SURVIVING THE STORM

innovation is the differentiator

2020 REPORT
GHANA COUNTRY OFFICE
The uncertainties, the fears and the worries were situations that accompanied the first broadcast by the President of the Republic of Ghana in March 2020 when the first two cases of the COVID-19 were reported in the country.

On March 11, 2020, the World Health Organization (WHO) had declared that an outbreak of the viral disease COVID-19 – first identified in December 2019 in Wuhan, China – had reached the level of a global pandemic. The scale and severity of the pandemic, clearly rises to the level of a public health threat that could justify restrictions on certain rights, such as those that result from the imposition of quarantine or isolation to limiting freedom of movements.

As a human rights organization, with a tagline of “Rights and Choices for All” we had to brainstorm on new ways, new concepts each day so as to inform and meet the expectations of our target population. We had to create new products, methods, and ideas and manage to look at problems differently and come up with solutions and provide an endless stream of value to our populace. Innovation was the differentiator in this case.

At the same time, we had to pay careful attention to human rights issues such as non-discrimination and human rights principles such as transparency and respect for human dignity so as to foster an effective response amidst the turmoil and disruption that inevitably result in times of crises and limit the harms that can come from the imposition of measures meant to curb the spread of the disease.

We were not medical doctors nor nurses, but just as the police was tasked to ensure observance of the restriction and keep peace, we as non-front-line workers, also took the risk and went out there to get people informed on the implications of people restricted to one place: the anger, the physical and emotional abuses. We had to provide for the vulnerable who needed basic hygiene kits to maintain their dignity. We went out there to cheer the caretakers of those who contracted the disease and had to stay away from their families just to save lives.

We innovated, we ideated and we survived the storm in 2020. We are optimistic better times are here with us.
### Acronyms/Abbreviations

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>AADPD</td>
<td>Addis Ababa Declaration on Population and Development</td>
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<td>ADOLEF</td>
<td>Adolescent Girls Learning Forum</td>
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<td>AfriYAN</td>
<td>African Youth and Adolescent Network on Population and Development</td>
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<td>AGP</td>
<td>Adolescent Girls Programme</td>
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<td>AIDS</td>
<td>Acquired Immunodeficiency Syndrome</td>
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<td>ARHR</td>
<td>Alliance for Reproductive Health Rights</td>
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<td>ASRH</td>
<td>Adolescent Sexual and Reproductive Health</td>
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<td>AU</td>
<td>African Union</td>
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<tr>
<td>AYFHS</td>
<td>Adolescent and Youth Friendly Health Services</td>
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<td>AYSDG</td>
<td>African Youth Sustainable Development Goals Summit</td>
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<td>CLG</td>
<td>Community Listening Group</td>
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<td>CM</td>
<td>Child Marriage</td>
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<td>CO</td>
<td>Country Office</td>
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<td>COMPASS</td>
<td>Community Public Address System</td>
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<td>CSO</td>
<td>Civil Society Organization</td>
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<td>CSPG</td>
<td>Cross-Sectoral Planning Group</td>
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<tr>
<td>CTA</td>
<td>Chief Technical Advisor</td>
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<tr>
<td>DD</td>
<td>Demographic Dividend</td>
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<tr>
<td>DMPA SC</td>
<td>Depot Medroxyprogesterone Acetate Subcutaneous</td>
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<tr>
<td>DOVVSU</td>
<td>Domestic Violence and Victims Support Unit</td>
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<tr>
<td>DP</td>
<td>Development Partners</td>
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<td>DV</td>
<td>Domestic Violence</td>
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<td>DVS</td>
<td>Domestic Violence Secretariat</td>
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<tr>
<td>EmONC</td>
<td>Emergency Obstetric and New-born Care</td>
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<td>FBO</td>
<td>Faith Based Organisations</td>
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<td>FP</td>
<td>Family Planning</td>
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<tr>
<td>GAC</td>
<td>Ghana Aids Commission</td>
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<td>GHS</td>
<td>Ghana Health Service</td>
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<td>GoG</td>
<td>Government of Ghana</td>
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<td>GP</td>
<td>Global Programme</td>
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<td>GPECM</td>
<td>Global Programme to End Child Marriage</td>
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<td>GPS</td>
<td>Geographic Positioning Systems</td>
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<td>GSS</td>
<td>Ghana Statistical Service</td>
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<td>Acronym</td>
<td>Description</td>
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<td>GTV</td>
<td>Ghana Television</td>
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<td>HFFG</td>
<td>Hope for Future Generations</td>
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<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
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<tr>
<td>IAWGE</td>
<td>Inter-Agency Working Group for Emergencies</td>
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<tr>
<td>ICPD</td>
<td>International Conference on Population and Development</td>
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<tr>
<td>ICPD-PoA</td>
<td>International Conference on Population and Development Programme of Action</td>
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<td>IEC</td>
<td>Information, Education and Communication</td>
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<td>ILO</td>
<td>International Labour Organisation</td>
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<td>INGH</td>
<td>International Needs Ghana</td>
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<td>JICA</td>
<td>Japan International Cooperation Agency</td>
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<tr>
<td>KASPRO</td>
<td>Kayayei Assistance Project</td>
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<tr>
<td>MDA</td>
<td>Municipal and District Assemblies</td>
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<td>MICS</td>
<td>Multiple Indicator Cluster Surveys</td>
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<td>MISP</td>
<td>Minimum Initial Service Package</td>
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<td>MMR</td>
<td>Maternal Mortality Ratio</td>
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<td>MoGCSP</td>
<td>Ministry of Gender, Children and Social Protection</td>
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<td>MoH</td>
<td>Ministry of Health</td>
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<tr>
<td>MTNDPF</td>
<td>Medium-Term National Development Policy Framework</td>
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<td>NADMO</td>
<td>National Disaster Management Organization</td>
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<td>NCSC</td>
<td>National Census Steering Committee</td>
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<td>NDO</td>
<td>National Data Observatory</td>
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<td>NDPC</td>
<td>National Development and Planning Commission</td>
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<td>NEIP</td>
<td>National Entrepreneurship &amp; Innovation Programme</td>
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<tr>
<td>NGO</td>
<td>Non-governmental Organization</td>
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<tr>
<td>NHIA</td>
<td>National Health Insurance Authority</td>
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<td>NHIS</td>
<td>National Health Insurance Scheme</td>
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<tr>
<td>NOYED</td>
<td>Net Organization for Youth Empowerment and Development</td>
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<tr>
<td>NPPoA</td>
<td>National Policy and Plan of Action</td>
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<tr>
<td>NYA</td>
<td>National Youth Authority</td>
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<td>OOS</td>
<td>Out-of-School</td>
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<td>PALEF</td>
<td>Partners Learning Forum</td>
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<tr>
<td>PASS</td>
<td>Promoting Adolescent Girls Safe Space</td>
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<tr>
<td>PAYDP</td>
<td>Purim African Youth Development Platform</td>
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<tr>
<td>PHC</td>
<td>Population and Housing Censuses</td>
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<tr>
<td>PLHIV</td>
<td>Persons Living with Human Immunodeficiency Virus</td>
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<tr>
<td>PPAG</td>
<td>Planned Parenthood Association of Ghana</td>
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<tr>
<td>PWD</td>
<td>Persons with Disability</td>
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<tr>
<td>Abbreviation</td>
<td>Full Form</td>
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<td>--------------</td>
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<tr>
<td>RCC</td>
<td>Regional Coordinating Council</td>
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<tr>
<td>RHESY</td>
<td>Reproductive Health Education and Services for Youth</td>
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<td>SDGs</td>
<td>Sustainable Development Goals</td>
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<tr>
<td>SGBV/HPs</td>
<td>Sexual and Gender-Based Violence and Harmful Practices</td>
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<tr>
<td>SGBV</td>
<td>Sexual and Gender-Based Violence</td>
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<tr>
<td>SMEs</td>
<td>Small and Medium-Sized Enterprises</td>
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<td>SRHR</td>
<td>Sexual and Reproductive Health and Rights</td>
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<td>SRH</td>
<td>Sexual and Reproductive Health</td>
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<tr>
<td>STI</td>
<td>Sexually Transmitted Infections</td>
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<tr>
<td>UBRAF</td>
<td>Unified Budget Results and Accountability Framework</td>
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<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<tr>
<td>UN</td>
<td>United Nations</td>
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<tr>
<td>UNYG</td>
<td>United Nations Youth Group</td>
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<tr>
<td>USAID</td>
<td>United States Agency for International Development</td>
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<tr>
<td>UWR</td>
<td>Upper West Region</td>
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<tr>
<td>WILDAF</td>
<td>Women in Law and Development in Africa</td>
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<tr>
<td>WHO</td>
<td>World Health Organization</td>
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<tr>
<td>WR</td>
<td>Western Region</td>
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<tr>
<td>YDI</td>
<td>Youth Development Index</td>
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<td>YoLe</td>
<td>Youth Leaders</td>
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Acknowledgments

