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## **Report on a six (6) Day free Health Screening Project at Selected ASSIN Communities (North and South Assemblies)**

**By:**

**POS Foundation and DoctorsAct**

(In Association with the Assin North Municipal Assembly, Assin North Municipal Health Directorate, Lost Talent Foundation)

# **D+ctorsAct**

*see a need, meet the need . . . .*

# CHAPTER 1

## INTRODUCTION

### 1.0 Background of Perfector of Sentiments (POS) Foundation and DoctorsAct

**DoctorsAct** is a nonprofit non-governmental organization made up of young exuberant adults, Russian-trained Ghanaian doctors, professionals from other countries and students, united by the sole aim of providing free humanitarian, social and medical services to the poor, underprivileged and deprived in society through education, empowerment and short term medico-humanitarian missions (STMM). We support rural doctors and health personnel through our annual Beauty In Small Deeds (BISD) missions, establish innovative projects to improve the quality of life of the various communities we visit in consultation with community leaders and locally based NGOs.

These missions often bring together highly trained professionals such as doctors, pharmacists, lab technicians, engineers, social workers, and students (medical and non-medical) with an immense desire to share the love of God through health missions.

**The Perfector of Sentiments (POS) Foundation** is a Non-Governmental Organization that seeks to promote Youth Development, Human Rights and Social Justice for Collective Development. POS Foundation since 2005 is certified under the regulations and laws of Ghana and has worked with both international and local NGOs, embassies or high commissions, ministries, metropolitan, municipal and district assemblies, youth groups, religious bodies, and the National Youth Authority just to mention a few. POS regularly organizes annual charity projects in rural Ghana through the including Free Health Screening and donation of items and equipment to orphanages, hospitals, deprived schools and communities.

## CHAPTER 2

### 2.1 Objectives of the Exercise

The 2014 annual **Beauty In Small Deeds (BISD)** was dubbed **Hope For Life**, a six day medical STMM organized as a joint project by DoctorsAct and POS Foundation at selected communities in the Assin North and South Municipal Areas. This was as a result of a baseline study conducted by POS Foundation in 2007 in the Assin Districts. POS since its study has partnered and engaged several NGO's in responding to the findings which covered health, education and living standards, resulting to this collaboration.

The 6 day project which was aimed at:

- i. Bringing quality medical healthcare to the doorsteps of people in deprived communities;
- ii. Empowering the youth in life with a leadership and youth development seminar;
- iii. Conducting a survey to ascertain the main health challenges facing the people;
- iv. Bringing to the attention of stakeholders and people in authority, the major problems facing disadvantaged communities so that the appropriate remedy could be tailored out for them.

### 2.2 Modus Operandi of the Screening Exercise

The screening had the following departments;

- **Nurses:** The nurses were responsible for taking basic and vital information such as weight, height, temperature, blood pressure and body mass index of each patient (both children and adults) who turned up at the outreach centers. Wounds of the injured were also dressed by the nurses.
- **Laboratory technicians:** Were responsible for testing and examining patients' blood and urine samples;
- **Pharmacists/Dispensary:** These were in charge of the department responsible for the distribution of the right drugs prescribed by the doctors. Medicines for common illnesses and symptoms such as coughs, headache, colds, malaria, hypertension and arthritis were all tended to by our dispensary section.

