

REPUBLIC OF CAMEROON

Peace-Work-Fatherland

-----  
**MINISTRY OF  
DECENTRALISATION AND  
LOCAL DEVELOPMENT**

-----  
**NORTH WEST REGION**

-----  
**MOMO DIVISION**

-----  
**BATIBO SUB DIVISION**

-----  
**BATIBO COUNCIL**



REPUBLIQUE DU CAMEROUN

Paix-Travail-Patrie

-----  
**MINISTERE DE LA  
DECENTRALISATION ET DE  
DEVELOPEMENT LOCALE**

-----  
**REGION DU NORD-OUEST**

-----  
**DEPARTEMENT DE MOMO**

-----  
**ARRONDISSEMENT DE BATIBO**

-----  
**COMMUNE DE BATIBO**

***Citizen Report Card Mechanism (SCORECARD)  
Assessment of Public Services in the Sectors of Water, Health,  
Education, and Council Services within the Batibo Council Area***



**REPORT OF THE STUDY**

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

Realised by Positive Vision Cameroon (PVC)



**MAY 2018**

# TABLE OF CONTENT

LIST OF ABBREVIATIONS.....	iv
LIST OF TABLES .....	v
LIST OF FIGURES .....	vii
LIST OF MAPS.....	viii
LIST OF PICTURES.....	ix
PREFACE .....	<b>Erreur ! Signet non défini.</b>
GENERAL INTRODUCTION .....	xiii
CHAPTER I .....	1
LEGAL FRAMEWORK OF DECENTRALISATION AND LOCAL DEVELOPMENT IN CAMEROON.....	1
1.1. Legal Framework of Decentralisation in Cameroon.....	1
1.2. Promotion of Local Development .....	2
1.3. Brief Presentation of the Batibo Council.....	4
1.3.1. History and administrative presentation of the Batibo council .....	4
1.3.2. Biophysically .....	6
1.3.3. Human and economic milieu.....	9
CHAPTER II .....	14
METHODOLOGICAL FRAMEWORK OF THE SCORECARD STUDY.....	14
2.1. Context of the Study.....	14
2.2. Objective and Methodology of the CRCM.....	14
2.2.1. Objectives .....	14
2.2.2. Methodology .....	15
2.3. Sampling Methodology and Collection of Data.....	15
2.3.1. Drawing of samples .....	15
2.3.2. Data collection.....	16
2.3.3. Questionnaires and Manuals.....	19
2.3.4. Recruitment of interviewers, Training of interviewers and Fieldworks.....	19
2.3.5. Community sensitisation and awareness.....	20
2.3.6. Data processing .....	21
CHAPTER III .....	22
MAIN RESULTS OF THE STUDY AND RECOMMENDATIONS FOR IMPROVEMENT.....	22
3.1. Presentation of the Target Population of the Study .....	22
3.1.1. Characteristics of respondents.....	23
3.1.2. Characteristics of the household heads .....	23

3.2.	Water Sector.....	25
3.2.1.	Availability and usage of water services.....	25
3.2.2.	Cost and quality of water services.....	27
3.2.3.	Appreciation of water services.....	30
3.2.4.	Reasons for the non-satisfaction of the household .....	33
3.2.5.	Main expectations in the services rendered in the domain of water .....	35
3.2.6.	Synthesis in the perception of services in the domain of water and suggested areas of improvement.....	36
3.3.	Health Sector.....	37
3.3.1.	Availability and usage of services in the health domain .....	37
3.3.2.	Quality of health services .....	40
3.3.3.	Characteristic of health units visited by a household member and cost of the service .....	42
3.3.4.	Reasons for the non-satisfaction of the household .....	43
3.3.5.	Main expectations in the services rendered in the domain of health .....	44
3.3.6.	Synthesis in the perception of services in the domain of health and suggested areas of improvement.....	45
3.4.	Education Sector.....	46
3.4.1.	Availability and usage of services in the domain of education per cycle.....	46
3.4.2.	Quality of services in the education sector per cycle.....	47
3.4.3.	Cost for education in Batibo municipality .....	49
3.4.4.	Appreciation of services in the domain of education per cycle .....	50
3.4.5.	Reasons for the non-satisfaction of the household in the domain of education per cycle .....	50
3.4.6.	Main expectations in the services rendered in the domain of education per cycle .....	51
3.4.7.	Synthesis in the perception of services in the domain of education and suggested areas of improvement.....	52
1.4.	Services Offered by the Council .....	53
3.5.1.	Availability and usage of council services.....	53
3.5.2.	Cost and quality of services within the council institution .....	54
3.5.3.	Appreciation of council services.....	55
3.5.4.	Reasons for the non-satisfaction of the household in regard with the council services .....	56
3.5.5.	Main expectations in the services rendered by the council.....	58
3.5.6.	Synthesis in the perception of council services and suggested areas of improvement.....	58
3.5.	Conclusion and Main Recommendations.....	59
3.5.7.	Main recommendations .....	59
CHAPTER IV.....		61
ACTION PLAN FOR THE ESTABLISHMENT OF THE CITIZEN CONTROL OF PUBLIC ACTION IN BATIBO COUNCIL .....		61

4.1. Synthesis of the problems of CRCM in Batibo council area. ....	61
4.2. ACTION PLAN FOR THE ESTABLISHMENT OF THE CITIZEN CONTROL OF PUBLIC ACTION IN BATIBO COUNCIL .....	67
Strategy of the Water Sector.....	67
Strategy of the Health Sector.....	69
Strategy of the Education Sector.....	71
Strategy of the Services Offered By The Council Institution .....	74
PICTURE GALLERY .....	78
Annex 1: List of stakeholders involved in the study in Batibo council .....	81
Annex 2: Questionnaires of the Scorecard study.....	83
Annex 3: Municipal order putting in place the steering committee of the Citizen Control for Public .....	91
Action operation in the council .....	91

## LIST OF ABBREVIATIONS

CA	Continuous Assessment
CAMWATER	Cameroon Water Authority
CRCM	Control Reporting Card Mechanism
CDE	Camerounaise des Eaux
CDP	Council Development Program
CFA	Communauté Française d’Afrique
CMA	Sub Divisional hospital
CSPro	Census and study processing system
DDCOMMUNICATION	Divisional Delegation of Communication
DDMINEE Energy	Divisional Delegation for Mines Water and
DDSE	Divisional Delegation for Secondary Education
DLC	Decentralized Local Collectivities
DMO	District Medical Officer
EA	Enumeration Area
IBE	Inspectorate of Basic Education
LD	Local Development
LSO	Local Support Organization
MTEF	Mid Term expenditure framework
NGO	Non-Governmental Organization
N°	Number
PNDP Program	National Community Driven Development
PTA	Parent Teacher Association
RBM	Results Based Management
SDO	Senior Divisional Officer
SG	Secretary General
SNEC	Society National des Eaux du Cameroun
SPSS	Statistical package for social sciences
VDC	Village Development Committee

## LIST OF TABLES

Table 1: Contribution of the council to Local Economic Development.....	3
Table 2: Distribution of the number of sampled EAs and households by council. ....	18
Table 3: Proportioning of respondents per sex and age group in BATIBO council .....	23
Table 4: Distribution(%) of households in BATIBO council per type of water systems available .....	26
Table 5: Distribution (100%) of households in BATIBO council per water source used.....	27
Table 6: Distribution of households in Batibo council per characteristics declared of the main water source used.....	28
Table 7: Distribution(%) of households in Batibo council per characteristics declared of the cost of water...30	
Table 8: Proportion (%) of households in Batibo council using a public main water source, with water available throughout the day/year following the distance required for a round trip to get water. ....	31
Table 9: Proportion (%) of households in Batibo council declaring a breakdown of the main public water source used in the course of the last six months.....	31
Table 10: Proportion (%) of households in Batibo council who have declared a breakdown within the last six months and the institution/person repairing the breakdown.....	32
Table 11: Proportion (%) of households in Batibo council who expressed a need for potable water in the last six months and their needs were met.....	33
Table 12: Distribution of households in BATIBO council whose need for potable water was met per time taken for their needs to be satisfied .....	33
Table 13: Proportion (%) of households not satisfied and reasons for non-satisfaction with the water provision in Batibo council. ....	34
Table 14: Proportion (%) of households in BATIBO council according to expectations in water supply: .....	35
Table 15: Distribution(%) of households per main choice of health solutions, in Batibo council. ....	40
Table 16: Characteristics of health care units visited by the household in Batibo municipality units .....	42
Table 17: Appraisal of the amount paid in the health care unit.....	43
Table 18: Distribution(%) of households in BATIBO council attending the nearest health care unit according to the reception of the medical staff. ....	43
Table 19: Solving of health problems in the village and reasons of dissatisfaction.....	44
Table 20: Expectations in terms of health services in BATIBO council. ....	45
Table 21 : Type of Educational cycle and professional training .....	47
Table 22: Characteristics of school infrastructure.....	48
Table 23: <i>Number of pupils and appraisal of teacher's presence in school</i> .....	49
Table 24: Appraisal of the amount paid for education by household in Batibo .....	50
Table 25: General state of classrooms.....	50
Table 26: Proportion (%) of households in BATIBO council according to the level of satisfaction and the reasons of dissatisfaction, in terms of education services. ....	51
Table 27: Expectations in terms of education in BATIBO council .....	52
Table 28: Proportion of households in BATIBO council which have requested for a council service in the last 12 months. ....	54
Table 29: Distribution(%) of households whose members consider that the time taken to be served was long or too long, the reason of slowness/bottlenecks and households who have paid a tip to obtain the services ..	55
Table 30: Proportion (%) of household in BATIBO council who declared that they have been involved or were informed on the council's activities .....	56
Table 31: Proportion (%) of households in BATIBO council having expectations, per type of expectations..	58
Table 32: Synthesis of problems in the Domain of Water in Batibo.....	61
Table 33: Synthesis of problems in the Domain of Health in Batibo.....	62
Table 34: Synthesis of problems in the Domain of Education in Batibo .....	63
Table 35: Synthesis of problems in the Domain of Council service in Batibo.....	64
Table 36 :Plan of Action for the Water sector;.....	67

Table 37 :Plan of Action for the Health sector.....	69
Table 38 : Plan of Action for the Education sector .....	71
Table 39 :Plan of Action for the Council services sector .....	74

## LIST OF FIGURES

Figure 1: Distribution (%) of household head per age group .....	24
Figure 2: Distribution of household head according to sex.....	24
Figure 3:Proportion (%) of households in Batibo municipality using potable water. ....	28
Figure 4: Proportion of households (%) satisfied with the potable water provision in Batibo municipality ...	34
Figure 5: Distribution of households unsatisfied with water supply according to their reason of dissatisfaction .....	35
Figure 6: Distribution (%) of households according to the nearest health facilities .....	39
Figure 7:Distribution(%) of households according to time taken to get to the nearest health unit .....	39
Figure 8: Distribution(%) of households using the nearest care unit within the last 6months .....	41
Figure 9: Distribution (%) of the households using the nearest health centre according to the Head of health care unit declared.....	41
Figure 10: Proportion of households unsatisfied.....	57
Figure 11: Distribution of these households according to the reasons of dissatisfaction vis-à-vis Council services .....	57



## LIST OF MAPS

Map 1: Location of Momo Division and Batibo Municipality in Cameroon .....	5
Map 2: Hydraulic Map of Batibo Municipality .....	8
Map 3: Population of Batibo Municipality .....	10
Map 4: Map of Nursery and Primary Schools within Batibo Municipality .....	11
Map 5: Secondary Schools of Batibo Municipality .....	12
Map 6: Health Facilities in Batibo Municipality .....	13

## LIST OF PICTURES


Picture 1 :Lunching of the CRCM.....	78
Picture 2 A practical exercise in the field to test/evaluate trained enumerators .....	79
Picture 3 : End of training test (written) of Enumerators .....	80

## PREFACE

Accountability and good governance is very important to a municipality in that citizens participate directly in ensuring that the right services are provided and local and public officials are transparent in managing local council business. The CRCM was initiated by PNDP to enable the population of Batibo council to appreciate and rate the performance of our services. To facilitate this process, quantitative and qualitative methods were used to obtain information with the help of a questionnaire. The information was gathered from four sectors namely; Water, Health, Education and main Council Services. The data obtained is a reflection of the perceptions of households in my council area. Equally, the strengths and weaknesses as well as the expectations of households have been elaborated.

Through the CRCM, we will be able to get reliable feedback regarding service delivery, monitor the effectiveness of service-delivery in the sectors under review, provide incentives for continuous improvement over time, and establish benchmarks to promote performance improvements as well as improve transparency and accountability in our delivery of these services. It will also provide our citizens with information which they can use to hold the council executive accountable for the efficient and equitable provision of services and will generate public support for positive reforms. It is hoped that the problems raised by the population during the study, the expectations of the population and the plan of action elaborated in this report will help to guide us in our efforts at implementing the decentralization process and thus enable our council to capitalize on the lessons learnt and effect lasting changes in collaboration with the population especially in this era of decentralization.

On the whole therefore, the Scorecard study will facilitate and strengthen the decentralization process, and improve on the participation of our people in the management of council affairs by getting regular feedback on our activities from our population as well as foster good governance and accountability in the provision of services by the council executive. We strongly commit to pay attention to the plan of action elaborated and its subsequent implementation.

  
**The Mayor Batibo Council**  
  
**NYAH Boniface MSAKU**  
FIRST DEPUTY MAYOR

## EXECUTIVE SUMMARY

The National Community Driven Development Program (PNDP) is a tool put in place by the Cameroon government to help support local development and to support councils in the decentralization process.

The Scorecard was intended to enable citizens appreciate the pertinence of actions, projects, public services as well as the means allocated for them. It is a means of controlling public action and/or obliging officials to be accountable to their citizens. The global objective is to promote good governance at local level and increase the efficiency of public action (the best public services offered, the clearest conception of public policies) and make the voice of the vulnerable and marginalized population to be heard. To this effect a study was carried out in 320 households in the Batibo Council area under the supervision of PNDP and the National Institute of Statistics (NIS). This study was done using a well-designed questionnaire. It should be noted that, decision makers require better understanding of the perception of the community to effect development action and to enable more locally relevant actors to fully participate at various levels of development.

The Scorecard study was done in the Batibo Council with the help of a questionnaire which captured the perceptions of the households about the services delivered in the sectors of water, health, education and main Council services in the past years. The objective was to appreciate their level of satisfaction with public services delivery in these sectors in order to improve the council performance and promote good governance at the local level.

The data for this study was collected using primary means (questionnaire) and secondary means (CDP and sector reports). A number of indicators were used to capture the opinion of the population concerning such services in their community. The data was analysed using CS pro and SPSS.

After the treatment and analysis of data the results give the perception and expectations of the population of Batibo as to the services provided by their council in the sectors of health, education, water and main council services.

The respondents in this exercise in majority were more than 30 years old while we found that more than 92% of household heads in Batibo are above 30 years.

Concerning the water sector, 100% of the household in Batibo declared to have access to tap water. 51.1% declared to be unsatisfied among whom 44.6% complained of long distance to fetch the water. 71.5% expect additional water points while 52.7% expect an improvement in the management of water points.

In the domain of health 33.8% of the household that attain the health care units in Batibo municipality declared that they were not satisfied with the services rendered. Far distance of health care units and poor quality equipment account for 53.1% and 60.9% respectively while high cost account for 38%. 41.8% of the household expect additional health care units while 58.1% expect additional drugs.

About the education, the Batibo municipality has no vocational training school. We observed that the number of household that declared not being satisfied is about 1 out of 4 for primary and secondary educational level and less than 1 out of 8 for nursery school level of education. However, far distance to access educational facilities in all cycles account for more than 45% as declared by households whose children attend these schools.

Out of 5 households in Batibo, 4 are of the opinion that the reception for the service they asked in the council was good. Less than 2 out of 5 persons expressed dissatisfaction with the council services. As expectations, the households of Batibo municipality declared that their involvement with regards being informed on development actions is limited. 68.8% want to be part of the decision making process and expect more transparency in the management process of the council.

## GENERAL INTRODUCTION

Given that accountability is one of the main pillars of good governance in any strong democracy and considering the increasing interest all over the world in issues such as ensuring service–need compliance, the importance of decisions made by the closest unit to the public and the reduction of bureaucracy made the implementation of decentralized systems a necessity in governance. The National Community Driven Development Program (PNDP) is a tool put in place by the Government with the help of its technical and financial partners in a bid to support local development and support councils in the decentralization process.

After the first two phases, which were considered satisfactory, the government instituted the third phase known as the consolidation phase.

The Development objective of this third phase is to reinforce the management of local public funds as well as the participatory development process within the councils, so as to guarantee sustainable and quality infrastructure as well as socio-economic services.

To attain this target result, the “Citizenship reporting card mechanism for public action” (SCORECARD) was conducted. The objective of the SCORECARD was to capture the populations perception about their level of satisfaction with public service delivery in the targeted sectors (water, education, health and council services), with a view to setting up a citizen control mechanism of public achievement throughout the council environment.

This study which is spearheaded by the National Community-driven Development Program (PNDP) should be considered as a step aimed at strengthening the populations’ involvement in the management of local public affairs. To this end, PNDP hired Positive Vision Cameroon (PVC), Local Support Organization (LSO) to implement the Citizen Control Reporting Mechanism (CCRM) project for 08 councils (Belo, Tubah, Santa, Batibo, Wum, Bafut, Mbengwi and Fundong) that make up Zone 13 of the Project. Its’ analysis will contribute to strongly advocate for an increased mainstreaming of the populations’ needs at the grassroots level into the interventions of development actors/stakeholders throughout the council territory

Thus, a populations’ perception study is expected to be conducted based on the quality of public services delivery within the council environment, especially in the water, health and education sectors. The said study is equally intended to dwell on services delivered by the council.

The Scorecard process is in line with the laws and regulations in force. One legal instrument that backs this process is the Prime Minister's circular n°003/PM of the 27th September 2016, bearing on the orientation of reforms in public finance for the triennial period 2016-2018, prescribing, and the support of Decentralized Local Collectivities (DLC) in the implementation of reforms in public finance. This particular circular prescribed the following for the preparation of the State budget of the 20th June 2017:

- The continuation of the reinforcement and modernization of the mechanism for the collection of land tax, in order to improve on its contribution to council (DLC) and State budgets;
- At the implementation level, the Council Development Plans (CDP) and the Mid-term Expenditure Framework (MTEF) constitute the basis for identification, definition, formulation, evaluation and the selection of programs to be included in the Public Investment Budget;
- Regarding transfers to the Councils, the activities included in the project logbook of the PIB, must adequately reflect the aspirations of the Local Population (communities) as contained in the Regional Priority Investment Project;
- The program budgeting is a reform that was institutionalized by the law of the 26th of December 2007; a law which became operational on the 1st of January 2013;

This report will comprise of five main parts: Legal framework of decentralisation and local development in Cameroon, synthesis of the methodological approach of the study on the citizen reporting card mechanism for public action in the council area, main results and suggestions for improvement, action plan for the establishment of the citizen control mechanism for public action in the Batibo council area, and general recommendations and conclusion.



# **CHAPTER I**

## **LEGAL FRAMEWORK OF DECENTRALISATION AND LOCAL DEVELOPMENT IN CAMEROON**

### **1.1. Legal Framework of Decentralisation in Cameroon**

In Cameroon, decentralization constitutes the legal, institutional and financial means through which regional and local authorities operate to foster local development with the active involvement of the population. Through the devolution of powers to local entities, local development could be enhanced and a contribution made to the fight against poverty.

