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Peace – Work – Fatherland

SOUTH WEST REGION

LEBIALEM DIVISION

BANGEM COUNCIL

SURVEY REPORT

MECHANISM OF CITIZEN CONTROL OF THE PUBLIC ACTION IN THE COUNCIL OF BANGEM



May 2018

Technical and financial support of the National Community-Driven Development Program (NCDDP) in collaboration with the National Institute of Statistics (INS)

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LIST OF ACRONYMS

AJESH	AJEMALIBU SELF HELP
CDP	Communal Development Plan
CCPA	Citizen's Control of Public Actions
CSO	Civil Society Organisation
DMO	District Medical Officer
GTTC	Government Teachers Training College
HF	Health Facility
HH	Household
IHC	Integrated Health Centre
LSO	Local Support Organisation
MINEDUB	Ministry of Basic Education
MINEE	Ministry of water and energy
MINEFOP	Ministry of Employment and Professional Training
MINESEC	Ministry of Secondary Education
NIS	National Institute of Statistics
PHC	Presbyterian Health Centre
PNDP	National Community Driven Development Programme
PTA	Parents, Teachers Association
SBH	School Management Board
WMC	Water Management Committee

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FOREWORD

The Bangem council with financial and technical support from the National Community-Driven Development Programme (PNDP), decided to embark on a laudable initiative to carry out a Citizen's Control of Public Actions (CCPA), otherwise also known as the "Scorecard" in some public institutions notably the hydraulic, health and education sectors and also the council services as from mid 2017.

A Local Support Organisation (LSO) known as Ajemalebu Self Help (AJESH) was selected to carry out the survey and do the reporting while the National Institute of Statistics (NIS) provided the sampling methodology and did the data analysis.

Despite the unfriendly socio-political situation that prevailed in the municipality at the time of carrying out the survey, the data collection exercise was considered successful.

Results obtained are very useful and will be exploited by the council and the other public sectors involved to improve on the services rendered to the public in the municipality.

Our objectives of promoting good governance and sustainable local development through this tool were largely met.

We are confident that equipped with the results obtained, the Bangem council will steer the municipality towards achieving its development goal while ensuring that communities benefit more from the services of the sectors evaluated.

We hope to replicate this exercise in the near future including other decentralised sectors that were not reached by the project.

I like to thank PNDP, NIS, AJESH and other stakeholders that contributed to the success of this project and wish all good reading.

29 OCT 2018



The Mayor,

Ekumt
THE MAYOR
BANGEM COUNCIL
Bangem Council.
Ekumt

EXECUTIVE SUMMARY

This report goes on to reveal the results of the investigation of citizens' insight of public action in the Health, Education, Water and Council Services provided within the Bangem municipality. **It is not just centred on the results of the survey in the different sectors but also reveals background information of the municipality, the legal framework of decentralisation and local development in relation to the four sectors, how local development is being promoted within the municipality, and how the whole process of CCAP was implemented.** The Citizen's Control of Public Actions (CCPA) also known as the Scorecard or Citizen's Report Card stands out as one of the tools to improve the services rendered to the population within Bangem council municipality as well as promote good governance and increase participation of the common man in their wellbeing and that of their community. The objective for the implementation of the citizens' role in the Council through the SCORECARD was a means of getting various information to understand the populations' perceptions about their level of satisfaction with regard to public services delivered in the targeted sectors and the monitoring mechanisms both at Council and PNDP's levels, on which the citizen engagement is a mechanism to rate public achievements. More specifically, the CCPA aimed at; Identifying the stakes and actors (Administration and users), Collect data and disseminate the results in 160 councils in collaboration with 19 Civil Society Organizations (CSO), Strengthen the capacity of 160 councils to take advantage of the knowledge acquired and adopt changes that will be suggested at the end of the activity. And Put in place a concertation framework that will regroup several institutional actors at the council, Divisional, Regional and National levels in order to promote the institutionalization of CCPA.

The methodology adopted for the realisation of this study included: Negotiate the engagement with stakeholders on the operation, Selection and training of enumerators and provision of data collection tools enumerators, Collect, process and analyze data, produce reports, reading of reports and updating of reports, Restitution of reports and plan action and Dissemination of information and negotiation of the changes within Bangem council.

MAIN RECOMMENDATIONS

- **Water**

- Rehabilitation and maintenance of existing water supply systems
- water management committees should be reinforced where existing and created where inexistent.
- Unusable or damaged water sources should be repaired and a management committee in charge of them put in place
- Improve on the quality of water consumed by the population most especially because that way man's health is better managed.
- The number of water sources within the community should be increased to suffice for the existing population.

- **Health**

- Health units need to be supplied with enough materials and equipment's in order to better address the health issues of the people
- The number of hospitalisation rooms and beds should be increased
- The health units should be provided with drugs daily or monthly as the need arises for its effectiveness and efficiency.
- construction of newly created health centres
- Transfer of health practitioners in the already existing ones
- Capacity enhancement of personnel
- increase sensitisation on hygiene and sanitation

- **Education**

- The number of teachers at the primary and secondary levels should be increased to match up with the schooling population

- The supply of teaching equipment's and materials should be increased regularly especially at the primary levels
- More Class rooms and other infrastructures (e.g. school toilets and pumps) should be constructed for the wellbeing of pupil and the students which would help facilitate the process of learning
- The number of school manual produced and distributed should be increased in number because it is important for the students to have the school guide
- There is need for the reconsideration of the PTA levy paid for primary education as the majority still considers it high
- intensify regular follow-up of teacher's attendance in class
- Appointment or transfer of more teachers
- For future survey, the questionnaires should be elaborated to clearly distinct columns for the type of existing structures that is; private or government property, temporal or permanent structure when it comes to schools.

- **Council Services**

- Increased populations involvement in decision making
- There should be increase in information dissemination of the council actions carried within the municipality to the population;
- There is need for improved Transparency and accountability on the management approaches utilised in the realisation of council activities within the municipality
- Increase proximity of the council with the community
- Improved capacity building of council staff
- Improved communication of council budgets
- Increase in council partnership
- Greater visibility of council annual reports

- improve council communication strategy e.g. council newsletters

The results of the survey for the four sectors stated above are illuminated under five grand headings that is; Availability and utilisation of the services, The Cost and quality of the services rendered, Appreciation of services offered by the population, The reasons for dissatisfaction and; the expectations/prospects of the population in the various sectors.

GENERAL INTRODUCTION

The National Community-driven Development Program (PNDP) is a tool designed in 2004 by the Government with the support of its technical and financial partners with a view to improving on the living conditions of the populations in rural areas on the one hand, and to boosting the decentralization process, on the other one

This policy which is spearheaded by the Program results in a strong involvement of the grass-roots populations as regards the execution of all of its activities. The implementation of the citizens' role in a Council therefore leads to the soaring of various information, co-ordination and monitoring mechanisms both at Council's and PNDP's levels, on which the citizen engagement relies.

In the course of the second phase of the Program, a citizen control mechanism had been experimented in ten pilot councils via the Scorecard software. It is worth noting that such a mechanism dwelled, on the one hand, on the conduct of a populations' perception survey in connection with the council's public assets and services delivery, and on the other hand, on the spread of the results derived from such an operation in a bid to obtain significant changes in terms of quality as concerns public assets and services delivered by the council.

Such an operation is intended to be scaled up within the Program's third phase, dubbed consolidation phase whose development objective revolves around improving on local public finance management and the management of public investment budgets by councils as well as participatory development processes with a view to ensuring both the supply of quality, sustainable infrastructures and socio-economic services. The framework of its results therefore constitutes a must, inasmuch as one of its indicators is in correlation with the « Number of councils that have already implemented an operational citizen control and information access mechanism ».

The investigation of citizen control of public action was used as the tool for the implementation of the (SCORECARD) within the Bangem municipality as a means to get the populations opinion about the services rendered to them especially with questions related to the availability, the quantity, the cost and the level of satisfaction. The CCPA (Citizen's Control of Public Actions) was defined by a number of activities that commenced with; the launching of the program which was done at the council level with the mayor and other members of the community. After the launching, training of the project coordinators by PNDP was done, the trained coordinators in return

trained the surveyors. After the training of the surveyors, the project coordinator of AJESH, the field supervisor /surveyors then went on to organize a three days training of data collectors/enumerators with the use of a training manual, technical documents and questionnaires that were to be administered.

After the training of the data collectors, the questionnaires were administered in the different selected households following the technical documents that identified the different localities within the council area. The process of administering the questionnaires was known as the data collection phase. After the data collection, the data collected were analyzed by the National Institute of Statistics.

The above mention activities kicked off from the 30th of August 2017

In brief, the implementation of the citizens' role in a Council through the implementation of SCORECARD stands as the means of getting the population's appraisal of the hydraulic services, health services and education services provided as well as the indicators of the services provided by the council. This citizen reporting card is a tool for the implementation of the Growth at the council level and monitoring of the different indicators/sectors.

The observation units put in place to assess achievements in the targeted sectors were made up of households. Households were selected randomly with the help of the National Institute of Statistics (NIS) based on their ECAM numbering of the houses in the area. To enable the exercise to be very credible random samples were selected using a computerized system

It was therefore within the exercise of the SCORECARD that AJESH was able to obtain the results highlighted within this report with the full participation of the randomly selected observation units that is households within the Bangem municipality as a means to contribute to improvements in the water, health, education and council services rendered.

CHAPTER 1:

LEGISLATIVE AND REGULATORY FRAMEWORK FOR DECENTRALISATION AND LOCAL DEVELOPMENT IN CAMEROON.

1.1 LEGISLATIVE AND REGULATORY FRAMEWORK FOR DECENTRALISATION

Decentralization is a way to organize and manage public affairs, whereby the State transfers special powers and allocates appropriate means to Regional and Local Authorities. It can be done at the territorial or purely economic level. The government of Cameroon embarked on decentralisation with the objective of bringing the government closer to the people and thereby involve them more actively in the process of development.

The Constitution of 2nd June 1972 actually offered only limited prospects for the strengthening of decentralization while the Constitution of 18th January 1996 came in to give a new impetus and a more ambitious content to decentralization. This fundamental change therefore paved the way for a genuine strengthening of the decentralization process.

Under the provisions of the laws of 2004, there is devolution of powers accompanied by the transfer of means, financial, material and human, to local entities that are made of 10 regions and 339 councils.

The three main laws of 2004, however, include:

- Law No. 2004/17 of 22 July 2004 on the Orientation of Decentralization;
- Law No. 2004/18 of 22 July 2004 to fix the Rule Applicable to Councils;
- Law No. 2004/19 of 22 July 2004 to fix the Rules Applicable to Regions.

The President of the Republic can by decree create or re-delimit the geographical boundaries of a local authority as well as rename or decide on the temporary regrouping of local authorities. Moreover, a common decentralization fund is created (article 23(1), Orientation Law). For the steering and evaluation of the decentralization process there is a national decentralization council and an inter-Ministerial Committee of local services (article 79, Orientation law). These

new laws (that essentially focus on local development and governance) constitute the basic framework of rules on decentralization in Cameroon.

Prior to July 2004, local entities were endowed with largely social functions like the celebration of marriages and delivery of birth and death certificates (1974 law relating to councils). In the transfer of powers for local development under the 2004 laws, local authorities are assigned the task of promoting economic, social, health, educational, cultural and sports development (article 4(1), Law of Orientation). Powers that correspond to the promotion of development in these sectors are devolved to local authorities under conditions laid down by law (articles 18–24 of Rules applicable to Regions; articles 15–22 of Rules applicable to Councils). The development opportunities implied in the execution of these tasks are new to local authorities in Cameroon. Here, the local authority can only act as catalyst to local development by at least strengthening municipal infrastructure (especially social infrastructure), carrying out a broad range of activities under the heading of ‘governance’ (institutional capacity building of local government structures as well as civil society organizations and especially the interface between them) and an endowment with the capacity to lead local development for wealth creation. This way, devolved powers will greatly contribute in serving development. The decentralization laws of 2004 further set the pattern of the exercise of power by local authorities which represents the framework for governance and democratic practice. Local authorities are endowed with legal personality and administrative autonomy by law. These structures are administered by entities whose organs are elected through direct universal suffrage. The activities of these elected local entities are overseen by the representative of the supervisory authority, that is, the Governor and the Senior Divisional Officer at the level of the region and the council respectively. (articles 46–57 of the Orientation Law). Local officials are not only accountable to the electorate but to the Chief Executive of the state too. The latter can dismiss an elected official for embezzlement (article 95(1) Orientation law).

Each local authority has two organs, one deliberative and the other executive. To increase dialogue over municipal matters, there are four statutory meetings (unlike two under the 1974 Law). Local authorities are empowered to undertake decentralized cooperation and form unions of councils (article 131 Orientation law). On democratic practice within organs of local authorities, a quorum of two-thirds of the membership is required for a municipal council meeting to be held. Decisions are taken by simple majority vote and as a general rule council sessions are open to the public.

Extracts of proceedings of council sessions must be communicated to the public eight days after the council session (art 40(1)). The practice of having local governments that are elected directly by the population actively involves them in the choice of their local leaders who in turn are accountable or answerable to them. It is therefore evident that laws that define such a pattern of the exercise of power at local authority level enhance democratic practice and good governance. The attainment of this objective through laws that devolve such powers determines the process of decentralization and contingent on the level of contextual constraints and the dynamism of its stakeholders.

In 2010 the first transfer of competence and resources to councils was done. On the 31st of December 2015, councils were given full power to carry out 60 out of the 63 functions they have and the prime minister's text of 16 December 2016 granted them the other 3. On the 24 of February 2018, the prime minister signed a text which makes effective transfer of financial resources to local councils across the country- a ground- breaking decision for an effective decentralization process.

The decentralization of government was thus enshrined in Cameroon's constitution since 1996. The adoption of decentralization laws (2004), the establishment of national coordinating bodies (2008) and the increased formal transfer of areas of responsibility to the municipalities since 2010 have been the most important steps.

According to Cheka, 2007 in his publication titled "Processes of decentralization in Cameroon, although the legislative framework is now firmly in place, implementation still faces diverse challenges. The administration continues to be extremely centralized, and the transfer of sector-specific responsibility to the municipalities is making only slow progress; they have minimal autonomy in planning and financial matters. The municipalities often lack sufficient funds, and the actors at decentralized level are inadequately prepared for their tasks. Many decisions thus remain at central level and priorities are set without consulting the municipalities. The people have poor access to basic public services, such as health care, water supply and basic education. Their opportunities to influence locally relevant decision-making processes are very limited.

To promote further the process of decentralisation in Cameroon, the president of the republic on the 2nd of March 2018, signed a decree creating the Ministry of Decentralisation and Local Development

(MINDEVEL). Its structures have been put in place and it is expected that in the near future, the process of decentralisation in Cameroon would have been greatly improved upon.

1.2 PROMOTION OF LOCAL DEVELOPMENT

In Cameroon, municipal councils are legally responsible for promoting development. Decentralisation in its current form is based notably on the Constitution embodied in Law No. 96/06 of 18 January 1996. On the strength of the provisions of article 55 of the said constitution, ‘decentralised local entities of the Republic shall be regions and councils which shall be legal entities recognised by public law. In the transfer of powers for local development under the 2004 laws, local authorities are assigned the task of promoting economic, social, health, educational, cultural and sports development (article 4(1), Law of Orientation).

The municipality, which is the basic level of decentralization, gradually has administrative and financial autonomy in managing local affairs. It is responsible in particular for promoting development in the economic, social, health, educational, cultural and sports fields by drawing up, in a participatory way, its economic, social and cultural development plan (PDESC). In order to put decentralization into practice, local governments and their development partners are looking for high-quality tools and approaches through which local actors can play their roles to the full. Planning is an important activity for local governments as it creates a reference framework that provides a starting point for the promotion of local development and helps to ensure that municipal actors are working in a consistent and harmonious way.