The year 2020 was defined by the COVID-19 pandemic, leading to worldwide lockdowns, postponement and cancellation of activities and events and global disruptions, especially in the economy, among other challenges. Nonetheless the UNFPA country office staff in Ghana worked hard and their contributions are thankfully acknowledged:

**Contributors**

**Operations Support**

Appreciation to every other person, especially the YoLe Fellows, Interns, Volunteers and National Service Personnel.

**Design**
Eric Arthur and Caleb Afre Saah.

**Photography**
Jean-Philip Lawson, George Koranteng, Lavelle Oloye, Julius Mortsì & UNFPA Ghana 2020 Youth Leaders (YoLe) Fellows and Interns

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CHAPTER 1
Integrated Family Planning and Comprehensive Maternal Health Services

A mother and her newborn twins at the Mercy Women's Hospital
Background and Context

In 2020, one of the hardest hit sectors, impacted by the COVID-19 pandemic was the health sector. Overwhelmed health systems made it increasingly difficult for the efficient delivery and accessibility of Family Planning and Maternal Health Services.

However, during all these, UNFPA Ghana strengthened and renewed its commitment to achieving output one of its Country Programme, that is, strengthening national capacity in delivering integrated family planning and comprehensive maternal health information and services, particularly for adolescents and youth including those in humanitarian settings.

In this regard, UNFPA collaborated with its partners including MoH, GHS, MoGSCP, the District Regional Coordinating Councils, Maternity Foundation, Christian Health Association of Ghana and Midwifery Associations to deliver interventions aligned to the Government’s priorities on social development as prescribed by the Ghana Medium Term Development Policy Framework (2018-2021) and the ICPD Agenda.

Integrated Family Planning and Comprehensive Maternal Health Services

In 2020, one of the hardest hit sectors, impacted by the COVID-19 pandemic was the health sector. Overwhelmed health systems made it increasingly difficult for the efficient delivery and accessibility of Family Planning and Maternal Health Services.

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Programme interventions in 2020 focused on three main areas and contributed to the first output of the Country Programme Document 2018-2022:

A. Family Planning

Family planning efforts in 2020 centered around ensuring the continuity of Family Planning services and efforts amidst the pandemic. By collaborating with several partners in the public and private sectors, CSOs, and NGOs to deliver FP-related trainings to health providers, while ensuring the provision of FP services through various community interventions and outreaches.

B. Maternal Health Including Obstetric Fistula

Safeguarding maternal health remains a top priority for UNFPA, although the pandemic added on another layer of difficulty in safeguarding the maternal health of women and girls. By collaborating and partnering with NOYED, WILDAF, GHS, USAID, and JICA; UNFPA was able to train health workers, improve the availability of SRH services and essential medicines, perform a nationwide EmONC assessment and support fistula repairs nationwide.

C. Humanitarian Assistance

Ghana, for the most part, enjoys a socially and politically stable climate. However, in 2020, the pandemic coupled with the Bagre Dam spillage, floods from heavy rains and sporadic conflicts from the presidential and parliamentary elections held in the country caused some level of havoc and instability. These warranted. The CO delivered MISP trainings to three disaster prone district response teams, strengthened partnerships with agencies under IAWGE and NADMO, UNFPA also pre-positioned over 20 dignity kits in preparation for floods and crisis during the elections.

Additionally, the Country Office (CO) leveraged various social media platforms to educate people including adolescents about family planning- methods and benefits.
PROGRESS

Family Planning

606 nurses trained on administering Sayana press (DMPA SC)

34,000 people reached with maternal health-related information through online engagements on Twitter.

7,944 male and female condoms distributed in various under-resourced communities in urban and peri-urban locations.

$22,000

Mercy Women’s Hospital and the Tamale Regional Hospital supported with equipment worth over

2,004 individuals including persons living with disabilities reached with SRHR and FP information. Maternal Health Including Obstetric Fistula

100 dignity kits provided to mothers at the Tamale Central Hospital and the Mercy Women’s Hospital.

Over $200,000 raised to support EmONC Assessment.

4
The use of virtual platforms for various activities, aided the continuity of family planning, maternal health and humanitarian assistance related activities. Using such platforms allowed for interactions with larger groups of people from various locations and backgrounds at little or no cost at all.

Political commitment to FP is important in increasing commodity security.
Abena, a 19-year-old tertiary student was born with HIV. She has lived with HIV for 14 years. “My mom disclosed my status to me in my early teen years. Living with HIV has not been an easy road, but my mom has been of great support to me”, she affirmed.

In 2019, she was trained as a peer facilitator under the Norway-funded Out-of-School ASRH project to provide reproductive health information, including positive living with HIV, to her peers, especially young people living with HIV. She describes the experience as impactful and educative:

“I must say it was a learning experience for me. I was equipped with the right information in making decisions related to my sexual and reproductive health. I was also able to help peers in similar situation. As a facilitator, I provide my peers with information and refer them where it is beyond my capability. The capacity building sessions offered me the opportunity to network with other young people who are like me. When I see them, I get encouraged that I am not alone. I am truly grateful to UNFPA and HFFG for giving me this opportunity to learn and grow.”
BACKGROUND AND CONTEXT

Ghana has a relatively young population which puts young people and adolescents at the heart of population development dynamics. Young people (10–24 years) constitute over 30% of the total population of the country [Ghana Statistical Service 2012] whereas adolescents are estimated to be 5.5 million [Population and Housing Census 2010]. Half of the adolescent population in Ghana, aged (15 – 19 years) is female. Studies reveal a higher disparity in the vulnerability faced by girls as compared to their male counterparts. Adolescent girls are more likely to face challenges such as teenage pregnancy, child marriage, inadequate access to sexual and reproductive health services and encountering sexual and gender-based violence.

In the absence of an epidemic or pandemic, adolescents in Ghana face difficulties in accessing modern contraceptives and reproductive health information. They are also at risk of sexual exploitation, defilement or rape, sexual assault, and incest. Although, there is research on contraceptive access and domestic violence and its related issues during pandemics, there is empirical evidence to prove that women and girls have difficulties in access to reproductive health services, information and commodities and suffer more abuses in the form of rape, incest, and assault, especially during natural disasters and humanitarian crises. In view of this, UNFPA Ghana has implemented interventions under the Norway Out-of-School (OOS) ASRH project, the United Nations Joint Programme on Empowering Adolescent Girls and the Unified Budget, Results and Accountability Framework (UBRAF).

