



PROJECT REVIEW

Putting Women and Girls at the Center of PHC in Ghana



PRESENTATION
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2025

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INTRODUCTION

01 Introduction of Project and communities

- 02
- 1. Total Number of Individuals engaged
 - 2. Data by sex, disability, adolescent etc
 - 3. Number of existing groups educated
 - 4. Key strategies used during the education

COMMUNITY EDUCATION

IMPACT

03 GMFs

04 Agona Bobikuma Health Center - case study

KEY ADVOCACIES

LESSONS LEARNT

05 Innovative starategies, success stories etc

06 Implementing challenges and the way forward

CHALLENGES & RECOMMENDATIONS



INTRODUCTION



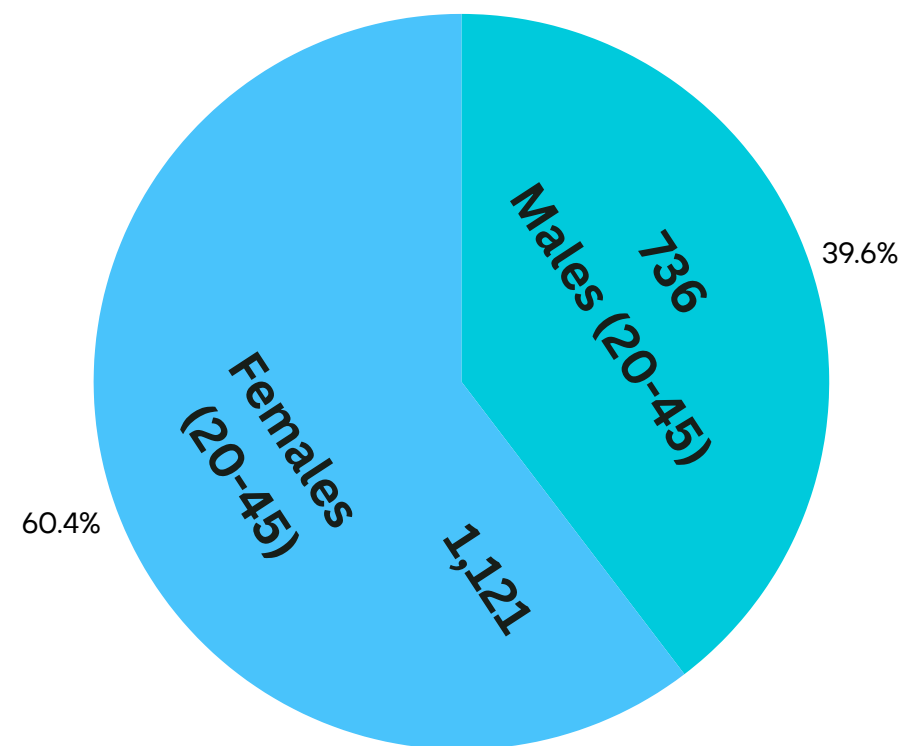
Community Education was held in two districts namely, Agona West Municipal Assembly and Gomoa Central District both in the Central Region of Ghana.

Gomoa Asebu, Gomoa Brofoyedur, Gomoa Jukwa, Gomoa Achiase, Gomoa Akropong, Agona Nyamendam, Agona Kwaman, Agona Bobikuma, Agona Nkranfo and Agona Kojo Armah

