

FAMILY MEDICINE DIGEST

A Bulletin from Family Medicine



GHANA COLLEGE OF
PHYSICIANS AND
SURGEONS

PRO VITA SCIENTIA

FAMILY MEDICINE
FACULTY



SOFPOG
SOCIETY OF FAMILY
PHYSICIANS OF GHANA

THIRD EDITION

Issue 3, October 2026



Inside this issue

WONCA Africa Conference

Corner of Excellence | Special Interest Groups

FEATURE ARTICLE:

THE SECOND LOOK



Table of Contents

Editorial.....	Page 1
Faculty Board Members.....	Page 2
SOFPOG Executives.....	Page 3
Message to our new residents from Faculty Chair.....	Page 4
To our exam candidates from Faculty Chair.....	Page 5
Introductory Course 2026.....	Page 6
Ghana at the 9th WONCA Africa Region Conference.....	Page 7
Corner of Excellence.....	Page 9
Breast Cancer Awareness Month	Page 11
Upcoming Events/Announcements	Page 12
Feature Article: The Second Look.....	Page 13
Inside Next Edition.....	Page 17
SOFPOG Special Interest Groups.....	Page 18
Editorial Team.....	Page 22

EDITORIAL

As we round up with the last edition of the family medicine bulletin for the year 2026, the editorial team is grateful to all who have supported us in diverse ways to bring the dream of releasing a quarterly faculty family medicine bulletin into fruition.

This last quarter has seen several beginnings. Firstly, the faculty welcomed its freshest 'babies' into their fold; 60 new family medicine residents from all over Ghana, representing the largest intake of first year residents since the start of Family medicine training in Ghana more than two decades ago.

Eager-eyed, these new residents are ready to take their place in this ecosystem and to make a difference in the primary healthcare space in Ghana and beyond.

Secondly, 25 members and 3 fellows successfully completed their examinations in September and are due for graduation in December this year.

Thirdly, the Society of Family Physicians has introduced exciting special interest groups with the aim of engaging family physicians on a deeper level, improving networking and communication among individuals with like passion.

Lastly, eight family physicians were part of the first cohort of trainees who participated in the Advanced Life Support for Obstetrics training (ALSO) organised in collaboration with the Wake Forest University School of Medicine. and the Departments of Family Medicine and Obstetrics and Gynaecology of the Greater Accra Regional Hospital, Accra. The training will run annually for the next 2 years.

Beginnings can be exciting but often come with huge responsibility and uncertainties. Like new parents (as in faculty and trainers), welcoming new residents comes with joy, a lot of hard work and sleepless nights. For the latest specialists and fellows ready to go out 'into the world', there is equally some trepidation and anxiety about the next steps.

However, it's calming to know that others have trodden the path and blazed the trail and are always eager to step in to help and to hold a hand. Thankfully there's a fair amount of grey -hair and maturity to lean on and to glean from.

We know that both trainers and trainees will navigate this path with strategy, skill and grace.

Cheers to new beginnings!

Sincerely,

Dr. (Med) Dora Egblewogbe
(Editor-in-Chief)

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WELCOME ADDRESS TO NEW RESIDENTS FROM FACULTY CHAIR

On behalf of the Family Medicine Faculty, it is my distinct pleasure to officially welcome you, our new First Year Residents, to both the regular and modular programs.

You have worked incredibly hard to get here, and you were selected from a very competitive pool not just for your academic excellence, but for your compassion, your resilience, and your commitment to holistic and comprehensive care. Those are the qualities that define a true Family Physician.

Family Medicine is more than a specialty — it encompasses relationships with your patients, colleague Family Physicians, and the networks you make with other specialties and healthcare providers during your training and practice.

In the coming years, you will be the first contact, the continuous presence, and the trusted advocate for your patients, from the newborn to the elderly, in the clinic, in the community, and at the bedside. It is hard work, it is demanding work, but it is profoundly meaningful.

Our promise to you as a faculty is this: We will challenge you, we will support you, and we will stand with you.

We are committed to creating an environment where you can learn safely, ask questions freely, grow clinically, and thrive personally. As trainers, our doors are always open to you.

You are no longer just joining a residency program; you are joining a family. We learn together, we care for our patients together, and we look out for one another.

