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REPUBLIC OF CAMEROON

Peace – Work – Fatherland

SOUTHWEST REGION

FAKO DIVISION

BUEA COUNCIL

SURVEY REPORT

MECHANISM OF CITIZEN CONTROL OF THE PUBLIC ACTION WITHIN THE BUEA COUNCIL



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Realized by: NKONG HILL TOP ASSOCIATION FOR DEVELOPMENT (NADEV)



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LIST OF ABBREVIATIONS

CCPA	Citizen Control of Public Action
CDE	Camerounaise Des Eaux
CRC	Citizen Reporting Card
CSO	Civil Society Organizations
EC-ECAM 4	Complementary Survey of the Fourth Cameroon Household Survey
MINATD	Ministry of Territorial Administration and Decentralization
MINEDUB	Ministry of Basic Education
MINEE	Ministry of Water and Energy
MINEPAT	Ministry, of Economy, Planning & Territorial Development
MINSEEC	Ministry of Secondary Education
MINSANTE	Ministry of Public Health
NADEV	Nkong Hill Top Association for Development
NIS	National Institute of Statistics
PIB	Public Investment Budget
PNDP	National Community Driven Development Program
PTA	Parents Teachers Association
UCCC	Union of Cities and Councils of Cameroon
UN	United Nations

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Preface

This report presents the findings of a survey on Citizen Control of Public Action carried out in Buea municipality by Nkong Hill Top Association (NADEV) with support from the National Community Driven Development Programme (PNDP). Our Council participated with keen interest in the various stages of the survey which included the launching, data collection, and validation of the report, with the intention of drawing lessons from the perception of our citizens on the delivery of public services to improve on our work.

The survey was a welcome process as it was highly participatory, giving a cross-section of the population the opportunity to voice their concerns. Taking cognizance of this, we are fully committed to implementing the action plan adopted during the restitution workshop.

In taking this commitment we remain grateful to the PNDP for financing this survey and NADEV for successfully implementing it. We invite all stakeholders and especially the entire population of our municipality to take ownership of this action plan for the continuous development of our municipality.


Mosoka Edward Motuwe
3rd Deputy Mayor
Buea Council

EXECUTIVE SUMMARY

i) Brief presentation of the objectives of the Scorecard, its methodology and main results

The aim was to support the council in realising a citizen control mechanism of the activities of the council. The CCPA also had as objectives after the realisation of the Scorecard to promote governance, increase effectiveness of public actions, and enhance the capacities of vulnerable population and the underprivileged persons to make known their problems. More specifically, the CCPA aimed at;

- Identifying the stakes and actors (administration and users)
- Collecting data and disseminating the results in 160 councils in collaboration with 19 Civil Society Organizations (CSO)
- Strengthening the capacity of 160 councils to take advantage of the knowledge acquired and adopts changes that will be suggested at the end of the activity.
- Putting in place a consultation framework that will regroup several institutional actors at the council, Divisional, Regional and National levels in order to promote the institutionalization of CCPA

In this light, the methodology adopted for the execution of the CCPA included:

- Putting in place coordination and execution bodies at the National, Regional and Council levels.
- Organize a workshop at the National and Regional levels to bring together institutional actors who can contribute to the institutionalization of this operation (MINEPAT, MINATD, UCCC, MINSANTE, MINEE, MINEDUB, MINESEC, NIS, etc.)
- Negotiate the engagement with stakeholders on the operation.
- Collect process and analyse data.
- Produce reports.
- Disseminate information / knowledge acquired and negotiate the changes with target councils.

In all, 41.3% of households sampled were not satisfied with the services of drinking water, 13.1% for the services of the health sector, and 38.1% for council service. As regards

education, 6.2% were not satisfied with nursery education services, 11.7% with primary education services, and 8.9% for secondary education services.

ii) Lists of some recommendations based on the results

Water Sector;

- Portable water sources should be increased.
- Water management committees should be formed and.
- A good communication system should be put in place by the main water distribution.
- Damaged existing sources of portable water supply should be repaired.
- The council authority should make available community water schemes.
- Special measures should be taken by the authorities in charge to ensure very good quality of portable water going into households within the community.

Health Sector;

- More drugs should be made available within the health care units.
- More hospital equipment should be provided for the health care units.
- Improve on the capacity of medical staff.

Education Sector;

- Better infrastructures (classrooms and equipment) should be provided for public nursery and primary schools.
- Teacher of public nursery and primary schools especially, should be sensitized on the importance of their job and child education.
- Councils authorities in collaboration with Elites of the community should set aside a budget for managing schools, especially maintenance activities within schools.

Council Services;

- Organize sensitization campaigns on all council activities.
- Invite the general public to council sessions using other means rather than the council notice board
- Organize talks with council staff to fight corruption practices during their duties.

GENERAL INTRODUCTION

Institutional reform in African countries in recent years has been marked by trials of various forms of decentralisation. In general, hitherto centralised governments have initiated a reform agenda with the aim of transferring some powers, tasks, and resources to regional governments and local authorities. Cameroon like many African countries is currently in the process of decentralising significant functions, previously exercised by the central administration, to local governments. This is in line with the 1996 Constitution, which transformed the country into 'a decentralised unitary state' comprising a central government and several 'autonomous' sub-national governments. It was only after 15 years that the constitutional provisions were transformed into reality, to the satisfaction of many of its citizens. It took another more than 7 years of preparatory work, before the parliament of Cameroon passed three laws on decentralisation in 2004. They establish a framework for decentralisation and make provision for the devolution of powers to local authorities in the economic, social, health, educational, cultural and sports development areas. The supervising authority of state institutions at various levels has been slightly reduced as a result of the law.

It was in line of achieving the much-cherished goal of decentralisation that the government of Cameroon put in place a number of tools towards the aim. One of the main tools used was the National Community Driven Development Programme (with French acronym PNDP), commissioned to contribute towards poverty alleviation using participatory strategies at the level of the local councils. Within the framework for the execution of the PNDP, an agreement was signed between Buea Council, the PNDP and NADEV (Nkong Hill Top Association for Development), in which the PNDP has offered technical and financial support to enable NADEV (Local Support Organisation) establish a Citizens' Report Card for the Buea Council area. This report card known as the Citizen Control of Public Action (CCPA) has as main objective to get the perception of the local man on the various services offered to them in domains of Water, Health, Education, and Communal Services.

Given this exercise, a survey was conducted by NADEV within the Buea municipality, for which the results will help provide suggestions for changes in the domains of Water, Health, Education, and Communal Services. NADEV is expected during this exercise to;

1. Take part in the preparatory activities for the launching of the process;
2. Participate in the Regional workshop of the launching of the process;
3. Technically organize the launching process at the council level;
4. Contribute in the sensitization of stakeholders;

5. Select enumerators and organize their training while putting at their disposal collection tools;
6. Collect data from sample households within the Buea council area (average 320 households). The collection of data shall be done with the help of questionnaires which shall be put at the disposal of NADEV by the Program;
7. Interpret and produce a report on the investigation for Buea council;
8. Negotiate changes in the course of council restitution workshops;
9. Participate in restitution workshops at the divisional, regional and national levels.

NADEV so far has accomplished the first six tasks, and is currently on the seventh task for which this report is intended.

Structure of the document

The structure of the report constitutes the following sections:

- Executive summary
- General Introduction
- Methodology for the Execution of Citizens Control of Public Action Within the Buea Municipality
- Main findings and suggested recommendations
- Plan of action for the establishment of the citizen control of public actions in the Buea municipality
- Annexes

CHAPTER ONE

LEGISLATIVE AND REGULATORY FRAMEWORK OF DECENTRALISATION AND LOCAL DEVELOPMENT IN CAMEROON

1.1 Legislative and Regulatory Framework of Decentralisation

Law No. 96/06 of 18 January 1996 to amend the Constitution of 2 June 1972, deliberated by the National Assembly and enacted by the President of the Republic, clearly defines the role played by the legislative Executive and Judicial arms of government. This law also defines the geographical boundaries of the regions and the creation of regions by the Head of State.

The first major innovation ushered by the reforms of 2004 is the creation of the Region. As of now, the administrative Regions have been created by a decree of the Head of State. The former ten provinces were transformed into ten Regions. The said regions, however, are still to effectively take off in their functioning as provided for by Law No. 2004/19 of 22 July 2004 to fix the Rules Applicable to Regions.

The latest laws on Decentralisation in Cameroon date back to 2004, 2009 and 2011 with the specifications on the transfer of powers in various domains by the State to local authorities. The three main laws of 2004, however, include:

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

These laws introduced some major innovations compared to the previous law, viz, law No. 74/23 of 5 December 1974 to Organise Councils. Presently the domains of competence of local authorities have increased from social, cultural and economic, to include, health, education, water supply, sports and other local services. For example, hence forth, councils can create, equip, manage, maintain council health centres on the one hand; create, equip, manage, and maintain kindergartens, nursery, and primary schools on the other.

As concerns the survey on citizen perception of public action, the sectors of health, water supply, education, and council were of primary concern at the council levels. Here, the councils have the following competencies;

Education.

Decree No. 2010/0247/PM of 26 Feb, 2010 lays down conditions for the exercise of some powers transferred by the State to councils relating to Basic Education. This decree lays down the conditions for the exercise by councils, as from the 2010 financial year, of the powers transferred by the State relating to Basic Education and is an execution of the July 2004 law, on the rules applicable to councils, which concerns nursery, primary, secondary and vocational training institutions. The Law states that councils shall;

- Take part in keeping with the school map, setting up, equipping, managing, tending, and maintaining council nursery and primary schools and pre-school establishments.
- Recruit and manage back-up staff for the schools.
- Participate in the procurement of school supplies and equipment
- Participate in the management and administration of state high schools and colleges in the region through dialogue and consultation structures.
- Prepare a local forward plan for training and retraining
- Draw up a council plan for vocational integration and reintegration.
- Participate in the setting up, maintenance and management of training centers.

Water sector.

Decree No. 2010/0239/PM OF 26 Feb, 2010 lays down conditions for the exercise by councils, as from the 2010 financial year, of some powers transferred by the State relating to safe drinking water supply in areas not covered by the public water distribution network conceded by the State, especially the project ownership and management of wells and boreholes. Councils shall exercise the powers transferred by the State relating to the project ownership and management of wells and boreholes, without prejudice to the following State responsibilities and prerogatives:

- Design and implementation of sustainable water and sanitation development plans and projects;
- Definition of guidelines, national policies and strategies on water resources management;
- Spring and mineral water exploitation;

- Laying down of conditions for the protection and exploitation of surface and underground waters.

Health sector.

Decree No. 2010/0246/PM OF 26 Feb. 2010 lay down the conditions for the exercise by councils, as from the 2010 financial year, some powers transferred by the State relating to health, particularly the building, equipping, maintenance and management of Integrated Health Centres.

Councils shall:

- Participate in drawing up, implementation and the continuous assessment of public health policy.
- Participate in the organization, management and development of public hospital establishments and the technical control of private health establishments.
- Participate in defining conditions for the creation, opening and running of public and private health establishments.
- Participate in the laying down and controlling of the building, equipping and maintenance Standards of public and private hospitals establishments.
- Participate in drawing up and updating the health map.

Council.

Law No 2004/018 of 22 July 2004 in its sections 15, 16 and 17 lays down the powers devolved upon councils for economic development.

Here the Council shall be in charge of the;

- Organization of local trade fairs
- Provision of support income and job generating micro projects
- Development of local agricultural, pastoral, handicraft and fish farming activities
- Development of local tourist attractions
- Building, equipment, management and maintenance of markets, bus stations and Slaughter houses.

1.2 Local Development Promotion

In line with the law, the Government of Cameroon with the assistance of its technical and financial partners put in place PNDP in a bid to improve on the living conditions of the population in the rural areas.

After the first phase (2005-2009) that has been adjudged satisfactory, the Government has set up a second phase in order to extend the execution of PNDP in all councils in the rural zones.

The financing sources of this 2nd phase by funders are as follows:

- Cameroon Government through the BIP, funds of bilateral and multilateral remitted debts
- The World Bank through the new Credit IDA Cr-4593 CM
- Beneficiaries who contribute in cash or in kind for the financing of their micro projects.
- Added to these financing are residual amounts for the financing of the first phase by the German Cooperation (KfW).

The three components of the PNDP within the framework of its second phase are:

- Financial support to local development through which funds put at the disposal of councils in a form of budgetary allocation previewed, amongst others to elaborate communal Development Plans, co-finance micro projects identified through participatory diagnosis, take care of and in a regressive manner the salaries of two Council agents.
- Support to councils within the framework of decentralisation with the objective to pursue the amelioration of the legislative and statutory framework of the decentralisation process and build technical and operational capacities of the councils in order to enable them anchor in an efficient manner the decentralisation process.
- Coordination, management, monitoring & evaluation and communication.

In the course of the first phase, PNDP deployed its actions in 155 councils of 6 regions (Adamawa, Centre, West, North, South and Far North) of the country. With the second phase, the Program henceforth covers all of Cameroon's 10 regions and envisages deploying its activities in 329 councils including those of the south west region

PNDP's objective for the second phase remains the same as in the first. Focus is laid on ameliorating access to specific basic social services (health, education, water and sanitation, and communal services) in the councils earmarked and extending support of the ongoing decentralization process in the new regions. This objective narrows itself down to specific goals underscored within the framework of results with one of its indicators showing interest particularly to « the number of councils possessing a citizen control mechanism for the management of subventions as well as an operational mass communication system ».

In a bid to guarantee the attainment of this indicator in particular, support to councils within the framework of setting up a public action citizen control mechanism in their respective

territories has been envisaged. During the second phase of the programme, PNDP launched a pilot phase operation in ten (10) councils within the national territory in order to put in place the above mentioned mechanism through the « Citizen Reporting Cards » (CRC), for which Idenau council was part. This first experience made it possible to draw lessons that were capitalized for the scaling up of the third phase, for which 160 councils were targeted for the survey and Buea council area was part.

1.3 The Ministry of Decentralisation and Local Development (MINDDEVEL)

In a move that has been seen as a major step in furthering the decentralization process in Cameroon the President created on the 2nd March 2018 the Ministry of Decentralisation and Local Development.

The missions assigned to this ministry are oriented towards two specific areas: decentralization and local development.

