In September 2015, world leaders adopted the 2030 Agenda for Sustainable Development with the goal to end poverty, improve health, reduce inequality and address climate change by 2030. To measure progress, 17 Sustainable Development Goals (SDGs) were created, each with specific targets to be achieved over the next 15 years. Each goal includes a set of indicators to track success. PMA2020 provides data for several of these indicators, allowing government officials, civil society, researchers, world leaders and other stakeholders to track progress towards achieving these ambitious goals more frequently than ever before. This brief provides data and indicators available from the fourth round of the PMA2020 survey in Ghana, conducted in 2015.

For more information on the Sustainable Development Goals please visit https://sustainabledevelopment.un.org

### ABOUT THE SUSTAINABLE DEVELOPMENT GOALS (SDGs)

The strengthening of economic and social institutions has increased the pace of development progress in Ghana and national implementation of the sustainable development agenda. Ghana has succeeded in improving education and health conditions for its residents, including expanding schooling opportunities and reducing infant and child mortality. Access to improved water sources has also improved marginally over the past decade, more in urban than rural areas. While living standards have risen, there remains room for improvement.

The long-term vision of the Government of Ghana is universal access to safe drinking water by 2025 and to eliminate open defecation by 2030. Attainment of these targets will require continued strengthening of water, sanitation and hygiene environments and resources. This will also require strong monitoring, evaluation and verification of results.

### SDGs in Ghana

<table>
<thead>
<tr>
<th>Indicator</th>
<th>2015</th>
<th>2030</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population (millions)</td>
<td>27.4</td>
<td>36.9</td>
</tr>
<tr>
<td>Population Density (persons/km²)</td>
<td>120.5</td>
<td>162.0</td>
</tr>
<tr>
<td>Total Fertility Rate (children per woman)</td>
<td>4.3</td>
<td>3.5</td>
</tr>
<tr>
<td>Life Expectancy (years)</td>
<td>61.0</td>
<td>63.8</td>
</tr>
<tr>
<td>Infant Mortality Rate (infant deaths per 1000 live births)</td>
<td>51.0</td>
<td>40.0</td>
</tr>
<tr>
<td>Gross national income per capita 2011 (PPP-US$)-2014</td>
<td>$3,852</td>
<td></td>
</tr>
</tbody>
</table>


GOAL 1  
No Poverty

Target 1.4 aims to ensure access to basic services for all.

The population pyramid on the right reflects residents in the households at the time of the PMA2020 survey. In the poorest households, (lowest 40%), nearly one in five (19.8%) occupants is under age 14, while 3.3% are over 60 years of age. Older women are more likely to live in poor households than men. Many men between the ages 20 and 54 are away, most working in other parts of the country.

Access to basic services varies by wealth. Almost all of the wealthiest households (99.5%) have electricity versus 26% of the poorest households. Four out of five persons live in households with access to electricity. 37.0% of the wealthiest households have access to improved sanitation facilities versus 13.6% of the poorest.

Indicators on wealth and equity

Over one third of the population in Ghana is under age 15, with two fifths of them living in the poorest 40% of households

Only 16% of households have access to improved sanitation facilities

80% of households have electricity

93% of households have access to improved water sources

16% of households have access to improved sanitation facilities

36.7% of households are headed by females, this trend declines in higher wealth quintiles

Over one third of households are headed by females, 29.8% among the lowest wealth quintile and 32.6% among the highest. Children growing up in households where a male co-head is absent often experience more economically disadvantages than those headed by two adults.
Family Planning Indicators
The poorest women age 15-49 are the least likely to have their demand for family planning met.

Target 3.7 calls for universal access to sexual and reproductive health services.

Just under a quarter (23.4%) of women age 15-49 currently use a modern method of contraception. Just under half of women (47.1%) have their family planning demand satisfied by a modern method of contraception and another one fifth (21.6%) have an unmet need for family planning.

Unmet family planning need is highest among women in the poorest households (28.2%) and lowest for those in the wealthiest ones (14.2%).

Eliminating inequity in demand for family planning satisfied by modern contraception is an important step toward sustainable human development. Progress remains is needed among disadvantaged populations in Ghana.

School Attendance
Despite impressive gains in primary education, secondary schooling still lags for females in the poorest households.

Target 4.1 aims for all girls and boys to complete free and equitable primary and secondary school.

The majority of women age 15-24 in Ghana (72.1%) have attended at least some secondary school. Nearly 14% of women in the lowest wealth quintile have never attended school, while almost the same percentage of women in the wealthiest quintile have attended university.

Further progress is needed in increasing opportunities for education amongst the rural poor to achieve this SDG.
Early Marriage, Early Childbearing

One fourth of the poorest females age 18 to 24 are married by age 18

![Graph showing percentage of households in different wealth quintiles for married by age 18 and first birth by age 18.]

Water and Sanitation

Only 15.8% of the household population rely on an improved, non-shared facility as the main facility

![Bar chart showing percentage of households using different sanitation facilities: Open defecation (23.3%), Non-improved facility (15.0%), Shared facility (46.0%), Improved, not shared facility (15.8%).]

Among the household population...

- 36.3% regularly practice open defecation
- 7.2% have a place to wash hands with soap and water
- 38.3% with an improved main drinking source have intermittent access

About PMA2020/Ghana

PMA2020 uses innovative mobile technology to support low-cost, rapid-turnaround surveys to monitor key indicators for family planning. The project is implemented by local university and research organizations in 11 countries, deploying a cadre of female resident enumerators trained in mobile-assisted data collection. PMA2020/Ghana is led by the Kwame Nkrumah University of Science and Technology (KNUST), School of Medical Sciences in collaboration with University of Development Studies (UDS) and with the support of the Ghana Health Service and Ghana Statistical Service. Overall direction and support is provided by the Bill & Melinda Gates Institute for Population and Reproductive Health at the Johns Hopkins Bloomberg School of Public Health through a grant from the Bill & Melinda Gates Foundation. For more information on PMA2020 please visit [http://www.pma2020.org](http://www.pma2020.org).

Data collection for this survey round (4) took place between June and August 2015.

This brief has been developed in partnership with the Advanced Family Planning advocacy initiative (AFP).

* Definitions of all indicators available at [www.pma2020.org](http://www.pma2020.org)