

Ghana has witnessed a steady growth in the number of older people within its population. Today, the country reportedly has the fastest growing number of over-60s in sub-Saharan Africa. But the country is noticeably unprepared to meet the needs of the increasing older population. **Martha Yankey** reports from Accra.

## To enhance its future, Ghana must protect its old people

**A**s the mortality rate in Ghana continues to decline, thanks to better health care and improved lifestyles, the country's older persons are enjoying an increase in the nation's average life expectancy. The transformation of the demographic could be presented as a clear indication of progress and the improvement in Ghana's economic standing. But a closer look highlights growing concerns that the country's health care system will be unable to cope

with an aging population.

In 2011 at her London home, Elizabeth Danso (a long-term Ghanaian resident of the UK), noticed that her mother, Patience Owusu, was different. "She would just sit and cry – for no reason. No one had done anything to her. She became withdrawn. She wouldn't eat. If you asked her what she wanted to eat, she didn't know," Danso explained.

Her mother was diagnosed with Alzheimer's, the most common form of dementia to afflict the over-65s. Despite

the diagnosis finally offering Danso and her family a clear explanation for her mother's behaviour, it did not negate the feelings of helplessness that came with watching the old lady forget the most basic of things.

"We had to do everything for her. We had to physically help her and even think for her," Danso recalled. "She couldn't change her clothes. She couldn't cook for herself because she would forget that she had put the fire on and could burn the house down. She would forget to take her medication."

It is estimated that by 2050, there could be more than 70 million elderly dementia sufferers living in developing countries such as Ghana



Once, whilst her daughter cleaned the bathroom upstairs, Patience Owusu went missing. She was found by the police over two miles away sitting in a fast food shop. Out of sheer desperation, she would be locked in her room when the family had visitors, for there was no telling what she would do. On three occasions, she stripped naked without warning.

According to the WHO, there are currently 35.6 million people with dementia globally. It is estimated that this number will increase to 65.7 million in 2030 and 114.5 million in 2050. Most worryingly, by 2050, 71% of these people will reside in lower-middle income countries, such as Ghana.

The word dementia is not illustrative of a single illness but rather encompasses a range of diseases which cause a progressive deterioration in the brain's structure and cognitive function. Alzheimer's, Pick's Disease, Vascular Dementia and Dementia with Lewy Bodies are just some of the illnesses which fall under this umbrella term.

Together with confusion and memory loss, dementia sufferers also display symptoms such as slurred speech, repeatedly asking the same questions, depression, changes in mood and personality, as well as confusion in remembering routes or names.

## An NGO to the rescue

Set up in February 2011, the Alzheimer's and Related Diseases Association of Ghana (ARDAG) is a registered NGO dedicated to raising awareness of dementia and championing legislative and social change. Primarily funded by Mrs Esther Dey and her husband Venance, the organisation receives little external financial support, with only a small donation from its board members and technical support from Alzheimer's Disease International (ADI) to facilitate its work.

As with many other charitable organisations, ARDAG receives

no governmental support: "There is absolutely no provision of government budget for dementia in Ghana," says Mrs Dey. "As a result, the activities of our organisation, such as awareness creation using the media, volunteers' support, transport, the cost of training volunteers and trainers, all is catered for by myself and my husband."

In early January this year, ARDAG held a conference in Tema entitled "Combating dementia in 21<sup>st</sup> century Ghana – the silent epidemic". At the conference, Mrs Dey recounted an incident in 2010 where an elderly woman, Ama Ahima, was murdered after she became lost and could not explain why she found herself in a stranger's home. Deemed a witch, she was set alight, and died 24 hours later.

Attitudinal change is perhaps the single most important part of raising awareness of dementia in Ghana and is one of the principal motivations of ARDAG. Utilising various media, ARDAG runs intensive awareness campaigns targeting the public, government, and policy makers.

"We also collaborate with District Assemblies and local chiefs to give public talks on dementia in the various communities," said Mrs Dey. "We are also using churches as a platform for awareness campaign[s], and run a 24-hour helpline to provide information, support and translation services to the general public."

As part of its services for dementia sufferers, ARDAG used to run two day-care centres, one in the capital Accra, and the second at Hohoe, in the Volta Region. Due to a lack of funds the centres were forced to close. That Ghana, as a low-middle income country, is seriously lacking in the provision of services for mental health problems, and specifically dementia, is of grave concern.

As iterated by Mrs Dey: "If facilities are not put in place to cater for the rising levels of dementia, there will be problems such as misdiagnosis, mistreatment, and the adverse

effect of an increased burden of dementia care on families and the health system."

## Woeful statistics

The "Mental Health System in Ghana", an extensive report by the Kintampo Project in conjunction with Ghana's Ministry of Health, asserts that a mere 1.4% of government health expenditure is dedicated to mental health, and 1% dedicated to mental health-related research. For a population of over 24 million, Ghana is serviced by a total of 18 psychiatrists when 491 are needed, and medical students shun mental health with only 3% choosing this area.

Woeful as the statistics are, the Ghanaian government's "Better Ghana Agenda" promises to make the changes necessary to address the distinct lack of available health care professionals. President John Mahama's website makes a clear reference to the establishment of a University of Allied and Health Sciences by "transforming the Kintampo Rural Health Training Institute into a university college to support ... the training and deployment of clinical psychologists".

The recent implementation of the long-overdue Mental Health Act 2012 and the installation of a Mental Health Board offers hope to organisations like ARDAG and the Kintampo Project that mental health services will receive the level of attention needed.

A previous national health policy highlights Ghana's foresight into the needs of the ageing population. Initially prepared in 2003, the policy aims to tackle many problems associated with a changing demographic. However, as with the Mental Health Decree of 1972, it was not implemented. Revised in 2010, the new policy aims to right the wrongful political neglect of Ghana's older persons.

Widely recognised as the next biggest health issue to face the international community,

the future for dementia care in Ghana looks hazy. What Mrs Dey's ARDAG would like to see however, is clear.

"I would like to see the future of healthcare in Ghana to be patient-centred, where patients' needs drive the care provided and the way they are handled," said Mrs Dey. "There must be a review of the health system to prioritise cognitive impairment..."

"Also, because dementia is not recognised as a specific illness, there are no health services to assess and diagnose, and no appropriate therapeutic interventions or community support services. The government has to provide facilities for memory clinics and diagnosis centres, train more geriatricians, and support NGOs and civil society groups to



function properly."

The deadline for the UN Millennium Development Goals is fast approaching and it is telling that the three goals Ghana is not likely to achieve or may only partially achieve are health-related. Past attitudes towards both establishing and maintaining a framework by which the mental health of the populace can be effectively addressed, allow a suspicion to be cast over the government's political will to see dementia identified and tackled with the same gusto as HIV-Aids.

Without increased funding, education, and a change in people's perception of dementia, Ghana will not be able to effectively care for its old people, which in turn will hinder the progress of its young people – young people who will also grow old.

NA