With regards to decentralization, the ministry is in charge of:

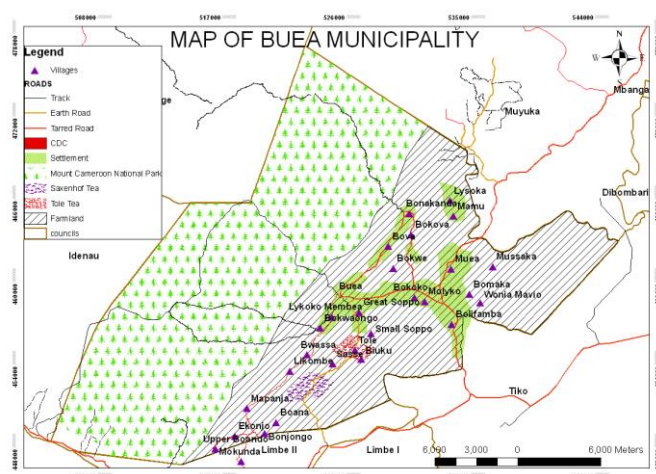
- The elaboration of legislation and regulations relating to the organization and operation of decentralized territorial communities,
- The evaluation and monitoring of the implementation of decentralization. ;
- The monitoring and control of decentralized territorial authorities (CTD);
- The application of legislation and regulations on civil status;
- Finally, under the authority of the President of the Republic, the Minister of Decentralization and Local Development exercises the supervision of the State over decentralized territorial councils.

In the field of local development, the ministry promotes the socio-economic development of regional and local authorities and ensures the practice of good governance within them.

In addition, the ministry exercises State supervision over a number of organizations involved in this sector. This is the case with the Local Council Support Fund for Mutual Assistance (FEICOM), the Local Government Training Center (CEFAM) and the National Civil Status Registry Bureau (BUNEC).

1.4 Brief Presentation of the Buea Council Area.

Figure 1: Map of Buea Municipality



Source: CDP Buea Council, 2011

1.4.1 Historical and Administrative organization of the Council

The Buea Municipal council is the Sub Divisional headquarter of Buea and the South West Regional head quarter of Cameroon. Created on the 29th of June 1977 by presidential decree No. 77/203, the Buea municipality has a surface area of 870 Sq.km, of about 87 villages. It is a highly complex community caught between a blend of urban, semi urban, rural and traditional settings. Buea Municipality is bounded to the north by tropical forest on the slope of mount Cameroon (4100m above sea level). The mountain range extends to the beautiful sandy beaches of Atlantic Ocean. The town also share boundary with other major towns like the City of Limbe to the South West, Tiko municipality to the South East, Muyuka municipality to the East and Idenau district to the West. With an equatorial climate, temperatures are moderate with a slight seasonal variation (rainy and dry season).

Buea has an estimated population of above 200.000 inhabitants (2005 BUCREP figures and annual growth rate of 5% as per UN projections for urban population growth rate for Africa) constituting essentially of the Bakweris (the indigenes) in the villages and a highly cosmopolitan population within the urban space putting the indigenes at a minority. The Bakweri language spoken by the natives is equally written and documented. English and French are two official languages used for general interaction while pidgin is the lingua franca.

The average life expectancy of this area is 50 years (1999 statistics) literacy rate is on the rise with some 60-75% of the youths having access to education.

According to a 2004 survey carried out by the Ministry of public health in Cameroon, about 40% of the population do not have access to quality health care while close to 60% have financial difficulties to afford basic healthcare services. This citation is currently true for rural areas of the municipality and much less realistic for the urban zones.

Buea is one of the fastest growing towns in Cameroon today with a mix cosmopolitan setting and a constellation of about 67 villages. These villages are inhabited by the Bakweris who, according to social scientists, have lived around Mount Cameroon for at least 4,000 years. Its urban rims now include: Molyko, Buea station, Muea, GRA, Mile 16, Clerks and Federal quarters, Great Soppo, Likoko-Membea, Bokwaongo, and Bonduma. Buea is presently the head quarter of the South West Region of Cameroon. It remains the only one having the Senior Divisional Office, most of its Divisional Sectorials offices and a few regional offices located in another town (Limbe).

1.4.2 Economic Aspect of the Council

Buea has moderate economy with agricultural, administrative, business, tourism and the financial sector taking the central stage of the town. The high density of higher institutes of learning within the town, has promoted the establishment of so many businesses, to serve the high student population and relatively youthful population of the town.

1.4.3 Description of the biophysical environment

Buea municipality has a distinct biophysical environment surrounded by an evergreen tropical ecosystem with high variety of biodiversity including birds and animals species. Some parts of the mountain slopes has very rare species of plants and animal found nowhere else in the world such as the unique medicinal *Prunus Africana* and animal species living only under particular conditions, which can be met here. From vegetation thick forest, secondary forest, shrubs to savanna towards the peak of the mountain. Accessibility to villages in this area is through the roads. Most of the villages are located on the slopes of the mountain. The biophysical environment has been greatly tempered with and exploited for:

- Habitation and settlement.
- Agriculture (plantations, small holders, local farmers) due to its rich volcanic soils. Plantations include CTE tea Farms, CDC banana as well as small holders' palms and tea farms

- Housing and furniture materials through Cutting down of trees.

Volcanic activity has greatly altered and influenced the biophysical environment. The exploitation of the primary forests have turned them into secondary forests and in some cases farms or habitation in almost all accessible and nearby land in the villages and urban spaces. These intensive activities have caused and continue to cause environmental hazards to soils, water sources, climate and biodiversity

Climate

Buea GMT time is +1 hour and is mostly cloudy. Average sunrise is at 06:16 and sunset at 18:10. In effect it has an equatorial climate with 2 major seasons. Rainy season which runs from March to October and Dry season, from November to May). Temperature ranges between 20 oC to 28 oC while, annual rainfall ranges between 3000mm to 5000mm. The conditions here are generally the tropical rainforest climate with rainfall almost during the entire year. However, average monthly High/Low Temperature for these urban spaces ranges from 23oC low to 32oC high. This temperature increases as one moves downwards from Buea station to Muea. Several factors are behind this. Firstly, the principle of “higher one goes the colder it becomes” applies as the town is on the slopes of the mountain. Secondly, some areas have higher population intensity, activity and urbanization than others. Molyko for example has more infrastructures which reduces circulation and exchange of air.

Topography and soil

The area is composed of undulating high and low lands with many rocks and gravels due to volcanic eruptions. The soil type consists of basalts and is as a result of the first volcanic activity in the Fako Mountain area, which occurred in the cretaceous system. These soils have been weathered and partly covered by more recent deposits, thus the soils are black and in these areas are well drained due to the generally hilly nature of the terrain and the fact that they are free-draining.

The soil is very rich in nutrients and allows the cultivation of various crops such as tomatoes, cabbage, okro, pepper, corn, cocoyam, yams, cassava, plantains, beans, vegetables and even some cash crops such as palm trees, cocoa and bananas. Citrus trees are less prosperous as one ascend and climate gets cooler. The soil and climate is very supportive for vegetation and agriculture though in some areas digging is difficult due to the stony nature of the rocks. The vegetation is generally green almost throughout the year with fewer trees in areas of high

concentration of houses. It is rare to move 200m without spotting green grass, shrubs, and fruit trees.

Hydrology

Buea council area has several water sources currently more or less exploited and losing its value if not protected. Some of these sources run dry and are affected by the following human and natural activities:

- Climate change effects and the resulting longer dry season.
- Un protected nature of the water catchment areas.
- Felling of trees and shrubs for native raw materials and fire woods
- Bush and hunting fires.
- Advancing poor vegetation due to urbanization and human activities.
- Haphazard waste disposal.
- Expansion of farms, animal activities and residential areas.

However, viable catchments could be found in the following areas with some losing value, potency and almost extinct: Upper farms, Small Soppo, Ewonda, Muea, Bonduma & Molyko, Bulu Blind, Mile 16 & 14 area, German spring, Koke, Bwitingi, and Musole spring.

1.4.4 Size & Structure of the population.

Figures from census bureau population studies estimates, as well as UN growth rates for African cities puts the population of the Buea municipality at approximately 200,000 inhabitants with the population of male standing at 49 % (98,000) and that of female approximately 51% (102,000). Urban population could be put at 57% of total population while Rate of urbanization is estimated at greater than 5% annual rate of change.

Table 1: Population Density by Age Groups

Age bracket		Total	(%)
0 to 5		25,594	14%
Above 5 to 16		45,750	25%
Above 16	Men	50,094	27%
	Women	66,296	36%
Total		187,000	100%

Source: CDP Buea Council, 2011

The table above shows that women form the bulk of the adult population in Buea (36%), while men make up 27%. A head count of the population of the reveal the following results on table 2 below.

Table 2: Population distribution by Villages/Quaters

#	villages	Men (Above 16)	Women (Above 16)	Children < 16	Children < 5	Total
1	Bokoko	100	80	70	50	300
2	Bokwaongo	423	594	492	212	1,721
3	Small Soppo Wunganga	1800	3000	1,000	200	6,000
4	Small Soppo Woteke	80	130	100	90	400
5	Wovila	50	100	80	130	360
6	Bonakanda	400	750	750	300	2,200
7	Wotolo	120	200	100	80	500
8	Bova I	150	200	100	50	500
9	Bova II	170	250	120	60	600
10	Bulu	120	200	100	80	500
11	Bwassa	50	80	40	130	300
12	Ewonda	35	19	30	26	110
13	Likombe	100	120	80	76	376
14	Wolikawo	130	160	60	50	400
15	Mevio	30	60	40	20	150
16	Vesoa	30	65	40	15	150
17	Boanda	700	300	300	200	1500
18	Bokwai	04	80	50	40	800
19	Bomaka	400	600	1200	800	3000
20	Bonduma	1545	2154	1245	1056	6000
21	Bwiteva	100	180	80	70	330
22	Bwitingi	175	267	162	146	750
23	Dibanda	2000	2500	2000	1500	8000
24	Ekande	100	80	70	50	300
25	Lyongo	83	97	76	44	300
26	Bokova • Lower Bokova • Upper Bokova	129	191	92	61	500
27	Lysoka Bwielei	35	55	40	30	160
28	Lysoka Wombaki	250	500	180	200	1,130
29	Maumu	800	1200	1400	600	4000
30	Upper Wonganjo	51	78	61	24	215
31	Wokaka	22	38	23	17	100
32	Wokeka	35	37	21	15	113
33	Wokalu (Wokulu)	2	3	5	5	15
34	Wonjia	56	41	31	22	150
35	Ekonjo	32	30	28	10	100
36	Boando	29	38	27	16	112
37	Bonjongo	455	755	310	230	1750
38	Wanjava	20	45	25	10	100
39	Wosenge (Wosinge)	40	69	28	13	150
40	Boana	100	200	71	39	410

41	Bojoke	150	200	80	70	500
42	Ewongo	200	320	380	100	1,000
43	Wongala	43	64	51	34	190
44	Wotutu	200	320	380	100	1,000
45	Mapanja	230	198	289	54	771
46	Sasse	60	70	40	30	200
47	Bwiyuku	1800	3200	1000	375	6,375
48	Na'anga	200	300	80	150	730
49	<u>Buea Town</u> • Mokunda • Vasingi • Wanyalyonga • Wondongo- wanyamolio • Wanyaemongo	2000	3800	3000	600	8,400
50	Lower Wonganjo	50	80	80	60	270
51	Mwangai	22	16	28	14	80
52	Bokova Village	75	125	200	100	500
53	Soppo Likoko	72	130	100	70	372
54	Musaka	50	100	30	20	200
55	Bolifamba: • Upper Bolifamba • Lower Bolifamba	2000	4000	6000	3000	15,000
56	Wonya Mavio	400	600	1200	800	3,000
57	Bongala	20	60	80	40	200
58	Busumbu	40	69	28	13	150
59	Upper Boando	35	29	9	7	79
60	<u>Buea Station:</u> • Old government station • Stranger East • Stranger West II: Bonaberi • Clerks quarters Government residential area	4324	5608	3255	2813	16,000
61	Great Soppo mokongo	6166	7579	5581	2674	22,000
62	- Upper Muea - Lower Muea	10421	12097	6522	3835	32,875
63	- Molyko - Wokoko	9785	10785	5962	3468	30,000
64	Likoko Membea	800	1000	650	400	2,850
	Total estimates	50,274	66,506	45,866	25,678	188,324

Source: CDP Buea Council, 2011

The table reveals that women still form the bulk of the adult population (35.3%), while males constitute 27%. But in general, there are more females within Buea, both children and adults (51%) than males (49%). This is seen on the table below.

Table 3: Population Distribution by gender

Male	91,990	49%
Female	95,744	51%
total	187,734	100 %

Source: CDP Buea Council, 2011

CHAPTER TWO

METHODOLOGY FOR THE EXECUTION OF CITIZENS CONTROL OF PUBLIC ACTION WITHIN THE BUEA MUNICIPALITY

2.1 Study Context

As mentioned already above, since the second phase of the PNDP Program, one of the expected results is "the number of councils that have put in place an operational mechanism on citizen control and access to information" A pilot phase was conducted in 2011 and covered 10 councils in the 10 regions (Idenau in the Southwest Region). This first experience provided knowledge for the scaling up of the third phase. The pilot phase has enabled us to;

- See a great enthusiasm of the population to give their opinion on the development of their localities.
- Identify some points of improvement on which the various sectors and Mayors need to take into consideration in the management of their sectors and localities respectively.
- Identify some points of attention for a successful operation.

In order to obtain reliable information for this operation, phase III of PNDP was to carry out a survey in 160 councils with households in order to capture their perceptions for the services offered in the domains of Water, Health, Education and Council services. For this exercise responsibility was distributed as follows;

- The technical leadership of the operation entrusted to NADEV (CSOs) for their independence and their knowledge of the environment.
- The technical support from the National Institute of Statistics (NIS) is predominant both on design and on the operationalization.

2.2 Objective and Methodology of CCPA

The aim was to support the council in realising a citizen control mechanism of the activities of the council. The CCPA also had as objectives after the realisation of the scorecard survey to promote governance, increase effectiveness of public actions, and enhance the capacities of vulnerable population and the underprivileged persons to make known their problems. More specifically, the CCPA aimed at;

- Identifying the stakes and actors (administration and users)
- Collecting data and disseminating the results in 160 councils in collaboration with 19 Civil Society Organizations (CSO)
- Strengthening the capacity of 160 councils to take advantage of the knowledge acquired and adopts changes that will be suggested at the end of the activity.
- Putting in place a consultation framework that will regroup several institutional actors at the council, Divisional, Regional and National levels in order to promote the institutionalization of CCPA

In this light, the methodology adopted for the execution of the CCPA included:

- Putting in place coordination and execution bodies at the National, Regional and Council levels.
- Organize a workshop at the National and Regional levels to bring together institutional actors who can contribute to the institutionalization of this operation (MINEPAT, MINATD, UCCC, MINSANTE, MINEE, MINEDUB, MINESEC, NIS, GIZ, etc.)
- Negotiate the engagement with stakeholders on the operation.
- Collect, process and analyse data.
- Produce reports.
- Disseminate information / knowledge acquired and negotiate the changes with target councils.

