per cent in 2007, and dropped to 55 per cent in 2008. The coverage improved to 61 per cent in 2009 and by the end of 2010, it had risen again to 65 per cent as seen in figure 1.

Figure 2

#### Trends in birth registration (2002-2010)



Source: Births and Deaths Registry, 2011.

87. The remarkable increase from 17 per cent in 2002 to 65 per cent in 2010 was achieved as a result of measures such as:

- Free registration of newborn babies within 12 months of delivery
- Recognition of a “Birth Registration Day” every 1 September as an annual calendar event to educate the public on the importance of registering infants
- Intensification of public education at national, district and community levels to sensitize and also encourage Ghanaians to register their births and deaths
- Production of IE&C materials (T-shirts, stickers, leaflets, posters, etc.) for community-level sensitization
- Involvement of the media in all publicity activities
- Modernization of the births and deaths system
- Implementation of the Community Population Registry Programme to sensitize community residents, take baseline demographic data, build a population register, which is updated periodically.

88. The Births and Deaths Registry still faces human and financial constraints for programme implementation, in spite of Government and other support received from development partners. The problem of ignorance and inaccessibility of the registration service in certain parts of the country have contributed to the low registration of deaths in Ghana. It is difficult for the Registry to readily conduct investigation into unreported events because of financial and human resource capacities. The Registry has adopted a number of interventions to reach out to the general public with information on registration and make registration services more accessible to the population. Special attention is given to the hard-to-reach areas of the country. The Registry has also intensified its public education programmes to improve awareness and knowledge about birth and death registration.

## **B. Access to information**

89. Concerning access to information, the Committee was concerned about the exposure of children to harmful information, such as violence and pornography, through the use of the Internet. The Committee urged Ghana to take all necessary legal and other measures, including advisory campaigns directed to parents, guardians and teachers and cooperate with Internet service providers in order to protect children from being exposed to harmful material such as violence and pornography through the Internet.

90. The exact number of children with access to this material is not known owing to inadequate information and the lack of capacity to control access to these materials. The exposure of children to harmful material, which is a criminal offence in Ghana, is a big challenge for the Government. It should be noted that there is legislation that seeks the protection of children from the use of inappropriate materials. The 1992 Republican Constitution protects children from accessing inappropriate information such as pornographic materials. Article 21 (f) of the Constitution guarantees the right to information and further protects children from “physical and moral hazards” in article 28 (1) (d), whilst section 6 (3) (a) of the Children’s Act stipulates that parents are to “protect the child from neglect, discrimination, violence, abuse, exposure to physical and moral hazards and oppression”. The Cinematography Act, 1961 (Act 76) also protects children against morally hazardous information from the mass media.

91. In spite of legislation, children still access harmful materials and this has attracted public complaints. A study done by the Department of Children (2007) on the use of the Internet by schoolchildren in the Accra metropolis did indicate that some children use the

Internet for harmful purposes such as pornography, violent materials and fraud. Fourteen per cent of children in the study indicated they had used the Internet for pornography. The study also indicated that some Internet cafés have regulatory measures to monitor children's use of the Internet, whilst a significant majority did not have such measures. The study findings further showed that the Internet café is not the only source for children to access pornographic and other harmful materials. Seventy-one per cent of children sampled go to the Internet café to access the Internet, 14 per cent use it at home, and 10 per cent use it at school. A percentage less than four access the Internet at a parent's or guardian's office, or through mobile phones and personal laptops. Even though the study was only carried out in Accra, it gives an indication of a bigger problem nationwide.

92. A plethora of Internet cafés and video centres coupled with lack of supervision and poor parenting also provide children in the urban and peri-urban areas with access to inappropriate information. There have also been reported incidents of children acquiring pornographic materials from vendors of video CDs, mobile phones and other multimedia facilities. Even though these incidents have been reported, it is difficult to determine the authenticity of these reports and the frequency with which children take advantage of these outlets, due to a lack of reliable data.

93. The Government has been urged by the public to devise a means to stem the upsurge of pornographic materials, especially among children, in order to help realize the country's hope for a responsible future generation. In order to address the concerns of the public, the Ministry of Information has established a board to deal with issues that arise as a result of production of films and videos with inappropriate contents that are put out for public viewing. The Ministry is also finalizing a Film Development and Classification Bill to streamline film development and enforce the culture of quality, priority and decency in the distribution, sale and exhibition of films and videos in the country.

94. Children have access to suitable information through various means such as formal education, Internet, children's newspapers (*Junior Graphic*) and other child-centred publications such as the *Springboard* and *Grand Kidz Magazines*, which are published by children. There are libraries all over the country, accessible to children for educational, informational and entertaining materials. In addition to this, the Ghana Library Board also operates mobile library vans for schools and communities and children to facilitate access.

95. Other private corporate bodies such as the Multimedia Company and the British Council have also established libraries in the capital Accra and Kumasi, the second largest city, which provide important reference materials for children's purposes. Children also patronize other libraries and informational facilities such as the George Padmore Library and W.E.B. Du Bois Centre, both of which specialize in African and African-American history, literature and culture.

96. In spite of these facilities, many children still encounter challenges in accessing information. Consultation with children showed that most schools in Ghana do not have computers. Even schools with computer laboratories have limited numbers of computers for children's use. As a result many children lack computer skills. In the children's consultations, a child from the Volta Region asked:

“If a child from a remote community who has never seen a computer before goes to write an exam and is asked to draw a mouse what would that ignorant child draw?”

### **C. Corporal punishment**

97. The Committee was concerned that corporal punishment is still widely practised in Ghana and that the Children's Act also allows for a degree of “reasonable” and “justifiable” punishment. It recommended that appropriate steps be taken to:

- Explicitly prohibit all forms of corporal punishment in the family, schools and other institutional settings and alternative care systems as a matter of priority
- Sensitize and educate parents, guardians and professionals working with and for children by carrying out public educational campaigns with the involvement of children about the harmful impact of violent forms of “discipline” and by promoting positive, non-violent forms of discipline and the respect of child rights.

98. Corporal punishment is still widely used in schools and other institutions in Ghana. During the reporting period, the Ministry of Women and Children’s Affairs, the Department of Social Welfare, the Commission on Human Rights and Administrative Justice, and other child-related agencies carried out different programmes to educate the public on the negative effects of corporal punishment and the application of other alternative non-physical corrective methods.

99. Currently, the Ghana Education Code of Discipline for second-cycle schools still provides for corporal punishment, with a head teacher of a school being the person to give authorization or administer it. The Ghana Education Service drafted the national child-friendly school standards for basic schools which include the following: “School is a safe environment for teaching and learning for all children and staff (free from any form of intimidation, violence and abuse including corporal punishment and sexual abuse) regardless of race, sex background and abilities.” The national standards are expected to be rolled out in 2012.

100. A study carried out in 2008 by CURIOUS MINDS/Department of Children on corporal punishment in Ghana indicates that 81 per cent and 71 per cent of children are subjected to a form of corrective measure at home and school respectively. Caning and whipping constitute the most common corrective method applied to children in Ghana. The Ghana Education Service also completed a study in 2011 on the use of corporal punishment, and there are reasonable indications that the findings will be implemented to regulate the application of corporal punishment in schools.

101. Monitoring exercises carried out by the Commission on Human Rights and Administrative Justice also showed that corporal punishment still existed in Ghana and was the main form of discipline used in the schools. According to school authorities interviewed by the Commission, corporal punishment was applied in accordance with the Ghana Education Service Disciplinary Code.

102. Recommended penalties for violations under the Code are sanctions like caution, queries, suspension or dismissals by the authorities. However, students in monitored schools revealed that school authorities resorted to caning as a form of punishment. Many children have expressed similar views about the abusive use of corporal punishment in school by teachers during the children’s consultations. Some children expressed the following when the issue of corporal punishment was discussed:

“Some teachers cane by heart, it is more of an attitude than for corrective purposes.

“Our teachers just enjoy beating us with the cane. They look for an opportunity to cane us upon the slightest provocation.

“Government must ban the use of corporal punishment not only in school but in our homes as well.”

103. There has been much debate as to whether corporal punishment should continue to be used or be banned and this has provoked some controversy as a section of parents tend to prefer that form of punishment whilst others prefer a non-violent alternative corrective method.

104. In the midst of the debate, some concerns have also been raised over the use of corporal punishment as a corrective measure. First, steps made to remove corporal punishment from the Teachers Hand Book have still not been successful. Secondly, legislation on the use of corporal punishment is also weak, since it does not prohibit its use, and thirdly, there are no adequate monitoring mechanisms in place to check abuses.

105. Many CSO groups have called for the total ban of the use of corporal punishment. The Ghana Education Service drafted the National Child-Friendly School Standards for basic schools which include the following standard: “School is a safe environment for teaching and learning for all children and staff (free from any form of intimidation, violence and abuse including corporal punishment and sexual abuse) regardless of race, gender, background and abilities.” The national standards are expected to be rolled out from 2012.

106. The Department of Children of the Ministry of Women and Children’s Affairs, the Commission on Human Rights and Administrative Justice, the Domestic Violence Victim Support Unit of the Ghana Police Service and the Department of Social Welfare have on different platforms carried out public education programmes with the involvement of children to draw attention to the harmful effects of violent forms of corrective measures and the need to apply non-violent forms of disciplinary methods. The drafting of the national child-friendly school standard is to further improve the situation. What is also called for is clear legislation to complement the administrative regulations in place.

#### **D. Freedom of expression, thought, conscience and religion, association and of peaceful assembly, and protection of privacy**

107. Comprehensive information regarding the implementation of measures on the following were provided in the previous report:

- Freedom of expression (pp. 25–26, paras. 113–114)
- Freedom of thought, conscience and religion (p. 26, paras. 115–116)
- Freedom of association and of peaceful assembly (p. 26, paras. 117–118)
- Protection of privacy (p. 27, para. 120).

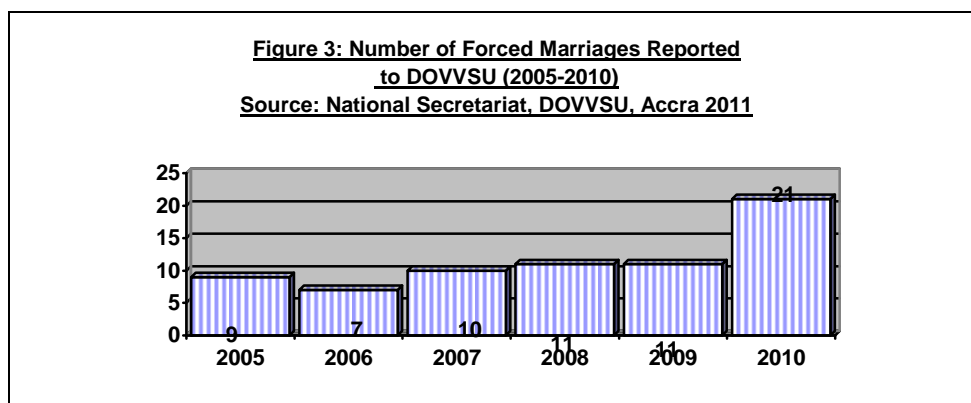
#### **E. Harmful sociocultural practices**

108. In Ghana, some sociocultural practices constitute violence against children and tend to affect their development, especially that of girls. Since 2005, national efforts have been aimed at campaigning against abusive cultural practices such as forced marriages, early marriages, *trokosi*, and female genital mutilation (FGM).

##### **1. Forced marriage**

109. Children occasionally fall victim to forced marriages in certain communities in Ghana, in spite of the fact that it constitutes a breach of the law. Between 2005 and 2009, 48 cases of forced marriage were reported to the Police. Figure 3 shows statistics of forced marriage cases handled by the Domestic Violence Victim Support Unit of the Ghana Police Service throughout the country within the reporting period. When the Police receive these cases, they are processed and sent to court. The increase in the number of reports may be due to increasing awareness being created by partners.

Figure 3  
**Number of forced marriages reported to DOVVSU (2005-2010)**



Source: National Secretariat, DOVVSU, Accra, 2011.

## 2. Ritual enslavement – *trokosi*

110. Ritual enslavement, commonly referred to as *trokosi* in Ghana, is still practised, but on a reduced scale in certain remote communities in the south-eastern coastal area of the country. The laws of Ghana criminalize *trokosi* as it violates many human rights mainly of girl children. The Constitution in article 28 (3) bans the general ill-treatment of children. The Children's Act criminalizes the cruel, inhuman and degrading treatment of children and the Criminal Code (Amendment) Act of 1998 (Act 554) specifically proscribes ritual enslavement.

111. *Trokosi* complaints may be directed to the Commission on Human Rights and Administrative Justice, the Police or local authorities. The Commission and some CSOs have been involved with awareness campaigns on negative traditional practices. Within the period under review steps have been taken by Government and its partners to advocate the release of victims of the practice. This has led to the liberation of some girls from *trokosi* and in addition two vocational training centres have been established to help the girls reintegrate into society.

## 3. Female genital mutilation

112. FGM is carried out in the Northern, Upper East and Upper West Regions of Ghana, and in the southern parts of Ghana it is prevalent among migrants who carry their customs with them when they relocate. The High Impact Rapid Delivery Supplementary Survey (UNICEF/GSS, 2007) carried out by the Ghana Statistical Service (GSS) and UNICEF in the Upper West, Upper East, Northern, and Central Regions in Ghana, reveal that among the four regions, the proportion of women who had had FGM is highest in Upper West where one in two women have had it. Upper East is second (20 per cent), followed by Northern Region (5 per cent), and Central, which had less than 1 per cent. The study found FGM to be highest in older women and lower in women aged 15-49 years with some level of education. This may suggest a decline in the practice due to enforcement of law and awareness creation. The survey findings also revealed that 86 per cent of all respondents felt that the practice should be discontinued, implying an improvement in awareness-raising in the country. Opinions sought from many young people in Ghana indicate that many are against the practice. The following were expressed by some girls interacted with on FGM by the Department of Children:

“I was badly cut with a knife and I lost a lot of blood. I was just about eight years, and even though it happened many years ago, I still feel the pain as if it was done only yesterday.

“I feel disgusted when I touch myself, it is as if I am not a woman.”

## **F. National response on harmful practices**

113. The Committee raised concerns about the persistence of early marriages, FGM and *trokosi*. Admittedly, the legislative environment for the protection of children against harmful traditional practices is weak owing to enforcement constraints.

114. Some of the challenges faced by Government and its partners to combat harmful sociocultural practices are as follows:

- Difficulty in enforcement of laws
- Failure to report cases of abuse
- Poverty and ignorance of victims and their families
- Strong influence of community, traditional and religious leaders.

115. National initiatives undertaken to fight harmful sociocultural practices include legislation, policy formulation, institutional reform/strengthening, media campaign/publicity, strong advocacy network activities, research and development. These initiatives have helped in enhancing people’s perceptions and conceptions about certain negative sociocultural practices. In spite of the positive results, some Ghanaians still strongly adhere to some of the negative practices mentioned above.

## **G. Reported abuse and other degrading treatment resulting in a court decision or other types of follow-up**

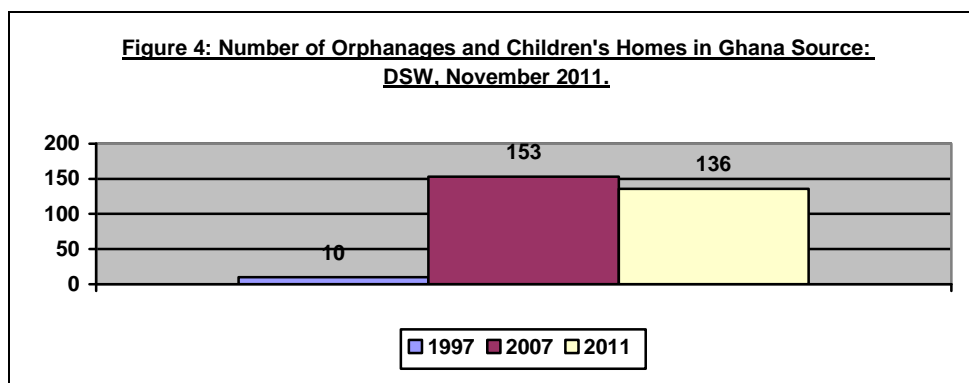
116. The Commission on Human Rights and Administrative Justice, the Department of Social Welfare, the Ministry of Women and Children’s Affairs and CSO groups such as the Ghana Branch of the International Federation of Women Lawyers (FIDA) and Women’s Initiative for Self-Empowerment (WISE) result in court actions and other required follow-ups (refer to table A48 in the annex).

## **H. Number and percentage of children who received special care in terms of recovery and social reintegration**

117. The exact number of children who receive special care in terms of recovery and social reintegration is not known. However, some government agencies such as the Domestic Violence Victim Support Unit of the Ghana Police Service, the Commission on Human Rights and Administrative Justice, the Department of Social Welfare, offer counselling services to children who fall victim to cruel, inhuman or degrading treatment. Psychosocial support services are provided and where needed they are placed in shelters or homes either run by the Department of Social Welfare or NGOs.

118. The current number of orphanages and children’s homes in Ghana is 136 (fig. 4). The Department of Social Welfare embarked on a nationwide profiling exercise on orphanages, which eventually led to the closing down of 17 orphanages.

Figure 4  
**Number of orphanages and children's homes in Ghana (1997-2011)**



Source: DSW, November 2011.

119. The Department of Social Welfare has initiated the Childcare Reform Initiative to address the concerns and to ensure that institutions are used as a last resort and for limited periods only. The Initiative also ensures that standards are maintained in care institutions and orphanages. According to the Department the increase in the number of institutionalized homes such as orphanages is not a good development for child development in the country. This is because it reflects the gradual breakdown of family ties in relation to child upbringing with the result of placement of many children in care institutions. Department officials have also complained of non-conformity with the required national and international standards in the operation of homes. The Department has initiated the Childcare Reform Initiative to address these concerns and to ensure that institutions are used as a last resort and for limited periods only.

### **I. Programmes implemented for the prevention of institutional violence and training provided to staff**

120. Violence is perpetuated against children in institutional and care institutions. In order to reduce institutional violence, agencies whose work focuses on institutionalized children are to be taken through periodic training programmes. Within the reporting period some government institutions with mandates on child welfare and development organized training for their staff, partners and the general public. These training programmes were offered to improve staff capacity to deal with institutional violence against children.

## **VI. Family environment and alternative care**

### **A. Parental responsibilities**

121. The Committee recommended necessary measures to support and strengthen the capacity of parents, particularly those in difficult circumstances, to perform their responsibilities in the upbringing of their children through family support programmes and facilitate the work of NGOs in that regard. As regards that recommendation, appropriate steps have been taken to provide support to families.

122. In terms of family support, the Government of Ghana considers it important to ensure that parents are supported to play their roles as responsible parents. Between 2006 and 2010, Government initiated family support schemes to alleviate poverty and place



parents and families in a better position to provide for the basic needs of their children. These include:

- Microfinance loans disbursed by the Ministry of Women and Children's Affairs to traders, businesswomen, hairdressers, seamstresses, etc.
- The Macrofinance and Small Loan Company is also another agency that is involved in the provision of macrofinance loans to Ghanaians to help them improve their status economically
- The Education Capitation Grant;
- Free school uniforms distributed to children in deprived areas, and school feeding programmes
- LEAP, social cash transfer programme to alleviate poverty in selected poor households
- Free bus ride for schoolchildren at the primary and junior high-school level on weekdays by the Metro Mass Transit Company
- Free maternal delivery programme
- National Health Insurance Scheme.

123. In spite of these important steps taken by Government and its partners, there are still a significant number of families in Ghana without any access to any family support programmes.

## **B. Alternative care**

124. The Committee was pleased with Ghana having the National Policy Guidelines on Orphans and Other Children Made Vulnerable by HIV/AIDS, but concerned about the ineffective implementation of the Guidelines. It also raised concern over about 200,000 children orphaned by HIV/AIDS in Ghana. Finally, the Committee was worried about the increasing number of orphanages in Ghana. It recommended that Ghana take necessary measures to fully implement the Guidelines on the care and protection of orphans and vulnerable children as a matter of priority, strengthen the capacity of the Department of Social Welfare, provide active support for a significant increase of the availability of family type of alternative care such as the extended family or foster care, ensure that all existing and newly established children's homes and orphanages meet standards of quality and are regularly reviewed, and also make sure the stay in institutions by children is for the shortest time possible.

125. In line with the Committee's recommendations, the following have been implemented:

- The Department of Social Welfare as part of its programmes has instituted the Care Reform Initiative which ensures that the necessary measures in the Guidelines on the care and protection of orphaned and vulnerable children remain a priority area and are adhered to by consistent monitoring and supervision of children's homes and orphanages
- The main aim of the Care Reform Initiative is to deinstitutionalize by making institutional care the last resort. It seeks to promote family reunification and reintegration of children into their families and communities
- The Care Reform Initiative regularly monitors and ensures that newly established children's homes and orphanages meet standards and reviews are

made. Homes and orphanages which do not conform to standards are tracked and their licences withdrawn or closed down

- The Department of Social Welfare works in collaboration with UNICEF to provide technical and financial support in its training and monitoring activities.

