



Ghana's Policy Response to COVID-19

Policy Report ● July 2020

Key Messages

- **Number of cases.** Ghana detected the first two COVID-19 cases on March 12, 2020. By July 13, the country had 24,518 confirmed cases and 139 deaths. The highest daily increase of cases in Ghana was 1,254 on July 3. By June 27, a total of 294,867 tests had been conducted.
- **Geographic variation.** There is substantial geographic variation in cases across Ghana. Over half of all identified cases (13,404) have been in the Greater Accra Region (population of 4,943,075) and 21.4% of all cases (5,254) have been in the Ashanti Region (population of 5,792,187).
- **Measures to control transmission.** The Government of Ghana announced social distancing measures on March 15, and one day later it restricted foreign nationals from entering the country. Starting March 22, all air, land, and sea border checkpoints were closed. On March 27, a partial lockdown was imposed in several big cities that lasted more than three weeks.
- **Expanding capacity of health facilities.** 7,791 health facilities and 18 intensive care units (ICUs) were put into use to respond to COVID-19. On April 26, the government announced that three new infectious disease centers would be built. The government also incentivized frontline health workers by offering an insurance package and an additional allowance.
- **Testing.** At the beginning of the pandemic, only three laboratories in Ghana performed COVID-19 tests, and this capacity has now been expanded to ten labs. A “pooled testing” approach is being used (combining samples from multiple people and testing them together) to increase testing efficiency. The ministry of health has used drones to collect COVID-19 samples from more than 1,000 health facilities, sending the samples to the testing labs. Although the testing capacity is increasing, it continues to lag behind the spread of COVID-19.
- **Socioeconomic welfare policies.** The government has implemented several measures to mitigate the social and economic impacts of COVID-19. For instance, it launched the COVID-19 Alleviation Fund to raise funds for the response including supporting businesses and other social interventions. The government covered water and electricity bills for the population (100% for the very poor and 50% for all others including businesses), provided food assistance, and supported small and medium-scale enterprises. It also gave a tax holiday to health workers over a six-month period, as well as a 50% salary top-up to these health workers for a seven-month period starting March, 2020.
- **Policy gaps.** Gaps remain in Ghana’s policy response to COVID-19. More attention should be paid to contact tracing, improving testing capacity, reaching the most vulnerable populations, and maintaining regular health services for other diseases (e.g., HIV, TB, malaria, meningitis, and vaccine-preventable illnesses) while combating COVID-19.

In this brief, we focus on Ghana's response to the COVID-19 pandemic. We begin by examining the country's level of preparedness to deal with a pandemic prior to COVID-19. We then give a snapshot of the current COVID-19 situation, the policies that the government has enacted to curb the epidemic, and the policy gaps. Finally, we describe how the country is funding its COVID-19 response.

Background

On January 23, 2020 the World Health Organization's International Health Regulations (IHR) Emergency Committee advised all nations worldwide to be prepared to deal with transmission of the new coronavirus (then called 2019-nCoV, now called SARS-CoV-2) in their countries. The committee stated: "all countries should be prepared for containment, including active surveillance, early detection, isolation and case management, contact tracing and prevention of onward spread of 2019-nCoV infection, and to share full data with WHO."¹ On January 30, the WHO declared COVID-19 to be a public health emergency of international concern.¹ March 12 was the date that Ghana detected its first two COVID-19 cases.

Pandemic preparedness prior to COVID-19

After the Ebola outbreak in West Africa in 2014–2016, Ghana improved its capacity to respond to health emergencies by establishing a network of laboratories that extended from the national to the district level.² Its preparedness capacity to deal with a major disease outbreak was assessed in 2017 through the WHO Joint External Evaluation (JEE) and in 2019 through the Global Health Security (GHS) Index.

Joint External Evaluation of Ghana's IHR core capacities

The JEE is a voluntary, collaborative, multisectoral process to assess country capacity to (a) prevent, (b) detect, and (c) respond to public health risks occurring naturally or due to deliberate or accidental events.³ The assessment evaluates a country on these three preparedness categories using 48 indicators across 19 technical areas. Each indicator receives a score of 1 to 5, where 1 is no capacity and 5 is sustainable capacity.

Figure 1 shows the findings from the 2017 JEE of Ghana.⁴ The average scores for the three main categories were 2.4 (prevent), 2.5 (detect), and 1.8 (respond), suggesting that in 2017, the country had established some mechanisms to tackle public health risks, but the capacity was still limited.

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Among the indicators under the 'prevent' category, Ghana performed poorly, with a JEE score of 1 in antimicrobial resistance detection, surveillance of infections caused by antimicrobial-resistant pathogens, and antimicrobial stewardship activities. It performed far better with immunization-related indicators, with scores between 3 and 4. Under the 'detect' category, it received scores of 2 or 3 for most indicators, and it scored a 4 for having an applied epidemiology training program in place. Of the 14 indicators under the 'respond' category, only two received a score of 3—internal and partner communication and coordination and public communication. Four indicators scored just 1—the capacity to activate emergency operations, emergency operating procedures and plans, a system in place for sending and receiving medical countermeasures during a public health emergency, and a system in place for sending and receiving health personnel during a public health emergency. The remaining eight indicators all scored 2.