UNFPA Ghana, as part of efforts to ensure that every young person’s potential is fulfilled, continued to roll out interventions to sustain the gains made with regards to adolescent and youth sexual and reproductive health even amidst the COVID-19 pandemic. The CO implemented activities in partnership with Government through the Regional Coordinating Councils (RCCs), Ghana Health Service (GHS), Ministry of Gender, Children and Social Protection (MoGCSP); and with civil society through Alliance for Reproductive Health Rights (ARHR), Planned Parenthood Association of Ghana (PPAG), HFFG and the Purim African Youth Development Platform (PAYDP). The face-to-face interventions were minimised or halted, and were complemented or replaced with innovative, virtual activities. Where face-to-face interventions were necessary, staff and partners observed strict COVID-19 protocols.
The three main areas of focus for the ASRH intervention are empowering the individual adolescent girl or young person, creating an enabling environment for change and ensuring an effective and efficient coordination of adolescent and youth issues and programmes for synergy.

A. Empowering Adolescent Girls and Young People

UNFPA Ghana has supported Government and civil society to step up commitment through efforts and investments towards reaching adolescent girls, especially the most marginalized. The Country Office’s efforts have primarily targeted adolescent girls (10-19 years); in- and out-of-school, pregnant or mothers, with disabilities, refugees, migrants (specifically Kayayeis), street girls and young persons living with HIV. Various interventions – information and service delivery, capacity building and livelihood support- have also been targeted at the large and diverse proportion of young people (10-24 years) in Ghana, under the above-mentioned categories.

Interventions rolled out under the OOS ASRH Project and UBRAF are contributing to national efforts towards meeting the 90-90-90 targets [90% of all PLHIV know their HIV status; 90% of all people diagnosed with HIV infection receiving sustained antiretroviral therapy; and 90% of all people receiving antiretroviral therapy reaching viral suppression] through partnerships with civil society. The projects are empowering and equipping adolescents and youth, particularly young PLHIV with reproductive health and HIV-related information and services, and providing networking support for young PLHIV towards living free and fulfilling lives. Under the UN Joint Programme on Empowering Adolescent Girls, transformation-centered, innovation-based and gender-responsive set of interventions, targeted primarily at adolescent girls, especially the marginalised, were rolled out with funding support from Global Affairs Canada in 30 districts in Ghana. In view of the COVID-19 pandemic, UNFPA and its partners adapted and restrategyed on new initiatives that would adequately respond to the needs of young people, including adolescent girls, such as reflected overleaf.
E-engagements and Virtual Grooming of Young People, including Adolescent Girls

**E-classroom Series:**
In partnership with key stakeholders (PPAG, AfriYAN Ghana and Grace Health), the CO rolled out a four series certificate-based E-Classroom Series on the Adolescent Girls’ Programme (AGP) to provide mentorship and increase knowledge for over 400 young people on various SRH and SGBV-related topics, while taking stock of adolescent/youth innovations to improve SRH of young people, especially adolescent girls, before and during the humanitarian crisis.

**Community Listening Groups:**
The Community Listening Groups (CLGs) are offline satellite training centers for adolescent girls in hard-to-reach communities, facilitated by a trained focal person. The CLGs were utilised under the e-classroom series and follow-up engagements to promote interactive learning among young people, especially adolescent girls, in hard-to-reach communities.

**Cube Convos (Discourse Series):**
This discourse series is an innovative strategy adapted to reach adolescent girls in communities, schools and virtual platforms with SRH information, including on menstrual health. Trained facilitators interact with the girls in a format most understandable to them and in a safe space where adolescents are able to open up about SRH and SGBV-related challenges, and also request for information and referral points to address those challenges.

**HIV Outreach Webinar**
This was organised, under UBRAF, to step up HIV awareness among young advocates and tertiary students, in partnership with student leaders and CSOs. The virtual outreach provided young people with information on safe and healthy sexual practices, including HIV and AIDS prevention and treatment, the need for HIV testing, enrollment and adherence to antiretroviral treatments as well as referrals to youth friendly facilities.

**Youth Impact Series**
A four-week Youth Impact Series was organized by the UN Youth Group, chaired by UNFPA, to build capacities of young people to be agents of change in their communities. The Series, comprising 6 sessions, focused on themes of education, health, employment and entrepreneurship. The UN and AU Youth Envoys were featured in the Series.

**Because I Want to Be:** Implemented by the First Lady of Ghana’s Rebecca Foundation, the Because I Want To Be television episodes promote mentorship and informal engagements between Ghanaian celebrities, technical experts and adolescent girls. The show has been successful in interfacing hundreds of girls with their role models on a popular television station that broadcasts nationwide.
Capacity Strengthening and Service Delivery

Dignity Kits

Thousands of dignity kits and convenience items were provided to selected young, vulnerable populations (i.e. kayayeis, street girls, PWDs, boys and girls in detention, vulnerable persons in COVID-19 isolation/quarantine centres) amidst the humanitarian crisis, to reduce their vulnerabilities.

Virtual Service Delivery

In order to make service delivery possible amidst the global health pandemic, radio and online platforms were used to bridge the gap between young people and service providers. After providing critical SRH and SGBV information, referrals were done for young people to access services in safe places. Other young people received phone and door-to-door services due to referrals made via radio and online platforms.

Training of Health Personnel on AYFHS:

Ghana Health Service personnel were trained physically and virtually on the Adolescent and Youth Friendly Services Guideline, to enhance service provision to adolescents and youth in health facilities and outreach programmes.

Components of the interventions supported by UNFPA target empowering specific groups of out-of-school adolescents and youth that have been left behind with information and skills to make informed choices about their SRHR and well-being.
B. Enabling Environment for Change

The CO has placed emphasis on community-based interventions, while engaging duty bearers and stakeholders from political, traditional and religious constituencies, and key identified groups such as parents, men and boys, media personnel, law enforcers and community paralegals to spearhead advocacy and social and behavioral change activities on SRH, gender equality, SGBV, and issues affecting adolescent girls. Hundreds of parents, including assembly members and leaders have benefited from Parent-Child Communication trainings facilitated with content from the Parent-Child Communication Handbook on Reproductive Health Education, Gender Equality and SGBV.

C. Coordination of Adolescent and Youth Issues

The UN Youth Group (UNYG), chaired by UNFPA, is the coordinating body of youth-focused UN agencies in-country. The UNYG applies a coordinated approach for addressing adolescent and youth related issues including education, health, governance, livelihood and employment, in line with the UN Youth Strategy.

At the Country Office level, UNFPA supports Government through the Regional Coordinating Councils to coordinate and attune adolescent-focused interventions led by government and civil society partners. UNFPA also deepened support for the National Youth Authority in the coordination of young people through varied in-person and virtual approaches to advance deliberations on issues in alignment with the national youth policy.

Girls, including pregnant teenagers, teen mothers and migrant girls have also been empowered through community peer networking and support groups to demand their rights, services and support. Men and boys have been engaged in parents’ networking groups and men and boys’ clubs to become key influencers in advancing a paradigm shift for investment in adolescent girls at community level. Traditional and Faith-Based Leaders received continuous support to champion programs that mitigate vulnerabilities of young people, particularly adolescent girls, to SGBV, adolescent pregnancies and consequent SRHR challenges. This was particularly crucial in responding to the increasing cases of SGBV in the midst of the COVID-19 pandemic.
PROGRESS

Co-action with partners and stakeholders led to substantial gains in 2020.

Capacity Building/Orientations

Over 62,653 young people reached with SRH and SGBV modules through innovative social mobilization approaches by CSOs and YoLe Fellows.

Capacity of

30 adolescents built in Jamestown

on self-esteem, assertiveness, gender roles and stereotypes and sexual and reproductive health

made up of YoLe Fellows, interns and consultants trained on adolescent health and development, innovative social change and project management to empower and facilitate positive social change on Adolescent Health and Development issues.

