

PRESBYTERIAN CHURCH OF GHANA

**Committee on Health & Environment**



**2021**  
**HEALTH WEEK CELEBRATION**

Schedule of Activities:  
**Monday, 2nd - Sunday, 8th August, 2021**

Theme:  
**“Equipping The Saints For Ministry:  
Our Health In Our Hands”**

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## **MESSAGE FROM THE DIRECTOR, DEPARTMENT OF DEVELOPMENT AND SOCIAL SERVICES**

Dear Friends in the Lord, I bring you special greetings in the name of our Lord and Saviour Jesus Christ who is the creator and sustainer of the Universe. We thank Him for sustaining us through 2020 especially through the COVID-19 Pandemic. He is Good! and His Mercies endures forever! Amen.

After a one-year hiatus due to the uncertainties of COVID-19, we are happy to bring you this year's Health Week celebrations. The 2021 theme; **'Equipping The Saints for Ministry: Our Health in Our Hands'** has been specifically chosen to showcase key issues of concern to the Church and Citizens.

### **COVID-19 And The Church**

First, the devastating effect of COVID-19 on all peoples of the world. Since declaring it a Global Pandemic in March 2020, the World Health Organisation (WHO) reports that all countries in the world have been affected. Ghana has not been spared with COVID-19 reported in all Regions and affecting all segment of citizens. More than one year after the Pandemic struck, we are living through the uncertainties that have necessitated changes in our ways of living. One of this being the culture of handwashing and the wearing of facemasks.

The effect on COVID-19 on the Church, as in all other areas of society, has been drastic. Church numbers have reduced drastically as our older members are encouraged to stay at home and our ability to congregate has been more and more moved online. Though originally a health issue, the effect of COVID has now transcended into the social and economic arena. Indeed, COVID-19 has had a disruptive effect on all aspects of human life.

But there is hope. We can take our health into our hands, by making small but practical decisions that protect us and our loved ones from contracting or spreading the disease. This includes washing our hands with soap under running water or rub with alcohol-based sanitizer, wearing appropriate nose masks, social distancing and eating nutritious meals.

COVID is not a death sentence. You can recover from it. A case patient is not equal to dead patient. All of us are at risk so let us fight this pandemic with all seriousness.

I commiserate with all who have lost loved ones during these trying times. I also thank God for all who have recovered from the virus and are supporting the fight against COVID. I urge all Christians not to stigmatise our recovered brothers and sisters, but to support them with love and genuine affection as they slowly grow into their health.

### **National Cleanliness and Sanitation Campaign**

Secondly, this theme is in line with the PCG's 'National Cleanliness and Sanitation Campaign' launched at the 19<sup>th</sup> General Assembly. The overall objective of this Campaign is to revive the communal spirit of environmental sanitation and cleanliness and engender a national consciousness towards ecological integrity in line with sound biblical beliefs and commands.

The Committee on Health and Environment, in collaboration with the Department of Ecumenical and Social Relations, has been leading the Campaign to ensure stronger ecological integrity with the people of God at the forefront. Creation glorifies God in the goodness and splendour of its very being and order. Psalm 19:1-4 says, 'The heavens are telling the glory of God; and the firmament proclaims his handiwork'. We must necessarily eschew filth in our communities, homes and institutions. We believe strongly that a saint who is equipped for Ministry should be a healthy Saint in body, mind and environs.

The Sustainable Development Goal 6.2 challenges countries to achieve ‘access to adequate and equitable sanitation and hygiene for all, paying special attention to the needs of women and girls and those in vulnerable situations’. It is interesting to note that Ghana’s nationwide access to improved sanitation is only at 14% and the Millennium Development Goals (MDGs) sanitation goal was missed by 40% - the lowest in sub Saharan Africa. In Ghana, diarrhoeal diseases cause about 25% of deaths among children under five years (Binka *et al.* 2011). In addition to the health risks, poor sanitation causes considerable financial and economic losses. The Water and Sanitation Programme (2012) reported that the annual economic loss to Ghana due to poor sanitation was US\$290 million, equivalent to 1.6% of Gross Domestic Product.

These statistics show us the ‘why’ for the PCG to continue a National Sanitation and Cleanliness Campaign. Indeed, it is our vision that all Presbyterian premises should be the cleanest in every community. Our schools, hospitals and churches must be spotlessly clean.