2.3 Method of Sampling and Data Collection.

2.3.1 Sampling

2.3.1.1 Survey Area and Target Population

The study on CCPA covered the entire Buea municipality, with a target population of all households within the municipality. Based on a list of enumerated households provided by the Complementary Survey of the Fourth Cameroon Household Survey (EC-ECAM 4), the opinion polls were gotten from a number of sampled households within each village/quarter within the municipality.

2.3.1.2 Sampling Method of the Survey

A stratified random sampling technique was employed in the identification of households to take part in the study, and was done by NIS

2.3.1.3 Sample Size of the Study

The sample size of the study was given as 320 households per council area. Again, this figure was provided by PNDP to NADEV which was also calculated by NIS. The formula employed for this is given below as follows;

$$n = \frac{N^2 \times e^2 \times (1 - p)}{N^2 + \frac{e^2 \times (1 - p)}{p}}$$

Where:

- N represents the total number of households in the community
- e is the error margin (set at 5%)
- z refers to the level of reliability (at 95%, z=1,96)
- P stands for the proportion of the population satisfied with the services offered (given that the level of this indicator is unknown to our population, we set it at 50%)

The application of the above formula gives us a sampling size of 320 households.

2.3.2 Data Collection

i) Data Collection Tools

The main tool for data collection was the questionnaire made up of five main sections; the background, Drinking water, Health, Education, and Communal services. It was accompanied with the cartographic map and list of households in the municipality, and the data collection manual.

ii) Data Collection

The data collection process was carried in two main stages, the training of enumerators and the proper collection of data.

a. Training of Enumerators

Training of enumerators within the Buea municipality took place between the 11 and 13 of October 2017, at the NADEV conference hall. This training had as main objective to build the capacities of enumerators who were the principal collectors of data from the households, on the understanding of the concept of the CCPA and the objectives of the activity. To accomplish

this task, a very participative approach was used, including simulations for each sections of the questionnaire. In all thirteen (13) enumerators were trained and Ten (10) were retained based on an appraisal test while three (03) were on the waiting list in case of discontinuity of any of the preselected enumerators during the survey.

b. Data Collection Proper

Data collection within the Buea municipality occurred between the 16th and 21st of October 2017. Enumerators under the supervision of the Council supervisor for the Scorecard programme, were handed cartographic maps, list of households and the names of the household heads to facilitate identification of these households. As mentioned above, the main data collection tool was the questionnaire which was only to be administered to the household head or his/her spouse, or any other adult household member capable of providing answers to the questionnaire in the absence of the household head. The enumerators were arranged in pairs of two (02) and deployed to the various quarter/villages within the Buea council area.

c. Treatment and Analysis of the Data Collected

Data collected from the field was verified and validated by council supervisor, which was later transferred to NADEV coordination for validation, and finally handed to PNDP. The data was keyed in into computers by PNDP, then treated and analysed by NIS, thereof producing tables which will be used for the analysis in this report.

2.4 Method for Measuring Indicators of Perception

Perception indicators were measured quantitatively making use of mostly categorical variable. The questionnaire was designed with most of the questions having predefined set of responses which facilitates treatment and analysis of the responses. The most important question for all the sections dealing with respondent satisfaction of services within the said sector had three (03) predefined answers; satisfied, unsatisfied, and indifferent, which are also known as categories for the said question.

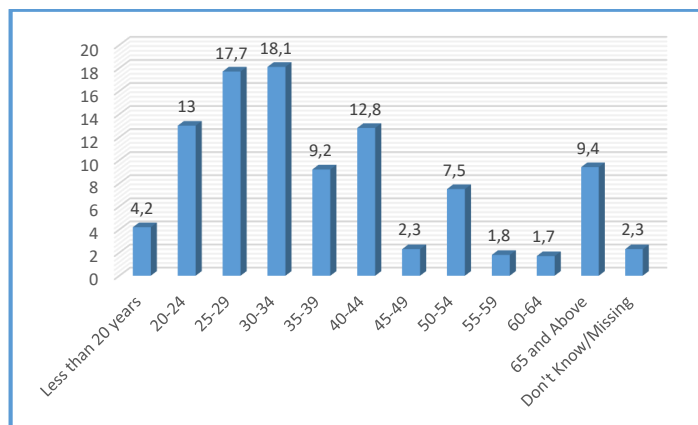
CHAPTER THREE

MAIN FINDINGS AND SUGGESTED RECOMMENDATIONS

3.1 Characteristics of the Sampled Population

A general characteristic of the sampled population is presented below.

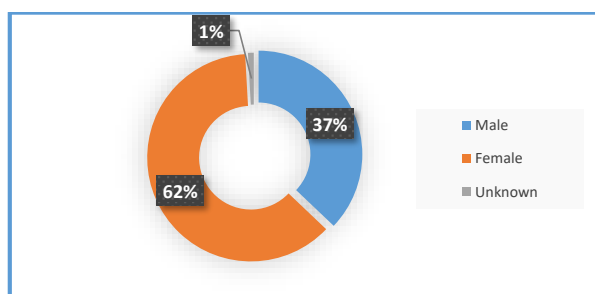
Figure 2: Percentage Distribution of Respondents by Age.



Source: survey report CCPA Buea, 2017

Figure 1 above shows a majority of respondents being between the ages of 25 and 34 years old, with a cumulative percentage of 35.8%. In general, majority of respondents are between the ages of 20 and 39 years old, with a cumulative percentage of 58%. This shows clearly the youthfulness of the population of Buea. Also, the sampled population showed a high participation of women (62%) as compared to men (37%). This shown on figure 2 below.

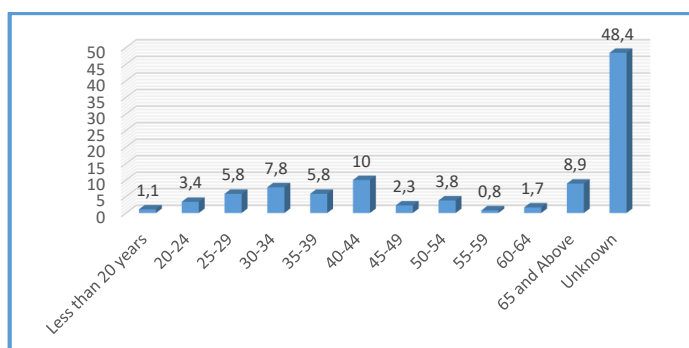
Figure 3: Percentage Distribution of Respondents by Gender



Source: survey report CCPA Buea, 2017

Within the context of CCPA study, priority was given to the Household head or his/her spouse to give responses to the questions asked. Except in their absence, could another member of the household be interviewed. With this note, it is important to know the general characteristics of the sub population of households heads within the survey. Figure 3 below shows that most household heads interviewed were of ages between 40 and 44 years old (10%), followed by those above 65 years old (8.9%), and between the ages of 30 and 34 years old (7.8%). The high percentage of unknown ages of household heads (48.4%), as seen on the figure was due to the fact most of the households selected for the study were occupied by the students who were at the period of the survey on holidays, and other households were nonexistent due to demolition that occurred before the Female African Nations Cup in Cameroon which preceded the period of the study.

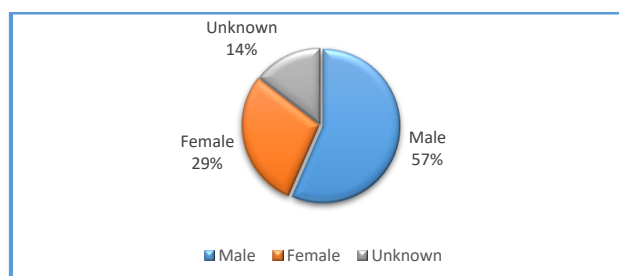
Figure 4: Age Distribution of Household Heads



Source: survey report CCPA Buea, 2017

Interestingly, though they mostly took part in the CCPA study, men formed the majority of the population of household heads representing 57% as opposed to 29% for females. 14% of the household heads were unavailable during the survey period to find out their gender.

Figure 5: Gender Distribution of Household Heads



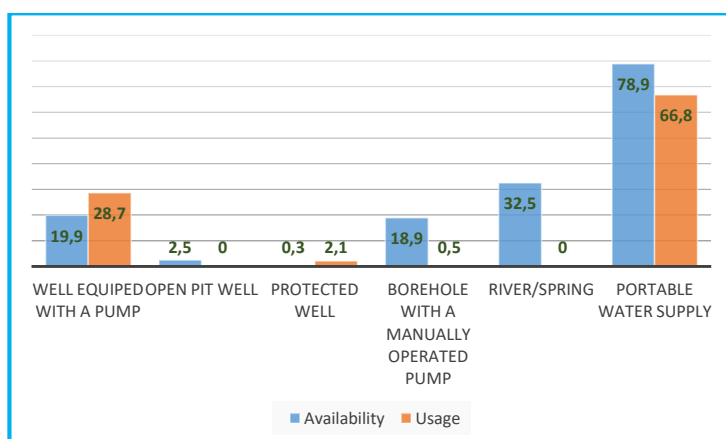
Source: survey report CCPA Buea, 2017

3.2 Water Sector

3.2.1 Availability and Utilization

Water scarcity is a global phenomenon which affects close to 2.8 billion people worldwide especially in developing countries. Buea is blessed with abundant water resources but paradoxically the inhabitants of this region are facing a serious water crisis. The increase in population and rapid urbanization exert tremendous pressure on the water resources of this community. Also, the capacity of the main water supply authority CDE (Cameroun Des Eau), now CAMWATER is insufficient to cater for the 200,000 inhabitants.

Figure 6: Availability and Use of Drinking Water Sources



Source: survey report CCPA Buea, 2017

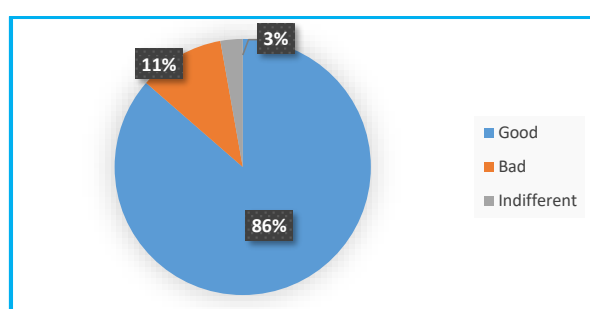
Six (6) portable water supply sources were identified from the survey of households, which include canalisation with 78.9%, river/spring (32.5%), wells equipped with a pump (19.9%), boreholes with manually operated pumps (18.9%), open pit well (2.5%), and unprotected well (0.3%). When it comes to usage of these various sources of portable water supply, two (2) principal sources stood out from the other, canalisation (66.8%) and wells equipped with taps (28.7%). In all, over 80% of households have access to portable water within Buea municipality. The high rate of connection to portable water can be explained by the extensive coverage of the main water distribution agency, Cameroun Des Eau (CDE), and multiple development of community water schemes in the various neighborhoods. The coming of drilling technology has also fostered the proliferation of boreholes and wells within the community as seen by their usage of 28.7%. The shortage of water in some neighborhoods in

Buea, especially the lower sections of the community, have led to the use of protected wells for portable water supply.

3.2.2 Quality and Cost of Water Services

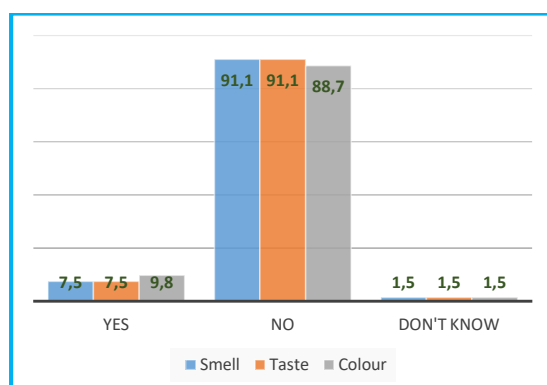
Water quality within the Buea municipality is generally good as affirmed by 86% of the households surveyed, while 11% said the water quality was bad. Though the general quality of water is good, 7.5% of the households said the water had both smell and taste, while 9.8% said it had color. This is shown on figure 6 and 7 below.

Figure 7: General Portable Water Quality within Buea Municipality



Source: survey report CCPA Buea, 2017

Figure 8: Detailed Portable Water Quality within Buea Municipality

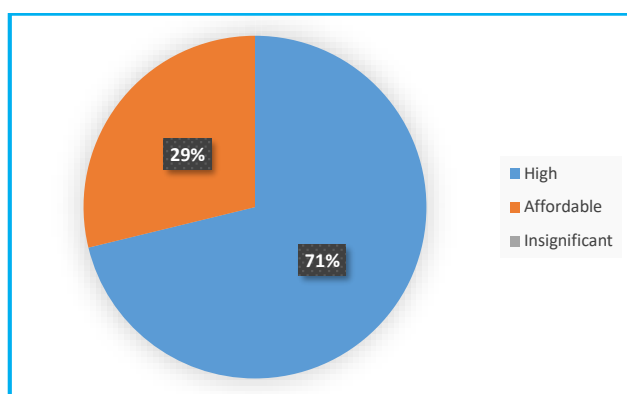


Source: survey report CCPA Buea, 2017

With regards to cost of portable water within Buea, the research shows that 60.7% of all households surveyed, incur an average monthly cost for portable water of 5034.2 CFA. While 28.8% of these households think the amount is affordable, 71.2% thinks this amount is high,

and no household considered the amount to be insignificant. This is illustrated on the figure below.

Figure 9: Perception of Cost of Portable Water in Buea

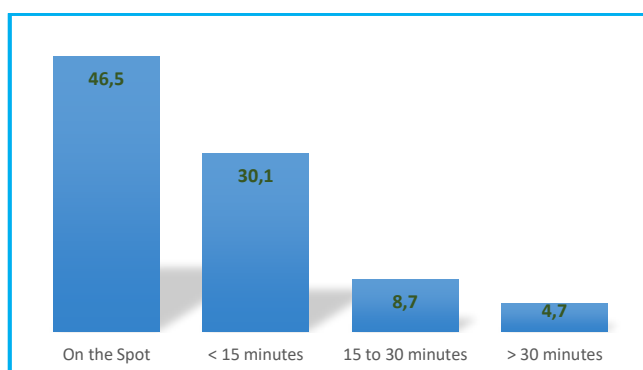


Source: survey report CCPA Buea, 2017

3.2.3 Appreciation of Water Services

On the whole, 49.5% of households surveyed have access to portable water all year round, while 84.3% have access to portable water all day. The low access to portable water year round can be explained by the water crisis that plague the community especially during the dry season. It was also important to know the time used per households to fetch water on foot and back. This will indicate the amount of time spent on this activity, as it affects other activities of the household, women and children in particular, who are mostly involved with the activity.