Global Health Security Index

The Global Health Security (GHS) Index is "a comprehensive assessment and benchmarking of health security and related capabilities" with 140 questions organized across six categories (prevention, detection and reporting, rapid response, health system, compliance with international norms, and risk environment).⁵ The index ranges from 0–100, where 100 means perfect health-security conditions. A score below 33.3 is considered low, 33.4–66.6 is moderate, and 66.7–100 is high.⁵



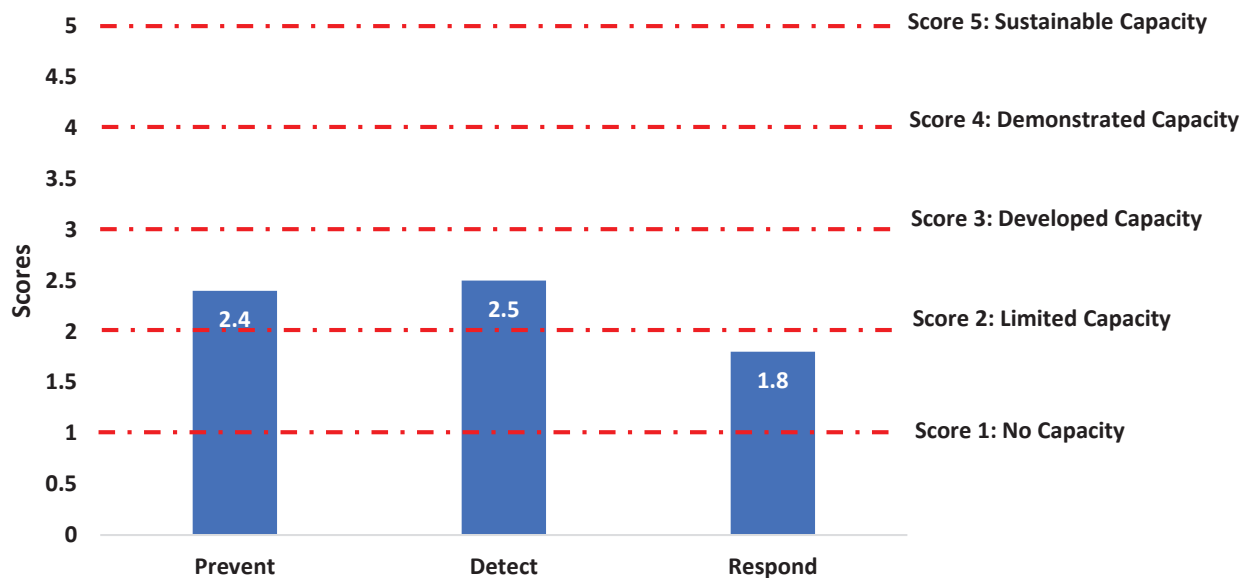


Figure 1. Ghana's average 2017 JEE scores on preparedness to respond to public health risks
Source: Authors' creation using data from reference 3

In 2019, Ghana's overall GHS score was 35.5, lower than the global average of 40.2, ranking 105th out of 195 countries globally.⁶ Its average score for every category was lower than the global average (Figure 2).

Current COVID-19 situation and impact

In Ghana, the first two COVID-19 cases were confirmed on March 12, 2020; the two infected people were returning from Norway and Turkey.⁷ According to the Ghana Health Service,⁸ as of July 13, there have been 24,518 confirmed COVID-19 cases with 139 deaths (Table 1).

As of June 24, Ghana had the second highest number of confirmed COVID-19 cases in the West and Central Africa region after Nigeria, and the third highest number of cases across the WHO Africa region (after South Africa and Nigeria).⁹ The highest number of new daily cases was on July 3 (1,254 cases) (Figures 3 and 4).¹⁰ As of July 13, the fatality rate of all cases was 0.6% and 4,192 people were receiving treatment (17.1% of all cases). Among all confirmed cases, 57% have been male and 43% female.

There is substantial geographic variation in the number of COVID-19 cases across different regions in Ghana.⁸ COVID-19 has disproportionately affected Southern regions—54.7% of cases (13,404) are in the Greater Accra region (population of 4,943,075) and 21.4% of cases (5,254) are in the Ashanti Region (population of 5,792,187), whereas about half of the regions in the country have less

than 200 cases (table 1). There were three laboratories for COVID-19 testing in Accra (capital of the Greater Accra Region) and Kumasi (capital of the Ashanti Region) at the beginning of the COVID-19 pandemic. This capacity has now been expanded to ten.¹³ President Nana Akufo-Addo disclosed in his most recent COVID-19 update that 294,867 tests had been conducted in Ghana as of June 27.¹⁴ Compared to other African countries, Ghana has one of the highest testing rates.^{15,16}

Since Ghana is an import-driven economy, COVID-19 is likely to have a significant adverse impact on the country's international trade and economic reserves. Ghana's estimated GDP growth is set to plummet from a target of 6.8% to about 2.6% in 2020.¹⁷ All education institutions were ordered to be closed in Ghana, affecting 9.2 million basic school students and 0.5 million tertiary education students.¹⁸

Policy steps taken

Since the start of Ghana's COVID-19 outbreak, President Akufo-Addo has addressed the nation 13 times. On April 5, he announced five key objectives in Ghana's fight against COVID-19:

1. Limit and stop the importation of the virus
2. Contain the spread of the virus
3. Provide adequate care for patients with the virus
4. Limit the social and economic impacts of the virus

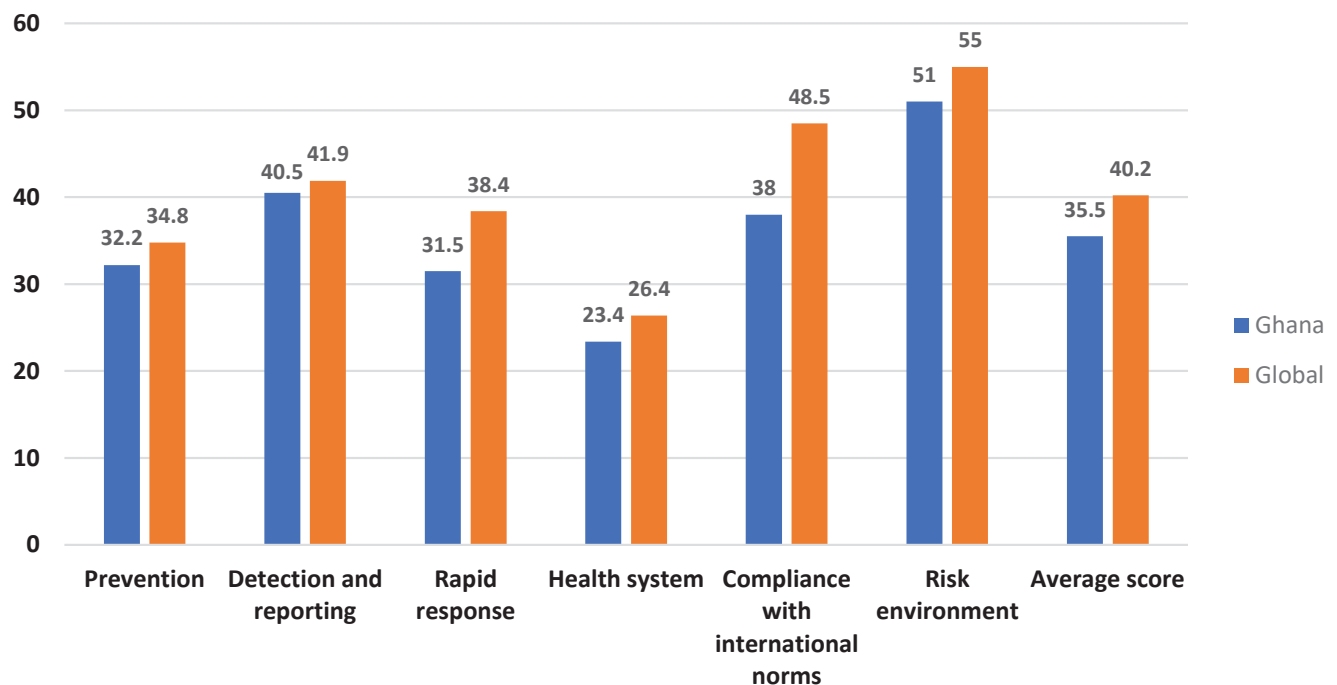


Figure 2. GHS Index scores for Ghana compared with the global average scores

Source: Authors' creation using data from reference 5

5. Expand domestic capability and deepen Ghana's self-reliance¹⁹

To achieve these objectives, Ghana has introduced a range of measures (summarized in the timeline in Figure 5), many of which were imposed under a tough new law invoked by the president, "Imposition of Restrictions Act, 2020, Act 1012", and passed by parliament on March 21.^{20,21}

Public health policies

Public education

Before identifying any COVID-19 cases in Ghana, the Ministry of Information initiated a nationwide public education campaign on preventive measures that all Ghanaians must observe to reduce the spread of COVID-19 in the event that new coronavirus cases arrive in the country.²²

On March 19, the Ghana Health Service issued guidelines for self-quarantine. Close contacts of infected people were required to stay in their homes, hotel room, or any identified accommodation without mixing with the public or family members for 14 days from the last contact with the confirmed case.²³

Contact tracing

The government started contact tracing after the first cases were confirmed.²⁴ The vice president and the Ministry of Communication and Technology launched a new contact tracing app, the COVID-19 Tracker App, a digital tool to (i) help people assess and self-report symptoms, (ii) trace those who have been in contact with infected people, and (iii) help infected people get access to health services.²⁵

Travel restrictions

On March 16, travel restrictions on entry into Ghana took effect. With the exception of resident permit holders, travelers from countries with over 200 positive COVID 19 cases were not allowed to enter the Ghanaian jurisdiction.²⁶ A 14-day self-quarantine was mandatory for those who were allowed to enter the country.²⁷ Starting March 22, all air, land, and sea border checkpoints were closed. On April 4, Ghana extended the closure for an additional two weeks.²⁸ On May 31, President Akufo-Addo again extended the closure until further notice. International commercial flights are not available during this time.²⁹

Table 1. Status of COVID-19 in Ghana (as of July 13, 2020)

Total cases	24,518
Active cases	4,192
Deaths	139
Recovered/discharged	20,187
By region	Cases
Greater Accra	13,404
Ashanti Region	5,254
Western	2,128
Central	1,110
Eastern	931
Volta	390
Upper East	282
Bono East	205
Northern	186
Western North	173
Oti	120
Bono	107
Ahafo	98
Upper West	70
Savannah	51
North East	9

Source: Authors' creation using data from references 7 and 8

Note: To see the animated progression on the COVID-19 cases in different regions of Ghana, please click [here](#).