In 2019-2021, this Campaign was piloted in 13 basic schools within the Ga Presbytery with impressive results. This will be extended to all other Presbyterian schools across the country. We also acknowledge Presbyteries who have instituted monthly and quarterly Cleanliness campaigns. Ayekoo to us all!!! But there is more work to be done. We must consciously work on reducing plastic waste and recycling materials that pass through our hands.

In June 2021, the PCG undertook an ambitious programme to plant 1million trees as our contribution to increasing the forest cover of our country Ghana. I am pleased to inform you that this programme was successful. I am grateful to all Presbytery Chairpersons, Clerks and DSS Directors for their enthusiastic support in the full implementation of this programme.

I would like to thank all Congregations who have been faithful in the implementation of the cleanliness campaign with regular clean up exercises. I also encourage Congregations who are yet to begin to support this initiative as a key part of our ‘social witness’ agenda as a Church.

I encourage all Congregations to:

Adhere strictly to the COVID-19 protocols whether in church, at school or work. This includes washing your hands regularly with soap and water, wearing of nose masks and social distancing. All who have access to the vaccines are encouraged to take them.

- Support our members who have survived COVID-19 and desist from stigmatisation
- Organise periodic clean-up exercises at all Courts and in our schools and other facilities. All generational groups are encouraged to include Clean up days within their annual plans of work.
- Put in place strategies to beautify their environment with the planting and nurturing of trees, grass and flowers
- Discussions and periodic education on cleanliness at the generational group meetings, especially the Children’s service and our basic schools. This will ensure that future generations appreciate the value of cleanliness and sanitation in our societies.
- Develop and use sermon guides on Water, Sanitation and Hygiene (WASH) as a means to ground congregants in understanding the reason for continuous cleanliness.

My fellow believers in Christ, even as we navigate the uncertainties of the COVID-19 Pandemic, we know and believe that our Lord will work all things for our good. May we all continue to do our best for the PCG. I will conclude with the words of the Rev. Dr. G.N.N. Odonkor,

the Clerk of General Assembly, at the 2020 GA which states, 'we are called upon as members of the Church to proclaim afresh in this generation, the Good News of Jesus Christ and this requires faithful stewardship and innovation when and where needed. It requires us to reimagine, examine the old ways of doing thing to challenge ourselves to speak up and speak out. The task may feel overwhelming, but like Peter, we are called to do what God asks of us and know that we are able – the God who has called us is faithful'.

I wish you a happy celebration

**SIGNED**

**Mrs. Rebecca Teiko Sabah**  
**(National Director, Development And Soccial Services)**

## PRESBYTERIAN HEALTH SERVICE

The Presbyterian Church of Ghana (PCG) attaches much importance to the welfare of the poor and vulnerable in the society. She is obliged, as a church, to support the society by providing their spiritual and physical needs. The provision of social services by the church is, therefore, a mandate our Lord has given us to serve His people. **This vision of PCG in the health sector, therefore, is to serve the poor through the provision of holistic, affordable and quality health service in fulfilment of Christ's mandate to go and "heal the sick who are there and tell them, the kingdom of God is near you".** (Luke 10: 9 NIV).

The health services programme of the PCG which was started about 136 years ago by Dr. Rudolf Fich on a humble beginning has developed and expanded to benefit thousands of people in and outside Ghana.

The first ever mission hospital in the then Gold Coast, according to Rev. Prof. D.N.A. Kpobi, in his book, Triple Heritage, was established in 1885 by the Church at Kom (Aburi). Although this facility developed well for some years, with the onset of the First World War and the consequent deportation of the Basel Missionaries, it collapsed. After the war, work at the facility resumed, but only for a short period due to lack of funding.

The construction of a new hospital at Agogo in the Asante Akyem area started in 1929, and was completed in 1930. The official opening of this facility was done by the then British Governor of the Gold Coast, Sir Alexander Ransford Slater on March 21, 1931.

On January 1, 1979, Agogo Hospital was given a substantive status of a District Hospital for the Asante Akyem area. **It is the oldest church hospital in Ghana.**



The official opening of the Dormaa Hospital took place in 1954. In 1955, the Basel Mission sent a Dutch female doctor, Dr. Emmy Ode, as the first medical officer in-charge of the hospital. Until the end of 1959, the hospital was financed by the Basel Mission with assistance from the Government of Ghana.

