

# PREFACE

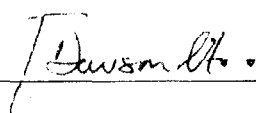
In response to the plight of children in the world, a World Summit was held in New York in 1990, which resulted in drawing up a World Declaration for the survival, protection and development of children by the year 2000. A Plan of Action called for each country to "establish appropriate mechanisms for the regular and timely collection, analysis and publication of data required to monitor social indicators related to the well-being of children."

By 1992, a set of comprehensive goals referred to as the Mid-Decade goals emerged from the Dakar Summit as targets to be met by 1995. Indicators for these goals would serve as summary markers of progress; in some cases they would be proxy measures for information that is lacking but is very difficult or costly to collect on a national basis.

Countries were enjoined to set up appropriate mechanisms for monitoring progress made toward achieving the Mid-Decade goals. It is in response to this that the Ministry of Health and UNICEF agreed to undertake a national survey to provide an assessment of the status on the Mid-Decade goals.

This report documents the results of the survey using the Multiple Indicator Cluster Survey (MICS) method. It is hoped that the dissemination of the survey results will provide policy makers, planners and programme managers with reliable, factual and up-to-date information on specific areas critical to the survival and development of children.

The Ministry of Health and UNICEF are grateful to all participants for their invaluable assistance toward the successful completion of the 1995 MICS.



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Mid Decade  
Goals Survey

The 1995 Multiple Indicator Cluster Survey (MICS) is a nationally representative survey of 4471 households in 100 clusters. The survey, conducted by the Health Research Unit (HRU) of the Ministry of Health (MOH) was funded by UNICEF Ghana and completed by May 1995.

The primary objective of the survey is to monitor Ghana's progress towards the achievement of the mid-

decade goals set out at the World Summit for Children in September 1990, by providing information on many key indicators of development: Education, Water and Sanitation, Immunization, Iodine Deficiency Disorders (IDD), Acute Respiratory Infections (ARI), Oral Rehydration Therapy (ORT), Breast-feeding and Vitamin A supplementation.

## 1. Demographic Characteristics of Households

The age distribution of the household population is shown in Table 1.1. In all there were 24,888 household members, 54 per cent of whom were females. Children under five constitute 16 per cent of the total sample population whilst the

proportion of children under 15 is 47 per cent. The sex distribution gives a sex ratio of 86 males to 100 females. 44 per cent of females were found to be in the active reproductive age group, 15-44 years.

**Table 1.1 Household population by age, residence and sex.**

Percentage distribution of the household population by five-year age groups, according to urban-rural residence and sex.

Age group	Urban			Rural			Total		
	M	F	Total	M	F	Total	M	F	Total
0-4	16	13	14	19	17	18	18	15	16
5-9	18	14	16	19	16	18	19	15	17
10-14	15	13	14	16	12	14	16	13	14
15-19	10	11	11	9	8	8	9	9	9
20-24	7	10	9	5	8	7	6	9	8
25-29	5	9	7	5	9	7	5	9	7
30-34	5	8	8	5	7	6	5	7	6
35-39	5	6	6	4	6	5	4	6	5
40-44	5	5	5	4	4	4	5	4	4
45-49	4	4	4	4	3	4	4	4	4
50-54	3	3	3	3	3	3	3	3	3
55-59	1	1	1	2	2	2	2	2	2
60-64	2	2	2	2	2	2	2	2	2
65-69	1	1	1	1	1	1	1	1	1
70-74	1	1	1	1	1	1	1	1	1
75-79	0	0	0	1	0	0	0	0	0
80+	1	1	1	1	1	1	1	1	1
Total	100	100	100	100	100	100	100	100	100
Number	3916	4983	8899	7604	8385	15989	11520	13368	24888

Source: MICS 1995

Figure 1.1 shows that due to the high proportion of children under 15 (47 per cent), Ghana has a pyramidal population structure. This is a feature characteristic of populations with high fertility levels. Such a population structure results in high dependency ratios i.e the ratio of non-productive persons (0-14 years and 65 years and over) to persons age 15-64 years. The dependency ratio is 100 dependents to every 100 productive population.