In line with the law, the Government of Cameroon with the assistance of its technical and financial partners put in place PNDP in a bid to improve on the living conditions of the population in the rural areas. And so PNDP is in its third phase. In the course of the first phase, PNDP deployed its actions in 155 councils of 6 regions (Adamawa, Centre, West, North, South and Far North) of the country. With the second phase, the Program henceforth covers all of Cameroon’s 10 regions and envisages deploying its activities in 329 councils including those of the south west region. It is in this context that PNDP is motivated to support the Bangem Council financially and technically in the elaboration of a CDP for her long and short term development initiatives. PNDP has initiated collaboration with the Bangem Rural Council. The Bangem council on the other hand, in a bit to attain its vision to have **“A Municipality Endowed with a Diversified and Vibrant Economy, living in Harmony with Nature where Human Dignity is Promoted”** tried to involve all

stakeholders and with the dynamic and visionary leadership of the mayor in the rendering of council services. In trying to see this vision realised some challenges were registered.

Notwithstanding, in the promotion of local development so far, 10 integrated health units, 1 Presbyterian Annex hospital, 1 district hospital and 2 cottage pharmacies were established in the council area when it comes to the health domain even though they are partially equipped with all necessary equipment's needed for the proper running, they at least handle health related issues as delivery and cases of malaria. In the educational sector, the government has opened many primary and secondary schools in Bangem council area, thereby improving the rate of school attendance in the area. In brief, there are over thirty-four primary schools amongst which include (government, mission and private), four nurseries, four secondary and two high schools and a Teachers Training College found in the municipality. In fact, most villages now have at least a primary school at walk able distance. Concerning water, there is pipe-borne water supply in the municipality which has reduced the population's dependence on streams, rivers, springs and rainfall for water supply.

1.3 BRIEF PRESENTATION OF THE COUNCIL BANGEM

Bangem council is found in Kupe Manengouba Division of the South West Region of Cameroon. It is about 94 km from the town of Kumba and has an altitude of about 400m above sea level, with a surface area of 1500 square km. The Council shares common boundaries to the North and North West with Nguti Sub division, to the South with Tombel Sub division, to the East with Melong, and to the west with Konye Sub Division. Topographically, the land is generally flat and raised 400m above sea level with gentle and steep hills dotted within the thick humid forest in the municipality. It is host to several forest reserves including part of the Bakossi national park, Bayang Mbo and the proposed Muanenguba integral ecological reserve.

1.3.1 HISTORICAL AND ADMINISTRATIVE ORGANISATION OF THE COUNCIL

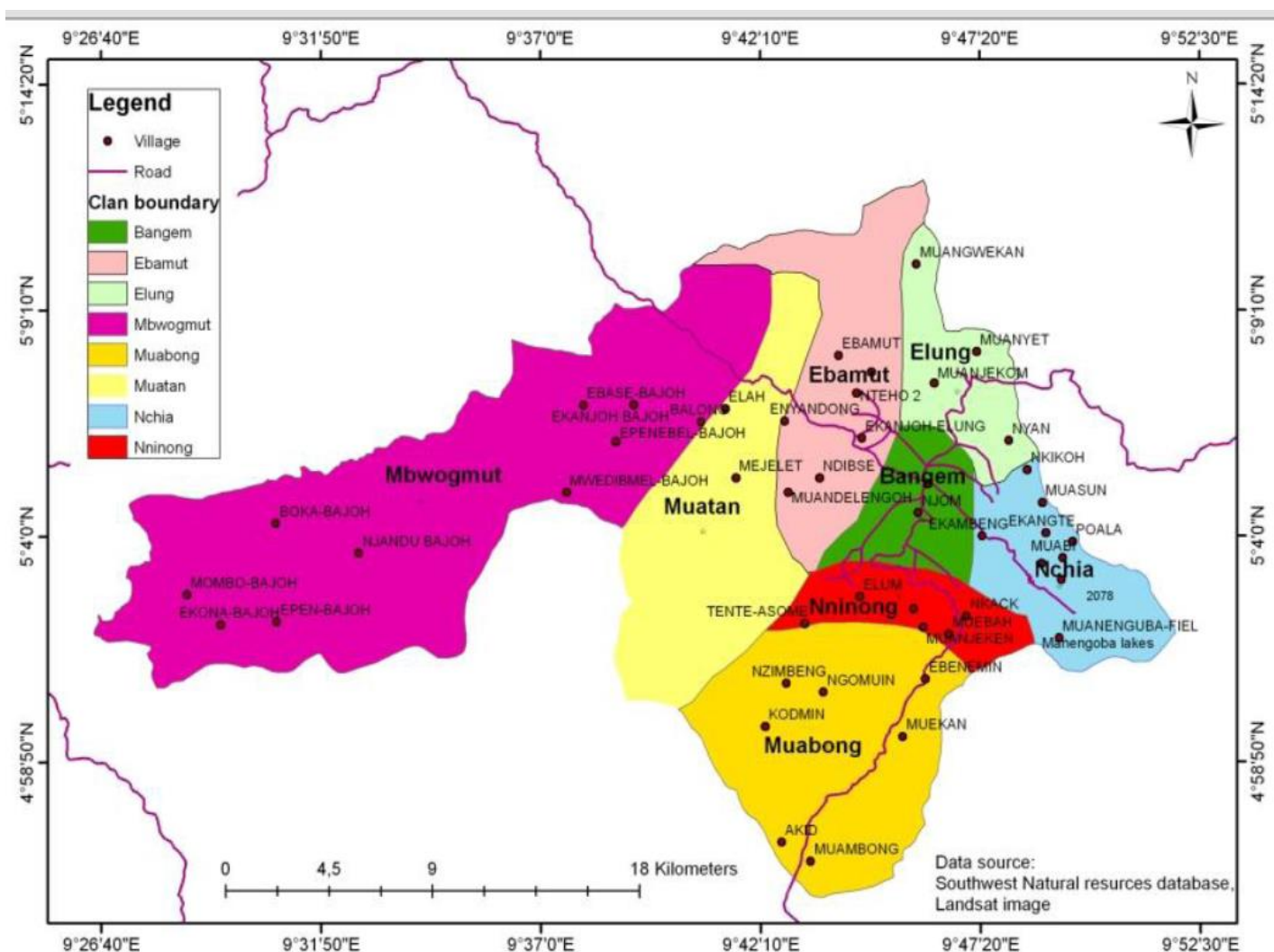
Bangem council area consists of sixty-three (63) villages belonging to eight clans: the Bangem, Nninong, Mbwogmut, Muambong, Nhia, Elung, Ebamut and Muetan clans. The council area is inhabited predominantly by the Bakossi tribe, all of whom share the same ancestor as descendants of Ngoe who was married to Sumediang and they had seven sons. They lived in Mwekan, about 10Km from Bangem in the western part of the Muanenguba Mountain.

Bangem - formerly part of the Kumba Eastern Area Federation (Kumba North) - became a Sub-Divisional Headquarter in the 1953, incorporating all of Bakossi (in the western aspects of the Kupe and Muanenguba mountains. In 1968 Bangem was split into Bangem (Northern Bakossi) and Tombel (Southern Bakossi) (Ejedepang-Koge, 1986) and subsequently achieved Divisional Headquarter (Kupe Muanenguba) status in the 1993. In 1963, the Bangem District was created covering the land occupied by the Bakossi people. Bangem District was split into Northern and Southern districts in 1968, and, in 1977, the Bakossi Council was also split into Northern and Southern councils.

1.3.2 ECONOMIC ASPECTS OF THE COUNCIL

The population of Bangem Council area consists predominantly of farmers. Over 80% of the population is involved in agriculture which therefore constitutes the basis of the local economy. The rest (20%) of the population is involved in other sectors including administration, teaching, petit trading, transportation and forest exploitation. Livestock is reared as a part time activity.

The scarcity of electricity has rendered it difficult for any processing activities to develop thus agriculture is limited to farming, harvesting and sale of farm produce in the primary state. Non-farm actors include civil servants, teachers, medical personnel, petit traders and motor cycle riders. The youth unemployment rate is extremely high as many have rejected farm work and possess no marketable skill needed for any gainful employment.



Map 1: Map of Bangem

1.3.3 POPULATION DISTRIBUTION:

Bangem Council area has more than 25% of the total population of Kupe Mueneguba Division. Since the terrain is undulating and highly inaccessible, heavily concentrated population areas are in the hinterlands. The Mbwogmut community comprising of 0 villages is the most thickly populated, followed by the Nninong, Nhia, Elung and Muambong clans. The Bangem clan, Ebamut and Muatan clans are relatively sparsely populated.

Table 1: Distribution of population in Bangem

TOTAL POPULATION OF BANGEM MUNICIPALITY				
Clan Village	Total	men	women	Children >16years
Bangem	2023	1002	1021	977
Nninong	3369	1494	1875	1158
Muambong	2693	1360	1547	1107
Nhia	1576	773	803	725
Elung	2620	1230	1390	1112
Ebamut	1132	589	521	332
Mbwogmut	4054	1995	2050	1697
Muatan	2317	1051	1101	888
Total	19784	9494	10308	7996

1.3.4 DESCRIPTION OF BIOPHYSICAL ENVIRONMENT

I. Climate:

The climate of the Bangem Council area is equatorial, with heavy rainfall fairly well distributed throughout the year and giving rise to forest vegetation and fertile soils. The dry season runs from the month of November to March. During this period, the weather is bright with little rainfall, cold nights and hot days. The rainy season, on the other hand, starts gradually from April and heaviest from August till late October. It has an average relative humidity of 80% and average annual temperature of 15-25 degrees centigrade, with dry season from November to February, light rains from March till May, and rainy season from June till October.

Rainfall: Generally average rainfall varies between 515mm to 15mm per month around Bangem, peaking in August and sparingly in February.

II. Soils:

Soil consists of a comparatively thin layer of materials that covers the underlying rock, on which plants grow. Soil depth ranges from a few centimeters to over a meter. The Bangem Council area is dominated by volcanic soils. The northern area is composed of acidic and volcanic soils covering areas like Ebamut, Nteho and Enyando. The soil Nkikoh, Muabi, Nyan Poala, and Ekangte have been formed from the recent local deposits of the volcanic cones of Muanenguba Mountain. Mbat and Ekanben villages, which are also part of the zone (Nhia Clan), have volcanic and basic soils respectively.

Part of Nninong Clan (Ebonemin Mueba and Nkack), and from Muambong clan, have volcanic soils. South West in the Muatan clan i.e. central Assue (Muetanaku and Ngomin) the soil is acidic. While the Bangem clan have basic soil with some element of clay in it as the distribution of soil types closely approximates the distribution of rock types since soils are developed from the decomposition of rocks. Above all, the nature of the parent material will have a major effect on the properties of the young soils and may exert an influence on even the oldest soils.

Generally, the soils across the Bangem municipality are volcanic, hydroorphic and ferralitic. This makes it possible for a wide range of plants to be cultivated. Additional organic and inorganic fertilizers are imperative for high yields. Most soils in the council are naturally rich. The soils on the slopes of Mounts Muanenguba are very fertile volcanic soils, which are suitable for the cultivation of a wide range of both cash and food crops. In some places, they are interrupted with sandy, clay, loam and sedimentary soils which are also very good for crop production.

III. Relief:

The Bangem municipality stands out as an area of irregular relief configuration of highlands and lowlands. Plains, deeply grooved valleys and caves, which give a distinct relief feature of the area, interrupt the highlands. There are areas as high as 2,396 meters around Mount Manengouba. The mountain is of volcanic origin. In fact, it is an extinct volcano. The altitude ranges from 200 to 2,396 meters above sea level. The area has an outstanding mountain, namely, Mount (2,396

meters). The slopes of these mountains are made up of mainly fertile volcanic soils, which are good for the cultivation of a wide range of crops, and sustain some high dense tropical forest rich in both flora and fauna. Generally, the council area land is of low gradient, punctuated with a few ridges and hills, whose valleys had been deepened by run-off. The council area drained by a few rivers, with River Mungo being the biggest and longest. There are a number of crater lakes, including the Manengouba twin lakes which are a very significant tourist attraction.

IV. Hydrography

The hydrography is made of rivers, streams, springs and twin lakes. In the hinterlands, these springs and streams which take on different names at different locations serve as vital sources for drinking water. As far as rivers are concerned, the Manengouba region has about five (5) major rivers with smaller streams emptying their water to them. In the southwestern part of this region, river Chide and river chunge are most prominent. Tributaries to river chide include river muamekum, (Muambong) toe (Ngomin) and chunge (nkincunge). River chide then moves southwest ward in addition to other small rivers in Tombel sub division to meet river mungo. River Dibomba stand southwards as the major river, with rivers like Moukoulume, Njabeu, Nedieu Ebong, Mberebe, Eyene and Djoube as tributaries. River Dibomba continues its movement southward to river Wouri. River Mbe with its tributary Muasum alongside river Mbwe appear to be prominent heading to the cross river in Manyu Division and Nigeria. Eastwards, river Adibengoh, Ntisan and Nye empty their waters into rivers Nkam. Due to the low altitude around Mboawasum area, this area has portions, which are swampy. Other swampy areas can be found around Mbourouku and Melong; meanwhile there is a pond at Muanyet.

V. Flora and vegetation:

Manengouba region is in the humid tropics, which has tropical rainforest vegetation. But the altitudinal modifications have given rise to dominant grassland vegetation and some patches of forest. The vegetation of this region is less varied as we should expect in a region, which has one distinct climate with alternative rainy and dry season. The region has a transition from equatorial rainforest at its borders, to sub montane and montane forest, shrubs and grassland. It has one of the best-developed sub montane forests in West Africa and it is rich in montane endemics of guinea Congolian affinity. The region is forested on the southern slopes

VI. Fauna:

According to Ejedepang Koge (1986) the Manengouba region was the original and initial dense settlement place of all the Bakossi people and their relatives. Hence in order to survive, both the forest and the animals were over used. In this light, most of the large forest mammals have disappeared like the Elephants, Lions, Buffaloes, Gorillas etc. At the moment, what are mostly found are the herbivores and rodents like Deer, Hare, Grass cutter, Porcupine etc.

The birds in this region are similar to those of the Cameroon Mountain but there exists a scarcity of very large birds like Eagles, Vultures etc. Some species observed in this zone include the stonechat, scanty francolin, African harrier hawk, pipit's species, yellow bishop and red-eyed puff back shrike.

The aquatic community is not well developed here. The female lake has some Tilapia in it. There are various species of amphibians; some of which are locally consumed. Three species of amphibians are endemic to this region. They include cardioglossa, trafesciata leplodactylon, erythrogaster and phynodon species. The absence of large fish in this region is probably based on the rough topography of its river regimes. This area also accommodates chameleon, snakes and other reptiles. There is a good population of insects including butterflies, millipedes, beetles etc. some butterfly species include byclus euphidra and papilo.

VII. Mineral resources:

As for this moment Minerals such as gold, is yet to be discovered. The municipality has gravels, sand, harsh which could be used for road maintenance and construction work

VIII. Protected area:

There are a good number of protected areas in the municipality. These includes the Bakossi National Park 29,320 ha, Mt. Manengouba (Proposed Integral Ecological Reserve). The climate of the Bangem Council area is equatorial, with heavy rainfall fairly well distributed throughout the year and giving rise to forest vegetation and fertile soil (dominated by volcanic, soils).

In conclusion, the Bangem municipality stands out as an area of irregular relief configuration of highlands and lowlands and is made of rivers, streams, springs and twin lakes.

CHAPTER 2:

METHODOLOGICAL SYNTHESIS OF THE SURVEY ON CITIZEN CONTROL OF PUBLIC ACTIONS IN THE COUNCIL OF BANGEM

2.1 CONTEXT OF THE STUDY

The National Community-Driven Development Program (PNDP) is a tool designed in 2004 by the Government with the support of its technical and financial partners with a view to improving on the living conditions of the populations in rural areas on the one hand, and to boost the decentralization process, on the other hand.