Figure 10: Time used on Foot to fetch water for the Household (%)

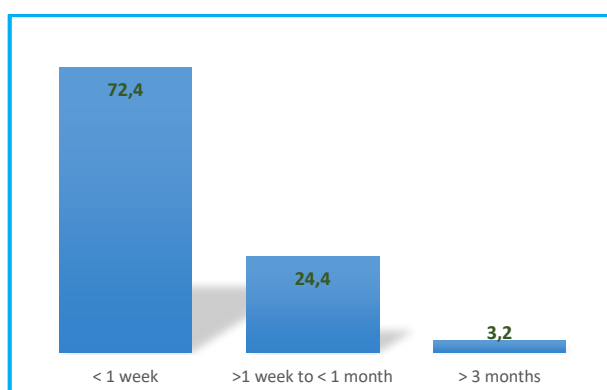


Source: survey report CCPA Buea, 2017

It is seen that, the majority of households (46.5%) get water on the spot, spending very little to get water. 30.1% spend less than 15 minutes to fetch water for their households, which though seems small but plays a major role in the time allocated for other activities of the household. 8.7% and 4.7% of the households spend respectively 15 to 30 minutes and above 30 minutes to fetch water for their households. Again, more time is allocated to fetch water, leaving less time for other activities such as income generation.

Given the frequent damage of water points around the community, it was important to find out using the research, if the main public supply water points have been damaged any time within the last six months. If so, what length of time was used for repairs if any, and who was responsible for the repairs.

Figure 11: Period Used for the Maintenance of Damaged Water Points (%)



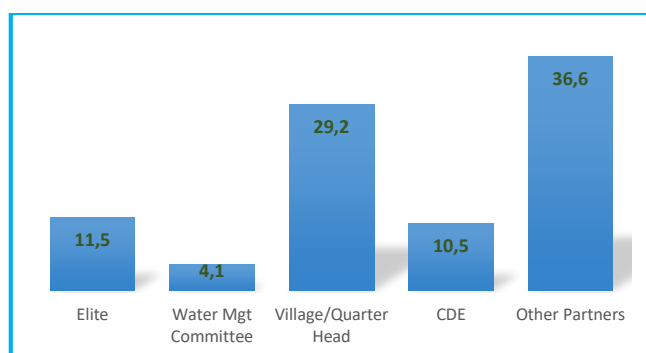
Source: survey report CCPA Buea, 2017

From all households sampled, 24.8% of them experienced a damage of the main public water supply point within the last six months. Figure 11 above shows that 72.4% of these households said repairs were done less than a week, 24.4% said the repairs were done between a week and a month, and 3.2% said the repairs were carried out above three months.

For those households who reported the repair of a damaged water point, it was necessary to find out which person or institution was responsible for the repairs. The survey showed that, 11.8% of the reported cases were solved by Elites of the community, 15.3% was handled by water management committees of the community, and the same percentage was also handled by administrative authorities of the community. Village/Quarter heads are responsible for 23.6% of the repairs carried while 33% of all damages reported were taken care of by other partners/stakeholders of the community (Civil society organizations, foreign partners etc.).

Given the nature of water supply within the community, the research investigated if the households surveyed had made any request with respect to water services within the last six months, and to whom this request was made. The survey revealed that 34% of households surveyed had made a request with respect to portable water supply within the last six, of which 26.4% had their needs satisfied. Figure 12 below shows the different stakeholders in charge of realising the needs expressed by the households within the last six months. As can be seen, majority of the needs of the households (36.6%) were satisfied by other partners/stakeholders (CSOs, NGOs, Foreign Agencies etc.). Village/Quarter heads have also played a vital role in meeting the various needs expressed by households, as seen by the response rate of 29.2%. Other stakeholders involved in the satisfaction of households needs in terms of portable water supply include elites (11.5%), CAMWATER (10.5%), and the water management committees (4.1%).

Figure 12: Main stakeholders in charge of meeting the needs expressed by households in terms of portable water supply (%)

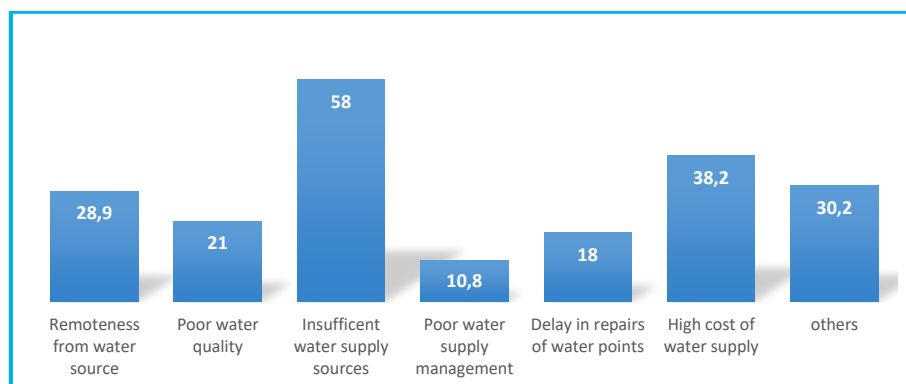


Source: survey report CCPA Buea, 2017

3.2.4 Dissatisfaction with the Provision of Portable Water Supply

As discussed above, though the community of Buea is blessed with abundant water sources, they still face serious problems of water supply shortages which leave them unsatisfied with the services of portable water supply within the community.

Figure 13: Reasons for Households Dissatisfaction with the Provision of Portable Water Supply Services (%)



Source: survey report CCPA Buea, 2017

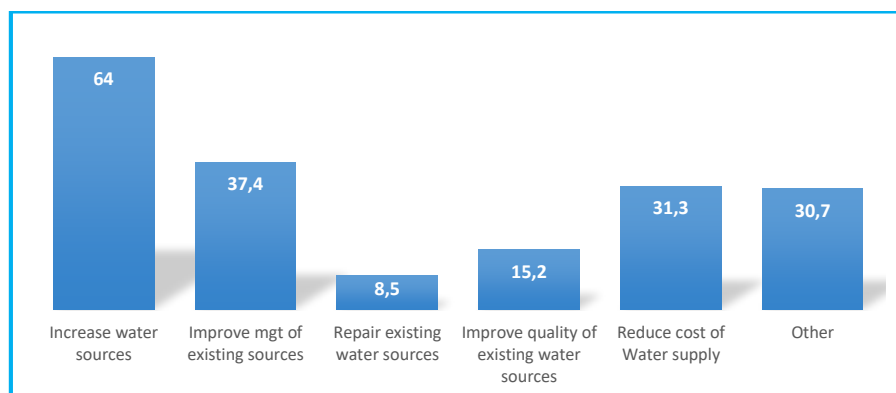
The various reasons put forth by households for their non-satisfaction with water supply services include insufficient water supply sources (58%), high cost of water supply (38.2%), remoteness/distance from water supply source (28.9%), poor water quality (21%), delay in repairs of damaged water points (18%), poor water management (10.8%), and other reasons (30.2%).

3.2.5 Main Expectations in the Supply of Portable Water

With respect to the supply of portable water within the Buea municipality, the households sampled had a number of expectations from the services in charge. 64% of the households expect an increase in water supply sources inspired by shortages in water supply within the community. 34.7% of the households expect improvement in the management of the existing water supply sources which will provide a more consistent water supply day and year round. Also, the problem of high cost of water supply is expected to drop to facilitate access to a greater share of the population of the community (31.3%). Other households expected the repairs of damaged existing water points (8.5%), improvement of the quality of the existing water sources (15.2%), and other expectations (30.7%).

Commenté [r1]: Corrected

Figure 14: Household Expectations with respect to Water Supply Services



Source: survey report CCPA Buea, 2017

3.2.6 Overview of Household Perception on Portable Water Supply Services and Suggested Recommendations

In all, the Buea municipality has very high access to portable water as examined above, but due to poor management, quality, and delayed repairs, access is not consistent through out the year. The problems so far identified for amelioration include:

- Remoteness and insufficient portable water supply sources within the community
- Poor management of water supply sources, and poor quality of water
- Inadequate communication between the population and water supply management authorities
- High cost of portable water.

This has given rise to some suggested recommendations which if handled, will improve the availability and quality of portable water within the community.

- Portable water sources should be increased within the community, as some households used more than 30 minutes to fetch water for their households.
- Water management committees should be formed and empowered around all public water supply sources to ensure quality management of the source, and prompt reactions to any damages incurred by the water point.
- A good communication system should be put in place by the main water distribution agency CAMWATER and MINEE, to better communicate any problems arising with the main public water supply sources.

- Damaged existing sources of portable water supply should be repaired as soon as possible because these damaged points have increase the pressure on other water points meant to serve a number of households only.
- The council authority should make available community water schemes to help reduce the cost of households in getting portable water.
- The quality of portable water is a plays a major role in the health of households, and so special measures should be taken by the authorities in charge to ensure very good quality of portable water going into households within the community.

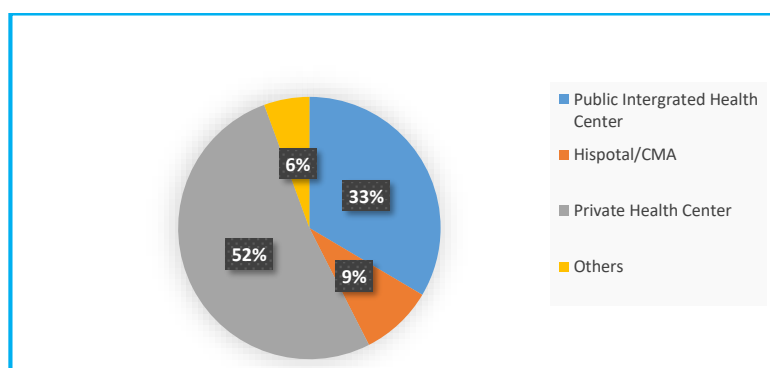
3.3 Health Sector

The Buea municipality is blessed with about 31 health units, 18 public and 13 private health centers. On the whole, the health situation of the municipality is good though some lapses still exist which need immediate attention. But to fully appreciate the health service within the community, the research took a detail look at the sector.

3.3.1 Availability and Utilization

From all households sampled within the survey, private health centers appear to be most accessible to households within the community with a response rate of 52%, followed by public integrated health centers with 33%, and hospitals/CMA with 9%. Unfortunately, 6% of households do not have any health unit near their households. The figure below helps demonstrates the proximity of health units to households within the community.

Figure 15: Closest Health Units to Households within Buea Municipality

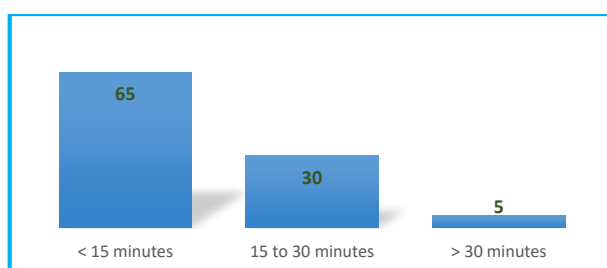


Source: survey report CCPA Buea, 2017

Though, a number of health centers are quite close to the households, it was necessary to find out the actual time required to get to these health units. The figure below shows that the larger portion of households can get to the closest health unit within 30 minutes, with 65% being less than 15 minutes to the health unit and 30% being within 15 and 30 minutes to the health unit. Just about 5% of households use more than 30 minutes to get to the nearest health unit. Figure 16 below shows the situation clearly

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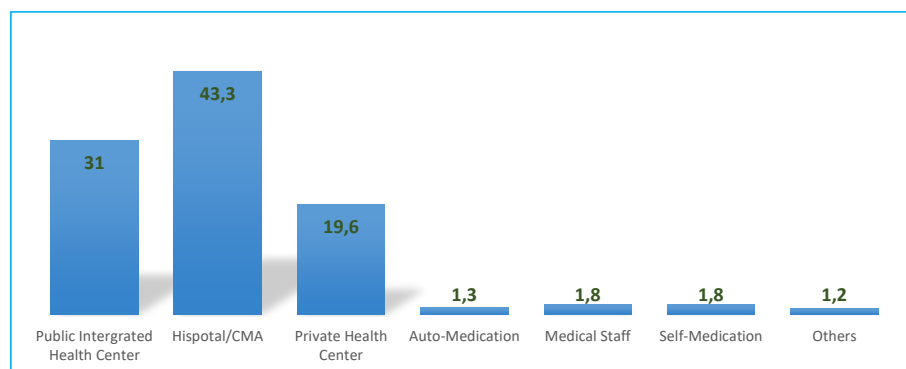
Figure 16: Time used to get to the nearest Health Center by Households in the Community



Source: survey report CCPA Buea, 2017

The research further revealed that, most households (43.3%) take preference to a district hospital when health issues arise within the house. 31% prefer integrated health centers while 19.6% prefer private health centers. Other households prefer auto medication (1.3%), use of medical personnel (1.8%), self-medication (1.8%), and other means (1.2%).

Figure 17: Households preference of Health service in case of Illness



Source: survey report CCPA Buea, 2017

Of all households sampled, 54.6% use the nearest health care unit to their households. With proportion, they are quite aware of the persons in charge of the health unit. The survey revealed

that 55.3% of the nearest health care units used by households are headed by medical doctors, while 3.9% and 5.8% are headed respectively by nurses and assistant nurses. Unfortunately, 30.5% are not aware of the person responsible for the nearest health care unit which they use.

3.3.2 Quality and Cost of Health Services

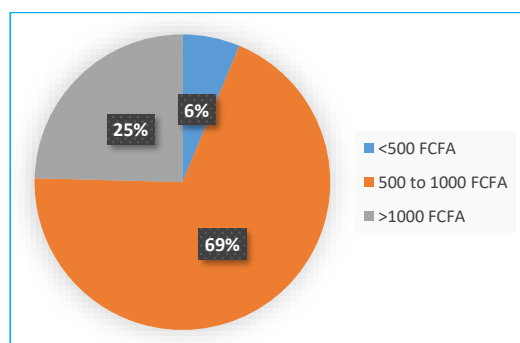
In terms of quality of health service, the survey was interested in finding out the situation of the health unit the last time a member of households visited the facility, in terms of personnel, availability of medications, and equipment.

