

Maternal and Newborn Health Disparities

Ghana



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Maternal and Newborn Health Disparities in Ghana

Key Facts

Ghana reference table

Demographic indicators		
Total population (thousands) ¹	2015	27,410
Total live births (thousands) ¹	2015	884
Total Fertility Rate (number of children per woman) ¹	2014	4.1
Adolescent birth rate (per 1,000 women 15-19) ¹⁰	2013	65.0
Impact indicators		
Maternal mortality ratio (per 100,000 live births) ⁴	2015	319.0
Average annual rate of MMR reduction between 1990 and 2015 (%) ⁵	2015	2.7
Lifetime risk of maternal death: 1 in x ⁴	2015	74
Stillbirth rate (per 1,000 total births) ⁶	2015	22.7
Preterm birth rate (per 100 live births) ⁷	2010	14.5
Under-five mortality rate (per 1,000 live births) ³	2015	61.6
Under-five deaths that are newborn (%) ³	2015	47.0
Neonatal mortality rate (per 1,000 live births) ³	2015	28.3
Neonatal deaths (thousands) ³	2015	25
Service Delivery		
Availability of EmONC Services (% of minimum acceptable level) ⁸	2011	37.0
Physician density (per 1,000 population) ⁹	2010	0.1
Nurse and midwife density (per 1,000 population) ⁹	2010	0.9

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Ghana

In 2015, 884,000 babies were born in Ghana, or around 2,400 every day.¹

Among young women (aged 20-24), 17 percent gave birth by age 18.²

Approximately 69 babies will die each day before reaching their first month³; 57 stillbirths occur every day.⁶

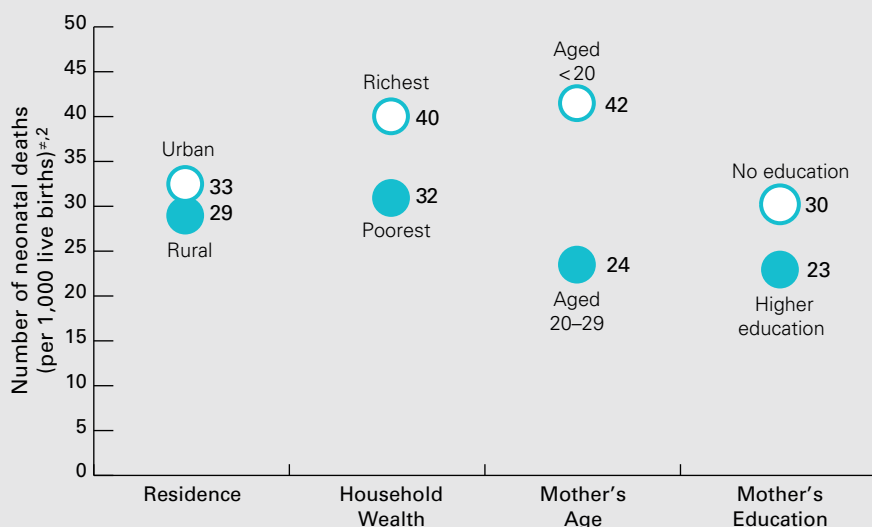
Neonatal mortality rate:

Ghana's neonatal mortality rate (NMR)⁴ is 28 deaths per 1,000 live births.³

NMR⁴ in rural areas is 29 deaths per 1,000 live births and 33 deaths per 1,000 live births in urban areas for an urban-to-rural NMR ratio of 1.1.²

While the NMR⁴ among the poorest households is 32 neonatal deaths per 1,000 live births, it is 1.3 times higher among the richest households at 40 neonatal deaths per 1,000 live births.²