The implementation of the citizens' role in a Council through the SCORECARD stands as the means of getting various information, co-ordination and monitoring mechanisms both at Council's and PNDP's levels, on which the citizen engagement relies

In the course of the second phase of the Program, and specifically in 2011, a citizen control mechanism was experimented in ten pilot councils via the Scorecard approach. It is worth noting that such a mechanism dwelled, on one hand, on the conduct of a populations' perception survey in connection with the council's public assets and services delivered, and on the other hand, on the dissemination of the results derived from such an operation in a bid to obtain significant changes in terms of quality as concerns public assets and services delivered by the council.

Such an operation was intended to be scaled up within the Program's third phase, dubbed consolidation phase whose development objective revolves around improving on local public finance management as well as participatory development processes with a view to ensuring both the supply of quality, sustainable infrastructures and socio-economic services. The framework of its results therefore constitutes indicators is in correlation with the « Number of councils that have already implemented an operational citizen control and information access mechanism ».

As a result, the Program undertakes to set up a citizen mechanism aimed at controlling public action within 160 councils nationwide that should be considered as the target of the above-mentioned indicator. Through the present process, the Program not only intends to consolidate the

mainstreaming of the populations' aspirations into its achievements, but also those emanating from other development actors/stakeholders involved in the council's environment.

Thus, a populations' perception survey was conducted based on the quality of public services delivered within the council environment, especially in the hydraulic, health and education sectors. The said survey was equally intended to dwell on services delivered by the council.

Of the 160 councils selected for the project at the national level, 12 are in the South West Region. Based on this, AJESH was selected by PNDP as one of the 2 consulting institutions in the South West Region of Cameroon to conduct a populations' perception survey on the quality of public services delivered within the council environment, especially in the hydraulic, health and education sectors as mentioned above. AJESH effectively implemented the project in zone 19 with 5 council areas namely: Mamfe, Bangem, Nguti, Alou and Menji instead of 6 because Eyumojock was left out. But this report is mainly that for Bangem council area.

2.2- OBJECTIVE AND METHODOLOGY OF CCPA (Citizen's Control of Public Actions)

2.2.1 Objective

The objective for the implementation of the citizens' role in the Council through the SCORECARD was a means of getting various information to understand the populations' perceptions about their level of satisfaction with regard to public services delivered in the targeted sectors and the monitoring mechanisms both at Council and PNDP's levels, on which the citizen engagement is a mechanism to rate public achievements. Thus, a populations' perception survey was conducted to shed light on the quality of public services delivered within the council environment, especially in the hydraulic, health and education sectors. The said survey was equally intended to dwell on the indicators of services delivered by the council and those emanating from other development actors/stakeholders involved in the council's environment in view to make known their problems. The survey also specifically aimed at;

- Identifying the stakes and actors (administration and users) with Bangem municipality
- Collect data and disseminate the results in the council in collaboration AJESH
- Strengthen the capacity of Bangem council from knowledge acquired from the data collection results

- Adopt changes that will be suggested at the end of the activity for the council area
- Put in place a concertation framework that will regroup several institutional actors at the council, Divisional, Regional and National levels in order to promote the institutionalization of CCPA

2.2.2 Methodology of the CCAP

The scorecard project for zone 19 started with the participation of AJESH at the regional launching ceremony that took place at Holiday Inn Hotel in Limbe on the 30th of August 2017.

The methodology adopted for the realisation of this study included:

- Negotiate the engagement with stakeholders on the operation,
- Selection and training of enumerators and provision of data collection tools
- Collect, process and analyse data, Produce reports,
- Reading of reports and updating of reports,
- Restitution of reports and plan action and
- Dissemination of information and negotiation of the changes within Bangem council

2.3 – METHODOLOGY FOR DRAWING OF SAMPLES AND COLLECTION OF DATA

2.3.1- Sampling

I. Field of the Survey and Targeted Population

The survey was carried out in the Bangem municipality through observation units that is households which were selected randomly based on their ECAM numbering of the houses in the area with the help of the National Institute of Statistics (NIS). The survey was carried out within the municipality in order to assess the populations view about the services rendered by the health, water, education and council sectors; as well as their role /involvement in the decision making. A household within this context, refers to one person or a set of persons with or without family links, who live together under the same roof (house, compound, etc.) and who generally share their meal

together, put part or whole of their incomes in common in order to meet their needs. They recognize the authority of one person amongst them who is referred to as the household's head.

II. Survey Method

The technical aspects for the survey included the selection of households for data collection on the basis of EC_ECAM, the analysis of the data and production of tables was done by the National Institute of Statistics (NIS).

III. Sample Size

Initially 320 questionnaires were to be administered but wasn't realised because one of the technical documents for one locality was missing and so, the data for that missing locality couldn't be collected which therefore reduced the number of questionnaires which were programmed to be sampled within Bangem municipality. So with the availability of over 18 technical documents instead 19, **299** households were sampled.

2.3.2 Data Collection

I. Data Collection Tools

The data collection was done mainly with the administering of questionnaires that were partitioned in five sectors that is background information, information on water, on health, on education and on services rendered by the council. These questionnaires were accompanied with technical documents that identified the different localities within the municipality and cartographic maps that indicated the location of the randomly selected household, list of selected households and most importantly, the data collection manual.

II. Training of Agents for the Collection

The training of data collectors was done for three days notably from the 16th to the 18th of October 2017 at the Divisional Delegation of MINEPDED (Ministry of the Environment, Nature Protection and Sustainable Development) hall with the 15 selected enumerators.

During the training specifically on the first day, a presentation on the SCORECARD was done to enlighten the understanding of the enumerators about the project, its objectives, the methodology to be employed and the holder of the project. It was clearly stated that, the exercise was purely technical aimed at improving on council services and had nothing to do with politics. The training

was centered on the training manual and the questionnaires. These two documents were closely analyzed together with the enumerators page by page and line by line.

On day two, discussions were centered on the number of days allocated for the data collection (six days) and the number of households to be sampled by each enumerator a day and the total number for the six days. The technical documents were presented and the enumerators were showed how to identify the households within each locality following the maps on the technical documents and so they were taught on how to carryout successful data collection with the 10 tips on data collection document.

The 19th which was the last day of the training was the practical phase where the enumerators grouped in pairs of five were sent to the field to experiment the whole process of administering of questionnaires along with the necessary supporting documents of the process.

In brief, the training processes were successful and out of the 15 enumerators that were trained 14 were retained and were given their different data collection tools in respect to their different locality of origin. The data collection report can be visited for further information.

III. Data Collection

The Data collection process in Bangem council started immediately as from the practical phase of the training of the enumerators notably on Friday the 19th of October 2017 but for those enumerators who were to cover the localities of Ekona, Mombo and Epen had 2 days each to reach their destinations and so did not start their data collection immediately.

The actual data collection period excluding travelling days ranged from 3 to 6 days depending on the number of households covered by the data collectors and this also depended on the closeness to a locality. The whole exercise ended in Bangem on Thursday the 26th of October 2017.

The data was collected within 18 localities that is, Ndong, Mwangwelong, mombo , Mbuh, Ekaku, Ekona, Epen, Ebase, Njocte, Eyandong, Nyan, Muelong, Muanenguba, Muekan, Upper Nkang , Muantah, Muesok and Epenebel.

During the data collection, accessible enumerators were supervised twice daily for a duration of three days but for those of Ekona, Mombo and Epen because of the enclaved nature of the localities

and so, communication was done through phone calls for update of the state of their activities. In total, 299 questionnaires were sampled (see the data collection report for Bangem).

IV. Exploitation of Data

After the process of data collection, the quality of the data was verified by first the council supervisor and finally by the LSO SCORECARD coordinator to check if they were coherent and to ensure that the survey tools were properly filed.

With the verification done, the data collection tools were submitted to PNDP office for the input of the data into computers with specification on the number of households visited. The computerized version was then analyzed at the level the National Institute of Statistics (NIS) that also produced the result tables. After the production of the tables, they were again sent to AJESH for interpretation and reporting.

2.4 METHOD FOR MEASURING PERCEPTION INDICATOR

The perception indicators were measured according to the variable of the population with respect to their satisfaction with services rendered in the 4 sectors namely hydraulic, health, education and council services which was filled in by the enumerator at the end of data collection in collaboration with PNDP and the (NIS) and which complies with survey outcome using the relevant code of either;

01= *Complete survey*: if the data relating to all sections have been provided

02= *incomplete survey*: if the data relating to at least one section have not been provided

03= *Refusal*: If the household refuses to answer the questionnaire

04= *Absence of a competent respondent*: if there is no body on the day of the interview

05= Empty house or no house at all that corresponds to the address indicated

96= others (to be specified)

And depending on the question, some of the indicators were qualitative while others were quantitative. Some required that simple figures be given e.g distance to school (Quantitative) while others required that the household head simply appreciates the service provided, e.g very poor, poor, average good, very good etc.

CHAPTER 3:

MAIN RESULTS AND SUGGESTED IMPROVEMENTS

3.1 PRESENTATION OF THE SURVEYED POPULATION

The population of Bangem was selected because they were part of zone 19 that constituted; Mamfe, Bangem, Nguti, Alou and Menji councils respectively.

17.6% of the population fell within the age range of 35 to 39 years (youthful) of the households interviewed with over 66.1% of the household heads being men as opposed to women that constituted just 26.6%.

3.2 THE HYDRAULIC/ WATER SECTOR

3.2.1 Availability and Utilization of Hydraulic Services

The result of the survey revealed that, (73.4%) of the surveyed HH within the central town of Bangem consumes direct pipe borne water while over 83.3% of the HH found consume water from wells especially the HH of Mombo Bajoh and Jandu Bajoh and 12.1% of the rest of the population from either river/streams.

The least public source of water utilised is water from boreholes with manual pumps (0.4%)

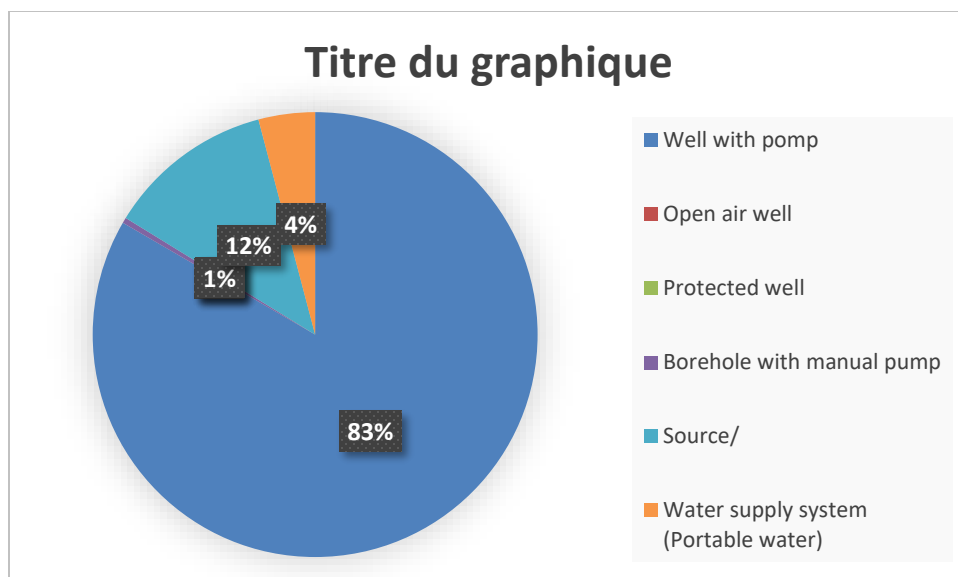


Chart 1. Distribution of HH using a public water source according to the principal source of public water

3.2.2 Cost and Quality of Hydraulic Services

42% of the sampled HH reported paying for the water at an average monthly amount of 610 FCFA per household. With 86.6% of the HH considering the amount reasonable and just 13.4% considered it high.

Concerning question relating to the taste, odour or colour of the water, 80.4% of the correspondent reported that the water has no taste while a minority of 19% reported that it does. As for it having an odour 79.2% said no while 20.5% responded yes and lastly, 74.6% reported that it has no colour contrary to 24.6% who said it did.

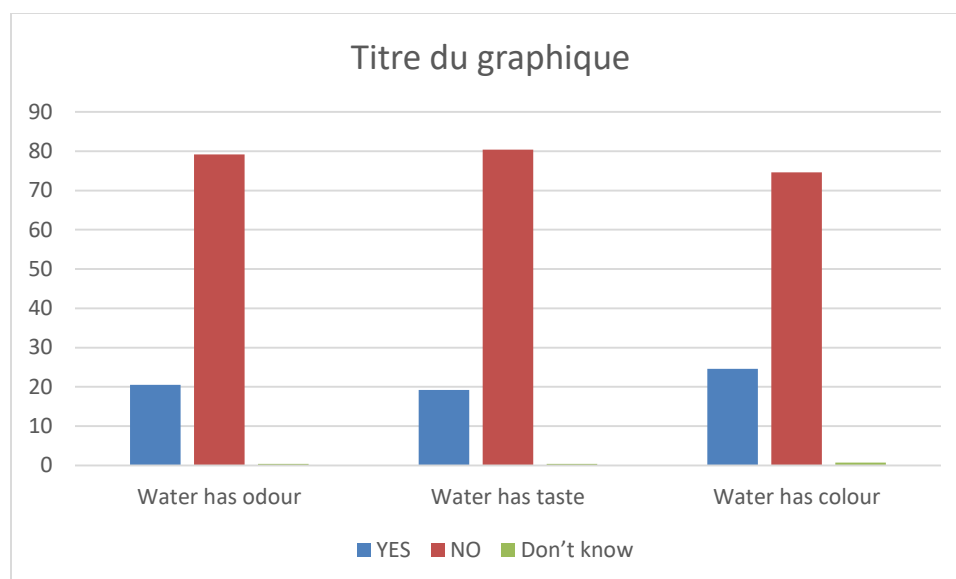


Chart 2. Appreciation of water quality -% of respondents

In conclusion, (75.6%) appreciated the quality of the water good while a minority of 21% considered it of bad quality while 3.4% remained indifferent.

3.2.3 Appreciation of Hydraulic Services

The sampled HH of the Bangem municipality appreciates the availability and distance to the water schemes as over 30% household affirmed that water is always available throughout the year and 39.2% made it obvious that it was within reach with the 40.1% reporting that it takes below 15minutes to get to where the water is found.

Table 2: Appreciation of distance to water sources -% of respondents

HH with water around the house	Less than 15 minutes	Between 15 and 30 minutes	More than 30 minutes
39.2%	40.1%	16.6%	4%

30% of the correspondent reported to have the water available all through the year, 73% said it was available throughout the day and lastly, 7.7% of HH said the frequency of the availability of water correspond to their need for water.

Table 3: Appreciation of frequency of water sources -% of respondents

Water availability all through the year	Water availability throughout the day	Frequency of water corresponding to need
30%	73%	7.7%

51.4% reported their water sources to have breakdowns within the period of a week to a month with over 55% of the situation being reported to the mayor and 41% reported that the said breakdown was mostly repaired by the mayor while 37.1% said it was done by the quarter head. 77.6% reported that the cases of break down were addressed within less than a month.

3.2.4 Reasons for Dissatisfaction of the Population

Over 56.8% of the HH are not satisfied with the hydraulic service rendered to them principally because;

- Insufficient provision of water sources to satisfy the population in their daily routines at 58.1%
- the poor management of existing water sources at 53.8%
- continue occurrence of water breakdowns at 59.7%

other reasons like, the bad quality of the water, the distance of the water, and the cost of water stood as low arguments for the dissatisfaction of the people because of % attributed that is (33.3%, 17.3%, and 8.3%) respectively.