23 young people

400 adolescents and youths

including those in hard-to-reach communities, built through E-Classroom Series on Empowering Adolescent Girls.

69 Muslim adolescent girls

engaged through interactive Cube Convo dialogue sessions on menstrual health, preventing teenage pregnancy, ending sexual and gender-based violence and assertiveness.

Over 62,653 young people reached

Community adolescent health clubs established/strengthened

to help enhance in-school SRHR education for adolescents, providing them a safe space to discuss their development and sexuality.

Capacities of
AYFHS

55,050 adolescents and young people reached with SRH and SGBV prevention information during COVID-19 peak and recovery periods especially during lockdown period.

4,401 girls provided with SRH services, with 85 girls referred for facility or outreach contraceptive services.

177 tertiary students and youth advocates reached with accurate information on HIV and AIDS through webinar.

219 adolescents and youth engaged in interactive Condomize side event at the 3rd African Youth SDGs (AYSDGs). Participants received information on SRH and HIV.

Over 1,000 PPEs and dignity kits containing sanitary towels, toiletries, hand sanitizers and nose masks distributed to vulnerable and marginalized groups (including Kayayei) during community door-to-door outreaches.
ADVOCACY

Over 15,000 young people provided with an advocacy platform to engage physically and virtually with experts, policy makers and influencers on adolescent and youth development issues at the 3rd AYSDGs. The young participants were provided a networking opportunity and a dialogue platform to discuss ways in which they can contribute to the attainment of the SDGs especially during the global COVID-19 pandemic.

MENTORSHIP

Because I Want To Be programme reached over 2 million Viewers,

421 girls engaged in mentoring programmes with influencers & traditional leaders.

200 girls through direct engagements.

500 girls through listening groups.
Lessons learnt

Frequent engagements with girls in conservative groups, like Muslim adolescent girls, is key to not leaving anyone behind.

Community door-to-door interventions are particularly relevant during humanitarian crises and specifically in times of lockdown as there were no or very few avenues to access SRH and SGBV information, referrals and services.

Increased, consistent and accurate information on HIV and AIDS encourages HIV testing among young people.

A Youth Leader (YoLe) Fellow offering information and contraceptives to a young person within a local community.
A Coordinated Response to Protecting the Rights of Women & Girls and Ending Sexual and Gender-Based Violence and Harmful Practices

Household Chores Matter in Transforming Communities: Percy’s Actions towards Gender Transformation
Percy Aboliwen Amwami is 13 years and the youngest member of the Men and Boys Club in Gbedema, Builsa South district, Upper East Region. The Men and Boys Club was established in the Upper East Region by UNFPA trained focal persons at the Department of Gender, under the Canada-supported United Nations Joint Programme on Empowering Adolescent Girls. He joined the club in August 2019. Percy is the tiniest among the tall men and boys in the club. His broad smile however, makes him look like the most confident member of the club. He lives with his mother and younger sister.

Apart from the sense of reputation that Percy feels from attending club meetings, he attests to the life-changing messages he has received from there. “I learnt from the club meetings that we need to help the girls and women in our homes with household chores. They are not slaves. They are our mothers and sisters”. Percy recounts the numerous times that girls in his school always arrive late because they were performing so many household chores. “When they come late, they also end up sleeping because they are so tired. Later when they fail their exams, the adults ask them to go and get married.”

Percy’s younger sister benefits from the knowledge he gains from the Men and Boys Club. According to him, he shares the information he gains from the club with his sister. He does more than that! “I sweep sometimes so that my sister can perform other household chores. I have taken it upon myself to always wash mum’s cloths, iron school and church cloths for my sister and I, so that we can all finish up on time and go to school or church.”
BACKGROUND AND CONTEXT

Adolescent girls mostly encounter some form of sexual and gender-based violence and inequalities gradually increasing the normalization of gender-based violence in most societies. Approximately 38.2% of adolescent girls are reported to have encountered at least one act of sexual violence. Adolescents in Ghana constitute about 21% of the total population making their development an issue of national interest. Adolescent fertility has increased over the years with 14% of adolescent girls aged 15-19 having begun childbirth. The prevalence of child marriage is a notable challenge in most indigenous communities where adolescent girls are seen as being old enough to undertake marital duties including childbirth. This has led to an increasing rate of teenage pregnancy in these areas.

The year 2020 was greatly defined by the COVID-19 pandemic, leading to worldwide lockdowns, postponement and cancellation of activities and events and global disruptions in all sectors, especially in the economy, among other challenges. Nonetheless, UNFPA and its partners, MoGCSP, International Needs, RCCs and PAYDP implemented the CO core programmes on sexual and gender-based violence and harmful practices, gender equality and empowering of women including the Global Programme to end Child Marriage and achieved major successes.

Through strategic alliances with critical state and CSO partners, major milestones were achieved to build the agency of adolescent girls at risk or affected by child marriage. Critical state and community stakeholders were engaged to advocate for the empowerment of women and girls and create the conducive environment that supports the holistic development of adolescent girls.
**AREAS OF FOCUS**

**A. Sexual and Gender-Based Violence /Harmful Practices**

There has been a coordinated response to protecting the Rights of Women and Girls and Ending Sexual and Gender-Based Violence and Harmful Practices by the CO in the year 2020. Recognizing the strong relationship of mutual trust and respect between religious leaders and community members, dialogue sessions were held with FBOs as a means of addressing issues of Teenage Pregnancy and SGBV. An FBO conference was held in Tamale as a follow up to earlier sessions held in the Upper West and Upper East regions to create a platform for Islamic clerics who are uniquely positioned as agents of change to deliberate on the menace and identify possibly ways of mitigating these issues.

In line with raising awareness and advocating to end SGBV, the UNFPA in partnership with the Pearl Safe Haven did a documentary of stories of SGBV survivors.

The stories were to sensitize the public to restrict and deter from the inhumane acts and to equally encourage victims, survivors, and activists to speak up and also seek support from reliable sources such as DOVVSU, the MoGCSP, and the Pearl Safe Haven. This documentary was shared with over 5000 online users, including young people during community participation and engagement activities.

Additionally, the CO partnered with telecommunication organizations such as MTN to circulate bulk messages on SGBV daily.

These messages communicated how to predict an abusive act and also sensitize the public on the available support to them, leveraging the available DOVVSU helpline. By this, over 9000 Ghanaians were sensitized with SGBV information via online platforms, bulk messages, and the press.

![some beneficiaries of the training program](image-url)
The Government of Ghana with support from UNFPA implemented series of activities for the 16 Days of Activism against Gender-Based Violence. An international campaign to reject violence against women and girls, the campaign runs every year from 25 November, the International Day for the Elimination of Violence against Women, to 10 December, Human Rights Day. The 2021 campaign under the theme: *Accelerating Action to Prevent SGBV in the Wake of Covid-19: The Role of Sustainable Funding*, focused on using arts to reject violence dubbed “Artivism”. For Activism to end SGBV in Ghana, Young people mounted an art exhibition of images and faces of survivors of violence and sexual abuses. The exhibition captured their voices and experiences which were played at the event to stimulate discussions among arts lovers, activists, young people and the general public.

*Dr. Afisah Zakariah, Chief Director of the Ministry of Gender (Left) and UNFPA Rep and Deputy Rep admiring some of the photos exhibited.*
Critical policy processes were also undertaken including the review, update, and dissemination of frameworks such as the NPPoA, Beijing+25 Report, Adolescent Pregnancy Strategy, RHESY Manual and the Guidelines for Peer Support Services. The Beijing+25 review highlighted the achievements and outcomes of the 10-year document. It outlined the emerging trends of domestic violence such as online abuse and forced relationships especially within the COVID-19 upheavals that needed focus in the updated policy for the protection of women and girls.