- **Medical Doctors:** were responsible for patient consultation, examination, diagnosis and prescription of medicine for patients and in some cases, referrals to the municipal hospital.
- **Counseling:** This was another stand set up in the line of care that dealt with the spiritual lives of the people and also to help spread gospel of God and health education. This was done one on one with the townsfolk who were present at the medical screening grounds without compulsion. The emphasis was more on their spiritual development and wellbeing as they preached and prayed with them.
- **Children and freebies:** It is important to note that whilst the medical screening was in progress, children were being entertained by both foreign and local non-medical personnel in the team. Gift items like soft drinks, biscuits, tooth pastes and brushes, slippers, balloons and toiletries among others were distributed to the people at the playing grounds.
- **Stakeholders and Partners:** the organization of the exercise was successful done with the following stakeholders: Assin North Municipal Assembly, Assin North Health directorate, Lost Talent Foundation, Ghana Immigration Training School.
- **Transportation and Accommodation:** the Ghana Immigration training school bus picked the team from Accra mall on the day of departure and was responsible for all internal community transportation which made transport a smooth sail for the project. Subsequently the Immigration training school in AssinFosu was responsible for our accommodation through the release of their hostels and other facilities. This was facilitated by the Assin North municipal health directorate under the directive of the Assin north municipal assembly. Accessibility of roads to the various communities visited was rough and cumbersome yet the facilitation by the immigration bus, the exercise was successful.
- **The Volunteers:** The total number of volunteers who were on this project ..... this was made of nine (9) doctors, eleven (11) Medical students, two (2) Russian missionaries, two (2) Canadian interns, one (1) biochemist, one (veterinary doctor), one (1) midwife, two (2) social workers, one (1) driver (provided by the immigration training school) and two local research assistants.

## CHAPTER 3

### 1.3 Sequence of Activities

On the basis of the other in which the program was conducted, its findings have been presented below beginning with;

- Assin Edubiase
- Basofi Ningo and other surrounding communities
- Akropong Odumasi
- Assin Nsuta, Assin Chiano and
- Gold Coast Camp

#### 1.2.1 Day1. Monday August 4, 2014 – Assin Edubiase

Age		Gender		Diagnosis	
Range	No. Of Cases	Male	Female	Disease	No. Of Cases
0-11 months	8	3	5	Cadiovascular	28
1-5 y.o.	34	16	18	Respiratory Tract Infections	16
6-17 y.o.	58	30	28	Integumentary (Skin)	19
18-45 y.o.	131	19	112	GIT	48
46-70 y.o.	96	38	58	Genitourinary	27
> 70 y.o.	38	16	22	Malaria	30
				Musculoskeletal	49
				Eye	12
				Others	90
<b>TOTAL</b>	<b>365</b>	<b>122</b>	<b>243</b>		<b>319</b>

At Assin Edubiase, over 526 indigenes went through the medical screening and counseling service after a meeting was held the day before with the chief and elders of the town. The exercise began at 9:30 am at Assin Edubiase Methodist Junior High school premises and ended at 6 o'clock pm. The team continued with another meeting with the chief and elders at the chief's palace to express appreciation to the chief and his council for allowing DoctorsAct and POS foundation to serve his people. The Chief in the person of Nana KesseTali II and his elders expressed their sincere gratitude for the free health screening and medication given to his community. The delegation then departed around 7 o'clock to AssinFoso and ended the day with a dinner at the St. Francis Xavier hospital canteen. The table above is a summary of the data on the screening exercise at **AssinEdubiase**.

#### **1.2.1 Day 2. Tuesday August 5, 2014 – AssinBasofiningo and Senkyiem**

The team at 8:30am paid a courtesy call on the Municipal Chief Executive in his office who was represented by the Coordinating Director Mrs. DorcasAidoo and her team together with the municipal health director Madam Georgina Asomadi. The Coordinating director welcomed the team on behalf of the MCE and expressed sincere gratitude, focusing on the selection of the district out of over twenty districts in the region by the team to execute such an important project. She again challenged the team to look out for cholera and rabies in expediting their duties, which she said are major health issues in the district. Finally, she asked the team to do well to submit a brief / report of their findings to the Municipal Assembly.

From there the team together with the executives from the Municipal Assembly and the district health directorate moved to the grounds of the launch of the program ( Assin Basofi Ningo); the dignitaries, chiefs and inhabitant of the town and its surrounding villages (both far and near), with huge media presence. The program started at 10:00am with an opening prayer and the introduction of dignitaries present, followed by the purpose of gathering and the introduction of the chairman AsafoAkye after which he accepted to chair the launch.

Welcoming the team, Nana Ankobea lauded the initiative by the POS Foundation and DoctorsAct for such a selfless dedication to serve their people, especially those in the

deprived communities with difficult access to healthcare and gave his backing for the day's program.