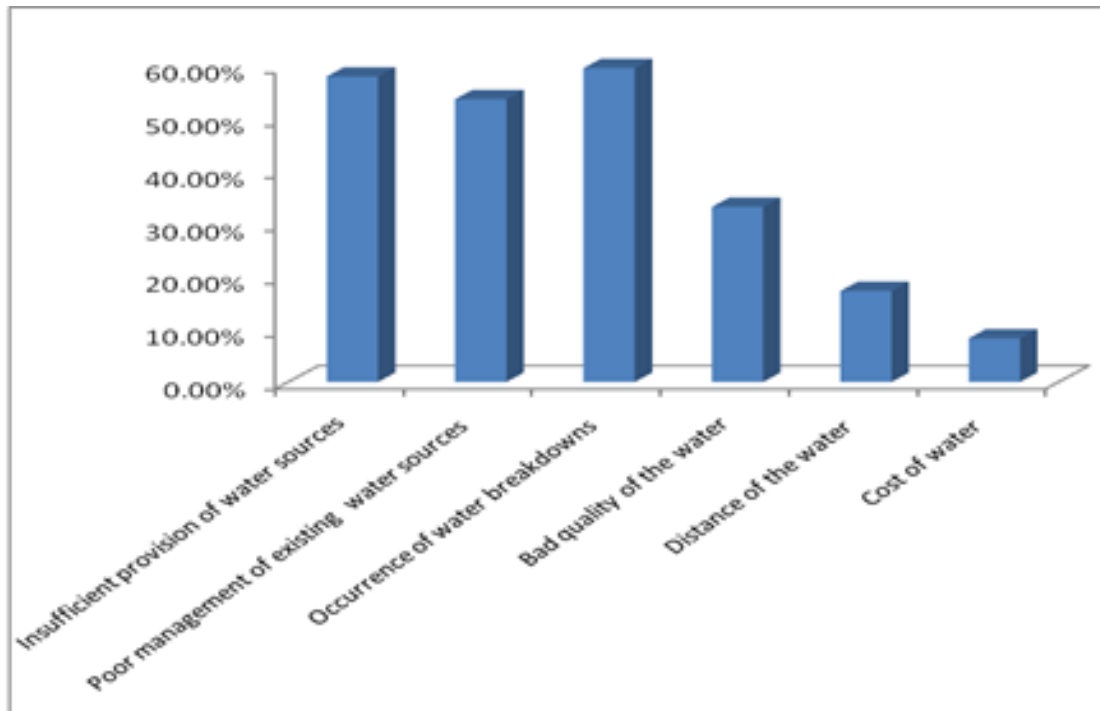


Chart 3. Reasons for dissatisfaction of the population % of respondent

3.2.5 Expected Results from Hydraulic Services

- The improvement in the management of existing water source by 67.9% in the interior parts of the municipality
- Repairs of existing water sources that are bad by 48.2%
- Improvement in the quality of the water by 47.9%
- Increase of water sources by 32.1%
- Reinforcement and installation of water management committees where inexistent

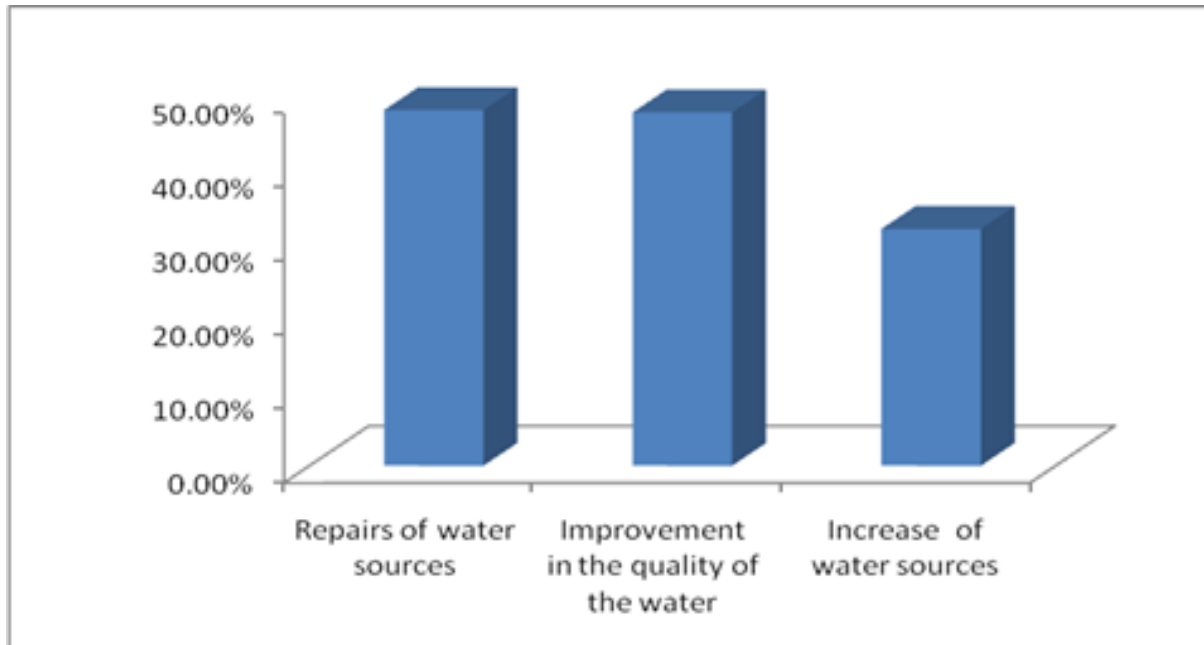


Chart 4. % of population's expected results

3.2.6 Synthesis of the Perception of Hydraulic Services and Suggested Improvements

The population of Bangem no doubt acknowledges enjoying hydraulic services within their community but then would care for the water system to be improved because of challenges like breakdowns, insufficient water source and poor management of the existing water sources.

They appreciate the fact that most of the water sources are not very distant from their households plus the fact that, whenever they are faced with water breakdowns they can easily address it to either the mayor or their quarter heads or chiefs who put in their best to come to their aid within considerable period of time even though they would appreciate to register less instances where they are faced with breakdowns.

With the above therefore it is highly recommended that, the various expectations listed under the 3.2.5 within the hydraulic sector should be highly taken into consideration so to bring improvements in the hydraulic sector in Bangem council environment.

3.3 HEALTH SECTOR

3.3.1 Availability and Utilisation of Health Facilities

There exist both integrated public and private health centres as well as a hospital in the Bangem municipality where the population goes to seek for medical care. From the survey it was clear that, these health centres are situated far as it takes over either more than 30minutes for the people to get to the nearest when need arises as reported by 41.1% of HH and between 15 to 30 minutes on foot as reported by 39.3% of the sampled HH.

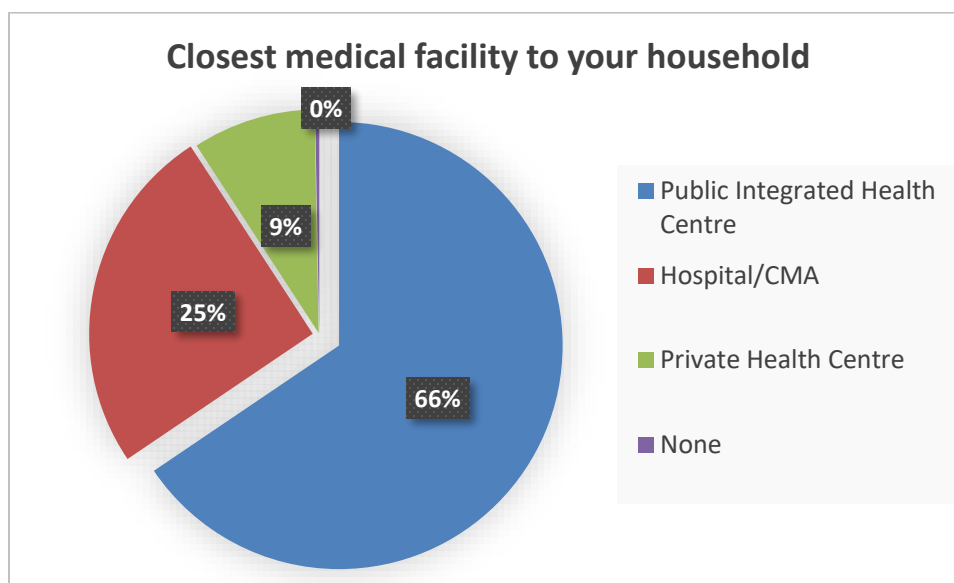


Chart 5. Closest health facility to the household

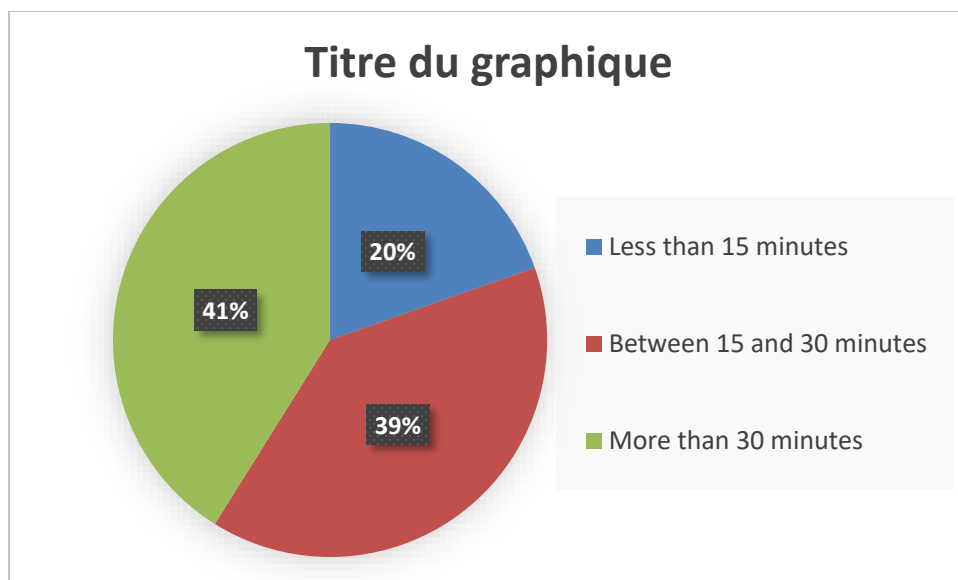


Chart 6. Average time to arrive at the closest health facility

The majority of the sampled HH (57.5%) prefers going to the integrated public health centre while 35.5% prefers to go to the hospital. 0.4% of the HH goes to tradi-practitioners and receives auto-medication while none was reported to go to a medical staff for medication or self-medication.

From the chart below, it is seen that the highest population sampled reported that they consult more of nurses followed by doctors with 65.8% consulted at the closest health facility.

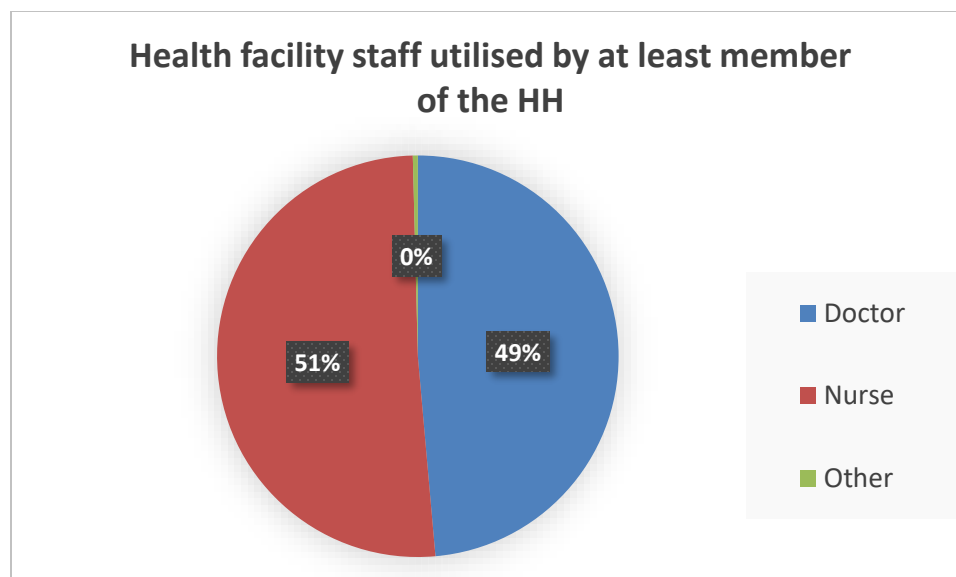


Chart 7. Health facility staff utilised by at least a member of the household

97.2% of households that visited the health facility during the last 12 months affirmed that it has personnel. And these health facilities are equipped with materials stated by 82.2% of HH and hospitalisation beds as reported by 98.7%. But then the health centres may have just less than 5 beds in the wards as reported by 15.5% of HH, 63% basically had no information regarding this and 11.7% said they had 5-10 beds.

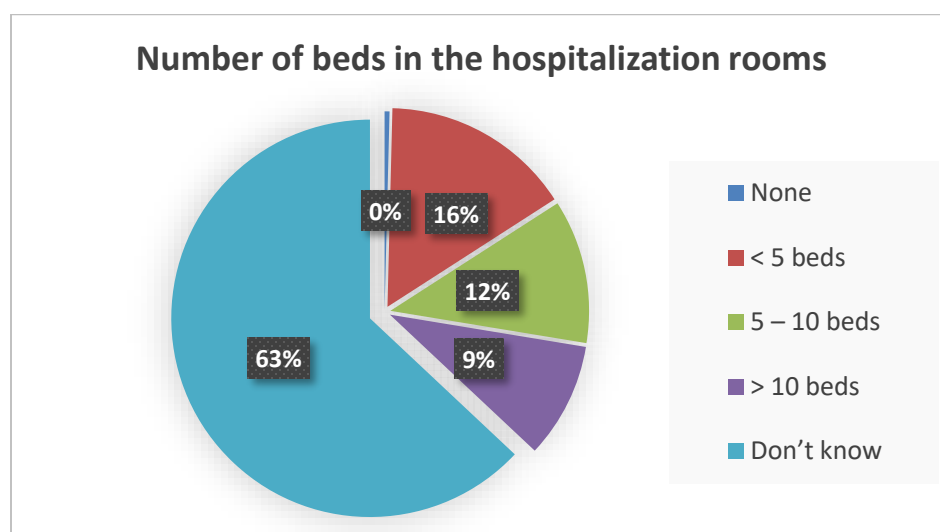


Chart 8. Number of beds in the hospitalization rooms

In conclusion, over (84.3%) of households that visited the health facility within the last 12 months affirmed to the existence of a pharmacy/pro-pharmacy with drugs (79.4%) at these health facilities.

3.3.2 Cost and Quality of Health Services

From the result here it was clear that, consultation fees are being paid as reported by Over 95% of the HH and ranges between 500 and 1000 Fcfa as stated by 72.3%. Though over 44.8% of the HH regard the amount high, the majority (54.2%), however, considered this amount reasonable and affordable. So it is no doubt that Consultation isn’t free within the municipality.