Social restrictions

Three days after the first cases were confirmed in Ghana, President Akufo-Addo banned all public gatherings, including conferences, workshops, funerals, festivals, political rallies, and church activities and closed all schools and universities to reduce the spread of COVID-19.^{27,30} On March 23, all beaches were closed.³¹

All supermarkets, shopping malls, restaurants, hotels, and other similar establishments and all public transport services were asked to provide running water and soap or hand sanitizers to enhance hygiene procedures.²⁷ Social distancing of one meter was encouraged by the government.^{27,29} The Ministry of Health (MoH) has also made it mandatory for everyone to wear a nose mask in line with section 14 of the Public Health Act, Act 851.³²

On June 15, President Akufo-Addo signed a new Executive Instrument, E.I.164, which stipulates that persons who fail to wear face masks in public could face a jail term between four to ten years or a fine of between GHS12,000 (approx. US\$2,065) and GHS60,000 (approx. US\$10,327) or both.³³

Lockdown order

On March 27, President Akufo-Addo imposed a partial lockdown of Accra, Tema, Kasoa, and Kumasi, identified by Ghana Health Service as the “hotspots” of infections. This lockdown was effective starting 1am on Monday, March 30.³⁴ On April 19, this partial lockdown was lifted but public gatherings were still banned.³⁵ On May 31, Ghana eased lockdown measures, and the ban on social gatherings was lifted. At the same time, President Akufo-Addo stated that “an abridged format for religious services can

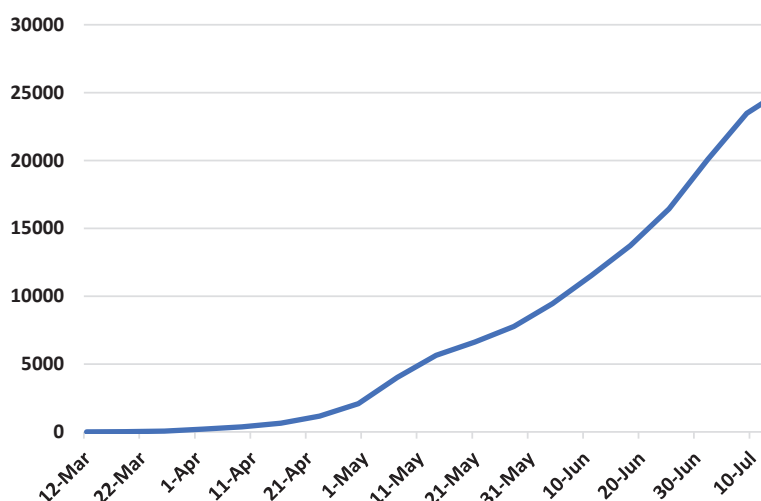


Figure 3. Total (cumulative) number of cases of COVID-19 in Ghana

Source: Authors' creation using data from reference 10

commence. Twenty-five percent (25%) attendance, with a maximum number of one hundred (100) congregants, can worship at a time in church or at the mosque, with a mandatory one-meter rule of social distancing between congregants".³⁶ Starting June 15, schools and universities reopened to final year students.³⁷ In order to control the risk from reopening of schools, the government has deployed over 200 staff members from the Ghana Education Service and the Ghana Health Service to monitor the COVID-19 situation in senior high schools.³⁸

Health system response

Expansion of testing

Initially, only people who had symptoms and reported to facilities were tested. Starting from April 9, all contacts of positive cases were required to be tested immediately without waiting for symptoms. Testing for COVID-19 is covered by the government without out-of-pocket payments. However, private facilities that recently started COVID-19 testing do charge out of pocket costs.³⁹

The government of Ghana is using a "pooled testing" strategy that combines samples from multiple people and tests them together. When a pool gets a positive result individual samples will be tested. Pooled testing is more cost-effective and less time-consuming, which increases Ghana's testing capacity.⁴⁵

On April 17, the MoH in collaboration with Zipline, an American company, started using drones to collect sam-

ples and send them to the COVID-19 testing labs in Accra and Kumasi. The system has been set up to collect samples from more than 1,000 health facilities, shortening the time to deliver samples from remote rural areas to labs.⁴⁰ A medical diagnostic development and manufacturing social enterprise, Incas Diagnostics, in coordination with Kwame Nkrumah University of Science and Technology, has developed a rapid test that detects COVID-19 antibodies. This rapid test can get results in 15 to 20 minutes, and is currently waiting on the Food and Drug Administration for approval.⁴¹ If approved for use, it will greatly enhance Ghana's testing capacity.