We are so proud to have you with us. We cannot wait to see the excellent Family Physicians you will become, and we hope to see you continuing on to fellowship.

With Warm Regards,

Dr (Med) Maite Alfonso Romero

Faculty Chair – Family Medicine

Ghana College of Physicians and Surgeons

MESSAGE TO THE CLASS OF 2026 FROM FACULTY CHAIR

To the Class of 2026,

On behalf of the entire Faculty of Family Medicine, I extend our heartfelt congratulations to you on completing your final examinations.

To those who have successfully passed, congratulations! We are immensely proud of you. I wrote to you before the exams, assuring you of our confidence in your hard work, and today, that confidence has turned into great joy.

You have not simply passed an examination; you have completed a rigorous journey of growth, sacrifice and transformation. You have grown into competent, compassionate and resilient Family Physicians, ready to serve our communities with excellence.

Family Medicine has gained! You are now part of our proud lineage.

To those who may not have achieved the outcome they hoped for this time, please do not lose heart. One examination does not define your ability or your future. Take a moment to reflect, regroup and prepare for the next opportunity. We believe in you, and your journey continues.

To the entire class, thank you for trusting us with your training and for your dedication through the long hours and challenges.

We are so, so proud of you.

Congratulations once again, Class of 2026!

Keep going. Keep believing.

With great pride and joy,

Dr (Med) Maite Alfonso Romero

Faculty Chair – Family Medicine

Ghana College of Physicians and Surgeons

Greater Accra Regional Hospital Hosts Introductory Course in Family Medicine

The Family Medicine department of the Greater Accra regional hospital was privileged to host this year's Introductory course in family medicine. From the 21st to the 25th of September 2026.

The department welcomed 60 residents; comprising 28 Modular and 32 regular residents from all over Ghana for a 5-day intensive course which covered several foundational topics in family medicine.

Lectures were primarily delivered by Family Physicians from Ghana. Family Physicians from Wake Forest University School of Medicine., who were on a collaborative visit to the Department of Family Medicine to facilitate the ALSO (Advanced Life Support in Obstetrics) training, also delivered lectures in Geriatrics and Sports & Exercise Medicine and participated in the skills training sessions.

Residents showed great enthusiasm, participated actively in all sessions, and noted that the faculty inspired and challenged their perspectives on Family Medicine.

By the end of the course, residents indicated that it was valuable in shaping their professional identity and reaffirming their decision to pursue the specialty.

They expressed particular appreciation for the faculty, most of whom combine clinical practice with roles in academia, research, administration and management, and who demonstrated exceptional passion for Family Medicine.

Report by Dr (Med) Dora Egblewogbe



Participants with lecturers

Ghana Makes Strong Showing at the 9th WONCA Africa Region Conference

Ghana proudly made a strong showing at the 9th WONCA Africa Region Conference, held in Gaborone, Botswana, from 10th–11th September 2026. The conference was held under the theme, ***“We Are One: Africa United to Advance Planetary Health Through Collaboration and Resource Alignment in Primary Health Care.”***

A 13-member Ghanaian delegation, comprising Consultants, Senior Specialists, Senior Residents and Junior Residents, represented the country at the conference. The delegation participated in scientific and professional sessions, exchanged experiences with colleagues from across the continent, and explored emerging approaches to strengthening Family Medicine and primary healthcare.

A major highlight of Ghana's participation was the country's successful bid to host the 10th WONCA Africa Region Conference in Accra in 2028. This will be the second time Ghana hosts the continental conference, following the first hosting in 2015.

The achievement is a significant milestone for Family Medicine in Ghana and reflects the country's growing contribution to the specialty and primary healthcare in Africa.

Ghana's Engagement with PRIMAFAMED

Ghana also participated in the PRIMAFAMED Conference, further extending its engagement in the

academic development of Family Medicine across Africa. PRIMAFAMED, the Primary Care and Family Medicine Education Network, brings together academic institutions across sub-Saharan Africa with a focus on strengthening Family Medicine education, postgraduate and undergraduate training, curriculum development, research and faculty capacity. It is also recognised as the academic arm of WONCA Africa.