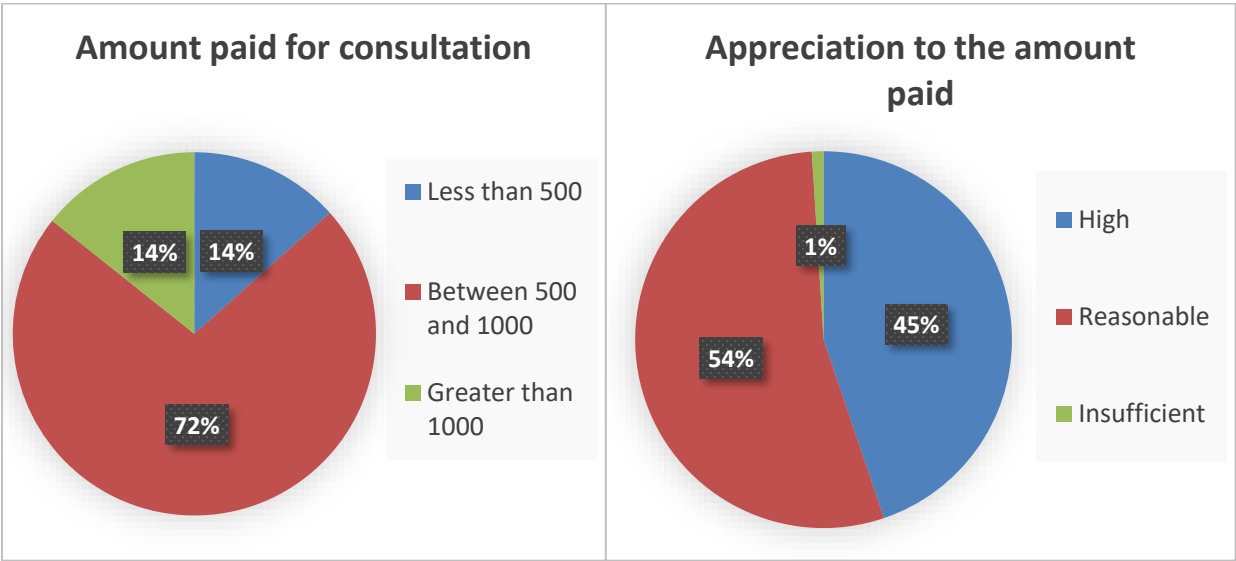


Chart 9. Cost of consultation and appreciation of the amount paid.

Concerning the reception, they get from the health personnel, 57.4% of the sampled Households rated it good with the lesser % just considering the reception just ok (36.7%).

3.3.3 Appreciation of Health Services

The existing health units within Bangem council area either have a pro-pharmacy or a pharmacy equipped with some drugs as affirmed by over 84.3% of the sampled HH. 65.1% of the sampled HH reported that most of the health issues are being resolved within the municipality or village

because health centres or the hospital at least either have pro-pharmacy or a pharmacy, some hospitalisation room, few beds and drugs which need to be increased to match up to the population's needs.

3.3.4 Reasons for the Population's Dissatisfaction

Over 36.5% of members of the sampled HH are not satisfied with the health services due to reasons like,

- The poor quality of services offered (68.6% of sampled population),
- Insufficient health equipment's (54, 2%),
- Insufficient drugs (50.1%),
- Poor management of health centres (48.2%),
- Insufficient health units (40.7%)
- And lastly problems linked to the personnel e.g. insufficient personnel (22.1%).
- The cost of services by 15.9%

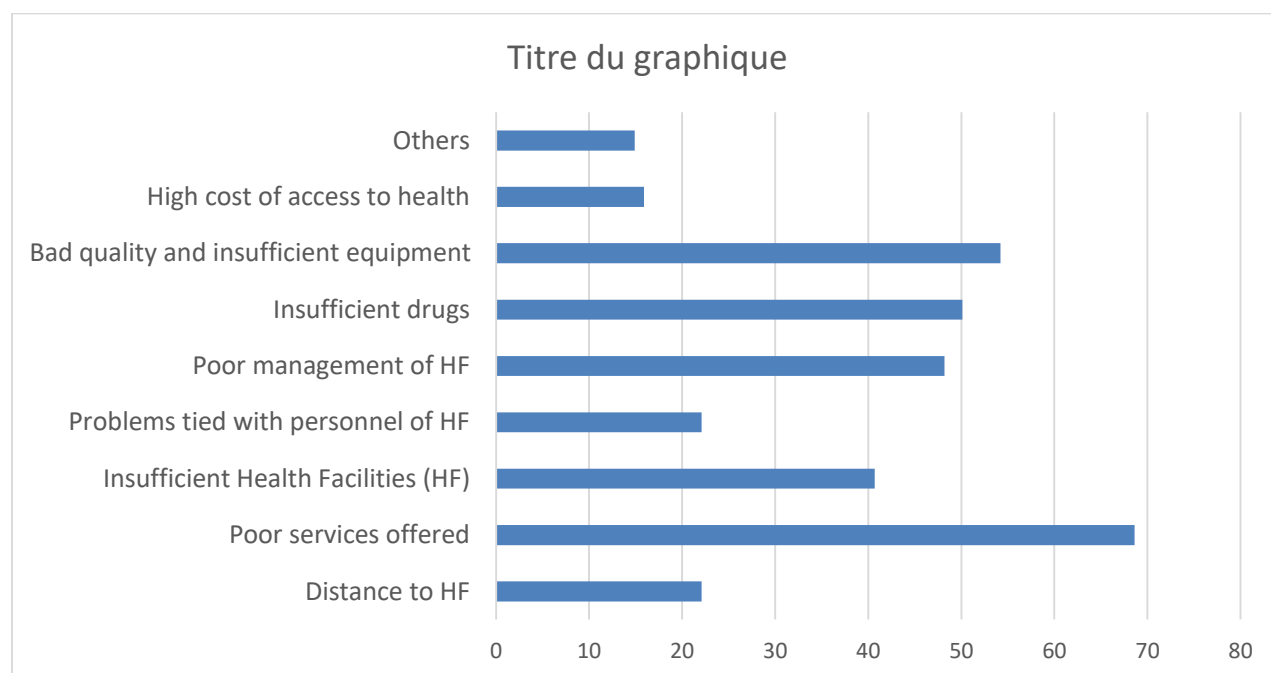


Chart 10. Reasons for the non-satisfaction of the population:

3.3.5 Expected Results Concerning Health Services

The HH are looking forward to;

- Well-equipped health units (at 72.9%).
- Health units with high drug availability (51.7%)
- Increase in personnel (31.6) %.
- Lastly increase in the number of existing health units at 30.8%

Table 4: Proportion of households with their expectations

Percentage of Households in which one member has as expectation:				
Supplementary Health Facility	Provision of medications	Posting of staff	Health Facility Equipped	Others
30.8	51.7	31.6	72.9.	12.4

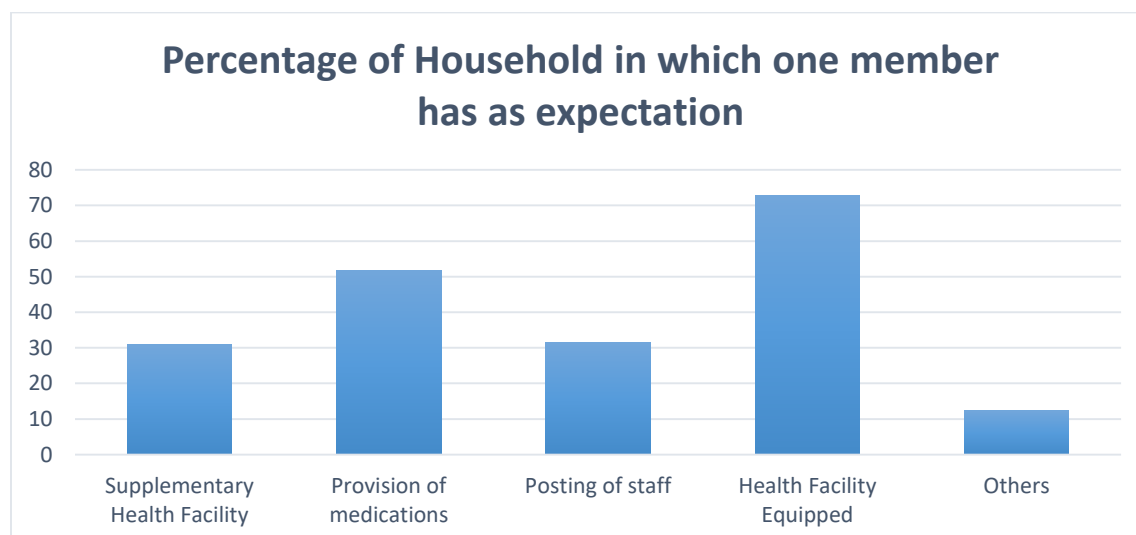


Chart 11. Proportion of households with their expectations

3.3.6 Synthesis of the Perception of Health Services and Suggested Improvements

The Bangem council area indeed has some health facilities at the disposal for the HH health care. To some HH the cost for service provided is affordable while to some it is considered high. The majority of the HH consult at the public integrated centres and utilises more of the nurses than doctors.

These health centres have a pro-pharmacy or pharmacy with little amount of drugs and not just that but also insufficient staff/personnel which goes to show that there is need for improvement in the quality of the services offered because of reasons like; insufficient hospital beds to hospitalise them in cases of emergency, drugs to administer, insufficient personnel, distance of health centres from households and the need for supplementary health units, etc. See the expected results above.

3.4 EDUCATION SECTOR

3.4.1 Availability and Use of Education Services by Cycle

There exists the full educational cycle within the Bangem municipality that is the nursery, primary and secondary education, as well as a professional training institution notably, the Government teachers training college (GTTC).

Each of the villages at least has one of the educational cycles with the majority of the children attending either the primary or secondary education. It is important to note that a good number of the primary schools have complete cycle as indicated by 86.4% of the sampled HH. And 98.7% confirmed the existence of the first cycle of secondary schools while 72.4% for the second cycle of the secondary schools.

Table 5: Table showing availability and use of education services by cycle:

Level of Education	Proportion of HH whose member declares there is a cycle in the village/quarter	Average number of children in the HH attending the cycle	Distance to cover by the children to reach school					Average time taken to reach school on foot
			< 1 Km	Between 1 – 5 KM	> 5 Km	Don't know	Total (%)	

Nursery	100	1.3	85.6	14.4	0.0	0.0	100	24.3
Primary	100	2.0	70.8	27.1	0.0	2.1	100	24.1
Secondary	96.8	2.0	30.4	59.9	5.9	3.8	100	37.6
Professional	*	*	*	*	*	*	*	*

* Means the number of observations was too small (< 25) and so no commentaries

3.4.2 Cost and Quality of Education by Level

The proportion of parents from the sampled HH who pay the fees required for their child's education is 100% but then the majority considers that the sum they pay is too high that is (nursery 62.7%, primary 62% and secondary 83.3%) and so don't really appreciate the fact that they have to spend that much for their children to be educated regardless of the level of education of the child. The cost of educating a child is highest in the secondary school followed by the nursery. PTA levy paid in the primary sector vary from school to school based on the realities of the school e.g. Most often, the payment of PTA teachers is the main issue for the high cost. This is the more reason why 83.3% of the population considers the fee in the secondary school as high. The parents all have concern for the amount of fee paid and consider it insignificant.

The reflected amounts on the table below, sums up the average amount spent by the sampled households per annum within the community on education whether private, public, secondary, primary, nursery or professional institutions

Table 6: Cost of educational services

Educational level	Proportion of HH having paid required fee	Average total expense	Level of appreciation of the amount paid				
			High	Reasonable	Insignificant	Not concerned	Total
Nursery	100	3,363,827.9	62.7	37.3	0,0	0,0	100,0

Primary	100	919,896.4	62.0	38.0	0,0	0,0	100,0
Secondary	100	3,942,788.6	83.3	16.7	0,0	0,0	100,0

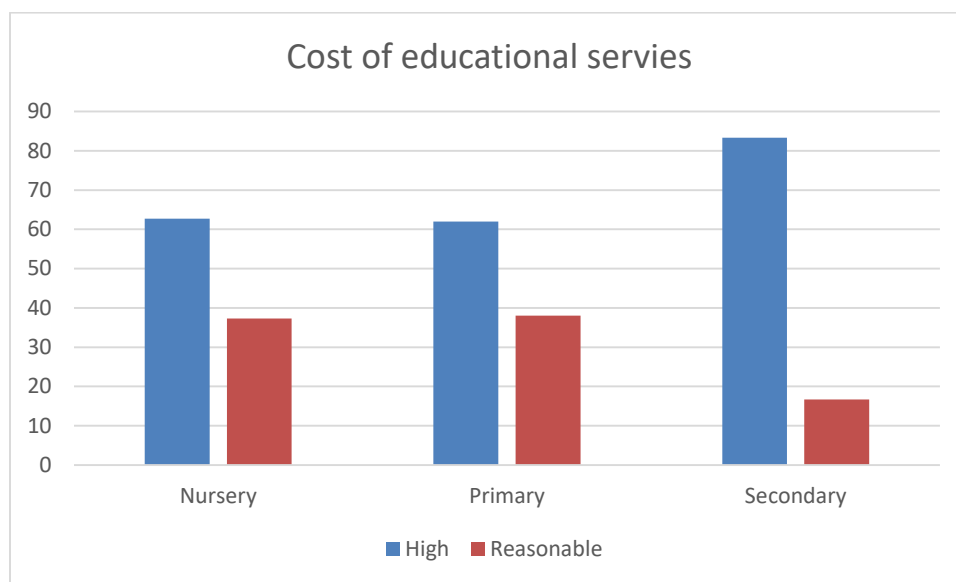


Chart 12: Cost of educational services.

79.8% of the sampled HH attested to the existence of classrooms in the nursery schools, 69.7% for the primary and lastly 69.6% for secondary but request for additional classrooms because the existing ones are inadequate. For the quality of the structures, 8 out of the 10 nursery school structures in Bangem Council area are temporally constructed with plank with some in deplorable state.

Apart from GBHS Bangem and the government primary school (IGPPS) in Bangem town where there are over 60 pupils in a Class the interior villages have less than 50 pupils per class.

And in all these pupils in all the different educational structures sit on benches 85% in the nursery school, 76.6% in the primary and 74.2% secondary school respectively. And no distribution of school books.

3.4.3 Appreciation of Education Services by Level

The results of the survey showed that most classes in the nursery and primary schools had less than 30 students or up to 60 student maximum, though in the secondary schools 17.4% of the

sampled HH declared that the classrooms had more than 60 students which is a little alarming as the classrooms are supposed to contain 50 students.

The irregularity of teachers in class is a real problem in Kupe-Manengouba Division as a whole although with exception in the nursery schools where the regularity of teachers is above average. Less than 50% of households declared that teachers are regular in the primary and secondary school with the high proportion always travelling while some of the Teachers recruited in the division most often start seeking for transfer to bigger towns one year after when transferred to the division.

The regularity of teachers in the nursery sector is over average (58%) while below 50% in the primary and secondary schools are regular because majority of the time they are travelling and as such irregular.