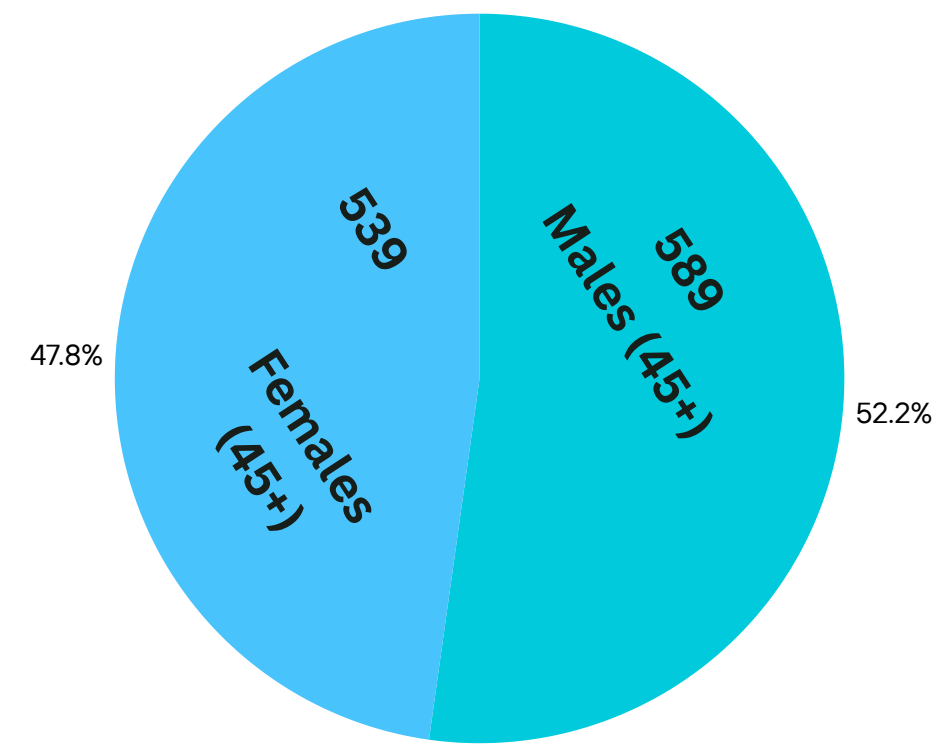
Community education was target at GMFs in all 10 communities selected within the project districts and identifiable groups.

Engagement of GMFs and identifiable groups from the months of March, 2025 to June, 2025, and addressing 4 modules