The survey revealed that, almost all health units used by households had the medical personnel present, as seen by a 99% response from all households sampled. Also, minor equipment (syringes, alcohol, scissors, etc.) were available in the health facility as said by 82.5% of households. This shows that the health units are capable of carrying out minor emergency cases. Also, 95.3% of households said a hospitalization ward was available for admission of patients. In these hospitalization wards, 3.1% of households reported less than 5 beds found in the wards, 11.2% reported 5 to 10 beds, 38% reported more than 10 beds, while 47.7% could not tell the number of beds found in the ward.

With regards to availability of medication within the health care unit, 95.1% of households reported the availability of a pharmacy or pro-pharmacy, while 93.5% of households said the pharmacies actually had drugs during their visit to the nearest health care unit.

In terms of cost of health services, 94.7% of households reported paying an amount of money for consultation at the nearest health care unit visited.

Figure 18: Cost of Consultation of Households



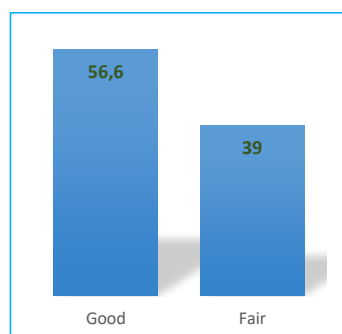
Source: survey report CCPA Buea, 2017

From the figure, 69% of households reported paying between 500 and 1000 FCFA for consultation, 25% above 1000 FCFA, and 6% below 500 FCFA. With these different cost of consultation, 88.3% of households found the amount to be reasonable or affordable, while 9.5% found the amount to be high for them, and 2.2% said the amount was insignificant to them and posed no inconveniences for them.

3.3.3 Appreciation of Health Services

In general, the majority of households sampled revealed that they found the attitude of the medical staffs at the nearest health care unit visited to be good, as seen by a 56.6% response rate, while 39% said their attitude was fair.

Figure 19: Appreciation of Medical Staff by Households



Source: survey report CCPA Buea, 2017

In all, 74.1% of households agree that, the nearest health care unit was capable of providing appropriate solutions to a good number of health problems faced by the household.

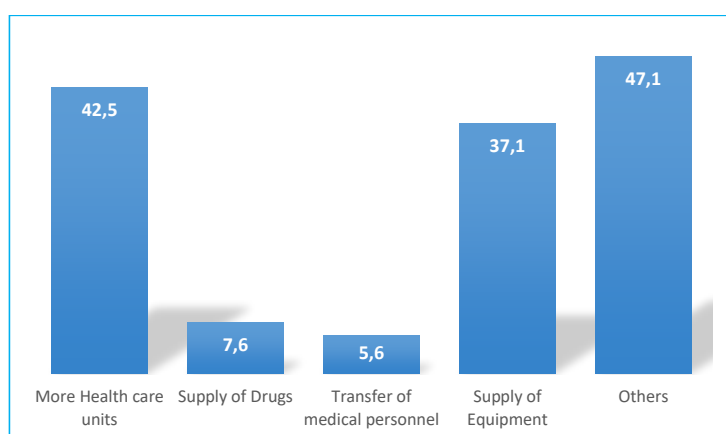
3.3.4 Dissatisfaction of Households with Health Services

Only 13.1% of households were not satisfied with their health services, and were attributed to reasons as remoteness of health care units, high cost of health care, insufficient drugs, insufficient and poor equipment of the health unit etc.

3.3.5 Expectations of Households with regards to Health Services

As always, households are not short of expectations from the health sector. 42.5% of households expect an increase in the number of health care units within the municipality, while 37.1% expect the provision of more and better equipment within the health care units. 7.6% and 5.6% of households respectively, expect the supply of more drugs to health care units, and the transfer of a medical personnel from the health care unit. 47.1% expect other improvements of the health care units.

Figure 20: Households expectations of health service sector



Source: survey report CCPA Buea, 2017

3.3.6 Overview of Households perception on Health Services and Suggested Recommendations

On a general note, the provision of health services within the Buea municipality is highly appreciated by the population due to;

- The presence of 31 health care units within the municipality
- Availability of medical personnel at the various health care units
- Availability of basic materials and equipment in health care units
- The existence of pharmacies/pro-pharmacies within the various health care units
- About 90% of the population judge the consultation fee to be insignificant or reasonable
- The population have a good perception of the reception in health
- The population is satisfied or generally satisfied with the health services offered in the community
- The non-preference for traditional medication in case of health problems

Though health care services are quite good within the municipality, some ameliorations need to be done, to provide better quality services to the population. To help them achieve this goal, NADEV suggest the following;

- More drugs should be made available within the health care units, and a detailed list of all drug prices, including all other fees to be paid for any service from the unit.
- More hospital equipment should be provided for the health care units, so as to improve the quality of health care services provided to the public.
- Improve on the capacity of medical staff to better render health care services to the population.
- Revitalise the existing committees for better performance.

3.4 Educational Sector (Basic, Primary, Secondary and Vocational training)

Buea is considered the educational hub of Cameroon due to the high concentration of schools ranging from nursery to higher education and vocational training within the community. In all, Buea has over 100 schools excluding higher institutions, 31 secondary schools both public and private, 41 primary schools, both public and private, and 30 nursery schools, both public and private. The municipality also has vocational training institutions such as the Cameroon OIC, and the Vocational training center.

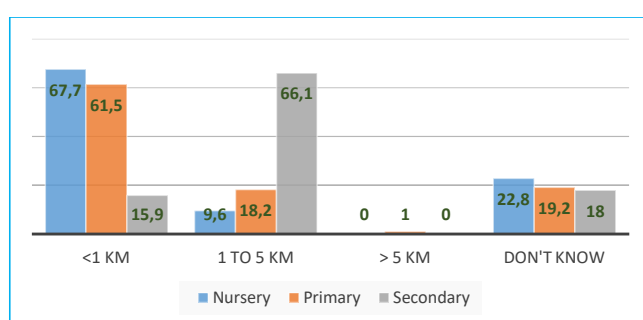
The survey was interested in the existence and accessibility of Basic, Secondary, and vocational training institutions. Before detail results are presented, it should however be noted that, the actual number of households who answered questions with regards to nursery and secondary education were less than 50 but greater than 25, and so a genuine conclusion cannot really be drawn from their responses given the small sample size. But their responses will serve just as an eye opener to the services involved. For the purpose of our analysis, these figures of nursery and secondary education will be presented in parenthesis. Also, the sample of households who actually answered questions with regards to vocational training was less than 25 households, and so these responses will not be considered in the framework of the study.

3.4.1 Availability and Utilization of Educational Services

The survey revealed the existence of nursery, primary and secondary institutions within the municipality. All households with children in nursery school confirmed the existence of nursery schools within their quarter/village, that is (100%), 99% of all households declared the presence of a primary school within their village/quarter, and (97.2%) declared the presence of

a secondary school within their village/quarter. Within the community, the average number of children per households attending the nursery school within the village/quarter was reported to be approximately (1) child, 1 child still for primary, and (1) child also for secondary. The distance to be covered by children of households to get school was also analysed, and it showed the following;

Figure 21: Distance Covered by Households Children to get to School



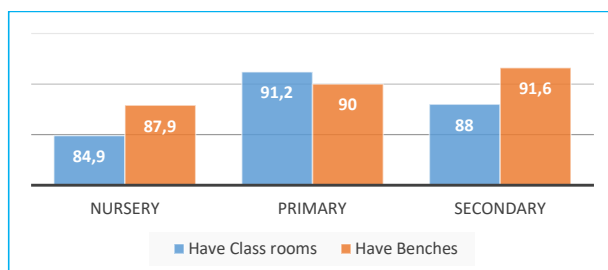
Source: survey report CCPA Buea, 2017

As mentioned above, the figures representing nursery and secondary schools only serve as an eye opener, and cannot be used to draw any conclusions due to small size of participants for these particular sections. The survey revealed that, most nursery and primary schools are less than a kilometer from the households as reported (67.7% and 61.5% respectively), while the secondary schools are within 1 and 5 kilometers away from the households as reported (66.1%). The study also revealed that, the average time on foot for a child to get to his/her school is approximately (17) minutes for nursery schools, 19 minutes for primary schools, and 30 minutes for secondary schools.

Commenté [r3]: adjusted

It was also of interest to know if the various schooling institutions disposed of the complete cycles as required by standards. The survey revealed that, most of the primary and secondary schools have complete cycles as required. (95.1%) of households agree that the primary schools had a complete cycle, while (96.7%) and (81.8%) of households declared respectively that the secondary first and second cycle are both complete. Also, households reported that these schools were equipped with class rooms and Benches. Precisely, (84.9%) of households said the nursery schools had class rooms, 91.2% for primary schools and (88%) for secondary schools. On the other hand, (87.9%) of households said nursery schools had benches, 90% for primary, and 91.6% for secondary.

Figure 22: Availability of Class rooms and Benches within Educational Institutions



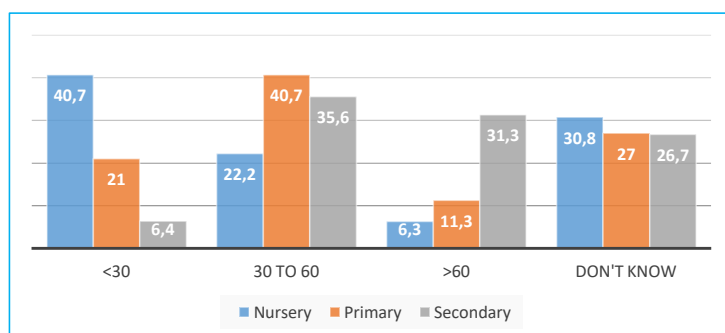
Source: survey report CCPA Buea, 2017

Households also reported the distribution of school manuals to nursery and primary pupils, which are a program, put in place by the government for the distribution of manuals in English, French or Arithmetic, for public nursery and primary schools throughout the national territory. Precisely, (29.2%) and 24.1% of households agreed to the distribution of manuals to nursery and primary school pupils respectively.

3.4.2 Quality and Cost in the Provision of Educational Services

The quality and cost of education is very vital for the development of any nation, and so some emphasis was laid in finding out these aspects of the nursery, primary and secondary educational systems. In the framework of this study, the main variables used in measuring the quality of education included; number of children per classroom and attendance of teachers, while the variables for cost included; average annual cost of tuition per child and additional expenditures.

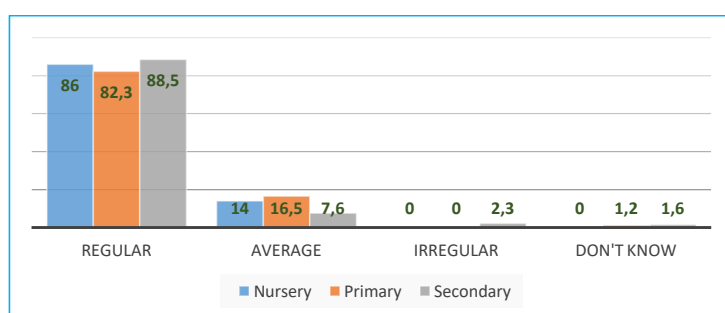
Figure 23: Average Number of Pupil/Students per Classrooms



Source: survey report CCPA Buea, 2017

The survey shows that, the average number of pupils in nursery schools is less than 30 as seen by the (40.7%) response rate, while (30.8%) of households did not know the number. As concerns primary schools, households reported an average number pupil between 30 and 60 children, as seen from the 40.7% response rate, and 27% were unaware. Secondary schools showed an average number of students between 30 and 60 (35.6%), above 60 (31.3%), and unaware (26.7%).

Figure 24: Attendance frequency of Teachers

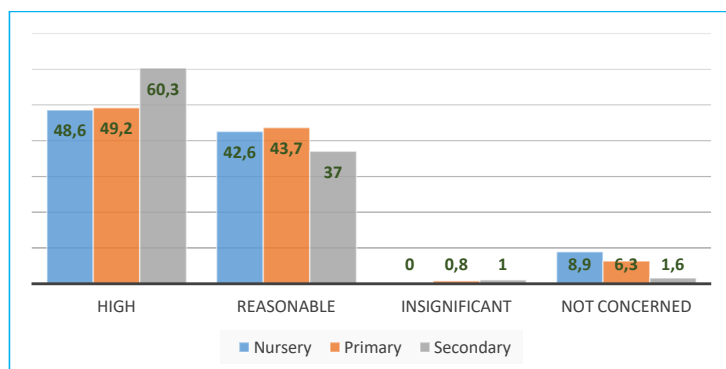


Source: survey report CCPA Buea, 2017

The figure reveals that on average, the teachers are regular in schools as reported by (86%), 82.3, and (88.5%) of households for nursery, primary and secondary respectively. Nevertheless, some households still reported fairly regular and irregular attendance of teachers in school.

As what concerns the cost of education within the community, most of the households sampled declared the high cost of education at all levels. In essence, 89.3% of households affirmed to have paid tuition fee for nursery education, 94.6% for primary education, and 98.4% for secondary education.

Figure 25: Household Perception of Tuition Fee

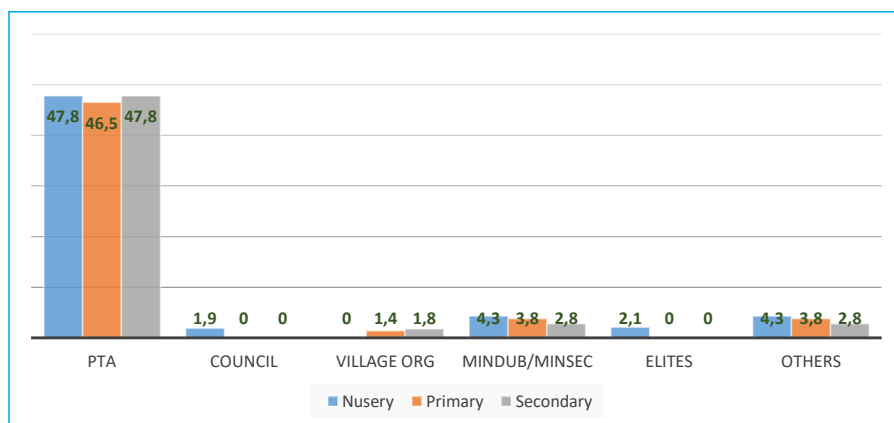


Source: survey report CCPA Buea, 2017

From the figure above, most households (48.6%), 49.2%, and (60.3%) affirmed that the tuition they for the nursery, primary and secondary schools respectively are high. This can somehow be explained by the preference of more private schools to public schools by households. Nonetheless, (42.6%), 43.7%, and (37%) of households think the tuition fee for the nursery, primary, and secondary respectively is reasonable.

