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Corruption in Ghanaian healthcare system: the consequences

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ABSTRACT

In philosophical, theological or moral discussions, corruption is spiritual or moral impurity or deviation from an ideal. In economy, corruption is payment for services or material which the recipient is not due, under law. Corruption affects both developing and developed countries and all sectors of development negatively and of global concern. This study seeks to expound on corruption in the healthcare sector and the various consequences associated with it. A descriptive study involving questionnaires were administered to persons between the ages of 20-59 in the Kumasi Metropolis. This current study showed that corruption exists in all units of the healthcare sector and is costly to human life. Resources are either over or under utilized in sectors where corruption exists. Also, most people especially the poor are exploited. Education is a necessary tool to sensitize the public and help fight this "norm".

Keywords: Corruption, Healthcare system, Ghana, Kumasi metropolis, Negative consequences, Education

INTRODUCTION

Corruption affects all sectors of development and impedes growth. In government it is when an elected representative makes decisions that are influenced by vested interest rather than their own personal or party ideological beliefs (Wikipedia: http://en.wikipedia.org/wiki/Corruption). Transparency International defines corruption as the abuse of entrusted power for private gain, in public and private sector (http://www.transparency.org/topic/detail/health).

Transparency International is a non-governmental organization committed to fighting corruption globally; its headquarters is situated in Berlin, Germany. It publishes an annual Corruption Perception Index, which ranks countries according to the extent to which corruption is believed to

exist (http://en.wikipedia.org/wiki/Transparency_International).

Forms of Corruption

Corruption includes smuggling, illegal payments, money laundering, drug trafficking, falsification of documents and records, false declaration, underpayment, deceit, forgery, evasion, concealment, aiding and abetting of any kind to the detriment of another person, community, society or nation (Ojaide, 2000). Corruption also includes bribery, extortion and other acts of misconduct, including fraud and embezzlement.

Causes of Corruption

Causes of corruption include: Desire for unfair advantage; Lack of punitive measures; Lack of transparency; Poor incentive measures; Dysfunctional systems; Lawless and Overregulated government. (http://www.parliamentarystrengthening.org/corruptionmo dule/pdf/corruptionunit2.pdf).

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Corruption in Africa

Corruption exists everywhere in the world and it becomes the norm particularly if the chances of being caught and severely punished are low and if it is a generally accepted or tolerated mode of behaviour. Corruption in Africa is a development and social issue which becomes an impediment to change and a serious economic arowth and constraint on poverty reduction. Transparency International has identified Africa as the most corrupt region in the world (http://www.transparency.org/topic/detail/health). In many low-income nations, corruption exists at all levels and affects the entire society. It is public knowledge that not only government, politics, courts, police, immigration, business, and universities, but also public hospitals can be affected by this (Alatas, 1986; Global Corruption Report, 2006; Einterz, 2001; Ewins et al., 2006). Corruption is a serious problem in most governmental institutions for many African countries, especially in the healthcare department. Corruption is observed in countries or society with weak judicial and legislative bodies, political instability. Fraud and corruption are key factors that seriously compromise access to safe and affordable medicine in most developing countries. Effectively addressing corruption in African countries has become a development imperative. Corruption makes it possible for many grossly inefficient public enterprises to remain in operation at the expense of public subsidy.

Corruption has been identified as a by-product of government intervention that can negatively affect the provision of publicly provided social services which can drive up prices and lower the level of government output and services including the provision and financing of health care and educational services in many countries.

"Quiet corruption"

"The idea of quiet corruption is when public services that are due to poor people are not delivered to them even though somebody has paid for them," said Shantayanan Devarajan, the World Bank's Chief Economist for the African Region. Quiet corruption, which can take the form of absenteeism among teachers or doctors, the distribution of fake drugs, or the sale of diluted fertilizers to poor farmers, is having a damaging effect on people in Africa, according to the African Development Indicators report (http://www.dw.de/dw/article/0,,5365508,00.html).