PRIMAFAMED supports the sharing of educational resources, development of training programmes and research capacity, helping institutions learn from one another and adapt Family Medicine training to the health needs of their respective countries. Ghana is among the countries represented in the network, with the University of Ghana listed as a member institution.

Ghana's participation therefore provided opportunities not only for professional engagement, but also for strengthening the country's academic and training partnerships in Family Medicine.

Looking Ahead to Accra 2028

The successful bid to host the 2028 WONCA Africa Region Conference in Accra marks an important moment for Ghanaian Family Medicine. As Ghana looks ahead to welcoming the African Family Medicine community, the country will have an opportunity to showcase its achievements, share innovations and contribute to shaping the future of primary healthcare across the continent.

9th WONCA Africa Region Conference Gallery



CORNER OF EXCELLENCE

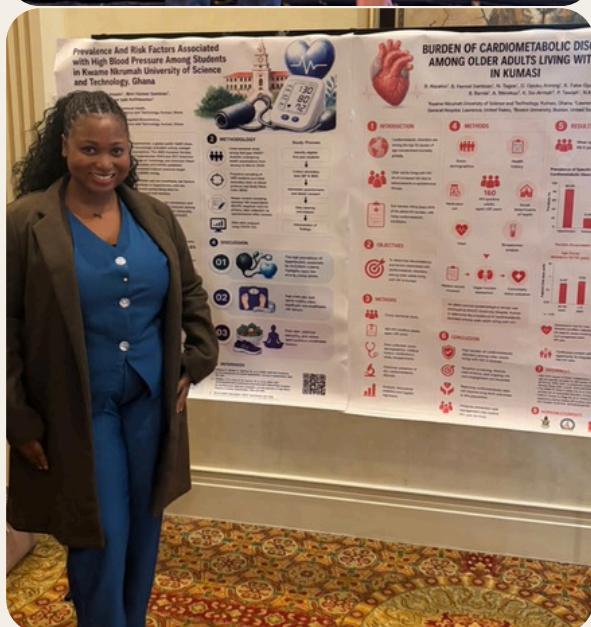
BEST POSTER AT WONCA AFRICA 2026 AND NEW MILESTONES

We celebrate some great achievements within our community in the last quarter.

Best Poster Award at WONCA Africa Conference 2026

We heartily congratulate Dr (Med) Bernice Enyonam Akpaloo for winning the Best Poster Award at the WONCA Africa Conference 2026 in Botswana. Her award-winning poster, titled: "**Prevalence And Risk Factors Associated with High Blood Pressure Among Students in Kwame Nkrumah University of Science and Technology, Ghana**" was praised for its relevance, clear methodology, and its strong message for early screening and lifestyle intervention among young adults — the very heart of preventive Family Medicine.

Congratulations, Dr. (Med) Akpaloo, for flying the flag of Ghana and SOFPOG high on the continental stage!



Prevalence And Risk Factors Associated with High Blood Pressure Among Students in Kwame Nkrumah University of Science and Technology, Ghana

Bernice Enyonam Akpaloo¹, Bimi Hansel Sambian², Emmanuel Konadu² and Sam Kofi Newton¹

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1 INTRODUCTION



Hypertension, a global public health issue, is increasingly prevalent among younger populations. The 2023 European Society of Hypertension (ESH) and 2017 American College of Cardiology and American Heart Association (ACC/AHA) guidelines recommended a blood pressure target of <130/80 mmHg.

Modifiable and non-modifiable risk factors contribute to hypertension, with the university period being ideal for behavioural interventions.

This study evaluates the prevalence and risk factors of high blood pressure among students at Kwame Nkrumah University of Science and Technology (KNUST).

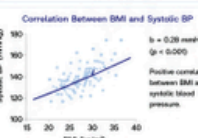
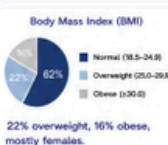
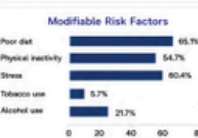
3 RESULTS

Respondents
106
(82.6% response rate)

Age (years)
19–23
Mean = 20

Male
58.5%

Christian
85.8%



5 CONCLUSION

The prevalence of high blood pressure among first-year students at KNUST is high, particularly when using the ACC/AHA threshold. Non-modifiable factors such as age, male sex, and family history along with modifiable factors like stress, physical inactivity and poor diet contribute to hypertension.



