

“The Health Service and National Health Insurance Scheme does not exist in Ghana,” a female amputee at the largest supplier of orthopedic appliances in Ghana, the Orthopedic Training Center, states, “It doesn’t do anything for people like me – for amputees.”

During my time in Ghana, I riveted in the stories of over 20 amputees and the few practitioners providing essential rehabilitative services in Ghana. As a country with a population of almost 27 million people, approximately 5 million people are living with a disability. Of those who are disabled, 95% have no access to medical rehabilitation and about half are completely confined to their homes. Despite having a universal healthcare system, many people are barred and excluded from the care they are entitled to as citizens.

Dubbed as the “worst country to be disabled” by the British Broadcasting Corporation, there are countless structural and social factors which inhibits one’s ability to have any source of agency and independence: inability to access core facilities due to a lack of proper infrastructure and public transportation, social rejection by the community and families, denial of leadership positions like being the community chief or participating in village meetings, social stigmatization by those who believe the disabled are bewitched and cursed, torture and chaining of people in prayer camps, and murder and abandonment of children with disabilities. Meanwhile facing these challenges, many amputees wish to be included in society and have hope, in the form of a prosthetic device, to have the life they have envisioned always envisioned for themselves.

Ghana’s ratification of the Convention on the Rights of Persons with Disabilities in 2012 is a promise to help the disabled; however, there has been little done by the government in practice as demonstrated by a lack of national system to help amputees and the exclusion of critical rehabilitative devices like prosthesis and crutches in the National Health Insurance Scheme. Not only have I personally experienced challenges in researching an excluded, at risk population, but it is evermore present in the lives of the disabled that Ghana has systemically ignored their plights and needs meanwhile maintaining the false impression of assistance. This sense of false hope is reflected in the interviews I have had with patients and providers who are increasingly frustrated by the national healthcare system, which they believe should do more to ensure essential “universal” care is provided for all patients.

Many of the prosthesis centers in Ghana are collapsing due to the lack of attention from the national government, which too often prioritizes communicable diseases like malaria

and yellow fever to the point where little to no attention is placed on resources for the disabled. Having almost nowhere to turn to for rehabilitation, many people rely on limited information from others or pursue frivolous offers to get a prosthesis. It is extremely difficult to get a prosthesis in Ghana; even if one has the resources to do so, there is a shortage of supplies and practitioners to fit them. Compounded by the lack of supporting infrastructure and the heavy stigmatization of disability, it might take months at the earliest to find one which is suitable for the patient.

In spite of the fact that there are many amputees in Ghana, I quickly learned in the field that they are not particularly easy to find. One of the reasons for this is because many must stay at home and away from public areas unless they have assistance due to the lack of accessible roads and public transportation, or they are forced to be on the street dodging traffic in order to beg others for assistance. More infinitely challenging is finding an amputee who already has a prosthesis in Ghana, as a consequence of an absence of a prosthesis manufacturing center in Ghana and limited devices supplied by other countries and organization. This challenge in finding a reliable source to sample for my interviews led to me different regions of Ghana, including the Cape Coast Teaching Hospital, Orthopedic Training Centre in Nsawam, and Ghana Health Services, the National Center for Prosthesis and Orthotics which partners with the United States based non-governmental organization Standing with Hope in Accra. Not only were these places dramatically different from each other in terms of resources, staff, and accommodations, but they also served as regional hubs where amputees from all over Western Africa came for rehabilitative services.

There are times when I felt that my experiences required me to persevere and be resilient, but I know it is nothing compared to the daily difficulties faced by the population whom I was studying. It was at times heartbreaking to say that I cannot personally help them acquire a prosthesis, but it also reminded me that I needed to take the time to research and hear the stories of others in order to know how best to help and engage a complex issue. It is research that demands attention to what is overlooked, and advocates on behalf of the voiceless for chronic, systemic change in society.

I could not have completed my project without the support of everyone I met during my journey in Ghana such as the founder of Standing With Hope, Peter Rosenberger, the staff and friends at Projects Abroad, Sister Elizabeth Newman and Gloria Williston at the Orthopedic Training Centre, the staff at Ghana Health Service, and my coworkers at the Cape Coast Teaching Hospital; as well as for the guidance of my faculty advisor Professor Terence McDonnell and the generosity of the Kellogg Institute for International Studies in pursuing my personal and academic endeavors as part of the Experiencing the World Fellowship. This summer, I have learned to listen to and engage myself with a

community who has been routinely ignored in society – to emphasize their existence and voice in the world, to say that their lives matter too. I have truly been able to “Experience the World” in a way I have never been able to before, to test myself beyond my expectations, and to live through vivid, rich stories of those who too often go unheard.