Destination Guide for Ghana



Overview

Destination Guide Content

Destination Risk Levels

- Medium Medical Risk for Ghana
 - Low Travel Risk for Ghana
 - Medium Travel Risk for Border areas with Burkina Faso, Cote d`Ivoire and Togo; area around Gushiegu (Northern region)

Areas 18 miles (30km) from the borders with Burkina Faso, Cote d'Ivoire and Togo: MEDIUM

Those areas face higher risk of highway banditry and militancy due to the porous border with all three countries. Bandit groups have exploited border areas as well as illegal mining sites to create trafficking hubs. Militant groups periodically border-cross into Ghana for logistic and recruitments purposes at this stage, despite heightened security.

Areas around Gushiegu (Northern region): MEDIUM

Parts of northern Ghana experience periodic ethnic and communal conflict. Outbreaks of unrest often prompt the imposition of curfews. Workforce should seek information on the latest situation before undertaking travel to the above areas, and to exercise additional caution.

Standing Travel Advice

- Travel to Ghana can proceed with precautions.
- Take sensible precautions to mitigate the risk of petty and street crime.
- Carjacking occurs in both rural and urban areas. Take precautions to mitigate this risk, including driving with windows up and doors locked at all times and not travelling unaccompanied.
- Occasional bouts of ethnic violence are possible in parts of northern and south-eastern Ghana. These are usually highly localised and do not pose a significant risk to travellers.

- Road conditions and driving standards are generally poor, emergency and recovery services negligible, and foreign drivers are usually blamed in the event of a traffic accident. Do not self-drive unless very familiar with local conditions. It is preferable to hire a trusted local driver.
- Vehicles should be in good condition and equipped with a full medical kit, adequate communication systems, spare tyres and enough water and fuel to complete your journey. Ensure you carry valid vehicle and identification documents as police roadblocks and spot-checks are common.
- Police roadblocks and spot-checks are common; carry photographic identification at all times.
- Public transport is not suitable for business travellers. Use official taxis, but during daylight hours only.

Upper West, Upper East and North East regions

- Defer non-essential travel to areas within 18 miles (30km) of the borders with Burkina Faso, Cote d'Ivoire and Togo due to cross-border incursions and kidnapping by bandit and Islamist militant groups operating from the Sahel. Essential operations in MEDIUM-risk areas should be undertaken only after seeking itinerary-specific advice. Essential overland movement should be undertaken with solid journey management procedures, including security support, convoy movement, regular check-ins and vehicle monitoring capabilities. Liaise with your security provider and/or with the local authorities to understand the level of risk in the area visited and whether security support is necessary. Officials may deem it necessary to provide an army escort.
- Operations and travel in northern regions should proceed with comprehensive precautions against higher risks of highway banditry, kidnapping and communal clashes in those regions. Ensure that you are fully trained on itinerary-specific threats and mitigating measures and that your protocols include advice related to heightened risks of highway banditry, kidnapping and communal clashes.
- Review your choice of accommodation and ensure locations have enhanced security precautions. Road travel in rural areas should be undertaken in convoy, during daylight hours only. Ensure your vehicle is in good condition and equipped with a full medical kit, adequate communications systems, spare tyres and enough water, food and petrol to complete your journey.
- Expect a heightened security force presence and military checkpoints in northern regions. Comply with all official directives and carry the relevant identification documents to ease passage through security checkpoints or spot-checks.
- Be discreet about your travel plans and nationality as a general precaution. Register with your embassy and all relevant warden networks.

Active Alerts (3)

Notice
28 October 2024 at 06:52

Cholera infections in Greater Accra region, select safe food and water, consider vaccination

Location: Ghana

Category: Cholera

Situation:

Latest update: Outbreak remains confined to the Greater Accra region. Cholera spreads via contaminated food and water. Symptoms include vomiting and profuse, watery diarrhoea which can lead to severe dehydration. People staying in quality accommodation with access to safe food and water are at low risk. Ensure food and water for consumption are safe and consider vaccination if likely to encounter unsanitary conditions.

Advice:

Do the following:

- Select food, water and other beverages carefully.
- Drink only boiled or bottled water, water that has been treated with chlorine or iodine, or carbonated beverages.
- Choose food that has been thoroughly cooked while fresh and is served hot.
- Avoid ice, raw fruit, and raw vegetables (including salad). Fruit and vegetables that you peel yourself are safer choices.
- Pay close attention to hygiene. Wash your hands frequently, especially before eating.
- Consider vaccination if you are likely to encounter unsanitary conditions or will have limited access to safe water.
- Consider carrying water purification supplies with you.
- Get medical advice/treatment if you develop severe diarrhoea and/or vomiting.

More Detail:

Over two hundred cholera infections have been reported in the **Ada East and Ada West Districts**, Greater Accra region since the start of 2024. These are the first confirmed cholera cases in the country since the outbreak in Cape Coast district in 2016.

What is cholera?

Cholera is a diarrhoeal illness, caused by the bacteria *Vibrio cholerae*. It is spread through food and water that have been contaminated by the faeces of an infected person. The illness is often mild. Symptoms include vomiting and painless diarrhoea, known as 'rice-water', stools. In severe cases, the diarrhoea can be profuse, which can lead to life-threatening dehydration. Prompt treatment is very effective and involves oral and/or intravenous fluid replacement depending on the severity of dehydration. Antibiotics are sometimes used to help reduce the volume and duration of diarrhoea. Prevention is through ensuring safe food and water consumption, and attention to hygiene. Oral vaccination is available but usually only recommended for people who cannot avoid unsanitary conditions, such as relief workers.

For more information:

• Download the cholera infographic [PDF, 993kb].

- See the International SOS Location Guide on Ghana.
- Contact any International SOS Assistance Centre.

Notice

14 October 2024 at 07:19

Polio in Eastern region, booster recommended, carry proof of vaccination

Location: Ghana

Category: Polio

Situation:

Polio has been detected in an environmental sample in Eastern region. Polio is a contagious viral illness that can cause paralysis and can be fatal in some cases. It spreads through contaminated food or water or directly from an infected person. Prevent infection by ensuring your polio vaccination is up to date, including a booster, and by selecting safe food and water.

Advice:

Do the following:

- All travellers are recommended to be fully vaccinated, including a booster, if available, prior to arriving in Ghana. Carry proof of your polio vaccination status in case it is requested on entry.
- Select food, water and other beverages carefully.
- Pay attention to hygiene. Wash your hands frequently, especially before eating.
- To prevent the international spread of polio, the World Health Organization recommends that all residents and travellers who have been in the country for more than four weeks receive a dose of the polio vaccine within four weeks to 12 months of travel. Travellers should carry the document on which their polio vaccination status is recorded. They may be asked to show proof of polio vaccination at departure or while entering other countries.

More Detail:

An environmental sample has tested positive for circulating vaccine-derived poliovirus type 2 (cVDPV2) in Eastern region. This is the first detection of polio in Ghana since 2022. The detection of poliovirus in the environmental sample means that polio is present in the community. There is a possibility for the detection of human cases. **What is polio?**

Polio is highly infectious and spreads from person to person. People can be infected with polio if they eat or drink something that has been contaminated by faeces, particularly in countries with less-developed sanitation systems. Most infected people show no symptoms or experience mild ones, which include fever, headache, nausea and vomiting. In about one out of a hundred cases, the virus reaches the central nervous system and causes some form of paralysis.

Polio prevention involves selecting safe food and water, as well as vaccination. Oral polio vaccine (OPV) contains a weakened form of poliovirus. Occasionally, the vaccine virus circulates, particularly if many people in the community are not already vaccinated against polio. As it circulates, the vaccine virus undergoes genetic changes and it rarely changes into a virus that can cause paralysis. When this happens, the resultant polio virus is called circulating vaccine-derived poliovirus (cVDPV). A higher vaccination rate within communities reduces the risk of cVDPV.

For more information:

- See the International SOS Location Guide for Ghana.
- Contact any International SOS Assistance Centre.

Assessment:

Polio cases may be detected in Ghana. The risk of infection is lower for local residents and travellers who are vaccinated and have access to good sanitation and safe water supplies.

Advisory

11 October 2024 at 07:00

Human bird flu infection in Upper East region, avoid contact with birds, follow hygiene measures

Location: Ghana

Category: Avian Influenza H9N2

Situation:

A child from Ghana's Upper East region has been infected with bird flu. This is the first bird flu infection ever reported in the country. Bird flu can cause a mild-to-severe respiratory illness, which may be fatal. Most people who have been infected have had direct exposure to birds. The risk of infection in people who do not have contact with birds is low. Prevent infection by paying attention to hygiene and avoiding contact with birds and their environment.

Advice:

Do the following:

- Avoid farms and 'wet markets', where live animals may be present.
- Do not touch birds, even if they appear healthy. Ensure all poultry and eggs are thoroughly cooked.
- Do not eat raw products, such as raw duck blood.