### **C. Child abuse and neglect**

126. The Committee was concerned about cases of ill-treatment and abuse, including sexual abuse, and about the fact that there are no mandatory reporting requirements for professionals with regard to child abuse. On that concluding observation, the Committee recommended that Ghana:

- Take the necessary measures to prevent child abuse and neglect
- Expedite the adoption of the Domestic Violence Bill and introduce mandatory reporting requirements for professionals with regard to child abuse
- Establish a toll-free nationwide telephone helpline for children resourced with well-trained professionals and volunteers
- Take measures for improving data collection, analysing and sharing between agencies on child abuse, recovery and social integration
- Investigate cases of domestic violence and sexual abuse through a child-sensitive judicial procedure, and ensure that sanctions be applied to perpetrators with due regard given to guaranteeing the right of privacy of the child
- Raise awareness among the public of the problem of domestic violence, with the view to changing public attitudes and traditions that inhibit victims, particularly women and girls, from reporting it
- Carry out preventive public education campaigns about the negative consequences of neglect and abuse of children.

127. In line with those recommendations, the following achievements have been made:

- The Department of Social Welfare and the Domestic Violence Victim Support Unit of the Ghana Police Service have worked in various capacities to prevent and address child abuse, neglect and maintenance cases that have come to their attention
- The Domestic Violence Bill was passed into law in 2007. A Domestic Violence Board and Secretariat have been established under the mandate of the Ministry of Women and Children's Affairs and a legislative instrument is being prepared for the Act
- A Domestic Violence Fund has been established to assist victims of domestic violence with skills training and medical bills among others
- Attempts are being made by the Ministry, UNICEF and AMPCAN to re-establish a toll-free nationwide telephone helpline for children at the Domestic Violence Victim Support Unit
- Plans are far under way to produce standard operating procedures for partners in dealing with child abuse issues;
- The Department of Social Welfare and the Domestic Violence Victim Support Unit have made significant strides in strengthening capacities in data collection,

analysing and sharing between agencies on child abuse, recovery and social integration

- The judiciary and the Domestic Violence Victim Support Unit have made gains in their investigative operations concerning domestic violence and sexual abuse through child-sensitive judicial procedures. The Unit has prosecuted and sentenced a number of perpetrators of domestic violence
- The Department of Social Welfare, the Ministry of Women and Children's Affairs, the Department of Children, the Domestic Violence Victim Support Unit, the Commission on Human Rights and Administrative Justice and other civil society partners have made various contributions in raising public awareness on violence against children, including child neglect and abuse, and this has had a lot of impact on many sections of the Ghanaian public.

#### **D. Separation from parents, family reunification, recovery of maintenance**

128. Information provided in Ghana's previous report on the under-mentioned issues remain valid for the current reporting period:

- Separation from parents (p. 31, paras. 138-140)
- Family reunification (pp. 31-32, para. 141);
- Recovery of maintenance for the child (p. 33, paras. 148-149).

#### **E. Children deprived of a family environment**

129. The Department of Social Welfare is the State agency responsible for ensuring that children are provided homes or family in situations of neglect and deprivation. Based on the decisions of the Department, a child may be given up for adoption, care placement or fosterage for protection and maintenance.

##### **1. Adoption**

130. The Department of Social Welfare is responsible for adoption in Ghana. Reports from the Department indicate that there have not been any changes to the processes involved in placing a child for adoption placement since the last reporting period. The applicable law and procedures on the basis of which adoption is determined are still those provided in the Children's Act, sects. 65–86, and the Adoption Rules.

131. Even though administratively, the same rules and procedures reported on in the previous report still apply in issues of adoption, the principle of the best interest of the child is always ensured in all processes, and the child is an active participant in adoption procedures. The child is interviewed and the process is explained to him/her in the language within the capacity of his/her understanding.

132. The Department of Social Welfare has Adoption Units in all the Regions and between 2005 and 2010, the Units dealt with 1,944 cases of adoption as indicated in table 6.1.

Table 6.1  
**Domestic and foreign adoption handled by the Department of Social Welfare (2005-2010)**

Year	Domestic Adoption			Foreign Adoption		
	Relative	Non-relative	Total	Relative	Non-relative	Total
2005	6	13	19	9	13	22
2006	55	45	100	138	183	321
2007	31	48	79	141	265	397
2008	43	33	76	84	111	195
2009	34	64	98	94	172	266
2010	39	73	112	98	163	261
<b>Total</b>	<b>208</b>	<b>276</b>	<b>484</b>	<b>564</b>	<b>907</b>	<b>1 462</b>

Source: DSW, 2011.

133. Even though the Committee recognized that the Children's Act has provisions on national adoption, it raised concern about the lack of adequate mechanisms for intercountry adoption. The Committee recommended that Ghana ratify the 1993 Hague Convention No. 33 on Protection of Children and Co-operation in Respect of Intercountry Adoption. A cabinet memorandum for the ratification of the Convention has been forwarded by the Ministry of Employment and Social Welfare to the Cabinet for approval.

## 2. Fostering

134. As indicated, fostering is one of the ways of ensuring that children are placed in safe environments. Within the period under review, 12 children were fostered according to the records of the Department of Social Welfare. The Department is currently developing a foster-care guideline for foster parents as well as for monitoring purposes.

## 3. Illicit transfer and non-return

135. The Government of Ghana attaches importance to illicit transfer and non-return of children both abroad and internally and so has taken measures at the country level to combat trafficking. Even though there is evidence of human trafficking, the exact figures of children who have been victims has still not been adequately captured and estimated. There is also very little information on the extent of internal and cross-border trafficking of children.

136. In spite of the difficulty, Government and its partners have instituted a number of measures to fight human trafficking. The following can be cited:

- *Development of a National Plan of Action and passage of the Human Trafficking Act 2005 (Act 694)* – The Plan constitutes the framework through which the ideals of the Human Trafficking Act are operationalized. The Plan is being coordinated by the Human Trafficking Secretariat, which has been established at the Ministry of Women and Children's Affairs to manage the day-to-day functions of the Management Board
- *Establishment of a National Trafficking Board* – Following the passage of the Human Trafficking Act, a National Trafficking Board was established to manage policy and strategic issues concerning human trafficking in Ghana
- *Intensification of public awareness and information campaigns* – There is periodic public education by child-focused government agencies such as the

Department of Children, Commission on Human Rights and Administrative Justice, Ghana AIDS Commission, Department of Social Welfare, Domestic Violence Victim Support Unit of the Ghana Police Service, Births and Deaths Registry, Ghana Immigration Service, the Anti-Human Trafficking Units of the Ghana Police Service and the Ghana Health Service. These educational programmes are held at the national, regional, district and sometimes community levels on trafficking and other aspects of the Convention on the Rights of the Child. The essence of these programmes is to increase publicity and awareness of child trafficking and its effects

- *Funding of poverty reduction and running projects engaged in by vulnerable groups of women* – Government and its partners continue to provide assistance through poverty reduction initiatives for poor families and vulnerable groups. The essence is to improve livelihoods and family incomes. Examples of such projects are LEAP, Ghana School Feeding Programme, Free School Uniforms, Capitation Grants, Free Exercise Books, etc.
- *National Stakeholder and Intervention Database* – The Ministry of Women and Children’s Affairs in collaboration with Rescue Foundation has established a National Stakeholder and Intervention Database to compile relevant information on human trafficking. The database captures data specifically on children.

## F. Child abduction

137. The Ghana Police Service places high priority on child abduction and assists in the recovery of abducted children when reported. Between 2005 and 2009, the Service recorded 1,592 cases of abduction. Table 6.2 provides the details.

Table 6.2

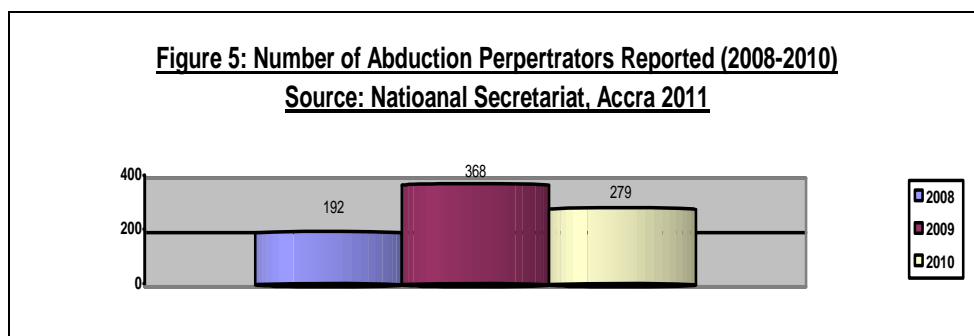
### Number of abduction cases reported to the police (2005-2009)

<i>Year</i>	<i>Number</i>
2005	187
2006	320
2007	427
2008	292
2009	366
<b>Total</b>	<b>1 592</b>

*Source:* DOVVSU National Secretariat, 2011.

138. Records of the police indicate that between 2008 and 2010 (fig. 4), 839 child abduction perpetrators were arrested. According to the Domestic Violence Victim Support Unit of the Ghana Police Service, most of the cases resulted in prosecution with the appropriate sentence being given.

Figure 5  
**Number of abduction perpetrators reported (2008-2010)**

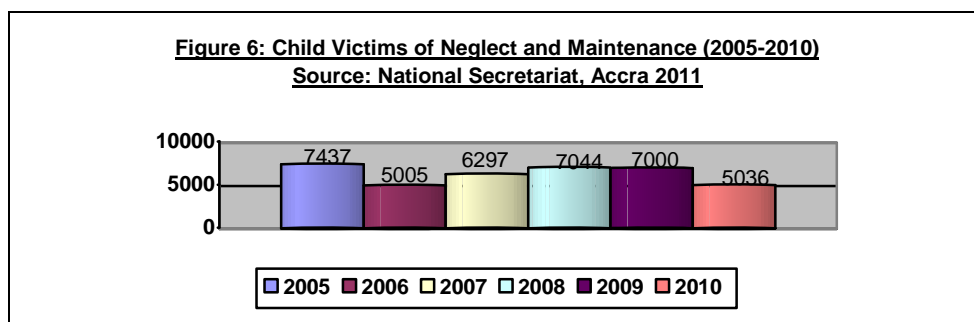


Source: National Secretariat, Accra 2011.

**Periodic review of placement**

139. All comments made on periodic review in the previous report (p. 34, paras. 156–157) remain valid. The Department of Social Welfare still does background checks on all applicants who wish to adopt children before allowing adoption, and also does assessments to ensure that the child’s future will be guaranteed if he/she is placed with an applicant.

Figure 6  
**Child victims of neglect and maintenance (2005-2010)**



Source: National Secretariat, Accra 2011.

**G. Abuse and neglect, including physical and psychological recovery and social reintegration**

**Victims of abuse and/or neglect**

140. Neglect is the failure to provide for the development of the child in all spheres: health, education, emotional development, nutrition, shelter, and safe living conditions, in the context of resources reasonably available to the family or caretakers and causes or has a high probability of causing harm to the child’s health or physical, mental, spiritual, moral or social development. This includes the failure to properly supervise and protect children from harm as much as is feasible. Neglect and failure to provide maintenance for children constitutes the most common form of child abuse in Ghana. The Domestic Violence Victim Support Unit of the Ghana Police Service records indicate that between 2005 and 2010, a total number of 37,819 cases of neglect and maintenance cases were reported (fig. 5).

## VII. Basic health and welfare

### A. Child health care

141. In its concluding observations, the Committee expressed concern about the high infant and under-5 mortality rates, mostly from preventable causes such as inadequate drinking water and sanitation. Furthermore, it raised concern about the high incidence of malaria as well as the high number of malnourished, severely stunted and underweight children. Another area of concern was with the regional disparities in the provision of health services, and sanitation facilities. It recommended that the State party:

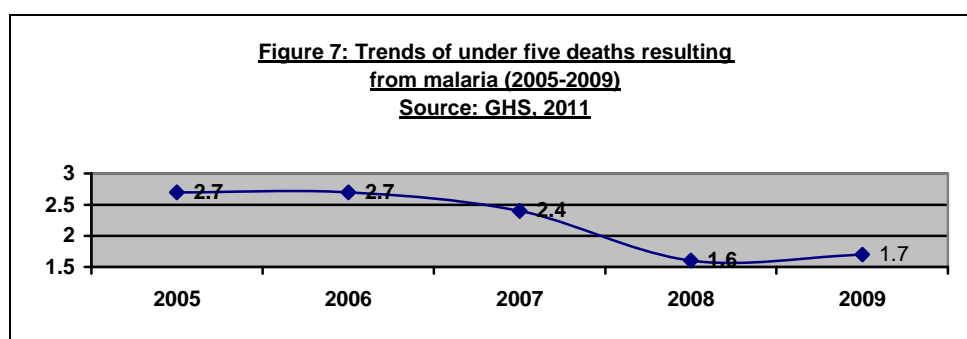
- Undertake all necessary measures to reduce mortality rates by improving prenatal care and preventing communicable diseases
- Allocate more financial resources to child health, nutrition and access to safe drinking water and sanitation facilities
- Continue to combat malaria and address environmental causes and strengthen availability of nets and insecticides, especially in areas where malaria is most prevalent and ensure that all children, regardless of economic status, have access to impregnated nets
- Enforce the law on salt iodation, which is the Food and Drugs (Amendment) Act, 1996 (Act 523)
- Continue to encourage exclusive breastfeeding for six months with appropriate introduction of complimentary feeding.

142. During the reporting period, the Ghana Health Service has continued to work actively on the issues raised by the Committee. For instance, mortality rates in those under 5 years, infants and newborns have all reduced between 2003 and 2008 (DHS, 2008). The reduction in mortality rates was due to renewed efforts to increase access to essential preventive and curative services. Strategies such as the yearly commemoration of child health promotion weeks, maternal and child health campaigns as well as the High Impact Rapid Delivery approach have contributed to this reduction.

143. In line with the Committee's recommendation to continue to combat malaria and address environmental causes and strengthen availability of nets and insecticides, the State party has made remarkable improvements. Evidence abound that under-5 malaria case fatality has declined steadily over the review period (fig. 6).

Figure 7

#### Trends of under-5 deaths resulting from malaria (2005-2009)



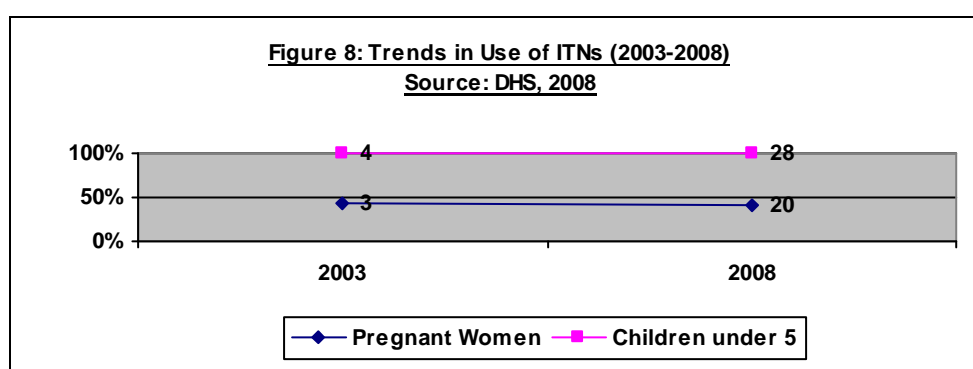
Source: GHS, 2011.

144. The 2008 Demographic and Health Survey shows significant increases in the proportion of children under 5 years and pregnant women aged 15-49 who use insecticide-treated nets (ITNs). One third of households in Ghana now have at least one insecticide-treated mosquito net compared with only 3 per cent of households in 2003. Overall, 28 per cent of children under 5, and 20 per cent of pregnant women aged 15-49 sleep under an ITN, an improvement on what had been reported in the 2003 report (fig. 7). The distribution of insecticide-treated bednets to children at no cost has greatly improved bednet ownership over the years. Indoor residual spraying has also been introduced and applied to complement efforts to reduce malaria. Ghana has recently benefited from the affordable medicines for malaria facility, greatly reducing the cost of malaria treatment.

145. The introduction of malaria-free zones in communities has also contributed to some decline in malaria cases in the country.

Figure 8

**Trends in use of ITNs (2003-2008)**



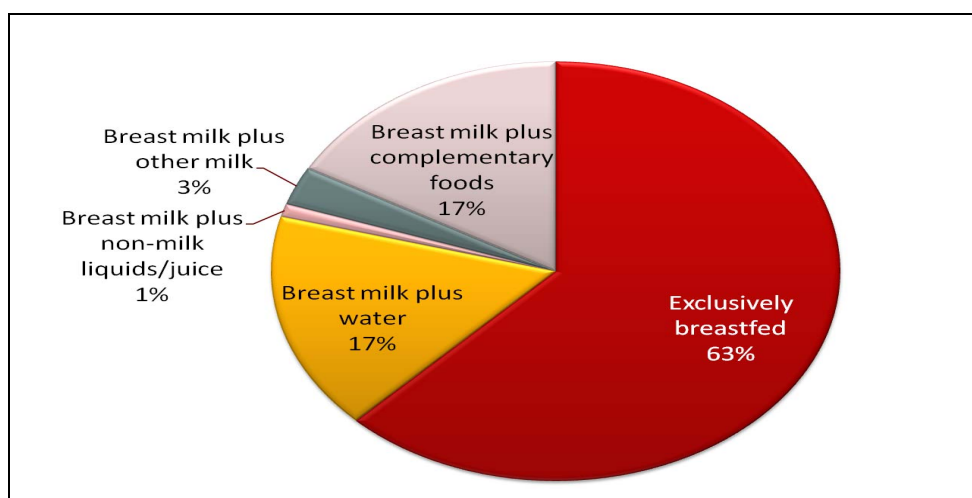
Source: DHS, 2011.

146. In spite of the marked improvements in the fight against malaria, it still remains a public health concern that needs to be tackled seriously to further reduce child morbidity and mortality.

147. During the reporting period, the Ghana Health Service intensified its awareness-raising and programme interventions on breastfeeding. Results of the 2008 Demographic and Health Survey indicate an impressive improvement in exclusive breastfeeding (fig. 8).



Figure 9  
Breastfeeding status under 6 months



Source: DHS 2008.

148. The Committee also raised some concerns about the high incidence of teenage pregnancies, the inadequate reproductive health services and the lack of mental health services for adolescents. The State party was urged to improve and strengthen its health-care services for adolescents focusing on reproductive and mental health programmes as well as adolescent-sensitive mental health counselling services and make them known and accessible to adolescents. The Committee also recommended the State party to expedite action to pass the Mental Health Bill into an Act. In compliance with the concluding observations of the Committee, the Government of Ghana has taken all necessary steps to improve adolescent reproductive health. According to the Ghana Health Service, there has been remarkable improvement in adolescent health-care services in Ghana, with focus on adolescent reproductive and mental health issues. The current adolescent reproductive health programme has the under-mentioned as its strategic objectives:

- Improve access to appropriate health information by adolescents and young people
- Improve access and utilization of quality health services by adolescents and young people
- Enhance social, legal and cultural environment for the health of adolescents and young people
- Improve community participation (adolescents, parents, community leaders, traditional and religious leaders, etc.) in adolescents and young people's health programme implementation to increase the demand and utilization of services.

149. Improve the management for adolescents and young people's health programmes including resource mobilization.

## B. HIV/AIDS and other sexually transmitted infections

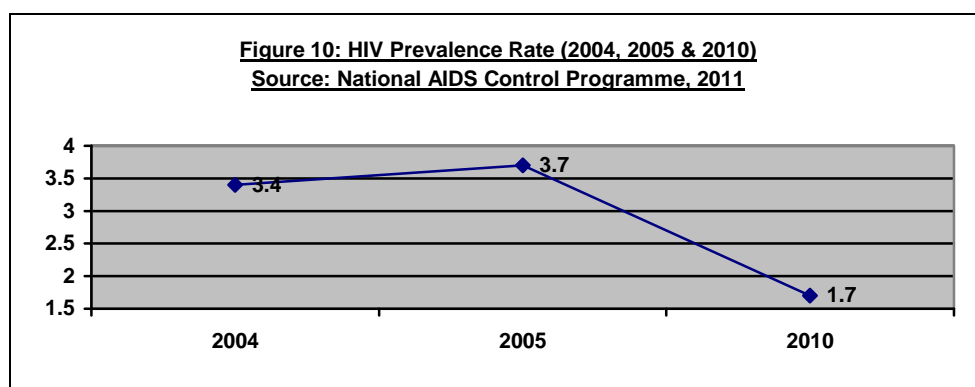
150. As regards HIV/AIDS prevalence in Ghana, the Committee felt it was still high, especially among women in their childbearing years, compounded by inappropriate traditional practices, stigmatization and lack of knowledge about prevention methods. It also mentioned the limited number of HIV/AIDS-infected children and mothers with

limited access to antiretroviral medication and testing. The State party was urged to strengthen its efforts in combating the spread and effects of HIV/AIDS through training of professionals, organization of education campaigns on prevention, improvement of the Prevention of Mother-to-Child Transmission (PMCT) programmes, provision of free and universal antiretroviral medication and improvement of protection and support for AIDS orphans.