Decentralization 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, ‘decentralized local entities of the Republic shall be regions and councils. Decentralized local authorities shall be legal entities recognized by public law. The legislative body of regional and local authorities and their executives are responsible for promoting the economic, social, health, educational, cultural and sports development of such local councils, based on a role distribution principle established by the law.

According to section two (2) of the general provisions of law no 2004/017 of 22 July 2004 on the orientation of decentralisation, Decentralization shall consist of devolution by the state of special powers and appropriate resource to regional and local authorities. Decentralization shall constitute the basic driving force for promotion of development, democracy and good governance at local level which is very much in line with the objectives of the SCORECARD study.

The government has gone ahead to enact laws in favour of the vision. Law No 2004/017 of 22 July 2004 fixes the general rules and regulations on decentralization and equally agrees that decentralization is principally the fundamental axis to promote development, democracy, and good governance at the local level. Art. 3 of this law states that the council has a general mission which is local development and the improvement of the living conditions of its inhabitants. Part III of this same law on ‘Powers devolved upon councils’ section 16 states that powers to provide Drinking water supply shall be devolved upon councils. Section 19 is concerned with the setting up, equipping, managing and maintaining council health centres in keeping with the health map of the



council, as well as assisting health and social centres.

Section 20(a) of the same law states that the following power shall be devolved upon councils: in keeping with the school map, setting up, managing, equipping, tending and maintaining council nursery and primary schools and pre-school establishment;

- Recruiting and managing back-up staff for the schools;
- participating in the procurement of school supplies and equipment;
- Participating in the management and administration of State high schools and college in the region through dialogue and consultation structures.

## **1.2. Promotion of Local Development**

Local Development (LD) is the process by which public, business, and Non-Governmental partners work collectively to create better conditions for growth and development. The aim of this is to improve the quality of life for all. In this respect, collective projects are organized and supervised by the council since it is its duty to promote the economic, social, health, educational, cultural and sports development of the Council Area.

Decentralization 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, ‘decentralized local entities of the Republic shall be regions and councils. This duty is bestowed upon all councils by Law No. 2004/17 on the Orientation of Decentralization, Law N0 2004/018 of 22 July 2004 on Rules Applicable to Councils and Law No. 2004/19 on Rules Applicable to Regions. According to sections 15, 16, &17 of this law; councils have the power to foster development in the following ways:

- Developing local agricultural, pastoral, handicraft, fishing and farming activities.
- Development of local tourist attractions.
- Building, equipment, management and maintenance of markets, bus stations and slaughter houses.
- Protection of underground surface and water resources.
- Constructing and maintaining unclassified rural roads.
- Contributing to the electrification of areas inhabited by the poor.

Like in most rural areas of Cameroon, the main occupation of the population of Batibo is

agriculture. From farming and livestock and the extraction of local building materials (sand, stones, timber), they are able to take care of the basic consumable needs of the household while surpluses are sold. The money is used for the education of children and to procure manufactured goods as well as provide shelter for their families. Batibo council promotes the local economic development by ensuring that all communities have access to basic social facilities. This is illustrated in the table below

Table 1: Contribution of the council to Local Economic Development

<b>Sector</b>	<b>Activities of the inhabitants</b>	<b>Support provided by the Council</b>
Education	Opening of lay private schools	Provision of PTA teachers Provision of didactic materials to schools Provision of scholarships to poor and needy
Health	Vaccinations, consultations, medicine stores management,	Provision of mutual health schemes to the council area, provision of health equipment to the health units
Water and Energy	Building of tanks, Boreholes, Wells, rural electrification	Protection of water sources, Training of water management committees Planting of water friendly trees Extension of potable water and electricity to communities
Trade	Marketing of products	Ensure security of goods Provision of market spaces Facilitation of loan schemes
Agriculture	Farming, crop production Rice production, fishing, Wood extraction	Promote sale of products through annual agricultural shows Provision of farm inputs to farmers every season. Provision of storage facilities Opening of farm to market roads
Mines and Industrial development	Sand and stone Extraction, building and construction	Insurance schemes, opening of roads to sand and stone pits,

Governance	Civil registration Elaboration of council development planning process, Promotion of sporting activities	Assisting the vulnerable to establish birth certificates, Sponsoring sporting activities at council level, Provision of holiday jobs to students, Employment of inhabitants to execute temporal projects of the council
Environment and Nature protection	Tree planting campaigns environmental	Provision of trash cans, Provision of public toilet facilities, Creation of dump sites, Provision of trees to fight land degradation environmental management campaigns

### 1.3. Brief Presentation of the Batibo Council

#### 1.3.1. History and administrative presentation of the Batibo council

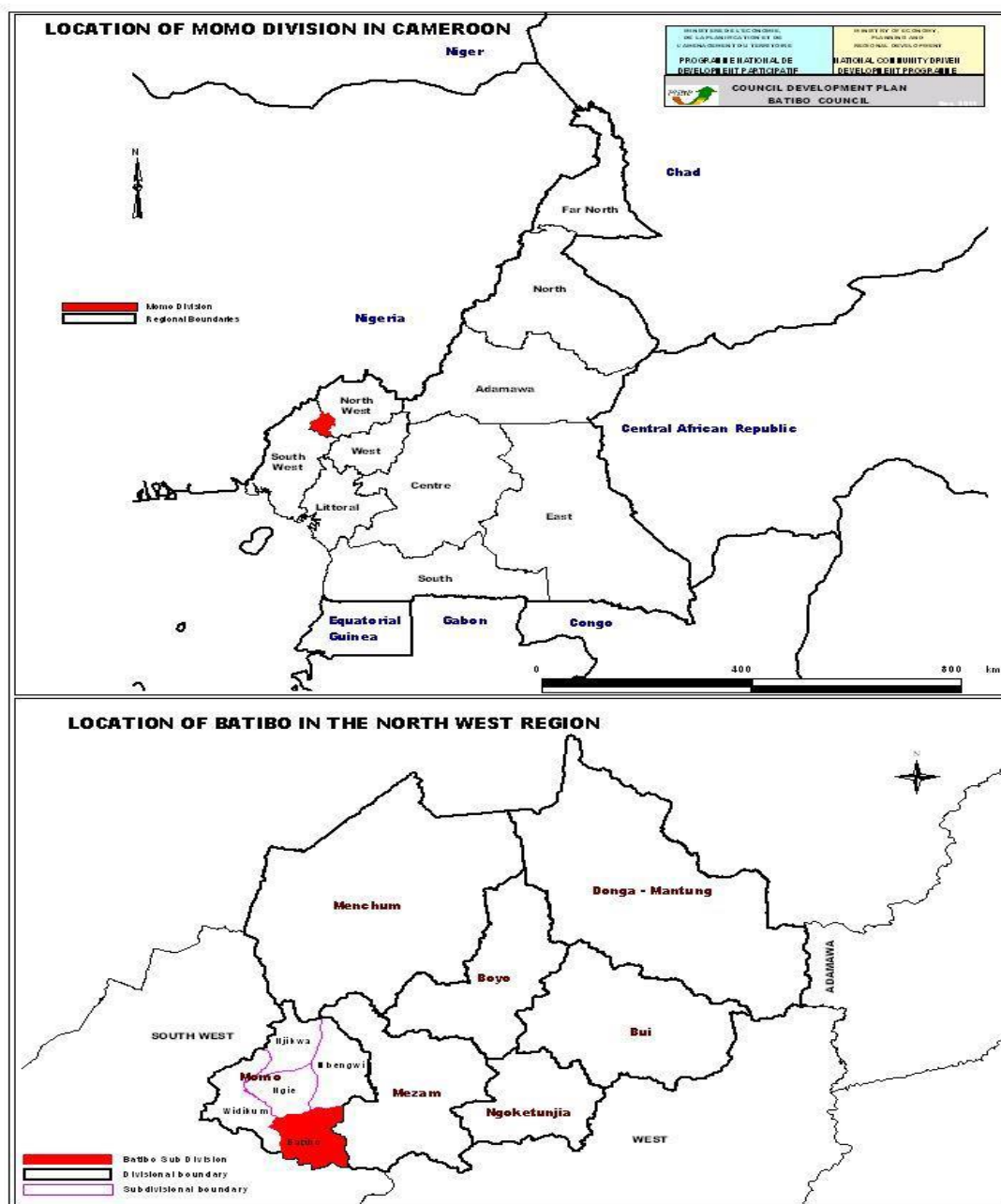
Batibo Council corresponds to and falls under the government administrative unit of Batibo Sub Division. This Sub Division embodies 22 villages and is one of the five Sub divisions that counts Momo Division in the North West Region of Cameroon. While the Sub Division was created in 1968, Batibo council was created from a breakaway between the Bamenda –Widikum Council in 1977 by decree No. 77/203 of 19/06/77.

The Batibo council lies in the South Eastern part of Momo Division and is at some 45km from Bamenda and about 27km from its Divisional headquarters, Mbengwi. It is situated between latitudes 40 95’ and 50 45, N and Longitudes 100 10’and 100 30, E and occupies a surface area of 415.9km<sup>2</sup>. The council areas share boundary to the North with Mbengwi Council, to the South with Tinto and Akwaya Councils, East with Widikum council and West with Bali, Santa and Wabane Councils.

Batibo Municipality is located in the South Western of Bamenda the regional head quarter and on the fringes of the forest zone of the Upper Cross River Basin. It is therefore the transitional zone between the dense equatorial forest of the South West of Cameroon, and the Bamenda grass fields of the Western Plateau.

Among the 22 chiefs of the communities that constitute Batibo Municipality, 6 (including Batibo, Nguzang, Ashong, Tiben, Anong and Bessi chieftaincies) are of 2<sup>nd</sup> degree class and 16 others of 3<sup>rd</sup> degree. See below the maps of the location and of the population of Batibo council respectively:

**Map 1: Location of Momo Division and Batibo Municipality in Cameroon**



Source: CDPBatibo 2012

### 1.3.2. Biophysically

The council area falls within the Equatorial climatic zone (mountain type) and like every other region within this zone, it has two seasons: Rainy and dry seasons. The rainy season covers from March to mid-November and the dry season from mid-November to mid-march. This region is characterized by varying altitudes. It has two climatic zones corresponding to the relief zones. In the low plateau, temperatures are high throughout the year with a monthly average of 20<sup>0</sup>C and an annual range of 4.6<sup>0</sup>C (Batibo station). The average annual rainfall of the zone stands at 2000mm. This offers favourable climatic conditions for growth of a wide range of plants like perennial and annual crops.

The different soils found here include the red soil, the black soil (loam) and the laterite soil. The dominant soil here is the red soil. The black soil which is also found in great quantities enhances the growth of crops since it is very fertile.

The area is characterized by a few gentle slopes or hills while most of the other areas are made up of plains. The hills here are mostly dome – shaped. The slopes aid in the transportation of eroded materials to the lower land. The level land or plains are an advantage to cultivation since planting is better done on level lands than on sloppy areas.

The Batibo municipality is a water catchment area and therefore has many streams which serve as a water supply source in the area. There are also a few wells and boreholes which are found in the area but are not functional. The volume of water in these areas increases during the rainy season. Despite all these, the water table is very deep and as a result, most streams completely dry up during the dry season.

Vegetation in the municipality is mostly savannah. The vegetation includes eucalyptus trees, palm trees, raffia palms and a variety of fruit trees like kola nuts, monkey cola, plum trees etc. The Batibo council area is generally described as tropical grasslands or humid savannah with re-growth of savannah with grass and shrubs. Batibo Urban space has no forest as such but that notwithstanding, there exist some forest species which shall be presented in the table below alongside the dominant cash and food crops of the sub division.

Dominant forest species in Batibo Municipality are Raffia palm, “Monkey kola” and “Bitter Kola. Domesticated trees involve Eucalyptus, cypress, Albexia and gomiferia Mangoes, Pear, guavas,

plum, pawpaw, arabica coffee, kola nuts, plantains, bananas, beans, cocoyams/colocacia, cassava, vegetables. About grass/herbs we can list elephant grass, hyperrharnia, Guatemala, African iodiodimos ear, black jack, stylosanthes, sporobolisis, Albisiagumifera, spear grass, braken fern, mosses, lichens, twigs and epiphytic undergrowth.

About fauna, since there are no forests in the area, the only one present is the domestic fauna. The animals here include sheep, goats, pigs, dogs, cats, poultry (local and improved breeds), a few guinea pigs, rabbits, ducks and some wild hunted birds like swallows, hawks and weaver birds. Some of these animals are used for sacrificial purposes, as gifts and during social gatherings but the highest number is kept for economic purposes. In fact, most often they are sold and the proceeds are used for many different purposes like paying of school fees for children, buying of household equipment and solving other financial needs.

The Municipality is a water catchment area and therefore has a variety of water sources like streams and rivers. These serve as a source of water supply to the population. There are series of water bodies in terms of springs and catchments. These catchments are found in Ambo, Bessom, Mbengock, Ewoh, Anong, Kuruku, Guzang, Oshum, Kugwe and Lower Ashong. Their water sources could be developed to water supply schemes. Also prominent are the rivers Guzen and Oshum. The volume of water increases during the rainy season. The map below shows more on water situation in the Batibo council area:

8 |

### 1.3.3. Human and economic milieu

There are principally two ethnic groups in the council area which are: Moghamo and Fulani (Borroros). The clan is made up of 22 autonomous villages. The larger of the ethnic groups is the Moghamo whose descendants are known to be the offspring of Tembenka and Akumaka whose origin is alleged to be from the wave of Bantu emigrants. However, due to socio-economic reasons for example; marriages, business and Civil Service other Ethnic groups are found within the council area but mainly within the urban space. They include tribes like the Bafut, Mankon, Metta, Bali, Nso, Kom, Bamileke. The Muslims, especially the Mbororos, due to their nomadic lifestyle, are found within the grazing area of Ashong, Anong, Mbengock and Oshum. Based on population projections and the results of the 2005 population study, the population of Batibo municipality was estimated at 74,362 inhabitants in 2011 (ref: CDPBatibo 2012)

Initially, the Moghamo people believed in ancestors as intermediaries between God and them, hence, ancestral worship. The coming of Christianity has changed the look of things and as a result, most people have turned to Christianity and have abandoned some of the ancient religious practices though some still worship ancestors. The main religions are Christianity & Islam. The main Christian churches are the Presbyterians, Baptists, Catholics, Full Gospel, Apostolic and Jehovah Witnesses. However, the insurgence of the Pentecostal churches in Cameroon has started penetrating the Batibo Council area.

Batibo is a transitional area that falls between 1000 and 1800m above sea level. Basically, it has two zones, partly forest, while most of it is savanna. All five villages; Nyenjei, Mbunjei, Guzang, Bessi, and Batibo that make up the urban space of Batibo fall within the savanna zone.

Agriculture is the main stay economic activity of the Batibo people. It is practiced by over 90% of the population. The remainder 5% are involved in activities like administration, teaching, petty trading etc. Crops grown in this area are yams, plantains, banana, maize, cassava, potatoes, beans, groundnut, pepper, fruit trees like, monkey kola, kola nuts, bitter kola, mango, guava, plums and raffia palms and cash crops like Arabica coffee are cultivated. Gardening is extensively carried out in the Ashong area toward Pinyin.

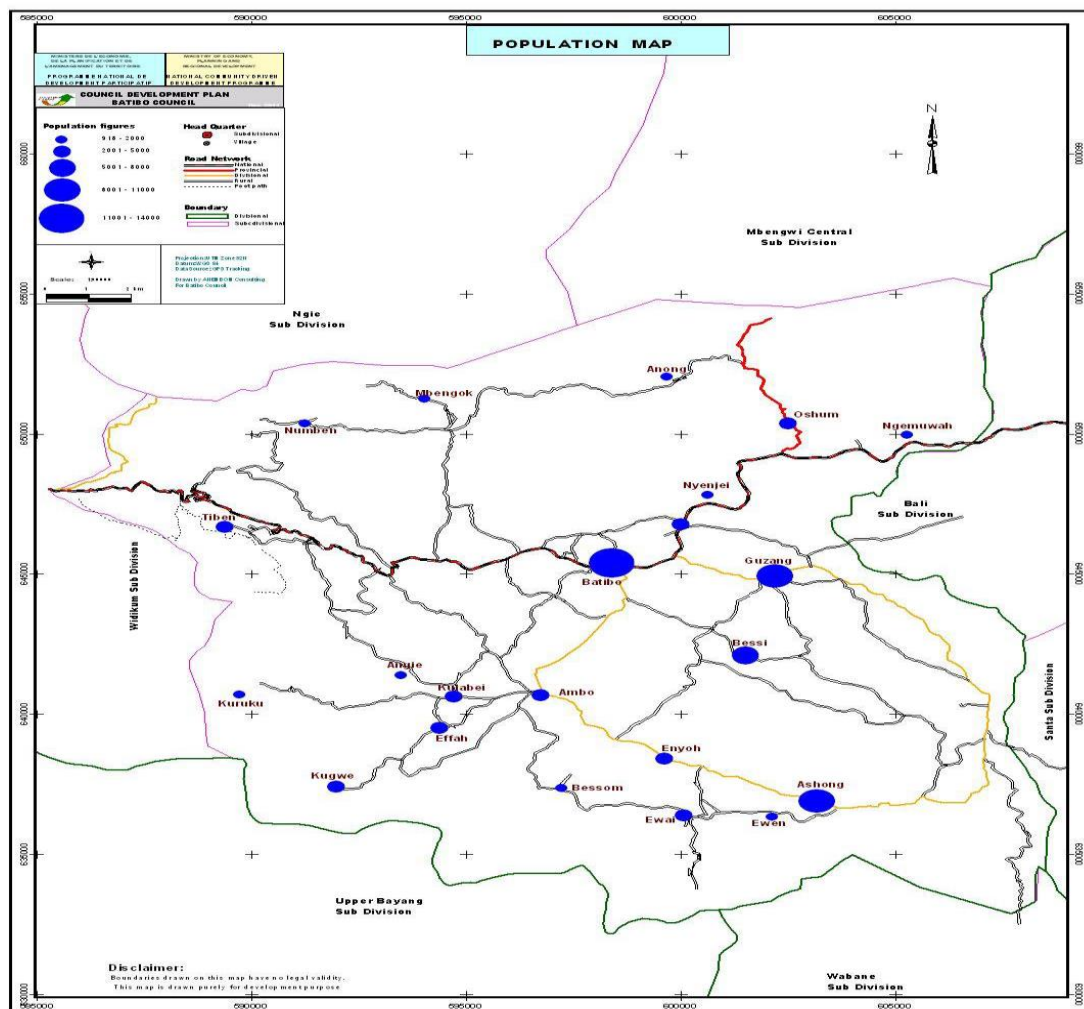
Other employment opportunities include: Petty trading, truck pushing, driving especially motor bike (Okada), weaving, quarry and sand exploitation, carpentry, hunting, brick lying, tailoring,



etc. Quarry mining is one of the self-employment opportunities in the area. Prominent quarries are the Mbunjei quarry that was exploited by the Chinese Communication and Construction Company to work on the Bamenda-Numba road, the Guzang stone quarry and Oshum sand pit. However, potential for sand mining abound in areas in the Municipality like Enwen, Mbunjei and Ewai and Angie.