- Wash your hands before and after preparing food, and before eating.
- Do not swim in any body of water that is used by birds.
- Consider having an influenza vaccination. Although it will not protect you against bird flu, it reduces your risk of a 'co-infection' with human influenza.
- Monitor your health.
- If you develop flu-like symptoms (fever, cough, and fatigue) and have had exposure to birds, seek medical attention.

More Detail:

The first human infection with bird flu in the country has been reported in a child under the age of five from Upper East region. The child developed mild symptoms on 5 May. Initial tests suggested a seasonal influenza A (H3N2) infection, but further analysis confirmed avian influenza A (H9N2). The child had no known exposure to birds or individuals with similar symptoms before becoming sick.

Additional investigations have not detected bird flu in close contacts, and there has been no evidence of sustained human-to-human transmission. The World Health Organization considers the risk to be low.

Low-pathogenicity avian influenza A (H9N2) has been present in poultry in Ghana since November 2017.

What is avian influenza?

Bird flu (avian influenza) is a group of influenza A viruses that usually occur in birds but can infect other animals as well as people. H5N1 and H7N9 have infected hundreds of people, while other strains such as H5N6, H6N1, H7N4, H9N2 and H10N8 have also caused severe illness in humans.

Most humans have been infected after contact with infected poultry, as the disease does not spread easily from person to person. The illness usually begins like an ordinary flu infection, with symptoms including sudden fever, cough, sore throat and muscle pain. A severe lower respiratory tract infection (pneumonia) may then develop. Gastrointestinal symptoms, such as diarrhoea, may occur. Antiviral drugs are available to treat the illness.

Vaccines against bird flu are in development. Prevention is through avoiding contact with birds, animals and their environment, including wet markets and items contaminated with animal waste. Additionally, maintaining good hygiene reduces the risk of infection.

For more information:

- See the Latest News, Traveller Advice and Bird Flu pages on the International SOS Pandemic Information website (membership required).
- See the International SOS Location Guide for Ghana.
- Contact any International SOS Assistance Centre.

Assessment:

The overall risk to residents and travellers who pay attention to hygiene and avoid contact with birds and their environment is low.

Destination Guide for Ghana



Before You Travel

Destination Guide Content

Visa Requirements

IMMIGRATION REQUIREMENTS AND PROCEDURES

British

Passport Required Yes

Visa Required Yes

Return Ticket Required Yes

Australian

Passport Required Yes

Visa Required Yes

Return Ticket Required Yes

Canadian

Passport Required Yes

Visa Required Yes

Return Ticket Required Yes

USA

Passport Required Yes

Visa Required Yes

Return Ticket Required Yes

Visas

Nationals of all countries need to obtain a visa to visit Ghana except citizens of Economic Community of West African States (ECOWAS) member states (for a visit of 90 days or less) and a number of other countries mentioned here (for a visit of 60 days or less). Visas are issued at all Ghanaian diplomatic missions; processing takes three to four working days. People travelling from member states of the African Union can obtain visa on arrival for a period of 60 days. If no Consular or Diplomatic representation can be found in your country, an entry visa may be issued on arrival providing that the Director of Immigration has received prior notification from business travellers, their sponsors or their hosts.

People applying for business visas require a letter of invitation from a local sponsor in Ghana. Visas are valid for three months from the date of issue. However, length of stay is at the discretion of airport officials. Visas for one year may be granted for specific purposes. Visas may be extended when in Ghana. Transit passengers continuing their journey within 48 hours do not need a visa to exit the airport, provided that they are carrying the necessary documentation.

Procedures

Customs and immigration procedures can be slow. Procedures can be expedited if business travellers arrange to be met by a professional meet-andgreet service. Foreign nationals staying in Ghana for 90 days or more during a calendar year should register with the National Identification Authority (NIA).

Entry/Exit Requirements

Entry/Exit requirements

Passports must be valid for six months after the intended date of departure from the country. Foreign nationals must also hold a return or an onward ticket or letter from an employer guaranteeing repatriation. People arriving in or departing from Ghana are permitted to carry up to US\$10,000 or its equivalent in any other currencies without declaration. Local currency up to 1,000 cedis (GHC) and foreign currencies up to US\$10,000 may be exported. Foreign currency may be declared on the Foreign Exchange Declaration Form (FXD Form 4A) which can be downloaded from the Bank of Ghana website. Loss of the form can be a problem, so business travellers should ensure it is kept safe. Export of unused cedis is prohibited. However, it can be reexchanged into foreign currency at local banks or at the Bank of Ghana. For further information on prohibited items and detailed regulations, visit here.

Cultural Tips

CULTURAL ISSUES AND ETIQUETTE

- It is inadvisable for foreign nationals to refer to tribalism or ethnic affiliations when discussing current affairs.
- It is illegal to wear any military clothing or sportswear with a camouflage design.
- Be aware of Islamic social customs, particularly during the fasting month of Ramadan, when visiting the predominantly Muslim north.
- Ask permission before photographing anyone and before taking a picture of military installations, government buildings or airports.
- Homosexuality is illegal and this is generally enforced, though legal repercussions are rare. Societal attitudes towards the LGBTQ+ community are often intolerant and violence is sometimes directed towards its members.

Getting There

METHOD OF ARRIVAL

By air

Kotoka International Airport (ACC), five miles (8km) north of the capital Accra, is the country's only international airport. It caters to both civil and military aircraft. There are three passenger terminals. Terminal 3 handles all international flights. Before reaching passport control, arriving passengers are stopped for a temperature screening and their Yellow Fever certificate is checked.

Security at the airport is good, though security on domestic flights does not meet international standards. Keep luggage and travel documents secure at all times. As an additional check, customs officers may ask people to present tickets for their checked-in luggage and compare these with the tags on the suitcases to prevent theft. Only ticket holders are allowed into the airport terminal, and photography is prohibited at the facility. For meet-and-greet services courtesy of your hotel, note that the person waiting for you with a hotel sign may be a hotel representative rather than a driver. Avoid using informal porters to carry your luggage (some will attempt to do so without consent), as there have been reports of belongings being stolen. It is advisable to instead ask your local driver for help. Thieves may masquerade as airport staff. Accept offers of assistance only from authorised airport personnel, who usually carry an ID card displaying their name and photo.

Procedures

Customs and immigration procedures can be slow. Procedures can be expedited if business travellers arrange to be met by a professional meet-andgreet service. Foreign nationals staying in Ghana for 90 days or more during a calendar year should register with the National Identification Authority (NIA).

Getting Around

BY AIR

Ghana has a limited internal travel network. The country does not have a national carrier, though commercial flights are available between Accra (ACC), Kumasi (KMS) and Tamale (TML). However, poor visibility due to seasonal winds like Harmattan could lead to flight delays or cancellations. Exercise caution when selecting an operator.

BY ROAD

Driving is on the right and there is adequate road signage in English. The road from Accra to Tamale via Kumasi is in an acceptable condition, while the one from Accra to Takoradi is in good condition. Elsewhere in the country, road conditions are less acceptable. Foreign nationals should not self-drive unless familiar with the local environment. It is preferable to hire a trusted local driver. Overland travel, particularly in border areas, should only be undertaken during daylight hours and following appropriate journey management protocols, including robust communications and contingency planning and itinerary-specific advice.

International companies such as Avis and Europear offer car rental services in Accra. If undertaking cross-country travel, ensure that your vehicle is in good condition and equipped with a full medical kit, adequate communication systems, spare tyres and enough water and fuel to complete your journey. People driving themselves should carry an international driving licence, which must be endorsed by a police licensing officer if their stay exceeds 90 days. Foreign nationals are expected to carry documentation of their status, such as a passport and visa.

People are routinely stopped at police and army checkpoints, and automobiles and passengers may be searched and bribes occasionally demanded. The security forces are less inclined to demand bribes from foreign nationals compared with local nationals. Motorists involved in a collision should go to the nearest police station. Do not stop to assist with any roadside emergency. Drivers should be aware that grass or leaves strewn on the road indicate that an accident or other hazard lies ahead.

Driving standards are poor, especially in rural areas. Cars are inadequately maintained and pose a hazard on roads. We advise against driving at night because of poor street lighting and the unpredictable behaviour of livestock, pedestrians and cyclists. Furthermore, highway robbery poses a risk after dark in rural areas, particularly on southern coastal roads and border regions with Togo and Cote d'Ivoire, as well as on the road from Accra to the central region tourist area of Cape Coast. Caution should be exercised along these roads. Repeated instances of robberies have been reported, even in daylight hours, on roads in the Bamboi area (Brong Ahafo region), less than 62 miles (100km) from the Ivorian border.

Carjacking occurs in both rural and urban areas. People should not travel unaccompanied and keep vehicle windows rolled up and doors locked. Criminals have been known to reach into vehicles while they are stopped at busy intersections. Cars should always be parked in well-lit, secure car parks. In urban areas, scams are common. One such scam involves individuals pretending to get hit by a car in an attempt to extort money from the driver. Driving conditions are unsafe and major roads are impassable during the monsoon season (March to November). Flooding may occur during this period, specifically in the North, Upper West and Upper East regions. Heavy rain is likely to cause extensive damage to roads; monitor local weather conditions and avoid travelling in affected areas.