2 METHODOLOGY

Study Process

- Identify eligible first-year students
- Collect secondary data (BP & BMI)
- Administer questionnaire and obtain consent
- Data cleaning and analysis
- Interpretation of findings

Methodology Details:

- Cross-sectional study among first-year KNUST students undergoing health examinations from January to March 2024.
- Purposive sampling of 1,818 students provided secondary data on blood pressure and Body Mass Index (BMI).
- Simple random sampling selected 106 respondents (82.6% response rate) for primary data collection via questionnaires after consent.
- Data were analysed using STATA 17.0.

4 DISCUSSION

- The high prevalence of hypertension, especially by ACC/AHA criteria, highlights early risk among young adults.
- Age, male sex, and family history were significant non-modifiable risk factors.
- Poor diet, physical inactivity, and stress were common modifiable factors.

6 REFERENCES

- Williams, B., Mancia, G., Spiering, W., et al. (2023). 2023 ESH Guidelines for the management of arterial hypertension. *Journal of Hypertension*, 41(2), 187–233.
- Whelton, P. K., Carey, R. M., Aronow, W. S., et al. (2017). 2017 ACC/AHA/AAPA/ABC/ACPM/ASPA/ASPC/NLA/PCNA Guideline for the Prevention, Detection, Evaluation, and Management of High Blood Pressure in Adults. *Hypertension*, 71(6), e13–e115.
- World Health Organization. (2021). Hypertension fact sheet.



CORNER OF EXCELLENCE

Successful Final Year Residents

We also celebrate our final year residents who have successfully completed their final examinations. You have crossed a major hurdle after years of sacrifice and dedicated service.

We acknowledge your achievement and are immensely proud of you.

Welcoming Our New First Year Residents

We warmly welcome our newly admitted first-year residents into the Family of Family Medicine , and reassure you of our commitment to guide and support you.

A Season of Growth

From research excellence on a continental platform to new admissions and successful completion of training, Family Medicine continues to grow from strength to strength.

Congratulations to all!

BREAST CANCER AWARENESS MONTH 2026

October marks Breast Cancer Awareness Month worldwide, presenting an opportunity to increase awareness, encourage early detection and strengthen support for people affected by breast cancer.

In Ghana, this year's campaign is being observed under the theme "*Early Action, Better Outcomes*," while the global theme by **World Health Organization** is "*Every story is unique, every journey matters*."

Breast cancer remains a major public health concern in Ghana. Current national figures indicate that more than 5,000 cases are recorded annually, with approximately 2,695 deaths. Of particular concern, about 70% of patients reportedly present with advanced disease, when treatment can be more difficult and outcomes poorer. ([Ghana News Agency](#))

Roughly half of all breast cancers occur in women with no specific risk factors other than sex and age; and approximately 0.5–1% of breast cancers occur in men. Early action, as expressed in the national theme, therefore begins with both men and women knowing their breasts and seeking medical attention promptly when changes occur. And it is most likely that such attention will be sought at the primary care level.

And that is where the **Family Physician** comes in.

As primary care physicians, we all have a role to play in moving beyond awareness to early action. Let us promote accurate information and reduce fear and stigma, provide comprehensive screening opportunities, encourage timely assessment, and support patients throughout their treatment journey with the best palliative care.

SOFPOG is always there to care, and this October, we invite everyone to our Breast Cancer Awareness Campaign. We encourage all Family Physicians, trainees and allies to spearhead and participate in the SOFPOG campaign wherever they find themselves. Family Physicians are encouraged to educate their clients and screen them where appropriate. Let us remember: early action can save lives.

Follow the SOFPOG page on social media for further details.

