Ghana - Study on Global Ageing and Adult Health-2007/8, Wave 1

Professor R. Biritwum - Department of Community Health, Ghana Medical School

Report generated on: October 24, 2013

Visit our data catalog at: http://apps.who.int/healthinfo/systems/surveydata/index.php

Sampling

Sampling Procedure

Ghana used a stratified, multistage cluster design.
The sample was stratified by administrative region (Ashanti, Brong Ahafo, Central, Eastern, Greater Accra, Northern, Upper East, Upper West, Volta and Western) and type of locality (urban/rural) resulting in 20 strata and is nationally representative.
The Census Enumerated Areas (CEA) of the 2000 Population and Housing Census was used as the sampling frame.
A sample of 251 EAs was selected as the primary sampling units (PSU). One of the selected PSUs was not used. This was because the EA which was expected to be located at Korle Bu Teaching hospital cccould not be traced. The number of EAs to be selected from each strata was based on proportional allocation (determined by the number of EAs in each strata specified on the census frame). EAs were then selected from each stratum with probability proportional to size; the measure of size being the
number of individuals aged 50 years or more in the EA.
In each selected EA, a listing of the households was conducted to classify each household into the following mutually exclusive categories:
(1) WHS/SAGE Wave 0 follow-up households with one or more members aged 50 years or more;
(2) New households with one or more members aged 50 years or more;
(3) WHS/SAGE Wave 0 follow-up households which did not include any members aged 50 years or more, but included residents aged 18-49; and,
(4) New households which did not include any members aged 50 years or more, but included residents aged 18-49.

Twenty-four households were randomly selected from each selected EA. All WHS/SAGE Wave 0 follow-up 50-plus households were eligible for the household interview (one household respondent was selected). Twenty such households were selected. If this target number was not reached, then the balance was selected using systematic sampling from the new 50-plus households. All 50+ members of the household were eligible for the individual interview (multiple individual interviews possible in these households).

Stages of selection
Strata: Region, Locality=20
PSU: EAs=235 surveyed
SSU: Households=5269 surveyed
TSU: Individual=5573 surveyed

Deviations from Sample Design

One of the 251 selected PSUs was not used. This was because the EA which was expected to be located at Korle Bu Teaching hospital cccould not be traced.

Response Rate

Household
Response rate=86%
Cooperation rate=98%

Individual:
Response rate=80%
Cooperation rate=92%

Weighting

Household weights(variable hhweight) for analysis at household level and individual weights(variable pweight) for analysis at person level were calculated.
These were based on the selection probability at each stage of selection. Household weights were post-stratified by region and locality according to the 2010 household projections.
Individual weights were post-stratified by region, locality, sex and age-groups(18-49, 50-59, 60-69, 70+) according to the

2009 Projected population estimates provided by Stats Ghana.
Weights are not normalised.

Questionnaires

Overview

The questionnaires were based on the WHS Model Questionnaire with some modification and many new additions. A household questionnaire was administered to all households eligible for the study. A Verbal Autopsy questionnaire was administered to households that had a death in the last 24 months. An Individual questionniare was administered to eligible respondents identified from the household roster. A Proxy questionnaire was administered to individual respondents who had cognitive limitations. The questionnaires were developed in English and were piloted as part of the SAGE pretest in 2005. All documents were translated into three local languanges: Akan, Ga and Twi. All SAGE generic questionnaires are available as external resources.

Data Collection

Data Collection Dates

Start	End	Cycle
2007-01	2008-12	N/A

Data Collection Mode

Face-to-face [f2f] PAPI

DATA COLLECTION NOTES

The SAGE instrument was pre-tested in 2005 in India, Ghana and Tanzania. Just over 1500 persons were interviewed in total. Fieldworker training workshop was conducted the week of 2 April 2007 in Danfa Health Centre, Accra. Fieldwork teams comprised 8 interviewers, 2 field editors and 1 person for the spirometry and drawing the blood sample. There were 4 teams in total each headed by a supervisor responsible for overall co-ordination and supervision of the team.

Data Collectors

Name	Abbreviation	Affiliation
Department of Community Health, Ghana Medical School		University of Ghana

Data Processing

Data Editing

Data editing took place at a number of stages including:
(1) office editing and coding
(2) during data entry
(3) structural checking of the CSPro files
(4) range and consistency secondary edits in Stata

Data Appraisal

No content available