BY TAXI

Taxis are widely available. Drivers generally charge by the hour, and it is advisable to negotiate a fare prior to departure. We advise against sharing a taxi with other passengers. Avoid travelling alone at night due to security concerns, as violent assaults and robberies of taxi passengers have been reported.

Smartphone taxi application or ride-sharing services such as Uber are available in the capital Accra. These services are permitted to pick up business travellers from airport terminals. Although they are a reasonably safe and reliable form of transport for business travellers in Accra, the suitability of these services will depend on the individual's profile. It is preferable to carry some cash when taking an Uber in case of a glitch in the cashless payment system or a misunderstanding with the driver. Some drivers may cancel a ride if business travellers select card payment instead of cash. Confirm with taxi and/or Uber drivers that they have change prior to setting off.

BY TRAIN

Passenger train services operate between Kumasi, Accra and Takoradi. Rail services also link the two major ports of Tema and Takoradi. However, the overall network infrastructure is poor and hence rail services are not recommended for business travellers.

BY OTHER MEANS

Public transport is not suitable for business travellers. State-run and private coach services connect all major towns. The most popular national coach line is the Intercity State Transport Corporation (STC). STC shuttle services operate regularly between major towns such as Accra, Takoradi, Kumasi, Tamale and Tema and other regional capitals. It is inadvisable to travel by small private minibuses (called tro-tros) outside major cities, as safety standards are inadequate.

Business Women

BUSINESSWOMEN

Women are well represented at all levels of business. Foreign businesswomen will be well received and treated with respect. When visiting areas in the predominantly Muslim north, female business travellers should take particular care to adopt a conservative style of dress to avoid causing offence. Female business travellers should nonetheless take security precautions. Remote beaches, for example, should be avoided unless accompanied by trusted local contacts.

Working Week

WORKING WEEK

- Working week: Monday-Friday.
- Office hours: 08.00-17.00
- Banking hours: 08.00-14.00 Monday-Thursday and until 15.00 on Fridays.
- Some private businesses have a relaxed approach and are open to discussions after official working hours.

Language & Money

LANGUAGE

English is the official langauge and used in most business transactions.

MONEY

The unit of currency is the cedi (GHC). US dollars, British pounds and euros are also accepted. Traveller's cheques can be exchanged at major banks, hotels and bureaux-de-change. Major credit cards such as American Express, Diners' Club and Visa are accepted at hotels and other business establishments. However, many restaurants and some airlines prefer to be paid in cash. A few banks give cash withdrawals against Visa and MasterCard, but not without a commission and a fee for the approval telex. ATMs are widely available, but withdrawing a larger sum of money can require several transactions because the limit per transaction is relatively low.

Tipping

TIPPING

Tipping is not compulsory, but a small tip (5-10% of the bill) can be given for good service.

Geography & Weather

GEOGRAPHY

Ghana is located in West Africa with a southern coastline along the Gulf of Guinea. It is bordered by Burkina Faso to the north, Cote d'Ivoire to the west and Togo to the east. The country's topography features flat plains and lowhills from north to south. The coastal plains stretch across the southern portion of the country, featuring low sandy beaches interspersed with salt water lagoons. About 57% of the country's total land area is classified as agricultural land areas. The Akosombo Dam on the Volta River provide hydroelectricity for Ghana and several other neighbouring countries. Accra is the capital of Ghana. It is the country's largest city and its administrative and economic centre. Other major cities include: Kumasi, the principal city of the Ashanti region; Ghana's major ports Sekondi-Takoradi and Tema, the coastal twin cities; and Tamale, a northern trade centre and the college town of Cape Coast. Ghana is administratively divided into 16 regions: Ahafo, Ashanti, Bono, Bono East, Central, Eastern, Greater Accra, North East, Northern, Oti, Savannah, Upper East, Upper West, Volta, Western and Western North.

CLIMATE

Climate overview

- Ghana's climate is tropical.
- Average temperature ranges from 21 to 32°C (70-90°F) and humidity can be quite high.
- Northern Ghana tends to be cooler and less humid than the coastal south.
- The rainy season is from March to November.
- Monitor the Ghana Meteorological Agency website for weather updates.

Flooding and landslides

• Devastating floods can occur during the rainy season in areas along the country's main rivers.

- The banks of the Birim river (Eastern region) are particularly vulnerable to flooding.
- In October 2023, more than 25,000 people in Volta region were displaced by flooding.
- Landslides during the rainy season can disrupt road travel and cause damage to property.

Bushfires

- Bushfires occur during the dry season, which lasts from mid-November to April.
- Damage to electricity poles because of bushfires can affect power supply.
- The authorities have identified Ahafo, Ashanti, Central, Eastern and North East regions as hotspots for bushfires.

Droughts

• Northern, Savannah, Upper East and Upper West regions are prone to droughts and resultant water shortages.

International Dialing & Power

DIALLING CODES

Country Code 233

IDD Prefix (International Direct Dialling) 00

COMMUNICATIONS

Mobile phone coverage is good in the major cities. Prepaid calling cards for both local and international calls and SIM cards for mobile phones can be purchased from travel agents, airports, post offices, and gas stations. Local SIM cards are cheap and cost-effective. MTN offers the most comprehensive mobile phone network, followed by Vodaphone. Other GSM providers include Glo Mobile Ghana, Airtel Ghana and Expresso. Business-class hotels provide fully functional internet facilities without additional charge. Slow internet connectivity and occasional service disruption can be expected in urban centres including Accra, despite improving local connectivity. **Cybersecurity** Individual business travellers, particularly senior executives and those on short and medium term assignments, face high risks from cybercrime. Most cybercrime in Ghana takes the form of internet scams which attempt to steal personal credentials such as usernames and passwords. Mobile fund transfer services are also vulnerable to cybercrime, with criminals known to impersonate close friends and family and ask the user to make payments. People using the internet in Ghana may also be vulnerable to banking fraud and ransomware if making payments using an unsecure Web connection. Although an increasing number of businesses are accepting credit card payments, it is advisable to make electronic payments only at trusted, reputable establishments.

The National Cyber Security Centre (NCSC) is responsible for cybercrime matters. Although the extent of the agency's ability to fight complex cyber attacks is unclear, it has proved effective at tackling standard desktop mobile phone malwares. The NCSC frequently runs public awareness campaigns, demonstrating its intent to reduce cybercrime rates.

- Minimise the number of devices you bring in country; only carry devices that are absolutely essential. Clean devices, containing only data necessary for the trip with no access to shared networks, should be used if targeted attacks are likely.
- Ensure all devices you bring into the country are well secured, with strong passwords; ensure all storage devices have full disk encryption.
- Ensure all software, including anti-virus protection, is up to date prior to travel; avoid updating software while away.
- Avoid connecting to insecure wi-fi networks where possible. Public wi-fi connections are almost always unencrypted, allowing attackers to easily instigate 'man-in-the-middle' attacks, where they redirect your browsing request to a malicious website and then run malware on your device.
- If necessary, only connect to public networks using a Virtual Private Network (VPN). Always familiarise yourself with the legal status of any VPN or application in your destination country prior to travel. Be aware of other relevant legislation including compliance requests which allow authorities to inspect devices.
- Keep devices on your person as much as possible. If unattended, ensure devices are powered down and well secured. If using hotel safes, secure them with a secondary personally-lockable device.
- Limit location tracking/turn off your phone's location function to deter surveillance, with the exception of our Assistance App or other essential applications. Turn off wi-fi and Bluetooth when not in use.

- Run a thorough check of all devices upon your return and use the 'forget network' setting if you did connect to any public wi-fi networks.
- Comply with local legislation. This includes any official requests to inspect devices. If this occurs, inform your IT department as soon as possible and exercise caution when using the device afterwards. Power off devices prior to approaching customs.
- Obtain profile-specific advice taking into account your industry and position in the company.

ELECTRICITY

This is the most common plug type used:

Calendar

Holidays & Security Dates

2024

02 Dec Farmer's Day

25 Dec Christmas Day

In some countries, if this holiday falls on a Saturday or Sunday, a public holiday is declared for the following Monday.

26 Dec Boxing Day

In many countries, if this holiday falls on a Saturday or Sunday, a public holiday is observed on the following Monday or Tuesday respectively. **31 Dec** Revolution Day

2025

01 Jan New Year's Day

In many countries, if this holiday falls on a Saturday or Sunday, a public holiday is declared for the following Monday.

06 Mar Independence Day

If the the holiday falls on a rest day, it may be observed on the next working day.