Healthcare facilities

To help treat people with COVID-19, two hospitals have been designated COVID-19 facilities while several other regional and district hospitals have been converted into separate treatment centers for COVID-19.⁴² In total, 7,791 health facilities and 18 ICUs have been put into use in response to Ghana's COVID-19 outbreak.⁴³

A new 100-bed facility for infectious disease treatment and isolation is being built in the Ga East Municipal Hospital and was expected to be completed by June 30.⁴³ On April 26, President Akufo-Addo announced a plan to build three infectious disease centers for each of the three ecological zones: coastal, northern, and middle belt zones, with the overall objective of setting up a Ghana Centre for Disease Control.^{44,45} The government plans to com-

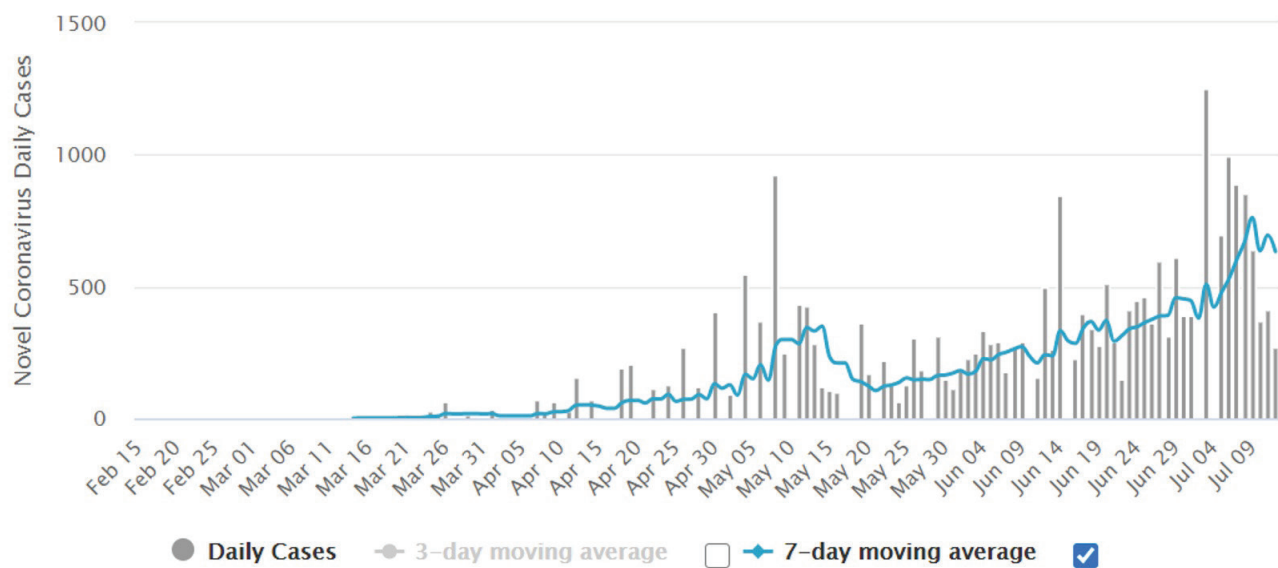


Figure 4. Daily new cases in Ghana
Source: Worldometers ¹¹

plete the construction within a year.⁴⁶ On June 21, President Akufo-Addo approved the construction of additional ICUs in the Greater Accra Region, and construction of a new treatment center in the Ashanti Region to treat the concentrated cases in those two regions.⁴⁷ On July 1, the Accra Metropolitan Assembly announced construction of a two-storey isolation center at the Kaneshie Polyclinic.⁴⁸

Incentives for health workers

On April 5, President Akufo-Addo announced four incentives for all health workers:⁴⁹

1. Exemption from the payment of tax on their employment emoluments for a three-month period starting April, 2020. This was extended for another three months by the president in his 13th address.¹⁰
2. A daily allowance of GHS150 (approx. US\$26) payable to those undertaking contact tracing.
3. An additional allowance of 50% of their basic salary per month for frontline health workers for a four-month period starting March, 2020. Similarly, this allowance was extended for another three months.¹⁰
4. An insurance package, with an assured sum of GHS350,000 (approx. US\$60,345).

Local production of personal protective equipment (PPE)

On April 11, the government provided a US\$10 million loan through the Ghana Exim Bank to some local companies to

manufacture face masks, scrubs, and protective gowns. This loan is to ensure sufficient PPE is available.⁵⁰

Socio-economic measures

In February, the president announced that he had directed the Ministry of Finance to make US\$100 million available to prepare a COVID-19 response plan. The funding will be directed towards expansion of infrastructure, purchase of materials and equipment, and public education.³⁴

Stimulus package

The Minister of Finance announced in late March that the government was ready to provide a stimulus package of GHS1 billion (approx. US\$174,843) for industry and citizens. The Ministry of Finance proposed to use the equivalent of US\$219 million from the Stabilization Fund.⁵¹

COVID-19 Fund

On March 29, President Akufo-Addo announced the establishment of the COVID-19 National Trust Fund, to be managed by an independent board of trustees and chaired by former Chief Justice, Sophia Akuffo.⁵² This national fund would receive contributions and donations from the public to help people in need. The Ghana COVID-19 Private Sector Fund was established to raise funding from the private sector to support the fight against COVID-19.⁵³