Despite the unprecedented times in the era of the global pandemic, UNFPA, under the Global Programme to end Child Marriage still employed rights-based approaches and packages to reach adolescent girls at risk or affected by child marriage. To ensure adolescent girls continue to access information and services, the packages included integrated information, skills and services through physical/virtual Safe Spaces to build their agency. UNFPA supported partners to deliver the packages.

This was particularly critical in the face of COVID-19 because according to the MICs Survey (2017/18), 19% of young women between the ages of 20-24 in Ghana were married before their 18th birthday. The rate is as high as 28% in the Northern & Upper East regions, and in general, the prevalence is higher in rural than in urban areas. According to the MICs (2017/2018), the prevalence rate for child marriages in the ten traditional regions is as follows:

<table>
<thead>
<tr>
<th>Region</th>
<th>Marriage by age 18 in (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Western</td>
<td>23</td>
</tr>
<tr>
<td>Central</td>
<td>22</td>
</tr>
<tr>
<td>Greater Accra</td>
<td>8</td>
</tr>
<tr>
<td>Volta</td>
<td>24</td>
</tr>
<tr>
<td>Eastern</td>
<td>23</td>
</tr>
<tr>
<td>Ashanti</td>
<td>17</td>
</tr>
<tr>
<td>Brong Ahafo</td>
<td>17</td>
</tr>
<tr>
<td>Northern</td>
<td>28</td>
</tr>
<tr>
<td>Upper East</td>
<td>28</td>
</tr>
<tr>
<td>Upper West</td>
<td>22</td>
</tr>
<tr>
<td><strong>National</strong></td>
<td><strong>19</strong></td>
</tr>
</tbody>
</table>

**C. Promoting Safe Spaces and Dignity for the Vulnerable**

*Renovation of SGBV shelter*

The SGBV shelter of the Domestic Violence Secretariat (DVS) of the MoGCSP was renovated with support from UNFPA. The shelter which was well-furnished and equipped with modern gadgets was handed over to the Ministry during the launch of observation of the 16 Days of Activism – 25th November to 10th December. MoGCSP can now boast of a safe space for DV victims.
‘Virtual Safe Spaces’ and mentorship

Virtual Safe Spaces and other e-platforms were used innovatively to continue the mentorship and protection of the adolescent girl.

An integrated package made of a minimum of 31 contact hours to build the health, social and economic assets of the adolescent girl was employed under the overall programme known as the ‘Enhance the Voice’ and Agency of Adolescent Girls, at risk or affected by Child Marriage.

The SISTAs clubs provided the packages using the new Reproductive Health Education and Services for Youth (RHESY) manual, which has been developed by PPAG to facilitate safe space sessions based on global best practices. The manual (hyperlinked- Reproductive Health Education and Services for Youth Manual has age appropriate and gender responsive content that is also socially acceptable.

PROGRESS

SGBV/HP

Over

200 physical participation with over 1,000 virtual people

took part in the “Artivism” to Activism to end SGBV art exhibition mounted by young people during the 16 days of activism on SGBV.

Capacities of

80 Muslim clerics built and engaged

as change agents in their constituents to advocate for the prevention of SGBV and teenage pregnancies.

Finally,

25 young people were engaged and trained as young paralegals

who were to help in the provision of education and paralegal services in their communities, while serving as agents of change at the grassroots to end Child Marriage at the country office.

▲ Members of the SISTAs Club
During the year under review, UNFPA Ghana supported programmes that empowered and built the capacities of about 500 critical stakeholders to facilitate their role in preventing and responding to incidents of SGBV/HPs and to act as champions and advocates for gender equality.

90 stakeholders from the judiciary, health, security and social services were sensitized on their role in the effective implementation of the DV Act as outlined in the Legislative Instrument.

95 cross-sectoral partners had two review meetings to track the implementation of the 5-Year Adolescent Pregnancy Strategy and its Institutional Framework as well as to assess the implementation of the strategic interventions.

60 paralegals from two markets were given refresher training on SGBV prevention and reporting channels to act as referral points for SGBV information and services during COVID-19.

A total of 100 high level representatives across Civil Society Organizations, Ministries/Departments and Agencies including the Security services were part of the dissemination workshop that provided major highlights of the Beijing+25 report for Ghana.

▲ Group photograph of participants at the training of adolescent paralegals on SGBV
POLICY AND ADVOCACY

In 2020, the GPECM supported a number of critical policy and advocacy frameworks that contribute to the empowerment of women and girls.

Through UNFPA support, MoGCSP mobilized major government and CSO partners to review the National Policy and Plan of Action (NPPoA) and the operational document that facilitate the effective implementation of the Domestic Violence Act (ACT 732) for Ghana.

The *Child Marriage Advocacy Toolkit* was updated to respond to new trends and nuances in the advocacy work against child and forced marriages and co-habitation.

In the second half of the year after COVID-19 restrictions, with the CM advocacy toolkit together with the UNFPA Framework for engaging Men and Boys to track the results of the action plans of the groups.

*7,800 various groups in structured sessions were engaged*

In 24 Boys Mentorship Circles across the 10 traditional regions in Ghana, to challenge toxic masculinities and behaviours that perpetuate imbalances of power between boys and girls in their homes, communities and in various sectors of the national economy.

*58 champions and representatives*

from the Men’s Clubs were empowered and are working as advocates in the UNFPA implementation areas for a knowledge and experience sharing session that facilitated the review of their plans and actions and highlighted best practices.

*155 HeForShe advocates were empowerd*

to champion gender equality and women’s rights with focus mainly on ILO Convention C190 in two regions; UWR and WR.
13 episodes of the Girlz - Girlz Power TV Talk Show was also aired on GTV and GHOne TV as part of the Season 2 which focused on adolescents’ adaptive strategies for COVID-19 and its associated restrictions.

A scene from an episode of Girlz Girlz Power Talk Show

5,800 girls reached with ‘Your Voice, My Voice’, campaign messages on Child Marriage at the peak of the COVID-19 pandemic in Ghana by the Department of Gender with support from UNFPA
KNOWLEDGE MANAGEMENT

- One key accomplishment under the GPECM is the establishment of a one-stop-shop database and information portal on child marriage by the MoGCSP. The system readily offers information on child marriage, SGBV and its related issues in an open-source application by the press of a button. The goal is to have a centralized system to improve dissemination of information, enhance data security, minimize the risk of data loss and ensure that data is accurate, complete, authentic and reliable.

- To ensure standards in health service delivery to adolescents, a Training Manual on Adolescent Health and Development and National Guidelines and Standards for Peer Support Services were reviewed, updated and service providers trained on their roll-out with support from the GP to improve ASRH service provision for adolescents and youth and ensure that peer support services provided nationwide by young people is standardized and support adolescent participation in planning, implementation and evaluation of health services.

- As a means of disseminating best practices in a user-friendly way in order to ensure that replication and scale-up is easier, UNFPA developed innovative IEC materials from the findings and recommendations from the report that was produced from the Assessment of the SISTAs Clubs in the form of calendars, info pack, fan, etc.

Promoting Safe Spaces and Dignity for the Vulnerable

Through UNFPA’s support, PAYDP engaged a total of 8,275 marginalized girls (comprising of Kayayei and Adolescent Mothers) through the Enterprise Development Centres, the annual Kayayei Business and Leadership Fair.

A beneficiary of KASPRO displaying some results of her training, hand-made decorated slippers

10,317 girls empowered

Through ‘Virtual Safe Spaces’, COMPASS and other e-platforms as well as small group meetings, INGH and PPAG worked to empower adolescent girls through the PASS and SISTAs Safe spaces.
Under the umbrella programme, 'Shaping Futures': an Integrated Approach for marginalized girls which involves Reproductive Health, Empowerment and Leadership, the interventions sought to reduce the vulnerability of the girls to SGBV, child marriages and other harmful practices.

