

Ghana: Availability of Data on Nutrition Intervention Coverage



This profile provides an assessment of a country's potential to report on national-level coverage¹ for a set of 16 nutrition interventions and recommends key actions to strengthen coverage measurement. Intervention coverage data is essential for tracking implementation and impact of strategies and investments to reduce malnutrition.

We reviewed the availability of coverage data for 16 nutrition interventions grouped along the maternal, newborn, child, adolescent continuum of care. Interventions were prioritized by regional stakeholders.² The table summarizes which national data sources report coverage data by intervention. A *detailed database is available for download [here](#); a technical note describing the assessment methodology is available [here](#).*

¹ Coverage is defined as the proportion of individuals in need of a service or intervention who receive that service (Marsh et al. 2020). Coverage indicators are calculated by dividing the number of people receiving a defined intervention by the population eligible for or in need of the intervention.

² Regional Nutrition Working Group in West Africa including various implementing and technical partners and donors, UNICEF, and DataDENT.

Key Actions

1. Continue to report on coverage indicators through population-based and administrative surveys

- Continue to collect and report data on coverage of folic acid supplementation during preconception, IFA supplementation during pregnancy, counseling and support for exclusive and continued breastfeeding, vitamin A supplementation in children under five, and management of severe acute malnutrition (SAM) through household surveys.
- Continue to use administrative data to report coverage of the implemented interventions, especially for counseling on health and nutrition as no population-based household survey data is available.
- Streamline data collection to avoid parallel reporting on the same indicator.

2. Report all coverage indicators collected through national surveys

- Ensure all available coverage data are reported. Data elements for two intervention coverage indicators (counseling and support for exclusive and continued breastfeeding) were collected in recent national surveys but not reported in survey reports.

3. Increase public access to administrative data

- Make the reports, registers and reporting forms, and datasets for administrative data publicly available, especially to allow reporting on coverage of interventions implemented at the national level.
- No input was received from country experts on indicators' availability in the administrative data system.

4. Collect new data to fill accountability gaps

- Add indicators on coverage of one adolescent intervention (food supplementation during adolescence) and one pregnancy intervention (nutrition counseling during pregnancy) to future population-based surveys.
- Consider including new data on interventions that are country priorities and implemented through the health system in the administrative data system.

SUMMARY OF AVAILABILITY OF COVERAGE INDICATORS FOR NUTRITION INTERVENTIONS BY LIFECYCLE STAGE

Nutrition interventions by lifecycle stage					Population-based surveys		Administrative data	
Lifecycle stage	Intervention	Implemented at national level ^a (yes/no)	Data on coverage collected ^b (yes/no)	Indicator reported in report ^c (yes/no)	Data source	Year	Availability of datasets	Coverage indicator ^d (yes/no)
Adolescence	Food supplementation	Yes	No	No	NA	NA	NA	No
	Counseling on health and nutrition	No	No	No	NA	NA	NA	Yes
Preconception	Iron supplementation	No	No	No	NA	NA	NA	No
	Folic acid supplementation	Yes	Yes	Yes	Ghana Micronutrient Survey	2017	+	No
Pregnancy	Nutrition counseling during pregnancy (specific content)	Yes	No	No	NA	NA	NA	No
	Iron-folic acid supplementation (IFA)	Yes	Yes	Yes	Demographic and Health Survey	2014	+	No
			Yes	Yes	Ghana Micronutrient Survey	2017	+	
			Yes	Yes	Maternal Health Survey	2017	+	
	Calcium supplementation for pregnant women with low calcium intake	No	No	No	NA	NA	NA	No
Delivery and postnatal period	Support for early initiation of breastfeeding (support/observation within an hour/within 2 days)	No	No	No	NA	NA	NA	No
	Delayed cord clamping	No	No	No	NA	NA	NA	No
Childhood	Counseling for complementary feeding	Yes	No	No	NA	NA	NA	No
	Counseling for exclusive and continued breastfeeding	Yes	Yes	No	Maternal Health Survey	2017	+	No
			Yes	No	Multiple Indicator Cluster Survey	2017–2018	+	
	Support for exclusive and continued breastfeeding	Yes	Yes	No	Maternal Health Survey	2017	+	No
			Yes	No	Multiple Indicator Cluster Survey	2017–2018	+	
	Food supplementation for complementary feeding in food insecure populations	No	Yes	Yes	Ghana Micronutrient Survey	2017	+	NA
	Vitamin A supplementation	Yes	Yes	Yes	Demographic and Health Survey	2014	+	No
			Yes	Yes	Ghana Micronutrient Survey	2017	+	
	Management of severe acute malnutrition (SAM) ^e	No	Yes	Yes	Ghana Micronutrient Survey	2017	+	No
	Management of moderate acute malnutrition (MAM)	No	No	No	NA	NA	NA	No

a Based on data from Nutridash (<https://www.unicefnutridash.org/login>) or DHS report (<https://dhsprogram.com/pubs/pdf/FR307/FR307.pdf>)

b Numerator and denominator data elements required to calculate coverage are collected from population-based surveys

c Coverage indicator or numerator and denominator data elements reported by population-based surveys

d Data are based on our own search to establish if numerator and denominator data elements required to calculate coverage are collected in administrative data (in most countries the research team could not directly access administrative reports, databases and/or collection tools to validate partly due to non-response from the experts contacted)

e Data availability is partial, as anthropometric measures are available during the time of the survey, while intake of Plumpy'doz is during the 7 days preceding the survey

Legend for dataset availability

++	Open access
+	Available upon request
-	Not publicly available
NA	Not applicable