151. During the reporting period, much work has been done to reduce the prevalence rate of HIV/AIDS in Ghana, and this is reflected in the current prevalence rate of 1.7, which is the lowest in West Africa (fig. 9). The awareness rate in Ghana is very high but there is still a significant gap between level of awareness and behavioural change and efforts are being intensified to bridge the gap.

Figure 10

**HIV prevalence rate (2004, 2005 and 2010)**



Source: National AIDS Control Programme, 2011.

152. According to the 2008 Demographic and Health Survey, almost all of the women and men in Ghana have heard of AIDS. However, knowledge of HIV prevention methods is somewhat lower. Sixty-nine per cent of women aged 15-49 and 77 per cent of men aged 15-49 know that HIV can be prevented by using condoms and by limiting sex to one faithful partner. Only 25 per cent of women and 33 per cent of men aged 15-49 have comprehensive knowledge about HIV. In Ghana, knowledge of prevention increases with increasing education and wealth (DHS, 2008).

153. A National HIV/AIDS and Sexually Transmitted Infection (STI) Policy, a Strategic Framework as well as a Five-Year Strategic Plan of Work (2006-2010) have also been developed to guide national response to HIV/AIDS.

154. Six centres where children exposed to HIV can be tested within six weeks of birth have been established and polymerase chain reaction machines have been procured and installed to serve the purpose.

155. PMCT programmes have received a major boost with about 1,174 centres now offering PMCT services provided to pregnant women. According to the Ghana Health Service, there are 150 centres providing antiretroviral therapy (ART) to all persons (including children) in need of ART. A total of 2,645 children have been provided with ART within the reporting period.

156. In order to improve efficiency in service delivery, some paediatricians and other child health service providers have been trained to provide expert services to children living with HIV and AIDS. Other health service providers had been trained in early infant diagnosis of HIV and AIDS.

Table 7.1  
HIV information on children (2005-2010)

Indicator	2005	2006	2007	2008	2009	2010
HIV-related deaths among children	3 245	3 278	2 936	2 816	2 566	2 276
Children infected by HIV and AIDS	15 011	18 116	21 828	26 133	25 666	25 756
Children on antiretroviral therapy	119	122	308	450	722	894

Source: GHS, 2011.

### 1. Other sexually transmitted infections among adolescents

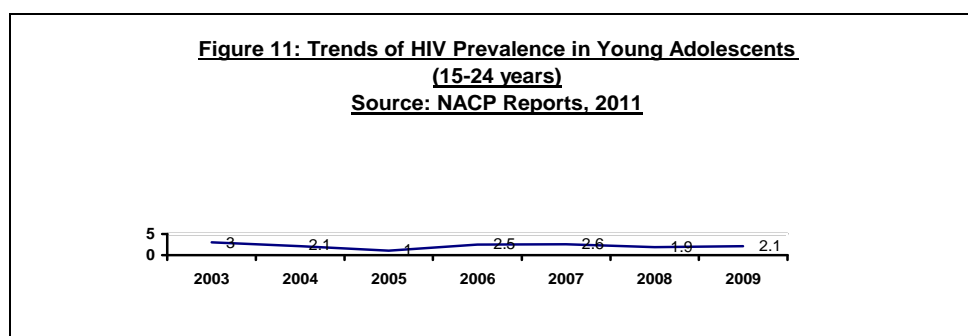
157. Sexually transmitted infections reported among young people include candidiasis, gonorrhoea, chlamydia, herpes, warts and syphilis as a proxy indicates.

### 2. HIV prevalence among pregnant youth 15-24 years

158. HIV prevalence among pregnant youth has risen slightly from 1.9 in 2008 to 2.1 in 2009, after dropping from 2.6 in 2007 according to the National AIDS Control Programme reports (fig. 13).

Figure 11

#### Trends of HIV prevalence in young adolescents (15-24 years)



Source: NACP Reports, 2011.

## C. Promotion of adolescent health

159. The Ghana Health Service has an adolescent health and development programme in place as an integral part of health-service delivery. The programme was instituted in 1996 and since then it has been integrated into service delivery but has been slow. The goal of the programme is to have well-informed adolescents and young people adopting healthy lifestyles physically and psychologically and supported by responsive health and related sectors.

160. The programme focuses on pre-adolescents (5-9 years), adolescents (10-19 years) and young adults (20-24 years) as its primary targets. It also has a secondary target, this

comprises parents/guardians, teachers, health workers, and a tertiary target group of politicians, policymakers, opinion leaders, religious leaders and traditional rulers.

161. Since the inception of the programme, many young people in Ghana have benefited from a full range of health services which are promotive, preventive, curative and rehabilitative. Adolescent behavioural and fertility indicators available show that there is some significant achievement in the programme as indicated in table 7.3.

Table 7.3

**Fertility indicators**

<i>Indicator</i>	<i>1998</i>	<i>2003</i>	<i>2008</i>
Age at first sex	17.6 years	18.3 years	19.2 years
Age at first marriage	19.1 years	19.6 years	20.1 years
Early births (<20 years)	32%	23%	13%
Adolescent birth rate	90/1,000	74/1,000	66/1,000
Adolescent contraceptive use	5%	6.9%	8.5%

*Source:* Demographic and Health Survey (DHS) reports.

**1. Adolescent pregnancies**

162. Community and institutional-based reports indicate adolescent pregnancy is still a major problem despite the slow pace of decrease in terms of proportion and absolute numbers. From a percentage of 32 in 1998, adolescent pregnancies dropped to 23 per cent in 2003 and further to 13 per cent in 2008 as seen in table 7.3 (GSS, 2008). Currently institutional-based data indicate 1 in 8 pregnancies are to an adolescent.

**2. Drug abuse**

163. The Committee expressed concern about the involvement of many young people, especially teenagers, in drugs. It urged that measures be taken to prevent and end alcohol and drug abuse among children and to support recovery and social reintegration programmes for child victims of drug and alcohol abuse. The Committee also recommended that the State party seek technical cooperation from bodies such as UNICEF and the World Health Organization (WHO).

164. Currently it is believed that some children at the senior high-school level use drugs such as Indian hemp. It has also been reported that about 90 per cent of cases at the Accra Psychiatric Hospital annually, are drug abuse-related, and the majority of the cases are young people. These reports provide enough evidence to suggest that drug abuse is fast gaining ground in Ghana among the youth.

165. In conformity with the recommendation on drug abuse, the Government of Ghana has taken a stern stand on drug abuse and illicit drugs, and investigates all cases involving drugs and is quick to impose sanctions on any person found in conflict with the law.

166. The Ministry of Women and Children's Affairs through the Department of Children and that of Women has on a number of occasions carried out community awareness-raising programmes throughout the country. The Narcotic Control Board, which is the main body mandated to deal with issues related to drugs and controlled substances, also carries out public campaigns to stem the flow of drugs into the country.

## D. Child survival and development

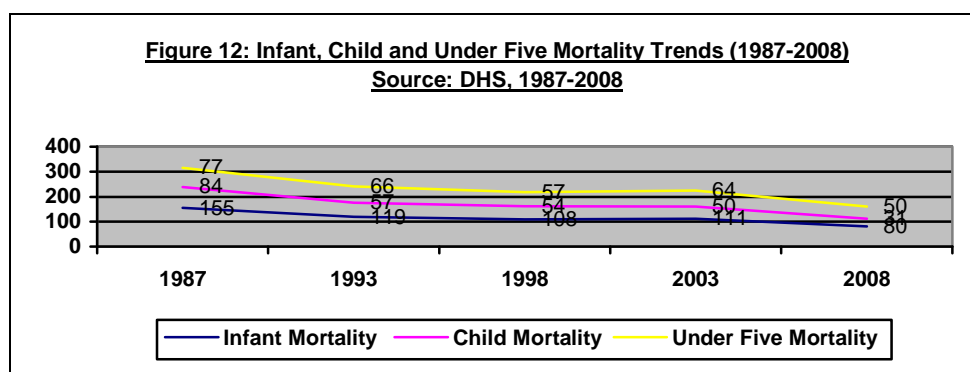
167. Survival and development continues to be an important focus area of Government, and the Ghana Health Service has strengthened its initiatives to improve the health of children. The child health programme has activities aimed at promoting and maintaining the optimal growth and development of children. Children above 5 years are covered under the school health and adolescent health programmes. The package of services targeted at children below 5 years includes – growth promotion (monitoring of weight for age and counselling on appropriate feeding practices), immunization against childhood diseases, vitamin A supplementation among others. According to the Service, awareness creation programmes on vitamin A supplementation, salt iodization and usage, integrated approach to anaemia control among mothers and children and malaria control have all been intensified, whilst other efforts on accelerated delivery of proven cost-effective interventions to reduce child mortality have also been strengthened.

### 1. Child and maternal mortalities

168. Most of the proxy indicators on all the services targeted at child survival have improved over the last five years. As regards infants, children, under-5 and maternal mortalities, it should be noted that the State party made some progress in reducing the rates as seen in figures 10 and 11.

Figure 12

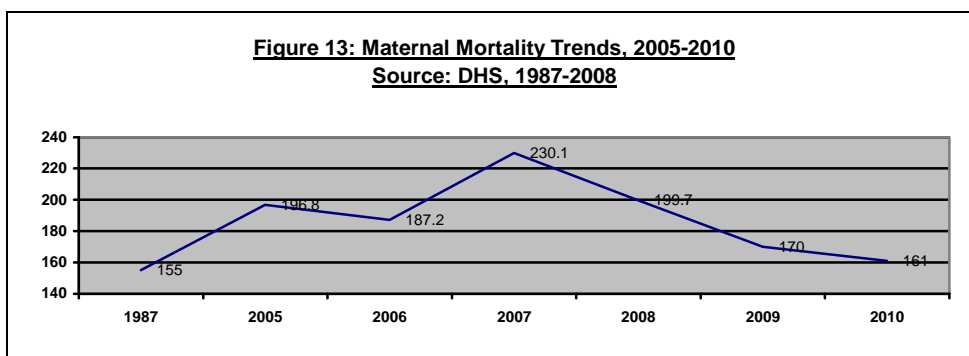
#### Infant, child and under-5 mortality trends (1987-2008)



Source: DHS, 1987-2008.

169. In spite of the gains made in under-5 mortality, it is difficult to predict at this stage if Ghana will be able to achieve Millennium Development Goal 4 of a two-thirds reduction in under-5 mortality by 2015.

Figure 13  
**Maternal mortality trends (2005-2010)**



Source: DHS, 1987-2008.

170. According to the Ghana Health Service, the main causes of maternal mortality within the reporting period were haemorrhage, infections, abortions, hypertensive disorders, and obstructed labour.

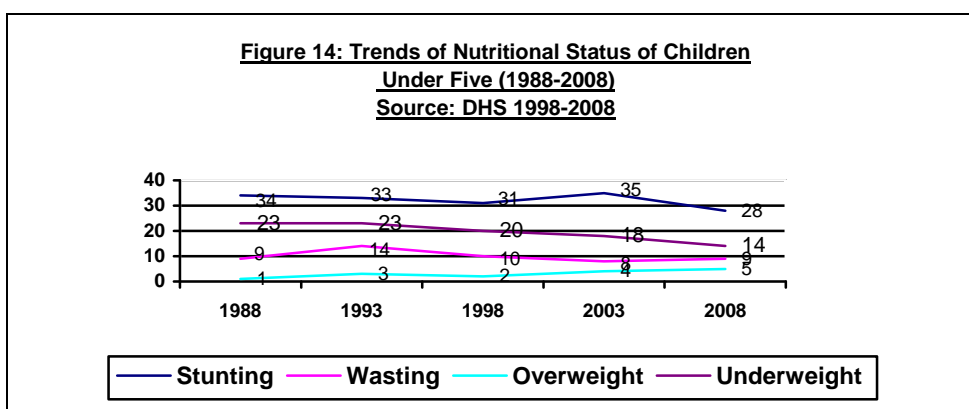
## 2. Childhood immunizations

171. Other significant gains in child health indicators are increases in the proportion of children aged 12-23 months who received all their immunizations on the Expanded Programme on Immunization, which rose from 47 per cent in 1988 to 69 per cent in 2003 and 79 per cent in 2008 (DHS, 2008). It should be noted that there are still important regional and rural/urban disparities according to the survey results.

## 3. Nutritional status of children under 5

172. The 2008 Demographic and Health Survey results indicate that in terms of nutrition, the rates of underweight children continue to be high, with 14 per cent of all Ghanaian children being underweight or too thin for their age. Five per cent are obese or overweight, whilst 28 per cent of children under 5 are stunted or too short for their age. Stunting is more common in rural areas (32 per cent) than urban areas (21 per cent) in Ghana, ranging from 14 per cent in the Greater Accra Region to 38 per cent in the Eastern Region. Wasting (too thin for height), which is a sign of acute malnutrition, is less common (9 per cent) in Ghana (fig. 12).

Figure 14  
**Trends of nutritional status of children under 5 (1988-2008)**



Source: DHS, 1998-2008.

173. The School Feeding Programme, which has been reviewed and improved by Government, has been one of the major steps taken by Government to improve the nutritional status of children. Other measures taken include promotion of improved early childhood nutrition through the promotion of improved feeding practices (exclusive breastfeeding and complementary feeding) for young children 0-23 months old through:

- Behaviour change communication programmes
- Community-based growth promotion programmes
- Improved management of acute undernutrition.

174. In addition, there are specific programmes to control micronutrient deficiencies through the:

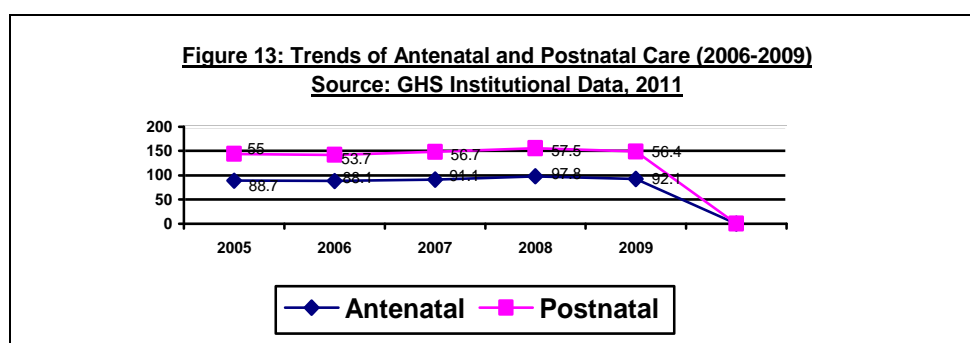
- Promotion of universal consumption of iodized salt for the control of iodine deficiency
- Implementation of large-scale vitamin A supplementation programmes for children 6-59 months old and mothers in the early post-partum period
- Promotion of improvement of iron+folate supplementation for the control of iron deficiency and anaemia during pregnancy and the post-partum period.

#### 4. Postnatal and antenatal care

175. During the period under review, the State party improved its services on antenatal and postnatal care, which is reflected in the coverage for 2005-2008 as seen in figure 15.

Figure 15

#### Trends of antenatal and postnatal care (2006-2009)



Source: GHS Institutional Data, 2011.

#### 5. Tuberculosis (particularly among special groups of children at high risk)

176. Childhood tuberculosis (TB) constitutes an integral part of the National Tuberculosis Strategic Plan (2009-2013). Between 2008 and 2010, a total number of 1,899 cases of tuberculosis were recorded among children aged 0-14 years as indicated in table 7.2.

Table 7.4  
**Reported TB cases among children (0-14 yrs)**

<i>Year</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
2008	217	135	<b>352</b>
2009	358	291	<b>649</b>
2010	491	407	<b>898</b>
<b>Total</b>	<b>1 066</b>	<b>833</b>	<b>1 899</b>

*Source:* TB Control Programme, GHS, 2011.

177. Since the implementation of the National TB Strategic Plan, which covers childhood TB, the following have been carried out:

- Establishment of a Paediatrician Working Group by the National TB Control Programme
- Development of training manuals
- Drafting of a multi-year plan to guide phase-in implementation countrywide
- Revision of TB recording and reporting forms to document TB case findings and treatment outcomes in line with WHO recommendations
- Introduction of Mantoux/PPD test and QuantiFERON to help in the diagnosis of TB in children by the end of 2011
- Support for health facilities with X-ray films/equipment for use in diagnosing TB in children at minimum or no cost
- Conduct baseline assessment of institutions/organizations undertaking contact and household investigation to allow for evaluation of active contact tracing of children.

178. Formulation of special paediatric drug formulations for treating childhood TB was imported. The National Tuberculosis Control Programme faces serious budget insufficiencies in its operations. Other challenges and difficulties are the extremely high cost of procuring diagnostics, drugs and follow-up treatment, which is threatening the whole childhood TB programme.

## **E. Children with disabilities**

179. The laws of Ghana provide for the welfare of persons with disabilities in the 1992 Constitution and the Children's Act. During the period under review, the Persons with Disability Act, 2006 (Act 715) was passed. The law makes provisions for persons with disabilities with accessibility to public places, employment and transportation, along with other rights such as the family and social life, education for children with disability and their protection against exploitation and discrimination. The law also seeks the creation of person-with-disability desks at employment centres nationwide and established the National Council on Persons with Disability in 2007 to oversee the implementation of some of the national programmes for persons with disabilities.

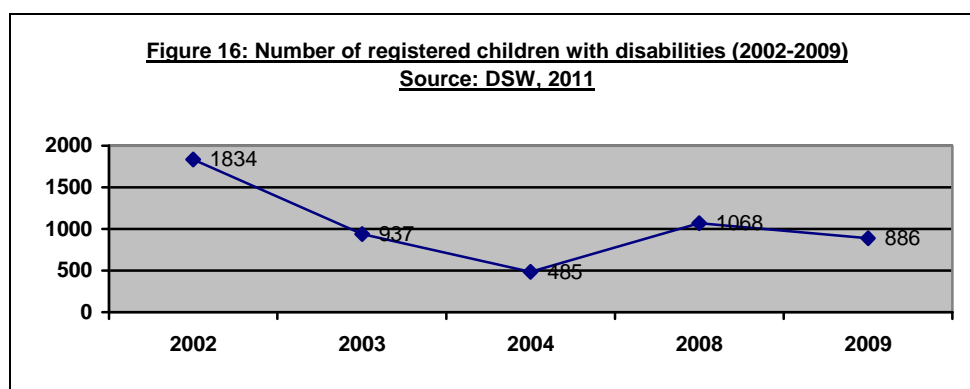
180. According to the Department of Social Welfare, the most prevalent child disabilities in Ghana are mobility, sight, speech and hearing difficulties. The records of the Department indicate a reduction in the number of registered children with disabilities from 1,834 in



2002 to 937 in 2003, and 485 in 2004 and 1,068 in 2008, coming down to 886 in 2009 as presented in figure 16.

Figure 16

**Number of registered children with disabilities (2002-2009)**



Source: DSW, 2011.

181. In terms of education, the Ghana Education Service runs a number of special schools to meet the educational needs of children with hearing and learning difficulties. Some private institutions such as the New Horizon Basic School in Accra also exist to assist Government to provide learning opportunities for children with special needs, such as children with autism.

182. As part of efforts aimed at improving the welfare of children with disabilities and other vulnerable children, Government has directed through the Ministry of Local Government and Rural Development to allocate about 5 per cent of the District Assembly Common Fund to support persons with disabilities and other vulnerable children in every district.

183. Even though legislation and the policy environment provide the framework for protecting and guaranteeing the rights of the children with disabilities, there is still much more to be done to change the attitudes of parents and society towards recognizing the child with disabilities as an individual with equal rights.

## **F. Health and health services**

184. The Ministry of Health is the main government body that sees to the health needs of every Ghanaian. It exists to ensure equitable provision and access to health-care delivery and implementation of public health programmes in Ghana. As stated in the previous report, articles 28 (4) and 30 of the 1992 Constitution provide for medical attention to all Ghanaian children. Similar provisions are enshrined in section 8 of the Children's Act which also emphasizes that no person shall deprive a child access to health, medical attention or any other thing required for his/her healthy development.

## **G. Social security and childcare services and facilities**

### **1. Social security**

185. The extended family for many years has been the traditional system in Ghanaian communities providing social and economic security to various family members in times of need. This system has an in-built safety net, which provides for the care of children within

the family. The system rests on a customary assumption that each person within the family is another's keeper; everyone is helped by another person and it goes round in circles to help other family members in the future. The system encourages well-to-do members to take care of the less endowed within the family. Among certain ethnic groups in Ghana, it is the responsibility of uncles to take care of their nephews and nieces, in the absence of their biological parents or in situations of financial difficulties of parents.

