



# Government's new free primary healthcare policy marks a turning point in saving lives in Ghana

BY RAISSA SAMBOU

**A**LTHOUGH the National Health Insurance Scheme (NHIS) remains operational and has over the years supported access to healthcare, it has not fully removed the cost burden at the primary level. The launch of Ghana's Free Primary Health Care Programme changes this by eliminating all costs associated with accessing basic health services. This makes the initiative a strong and practical step in the right direction, particularly for vulnerable populations who often struggle to afford even basic care.

A policy of this nature reflects a clear commitment to inclusive healthcare. A leader who prioritises the most vulnerable demonstrates a firm understanding of equity, and President John Dramani Mahama has shown through this intervention that when it comes to healthcare, no one should be left out because of their economic situation or background. By removing financial barriers at the first point of care, the policy ensures that children and families can seek timely medical attention without hesitation.

President Mahama launched the country's Free Primary Health Care Programme on April 15, 2026, at the Shai Osudoku District Hospital in Accra, as part of efforts to expand access to essential health services. The policy is a timely and necessary intervention because when the vulnerable are prioritised in national development decisions, outcomes such as improved survival, better education, and stronger communities are achieved. The initiative places deliberate focus on primary healthcare as the foundation for building a healthier population, particularly among susceptible groups.

From a child protection perspective, this policy could not have come at a more critical time.

Across Africa, preventable diseases remain a leading cause of death among children under five. According to the World Health Organisation, an estimated 2.3 million children under the age of five died in sub-Saharan Africa in 2022 alone. The majority of these

deaths were linked to conditions that are both preventable and treatable at the primary care level, including malaria, pneumonia, diarrhoea, and complications during birth. In simple terms, children are dying not because solutions do not exist, but because those solutions are often too far away, too expensive, or accessed too late.

## A lifeline for children at risk

This is where Ghana's Free Primary Health Care Programme becomes a powerful tool for child protection.

Primary healthcare is the first point of contact between individuals and the health system. It includes basic but lifesaving services such as immunisation, antenatal and postnatal care, nutrition monitoring, early disease detection, and health education. When these services are free and accessible, they remove one of the biggest barriers faced by poor families: COST.

For many low-income households, a child's fever is often managed at home until it becomes severe, simply because parents cannot afford consultation fees, laboratory tests, or transportation to health facilities. In such situations, delay becomes deadly. By eliminating user fees at the primary level, the policy ensures that everyone can be taken to any government health facility at the earliest sign of illness, significantly reducing the risk of complications or death.

More importantly, the policy shifts the focus from treatment to prevention, an approach that is also fundamental to child protection.

A central feature of the policy is lifestyle and health education at the community level. The programme is also designed to teach Ghanaians how to prevent disease through everyday choices, particularly in response to the growing burden of non-communicable diseases such as hypertension and diabetes. Health education focuses on diet and lifestyle changes, personal hygiene, safe water use, sanitation, family planning, maternal health, and general wellbeing. Awareness creation is reinforced with routine health screening for the public, which serves as a key preventive tool under the policy. These screenings help detect conditions

early, often before symptoms appear, allowing individuals to take corrective action through lifestyle changes or seek timely treatment. By promoting early diagnosis and continuous monitoring, the programme reduces the risk of complications and long-term health challenges.

## Breaking the cycle of poverty and poor health

A child who receives routine immunisation is protected from diseases that can cause lifelong disability or death. A pregnant woman who attends regular antenatal care is more likely to deliver safely, reducing the risk of neonatal mortality. A child who is regularly screened for any disease can receive timely intervention before the condition becomes life-threatening. These are not abstract benefits; they are concrete protections that shape whether a child lives, thrives, or is lost too soon.

The link between primary healthcare and child protection also extends beyond physical health. When children are frequently ill, they miss school, fall behind academically, and become more vulnerable to neglect and exploitation. In extreme cases, families facing repeated health crises may resort to harmful coping mechanisms, including child labour and early marriage to reduce economic burden. By strengthening primary healthcare, Ghana is indirectly safeguarding children's right to education, stability, and a safe upbringing.

The long-term benefits of this policy are equally compelling. Healthier children grow into healthier adults. They are more likely to complete their education, contribute productively to the economy, and raise healthier families of their own. This creates a ripple effect that strengthens communities and reduces poverty over time.

## Advancing global goals while protecting the poor

For the poor, the significance of this policy cannot be overstated. Healthcare expenses are one of the leading causes of financial hardship in developing countries. Even in Ghana, where the NHIS has expanded access, gaps remain, especially in rural and underserved

communities. The introduction of free primary healthcare directly addresses these gaps. It means that a mother in a remote village does not have to choose between buying food and seeking medical care for her child. It means that basic health services are no longer a privilege but a right.

This is how inequality begins to narrow, not through rhetoric, but through practical, accessible interventions.

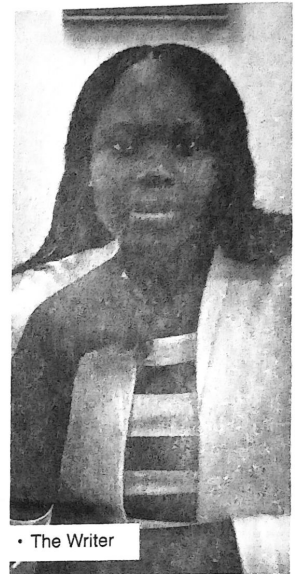
The policy also aligns strongly with global development targets, particularly the Sustainable Development Goals (SDGs). Goal 3: "Good Health and Well-being" specifically targets the reduction of under-five mortality to at least as low as 25 per 1,000 live births by 2030. It also calls for achieving universal health coverage, including access to quality essential healthcare services.

Ghana's initiative directly contributes to these targets by expanding access at the most critical level of care. By prioritising early detection, prevention, and community-based services, the country is taking measurable steps toward reducing child mortality and improving overall health outcomes.

But the impact goes even further. Goal 1: "No Poverty" is addressed by reducing out-of-pocket health expenditures. Goal 4: "Quality Education" benefits from healthier children who can attend school consistently. Goal 10: "Reduced Inequalities" is advanced by ensuring that even the most marginalised communities receive essential health services. In this way, the Free Primary Health Care Programme is not just a health policy, it is a development strategy.

However, the success of this initiative will depend on sustained commitment.

Free services must be matched with adequate funding, trained personnel, essential medicines, and strong monitoring systems. Community engagement will also be critical. As President Mahama rightly emphasised, traditional and religious leaders have a role to play in encouraging health seeking behaviour, including regular screening. Without public trust and participation, even the most well-designed policies can fall short.



• The Writer

## A model for developing nations and a call for sustainability

For other developing countries yet to implement similar policies, Ghana's move offers a clear lesson: investing in primary healthcare is not optional, it is essential. Countries that prioritise hospital based care while neglecting community level services often find themselves overwhelmed by preventable diseases. By contrast, those that strengthen primary healthcare build resilient systems that protect lives and reduce costs in the long run.

The advice is straightforward. Start with what saves the most lives at the lowest cost. Remove financial barriers. Bring healthcare closer to the people. Focus on prevention. And most importantly, protect children not as an afterthought, but as a central objective.

Ghana, on its part, must sustain this policy beyond political cycles. It must resist the temptation to treat it as a short term intervention and instead embed it as a permanent pillar of the national health system. Because the true measure of this initiative will not be in its launch, but in its longevity and impact.

The author is a communications specialist and a children's rights advocate