The upgrading of the facility to a district hospital in 1976 required some infrastructural improvements.

In September, 1976, at the request of and in consultation with the then Regional Medical officer and the Hospital Board, Dr. Van Es started work on an application for the expansion of the hospital. In 1978, the project was approved by one of the Church's overseas partners, Interchurch Organization for Development Co-operation (ICCO) and the Dutch Government.

By the end of the project in 1984, a new maternity, children and isolation wards, a store and some staff houses had been provided in Dormaa Hospital. The two other hospitals at Bawku and Donkorkrom were handed over by the Government of Ghana to the Church to manage in 1956 and 1985 respectively. Donkorkrom Hospital was a health centre when it was handed over to the Church. They are the government recognized district hospitals in their respective areas.

The Church did not stop here at providing medical care. It saw the need to provide primary health care services in the rural communities. A Primary Health Care (PHC) Programme, then called Rural Health Service Programme, was started in the Asante Akyem area by the Church, in collaboration with the Government of Ghana in 1979. Agogo Hospital provided a District Medical officer while the Ministry of Health provided the other technical staff. The programme did not end in the then Asante Akyem District. The Church extended it to Dormaa, Bolgatanga, Bawku, Sandema, Salaga, Tamale Rural, Afram Plains and Aowin-Suaman (Enchi).

The Church was training nurses in Agogo Hospital before the Second World War (1939 – 1945). This programme was temporarily suspended during the war and by 1986, 184 nurses had been trained. Realizing the need to serve the northern regions, a second nurses' training programme was started at Bawku Hospital by the Church. The two training colleges trained nurses sponsored by Agogo, Bawku and other church health institutions. Currently, they train nurses for both Church and public health institutions.

The PCG has become a major player in health service delivery in the country. It is currently running a total of fifty-five (55) health institutions in the country. These are made up of:

- Four (4) District Hospitals - Agogo, Bawku, Dormaa and Donkorkrom
- One (1) Primary Hospital – Assin Praso
- One (1) Regional Eye Care Centre - Bolgatanga
- Six (6) Primary Health Care (PHC) Outreach Programmes
- Thirty-Six (36) Health Centres and Clinics
- One (1) Midwifery Training College – Duayaw-Nwanta
- Three (3) Nursing and Midwifery Training College – Agogo, Bawku & Dormaa-Ahenkro
- One (1) Health Technical Unit (H.T.U.) - Konongo
- Two (2) Community-Based Rehabilitation (CBR) Centres – Garu and Sandema

These institutions provide a substantial portion of health services in the rural areas with a workforce of over 3,650 and total beds of 1,598 as at 31<sup>st</sup> December, 2020. Curative, preventive and promotive services are provided to clients by the facilities in their respective catchment areas.

The PHC interventions cover areas such as antenatal care, postnatal care, family planning, nutrition, growth monitoring of children between 0 – 5 years, immunization, health education, environmental sanitation, HIV&AIDS control, prevention, home-based care and counselling and clinical care at the health centres.

**The Church is currently the third largest single provider of health services in the country. It is next to the Ghana Health Service and the Roman Catholic Church.**

### **Disease Patterns**

Generally, malaria cases reported at the OPD and the wards at the hospitals dropped in 2020 in comparison with 2019 figures.

It ranked 4<sup>th</sup>, 2<sup>nd</sup> and 4<sup>th</sup> at the OPD in Agogo, Bawku and Donkorkrom Hospitals as against 2019 positions of 2<sup>nd</sup>, 3<sup>rd</sup> and 1<sup>st</sup> respectively. While it rose from 3<sup>rd</sup> to 2<sup>nd</sup> position in Bawku Hospital, it did not feature in the top 10 causes of OPD attendance in Dormaa Hospital.

At the in-patient department (admissions) it maintained its 1<sup>st</sup> and 2<sup>nd</sup> positions in Agogo and Bawku Hospitals in comparison with 2019 records respectively. It came down from 1<sup>st</sup> to 8<sup>th</sup> and 1<sup>st</sup> to 6<sup>th</sup> positions in Dormaa and Donkorkrom Hospitals respectively.