186. The emergence of modern systems through social change and the promotion of economic growth, and other pressures from urbanization have contributed to a gradual decline of the extended family system. There is a gradual shift away from primary reliance on the extended family towards dependence on more semi-formally institutionalized social security systems. Most of the security systems in place are not for children specifically, however, since their parents benefit, they have indirect effects on the children (including those born out of wedlock). The Social Security and National Insurance Trust is an example of such a system which is controlled by Government.

187. At present children benefit from subsidies from the National Health Insurance, which take the form of waivers on premiums if their parents are registered.

188. Other social security systems are offered by other bodies such as faith-based organizations. These have also been very supportive, building various support networks around the country. They are fast becoming a social security system in the country, and many children benefit from the services they render. FBOs provide support to people in need of support, especially children from poverty-stricken homes. Many children are provided support such as educational, health care, and other areas of development.

189. The Maintenance and Custody, Child Subsistence Grant, Alternative Care and Child Rights Protection Programmes, which are run by the Department of Social Welfare are designed to protect and ensure social security for children. These social services and welfare arrangements are available to children who require them and according to the Department, approximately 3,000 cases are handled each year.

## **2. Childcare services and facilities**

190. Parents in Ghana have access to childcare services aimed at childminding whilst parents are engaged in other economic and social obligations. These services are provided by both the public and private operators but are supervised by the Department of Social Welfare.

191. Sections 115–120 of the Children's Act outline the procedures of application to run a childcare centre. The Department of Social Welfare has the mandate to enforce the guidelines for the operation of the centres and to monitor their operations.

## **H. Standard of living**

192. In its concluding observations the Committee noted with concern the number of children exposed to poverty situations. This contravenes the right to an adequate standard of living as enshrined in article 27 of the Convention. The Committee recommended the reinforcement of efforts to provide support and material assistance, with particular focus on the most marginalized and disadvantaged families and to guarantee the right of children to an adequate standard of living.

193. In compliance with the Committee's recommendations, the State party put in place certain measures, including the following to alleviate poverty and improve the standard of living of children exposed to poverty:

- Social Security and National Insurance Trust coverage has been expanded to include the informal sector
- Insurance enterprises are developing new insurance schemes that guarantee children's education in the event of death of parents or the loss of their source of income in the future
- Capitation Grant has been introduced to improve school enrolment and retention in line with the Millennium Development Goals. Public schools are given grants to cover tuition and other school levies
- Free antenatal and postnatal services are provided for pregnant and other women in need of maternal services
- A School Feeding Programme has been introduced to provide meals for children in the basic schools
- LEAP has been initiated aimed at supporting the core poor with conditional cash grants to support the upkeep of their children.

194. The National Health Insurance Scheme is in place to secure the implementation of the National Health Insurance Policy that ensures access to basic health-care services to all residents of Ghana. There is sufficient evidence to show that even though the above-mentioned measures have contributed to a large extent in reducing financial constraints on many poor families and communities, the living standards of most Ghanaian children are still low.

## I. Water and sanitation

### 1. Water

195. Access to safe drinking water is an important determinant of children's health and standard of living. Ghana made remarkable improvements in the provision and access of household safe water within the reporting period. According to the GLSS 5 (GSS, 2008), 40 per cent of households in Ghana now have access to pipe-borne water, whilst about 41 per cent also use water from the well, and 16 per cent depend on natural sources for drinking water. The remaining 4 per cent of households have access to other sources such as water tanker service, water vendor and sachet/bottled water.

196. In the urban areas, about 73 per cent of households have access to pipe-borne water but in most cases, the source is from outside the house. A sizeable proportion of households in urban areas (16 per cent) have access to well water, while 11 per cent have access to natural and other sources (GLSS 5).

197. In rural areas, most households (59 per cent) obtain water from a well or natural sources (26 per cent), whilst about half of rural households (49 per cent) use borehole wells as source of drinking water. More than four fifths (84 per cent) of households in Accra have access to pipe-borne water, while only 6 per cent of households in rural savannah areas have access to pipe-borne water.

Table 7.9

#### Households by main source of water supply for drinking and locality (percentage)

<i>Source of water supply</i>	<i>Urban Areas</i>	<i>Rural Areas</i>	<i>Ghana</i>
Pipe-borne	73.1	14.0	39.5
Indoor plumbing	8.5	0.2	3.8
Inside standpipe	21.9	2.1	10.7

<i>Source of water supply</i>	<i>Urban Areas</i>	<i>Rural Areas</i>	<i>Ghana</i>
Pipe in neighbouring household	19.7	1.4	9.3
Private outside standpipe/tap	7.4	3.2	5.0
Public standpipe	15.6	7.0	10.7
Well	16.0	59.4	40.7
Borehole	6.1	48.9	30.4
Protected well	8.0	4.9	6.2
Unprotected well	2.0	5.7	4.1
Natural sources	2.5	25.7	15.7
River/stream	1.8	18.7	11.4
Rain water/spring	0.4	1.0	0.7
Dugout/pond/lake/dam	0.3	6.0	3.5
Other	8.4	0.9	4.1
Water truck/tanker service	0.9	0.0	0.4
Water vendor	3.4	0.5	1.8
Sachet/bottled water	4.0	0.2	1.8
Other	0.0	0.1	0.1
All	100.0	100.0	100.0

*Source:* GLSS 5, 2008.

198. Lack or limited access to safe water sources has negative effects on children. In some communities, people are compelled to rely on open water sources which are polluted. Women and children, who are the potters of water, have to walk long distances in search of water, and this tends to affect children's health and education.

## 2. Toilet facilities

199. The availability and access to good toilet facilities have implications on sanitation and child development. They prevent children from contracting communicable diseases and also have effects on children's education and social welfare. At present, many people in Ghana do not have access to toilet facilities and this has implications for children. According to the GLSS 5, about a fifth of households in Ghana do not have any toilet facility, while 24 per cent use public toilets. Even though one in 10 households use flush toilets and another one in 10 (12 per cent) use Kumasi ventilated improved pits (KVIPs).

200. The GLSS 5 report also indicates that 44 per cent and 58 per cent of households in rural coastal and rural forest areas, respectively, use pit latrines, while 39 per cent of households in urban areas use public toilets. Thirty per cent of rural households, mostly in the rural savannah (69 per cent) and rural coastal (27 per cent), have no toilet facility. In areas where toilet facilities are not available, children resort to the use of bush, rocks and beaches as places of convenience and these have their attendant problems and dangers.

Table 7.9.1

### Households by locality and type of toilet used by the household (percentage)

<i>Utility</i>	<i>Urban Areas</i>	<i>Rural Areas</i>	<i>Ghana</i>
Flush toilet	22.2	1.1	10.2
Pit latrine	15.7	43.5	31.5
KVIP	14.4	9.5	11.7

<i>Utility</i>	<i>Urban Areas</i>	<i>Rural Areas</i>	<i>Ghana</i>
Pan/bucket	2.6	0.3	1.3
Public toilet (flush/bucket/KVIP)	38.7	13.6	24.4
Toilet in another house	1.0	1.7	1.4
No toilet facility (bush, beach)	5.3	30.2	19.4
Other	0.0	0.2	0.1
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>

*Source:* GLSS 5 (2008).

201. The Government through the Metropolitan, Municipal and District Assemblies has embarked on many projects to improve sanitation in many parts of the country. Partnerships and alliances with development partners have also contributed a great deal in addressing sanitation in various communities in Ghana.

## VIII. Education, leisure and cultural activities

### A. Introduction

202. In its concluding observations, the Committee acknowledged Ghana's efforts in improving education by introducing the policy of the free compulsory and universal education system by introducing, inter alia, the Capitation Grant. The Committee also commended Ghana for introducing School Feeding Programmes in three regions of northern Ghana but was concerned about the persisting gender and geographical disparities with regard to access to and quality of education.

203. The Committee urged that the State party:

- Increase and efficiently use public expenditure in education
- Improve access to vocational training and informal education for vulnerable groups, including street children, orphans, children with disabilities and child workers
- Increase enrolment in primary and secondary education and reduce social, economic, regional and gender disparities in the access and full enjoyment of the right to education
- Extend the School Feeding Programme to other regions.

204. In line with the Committee's observations, Government has taken pragmatic steps to improve the quality of education through infrastructural development. The Government of Ghana has instituted measures at eliminating schools under trees over the medium term. As at the end of 2011, 1,226 school projects were at various stages of completion. By the end of 2011, 21 Science Resource Centres in seven Regions had been completed and handed over whilst 57 are at various stages of completion. Additionally, 435 projects made up of 380 six-unit classroom blocks and 55 two-storey dormitory blocks were started and are at various stages of completion.

205. A total amount of 36.8 million Ghanaian cedis was released by GETFUND for the construction of lecture theatres, staff accommodation, library blocks, halls of residence, computer laboratories, auditoriums and agricultural engineering workshops which are at various stages of completion.

## **B. Education, training and guidance**

### **Free basic education**

206. The 1992 Republican Constitution makes provision for free, compulsory and accessible basic education, while secondary education in its various forms including technical and vocational is to be made generally available, accessible and progressively free. Section 8 of the Children's Act also makes provisions on children's access to education, and also includes regulations on formal education and apprenticeship in the informal sector.

207. In 2007, the Government initiated a National Education Reform Programme aimed at overhauling the education sector to meet current developmental needs of the country. This programme led to the passage of the 2008 Education Act (Act 778). Ghana's educational system is structured in the new Act as:

- Basic education – basic education now includes two years of kindergarten, six years of primary school and three years of junior high school. Basic education continues to be free and compulsory for all children in the country
- Second cycle education – four years of senior high school or technical, vocational, business and agricultural education, or appropriate apprenticeship scheme (Parliament in 2009 reverted the number of years back to three)
- Tertiary education – not less than one year provided in any institution of higher learning (university, university college, polytechnic or college of education)
- Non-formal education – provision for non-formal and life-long education
- Distance education – each level of education to include distance-learning programmes/opportunities.

208. The Act makes provision for District Assemblies to support children of parents who cannot afford the cost of basic education with a poverty allowance. In the spirit of decentralization, the responsibility for the management of basic and second cycle education has been entrusted to the Assemblies.

209. To improve physical access to education by all children, the Act also provides that school facilities be designed to meet the needs of children with disabilities and with special educational needs.

210. The Act calls for the establishment of a National Teaching Council with wide-ranging powers regarding the professional development, quality, registration and licensing of teachers; National Council for Curriculum and Assessment with overall responsibility for the national curriculum and student assessment at the first and second cycle schools; and a National Inspection Board, an independent agency of the Ministry of Education, to set, enforce and monitor a wide range of academic, infrastructure and education standards for public and private schools with routine inspection of schools.

## **C. Policies and programmes**

211. Since 2003 a number of subsector specific policies have been developed. These collectively define many aspects of education delivery. A number of them have been enumerated in this section.

## **1. Science, technology in innovations**

212. The purpose of the science, technology and innovation (STI) policies is to strengthen the teaching and learning of science, technology and innovations at all levels of the system so as to produce a critical mass of human resource that will stimulate Ghana's technological capacity.

## **2. Information and communications technology (ICT) in education policy, 2006**

213. The draft ICT in Education Policy is to ensure that there are adequate opportunities for pupils and students in the formal and non-formal sectors to develop skills that will enable them to benefit fully from ICTs. It focuses on an interlinked tripartite approach: ICT as a management tool within institutions at all levels, ICT skills development for all and ICT as a pedagogical tool, particularly in senior high schools.

## **3. Technical and Vocational Education and Training (TVET) Policy**

214. The thrust of the TVET policy is to integrate the various types of formal and non-formal TVET, from the elementary to the tertiary levels, into a single comprehensive demand-driven system, under a single umbrella management council for TVET.

## **4. Inclusive education and special educational needs**

215. The delivery of education to children and young people with disabilities and special educational needs is informed by three guiding principles:

- The right to education
- The right to equality of educational opportunities
- The right and obligation to be included in and participate fully in the affairs of society.

## **5. Tertiary Education Policy**

216. The Tertiary Education Policy is to promote quality, relevance and excellence in tertiary education, to facilitate the development of world-class human resources and to support national development.

## **6. Pre-tertiary teacher professional development and management**

217. The pre-tertiary teacher development and management policy is to provide standards regarding the professional development, registration and licensing of teachers. The draft policy recognizes the importance of continuous professional development via school-based and distance learning and includes strategies to achieve these goals.

## **7. Capitation Grant, 2005**

218. The Ministry of Education, Science and Sports, now Ministry of Education, in 2005 introduced the Capitation Grant scheme as a component of the major component of Ghana's Free Compulsory Universal Basic Education Policy. The introduction of the Grant abolished the payment of school fees for pupils in public basic schools. At the beginning of implementation of the Capitation Grant Scheme in every basic school a child received an amount of three cedis (¢3, about US\$ 2). This amount is to empower the schools to effectively use financial resources to plan and carry out school quality improvement activities. The grant is therefore expected to serve as an opportunity to help build school level capacity to effectively implement fiscal decentralization – which is a long-term goal of the Government of Ghana.

219. In 2009, the amount per child was increased by 50 per cent to enable schools to provide additional services for improving teaching and learning. A total annual subsidy of 23.53 million cedis was released as Capitation Grant and all arrears were paid to the schools.

Table 8.1

**Enrolment for Capitation Grant computation, 2009 fiscal year**

Region/District	Amount per Child: ₵3.00 per annum			
	Enrolment			Amount
	Boys	Girls	Total	
Ashanti	460 769	437 033	<b>897 802</b>	269 346
Brong Ahafo	292 535	27 806	<b>563 341</b>	1 690 023
Central	264 905	245 677	<b>51 582</b>	1 531 746
Eastern	289 966	268 461	<b>558 427</b>	1 675 281
Greater Accra	209 992	221 471	<b>431 463</b>	1 294 389
Northern	310 740	264 108	<b>574 848</b>	1 724 544
Upper East	134 378	128 950	<b>263 328</b>	789 984
Upper West	96 536	94 747	<b>191 283</b>	573 849
Volta	253 553	225 116	<b>478 669</b>	1 436 007
Western	279 978	264 203	<b>544 181</b>	1 632 543
<b>Grand Total</b>	<b>2 593 352</b>	<b>2 420 572</b>	<b>5 013 924</b>	<b>15 041 772</b>

Source: Ghana Education Service (GES) 2009.

**8. Free School Uniform and Exercise Book Programme/Policy, 2009**

220. The Free School Uniform and Exercise Book Programme/Policy was initiated in 2009 in fulfilment of the Government's commitment to ensuring that no child is denied access to quality basic education. According to the 2012 State of the Nation Address by the President, 1,258,690 school uniforms and 39,536,199 exercise books were distributed in the 2010-2011 academic year. The introduction of the Programme has helped increase enrolment and retention of children in many needy communities. Concern has, however, been expressed over the absence of clear guidelines for the distribution of the free school uniforms and exercise books.

**9. Ghana School Feeding Programme, 2005**

221. The Ghana School Feeding Programme was introduced in 2005 as a social intervention project to provide one hot nutritious meal to schoolchildren during every schoolday. The long-term goal of the project was to contribute to poverty reduction and food security in the country. The three key objectives are to reduce hunger and malnutrition among schoolchildren; increase school enrolment, attendance and retention; and boost domestic food production.

222. Strategically, the Programme focused on spending about 80 per cent of the feeding cost in the local economy by procuring local foodstuff directly from the farmers in the community. This was expected to increase incomes and lead to wealth creation in rural households and communities. The Programme carried out prudent financial and project management strategies to sustain financial support from key stakeholders and address the irregularities in the distribution of beneficiary schools and pupils through the adoption of the quota system.



223. Audit reports on the School Feeding Programme have revealed several challenges. These include:

- Schools and caterers included in the Programme without following laid-down procedures
- Inadequate programme monitoring due to limited resources
- Programme implementation not guided by operational manual
- Signatories to bank accounts that did not conform to District Assembly Financial Management System
- No clear procedure to obtain enrolment figures used for disbursement of funds
- Inadequate supervision of activities of the Programme secretariat.

224. To bring efficiency and effectiveness, the Government of Ghana is progressively reviewing the School Feeding Programme to meet its objectives. In addition, it is being reorganized as part of the ongoing preparations towards introduction of the next phase of the Programme. As at March 2011, the Programme was feeding 713,590 pupils, and it is hoped that the number will increase to 1,040,000 by the end of 2011.

#### 10. Free mass transit ride for schoolchildren

225. Between 2006 and 2008, a total of 10,697,876 benefited from free mass transportation as indicated in table 8.3. The number of schoolchildren carried by the Metro Mass Transit System fell drastically from 4.3 million in 2007 to less than 500,000 in 2009 in some major towns in the country. The decline is attributed to the breakdown of 120 buses out of a total of 230 buses in 2008. By 2009 the number of buses in operation had declined further.

Table 8.3

#### Trend performance of free mass transportation for schoolchildren in some major towns in Ghana

<i>Towns</i>	<i>2007</i>	<i>2008</i>	<i>2009</i>
Kumasi	703 331	76 462	29 211
Takoradi	954 749	584 889	237 796
Sunyanie	209 085	138 364	102 320
Kaneshi	899 260	241 825	34 305
Tamale	16 025	5 212	2 749
Bolgatanga	15 299	340	20
Swedru	45 963	19 ,919	4 886
Laterbiokoshie	114 429	14 559	0
Tema	397 606	145 583	9 428
Wa	53 194	13 675	8 306
Koforidua	220 740	93 094	28 433
Ho	67 280	10 675	3 557
Adenta corridor	521 871	89 779	15 509
Cape Coast	90 455	18 929	285
Akim Oda	17 634	172	15 103
<b>Total</b>	<b>4 326 921</b>	<b>1 453 498</b>	<b>491 906</b>

*Source:* NDPC, 2010-implementation of the growth and poverty reduction strategy 2006-2009, Annual Progress Report, 2009, pp. 188–189.

## 11. The Education Sector Plan 2010-2020

226. The Education Sector Plan (ESP 2010–2020) spells out the strategies of the Government for the education sector over the next decade. The Plan draws from its four predecessors and upon earlier visionary strategies such as the Free Compulsory Universal Basic Education Policy. It is aimed at ensuring positive and permanent contribution to national development plans and to achieving the international development goals in education. The strategic objectives of the Plan are as follows:

- Improve equitable access to and participation in quality education at all levels
- Bridge gender gap in access to education
- Improve access to quality education for people with disability
- Mainstream issues of population, family life, gender, health, HIV/AIDS/STI, conflicts, fire and road safety, civic responsibility, human rights and environment in the curricula at all levels
- Improve quality of teaching and learning
- Promote science and technical education at all levels
- Strengthen links between tertiary education and industry
- Improve management of education service delivery.

## 12. Early childhood education

227. Government has added two years of kindergarten to basic education. Effective collaboration in the implementation of the Early Childhood Care and Development (ECCD) Policy has resulted in improvement in the enrolment rates at the preschool and kindergarten levels. Currently there is a National ECCD Steering Committee made up of ministries, departments and agencies, NGOs and individuals to ensure the effective implementation of the ECCD Policy. Regional ECCD Steering Committees have been established and trained to ensure effective delivery of ECCD-related services at the regional level. District ECCD Teams have also been established to see to the implementation of the Policy at the District levels.

228. The number of preschools has seen a positive trend in the country. Currently there are 4,535 crèches nationwide. Of this number, 3,739 are run by the Government and 796 by private operators. Table 8.4 indicates the number of children enrolled in preschools for the 2004/2005-2009/2010 academic years. Data from the table indicates that with the exception of 2005/2006 in which the number of boys (95,547) enrolled equalled that of girls (95,547), in all the academic years the total number of boys outnumbers those of girls. Regional distribution of crèches from 2005 to 2010 is presented in the annex to this report.

Table 8.4  
**Preschool enrolment trends (2004/2005-2009/2010)**

<i>Year</i>	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
2004/2005	111 160	106 800	<b>217 960</b>
2005/2006	95 547	95 547	<b>191 094</b>
2006/2007	133 462	51 112	<b>184 578</b>
2007/2008	93 139	91 772	<b>184 911</b>
2008/2009	107 430	105 205	<b>212 635</b>
2009/2010	120 052	118 324	<b>238 376</b>

*Source:* EMIS, MOE 2010.

229. Through coordinated intersectoral collaboration between the education and health sectors, the Ministry of Women and Children's Affairs and the Department of Social Welfare, activities of these institutions are monitored to ensure effective provision of ECCD services. Health officers visit these centres to record growth monitoring of children, while education officers lend support with in-service training for caregivers and teachers in these institutions. The Ministry through the Department of Children has organized training for caregivers on the ECCD Policy, HIV/AIDS and child rights; the Department of Social Welfare provides welfare services and the Department of Children coordination.

### 13. Basic education

230. Even though the education policy in Ghana states that basic education is free, parents and guardians are still made to contribute by paying levies such as Parent-Teacher Association contributions, sports and culture and guidance and counselling.