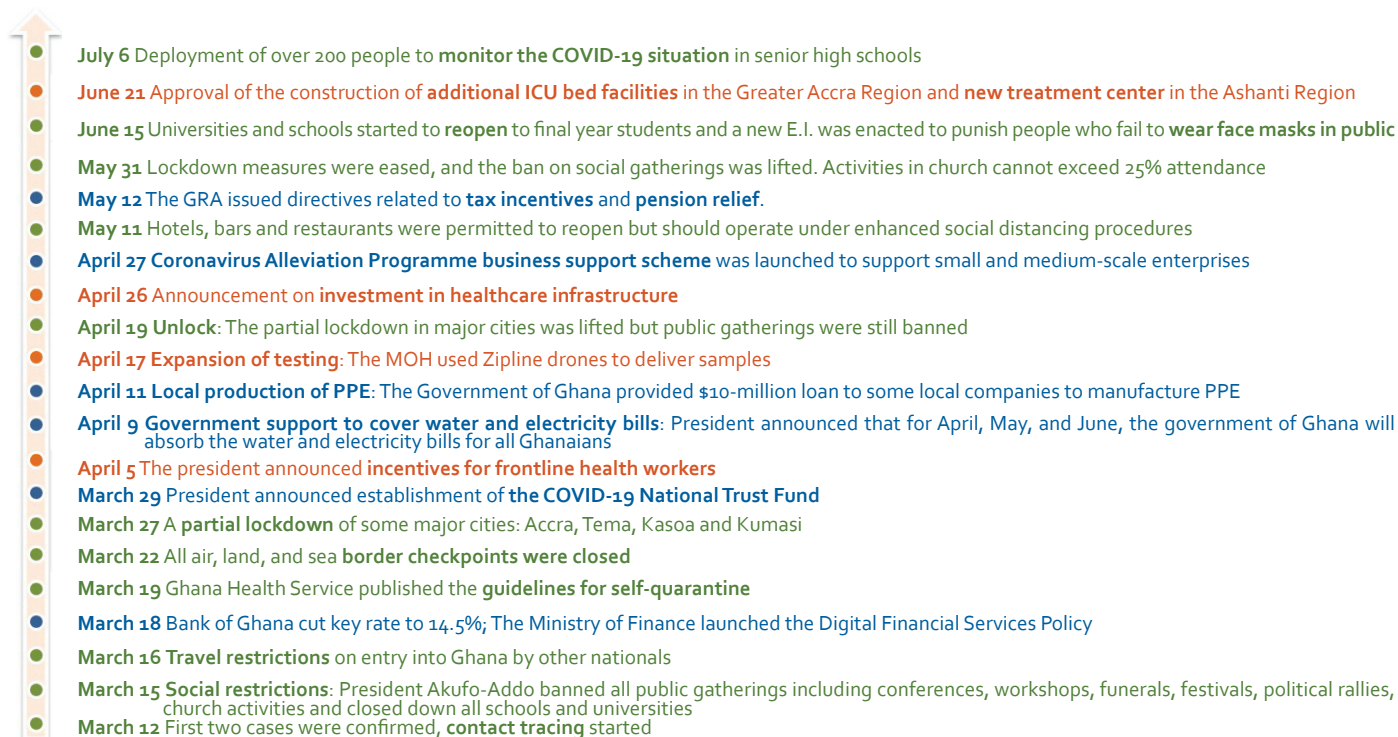


Figure 5. Timeline of major policy responses to COVID-19 in Ghana

Key: **green**—public health measures, **orange**—health system response, **blue**—social and economic policies

Abbreviations: **EI**—Executive Instrument, **GRA**—Ghana Revenue Authority, **MOH**—Ministry of Health, **ICU**—intensive care unit, **PPE**—personal protective equipment

Government support to cover water and electricity bills

On April 9, the president announced that for April, May, and June, 2020, the government would absorb the water and electricity bills for all Ghanaians.^{54,55} The government argued that sufficient water is important for pandemic control since a water shortage will undermine regular hand washing under running water.

Food assistance

The government has distributed US\$40 million in dry food packages and hot meals to vulnerable people affected by the lockdown, including the poor and street vendors. The government gave another US\$40 million to the Ghana National Buffer Stock Company, an agency under the Ministry of Agriculture, to buy food and release it into the system when there are shortages and price hikes.⁵⁶

Coronavirus Alleviation Programme and business support

On April 27, the government in collaboration with the National Board for Small Scale Industries, business and trade associations, and selected commercial and rural banks,

launched a GHS600 million (approx. US\$105 million) Coronavirus Alleviation Programme business support scheme. The scheme supports small and medium-scale enterprises that are negatively impacted by COVID-19.^{57,58}

Monetary and macro-financial measures

According to the International Monetary Fund (IMF), the government plans to cut spending in goods and services, transfers, and capital investment to compensate for COVID-19 spending, equivalent to at least 0.3 percent of GDP.³⁷

On March 18, the Monetary Policy Committee (MPC) of the Bank of Ghana cut the policy rate by 150 basis points to 14.5 percent, and took some measures to mitigate the impact of the pandemic shock, such as lowering the primary reserve requirement and the capital conservation buffer.³⁷ At its May 15 meeting, the MPC decided to launch a special COVID-19 Relief Bond program with a size of GHS10.0 billion (approx. US\$1.73 billion), in order to make up the financing gap.³⁷