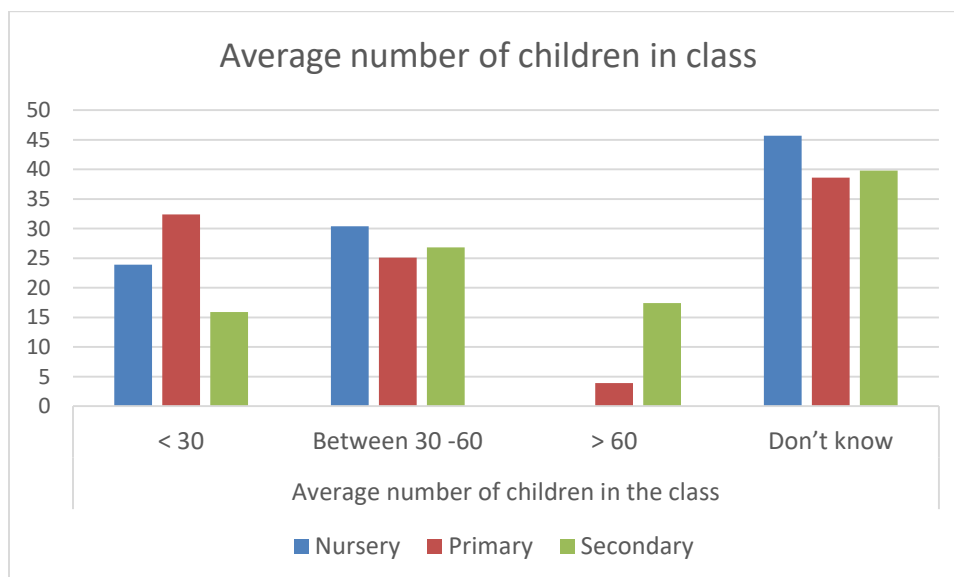


Chart 13. Average number of children in a class

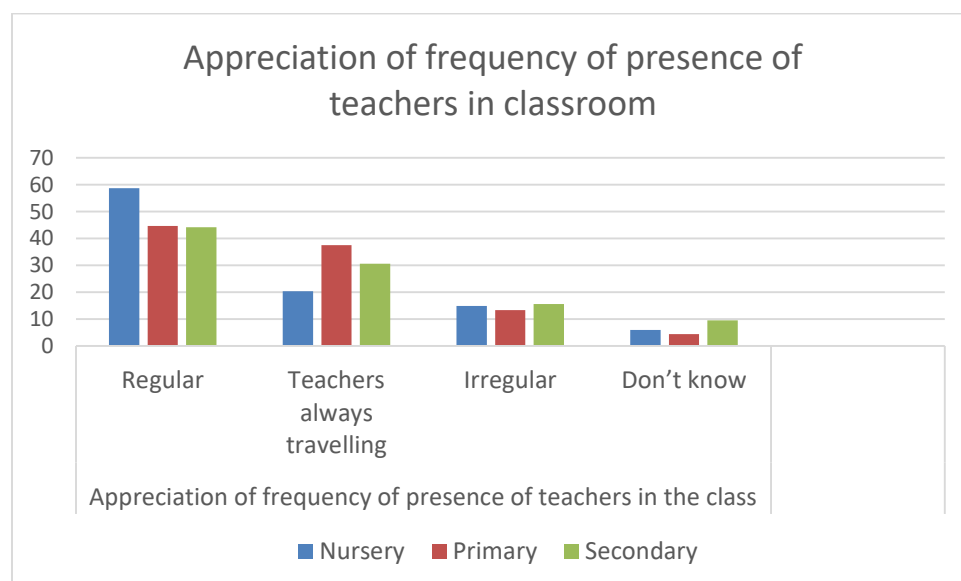


Chart 14. Frequency of teachers in class

A very high proportion of the sampled HH declared that there are damaged classrooms in all the cycles and especially in the primary and secondary which are mostly reconstructed by the school management board with money generated from PTA with the government and especially the council playing a minimal role. See table below.

Table 7: Maintenance of damaged structures

Educational level	Proportion (%) of HH whose member declares that the damaged class was repaired by:					
	PTA	Mayor	Village organisation	MINEDUB MINESEC MINEFOP	Elites	Other partners
Nursery	67,9	0	8.1	2.2	0,0	2.2
Primary	70.2,	2.1	14.1	6.3	6.9	6,3
Secondary	72,5	0	4.6	0	8.8	0

Professional training	*	*	*	*	*	*
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* Means the number of observations was too small (< 25) and so no commentaries

3.4.4 Reasons for People Dissatisfaction of Education Services by Cycle

- The primary school cycle has insufficient equipment, insufficient class rooms (67.6%), the insufficient school manuals (49.2%), high amount of PTA (47.7%) and insufficient teachers by (42.7%)
- The high registered rate of irregularity teachers in school
- Insufficient teaching materials; the high cost of fees, insufficient classrooms and absence of school manuals in the secondary sector

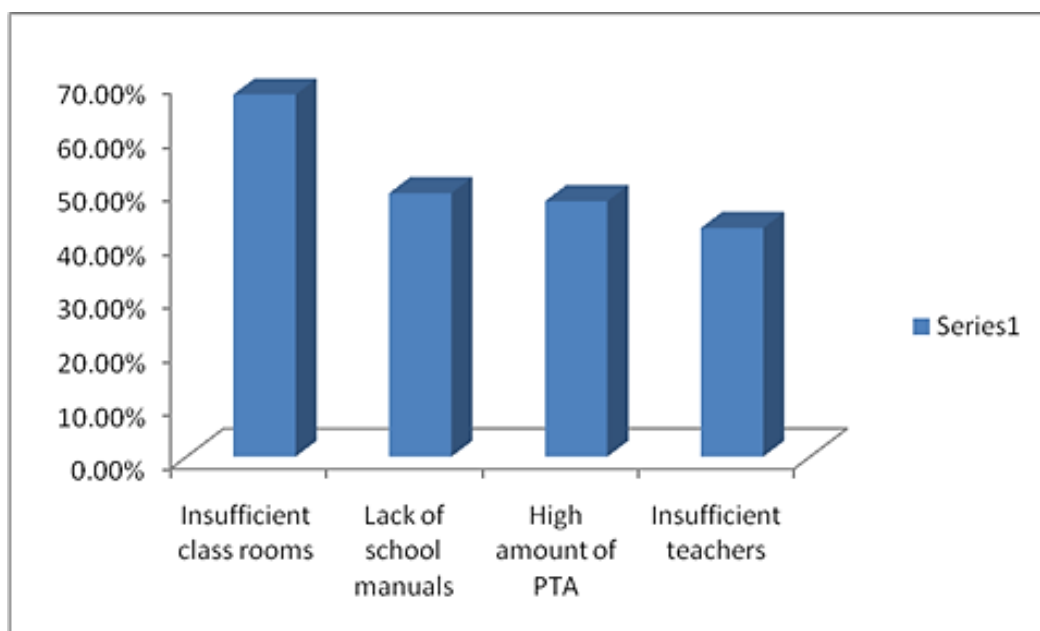


Chart 15: Reasons for people dissatisfaction of education services by cycle

3.4.5 Expected Results on Terms of Education

- The number of teachers be increased especially at the primary level that 50% increase, 28.3% increase at the secondary level and 16% for nursery
- follow up teachers' regularity to the classes

- The teaching equipment and material should be increased for all the levels but more at the primary level that is 36.2%
- More Class rooms should be constructed for the primary section because out of the 32 primary schools in Bangem, only GPS, GPNS and GBS in Bangem town are having the required classrooms while over 8 out of the 10 nursery schools within the community still needs to be constructed. Primary by 33.5%, nursery 10% and secondary 16.9%
- Distribution of school manual
- PTA levies requested in the primary sector school be reconsidered according to the school realities

3.4.6 Synthesis of the Perception of Education Services and Suggested Improvements

The educational system in the municipality is averagely good as they have the nursery, primary and secondary educational institutions with one found in at least all the villages as well as a professional institution. These schools are not far from the households but have teachers who majority of the time are absent because they are either travelling or are insufficient. This reflects the fact that, there is need for follow up of their regularity and also transfer of additional teachers. As concerning the amounts paid in this sector, majority of the HH consider the amount significant for secondary and nursery with exception to the PTA levies which they pay for their children in primary schools which they consider high.

The survey revealed that MINEDUB or the council of Bangem does very little to contribute to the maintenance of the buildings as the schools turns to depend more on the Parents Teachers Association (PTA) or elites for the repair or maintenance of the existing school structures. And so it would be valuable if the council could be more involved in the educational sector.

In conclusion, there is a great need for improvement in this sector based on the findings and the expected results.

3.5 SERVICES OFFERED AT THE MUNICIPAL INSTITUTION

3.5.1 Availabilities and Use of Services at the Municipal Institution

Just over 29.8% of the sampled HH have made use of council services with the highest being the establishment of birth certificate (25.1%) and 16.6% of the sampled population declared that it took less than a week for the establishment of the birth certificate while The highest proportion (38.9%) said it took between a day and a week and (30.4%) stood for between a week and a month.

74.1% of the households that had requested council services reported that they were satisfied with the reception they had received.

3.5.2 Cost and Quality of Services

No complaints were registered as to the cost of the establishment of birth certificate rendered by the council as they consider it reasonable and affordable.

Considering the time, it takes to render the services, it was observed that just 13.4% of the sampled HH declared that the time to obtain birth certificates is long or while over (38.9%) (Highest) said it took between a day and a week depending on the schedule of the council during the period which the service was being required.

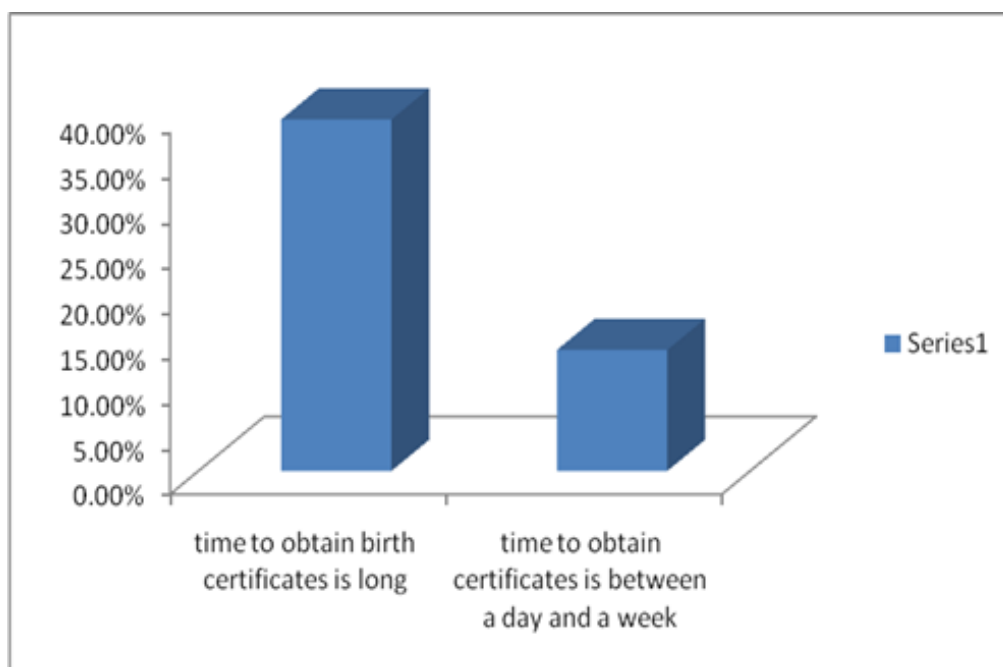


Chart 16: Time taken for service requested

Almost all of the sampled HH attested to the non-existent of bribery especially in issuing of death certificates (1.3%) and the certification of documents (1.0%). And lastly, (13.3%) establishment of birth certificate. See the table below.

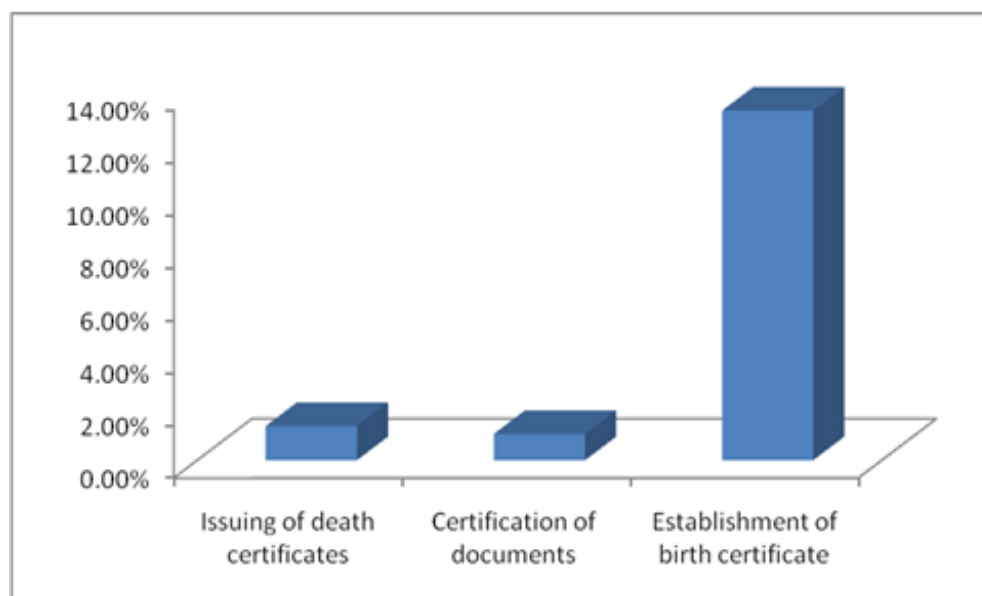


Chart 17: % of council service requested

The asterix symbol in the table below stands for “nothing” meaning no information was gathered for that column.

Table 8: Length of service delivery, cause and proportion of HH having given bribe.

Service provided	Proportion (%) of HH that found the time to render the service long or very long	Proportion (%) of HH whose member asked for a service but found the service delivery time long – cause of the delay						Proportion (%) of HH having given bribe to obtain a service
		Staff absent/unavailable	Absence of working material	Corruption	Others	Don't know	Total	
Establishment of birth certificates	13.4							13.3
Certification of documents	2.4	*	*	*	*	*	*	1.0

Building permits	0.7	*	*	*	*	*	*	0.3
Death certificates	1.4	*	*	*	*	*	*	1.3
Marriage certificates	0.7	*	*	*	*	*	*	0.3
Certificates of residence	0.3	*	*	*	*	*	*	0.0
Validation of localisation plans	0.7		*	*	*	*	*	0.3
Information	0,3		*	*	*	*	*	0.0
others	0,3		*	*	*	*	*	0.0

* Means the number of observations was too small (< 25) and so no commentaries

3.5.3 Evaluation of Municipal Institutions Services

From the results obtained, the highest participation in the area of programming and budgeting are the village or quarter heads who were elected as councillors by the people that is at 56.7%. While just over 15.5 % of the population participates in village meetings concerning the elaboration of the Communal Development Plan (CDP).

From the table below it is highlighted that the majority of the HH sampled about this domain aren't aware of the council annual budget or the expenses made from the budget.

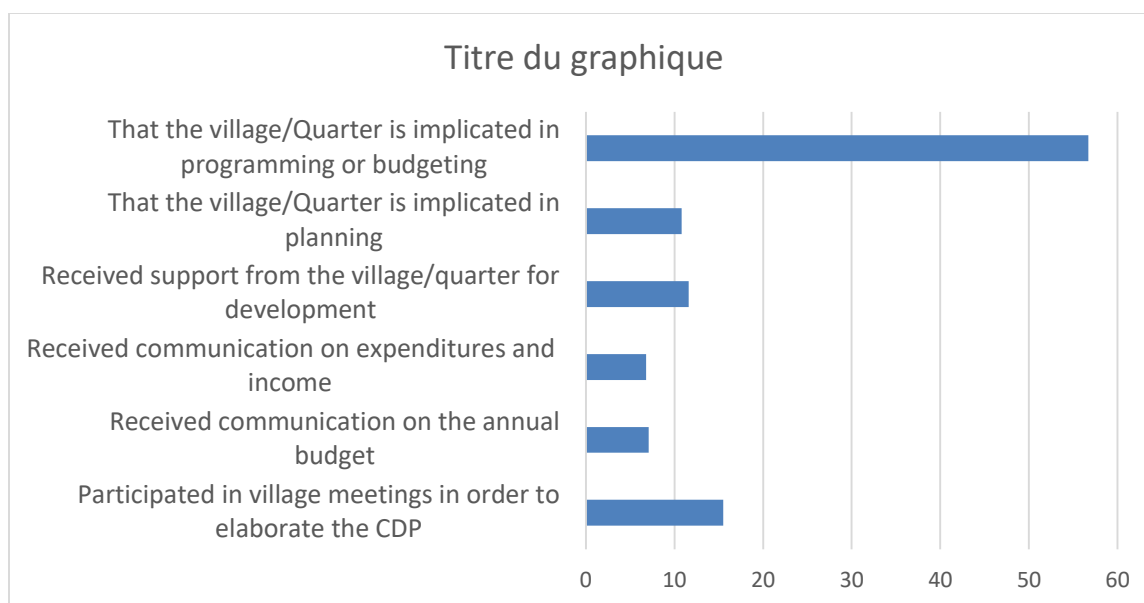


Chart 18. Proportion (%) of HH whose member declared participation in council activities or received information

3.5.4 Reasons for The People's Dissatisfaction

Over 77.6% of the sample HH reported not satisfied with the council municipal activities. With 94.4% attaching this to the little implication of the population in the management of the council and poor visibility of council actions by 63.9% or due to the attitude or problems associated with council staff 37%. See table below.