231. Within the reporting period, there have been substantial increases in enrolments across all levels of basic education (table 8.5). For instance, enrolment in kindergarten increased from 732,969 in 2004/2005 to 1,440,732 in 2009/2010 while that of primary level rose from 2,935,611 in 2004/2005 to 3,308,258 in 2009/2010. At the junior high school level, enrolment jumped from 1,012,258 in 2004/2005 to 1,301,940 in 2009/2010.

Table 8.5

#### Enrolment in kindergarten, primary and junior high school (2004/2005-2009/2010)

Year	Kindergarten			Primary			JHS		
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
2004/2005	369 842	363 127	<b>732 969</b>	1 528 843	1 406 768	<b>2 935 611</b>	549 304	462 954	<b>1 012 258</b>
2005/2006	528 257	504 237	<b>1 032 494</b>	1 612 497	1 518 078	<b>3 130 575</b>	592 695	491 417	<b>1 084 112</b>
2006/2007	552 995	551 784	<b>1 104 779</b>	1 732 162	1 633 600	<b>3 365 762</b>	605 086	527 232	<b>1 132 318</b>
2007/2008	632 421	626 062	<b>1 258 483</b>	1 860 289	1 755 734	<b>3 616 023</b>	652 146	517 864	<b>1 224 010</b>
2008/2009	671 822	666 632	<b>1 338 454</b>	1 908 232	1 802 415	<b>3 710 647</b>	685 099	600 478	<b>1 285 577</b>
2009/2010	723 833	716 899	<b>1 440 732</b>	1 953 359	1 855 899	<b>3 809 258</b>	690 664	611 276	<b>1 301 940</b>

Source: MOE, EMIS, 2004-2010.

232. The increases in enrolment are largely attributed to abolition of school fees and introduction of pro-poor policies such as the Capitation Grant Scheme, School Feeding Programme, free uniform and exercise books programme and the active implementation of activities to promote girls education, which have together removed some of the barriers to enrolment and encouraged participation and attendance. These measures have particularly benefited the deprived districts and the poor.

### 14. Secondary high education

233. Within the reporting period efforts have been put in place to improve access to secondary and vocational education in Ghana. For instance, while the number of public secondary schools has increased from 485 in 2005/2006 to 497 in 2009/2010, enrolment has also increased from 338,519 in 2005/2006 to 537,332 in 2009/2010 as indicated in the annex.

### 15. Technical and vocational education and training

234. Government has also introduced a variety of TVETs to ensure that children have the opportunity to develop their full potential. These institutions are located in various regions

to ensure easy accessibility. The number of TVET institutions more than doubled in 2009/2010 to 284 compared to 128 in 2004/2005 (table 8.6).

Table 8.6

**Number of TVET institutions by type (2004/2005-2009/2010)**

Year	Private			Total
	Public	Registered	Not registered	
2005/2006	42	66	20	128
2006/2007	129	94	35	258
2007/2008	131	97	45	273
2008/2009	100	98	38	236
2009/2010	130	123	31	284

Source: MOE, EMIS, 2004-2010.

235. Enrolment also improved from 27,604 in 2004/2005 to 56,965 in 2009/2010 (refer to annex VII) within the reporting period. Even though TVET is seen as the preserve of men, the Women in Technical Education Unit of the Technical Education Division provides support to women who want to pursue vocational and technical programmes. Currently, the Ministry of Women and Children's Affairs with the support of the African Development Bank is implementing a project aimed at supporting girls/women in the areas typically tagged as male sectors. Vocational and technical education institutions have also been strengthened by providing them with necessary equipment needed for effective learning.

#### D. School discipline

236. All schools in Ghana have codes of conduct for pupils and students which prescribe corrective measures when children misbehave. The most common corrective measure in most schools is the use of the cane. Other methods include weeding of the school compound, physical drills such as pulling of ears, kneeling down and carrying of weights, suspension, writing lines and dismissal from school depending on the severity of the case. Before a child is suspended or dismissed from school, the parents of the child are informed in writing stating the misdeed of the child. A study by the Ministry of Women and Children's Affairs/CURIOUS MINDS in 2009 indicates that the cane is still used by class teachers in most public schools, a practice which is against standard rules for the correction of children in school.

237. In most second-cycle institutions, disciplinary committees exist to investigate the offences committed by a student so as to determine the type of disciplinary action to take.

#### E. International cooperation in matters relating to education

238. The cooperation between the Government of Ghana and the international community including NGOs to promote quality education has been very positive. The United Nations system, especially the United Nations Educational, Scientific and Cultural Organization (UNESCO) and UNICEF have been very supportive in providing funds and technical support to the Ministry of Education in many areas of educational development. Other development partners such as the World Bank, the Department for International Development (DFID), Plan Ghana, World Vision, and Action Aid among others, have also assisted to promote quality education through research, awareness, advocacy, monitoring, capacity-building, and support for service delivery.

## **F. Factors that may lead children to be excluded from education**

239. Despite efforts made by Government to improve access to education by children, there are still factors that impede their being able to go school. Ignorance has been identified as a major factor that causes vulnerability and exclusion of children especially those in the rural areas. The situation is also worsened by illiteracy and lack of information, as people who are ignorant cannot read and know their rights and services available for their benefit. This perpetuates poverty thus affecting the education of children as parents who have difficulty in meeting the basic needs of their family are unlikely to send their children to school. In such a situation where parents are forced to make a choice between sending the boy or the girl child to school, they are more likely to choose the boy over the girl child. Studies have further indicated that the need for cheap labour has forced many children to be out of school. Girls are often the worst affected as they are made to stay and look after their siblings and perform other domestic chores (GSS/ILO, 2003).

240. Children with disabilities, orphaned children, children infected or affected by HIV/AIDS may also find difficulty in having access to education due to the special care they require. For instance, children with disabilities are perceived to be a source of shame for the family and as such are hidden. Some parents also find it difficult to send children with disabilities to special schools because of distance and financial constraints.

## **G. Measures put in place to ensure some children are not to excluded from education**

241. To ensure all children have access to education, the Government through the Ministry of Education and the Ghana Education Service, relevant ministries, departments and agencies, Metropolitan, Municipal and District Assemblies and CSOs have introduced programmes such as the Capitation Grant Scheme, School Feeding Programme, Free School Uniform and Exercise Books Programme, Free Bus Ride for Schoolchildren which are being implemented to ensure that children from poor homes have access to education.

242. In 2009, a programme to promote enrolment and retention of vulnerable children in LEAP households made school attendance a condition for accessing the grant. LEAP also enhanced its target system to ensure that the core poor and the most vulnerable children households are targeted. The existence of special schools for children with hearing and mental disabilities has ensured that children in this group have the opportunity to be educated. The Ministry of Education/Ghana Education Service is implementing an integrated approach to education. Under this programme children with disabilities are to be integrated into the normal school system.

## **H. Leisure, recreation and cultural activities**

### **1. Leisure and recreation**

243. In accordance with the child's right to leisure and recreation, the Ghana Education Service has two breaks for children on their school timetable during which period children have the time to play, relax and eat. Children have days in which they go for club activities after school and it is compulsory for each child to belong to a club. Sporting activities are organized for schools at least once in the academic year.

244. Children's amusement parks are limited in Ghana. As stated in the previous report there are not many children's parks in the country. The most popular one, the Efua Sutherland Children's Park in Accra, which is managed by the Ministry of Women and Children's Affairs through the Department of Children serves as the only Government-

owned recreational centre for both children and adults. The park is mostly open for children free of charge when there is no programme on in the park, but when other organizers hold entertainment programmes, children are made to pay a gate fee. The proceeds of the park serve as Internally Generated Funds (IGF) for Government, and it is used for maintenance services of the park. Most of the facilities in the park are in various states of disrepair and the Department will need more than its retention proceeds from the IGF to put the park in a better condition

245. It should also be noted that in almost every community in Ghana, there are designated places of some sort for children's leisure and recreation. These take the form of community centres, parks, cultural centres, and other open spaces where children gather to play. The irony is that whereas children in rural areas have enough space to play, they do not have adequate access to playthings, whereas children in urban areas have access to playthings, but they often lack the space to play.

## **2. Cultural activities**

246. Cultural development activities for children in Ghana include cultural events, performances of dance, drama and poetry, festivals and exhibitions of arts and artefacts, artistic creation, improvement of exhibition venues (limited), preservation and promotion of sociocultural heritage.

247. In equipping the youth and children with traditional and employable skills the National Commission on Culture organizes training programmes to inculcate in the youth Ghana's rich cultural experiences, values and traditions. In 2009, a pilot training programme was organized for 50 out-of-school children and youth on batik/tie and dye production, woodcarving, pottery, kente weaving, etc. After the training an exhibition was held to showcase their handiwork and a certificate of training was presented to them. The training programme was replicated in all the 10 centres of the Commission.

248. Again in promoting local tourism, the National Commission on Culture and the Ghana Education Service in collaboration with the Ministry of Tourism and travel and tour operators occasionally organize excursions for schools and colleges to cultural heritage and historical sites in the country. Trips are also organized for children to diverse festivals in conjunction with the various traditional councils. Children who belong to youth clubs once in a while get the opportunity to take part in cultural exchange activities between Ghana and other countries.

# **IX. Special protection measures**

## **A. Children in situations of emergency**

249. Ghana's laws provide for the care and protection of children temporarily or permanently deprived of their family environment. Such children may include refugee children, separated or unaccompanied children and internally displaced. These children are entitled to special protection and assistance provided by the State.

### **1. Refugee children**

250. Children who are not citizens of Ghana and for certain reasons find themselves on the soil of Ghana are accorded similar rights as Ghanaian children. All processes required for children to be granted refugee status were provided in Ghana's previous report. Other separated and unaccompanied migrant children, when found, are handed over to the Ghana Immigration Service, which takes them through the necessary migration procedures and

gives them to the Department of Social Welfare. The Department collaborates with other agencies to provide shelter, food, counselling and other emotional support services to children faced with a refugee situation. Same services are provided for unaccompanied and displaced children. In extreme cases the Department helps to settle refugee children in homes of fit persons. There are remnants of refugees from Côte d'Ivoire, Liberia and Sierra Leone still in the country. Incidentally, the actual number of these refugees is not known.

## **2. Children in armed and conflict situations**

251. Ghana enjoys relative peace and stability, and as a result has not experienced any armed conflict situations. Incidentally, there have been some occurrences of chieftaincy disputes and ethnic conflicts, which resulted in people being internally displaced. The incidents in Bawku, Nkonya-Alavanyo, Peki-Tsito land conflict, Abotia Chieftaincy Conflict, Nafana-Ntora, Yendi and Bunkurugu-Yooyoo ethnic clashes can be cited. In order to lessen the effect of conflict on children, State institutions are always ready to help children in conflict situations. The National Disaster Management Organization is responsible for the management of disasters and similar emergencies. In addition, the Organization performs the following functions:

- Coordination of the activities of various bodies in the management of disasters
- Rehabilitation of persons affected by disasters
- Social mobilization, especially at the community level to support various Government programmes, such as the poverty reduction programme as well as those aimed at the management of disasters
- Ensuring that the country is prepared to prevent disasters and manage them well when they occur.

252. In order to be able to play its role meaningfully, National Disaster Management Organization offices have been established throughout the country.<sup>3</sup> The Organization collaborates with the security services and other agencies as and when a disaster situation arises. It is currently faced with huge operational challenges making it difficult to carry out its disaster management operations effectively.

## **B. Children in conflict with the law**

253. Children are criminally responsible when they attain age 12. In Ghana children usually come in conflict with the law as a result of irresponsibility and lack of supervision by parents or people in charge of them. In isolated instances, insecurity from broken homes is also cited as a contributory factor. The Ghana Police Service is the government agency responsible for all criminal issues, including crimes committed by children and against children. The Juvenile Justice Act, 2003 (Act 653) provides the legal framework for juvenile justice in Ghana.

### **1. Administration of juvenile justice**

254. Juvenile justice administration in Ghana is in line with the relevant international instruments, rules and procedures. It operates on the best interest of the child, in the administration of juvenile justice, the primary aim is to ensure that the rights of the child are guaranteed in all actions taken as mentioned in the previous report. Within the reporting

<sup>3</sup> Available from [http://mint.gov.gh/index.php?option=com\\_content&task=view&id=28&Itemid=42](http://mint.gov.gh/index.php?option=com_content&task=view&id=28&Itemid=42).

period, 1,409 persons under 18 were placed in probation programmes of special rehabilitation.

Table 9.1

**Persons under 18 years placed in probation programmes of special rehabilitation**

<i>Year</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
2005	296	82	<b>378</b>
2006	98	0	<b>98</b>
2007	76	39	<b>115</b>
2008	138	73	<b>211</b>
2009	369	154	<b>523</b>
2010	51	33	<b>84</b>
<b>Total</b>	<b>1 028</b>	<b>381</b>	<b>1 409</b>

*Source:* DSW, 2011.

255. According to the Department of Social Welfare, a number of training programmes have been held periodically for professionals who work in the administration of juvenile justice with funding from Government, UNICEF and other international organizations. The aim of these training programmes is to equip professionals with knowledge of juvenile justice and other related child-rights laws and policies.

## 2. Children deprived of their liberty including any form of detention, imprisonment or placement in custodial settings

256. The laws of Ghana do not allow the detention of children in adult detention facilities, but a number of juveniles were found held in police stations (pretrial detention). Children are likely to be detained in adult detention facilities when they increase in age. Between 2005 and 2010, a total number of 1,748 children were reported to have been held in pretrial detention in the police stations around the country (table 9.2). The average number of days or length of detention for girls ranged between 33 and 123 days, whilst that of boys was between 86 and 796 days.

Table 9.2

**Children held in pretrial detention in the police stations (2005-2010)**

<i>Year</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
2005	214	33	<b>247</b>
2006	240	27	<b>267</b>
2007	229	27	<b>256</b>
2008	278	50	<b>328</b>
2009	296	42	<b>338</b>
2010	265	47	<b>312</b>
<b>Total</b>	<b>1 522</b>	<b>226</b>	<b>1 748</b>

*Source:* Ghana Police Service, 2011.



### 3. Sentencing of juveniles, in particular the prohibition of capital punishment and life imprisonment

257. The legal procedures followed in prosecution and sentencing of juveniles in criminal matters has not changed as indicated in the previous report (paras. 309–319). In Ghana, capital punishment and life imprisonment of children are prohibited.

### 4. Physical and psychological recovery and social reintegration

258. The information provided in Ghana's second and third consolidated report relating to physical and psychological recovery and social reintegration (paras. 320–322) remains valid. As regards children kept in Department of Social Welfare shelter, between 2005–2010, 1,327 cases were reported (table 9.3).

Table 9.3

**Number of children kept in Department of Social Welfare shelter (2005–2010)**

<i>Year</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
2005	40	87	<b>127</b>
2006	16	90	<b>106</b>
2007	53	121	<b>174</b>
2008	100	211	<b>311</b>
2009	121	201	<b>322</b>
2010	89	198	<b>287</b>
<b>Total</b>	<b>419</b>	<b>908</b>	<b>1 327</b>

Source: DSW, 2011.

## C. Children in situation of exploitation, including physical and psychological and social reintegration

259. The Committee drew the attention of Ghana to the high number of children engaged in hazardous and dangerous economic activities that jeopardize their health, education and development, and urged the strengthening of the capacity of the institutions responsible for the control and protection of the rights of working children, including the Child Labour Unit and the Inspectorate Division. The Committee also encouraged Ghana to ratify International Labour Organization (ILO) Convention No. 138 (1973) concerning Minimum Age for Admission to Employment. Ghana ratified ILO Convention No. 138 in 2011.

### 1. Economic exploitation of children including child labour

260. Legislation in Ghana does not approve of children's engagement in exploitative and hazardous labour, yet a lot of children still find themselves in it. The Metropolitan, Municipal and District Assemblies whose mandates relate to child welfare and development have worked in various capacities to address child labour in Ghana, but the phenomenon still persists in spite of initiatives put in place. Child labour is practised in almost every part of the country.

### 2. Programmes and projects

261. The Ministry of Employment and Social Welfare, in collaboration with the Ministry of Women and Children's Affairs and other child-focused ministries, departments and

agencies have worked in partnership with other stakeholders to enhance the fight against children working/and or living on the streets. These include the under-mentioned:

- Technical cooperation between the Government of Ghana, represented by the Ministry of Employment and Social Welfare and the ILO/International Programme on the Elimination of Child Labour (IPEC), following the Memorandum of Understanding signed in March 2000. This has led to the implementation of many projects such as microcredit schemes to parents to help alleviate poverty, scholarship schemes to intelligent and needy children who are engaged in child labour by District Assemblies
- The Ministry of Employment and Social Welfare through the Labour Department is implementing a child labour monitoring system, which allows the tracking and collection of data on children engaged in labour
- A National Steering Committee is also in place to advise Government on issues that relate to children working/and or living on the streets
- Both Government and non-government actors organize periodic community sensitization on the dangers of children working/and or living on the streets at the national, regional and district levels. These have had significant impacts on how many Ghanaians perceive children working/and or living on the streets
- Both the print and electronic media continue to be an important ally of Government in reporting issues related to children working/and or living on the streets in Ghana.

262. Specifically, the following projects which have supported a number of children affected by the worst forms of child labour and their families within the reporting period can be cited.

**3. LUTRENA project “Combating trafficking in children for labour exploitation in West and Central Africa”**

263. Following the implementation of the “Combating trafficking in children for labour exploitation in West and Central Africa” (LUTRENA: 2002-2007) the following results were achieved:

- Reduced child vulnerability to trafficking through school enrolment – 45 per cent of boys and 55 per cent of girls were enrolled in school by December 2007
- An estimated 3,000 children (at least 45 per cent girls) in and out of school were reached with information on the need to attend school
- At least 900 child victims of trafficking or those at risk were enrolled in school
- A total of 570 parents of the beneficiary children were trained in various vocational skills
- Community surveillance teams were set up to monitor enrolment and retention of children in schools
- School performance and learning environment were improved by providing learning and recreational materials to 1,500 girls and 1,000 boys
- A total of 2,500 children were retained in schools by providing them with school materials.

#### 4. The West Africa Cocoa and Commercial Agriculture Project (2003-2006)

264. The West Africa Cocoa and Commercial Agriculture Project, implemented from 2003 to 2006, empowered 500 families to take care of their children. The Project also withdrew and prevented 1,000 children from agriculture through the mainstreaming and provision of school and training skills materials. The breakdown is as follows:

- More males (62 per cent) were withdrawn with females representing 38 per cent
- Distribution of supported children by districts.

Table 9.4

#### Percentage distribution of children withdrawn from agricultural activities and supported

<i>Name Of District</i>	<i>Percent</i>
Amansie West	28
Atwima Mponua	23
Kassena-Nankena	22
Sefwi-Wiawso	14
Suhum-Krabo-Coaltar	13
<b>Total</b>	<b>100</b>

*Source:* Child Labour Unit, 2011.

#### 5. The Time Bound Programme (2005-2009)

265. Through the Time Bound Programme families and children were provided different forms of support in areas such as fishing, stone quarrying, mining, agricultural farming, ritual servitude, sexual exploitation, cattle herding, and portering. Beneficiary districts of the Programme were Ewutu-Efutu-Senya, Ajumako Enyan Essiam, Cape Coast, Wassa West, Jasikan, Kpando, South Tongu, North Tongu, Ketu, Accra Metropolitan Assembly and Ga West. Table A47 (annex) provides information of support provided to children affected by the worst forms of child labour, families of affected children and beneficiary communities. These projects have been evaluated by ILO/IPEC and revealed that over 4,000 children have been withdrawn, enrolled in school and supported with basic school needs. About 9,000 children have also been prevented from engaging in child labour. Two hundred communities in 20 districts have been sensitized on child labour issues while some parents of beneficiary children further received training on income-generating activities and were supported with start-up capital for business ventures.

### D. Children in street situations

266. The Committee welcomed the steps undertaken by the State party to address the phenomenon of street children; however, it raised deep concern about the increasing number of street children and child beggars in Ghana. In its concluding observations, the Committee recommended that the State party increase its efforts to:

- Undertake an in-depth study and a systematic assessment of the phenomenon in order to get an accurate picture of its root causes and magnitude
- Develop and implement with the active involvement of street children themselves and NGOs a comprehensive policy which, inter alia, should address the root causes, in order to prevent and reduce the phenomenon, and which

should provide street children with the necessary protection, adequate health-care services, education and other social reintegration services

- Support family reunification programmes, when it is in the best interests of the child
- Develop programmes to address the issue of child begging.

267. The street children phenomenon is still a problematic issue in Ghana. Some of the major causes of the phenomenon are rural-urban drift, the poverty of parents, the survival of the children and the harsh economic conditions prevailing in the deprived areas they come from. The exact number of street children in Ghana is still not known but there is evidence of its existence and ascendancy.

268. Some of the initiatives undertaken to reduce the phenomenon include equipping street children with livelihood skills, reintegrating them into families, placing them into formal and non-formal education as well as granting them business training and microgrant support to their parents/guardians.

269. The Government of Ghana has had significant support from CSOs such as NGOs, CBOs, FBOs, and Traditional Authorities to address the problem through the identification, rehabilitation and reintegration of street children in the country.