By Dr (Med) Anita Tibboh

UPCOMING EVENTS / ANNOUNCEMENTS



SOFPOG
SOCIETY OF FAMILY PHYSICIANS OF GHANA

Accord for a healthier world
by Pfizer

OCTOBER IS
BREAST CANCER
AWARENESS MONTH

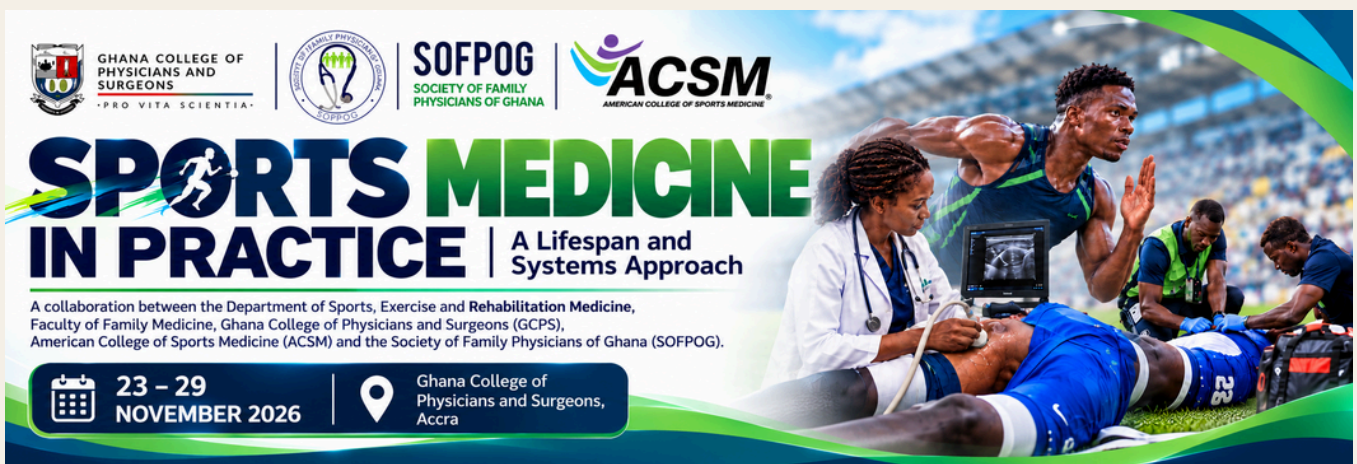
Early Detection Saves Lives

FREE
CLINICAL BREAST EXAMINATIONS
MONDAYS TO FRIDAYS
8:00 AM TO 2:00 PM

DAILY
EDUCATION CAMPAIGNS
Learn | Ask | Get Informed

KNOW YOUR RISK | **GET** CHECKED | **TAKE** ACTION | **SUPPORT** SURVIVORS

Together for Healthier Communities



GHANA COLLEGE OF PHYSICIANS AND SURGEONS
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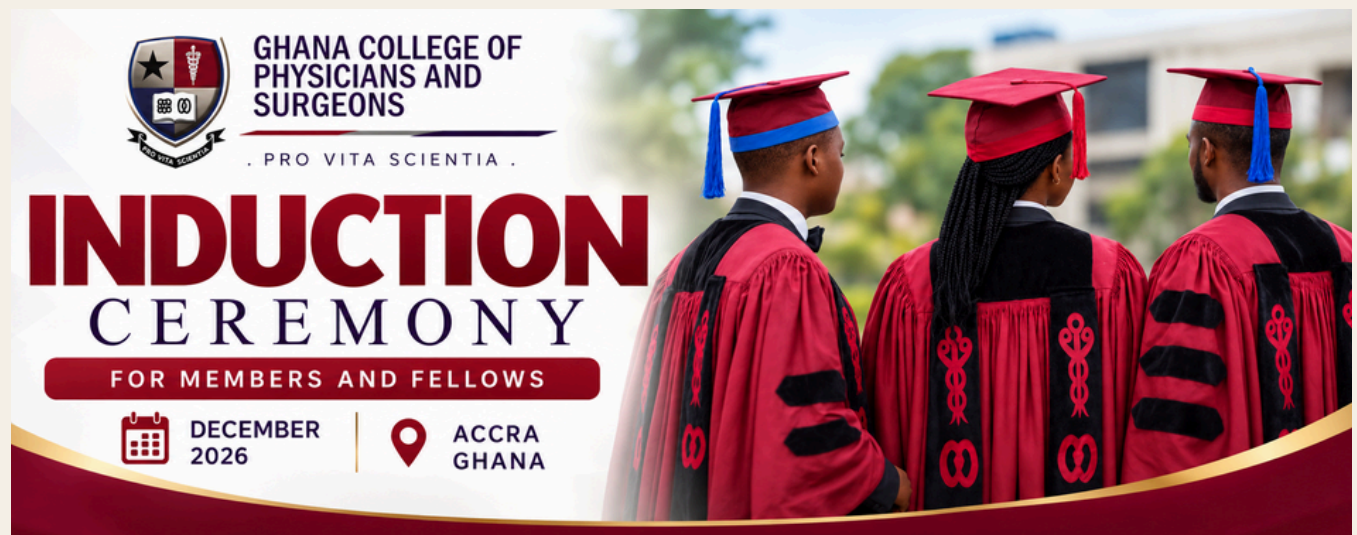
ACSM
AMERICAN COLLEGE OF SPORTS MEDICINE