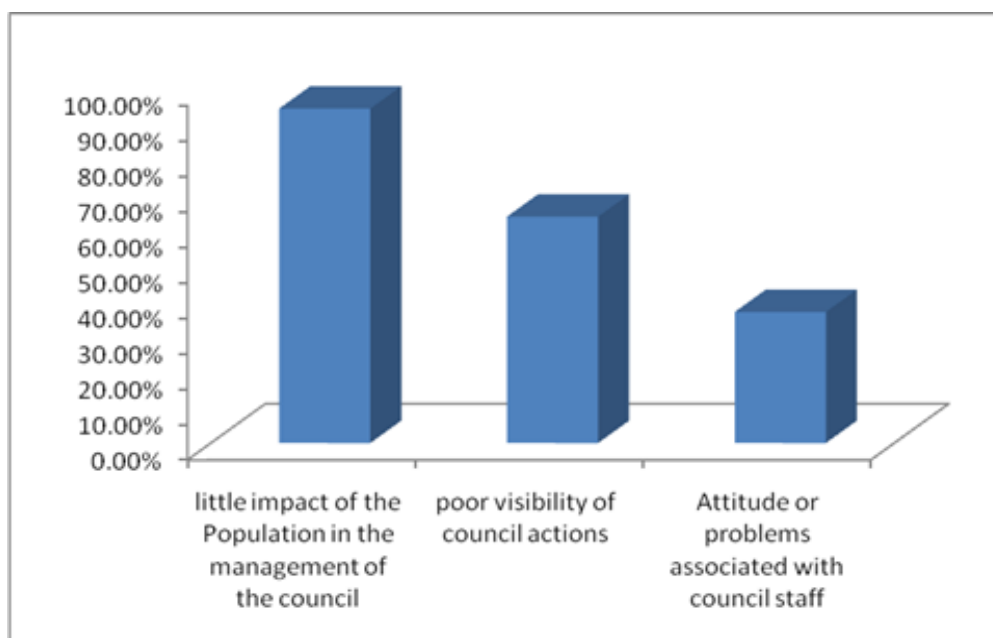


Chart 19. Reasons for dissatisfaction of respondent

Table 9: Percentage of households with reasons of dissatisfaction

Percentage of HH whose member declared dissatisfaction	Among those not satisfied, percentage of HH whose member advanced as reason for being dissatisfied:					
	Delays in handling the demands of users	Lack of the implication of the population in council management	Problems linked with council staff (absenteeism, corruption, poor reception etc.)	Non visibility of council actions	Unavailability of council executive (Mayor and his assistants)	Others
77.6	18.0	94.4	37	63.9	15.1	11.1

3.5.5 Expected Results from Municipal Institutions Services

- Increase in populations involvement in decision making at the council level by 82.5%
- Increase communication on council actions carried within the municipality to the population by 80.7 %
- Transparency and accountability of the management approaches used by 80.4% and;
- Increase Council proximity with the community by 70.5%.

3.5.6 Synthesis of The Perception of Municipal Institutions Services and Suggested Improvements

The population of Bangem council area are averagely satisfied with the services they receive from the council especially with the establishment of Birth certificates. But the same can't said concerning their involvement in decision making or in the development of actions to be implemented within the municipality. The in satisfaction was attributed to the little or no dissemination of information and restitution of council session's outcomes to them by the council or their elected councillors and the little/ no involvement of them in council activities by the council.

It is therefore in this light that it is highly recommended that much consideration should be given to the expectations of the community so as to enforce the relationship between the people and the council which would give room for the general public to enormously contribute to the development of the council area.

3.6 CONCLUSION AND MAIN RECOMMENDATIONS

3.6.1 Conclusion

The survey was successful with a lot of findings for the four sectors within the Bangem municipality. From the findings, challenges faced by the HH were made obvious with relation to different sectors whether relative to the existing numbers of structures, availability of personnel, distance to the institutions or the cost of the services rendered. The identified challenges go on to throw light on the key issues to be addressed to bring forth improvements and ameliorations that would go a long way to improve on the wellbeing of the people as well as the health, education, hydraulic and council sectors and the services they render.

Generally, it is recommended that in the next survey under the health sector question on where HH get drugs from should be included on the questionnaire.

3.6.2 Main Recommendations

- **Water**

- Rehabilitation and maintenance of existing water supply systems
- water management committees should be reinforced where existing and created where inexistent.
- Unusable or damaged water sources should be repaired and a management committee in charge of them put in place
- Improve on the quality of water consumed by the population most especially because that way man's health is better managed.
- The number of water sources within the community should be increased to suffice for the existing population.

- **Health**

- Health units need to be supplied with enough materials and equipment's in order to better address the health issues of the people
- The number of hospitalisation rooms and beds should be increased
- The health units should be provided with drugs daily or monthly as the need arises for its effectiveness and efficiency.
- construction of newly created health centres
- Transfer of health practitioners in the already existing ones
- Capacity enhancement of personnel
- increase sensitisation on hygiene and sanitation

- **Education**

- The number of teachers at the primary and secondary levels should be increased to match up with the schooling population
- The supply of teaching equipment's and materials should be increased regularly especially at the primary levels
- More Class rooms and other infrastructures (e.g. school toilets and pumps) should be constructed for the wellbeing of pupil and the students which would help facilitate the process of learning
- The number of school manual produced and distributed should be increased in number because it is important for the students to have the school guide
- There is need for the reconsideration of the PTA levy paid for primary education as the majority still considers it high
- intensify regular follow-up of teacher's attendance in class
- Appointment or transfer of more teachers
- For future survey, the questionnaires should be elaborated to clearly distinct columns for the type of existing structures that is; private or government property, temporal or permanent structure when it comes to schools.

- **Council Services**

- Increased populations involvement in decision making
- There should be increase in information dissemination of the council actions carried within the municipality to the population;
- There is need for improved Transparency and accountability on the management approaches utilised in the realisation of council activities within the municipality
- Increase proximity of the council with the community
- Improved capacity building of council staff
- Improved communication of council budgets

- Increase in council partnership
- Greater visibility of council annual reports
- improve council communication strategy e.g. council newsletters

CHAPTER 4: PLAN OF ACTION FOR THE ESTABLISHMENT OF THE CITIZEN CONTROL OF PUBLIC ACTIONS IN THE COUNCIL OF BANGEM

PROGRAM OF DISSEMINATION OF RESULTS AND PRESENTATION OF THE PLAN OF ACTION

4.1 PROGRAM OF DISSEMINATION OF RESULTS

S/N	Activity	Expected result	Responsible	Partners	Period	
					Start	End
01	Submission of draft report	Draft report available	CSO	PNDP	28/4/2018	30/4/2018
02	Reading workshop	-Inputs from the different sectors received and integrated in report. -Restitution of the results	CSO PNDP	Representatives of all the sectors involved	29/5/2018	01/5/2018
		Submission of final report	CSO	PNDP	02/5/2018	02/5/2018
03	Hold restitution workshop with councils/Presentation of action plan	Recommendations negotiated. Lessons learned and negotiated changes adopted.	CSO	PNDP Some council staff and councillors. Sector representatives	5/6/2018	12/6/2018
04	Dissemination of results	General public is aware of results	PNDP	CSO Council	13/6/2018	12/7/2018

				Sector representativ es		
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4.2 Synthesis of problems encountered

Sector	Problems identified	Suggested Solutions	Level of implementation	
			<u>Local</u> ¹	<u>Central</u>
<u>Hydraulic</u>	<ul style="list-style-type: none"> - Insufficient water supply sources - the poor management of existing water sources - continuous occurrence of water breakdowns - poor quality of the water, distance of the water - little involvement of the council in the management of water supply systems 	<ul style="list-style-type: none"> - rehabilitation and maintenance of existing water supply systems - water management committees should be reinforced where existing and created where inexistent. - unusable or damaged water sources should be repaired and a management committee in charge of them put in place - Improve on the quality of water consumed by the population most especially because that way man's health is better managed. - The number of water sources within the community should be increased to suffice for the existing population. 	Council	MINEE
			Council	
			Council	MINEE
			Council	

¹ It is those solutions that will allow to make the plan of action.

	<ul style="list-style-type: none"> - insufficient teachers - high registered rate of irregularity teachers in school especially in the primary - Insufficient teaching materials; - the high cost of fees 	<p>for the wellbeing of pupil and the students which would help facilitate the process of learning</p> <ul style="list-style-type: none"> - the number of school manual produced and distributed should be increased in number because it is important for the students to have the school guide - the is need for the reconsideration of the PTA levy paid for primary education as the majority still considers it high - intensify regular follow-up of teacher's attendance in class <p>Appointment or transfer of more teachers</p>	<p>School management Board</p> <p>School management Board local School management Board local/ head teachers</p>	<p>MINEDUB, MINESEC</p> <p>MINEDUB, MINESEC</p>
<u>Council</u>	<ul style="list-style-type: none"> - Little implication of the population in decision making - Insufficient dissemination of information or council session to the population - Insufficient accountability of council management approaches - Little involment of council in the other sectors 	<ul style="list-style-type: none"> - increase populations involvement in decision making - The should be increase in information dissemination of the council actions carried within the municipality to the population; - There is need for improved Transparency and accountability on the management approaches utilised in the realisation of council activities within the municipality - Increase proximity of the council with the community 	<p>council</p> <p>council</p> <p>council</p> <p>council</p> <p>council</p>	

		<ul style="list-style-type: none"> - Improved capacity building of council staff - improved communication of council budgets - Increase in council partnership - Greater visibility of council annual reports - Improve council communication strategy e.g. council newsletters 	council council	
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4.3 PLAN OF ACTION

Sector	General Objectives	Specific objectives	Actions	Results indicators	Reference value	Target value	Frequency of measurement	Source of verification	Responsibles	Partners	Estimated cost
WATER	1.1To improve on water quality and quantity	Specific Objective 1.1.1	Action 1.1.1.1 Rehabilitate and maintain existing water supply systems	90% functional water supply sources	51.4%	90%	Monthly	Report of the WMC	Council	WMC, MINEE.	900,000
		Rehabilitate old water supply system and construct additional water collection points	1.1.1.2 Purchase material and construct the points	At least 10 additional points constructed by Dec 2018	0	10	Twice monthly	Pictures, Construction reports	Council	MINNEE	700,000
			Action 1.1.2.1	All WMC are	40%				Council	MINEE	300,000

		Specific Objectives 1.1.2 Improve on the management of water supply system	Reorganise the water management committees	reorganised by Dec 2018.		100%	Yearly	Reports of WMC Attendance list			
			Action 1.1.2.1 Build capacities of members of the WMC	At least 90% of members of WMC receive training	40%	90%	Yearly	Attendance list, Training report	Council	MINEE	300,000
Sub Total 1											2,200,000
Health	2.1 Improve access of the population to quality healthcare	Specific Objectives 2.1.1 Improve the quantity and quality of medical personnel	Action 2.1.1.1 Lobby for the recruitment of more staff	At least 30 new staff recruited by Dec 2018	0	30	Annually	Staff contracts	Council	MINSANTE , CSO,	200,000
			Action 2.1.1.2 Organise and hold refresher course for staff	1 course held by Dec 2018	0	1	Annually	Attendance list, Training report	DMO	Council	700,000
		Specific Objective 2.1.2 Increase drug and quality equipment	Action 2.1.2.1 Purchase more drugs and equipment	Drug and equipment availability increases by at least 20% by Dec 2018.	70%	90%	Annually	Pharmacy and health facility inventory reports	Council	MINSANTE	1,200,000

		supply in the health facilities	Action 2.1.2.2 Supply the drugs and equipment to the health facilities	Drug and equipment supply increases by at least 20% by Dec 2018.	70%	90%	Annually	Pharmacy and health facility inventory reports	Council	MINSANTE	200,000
Sub Total 2											2,300,000
Education	3.1 Increase access to quality basic and secondary education	Specific Objective 3.1.1 Increase school infrastructure, equipment and material	Action 3.1.1.1 Construct classrooms; 2 each at the nursery, primary and secondary levels	At least 6 classrooms constructed by October 2018	0	6	2 per month	Site visit, Reports, Inventory records	Council, PTA	MINEDUB, MINESEC	12,000,000
			3.1.1.2 Purchase and supply of pupil's desks	At least 200 desks supplied by Dec 2018	0	200	once	Site visit, Inventory	Council, PTA	MINEDUB, MINESEC	1,200,000
		3.1.2 Improve services provided in the sector.	3.1.2.1 Recruit more teachers and ensure their regularity in class	At least 20 new teachers recruited by Sept 2018. Results improve by at least 20%	0	20	once	Contracts, Reports	PTA	MINEDUB, MINESEC	9,000,000

			3.1.2.2 Reduction in the fees paid	Fees drops by at least 10% by Sept 2018	0	10%	Once	Fees receipts	PTA	MINEDUB, MINESEC	200,000
Sub Total 3											24,400,000
Council	4.1 Build Bangem Council capacity to effectively play its role in local developme nt	4.1.1 Reinforce the functional capacity of Bangem Council.	4.1.1.1 Build capacity of staff on fund raising	At least 4 council staff gain knowledge and skills on fund raising by Dec 2018	0	4	Once	Attestations received, Training report	Council	PAID-WA	300,000
			4.1.1.2 Train councilors on the monitoring of council investment budgets and projects	At least 25 councilors gain knowledge and skills by Dec 2018	0	25	annually	Attendance lists Training report	Council	AJESH	400,000
		4.2.1 Put in place measures that will enable the council function Better	4.2.1.1 Organise public hearings	At least 1 hearing organised by Dec 2018	0	1	Twice annually	Attendance lists, Reports	Council	AJESH	300,000
			4.2.1.2 Improve communic ation using newsletters , bill boards, community radio	1 newsletter published monthly; Monthly radio programmes broadcasted.	0	12	monthly	Copies of newsletters, Burnt CDs	Council	PNDP, Community radio	400,000

			programme s etc.								
Sub Total 4											1,400,000
Grand Total (Sub Total 1 + 2 + 3 + 4)											30,300,000

ANNEXES

Annex 1: Research Questionnaires

Citizen Report Card
Assessment of public services within the Council of

<u>Section I. BACKGROUND INFORMATION</u>			
A01	Region _____		_ _
A02	Division _____		_ _
A03	Council _____		_ _ _
A04	Batch number		_ _
A05	Counting Zone Sequential number		_ _
A06	Residence stratum : 1=Urban 2=Semi-urban 3=Rural		_
A07	Name of the locality _____		
A08	Structure number		_ _ _
A08 a	Household number in the sample		_ _
A09	Name of the household head _____		
A10	Age of the household head (in years)		_ _
A11	Sex of the household head : 1=Male 2=Female		_