The institutions intensified their efforts at reducing the incidence of malaria in their operational areas. These efforts included:

- Provision of insecticide treated nets (ITNs) for all beds in the hospitals and health centres and for pregnant women who attended antenatal clinics.
- Provision of trap doors for all wards.
- Replacement of worn out mosquito nets.

- Continuous weeding of bushes and draining of stagnant water.
- Residual spraying against mosquitoes.
- Mass distribution of insecticide treated nets (ITNs) to people in the communities by the PHCs in collaboration with Ghana Health Service (GHS).
- Distribution of sulphurdoxine primephamine (SP) to pregnant women.
- Community sensitization by the PHC and GHS staff in the prevention of malaria through environmental cleanliness and use of ITNs.

### **COVID – 19 Pandemic**

During the course of the year, on March 12, 2020, the first two cases of covid-19 virus were confirmed in Ghana. These cases were reported by the Minister for Health after laboratory results of the 2 confirmed cases were received at the same time from the Noguchi Memorial Institute for Medical Research.

With Covid-19 pandemic, the delivery of services to clients in Presbyterian Health Service (PHS) facilities had to be planned to suit the circumstances of the time.

The observance of social distancing at places where people gathered compelled the Institutional Heads and their team of managers to raise canopies at their OPDs to be able to accommodate all clients who visited their facilities for medical care.

PHS joined forces with other 32 Church Health Services to mobilize personal protective equipment (PPEs), through CHAG, for staff and clients. The support in kind came from the Ministry of Health, some professional bodies such as the Institute of Bankers and some NGOs.

The items received by PHS facilities included 100,000 pieces of general nose mask, different volumes of sanitizers, bina 20 disinfectant, chlorine disinfectant and liquid soap, infra-red thermometers, paper tissue rolls, laboratory coats, surgical gloves, veronica buckets with stands, coverall, etc. But for the support from the government, the professional groups and NGOs, PHS managers would have found it difficult dealing with the pandemic in their facilities and catchment areas. Intensive education, with posters and leaflets, was done at the facilities and in the communities with funding from Star Ghana, an NGO.

In the 4 District Hospitals, Agogo, Bawku, Dormaa and Donkorkrom, a total of 1,506 suspected cases were recorded. Out of this number, 135 and 1,371 were positive and negative respectively. One person died.

#### **Agogo Hospital**

|                  |     |
|------------------|-----|
| Suspected Cases  | 196 |
| Number Positive  | 43  |
| Number Negative  | 153 |
| Number of Deaths | 1   |

#### **Bawku Hospital**

|                  |    |
|------------------|----|
| Suspected Cases  | 42 |
| Number Positive  | 2  |
| Number Negative  | 40 |
| Number of Deaths | -  |

#### **Dormaa Hospital**

|                  |       |
|------------------|-------|
| Suspected Cases  | 1,191 |
| Number Positive  | 79    |
| Number Negative  | 1,112 |
| Number of Deaths | -     |

#### **Donkorkrom Hospital**

|                  |    |
|------------------|----|
| Suspected Cases  | 77 |
| Number Positive  | 11 |
| Number Negative  | 66 |
| Number of Deaths | -  |

|                       |       |
|-----------------------|-------|
| Total Suspected Cases | 1,506 |
| Total Positive Cases  | 135   |
| Total Negative Cases  | 1,371 |
| Total Deaths          | 1     |

Within the structure of the Christian Health Association of Ghana (CHAG), the Church also cooperates with other Christian health service providers. At the local, district, regional and national levels, the PCG collaborates with the government and other agencies operating in the health sector.

Within the frame work of the PCG, the health institutions are under the direction of the Committee on Health and Environment that is responsible for advising the Church on health and environmental issues.

All patients identified as poor by the respective Poor and Sick Committees of the health facilities were provided with free medical care. The facilities spent GH¢156,728.00 for attending to 598 poor patients, (GH¢126,464.00 on 695 patients in 2019), excluding travelling and transport (T&T), meals and clothing provided for many of them.

They also registered 514 poor patients (527 in 2019) with the NHIS from their Poor and Sick Funds.

Many poor patients reported late for treatment with severe cases.