270. As a start an in-depth study and a systematic assessment of the street children phenomenon has been undertaken by the Department of Social Welfare in the Greater Accra Region. The study is to be replicated in the remaining nine regions of Ghana.

## **E. Sale and trafficking of children**

### **Child trafficking**

271. The Committee welcomed the enactment of the Human Trafficking Act in 2005 and the information provided by the delegation of Ghana that Ghana has entered into bilateral and multilateral agreements of cooperation with neighbouring countries in the West African subregion to deal with cross-border trafficking. The Committee, however, expressed concern at the lack of data on the number of children trafficked.

272. Within the reporting period, much work has been done to combat human trafficking in Ghana. Ghana has improved its capacity to capture reliable data on the number of children trafficked in the country through the establishment of a National Stakeholder and Intervention Database by the Ministry of Women and Children's Affairs in collaboration with Rescue Foundation, and with funding from the Government and the British Council. The Ministry has also established a National Coordinating Committee to provide technical advice for the project.

273. A number of strategies aimed at combating trafficking have also been implemented. These include legislation, public awareness and information campaigns, funding of poverty reduction and running projects engaged in by vulnerable groups of women, establishment of a human trafficking desk at the Ghana Immigration Service, a Secretariat at the Ministry of Women and Children's Affairs and a Unit within the Ghana Police Service. A National Plan of Action to focus on trafficking has further been developed.

274. Ghana has strengthened its position in the fight against sale, human trafficking and abduction through the establishment and strengthening of institutions, passage and enforcement of laws. For instance, Act 694 was passed to deal with issues relating to child trafficking and prescribe punishment for offenders. Since the passage of the law, new structures have been established. These include the Human Trafficking Secretariat at the Ministry of Women and Children's Affairs, an Anti-Trafficking Unit at the Criminal

Investigations Department Headquarters of the Ghana Police Service, and a Human Trafficking Desk at the Ghana Immigration Service. Ghana ratified the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime, at its thirty-fifth sitting on 17 July 2009 when Parliament passed a resolution for the ratification of the Protocol.

275. Training programmes have been organized for personnel of State institutions such as the Ghana Police Service; Ghana Immigration Service and Customs, Excise and Preventive Service over the last decade under different interventions.

276. Following the implementation of the “Combating trafficking in children for labour exploitation in West and Central Africa” project the following results were achieved:

- Reduced child vulnerability to trafficking through school enrolment – 45 per cent of boys and 55 per cent of girls were enrolled in school by December 2007
- An estimated 3,000 children (at least 45 per cent girls) in and out of school were reached with information on the need to attend school
- At least 900 child victims of trafficking or those at risk were enrolled in school
- A total of 570 parents of the beneficiary children were trained in various vocational skills
- Community surveillance teams were set up to monitor enrolment and retention of children in schools
- School performance and learning environment were improved by providing learning and recreational materials to 1,500 girls and 1,000 boys;
- A total of 2,500 children were retained in schools by providing them with school materials.

277. In spite of the achievements, there is need to either intensify or sustain all the efforts put in place through the provision of adequate financial, human and material resources to agencies, governmental departments and ministries responsible for activities and policies concerning the welfare, protection and development of children in trafficking. An effective implementation of the Human Trafficking Act also needs to be pursued.

## **F. Sexual exploitation**

278. The Committee raised concern about the growing trend of sexual exploitation and sex tourism in the country and recommended that the State party:

- Finalize its studies, undertake appropriate legislative measures and develop an effective and comprehensive policy addressing the sexual exploitation of children, including the factors that place children at risk of such exploitation
- Avoid restigmatizing child victims of sexual exploitation
- Implement appropriate policies and programmes for the prevention, recovery and social reintegration of child victims, in accordance with the Stockholm Declaration and Agenda for Action adopted at the First World Congress against Commercial Sexual Exploitation of Children in 1996 and the Yokohama Global Commitment 2001 adopted at the Second World Congress.

279. Based on frequent media reports, child prostitution is fast becoming a growing phenomenon in Ghana. Incidentally, there is not much statistical data available to determine the actual number of children and other young people involved in the country. Media

reports indicate that children engage in commercial sex work as a result of parental neglect, peer pressure and the quest to become rich at an early age. In 2009 an investigation, conducted by a private media house in Accra, did show that children are exploited sexually in brothels in Accra. Similar occurrences have also been reported in other parts of the country, indicating that the phenomenon could be a growing problem in the future if steps are not taken to curb it. As a policy issue, government agencies such as the Ministry of Women and Children's Affairs and the Department of Social Welfare have occasionally collaborated with civil society groups to identify, counsel, offer livelihood skills training, reintegrate or resettle sex workers. Some other programme interventions have been made to address problems associated with sexual exploitation of children. This includes the withdrawal and provision of support under the following programmes:

- The Government of Ghana through the ILO/IPEC country programme entitled "Children in tourism in Cape Coast and Elmina in the Central Region" withdrew 346 children (189 males and 157 females) from commercial sexual exploitation of children
- Under the National Time Bound Programme, through ILO /IPEC support, 100 children were withdrawn from commercial sexual exploitation, 2,500 prevented, 400 families supported and five received Community sensitization.

280. The causes of child commercial sexual activity in Ghana are economic deprivation and irresponsible parenting, and lack of adequate shelter for some children of poor parents. The lack of employable skills and the lack of parental control, as well as peer pressure exacerbate the incidence of the phenomenon. Some of the national responses to child sexual exploitation include the under-mentioned:

- Community sensitization on the dangers of child sexual exploitation
- Scholarship schemes to intelligent and needy children who are engaged in commercial sex work
- Microcredit schemes to parents to help alleviate poverty
- International organizations provide technical support to help in the eradication of child labour in Ghana.

## **G. Sexual abuse**

281. There is significant evidence of the occurrence of sexual abuse in the family in Ghana. Cases of home-related violence have been reported by the media, whilst records at the Domestic Violence Victim Support Unit of the Ghana Police Service also provide information as to the occurrence of the phenomenon.

282. The most commonly reported sexual abuse cases are defilement, incest, harassment, indecent assault and unnatural carnal knowledge. In a few instances boys become victims of sexual violence; most victims of sexual violence within the family are girls. Incest is the most common sexual violence that occurs in the home. Sexual abuse and harassment are commonly perpetrated against girls at school and in other educational settings. Table 9.6 provides some figures on the number of sexual offences reported in 2005, 2006, 2007 and 2010. The cases reported include the cases that occurred in schools.

283. There are institutions set up to enforce the rules and regulations on child sexual abuse in Ghana. Notable amongst them are the Domestic Violence Victim Support Unit, Ministry of Women and Children's Affairs, Department of Social Welfare, International Federation of Women Lawyers, and the Ghana Legal Aid Board. These institutions

including the media provide various services for the prevention of and protection against sexual offences in the country.

Table 9.5  
**Reported sexual offences against children (2005-2010)**

<i>Offence</i>	<i>2005</i>	<i>2006</i>	<i>2007</i>	<i>2010</i>
Defilement	713	1 427	1 578	986
Incest	11	11	10	22
Attempted Defilement	5	4	5	10

*Source:* DOVVSU Records, 2011.

## **X. Optional Protocols to the Convention on the Rights of the Child**

### **Introduction**

284. Ghana is a party to the two Optional Protocols to the Convention on the Rights of the Child: Optional Protocol on the involvement of children in armed conflict, and the Optional Protocol on the sale of children, child prostitution and child pornography.

285. The Committee was concerned that Ghana had not ratified the Optional Protocols to the Convention on the Rights of the Child. It recommended that Ghana take appropriate steps to ratify the Protocols. Ghana has since signed the Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict, details of which are given in this section.

#### **1. Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict**

286. The Government of Ghana signed the Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict on 24 September 2003, and at its thirty-fifth sitting on Friday 17 July 2009, the Parliament of Ghana passed a resolution to ratify the Protocol. Ghana is yet to submit its initial report on the Protocol.

#### **2. Optional Protocol on the sale of children, child prostitution and child pornography**

287. A memorandum on the Optional Protocol on the sale of children, child prostitution and child pornography has been submitted to Parliament and is still pending ratification. Ghana signed the Protocol on 24 September 2003.

## Annex

Table A1  
**Top 10 causes of admission for children under 5 years – national**

<i>Rank</i>	<i>Cause of admission</i>	<i>Proportional morbidity rate (%)</i>
1	Malaria	58.1
2	Anaemia	12.8
3	Diarrhoeal diseases	5.1
4	Pneumonia	3.3
5	Malnutrition	1.1
6	Septicaemia	0.8
7	Typhoid fever	0.8
8	Upper respiratory tract infections	0.6
9	HIV/AIDS-related conditions	0.5
10	Injuries	0.4

*Source:* RCH/PHD, 2011.

Table A2  
**Infant mortality rates**

<i>Region</i>	<i>1988</i>	<i>1993</i>	<i>1998</i>	<i>2003</i>	<i>2008</i>
Western	76.9	76.3	68.0	66.0	51.0
Central	138.3	71.6	83.8	50.0	73.0
Greater Accra	57.7	58.4	41.4	45.0	36.0
Volta	73.5	77.8	53.8	75.0	37.0
Eastern	70.1	55.9	50.2	64.0	53.0
Ashanti	69.8	65.2	41.9	80.0	54.0
Brong Ahafo	65.0	48.7	77.3	58.0	37.0
Northern	103.1	113.7	70.1	69.0	70.0
Upper East	103.1	105.0	81.5	33.0	46.0
Upper West	103.1	84.5	70.6	105.0	97.0
National	77	66	57	64	50
Rural	86.8	82.2	67.5	70.0	56.0
Urban	66.9	544.9	42.6	55.0	49.0

*Source:* DHS 1998, 1993, 1998, 2003 and 2008.



Table A3  
Under-5 mortality rate

<i>Region</i>	<i>1988</i>	<i>1993</i>	<i>1998</i>	<i>2003</i>	<i>2008</i>
Western	151.2	131.8	109.7	109.0	65.0
Central	208.2	128.0	142.1	90.0	108.0
Greater Accra	103.8	100.2	62.0	75.0	50.0
Volta	132.7	116.4	98.0	113.0	50.0
Eastern	138.1	93.2	89.1	95.0	81.0
Ashanti	144.2	97.6	78.2	116.0	80.0
Brong Ahafo	122.6	94.6	128.7	91.0	76.0
Northern	221.8	237.0	171.3	154.0	137.0
Upper East	221.8	180.1	155.3	79.0	78.0
Upper West	221.8	187.7	155.6	208.0	142.0
National	155	199	108	111	80
Rural	162.5	149.2	122.0	118.0	90.0
Urban	131.1	89.9	76.8	93.0	75.0

Source: RCH/PHD, 2011.

Table A4  
Antenatal coverage

<i>Region</i>	<i>2005</i>	<i>2006</i>	<i>2007</i>	<i>2008</i>	<i>2009</i>
Ashanti	76.6	74.0	76.1	86.1	80.7
Brong Ahafo	90.0	97.4	101.8	102.1	97.9
Central	103.6	103.8	108.7	115.5	109.1
Eastern	82.0	86.0	87.2	98.2	93.4
Greater Accra	83.1	77.2	77.2	85.2	77.4
Northern	116.6	109.0	116.8	127.7	120.8
Upper East	95.3	104.2	111.7	102.1	100.1
Upper West	86.1	90.3	96.3	93.5	88.9
Volta	84.1	87.1	87.4	93.4	88.9
Western	90.2	93.0	91.7	98.8	93.5
National	88.7	88.1	91.1	97.8	92.1

Source: RCH/PHD, 2011.

Table A5  
Supervised delivery

<i>Region</i>	2005	2006	2007	2008	2009
Ashanti	54.3	40.8	26.7	35.0	42.4
Brong Ahafo	62.0	47.4	34.5	49.8	53.7
Central	77.1	74.0	22.3	56.3	52.5
Eastern	58.45	38.7	43.1	48.0	52.1
Greater Accra	48.6	42.2	43.1	50.3	47.9
Northern	57.5	25.1	27.7	26.0	36.1
Upper East	53.5	38.4	43.5	40.4	52.6
Upper West	66.5	28.8	32.9	40.6	36.7
Volta	42.0	35.4	33.3	37.5	39.4
Western	35.8	34.8	17.6	39.1	42.6
National	54.2	44.5	32.1	42.2	45.6

*Source:* RCH/PHD, 2011.

Table A6  
Postnatal care

<i>Region</i>	2005	2006	2007	2008	2009
Ashanti	47.1	51.9	50.6	51.6	38.4
Brong Ahafo	57.0	53.8	57.1	57.2	53.7
Central	76.0	68.5	73.4	77.6	71.4
Eastern	62.9	60.8	61.5	61.5	67.0
Greater Accra	47.6	44.8	48.5	48.7	51.7
Northern	73.2	70.8	76.8	80.7	84.9
Upper East	56.9	60.7	66.9	57.3	77.8
Upper West	62.0	54.3	70.1	68.7	64.9
Volta	53.9	53.9	55.6	50.5	47.3
Western	35.5	35.5	37.6	45.6	49.5
National	55.0	53.7	56.7	57.5	56.4

*Source:* RCH/PHD, 2011.

Table A7  
**Family planning acceptors**

<i>Region</i>	<i>2005</i>	<i>2006</i>	<i>2007</i>	<i>2008</i>	<i>2009</i>
Ashanti	14.1	15.3	15.2	15.7	17.5
Brong Ahafo	41.0	42.9	40.9	36.3	43.4
Central	32.6	37.0	29.6	33.0	33.1
Eastern	24.7	35.0	33.3	33.1	32.9
Greater Accra	17.7	20.4	16.4	63.9	32.6
Northern	19.4	17.8	20.1	26.0	28.9
Upper East	20.7	26.7	27.4	26.2	33.0
Upper West	53.9	54.3	85.0	26.2	56.5
Volta	25.7	27.9	23.7	59.8	27.5
Western	13.8	15.2	13.9	21.6	18.9
National	22.6	25.4	23.2	33.8	31.1

*Source:* RCH/PHD, 2011.

Table A8  
**HIV indicators on children**

<i>Indicator</i>	<i>2005</i>	<i>2006</i>	<i>2007</i>	<i>2008</i>	<i>2009</i>	<i>2010</i>
HIV-related deaths among children	3,245	3,278	2,936	2,816	2,566	2,276
Children infected by HIV and AIDS	15,011	18,116	21,828	26,133	25,666	25,756
Children on antiretroviral therapy	119	122	308	450	722	894
HIV prevalence among pregnant youth 15-24 years	1.0%	2.5%	2.6%	1.9%	2.1%	

*Source:* NACP reports, 2010.

Table A9  
Fertility indicators

<i>Year</i>	1998	2003	2008
Age at first sex	17.6 years	18.3 years	19.2 years
Age at first marriage	19.1 years	19.6 years	20.1 years
Early births (<20 years)	32%	23%	13%
Adolescent birth rate	90/1,000	74/1 000	66/1 000
Adolescent contraceptive use	5%	6.9%	8.5%

*Source:* Demographic and Health Survey (1998, 2003 & 2008).

Table A10  
Adolescent pregnancy (institutional)

<i>Year</i>	2005	2006	2007	2008	2009
ANC coverage	88.7%	88.4%	90.1%	97.8%	92.1%
Proportion of adolescents	13.7%	13.2%	12.4%	12.3%	12.4%
Absolute number	107 157	104 510	103 290	113 290	110 520

*Source:* RCH/PHD, 2011.

Table A11  
HIV prevalence among pregnant women attending ANC clinics

<i>Region</i>	2009	2008	2007	2006	2005
Ashanti	3.9	3.0	3.8	3.7	3.0
Brong- Ahafo	2.9	2.6	3.3	2.8	3.3
Central	3.0	2.0	2.9	2.5	2.9
Eastern	4.2	4.5	4.2	4.9	4.7
Greater Accra	3.2	3.0	3.4	3.4	2.1
Northern	2.0	1.1	1.7	1.3	1.2
Upper East	2.2	2.0	2.5	3.2	2.6
Upper West	3.1	1.6	3.3	2.5	2.6
Volta	2.6	1.7	2.	3.	1.9
Western	3.1	2.9	3.2	4.3	2.9
National	2.9	2.2	2.6	3.2	2.7

*Source:* NACP/PHD, 2011.

Table A12  
Disaggregated data on adolescent pregnancy by age group and region (10-14 years)

Region	2004		2005		2006		2007		2008		2009	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
Ashanti	265	0.2	266	0.2	246	0.2	364	0.3	357	0.2	360	0.2
Brong Ahafo	177	0.2	229	0.3	267	0.3	294	0.3	530	0.6	211	0.2
Central	99	0.1	149	0.2	168	0.2	187	0.2	183	0.2	196	0.2
Eastern	193	0.3	168	0.2	159	0.2	172	0.2	272	0.3	188	0
Greater Accra	106	0.1	227	0.2	145	0.1	157	0.1	249	0.2	205	0.2
Northern	44	0.1	110	0.1	51	0.1	42	0	120	0.1	75	0.1
Upper East	6	0.02	12	0.03	21	0.1	20	0	59	0.1	31	0.1
Upper West	84	0.4	14	0.1	24	0.1	18	0.1	27	0.1	28	0.1
Volta	92	0.2	128	0.2	143	0.2	145	0.2	157	0.2	134	0.2
Western	316	0.4	271	0.3	171	0.2	217	0.3	315	0.3	266	0.3
National	1 382	0.2	1 574	0.2	1 395	0.2	1 616	0.2	2 269	0.2	1 694	0.2

Source: NACP/PHD, 2011.

Table A13  
Disaggregated data on adolescent pregnancy by age group and region (15-19 years)

Region	2005		2006		2007		2008		2009	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Ashanti	17 287	13.2	15 973	12.2	16 225	11.7	18 845	11.6	19 357	12.3
Brong Ahafo	9 635	13.0	11 707	14.3	11 766	13.4	12 457	13.8	11 748	13.2
Central	11 289	15.0	11 396	15.2	11 522	15.1	12 582	14.7	12 289	14.7
Eastern	11 503	14.8	11 085	14.1	11 061	13.1	12 357	13.4	12 072	13.5
Greater Accra	14 322	12.0	11 422	9.9	10 455	8.6	11 999	9.9	10 753	8.1
Northern	13 228	13.6	10 962	11.6	11 306	10.6	12 046	10.4	11 793	10.5
Upper East	5 601	15.1	6 896	16.8	5 995	13.6	5 846	14.2	5 580	13.7
Upper West	2 449	10.9	2 937	11.6	6 864	12.2	2 168	10.5	2 803	11.9
Volta	9 176	15.0	8 900	13.7	8 671	13.3	9 357	12.9	9 550	13.9
Western	12 667	15.5	11 642	14.2	11 642	13.4	13 362	13.6	12 881	13.4
National	107 157	13.8	103 115	13.0	101 527	12.2	111 021	12.1	108 826	12.2

Source: RCH/PHD, 2011.

Table A14  
HIV prevalence among young people

Regions	2005		2006		2007	
	Older adolescent (15-19 yrs)	Youth (15-24 yrs)	Older adolescent (15-19 yrs)	Youth (15-24 yrs)	Older adolescent (15-19 yrs)	Youth (15-24 yrs)
Ashanti	1.9	2.1	0.8	2.1	0.63	2.8
Brong- Ahafo	0.0	1.8	0.6	1.3	2.03	3.14
Central	0.6	1.9	1.9	2.3	1.91	2.76
Eastern	1.0	2.6	2.0	3.6	2.14	4.6
Greater Accra	0.5	1.8	1.5	2.3	2.42	2.4
Northern	0.7	0.8	0.0	0.9	1.55	1.67
Upper East	1.7	2.5	2.5	3.3	1.65	3.1
Upper West	0.0	2.2	1.7	2.7	0.58	2.3
Volta	0.5	0.7	0.5	2.4	1.86	1.9
Western	1.5	3.1	2.1	3.0	1.9	3.2
National	0.8	1.9	1.4	2.5	1.6	2.6

Source: NACP reports for year 2004, 2005, 2006 and 2007.

Table A15  
Top 10 causes of deaths for children under 5 years national

Rank	Cause of admission	Proportional morbidity rate (%)
1	Malaria	20.2
2	Anaemia	6.3
3	HIV/AIDS-related conditions	5.0
4	Pneumonia	4.9
5	Septicaemia	3.3
6	Diarrhoeal diseases	2.6
7	Malnutrition	1.8
8	Cerebrovascular accident	0.9
9	Cardiac diseases	0.7
10	Meningitis	0.7
	All other causes	53.5

Source: CHIM/PPME-GHS, 2011.