It was also a primary concern to find out the persons or institutions responsible for financing maintenance works within the school environment in case of damage. The survey shows a number of stakeholders who finance maintenance activities where need arises.

Figure 26: Institutions in charge of maintenance activities within schools in case of damages



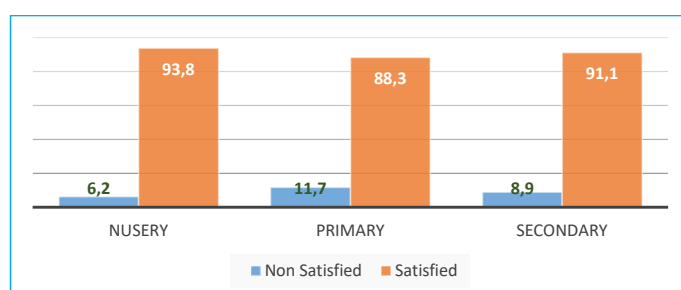
Source: survey report CCPA Buea, 2017

The results show that, the main institution in charge of maintenance in case of damage is the Parents Teachers association (PTA) as reported by (47.8%) of households for nursery, 46.5% for primary, and (47.8%) for secondary. A number of stakeholders were also identified to have carried out this activity, and includes the councils, village/quarter organisations, ministries of Basic and Secondary education (MINDUB and MINSEC), Elites of the municipality, and others.

3.4.3 Appreciation of Educational Services

In general, households were satisfied by the services of the educational sector. Though they cry of high tuition fees, the quality of education given to their children is also good, the reason Buea is one of the most literate towns in the Country. This result is seen by the response rate of households which are (93.8%) for nursery, 88.3% for primary, and (91.1%) for secondary. Figure 27 clearly demonstrates the results below.

Figure 27: Level of Satisfaction of Households with Educational Services



Source: survey report CCPA Buea, 2017

3.4.4 Dissatisfaction of Households with Educational Services

From figure 27 above, it is clear that a small proportion of households are dissatisfied with services of the educational sector. This is seen with the response rate of households of (6.2%) for nursery education, 11.7% for primary education and (8.9%) for secondary education. The various reasons advanced for this includes the following;

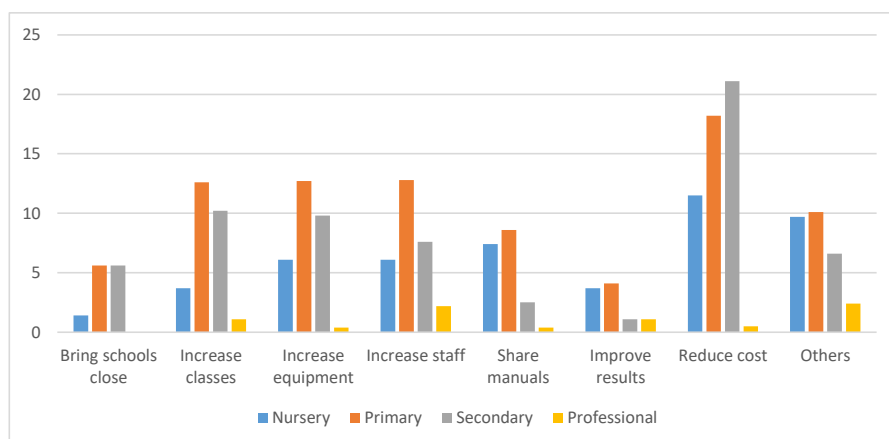
- Long distances of some schools
- Insufficient classrooms
- Insufficient and in adequate equipment
- Insufficient schools
- Insufficient teaching Staff

- Lack of school manuals
- Poor results
- High tuition fees
- Others

3.4.5 Expectations of Households with regards to Educational Services

The bulk of households confirmed to be satisfied with the services of the educational sector. But nonetheless, a number of worries in terms of expectations from the people in charge were raised. Some of the expectations included; bringing schools closer to households, provision of more and quality equipment, increase classrooms, increase schools, increase staff, distribute text books, improve on school results for all levels, reduce cost of education, and others. The figure below presents the various expectations of households.

Figure 28: Expectation of Households with respect to Educational Services



Source: survey report CCPA Buea, 2017

The figure above shows the percentage of households who expect a certain service as concerns education. To better understand the figure, the different educational cycles will be analyzed separately.

With regards to nursery education, most households expect a drop in tuition and other cost (11.5%), followed by the distribution of manuals to children (7.4%), provision of more staff

(6.1%), more classrooms (6%), more equipment (3.7%), improve results of children (3.7%), bring the nursery closer to households (1.4%), and others (9.7%).

As concerns primary education, most households expect a drop in tuition and other cost (18.2%), followed by the provision of more staff (12.8%), more classrooms (12.7%), more equipment (12.6%), distribution of manuals to children (8.6%), improve results of children (4.1%), bring the nursery schools closer to households (5.6%), and others (10.1%).

Expectations of households for secondary education includes a drop in tuition and other cost (21.1%), followed by the provision of more equipment (10.2%), more classrooms (9.8%), more staff (7.6%), bring the secondary schools closer to households (5.6%), distribution of text books to students (2.5%), improve results of students (1.1%), provide more secondary schools in the municipality (0.7%) and others (6.6%).

Though very little has been said with respect to vocational training, it is due to the fact that most households had no children attending any of the professional training institutions. But households however had expectations from the services of professional training. Their expectations included the provision of more vocational training schools (1.6%), increase more classrooms (0.4%) and more equipment in these schools (1.1%). They also expect the provision of more teaching staff (2.2%), provision of text books (0.4%), improvement of student results (1.1%), drop in tuition fee and other cost (0.5%), and others (2.4%).

In all, most households want the reduction of cost for the different educational cycles.

3.4.6 Overview of Household perception of Educational Services and Suggested Recommendations

As mentioned above, Buea is one of the most literate, if not the most literate town in Cameroon. To this effect, most of the households were generally very satisfied with the services of the education sector. This is seen through the following points below;

- The population is aware of the presence of schools within the community, nursery, primary, secondary, and within reasonable distance from households implying the schools are accessible.
- The schools are equipped with classrooms and benches which facilitates the learning process for pupils and students.
- Teachers are also quite regular to school.
- The lack of corruption within schools is also evident, as households do not pay extra charges to get their children admitted to schools or other non-official activities.

- In general households are satisfied with the services they receive from the educational sector

Though most household express satisfaction with educational services, some amelioration still needs to be done, as expected by households. For these reasons, NADEV has the following suggested recommendations.

- Better infrastructures (classrooms and equipment) should be provided for public nursery and primary schools to promote enrollment of pupils, hence reducing the high cost of education incurred in the private schools.
- A school management committee should be created where not existing or revamped, to follow up a participatory management of schools that ensures quality education at a minimal cost to households.
- Teacher of public nursery and primary schools especially, should be sensitized on the importance of their job and child education. This will improve quality of the education of children at public nursery and primary schools.
- Councils authorities in collaboration with Elites of the community should set aside a budget for managing schools, especially maintenance activities within schools.

3.5 Council Services

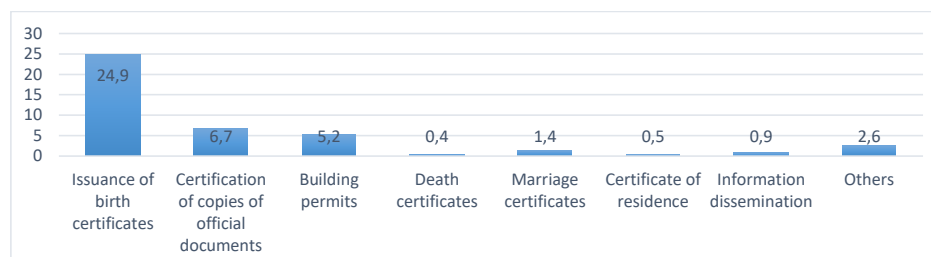
The council represents the decentralized local authority at the level of the community, headed by the mayor. As such, the council has the authority to provide certain services to the population which it serves. Hence, this study was also in a bit to find out the various services offered by the council to its community, the quality of these services and the perception of households with regards to these services.

3.5.1 Availability and Utilization of Council Services

The survey revealed a number of services rendered by the council to its citizens, which includes (but not limited to) the issuance of birth certificates, certification of copies of official documents, building permits, marriage certificates, death certificates, certificate of residence, validation of location plans, and information dissemination.

Here, the number of households who demanded any of the council's services within the last 12 months prior to the survey was between 25 and 50, and so accurate conclusions cannot be drawn from their responses. The survey showed that, the most demanded service of the council was the issuance of birth certificate, as responded by the 24.9% of households.

Figure 29: Councils Services as demanded by Households



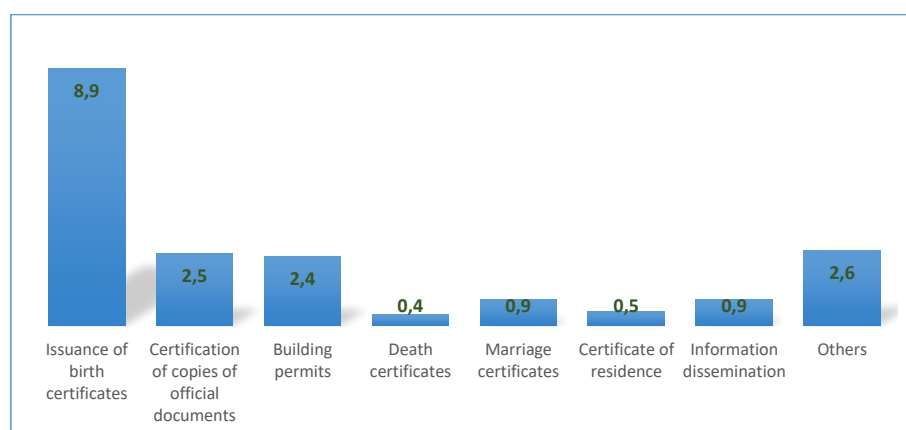
Source: survey report CCPA Buea, 2017

Other services like the certification of documents was reported by 6.7% of households, 5.2% for building permits, 0.4% for death certificates, 1.4% for marriage certificates, 0.5% for certificates of residence, 0.9% for dissemination of information, and 2.6% for other services. From all these services, (81.6%) of households who demanded the services of issuance of birth certificates were satisfied on how they were received at the council.

3.5.2 Quality and Cost in the Provision of Council Services

The amount of time used to completely satisfy the households with regards to their demands was also investigated. The figure below shows the percentage of households who regarded the time used as long or very long.

Figure 30: Percentage of households who regards the council service time as long or very long



Source: survey report CCPA Buea, 2017

8.9% of households think the time used to serve them birth certificates is either long or very long, 2.5% for certification of documents, 2.4% for building permits, and 2.6% for other services.

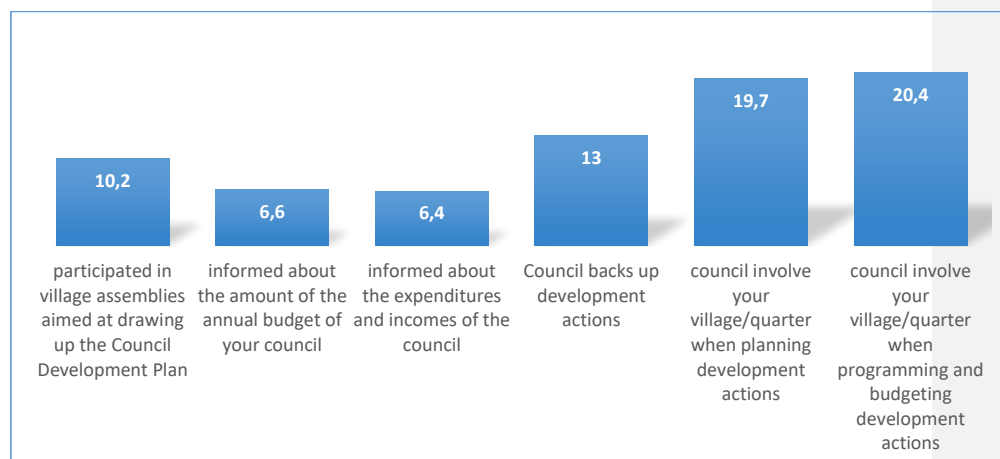
Some households also reported paying tips for their services to be rendered, especially for the issuance of birth certificates and building permits, 5.4% and 0.6% of households respectively confirmed to have paid some tips to receive these services. This only shows that some corruption practices are being carried out by some council staff in performing their duties.

3.5.3 Appreciation of Council Services

Here, it was necessary to find out how the citizens are involved with council developmental activities. It was revealed that, just 10.2% of households confirmed to have taken part in the elaboration of the Buea communal development plan, which is quite small given the new system of development which has to start from the grassroots. Also, just 6.6% of households have information on the annual budget of the council, which make it difficult for the citizens to follow up the activities of the council and to hold them accountable. Again, 6.4% of households confirmed to be aware of the incomes and expenditure of the council, and again, proper follow up cannot be done by the grassroots, as the right questions will not be asked. When it comes to council follow up of its development activities initiated within the community, just 13% of households agreed that the council carries out follow up activities for its development projects within the community. This only tells us that, there is lack of proper follow up after project execution and thus rendering the project unsustainable. Further findings reveal that, just about 19.7% of households agree to be involved in the planning of development actions with the council. Again, this percentage is low and more households do not get to participate and give their own ideas. When it comes to programming and budgeting of development actions, 20.4% of households agreed to be involved with the council. This figure also, is low and more should be done to improve citizens' participation in such activities.

Commenté [r4]: included

Figure 31: Household Participation in Council Development Activities

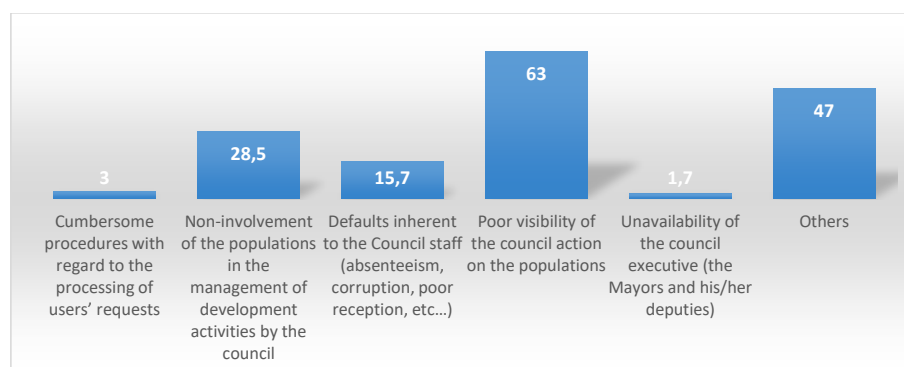


Source: survey report CCPA Buea, 2017

3.5.4 Dissatisfaction of Households with Council Services

38.1% of households sampled declared not being satisfied with the services offered by the council. A number of reasons were put forth for their non-satisfaction as seen on the figure below.