This was followed by a speech by the Coordinating Director of the Assin North municipal assembly Mrs. Dorcas Aidoo. In her address, she elaborated on the need for such initiative and emphasized on the collaboration of the POS Foundation and DoctorsAct together with the Municipal Assembly and the Health Directorate to ensure the success and implementation of the program throughout the one week period. She advised the people to use the opportunity to undergo free screening to promote a healthy living. She again emphasized on the need for cleanliness relating it to cholera outbreak in Accra, rabies in the district and Ebola which is spreading fast particularly in Western Africa but not in Ghana. In conclusion, she thanked the team and pledged her support for the project and was ready to assist in case the team encountered a challenge.

The Municipal Health Directorate who was the direct host of the team took her turn to address the gathering. The Director, Madam Georgina Asomadi was overwhelmed by the fact that such enthusiastic young ones had left their comfort zone and their families to undertake such a project and added that it really portrays the act of breaching the equity gap as far as health is concerned. She highly recommended Ningo for their community participation and involvement towards community development. She further touched on teenage pregnancy which is on the rise in the community and educated the gathering on preventive measures. She finally ended with the saying 'health is wealth'.

Mr. Jonathan Osei Owusu, the Executive Director of POS Foundation also addressed the gathering by admonishing the people to take particular importance to the food they eat since that was the greatest contributing factor to one's health. He commended government for ensuring the National Health Insurance card was re-accepted by the Christian Health Association of Ghana and further appealed to government to stick to his promise and pay the National Health Providers to avoid any rejection of the card which ultimately affect the rural Ghanaian. Dr. Daniel OsafoDarko, leader of DoctorsAct team encouraged the inhabitants to challenge their children to go to school and achieve greater heights. Citing his case as an example, he said if his Ghanaian colleagues who are now doctors trained from Russia and himself has been able to rise to this height, then he believes that the children

with the Ningo community can do same if parent and stakeholders ensure quality education for the children.

Members of the team were introduced to the people and the program came to an end which immediately was followed by screening.

**Media:** present at the programme launch were the following media houses that came from Cape Coast to cover the exercise; TV Africa, TV3, Adom TV and radio, Daily Guide. Interviews were granted to members of the team, authorities in the districts and the people in communities.

The table below is a summary of the data on the screening exercise.

Age		Gender		Diagnosis	
Range	No. Of Cases	Male	Female	Disease	No. Of Cases
0-11 months	7	4	3	Cadiovascular	16
1-5 y.o.	43	22	21	Respiratory Tract Infections	18
6-17 y.o.	43	15	28	Integumentary (Skin)	17
18-45 y.o.	108	49	59	GIT	16
46-70 y.o.	59	21	38	Genitourinary	15
> 70 y.o.	21	8	13	Malaria	69
				Musculoskeletal	77
				Eye	5
				Others	84
<b>TOTAL</b>	<b>281</b>	<b>119</b>	<b>162</b>		<b>317</b>



### Day3. Wednesday August 5, 2014 Akropong Odumasi

The exercise began at 10:00 am at AkropongOdumasi health centre. The team arrived late due to the bad road condition and getting lost in the processing of locating the said community. Upon arrival, set up was done and the day's activities begun with series of screening which ended at 5:00pm. The delegation then departed around 6 o'clock to AssinFoso and ended the day with a supper at the St. Francis Xavier hospital canteen. The table below is a summary of the data on the screening exercise:

Age		Gender		Diagnosis	
Range	No. Of Cases	Male	Female	Disease	No. Of Cases
0-11 months	6	3	3	Cadiovascular	112
1-5 y.o.	48	20	28	Respiratory Tract Infections	13
6-17 y.o.	29	14	15	Integumentary (Skin)	14
18-45 y.o.	150	45	105	GIT	32
46-70 y.o.	139	38	101	Genitourinary	9
> 70 y.o.	49	18	31	Malaria	44
				Musculoskeletal	110
				Eye	18
				Others	72
<b>TOTAL</b>	<b>421</b>	<b>138</b>	<b>283</b>		<b>424</b>

### Day4. Thursday August 7, 2014 – AssinNsuta, AssinAchiano

**Activity 1; Assin Nsuta Senior High school Youth Seminar and Screening:** The team arrived at the Nsuta SHS at 8:00am. The seminar for the students and the screening for the teacher and students with special problems were run concurrently. Professionals in the team shared their experiences with the students and showed them the guide to excellence among which the focus was on serious studies. Our main aim was to help the students in making the right career choices. About eight members of our team were delegated to make this Career Guidance Talk successful. The students were really motivated to pursue their dreams.

