

GOOD PRACTICES

Ghana Country Office 5th Country Program (CP5) 2006-2011

'Time with Grandma'(TWG)

Increasing Access to Adolescent Sexual and Reproductive Health
Information and Services in the Central Region of Ghana



DESCRIPTION & CONTEXT

In 2004, the Central Region of Ghana was well established as the fourth region exhibiting significantly poor performance across various indices such as Maternal Mortality Rate per 100,000 live births (134), Infant Mortality Rate per 1,000 live births (5.2), Contraceptive Prevalence Rate (34.3%), Proportion of Teenage Pregnancies (15.2%), and other secondary indicators such as early onset of sexual activity, access to primary health care services and prevalence of HIV.

The concept was conceived in 2005 by Dr. Samuel Kwashie of the Central Region Health Directorate of Ghana. The program is based upon the inclusion of traditional community leaders and elders in addressing sexual reproductive health issues at the community level. Previously, community sexual reproductive health strategies did not take into account existing cultural structures consisting of elders and traditional leaders. Within Ghanaian culture, Queen Mothers play a significant role as traditional leaders who pass on positive traditional and cultural values to adolescents and youth. Queen Mothers command great respect and serve as role models for young people, particularly girls.

Time with Grandma is an initiative based on this cultural structure, where 'Queen Mothers serve as 'Grandma'; however in 2007, in response to the need for a more gender-inclusive program, male traditional leaders and elders were recruited as 'Grandpas'. 'Grandmas' and 'Grandpas' helped to mobilize groups of adolescents and young adults and provide informational and educational materials that influenced behavior change on topics such as male and female reproductive systems, Family Planning, Sexually Transmitted Infections, HIV and AIDS, abortion, teenage pregnancy, personal hygiene, moral and cultural issues, as well as other relevant reproductive health topics.

UNFPA, the European Commission and its Ghana Health Service (GHS) counterparts piloted the first 'Time with Grandma' program in a small community called Besease, within the Ajumako Enyan Esiam district of the Central Region. From this one pilot program in 2005, the 'Time with Grandma' program expanded to six new communities in 2006. By 2010, the number of 'Time with Grandma' programs had more than doubled to 16 sites. In 2011, the program had established a total of 22 sites across seven (7) deprived districts in the Central Region, namely, Mfanstiman, Agona East, Agona West, Ajumako Enyan Esiam, Abura Asebu Kwamankese, Twifo Hemang Lower Denkyira, and Komenda Edina Eguafu Abrem districts.

From 2006 to 2011, UNFPA's overall total budget contribution for the 'Time with Grandma' program was GHC 895,272 or USD 773,181.



THEMATIC AREA

Reproductive Health, including Adolescent Sexual and Reproductive Health (ASRH).

PRIMARY KEYWORDS

Sexual and reproductive health, family planning, adolescents, youth, community, abortion, teenage pregnancy, traditional authorities, elders, behavior, utilization, health services, knowledge, culture.

OBJECTIVES

Overall Objective

To increase the adoption of better health seeking behavior and encourage utilization of reproductive health services.

Intermediate objectives are as follows:

1. To provide a common forum for collaboration between the Ghana Health Service (GHS) Regional Health Directorate and traditional authorities to appeal to adolescents and young adults (ages 10 - 24 years).
2. To increase knowledge, positive attitudes, and behavior change among adolescents and young adult beneficiaries on sexual reproductive health topics [e.g. male and female reproductive systems, Family Planning, Sexually Transmitted Infections (STIs), HIV and AIDS, abortion, teenage pregnancy, personal hygiene, moral and cultural issues, as well as other relevant reproductive health topics).
3. To increase access to sexual and reproductive health information and educational materials.
4. To promote uptake of sexual and reproductive health services through the Ghana Health Service and other private facilities.

The primary target group for 'Time with Grandma' is comprised of pre-teens and adolescents (10–19 years). The secondary target group is comprised of young adults (20–24 years).