Figure 32: Reasons for Non Satisfaction of Council Services of Households



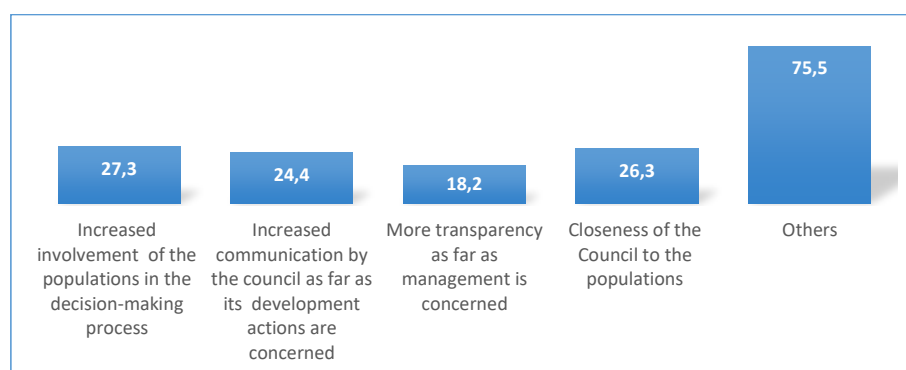
Source: survey report CCPA Buea, 2017

The figure shows that most households were not satisfied due to poor visibility of council's activities as reported by 63% of households. 28.5% of households were unsatisfied due to non-involvement by the council of the population in the management of development activities,

15.7% due to poor staff performance, 3% due to complicated procedures in processing users' demands, (1.7%) due to the unavailability of the council executives, and (47%) for other reasons.

3.5.5 Expectations of Households with regards to Council Services

Figure 33: Households expectations from council services



Source: survey report CCPA Buea, 2017

As seen from the figure above, 27.3% of households expect the council to increase the participation of the general population in their decision making processes, 24.4% expect more communication from the council on development activities, 18.2% of households expect more transparency in the management of council affairs, 26.3% of households expect the council to get closer to its citizens, and 75.5% of households have other expectations from the council.

3.5.6 Overview of Household perception of Council Services and Suggested Recommendations

In all, the council should be appreciated for making available its services to the general public, and involving the population in establishing and carrying out development actions. Though the council involves the population in its activities, it still is not enough, as more people are left out rather than brought in the council, hence more needs to be done to increase the participation of the general public in decision making process of the council, elaboration and execution of development actions, and generally sensitize the public on all council activities. With these observations, NADEV has the following suggestions for the council to improve its services towards its citizens.

- Organize sensitization campaigns on all council activities.
- Invite the general public to council sessions using other means like the social media

- Organize talks with council staff to fight corruption practices during their duties.

3.6 Conclusion and Principal Recommendations

Households within the Buea municipality are generally fairly satisfied with the services offered in the various domains Water, Health, Education, and Council services, though households still have some reservations concerning these services.

NADEV had the following recommendations for the Buea municipality

Water Sector;

- Portable water sources should be increased within the community, as some households used more than 30 minutes to fetch water for their households.
- Water management committees should be formed and empowered around all public water supply sources to ensure quality management of the source, and prompt reactions to any damages incurred by the water point.
- All water management committees should work in close collaboration with the council authorities.
- A good communication system should be put in place by the main water distribution agency CDE/Ministry, to better communicate any problems arising with the main public water supply sources.
- Damaged existing sources of portable water supply should be repaired as soon as possible because these damaged points have increase the pressure on other water points meant to serve a number of households only.
- The council authority should make available community water schemes to help reduce the cost of households in getting portable water.
- The quality of portable water is a major player in the health of households, and so special measures should be taken by the authorities in charge to ensure very good quality of portable water going into households within the community.

Health Sector;

- More drugs should be made available within the health care units, and a detailed list of all drug prices, including all other fees to be paid for any service from the unit.
- More hospital equipment should be provided for the health care units, so as to improve the quality of health care services provided to the public.
- Improve on the capacity of medical staff to better render health care services to the population.

- Set up a monitoring and evaluation committee for all health care units at the communal level, to promote quality health service management and delivery within the municipality.

Education Sector;

- Better infrastructures (classrooms and equipment) should be provided for public nursery and primary schools to promote enrollment of pupils, hence reducing the high cost of education incurred in the private schools.
- A school management committee should be created where not existing or revamped, to follow up a participatory management of schools that ensures quality education at a minimal cost to households.
- Teacher of public nursery and primary schools especially, should be sensitized on the importance of their job and child education. This will improve quality of the education of children at public nursery and primary schools.
- Councils authorities in collaboration with the PTA and Elites of the community should set aside a budget for managing schools, especially maintenance activities within schools.

Council Services;

- Organize sensitization campaigns on all council activities.
- Invite the general public to council sessions using other means rather than the council notice board
- Organize talks with council staff to fight corruption practices during their duties.

In all, more needs to be done with regards to nursery and primary education, general health services, and most especially improving council services to the population of Buea.

CHAPTER FOUR

ACTION PLAN FOR THE IMPLEMENTATION OF CITIZEN CONTROL OF PUBLIC ACTION

4.1 Program for the Dissemination of Results and Presentation of Action Plan

Table 4: Dissemination of Results and Presentation

Phase	Activities	Expected Results	Responsible	Partners	Start date	End date
Production of Reports	Submission of draft report	Final scorecard report is available	CSO	PNDP	28/04/2018	30/04/2018
	Reading of the report			Review panelists	01/05/2018	10/05/2018
	Reading workshop			PNDP Review panelists Representatives of all sectors involved	14/05/2018	26/05/2018
	Submission of final report			PNDP	28/05/2018	03/06/2018
Negotiation of Recommendations	Restitution workshop for councils	1. Lessons learned and expected changes 2. List of negotiated changes	PNDP	CSO Review panelists Representatives of all sectors involved	05/06/2018	12/06/2018
Dissemination of results	Broadcasting of results	Results are fully broadcasted to the general public	CSO	PNDP Media houses	17/06/2018	06/07/2018

Implementation	Implementation of accepted changes to different sectors	Accepted changes are implemented	Respective sectors	PNDP CSO	17/06/2018	14/08/2018
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4.2 Action Plan for the Implementation of the Citizen Control of Public Action

Table 5: Summary of problems encountered

Sector	Problems identified	Suggested Solutions	Level of implementation	
			<u>Local</u> ¹	<u>Central</u>
Water	insufficient water supply sources high cost of water supply remoteness/distance from water supply source poor water quality delay in repairs of damaged water points poor water management other reasons.	<ul style="list-style-type: none"> Portable water sources should be increased within the community, as some households used more than 30 minutes to fetch water for their households. Water management committees should be formed and empowered around all public water supply sources to ensure quality management of the source, and prompt reactions to any damages incurred by the water point. A good communication system should be put in place by the main water distribution agency CAMWATER and MINEE, to better 	yes	
			yes	
			yes	

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

		<p>communicate any problems arising with the main public water supply sources.</p> <ul style="list-style-type: none"> • Damaged existing sources of portable water supply should be repaired as soon as possible because these damaged points have increase the pressure on other water points meant to serve a number of households only. • The council authority should make available community water schemes to help reduce the cost of households in getting portable water. • The quality of portable water is a plays a major role in the health of households, and so special measures should be taken by the authorities in charge to ensure very good quality of portable water going into households within the community. 	<p>yes</p> <p>yes</p> <p>yes</p>	<p>yes</p>
Health	<ul style="list-style-type: none"> • Remoteness of health care units • High cost of health care • Insufficient drugs • Insufficient and poor equipment of the health unit 	<ul style="list-style-type: none"> • More drugs should be made available within the health care units, and a detailed list of all drug prices, including all other fees to be paid for any service from the unit. • More hospital equipment should be provided for the health care units, so as to improve the quality of health care services provided to the public. • Improve on the capacity of medical staff to better render health care services to the population. 	<p>yes</p> <p>yes</p>	<p>yes</p> <p>yes</p> <p>yes</p>

		<ul style="list-style-type: none"> Revitalise the existing committees for better performance 	yes	yes
Education	<ul style="list-style-type: none"> Long distances of some schools Insufficient classrooms Insufficient and in adequate equipment Insufficient schools Insufficient teaching Staff Lack of school manuals Poor results High tuition fees Others 	<ul style="list-style-type: none"> Better infrastructures (classrooms and equipment) should be provided for public nursery and primary schools to promote enrollment of pupils, hence reducing the high cost of education incurred in the private schools. A school management committee should be created where not existing or revamped, to follow up a participatory management of schools that ensures quality education at a minimal cost to households. Teacher of public nursery and primary schools especially, should be sensitized on the importance of their job and child education. This will improve quality of the education of children at public nursery and primary schools. Councils authorities in collaboration with Elites of the community should set aside a budget for managing schools, especially maintenance activities within schools 	yes	yes
Council Services	<ul style="list-style-type: none"> Poor visibility of council's activities Noninvolvement by the council of the population in 	<ul style="list-style-type: none"> Organize sensitisation campaigns on all council activities. Invite the general public to council sessions using other means like the social media 	yes	

	<p>the management of development activities</p> <ul style="list-style-type: none"> • Poor staff performance • Complicated procedures in processing users' demands • Unavailability of the council executives • other reasons. 	<ul style="list-style-type: none"> • Organise talks with council staff to fight corruption practices during their duties. 	yes	
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Table 6: Action Plan (based on the actions to be implemented at the local level)

Sector	General Objectives	Specific objectives	Actions	Results indicators	Reference value	Target value	Frequency of measurement	Source of verification	RESPONSIBLES	PARTNERS	Estimated cost
Water	Improve access to good drinking water	Increase water points within the municipality	Construct/Repair water points within the community	10 water points are constructed/ repaired within the municipality		10 water points	yearly	Pictures Videos Contracts/MoU	Council MINEE	PNDP ELITES CSOs Village/Quarter heads	5 million FCFA (pending study)

		Improve the management of water sources	Revamp/Create water management committees	At least 10 new water committees are created around new water points and at least 5 existing water committees are revamped		15 operational water management committees	yearly	List of members of the committee and their contacts Regular minutes of committee meetings Monthly action plans and reports of committees	Council MINEE	CSOs PNDP Village/Quarter heads	2 million FCFA (pending assessment)
Health	Improve access to Quality Health care	Increase the performance of medical staff	Organise workshops to sensitise medical staffs in performing their duties	At least 60% of all medical staff within the municipality practice good working ethics		60% of all medical staff within the municipality practice good	Quarterly	Attendance sheets Reports Pictures Testimonies from participants	MINSANTE	Council CSOs	3million fcfa (pending proper budgetting)

						working ethics					
		Reduce extortion of the population by medical personnel	Organise sensitisation campaigns on the official price list for drugs and all official fees to be paid at the hospital unit	Reports of informal fees and prices paid drop by at least 50%		50% drop in complaints from users of health facilities	Quarterly	Posters Banners Pictures Reports	MINSANTE Council Health Committee	PNDP CSO Village/Quarter heads Elites	3million fcfa (pending proper budgeting)

		Ensure proper functioning of health units	Revamp health monitoring committees to better perform their duties	All health management committees are functioning fully		All health management committees are functioning fully	Quarterly	List of members of the committee and their contacts Regular minutes of committee meetings Monthly action plans and reports of committees	MINSATE Council	CSOs PNDP Village/Quarter heads Elites	1million fcfa(pending proper budgeting)
Educ ion	Improve access to quality education within the Buea municipality	Improve infrastructure and equipment of schools	Identify, construct, and equip needy public nursery and primary schools within the Buea municipality	5 schools are identified, maintained, and equipped within Buea		5 schools are identified, maintained, and equipped within Buea	yearly	Pictures Videos Testimonies from recipient institutions Contracts/MoU	Council MINDUB PTA	PNDP Elites Village/Quarter heads	10million (pending feasibility study)

		Improve management of schools	Revamp/Create school management boards and PTAs.	At least 50% of schools' management committees are functioning fully		50% of schools' management committees are functioning fully	Quarterly	List of members of the committee and their contacts Regular minutes of committee meetings Monthly action plans and reports of committees	Council MINDUB MINSEC PTA	Village/Quarter heads Elites PNDP	
		Increase performance of teachers within schools	Organise sensitisation workshop on the importance of child education for teachers of basic, primary, and secondary education.	At least 50% of teachers within the municipality are regular to their jobs. Results of pupils and students		50% of teachers within the municipality are regular to their jobs. Results of pupils and	Quarterly	Attendance sheets Reports Pictures/videos Testimonies from participants	MINDUB MINSEC	Council CSOs PTA	3million fcfa (pending proper budgetting)

				increase by at 20%		students increase by at 20%					
Council Services	Improve trust local population and the council	improve communication between the council and the local population	Organisation of quarterly open sessions	At least one open session is organised quarterly between council executives and the community		one session quarterly	Two times yearly	Pictures Videos Reports Minutes of the sessions	Council CSO	PNDP MINATD Elites Village/Quarter heads	100,000 fcfa
			Make public the council investment budget	At least 50% of the municipal population are aware of the council's plan of action and budget		50% of the municipal population are aware of the council's plan of action and budget	Quarterly	Banners Posters/flyers Radio broadcast reports	Council PNDP	MINATD Village/Quarter heads CSOs Elites	200,000 fcfa
		Reduce poor working ethics amongst council staff	Organise workshop on work ethics for council staff	At least 50% of council staff perform		50% of council staff perform better at	Quarterly	Attendance sheets Reports Pictures/ videos	Council	CSO PNDP	500,000 fcfa (pending proper

				better at their duties.		their duties.		Testimon ies from participa nts			budgeting)
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ANNEXES

ANNEX 1: QUESTIONNAIRE FOR THE STUDY

Citizen Report Card *Assessment of public services within the Council of*

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Section I. BACKGROUND INFORMATION