Table A16  
**HIV prevalence among pregnant women by age group**

<i>Age group</i>	<i>2005</i>	<i>2006</i>	<i>2007</i>	<i>2008</i>	<i>2009</i>
15-19 yrs	0.8	1.4	1.6	1.2	1.9
20-24 yrs	2.4	2.9	2.9	2.3	2.2
25-29 yrs	3.6	4.2	3.5	3.0	3.7
30-34 yrs	3.2	3.7	2.9	2.8	3.4
35-39 yrs	2.4	2.8	3.5	2.9	3.6
40-44 yrs	3.7	3.3	1.7	1.8	4.0
45-49 yrs	5.0	2.5	1.3	2.6	1.8
15-24 yrs	1.9	2.5	2.9	1.9	2.1

*Source: NACP/PHD, 2011.*

Table A17  
**Guinea worm cases**

<i>Region</i>	<i>2005</i>	<i>2006</i>	<i>2007</i>	<i>2008</i>	<i>2009</i>
Ashanti	59	53	18	5	2
Brong- Ahafo	293	204	42	11	2
Central	0	0	0	1	0
Eastern	17	8	7	2	1
Greater Accra	3	1	2	0	0
Northern	2 981	3 679	3 237	479	237
Upper East	7	10	5	1	0
Upper West	333	93	23	1	0
Volta	286	86	22	1	0
Western	2	2	2	0	0
National	3 981	4 136	3 358	501	242

*Source: Guinea Worm Eradication Programme, 2010.*

Table A18  
Tuberculosis case detection per 100,000 population

<i>Region</i>	2009	2008	2007	2006	2005
Ashanti	53	54	51	49	53
Brong- Ahafo	38	30	36	31	28
Central	80	67	69	61	75
Eastern	80	71	71	72	75
Greater Accra	82	80	69	78	67
Northern	24	31	25	20	18
Upper East	48	48	51	32	34
Upper West	37	35	29	28	35
Western	80	68	58	61	64
Ashanti	74	74	73	75	76
National	64	61	61	57	57

*Source:* National TB Programme (PHD), 2011.

Table A19  
Tuberculosis cure rate

<i>Region</i>	2005	2006	2007	2008
Ashanti	74.7	80.5	82.3	81.4
Brong- Ahafo	60.8	59.0	64.1	70.9
Central	62.9	71.4	81.8	87.1
Eastern	63.1	68.8	72.9	75.5
Greater Accra	80.5	76.0	82.5	82.0
Northern	66.0	66.4	76.3	74.8
Upper East	66.9	73.6	75.0	72.2
Upper West	47.4	56.3	44.5	42.1
Western	77.3	74.0	79.8	88.0
National	67.6	76.1	77.5	78.8

*Source:* National TB Programme (PHD), 2011.



Table A20  
**Measles immunization coverage rate (2005-2009)**

<i>Region</i>	2005	2006	2007	2008	2009
Ashanti	79	73.7	77.7	80.7	87.1
Brong Ahafo	89	99.4	102.0	96.6	93.9
Central	85	89.0	94.0	94.4	98.1
Eastern	92	93.8	95.1	95.1	94.0
Greater Accra	67	65.9	67.3	67.3	74.0
Northern	96	112.4	109.2	109.2	119.7
Upper East	85	95.8	93.1	93.1	105.9
Upper West	78	101.1	90.0	90.0	90.6
Volta	69	71.0	78.8	78.3	78.3
Western	80	90.3	87.5	87.5	85.2
National	81	85.1	88.6	86.5	89.1

*Source:* Expanded Programme on Immunization, 2010.

Table A21  
**Penta 3 (DPT3) immunization coverage rate (2005-2009)**

<i>Region</i>	2005	2006	2007	2008	2009
Ashanti	73	71.0	72.3	76.8	83.7
Brong Ahafo	91	96.8	100.2	97.3	95.0
Central	88	88.4	92.6	92.2	96.6
Eastern	89	88.6	93.0	93.0	94.5
Greater Accra	66	65.4	67.8	68.3	72.7
Northern	112	115.2	123.7	114.5	123.0
Upper East	97	92.6	101.6	94.8	105.9
Upper West	76	92.4	93.9	87.5	90.1
Volta	75	77.5	83.8	83.8	82.9
Western	85	91.1	93.3	89.0	88.6
National	83	84.2	83.8	86.6	89.3

*Source:* Expanded Programme on Immunization, 2010.

Table A22  
**OPV3 immunization coverage rate (2005-2009)**

<i>Region</i>	2005	2006	2007	2008	2009
Ashanti	72	70.6	72.3	76.7	86.61
Brong Ahafo	91	97.1	101.3	97.2	93.76
Central	102	88.2	92.7	90.9	93.66
Eastern	91	88.8	93.3	92.7	94.15
Greater Accra	66	64.8	67.4	68.4	72.28
Northern	112	113.3	122.5	114.2	122.13
Upper East	96	92.6	100.8	89.2	105.35
Upper West	75	92.3	93.8	87.4	89.27
Volta	76	78.0	83.6	83.8	83.11
Western	85	89.6	92.4	88.4	88.00
National	84	83.7	87.6	86.1	88.69

*Source:* Expanded Programme on Immunization, 2010.

Table A23  
**BCG immunization coverage rate (2005-2009)**

<i>Region</i>	2005	2006	2007	2008	2009
Ashanti	86	87.5	90.5	95.7	101.6
Brong Ahafo	99	111.6	114.5	111.6	111.1
Central	115	114.5	124.0	118.6	123.9
Eastern	114	110.2	110.6	111.7	114.2
Greater Accra	83	73.6	73.7	76.4	75.6
Northern	117	128.7	130.8	131.	139.5
Upper East	96	110.6	112.5	107.3	123.5
Upper West	88	110.0	109.1	107.3	14.6
Volta	89	91.4	98.1	105.2	94.5
Western	98	103.8	107.8	98.1	100.6
National	97	99.6	102.4	103.0	103.8

*Source:* Expanded Programme on Immunization, 2010.

Table A24  
**Tetanus Toxoids immunization coverage rate, 2001-2008**

<i>Region</i>	2005	2006	2007	2008	2009
Ashanti	64	68.3	69.0	80.2	83.1
Brong Ahafo	89	88.9	90.9	89.8	82.2
Central	88	78.7	81.9	93.2	89.6
Eastern	66	68.1	67.3	80.7	85.1
Greater Accra	60	56.8	50.3	59.6	66.8
Northern	96	78.5	95.0	97.9	108.0
Upper East	72	78.3	90.4	66.2	85.5
Upper West	43	52.3	67.4	71.6	71.2
Volta	68	59.7	57.0	63.7	63.9
Western	55	57.1	58.8	62.7	62.6
National	68	68.2	70.1	76.3	78.6

*Source:* Expanded Programme on Immunization, 2010.

Table A25  
**Yellow fever immunization coverage rate, 2001-2008**

<i>Region</i>	2005	2006	2007	2008	2009
Ashanti	74	72.9	76.9	80.4	86.8
Brong Ahafo	93	98.4	100.9	94.8	94.0
Central	78	86.6	91.9	91.3	96.8
Eastern	91	90.8	95.5	95.4	94.2
Greater Accra	66	64.4	68.3	66.8	73.2
Northern	101	110.0	115.0	107.6	118.7
Upper East	88	92.6	101.1	84.8	107.5
Upper West	84	96.2	97.0	88.0	89.5
Volta	69	71.6	77.0	79.0	78.2
Western	73	93.6	96.6	93.1	84.7
National	80	84.0	88.1	86.0	88.8

*Source:* Expanded Programme on Immunization, 2010.

Table A26  
Households by locality and type of toilet used by the household (percentage)

Utility	Urban Areas			Rural Areas				Ghana
	Accra (GAMA)	Other Urban	All	Rural Coastal	Rural Forest	Rural Savannah	All	
Flush toilet	33.2	16.7	22.2	1.4	1.1	0.7	1.1	10.2
Pit latrine	5.0	21.0	15.7	43.6	57.6	20.9	43.5	31.5
KVIP	15.8	13.8	14.4	11.3	11.8	4.6	9.5	11.7
Pan/bucket	3.2	2.3	2.6	0.1	0.3	0.3	0.3	1.3
Public toilet (flush/bucket/KVIP)	41.3	37.5	38.7	13.9	19.1	4.6	13.6	24.4
Toilet in another house	0.4	1.3	1.0	1.9	2.6	0.1	1.7	1.4
No toilet facility (bush, beach)	1.1	7.4	5.3	27.2	7.3	68.9	30.2	19.4
Other	0.0	0.1	0.0	0.5	0.2	0.0	0.2	0.1
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>

Source: GLSS5, 2008.

Table A27  
Source of Water supply

Source of water supply	Urban Areas			Rural Areas				Ghana
	Accra (GAMA)	Other Urban	All	Rural Coastal	Rural Forest	Rural Savannah	All	
Pipe-borne	84.3	67.5	73.1	29.8	12.0	5.9	14.0	39.5
Indoor plumbing	10.9	7.3	8.5	0.8	0.1	0.0	0.2	3.8
Inside standpipe	31.3	17.2	21.9	2.9	1.8	2.2	2.1	10.7
Pipe in neighbouring household	28.7	15.2	19.7	4.3	0.1	1.5	1.4	9.3
Private outside standpipe/tap	9.0	6.7	7.4	7.2	2.8	1.0	3.2	5.0
Public standpipe	4.5	21.1	15.6	14.6	7.2	1.2	7.0	10.7
Well	1.2	23.4	16.0	37.8	67.4	62.1	59.4	40.7
Borehole	0.1	9.0	6.1	27.6	55.5	53.4	48.9	30.4
Protected well	1.1	11.4	8.0	4.5	6.9	1.8	4.9	6.2
Unprotected well	0.0	2.9	2.0	5.8	5.0	6.9	5.7	4.1
Natural sources	0.1	3.7	2.5	29.1	20.3	31.9	25.7	15.7
River/stream	0.1	2.6	1.8	24.3	16.4	18.5	18.7	11.4
Rainwater/spring	0.0	0.6	0.4	0.8	1.6	0.3	1.0	0.7

<i>Source of water supply</i>	<i>Urban Areas</i>			<i>Rural Areas</i>			<i>All</i>	<i>Ghana</i>
	<i>Accra (GAMA)</i>	<i>Other Urban</i>	<i>All</i>	<i>Rural Coastal</i>	<i>Rural Forest</i>	<i>Rural Savannah</i>		
Dugout/pond/lake/dam	0.0	0.4	0.3	4.0	2.4	13.1	6.0	3.5
Other	14.3	5.4	8.4	3.4	0.3	0.0	0.9	4.1
Water truck/tanker service	1.3	0.8	0.9	0.1	0.0	0.0	0.0	0.4
Water vendor	4.5	2.9	3.4	2.2	0.1	0.0	0.5	1.8
Sachet/bottled water	8.6	1.6	4.0	0.6	0.2	0.0	0.2	1.8
Other	0.0	0.1	0.0	0.4	0.0	0.0	0.1	0.1
All	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*Source:* GLSS5, 2008.

**Table A28**  
**Enrolment rates (by sex) in crèche from 2005 to 2010**

<i>Year</i>	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
2004/2005	111 160	106 800	<b>217 960</b>
2005/2006	95 547	95 547	<b>191 094</b>
2006/2007	133 462	51 112	<b>184 578</b>
2007/2008	93 139	91 772	<b>184 911</b>
2008/2009	107 430	105 205	<b>212 635</b>
2009/2010	120 052	118 324	<b>238 376</b>

*Source:* EMIS, 2005-2010.

**Table A29**  
**Enrolment rates in kindergarten (2005-2010)**

<i>Year</i>	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
2004/2005	369 842	363 127	<b>732 969</b>
2005/2006	528 257	504 237	<b>1 032 494</b>
2006/2007	552 995	551 784	<b>1 104 779</b>
2007/2008	632 421	626 062	<b>1 258 483</b>
2008/2009	671 822	666 632	<b>1 338 454</b>
2009/2010	723 833	716 899	<b>1 440 732</b>

*Source:* EMIS, 2005-2010.

Table A30  
Enrolment rates in primary school (2005-2010)

<i>Year</i>	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
2004/2005	1 528 843	1 406 768	<b>2 935 611</b>
2005/2006	1 612 497	1 518 078	<b>3 130 575</b>
2006/2007	1 732 162	1 633 600	<b>3 365 762</b>
2007/2008	1 860 289	1 755,734	<b>3 616 023</b>
2008/2009	1 908 232	1 802 415	<b>3 710 647</b>
2009/2010	1 953 359	1 855 899	<b>3 809 258</b>

Source: EMIS, 2005-2010.

Table A31  
Enrolment rates in junior high school (2005-2010)

<i>Year</i>	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
2004/2005	549 304	462 954	<b>1 012 258</b>
2005/2006	592 695	491 417	<b>1 084 112</b>
2006/2007	605 086	527 232	<b>1 132 318</b>
2007/2008	652 146	517 864	<b>1 224 010</b>
2008/2009	685 099	600 478	<b>1 285 577</b>
2009/2010	690 664	611 276	<b>1 301 940</b>

Source: EMIS, 2005-2010.

Table A32  
Crèche

<i>Region</i>	<i>2005</i>		<i>2006</i>		<i>2007</i>		<i>2008</i>		<i>2009</i>		<i>2010</i>	
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>
National	1 528 843	1 406 768	96 375	94 719	92 653	91 921	93 139	91 772	107 430	105 205	120 052	118 324
Western	168 342	153 333	7 322	7 425	7 789	7 942	7 254	7 130	7 941	8 019	9 609	9 645
Central	151 701	140 845	9 636	9 950	10 304	10 282	10 235	10 188	11 952	11 870	14 770	14 866
Greater Accra	173 547	173 931	15 350	14 451	18 206	17 901	19 704	19 028	21 814	21 274	25 741	24 873
Volta	134 668	119 379	4 904	5 036	5 386	5 451	4 730	4 729	5 622	5 573	5 733	5 642

Region	2005		2006		2007		2008		2009		2010	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Eastern	184 521	169 378	8 151	7 673	7 857	7 480	8 626	8 515	10 883	11 043	11 544	11 667
Ashanti	289 279	270 426	301 021	17 304	20 521	20 286	21 565	21 069	26 693	25 443	28 627	27 829
Brong Ahafo	155 325	138 983	8 143	8 860	7 627	7 823	8 407	8 622	9 103	9 177	10 596	10 828
Northern	146 805	120 857	16 836	15 519	8 940	8 525	8 208	7 801	9 513	9 034	9 776	9 286
Upper East	78 590	74 229	6 240	6 289	4 578	4 718	2 900	3 032	2 561	2 500	2 414	2 359
Upper West	46 065	45 407	2 179	2 212	1 445	1 513	1 510	1 658	1 348	1 272	1 242	1 329

Source: EMIS, 2005-2010.

Table A33  
Enrolment in primary schools by region (2005-2010)

Region	Primary											
	2005		2006		2007		2008		2009		2010	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
National	1 528 843	1 406 768	1 612 497	1 518 078	1 732 162	1 633 600	1 860 289	1 755 734	1 908 232	1 802 415	1 953 359	1 855 899
Western	168 342	153 333	169 461	158 543	188 022	176 004	201 528	189 113	206 712	195 255	214 555	204 248
Central	151 701	140 845	168 257	158 323	180 130	170 006	187 543	178 852	190 835	181 818	198 013	189 738
Greater Accra	173 547	173 931	155 297	159 890	181 582	187 566	201 397	208 923	202 198	210 479	207 160	216 280
Volta	134 668	119 379	142 973	130 246	148 681	135 828	157 835	143 902	162 910	147 729	164 254	150 583
Eastern	184 521	169 378	181 173	169 702	198 441	184 907	213 008	199 231	213 788	199 961	210 995	197 880
Ashanti	289 279	270 426	301 021	284 240	322 167	308 087	342 109	327 708	355 038	342 255	360 027	349 054
Brong Ahafo	155 325	138 983	172 308	160 015	177 907	165 320	190 067	177 468	197 230	185 883	203 626	194 539
Northern	146 805	120 857	171 068	149 180	184 117	159 507	200 159	171 944	209 850	178 081	220 547	188 480
Upper East	78 590	74 229	90 179	86 729	94 615	89 931	103 352	96 208	103 249	95 816	105 830	97 973
Upper West	46 065	45 407	60 760	61 210	56 500	56 444	63 291	62 385	66 422	65 138	68 352	67 124

Source: EMIS, 2005-2010.

Table A34  
Enrolment rates of TVET (2005-2010)

Year	TVET		
	Private	Public	Total
2005/2006	12 215	15 389	<b>27 604</b>
2006/2007	19 670	41 733	<b>61 403</b>
2007/2008	22 184	38 714	<b>60 898</b>
2008/2009	20 534	32 127	<b>52 661</b>
2009/2010	22 632	34 333	<b>56 965</b>

Source: EMIS, 2005-2010.

Table A36  
Enrolment in junior high school by region 2005-2010

Region	2005		2006		2007		2008		2009		2010	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
National	549 304	462 954	592 695	491 417	605 086	527 232	652 146	571 864	685 099	600 478	690 664	611 276
Western	56 882	47 570	57 735	49 065	64 012	55 121	69 250	59 692	73 582	63 240	74 748	65 599
Central	58 253	49 825	61 298	53 347	67 140	58 334	71 079	62 557	74 501	65 486	74 671	66 471
Greater Accra	82 857	81 885	73 646	75 308	83 816	85 355	90 519	92 490	92 550	92 550	92 157	94 819
Volta	49 909	39 219	64 418	43 487	52 639	43 032	56 389	56 389	58 926	48 122	58 572	47 675
Eastern	66 704	55 916	63 911	54 822	70 826	60 939	77 000	65 748	79 855	67 421	77 213	66 075
Ashanti	109 880	96 193	113 602	101 575	123 830	110 516	130 330	118 424	137 227	124 358	137 965	125 435
Brong Ahafo	52 169	41 940	79 095	53 553	60 393	50 000	64 070	53 006	69 053	57 418	68 965	57 973
Northern	39 661	23 135	42 962	28 919	45 346	30 496	52 205	35 369	53 864	37 482	57 039	40 579
Upper East	18 496	16 610	20 430	17 653	21 933	19 562	24 102	22 450	26 745	24 633	29 684	27 988
Upper West	14 493	10 661	15 598	13 688	15 151	13 877	17 202	16 025	18 796	17 784	19 650	18 662

Source: EMIS, 2005-2010.



Table A37  
Enrolment rates of senior high school (2005-2010)

<i>Year</i>	<i>Private</i>	<i>Public</i>	<i>Total</i>
2005/2006	24 209	311 966	<b>338 519</b>
2006/2007	376 049	38 442	<b>414 491</b>
2007/2008	43 776	393 995	<b>437 771</b>
2008/2009	49 010	441 324	<b>490 334</b>
2009/2010	58 036	479 296	<b>537 332</b>

Source: EMIS, 2005-2010.

Table A38  
Enrolment for senior high school by regions from 2005-2010

<i>Region</i>	<i>2005/2006</i>		<i>2006/2007</i>		<i>2007/2008</i>		<i>2008/2009</i>		<i>2009/2010</i>	
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>
Ashanti	37 673	32 557	51 122	42 128	54 375	44 434	61 090	51 012	68 298	56 951
Brong Ahafo	19 954	14 235	21 612	15 768	23 316	16 773	27 395	19 873	28 943	22 015
Central	26 944	22 497	27 437	24 845	27 569	22 711	31 777	28 071	36 282	32 486
Eastern	26 863	22 155	36 676	32 470	37 932	33 965	40 113	37 038	41 023	38 125
Greater Accra	18 211	12 715	26 607	21 290	26 955	22 430	27 882	23 183	29 772	24 855
Northern	15 513	7 177	18 438	8 736	19 629	9 335	22 042	11 155	25 169	14 007
Upper East	7 161	4 996	7 283	4 953	7 556	5 083	8 038	5 405	9 012	6 196
Upper West	5 067	3 142	6 196	3 395	6 487	3 680	7 116	4 233	7 233	4 405
Volta	20 345	14 330	19 174	13 953	23 506	17 676	25 893	20 177	27 256	21 370
Western	15 024	11 960	18 232	14 176	19 321	15 038	21 560	17 281	23 966	19 968

Source: EMIS, 2005-2010.

Table A39  
Enrolment in TVET by regions 2005-2010

Region	2005-2006		2006-2007		2007-2008		2008-2009		2009-2010	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
National	15 766	16 418	37 503	66 223	36 164	31 196	46 207	25 786	34 683	29 472
Ashanti	2 027	3 901	6 208	38 949	6 040	3 968	5 883	5 222	5 827	4 835
Brong Ahafo	1 736	1 059	2 426	2 505	3 408	2 629	2 525	1 710	2 732	2 108
Central	557	897	6 548	5 631	6 190	5 140	4 215	2 329	3 215	3 241
Eastern	3 016	2 618	4 408	3 160	5 238	3 731	4 674	2 793	5 029	3 479
Greater Accra	1 251	154	5 726	3 020	5 052	3 244	17 297	3 895	5 116	4 315
Northern	446	655	1 772	2 521	1 700	2 956	1 738	3 533	1 931	2 634
Volta	1 753	1 339	3 398	2 435	2 571	2 531	3 192	1 923	2 821	2 290
Western	2 358	2 482	3 819	2 593	3 140	2 597	2 474	450	4 271	2 822
Upper East	1 904	1 784	2 117	3 221	2 031	2 193	2 968	2 447	2 253	2 545
Upper West	718	1 529	1 081	2 188	794	2 207	1 241	1 484	1 488	1 203

Source: EMIS, 2005-2010.