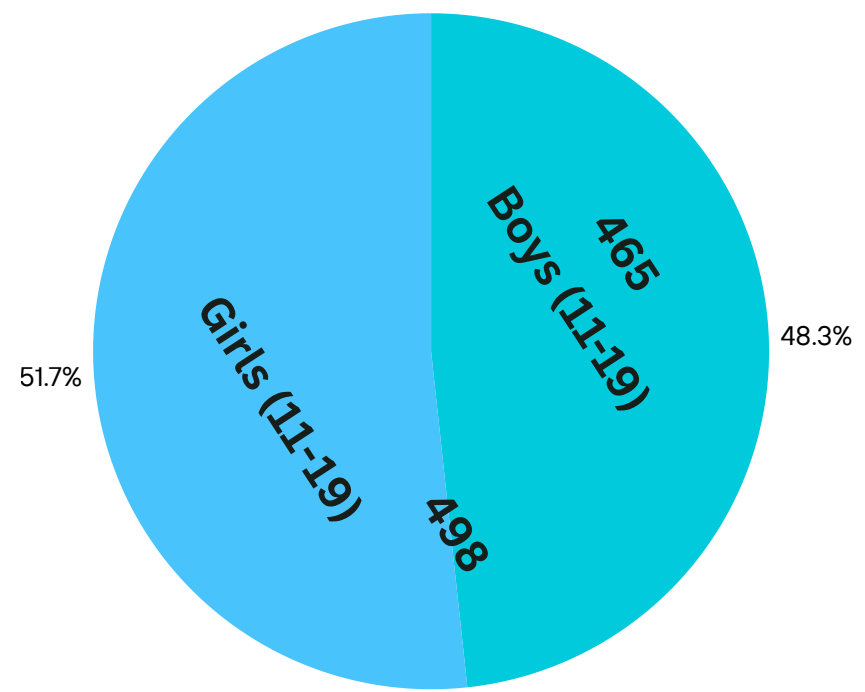
COMMUNITY EDUCATION



Total members (20-45) engaged:1857



Total members (45 +) engaged:1,128



Total Adolescents engaged:963



COMMUNITY EDUCATION

EXISTING GROUPS ENGAGED IN AGONA WEST MUNICIPAL

12



Emire Ase Group



The Salvation Army Church



Kojo Armah Sum Kuw



Nsuakyir Buaye Kuw

COMMUNITY EDUCATION

EXISTING GROUPS ENGAGED IN GOMOA CENTRAL DISTRICT

9



MoFPAM



Methodist Church



Church of Pentecost



African Faith Tabernacle Church



Assemblies of God Church

COMMUNITY EDUCATION

KEY STRATEGIES USED

Experience sharing

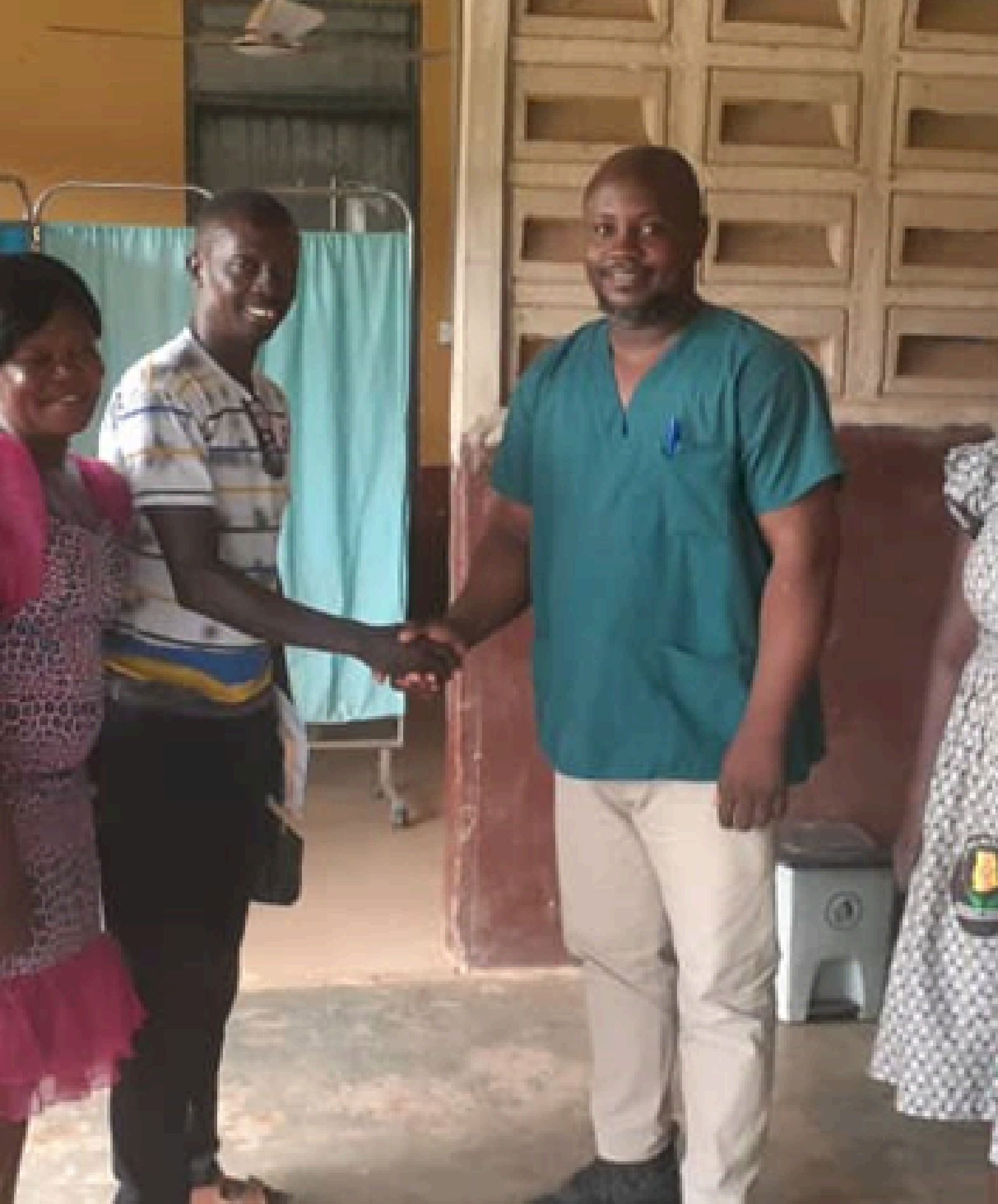
Discussion and Demonstration

Using of Pictures and Charts

Questions and Answers

Audio recordings





IMPACT

HOW THE PROJECT INFLUENCED GMFS IN ACCESSING PHC

Enhanced the confidence of members

Awakened family sense of supporting each other for a healthier family

Confidence of demanding quality health care at the primary level

Reduction in gender barriers to care

Improved knowledge in patients rights and responsibilities

Positive shifts in household dynamics



IMPACT

Women who joined CHMC	Members that visited the health facility	Women who made independent decision to use FP
2	87	43



