The population of the region is 729,044, (projected from 2010 population and housing consensus) its capital is Wa. The total number of districts has been increased from 9 to 11. The two new districts - Daffiama Busie and Nandom districts—became operational in January 2013. The region has 65 Sub-districts. Health infrastructure includes 9 hospitals, 65 health centres (5 of which have been upgraded to Polyclinic status), 166 CHPS compounds and 9 other health facilities. The region has six health training institutions.

Human resource for health is limited especially critical staff like doctors, midwives, laboratory staff and clinical nurses. The region is confronted with high malaria disease burden and sometimes experiences outbreak of communicable diseases such as CSM, anthrax, cholera and yellow fever.

The strength of the Regional Health Directorate lies in the open door management style adopted by the Regional Director of Health Services

### Vital Regional statistics on Human Resource

<table>
<thead>
<tr>
<th>Category</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of Ghanaian Doctors</td>
<td>13</td>
<td>13</td>
<td>15</td>
<td>14</td>
<td>12</td>
</tr>
<tr>
<td>No. Of Cuban Doctors</td>
<td>16</td>
<td>16</td>
<td>17</td>
<td>17</td>
<td>17</td>
</tr>
<tr>
<td>Doctor: Pop Ratio (Gh only)</td>
<td>1:50,756</td>
<td>1:51,619</td>
<td>1:46,807</td>
<td>1:51,104</td>
<td>1:60,753</td>
</tr>
<tr>
<td>Doctor: Pop Ratio (Gh + Cuban)</td>
<td>1:22,649</td>
<td>1:23,848</td>
<td>1:25,139</td>
<td>1:25,139</td>
<td>1:25,139</td>
</tr>
<tr>
<td>No. of Nurses</td>
<td>787</td>
<td>934</td>
<td>968</td>
<td>1,333</td>
<td>1,250</td>
</tr>
<tr>
<td>Nurse: Pop Ratio</td>
<td>1:838</td>
<td>1:1718</td>
<td>1:726</td>
<td>1:537</td>
<td>1:583</td>
</tr>
<tr>
<td>No of Medical Assistants</td>
<td>16</td>
<td>15</td>
<td>20</td>
<td>23</td>
<td>26</td>
</tr>
<tr>
<td>Number of Midwives</td>
<td>121</td>
<td>153</td>
<td>158</td>
<td>147</td>
<td>135</td>
</tr>
<tr>
<td>Midwives: rWiFA Rito</td>
<td>1:1309</td>
<td>1:1053</td>
<td>1:737</td>
<td>1:1153</td>
<td>1:1280</td>
</tr>
</tbody>
</table>
Upper West Region on the path to achieving MDG4 by strengthening EPI activities

The RHD has embarked on a multi-prong strategy to ensure the achievement of MDG5. The RHA is bent on reversing the declining trend. To expand coverage to deprived areas of the region CHOs have been deployed to 166 functioning CHPS compounds in the region.

Routine immunization at static points as well as outreach services have been strengthened. In order to conquer the hard terrain and penetrate into the remotest areas, the RHD has supported the districts with motorbikes and all CHOs and CHNs trained to hit the road without fear.

Surely the impact of these intervention shall result in improved coverage.

Penta3 and Measles coverage 2009 to 2012

War on Neonatal, Infant, and Under 5 deaths in Upper West Region (MDG4): DDPH and DDCC in the fore front.

The Upper West Regional Health Directorate has trained more midwives to use the partograph. This has contributed significantly to reduction of fresh still births in the region.

All hospitals in the region have also introduced the baby friendly approach and the kangaroo mother care strategy to help reduce neonatal deaths and infant deaths

Dr Kofi Issah (DDPH) and Mr T. Owusu Ansah (DDCC) vow to jointly ensure the region attains

Neonatal, Infant & <5 deaths trend in the UWR

Safe motherhood training in pictures
Safe motherhood initiatives are top priorities for the Upper West Regional Health Directorate. Special interventions to improve coverage include:

1) Mother to Mother Support Groups
2) ANC Classes
3) Community register for pregnant women
4) ANC at outreach points

Hemorrhage, Sepsis Severe Anemia and Renal failure accounts for over 60% of maternal deaths in the Upper West Region. The RHD is resolved that no matter what are the causes, maternal deaths must come down in the Upper West Region.

Upcoming West on Cause to Achieving Reduction in maternal deaths (MDG 5), the graph speaks for itself

The region attained 100% maternal death audit from 2009 –2012

Health Tips
Take lessons in regenerative health and nutrition. It is a sure way of getting information on how to protect yourself from lifestyle diseases such as hypertension and diabetes.

Dr Fofie (Specialists Gynaecologists). Deserves commendation for his service to UWR
MDG 6: The fight against malaria intensified in UWR

Malaria for many years has been a major cause of morbidity and mortality not only in the Upper West Region but Ghana as a whole.

In order to intensify the fight against malaria, the RHD implemented all recommended strategies to fight the disease. These include, promotion of the use of insecticide treated nets (with over 374,948 ITNs hanged during the hang-up campaign) distribution of SP, and use of ACTs in all health facilities.

The fight has been taken to a higher level in 2012 when a Team from AngloGold Ashanti started the Indoor Residual Spraying (IRS) in the region. This means taking the fight to all the breeding sports of the deadly mosquito. The IRS campaign is a special initiative sponsored by the NMCP.

Trend of Pregnant women receiving IPT2

Trend of Under 5 Malaria case fatality 2007 to 2012

TB Treatment Success (MDG 6) are we making progress?

TB Strategies adopted: DOTS implemented in all districts in the region.

Implementation of SOPs for case detection with particular focus on facility-based case detection, Provision of drugs, logistics and sensitization to increase awareness about tuberculosis.

PMTCT Service - Priority intervention for the RHD

PMTCT services are provided in all Hospitals as well as some selected Health Centres in the region.

Logistics Support is provided by the NACP.

The PMTCT (HIV/AIDS) as whole is beginning to experience logistic support problems eroding gains made in the past as shown in the graph.

Data Source: DHIMS 2 Data Management Software
ERROR: syntaxerror
OFFENDING COMMAND: --nostringval--

STACK:

>Title
()
>Subject
(D:20130424142509+00'00')
>ModDate
()
>Keywords
(PDFCreator Version 0.9.5)
>Creator
(D:20130424142509+00'00')
>CreationDate
(HIU)
>Author
-mark-