A01	Region _____	_ _
A02	Division _____	_ _
A03	Council _____	_ _ _
A04	Batch number	_ _
A05	Counting Zone Sequential number	_ _
A06	Residence stratum : 1=Urban 2=Semi-urban 3=Rural	_
A07	Name of the locality _____	
A08	Structure number	_ _ _
A08	Household number in the sample	_ _
a		
A09	Name of the household head _____	
A10	Age of the household head (in years)	_ _
A11	Sex of the household head : 1=Male 2=Female	_
A12	Name of the respondent _____	
A13	Relationships between the respondent and the household's head (see codes)	_
A14	Sex of the respondent: 1=Male 2=Female	_
A15	Age of the respondent (on a bygone-year basis)	_ _
A16	Phone number of the respondent	_ _ _ _ _ _ _ _ _ _ _
A17	Date of beginning of the survey	_ _ _ / _ _ / _ _ _ _ _
A18	Date of end of the survey	_ _ _ / _ _ / _ _ _ _ _
A19	Name of the enumerator _____	_ _
A20	Name of the council's supervisor _____	_ _
A21	Data collection result	_
	1=Complete Survey 4=Absence of a qualified respondent	
	2= Incomplete Survey 5=Empty house or no house responding to the given address	

[Date]

3=Refusal 96= Any other reasons (to be specified)
(If the answer is different from 1 and 2, the questionnaire should come to an end)

A22 Assessment of the quality of the survey

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

CODES

1 = Household Head

3 = Son/Daughter of the Household head or of his/her spouse

5 = Other parent of the Household Head or of his/her spouse

2 = Spouse of the Household Head

4 = Father /mother of the Household Head or of his/her spouse

6 = No relationships with household head or with his/her spouse

7= Maid

Q13

Section II. POTABLE WATER

H01	Which public water supply systems exist in your village/quarter? (Circle the corresponding letter(s)) Is there any other system?	1=Yes 2=No A. Well equipped with a pump B. Open pit well C. Protected well D. Boreholes equipped with a manually operated pump E. Spring/ river F. Access to potable water (pipe borne water)	_ _ _ _ _ _
H01a	Is your main water supply source run by a public or a private entity? 1=Public 2=Private If 2 → H4		_
H02	What is your main public water supply source? (Just a single answer) 1= Well equipped with a pump 4= Boreholes equipped with a manually operated pump 2= Open pit well 5= Spring/ river 3=Protected well 6 =Access to tap potable water		_
H03	What is the quality of the said water? 1=Good 2=Poor 3=Indifferent		_
H04	Does this water have an odour? 1=Yes 2=No 8=NSP		_
H05	Does this water have a taste? 1=Yes 2=No 8=NSP		_
H06	Does this water have a colour? 1=Yes 2=No 8=NSP		_
H07	Do you pay something to get this water? 1=Yes 2=No If no → H08		_
H07a	If yes, how much do you spend on average per month? (give an amount in FCFA)		_ _ _ _ _
H07b	How do you appraise the said amount? 1=High 2=Affordable 3=Insignificant		_
H08	Is this water available throughout the year? 1=Yes 2=No		_
H09	How many times do you need, on average, to go on foot and fetch water and come back? 1=On the spot 2=Less than 15 minutes 3=Between 15 and 30 minutes 4=more than 30 minutes		_
H10	Has this water point had a breakdown at a given time during the last six months, notably since? 1=Yes 2=No If no → H11		_
H10a	If your water point had a breakdown at a given 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, → H11		_
H10b	Who repair it? 1=Yes 2=No A=Mayor (Council)		_

[Date]

Section II. POTABLE WATER			
	Who else?	B=State C=An elite D=The Water Management Committee E=the village/quarter head F=CAMWATER/SNEC/CDE G=Other partners/stakeholders : _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
H11	Do you have access to that water point at any moment of the day? 1=Yes 2=No If yes H13		<input type="checkbox"/>
H12	If no, what is the daily frequency in terms of potable water supply in your household? 1=Once ; 2=Twice; 3=Thrice		<input type="checkbox"/>
H13	Does the said frequency correspond to your current need in terms of potable water consumption-? 1=Yes 2=No		<input type="checkbox"/>
H14	Did you express any need in terms of potable water supply in the course of the last 6 months, more specifically since? 1=Yes 2=No If no H18 →		<input type="checkbox"/>
H15	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 : _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
H16	Has your need been met? 1=Yes 2=No If no H18		<input type="checkbox"/>
H17	In the event of a satisfactory answer, how much times did it take for your need to be satisfied? 1=Less than one month 3=Over three months 2=Between one and three months		<input type="checkbox"/>
H18	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 →		<input type="checkbox"/>
H19	State the reasons of your non--satisfaction with regard to water supply in your village (several answers are possible). Any other reason?	1=Yes 2=No 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 : _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
H20	What are your expectations in terms of supply of potable water? (Several answers are possible).	1=Yes 2=No A. Additional water points ; B. Improvement in terms of management of the existing water points;	<input type="checkbox"/> <input type="checkbox"/>

Section II. POTABLE WATER

	Any other expectation?	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 : _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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Section III. HEALTH

S01	Which is the nearest health care unit to your household? 1= Public integrated health Centre 2= Hospital/CMA 3= Private health Centre	<input type="checkbox"/>
S02	How much time do you need, on average, to reach the nearest health care unit from your household? 1=Less than 15 minutes 2=Between 15 and 30 minutes 3=Between 30 minutes and 1 hour, 4 = Over 1 hour	<input type="checkbox"/>
S03	Where do your household members preferably go when they have health problems? (Just a single answer) 1=Public integrated health Center 5=Medicine store 2=Hospital /CMA 6=Go to a medical staff member 3=Private health center 7= Treat at home Self-medication 4=Traditional healers 8=Others (to be specified)	<input type="checkbox"/>
S04	Has any member of your household gone, at least once, to the nearest health care unit in the course of the last 12 months, specifically since ? 1=Yes 2=No If no → S17	<input type="checkbox"/>
S05	Who is in charge of managing such health care units? 1=Medical doctor 2=Nurse 3= Nurse aider 4=Other (to be specified) _____ 8= Does not know	<input type="checkbox"/>
The last time a member of your household was taken care of in such a health care unit,		
S06	Were the medical staffs present? 1=Yes 2=No	<input type="checkbox"/>
S07	Were minor medical equipment (such as scissors, syringes, alcohol, cotton, betadine, thermometer, tensiometer, medical scale, etc.) always available? 1=Yes 2=No 8=Do not know	<input type="checkbox"/>
S08	Is your health care unit (CMA or Hospital) provided with hospitalization rooms? 1=Yes 2=No If no → S10 .	<input type="checkbox"/>
S09	How many beds are available in the hospitalization rooms? 0= None, 1=Less than 5 beds 2=Between 5 and 10 beds 3=Over 10 beds 8=Does not know.	<input type="checkbox"/>
S10	How much did he/she paid for one consultation? (Session fees) 1=Free of charge 3=Between 500 and 1000 CFAF 2=Less than 500 CFAF 4=Over 1000 CFAF If S10=1 → S14	<input type="checkbox"/>
S11	How do you appraise the said amount? 1=High 2=Affordable 3=Insignificant	<input type="checkbox"/>
S12	In addition to the consultation fees, did the household member who received treatment give a tip to the medical staff for him/her to be better taken care of ? 1=Yes 2=No —If no → S14	<input type="checkbox"/>
S13	If yes, did the person do it willingly or was he/she obliged by the medical staff to do so? 1=Personal initiative 2=Obliged by the medical staff to do so	<input type="checkbox"/>
S14	How did the household member appraise the welcome attitude of the medical staff of the said health care unit? 1=Caring 2=Fair 3=Poor	<input type="checkbox"/>
S15	Is this health care unit provided with a pharmacy/pro-pharmacy? 1=Yes 2=No If no → S17	<input type="checkbox"/>
S16	Are drugs always available? 1=Yes 2=No 8=Do not know	<input type="checkbox"/>
S17	Is this nearest health care unit capable of providing appropriate solutions to most of the health problems faced by your household? 1=Yes 2=No	<input type="checkbox"/>

Section III. HEALTH			
S18	Broadly speaking, what is the level of satisfaction as concerns health care services provided by the nearest health care unit to your household? (Only circle a single answer) 1=Satisfied 2=Indifferent 3=Not satisfied If S18=1 or 2 — S20		_
S19	State the reasons of your non-satisfaction 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) : _____	_ _ _ _ _ _ _ _ _
S20	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 _____	_ _ _ _ _

Section IV. EDUCATION						
	Education cycle →	Nursery	Primary	Secondary		Vocational training
E01	Is your village/quarter provided with an education cycle « Name of the said cycle »? 1=Yes 2=No	_	_	_		_
E02	How many children from your household attend the nearest school? (name of the cycle) (write down the number in front of each cycle)	_ _	_ _	_ _		_ _
E03	How many Kilometers do children from your household cover, on average, to go to school? (name of the cycle)? 1=Less than 1 Km 2=Between 1 and 5 Kms 3=Over 5 Kms	_	_	_		_
E04	What is, on average, the time spent covered by children from your household to reach the nearest school on foot? (name of the cycle) (estimated in minutes)	_ _	_ _	_ _		_ _
E05	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 _	
E06	Is the vocational training center attended by children from your household provided with a					_

	complete workshop deemed suitable to their various trades? 1=Yes 2=No 3=Does not know				
E07	Is the school (name of the cycle) attended by children from your household provided with a class-room per class level? 1=Yes 2=No	_	_	_	_
E08	Are all the children seated on a bench in the school (name of the cycle) attended by children from your household? 1=Yes 2=No	_	_	_	_
E09	Are school textbooks distributed to pupils in the school (name of the cycle) attended by children from your household? 1=Yes 2=No	_	_		
E10	How many student does a classroom attended by children from your household contain (name of the cycle)? 1=Less than 30 3=Over 60 2=Between 30 and 60 4=Does not know	_ _	_ _	_ _	_ _
E11	How do you assess the frequency of the attendance of teachers in the class-room(s) (name of cycle) in which the children from your household are enrolled? 1=Regular 2=Averagely regular 3=Irregular	_	_	_	_
E12	How much do you pay per child from your household on average (registration, tuition fees, Parent-teacher associations' fees (PTA) (name of the cycle) throughout a school year? (write down the average amount)	----- (estimated in FCFA)	----- (estimated in FCFA)	----- (estimated in FCFA)	----- (estimated in n FCFA)
E13	How do you appraise such amount? 1=High 2=Affordable 3=Insignificant	_	_	_	_
E14	In addition to the fees, has your household paid additional fees to the personnel of the school (name of the cycle) prior to the enrolment of children from your household in school? 1=Yes 2=No → If no E16	_	_	_	_
E15	Were you obliged to pay such additional fees to the school (name of the cycle) 1=Yes 2=No	_	_	_	_
E16	When classroom in the school of (name of the cycle) attended by children from your household need repairs, Who does the repairs? 1=Yes 2=No A. Parents-Teachers' Associations (PTA) B. The Mayor (Council) C. A village organisation	_ _ _	_ _ _	_ _ _	_ _ _

	D. MINEDUB/MINESEC/MINEFOP	_	_	_	_
	E. Elites	_	_	_	_
	X. Other partners/stakeholders (to be specified)	_	_	_	_
	Any other?				
E17	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.	_	_	_	_
E18	State the reasons of your non-satisfaction in connection with the basic education services provided in (name of the cycle) in your village? (Several answers are possible) Any other reason? 1=Yes 2=No A. Far distance to access the education service B. Insufficiency of class-rooms C. Insufficiency of equipments D. Insufficiency of schools E. Insufficiency of teaching Staff F. No distribution of text books G. Poor results H. High tuition fees X. Any other reason to be specified	_ _ _ _ _ _ _ _ _ _	_ _ _ _ _ _ _ _ _ _	_ _ _ _ _ _ _ _ _ _	_ _ _ _ _ _ _ _ _ _
E19	Do you have any expectations in terms of provision of education services in the (name of the cycle)? (Several answers are possible) Any other expectation? 1=yes 2=No A. Have a school located nearer to the village/quarter B. Build more class-rooms C. Add additional Equipments D. Create more school/vocational training center E. Recruit more teaching staff F. Distribute text books G. Improve the results H. Reduce the costs X. Others (specified) _____	_ _ _ _ _ _ _ _ _ _	_ _ _ _ _ _ _ _ _ _	_ _ _ _ _ _ _ _ _ _	_ _ _ _ _ _ _ _ _ _

Section V. COUNCIL SERVICES

Council Services ↓	C01 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	C02 How were you received during your last time at the council? (Choose only one answer) 1=Well 2=Indifferent 3=Bad	C03 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 If C03=1 2, 3, 4 or 5 → C04	C03a Since when did you ask for this service? (in day)	C04 How do you assess this waiting time? 1=Reasonable 2=Long 3=Very long If C04=1 → C06	C05 If C04=2 or 3, If the time were deemed so long, what could be the problem according to you? 1=Unavailable staff /absent 2=Absence of working material 3=Corruption 4=Other factors (to be specified)	C06 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)	_	_	_	_	_	_
C07	Has any member of your household taken part in the village assemblies aimed at drawing up the Council Development Plan? 1=Yes 2=No						_
C08	Is any member of your household informed about the amount of the annual budget of your council? 1=Yes 2=No						_
C09	Is any member of your household informed about the expenditures and incomes of your council during the previous fiscal year? 1=Yes 2=No						_
C10	Does the council support the development actions of your village/quarter (such as community activities, follow-up of village development committees, follow-up of management committees, setting up of village development and monitoring committees, carrying out of micro projects in your village/quarter, etc.)? 1=Yes 2=No 8=Does not know						_

C1 1	Does the council involve your village/quarter when planning development actions? 1=Yes 2=No 8=Does not know		__
C1 2	Does the council involve your village/quarter when programming and budgeting development actions? 1=Yes 2=No 8=Does not know		__
C1 3	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		__
C1 4	State the reasons of your non-satisfaction with regard to services provided by the council (Several answers are possible). Any other reason ?	1=Yes 2=No 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 C. Defaults inherent to the Council staff (absenteeism, corruption, poor reception, etc...) D. Poor visibility of the council action on the populations E. Unavailability of the council executive (the Mayors and his/her deputies) X. Any other reasons (to be specified) _____	__ __ __ __ __ __
C1 5	What do you expect from the council team? (Several answers are possible). Any other expectation?	1=Yes 2=No A. Increased involvement of the populations in the decision-making process B. Increased communication by the council as far as its development actions are concerned C. More transparency as far as management is concerned D. Closeness of the Council to the populations X. Any other expectation (to be specified) : _____	__ __ __ __ __

ANNEX 2: PHOTO GALLERY



The Buea Council Building



Launching of Scorecard at the Buea council



Participant seeks clarification during launching



Training of Enumerators at the NADEV conference hall



Enumerators on field for data collection