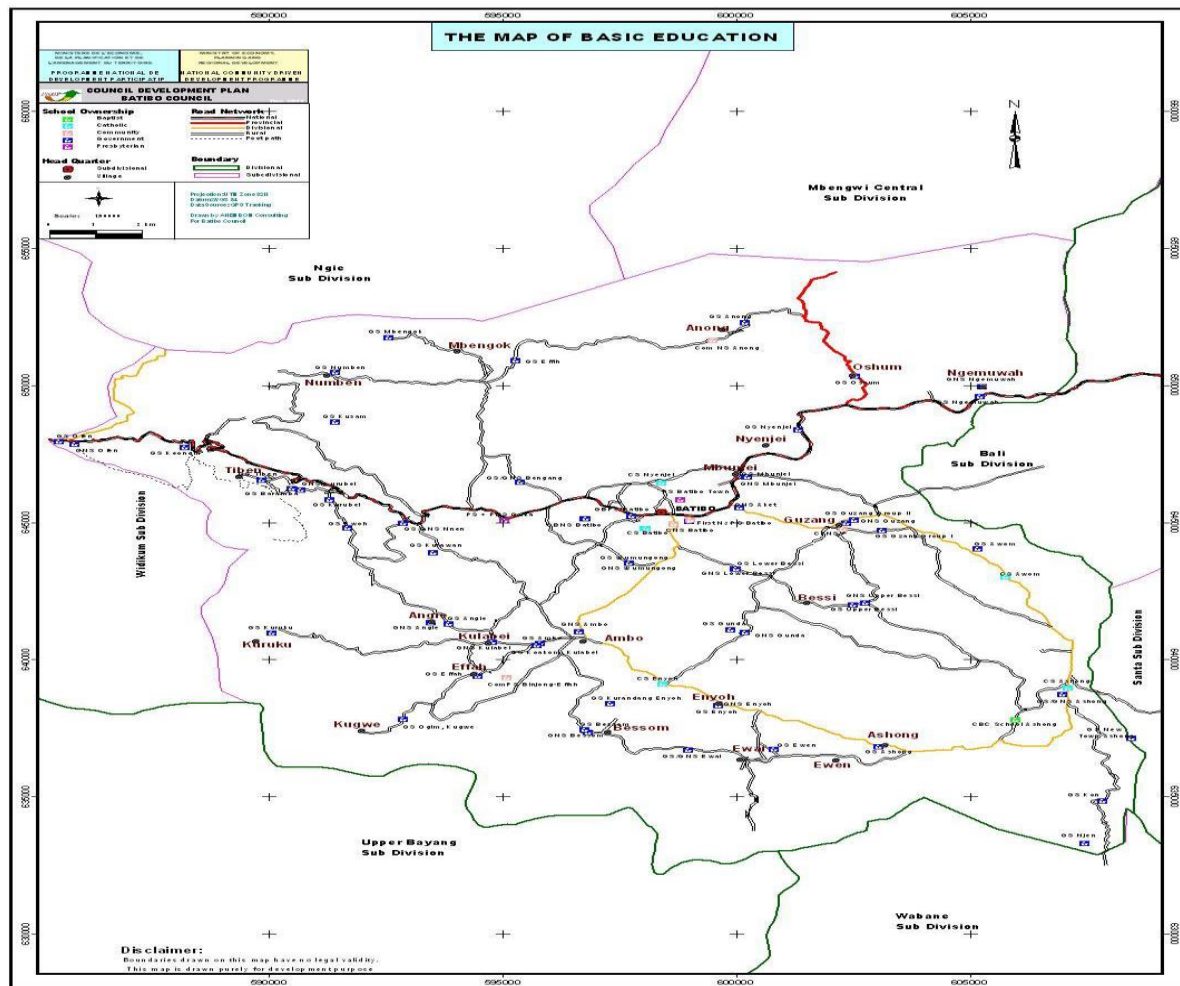
Concerning schools and health care, below are some maps which can illustrate the situation in Batibo council area. This is about the nursery and primary schools, the secondary schools and the health infrastructure's maps respectively:

**Map 3: Population of Batibo Municipality**



Source: CDPBatibo 2012

**Map 4: Map of Nursery and Primary Schools within Batibo Municipality**



Source: CDPBatibo 2012

12 |

**HEALTH INFRASTRUCTURES**

**PROVINCIAL NATIONAL RD**  
**REGIONAL RD**  
**DISTRICT RD**  
**LOCAL RD**

**COUNCIL DEVELOPMENT PLAN**  
**BATIBO COUNCIL**

**Health Infrastructures**  
 Hospital  
 Health Centre  
 Health Post  
 Health Post

**Head Quarter**  
 Sub-divisional  
 Village

**Road Network**  
 National Road  
 Regional Road  
 District Road  
 Local Road

**Boundary**  
 Districtal  
 Sub-divisional

**Scale:** 1:100,000  
 0 5 10 km

**Disclaimer:**  
 Boundaries drawn on this map have no legal validity.  
 This map is drawn purely for display purposes.

13 |

## **CHAPTER II**

### **METHODOLOGICAL FRAMEWORK OF THE SCORECARD STUDY**

This chapter presents the context and the methodology implemented during the realization of the SCORECARD study in the North West Region. The chapter is composed of the following six sections: the context of the study, the objectives of the study, the constitution of the sample, the distribution of the sample, the collection tools, the training of the data collection agents and the collection of the data, the computerisation (through data entry) and the exploitation of the data collected.

#### **2.1. Context of the Study**

PNDP in implementing activities to promote community development has developed numerous strategies to reach out to the bottom stakeholders. The main strategy of making development community-driven is to make sure that all actors fully participate at the various levels. The citizen control mechanism is put in place to facilitate community ownership of development projects.

This was done in the form of beneficiary questioning and perceptions about the projects implemented in priority sectors for the past years. It was realized that individuals would present the true picture of how the councils as well as some service departments have been trying to promote local economic development. Through this study, the respondents will propose immediate actions that will be put in place to sustain local economic development in their respective communities. This will be the best way of achieving effective decentralization in Cameroon as a whole.

#### **2.2. Objective and Methodology of the CRCM**

##### **2.2.1. Objectives**

The global objective of this study was to capture the populations' perceptions about their level of satisfaction with public service delivery in the targeted sectors to promote good governance at the local level, ensuring increase efficiency in public action. This means ensuring that best public

services are offered, public policies are well conceived and designed and provisions are made to ensure that the voice of the vulnerable and marginalized population is heard.

In a specific way, the program had to accompany the council in achieving the following:

- Appreciate the population's perception on public services in the targeted sectors (Water, health, and education as well as council services).
- Build the capacities of councils, enabling them to capitalize on the lessons learnt and effect changes, following the results of the operation.
- Empower councils and local development actors with the capacity to replicate this operation after successive periods.

### **2.2.2. Methodology**

The different steps for the realization of the citizen reporting card mechanism for public action are as follows:

- 1- Putting in place a supervision and the technical committee for the operation.
- 2- Launching workshop (Regional and Council levels) and negotiation of the involvement of stakeholders.
- 3- Recruitment and Training of the enumerators
- 4- Collection and typing of data
- 5- Treatment and analysis of data.
- 6- Elaboration of reports.
- 7- Diffusion of information, lessons learnt and negotiation for changes.

Secondary data drawn from the CDP, the internet, sector ministries and the council was also collected and used in the study.

## **2.3. Sampling Methodology and Collection of Data**

### **2.3.1. Drawing of samples**

The SCORECARD sample is designed to obtain estimates of household satisfaction indicators with respect to the following sectors at the level of the councils: Water, Health, Education and Council Services. In the North West Region (NWR), 15 councils were involved namely: Ndot,



Tubah, Ndu, Nkambe, Kumbo, Jakiri, Bafut, Wum, Mbengwi, Batibo, Fundong, Belo, Santa, Balikumbat and Oku.

The sampling frame used consists of the Enumeration Areas (EAs) of the cartography of the Fourth Cameroonian Study of (ECAM 4) and its Complementary Study (EC-ECAM 4) carried out by the National Institute of Statistics (NIS). The SCORECARD sample is a stratified one drawn at two stages. The different strata are obtained by combining the 159 concerned councils for SCORECARD and their corresponding two strata of residence (semi-urban / urban, rural), which gives a total of 318 defined study strata.

In the first sampling stage, 2,276 EAs (including 276 from the NWR) were drawn all over the national territory with a probability proportional to the number of households. In the second stage, a fixed number of households were selected in each of the EAs that were retained at first stage. This number ranged from 7 to 34 according to the EA sizes (in terms of number of households numbered during the ECAM or EC-ECAM 4 cartographies) in the NWR.

The national sample size of the SCORECARD study is 49,600 households (of which are 4,802 households in the NWR) which is divided into about 320 households per council. A household in the context of SCORECARD is an ordinary household (as opposed to collective households such as boarding students, military barracks, long-term patients interned in hospitals, religious in convents/seminaries/monasteries/nunneries, prisoners, street children or children living in orphanages, etc.) residing in the national territory.

### 2.3.2. Data collection

The 4,802 households sampled in the NWR were distributed among 276 sampled Enumeration Areas (EAs). Out of the total sampled households and EAs in the Region, the Batibo Council had 320 households distributed among 20 sampled EAs. At the end of the conduct of the SCORECARD study, all EAs were covered and out of the 320 sampled households sampled households drawn from this council area, 300 households were successfully identified and interviewed, giving a coverage rate of coverage rate in 93.75%.

The table below provides a breakdown of the number of EAs, sample households and households successfully interviewed by council in the North West Region.

### **Sample size and distribution of the sample**

The choice of the sample size of a household study such as the Scorecard study is a compromise between what is required from the point of view of the accuracy of sampling and what is feasible from the point of view of practical application (e.g. budget, field and administrative persons, technical resources, quality control, time constraints, management, sustainability, etc.). The larger the sample size, the more accurate the study estimates are and therefore the sampling errors are reduced.

The Scorecard study targeted a representative sample of about 320 households. This study was based on the same EAs as those selected during the Complementary Study of the 4th Cameroon Household Study (EC-ECAM 4) in 2016, which selected a maximum of 20 EAs per council. For this purpose, for municipalities that selected 20 ZDs during EC-ECAM4, 16 households were selected by EAs to be interviewed within the framework of Scorecard. For municipalities with less than 20 EAs, the sample of the about 320 households in the municipality was distributed proportionally to the EAs according to the number of numbered households per EA during the EC-ECAM4 study.

### **Sample base and selection of clusters**

The drawing of the Scorecard sample was based on that of the EC-ECAM4, which was based on the results of the last General Population and Housing Census in 2005 (3rd GPHC 2005) in Cameroon. The base for drawing the primary sampling unit for Scorecard is the same as the base for drawing the primary sampling units for the EC-ECAM4 study which resulted from a two-stage sampling.

In the first stage of the EC-ECAM4 sampling, the census enumeration areas (EAs) constituted primary sampling units (PSUs) and were selected in each council using systematic drawing procedures with probabilities proportional to the sizes (PPS sampling with the size being the number of households per EA). The first stage of sampling was thus done by choosing the required number of enumeration areas in the council. At the second stage, a fixed number of households was drawn according to the systematic sampling method with equal probabilities.

### **Selection of households**



The household lists were prepared by the field enumeration teams for each enumeration area during EC-ECAM 4. Households were then numbered in a sequential order from 1 to n (where n is the total number of households in each enumeration area) at the offices of the National Institute of Statistics, where the selection of a fixed number of households in each enumeration area was conducted using systematic random selection procedures.

The following table provides a breakdown of the number of EAs, sample households and households successfully interviewed by council in zone 13 of the North West Region.

**Table 2: Distribution of the number of sampled EAs and households by council.**

Council	Number of EAs			Number of households previewed in the sample	Number of households successfully interviewed	Coverage rate of households successfully interviewed
	Urban/Semi-urban	Rural	Total			
Bafut	6	8	14	319	300	94.04%
Batibo	6	14	20	320	300	93.75%
Belo	4	16	20	320	275	85.94%
Fundong	0	20	20	320	286	91.52%
Mbengwi	8	12	20	320	290	90.63%
Santa	0	19	19	321	266	83.13%
Tubah	2	7	9	319	294	92.16%
Wum	14	5	19	321	294	91.88%
<b>Total</b>	<b>40</b>	<b>101</b>	<b>141</b>	<b>2560</b>	<b>2305</b>	<b>90.04%</b>

Source: SCORECARD, PNDP North West Region

### 2.3.3 Questionnaires and Manuals

The collection tool adapted from the first Scorecard study conducted in the pilot Councils in 2016 served as reference material. A questionnaire was thus developed with its instructions manual for the interviewers (see attached questionnaire).

This questionnaire, administered preferably to the household head or his / her spouse, or to any other adult (15 years or above) household member, included the following sections:

- Household identification
- Tap water
- Health
- Education
- Council services

### 2.3.4. Recruitment of interviewers, Training of interviewers and Fieldworks

The recruitment of the interviewers was done by studying the application documents candidates who applied as field agents for the conduct of the interview. The call for candidacy for this activity was PNDP and was open to any Cameroonian of any sex, having at least a GCE Advanced Level Certificate or a Baccalaureate or any other equivalent diploma, and whose places of origin should be the council of interest he/she intends to work. The pre-selection of the interviewers took place at the concerned local councils by a mixed commission made up of the Mayor, the Civil Society Organizations (CSOs) and PNDP.

The training of the pre-selected candidates for the final selection of interviewers or controllers for the fieldworks was done in 06 days where by 2 groups of persons were trained for 3 days each in two different chosen centres:

- **Bafut training Centre:** for the training of pre-selected candidates from the Santa, Wum, Mbengwi and Batibo Councils,
- **Tubah training Centre:** for the training of the pre-selected candidates from the Tubah, Fundong, Santa and Belo Councils.

The training included presentations on interview techniques and the contents of the questionnaires; and simulations of interviews between the pre-selected interviewers to gain practice in the art of asking questions during an interview.

Towards the end of the training period, candidates spent time to practice simulated interviews in Pidgin-English, in English and in the various local languages spoken in the concerned councils. On the emphasis laid on field practice, a day was dedicated to this practical phase of the training in order to make the field agents confront the realities on the field.

The data was collected by 15 teams, with each team working in one of the 15 selected councils. In each council, a team was consisted of a council supervisor and 10 field agents (8 interviewers and 2 controllers) divided into two subgroups of 5 persons, with each subgroup headed by a controller. Each council had 7 days of field work for the data collection. The 7 days of field work for the Batibo council started on 17/10/ 2017 and ended on 24/10/ 2017.

For various reasons, several households sampled could not be interviewed during the normal collection period and consequently, a catch up organized for the location and interviewing of those temporarily absent households. This activity was done from the 12/11/ 2017 to the 15/11/ 2017. The purpose of this activity was to improve on the success rate of responses from households.

#### **2.3.5. Community sensitisation and awareness**

The community sensitisation and awareness phase is a very important activity in an investigation. It is decisive for community membership in collection operations. During the data collection of the Scorecardstudy, it consisted of informing the administrative authorities (Senior Divisional Officers, Divisional Officers) and the municipal, traditional and religious authorities of the collection process in their various constituencies. This sensitisation activity started at the council level with project launching workshops. Then, introduction letters issued by the administrative authorities were drawn up and the media were put to use for the reading and dissemination of these messages carried in the letters. It continued during data collection by the supervisors of the different municipalities.

#### 2.3.6. Data processing

Data entry and processing was done using the software version 6.3 of CSPro. The agents selected for the data entry attended a 3-day training course to familiarize themselves with the operating tools (questionnaires, data entry application) of the SCORECARDstudy. The actual entry started on November 20th, 2017 and ended on December 6th, 2017. In order to ensure quality control and to minimize typing errors, all the questionnaires were double-entered, and internal consistency checks were performed. The errors detected were systematically corrected.

Following the data treatment, the analysis tables were produced by the programs developed by the NIS as part of the SCORECARDstudy according to the tabulation plan established by PNDP.

## **CHAPTER III**

### **MAIN RESULTS OF THE STUDY AND RECOMMENDATIONS FOR IMPROVEMENT**

This part of the report contains the main results of the study and recommendations for improvement in Batibo Council. The chapter is divided into five sections made up of the presentation of the target population for the study, the water section, the health section, the education section and the section for council services. The results here will be presented in many forms including literature analysis, use of tables, pie charts and bar charts as well as tables.

#### **3.1. Presentation of the Target Population of the Study**

Gender equality is the state of equal ease of access to resources and opportunities regardless of gender, including economic participation and decision-making; and the state of valuing different behaviours, aspirations and needs equally, regardless of gender. It is basic human right. The Scorecard study was conceived in this line, targeting both sex (male and female) without discrimination for the household heads and respondents.

In the context of our study, a household is a set of persons, related or not, living in one or many lodgings in the same concession, who must at times take their meals together, and who recognize the authority of a single individual called household head. The persons usually put all or part of their resources together in order to provide for their current or vital needs.

A household head is a person who usually lives in the household and who is recognized by all household members as head of the household while a respondent is a household member who actually provides responses to the questionnaires. To be a household member the person should satisfy any of the following two conditions; has been living in the household for at least six months in a quasi-permanent manner or for less than six months, but has the intension of living there for at least six months.

The section comprises a subsection for respondent characteristics and the one for the characteristics of the household head.

### 3.1.1. Characteristics of respondents

In the questionnaires of the score card study the respondents were grouped as from the age of 20 in an interval of 5 years. From the results obtained in Batibo municipality, we do observe that about 22.9% of our respondents are less than 30 years and 34.2% are between 30 and 49 while 42.9 are 50 years at least. This indicates that 77.1% of the population participants in Batibo council for this exercise is at least 30 years old.

As per sex, about 1 out of every 2 respondents were male.

You can find the detailed data on these two characteristics in the table below.

Table 3: Proportioning of respondents per sex and age group in BATIBO council

Age group of respondent												Sex		
Less than 20	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65 & +	NSP/mis sing value	male	female	Total
5.2	8.2	9.5	9.6	9.5	7.4	7.7	5.8	6.4	7.4	15.2	7.8	50.5	49.5	100

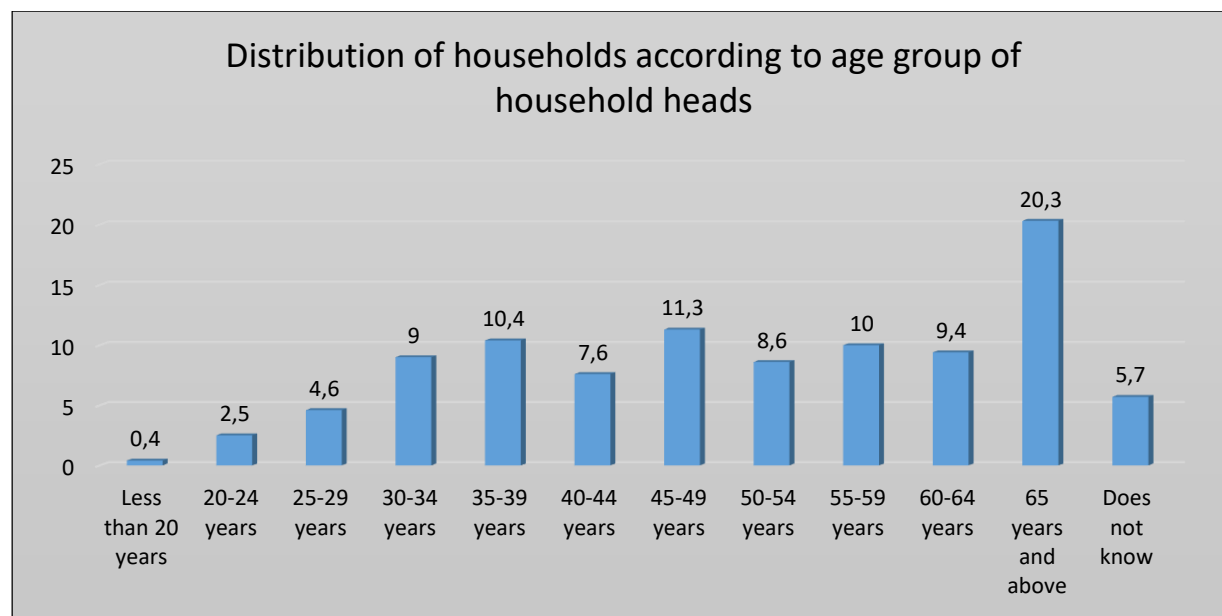
Source: Scorecard study, Batibo council November 2017

### 3.1.2. Characteristics of the household heads

The household head was characterized in age group of interval of 5 years as from the age of 20 and sex (male and female). Considering the data collected, about half of the household heads, in Batibo council are aged more than 50 with 2.9% of them who are less than 25 years old.