The World Bank created the term "quiet corruption" in 2010 to explain why healthcare systems are failing and said it was a major reason why African countries cannot succeed in fully developing (http://www.news-medical.net/news/20100317/Quiet-corruption-impedes-African-development-World-Bank-report-says.aspx).

A report by the World Bank called "Quiet Corruption" has revealed that 95% of resources allocated to the health sector in Ghana was diverted into the pockets of individuals. Ghana is second to Chad in terms of the most corrupt when it comes to managing resources in the health sector in Africa. (http://ghanaweb.com/GhanaHomePage/NewsArchive/art ikel.php?ID=220815).

Health Sector Corruption

Corruption in the health sector may be viewed by examining the roles and relationships among the different players to identify potential abuses that are likely to occur (Ensor, 2002; Savedoff, 2006). The health sector is prone to corruption due to uncertainties surrounding the demand for services as seen in many developing countries and particularly in former centrally-planned economies, where bribery in the form of informal payments from patients to healthcare providers is common and widespread (Savedoff, 2006; Lewis, Maureen, 2000).

Ghana's public health care system has been faced with some issues of corruption. In its 2006 Global Corruption report, Transparency International "has identified the health sector of Ghana as a corruption prone area with evidence of bribery and fraud across the breadth of medical services. This is said to have emanated from petty thievery and extortion, to massive distortions of health policy and funding, fed by payoffs to officials in the sector". (www.transparency.org/content/download/4912/28857/file /Ghanaian_Chronicle_06-02-02.pdf).

In the health sector corruption can mean the difference between life and death. Poor people are worst affected. Medical staff can charge unofficial fees to attend to patients. They may demand bribes for medication which should be free. Or they may let patients who bribe them queue-jump. Corruption also costs lives when fake or adulterated medications are sold to health services (Global Corruption Report 2006).

Consequences of Corruption

Corruption contributes adversely to the depletion of national wealth (Transparency International, 2006). Corruption negatively impacts development process at several levels: administrative, economic, political, and social (World Bank, 1979; World Bank, 1996; World Bank, 1997; Hope et al., 2000); and impairs economic efficiency in Africa (Frisch, 1995; Hope, 2000 Belaye, 2009; Uneke, 2010)

Through bribery, extortion, embezzlement, and contract kickbacks, many public officials can live an easy life with limited productive work, which is detrimental to the productive process (Clarno and Falola, 1998). Resources are underutilized and wasted if there is

Age	Frequency	Percentage	Confidential Interval (Upper Limit)
20-29	855	52.8	29.1
30-39	632	39.0	38.2
40-49	88	5.4	41.3
50-59	45	2.8	51.4
Total	1620	100.0	

Table 1. Age distribution of participants

 Table 2. Educational level of participants

Educational Level	Frequency	Percentage
JHS	70	4.3
SHS	486	30.0
Tertiary	943	58.2
Zero	121	7.5
Total	1620	100.0

corruption because instead of appointing people with the knowledge and skills required for a particular office; this is not the case since these appointments are made based on personal interest. According to Ake (1991), every time ignorant and incompetent people are used obstructively and wastefully at the helm of government agencies and public enterprises, competent personnel who serve under them are wasted too in the process, and the country loses at both ends.

Evidence of the negative effects of corruption on the health and welfare of citizens has been reported. Some of these negative effects are: drug leakages affecting the quality and accessibility of care in public facilities hence people are not using the facilities due to unavailability of drugs in Uganda (McPake et al., 1999), negative impact on health indicators such as infant and child mortality (Gupta et al., 2002).

Azfar and Gurgur (2005) conducted a study in the Philippines and found that corruption delays and reduces the vaccination of newborns, discourage the use of public health clinics, reduces satisfaction of households with public health services and increases waiting times at health facilities.

Due to corruption, most people do not have access to quality healthcare because of inadequate facilities; roads are in deplorable states, funds are not available to build schools, hospitals and other social amenities. Due to these challenges a study was designed to study further this phenomenon in the Ghanaian health system.