STRATEGY, KEY CHALLENGES AND IMPLEMENTATION

Strategy

The overall strategy of the 'Time with Grandma' program was to supplement the Regional Health Directorate in addressing Sexual and Reproductive Health issues for at-risk populations, specifically adolescents and young adults (10 – 24 years). The program was designed along the common characteristic of Ghanaian folklore which is interactive in nature and in the form of oral storytelling. At the beginning of the story, the teller will recite a few common lines that will get a response from the listeners. Throughout the story any of the listeners may break in and sing a song by asserting that "they were there at the scene". This serves to break the monotony of the spoken word and allows others to participate in the performance. This program was designed to increase knowledge and access to reproductive health services offered by GHS and other private health facilities.

Key Challenges

There were several key challenges to the program, however, in priority:

- 'Grandmas' and 'Grandpas' reported a sense of uncoordinated NGO health activities and lack of knowledge of similar reproductive health activities to 'tap into'.
- Contributors reported insufficient and inadequate learning materials (brochures, pamphlets, books), teaching guides, visual & demonstration aids (i.e. video cassettes, dvds, cds, etc.), and recreational equipment.
- Contributors noted low attendance on the part of the male youth, where in 2011 the ratio was 65% girls to 45% boys.
- As the program continues without major donor support, there is a lack of ownership and accountability to regularly monitor program progress.
- Grandmas' and 'Grandpas' require more frequent visitation from implementing partners to demonstrate commitment and support for the programs. Grandmas and Grandpas currently feel somewhat abandoned.
- Beneficiaries reported inconvenient meeting places and inadequate structured spaces for adolescents and youth to convene on a consistent basis. Contributors and beneficiaries seek a youth center where they can convene, interact, and maintain consistent records.
- There was a pronounced lack of enthusiasm to join by certain adolescents due to illiteracy rates and an inability to

read materials amongst the youth.

- 'Grandmas' and 'Grandpas' reported the need for backstopping and additional capacity development in order to respond to expanding questions from adolescents.
- Participants reported that offering nutritional support through the form of snacks, drinks, and food would help to attract and retain adolescents during meetings.
- Due to recent lack of funds and support, the annual quiz competitions and conferences between sites that promote mastery of sexual reproductive health topics have been canceled. This cancellation may have a negative impact on target beneficiary morale to retain knowledge and stay within the group.
- Due to recent lack of funds and support, several of the sites are meeting less frequently and not remaining as vigilant to document and monitor activities and accomplishments.
- 'Grandmas' and 'Grandpas' have been advised to not engage adolescents and young adults in farming activities due to child labor laws and conflicts of interest; however, agricultural farming practices and Ghanaian societal values on agriculture and family participation directly conflict with labour laws.

5. Orientation of the 'Grandmas'/'Grandpas' and the implementation committee.
6. Registration of 'Time with Grandma' target beneficiaries.
7. Initial meetings with pre-teen, adolescent, and young adult groups to identify their needs and interests as well as plan activities.
8. Launch TWG program.
9. Carry out knowledge assessment of target beneficiaries on Adolescent Sexual Reproductive Health (ASRH).
10. Start regular ASRH activities with (3) separate age groups and separating the sexes: (10 -14 years), (15 - 19 years), and (20 - 24 years).
11. Hold quarterly on-site review meetings.
12. Conduct bi-annual review of 'Time with Grandma' activities with community members.

Implementation

'Time with Grandma' activities occur once or twice a week or alternatively once or twice a month, depending on the site.

The UNFPA team implemented the following cycle of 12 steps in order to replicate program sites:

1. Initiate dialogue with opinion leaders and other stakeholders to gain buy-in.
2. Conduct community sensitization activities (e.g., community durbars, meetings with church, groups/mosques, meetings with school children/teachers).
3. Selection of 'Grandmas'/'Grandpas'.
4. Selection of implementation committees at the community level.