SPORTS MEDICINE
IN PRACTICE | A Lifespan and Systems Approach

A collaboration between the Department of Sports, Exercise and Rehabilitation Medicine, Faculty of Family Medicine, Ghana College of Physicians and Surgeons (GCPS), American College of Sports Medicine (ACSM) and the Society of Family Physicians of Ghana (SOFPOG).

23 - 29
NOVEMBER 2026

Ghana College of Physicians and Surgeons, Accra



GHANA COLLEGE OF PHYSICIANS AND SURGEONS
PRO VITA SCIENTIA

INDUCTION
CEREMONY
FOR MEMBERS AND FELLOWS

DECEMBER
2026

ACCRA
GHANA

THE SECOND LOOK: POSITIONING FAMILY MEDICINE IN A STRATEGIC POSITION

From General Practice to a Recognized Specialty

Ghana's health system relies heavily on doctors working at the district and primary-care level. These medical officers, drawing on the broad knowledge and skills acquired during medical school, housemanship and medical officer practice, manage a wide range of medical and surgical conditions and provide much of the country's first-contact care. Many eventually enter Family Medicine residency after gaining considerable practical experience, sometimes having already served in leadership positions at district level. In many respects, they have been practising family medicine before receiving the specialist training that formally defines the discipline.

However, the position and value of the Family Physician within Ghana's health system is not always clearly understood. At the primary-care level, many different professionals provide first-contact services, including midwives, physician assistants, internists and family physicians. While this increases access to care, it can also blur the distinctive role of the Family Physician and create unnecessary competition among professional groups. Consequently, the specialty is sometimes perceived as lacking a clear identity.

Family Medicine is, however, distinct in its comprehensive and patient-centred approach. Family Physicians are trained to care for patients regardless of age, sex, disease or organ system while considering the individual within

the context of the family and community. Its strength is not necessarily in knowing everything about every disease, but in understanding patients deeply, coordinating care and addressing health needs across the life course.

There is therefore a need for a deliberate repositioning of the specialty. Family Physicians should not simply compete for the same patients seen by other cadres. Rather, the profession should define its core mandate, strengthen the identity of the "5-Star Doctor" and establish a clear scope of practice that demonstrates the unique contribution Family Medicine can make to Ghana's health system.

Rebuilding the Family Medicine Training Model

A major concern raised is the current structure of Family Medicine training. Although residents spend several years in specialist training, less than a year of the cumulative programme is devoted directly to the principles and practice of Family Medicine, while considerable time is spent rotating through other specialties. This can leave residents with limited opportunity to develop, consolidate and practise the specific skills that define Family Medicine.

The article argues that Family Physicians should take greater responsibility for training future Family Physicians. Rather than relying predominantly on other specialties, residents should spend more time learning directly from experienced Family Physicians in their own practices. This would allow trainees to

THE SECOND LOOK: POSITIONING FAMILY MEDICINE IN A STRATEGIC POSITION

understand the philosophy, tools and practical application of Family Medicine under the supervision of specialists who understand the discipline from within.

The proposed approach is essentially one of apprenticeship and mentorship. The Family Physician trainer becomes mentor, teacher and assessor, identifying individual weaknesses and helping residents progressively strengthen their competencies. Training should therefore prepare residents to function as Family Medicine specialists during residency rather than treating them largely as medical students repeating general rotations.