Age		Gender		Diagnosis	
Range	No. Of Cases	Male	Female	Disease	No. Of Cases
0-11 months	-	-	-	Cadiovascular	4
1-5 y.o.	4	2	2	Respiratory Tract Infections	5
6-17 y.o.	12	5	7	Integumentary (Skin)	1
18-45 y.o.	40	11	29	GIT	7
46-70 y.o.	15	11	4	Genitourinary	11
> 70 y.o.	-	-	-	Malaria	2
				Musculoskeletal	20
				Eye	-
				Others	2
<b>TOTAL</b>	<b>71</b>	<b>29</b>	<b>42</b>		<b>52</b>

**Activity 2: Assin Achiano Screening:** Arriving at Achiano, about two hours' drive from Nsuta, set-up was made right away and the screening begun since the inhabitants were orderly arranged. The delegation then went through the normal routine to screen over 400..... people and departed around 6 o'clock to Assin Foso.

Age		Gender		Diagnosis	
Range	No. Of Cases	Male	Female	Disease	No. Of Cases
0-11 months	6	4	2	Cadiovascular	28
1-5 y.o.	48	20	28	Respiratory Tract Infections	11
6-17 y.o.	29	13	16	Integumentary (Skin)	15
18-45 y.o.	150	52	98	GIT	18
46-70 y.o.	139	45	94	Genitourinary	8
> 70 y.o.	49	21	28	Malaria	17
				Musculoskeletal	107
				Eye	2
				Others	25
<b>TOTAL</b>	<b>421</b>	<b>155</b>	<b>266</b>		<b>231</b>

**Activity 3: Movie Night;** In the evening around 7:00pm after supper, the team went to Assin Edubiase to spent time with the children (movie night). They were received with great excitement by the children and immediately after set up, the movie was in session amidst refreshing the children. At 10:00pm, the day's activities was brought to an end. The table below is a summary of the data on the screening exercise at Assin Edubiase.

### Day5. Friday August 8, 2014 – Gold Coast Camp.

Arriving at Gold Coast camp the last beneficiary community, set-up was made right away and the screening begun since the inhabitants were already waiting. The delegation then went through the normal routine to screen over 400..... people and departed around 6 o'clock to AssinFoso.

Age		Gender		Diagnosis	
Range	No. Of Cases	Male	Female	Disease	No. Of Cases
0-11 months	8	5	3	Cadiovascular	35
1-5 y.o.	25	13	12	Respiratory Tract Infections	7
6-17 y.o.	33	9	24	Integumentary (Skin)	14
18-45 y.o.	176	25	151	GIT	33
46-70 y.o.	90	23	67	Genitourinary	12
> 70 y.o.	27	5	22	Malaria	33
				Musculoskeletal	111
				Eye	9
				CNS	2
				Others	72
<b>TOTAL</b>	<b>359</b>	<b>80</b>	<b>279</b>		<b>328</b>

#### Conclusion:

1. Total number of patients attended to – 1918
2. Total number of children attended to (< 18 y.o.) – 441
3. Total number of males attended to (>18 y.o.) – 445
4. Total number of females attended to (>18 y.o.) – 1032
5. Most common diagnosis – Musculoskeletal pain
6. Some patients had more than one diagnoses
7. Our Doctors found it difficult to make certain concrete diagnosis due to lack and/or non-availability of equipment's ( x-ray, ECG, Ultra sound scan, pulse oximeter, MRI, CT scan etc)

**Departure:**After a general clean-up in the morning at the Immigration school hostel, the team had breakfast and departure to Accra.