A12	Name of the respondent	
A13	Relationships between the respondent and the household's head (see codes)	_
A14	Sex of the respondent: 1=Male 2=Female	_
A15	Age of the respondent (on a bygone-year basis)	_ _
A16	Phone number of the respondent	_ _ _ _ _ _ _ _ _ _ _
A17	Date of beginning of the survey	_ _ / _ _ / _ _ _ _
A18	Date of end of the survey	_ _ / _ _ / _ _ _ _
A19	Name of the enumerator	_ _
A20	Name of the council's supervisor	_ _
A21	Data collection result	_
	1=Complete Survey 4=Absence of a qualified respondent	
	2= Incomplete Survey 5=Empty house or no house responding to the given address	
	3=Refusal 96= Any other reasons (to be specified)	
	(If the answer is different from 1 and 2, the questionnaire should come to an end)	
A22	Assessment of the quality of the survey	_

1= Very good 2=Good 3=Average 4=Poor 5=Very poor

1 = Household Head
 2 = Spouse of the Household Head
 3 = Son/Daughter of the Household head or of his/her spouse
 4 = Father /mother of the Household Head or of his/her spouse
 5 = Other parent of the Household Head or of his/her spouse
 6 = No relationships with household head or with his/her spouse
 7= Maid

CODES



Q13 _____

Section II. POTABLE WATER			
H01	Which public water supply systems exist in your village/quarter? (Circle the corresponding letter(s)) Is there any other system?	1=Yes 2=No	
		A. Well equipped with a pump	<input type="checkbox"/>
		B. Open pit well	<input type="checkbox"/>
		C. Protected well	<input type="checkbox"/>
		D. Boreholes equipped with a manually operated pump	<input type="checkbox"/>
		E. Spring/ river	<input type="checkbox"/>
		F. Access to potable water (pipe borne water)	<input type="checkbox"/>

Section II. POTABLE WATER

H01a	Is your main water supply source run by a public or a private entity? 1=Public 2=Private If 2 → H14	_ _
H02	What is your main public water supply source? (Just a single answer) 1= Well equipped with a pump 4= Boreholes equipped with a manually operated pump 2= Open pit well 5= Spring/ river 3=Protected well 6 =Access to tap potable water	_ _
H03	What is the quality of the said water? 1=Good 2=Poor 3=Indifferent	_ _
H04	Does this water have an odour? 1=Yes 2=No 8=NSP	_ _
H05	Does this water have a taste? 1=Yes 2=No 8=NSP	_ _
H06	Does this water have a colour? 1=Yes 2=No 8=NSP	_ _
H07	Do you pay something to get this water? 1=Yes 2= No → If no H08	_ _
H07a	If yes, how much do you spend on average per month? (give an amount in FCFA)	_ _ _ _ _ _
H07b	How do you appraise the said amount? 1=High 2=Affordable 3=Insignificant	_ _
H08	Is this water available throughout the year? 1=Yes 2=No	_ _
H09	How many times do you need, on average, to go on foot and fetch water and come back?	_ _

Section II. POTABLE WATER			
	1=On the spot 2=Less than 15 minutes 3=Between 15 and 30 minutes 4=more than 30 minutes		
H10	Has this water point had a breakdown at a given time during the last six months, notably since? 1=Yes 2=No If no —————>H11.		<input type="checkbox"/>
H10a	<p>If your water point had a breakdown at a given point in time during the last six months, notably since, how long did it take for it to be repaired?</p> <p>1=Less than one week 2=Between one week and one month 3=Between one month and three months</p> <p>4=Over three months 5=Not yet, if 5, —————> H11</p>		<input type="checkbox"/>
H10b	<p>Who repair it?</p> <p>Who else?</p>	<p>1=Yes 2=No</p> <p>A=Mayor (Council)</p> <p>B=State</p> <p>C=An elite</p> <p>D=The Water Management Committee</p> <p>E=the village/quarter head</p> <p>F=CAMWATER/SNEC/CDE</p> <p>G=Other partners/stakeholders : _____</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
H11	<p>Do you have access to that water point at any moment of the day?</p> <p>1=Yes 2=No If yes —————> H13</p>		<input type="checkbox"/>
H12	If no, what is the daily frequency in terms of potable water supply in your household? 1=Once ; 2=Twice; 3=Thrice		<input type="checkbox"/>

Section II. POTABLE WATER			
H13	Does the said frequency correspond to your current need in terms of potable water consumption-? 1=Yes 2=No		<input type="checkbox"/>
H14	Did you express any need in terms of potable water supply in the course of the last 6 months, more specifically since? 1=Yes  2=No If no H18		<input type="checkbox"/>
H15	<p>To whom did you submit your request/needs?</p> <p>(several answers are possible)</p> <p>Other?</p>	<p>1=Yes 2=No</p> <p>A. Mayor (Council)</p> <p>B. State</p> <p>C. An elite</p> <p>D. The Water Management Committee</p> <p>E. The village/quarter head</p> <p>F. the Administrative authorities</p> <p>G. CAMWATER/SNEC/CDE</p> <p>X. Other stakeholders :</p> <p>_____</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>
H16	Has your need been met? 1=Yes 2=No If no  H18		<input type="checkbox"/>
H17	<p>In the event of a satisfactory answer, how much times did it take for your need to be satisfied?</p> <p>1=Less than one month 3=Over three months</p> <p>2=Between one and three months</p>		<input type="checkbox"/>

Section II. POTABLE WATER

H18	<p>Broadly speaking, what is your level of satisfaction, especially in terms of water supply in your village? (Just circle a single answer) 1=Satisfied 2= Indifferent 3=Unsatisfied</p> <p>If 1 or 2 → H20.</p>		<input type="text"/>
H19	<p>State the reasons of your non--satisfaction with regard to water supply in your village (several answers are possible).</p> <p>Any other reason?</p>	<p>1=Yes 2=No</p> <p>A. Far distance to access to the water point</p> <p>B. Poor quality of water</p> <p>C. Insufficiency of water supply points</p> <p>D. Poor management of the water supply</p> <p>E. Failure/delay to repair in case of breakdown</p> <p>F. High cost of water supply</p> <p>X. Any other reasons to be specified : _____</p>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
H20	<p>What are your expectations in terms of supply of potable water? (Several answers are possible).</p> <p>Any other expectation?</p>	<p>1=Yes 2=No</p> <p>A. Additional water points ;</p> <p>B. Improvement in terms of management of the existing water points;</p> <p>C. Repair works should be carried out on the damaged water points ;</p>	<input type="text"/> <input type="text"/> <input type="text"/>

Section II. POTABLE WATER

		D. Improvement of the quality of the existing water points ;	<input type="text"/>
		E. Reduction of price ;	<input type="text"/>
		X. Other expectations to be specified : _____ _____	<input type="text"/>

Section III. HEALTH

S01	Which is the nearest health care unit to your household? 1= Public integrated health Centre 2= Hospital/CMA 3= Private health Centre	<input type="text"/>
S02	How much time do you need, on average, to reach the nearest health care unit from your household? 1=Less than 15 minutes 2=Between 15 and 30 minutes 3=Between 30 minutes and 1 hour, 4 = Over 1 hour	<input type="text"/>
S03	Where do your household members preferably go when they have health problems? (Just a single answer) 1=Public integrated health Center 5=Medicine store 2=Hospital /CMA 6=Go to a medical staff member 3=Private health center 7= Treat at home Self-medication 4=Traditional healers 8=Others (to be specified)	<input type="text"/>

Section III. HEALTH		
S04	Has any member of your household gone, at least once, to the nearest health care unit in the course of the last 12 months, specifically since ? 1=Yes 2=No If no → S17	<input type="text"/>
S05	Who is in charge of managing such health care units? 1=Medical doctor 2=Nurse 3= Nurse aider 4=Other (to be specified) _____ 8= Does not know	<input type="text"/>
The last time a member of your household was taken care of in such a health care unit,		
S06	Were the medical staffs present? 1=Yes 2=No	<input type="text"/>
S07	Were minor medical equipment (such as scissors, syringes, alcohol, cotton, betadine, thermometer, tensiometer, medical scale, etc.) always available? 1=Yes 2=No 8=Do not know	<input type="text"/>
S08	Is your health care unit (CMA or Hospital) provided with hospitalization rooms? 1=Yes 2=No If no → S10.	<input type="text"/>
S09	How many beds are available in the hospitalization rooms? 0= None, 1=Less than 5 beds 2=Between 5 and 10 beds 3=Over 10 beds 8 =Does not know.	<input type="text"/>
S10	How much did he/she paid for one consultation? (Session fees) 1=Free of charge 3=Between 500 and 1000 CFAF 2=Less than 500 CFAF 4=Over 1000 CFAF If S10=1 S14	<input type="text"/>
S11	How do you appraise the said amount? 1=High 2=Affordable 3=Insignificant	<input type="text"/>

Section III. HEALTH		
S12	In addition to the consultation fees, did the household member who received treatment give a tip to the medical staff for him/her to be better taken care of ? 1=Yes 2=No If no S14	<input type="checkbox"/>
S13	If yes, did the person do it willingly or was he/she obliged by the medical staff to do so? 1=Personal initiative 2=Obliged by the medical staff to do so	<input type="checkbox"/>
S14	How did the household member appraise the welcome attitude of the medical staff of the said health care unit? 1=Caring 2=Fair 3=Poor	<input type="checkbox"/>
S15	Is this health care unit provided with a pharmacy/pro-pharmacy? 1=Yes 2=No If no S17	<input type="checkbox"/>
S16	Are drugs always available? 1=Yes 2=No 8=Do not know	<input type="checkbox"/>
S17	Is this nearest health care unit capable of providing appropriate solutions to most of the health problems faced by your household? 1=Yes 2=No	<input type="checkbox"/>
S18	Broadly speaking, what is the level of satisfaction as concerns health care services provided by the nearest health care unit to your household? (Only circle a single answer) 1=Satisfied 2=Indifferent 3=Not satisfied If S18=1 or 2 S20	<input type="checkbox"/>
S19	State the reasons of your non-satisfaction with regard to health services provided within the health care unit you	<div>1=Yes 2=No</div> <div>A. Far distance to access the health care units <input type="checkbox"/></div> <div>B. Poor quality of services provided <input type="checkbox"/></div> <div>C. Insufficiency of existing health care units <input type="checkbox"/></div>

Section III. HEALTH			
	<p>attend? (several answers are possible)</p> <p>Any other reason?</p>	<p>D. Defaults related to the health care unit staff</p> <p>E. Poor management of the health care unit</p> <p>F. Insufficiency of drugs</p> <p>G. Poor quality of/Insufficiency of equipments</p> <p>H. High cost with regard to health care access</p> <p>X. To be specified) :</p> <p>_____</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>
S20	<p>What are your expectations with respect to health care services?</p> <p>Any other espectations?</p>	<p>1=Yes 2=No</p> <p>A. Additional health care units</p> <p>B. Supply of drugs</p> <p>C. Transfer of a staff member</p> <p>D. Equipped health care units</p> <p>X. Other to be specified _____</p> <p>_____</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>

Section IV. EDUCATION					
	Education cycle	Nursery	Primary	Secondary	Vocation al training

E01	Is your village/quarter provided with an education cycle « Name of the said cycle »? 1=Yes 2=No	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E02	How many children from your household attend the nearest school? (name of the cycle) (write down the number in front of each cycle)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E03	How many Kilometers do children from your household cover, on average, to go to school? (name of the cycle)? 1=Less than 1 Km 2=Between 1 and 5 Kms 3=Over 5 Kms	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E04	What is, on average, the time spent covered by children from your household to reach the nearest school on foot? (name of the cycle) (estimated in minutes)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E05	Is the school (name of the cycle) attended by children from your household provided with a complete cycle? 1=Yes 2=No		<input type="text"/>	1st cycle <input type="text"/>	2 nd cyc le <input type="text"/>
E06	Is the vocational training center attended by children from your household provided with a complete workshop deemed suitable to their various trades? 1=Yes 2=No 3=Does not know				<input type="text"/>

E07	Is the school (name of the cycle) attended by children from your household provided with a class-room per class level? 1=Yes 2=No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E08	Are all the children seated on a bench in the school (name of the cycle) attended by children from your household? 1=Yes 2=No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E09	Are school textbooks distributed to pupils in the school (name of the cycle) attended by children from your household? 1=Yes 2=No	<input type="checkbox"/>	<input type="checkbox"/>		
E10	How many student does a classroom attended by children from your household contain (name of the cycle)? 1=Less than 30 3=Over 60 2=Between 30 and 60 4=Does not know	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E11	How do you assess the frequency of the attendance of teachers in the class-room(s) (name of cycle) in which the children from your household are enrolled? 1=Regular 2=Averagely regular 3=Irregular	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E12	How much do you pay per child from your household on average (registration, tuition fees, Parent-teacher associations' fees	----- --	----- -	----- -----	----- ----

	(PTA) (name of the cycle) throughout a school year? (write down the average amount)	(estimated in FCFA)	(estimated in FCFA)	(estimated in FCFA)	(estimated in FCFA)
E13	How do you appraise such amount? 1=High 2=Affordable 3=Insignificant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E14	In addition to the fees, has your household paid additional fees to the personnel of the school (name of the cycle) prior to the enrolment of children from your household in school? 1=Yes 2=No If no E16	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E15	Were you obliged to pay such additional fees to the school (name of the cycle) 1=Yes 2=No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E16	When classroom in the school of (name of the cycle) attended by children from your household need repairs, Who does the repairs? 1=Yes 2 =No A. Parents-Teachers' Associations (PTA) B. The Mayor (Council) C. A village organisation D. MINEDUB/MINESEC/MINEFOP E. Elites X. Other partners/stakeholders (to be specified) _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Section V. COUNCIL SERVICES

Council Services	<p>C01 Have you requested for a specific service to the council (name of the service) during the last 12 months, notably since..... . ?</p> <p>1=Yes 2=No</p> <p>following service</p>	<p>C02 How were you received during your last time at the council? (Choose only one answer)</p> <p>1=Well 2=Indifferent 3=Bad</p>	<p>C03 After how much time did you obtain the service requested from the Council?</p> <p>1=At most after one day 2=Between one day and one week 3=Between one week and one month 4=Between one month and three months 5=Beyond three months 6= Ongoing</p> <p>If C03=1 2, 3, 4 or 5</p> <p>C04</p>	<p>C03a</p> <p>Since when did you ask for this service? (in day)</p>	<p>C04</p> <p>How How do you assess this waiting time?</p> <p>1=Reasonable 2=Long 3=Very long</p> <p>If C04=1</p> <p>C06</p>	<p>C05 If C04=2 or 3, If the time were deemed so long, what could be the problem according to you?</p> <p>1=Unavailable staff /absent</p>	<p>C06</p> <p>Did you have to pay a tip in order to obtain the said service?</p> <p>1=Yes 2=No</p>
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						2=Absence of working material 3=Corruption 4=Other factors (to be specified) _____ _____ -	
Issuance of birth certificates	_	_	_	_ _	_	_	_
Certification of official copies of documents	_	_	_	_ _	_	_	_
Building permit	_	_	_	_ _	_	_	_

Death certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marriage certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Certificate of residence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Approval of localisation plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (to be specified) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C07	Has any member of your household taken part in the village assemblies aimed at drawing up the Council Development Plan? 1=Yes 2=No						<input type="checkbox"/>
C08	Is any member of your household informed about the amount of the annual budget of your council? 1=Yes 2=No						<input type="checkbox"/>
C09	Is any member of your household informed about the expenditures and incomes of your council during the previous fiscal year? 1=Yes 2=No						<input type="checkbox"/>
C10	Does the council support the development actions of your village/quarter (such as community activities, follow-up of village development committees, follow-up of management committees, setting up of village development and monitoring committees, carrying out of micro projects in your village/quarter, etc.)? 1=Yes 2=No 8=Does not know						<input type="checkbox"/>
C11	Does the council involve your village/quarter when planning development actions? 1=Yes 2=No 8=Does not know						<input type="checkbox"/>

		X. Any other expectation (to be specified) : <input type="checkbox"/>	
<hr/>			