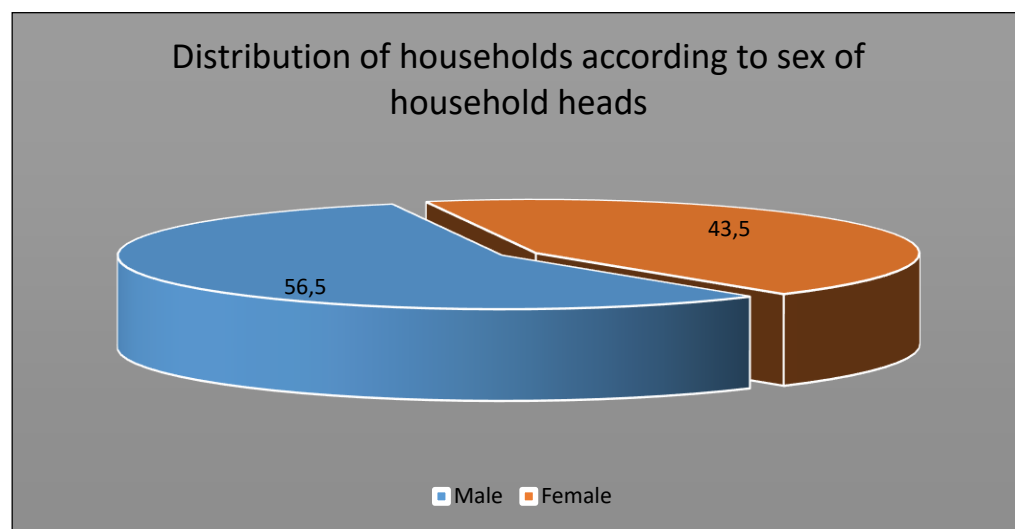
About the sex distribution males are dominant with 56.5%. We do know that culturally the man is the head of the family in this municipality. The high percentage of women may be related to their availability. For more illustration, you can find below a bar chart for age group of household heads followed by the pie chart for sex partitioning.

**Figure 1: Distribution (%) of household head per age group**



*Source: Scorecardstudy, Batibo council November 2017*

**Figure 2: Distribution of household head according to sex**



*Source: Scorecardstudy, Batibo council November 2017*

The results in this chapter is encouraging as the majority of participants are of an age above 30. On the other hand, more than 92% of household heads are above 30 years. We can also declare the sex distribution in participation, as respondents were given by then, equal chance to men and women to contribute to the assessment of the appraisal of the Batibo population about the sectors below in their municipality. To household head sex, men dominate with 56.5%.

## **3.2. Water Sector**

Water is essential to sustain life and a satisfactory supply must be available to all. Improving access to safe drinking-water can help in tangible health benefits. According to the World Health Organisation, every effort should be made to achieve drinking-water that is as safe as practicable. To be able to attain the above goal this section of the Scorecard study gives the opportunity to the population and the council to identify the gaps in the management of water in the Batibo municipality. In this part of the report we will have the findings about the type of water in the municipality, its availability and quality, how it is used, its costs and management and the expectation of the population.

### **3.2.1. Availability and usage of water services**

In this subsection water used in the households is classified into six different sources, namely: well and boreholes equipped with a pump, open pit and protected well, spring/river and pipe borne water. In this context, let's define the different type of sources of water above listed:

- Well equipped with a pump refers to a well equipped with a manual pump, the operation of which is likely to ease water sourcing during the supply process.
  - Open pit well is an unprotected well. It is the one for which one or both of the following assertions are true: (1) the well is not protected from run-off waters; (2) the well is not protected from birds droppings and animal dungs.
  - Protected well is a well, protected from run-off waters by a shaft lining or a well casing constructed above the ground level and a platform that channels overflowing water. Furthermore, a protected well is covered a bid to remain out of birds droppings and animal dungs.
  - Borehole equipped with a manually operated pump is a deep well dug or bored in a bid to attain ground waters. Tube wells/boreholes are made up of tubes or pipes whose holes of a smaller diameter are protected from collapsing and infiltration. Water is channelled through a tube well or borehole by a manually operated pump.
  - Spring/ river correspond to a spot where water comes out of the ground in a natural way. As to a river, it corresponds to surface water. Water flows into a river, dam, lake, pond and irrigation canals from which it is directly drawn.
  - Pipe borne water also called potable water or drinking water: this modality takes into account water that has undergone a prior treatment process in a bid to become



drinkable and which is later on channelled to the residential areas (CDE, CAMWATER...).

Still in the context of this exercise, a water source is known to be a public source when it is not run by the household.

### Availability of water supply schemes in the Batibo council area.

From the data collected, 96.7% of the respondents declared to have access to spring/river as public water source in Batibo municipality, 69.1% of households reported to have access to tap Water (Pipe borne water). According to the respondents, these two are the most available in their municipality. Other available sources of public water supply systems as declared by the household include, well equipped with pump (10.1%), boreholes equipped with manual pump (4.2%), open pit well (1.4%) and protected well (1.2%). The data can be observed in the table below.

**Table 4: Distribution(%) of households in BATIBO council per type of water systems available**

Public water source system:					
Well equipped with a pump	Open pit well	Protected well	Boreholes equipped with manual pump	Spring/ River	Access to tap water (pipe borne water)
10.1	1.4	1.2	4.2	96.7	69.1

*Source: Scorecard study, Batibo council November 2017*

### Use of water supply systems in Batibo council

After the classification of the different type of public water source system available in the locality, next was to assess the main public water sources used by the household of Batibo council.

From the results of the study, all the households (100%) of Batibo municipality use public water source.

Among them almost half of the household has tap water adduction as main public water source. This is followed by the spring/river which is the main public water source to 44.3% of the households in this municipality. The table below gives the exact results of this subsection..

**Table 5: Distribution (100%) of households in BATIBO council per water source used**

Proportion (%) of households using a public water source	Main public water source						
	Well with pump	Open pit well	Protected wells	Boreholes with manual pump	Spring/ River	Potable / tap water adduction	Total
100.0	4.1	0.6	0.3	0.9	44.3	49.8	100.0

*Source: Scorecard study, Batibo council November 2017*

It is really important to recall here that 100% of the respondents in Batibo council declared to have access to the public water source. The next step of the study will be the type of water they use and their appreciation of its management.

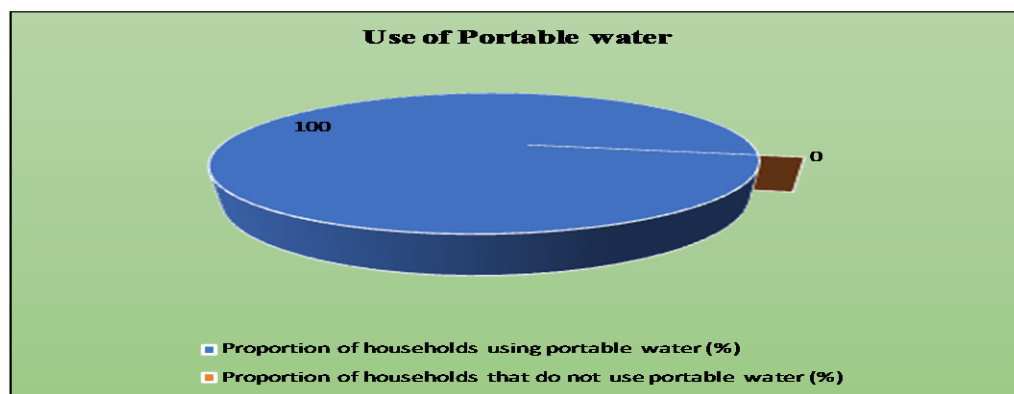
### 3.2.2. Cost and quality of water services

It is clearly known that good water has as first characteristics, the absence of odour, taste and colour. In this subsection the question is raised to have the perception of these characteristics by the households of Batibo municipality. Next is to know how much they pay and their appreciation, followed with their opinion about the maintenance before the collection of data on their expectations.

#### Quality of water services.

From the response obtained during the study, it was recorded that 100% of the household declared to have access to tap water as can be seen on the figure below.

**Figure 3:Proportion (%) of households in Batibomunicipality using potable water.**



**Source:**Scorecardstudy, Batibo council November 2017

Concerning the perception on the quality of water in Batibo municipality, 80.0% of households declared that the water they get from their main source is of good quality while 1.5% are indifferent. In terms of the three main water qualities of colour, odour and taste, 84.4% of the household declared that the water from their main water source does not have an odour nor taste against 15.6%. On the other hand, 82.5% said that it does not have a colour. More detail on the data is observed in the table below.

**Table 6: Distribution of households in Batibo council per characteristics declared of the main water source used**

Water Quality			Water has an Odor			Water has a Taste			Water has a Color		
Good	Bad	Indifferent	Yes	No	I don't know	Yes	No	I don't know	Yes	No	I don't know
80.0	18.5	1.5	15.6	84.4	0.0	15.6	84.4	0.0	17.5	82.5	0,0

**Source:**Scorecardstudy, Batibo council November 2017

### Cost of water services

The next aspect was to know the proportion of the household that pay for water at the main public water source they are using, the amount paid and their appreciation.

Just a very small proportion of the household 17.2% indicated that they pay for the water they get from the public supply system in their locality at an average monthly amount of 1,149 frs per household. This means that the remaining majority of about 4 out of 5 of the households don't pay for water that they use.

Among those who declared paying water at the main public water source they are using, 56.4% declared this amount to be high while 41.8% look at it average and 1.8% insignificant. The below table give details on the data.

**Table 7: Distribution(%) of households in Batibo council per characteristics declared of the cost of water**

Proportion (%) of households paying for water at the main public water source they are using (H07)	Average monthly expenditure (CFA Francs) for households which pay for water	Distribution(%) of households, paying for water, per appreciation of the amount paid			Total
		High	Reasonable	Insignificant	
17.2_	(1149.0)	56.4	41.8	(1.8)	100.0

**Source:**Scorecardstudy, Batibo council November 2017

() = sample too small to represent the entire household

### 3.2.3. Appreciation of water services.

This subsection contributes to know the reliability or availability of public main water source, the distance covered to fetch and the appreciation of the household. This will then continue with the management of breakdown, how long it takes to do that, who generally does it and the appreciation of the household in relation to all this.

From the results of the Scorecardstudy about 54.6% of the households declared to have water from public main source used available throughout the year. Among this 54.6% of households, 94.8% of them are having access to main public water source used throughout the day while almost none of the household declared their frequency to access to public main water source to correspond to their need for water.

This shows that though the 100% of households of Batibo council area declared to have access to drinkable water and public water source, very few are satisfied with their need for water.

Considering the distance and time they have to cover in order to fetch water, 31.1% of the household who get their water from public sources declared that they have their water on the spot, while 44.3 use at most 15 minutes to complete a round trip, 17.6% declared that they use between 15 and 30mins to fetch water and finally 7.0 % said they use more than 30minutes as can be seen on the table below.

**Table 8: Proportion (%) of households in Batibo council using a public main water source, with water available throughout the day/year following the distance required for a round trip to get water.**

Proportion (%) of households with water from public main source available throughout the year	Time taken to go fetch water and back				Total	Proportion (%) of households having access to main public water source used throughout the day	Proportion (%) of households whose frequency to access to public main water source used corresponds to their need for water
	On the spot	Less than 15 minutes	between 15 and 30 minutes	More than 30 minutes			
54.6	31.1	44.3	17.6	7.0	100.0	94.8	*

**Source:**Scorecardstudy, Batibo council November 2017

“\*” means almost nil

For breakdown of the main public water source 27.8% of the household have declared a breakdown in the course of the past six months in Batibo council area. Of those who reported these breakdown, 33.1% said it took between a month and three months for repairs to be done, 29.9% declared that those who do the repairs took less than a week, 25.3% said between a week and a month and finally 3.6% made it known that it took less than a week. The rest made up of 8.2% declared that there was no maintenance till then. See the table below for exact data.

**Table 9:Proportion (%) of households in Batibo council declaring a breakdown of the main public water source used in the course of the last six months**

Proportion (%) of households who have declared a breakdown of the main public water source used in the course of the past six months	Time taken for repairs					Total
	Less than a week	Between a week and a month	Between a month and three months	More than three months	Not yet	
27.8	29.9	25.3	33.1	3.6	8.2	100.0

**Source:**Scorecardstudy, Batibo council November 2017

In the following paragraph, we continue to look at those who did the repairs on the water supply system when it had a breakdown in the course of the last six months. From the data collected, 54.0% of the household declared that the water management committee resolved the problem of

water breakdown, 24.4% gave credits to the village/quarter head for the repairs, 7.8% said repairs was done by elites of the area, while none declared the repairs to have been done by the mayor, the State or administrative authorities and 17.3% said other individuals did the repairs. See the exact data in the table below.

**Table 10: Proportion (%) of households in Batibo council who have declared a breakdown within the last six months and the institution/person repairing the breakdown**

Proportion (%) declaring that the breakdown declared was resolved by the :						
Mayor	State (government services)	Elite	Water Management Committee	village/quarter head	Administrative Authorities	others
0.0	0.0	7.8	54.0	24.4	0.0	17.3

**Source:**Scorecardstudy, Batibo council November 2017

This part of the report is to assess the need of the household in terms of potable water supply, to whom it was addressed and whether the need was met. To this preoccupation, 26.6% of the household have expressed a need for potable water among whom 51.0% expressed this need to the village/quarter head, 38.3% to the mayor, 35.1% to the water management committee, 28.5% to elites, 8.6% to the Administrative Authority, 5.5% to Camwater/SNEC and, 1.0% to the State, while 17.4% did express this need to some other persons. For those who expressed these need for potable water in the last 6 months, less than 1 out of 4 declared their needs to have been met. The recorded data are in the table below

**Table 11:Proportion (%) of households in Batibo council who expressed a need for potable water in the last six months and their needs were met.**

Proportion (%) of households which have expressed a need in potable water in the last six months	Amongst the households who have expressed a need, proportion (%) whose need was met:								Proportion (%) of households whose need expressed for water was met
	To the Mayor	To the State (government services)	To an Elite	To the Water Management Committee	Quarter headTo the village/	To the Administrative Authority	To Camwater/SNEC	To others	
26.6	38.3	1.0	28.5	35.1	51.0	8.6	5.5	17.4	23.7

**Source:**Scorecardstudy, Batibo council November 2017

Among those whose need expressed for potable water was met, almost none of them was satisfied within the next coming three months as indicated in the following table.

**Table 12:Distribution of households in BATIBO council whose need for potable water was met per time taken for their needs to be satisfied**

Time taken to satisfy their need expressed for potable water			Total
1=less than a month	between one and three months	3=more than three months	
*	*	*	100.0

**Source:**Scorecardstudy, Batibo council November 2017

“\*” means almost nil

### 3.2.4. Reasons for the non-satisfaction of the household

In this subsection the study has as objective to assess the level of satisfaction of the household with the water provision in the municipality.

From the results of the study, about 1 out of 2 households declared that they are not satisfied by the provision of tap/drinkable water in their neighbourhoods. Out of those who reported that they are not satisfied with water services rendered in their community, 64.2 % of them declared that their non-satisfaction is explained by the fact that the water points were insufficient, 44.6% attributed their dissatisfaction to far distances, 39.5% said the water quality is poor, 37.7% talked



of the management of water points, 22.5% attributed to lack of/Slowness of maintenance in case of breakdown, 7.6% justified with high cost of water provision while 30.6% gave other reasons. These data are recorded in the below table.

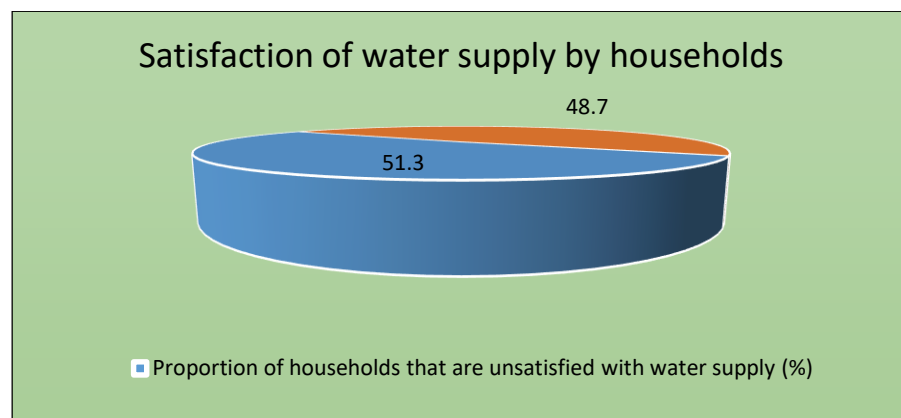
**Table 13: Proportion (%) of households not satisfied and reasons for non-satisfaction with the water provision in Batibo council.**

Proportion (%) of households not satisfied by the potable water provision	Amongst the households not satisfied, proportion (%) whose reason for their not being satisfied is:						
	Far distance of the water point	Poor water quality	Insufficient water points provision	Management of water points	Lack of / Slowness of maintenance in case of a breakdown	High cost of water provision	Others
51.3	44.6	39.5	64.2	37.7	22.5	7.6	30.6

**Source:**Scorecardstudy, Batibo council November 2017

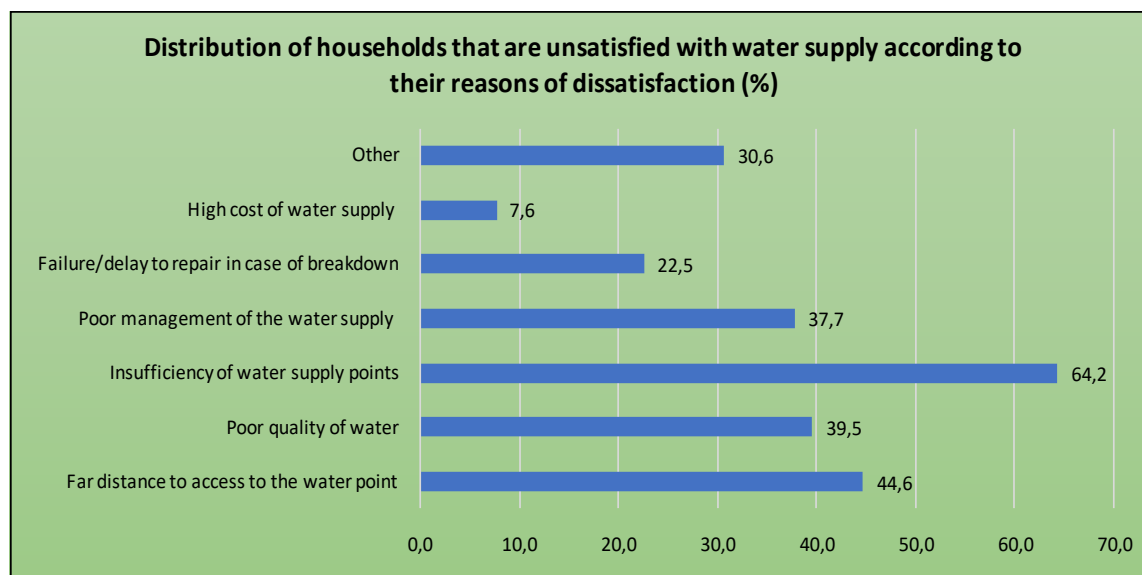
The distribution of households satisfied with potable water provision and unsatisfied household according to the reason of none satisfaction is illustrated in the following pie chart and bar chart respectively.