PROGRESS AND RESULTS

- The establishment of 12 key steps influenced the rapid scale-up and replication of programs in 22 sites.
- Since 2006, twenty-two (22) program sites have been launched across seven (7) districts.
- As of 2011, there were sixty-three (63) traditional elders (comprised of 21 Grandmas, 21 Grandpas, and 21 Teachers).
- By September 2010, the program had reached approximately 4,600 adolescents (45% males and 65% females).
- Analyzing the trend of regional health indicators from 2004 to 2011. The TWG program may have contributed to the following:
 - Proportion of teenage pregnancies has decreased from 15.2% to 14.3%.
 - Maternal Mortality Rate per 100,000 live births has decreased from 134 to 115.
 - Infant Mortality Rate per 1,000 live births has decreased from 5.2 to 3.0.
 - Contraceptive Prevalence Rate has decreased from 34.3% to 29%.
- Contributors and community members report anecdotal evidence of decreased pre-marital sex in the number of pregnant school girls, increased awareness of HIV and AIDS, increased respect for elders in the family and community and improved personal hygiene practices.
- Increased availability of quality information on HIV/STI prevention and services for high risk groups and vulnerable populations.
- Increased awareness and recall of ASRH information.
- Increased recreational activities for the youth, so that they may engage in activities to avoid pre-marital sex, unwanted pregnancies, and STIs.

LESSONS LEARNED

The TWG program allows us to learn the following lessons:

- Working with youth and young adults requires a medium to long-term commitment to get involved in many additional socio-cultural aspects of their personal lives, including neglect, abuse, malnutrition, education, employment, and family and sexual relationships. The 'Time with Grandma' strategy to supplement Ghana's Regional Health Directorate is an innovative and harmonious approach within Ghanaian culture. The program builds upon established social and cultural structures of allowing traditional elders to complement government goals to increase knowledge, improve access to information, and promote uptake of sexual and reproductive health services.
- Developing a sense of community ownership as well as incorporating governance structures are critical steps towards securing a sustainable program. In communities where the District Assemblies and other stakeholders were in full support, program sustainability has been more assured than in other districts.
- The establishment of each program site is a highly participatory process that requires extensive advocacy and sensitization efforts. Important preliminary activities include holding durbars and town meetings to obtain political commitment and buy-in before engaging with any adolescents or young adults.

CONCLUSIONS AND RECOMMENDATIONS

- Better inform 'Grandmas' and 'Grandpas' of ongoing reproductive health projects and opportunities for collaboration.
- Provide vetted information and educational materials as teaching and learning support aids to 'Grandmas' and 'Grandpas'.
- Develop simple yet clear and attributable list of indicators for the program. Examples of suggested additional indicators are 'Number of Abortions', 'Number of Total Visits at New and Continuing

Acceptors within Family Planning', 'Incidence of STIs among Adolescents', and 'Proportion of Teenage Pregnancy.

- Maintain better records of number of adolescents and young adults registered, frequency of attendance, and documentation of beneficiary concerns.
- Replicate and scale-up the 'Time with Grandma' program in nine other regions of Ghana by order of unmet need and priority.
- Establish a coordinating committee to develop site budgets, source for funding, and plan for activities throughout subsequent years.
- Establish a regularized mechanism and point of authority for monitoring progress against a pre-identified list of indicators.
- Organize structured supervisory and monitoring visits to maintain and uphold the morale and willingness of 'Grandmas', 'Grandpas', and the youth.
- Support the establishment of adolescent recreational centers that will serve as a permanent structure for meetings and offer activities in support of moral and cultural values learned.
- Maintain the annual quizzes and competitions to encourage high interest in the mastery and recall of sexual reproductive health information.

PARTNERS

Ghana Health Service, European Commission, Planned Parenthood Association of Ghana.

SOURCES AND LINKS

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