25 May Africa Day

- **04 Jun** Anniversary of 1979 coup
- 01 Jul Republic Day
- 21 Sep Founder's Day (Kwame Nkrumah's Birthday)
- 21 Sep Kwame Nkrumah Memorial Day

Destination Guide for Ghana



Medical

Destination Guide Content

Medical Care

Limited

Standard of Health Care

Generally, the standard of medical care in Ghana is evolving and working towards internationally accepted standards. Hospitals may lack basic medications and supplies, and hygiene standards can be variable. More complicated medical conditions will require referral to Accra, where a few private and government medical facilities offer an acceptable standard of care.

As the range and quality of services varies significantly from facility to facility, it is advised that you contact International SOS for guidance.

EMERGENCY NUMBERS

Police 112/191/18555 Fire service 112/192

Ambulance services are not recommended. Contact International SOS for help with your medical situation. Contact us.

Hospitals & Clinics

Ghana Ports And Harbours Authority (GPHA) Hospital

Category: Hospital

Address: Near Naval Base, Port of Takoradi PO BOX. 708 J. De Graft-Johnson Avenue Chapel Hill opposite Naval Base, Takoradi, Takoradi Phones: 233312 022 628, 233312022862, 233312034131, 233312034160 Email: Takoradi@ghanaports.net

Lister Hospital

Category: Hospital Address: 1 Finali drive, Off Spintex Road, Accra, Accra Phones: 233244313883, 233303409040 Email: info@listerhospital.com.gh

Nyaho Medical Center

Category: Hospital Address: 35 Kofi Annan Street Airport Residential area, Accra Phones: 233307086490, 233501436662 Emails: frontdesk@nyahomedical.com, info@nyahomedical.com

WARA Clinic in Accra (WRA)

Category: Clinic Address: 09 Abafun Crescent, Accra Phones: 233243666111, 233288270270 Email: assist@westafrican-rescue.com

WARA Clinic in Takoradi

Category: Clinic Address: 108 Axim Road, Takoradi Phones: 233243666111, 233288270270 Email: assist@westafrican-rescue.com

Vaccinations

COVID-19

Vaccination is recommended for all travellers.

Hepatitis A

Recommended for all travellers and international assignees, especially groups at higher risk including:

- long-term and frequent visitors.
- adventurous travellers who travel to more remote locations or stay in areas with poor sanitation.
- gay, bisexual, and other men who have sex with men (see US CDC).
- people who use illicit drugs.
- those with liver disease.

Hepatitis **B**

Recommended for all travellers and international assignees.

Meningitis - meningococcal

Vaccination with the quadrivalent vaccine (serogroups A, C, Y and W135) is recommended for anyone who is:

- Travelling during the dry season (December to June).
- Travelling during outbreaks.
- At increased risk including:
 - Those visiting friends and relatives.
 - Healthcare workers.
 - Long-term travellers who will have close contact with the local population.

Polio

All travellers are recommended to be fully immunised against polio (including a booster, if available) before they arrive in the country.

WHO **recommends** that all residents and visitors who have been in the country for more than 4 weeks receive a dose of polio vaccine within 4 weeks to 12 months of travel.

Travellers should carry the document on which their polio vaccination status is recorded. They may be **required** to show proof of polio vaccination upon departure or for entry into their next destination.

(The above-mentioned recommendations/requirements are as stated by the World Health Organization or the Ministry of Health. However national authorities may differ in how they implement these recommendations. Consult your travel health practitioner for individualised vaccination recommendation 6-8 weeks before your trip and check with the embassy or consulate of your destination if proof of vaccination is required in your itinerary.)

Rabies

Consider for certain travellers, especially:

- For international assignees and long-term visitors.
- For children who tend to play with animals and may not admit to being bitten or scratched.
- If you are travelling to a location where quality medical care may not be available immediately after being bitten/scratched by an animal.
 - (Unvaccinated people need immunoglobulin within 24 hours of an animal injury, and this medication is scarce in some countries. If you are pre-vaccinated, you do not need this immunoglobulin after an injury.)
- If contact with dogs, monkeys or other potentially rabies-carrying animals is likely.

Jogging increases your risk of dog bite.

Typhoid fever

Recommended for all travellers and international assignees.

Routine Vaccinations

Influenza

Influenza occurs in:

• Temperate southern hemisphere: April to September.

- Temperate northern hemisphere: November to March.
- Tropics: year-round.

Annual vaccination is recommended. Vaccination is especially important for people at higher risk of severe disease. People who are at higher risk for severe disease include:

- People over the age of 65.
- People with underlying health conditions.
- Pregnant women.

Measles-Mumps-Rubella

Vaccinations against measles, mumps and rubella are routine in childhood, and are usually available as a combined vaccine "MMR". See routine childhood vaccination schedules: Australia, Canada, Europe, USA, UK All adults should ensure they are immune to these diseases before they travel abroad. If unsure of your immunity, consult your health professional. You may need to be vaccinated.

Polio

Vaccination against polio is routine in childhood in many countries. See routine childhood vaccination schedules: Australia, Canada, Europe, USA, UK All adults should ensure they are immune to the disease before they travel abroad. If unsure of your immunity, consult your health professional. You may need a *primary vaccination* or a *booster*. Booster recommendations vary by country.

Tetanus-Diphtheria-Pertussis

Vaccinations against tetanus, diphtheria and pertussis are routine in childhood.

See routine childhood vaccination schedules: Australia, Canada, Europe, USA, UK

All adults should ensure they are immune to these diseases before they travel abroad. If unsure of your immunity, consult your health professional. You may need a *primary vaccination* or *booster*. Booster recommendations vary by country.

Varicella

Varicella (chickenpox) vaccinations are included in the routine childhood immunization schedule of some countries. See routine childhood vaccination schedules: Australia, Canada, Europe, USA, UK

All adults should ensure they are immune to varicella before they travel abroad. If unsure of your immunity, consult your health professional.

Malaria

Risk in all areas

Malaria is transmitted by mosquitoes that usually bite from dusk to dawn. Symptoms can develop as early as seven days or as late as several months after exposure. Early malaria symptoms are flu-like and can include fever, sweats/chills, head and body aches, and generally feeling tired and unwell. People also sometimes feel nauseous and vomit or have diarrhoea.

Untreated, malaria can cause serious complications like anaemia, seizures, mental confusion, kidney failure and coma. It can be fatal.

Follow the ABCDEs to minimise malarial risk:

A: Awareness - Be Aware of the risk, the symptoms and malaria prevention.B: Bite Prevention - Avoid being Bitten by mosquitoes, especially between dusk and dawn.

C: Chemoprophylaxis - If prescribed for you, use **Chemoprophylaxis** (antimalarial medication) to prevent infection and if infected reduce the risk of severe malaria.

D: Diagnosis - Immediately seek **Diagnosis** and treatment if a fever develops one week or more after being in a malarial area (up to one year after departure).

E: Emergency - Carry an **Emergency** Standby Treatment (EST) kit if available and recommended (this is the kit which contains malaria treatment).

Malaria is present year-round in all of Ghana.

Prevention:

- mosquito bite avoidance
- medication: consult your travel health doctor for an individual recommendation. Some authorities recommend preventive medication.



Yellow Fever

Yellow fever vaccination recommended and proof is required for specified travellers for entry

Ghana is a country with a risk of yellow fever transmission.

A yellow fever vaccination certificate is *required* for entry for anyone ≥ 9 months of age.

Vaccination is *recommended* for all travellers \geq 9 months of age going to Ghana.

For onward travel: your next destination, including your home country, may require a vaccination certificate for entry.

(Discuss vaccination with your travel health professional well in advance of your trip. The certificate becomes valid 10 days after vaccination and is valid for the life of the traveller. Note that vaccination requirements may change at any time; check with the relevant embassy or consulate for your destination. Occasionally border authorities request a valid vaccination certificate although it may not be required under the official policy.) Yellow fever is caused by a virus spread through mosquito bites. The symptoms range from a mild flu-like illness to a severe haemorrhagic fever with organ failure. It is prevented through vaccination and preventing mosquito bites.

Vaccination provides life-long protection. It is only available through designated yellow fever vaccination clinics. They will issue a signed and stamped International Certificate of Vaccination or Prophylaxis (ICVP) which becomes valid 10 days after the vaccination, and is valid for the lifetime of the person vaccinated.

Many countries require proof of vaccination for entry. If proof is not available, authorities may deny entry, mandate vaccination or may monitor your health. Some countries require proof of vaccination when departing. Always check the relevant location guide, or ask the consulate or embassy for the requirements, several weeks prior to your trip.

View Yellow Fever Infographic Poster PDF

The Disease

Yellow fever is a potential fatal viral disease which is spread through mosquito bites. It is one of the 'viral haemorrhagic fevers'. It occurs in some countries of Africa and South America. There is no specific treatment available, hence prevention through vaccination and preventing mosquito bites is critical. Many countries require travellers to show proof of vaccination in order to enter.

Transmission

The virus is carried by certain mosquito species (*Aedes* and *Haemogogus*), which tend to live around houses, or in jungles, or both environments. People (and monkeys) are infected through mosquito bites. When the virus moves into urban areas, large outbreaks can occur in humans if a large proportion of the population has not been vaccinated and is not immune.