The Presbyterian Health Service (PHS) has, as part of its involvement in PHC been responsible for coverage of some specific sub-districts within districts where it is represented, sharing responsibilities for delivering PHC services with the Ghana Health Service (GHS) and other collaborators.

The Church is making effort to increase the number of her health facilities in the country. It is projected that, in collaboration with the Presbyteries, one clinic or health centre would be established each year for the next five years.

With the drastic reduction of financial support from most of the Church's overseas partners due to donor fatigue, this objective of the Church can only be achieved by local mobilization of resources.

### **Main Achievement / Notable Events**

1. Renovation of Ophthalmologist residence is underway at Agogo Hospital.
2. Funding has been secured by Agogo Hospital for the construction of a brand new waste management facility (incinerator)
3. Acquisition of essential PPEs to protect PHS staff against the covid-19 pandemic
4. Construction of a laboratory for Under-5 completed at Agogo Hospital
5. Donation of 10 beds, Oxygen concentrator, 1 Ventilator, 1 Patient Monitor, 4 Delivery beds and 4 Critical beds was received by Agogo Hospital.
6. Eighty (80) capacity computer laboratory fully furnished for online exams at Agogo NMTC.
7. Mechanized borehole constructed for Agogo NMTC.
8. Overall best student RGN (Online MCQ) NMC licensing examination 2020 from Agogo NMTC.
9. Construction of powerhouse for generator completed at Assin Praso Health Centre.
10. Accreditation of Assin Praso Health Centre by Health Facilities Regulatory Agency (HeFRA) to operate as a Primary Hospital obtained on 17<sup>th</sup> December 2020.
11. The General Assembly Office, through the Health Co-ordinating Unit, released GHC50,000.00 to Assin Praso Health Centre to support its upgrading to a hospital.

12. Three apartments were completed to house 4 staff members at Assin Nsuta Health Centre.
13. Construction of a new OPD Block with two (2) consulting rooms, an Eye OPD with washrooms and a dispensary block completed at Kwahu Praso Health Centre.
14. Procurement of seven (7) air conditioners, a delivery bed, an ultrasound machine, a water bath for the running of G6PD for all ANC attendants and an automated centrifuge by Kwahu Praso Health Centre.
15. Procurement of two (2) nebulizers, one (1) new oxygen cylinder, a flow meter and a water bath for G6PD for the laboratory by Enchi Health Centre.
16. Enchi Health Centre received a brand new 1.5hp Air Conditioner for the laboratory from Western Presbytery through the Moderator.
17. Renovations carried out in all the PHC facilities in the North.
18. Procurement of a robust vehicle for the General Manager's office by the PHS-N.
19. Construction of an Administration Block in the Presbyterian Hospital, Bawku, ongoing.
20. Lobbied the Municipal Assembly for the construction of a special ward in the Presbyterian Hospital, Bawku.
21. Dormaa Hospital received a forty-foot Container donation of medical equipment, including beds, from Denmark, through Mr. Collins Wood.
22. The services of "Volunteers" to help clients assess health services with ease at the Dormaa Hospital was expanded.



23. The Moderator of the General Assembly of the Presbyterian Church of Ghana joined the President, His Excellency, Nana Addo Danquah Akuffo-Addo, to cut Sod for the Emergency Centre's construction for the Presbyterian Hospital, Dormaa.
24. The Moderator visited Dormaa to launch the hospital's Home Care Service vehicle and motor bikes and honoured the Health Minister, Hon. Kwaku Agyemang Manu, for his meritorious service to the Presbyterian Health Service and the nation at large. The Minister, Hon. Kwaku Agyemang Manu donated five (5) Motyor Bikes to support the hospital's Home Care Service.
25. PHS facilities received assorted PPEs donations from the PCG, Christian Health Association of Ghana (CHAG), Ministry of Health (MOH), other Churches, Organizations and individuals for the fight against COVID-19.
26. Completion of Mental Health Building at the Presbyterian Health Centre, Jenjemireja, by CHAG.
27. Presbyterian Clinic, Jankufa, was upgraded to a Health Centre.
28. Upgrade of the Presbyterian Health Centre, Suma Ahenkro, to a Health Centre with a Doctor was achieved.
29. Two staff bungalows were completed and handed over by the DCE, Jaman North, to the Presbyterian Health Centre, Suma Ahenkro.
30. Jankufa citizens in Europe donated GH¢32,000 to furnish a laboratory facility for the Health Centre.
31. Completion of Modern Kitchen at Dormaa NMTC.
32. Completion of Assembly Hall Ground Floor at Dormaa NMTC.
33. Construction of Dining Hall in progress at Dormaa NMTC.
34. A new Nissan Hardbody pick-up was acquired for the MTC, Duayaw-Nkwanta, on hire purchase, to replace their old vehicle.