Neonatal mortality rates, by background characteristics, 2014

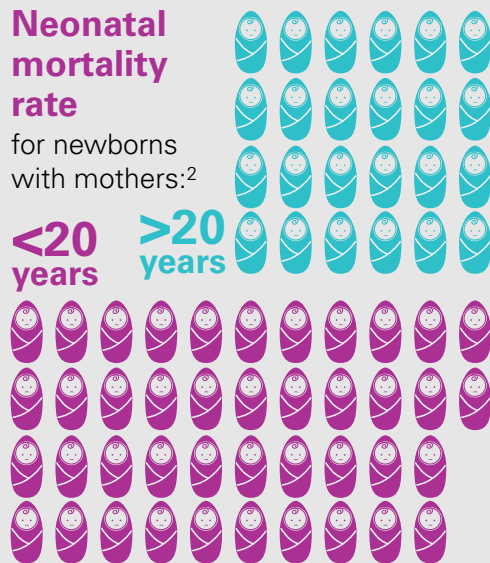


Neonatal mortality rate

for newborns with mothers:²

<20 years

>20 years



The NMR for younger mothers (42 per 1,000 live births) is 1.8 times higher than for mothers aged 20-29 (24 per 1,000 live births).²

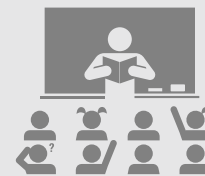
1 in 6

young women (aged 20-24) have given birth by age 18.²



Newborns with less educated mothers are:

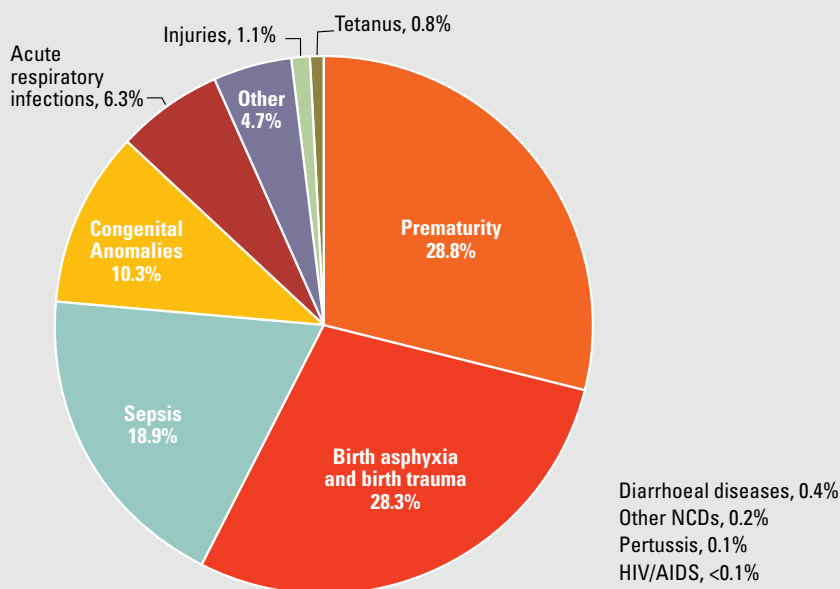
1.3x



more likely to die during the first month compared to those born to mothers with higher education.²

Ghana – Causes of Neonatal Mortality, 2015

In Ghana, the main causes of neonatal deaths in 2015 were prematurity (28.8 percent), birth asphyxia (28.3 percent) and sepsis (18.9 percent).¹¹



Disparities in key maternal and newborn health interventions, Ghana, 2014²

		Coverage – care for mothers					
		Demand for family planning satisfied by modern methods (%)	Antenatal care coverage at least 4 times (%) ^a	Skilled attendant at birth (%)	Institutional delivery (%)	Delivered by caesarean section (%)	Postnatal care of mothers within 2 days (%)
Residence	Urban	36.3	92.3	90.1	90.2	18.8	90.2
	Rural	41.9	82.9	60.2	59	7.9	73.9
Residence ratio (urban to rural)		0.9	1.1	1.5	1.5	2.4	1.2
Household Wealth	Richest	36.6	98.1	96.7	96.4	27.9	95
	Poorest	39.8	76.4	46.9	46	4	64.6
Household wealth ratio (richest to poorest)		0.9	1.3	2.1	2.1	7.0	1.5
Mother's age	Less than 20	24.1	80.8	72.1	71.3	4.9	79.4
	20-34		88.5	74.6	74	12.7	82.3
	35-49	37.1	86.0	71.2	70.4	17.3	77.8
Mother's education	No education	36.4	79.2	52.3	51.7	5.7	68.4
	Primary	44.2	82.3	68.8	68.2	10.9	76.2
	Secondary	37.7	82.1	85.6	85.0	15.5	88.9
	Higher	48.5	92.9	98.2	97.7	36.1	92.8
Mother's education ratio (highest to lowest)		1.3	1.2	1.9	1.9	6.3	1.4

