



The launching of Ghana Medicines Transparency Alliance (MeTA) initiative

Speech by Hon Gladys N Ashitey, Deputy Minister of Health

Mr. Chairman,
Co-Chairpersons of Ghana MeTA Council,
Executive Secretary of International MeTA Secretariat,
Development Partners,
Distinguished members of the Ghana MeTA Council,
Invited Guests,
Our Media Partners,
Ladies and Gentlemen

You will agree with me that the importance of access to good quality and affordable medicines towards improving health is not in doubt. However, in most resource-limited countries including Ghana, only a third of the population has access to good quality medicines. Often, the prices of such medicines are beyond the reach of the ordinary man, woman or child. This creates untold hardships on the population and contributes to avoidable deaths or medical complications. Major tensions and reiterating vicious cycles exist concerning promoting access to medicines in the context of addressing priority endemic diseases. The tensions of:

1. Globalization versus Localization.
2. Public Health goals versus profits;

And two vicious cycles;

- (i) The poverty-sickness cycle and

(ii) The dependency cycle;

exist that need breaking.

As the Ghana National Health Policy states, the priority should be on “Creating Wealth through Health”.

In the context of the aforementioned tensions and vicious cycles, Ghana in the past has pursued various access to medicines initiatives in collaboration with Development Partners. It is my pleasure to acknowledge the contribution by the World Bank, the World Health Organization, the Kingdom of the Royal Netherlands, UK’s Department for International Development and the Donor community at large; whose collective effort has led to the achievement of modest gains such as improved availability, quality and affordable medicines.

However, the nature of medicines sales and distribution contributes to high levels of inefficiencies and potential fraud. Issues such as bribery, theft and diversion, the supply of counterfeit and substandard medicines are known challenges. Rent seeking behavior – such as the addition of unnecessarily high mark-ups at different points along the supply chain, undermines health outcomes. The above factors play a major role in determining whether consumers have access to affordable medicines and whether these medicines actually achieve their optimal clinical effects. Many of these issues are grounded in problems of information asymmetry in the relationships among distributors, prescribers, dispensers, and consumers. This highlights the need for policies and systems that encourage more transparent and effective communication in the process of care.

It is within the above context that Ghana has offered itself as a pilot for Medicine Transparency Alliance (MeTA) Initiative. This is the UK Government’s response to the above challenges by facilitating international support for and commitments to transparent working practices on the part of Government, Donors, the Private Sector, Civil Society Organisations and other Stakeholders.

Preliminary studies sponsored by the UK Department for International Development (DFID) found Ghana to be ideal as a pilot country for MeTA because of her existing enabling legislative and policy environment. Features of this environment include:-

- Government and Presidential commitment to good governance;

- The Public Procurement Act 2003;
- Whistle blowers Act and others.
- Many bodies already collect and report data on aspects of medicines supply and use chain e.g. Food and Drugs Board (FDB), Central Medical Stores (CMS), MOH Procurement Unit, Ghana Health Service (GHS), Christian Health Association of Ghana (CHAG) and the Ghana National Drugs Programme (GNDP);
- The National Health Insurance Scheme offers significant opportunities to improve transparency, accountability and access in medicines pricing and quality as well as procurement and supply.

Ghana believes in building on the principles already established in policy and legislative frameworks to:

1. Establish mechanisms to strengthen the collection, analysis and dissemination of data on medicines along the supply chain to include:
 - a. Ensuring the proactive collation and dissemination of existing data on areas such as procurement, quality, availability and pricing.
 - b. Establishing a regular system of data collection on tracer drugs (e.g. artemisinin-based anti-malarials, Anti-retroviral medicines, contraceptives) to monitor their availability, price, quality and rational use in both the public and private sectors.
 - c. Developing and introducing a systematic disclosure regime of medicine information.
2. Facilitate peer oversight systems within and across health professionals.
3. Initiate a regular, open stakeholder's dialogue, through a national Meta forum or 'multi-stakeholder group'.

As part of government's commitment to the principles underpinning MeTA, the Ministry of Health five (5) year programme of work has already reflected the MeTA concepts.

In September, 2008, I personally inaugurated the Ghana MeTA Governing Council to kick start the pilot. My information is that Ghana is the second country among the pilot counties to launch MeTA at the country level.

I would like to congratulate all stakeholders that have made this possible.

It is government's expectation that Ghana MeTA would engage in very useful win-win dialogue with multi-stakeholders with the patient at the centre.

Mr. Chairman, Ladies and gentlemen, it is my pleasure this morning to launch the Ghana Medicines Transparency Alliance Initiative and charge it to become the platform to enhance governance issues in medicines management in Ghana.

God bless us all.