**Figure 4:Proportionof households(%) satisfied with the potable water provision in Batibo municipality**



**Source:**Scorecardstudy, Batibo council November 2017

**Figure 5: Distribution of households unsatisfied with water supply according to their reason of dissatisfaction**



**Source:**Scorecardstudy, Batibo council November 2017

### 3.2.5. Main expectations in the services rendered in the domain of water

Here we analyse the expectations of the household in terms of water supply in Batibo municipality. The results show that about 7 out of 10 households said they need more water points, more than half were of the opinion of an improvement in terms of the management of the existing water points, around 1 out of 3 said they wanted an improvement in quality, the same proportion talked of repair works to be carried out on the damaged water points and 8.7% made mention of the fact that they wanted the reduction of prices to access water while 30.2% mentioned others. The picture of the expectations is in the following table.

**Table 14: Proportion (%) of households in BATIBO council according to expectations in water supply:**

Proportion (%) of households whose expectation of water provision is :					
More/additional water points	An improvement in terms of the management of the existing water points	Repairs works should be carried out on the damaged water points	An improvement of the quality of water in the existing water points	Reduction of prices to access water;	Others
71.5	52.7	34.5	34.7	8.7	30.2

**Source:**Scorecardstudy, Batibo council November 2017

### **3.2.6. Synthesis in the perception of services in the domain of water and suggested areas of improvement**

The findings reveal an important point in the sector of water when we realize that the entire household of Batibo municipality is using a public water source and they all have access to public potable water source. This continues to be interesting when we discover that around 1 out of 2 households have water from public main source available throughout the year.

But still, the opinion of the household counts since they are the ones using the water. Around 1 out of 2 households is not satisfied with the potable water provision. More than half of unsatisfied households give their reason to be the insufficiency of water provision points. This correlate with their expectations as around 2 out of 5 of the household has as expectations the creation of more water points and more than half proposed a good management of the existing water points.

If the proposition from the household is considered, it will cost less to the municipality to satisfy the greatest number of its household in terms of water services.

Just like water, health is a very important component of life. During the study, it was imperative to capture the opinions of households with regards service delivery in the health domain. The following section will be looking at the availability, usage, cost/ quality of health services offered in Batibo Council area.

### **3.3. Health Sector**

Our health affects everything from how much we enjoy life to what work we can perform. Regardless of our age, gender, socio economic or ethnic background, we consider our health to be our most basic and essential asset. The old adage “health is wealth” summarizes the above assertion. This sector could not be left out by the Scorecardstudy.

In this study, the various categories of health center involve the hospital/CMA (Sub Divisional Hospital), the public integrated health center and the private health center. This is known as follows:

- Hospital/CMA: this is any health care unit that is headed by a trained residential medical doctor.
- Public integrated center: it is a health center owned by the state and headed by a nurse or senior nurse as chief of center.
- Private health center: this is a health care unit owned by a private person or group of persons and headed by a trained senior nurse.

This section reserved to health,permits us toget the opinion of the household on the type of health services available in Batibo municipality,the cost and quality of health services, the appreciation of health services, reasons for the non-satisfaction of the household and expectations from the services rendered to them in this domain

#### **3.3.1. Availability and usage of services in the health domain**

In this subsection we intend to know the nearest health care unit and time taken to reach there and the main choice of health facilities by the household.

##### **Availability of services in the health domain**

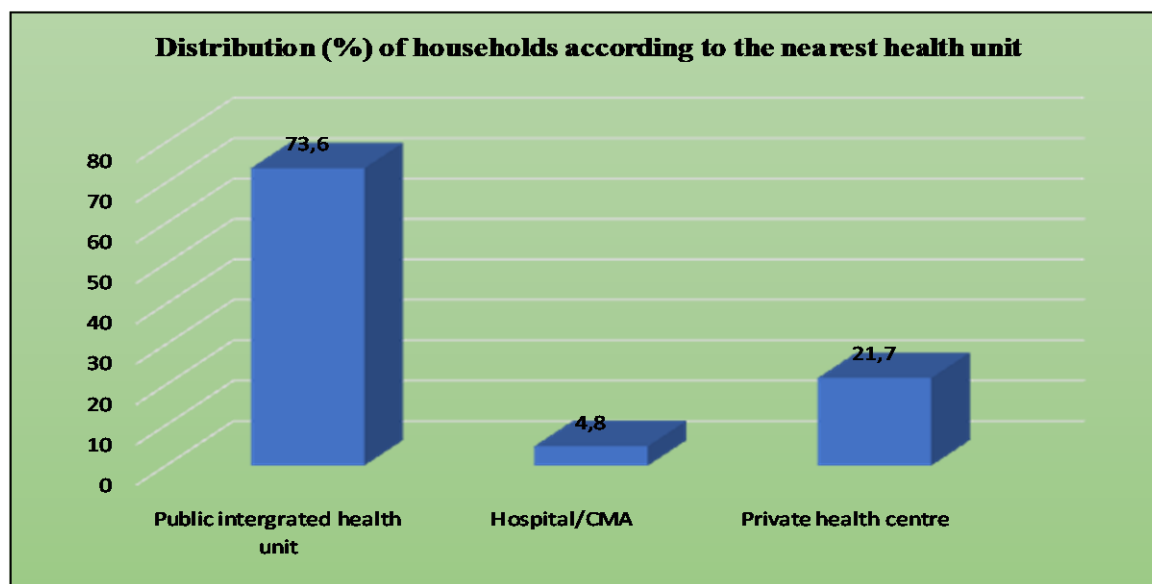
The results of the study in this subsection shows that 73.6% of households declared that the Public integrated health centre is the nearest health care facility to them, 21.7% declared that a Private health centre is the nearest while the remaining 4.8% declared it to be the Hospital/CMA.

Concerning the time taken to reach a health facility, 51.9% of the households declared that they take more than 30 minutes, and 30.7% take between 15 and 30 minutes and just 17.4 take less than 15minutes to reach the nearest health facility. We observe that more than half of the households use more than 30 minutes which is too long for a time to take in order to reach a

health facilities especially in the case of emergencies.

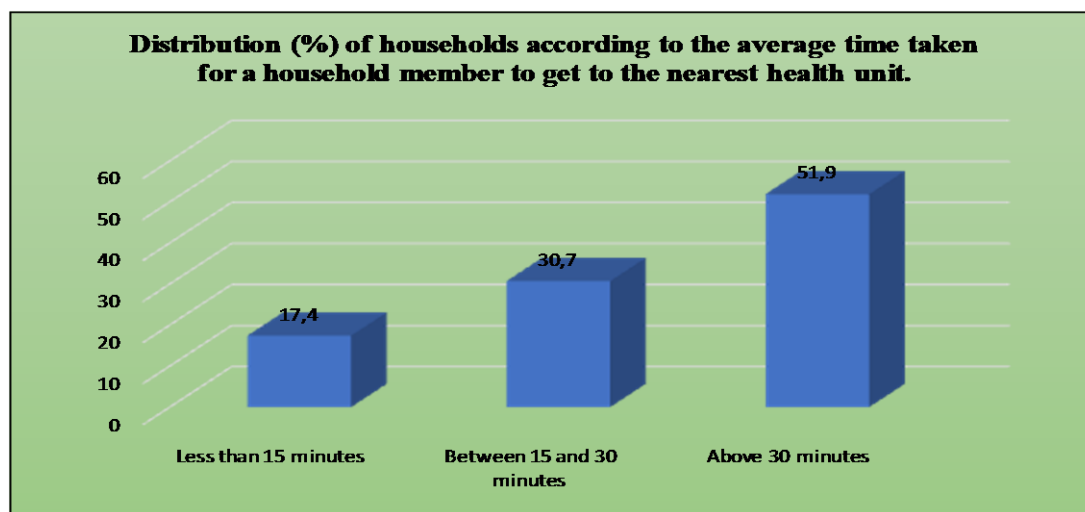
This data above can be illustrated in the two bar charts below respectively for proportion of households per nearest health care unit and proportion of household per time taken to reach there

**Figure 6: Distribution (%) of households according to the nearest health facilities**



Source: Scorecardstudy, Batibo council November 2017

**Figure 7: Distribution(%) of households according to time taken to get to the nearest health unit**



Source: Scorecardstudy, Batibo council November 2017

### Use of services in the health domain

About the preference of households in terms of the health care units, 40.3% of the household declared that, when they are in need of medical services they prefer integrated health centres, 39.3% said that they prefer a hospital/CMA and 19.5% prefer private health centres, 0.7% traditional healers while 0.2% talked of others. It is necessary to mention other health care facilities which none of the household declared any of them to be their main choice in terms of health care facilities; they are the medical store, a medical staff member and home treatment/self-medication. The data are found on the table below.

**Table 15: Distribution(%) of households per main choice of health solutions, in Batibo council.**

Preferences of the household in terms of health care facilities								Total
Public integrated health center	Hospital/ CMA	Private health center	Traditional healers	At the medical store/kiosk	Go to a medical staff member	Treat at home/self-medication.	others	
40.3	39.3	19.5	0.7	0.0	0.0	0.0	0.2	100.0

**Source:**Scorecardstudy, Batibo council November 2017

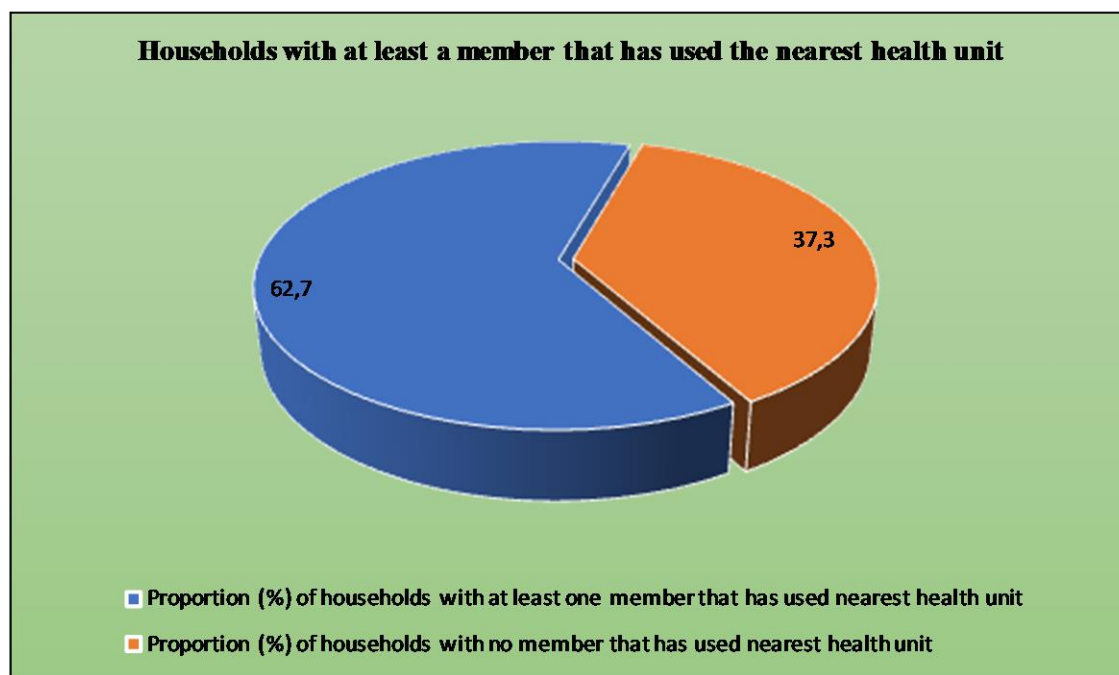
.

### 3.3.2. Quality of health services

This subsection will provide information on the households that use the nearest health care unit and the qualification of the head of the health care facility.

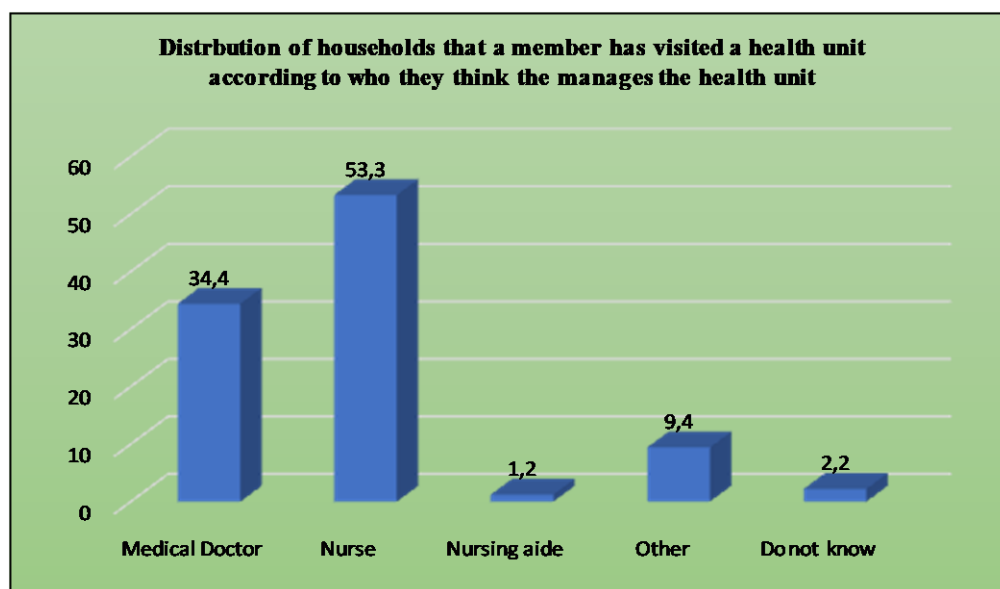
From the study results, 62.7% of the household is using the nearest health care unit. Among this proportion of households using the nearest health center, 53.3% declared that the unit is headed by a Nurse, 34.0% by a Medical doctor, 9.2% talked of others while 1.2% mentioned a nurse aider. The rest representing 2.2% responded by do not know. The following pie chart and bar chart show the distribution of households using the nearest health care unit and the head of the health care unit respectively.

**Figure 8: Distribution(%) of households using the nearest care unit within the last 6months**



Source:Scorecardstudy, Batibo council November 2017

**Figure 9: Distribution (%) of the households using the nearest health centre according to the Head of health care unit declared**



Source:Scorecardstudy, Batibo council November 2017



### 3.3.3. Characteristic of health units visited by a household member and cost of the service

The characteristics of the health care unit here is mainly in terms of personnel, basic materials/equipment, hospitalisation infrastructures and equipment, pharmacy/pro-pharmacy and drugs. From the results of the study, 94.9% of the households declared the health care unit visited to have personnel, 95.5% for availability of basic materials, 98% for existence of hospitalization rooms, 98.7% for existence of pharmacy/pro-pharmacy and 83.8% declared the availability of drugs. Out of those who declared the availability of beds, 26.2% declared the unit to have at least 5 beds, 37.3% said between 5 and 10 bed while 16.9% talked of more than 10 beds and 19.6 do not know. For the existence of a pharmacy/pro-pharmacy 98.7% declared its existence and 83.8% talked of the availability of drugs in the health care units they visited within the last 6 months. The table following shows the recorded data from the study exercise.

**Table 16: Characteristics of health care units visited by the household in Batibo municipality units**

Characteristics declared by households about the nearest health center during their last visit									
Presence of personnel	Availability of basic material/equipment	Existence of hospitalization hall/rooms	Number of bed found in the hospitalisation halls/rooms				Existence of a pharmacy/pro-pharmacy	Availability of drugs	
			At least 5	Between 5 and 10	More than 10	Do not know	Total		
94.9	95.5	98.0	26.2	37.3	16.9	19.6	98.7	100.0	83.8

**Source:** Scorecard study, Batibo council November 2017

### Cost of the health services

About the cost of health and its appreciation, the results reveal that 94.1% of household declared to have paid for consultation fees. Among this number, 53.7 declared between 500 and 1000 FCFA, 34.8% said 500FCFA while 11.5% talked of more than a thousand francs.

**Table 17: Appraisal of the amount paid in the health care unit**

Proportion (%) of households that paid consultation fees at the nearest health care unit	Average amount paid for consultation fees (FCFA)			Distribution(%) of households paying consultation fees, per appreciation of amount paid			Total
	Less than 500 FCFA	Between 500 and 1000 FCFA	More than 1000 F CFA	High	Reasonable	Insignificant	
94.1	34.8	53.7	11.5	39.0	58.9	2.1	100

**Source:** Scorecardstudy, Batibo council November 2017

### 3.3.4. Reasons for the non-satisfaction of the household

In this subsection we want to know the level of satisfaction of the household to the health care services provided in Batibo municipality. The data shows that 84.7% of the household declared that the reception of the medical staff was good while 10.7% declared it average and 4.6% said it was bad. The figures are presented in the table below.

**Table 18: Distribution(%) of households in BATIBO council attending the nearest health care unit according to the reception of the medical staff.**

Distribution(%) of households attending the nearest health care unit, according to the reception of the medical staff:			
<i>Good</i>	<i>Average</i>	<i>Bad</i>	<b>Total</b>
84.7	10.7	4.6	100

**Source:** Scorecardstudy, Batibo council November 2017

The declaration of satisfaction or not continues to be analysed with the study on whether the health problem have been solved and if the households are satisfied and if not their reasons of non-satisfaction were recorded. To this issue about 2 out of every 5 households declared that majority of health problems in the village have been solved and 33.8% declared that they were not satisfied with the health services rendered.

Amongst the households not satisfied, 60.9% declared the reason to be poor quality/insufficient equipment, 55.3% give as reason the poor quality of service provided, 53.1% mentioned far distance to access the health care facilities, 47.4% talked of insufficiency of drugs, 46.6% gave the reason to be insufficiency of existing health care unit, 43.7 said poor management of the health care units, 38.0% about high cost with regards to healthcare access, while 23.8 declared the non –satisfaction to be because of defaults related to the health care unit staff and 25% said other reasons. All these figures are reported in the below table.

Table 19: Solving of health problems in the village and reasons of dissatisfaction

Proportion (%) of households whose at least one household member declared that majority health problems in the village have being solved	Proportion (%) of households not satisfied with health services rendered	Amongst the households not satisfied, proportion (%) whose reason for their non-satisfaction is :								
		Far distance to access the health care units	Poor quality of services provided	Insufficiency of existing health care units	Defaults related to the health care unit staff	Poor management of the health care units	insufficiency of drugs	Poor quality/insufficiency of equipment	High cost with regards to health care access	others
41.7	33.8	53.1	55.3	46.6	23.8	43.7	47.4	60.9	38.0	25.0

Source: Scorecardstudy, Batibo council November 2017

### 3.3.5. Main expectations in the services rendered in the domain of health

In this paragraph, we gathered the expectations of the household of Batibo municipality in respect to the services rendered in the domain of health. As results to the studyexercise, 73.1% declared their expectations to be the addition of equipped health care units, 58.1% mentioned provision/supply of drugs, 41.8% additional care units. 28.5% transfer of a staff member while 38.4 talked of others. See below the collected data from the Scorecardstudy.