Symptoms

Some people never develop symptoms after being infected. For those who do become ill, the first signs usually appear three to six days after the mosquito bite. These are often a sudden headache and fever, and "flu-like" symptoms that can include fatigue, muscle pain, back pain and sometimes nausea and vomiting. Most people recover in about four days. However within 24 hours after appearing to improve, about 15% progress to a serious toxic form of the disease. High fever, abdominal pain, vomiting, and jaundice, which turns the skin and eyes yellow (hence the name "yellow fever") can occur. The illness can progress to haemorrhagic (bleeding) symptoms and organ failure. Between 20%-50% of people who have a severe case of yellow fever die from the disease.

Diagnosis

The diagnosis is made through highly specialised laboratory testing of blood and tissue samples.

Treatment

There is no specific treatment for yellow fever. Patients are managed with supportive therapy. In severe cases hospitalisation and intensive care is required.

Prevention

Prevention is through preventing mosquito bites, and vaccination. **Prevent mosquito bites:**

- When outdoors, wear clothing that covers most of your body (long sleeves, long pants, socks and covered shoes).
- Consider treating clothing with an insecticide. These are available as both soaks and sprays, and usually last through several washings. Always follow the manufacturer's instructions.
- Use an effective insect repellent that contains DEET, Picaridin, PMD, or IR3535. In general, the higher the concentration of the active ingredient in a product, the longer it lasts and hence the more effective it is. Reapply after swimming or excessive sweating.
- Stay away from mosquito breeding areas, such as stagnant water.
- Avoid using perfumes and wash off sweat as both attract mosquitoes.
- Consider using a bed net impregnated with insecticides.
- Ensure windows are covered with fly-wire. Use "knock-down" insect spray to kill mosquitoes in your room.
- Choose air-conditioned, well-screened accommodation, if possible.

Vaccination: An effective vaccine is available, which contains live but weakened virus. Vaccination provides protection to most people within about 10 days, and this climbs to almost everyone by 30 days. A single vaccination provides life-long immunity in most people. There are precautions and contraindications to vaccination, and not everyone can receive the vaccine. Yellow fever vaccination is only available through designated yellow fever vaccination clinics. They will issue a signed and stamped International Certificate of Vaccination or Prophylaxis (ICVP) which becomes valid 10 days after the vaccination, and is valid for the lifetime of the person vaccinated. **Proof of Vaccination for Entry / Exit requirements**

Many countries require proof of vaccination in order to enter – these are places where yellow fever exists, but also places that do not have yellow fever but have mosquitoes which are capable of being infected. If proof is not available, authorities may deny entry, mandate vaccination or may monitor your health. Some countries require proof of vaccination when departing. Requirements are specific for each country, and can vary depending on where the trip originated. Always check the relevant location guide, or ask the consulate or embassy for the requirements, several weeks prior to your trip. If vaccination is required for entry/ exit purposes but is medically contraindicated or not recommended, the doctor will complete the "Medical Contraindications to Vaccination" section of the ICVP. In addition they can issue a medical waiver letter. The waiver should be written on letterhead stationery, signed and stamped by the doctor, clearly stating the reason the vaccination was not administered. Generally waivers are given for a specific trip and subsequent waivers need to be issued for further trips.

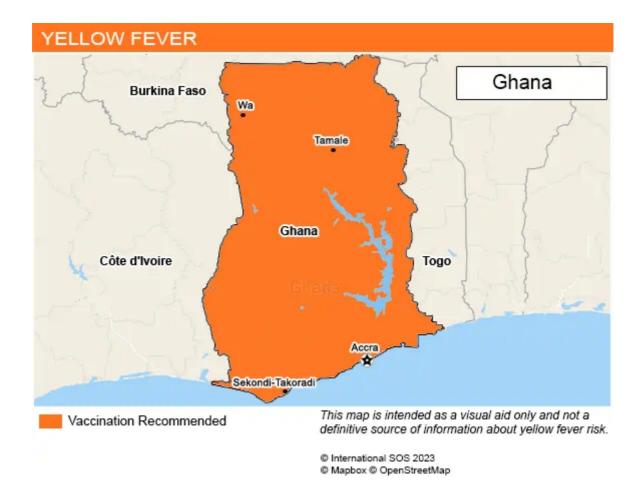
Risk to Travellers

The risk of acquiring yellow fever is higher in Africa than in South America, but the risk varies greatly according to location and season. In West Africa, peak transmission is late in the rainy season and early in the dry season (July-October). Transmission is highest during the rainy season (January-March) in Brazil. However, people can get the disease any time of year.

CDC Yellow fever information

CDC Yellow fever vaccine

There is a risk of yellow fever throughout Ghana Sporadic outbreaks are common. The last outbreak occurred in 2022 with over 100 cases reported.



Health Threats

Anthrax

Anthrax is an acute infectious disease caused by the spore-forming bacterium *Bacillus anthracis*. It most commonly occurs in hoofed mammals, though humans can also become infected. The serious forms of human anthrax are cutaneous anthrax, inhalation anthrax and intestinal anthrax. Symptoms of anthrax are different depending on the mode of infection. Generally, symptoms develop within seven days of exposure. *Cutaneous anthrax* is a skin infection and accounts for 95% of all naturally-occurring anthrax infections. The main risk factor is contact with animal hides or hair, bone products, and wool. The disease can also be spread through contact with infected animals. Hence, the populations most at risk for anthrax include farm workers, veterinarians, and tannery and wool workers.

Bacteria infects a person through cuts or abrasions on their skin. An itchy skin lesion, similar to an insect bite, then develops - usually within two weeks of exposure. This lesion may later blister and then break down, resulting in a black ulcer. The ulcer is frequently painless but surrounded by significant swelling. Sometimes painful lymph nodes may develop. Often, a scab forms, then dries and falls off within two weeks. In 20 percent of untreated individuals, the infection may spread through the bloodstream and become fatal. However, death is extremely rare among individuals who receive appropriate treatment.

Initial symptoms of *inhalation anthrax* infection may resemble a common cold. After several days, the symptoms may progress to severe breathing problems and shock. Inhalation anthrax is often fatal.

Intestinal anthrax may follow the consumption of contaminated food and is characterized by acute inflammation of the intestinal tract. Initial signs of this disease are nausea, loss of appetite, vomiting and fever. These are followed by abdominal pain, vomiting of blood and severe diarrhea.

Direct person-to-person spread of anthrax is extremely unlikely; it may not even be possible. Therefore, there is no need to immunize or treat people who have been in contact with infected people unless they also were also exposed to the same source of infection (usually, a sick animal).

People who have been exposed to anthrax can take antibiotics to prevent infection. It is necessary to treat anthrax infections early; a delay lessens chances for survival. Anthrax usually is susceptible to penicillin, doxycycline and fluoroquinolones.

An anthrax vaccine can also prevent infection. Vaccination against anthrax is not recommended for the general public and is not available.

Outbreaks, often associated with infected meat, have been reported in the Upper East Region of Ghana. The most recent outbreak in humans was in June 2023 related to infected cow meat.

Lassa Fever

Lassa fever is a severe, often fatal, haemorrhagic fever caused by the *Lassa* virus. It occurs mainly in West Africa, particularly in Sierra Leone, Liberia and Nigeria. Rodents carry the virus. People can be infected via contact with rodents, or with their the faeces or urine (which can sometimes contaminate food and water). People can also get Lassa if they have contact with the bodily fluids of an infected person, such as via sexual intercourse or needle-stick injuries. Healthcare and relief workers who travel to rural areas are at a higher risk.

Most infections are mild, but around 20 percent of those who get the disease get a serious form involving bleeding. People with serious cases can bleed from a number of sites including the nose, mouth, gastrointestinal tract and vagina. This can be severe and fatal.

There is no vaccine against Lassa fever. The antiviral drug ribavirin may be used for treatment, as it has been shown to improve a person's chances for survival if given soon after they are infected. The drug can also be used as preventative measure for people who have been exposed to the Lassa virus. To prevent infection, take steps to make living and working areas inhospitable to rodents. Protect food and water supplies from rodent contamination. Take precautions if someone has Lassa fever, making sure not to have contact with their bodily fluids.

Lassa fever is endemic in Ghana. The last outbreak was in February 2023 when 27 confirmed infections were reported, including one death.

Marburg virus

Marburg virus disease is a "viral" haemorrhagic fever (VHF). The virus is carried by an African fruit bat, *Rousettus aegyptiacus*, which lives in caves. Humans contract the virus through contact with animals, or from another person. Human to human transmission is through direct contact with the blood or body fluids of infected people, or contaminated equipment, bedding or clothing. This can happen when caring for a sick person, or through funeral practices where there is direct contact with the body.

Symptoms develop suddenly. These include fever, chills, headache and muscle pain. A rash may appear on the patient's chest, back and stomach around the fifth day of illness. Nausea, vomiting, chest and abdominal pain, sore throat and diarrhoea may develop. As the disease progresses bleeding can occur – with blood in the stools and vomit, from the mouth and nose. Organ failure may develop. About 25 to 88 percent of those infected die of the disease.