Tax incentives and pension relief

On May 12, in response to COVID-19, the Commissioner-General of the Ghana Revenue Authority issued directives related to tax incentives and pension relief. The incentives include a waiver of income tax on withdrawals from Provident Funds and Personal Pension Schemes, a waiver of income tax on personal emoluments of selected health workers and additional allowance for frontline health workers, tax deductions for donations in support of COVID-19, and a waiver of penalties to taxpayers.⁵⁹

The Digital Financial Services Policy

On May 18, the Ministry of Finance launched the Digital Financial Services Policy, developed in partnership with the Consultative Group to Assist the Poor.⁶⁰ The government removed fees for low-value remittances, relaxed transaction and wallet size limits for mobile money, and allowed remote account opening.⁶¹ These measures will allow more people to have access to financial services, and maintain convenience for Ghanaians to transact money even under lockdown and social restriction measures.

Policy gaps

While in many ways the government responded rapidly to the COVID-19 pandemic, we have identified a number of gaps and weaknesses that need to be addressed.

Increasing testing capacity and strengthening disease surveillance after easing the lockdown

Gap: Since May 31, when Ghana eased lockdown, the number of new daily cases has increased (figure 4).¹² From June 15, final year students started to go back to school, which could increase the risk of viral transmission. Easing lockdown might exacerbate the spread of COVID-19, while prolonged lockdown will worsen poverty and hunger and negatively impact the economy.⁶²

Real-time information about COVID-19 infections is essential to helping authorities with decision making. Expanding the country's testing capacity is crucial to identifying cases quickly and to limiting further disease transmission.

What needs to be done: First, according to the Ghana Health Service, as of July 4, the positivity rate of routine surveillance is 7.69% while the rate of enhanced contact tracing is 6.50%.⁶³ Since the government has eased the lockdown,

it is essential to further increase the capacity and scope of contact tracing, testing, and routine surveillance. Second, restrictions should be eased slowly in a stepwise approach with close monitoring,⁶⁴ and every subsequent decision should be informed based on surveillance of the COVID-19 situation. Third, the rate of testing is not commensurate with the growing demand for COVID-19 testing, thus more test labs should be established to meet the growing need. Fourth, the government should sanitize public spaces and effectively implement public health measures such as social distancing and mask wearing. One possible strategy that could be helpful is for the government to monitor cross-city mobility and uniformly test or quarantine people coming from COVID-19 "hotspots."

Inequality in resources and vulnerable populations

Gap: Many people live in slums or overcrowded settlements with little access to health services or to soap, water, and sanitation. There are also areas of high population density where many households share one room making physical distancing nearly impossible.¹³ Some communities have received little information about COVID-19. The lack of outreach and information could have led to fear of seeking testing and treatment services due to stigma and discrimination.⁶⁵ More attention should be paid to these vulnerable populations.

What needs to be done: The government should recruit and train health workers who will reach out to vulnerable populations and communities to promote social distancing and other protective measures. The government should also distribute PPE and provide sanitation services to these vulnerable communities.

Scaling up contact tracing

Gap: Ghana's Ministry of Communication and Technology launched the COVID-19 Tracker App in April, 2020 (see <https://ghcovid19.com/>). Ghanaians can download this app on their phone to help support contact tracing. However, according to the Global System for Mobile Communications Association⁶⁶, as of the third quarter of 2019, only about half of Ghanaians owned a mobile phone and only one third used the mobile internet. Thus, a mobile app cannot play an extensive role in contract tracing with only a small number of users.



The government needs to:

1. Increase the capacity and scope of testing, and routine surveillance.
2. Ease restrictions slowly in a stepwise approach with close monitoring.
3. Establish more test labs to meet the growing need.
4. Sanitize public spaces and effectively implement public health measures such as social distancing and mask wearing.
5. Recruit and train health workers who will reach out to vulnerable populations and distribute PPE and provide sanitation services to these vulnerable communities.
6. Increase the capacity and scope of contact tracing by building trust with people and ensuring that relevant regulations and laws are followed with regards to data gathering, storing, and use.
7. Maintain planning for and financing of national health needs by preventing in-hospital infections, ensuring supply of PPE, and intensifying surveillance efforts, laboratory case detection, and case management.

Box 1: What needs to be done to control Ghana's COVID-19 epidemic

What needs to be done: First, to scale up contact tracing, the government needs to build trust with people. While the collection of personal data from such contact tracing apps can help with infection control, it might also trigger people's concerns over privacy and confidentiality, thus decreasing uptake. The government must ensure that relevant regulations and laws are followed with regards to how the data gathered will be stored and used. Second, using mobile apps cannot be the only effort in contact tracing, considering the relatively low internet and mobile phone coverage. The government needs to increase its investment in contact tracing. A variety of approaches should be undertaken, including mobilizing communities to engage in contact tracing and using manual contact tracing in those poor areas where few people have access to mobile phones and the internet.⁶⁷