**Table 20: Expectations in terms of health services in BATIBO council.**

Proportion (%) of households whose expectations in health services are :				
Additional health care units	Provision/supply of drugs	Provision of additional staff	Equipped health care units	Others
41.8	58.1	28.5	73.1	38.4

**Source:** Scorecard study, Batibo council November 2017

### **3.3.6. Synthesis in the perception of services in the domain of health and suggested areas of improvement**

Concerning the health domain and from the results of our study, we can gather some important points which can contribute to improve in the services provided. Some weak points here identified can be among many others, the percentage of private health care units representing about 1 out of 5 nearest health unit; more than half of the households take more than 30mins to reach the health unit and only 62.7% of the household is using the nearest health unit. Among the households who declared to have paid the consultation fees, 65.2% paid more than 500 FCFA, with 11.5% haven paid more than 1000 FCFA which looks high.

On the other side, we realized that the household that visited the health care units declared, in a very high majority that they have personnel and equipment up to a certain standard. Among those who are using the nearest health unit 34.0% declared these centres to be headed by a medical doctor and 53.3% by a nurse.

Taking into consideration these findings, the expectations of the households can be additional to this in view to improve on the services rendered in the domain of health in this municipality.

Just like health, education is a central aspects of humans. This explains why, during the Scorecard study, the education sector (basic, secondary and vocational training) was given adequate attention as it was necessary to capture the perceptions of the households with regards the availability, cost/quality, their general appreciation of services rendered in this domain as well as their dissatisfactions and expectations. The following section gives a vivid idea of services rendered in the domain of education in Batibo Council area.

### **3.4. Education Sector**

The sector of education deals with four cycles including nursery, primary, secondary and vocational training. The essence of the study was to get the availability of school per cycle, the services provided and its cost, the level of satisfaction of the household in terms of personnel, equipment and structures and their expectations.

#### **3.4.1. Availability and usage of services in the domain of education per cycle**

In this subsector we will carry out our analysis per educational cycle. According to the results, 91.7% of households declared to have the nursery educational cycle in their village. The average number of children attending the nearest nursery school was declared to be 1.5. About the distance covered by the children to go to these schools, 56.6% declared less than 1km, 37.5% between 1 and 5km and 5.9% of households said more than 5km. As average time taken to reach their school, this pupils trek for 41mns.

For primary school, 95.31% declared the availability in their village with an average of 2.1 children attending the nearest school per household. The distance covered by the children was declared by 60.1% of the households to be less than 1km, 35.6% said between 1 and 5km and 4.3% put it at more than 5km. The average time to reach the school is 41mns trekking.

Concerning the secondary educational cycle, 92.5% of the household declared that they have it in their village with an average of 1.9 children who are attending the nearest ones. About 2 out of every 5 of the household declared that the children cover 1km to the school, half of the household said between 1 and 5 km and around 1 out of every 10 declared more than 5km to arrive in school with an average of 52mns trekking to arrive in school. The table below is carrying the exact data as narrated above.

**Table 21 : Type of Educational cycle and professional training**

			Average distance covered by the children to go to school					
	Proportion of households belonging to a village with an educational cycle	Average number of children from the household attending the nearest school	Less than 1 km	between 1 km and 5 Km	More than 5 km	Do not know	Total	Average time spent by the children to reach the school on foot
Nursery	91.7	1.5	56.6	37.5	5.9	0.0	100.0	41.3
Primary	95.1	2.1	50.1	35.6	14.3	0.0	100.0	41.3
Secondary	92.5	1.9	39.3	50.3	9.7	0.6	100.0	52.2

Source: CRCMstudy, council 2017

### 3.4.2. Quality of services in the education sector per cycle

This subsection gives some characteristics of the various school available in Batibo council precisely on the level of the cycle, existence of infrastructures, availability of equipment and of the distribution of textbooks in school.

Concerning the nursery school, 83.9% of the households declared that the school has a classroom per class level, 87.3% declared the availability of benches for all pupils to sit on and 12.8% of the household acknowledge the distribution of textbook to the pupils.

About the primary school educational level, 99.4% of the respondents declared that it has a complete cycle, 86.4% said the school has a classroom per class level while 80.3% declared the availability of benches for all pupils and 7.4% of households do mention the distribution of textbooks at this educational level.

For secondary educational level, concerning the cycle, 99.2% of respondents declared to have a complete cycle in school for the 1<sup>st</sup> cycle while 78.7% declared a complete cycle for the 2<sup>nd</sup> cycle. About infrastructures, 94.9% of households declared that the school has a classroom per class level in secondary educational cycle, 90.2% of the respondents declared that there are benches for all students to sit on in secondary schools. It is necessary to mention here that there is no vocational training centre in Batibo. The information is detailed in the table below.

**Table 22: Characteristics of school infrastructure**

Educational cycle		Characteristics declared about the school attended				
		<i>Has a complete cycle</i>	<i>Has A complete workshop</i>	<i>Has a classroom per class level</i>	<i>Availability of benches for all pupils to sit on</i>	<i>Distribution of school textbooks in the school</i>
Nursery				83.9	87.3	12.8
Primary		99.4		86.4	80.3	7.4
Secondary	1 <sup>st</sup> cycle	99.2		94.9	90.2	
	2 <sup>nd</sup> cycle	78.7				
Vocational training						

**Source:** Scorecard study, Batibo council November 2017

In this subsection the study targeted the average number of children per classroom and the appraisal of teacher's presence in school. From the results of the study, 41.1% of households declared that less than 30 children are in a classroom at the nursery education level, 34.3% declared same for primary school and 6.3% for secondary schools.

For the number of children to be between 30 and 60 in a classroom, 33.3% of households declared for nursery educational level, 41.6% of households for primary schools and 38.5% for secondary schools while 4.3% of households declared that an average number of children in a classroom is more than 60 for nursery educational level 10.6% said it for primary schools and 39.9% for secondary educational level.

The appraisal of the teacher's presence in classroom was another point raised in the study. For nursery educational level, 91.2% of households declared regular presence of the teacher, 81.4% at the primary education and 83.0% in the secondary school. In the same order 5.1% of households declared for averagely regular at nursery, 12.9% at primary schools and 10.7% of households for secondary education. Still at the nursery educational level 1.7% declared the teacher to be irregular in the classroom, 5.8% at the level of primary education and 4.6% of households declared at the level secondary school.

Some households having children who are going to school declared "do not know" as you can see in the table below.

**Table 23: Number of pupils and appraisal of teacher's presence in school**

	Proportion (%) of households in BATIBO council whose children are going to school and are in classrooms with an average number of pupils.				Proportion (%) of households in BATIBO council according to the appraisal of the teacher's presence in classroom.				Total
	Less than 30	Between 30 and 60	More than 60	Do not know	regular	Averagely regular	Irrégular	Do not know	
Nursery	41.1	33.3	4.3	21.3	91.2	5.1	2.0	1.7	100.0
Primary	34.3	41.6	10.6	13.5	81.4	12.9	5.8	0.0	100.0
Secondary	5.3	38.5	39.9	15.3	83.0	10.7	4.6	1.6	100.0

Source: Scorecard study, Batibo council November 2017

### 3.4.3. Cost for education in Batibo municipality

In Cameroon, according to the norms of basic education, the tuition fee at the level of nursery and primary education is free. But in regards to the results obtained from the study exercise, this is not the case in Batibo council area.

The data collected reveals that for the cost of education in Batibo municipality, 100% of the household declared that they paid the required fees (tuition fee, registration fee and PTA fee) for the education of their children at all the levels. The average cost per student yearly shows 21,799frs for nursery school, 6,515frs for primary school and 24,872frs for secondary education.

For the appraisal of the amount paid, the following appreciation of was obtained:

- At the level of nursery education 85.4% of the households paying school fees required declared the amount to be high while 14.6% said it was reasonable.
- At the level of the primary education, 99.4% of the households declared to have paid the required school fee for their children with 63.4% who said that the amount was too high.
- At the secondary educational level, 100% of households have paid the required school fee and among them 63.4% declared the amount high.
- The table below gives more details on the data registered during the study exercise.



**Table 24: Appraisal of the amount paid for education by household in Batibo**

			Distribution(%) of households paying fees required per appreciation of the amount paid				
			High	Reasonable	Insignificant	Not concerned	
	Proportion (%) of households having paid the required fees for education	Average school fees expenditure spent throughout a school year per child (CFA Francs)					
Nursery	100.0	21.799	85.4	14.6	0.0	0.0	100.0
Primary	99.4	6.515	63.4	34.5	1.0	1.1	100.0
Secondary	100.0	24.872	83.5	15.6	0.0	0.8	100.0

**Source:**Scorecardstudy, Batibo council November 2017

### 3.4.4. Appreciation of services in the domain of education per cycle

This portion of the report talks about the institution/person who repairs damaged classrooms. The Parent Teacher Association (PTA) seems to be the one doing most of the repairs. In fact, at the level of nursery school level 86.9% of the households declared that the damaged classrooms were repaired by the PTA, 95.7% of households said the PTA at the primary educational level and 95.3% declared it done by the PTA as concerned the secondary schools. More details are found in the table below.

**Table 25: General state of classrooms**

Educational cycle	Proportion (%) of households declaring that the damaged classrooms were repaired by					
	The PTA	Mayor	A village organisation	MINEDUB/MINESEC /MINEFOP	The Elites	Others
Nursery	86.9	2.9	17.0	11.0	8.4	11.0
Primary	95.7	2.9	19.3	11.8	12.1	11.8
Secondary	95.3	7.1	13.9	11.0	9.3	11.0

Source: Scorecardstudy, Batibo council November 2017

### 3.4.5. Reasons for the non-satisfaction of the household in the domain of education per cycle

In this part of the report we will sort out the level of dissatisfaction of the household and the reason in terms of education services. At this point, 12.6% said they are not satisfied with the educational services at the nursery educational level, 28.1% concerning the primary schools and 24.3% for secondary educations. The reasons declared here for non-satisfaction are the

insufficiency of teaching staff for the three cycles namely nursery school, primary school and secondary school with the declaration of (67.2)%, 80.4% and 65.7% households respectively. Also declared was 59.2% of household with children in primary school and 51.4% in secondary school that the schools have insufficient equipment. The reason for non-satisfaction also come from 57.9% of households in primary and 56% at nursery school who deplored high tuition fees. Some of the reasons of non-satisfaction raised by households and of high importance can be identified in the table below.

**Table 26: Proportion (%) of households in BATIBO council according to the level of satisfaction and the reasons of dissatisfaction, in terms of education services.**

Educational cycle	Proportion (%) of households not satisfied with educational services)	Amongst the households not satisfied, proportion (%) whose reason of dissatisfaction is :								
		Far distance to access educational services	Insufficiency of classrooms	Insufficiency of equipment	Insufficiency of schools /vocational training centers	Insufficiency of teaching staff	The non-distribution of school textbooks	Poor results	High tuition fees	Others
Nursery	12.6	(46.0)	(46.8)	(50.0)	(26.5)	(67.2)	(54.5)	(14.2)	(67.3)	(8.7)
Primary	28.1	42.0	47.9	59.2	32.1	80.4	63.9	48.5	57.9	12.0
Secondary	24.3	46.1	41.3	51.4	24.8	65.7	37.3	44.1	56.0	19.9
Vocational training	0.0	*	*	*	*	*	*	*	*	*

**Source:**Scorecardstudy, Batibo council November 2017

“\*” means almost nil.

() means sample too small to represent the household.

### 3.4.6. Main expectations in the services rendered in the domain of education per cycle

The expectations of the household in this session are more declared on the recruitment of more teaching staff for all the three cycles, followed by the reduction of educational cost and the construction of more schools. The results can be observed in the table below.

**Table 27: Expectations in terms of education in BATIBO council**

Educational cycle	Proportion (%) of households whose expectations in the domain of education are :								
	To have a school located nearby	Built more classrooms	Add additional equipment	Create more schools /vocational training center	Recruit more teaching staff	Distribute school textbooks	Improve the quality of the results	Reduce the costs	Others
Nursery	7,9	13,2	12,9	4,1	13,8	15,0	7,7	12,1	4,1
Primary	17,2	29,3	34,2	13,8	45,1	42,4	29,7	31,6	6,3
Secondary	16,9	25,7	26,2	16,8	33,6	25,0	25,2	30,7	11,9

*Source:Scorecardstudy, Batibo council November 2017*

### **3.4.7. Synthesis in the perception of services in the domain of education and suggested areas of improvement**

Concerning the educational domain, we observed that the number of households that declared not being satisfied is about 1 out of every 4 for primary and secondary educational level and less than 1 out of every 8 for nursery school level of education. More than 90% of households declared to have the three educational level in their village.

For improvement the participation of the household can be extracted from their expectations in this study. In fact, the most declared expectations remain the recruitment of more teaching staff for all the three cycles, the reduction of the educational cost and the construction of more schools.

We observed that the improvement will not demand too much when we take into consideration the above appraisal of the beneficiaries which are households.

Away from the education sector, Councils in Cameroon today have been given the power to promote and foster local development following the law on decentralization. The following section aims at capturing data about the council services delivered, the household's appraisal of such services, as well as the involvement of the population in the functioning of the council.

## **1.4. Services Offered by the Council**

Decentralization constitutes the legal, institutional and financial means through which regional and local authorities operate to foster local development with the active involvement of the household in Cameroon. Through the devolution of powers to local entities, local development could be enhanced and a contribution made to the fight against poverty. Through decentralisation, some services and competences have been handed over to the local councils and we will be presenting our findings in this chapter as per the information obtained from the field concerning some services offered by the Batibo council. The study orientation in this section is towards the availability and usage of council services, the cost and quality, the appreciation of these council services by the household with their reason of dissatisfaction and their expectations.

### **3.2.1. Availability and usage of council services**

Among many services rendered by the Batibo council to its household, those selected for the Scorecard study include: Issuance of a birth certificate, Certification of official documents, Building permit, Death certificate, Marriage certificate, Certificate of Residence, Approval/Validation of localization plans, Request for Information and other services.

In this part of the study the three indicators are involved, service requested for in the last 12 months by a member of the household, the opinion of satisfaction (if good) for the quality of the service and the time taken.

From the data collected for the study exercise, at least a household reported to have requested one, some or all of the above listed service(s) within the past 12 months

As a result, the most requested service was the issuance of a birth certificate with 17.6% concerned among whom 89.7% who are of the opinion that the reception was good. Still for the issuance of birth certificate 57.4% declared to have been served between one day and a week, 19.5% between a week and a month and 10.7% in less than a day while 7.7% declared the process on going after three months.

The second most requested service here is the Certification of official documents with 11.5% household concerned among whom 79.3% declared that the reception was good while 70.8% were served in less than a day and 23.4 between one day and a week while all were in less than three months. See the table below for more results of this subsection.

**Table 28: Proportion of households in BATIBO council which have requested for a council service in the last 12 months.**

<i>Services</i>	<i>Proportion of households which have requested for a service in the last 12 months</i>	<i>Proportion of households which are of the opinion that the reception for the said service was good</i>	<i>Time spent to obtain the services</i>					
			<i>Less than a day</i>	<i>Between 1 day and a week</i>	<i>Between a week and a month</i>	<i>Between one month and three months</i>	<i>More than three months</i>	<i>Ongoing</i>
Issuance of a birth certificate	17.6	89.7	10.7	57.4	19.5	3.3	1.4	7.7
Certification of official documents	11.5	79.3	70.8	23.4	0.0	5.8	0.0	0.0
Building permit	1.0							
Death certificate	0.7	*	*	*	*	*	*	*
Marriage certificate	4.1	*	*	*	*	*	*	*
Certificate of Residence	0.0	*	*	*	*	*	*	*
Approval/Validation of localisation plans	0.3	*	*	*	*	*	*	*
Request for Informations	3.6	*	*	*	*	*	*	*
Others	1.0	*	*	*	*	*	*	*

**Source:**Scorecardstudy, Batibo council November 2017

“\*”means almost nil.

### 3.2.2. Cost and quality of services within the council institution

The study continued to assess the appreciation of the household on the time taken to be served and what was spent for the service. For the two main services as per the above, among the households who declared to have requested the issuance of a birth certificate and those for certification of documents, 6.8% and 3.8% considered that the time taken to be served was long or too long while 3.4% and 1.5% paid a tip to obtain the services respectively. About the question to know the cause of time to be lengthy or very lengthy for a service rendered the answer was negligible as observed in the following table.

**Table 29: Distribution(%) of households whose members consider that the time taken to be served was long or too long, the reason of slowness/bottlenecks and households who have paid a tip to obtain the services**

<i>Services</i>	<b>Proportion (%) of households who consider that the time taken to be served is long or too long</b>	<b>Cause of time to be lengthy or very lengthy for a service to be rendered</b>				<b>Proportion (%) of households who have paid a tip to obtain the services</b>
		<i>Unavailability of council staff / absent</i>	<i>The absence of working material</i>	<i>Corruption</i>	<i>Other factors</i>	
Issuance of a birth certificate	6.8	*	*	*	*	3.4
Certification of official documents	3.8	*	*	*	*	1.5
Building permit	0.2	*	*	*	*	0.2
Death certificate	0.0	*	*	*	*	0.0
Marriage certificate	0.0	*	*	*	*	0.3
Certificate of Residence	0.0	*	*	*	*	0.0
Approval/Validation of localisation plans	0.3	*	*	*	*	0.0
Request for Informations	0.9	*	*	*	*	0.5
Others	0.5	*	*	*	*	0.0

**Source:**Scorecardstudy, Batibo council November 2017

“\*” means almost nil.

### 3.2.3. Appreciation of council services

This part the work was to know the degree of dissemination of information on council’s actions and household’s involvement in the council’s activities. From the study’s results, 51.9% of households declared that within the past 12 months they have been involved or were informed to support the village/quarter in development actions, followed by 43.1% of households that were involved or informed of village/quarter in planning, 29.5% in the village/quarter in programming and budgeting sessions and 29.4% reporting to have participated in village assemblies.

It seems necessary to mention here that the involvement or being informed on the council activities was declared the lowest as concerned communication on the council annual budget and communication on income and expenditures of the council as this is known to be 10.7% and 8.8% respectively in the table above. If the local household is not part of the planning process in the

councils especially when it comes to issues related to resource management, then they cannot really participate in the development process of their localities. The table below gives the exact data of the study concerning this subsection.