There is no specific antiviral medication to treat or vaccine available to prevent Marburg virus disease. Supportive treatment, which may require intensive care, improves survival. Prevention is through avoiding direct contact with animals, including bats (both dead and live) and bat infested caves. Do not eat bats or "bush meat" from gorillas, monkeys, and other primates. Avoid close contact with sick people and do not participate in highrisk activities such as funerals in outbreak areas. (Do not touch / wash dead bodies.) Avoid hospitals that are treating suspected Marburg cases and maintain high levels of personal hygiene, wash hands well and often. The risk is low for those who avoid contact with bats and other animals, sick people, and funerals.

Three confirmed cases, including two deaths were identified form the Ashanti region of Ghana form June to August 2022.

Мрох

Mpox (formerly known as monkeypox) virus belongs to the same group as the smallpox virus. It causes disease with similar symptoms but less severe than smallpox. It is spread to humans following close contact with an infected person, animal or infected objects. In Central and Western Africa where the virus is predominant, the disease spreads through contact with the skin, blood or body fluids of an infected animal. In humans, the disease can spread through direct contact (including sexual contact) and indirect contact. Direct contact includes contact with the rash, infected body fluids or large respiratory droplets from a sick person. Indirect contact includes contact with virus-contaminated objects, such as bedding or clothing. The risk of contracting the disease via casual contact with a sick person is low. People usually become sick about 7 to 14 days after exposure, but it can take as long as 21 days. The first symptoms are flu-like: fever, headache, muscle aches, backache, swollen lymph nodes, chills and a general feeling of discomfort and exhaustion. About one to three days after the fever begins, patients develop a rash of raised bumps. It usually first appears on the face. Lesions progress through several stages before crusting and falling off. People are infectious until all the crusts have fallen off. The illness typically lasts for two to four weeks. Children and people with weak immune systems may suffer severe disease. Complications such as secondary infections, sepsis, eye and lung infections and inflammation of the brain (encephalitis) may occur. Fatality rate varies depending on the clade (strain), with Clade II responsible for less than 1% while Clade I may cause more than 10% fatality rate. Antivirals such as Tecovirimat, smallpox vaccination and immune globulin are used to treat mpox. Vaccines against mpox exist and are increasingly available.

In addition to vaccination, prevention is through:

- Avoiding close, skin-to-skin contact with people who have a rash that looks like mpox.
- Avoiding contact with objects and materials that a person with mpox has used.
- Washing hands well and often.

- Observing good personal hygiene.
- Taking extra precautions when caring for a sick person, and cleaning areas / items that have been used by them.

In the context of the 2022 multi-country outbreak, authorities recommend additional preventive measures:

- Limit the number of sexual partners.
- Minimise skin-to-skin contact as much as possible when attending crowded events.
- Wear condoms for a further 12 weeks after recovering from a mpox infection. Using condoms reduces the risk of exposure to mpox but does not prevent infection through close physical contact.

In areas where mpox is present in animals, additional preventive measures are:

- Avoiding contact with wild animals.
- Avoiding touching objects which have been in contact with animals.
- Avoiding preparing or eating "bush meat" (wild game).

Mpox is considered to be endemic or consistently present in animals in Ghana. Human cases are commonly reported.

Rabies

Rabies is a viral disease contracted when bitten or scratched by an infected (rabid) animal, often a dog. Once it enters the body, the virus travels along nerves and causes paralysis. As it reaches important organs like the spinal cord and the brain, it causes coma and death.

In countries where rabies is present in animals or bats, ALL animal / bat bites, scratches and licks to broken skin must be treated seriously. Rabies vaccination is very effective in preventing rabies, even after a bite/scratch by a rabid animal.

Rabies vaccination

Pre-exposure vaccination is often recommended for expatriates and longterm visitors to destinations where rabies is present. It's especially recommended if quality medical care may not be available after being bitten or scratched by an animal. Pre-exposure treatment can be especially useful for children, since they may not tell their parents that they have been bitten/scratched. Pre-exposure vaccination makes it easier to treat a bite or scratch. That's important because some types of rabies treatment can be in short supply in many countries, even in cities.

If bitten, scratched or licked (on broken skin) by an animal:

- Immediately cleanse the wound with soap and water and a povidoneiodine solution if available.
- Seek medical advice from a qualified source or your assistance company.
- Notify local health authorities immediately. You may need *post-exposure vaccination*, even if you have had pre-exposure vaccination. (THIS CAN BE LIFE SAVING.)

Rabies has been noted in wild and domestic animals, and a similar virus may be present in bats. There have been reported cases of rabies in humans in the country.

Dengue fever

Dengue, or "break-bone" fever, is a viral disease of the tropics and subtropics. It is transmitted by the *Aedes aegypti* and *Aedes albopictus* mosquitoes that bite during the daytime and are found in and around human habitation. Transmission from mother to child is possible during pregnancy or birth. Symptoms include high fever, severe headaches, joint and muscle pain, nausea and vomiting. A rash often follows. The acute illness can last up to ten days, but complete recovery can take two to four weeks.

Occasionally, a potentially fatal form of dengue called severe dengue (previously known as dengue hemorrhagic fever or DHF) occurs. Severe dengue is more likely in infants and pregnant people, as well as for people who have been infected in the past and are infected again with a different strain of dengue. When a pregnant person is infected there is a risk of preterm birth, low birth weight and foetal distress. About 2 to 3 out of 100 severe dengue cases are likely to be fatal.

Prevention is through avoiding mosquito bites. There are two commercially available dengue vaccines approved in a few countries. Dengvaxia is generally only used in people with previous dengue infection while Qdenga can be considered for people without a history of dengue infection.

Dengue fever risk is present throughout the country, although the current disease surveillance remains limited. Since 2023, multiple cases of dengue fever were reported in Ghana and outbreaks occurred in all three surrounding countries, Burkina Faso, Cote d'Ivoire and Togo.

Filariasis

Filariasis is a parasitic disease, also sometimes called "elephantiasis". It is caused by microscopic, thread-like worms that are spread via mosquito bites. Larvae enter the skin when a person is bitten, then travel to the lymph nodes, where they develop into adult worms. The adult worms reproduce (creating microfilaria) then migrate further in the tissues and circulate in the blood causing a variety of symptoms.

Initial symptoms include skin redness and swollen lymph nodes in the arms and legs. Headache, weakness, muscles pain, coughing, wheezing and fever are also common.

People who are repeatedly bitten by mosquitoes over several months or years are at risk. Thus, short-term travellers are at low risk. Nevertheless, all travellers should prevent insect bites.

Leishmaniasis

Leishmaniasis is a disease caused by a parasite that can infect humans, dogs, rodents and other small animals. It is transmitted by sandflies that bite mainly between dusk and dawn and can occur in both rural and urban environments. Sandflies breed quickly in unsanitary conditions, and the spread of the disease is exacerbated by war, chronic food shortages and urbanisation activities like deforestation and building of dams and irrigation systems, changes in temperature, heavy rainfall and population movement. The disease can manifest in one of the three forms, cutaneous (is the most common form and causes skin ulcers), mucocutaneous (is a rare form which affects the inner parts of the nose and mouth) or visceral (which is the more severe form and can lead to death). There is no vaccine or drug to prevent leishmaniasis.

Prevention

The only way to avoid leishmaniasis is to prevent sandfly bites.

- Minimise outdoor activities from dusk to dawn- this is when sand flies are most active.
- Use protective clothing and insect repellent.
- Consider using an insecticide-treated bed net with *fine mesh* if there are sandflies in your living quarters. The standard bed nets used to prevent malaria are not effective, as sandflies are about one-third the size of mosquitoes and can fly through the malaria nets.
- Note that sandflies are small and do not make noise while flying. This makes it difficult to determine whether they are in your environment.

Their bites cause mild symptoms and might not be noticed.

The cutaneous form of leishmaniasis is endemic in Ghana.

Onchocerciasis

Onchocerciasis, also known as "river blindness", is caused by parasitic worms. The disease is mainly found mainly in parts of tropical Africa, though several non-African countries are also affected. Humans contract the disease via fly bites. Once introduced into the human body, the worms enter the bloodstream and mature in nodules under the skin. Later, large numbers of microscopic larvae (called microfilariae) are released. These migrate within the body.

Prevent insect bites to avoid infection.

COVID-19

COVID-19 is predominantly a respiratory illness, caused by the SARS-CoV-2 virus. Transmission is from person to person via contaminated respiratory droplets. People are infected when these droplets are inhaled or land directly on the mouth/nose/eyes, or indirectly when transferred by touching contaminated surfaces and then touching the mouth/nose/eyes. Most people will develop a mild to moderate illness only which lasts up to two weeks, or have no symptoms. Symptoms vary greatly. Common symptoms include fever, cough and sore throat. Sometimes there is a loss of or change in the sense of smell or taste. The illness can progress to being severe and can be fatal. Older people and people with underlying health conditions are at higher risk of severe disease and death. Antiviral treatment is available and is particularly important for people at higher risk of severe illness. Some people may continue to have symptoms that last for weeks or months

after the initial infection has gone.