Maternal and newborn health coverage indicators

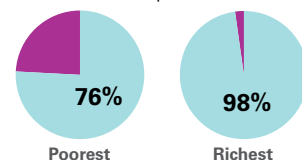
By residence:²

- In rural areas, 83 percent of women made at least 4 antenatal care (ANC) visits, compared to 92 percent in urban areas.
- Coverage of skilled attendance at birth is 60 percent in rural areas, compared to 90 percent in urban areas.
- 22 percent of newborns in rural areas receive postnatal care (PNC) within 2 days after birth, compared to 23 percent in urban areas.

By household wealth:²

- Nearly all mothers among richest households (98 percent) made at least four ANC visits, compared to 76 percent of mothers from the poorest households.
- Among the poorest households, 47 percent of deliveries were assisted by a skilled attendant, compared to 97 percent of deliveries in the richest households.
- 29 percent of newborns in the richest households receive PNC within 2 days after birth, compared to 25 percent among the poorest households.

Only **3/4** of mothers in the poorest households have **4 Antenatal Care visits** compared to...



...**98%** of mothers in the richest households.

Coverage – care for newborns								Other	
Postnatal care of newborns within 2 days (%)	Newborn weighed at birth (%)	Early initiation of breast-feeding (%)	Exclusive breast-feeding (<6 months) (%)	BCG vaccine, newborn (%)	Pentavalent 1 vaccination received (%)**	Tetanus protection for newborns (%)	Birth registration (%)	Births by age 18 (%) ^{a, #}	
23.4	76.5	54.5		97.2	95.9	80.1	79	12.9	Urban
22.3	47	56.5		96.4	97.2	76.2	63.2	21.5	Rural
1.0	1.6	1.0		1.0	1.0	1.1	1.3	0.6	Residence ratio (urban to rural)
29.3	87.9	53.7		98.9	98.5	87.3	88	8.4	Richest
25.4	37.9	58.6		95.7	95.8	68.2	58.1	23.1	Poorest
1.2	2.3	0.9		1.0	1.0	1.3	1.5	0.4	Household wealth ratio (richest to poorest)
19.7	53.2					66			Less than 20
23.7	62.2					78.7			20-34
20.8	56.8					80.9			35-49
24.8	41.3	58.8		93	95.1	72.4		35.0	No education
26.9	50.6	52.8		98	93.9	73.3		27.6	Primary
19.2	71.9	55.2		98.3	98.5	81.9			Secondary
31.9	95.7	52.6		(96.8)	(96.8)	87.5			Higher
1.3	2.3	0.9		1.0	1.0	1.2			Mother's education ratio (highest to lowest)

Key for tables:

0-24 %

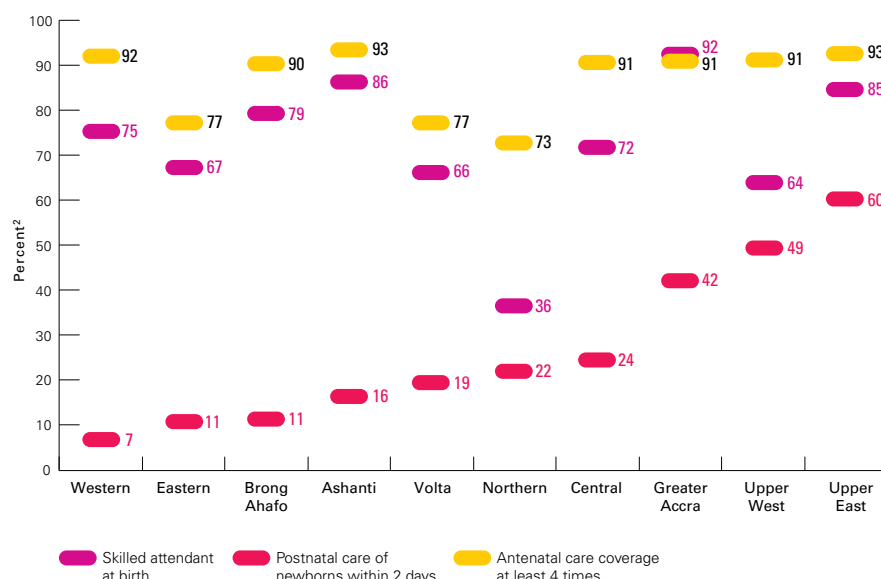
25-49 %

50-74 %

75-100%

Data not available

Selected maternal and newborn health indicators, by region, 2014



By mother's age:²



- 89 percent of mothers aged 20-34 made at least four ANC visits, compared to 81 percent among younger mothers (aged less than 20).
- Deliveries among mothers aged 20-34 and younger mothers (aged less than 20) have similar levels of skilled attendance (75 percent and 72 percent, respectively).
- Newborns born to mothers aged 20-34 and younger mothers (aged less than 20) receive low levels of postnatal care: 24 percent and 20 percent, respectively.

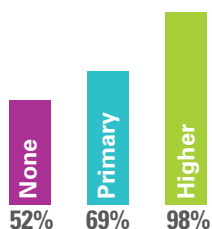
Disparities in key maternal and newborn health interventions, Ghana, 2014²

Coverage – care for mothers						
	Demand for family planning satisfied by modern methods (%)	Antenatal care coverage at least 4 times (%) ^a	Skilled attendant at birth (%)	Institutional delivery (%)	Delivered by caesarean section (%)	Postnatal care of mothers within 2 days (%)
National estimate	39.2	87.3	73.7	73.1	12.8	81.1
Region						
Western	42.8	92.1	75.3	74.0	14.6	83.9
Central	45.4	91.1	72.0	70.3	15.7	81.2
Greater Accra	34.1	91.4	92.1	92.5	22.9	95.6
Volta	43.0	77.3	66.3	65.3	8.8	69.0
Eastern	39.7	77.4	67.2	67.7	9.5	73.4
Ashanti	35.8	93.5	86.3	85.6	15.6	91.0
Brong-Ahafo	46.3	90.3	79.0	78.3	9.6	82.7
Northern	27.8	73.0	36.4	35.4	2.7	59.3
Upper East	46.5	93.0	84.6	84.1	7.6	91.4
Upper West	47.0	91.3	63.7	63.4	4.7	76.6
Regional performance						
Highest value	Upper West	Ashanti	Greater Accra	Greater Accra	Greater Accra	Greater Accra
	47.0	93.5	92.1	92.5	22.9	95.6
Lowest value	Northern	Northern	Northern	Northern	Northern	Northern
	27.8	73.0	36.4	35.4	2.7	59.3
Ratio (highest to lowest)	1.7	1.3	2.5	2.6	8.5	1.6

By mother's education:²

- 93 percent of mothers with higher education made at least four ANC visits, compared to only 79 percent of mothers with no education.
- Only 52 percent of deliveries among mothers with no education were assisted by a skilled attendant, compared to 69 percent of deliveries among mothers with primary education and 98 percent of deliveries among mothers with higher education.
- 25 percent of newborns are checked within two days after birth if their mothers have no education, compared to 27 percent of newborns born to mothers with a primary education and 32 percent of newborns born to mothers who received higher education.

The better educated the mother is, the more likely she will receive critical **maternal health services**



Percentage of deliveries having a skilled birth attendant relative to the education level of the mother

By geographic regions:²

- Ashanti saw the highest rate of antenatal care coverage (at least four visits) of 94 percent, compared to the lowest coverage of 73 percent in Northern.
- The region with the highest coverage of skilled birth attendance is Greater Accra with 92 percent; the lowest coverage is Northern with 36 percent – a difference of 2.5 times.
- Upper East has the highest coverage of PNC for newborns (within 2 days after birth) with 60 percent and Western has the lowest coverage at 7 percent.