**Table 30: Proportion (%) of household in BATIBO council who declared that they have been involved or were informed on the council's activities**

<b>Proportion of household who declared that they have been involved or were informed on the council activities</b>					
<i>Participation in village assemblies</i>	<i>Communication on the council annual budget</i>	<i>Communication on income and expenditures of the council</i>	<i>Support the village/quarter in development actions</i>	<i>Involving the village/quarter in planning</i>	<i>Involving the village/quarter in programming and budgeting sessions</i>
29.4	10.7	8.8	51.9	43.1	29.5

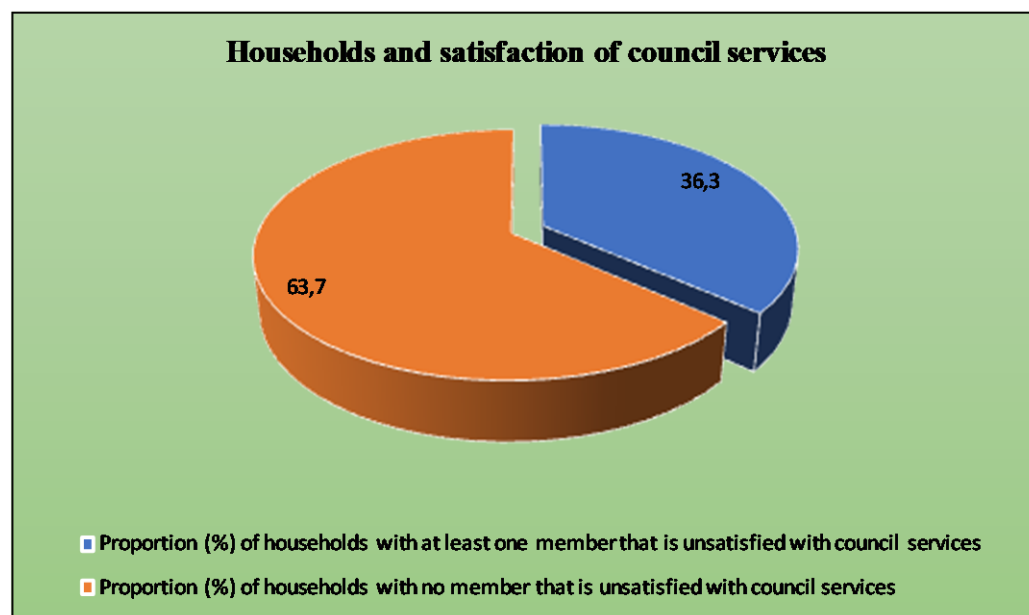
Source:Scorecardstudy, Batibo council November 2017

#### **3.2.4. Reasons for the non-satisfaction of the householdin regard with the council services**

This part of the report will sort out the portion of the householdwho are not satisfied with the council services and their reason of dissatisfaction. The results tell us that 36.3% of the people of Batibo expressed dissatisfaction with regards to the council services offered. Out of this number, 72.0% declared that there was poor visibility of the council action on the household, 70.0% said they were not happy with the non-involvement of the households in the management of development activities by the council, 32.1% claimed defaults inherent to the Council staff (absenteeism, corruption, poor reception, etc...), then 24.1% said processing users request was too cumbersome and 7.9% talked of unavailability of the council executive.

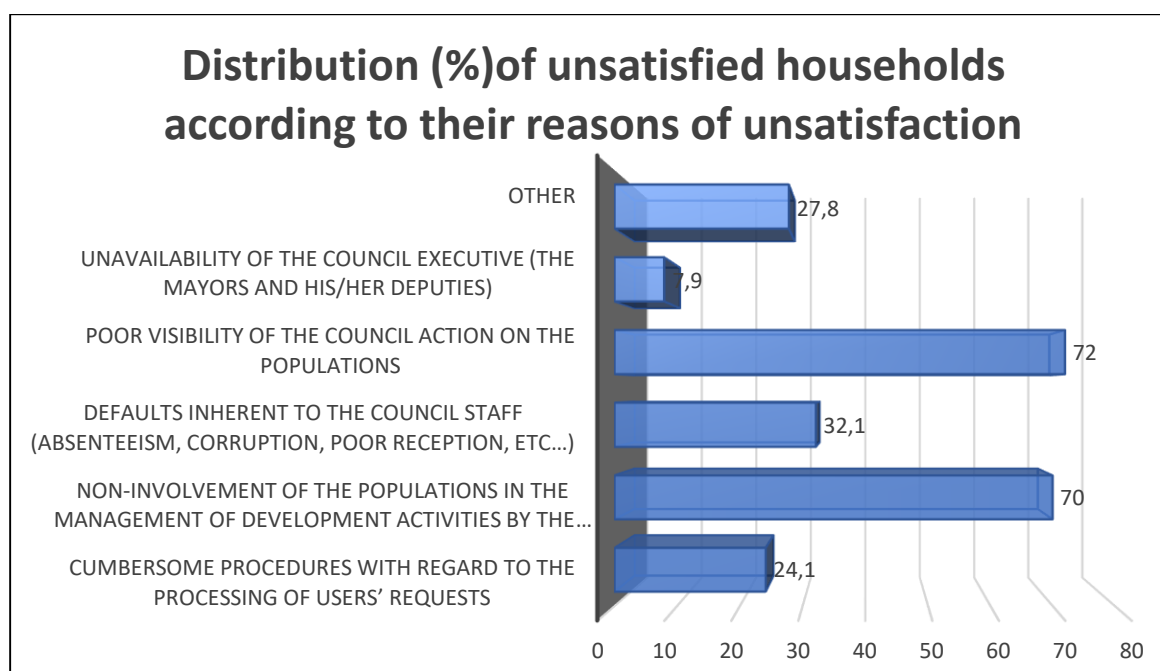
Some 27.8% declared other reasons as you can see in the below table, followed with pie and bar charts illustrating the proportion of households dissatisfied and the distribution of these households according to the reason of their non-satisfaction respectively. This is seen below

**Figure 10: Proportion of households unsatisfied**



**Source:**Scorecardstudy, Batibo council November 2017

**Figure 11: Distribution of these households according to the reasons of dissatisfaction vis-à-vis Council services**



**Source:**Scorecardstudy, Batibo council November 2017



### 3.2.5. Main expectations in the services rendered by the council

As results of the study in this subsection of the report, around 7 out of 10 households in Batibo municipality declared expectations in increased communication by the council as far as its development actions are concerned, about same proportion for increased involvement of the households in the decision-making process 6 out of then for more transparency as far as management is concerned and half of the household for closeness of the council to the household. Some 45.8% of households declared others. The table below gives the exact figures of the results.

**Table 31: Proportion (%) of households in BATIBO council having expectations, per type of expectations**

Proportion (%) of households whose expectations in terms of council services are :				
Increased involvement of the households in the decision-making process	Increased communication by the council as far as its development actions are concerned	More transparency as far as management is concerned	Closeness of the Council to the households	Others
68,8	70,1	61,1	50,2	45,8

Source: Scorecardstudy, Batibo council November 2017

### 3.2.6. Synthesis in the perception of council services and suggested areas of improvement

At this point we can mention the declaration of the household with 4 out of 5 persons who are of the opinion that the reception for the service they asked in the council was good. They also appreciated the short time taken for the two major services demanded. Around 7/10 households were served in less than a week to be issued a birth certificate and the same proportion declared less than a day to obtain the certification of official documents.

Less than 2 out of 5 persons expressed dissatisfaction with the council services and more of the reasons raised are their non-involvement in the running of the council affairs and poor visibility of council actions on the household.

As expectation, the household of Batibo municipality declared most their involvement in being informed as development actions are concerned, in the decision making process and more transparency in the management process.

Taking into consideration these points, one can say that the Batibo Council needs more capacity building in approach to broadcast their action plan and the activities carried out by the council to the reach of its household.

### **3.5. Conclusion and Main Recommendations**

The main thrust of this study was to identify and analyse some of the major problems faced by the inhabitants of the Batibo municipality in various sectors (water health, Education and council services) with the intention of proposing solutions that can alleviate if not eliminate the negative situation in these sectors. The results of the study indicate that the Batibo municipality experiences some problems that hinder it from developing properly and its citizens to live a life that is up to their expectations. Some of such problems have to do with

- Limited number of water sources
- undeveloped water sources
- Poor quality of water
- Insufficient number of health personnel available in hospitals
- limited number of health care units
- insufficiency of drugs in healthcare units
- insufficient or complete absence of equipment in healthcare units
- limited number of school in the nursery, primary and secondary cycles
- far distant need to cover in order to access schools
- non distribution of school textbooks in the nursery and primary cycles
- high tuition fees
- population's involvement in decision making at the level of the council
- population's involvement in development actions
- transparency in management at the level of the council

#### **3.2.7. Main recommendations**

When development is carried out in a participatory manner, better results are registered. Participatory development implies the principle of bringing the major decision making units closer to the population so that decision making involves all levels of society. During the Scorecard study, a number of important issues were identified. It is hoped that this issues will be given adequate attention so as to improve on the development of the municipality in general and individual members in particular. The following recommendations have been highlighted.

- ❖ The council should fit the scorecard mechanism (perception survey) into her annual plan/activities and even extend it to other sectors. With this put in place, this will enable

the council to know the feelings, needs and expectations of its people before designing development projects.

- ❖ Selected village/quarter heads or members of the community should be co-opted to sit in alongside councillors during the budgetary and planning sessions of the council. This act will give the population a sense of belonging and increase their interest and participation in council activities thereby bringing about the much needed development in the community.
  
- ❖ The Council should also support the water management committee, private health care units and the PTAs in terms of finance and capacity building to better assist the government in service delivery in the sector of water, health and education respectively. These stakeholders have proven their worth in providing services in their respective areas as shown by data collected and analysed for the CRCM project.

## CHAPTER IV

### ACTION PLAN FOR THE ESTABLISHMENT OF THE CITIZEN CONTROL OF PUBLIC ACTION IN BATIBO COUNCIL

After the collection of data for the CRCMSurvey from the field and capturing the perceptions of the population in the Batibo council area, a synthesis of the problems identified has been made in the domain of water, health, education and council services. As a result of this synthesis a plan of action has been drawn up to solve some of the pertinent problems in the various sectors. The action plan of each domain has been developed following the strategy adopted for that sector by the government of the Republic of Cameroon.

#### 4.1. Synthesis of the problems of CRCM in Batibo council area.

Table 32: Synthesis of problems in the Domain of Water in Batibo.

Sector	Problem identified	Envisaged solution	Level of implementation	
			Local	Central
Water	Insufficiency of water supply points	Identification of sites for the construction of catchments/boreholes.		
		Construction of new water catchment and boreholes in all quarters		
	Poor management of existing catchment	Put in place or Revamp water management committees for each watercatchment		
		Supervision of the management committee by the Council and DD MINEEMOMO		
		Organization of quarterly community work to maintain the various water points		
	Poor quality of water	Sensitization of the population on the importance of maintaining water quality		
		Technical inspection of sites and purification equipment		
		Monthly community work of clean and purify the water points		

	Far distance to water points	Strategic setting of new water points to ensure that the distance is conducive to all households		
		Provision of additional public stand taps at all quarters in the municipality.		

**Table 33: Synthesis of problems in the Domain of Health in Batibo**

Sector	Problem identified	Envisaged solution	Level of implementation	
			Local	Central
Health	Insufficiency of existing health care units	Lobby with Batibo elites for the creation of health care units		
		Feasibility studies for the creation of new health units by DMO/Council Batibo		
		Creation of new health care units in the municipality		
	Far distance to access the health care units	Ensure Strategic localization of future created health care units in the municipality		
		Make use of community health workers/ partner to get to the population for health access		
		Subsidise transportation of sick to health care units through partnerships with transporters to carry the sick at lower cost		

		DMOMOMO to make available a weekly visiting Doctor and outreach programmes/centres		
	Poor quality/insufficient equipment	Provision of more equipment to the health care units of the municipality		
		Constant routine checks to monitor the state and effectiveness of the equipment		
	Insufficiency of drugs	Partner with transporters who can collect drugs from the administrative head quarter to the health unit		
		Ensure regular supply of drugs		
	High cost of access to health care	Creation of mutual health institution and sensitization of the households to join.		
		Subsidization of health care costs		

**Table 34: Synthesis of problems in the Domain of Education in Batibo**

Sector	Problem identified	Envisaged solution	Level of implementation	
			Local	Central
Education	Insufficiency of teaching staff	Recruitment and payment of PTA teachers		
		Provide more staff		
	High tuition	Ensure reduction of PTA fees by subsidizing PTA projects		

		Enforce the law on free tuition in nursery and primary public schools		
	Far distance to access educational services	Strategic positioning of future created schools		
	Insufficiency of classrooms	Construction of temporal classrooms, provision of local building material and labour		
		Construction and equipping of classroom blocks		
	Insufficiency of schools	Creation of new schools with complete cycles		
	Non distribution of textbooks	Improve management of minimum package to schools.		
		Lobby for the provision of books from NGOs (like Book Aid International)		
		Creation and construction of school libraries		

**Table 35: Synthesis of problems in the Domain of Council service in Batibo**

Sector	Problem identified	Envisaged solution	Level of implementation	
			Local	Central
Council	Non-involvement of the population in the management of development activities	Representatives of the population should visit the council and invite council executive during development		

		meetings		
		Co-opt representative of various villages during council development planning workshops		
	Poor visibility of the Council action on the population	Inform the council about village plans.		
		Allocate projects to villages proportionately		
		Support village actions morally, financially and materially.		
	Default inherent to Council staff	Continuous follow up and monitoring of the behaviour of council staff to ensure satisfactory performance		
		Put in place a suggestion box for the public.		
		Sanctions to staff who act unethically.		
		Provide capacity building opportunities for council staff.		
	Cumbersome procedures with regards to the processing of user request	Facilitate the procedure regarding the processing of user request		
		Provide capacity building opportunities for council staff.		
		Make the procedure for obtaining documents clear and simple		





## 4.2. ACTION PLAN FOR THE ESTABLISHMENT OF THE CITIZEN CONTROL OF PUBLIC ACTION IN BATIBO COUNCIL

Strategy of the Water Sector: To make potable water systems available and adapted to the specific environment to all communities throughout the Republic of Cameroon

**Table 36 :**Plan of Action for the Water sector;

Sector	Objective	Specific objective	Actions	Verifiable indicators	Means of verification	Assumptions for realisation	Expected results	Period	Responsibility	Partners	Estimated cost
<b>Water</b>	<b>To reduce the distance to fetch potable water And improve on its quality in Batibo council area within 5 years</b>	1. To develop and Improve accessibility to tap water	Provision of additional stand taps Mobilise funds	Number of villages with tap water supply	From council reports and field observation	Increase in number of public potable water source	Potable water is accessible to the entire community	ongoing	The household, technical service of the council, VDC	DD MINEEMOMO NGOs Member of parliament	To be determined later after feasibility studies

		2. To improve quality of water	Periodic cleaning and treatment of water points Identify more catchment areas Testing water	Number of water management committee members trained per village, mobilization is done in all quarters	Councils report Minutes, Attendance sheets, field visits	Adequate financial and material support from the community	Quality of water is improved, cleaning of water sources and treatment is frequent	ongoing	The household, technical service of the council, VDC	DD MINEEMOMO NGOs Member of parliament	
		3. to improve on management of water points	Revamp the water management committee	Number of committee put in place in the council area, periodic meetings	Councils report Minutes, Attendance sheets	High level of commitment, training of members	Management committees exist in all quarters, Periodic meetings are held,	ongoing	The household, technical service of the council, VDC	DD MINEEMOMO NGOs Member of parliament	

**Strategy of the Health Sector:** Quality and accessible health care delivery to all persons in Cameroon without discrimination whatsoever

**Table 37 :Plan of Action for the Health sector**

Sector	Objective	Specific objective	Actions	Verifiable indicators	Means of verification	Assumptions for realisation	Expected results	Period	Responsibility	Partners	Estimated cost
<b>Health</b>	<b>To ensure quality and affordable health care to all and sundry in Batibo council area by 2023</b>	1: To Improve the staffing situation	-Lobby for the recruitment of more staff -Sensitization of the population to use health units -Recruit PBF staff in all health units	Number of staff recruited	From council reports and field observation, Report from DMO (district medical officer)	Increase in number of staff available, community health workers are provided	More staff are available and willing to handle cases of illness promptly	ongoing	The household, technical service of the council, VDC, management committee	Ministry of health, DMOBatibo NGOs Member of parliament	To be determined later after feasibility studies
		2: To provide more health care units	Lobby for the creation and construction of more health care units	Number of health care units created and constructed	Report from DMOBatibo From council reports and field observation	Many health care units are available	Many health care units are available and there is an improvement in the quality of health	ongoing	VDC, the council, The member of parliament	Ministry of health, DMOBatibo	To be determined later after feasibility studies

		3: To provide more drugs and equip the pharmacy	Establishment of a pharmacy, Recruitment of pharmacy attendants in the villages, provision of drugs	New pharmacies are constructed and equipped with drugs	Report from DMOBatibo Council Report Field visits	Adequate drugs are supplied to the health care unit	Drugs are provided in the health care unit at affordable cost	ongoing	The household, technical service of the council, Mayor VDC, management committee	Ministry of health, Member of parliament, DMOBatibo	To be determined later after feasibility studies
		4. To provide more equipment	Lobby for the provision of equipment to all health units	Number and quality of equipment provided	Councils report Management committee report, DMOs report	Adequate equipment's are made available	There is an improvement in the quality of health	ongoing	The household, Mayor, technical service of the council, VDC, management committee	Ministry of health, Member of parliament, DMOBatibo	To be determined later after feasibility studies

**Strategy of the Education Sector:** The promotion protection and provision of basic and secondary educational opportunities and conducive atmosphere; all over the entire national territory of the Republic of Cameroon

**Table 38 : Plan of Action for the Education sector**

Sector	Objective	Specific objective	Actions	Verifiable indicators	Means of verification	Assumptions for realisation	Expected results	Period	Responsibility	Partners	Estimated cost
<b>Educatio n</b>	<b>To ensure greater access to quality and affordable education to all and sundry in Batibo council area by 2023</b>	1: To Improve the staffing situation of schools in the council area	-Lobby for the recruitment of more staff -Employ PTA teachers	Number of of staff recruited	From council reports and field observation, Report from DDSEMomo/ IBEBatibo	Increase in number of staff available, PTA teachers employed	More staff are available and committed to teach in the various schools	ongoi ng	The household, technical service of the council, VDC, PTA, Mayor	Ministry of Basic /Secondary education IBEBatibo/ DDSE NGOs Member of parliament	To be determine d later after feasibility studies

		2: To create more schools and have a school located closer to the households	Lobby for the creation and construction of more schools -Improve on existing infrastructure	Number of schools created	Report from IBEBatibo/DDSE Momo From council reports and field observation	Many nursery, primary and secondary schools are available	All school cycles are available and there is a reduction in time taken to reach the nearest school	ongoing	VDC, the council, The member of parliament,PTA	Ministry of Basic/Secondary education,IBEBatibo, DDSE Momo	To be determined later after feasibility studies
		3: To provide more classrooms.	Lobby for the construction of more classrooms	New classrooms are constructed and equipped	Report from DDSEMomo/IBES Batibo, Council Report, Field visits	More available classrooms	More available and equipped classrooms with permanent material and children learn in conducive condition	ongoing	The household, technical service of the council, Mayor VDC, management committee,PTA	Ministry of Basic/Secondary education,IBEBatibo, DDSE Momo	To be determined later after feasibility studies
		4: To distribute school textbooks	Lobby for the provision of school textbooks	Number and quality of textbooks provided	Report from DDSEMomo/IBEBatibo, Council Report, Field visits, testimony of parents	More and varied textbook are made available,	Children have access to textbook and the quality of results is improved	ongoing	The household, technical service of the council, Mayor VDC, management committee, member of parliament,PTA	Ministry of Basic/Secondary education,IBEBatibo, DDSE Momo,NGOs	To be determined later after feasibility studies

		5. To provide more equipment	Lobby for the provision of equipment to all schools	Number and of quality equipment provided	Councils report Management committee report, IBE/DDSE report	Adequate equipment's are made available	There is an improvement in the quality of education	ongoing	The household, Mayor, technical service of the council, VDC, management committee,PTA	Ministry of Basic/ Secondary education,IBE Batibo, DDSE Momo,NGOs	To be determined later after feasibility studies
		6. To improve on the quality of results	Lobby for more trained personnel in schools and ensure a good supervision	Number of continuous assessments(CAs) per week, Number of seminars and workshop organized for staff	Copies of CAs, publication of quality standards, invitation for different seminars, reports of IBE/DDSE	More follow up is ensured at all levels of learning	Sustained improvement in quality of results	ongoing	School authorities, teaching staff, pupils/ students, NGOs	Ministry of Basic/ Secondary education,IBE Batibo, DDSE Momo,	To be determined later after feasibility studies
		7. To reduce the cost of access	Paste at the reach of the parents the basic needs in school per child	Number of new cases enrolled after reduction,	Enrolment registers, reports of school authorities, minutes of PTA meeting	More pupils and students have access to learning	More awareness and increase in literacy	ongoing	School authorities, IBE/DDSE pupils/ students, NGOs	Ministry of Basic/ Secondary education,IBE Batibo, DDSE Momo	To be determined later after feasibility studies
		8- To create vocational training center	Lobby for the creation and construction of vocational training center	Number of professional institution provided.	Report from IBE Batibo/ DDSE Momo From council reports and field observation	Many nursery, primary and secondary schools are available	All school cycles are available and there is a reduction in time taken to reach the nearest school	ongoing	VDC, the council, The member of parliament,PTA	Ministry of Basic/ Secondary education,IBE Batibo, DDSE Momo	To be determined later after feasibility studies