Prevention is through vaccination, hand hygiene, and physical distancing. Wearing a mask, and ensuring adequate ventilation in enclosed spaces can reduce the risk of infection.

The first imported cases were confirmed on 13 March 2020 and local transmission was detected shortly afterwards. See Ministry of Health COVID-19 website, and the Ghana Health Services COVID-19 dashboard. The national COVID-19 hotline number is: +233 55 843 9868/+223 50 949 7700 or dial 112 for emergencies.

Meningitis - meningococcal

Meningococcal disease is a severe, often fatal, bacterial infection. People can contract the disease if they inhale droplets that have been coughed or sneezed into the air by an infected person. Direct contact with an infected person's throat secretions (e.g. through kissing, sharing drinks) can also spread the disease.

The bacterium invades the brain and its linings (meningitis) and can multiply in the blood (septicemia). A characteristic red, blotchy rash occurs all over the body in most serious cases. Symptoms include fever, intense headache, vomiting, neck stiffness and progress to coma. It is essential that infected people receive antibiotics quickly, as the disease progresses rapidly and can cause permanent brain damage or death.

The risk to travelers is mainly limited to areas of equatorial Africa and pilgrims to Mecca (Saudi Arabia), but an epidemic can occur in any country at any time. Typically, epidemics of meningococcal disease occur among people who live in close quarters.

Vaccines against some strains of the disease are available. People who have been in close contact with an infected person should be promptly treated with preventive antibiotics.

Parts of northern Ghana lie in the "meningitis belt" where periodic epidemics occur during the dry season (December to June) and hundreds of cases are reported each year. The rest of the country has an increased risk for the disease.

Tuberculosis (TB)

Tuberculosis (TB) is a serious bacterial disease. The bacteria can be coughed or sneezed into the air by an infected person. Most people who contract TB have had prolonged, close, exposure to an infected person. Family members, close friends and healthcare workers are most at risk. People with compromised immune systems, babies and children, those travelling to or living in countries with high TB rates, smokers and those who consume alcohol or other substances and those residing in group accommodation (such as prisons or nursing homes) are also at higher risk.

Active TB causes a variety of symptoms that are sometimes vague, but often include prolonged cough, chest pain, weakness, lack of appetite, weight loss, fever, chills, night sweats, tiredness, and lack of energy. Latent (inactive) TB causes no symptoms.

Tuberculosis is diagnosed by evaluating a patient's risk factors for exposure to TB, clinical symptoms, chest X-rays, CT scan, tuberculin skin testing and examination of sputum or secretions which may contain the bacteria. Most strains of TB can be treated with antimicrobial drugs. Up to four different types of medicines may be used together to treat a patient. If left untreated, active TB can be life-threatening. Some forms of TB have become resistant to drugs (MDR TB), and some forms are extensively resistant to drugs (XDR TB). These forms are hard to treat.

A vaccine, Bacillus Calmette-Guerin (BCG) is available. It protects children against severe TB. Some authorities recommend vaccinating children up to 16 years old or for travellers who may live or travel for three months or more to places with higher rates of TB infection or with the risk of multi-drug resistant TB. It must be discussed on an individual basis with your own health care provider.

Avoid enclosed or crowded environments where there are known TB patients, such as hospitals and prisons, whenever possible. People who must enter such places, such as health care workers, should wear specially fitted personal respiratory protective masks (such as the N-95 mask). Other ways to prevent the spread of TB include early identification, isolation and treatment of active cases, spreading awareness of symptoms to ensure people seek medical care early and ensuring that people on treatment take their medication and complete the entire course.

Ghana falls in the "endemic" incidence category for tuberculosis with an estimated 133 cases per 100,000 population in 2022. BCG vaccination is given at birth and is included in the country's immunisation schedule. International assignees or frequent travellers should consider consulting their doctor as TB screening may be offered.

Air Pollution

Poor air quality, also known as "haze", "smog" and "air pollution", can negatively impact one's health. Some groups are especially vulnerable to problems caused by polluted air. These include children, the elderly and anyone with underlying chronic health problems such as heart disease, emphysema, bronchitis or asthma.

The chemicals in polluted air can affect the lungs resulting in wheezing, coughing, shortness of breath and even pain. Polluted air can also irritate the eyes and nose, and may interfere with immune system function. Long-term exposure can result in reduced lung function, particularly in children. It can also lead to lung cancer.

Limiting exposure to polluted air is the best way to prevent health problems. When air quality is poor, it may be advisable to avoid outdoor physical activities. While indoors, keep doors and windows closed, and use an air conditioner on 'recirculate' if possible. If the air quality is frequently problematic, consider using an air cleaner. During particularly bad periods, you may want to wear a mask while outside. Ask your healthcare provider before using a mask, especially if you have underlying health conditions. See the International SOS Air Pollution website - use your membership number to log in.

The World Health Organization (WHO) ranks Ghana 14th for air pollution. Burning of biomass for cooking and waste, vehicle emissions, road dust, wildfires and Harmattan winds are major sources of pollution.

Hepatitis A

Hepatitis A is a viral disease that causes liver inflammation. The virus is present in the faeces of an infected person. It spreads through contaminated food and water and is common in areas with poor sanitation. Person-toperson spread also occurs, when the virus is inadvertently transferred into the mouth, including during sexual activity. People at higher risk of infection include men who have sex with men, illicit drug users and people with liver disease. Not everyone gets symptoms. If symptoms do occur, they begin two to four weeks or more after infection and can last for weeks or months. Symptoms include fever, fatigue, loss of appetite, diarrhoea, nausea/vomiting, abdominal pain/discomfort, jaundice (yellow colour of the skin and eyes), dark urine, claycoloured stool, joint pain and itching. Many infected people suffer only a mild illness. Most cases recover fully after four or more weeks. However, for some, the disease can be severe, and occasionally is fatal. There is no specific treatment and cases are managed through supportive therapy. Prevention is through vaccination, attention to hygiene, and access to safe food and water.

Polio

Polio is a highly infectious disease caused by poliovirus and is spread from person to person. People can be infected with polio if they eat or drink something that has been contaminated with faeces, particularly in countries with less-developed sanitation systems. In countries with higher levels of sanitation, respiratory droplets coughed by an infected person are an important means of transmission.

Efforts are ongoing to eradicate the disease, which remains endemic (consistently present) in two countries - Afghanistan and Pakistan. The circulating strains include WPV1 (wild poliovirus type 1) and cVDPV (circulating vaccine-derived poliovirus). Most infected people show no symptoms or have only mild ones, including fever, headache, nausea and vomiting. In about one in 200 cases, the virus reaches the central nervous system and causes paralysis.

Polio prevention involves selecting safe food and water, as well as vaccination. Many countries give a primary vaccination against polio during childhood. It entails several doses of oral (OPV) or injected (IPV) vaccine. Unvaccinated people, or those whose vaccination status is unknown, should receive IPV before travelling to areas where polio is a risk.

There is a risk of polio infection in Ghana. An environmental sample from the Eastern Province tested positive for circulating vaccine-derived poliovirus type 2 (cVDPV2) in September 2024.

Travellers diarrhoea

Travellers' diarrhoea is the most common travel-related illness. It usually occurs within the first week away from home. It is spread through contaminated food and water. Prevention is through choosing safe food and water, and paying attention to hygiene. Select food that is thoroughly cooked while fresh and served hot. Avoid undercooked or raw meat, fish or shellfish. Avoid salad and raw vegetables unless you can wash them with clean (treated) water and you peel them yourself.

Unless you are certain that the tap water is drinkable - choose bottled water and beverages, avoid ice.

Travellers staying outside of first class hotels and tourist resorts are to exercise additional caution to reduce the risk of contracting travellers' diarrhea and other intestinal illnesses.

Typhoid fever

Typhoid fever is a serious infection caused by *Salmonella typhi* bacteria. People are infected through ingesting contaminated food or water. Choosing safe food and water and vaccination reduces the risk of developing the disease.

Symptoms usually begin one to three weeks after exposure. Although typhoid fever is often called a diarrhoeal disease, some patients do not have diarrhoea. Persistent, high fever is typical. Other early symptoms are flu-like: body aches and pains, weakness, loss of appetite and a continuous dull headache. A rash with pink spots may appear on the chest and abdomen of some patients. In severe cases, perforation of the bowel can cause severe bleeding or infection in the abdomen, which can be fatal.

Typhoid is treated with antibiotics. However there is a growing problem of antibiotic resistance. "Extensively drug-resistant" (XDR) typhoid is present in some locations and does not respond to many of the antibiotics which are usually used against typhoid, making preventive measures even more important.