Table A40  
Regional number of crèches

Region	2005	2006	2007	2008	2009	2010
National	11 044	3 261	3 636	3 604	4 155	4 535
Western	1 412	264	316	281	326	367
Central	1 310	404	458	446	517	611
Greater Accra	957	602	780	824	947	1 066
Volta	1 169	211	234	214	259	257
Eastern	1 616	303	334	366	436	456
Ashanti	2 222	668	806	843	950	1 018
Brong Ahafo	1 282	261	260	272	300	321
Northern	632	309	255	219	271	283
Upper East	254	185	151	100	110	113
Upper West	190	54	42	39	39	43

Source: EMIS, 2005-2010.

Table A41  
Regional public and private kindergartens

Region	2005			2006			2007			2008			2009			2010		
	Public	Private	Total	Public	Private	Total	Public	Private	Total	Public	Private	Total	Public	Private	Total	Public	Private	Total
National	5 205	1 804	<b>7 009</b>	3 272	11 931	???	1 280	405	<b>1 685</b>	11 140	4 309	<b>15 449</b>	11 827	4 612	<b>16 439</b>	12 481	4 990	<b>17 471</b>
Western	804	183	<b>987</b>	1 118	340	<b>1 458</b>	1 280	405	<b>1 685</b>	1 349	461	<b>1 810</b>	1 419	473	<b>1 892</b>	1 499	508	<b>2 007</b>
Central	624	195	<b>819</b>	1 033	391	<b>1 424</b>	1 147	454	<b>1 601</b>	1 205	500	<b>1 705</b>	1 222	554	<b>1 776</b>	1 261	667	<b>1 928</b>
Greater Accra	116	170	<b>286</b>	272	597	<b>869</b>	346	776	<b>1 122</b>	420	921	<b>1 341</b>	473	986	<b>1 459</b>	532	1 100	<b>1 632</b>
Volta	596	317	<b>913</b>	1 013	267	<b>1 280</b>	1 195	269	<b>1 464</b>	1 318	302	<b>1 620</b>	1 394	314	<b>1 708</b>	1 429	311	<b>1 740</b>
Eastern	861	295	<b>1 156</b>	1 120	425	<b>1 545</b>	1 292	454	<b>1 746</b>	1 412	530	<b>1 942</b>	1 528	559	<b>2 087</b>	1 594	575	<b>2 169</b>
Ashanti	1 110	344	<b>1 454</b>	1 589	735	<b>2 324</b>	1 838	858	<b>2 696</b>	1 905	979	<b>2 884</b>	1 955	1 068	<b>3 023</b>	2 034	1 133	<b>3 167</b>
Brong Ahafo	763	216	<b>979</b>	1 219	332	<b>1 551</b>	1 339	331	<b>1 670</b>	1 411	379	<b>1 790</b>	1 466	397	<b>1 863</b>	1 527	433	<b>1 960</b>
Northern	231	30	<b>261</b>	684	126	<b>810</b>	873	131	<b>1 004</b>	1 263	160	<b>1 423</b>	1 414	179	<b>1 593</b>	1 560	182	<b>1 742</b>
Upper East	49	28	<b>77</b>	323	45	<b>368</b>	407	45	<b>452</b>	487	53	<b>540</b>	548	57	<b>605</b>	599	54	<b>653</b>
Upper West	51	26	<b>77</b>	288	14	<b>302</b>	291	19	<b>310</b>	370	24	<b>394</b>	408	25	<b>433</b>	446	27	<b>473</b>

Source: EMIS, 2005-2010.

Table A42  
Regional public and private primary schools

Region	2005			2006			2007			2008			2009			2010		
	Public	Private	Total	Public	Private	Total	Public	Private	Total	Public	Private	Total	Public	Private	Total	Public	Private	Total
National	12 406	3 622	<b>16 028</b>	12 227	3 080	<b>15 307</b>	12 880	3 530	<b>16 410</b>	13 247	4 068	<b>17 315</b>	13 510	4 371	<b>17 881</b>	13 835	4 744	<b>18 579</b>
Western	1 360	401	<b>1 761</b>	1 307	339	<b>1 646</b>	1 383	404	<b>1 787</b>	1 423	455	<b>1 878</b>	1 466	473	<b>1 939</b>	1 528	506	<b>2 034</b>
Central	1 216	371	<b>1 587</b>	1 176	368	<b>1 544</b>	1 239	432	<b>1 671</b>	1 274	472	<b>1 746</b>	1 281	527	<b>1 808</b>	1 302	642	<b>1 944</b>
Greater Accra	765	727	<b>1 492</b>	658	556	<b>1 214</b>	754	705	<b>1 459</b>	784	850	<b>1 634</b>	794	914	<b>1 708</b>	832	1 016	<b>1 848</b>
Volta	1 432	254	<b>1 686</b>	1 348	234	<b>1 582</b>	1 427	238	<b>1 665</b>	1 442	276	<b>1 718</b>	1 471	296	<b>1 767</b>	1 483	292	<b>1 775</b>
Eastern	1 862	458	<b>2 320</b>	1 617	374	<b>1 991</b>	1 758	419	<b>2 177</b>	1 815	485	<b>2 300</b>	1 834	518	<b>2 352</b>	1 841	534	<b>2 375</b>
Ashanti	1 919	906	<b>2 825</b>	1 986	732	<b>2 718</b>	2 086	854	<b>2 940</b>	2 111	973	<b>3 084</b>	2 130	1 050	<b>3 180</b>	2 175	1 114	<b>3 289</b>
Brong Ahafo	1 438	338	<b>1 776</b>	1 489	329	<b>1 818</b>	1 517	321	<b>1 838</b>	1 541	367	<b>1 908</b>	1 562	383	<b>1 945</b>	1 600	422	<b>2 022</b>
Northern	1 525	105	<b>1 630</b>	1 609	102	<b>1 711</b>	1 712	107	<b>1 819</b>	1 801	128	<b>1 929</b>	1 883	140	<b>2 023</b>	1 841	534	<b>2 375</b>
Upper East	475	42	<b>517</b>	525	38	<b>563</b>	545	41	<b>586</b>	571	46	<b>617</b>	587	52	<b>639</b>	613	49	<b>662</b>
Upper West	414	20	<b>434</b>	512	8	<b>520</b>	459	9	<b>468</b>	485	16	<b>501</b>	502	18	<b>520</b>	515	21	<b>536</b>

Source: EMIS, 2005-2010.

Table A43  
Number of private and public junior high schools (2005-2010)

Region	2005			2006			2007			2008			2009			2010		
	Public	Private	Total	Public	Private	Total	Public	Private	Total	Public	Private	Total	Public	Private	Total	Public	Private	Total
National	6 637	1 786	<b>8 423</b>	7 130	1 619	<b>8 749</b>	7 122	1 932	<b>9 054</b>	7 423	2 319	<b>9 742</b>	7,656	2 557	<b>10 213</b>	7 969	2 799	<b>10 768</b>
Western	734	203	<b>937</b>	768	185	<b>953</b>	764	236	<b>1 000</b>	813	268	<b>1 081</b>	844	298	<b>1 142</b>	873	340	<b>1 213</b>
Central	890	189	<b>1 079</b>	888	210	<b>1 098</b>	920	246	<b>1 166</b>	949	290	<b>1 239</b>	977	317	<b>1 294</b>	1 007	382	<b>1 389</b>
Greater Accra	535	491	<b>1 026</b>	544	397	<b>941</b>	594	495	<b>1 089</b>	616	598	<b>1 214</b>	630	649	<b>1 279</b>	662	699	<b>1 361</b>
Volta	761	105	<b>866</b>	852	102	<b>954</b>	797	117	<b>914</b>	135 948	3 015	<b>138 963</b>	847	157	<b>1 004</b>	866	164	<b>1 030</b>
Eastern	1 048	206	<b>1 254</b>	981	188	<b>1 169</b>	1 027	227	<b>1 254</b>	1 083	265	<b>1 348</b>	1 106	286	<b>1 392</b>	1 116	298	<b>1 414</b>
Ashanti	1 113	429	<b>1 542</b>	1 289	358	<b>1 647</b>	1 268	436	<b>1 704</b>	1 291	537	<b>1 828</b>	1 341	598	<b>1 939</b>	1 393	636	<b>2 029</b>
Brong Ahafo	748	127	<b>875</b>	823	153	<b>976</b>	817	154	<b>971</b>	834	185	<b>1 019</b>	854	211	<b>1 065</b>	897	234	<b>1 131</b>
Northern	357	16	<b>373</b>	430	15	<b>445</b>	427	12	<b>439</b>	463	23	<b>486</b>	480	24	<b>504</b>	516	27	<b>543</b>
Upper East	206	9	<b>215</b>	243	6	<b>249</b>	6	6	<b>238</b>	254	9	<b>263</b>	277	10	<b>287</b>	319	10	<b>329</b>
Upper West	245	11	<b>256</b>	312	5	<b>317</b>	276	3	<b>279</b>	295	6	<b>301</b>	300	7	<b>307</b>	320	9	<b>329</b>

Source: EMIS, 2005-2010.

Table A44  
Pupil-teacher ratio of teacher per children 2004/2005

Year	Level	Public			Private		
		Enrolment	Teachers	PTR	Enrolment	Teachers	PTR
2004/05	Preschool	549 430	19 680	27.9	401 499	13 737	29.2
	Kindergarten	483 316	19 373	24.9	249 653	13 339	18.7
	Primary	2 332 767	66 945	34.8	602 844	22 534	26.8
	JHS	823 743	43 499	18.9	188 515	12 581	15.0
	<b>Total</b>	<b>4 189 256</b>	<b>149 497</b>	<b>28.0</b>	<b>1 442 511</b>	<b>62 191</b>	<b>23.2</b>
2005/06	Preschool	66 178	1 812	36.5	124 916	3 923	41.0
	Kindergarten	837 267	20 440	41.0	195 227	6 140	31.8
	Primary	2 655 288	70 334	37.8	475 287	18 127	26.2
	JHS	926 170	45 824	20.2	157 942	10 661	14.8
	<b>Total</b>	<b>4 484 903</b>	<b>138 410</b>	<b>32.4</b>	<b>953 372</b>	<b>38 851</b>	<b>24.5</b>

Year	Level	Public			Private		
		Enrolment	Teachers	PTR	Enrolment	Teachers	PTR
2006/07	Preschool	51 112	1 507	34:1	133 462	5 149	26:1
	Kindergarten	896 522	27 059	33:1	208 257	7 081	29:1
	Primary	2 824 407	84 324	34:1	541 355	20 933	26:1
	JHS	952 151	54 210	18:1	180 167	12 795	14:1
2007/08	Preschool	1 491 96	929	38	35 715	5 781	26
	Kindergarten	1 016 606	27 437	37	241 877	8 299	29
	Primary	2 990 773	87 665	34	625 250	24 778	25
	JHS	1 0154 89	58 357	17	208 521	15 299	14
2008/09	Preschool	35 852	1 032	35	176 783	6 170	37
	Kindergarten	1 078 973	29 411	29	259 481	8 302	31
	Primary	3 041 895	88 994	34	668 752	25 427	26
	JHS	1 064 088	59 214	18	221 489	16 195	14
2009/10	Preschool	32 065	1 263	25.4	206 311	7 561	27.3
	Kindergarten	1 159 648	34 149	34.0	281 084	9 794	28.7
	Primary	3 099 234	101 21	19.3	710 024	29 736	23.9
	JHS	1 075 035	73 520	14.6	226 905	20 221	11.2

Source: EMIS, 2005-2010.

Table A45

**Total arrival and departure of selected 17 nationalities for children (from 0 to 17 years): 2006-2010**

Nationality	Total		2006		2007		2008		2009		2010	
	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP
<b>Grand total</b>	<b>332 273</b>	<b>346 552</b>	<b>51 530</b>	<b>54 209</b>	<b>59 832</b>	<b>64 021</b>	<b>72 287</b>	<b>75 410</b>	<b>71 732</b>	<b>74 048</b>	<b>76 892</b>	<b>78 862</b>
Ghanaian	108 764	119 109	17 351	19 966	20 169	23 110	22 783	25 236	24 981	24 673	23 479	26 123
Ivorian	13 217	12 429	2 075	2 179	2 632	2 501	3 208	2 925	3 254	3 053	2 048	1 772
Burkina Faso (of)	6 886	6 610	1 047	1 090	1 230	1 073	1 482	1 565	2 068	1 787	1 059	1 095
Nigerian	38 609	37 637	5 758	4 359	5 840	5 870	8 392	8 386	8 045	8 533	10 574	10 489
Liberian	7 595	8 967	1 163	1 634	1 343	1 618	1 756	2 283	1 844	1 961	1 488	1 470

<i>Nationality</i>	<i>Total</i>		<i>2006</i>		<i>2007</i>		<i>2008</i>		<i>2009</i>		<i>2010</i>	
	<b>ARR</b>	<b>DEP</b>	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP
South African	<b>6 001</b>	<b>17 622</b>	931	545	940	996	1 376	1 483	1 143	13 026	1 612	1 572
Togolese	<b>8 987</b>	<b>9 279</b>	1 570	1063	1 788	1 782	2 230	2 245	2 114	2 427	1 284	1 762
French	<b>4 937</b>	<b>5 059</b>	568	500	884	933	1 205	1 262	1 056	1 157	1 225	1 207
German	<b>7 542</b>	<b>7 853</b>	1 020	1 116	1 255	1 387	1 885	1 872	1 444	1 621	1 937	1 857
Dutch	<b>6 773</b>	<b>7 087</b>	1 073	1 090	1 365	1 322	1 595	1 745	1 136	1 369	1 604	1 562
British	<b>19 101</b>	<b>21 323</b>	2 112	3 269	3 157	3 917	4 350	4 654	4 260	4 285	5 221	5 198
American	<b>27 951</b>	<b>29 878</b>	4 188	4 903	5 070	5 842	6 347	6 346	4 823	5 436	7 524	7 352
Canadian	<b>5 570</b>	<b>5 872</b>	1 064	1 072	937	1 103	1 191	1 320	984	1 014	1 394	1 362
Chinese	<b>3 767</b>	<b>3 912</b>	479	590	580	657	808	825	805	845	1 096	995
Indian	<b>6 470</b>	<b>6 904</b>	1 029	1 107	1 109	1 275	1 487	1 527	1 183	1 349	1 661	1 645
Lebanese	<b>3 485</b>	<b>3 685</b>	535	534	737	842	869	887	630	731	714	691
Australian	<b>2 269</b>	<b>2 533</b>	512	556	305	363	502	604	419	508	530	503
Other	<b>54 351</b>	<b>40 793</b>	9054	8 637	10 491	9 431	10 822	10 245	11 542	274	12 443	12 207

Source: Ghana Immigration Service, 2011.

Table A46  
Annual distribution of fatalities by age group

<i>Year</i>	<i>0-5</i>	<i>6-15</i>	<i>16-25</i>	<i>26-35</i>	<i>36-45</i>	<i>46-55</i>	<i>56-55</i>	<i>Over 65</i>	<i>Total</i>
2005	120	184	276	375	273	138	101	82	<b>1 549</b>
2006	124	201	260	363	266	146	108	69	<b>1 537</b>
2007	109	214	369	579	379	191	120	81	<b>2 042</b>
2008	136	218	310	528	329	177	138	102	<b>1 938</b>
2009	130	250	388	609	383	222	141	109	<b>2 232</b>
<b>Total</b>	<b>619</b>	<b>1 067</b>	<b>1 603</b>	<b>2 454</b>	<b>1 630</b>	<b>874</b>	<b>608</b>	<b>443</b>	<b>9 298</b>
Percent	6.7	11.5	17.2	26.4	17.5	9.4	6.5	4.8	<b>100</b>

Source: National Road Safety Commission, 2011.

Table A47  
**Information on support provided to children affected by WFCL**

<i>District</i>	<i>Region</i>	<i>Sector</i>	<i>Achievements</i>
Ewutu-Efutu-Senya	Central	Fishing	200 withdrawn
		Quarrying	240 prevention
		C. Agric	
Ajumako Enyan Essiam	Central	Fishing	380 withdrawn
		Quarrying	700 prevention
		C. Agric	200 family support 8 community sensitization
Cape Coast	Central	Fishing & CSEC	300 withdrawn
			500 prevention
			150 family support
			13 community sensitization
Wassa West	Western	Mining	600 prevention
			300 withdrawn
			125 family support
			10 community awareness
Jasikan	Volta		313 withdrawn
Kpando	Volta	Fishing	300 withdrawn
			700 prevention
South Tongu	Volta	Ritual servitude	350 withdrawn
North Tongu	Volta	Cattle boys	450 prevention
			200 family support 10 community sensitization

<i>District</i>	<i>Region</i>	<i>Sector</i>	<i>Achievements</i>
Ketu	Volta	Sea fishing	200 withdrawn 300 prevention 100 family support 10 community sensitization
Accra Metropolitan Assembly (AMA)	GAR	Kayaye	100 withdrawn 200 prevention 20 family support 300 community sensitization
Ga West	GAR	Stone quarrying CSEC	300 withdrawn 500 prevented 10 community sensitization 300 family support 100 withdrawn 150 prevented 100 family support 5 community sensitization
Kwaebibirim	Eastern	C. Agric	550 withdrawn 100 prevented 300 parents 20 community awareness
Twifu Hemang Lower Denkyira	Central		300 withdrawn 600 prevented 100 parents



<i>District</i>	<i>Region</i>	<i>Sector</i>	<i>Achievements</i>
Obuasi	Ashanti	Mining	450 withdrawn 700 prevented 300 parents 10 community awareness
Kumasi	Ashanti	Kayaye/hawking	400 withdrawn 1 000 prevented 100 parents 10 community awareness
Puru	Brong Ahafo	Fishing	300 withdrawn 1000 prevented 100 parents 10 community awareness
Talensi Nandam	Upper East	Mining	150 withdrawn 450 prevented 100 parents 5 community awareness
Bolgatanga	Upper East	CDW Cattle herding	500 withdrawn 1000 prevented
Tolon Kumbugu	Northern	Kayaye	320 parents 20 community awareness
Techiman	Brong Ahafo	Kayaye	200 withdrawn 900 prevented 100 parents 10 community awareness

*Source:* Child Labour Unit of the Labour Department, 2011.

Table A48  
Cases involving violence and abuse against children (2010)

Offences	Victim		Suspect		Relationship			Cases Summary			No. Arrested		Treatment Of Cases					
	M	F	M	F	Close	Family	Others	Total	Refused	True	M	F	S/Court Convicted	A&D	A&T	Closed	U/Invest.	
Defilement	5	982	982	15	204	70	694	<b>986</b>	5	981	500	17	337	48	6	272	4	640
Attempted defilement	0	10	10	0	1	2	7	<b>10</b>	0	10	6	0	3	0	0	3	0	7
Sodomy	3	2	5	0	0	0	5	<b>5</b>	0	5	2	0	1	0	0	1	0	4
Incest	0	21	22	1	4	13	4	<b>22</b>	1	21	7	1	7	0	1	6	1	23
Child trafficking	6	6	4	6	2	0	5	<b>9</b>	0	9	2	4	1	0	0	1	0	8
Child stealing	3	7	5	5	2	5	5	<b>10</b>	3	7	10	4	1	1	0	0	0	9
Unlawful removal of child	112	235	243	89	151	181	9	<b>341</b>	8	333	147	57	3	0	0	3	80	250
Abduction	12	238	243	8	66	56	143	<b>239</b>	8	231	147	5	22	6	0	16	13	196
Exposing child to harm	50	73	50	70	38	80	6	<b>123</b>	5	118	43	43	2	0	0	2	31	85
Exploitative of child labour	0	0	0	0	0	0	0	<b>0</b>	0	0	0	0	0	0	0	0	0	0
Child abuse	2	4	3	3	2	4	0	<b>6</b>	0	6	3	1	1	0	0	1	2	3
Non-maintenance	403	4 479	4 674	143	1 820	2 392	584	<b>4 831</b>	33	4 798	3 377	46	190	28	0	162	1 744	2 864
Abortion	7	82	74	16	50	15	18	<b>89</b>	0	89	38	6	5	0	1	4	4	80
Compulsion of marriage	0	21	34	8	6	13	2	<b>21</b>	0	21	9	6	0	0	0	0	210	21
<b>Total</b>	<b>603</b>	<b>6 160</b>	<b>6 349</b>	<b>364</b>	<b>2 346</b>	<b>2 831</b>	<b>1 482</b>	<b>6 692</b>	<b>63</b>	<b>6 629</b>	<b>4 291</b>	<b>190</b>	<b>573</b>	<b>83</b>	<b>8</b>	<b>471</b>	<b>2 089</b>	<b>4 190</b>

Source: DOVVSU Secretariat, 2011.