The maiden Adolescent Girls Learning Forum (ADOLEF) on the fringes of PALEF, 50 girls from the UNFPA supported safe spaces; SISTAs Clubs, Kayayei Networks and PASS were brought together for exchange of experience and knowledge on the most effective strategies and interventions in their safe space meetings.

LESSONS LEARNT

The COVID-19, gave UNFPA and partners the opportunity to think outside the box in order to prevent and respond to SGBV and other harmful practices as well as build the agency of girls for empowered life transitions.

The provision of 'Safe Spaces' particularly during the period of the COVID-19 restrictions in Ghana, enabled the delivering of the needed ASRH support and services to prevent unintended pregnancies.
Data and statistics are central to the development of Ghana, particularly as data and statistics are used to measure the progress of programmes and interventions in the country and report on results. Without accurate and detailed data on the size, distribution and composition of the population, it is impossible to plan and implement activities, measure the achievement of socio-economic development and conduct scientific research.

The main conventional sources of demographic data in Ghana are the population censuses, demographic sample surveys, administrative data including those obtained from annual reports from ministries, departments and agencies and the civil registration system that routinely record vital demographic data including births and deaths in the country. The civil registration system records births, deaths, marriages and divorces. Even though the system has existed for many years, it is not functioning as expected, however, efforts are being made to improve coverage.

UNFPA has been supporting the Government of Ghana in the generation and provision of data and evidence-based advocacy by collaborating with the Ghana Statistical Service, Ghana Health Service, National Development and Planning Commission, National Population Council Secretariat and other key partners.
Ghana has a youthful population. According to the Ghana Statistical Service, the population of Ghana increased at an annual growth rate of 2.5 percent from 2000 to 2010. The population of Ghana is currently estimated at 30.8 million in 2020 (males representing 49.2 percent and females recording 50.8 percent). As of 2020, young people are estimated to be 29.5 percent (males 30.2% and females 28.7%). The national HIV prevalence in 2014 was 1.6 percent, 2.4 percent in 2016, 2.1 percent in 2017, 1.7 in 2018 and 1.6 percent in 2019 (GAC, 2019).

### Table 1: Demographic, Fertility and Mortality Data

<table>
<thead>
<tr>
<th>Indicators</th>
<th>2010</th>
<th>2020</th>
<th>2030*</th>
<th>Indicators</th>
<th>2014</th>
<th>2017</th>
<th>Indicators</th>
<th>2007</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population</td>
<td>24.7m</td>
<td>31.0m</td>
<td>37.9m</td>
<td>Total Fertility Rate</td>
<td>4.2</td>
<td>3.9</td>
<td>Maternal Mortality Ratio</td>
<td>580</td>
<td>310</td>
</tr>
<tr>
<td>0-14</td>
<td>38.3%</td>
<td>36.1%</td>
<td>34.7%</td>
<td>Contraceptive Prevalence Rate</td>
<td>35%</td>
<td>25%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15-64</td>
<td>57%</td>
<td>58.7%</td>
<td>60.5%</td>
<td>Unmet Need</td>
<td>35</td>
<td>29.9%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>65+</td>
<td>4.7%</td>
<td>4.3%</td>
<td>4.8%</td>
<td>Child Bearing</td>
<td>14.2%</td>
<td>14.4%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sex Ratio</td>
<td>95.2</td>
<td>96.9</td>
<td>98</td>
<td>Neonatal Mortality</td>
<td>43</td>
<td>25</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dependency Ratio</td>
<td>76</td>
<td>70</td>
<td>65</td>
<td>Infant Mortality</td>
<td>41</td>
<td>37</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Life Expectancy</td>
<td>61.8 years</td>
<td>64.8 years</td>
<td>67.8 years</td>
<td>Under Five Mortality</td>
<td>60</td>
<td>25</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: GSS, 2013, 2014*; Source: GSS et al, 2015; 2018; MMR deaths/100,000 livebirths
Area of Focus

The Population and Development component of the CO’s programming is focused on three main areas namely, Population and Housing Censuses, the International Conference on Population and Development (ICPD programme of Action) as well as the ICPD+25/Nairobi Commitments and Harnessing the Demographic Dividend in Ghana

A. 2021 Population and Housing Census

Ghana was to undertake its sixth post-independence census in 2020. Unfortunately, the COVID-19 pandemic, threw the plan overboard as the nation had to re-direct resources to respond to the pandemic. With a firm grasp on the mechanisms to curb the pandemic, preparations are ongoing to conduct the PHC in 2021. Ghana has conducted five national population censuses since independence: 1960, 1970, 1984, 2000 and 2010.

The 2021 PHC will involve the use of Computer Assisted Personal Interviewing devices (Tablets) for electronic data capture and Geographic Positioning Systems (GPS) for recording and coordination of structures as recommended by the United Nations.

The 2021 Census (digital census) comes with several technological innovations to improve census implementation and the relevance, timeliness and quality of data produced. The census which was originally scheduled for 2020 has been postponed to 2021 due to the COVID-19 pandemic. UNFPA, the lead partner agency, is working closely with the GSS to ensure that the 2021 Census methodology and modus operandi adhere to the UN Principles and Recommendations for the 2020 round of Population and Housing (PHC) Censuses. In conformity with UNFPA guidelines that countries should rather push for postponement, not cancellation of census due to COVID-19. The Ghana Statistical Service rescheduled the census.

B. AADPD+5/ICPD+25/Nairobi Commitments

The International Conference on Population and Development (ICPD) was held in Cairo, Egypt in 1994 adopted the revolutionary International Conference on Population and Development Programme of Action (ICPD-PoA) by 179 countries. The key to the strategy was empowering women and providing them with more choices through expanded access to education and health information and services, skills development and employment creation. Ghana was part of the global ICPD Beyond 2014 initiative, which was endorsed by African Heads of State at the 2014 African Union Summit in which the AADPD was adopted with 88 commitments grouped around the

Personnel of UNFPA and GSS on the field working ahead of the conduct of the 2021 PHC
following seven pillars, namely dignity and equality, health, place and mobility, governance, data and statistics, international cooperation/partnerships and implementation. Ghana reported on the implementation of the ICPD PoA in 2019 at the Nairobi Summit and renewed commitments to be achieved by the year 2030.

COVID-19 pandemic disrupted the implementation of activities for AADPD+5/ICPD+25/Nairobi Commitments as well as Harnessing the Demographic Dividend in Ghana. However, the Country Office in collaboration with stakeholders adopted the virtual means to conduct some of the activities.

C. Harnessing the Demographic Dividend in Ghana

The demographic dividend (DD) is a result of a continuous decrease in the fertility and mortality rates of a country to facilitate economic growth and development. This scenario results in changes in the population age structure of the country. Further, the young dependent population, who are less than 15 years experience a reduction in proportion as compared to the working-age population (15-64).

With fewer dependents (children and aged) to support, a country has a window of opportunity for rapid economic growth if the country invests in social and economic policies to promote quality and healthy population among others. Currently, Ghana is experiencing a decreasing trend in fertility and mortality rates. Following significant declines in fertility over the past two decades that have effected changes in the age structure, characterised by a youth bulge suggest that Ghana’s demographic dividend window is currently opened.

▲ A young person displaying distributed condoms after an information session on Adolescent Sexual and Reproductive Health
2021 Population and Housing Census

A National Census Steering Committee (NCSC) was established as the highest decision body for the implementation of the 2021 PHC. They have an overall oversight responsibility for the conduct of the census and ensure that key processes, content, and outcomes of the census respond to national and international benchmarks.

UNFPA at the request of Government of Ghana, recruited a Chief Technical Advisor (CTA) to provide technical support to the 2021 PHC.