**Strategy of the Services Offered By The Council Institution:** To bring administration closer to the household, ensure peace and order and empower the council to take greater charge of their own development (decentralization) in the Republic of Cameroon

**Table 39 :Plan of Action for the Council services sector**

Sector	Objective	Specific objective	Actions	Verifiable indicators	Means of verification	Assumptions for realisation	Expected results	Period	Responsibility	Partners	Estimated cost
<b>Council services</b>	<b>To bring local administration closer to the household and empower the council to take greater charge of their own development in line with decentralization by December 2018</b>	1: To involve the household in decision making	Invite the household during council sessions	Number of stakeholders and socio professional group who attended the council session	From council reports and attendance sheets, invitation letters distributed, council notice board, Dispatch letters	Increase in number of actors invited during council sessions, Increase in the use of council services	More stakeholders participate in decision making, Sustained increase in the use of council services	ongoing	The Secretary General	Mayor PNDP	To be determined later after feasibility studies

		2: To communicate all development actions	Announcements through various media houses, Social media, Construction and placement of council notice boards at strategic locations of the town, development of a website, email and facebook page	Number of copies of different announcements sent out, Website developed, Email address created	From council reports and field observation Testimony from the household	Increase turnout in all council activities, All communication avenues have been exploited	High involvement of the household in decision making at the council Updated website Frequent use of all communication means	ongoing	The SG of the council  The household	The Mayor PNDP  DD communication  Community radios	To be determined later after feasibility studies
		3: To ensure transparency in management.	Publish administrative and financial account of the council yearly, Publish the annual investment plan of the council	Number of stakeholders who are aware of the accounts	All accounts and income sources are published on the notice board	Administrative and financial accounts are published	More awareness on the administrative and financial accounts is created	ongoing	The municipal treasurer Council finance officer Council council cahier The SG	Municipal treasury, Other financial services	To be determined later after feasibility studies

		4: To increase household's access to decentralised services	Opening of special civil status centres, Employment of registrars, Creation of mobile registration centres	Number of special civil status centres created, Number of registrars employed Number	Area view of the special centres, field visits, list of newly recruited employees	Communities are willing to host the centres,	Increase access of the household to decentralised services, Increase number of households benefiting from decentralised	ongoing	technical service of the council, Mayor	PNDP Ministry in charge of decentralization SDO	To be determined later after feasibility studies
--	--	---	--	--	---	--	---	---------	---	---	--

## Program for the Dissemination of Results and Presentation of an Action Plan

DATE	VENUE	ACTIVITY	EXPECTED RESULTS	PERSONS RESPONSIBLE
	PVC and Batibo Council	Administrative and Pedagogic Preparation	A contact meeting is done and the date for the restitution workshop has been agreed upon, invitation letters are prepared and sent out, all logistics for the workshop are prepared (workshop program, writing materials, study report printed and distributed)	Scorecard supervisor for Batibo,  CDO  All Stakeholders
	Batibo council	1. Organisation of a workshop with stakeholders to reconstitute, review and validate the report of the study	The restitution workshop is attended by the various stakeholders, the various results per sector are presented for review by the participants, stakeholders have validated the results	Scorecard Supervisor Batibo  CDO  All Stakeholders
	PVC	2. Writing of report	A report which captures the key observations made by participants of the restitution workshop is written.	Scorecard Supervisor Batibo
	PNDP	3. Submission of final Report / technical validation	A final report is submitted to PNDP for technical validation	PVC /PNDP

## PICTURE GALLERY

*Picture 1 :Lunching of the CRCM*



Picture 2 A practical exercise in the field to test/evaluate trained enumerators



*Picture 3 : End of training test (written) of Enumerators*





## **ANNEXES**

### **Annex 1: List of stakeholders involved in the study in Batibo council**

- The Governor's representative
- Regional Delegate of MINEPAT
- RD of Sector Ministries concerned
- The Regional Coordinator of PNDP
- SDOs representatives
- Regional President of UCCC
- Mayors
- INS Regional Chief
- Representatives of CSO.
- Household representatives
- Traditional Authorities
  
- Economic cooperators' representatives
- The Council Executive ;
- The Civil Society Organisation ;
- The Administrative Authorities ;
- The Traditional Authorities ;
- Religious Authorities ;
- Economic operators ;



1. Team Leader: SHEI WILLIAM KANJO
2. Coordinator Support : CHEYEH Julius NGWAN

<b>S/N</b>	<b>NAMES</b>	<b>FUNCTION</b>
1	<b>Tanjoh Frederick</b>	<b>Mayor Batibo council</b>
2	<b>Ndongmo Tejiona Simeon</b>	<b>Supervisor</b>
3	Forkwa Benice A.	Contoller / Enumerator
4	Tebi Honourine A:	Contoller / Enumerator
5	Tikum Gwendolyn	Enumerator
6	Doh Clinton M.	Enumerator
7	Tebah Cletus	Enumerator
8	Mbah Erica E.	Enumerator
9	Bebnji Felicitas	Enumerator
10	Ako Francis E.	Enumerator
11	Mbah Thierry T.	Enumerator
12	Tebit Franklin T.	Enumerator

## Annex 2: Questionnaires of the Scorecard study

MINISTERE DE L'ECONOMIE, DE LA PLANIFICATION  
AND REGIONAL  
ET DE L'AMENAGEMENT DU TERRITOIRE DEVELOPMENT  
-----



MINISTRY OF ECONOMY, PLANNING

SECRETARIAT GENERAL GENERAL SECRETARY

-----  
PROGRAMME NATIONAL DE DEVELOPPEMENT

NATIONAL COMMUNITY DRIVEN DEVELOPMENT  
PROGRAM

PARTICIPATIF  
-----

CELLULE NATIONALE DE COORDINATION

NATIONAL COORDINATION UNIT

# **Citizen Report Card**

**Assessment of public services within the Council of .....**

<b>Section I. BACKGROUND INFORMATION</b>		
<b>A01</b>	Region _____	_ _
<b>A02</b>	Division _____	_ _
<b>A03</b>	Council _____	_ _ _
<b>A04</b>	Batch number _____	_ _
<b>A05</b>	Enumeration Area Sequential number _____	_ _
<b>A06</b>	Residence stratum :                      1=Urban      2=Semi-urban      3=Rural	_
<b>A07</b>	Name of the locality _____	
<b>A08</b>	Structure number _____	_ _ _
<b>A08a</b>	Household number in the sample _____	_ _
<b>A09</b>	Name of the household head _____	
<b>A10</b>	Age of the household head (in years) _____	_ _
<b>A11</b>	Sex of the household head : 1=Male      2=Female	_
<b>A12</b>	Name of the respondent _____	
<b>A13</b>	Relationships between the respondent and the household's head (see codes)	_
<b>A14</b>	Sex of the respondent:      1=Male      2=Female	_
<b>A15</b>	Age of the respondent (on a bygone-year basis)	_ _
<b>A16</b>	Phone number of the respondent	_ _ _ _ _ _ _ _ _ _ _
<b>A17</b>	<b>Date of beginning of the survey</b>	_ _ / _ _ / _ _ _ _
<b>A18</b>	<b>Date of end of the survey</b>	_ _ / _ _ / _ _ _ _
<b>A19</b>	<b>Name of the enumerator</b> _____	_ _
<b>A20</b>	<b>Name of the council's supervisor</b> _____	_ _
<b>A21</b>	<b>Data collection result</b> 1=Complete Survey                      4=Absence of a qualified respondent 2= Incomplete Survey                      5=Empty house or no house responding to the 3=Refusal                                      given address (If the answer is different 96= Any other reasons (to be specified) nd 2, from 1 a                                      the questionnaire should come to an end)	_
<b>A22</b>	<b>Assessment of the quality of the survey</b> 1= Very good      2=Good 3=Average 4=Poor 5=Very poor	_

## **CODES**

### **A13**

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

<b>Section II. POTABLE WATER</b>		
<b>H01</b>	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                       _ _  B. Open pit well                                       _ _  C. Protected well                                       _ _  D. Boreholes equipped with a manually operated pump                       _ _  E. Spring/ river                                       _ _  F. Access to tap water (pipe borne water)                       _ _

Section II. POTABLE WATER		
H01a	Is your main water supply source run by a public or owned by a private entity? 1=Public 2=Private If 2 $\xrightarrow{\text{H14}}$	_
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= Does not know.	_
H05	Does this water have a taste? 1=Yes 2=No 8= Does not know.	_
H06	Does this water have a colour? 1=Yes 2=No 8= Does not know.	_
H07	Do you pay something to get this water? 1=Yes 2=No If no $\xrightarrow{\text{H08}}$	_
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? 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 $\xrightarrow{\text{H11}}$	_
H10a	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? 1=Less than one week 2=Between one week and one month 3=Between one month and three months 4=Over three months 5=Not yet, if 5, $\xrightarrow{\text{H11}}$	_
H10b	Who repair it? Who else? 1=Yes 2=No A=Mayor (Council) B=State C=An elite D=The Water Management Committee E=the village/quarter head F=CAMWATER/SNEC/CDE X=Other partners/stakeholders : _____	_   _   _   _   _   _   _   _
H11	Do you have access to that water point at any moment of the day? 1=Yes 2=No If yes $\xrightarrow{\text{H13}}$	_
H12	If no, what is the daily frequency in terms of potable water supply in your household? 1=Once ; 2=Twice; 3=Thrice	_
H13	Does the said frequency correspond to your current need in terms of potable water consumption-? 1=Yes 2=No	_
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 $\xrightarrow{\text{H18}}$	_
H15	To whom did you submit your request/needs? (several answers are possible) Other? 1=Yes 2=No A. Mayor (Council) B. State C. An elite D. The Water Management Committee E. The village/quarter head F. the Administrative authorities G .CAMWATER/SNEC/CDE	_   _   _   _   _   _   _   _

		X . Other stakeholders : _____	__
<b>H16</b>	Has your need been met? 1=Yes 2=No If no <del>18</del>		__
<b>H17</b>	In the event of a satisfactory answer, how much times did it take for your need to be satisfied? 1=Less than one month 2=Between one and three months 3=Over three months		__
<b>H18</b>	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 If 1 or 2 H20. →		__
<b>H19</b>	State the reasons of your non--	1=Yes 2=No	
<b>Section II. POTABLE WATER</b>			
	satisfaction with regard to water supply in your village (several answers are possible).  Any other reason?	A. Far distance to access to the water point B. Poor quality of water C. Insufficiency of water supply points D. Poor management of the water supply E. Failure/delay to repair in case of breakdown F. High cost of water supply X. Any other reasons to be specified : _____	__   __   __   __   __   __   __
<b>H20</b>	What are your expectations in terms of supply of potable water? (Several answers are possible).  Any other expectation?	1=Yes 2=No A. Additional water points ; B. Improvement in terms of management of the existing water points; C. Repair works should be carried out on the damaged water points ; D. Improvement of the quality of the existing water points ; E. Reduction of price ; X. Other expectations to be specified : _____	__   __   __   __   __   __

<b>Section III. HEALTH</b>			
<b>S01</b>	Which is the nearest health care unit to your household? 1= Public integrated health Centre 2= Hospital/CMA 3= Private health Centre		__
<b>S02</b>	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		__
<b>S03</b>	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)		__
<b>S04</b>	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 <del>517</del>		__
<b>S05</b>	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		__
<b>The last time a member of your household is taken care of in such a health care unit,</b>			
<b>S06</b>	Were the medical staffs present? 1=Yes 2=No		__
<b>S07</b>	Were minor medical equipment (such as scissors, syringes, spirit, cotton, betadine, thermometer, tensiometer, medical scale, etc.) always available? 1=Yes 2=No 8=Do not know		__

<b>S08</b>	Is your health care unit (CMA or Hospital) provided with hospitalization rooms? 1=Yes 2=No If no → S10.	_
<b>S09</b>	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.	_
<b>S10</b>	How much did he/she pay 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	_
<b>S11</b>	How do you appraise the said amount? 1=High 2=Affordable 3=Insignificant	_
<b>S12</b>	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	_
<b>S13</b>	If yes, did the person do it willingly or is he/she obliged by the medical staff to do so? 1=Personal initiative 2=Obliged by the medical staff to do so	_
<b>S14</b>	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	_
<b>S15</b>	Is this health care unit provided with a pharmacy/pro-pharmacy? 1=Yes 2=No If no → S17	_
<b>S16</b>	Are drugs always available? 1=Yes 2=No 8=Do not know	_
<b>S17</b>	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	_
<b>S18</b>	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	_

<b>S19</b>	State the reasons of your nonsatisfaction with regard to health services provided within the health care unit you attend? (several answers are possible)  Any other reason?	1=Yes 2=No A. Far distance to access the health care units B. Poor quality of services provided C. Insufficiency of existing health care units D. Defaults related to the health care unit staff E. Poor management of the health care unit F. Insufficiency of drugs G. Poor quality of/Insufficiency of equipments H. High cost with regard to health care access X. To be specified) : _____	_   _   _   _   _   _   _   _
<b>S20</b>	What are your expectations with respect to health care services?  Any other expectations?	1=Yes 2=No A. Additional health care units B. Supply of drugs C. Transfer of a staff member D. Equipped health care units X. Other to be specified _____	_   _   _   _   _





<b>Section IV. EDUCATION</b>					
	<b>Education cycle →</b>	<b>Nursery</b>	<b>Primary</b>	<b>Secondary</b>	<b>Vocational training</b>
<b>E01</b>	Is your village/quarter provided with an education cycle « Name of the said cycle »? 1=Yes 2=No	_	_	_	_
<b>E02</b>	How many children from your household attend the nearest school? (name of the cycle) (write down the number in front of each cycle)	_ _	_ _	_ _	_ _

<b>E03</b>	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	_	_	_	_
<b>E04</b>	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)	_ _	_ _	_ _	_ _
<b>E05</b>	Is the school (name of the cycle) attended by children from your household provided with a complete cycle? 1=Yes 2=No		_	1st cycle  _	2nd cycle  _
<b>E06</b>	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				_
<b>E07</b>	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	_	_	_	_
<b>E08</b>	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	_	_	_	_
<b>E09</b>	Are school textbooks distributed to pupils in the school (name of the cycle) attended by children from your household? 1=Yes 2=No	_	_		
<b>E10</b>	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	_ _	_ _	_ _	_ _
<b>E11</b>	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				
<b>E12</b>	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 n FCFA)
<b>E13</b>	How do you appraise such amount? 1=High 2=Affordable 3=Insignificant	_	_	_	_
<b>E14</b>	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	_	_	_	_
<b>E15</b>	Were you obliged to pay such additional fees to the school (name of the cycle) 1=Yes 2=No	_	_	_	_

<b>E16</b>	<p>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</p> <p>A. Parents-Teachers' Associations (PTA)</p> <p>B. The Mayor (Council)</p> <p>C. A village organisation</p> <p>D. MINEDUB/MINESEC/MINEFOP</p> <p>E. Elites</p> <p>X. Other partners/stakeholders (to be specified)</p> <p>_____ Any other?</p>	_	_	_	_
<b>E17</b>	<p>In general, what is your level of satisfaction with regard to education services provided in the (name of the cycle) your village? (Only a single answer is possible) 1=Satisfied 2=Indifferent 3=Not satisfied. If 1 or 2 E19. →</p>	_	_	_	_
<b>E18</b>	<p>State the reasons of your non-satisfaction in connection with the basic education services provided in (name of the cycle) in your village?</p> <p>(Several answers are possible)</p> <p>Any other reason? 1=Yes 2=No</p> <p>A. Far distance to access the education service</p> <p>B. Insufficiency of class-rooms</p> <p>C. Insufficiency of equipments</p> <p>D. Insufficiency of schools</p> <p>E. Insufficiency of teaching Staff</p> <p>F. No distribution of text books</p> <p>G. Poor results</p> <p>H. High tuition fees</p> <p>X. Any other reason to be specified</p>	_	_	_	_
<b>E19</b>	<p>Do you have any expectations in terms of provision of education services in the (name of the cycle)?</p> <p>(Several answers are possible)</p> <p>Any other expectation? 1=yes 2=No A. Have a school located nearer to the village/quarter</p> <p>B. Build more class-rooms</p> <p>C. Add additional Equipments</p> <p>D. Create more school/vocational training center</p> <p>E. Recruit more teaching staff</p> <p>F. Distribute text books</p> <p>G. Improve the results</p> <p>H. Reduce the costs</p> <p>X. Others (specified) _____</p>	_	_	_	_



**Section V. COUNCIL SERVICES**

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

<b>C07</b>	Has any member of your household taken part in the village assemblies aimed at drawing up the Council Development Plan (CDP, AIP, and MTEF)? 1=Yes 2=No	__
<b>C08</b>	Is any member of your household informed about the amount of the annual budget of your council? 1=Yes 2=No	__
<b>C09</b>	Is any member of your household informed about the expenditures and incomes of your council during the previous fiscal year? 1=Yes 2=No	__
<b>C10</b>	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	__
<b>C11</b>	Does the council involve your village/quarter when planning development actions? 1=Yes 2=No 8=Does not know	__
<b>C12</b>	Does the council involve your village/quarter when programming and budgeting development actions? 1=Yes 2=No 8=Does not know	__
<b>C13</b>	Broadly speaking, what is your level of satisfaction as concerns services provided by the council? (choose only a single answer) 1=Satisfied 2=Indifferent 3=Not satisfied If 1 or 2 C15	__
<b>C14</b>	<p>State the reasons of your dissatisfaction with regard to services provided by the council (Several answers are possible). Any other reason ?</p> <p>1=Yes 2=No</p> <p>A. Cumbersome procedures with regard to the processing of users' requests B. Non-involvement of the populations in the management of development activities by the council</p> <p>C. Defaults inherent to the Council staff (absenteeism, corruption, poor reception, etc...)</p> <p>D. Poor visibility of the council action on the populations</p> <p>E. Unavailability of the council executive (the Mayors and his/her deputies)</p> <p>X. Any other reasons (to be specified) _____</p>	<p> __ </p> <p> __ </p> <p> __ </p> <p> __ </p> <p> __ </p> <p> __ </p> <p> __ </p>
<b>C15</b>	<p>What do you expect from the council team? (Several answers are possible).</p> <p>Any other expectation?</p> <p>1=Yes 2=No</p> <p>A. Increased involvement of the populations in the decision-making process</p> <p>B. Increased communication by the council as far as its development actions are concerned</p> <p>C. More transparency as far as management is concerned</p> <p>D. Closeness of the Council to the populations</p> <p>X. Any other expectation (to be specified) : _____</p>	<p> __ </p> <p> __ </p> <p> __ </p> <p> __ </p> <p> __ </p> <p> __ </p>

### Annex 3: Municipal order putting in place the steering committee of the Citizen Control for Public Action operation in the council