IMPACT



NEW GMFS PER COMMUNITY

Gomo a Asebu	Gomo a Jukwa	Gomo a Brofoy edur	Gomo a Achias e	Gomo a Akrop ong	Agona Nyam endam	Agona Kojo Armah	Agona Bobiku ma	Agona Kwam an	Agona Nkranf o
8	13	4	3	4	9	9	5	12	5

Overall : 72



IMPACT

CHALLENGES FACED BY GMFS THUS FAR

Competing economic demands limited times available for GMFs educational sessions

Stereotypes around masculinity created initial reluctance for men to attend health facilities with wives

Inconsistent availability of medicines and essential health services discouraged families from fully committing to meetings.

Perceived or real disrespectful attitudes from some health workers weakened initial trust.

Lack of fulfilment of demands over time discouraged some families from committing to meeting

Peer pressure also contributed to lack of commitment to meeting just as with unmet material expectations

KEY ADVOCACY ISSUES

Agona Bobikuma Health Center

Issues Identified



- Low patronage of the health center by community members resulted from many reasons including:
- Poor or lack of communication between care givers and patients
- High cost of health care services compared to facilities in nearby communities
- High cost of transportation also discouraged access to healthcare

Action taken



- Discussion and analyzing concerns from community members
- Engaged some community elder including driver union leaders

Recommendation

- Enhance caregivers-patients communication at the facility
- Continue engagement with driver unions to reduce transportation related to health care
- Partner NGOs to organize forum to strengthen relationship with the community members
- Continue to engage both traditional leaders to treat healthcare as a right rather than competition



SUCCESS STORY OF MR PETER BOTWEY AND MAD. MONICA EDUFUL



"In the past, the care at the facility was very poor. I remember nearly losing my child due to incorrect medication and had to return for a prescription change. Today, after all the education I received from GMF training, I decided to seek care again. I was amazed by the attention and responses. Because I now understand the Patients' Charter, I asked questions about my condition, and the caregiver responded kindly. I was so impressed that I recommended a friend who usually visits Agona Abodom Health Center to try Agona Bobikuma instead. I can see clear improvements in healthcare delivery here, and I hope it continues to get even better." - Mad. Monica Eduful



LESSONS LEARNT



Educational aid should not only be visual but also include audio for CIC use.

GMF Mentors or Leadership should be incentivized to monitor and report activities based on GMFs in various homes for commendation or support during scheduled meetings and also to develop an unconscious attitude among families.

Nurses in upholding quality healthcare delivery in the community level ought to be commended publicly in the community at least to motivate the bad ones to have a change in attitude.

Peer teachings by GMFs were used to attract other community members to benefit directly from the education.

Ownership of project by GMFs, election of leadership, assisted in the mobilization of members for meetings and other planned activities.

CHALLENGES & RECOMMENDATIONS

Untimely treatment and high cost of healthcare make patients prefer OTCMS to healthcare centers

Work schedule hindered full attendance/
participation of activities

Uncontrolled harsh weather patterns disrupted
planned meeting times

Inadequate audio-visual materials to enhance
delivery of message

Lack of interest due to request for material and
economic support

Adoption of home visits to engage directly with
families and households

Advocacy through community events such as free health
screening, NHIS registration, etc to address issues as well as
recognition to GMF groups in the community

Empower (souvenirs) members to become mentors or leaders
to lead the education or offer remedials through capacity
building

Materials should be made available to target a substantial
number of participants

A seed financial support should be given to GMF groups to
offer a sense of ownership





THANK YOU

2025



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