## CHAPTER 4

### List of Volunteers:

1. Dr. Charles Debrah
2. Dr. Josephine Quarcoo
3. Dr. Daniel Darko
4. Dr. Afeke Hormeku
5. Dr. Ellis Arku
6. Dr. Richard Dei
7. Dr. Agnes Antwi
8. Dr. Jessica Goodhead
9. Dr. Henry Afotey Odai
10. Ms. Josephine Opoku
11. Ms. Claudia Sarfo
12. Mr. Elvis Barimah
13. Mr. Richard Nii Lante Lamptey
14. Ms. Abigail Doduwah Sackey
15. Ms. Esther Owusu
16. Ms. Esther Dsani
17. Mr. Daniel Kwakye Nomah
18. Mr. Leslie Odoi
19. Mr. Andrew Meisuh
20. Mr. Kwasi Owusu Afriyie
21. Mr. Borsah Kum
22. Mr. Richard Baidoo
23. Mr. Governor Samuel
24. Ms. Patience Pratt
25. Ms. Elizaveta Ermakova
26. Ms. Tatiana Zelenina
27. Mr. Ebenezer Adu
28. Mr. Ben Aryeh
29. Mr. Tuffour Mike

30. Mr. Jonathan Osei Owusu
31. Mr. Sylvester Appiah
32. Ms. Sara Yoder
33. Ms. Cheyenne Akua Goolcharan
34. Kay Dizzle
35. Ernest

**Sponsors:**

1. Danadams Pharmaceuticals
2. Ghana Malaria Control Board
3. Assin Municipal Assembly
4. Assin District Health Directorate
5. International Christian Assembly, Moscow
6. Christian House Chapel, Moscow
7. International Students Assembly, Ryazan
8. New Global Pharmaceuticals Ltd
9. Dr. Nana Ama Wiafe
10. Dr. Michael Kwaffo
11. Dr. Amega Setsoafia
12. Dr. Daisy Agbana
13. Dr. Shelter Bakah
14. Dr. Agyin Asare
15. Dr. Josephine Quarcoo
16. Dr. Henry Odoi
17. Dr. Daniel Osafo Darko
18. Romeo Boaheng
19. Budu Acquah
20. Dr. Len Stolyarchuk
21. Odaire Vinho
22. Andrew Meisuh

23. Paschalyn Edem
24. Dr. Afeke Hormeku
25. Theresa Koroma
26. Latricia Blake
27. Alexander Matsnev
28. Elizaveta Ermakova
29. Tatiana Zelenina
30. Elvis Barimah
31. Abigail Doduwah Sackey
32. Dr. Charles Debrah
33. Dr. Richard Dei
34. Dr. Jessica Goodhead
35. Mr. Yaw Ampadu
36. Leslie Odoi
37. Ebenezer Aryeh
38. Jefferson Kojo Agyakwa Sene
39. Clement Kumi Quansah
40. Kwasi Owusu Afriyie
41. Esther Dsani
42. Esther Boatemaa
43. Eugene Adablah
44. Ben Agyeman
45. Claudia Sarfo
46. Samuel Governor
47. Sarah Yoder
48. Richard Gyasi
49. Geraldine Ankrah
50. Richard Baidoo
51. Pratt Patience

## **Expenditure**

Feeding – 3772 Ghs (\$ 1078 USD)

Transportation/Fuel – 2540 Ghs (\$ 726 USD)  
Drugs/Medication –2915 Ghs (\$ 833 USD)  
Media/Advertisement – 800 Ghs (\$ 229 USD)  
Logistics at camp – 590 Ghs (\$ 170 USD)  
Administrative/Miscellaneous expenses: 1269 Ghs (\$ 363 USD)

**TOTAL: 11 886 Ghs (\$ 3 399 USD)**

### **Appreciation**

All glory and honour be to the Lord Almighty who worked everything out for good.  
Our profound gratitude to all sponsors/donors and partners whose financial and material donation spurred us on a facilitated the smooth execution of the project.  
Final word of appreciation goes to all volunteers; your hardwork and immense contribution brought smiles to over a thousand souls in Assin Fosu and beyond.  
God bless you all.