Maintaining essential services for other diseases

Gap: On April 20, the Ghana Health Service reported at least 409 cases of meningitis in five regions with 40 deaths.⁶⁸ Investigation showed that the high fatality was due to late reporting of cases, since the government was mainly focused on COVID-19 with less focus on other diseases.⁶⁹ The public is also concerned that health facilities are occupied with patients with COVID-19, resulting in people with

other diseases receiving little or no care.⁷⁰ For example, it was reported that people living with HIV/AIDS in Ghana have not received regular care because the HIV/AIDS facilities are preoccupied with COVID-19 cases.⁷¹

What needs to be done: In the short term, the MoH and the Ghana Health Service should maintain planning for and financing of national health needs. For instance, the government should first divide health services providers between essential services and COVID-19, design clinical pathways to prevent in-hospital infections, and ensure the supply of PPE to protect service providers. It should also intensify efforts in surveillance, laboratory case detection, and case management.⁷² In the long term, the government should focus on health system strengthening and build its capacity for dealing with multiple crises and outbreaks at the same time.

Funding the COVID-19 response

Government financing

As mentioned above, the government has taken many steps to fund the COVID-19 response. First, in March, it secured US\$100 million in coronavirus funding.⁷³ Second, it cut spending on goods and services, transfers, and capital investment by at least 0.3 percent of GDP to make up the financing gap caused by COVID-19.³⁷ Third, it led the establishment of the COVID-19 National Trust Fund, and has already received donations and contributions from organizations and individuals.⁵² The Ghana COVID-19 Private Sector Fund has also raised funding from many corporations, institutions, and individuals.⁵³

Multilateral aid

In addition to domestic funding, Ghana also applied for and received international funding from multilateral donors:

- On April 13, the IMF Executive Board approved the disbursement of US\$1 billion to help Ghana combat COVID-19; this funding was drawn under the Rapid Credit Facility.⁷⁴
- The World Bank started a Ghana COVID-19 Emergency Preparedness and Response Project and approved US\$35 million on March 24 to assist Ghana.⁷⁵
- The Global Partnership for Education coordinating with the UK Department for International Development initiated an Additional Financing to Ghana Accountabil-



ity for Learning Outcomes Project through the World Bank. This financing aims to meet Ghana's application for US\$15 million to address the immediate education challenges posed by the pandemic. These funds will also be used to help Ghana build a more resilient and sustainable education system that can withstand future crises and emergencies.⁷⁶

- The Global Fund to Fight AIDS, Tuberculosis and Malaria is encouraging recipient countries to reallocate up to 5% of existing Global Fund grants to fight COVID-19.⁷⁷ Ghana has been approved to use US\$2,750,697 of Global Fund support for its COVID-19 response.⁷⁸
- Gavi, the Vaccine Alliance allows recipient countries to reprogram up to 10% of health systems strengthening (HSS) funding to fight against COVID-19.⁷⁹
- The United Nations International Children's Emergency Fund (UNICEF) has started to "appeal for US\$ 18.2 million to facilitate continued access to essential, quality and inclusive social services and the protection of children affected by the COVID-19 pandemic in Ghana." As of May, UNICEF has received funding of US\$1.5 million, and around \$9M has been committed.⁸⁰ In March, the World Health Organization donated 9,000 surgical masks, 180 goggles, 800 face shields, 350 N95 masks, 9,200 examination gloves and 750 gowns to the MoH in Ghana.⁸¹

Bilateral aid

In February, the U.S. government's Africa Peacekeeping Rapid Response Partnership program helped the Ghana

Armed Forces deploy a state-of-the-art level II field hospital in the Greater Accra area as part of the government of Ghana's COVID-19 response. In addition, the U.S. has provided technical assistance to Ghana on COVID-19 control.⁸² To support COVID-19 testing, the French Embassy in Ghana provided RNA extraction kits to Ghana's Noguchi Memorial Institute for Medical Research. The embassy also provided basic protective equipment such as masks and hydro-alcoholic gels to two Ghanaian associations' projects in poor districts of Accra and Tamale, and conducted education campaigns in those regions to help control the spread of the virus.⁸³ On April 23, the German Embassy announced to support COVID-19 rapid response measures in Ghana with up to €13.4 million (approx. US\$15,076,340).⁸⁴

Conclusion

Since the COVID-19 pandemic began, the government of Ghana has implemented a range of public health and socio-economic measures, such as using drones to deliver samples for testing, supporting front-line health workers, and providing economic relief to citizens and enterprises.

After easing lockdown on May 31, and reopening schools on June 15, there is a risk of further viral transmission. The government needs to strengthen real-time surveillance and monitoring and greatly expand testing capacity. Support should be provided to the most vulnerable populations to better control the spread of coronavirus. The government should also focus on health system strengthening and build its capacity for dealing with multiple crises and outbreaks to better respond to public health emergencies.

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Methods

Our research included a desk-based review of websites, strategy documents, grey literature reports, and academic literature. This project was screened for exemption by the Duke University Institutional Review Board as part of the study 'Driving health progress during disease, demographic, domestic finance and donor transitions (the "4Ds")': policy analysis and engagement with transitioning countries.'



This is one in a series of reports focusing on the response of middle-income countries to the COVID-19 pandemic. The briefs are part of a broader study called *Driving health progress during disease, demographic, domestic finance, and donor transitions* led by the [Center for Policy Impact in Global Health](#).