METHODOLOGY

A descriptive survey involving 1620 participants was undertaken within the Kumasi metropolis, capital of the Ashanti Region of Ghana, West Africa, using questionnaires administered from March 1 to July 30, 2012. The participants, who were commuters at selected bus terminals/stations and taxi stations, were assured of confidentiality prior the exercise; their consent was also sought before the exercise. They were then asked the various questions and their responses recorded. Demographic data was also obtained from them; these included their gender, age, religion and educational background. Ethical clearance was approved by the Kwame Nkrumah University of Science and Technology School of Medical Sciences/Komfo Anokye Teaching Hospital Ethics Committee.

Data analysis

The descriptive data was presented using Statistical Package for Social Sciences (SPSS) 16.0 edition and graphs drawn using Microsoft Excel.

RESULTS

Demographic factors

Out of the 1620 interviewed participants, 50.9% (n=824) were males while 49.1% (n=796) were females. Ages of the participants ranged from 20 to 59 with a mean age of 27.0 \pm 0.8(Table 1). Out of 1620 participants interviewed, 58.2% had tertiary education, 30% had SHS education while 7.5% had no formal education, and 4.3% had JHS education (Table 2). 51.9% were health workers; artisans were 13.0%, Unemployed, 8.7% and traders 8.6% while others, 17.8% (Table 3). Most of the people interviewed were Christians, 77.3% while 22.7% were Muslims (Table 4).

Out of the 1620 respondents, 25.9% stated that the healthcare sector was extremely corrupt while 74.1% said

 Table 3. Occupation of participants

Occupation	Frequency	Percentage
Artisans	210	13.0
Traders	140	8.6
Health Workers	841	51.9
Others	288	17.8
Unemployed	141	8.7
Total	1620	100.0

Table 4. Religion of participants

Religion	Frequency	Percentage
Christian	1252	77.3
Muslim	368	22.7
Total	1620	100.0



Figure1. Extent of corruption in the Ghanaian health sector

the sector is quiet corrupt. (Figure 1)

Inadequate salaries were suggested by 65.4% of participants to be one of the factors influencing corruption while 13% suggested that corruption in the health sector was caused by the unavailability of sufficient tools to work with; 21.6% also stated that corruption was influenced by other factors such as the habit of the person taking the bribe, illegal money payment has become part of the requirements before one can access any service needed. (Figure 2)

Concerning the most corrupt staff in the health sector, doctors recorded the highest, 54.3%, followed by pharmacist, 23.5%. Nurses recorded 9.9% while

paramedics and others recorded 7.4% and then finally the laboratory, 4.9% (Figure 3).

Patients who were denied medical care due to finanfinancial difficulty were 60.5% while 39.5% received some care even though they could not afford it (Figure 4).

This study showed that 38.9% of participants lost a relation due to delay in medical care or surgery while 61.1% had not suffered any loss due to delays (Figure 5).

Concerning the most corrupt group or institution in Ghana, politicians recorded the highest, 74.1%, followed by law enforcement agents, 17.3%, healthcare personnel recorded 4.3% while 4.3% also stated that all the stated groups are indifferently corrupt (Figure 6).



Figure 2. Factors influencing corruption



Figure 3. Healthcare staff suggested being most corrupt



Figure 4. Patients denied medical care due to financial difficulty



Figure 5. Death of family or close relation due to delays in surgery or medical care



Figure 6. Most corrupt group/institution in Ghana

Possible solutions

Some of the solutions suggested by participants to help curb corruption included:

Motivation and payment of good salaries; was recommended by 56.2% of the participants to help fight

corruption. This was followed by the provision of adequate equipment, 26.5%. Education and regular checks on staff as a tool to fight corruption was recommended by 9.3% of the participants while total withdrawal from service was recommended by 4.3% of the participants and finally, the National Health Insurance Scheme (NHIS) as a tool to fight corruption recorded



Figure 7. Possible solutions to healthcare corruption

3.7% (Figure 7).

