GHANA

VISION: IMPLEMENTING ICCM TO GET OFF THE 10+1 LIST........

And save children’s lives!
Main Conclusion & Action Items

Policies are written and in place, funded, and scaling in some regions already

1. Need to get **strong, top-down mandate** for deployment of ICCM as a national priority (i.e. from President) to activate stakeholders at all levels to take action to support the National Child Health Policy - Use the First Lady as a child health champion to raise concerns about child mortality

2. NMCP PM to develop a **clear proposal for the use of the 0.5% of District Assembly Common Fund malaria allocation**; present UP to Director PH (and carry along Director Family Health; present UP to DG for approval; engage Director PPME; FINALLY, go DOWN to regions to districts

3. Encourage local manufacturing of ICCM essential commodities (links to National Health Insurance scheme)
Ghana MOH, Government and In-Country Partners
Main Message: Putting local government at the center

Local Government Partnership for Health: Local government (district assembly) to support CHPS by the 0.5% allocation to malaria and establish accountability mechanism; Additional funds (e.g. 2% Disability Common Fund) could be leveraged to support iCCM

Policy Translation and Guidance: The definition and understanding of iCCM and the relationship with CHPS must be consistent at all levels – MoH/GHS National level, DPs level, Regional, District and critically at the community level
Global & Regional Partners

Partner Collaboration: WHO and UNICEF should bring partners (GFF, KOICA, JICA, USAID, GF, NGOs, etc) together and establish a clear funding plan for contribution to CHPS (which must include iCCM) across all partners:

• What they will fund for iCCM?
• Where they will fund it (geographically)?
• How the funds will be moved/implemented?
• How to scale?

Recommendation to WHO and donors: to lead by example and come as an integrated organization e.g. Malaria, Child Health, PHC etc.

Recommendation to Global Fund: should review objection to funding non – malaria iCCM commodities