UNFPA provided technical support in monitoring various processes undertaken by GSS to test aspects of the scheduled 2021 PHC. These included virtual and physical trainings conducted for Trainers, training and field work of the Ghana National Household Register in the Northern Region, and the training of field personnel of the Phase III Trial Census.

The UNFPA facilitated the procurement of 20,000 tablets and accessories for the PHC. Documentation has been completed and at least 4,000 tablets and accessories will be airlifted, while the additional will be shipped by sea to reach Ghana in early March 2021.

Development Partners Meeting for 2021 Census. As part of preparations and contributions towards the upcoming 2020 Population and Housing Census, UNFPA Ghana in collaboration with Ghana Statistical Service (GSS) convened a meeting with Development Partners at La Palm Royal Beach Hotel, Labadi, Accra. The meeting was held on Thursday, 5th November 2020. This interactive meeting was to re-engage the Development Partners to provide an update on the status of preparations towards the Census and discuss strategic areas of partnership and support.

A group of enumerators receiving training
AADPD+5/ICPD+25/Nairobi Commitments

With the support of UNFPA, the Government of Ghana led by the National Development and Planning Commission developed the 2018 AADPD+5/ICPD+25 Ghana Country Report. The report outlines the progress made in the implementation of the ICPD-PoA over the past twenty-five years, as well as, challenges and prospects for the acceleration of the implementation of the PoA in the country.

Nairobi Summit
The implementation of the AADPD+5/ICPD+25 Country Report informed the development of the Government of Ghana’s (GoG) ICPD+25 commitment statement for the Nairobi Summit in November 2019. The Summit was attended by the Government of Ghana, UNFPA and CSOs. The main focus of the Summit was the endorsement of three voluntary transformational global goals:
(i) Zero unmet need for family planning;
(ii) Zero preventable maternal deaths; and
(iii) Zero gender-based violence and harmful practices against women, girls and the youth to meet the ICPD +25 commitment and achieve the Sustainable Development Goals (SDGs) by 2030.

Ghana developed a policy framework on the Commitments with five-yearly targets from 2019 to 2029. The targets have been extended to 2030 to align with the SDGs. This framework will feed into the next Medium-Term National Development Policy Framework, 2022-2025, which is being led by the National Development and Planning Commission.

Cross-Sectoral Planning Group on Population and Development and Migration
UNFPA supported and participated in two CSPG meetings held by NDPC in November and December 2020. The CSPG meetings were part of the process of developing the next MTNDPF (2022-2025) document. The purpose of the CSPG meetings was to capture and discuss key issues, policy objectives, priorities and strategies to inform the next policy framework. Some of the issues and indicators in the AADPD+5/ICPD+25 policy framework were considered in the MTNDPF.
Harnessing the Demographic Dividend in Ghana

Virtual meetings were used to ensure completion and validation of the YDI and Ghana Country Population Profile Report on National Transfer Account on Demographic Dividend Programming. Partners and key stakeholders were supported with data bundles to join virtual meetings for discussion.

National Youth Development Index.

In December 2020, the NDPC, in collaboration with the NYA and UNFPA developed the National Youth Development Index. The YDI will be used to measure the progress of youth development and empowerment, which are critical areas of investments for harnessing the demographic dividend. The document highlights sub-national characteristics of youth development, encourages institutional collaboration, draws comparisons on the challenges and opportunities specifically for the youth; and identifies and indicates areas for investment on the youth.


In April 2018, Ghana hosted a technical training workshop for national experts from four anglophone countries on using National Transfer Accounts to measure the demographic dividend. Following the training, Ghana was required to develop its country report with a broader group of stakeholders for publication and dissemination. In August 2020, UNFPA Ghana in collaboration with NDPC has developed the Ghana Country Population Profile Report on the National Transfer Accounts for Demographic Dividend Programming. This document is part of UNFPA efforts to support the Government of Ghana in harnessing the demographic dividend.

DemDiv Model: Advocacy Tool for Harnessing the Demographic Dividend.

As part of the post-National Transfer Accounts activities to harness the demographic dividend, the UNFPA, Ghana supported the National Experts in the development of the DemDiv model. The DemDiv Model addresses the complexity of the demographic dividend by linking the age structure with social and economic development. The model enables policymakers to quantify the changes that would be required to successfully achieve a demographic dividend. The model uses multiple scenarios to show how a combination of multisectoral policy investments can support the country to harness the demographic dividend. The results from the model indicate that promoting family planning in addition to the economy and education will have a greater influence and accelerate the socio-economic development of Ghana. The model shows four policy scenarios that delineates the demographic dividend or economic benefits attributed to changes in population age structure.
National Data Observatory for Harnessing the Demographic Dividend

UNFPA, Ghana is supporting NDPC to spearhead the establishment of a National Data Observatory (NDO) for Demographic Dividend. The NDO is to ensure transparent and equitable access to national data for demographic dividend programming. In this regard, UNFPA, Ghana developed a guideline document in November 2020 on the establishment of the NDO to guide the NDPC in establishing the Observatory. The Observatory will be made up of five units, namely; Data Collection and Backup; Analysis and Modelling; Advocacy, Communication and Dissemination; Partnership; and Information Systems.

Capacity Building in NewGen Model: Advocacy Tool for Adolescents and Young People Reproductive Health Programming

Yole Fellows affiliated with the Population and Development Unit were introduced to the NewGen Model in May 2020. The model generates new evidence/data to support and inform Young People Sexual and Reproductive Health Programming and Services. The training was to build the capacity of the fellows in issues and data on adolescents and young people in Ghana. It was also for the Fellows to know how to use data on to inform sexual and reproductive health policies and programming. Some of the areas presented are sexual and domestic violence, abortion, HIV and AIDS and sexual and reproductive health-related policies such as the Young People Sexual and Reproductive Health Policy, 2017 and the National Population Policy, 2017.

Lessons Learnt

2021 Population and Housing Census

- **Procurement of Tablets**
  The process of procuring more than 70,000 android-based tablets and GPS-enabled tablets and accessories commenced rather late mainly due to the unavailability of the budget. This sufficiently limited the procurement lead-time for the magnitude of tablets and options to borrow from Kenya and Ethiopia failed. However, efforts have been made to have the tablets in Ghana by March 2021.

- **Funding**
  The Government of Ghana relies on UNFPA to provide technical, financial and logistic support in conducting the Census. This support has however been minimal due to inadequate resources and challenges in mobilizing resources. GSS has been advocating to DPs, MDAs and CSOs for additional support.
• **Census Business Continuity Plan**
In March 2020, a Census Business Continuity Plan has been drawn up by GSS to ensure the continuity of Census activities amidst the COVID-19 pandemic. This made it possible for some census activities including the training of Master Trainers and National Trainers, data quality monitors, IT support officers, and senior field supervisors to be conducted online. Where there was the need for a physical (face-to-face) meeting, GSS observes COVID-19 protocols. The use of virtual meetings enables all workstreams to regularly take stock of progress and make key decisions.

• **Trial Census**
Multiple trail census enabled GSS to test different aspects and processes of the census and provided GSS with an opportunity to test the instruments and procedures of the digital Census so to enable the experiences, lessons learned and challenges to inform the conduct of the mini census.
Gifty Bani is an 18-year-old girl from Aaba in the Upper East Region of Ghana, who travels to Accra during her school vacations to work as a ‘Kayayo’. Due to the closure of schools because of COVID-19, she was unsure of her return to school and was taking advantage of the school closures, to save as much money as possible. She wants to become a nurse one day, but the hardships faced by her family makes it difficult for her to pursue her dreams. She works as a ‘Kayayo’ to save money for her school, but also to fend for her siblings and her parents. Gifty was one of the 500 Kayayei who were enrolled under the Kayayei Assistance Project (KASPRO) and was the leader of her group of 20 Kayayei. Through the project, Gifty was able to save money for school, as KASPRO provided her basic needs. She also benefitted from the sexual and reproductive health education that was provided during the project, through which she learned to protect herself from Sexually Transmitted Infections (STIs) and unplanned pregnancies. She told the KASPRO team “All of these will help me protect myself and get me back to school in my village.”
Innovation is the cornerstone of sustained growth, development and prosperity. Innovation increases one’s chances to react to changes and discover new opportunities. It also helps to foster competitive advantage as it allows one to build better lice and choices.