Coverage – care for newborns								Other	
Postnatal care of newborns within 2 days (%)	Newborn weighed at birth (%)	Early initiation of breast-feeding (%)	Exclusive breast-feeding (<6 months) (%)	BCG vaccine, newborn (%)	Pentavalent 1 vaccination received (%)**	Tetanus protection for newborns (%)	Birth registration (%)	Births by age 18 (%) ^{a, #}	
22.8	60.3	55.6	52.3	96.8	96.6	78.0	70.5	16.9	National estimate
6.5	56.9	62.0		96.8	95.4	82.0	61.9	22.8	Western
24.3	52.0	60.9		95.9	98.4	84.0	81.3	15.9	Central
42.1	80.0	52.8		98.4	97.2	78.2	79.3	13.8	Greater Accra
19.3	63.1	44.1		96.4	90.9	80.8	49.5	14.7	Volta
10.6	49.1	50.7		94.5	94.7	68.8	64.3	23.3	Eastern
16.2	73.7	50.0		98.1	99.1	81.8	81.5	9.5	Ashanti
11.2	63.7	59.2		100.0	99.5	83.7	56.7	21.3	Brong-Ahafo
21.8	28.4	64.7		92.1	93.6	69.0	68.3	19.6	Northern
59.9	67.9	65.2		97.9	98.7	68.0	71.3	18.6	Upper East
49.2	57.3	40.6		98.6	97.5	70.9	75.3	21.5	Upper West
Upper East	Greater Accra	Upper East		Brong Ahafo	Brong Ahafo	Central	Ashanti	Eastern	Regional performance
59.9	80	65.2		100	99.5	84	81.5	23.3	
Western	Northern	Upper West		Northern	Volta	Upper East	Volta	Ashanti	
6.5	28.4	40.6		92.1	90.9	68.0	49.5	9.5	
9.2	2.8	1.6		1.1	1.1	1.2	1.6	2.5	Ratio (highest to lowest)

Key for tables:

0-24 %

25-49 %

50-74 %

75-100%

Data not available

Sources:

- 1 United Nations, Department of Economic and Social Affairs, Population Division (2015). World Population Prospects: The 2015 Revision.
- 2 Ghana Demographic and Health Survey 2014 via the DHS Program STATcompiler. (<http://www.statcompiler.com>).*
- 3 United Nations Inter-agency Group for Child Mortality Estimation (UNICEF, WHO, United Nations Population Division and the World Bank).
- 4 United Nations Maternal Mortality Estimation Inter-agency Group (WHO, UNICEF, UNFPA, United Nations Population Division and the World Bank).
- 5 Trends in maternal mortality: 1990 to 2015: estimates by WHO, UNICEF, UNFPA, World Bank Group and the United Nations Population Division.
- 6 Lawn JE, Blencowe H, Waiswa P, et al, for The Lancet Ending Preventable Stillbirths Series study group with The Lancet Stillbirth Epidemiology investigator group. Stillbirths: rates, risk factors, and acceleration towards 2030. Lancet 2016; published online Jan 18. [http://dx.doi.org/10.1016/S0140-6736\(15\)00837-5](http://dx.doi.org/10.1016/S0140-6736(15)00837-5).
- 7 Blencowe H, Cousens S, Oestergaard M, Chou D, Moller AB, Narwal R, Adler A, Garcia CV, Rohde S, Say L, Lawn JE. National, regional and worldwide estimates of preterm birth rates in the year 2010 with time trends since 1990 for selected countries: a systematic analysis and implications. The Lancet, June 9 2012, 379(9832): 2162-72.
- 8 Averting Maternal Death and Disability, United Nations Children's Fund, and United Nations Population Fund special data compilation, 2015.
- 9 Global Health Workforce Statistics database, World Health Organization, Geneva. (<http://www.who.int/hrh/statistics/hwfstats/>).
- 10 United Nations, Department of Economic and Social Affairs, Population Division (2015). 2015 Update for the MDG Database.
- 11 WHO-MCEE estimates for child causes of death, 2000-2015. (http://www.who.int/healthinfo/global_burden_disease/estimates_child_cod_2015/).

Notes:

- * DHS data drawn from STATcompiler which employs standard indicator definitions to allow for comparability between countries and year. As such, data herein may not reflect data included in the final report. For further information please visit <http://goo.gl/jXJ5SW>. MICS data reflect final report figures where available.
- ** Pentavalent schedule includes the hepatitis B vaccine.
- a Data from UNICEF reanalysis of Ghana Demographic and Health Survey 2014.
- ^ Reference period: five years preceding the survey.
- ≠ Reference period: ten years preceding the survey.
- # Births by age 18 among 20-24 year olds.
- () Based on small denominators (typically 25-49 unweighted cases). No data based on fewer than 25 unweighted cases are displayed.