Assessment should also become more developmental. Examinations should not be viewed simply as pass-or-fail exercises at the end of training. Instead, assessment should identify gaps in knowledge and skills early enough for residents and supervisors to address them. Practical board reviews, continuous feedback and close mentorship can help residents become more confident and competent by the end of training.

Expanding Training Beyond Teaching Hospitals

The current dependence on teaching hospitals and a small number of consultants creates pressure on existing trainers and may limit opportunities for residents. There are, however, many Family Physician specialists across the country who could contribute meaningfully to postgraduate training. The article

proposes a system of clustered training sites linked to Central Teaching Centres. Under such a model, junior residents could spend extended periods, potentially around six months, working with experienced Family Physicians in district facilities. This would expose them to the realities of primary care, community-based practice and the practical responsibilities of Family Physicians.

Such decentralisation would also recognise that not everything relevant to Family Medicine happens in teaching hospitals. Many of the cases and health-system challenges Family Physicians are expected to manage occur at district level. Training residents where these problems are encountered could therefore make their education more relevant and practical.

Defining a Clear Niche for Family Physicians

Family Medicine should not be built around the idea that Family Physicians must do everything simply because they are capable of doing it. Instead, the specialty needs a clearly defined identity and consistent standards of practice across Ghana. The profession should identify areas where Family Physicians can make the greatest impact and develop these areas deliberately. Leadership is one such area. Family Physicians are well positioned to lead healthcare teams and manage health facilities, particularly at the district level. Greater representation of Family Physicians in health-management and leadership positions could give the profession a

THE SECOND LOOK: POSITIONING FAMILY MEDICINE IN A STRATEGIC POSITION

stronger voice in shaping primary healthcare policy and implementation. For this to happen, training should include practical health-management and leadership skills. The proposal of linking Family Medicine training with institutions such as GIMPA to provide recognised training in health management and administration could prepare residents for future leadership roles within the Ghana Health Service and other health institutions.

Clinical Care, Emergency Medicine and Chronic Disease

The curriculum should be redesigned around the actual problems Family Physicians encounter in Ghana. Emergency care is highlighted as a particularly important area. At the primary-care level, the immediate relief and stabilisation of seriously ill patients can determine outcomes. The article therefore considers the current six-week Accident and Emergency rotation inadequate and proposes extending exposure to approximately three to six months.

At the same time, Family Physicians should strengthen their role in chronic disease management, lifestyle medicine, health promotion and disease prevention. Conditions such as hypertension, diabetes and HIV are already managed at multiple levels of the health system, so the opportunity lies in moving beyond routine clinic-based treatment towards sustained, patient-centred, family-centred and community-oriented care. Every patient belongs to a family and lives within a community. Family Physicians can therefore make a distinctive

contribution by helping patients and families take greater responsibility for their own health, particularly in rehabilitation, long-term care and lifestyle modification.

Research, Preventive Care and the Way Forward

Research should become an integral part of Family Medicine training and practice. A structured mentorship model, where residents are grouped under experienced researchers and progressively guided through the research process, could improve research competence and reduce the fear often associated with research. This approach could also strengthen journal clubs and make research an active part of residency rather than simply an academic requirement.

Ultimately, the article calls for Family Medicine in Ghana to focus on three interconnected areas: clinical leadership, clinical care and community care, guided by the principles of the 5-Star Doctor. The specialty has important assets, including a national professional association and a Faculty of Family Medicine within the Ghana College of Physicians and Surgeons. These structures provide a foundation for dialogue, innovation and reform.

The challenge now is to move from discussion to deliberate action. Family Physicians must clearly define their role, strengthen their training, embrace leadership, improve clinical competence, invest in community-oriented care and produce evidence through research.

THE SECOND LOOK: POSITIONING FAMILY MEDICINE IN A STRATEGIC POSITION

Rather than competing simply for patients or positions, the profession should identify the gaps in Ghana's health system and demonstrate how Family Medicine can fill them.

The future of Family Medicine in Ghana will depend on how well the specialty positions itself to meet the changing needs of patients, families, communities and the health system.

The time has come for Family Physicians to take ownership of that future and ensure that the specialty is recognised not only for being comprehensive, but for being indispensable to strong primary healthcare.

“Now is the time. Let's talk about it. Let us save Ghanaian families.”