HIV, Hepatitis B and C, and STIs

HIV/AIDS, hepatitis B, and hepatitis C are spread by contact with bodily fluids (especially blood and semen).

- unprotected sex,
- needle sharing during IV drug use, or
- unsafe blood or medical/dental instruments.

Genital herpes (HSV), genital warts (HPV), gonorrhoea, chlamydia, syphilis and most other sexually transmitted diseases are spread by genital contact.

Prevention:

- In many countries, hepatitis B is now a routine childhood immunisation and need not be repeated. All non-immune travellers should consider vaccination.
- Always use new condoms (preferably brought from your home country).
- IV drug users should not share needles.
- Avoid having tattoos or piercings done.
- In healthcare settings, make sure that needles and syringes are sterile and not shared between patients.
- Call International SOS or your corporate medical department if you are hospitalised.
- Be aware of your risk when assisting anyone with an injury. Protect yourself from contact with bodily fluids.
- Seek medical attention within 24 hours if you accidentally come into contact with someone else's bodily fluids.

Schistosomiasis

Schistosomiasis, also known as bilharzia, is a disease caused by parasitic worms that live in freshwater lakes, rivers and rice paddies. It can penetrate the skin of persons who are wading, swimming, bathing or washing in contaminated water. There is no vaccine.

To prevent infection:

- Avoid swimming or wading in fresh water in countries where schistosomiasis occurs.
- Using soap during bathing *reduces* the risk of infection, as does a vigorous rubdown with a towel immediately after contact with contaminated water. Do *not* rely on these methods to prevent schistosomiasis.
- Heat bath water for five minutes at 50°C (122°F).
- Water held in a storage tank for at least 48 hours should be safe.

Food & Water

Drink bottled water. Care with food.

Food Risk

Food-borne illness is common. To reduce your risk:

- Food served in larger hotels and well-known restaurants should be safe.
- Busier restaurants may be safer as they are more likely to serve freshly cooked food.
- Always choose food that has been freshly cooked and is served hot.
- Avoid food that has been stored warm such as in a "bain marie."
- Avoid raw foods, shellfish, pre-peeled fruit and salad.
- Fruit that you wash and peel yourself is safe.
- Avoid street vendors and market food because the standard of hygiene may be low and food may not be fresh.

Water and Beverages

Tap water is unsafe.

- Drink only bottled or boiled water or carbonated drinks.
- Avoid ice, as it may have been made from unsterile water.

Destination Guide for Ghana



Security

Destination Guide Content

Personal Security

STANDING TRAVEL ADVICE

- Travel to Ghana can proceed with precautions.
- Take sensible precautions to mitigate the risk of petty and street crime.
- Carjacking occurs in both rural and urban areas. Take precautions to mitigate this risk, including driving with windows up and doors locked at all times and not travelling unaccompanied.
- Occasional bouts of ethnic violence are possible in parts of northern and southeastern Ghana. These are usually highly localised and do not pose a significant risk to travellers.
- Road conditions and driving standards are generally poor, emergency and recovery services negligible, and foreign drivers are usually blamed in the event of a traffic accident. Do not self-drive unless very familiar with local conditions. It is preferable to hire a trusted local driver.
- Vehicles should be in good condition and equipped with a full medical kit, adequate communication systems, spare tyres and enough water and fuel to complete your journey. Ensure you carry valid vehicle and identification documents as police roadblocks and spot-checks are common.
- Police roadblocks and spot-checks are common; carry photographic identification at all times.
- Public transport is not suitable for business travellers. Use official taxis, but during daylight hours only.

Upper West, Upper East and North East regions

 Defer non-essential travel to areas within 18 miles (30km) of the borders with Burkina Faso, Cote d'Ivoire and Togo due to cross-border incursions and kidnapping by bandit and Islamist militant groups operating from the Sahel. Essential operations in MEDIUM-risk areas should be undertaken only after seeking itinerary-specific advice. Essential overland movement should be undertaken with solid journey management procedures, including security support, convoy movement, regular check-ins and vehicle monitoring capabilities. Liaise with your security provider and/or with the local authorities to understand the level of risk in the area visited and whether security support is necessary. Officials may deem it necessary to provide an army escort.

- Operations and travel in northern regions should proceed with comprehensive precautions against higher risks of highway banditry, kidnapping and communal clashes in those regions. Ensure that you are fully trained on itinerary-specific threats and mitigating measures and that your protocols include advice related to heightened risks of highway banditry, kidnapping and communal clashes.
- Review your choice of accommodation and ensure locations have enhanced security precautions. Road travel in rural areas should be undertaken in convoy, during daylight hours only. Ensure your vehicle is in good condition and equipped with a full medical kit, adequate communications systems, spare tyres and enough water, food and petrol to complete your journey.
- Expect a heightened security force presence and military checkpoints in northern regions. Comply with all official directives and carry the relevant identification documents to ease passage through security checkpoints or spot-checks.
- Be discreet about your travel plans and nationality as a general precaution. Register with your embassy and all relevant warden networks.

Crime

Occurs in many areas, sometimes violent

CRIME

Petty crime poses the main risk to in-country workforce. Pickpockets and bag-snatchers usually operate near crowded market areas, beaches, parks and tourist attractions. Remain vigilant at Kotoka International Airport (ACC) in the capital Accra, where thieves are known to operate. Avoid ostentatious display of wealth. Credit card scams involving simple theft, or the 'skimming' of cards, may occur during transactions, including at hotels, restaurants and supermarkets, as well as at ATMs in poorly lit places. Exercise caution when using a credit card, shield the number pad when entering the PIN number and regularly monitor your bank statements to check for any suspicious transaction. Armed robberies occur occasionally, especially in Accra. Areas popular with international assignees are affected occasionally by residential break-ins; in some cases, criminals resort to violence against victims who offer resistance. Most break-ins occur in large apartment buildings as it affords criminals the opportunity to raid several flats, often with the help of security guards. Vary routines to avoid establishing predictable patterns of movement. Robberies by taxi drivers have been reported in Accra. Use reputable companies and/or ride-share providers and, wherever possible, avoid using taxis alone at night. Vehicle crime is also reported to be on the rise.

Terrorism

Minimal risk to foreigners

TERRORISM

Ghana has not experienced any terrorist attacks to date and there are no known local terrorist groups. However, since 2019, the country has been a potential target for Islamist extremist organisations based in neighbouring countries. This risk is greatest in northern border areas. There was an attempted bombing in Bawku (Upper East region) in February 2023. However, no major incidents have been reported recently.

The country's terrorism alert level was raised after the May 2022 attack in Togo. Isolated incidents targeting the security forces in border areas with Burkina Faso, Cote d'Ivoire and Togo are likely, depending on the security environment in Burkina Faso, particularly its Centre-Sud region. Militant groups will continue to exploit trafficking hubs created by bandits in western and eastern tri-border regions. They will also continue to kidnap local nationals for ransom to raise funds. While security forces and local nationals remain the primary targets, foreign workforce represent a high-profile target for militant and bandit groups.

Kidnapping

KIDNAPPING

Most victims are locals, though foreign nationals can be targeted. Two Canadian women were abducted at gunpoint in Kumasi (Ashanti region) in June 2019 after volunteering with an international charity. They were subsequently rescued and returned to Canada. In April 2019, an Indian national was seized from his vehicle in Kumasi, though he later escaped. A Lebanese diplomat that same month was kidnapped and later rescued by the police. No major incidents of kidnapping have been reported since 2019. The growing presence of Islamist extremist groups in the tri-border regions has increased the risk of kidnapping in northern Ghana, particularly in MEDIUM travel risk locations. The main target remains local nationals, but foreign nationals would represent high-value targets.

Social Unrest

SOCIAL UNREST

Protests against government policies or living conditions are common in Ghana; student groups and unions are particularly active in organising demonstrations, which tend to increase in frequency ahead of elections. Several demonstrations have been organised by the Arise Ghana civil society groups over the economic situation. These are legally allowed under the constitution, though they must adhere to certain guidelines. Demonstrations are mostly peaceful and the security forces are quick to disperse them if they turn violent.

Although clashes between rival political or ethnic groups can occur, these are usually highly localised and do not pose a significant risk to business travellers. The country's multi-ethnic structure does not pose a threat to overall stability, as most conflicts tend to involve either land disputes between nomadic herdsmen and local farmers or tribal succession issues. Outbreaks of violence resulting from such disputes prompt tightened security in the rural areas where they occur and pose only incidental risks to business travellers.

Conflict

CONFLICT

Ghana is a largely peaceful country. However, ethnic tensions occasionally lead to incidents of communal violence in the three northern regions, with some scattered communal unrest in the south-eastern Volta region. The Homeland Study Group Foundation (HSGF) is calling for the independence of Togoland. This is a former German protectorate comprising parts of Oti and Volta regions, as well as parts of Northern, North East and Upper East regions.

Communal clashes are usually highly localised and do not pose a significant risk to foreign nationals. However, short-notice security operations, as well as movement restrictions such as curfews, may be imposed, affecting in-country workforce.