DISCUSSION

Extent of corruption

The current study showed that the healthcare system in Ghana is faced with some challenges of corruption. However, most corruption practiced in the health sector is termed as quiet corruption. Sometimes, doctors are late to work or sometimes direct patients to other health facilities they work in so as to make money for themselves. Sometimes, they absent themselves from these public services and make way to other facilities at the detriment of patients who may have queued up in these public health facilities hoping to see these doctors. Quiet corruption, which can take the form of absenteeism among teachers or doctors, the distribution of fake drugs, or the sale of diluted fertilizers to poor farmers, is having a damaging effect on people in Africa, according to the African Development Indicators report.

(http://www.dw.de/dw/article/0,,5365508,00.html).

Factors influencing corruption

The study showed that corruption is influenced by factors such as inadequate tools to work with. According to Vian (2002; 2007) much of the corruption found in the health sector is a reflection of general problems of governance and public sector accountability, meager salaries paid to them and lack of motivation. Most of the participants felt that if people are paid well and motivated at their work places, it will help clump down corruption. However, some studies have found that increased salaries does not necessarily reduce corruption, also better paid employees in the health sector engage frequently in corrupt practices than their colleagues with lower salaries (Fjeldstad, 2003; Gupta et al., 2000).

Health staff suggested being most corrupt

The study showed that, the most corrupt health staffs are doctors, followed by pharmacists. This health staffs usually come into contact with patients. According to some of the participants, hospital staff demand unofficial monies from them before they could access quality care in the form of consultation, drug collection and other examinations so that they may be attended to quickly. Thus, corruption affects all units in the healthcare sector since personnel demand some form of money before rendering services needed to patients.

Denied medical care due to financial difficulty

This may be due to the fact that they either have not registered with the NHIS or however may have registered

but needed to pay some form of bribes before they could access the kind of care they wanted. Usually, the poor are over exploited. In Ghana, the NHIS has also been faced with some issues of corruption. Auditing carried out in some facilities showed instances of fraud and forgery. When this continues, patients are denied right and access to quality service. Even though some of these services have been catered for by the government, some healthcare personnel receive illegal money for payment of services they render.

Death resulting from delay in surgery or medical care

Respondents who had lost a close relation or a family member constituted 38.9%. Lost of lives resulting from corrupt practices is really devastating and a big blow to relations. Thus, under situations where the parties do not accept to pay any form of illegal fees, they end up losing their friends and loved ones. These delays caused by negligence of hospital staff are left, thus are not followed and people see it to be normal, which is not supposed to be so. A study carried out by the International Monetary Fund (IMF) using data from 71 countries, shows that countries with high indices of corruption systematically have higher rates of infant mortality (Miller et al., 2000).

Most corrupt groups

From this study, participants stated that the most corrupt group in the country was politicians, followed by law enforcement agencies and finally healthcare personnel. Various studies have showed that corruption existed in areas where there are civil wars and political instability. Most of these instabilities are caused by politicians who use their power and authority to amass wealth for themselves against using taxes to develop their country. Corruption impacts negatively on public investments, discouraging people from investing in a country since money for developmental projects are not used for the intended purpose.

Possible solutions

Solutions suggested by participants which includes payment of higher salaries and staff motivation, education and regular checks, total withdrawal of license, national health insurance, enough equipment to work with would help fight corruption. When there is no evidence of aood *aovernance* through such *aualities* as accountability, responsiveness, transparency, and efficiency, when policies are not effectively implemented, and public services are ineffective or unavailable, there is corruption.

(http://www.parliamentarystrengthening.org/corruptionmo dule/pdf/corruptionunit2.pdf).

Therefore to forestall corruption, both the government and the public have to work hand in hand to help ensure that there is good governance and people are held accountable for their offences.

CONCLUSION

Corruption impedes development in several sectors including health, education, and economy amongst others. Therefore measures have to be put in place to curb this menace since it leads to wastage and overexploitation of resources as well as very costly to human life. Education is a necessary tool to sensitize the public and help fight the "norm". Anti-corruption campaigns should be promoted and awareness created; also anticorruption clubs or groups could be formed to help in this exercise from the basic schools through to the tertiary levels and then nationally.

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