35. Ear, Nose and Throat (ENT) Unit was set up at the Presbyterian Hospital, Donkorkrom with the required Human resource and medical equipment.
36. Cervical cancer and prostate cancer units were set up and resourced to undertake testing at the Presbyterian Hospital, Donkorkrom.
37. Painting of the walls of the Donkorkrom Hospital buildings and the Hospital fence wall was ongoing.
38. A of new chemistry analyzer, a hematology analyzer for the laboratory unit and a capnograph machine for the Anesthesia unit were procured by Donkorkrom Hospital.

### **Major Challenges / Constraints**

1. Non recognition of Agogo Hospital as a Secondary health facility by NHIA. It affects the hospital financially as a result of non-commensurate low tariffs.
2. Delayed re-imburement of health insurance claims to the health facilities.
3. Refusal of professional / technical staff to accept postings to some institutions in the Afram Plains and the Northern Ghana.
4. Inadequate staff accommodation in all the facilities.
5. Daunting amount of utility bills demanded by Electricity Company of Ghana, Northern Electricity Company and Ghana Water Company
6. Inadequate vehicles for official duties.
7. Obsolete medical equipment with frequent breakdowns and high maintenance costs.
8. Inadequate infrastructure to accommodate clinical activities such as Mental Health Services, Disease Control and Child Welfare Clinics among others at Abetifi Health Centre.

9. Lack of standard IT laboratory for on-line examination at the Health Training Institutions.
10. Inadequate teaching staff
11. Poor internet connectivity at Agogo NMTC
12. Lack of school buses to transport students to and from clinical sites.
13. Inadequate accommodation for students in the training institutions.

### **Way Forward**

1. Through the CHAG Secretariat, the Christian Council of Ghana, the Catholic Bishops Conference and the Pentecostal and Charismatic Council, sustain pressure on NHIA to settle all outstanding claims within the period agreed upon with the service providers.
2. Continue lobbying District / Municipal Assemblies to fund construction of staff accommodation units for the facilities, especially those sited in remote areas.
3. General Managers to submit their institutional staff requirements, through the Health Co-ordinating Unit, to the CHAG Secretariat for consideration when postings to the Church Health Services are being done. The CBRs should not be left out.
4. Institutional Managers to put measures in place to manage the use of utilities in the facilities efficiently.
5. Institutional Managers to institute vehicle and equipment replacement funds to address the vehicle and equipment challenges.
6. Acquisition of additional computers to facilitate e-learning and online examination in the training institutions.
7. Get the Ministry of Health to complete all hostel, classroom and administration block projects in the health training institutions

We wish to encourage all Presbyterians to contribute to the **HEALTH FUND**, especially during the celebration of the Health Week in August.

The target for this year, 2019, is GH¢100,000.00 and with your support, we hope to achieve it on Sunday, August 08, 2021.

We wish to express our sincere thanks to Congregations, Districts and Presbyteries that contributed to the FUND in 2019. We urge them to do more this year for a worthy cause.

## ACTIVITIES

### **Monday, 2<sup>nd</sup> to Sunday, 8<sup>th</sup> August, 2021**

Generational Groups should organize 30 minutes talk on Environmental cleanliness at their meetings.

### **Sunday, 1<sup>st</sup> August, 2021**

Launching of 2021 Health Week in Congregations during Church Service.

### **Sunday, 8<sup>th</sup> August, 2021**

Thanksgiving/Fund Raising Service in support of the health programmes of the Church.

### **Send Monies to:**

**Presbyterian Health Service Account Number 1241130004846  
with the GCB Bank Ltd., Makola Branch, Accra.**

**Thanks for your participation and may God richly bless you.**

***For Enquiries Contact: Isaac Erzuah - 0242 – 15 63 21***