-Dr (Med) Obed Sarpong Adusei

THE SECOND LOOK:

POSITIONING THE FAMILY MEDICINE SPECIALTY IN A STRATEGIC POSITION

General Practice to Family Medicine Specialty

- People Centred Care
- Comprehensive Across the Lifespan
- Family and Community Focus
- Clinical Leadership and Health Systems
- Stronger Primary Healthcare for a Healthier Ghana

INSIDE NEXT EDITION...

HISTORY OF FAMILY MEDICINE IN GHANA *Part 2*

From humble beginnings to a recognised specialty, Family Medicine in Ghana has grown through vision, dedication and collaboration—shaping the future of healthcare for individuals, families and communities.



SOFPOG SPECIAL INTEREST GROUPS

INVITATION TO JOIN THE AHEAD-WONCA AFRICA HEADACHE SPECIAL INTEREST GROUP (SIG)



Dr. Freda Dodd-Glover
- President, AHEAD



Prof. Bob Mash
- President, WONCA Africa

Why an AHEAD-WONCA Headache SIG?

- Headache disorders affect over 3 billion out of the 7 billion people on earth!
- Headaches are a common presenting complaint in many healthcare settings.
- Many Headache sufferers first report to a primary healthcare provider who are not headache specialists.
- Increased risk of misdiagnosis and mismanagement.

Scan to join the
**AHEAD-WONCA Africa
Headache SIG**



International
Headache Society



JOIN US NOW!

SOFPOG SPECIAL INTEREST GROUPS



SOFPOG

SOCIETY OF FAMILY
PHYSICIANS OF GHANASOFPOG YOUNG DOCTORS
MOVEMENT (SOFPOG YDM)

SPECIAL INTEREST GROUP

Dr (Med) Akosua Opoku-Asare
(Chair)Dr (Med) Mordecai Mawuli Owusu
(Vice Chair)Dr (Med) Adwoa Beecham
(Secretary)

A platform to **inspire, empower** and **develop**
the next generation of Family Medicine leaders in Ghana.

Bringing together medical students, house officers, medical officers,
residents and early-career family physicians.



OUR FOCUS AREAS

Mentorship
and career
guidanceLeadership
development
and skills buildingResearch
opportunities
and CPDInnovation,
advocacy and
community serviceNetworking
and collaboration
(national and
international)

JOIN THE MOVEMENT

Be part of a vibrant network of engaged, innovative and
future-ready doctors shaping the future of Family Medicine.



SOFPOG SPECIAL INTEREST GROUPS



SOFPOG
SOCIETY OF FAMILY
PHYSICIANS OF GHANA

ANNOUNCING THE
**WOMEN IN FAMILY
MEDICINE**
SPECIAL INTEREST GROUP (WiFM)

WiFM is a SOFPOG network created to empower and inspire women family physicians to be **leaders, innovators, educators and advocates** in Family Medicine.

*Empower
Connect
Support
Thrive*



Dr (Med) Andaratu Wuni
Chair



Dr (Med) Abena Kaare Aduful
Secretary

OUR FOCUS AREAS



Leadership
development



Mentorship
and networking



Research
and publication
support



Advocacy for
gender equity and
physician wellbeing



Career development
and continuous
professional
development



JOIN WiFM TODAY!

Connect, learn, lead and inspire
women in Family Medicine.



SOFPOG SPECIAL INTEREST GROUPS



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SOCIETY OF FAMILY
PHYSICIANS OF GHANA

ANNOUNCING THE **ADOLESCENT HEALTH AND WELL BEING** SPECIAL INTEREST GROUP (AHW-SIG)

The Adolescent Health and Well Being Special Interest Group (AHW-SIG) is a forum within SOFPOG dedicated to advancing the health, development and well-being of adolescents through advocacy, education, research and collaborative action.



Dr (Med) Betty Bankah

Chair



Dr (Med) Jerry K.K. Eshun

Vice Chair



Dr (Med) Fauzia Amidu

Secretary

OUR FOCUS AREAS



Promote
adolescent-friendly
health services



Build capacity
through education
and training



Advocate for
adolescent health
policies and rights



Support research
and evidence-based
practice



Collaborate with
partners to improve
adolescent well-being



JOIN US!



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