UNFPA, Ghana is using innovation as one of its pillars to achieve the three transformative results come 2030. This novelty means using new ideas, technology, new ways of thinking to add value to the existing ones so as to make substantial changes in society and make an impact particularly in the lives of women and young people.

The main novelty is the launch the Youth Leaders (YoLe) Fellowship Programme in November 2018 with 16 young people enrolled. This novelty introduced into the 7th Country programme implementation has contributed significantly to the CO’s successes in 2019/2020.

With the second cohort of 21 young people, they worked tirelessly during the pandemic to educate and disseminate information to the public so as to keep them safe. The young people have the energy and they drive innovations to the unique problems faced by young people; such as access to health and equity, poverty, employment and entrepreneurship, and technology.
A. Creative Development

Creative Development – Innovations are essential to turn new happenings into realities. One can achieve growth by learning how to be creative. The CO had to be creative with the emergence of the coronavirus and need to learn skills to help make things of value from the creativeness.

The first creative development from the COVID-19 crises was the introduction of the UNFPA Ghana Virtual Learning Campus which comprises E-workshops/Webinars/ E-Classrooms and the Youth Impact Series adopted by the entire UN system in Ghana. The UNFPA CO, recognizing the socioeconomic and programmatic effects of the pandemic, galvanised resources to integrate COVID-19 into its strategies and activities, and instituted measures to alleviate the effects of the pandemic on its target beneficiaries, with focus on its thematic areas.

Activities such as trainings, (workshops), information sharing, education and sensitization were mainly undertaken virtually to ensure continuity in programming, in line with the CO’s projects and interventions.
UNFPA focused on SGBV prevention and coordinated response during the pandemic. The first step was to support the Domestic Violence and Victims Support Unit of the Ghana Police Service to activate the DOVVSU Helpline 055 1000 100 to report cases of SGBV. This was to give voice to victims so that they could report any form of abuse and also seek succor. The COVID-19 pandemic affected women and men differently and exacerbated existing gender inequalities for women and girls. Global research supports the fact that women and girls were likely to experience up to 3.7 times more domestic violence in crises than at other times; hence, this strategy as part of the measures in addressing Sexual and Gender-Based Violence within the COVID-19 response in Ghana.

Another measure was the development of the BOAME Application. One major issue of concern for SGBV cases is the issue of victim’s security and protection. Thus, in the case where a victim feels unsafe and unable to report a case, then the system has failed in its attempt to protect its reporters or victims. As such, BOAME SGBV App permits user security by ensuring that users can seek psychosocial support through the use of the App. Audio and Video functionality of the app also permits users who cannot read and write to record the scene of abuse and upload. This also serves as evidence for persecution. The app is going through the final stage of trial and will be launched in 2021.

B. Continuous Improvement

Innovation gives organizational sustainability when one is making continual improvements and repackaging and re-branding. For programme sustainability, it is important to recognize and innovate to meet the demands of your target audience, a reason for which UNFPA Ghana intensified its partnerships with the prudential Life Insurance to implement the Kayayei Assistance Project - KASPRO.

In response to the unfolding COVID-19 crisis in Ghana, UNFPA designed and implemented the Kayayei Assistance Project (KASPRO) to address the unfortunate realities such as sexual and gender-based violence, unplanned pregnancies among others that had been on the increase especially among vulnerable populations as a result of the pandemic. The innovative project targeted 500 Kayayei whose poor living conditions expose them to many social vices including abuse, sexual harassment, and even death. It was built on four pillars as follows: SRHR & SGBV education, vocational, business and
entrepreneurial skills training, nourishment & dignity and access to basic healthcare through the National Health Insurance Scheme (NHIS). UNFPA in partnership with the National Health Insurance Authority (NHIA), enrolled all 500 Kayayei onto the National Health Insurance Scheme (NHIS).

C. Reinforcing UNFPA Brand

This process is used to reveal information and help people learn other ways to be more innovative. UNFPA Ghana built the capacity of its frontline communicators on data visualization. This strategy was used as one of the main drivers for success and gives the opportunity to tell the organizational story, maintain the gains made to sustain the brand identity.

The intensive and interactive training focused on creating and maintaining an up-to-date UNFPA media presence among the public and strengthening public awareness on programme activities, results and achievements using digital and social media. They were taken through cooperate identity, trust, image and reputation. They were equipped with skills on new media marketing. Where the media deliver content digitally; from websites, blogs, emails, social media networks, music and television streaming services. It is today’s social life.

▲ A Kayayei displaying her NHIS registration card

This gives them access to basic healthcare services at no cost. This brought about improvement over the earlier interventions with Kayayei in Ghana.
Progress

Creative Development

They received over 300 hours of professional training.

With the assistance of the YoLe fellows, the UNFPA Country Office was able to carry out six outreaches which reached a total of

10,638 people with information on SGBV during the pandemic. 2110 males, 3009 females and 5519 adolescent boys and girls.

Over more than 15 sessions were offered at the virtual learning campus and each session reached over 150 participants with a cocktail of thematic areas that included SRH, family planning, SGBV, autism, maternal health & obstetric fistula, education, innovation, and young people in slums.

21 young people were recruited into the second cohort of the Youth Leaders Fellowship Programme.

They distributed 16,000 dignity kits and essential items in underprivileged communities in Accra.

The Youth Leaders spent over 45 hours a week for 31 weeks to support the country office staff in programme implementation.
500 new cases over the period of five (5) months, were reported via the helpline and these cases were sent to DOVVSU for immediate actions.

200 Professionals with experience in psychosocial, counselling, Legal, Medical & SRHR/SGBV and support have received training on SGBV from a well-structured BOAME Volunteer Corp.

The Psychosocial Team of the BOAME Volunteer Corp have received training on SGBV.

Continuous Improvement

500 Kayayei enrolled onto the National Health Insurance Scheme and currently have NHIS cards which provide them with basic healthcare services free of charge.

500 Kayayei had received 92 hours of SRHR & SGBV education.

172 Kayayei received vocational training in Soap making, Beads making, Shea butter production, Bread and pastry making, Kulikuli and Yoghurt production.

Over 2000 Dignity Kits and 500 Nutrition packages were distributed over the six months period.

16 community gatekeepers were engaged to help them appreciate the need for the vulnerable girls to be empowered.
Lessons Learnt

Distinct partnership is an accelerator of success

The success of KASPRO can be duly attributed to the partnership established with Government and the Private Sector in implementing the project. Government, organisations such as NHIA facilitated the registration of all participants onto the NHIS scheme. That of NEIP helped in providing soft skills training including financial literacy skills, personal branding, business branding, and proper bookkeeping skills to help aid in SME for the girls. While the private sector partnership with the Prudential Life Insurance Ghana aided in raising funds to support the implementation of the project.

![Image](image.png)

▲ Items being distributed to the Kaspro beneficiaries

Meaningful Youth Involvement

The drive, creativity and fresh ideas of the Youth Leaders Fellows contributed to the successes of the country office special initiatives such as the Virtual Campus learning, SGBV- BoaMe and the Kayayei Assistance Projects.

Data Management

Data caption and proper data management contributed immensely to the success of KASPRO. Photo IDs created for all registered ‘kayayei’ were helpful in identifying the names of individuals who attended the sessions and ensure that the same group of people was engaged consistently. This prevented any impersonation and other inconsistencies ensuring the quality of the project outcomes.